

Examination of the factors which differentiate dieters and non-dieters, both those satisfied, and those dissatisfied with their bodies.

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ABSTRACT

This project set out to examine the factors which differentiate women who do and do not diet, and those who are and are not satisfied with their bodies, amongst a non-clinical sample of 56 women from in and around the Christchurch community. This project had three main aims: (i) to identify those factors which differentiate dissatisfied dieters from dissatisfied non-dieters, in an attempt to understand the link between body dissatisfaction (an affective state), and dieting (a behaviour); (ii) to identify those factors which underlie dieting in women who are satisfied with their body, and (iii) to identify those factors which differentiate non-dieting women who are satisfied with their body, from women who are either dissatisfied with their body, and/or diet. A number of differing factors were examined, most of which had been previously identified as being associated with body dissatisfaction, and/or dieting behaviour: age, depression, self-esteem, teasing, societal ideals, exercise, and weight preoccupation. Effects were found only for age, and for the internalization of societal norms. Women who were satisfied with their body were significantly older than women dissatisfied with their body, and dieters, were significantly older than non-dieters. Those women who were satisfied with their body were also less likely to internalize societal norms regarding the thin ideal. In order to test the specific aims of this project, Planned Comparisons were conducted between the dissatisfied dieters and the dissatisfied non-dieters, between the satisfied dieters and the dissatisfied dieters, and between the satisfied non-dieters and the other three participant groups. Significant effects were found for the internalization of societal norms, whereupon the satisfied non-dieters were significantly less likely to internalize societal norms regarding the thin ideal. The results are discussed in terms of the impact in which societal norms has on a women's behaviour.

CHAPTER I

INTRODUCTION

“You can never be too rich or too thin.”

Duchess of Windsor (Gordon, 1990, p. 81).

It seems somewhat ironic that while thousands of men, women and children are dying from hunger throughout the third world countries, some women within the developed industrialised western world are literally starving themselves to death in an effort to be thin. Why has our society become so obsessed with dieting, attaining thinness, and eliminating fat? Why is it a thin body that is so intensely sought after, rather than some other body shape? Human cultures have placed value on a variety of body shapes, and one needs only consult the history books to see that thinness was not always held in such high regard as it is today.

According to Abraham and Llewellyn-Jones (1992), for most of recorded history, a woman was seen as desirable when she was plump, in fact, it was even fashionable to be fat. These authors contend that this belief was due in part to the uncertainty of food supplies, as well as the irregular occurrence of famines. As Epling and Pierce (1991), have noted, ancient statues of Venus and Aphrodite, portray ideal women who would be considered somewhat plump by today's standards, as do many of the great artworks from the mid-nineteenth century. Seid (1994), contests that it was only a century ago in which body ideals were the reverse of what they are today, with the female ideal being tall, full-busted, full-figured, and dimpled flesh - today referred to as cellulite - was seen as being desirable.

According to Seid (1994), the turnabout of these ideals began at the turn of the present century, when slenderness came into vogue. However, those woman who boasted these new slim ideals would by today's standards be considered overweight. In fact, the trend for the 1940s and 1950s was still somewhat curvaceous. It was the years that followed in which the ideal of female thinness took hold, and was subsequently adopted by a mass of young aspiring women. Slenderness still prevailed throughout the 1970s and 1980s, and on into the 1990s, whereupon society was presented with another, even thinner fashion icon, deemed by many as being that of a “waif”. Looking almost pre-pubertal, this was to become the fashion role model for many young women.

Dieting Behaviour:

While the ideal female figure is still portrayed as being thin, there is little wonder as to

why so many women feel the need to embark upon a diet. Polivy and Herman (1987), contended that society has become so preoccupied with dieting and weight loss, that it can now be considered "normal" for individuals to express concern about their weight, and engage in some sort of weight loss programme. Mintz and Betz (1988), conducted a study which focused upon a sample of University women, whereupon it was found that 82 per cent reported one or more dieting behaviours at least daily, with only 33 per cent of the participants reporting what could be considered normal eating habits. Dieting behaviours within this study were defined as any activity which involved eating low calorie foods, having a special diet, fasting, skipping meals, counting calories, not eating sweets or meat. From these findings Mintz and Betz (1988), concluded that watching one's weight appears to be the norm for college women. Within the review carried out by French and Jeffery (1994), it was reported that high school girls were three to five times more likely to diet than were high school boys, while 50 to 60 per cent of the female college students reported that they were currently dieting to lose weight. Such weight loss practises are unfortunately not only restricted to the adult population. It would appear that girls as young as eight and nine are even turning to diets in an effort to lose weight (Garner & Wooley 1991; Hetherington, 1994). A study conducted by Fear (1994), examined the eating behaviours and attitudes of adolescent girls in Christchurch, in which similar findings emerged. Fifty-four per cent of the girls reported that they had already attempted to lose weight, and most had begun dieting before the age of 13. Thirty-eight per cent of the Christchurch girls sampled, reported that they had binged at sometime, and 12 per cent reported vomiting to lose weight. Seventy-one per cent of the girls sampled perceived themselves to be overweight, and wanted to change their body shape and size. However, only 13 per cent of the participants had a Body Mass Index (BMI), that was above the healthy range for adolescents.

Research reports also indicate that women are almost twice as likely as their male counterparts to be dieting to lose weight, and twice as likely to have a history of weight loss efforts (French & Jeffery, 1994). In a study conducted by French, Jeffery, and Wing (1994), it was found that the women not only reported a more extensive history of dieting in comparison to the men, they also had a greater knowledge with regards to weight-loss measures. Although the men in the sample were objectively more overweight than were the women, it was the women who wanted to lose more weight. Cash, Winstead, and Janda (1986), found that 38 per cent of the female respondents, and approximately 20 per cent of the male respondents indicated that they were on a weight loss diet when they filled out the survey.

Another pertinent finding to emerge from the literature so far, is the fact that women are also more dissatisfied with their bodies than are men (Davis & Cowles, 1991, Cash, et al. 1986, Mintz & Betz, 1986, Berscheid, Walster & Bohrnstedt, 1973). Berscheid, et al. (1973), found that the women respondents, when compared with the men, had a slightly

more negative image of their body. In a similar survey Cash, et al. (1986), concluded that the 1985 respondents were considerably more dissatisfied with their bodies than were the 1972 participants. The women however, were still less satisfied with their appearance, than were the male respondents. Mintz and Betz (1986), conducted a study which included 264 University students, and found that overall the women were less satisfied with their bodies than were the men. In this particular sample, the majority of the normal weight women perceived themselves to be at least slightly overweight, and the average women wanted to lose ten pounds. The men in this sample however, perceived themselves as needing to gain, rather than lose weight. Several studies have made use of the self-ideal discrepancy as a means of measuring body dissatisfaction, again resulting in distinct gender differences. Fallon and Rozin's (1985), study involved 478 male and female University students. The participants in this study had to indicate from a series of nine drawings ranging from thin to obese, their ideal figure, the figure they felt would be the most attractive to the opposite sex, and the opposite sex figure to which they would be most attracted too. Within this study, the men's current, ideal, and most attractive figures were almost identical. The women however indicated that their current figure was heavier than the most attractive figure, which was heavier than the ideal figure.

It would appear that age is a variable which is associated with body dissatisfaction, although the research has produced some rather contrary findings. Within the survey carried out by Berscheid, et al. (1973), no differences regarding body image and age were found. As such, these authors tentatively concluded that body image may in fact be a stable phenomenon over time. Within the follow-up survey carried out by Cash, et al. (1986), it was found that men and women in their teens and 20s were the most concerned with their appearance, with younger women being the most dissatisfied of all with their bodies. A research effort involving women aged between 60 and 78 years, and women aged between 18 and 31 years was conducted by Hetherington and Burnett (1994). The results from this study indicated that both the young and elderly women who were of normal weight, desired a body weight approximately ten pounds below that of their current weight. However, although the desire to lose weight was equivalent over both age groups, the younger women within this sample had a greater concern for body shape, and displayed more disinhibited eating patterns. Disinhibited eating patterns were defined by Hetherington and Burnett (1994), as "the tendency to abandon restraint" (p. 392). From these findings the authors concluded that cultural pressure towards thinness is experienced across all age groups, and as such, women of all different age groups express some dissatisfaction with their body. This finding suggests that body dissatisfaction may in fact remain constant across the age-groups, while it is the dieting behaviour that changes with age, as illustrated by the fact that the younger women displayed more disinhibited eating behaviours. Tiggemann (1992), conducted a study involving undergraduate students, in an effort to examine the effect of differences in age, and sex on body dissatisfaction. Results from this particular study indicated that both the young and mature female participants rated

their current figures as being larger than their ideal. However, Tiggemann (1992), noted that this discrepancy became somewhat larger with age, therefore suggesting that body dissatisfaction may become more acute for women as they get older. Research efforts regarding age have also been conducted amongst an adolescent sample. A study carried out by Phelps, Johnston, Jimenez, Wilczenski, Andrea, and Healy (1993), involved adolescents, with the aim of examining the effects of sex and age on figure preference, body dissatisfaction, and body distortion. The results from this study suggest that age is an influential factor on body dissatisfaction for females, but not so much of an issue for males. Within this sample, body dissatisfaction increased dramatically as the females moved from early, to middle, to late adolescence. Thelen, Powell, Lawrence, and Kuhnert (1992), carried out a study which focused upon second, fourth and sixth grade males and females, in an effort to observe body images, dieting behaviours, and eating attitudes amongst children within these particular age brackets. The results from this research effort indicated that the fourth and sixth grade girls were more concerned about being or becoming overweight, and were more dissatisfied with their body image than were the second grade girls. Although discrepancies do exist within the literature concerning age and body dissatisfaction, it would appear that age is a factor which is linked to both body dissatisfaction and dieting behaviour.

It thus becomes apparent from the research that body dissatisfaction and dieting behaviour are in general, more issues which are of concern to women, rather than men. Women more often than not perceive themselves to be overweight, even when this is not the case, and often desire a body which is thinner than that of their current body size. Women are also more likely to be dieting in an effort to lose weight, while men on the other hand often wish to gain weight, and tend to view their current body size as being close to their ideal. Due to these distinct gender differences in relation to body dissatisfaction and dieting behaviour, it was thought appropriate to only consider female participants within this project. It becomes clear that dieting behaviour, and body dissatisfaction are more prevalent amongst the female population, and as such, it seemed only just to focus solely upon this proportion of the population within this project. It also becomes evident from the literature that age is another variable which is also linked to both body dissatisfaction and dieting behaviour. However a number of conflicting findings have emerged where the issues of age, body dissatisfaction and dieting behaviour have been concerned, and as such, it was considered important to include within this project women from a variety of age-groups, in an effort to provide more concise findings where these matters are involved.

Risks Associated with Dieting and Body Dissatisfaction:

Although dieting is now normative behaviour within society, and although it is a financially rewarding industry, the research suggests that there are many hazards associated with dieting. There are a variety of medical disorders which have in fact been attributed

directly to weight loss. These include hypotension (low blood pressure), fainting, elevated serum cholesterol, gallstones, diarrhoea, general weakness and fatigue, both bradycardia (slowed heart rate), and increased heart rate, elevated uric acid levels which can lead to gout or kidney stones, anaemia, arthritis, headache, nausea, and even death from various complications (Polivy & Herman, 1983). Dieting may pose quite a threat to an individual's health, as they often involve restricting one's calorie intake in an effort to reduce one's weight. In doing so, a young women may inadvertently increase her risk for a variety of physiological, and psychological problems. One such problem associated with calorie restrictors, is an inadequate intake of essential nutrients. Iron and calcium deficiencies are concerns for many young women, but it would appear that calorie restrictors are at a substantially increased risk. If dieters have insufficient calcium intake as the research tends to suggest, then according to Kirkley and Burge (1989), these individuals could experience reduced bone mass. The long-term effects of this could in fact place woman at an increased risk for developing osteoporosis in later life. Sustained calorie restriction within adolescents and young women may not only be sufficient to retard growth, it has also been associated with decreased ovulation and infertility (Kirkley & Burge, 1989).

Dieting also appears to have quite an adverse effect on one's metabolic processes (French & Jeffery, 1994; Connors & Melcher, 1993; Garner & Wooley, 1991; Kirkley & Burge, 1989; Polivy & Herman, 1983). It is quite a common observation that many individuals who lose weight, eventually regain that weight, if not more, back again. Polivy and Herman (1983), contend that such an occurrence is often the result of metabolic adjustments. In a review by Kirkley and Burge (1989), it was reported that sustained periods of calorie restriction resulted in a 25 per cent weight loss in normal weight men. Upon refeeding, it was found that weight gain occurred more rapidly than was predicted, and an analysis of the subjects' body composition revealed an increase in percent body fat, and a decrease in percent lean body tissue. As noted by Connors and Melcher (1993), dieting often means that the individual is fighting against their own biological make-up. This of course could be a contributing factor into why so many dieters are unsuccessful in their efforts. Within their report, Connors and Melcher (1993), found that approximately 95 per cent of dieters fail to maintain a weight loss of at least 20 pounds for two years or more. In the review conducted by Garner and Wooley (1991), it was found that after a five year follow up, individuals who had been involved in a behavioral weight loss program had gained 11.9 lb, which made them 1.49 lb heavier than when they had begun the program.

One of the most alarming findings to emerge from the research concerning dieting, is that dieting places women at risk for the development of an eating disorder such as anorexia nervosa, or bulimia nervosa (French & Jeffery, 1994; Connors & Melcher, 1993; Garner & Wooley, 1991; Kirkley & Burge, 1989; Abraham & Beumont, 1982; Pyle, Mitchell, & Eckert, 1981). French and Jeffery (1994), examined a study which followed 1000

adolescent girls over a one year period. Twenty-one per cent of the dieters within this sample had developed eating disorders at the one year follow up. Half of all the cases at follow-up were dieters at baseline, with only 12 per cent of the new cases at follow-up being non-dieters at baseline. In a study conducted by Abraham and Beumont (1982), involving 32 bulimic patients, it was found that all of the patients had dieted, and the onset of their bulimia followed a period of increased concern about their body weight. From their results, Abraham and Beumont (1982), concluded that bulimia was associated with forms of behaviour which were directed towards weight loss. After taking these findings into consideration, it becomes clear as to why the vast majority of the research to date, has focused solely upon trying to understand the psychological constructs underlying the various eating disorders (Clark, Feldman, & Channon, 1989). However, the point must be made that not everyone who embarks upon a weight loss diet will subsequently develop an eating disorder, and as such, it is also important to understand the consequences associated with non-clinical dieting. This important facet has often been overlooked in favour of investigating eating disorders, and as such, deserves closer examination.

Another finding which has evolved from various research efforts, is the fact that body dissatisfaction also seems to be associated with disturbed eating behaviours (Clark, et al. 1989; Zakin, 1989; Bunnell, Cooper, Hertz, & Shenker, 1992; Gleaves, Williamson, & Barker, 1993; Leon, Fulkerson, Perry, & Cudeck, 1993; Stice & Shaw, 1994). The research effort conducted by Stice and Shaw (1994), actually set out to examine what adverse effects result from the media portrayed thin-ideal. An interesting finding emerged from this study however, in that there was a particularly strong association between body dissatisfaction and bulimic symptomatology. Gleaves, et al. (1993), concluded from their particular research effort that body dissatisfaction is a significant, and possibly independent component of bulimia nervosa. In another research effort involving 937 female students, Leon, et al. (1993), concluded that one of the strongest predictors for risk of developing an eating disorder was in fact body dissatisfaction. In the research effort conducted by Zakin (1989), it was also concluded that eating disturbance was associated with greater body dissatisfaction. From the study conducted by Bunnell, et al. (1992), it was established from their results that patients with some form of eating pathology reported higher levels of body dissatisfaction. Within this particular sample, those individuals with bulimia nervosa reported the highest levels of body dissatisfaction.

Although there is only a limited number of studies available, some researchers have also examined the relationship between body dissatisfaction and dieting behaviour. One such study was that conducted by Heatherton (1993), whereupon body shape preferences, body dissatisfaction, and self-focus was examined amongst a group of dieters, and nondieters. The results from this study indicated that the chronic dieters were more dissatisfied with their body than were the non-dieters. Similar findings were also found within a study conducted by Davis, Shapiro, Elliott, and Dionne (1993), which set out to examine a

number of variables associated with restrained eating. Within this study, restrained eaters were distinguished through use of the Restraint Scale, which is a ten item scale designed to identify dieters. From this particular research effort it was found that among young women, restrained eating was associated with greater body dissatisfaction.

Thus it would appear from the research, that there are a number of common issues associated with both body dissatisfaction, and dieting behaviour. Although there are a number of similarities which exist between these two factors, the point must be emphasized that there are differences between the two entities. Body dissatisfaction is an affective state, whereas dieting is a behaviour. To be put more succinctly, an affective state is a term used to describe feelings or emotions, while a behaviour, in general terms, is defined as being an activity, reaction or movement (Reber, 1995). The two have quite distinctive meanings, and as such, may have quite distinctive underlying causes. For this reason, understanding body dissatisfaction is not sufficient for understanding dieting behaviour, just as understanding dieting behaviour is not sufficient for understanding body dissatisfaction. As Garner and Wooley (1991), pointed out, it is often difficult to distinguish between those psychological symptoms which result from dieting, and those which in fact motivate dieting behaviour. Body dissatisfaction could be one motivation for dieting, due to the findings that women who diet are more likely to be dissatisfied with their body. However, it would be unrealistic to assume that body dissatisfaction is the only cause of dieting. It would seem reasonable to propose that not every woman who feels dissatisfied with her body feels the need, or is motivated to diet. It may be the case that even those women who feel satisfied with their body may still diet, in response to other factors such as societal norms.

In an effort to clarify these speculations, and gain an even broader understanding of these issues, it was thought important to include within this project dieters and non-dieters, both those satisfied, and those dissatisfied with their bodies. By including and combining these factors within a single project, it thus should be possible to identify those factors which are associated with each of these items, as well as determining those factors which differentiate these issues. In this sense, identifying any differences which may exist between dissatisfied dieters and non-dieters may help to address the question of what causes body dissatisfaction - an affective state - to be linked to dieting, a behaviour. Combining both factors within one project also enables consideration of what other factors, apart from body dissatisfaction are linked to dieting, as well as identifying those factor(s) which differentiate those women who are neither dissatisfied with their body, nor dieting. Combining these factors within one project in this manner, should provide an even greater insight into body dissatisfaction and dieting behaviour.

Although limited research exists which examines non-clinical dieting and non-dieting behaviour, an abundance of research has been conducted which has focused upon

identifying issues associated with body dissatisfaction. It is this research that is reviewed next. However, the point must be made that a lot of the research is limited in its approach, in that it really only considers evaluations of self, rather than taking into consideration the actions associated with such evaluations, such as dieting.

Factors Associated With Body Dissatisfaction.

Depression:

One of the more established findings to emerge from the literature, is that body dissatisfaction is associated with depression (Lautenbacher, Thomas, Roscher, Strian, Pirke, & Krieg, 1992; McCaulay, Mintz, & Glenn, 1988; Rierdan, Koff, & Stubbs, 1988; Mable, Balance, & Galgan, 1986; Mintz & Betz, 1986; Noles, Cash, & Winstead, 1985). In the study by Lautenbacher, et al. (1992), a sample of restrained and unrestrained eaters were investigated. Within this particular study, it was found that the restrained eaters were clearly more dissatisfied with their bodies than were the unrestrained participants. Using the short form of the Beck Depression Inventory, Lautenbacher, et al. (1992), also found that within both groups of participants, depressive mood was associated with body dissatisfaction. This particular finding suggests that depression is more likely to be associated with body dissatisfaction, rather than dieting behaviour. Such a suggestion is however quite contradictory to the findings of Koenig and Wasserman (1995), whose study found failed dieting attempts to be associated with depression. However, within the research effort carried out by Bartlett, Wadden, and Vogt (1996), a history of weight-cycling was not found to be associated with higher depression scores. Within the review carried out by French and Jeffery (1994), low-calorie diets and long-term fasting were singled out for being associated with increased anxiety, irritability and depression. Such discrepancies within the research suggest that depression may be linked to both body dissatisfaction, and dieting behaviour in some manner. Using a sample of University students, Mable, et al. (1986), found that body dissatisfaction was significantly associated with depression. Similar findings also emerged from the study conducted by Noles, et al. (1985), who also focused their efforts upon a sample of University students. Within this particular study, it was found that those individuals who were depressed, reported less satisfaction with their body parts, as well as with their overall physical appearance. When reviewing these results, it is important to be aware that there is an issue of causality to take into consideration where depression, body dissatisfaction and dieting behaviour are concerned. With these areas of interest, it is often difficult to determine as to whether the depressive state lead these individuals to diet, or feel dissatisfied with their body, or whether their dieting behaviour or body dissatisfaction lead them to feel depressed.

Self-Esteem:

Another substantial finding to emerge from the literature is the fact that low self-esteem is also associated with body dissatisfaction (Akan & Grilo, 1995; McCaulay, Mintz, & Glenn, 1988, Davies & Furnham, 1986; Mable, et al. 1986; Mintz & Betz, 1986). Akan and Grilo (1995), set out to explore the nature of eating and body image vulnerability within a sample of African-American, Asian-American, and Caucasian women. A significant finding emerged from within each of the three racial groups. Using Rosenberg's Self-Esteem Scale (1965), it was found that regardless of ethnic identity, low self-esteem was associated with higher levels of problematic eating, dieting behaviours and attitudes, and body dissatisfaction. Thus it would appear from the findings of Akan and Grilo (1995), that low self-esteem is also associated with both body dissatisfaction and dieting behaviour. Furnham and Greaves (1994), conducted a study involving 47 male and 55 female participants, in an effort to compare sex differences regarding body image dissatisfaction. From this research effort it was found that the women within this sample were more likely to have a lower self-esteem, which in turn was associated with lower body image satisfaction. McCaulay, et al. (1988), examined the relationship between body image and self-esteem within their study of 176 male and female University students. Within this particular sample, higher levels of body satisfaction were associated with higher levels of self-esteem. In a similar research effort, Mintz and Betz (1986), examined the relationship between body image and self esteem within a University sample of 264 students. Their findings collaborated with those of McCaulay, et al. (1988), greater body dissatisfaction was significantly related to lower levels of self-esteem. Another study involving University students was conducted by Mable, et al. (1986), in an attempt to examine body-image dissatisfaction, and distortion in normal weight individuals. The results from this study indicated that body dissatisfaction correlated significantly with self-esteem. These latter studies therefore all seem to imply that low self-esteem is associated with body dissatisfaction.

Teasing:

One interesting finding to emerge from a 1972 survey concerned the issue of teasing. Berscheid, et al. (1973), found that those individuals who had reported being teased as a child, felt less satisfied with their bodies as adults. The respondents indicated that being overweight was the main reason for ridicule. Within the follow-up survey printed in 1986, similar findings developed. Individuals who reported being teased by their peers because of their appearance, were much more likely to have a negative appearance evaluation, in comparison to those who did not experience such taunts. Cash, et al. (1986), reported that among those respondents who indicated that they had been teased often, or very often, 48 per cent of the women disliked their adult appearance. It is important to note here however,

that the link between body dissatisfaction and teasing is only apparent for less than half of those women who experienced severe childhood taunts. This suggests that the link between body dissatisfaction and teasing may not be as strong as some researchers propose. Thompson and Heinberg's (1993), research effort explored the effect that negative verbal commentary had on an individual's body image. Utilising the Physical Appearance Related Teasing Scale (PARTS), it was found that within a sample of 146 female college students, weight/size teasing was a significant predictor of variance associated with body image, and eating disturbance. From these results, Thompson and Heinberg (1993), concluded that specific teasing about weight/size, but not about general appearance, is a significant, and consistent predictor of body dissatisfaction. Such findings are not only restricted to an adult population however. Levine, Smolak, and Hayden (1994), carried out a study involving 385 girls between the ages of ten and 14. Findings from this study demonstrated that weight/shape related teasing contributed moderately, but nonetheless significantly, to variation in body dissatisfaction, weight management behaviour, and eating disturbance. One implication of this particular finding is that weight/shape related teasing is linked to both body dissatisfaction and dieting behaviours. Grilo, Wilfley, Brownell, and Rodin (1994), set out to examine the relationship between physical appearance related teasing, and body image within a sample of clinically obese women. This study consisted of 40 women who were at least 20 per cent above their ideal weight, in accordance to their height. Using the Physical Appearance Related Teasing Scale (PARTS), it was found that those participants who reported a greater frequency of being teased about their weight and shape as a child, had a more negative evaluation of their appearance, and a greater degree of body dissatisfaction as an adult. According to Grilo, et al. (1994), the frequency of being teased about weight/size, was significantly associated with body dissatisfaction. The literature would thus suggest that weight/size teasing is significantly associated with body dissatisfaction, as well as disturbed eating behaviours. With regards to teasing, the point must be made that there is also the issue of causality to take into consideration when reviewing the various findings. Take for example the participants within the survey carried out by Berscheid, et al. (1973), who indicated that being overweight was the main reason for ridicule. It is difficult to determine as to whether these participants felt dissatisfied with their body because they were overweight, or did they feel dissatisfied with their body as a result of the teasing? Another issue to consider with regards to teasing concerns the notion of recall. That is, do those participants who feel dissatisfied with their body, and who diet, recall being teased more as a child about their weight and size, or were they actually teased more? The fact remains that these individuals may not have been teased any more than their peers were, they may just feel that they were teased more about their weight and size.

Exercise:

Within the 1980s, society was witness to what many have entitled the “fitness boom”(Gordon, 1990, p. 96). This fitness craze was generally well supported within Western Societies, whereas prior to this development, the effects of strenuous exercise were often disputed. The Greek physician Hippocrates argued that “physical exercise and competition shortened the lifespan of athletes”(Epling and Pierce, 1991, p. 173). Such ideas would be questioned today, with the number of people involved in exercise activity ever increasing. According to Yates (1991), twice as many people exercise regularly now, compared with 25 years ago. Within the United States during the 1970s, one million people spent a little over five million dollars on health club membership fees and equipment, while in 1987 some seven million people bought 738 million dollars worth of exercise equipment. Additionally in the same year, five billion dollars was spent by young adults on health club fees. Thus like the diet industry, the health and fitness industry has developed into a lucrative market. The media have also latched onto these developments, and as such, the contemporary ideal women is now portrayed as being thin, fit, as well as muscular (White, 1992). According to Bordo (1990), ‘working out’ has become a glamorised ‘yuppie’ activity, while a firm developed body signifies control, and the ability to care about oneself. Unfortunately however, women use exercise as a means of losing weight. Epling and Pierce (1991), have suggested that women view fitness as achieving a thin curveless body shape, and thus are likely to combine exercise with dieting. The research effort carried out by Davis, et al. (1993), produced similar findings. Within this particular study it was found that restrained eating was associated with higher levels of physical activity. French, Jeffery, and Wing (1994), conducted a study which examined food preferences, dietary intake and physical activity amongst a sample of women currently dieting to lose weight, women dieting to maintain their weight, and women who were non-dieters. Results from this particular study indicated that those women currently dieting to lose weight reported expending almost twice as many calories from physical activity as those participants dieting to maintain weight or not dieting. However, the research regarding exercise and dieting is once again, somewhat conflicting. Biener and Heaton (1995), found that the dieters within their sample, were not more likely to engage in regular exercise in comparison to the non-dieters.

Cash, et al. (1986), found that those people who cared about fitness and health, had more positive feelings about their appearance compared to those individuals who were concerned with their appearance. From their results they concluded that a concern for health and fitness was more closely linked to a satisfying body image. Davis and Fox (1993), conducted a study which involved assessing 351 adult women on a variety of measures relating to exercise activity. Those women who indicated that they exercised at least six times a week, for at least one hour per session, were classified as being an ‘Excessive

Exerciser'. Davis and Fox (1993), found that women who had been identified as 'Excessive Exercisers', reported greater satisfaction with their body in comparison to those women who were identified as being non-exercisers. However, exercise does not always contribute to feelings of body satisfaction as demonstrated by the study conducted by Davis and Cowles (1991), whereupon a number of variables relating to body image were examined within a sample of women and men. This study found that the women reported greater body dissatisfaction, and were more likely to exercise with the aim of losing weight. The degree of exercise participation did not relate to any of the body image variables for the men within this study.

Thus it would seem that there are indeed strong associations between exercise, dieting, and body dissatisfaction, but nonetheless there are several discrepancies within the literature regarding the various findings. Some studies have cited dieters as exercising more frequently in comparison to non-dieters, while other studies have found that dieters are not more likely to engage in exercise when compared with non-dieters. This is also the case with body dissatisfaction, with some researchers citing exercise as contributing to increased body satisfaction, while others suggest excessive exercise is associated with body dissatisfaction. Such discrepancies within the findings, while difficult to explain, may reflect the fact that there a number of motives for deciding to exercise. It would appear that dieting and being dissatisfied with one's body are not the only motivations for wanting to exercise, and as such non-dieters may exercise as may women who are satisfied with their body, but each group may have different reasons for wanting to do so.

Media:

The mass media constantly barrages the public with messages regarding attractiveness, and what is to be considered the ideal body. One need only to flip through a magazine, turn on the television set, or walk down the street, to be hit with images of thin, taunt female bodies. Garner and Wooley (1991), have postulated that these images imply that not only "beauty, but also success, personal happiness and self-worth can be achieved through slenderness" (p. 731). According to Kilbourne (1994), such media images constantly reinforce to women the latest ideal - that is, what is acceptable and what is out of date. Although often subtle and indirect, such messages are unfortunately hard to ignore. As noted by Myers (1993), such media portrayals evoke imitation. Unfortunately, the ideal body type portrayed by the media today is difficult to imitate, and as such, unattainable for most women. Only the thinnest five per cent of women in a normal weight distribution approximate this ideal (Kilbourne, 1994). Thus it would seem that the women portrayed within television and the general media, only reflects a very small proportion of the general population. Countless studies have been documented which clearly show that the ideal female body as portrayed by the mass media has become thinner and thinner over the years. Probably the landmark study in this particular area of interest was that conducted

by Garner, Garfinkel, Schwartz, and Thompson (1980). The aim of this research effort was to document the shift towards the thin ideal, by examining height and weight measurements of Miss America pageant contestants, and Playboy Centerfolds over a 20 year period. Results from this study clearly indicated that the average weight of the Playboy Centerfolds for age and height had indeed decreased significantly over the past 20 years, as was the case with the Miss America contestants. Interestingly enough, Garner, et al. (1980), also found that while Playboy Centerfolds and Miss America Contestants had been getting thinner and thinner, the average woman of a similar age from the general population had in fact been getting heavier. Thus it would appear that large discrepancies exist between the ideals as portrayed by the mass media, and actual body shapes and sizes of women within the general population. Such discrepancies are more than likely to lead women to not only feel dissatisfied with their body, but they may also encourage them to embark on a diet in an effort to lose weight, and thus meet the ideal standards as depicted by the media.

It becomes apparent that the media can be most influential with respect to the messages it projects to women regarding their body, and the ideal shape in which it should conform. Researchers have thus focused their attention towards examining the role the media plays within the diverse field of body dissatisfaction. Richins (1991), conducted a study whereby female college students were exposed to magazine advertisements with either highly attractive models, or advertisements that contained no models. Those participants who were exposed to advertisements with attractive models not only were less satisfied with their own appearance, but they also rated average looking women as being less attractive. From these results Richins (1991), concluded that satisfaction was lower amongst those participants who had been exposed to idealized advertising images. Such a finding suggests that body satisfaction maybe quite an unstable and precarious state, if in fact exposure to the thin ideal via magazine advertisements did contribute to the participants feeling less satisfied with their own bodies. A research effort involving University women was conducted by Stice, Schupak-Neuberg, Shaw, and Stein (1994), in which the participants were asked to indicate the number of health and fitness, beauty and fashion, entertainment, arts, and gossip magazines they had looked at over the past month, as well as the number of hours of comedy, drama, and game shows they had watched. From this research effort it was found that greater ideal-body stereotype internalization, predicted increased body dissatisfaction, which in turn was related to heightened eating disorder symptomatology. According to Stice, et al. (1994), internalization of the thin ideal is thought to produce greater feelings of body dissatisfaction, due to the fact that "it sets unrealistic body dimension goals" (p. 836). Stice and Shaw (1994), conducted a study involving 157 female Undergraduates, in an attempt to examine what adverse effects result after exposure to the thin ideal. Following on from this, Stice and Shaw (1994), also set out to determine the mechanisms by which exposure to such ideal body images may lead to eating disturbances. In this study, participants were presented with pictures of either ultra-

thin female models, average-weight female models, or control pictures containing no people. These pictures were taken out of actual women's magazines. The findings from this study indicated that exposure to the thin models not only produced feelings of guilt, depression, shame, stress, and decreased confidence, but it also resulted in participants feeling dissatisfied with their body. The results also indicated a strong positive relation between internalization of the thin-ideal, and eating pathology. One possible explanation for this finding as offered by Stice and Shaw (1994), was that exposure to the thin ideal produces body dissatisfaction, which in turn may lead to restrained eating or dieting behaviour, which has been linked to the onset of bulimia nervosa. From their results, Stice and Shaw (1994), concluded that their findings provided satisfactory evidence that the ideal-body images portrayed within many women's magazines have an unfavourable influence on the affective state, and body satisfaction of female readers.

Findings from the research to date suggest that exposure to the thin ideal either through slides, pictures or advertisements within magazines, produce feelings of guilt, depression, as well as increased body dissatisfaction. Implications of this are that the images portrayed by the mass media through television, magazines, and advertising, may have an adverse effect on a woman's level of satisfaction with her body. A further implication is that exposure to the thin-ideal may increase feelings of body dissatisfaction, which may increase the likelihood of dieting behaviour, and subsequent disturbed eating pathology. This suggests that both body dissatisfaction, and dieting behaviour may be linked to societal ideals as portrayed by the mass media.

Weight Preoccupation:

According to Abraham and Llewellyn-Jones (1992), many patients with eating disorders are unusually preoccupied with thoughts about food, shape, and weight. This preoccupation with weight is such that most patients are able to give a detailed analysis of their weight changes, even changes as small as 0.5 kg, over periods as short as one week. On this premise, several studies have made use of the Modified Stroop test, in an effort to determine, and understand the nature of the cognitive distortions that are often present in many individuals with eating disorders (Channon, Hemsley, & de Silva, 1988; Ben-Tovim, Walker, Fok, & Yap, 1989; Cooper, Anastasiades, & Fairburn, 1992). From these research efforts, it was found that both anorexic and bulimic groups were slower in colour naming those words that were related to food, weight, and shape. These findings thus suggest that preoccupation with food, shape, and weight seems to result in some interference when colour naming words related to such items. In a study conducted by Perpina, Hemsley, Treasure, and de Silva, (1993), it was found that the phenomenon observed by the Modified Stroop test was not only restricted to those individuals presenting with a clinical eating disorder. From this particular research effort, it was found that restrained eaters with a drive for thinness, were also slower in processing words related to

both food, and body size. For this reason it was decided to include the Modified Stroop within this project, as a means of assessing weight preoccupation.

Although very little research has been conducted concerning the issue of weight preoccupation and body dissatisfaction, some fairly consistent findings have emerged from the literature. Davis and Fox (1993), carried out a study which focused upon differing psychological, behavioural, and body composition characteristics of women classified as either excessive exercisers, moderate exercisers, or non-exercisers. This particular study consisted of a sample of women recruited from a University community, as well as from various fitness, and health clubs. The results from this study indicated that those women who were highly weight-preoccupied, scored significantly higher on the body dissatisfaction scale. Thus, within this non-clinical sample, weight preoccupation was associated with greater feelings of body dissatisfaction. Richards, Casper, and Larson (1990), examined the emergence of weight and eating concerns amongst a sample of pre-adolescent, and adolescent children. Findings from this research effort indicated that in comparison to their healthier age mates, weight preoccupied eighth and ninth grade girls were more depressed, had lower self-esteem, and had a lower body image perception of themselves. Within this study, those young adolescents who “reported greater satisfaction with their weight, and saw themselves as under- or average weight, reported healthier eating and weight attitudes” (p. 204). These findings suggest that weight preoccupation is another variable which is associated with body dissatisfaction.

Summary:

From the studies which have been examined above, it becomes apparent that depression, self-esteem, teasing, societal ideals, age, exercise, and weight preoccupation, are all factors which have been identified as being associated with body dissatisfaction, and/or dieting behaviour. As such, it was thought only necessary to include these factors within this project which examines women who are dieters, and non-dieters, both those satisfied and dissatisfied with their bodies. We already know that these measures have been identified as being associated with body dissatisfaction, and/or dieting behaviour, but it was thought just as important to determine the role that these variables have when body dissatisfaction and dieting are combined within a single study. In this sense, one of these factors(s), may differentiate the dissatisfied dieters from the non-dieters, which would address the issue as to what causes body dissatisfaction to be linked to dieting. One of these factors(s) may also differentiate the satisfied and the dissatisfied dieters, which would increase understanding as to what other factors, apart from body dissatisfaction, lead to dieting. Finally, one of these factor(s) may even differentiate those women who are neither dissatisfied with their body, nor dieting. Within a society in which body dissatisfaction and dieting reigns supreme, it is certainly important to identify any factor(s), which may differentiate those women who are satisfied non-dieters. Being aware of any factor(s) which differentiate

satisfied non-dieters, may on a grand scale, help to improve general levels of body satisfaction, and non-dieting behaviour within the female population.

The Present Research:

It becomes more than apparent that there has been an abundance of research conducted concerning those issues which are associated with body dissatisfaction, and to a certain extent, there is a reasonable amount of literature available which has focused upon dieting behaviour. After examining the literature, it soon becomes obvious that a number of discrepancies exist among many of the findings concerning body dissatisfaction and dieting behaviour. In many cases, body dissatisfaction and dieting behaviour have both been linked to the same variables in some manner, although the two factors are quite distinct. As mentioned earlier body dissatisfaction is an affective state, and dieting a behaviour. Another short-coming of many of the studies which have examined dieting behaviour, is the fact that many of the studies only focus upon clinical samples of dieters and non-dieters, and thus forget about non-clinical dieting and non-dieting populations. In an effort to overcome such problems, and to understand the discrepancies which exist within the literature, it was thought only appropriate to examine more closely non-clinical dieters, and non-dieters, both those satisfied and those dissatisfied with their bodies. By combining these factors in this manner, identifying variables associated with both, as well as identifying those variables which differentiate these two factors should be possible. Past research has tended to examine body dissatisfaction and dieting behaviour separately, while combining these factors should provide a clearer, more succinct picture of these two issues. Thus it was decided to include within this project women who were satisfied with their body, women who were dissatisfied with their body, non-clinical dieters, non-clinical non-dieters, and combine and thus compare the four groups on a number of variables. After close analysis of the literature, three main aims emerged which were thought to warrant closer inspection:

1. Contrasting dieters versus non-dieters on a number of variables, in order to differentiate the underlying factors in their dieting behaviour. This may help to address the question as to what causes body dissatisfaction (an affective state), to be linked to dieting (a behaviour).
2. Contrasting satisfied and dissatisfied dieters on various factors. This may help to address the question, as to what other factors, apart from body dissatisfaction, are linked to dieting.
3. Contrasting the satisfied non-dieters with the other three participant groups. This may help to address the question as to what factors differentiate those participants who are neither dissatisfied with their body, nor dieting.

CHAPTER II

METHOD

Participants:

Participants were recruited for this project through the use of advertisements in three local newspapers; *The Press*, *The Christchurch Star*, and *The Mail*. Advertisements were also placed in the Psychology Department at the University of Canterbury, and within the *University Diary*. The research project was described in the advertisements, as being focused upon “Body Satisfaction”. The only prerequisite that was stipulated in the advertisements, was that the participants had to be female, and they also had to be at least 17 years of age. From these advertisements, a total of 80 women volunteered to partake in the project. The participants ages ranged from 18 to 86, with a mean age of 34.13 years. This particular sample consisted of women from the University of Canterbury, as well as women from the Christchurch community.

STIMULUS MATERIALS:

Body Image Assessment (BIA):

The Body Image Assessment (BIA) was used to determine the participants level of satisfaction with their body. The BIA is a particularly efficient, economical, and simple procedure for assessing body image disturbances (Williamson, Davis, Bennett, Goreczny, & Gleaves 1989). The BIA consists of nine cards, which are 15 cm x 23 cm in size. On each card is a silhouette of a woman, whose body size ranges in incremental steps from very thin, to obese (Williamson, Kelley, Cavell, & Prather, 1987). On the back of each of the cards is a number from one to nine, with one corresponding to the thin silhouette, and nine to that of the obese silhouette. These numbers were subsequently used to determine the body-size rating scores for each individual (Williamson, Davis, Goreczny, & Blouin, 1989). Two measures were derived from the numbers chosen; the participants current body-size score (CBS), and their ideal body-size score (IBS).

The cards were shuffled by the experimenter, and placed randomly in front of the participant. The participant was then given the following instructions: “Select the card which most accurately depicts your current body size, as you perceive it to be. Please be honest. You must choose only one card, and you may not rearrange the cards to directly compare them” (Williamson, et al. 1989; Williamson, Cubic, & Gleaves, 1993; Williamson, Kelley, Davis, Ruggiero, & Blouin, 1985). The number of the card that the participant selected was recorded by the experimenter as their current body size score (CBS). The cards were then reshuffled by the experimenter, and again placed in front of

the participant randomly. The participant was then given the following instructions: “Please select the card which most accurately depicts the body size which you would most prefer. Again, please be honest, and do not rearrange the cards.” The number of the card in which the participant selected was recorded by the experimenter as their ideal body-size score (IBS). This procedure took approximately one minute to complete.

From these two scores, a discrepancy score was calculated, by subtracting the participants IBS score, from their CBS score. The higher the discrepancy score, the greater the body dissatisfaction. In a study conducted by Williamson, Gleaves, Watkins, and Schlundt (1993), it was concluded that the self-ideal discrepancy scores were in fact more highly correlated with body dissatisfaction, than were measures of current body size perception, ideal body size estimation, or indices based on actual body size. According to Williamson, et al. (1989), the BIA overall has acceptable test-retest reliability for both CBS ($r = .89$), IBS ($r = .72$), and for the discrepancy score ($r = .80$).

Modified Stroop Test:

The Stroop Colour-Word Test involves reading out aloud the colour of the ink that a series of words are printed in. The modified version of the Stroop Test, consisted of a total of four cards, 53 cm x 39 cm in size (Cooper, et al. 1992). The cards were white, and the ink colours used were red, blue, green, black and yellow. The words were printed in 0.5 cm high block capitals, in one of the five different colours.

The first card that the participants were shown, consisted of two rows of the letter *O* printed in the five colours. This was a practice card, to familiarize participants with the task. The participant was then given the following instructions: “Read out aloud as quickly as you can, the colour of the ink that the circles are printed in. This is just a practice card, so as to familiarize yourself with the colours.” The next card that the participants were shown was that of the conflicting-colour card. On this particular card the words *orange*, *red*, *blue*, *green*, and *brown*, were used. None of the words on the conflicting-colour card appeared in its own colour ink. For example, the word *green* would never be printed in green ink. The next card that the participants were shown was the target card, which consisted of words related to body shape and food. The words used on this card were *fat*, *diet*, *thighs*, *cakes*, and *hips*. The last card that the participants were shown was the control card, which contained the words, *sit*, *dare*, *filter*, *tower*, and *wool*. The words on the target and the control cards were matched for the number of letters they contained, and frequency of usage. The stimulus words on the control and target card were repeated in a new random order, twice in each row. There was no immediate repetition of words or colour within a row (Cooper, et al., 1992). For each of the three cards, the participants were given the following standard instructions; “Please read out aloud, as quickly as you can, the colour of the ink that the words are printed. Starting in the top left hand corner,

and finishing at the bottom right. I will be timing how long it takes you.” The time taken to complete each card was recorded using a stopwatch. The stroop test has been evaluated in terms of its test-retest reliability, and has proven to be fairly stable across a one, and two week period (Franzen, Tishelman, Sharp, & Friedman, 1987).

Short Form of the Beck Depression Inventory (BDI):

The short-form of the Beck Depression Inventory (BDI), was developed so as “to aid the family physician in rapid screening of patients for depression, and in estimating its severity” (Beck & Beck, 1972, p. 85). The original Beck Depression Inventory consisted of 21 items, whereas the shortened version contains 13 items. For each of the 13 items, there are four different statements pertaining to a particular issue relating to depression. The participant is instructed to read the entire group of statements for each item, and to pick out the one statement in that group which best describes the way that they feel right now. If the participant feels that several statements may equally apply, then they are instructed to circle each one. Each of the statements is numbered from zero through to three. Statement one in each group is always numbered with a zero, and statement two is always numbered with a one, and so on. To calculate the participants score on the short form, the experimenter simply adds the scores of all of the categories. If the participant has circled more than one response, then the response with the highest score is the one that is included in the total. As the maximum score within each group of statements is three, the maximum score for the entire 13-item scale, is 39. According to Beck and Beck (1972), a score of zero to four indicates none or minimal depression, a score of five to seven indicates mild depression, eight to 15 indicates moderate depression, and a score of 16 or above indicates severe depression.

In a research effort conducted by Beck and Beck (1972), it was found that the 13 item questionnaire had a correlation of 0.96 with the original Beck Depression Inventory, and a correlation score of 0.61, with the clinical depth-of-depression rating. After evaluating the short form of the Beck Depression Inventory, Scogin, Beutler, Corbishley and Hamblin (1988), concluded that the 13 item inventory was a reliable instrument for clinical, and research measurement of depression in adults. Scogin et al. (1988), also established that the short form had sufficiently high internal consistency, and convergent validity. Reynolds and Gould (1981), examined the 13 item inventory, and found that the internal consistency reliability was 0.85 for the standard form, and 0.83 for the short form. These authors also found that the standard form correlated 0.93 with the short form, and thus concluded that their results supported the use of the short form as a reliable, and valid brief screening measure of depression. The short form of the Beck Depression Inventory has also been evaluated in New Zealand. From a sample of 1091 participants, Knight (1984), found the short form to have an internal consistency coefficient of 0.81, which corresponds with many of the overseas findings.

Rosenberg's Self-Esteem Scale:

Rosenberg's Self-Esteem Scale (Rosenberg, 1965), is a Guttman scale, which measures the self-acceptance aspect of self-esteem. This particular self-esteem scale was designed "specifically with brevity, and ease of administration in mind" (Crandall, 1973, p. 81).

The scale itself consists of ten statements. The participant is instructed to indicate the extent to which they agree with each of the ten statements on a scale from one to four, with one being 'strongly agree', and four being 'strongly disagree'. Within the scale, positive and negative statements are alternated in order to reduce the possibility of respondent set. With regards to scoring, the first three items on Rosenberg's Scale are scored as one item, statements four and five are also scored as one item, as are items nine and ten. That is, if the participant scores two or three of the first three statements positively, then they would receive a positive score for Scale Item I. If the participant scored zero out of three, or one out of three positively, then they would subsequently receive a negative score. If the participant scores one or both of the fourth and fifth statements positively, then they would receive a positive score for Scale Item II. The same procedure applies to items nine and ten. The remaining items are all scored separately. On this particular scale, a score of zero indicates low self-esteem, while a score of six indicates high self-esteem.

According to Crandall (1973), the Rosenberg Self-Esteem scale is quite comprehensive in evaluating the self-acceptance aspect of self-esteem. Crandall (1973), also postulates that the scale has high reliability, as well as a reproducibility coefficient of 0.92. Within a research effort conducted by Fleming and Courtney (1984), Rosenberg's Self-Esteem scale was found to have a coefficient alpha of 0.88, and a test-retest correlation of 0.82. From their findings, they concluded that such results suggest that the scale has satisfactory item consistency.

Physical Appearance Related Teasing Scale (PARTS):

The Physical Appearance Related Teasing Scale was developed by Thompson, Fabian, Moulton, Dunn, and Altabe (1991), in an attempt to formulate a measure which targeted teasing history "specifically related to size, weight, and general physical appearance" (p. 514). Prior to this scale, there was no psychometrically sound measure which focused solely upon the issue of teasing.

The Physical Appearance Related Teasing Scale contains 18 different questions depicting scenarios in which a child may have been subjected to teasing, as a result of their weight, size or physical appearance. The participants were instructed that this scale pertains to the time period in which they were growing up. They were then told to indicate on a scale from one to five, with one being equal to 'never', and five being equal to 'frequently', how

regularly they were subjected to such teasing.

The scale contains two distinct subscales. The first subscale encompasses the first 12 items of the scale. These 12 items are focused upon teasing which may have occurred as a result of weight and size. This subscale was entitled the Weight/Size Teasing (W/ST) scale. The last six items of the physical appearance related teasing scale, deal with teasing about nonweight/size related issues. This particular subscale was entitled the General Appearance Teasing (GAT) scale. Higher scores indicate a higher frequency of teasing experiences. In a research effort conducted by Thompson, et al. (1991), it was found that the W/ST scale had an internal consistency coefficient of 0.91, and the test-retest reliability coefficient was 0.86. From this study it was also established that the GAT scale had an internal consistency coefficient of 0.71, and a test-retest reliability coefficient of 0.87. Thompson, et al. (1991), concluded that this scale should prove to be useful for those studies involving teasing history, and body image disturbance.

Sociocultural Attitudes Towards Appearance Questionnaire:

The Sociocultural Attitudes Towards Appearance Questionnaire (SATAQ), was developed with the aim of establishing a measure, so as to “assess womens recognition, and acceptance of societally sanctioned standards of appearance” (Heinberg, Thompson, & Stormer, 1995, p. 81). Sociocultural ideals have repeatedly been acknowledged within research findings as having a negative impact on a woman's body image (Irving, 1990; Stice, & Shaw, 1994; Stice, Schupak-Neuberg, Shaw, & Stein, 1994). Preceding the development of the SATAQ, the empirical research available regarding the influence of these sociocultural factors had been restricted, due to the lack of such a measurement designed to specifically target these issues.

The SATAQ contains 14 statements, all of which relate to a particular issue regarding sociocultural norms. The participants indicate on a five point Likert scale, their level of agreement with each statement, with one being ‘completely disagree’, three being ‘neither agree nor disagree’, and five being ‘completely agree’. Within the SATAQ are two separate subscales. The first of these is the Awareness Scale, which concerns six items designed to assess the participants awareness level of socially presented ideals regarding the importance of physical attractiveness in our society. The remaining eight items make-up the Internalization Scale, which was designed to measure the extent in which the participant internalizes socially presented ideals regarding physical attractiveness. Four of the items within the SATAQ were reversed.

Several research efforts were carried out by Heinberg, et al. (1995), in an attempt to evaluate the SATAQ. From these studies, it was found that the correlation between the Internalization, and the Awareness Scale, was 0.34. The Internalization Scale had an alpha

of 0.88, while the Awareness Scale had an alpha of 0.71. The SATAQ also had sufficient convergence with five other existing measures of body image disturbance, and eating dysfunction.

Age:

The participants were also requested to stipulate their age, due to the fact that age has been linked with both body dissatisfaction and dieting behaviour (Hetherington & Burnett, 1994; Cash, Winstead, & Janda, 1986).

Exercise:

The participants were also requested to indicate if they engaged in any sort of exercise activity. If the participants answered "YES", they were then asked to indicate as to how many hours per week they would engage in such activity. The participants had five options to choose from: 1-2 hours per week, 2-3 hours per week, 3-4 hours per week, 5-6 hours per week, or 7+ hours per week. These categories were chosen to coincide with the research conducted by Davis and Fox (1993), whereupon an excessive exerciser was defined as an individual who exercised at least six times a week, for at least one hour per session.

PROCEDURE:

Upon arrival at the laboratory, participants were greeted by a female experimenter, and were given an Information Sheet to read, as well as a written consent form to sign if they agreed to partake in the study (see Appendix). Once the participant signed the consent form, they were then given a copy of the Information Sheet to keep. The participants were then told that should they have any questions about any part of the study, or should they want to withdraw their data at any stage whatsoever, to not hesitate in contacting the experimenter. They were also assured of complete anonymity. The participants were then asked a series of questions which focused upon their dieting behaviour. These questions enabled the participant to be classified as either a dieter or a non-dieter. A diet in this instance was defined as "any diminished food intake program for the purpose of losing weight" (Reber, 1995, pg 209). The questions were always asked in the same order and were: "Have you ever dieted in an attempt to lose weight?" (Yes or No). "Have you ever dieted in an effort to maintain your weight?" (Yes or No). "Have you ever dieted in an attempt to change your body size?" (Yes or No). "Are you currently dieting?" (Yes or No). If the participant answered "No" to all of these questions, they were classified as a non-dieter. If the participant answered "Yes" to one or more of these questions, they were thus classified as a dieter.

The participants then completed two short tasks; the BIA, and the Modified Stroop Test. These tasks were always presented in the same order, with the participants completing the BIA task first. These two tasks are particularly time efficient, and at the very most would take ten minutes to complete.

After completion of these two tasks, participants were then given a questionnaire booklet to complete (see Appendix). The participants were told to fill-out the questionnaire at their own pace, and to ask the experimenter should they have any queries about any of the questions. The entire procedure took between 20 and 30 minutes to complete.

CHAPTER III

RESULTS

Participant Characteristics:

The final sample consisted of 80 women. Using the Body Image Assessment (BIA) discrepancy scores, these participants were classified as being either satisfied or dissatisfied with their bodies. Those women who scored zero or less on the BIA task were classified as satisfied, whereas those women who scored one or above on the BIA task were subsequently classified as being dissatisfied with their body. This resulted in 31 women who were satisfied with their body, and 49 who were considered to be dissatisfied with their body.

As this was a reasonably sized sample, it was thought it would be more informative to compare those participants who were at the extremes of satisfaction and dissatisfaction. That is, to only use those participants who were either very satisfied with their body, or who were very dissatisfied with their body. The distribution of the scores revealed a median score of one ($n = 24$). It was decided to eliminate those participants with a median score of one from the study, leaving a total of 56 women within the sample. This remaining sample was subsequently categorised according to both satisfaction levels, and dieting behaviour, resulting in four separate groups. These are displayed in Table 1.

Table 1: Mean Age of each Participant Group.

	Mean Age	N
Satisfied Dieters	45.87	14
Dissatisfied Dieters	30.25	20
Satisfied Non-dieters	29.88	17
Dissatisfied Non-dieters	27.20	5

It is interesting to note here that those women who were dissatisfied with their body, were more likely to be dieters rather than non-dieters (20 vs 5), whereas those women who were satisfied with their body, were almost equally likely to be dieters, or non-dieters (14 vs 17). Such a finding suggests that body dissatisfaction is commonly associated with dieting, but it is not the only factor which influences dieting behaviour. This finding also

indicates that being satisfied with one's body does not necessarily prevent one from dieting. Another interesting point to note here is the fact that those women who were dieters were only slightly more likely to dissatisfied than satisfied with their body (20 vs 14), while the non-dieters were much more likely to be satisfied with their body, rather than dissatisfied (17 vs 5).

Age:

A 2 (satisfaction: satisfied/dissatisfied) x 2 (dieting: dieter/non-dieter) ANOVA revealed a significant main effect of satisfaction $F(1,52) = 4.41, p < .05$ (37.88 years vs 28.73 years). This finding indicates that those women who were satisfied with their body, were significantly more likely to be older in comparison to those women who were dissatisfied with their body. There was also a significant main effect of dieting, $F(1,52) = 4.77, p < .05$ (38.06 years vs 28.54 years). This latter finding indicates that those women who were dieters, were significantly older in comparison to those women who were non-dieters.

The means for each of the dependent measures are displayed in Table 2. For each measure a 2 (satisfaction: satisfied/dissatisfied) x 2 (dieting: dieter/non-dieter) between participants ANOVA was conducted. In order to test the specific aims of this project, three planned comparisons were conducted: between the dissatisfied dieters and the dissatisfied non-dieters, between the satisfied dieters and the dissatisfied dieters, and between the satisfied non-dieters, and the other three participant groups.

Table 2: Mean Scores for all of the Dependent Measures.

	Satisfied		Dissatisfied	
	Dieters	Non-Dieters	Dieters	Non-Dieters
Depression	1.93	1.65	2.90	3.00
Self-Esteem	4.71	5.24	4.90	6.00
Weight/Size Teasing	18.14	14.76	17.55	13.20
General Appearance Teasing	7.64	9.94	8.70	8.20
Awareness Subscale	20.29	19.06	21.60	21.00
Internalization Subscale	19.93	15.53	23.40	26.20
Frequency of Exercise (hours per week)	2.35	1.47	1.70	2.20
Stroop Conflicting Colour Card Times in Minutes	2.02	1.52	1.50	1.41
Stroop Target Card Times in Minutes	1.50	1.21	1.16	1.21
Stroop Control Card Times in Minutes	1.41	1.15	1.12	1.22

NB: High scores on the depression, weight/size teasing, general appearance teasing, awareness, and internalization subscale, reflect greater depressive symptomatology, greater episodes of childhood teasing regarding weight and general appearance, a higher awareness of, and greater internalization of societal norms. Lower scores on the self-esteem measure reflect lower levels of self-esteem, while higher scores on the exercise measure reflects higher levels of exercise activity. The scores with regards to the Stroop task, reflects the average time each group took to complete each card in minutes.

Depression:

With regards to depression, the 2 (satisfaction: satisfied/dissatisfied) x 2 (dieting: dieter/non-dieter) ANOVA revealed no significant findings. The Planned Comparison between the dissatisfied dieters, and the dissatisfied non-dieters did not yield a significant effect. This result indicates that there was no significant difference in the Depression scores between these two groups of participants. The Planned Comparison which compared the satisfied, and the dissatisfied dieters, also yielded no significant effect. The Planned Comparison which contrasted the satisfied non-dieters with the other three participant groups, did not yield a significant effect.

Self-Esteem:

Again, the 2 (satisfaction: satisfied/dissatisfied) x 2 (dieting: dieter/non-dieter) ANOVA revealed no significant findings. The Planned Comparison between the dissatisfied dieters, and dissatisfied non-dieters, did not yield a significant effect. The Planned Comparison which compared the satisfied dieters, and the dissatisfied dieters also yielded no significant effect. The Planned Comparison which contrasted the satisfied non-dieters with the other three participant groups, also yielded no significant effect.

Teasing:

General Appearance Teasing: The 2 (satisfaction: satisfied/dissatisfied) x 2 (dieting: dieter/non-dieter) ANOVA produced no significant findings. The Planned Comparison between the dissatisfied dieters, and the dissatisfied non-dieters, did not yield a significant effect. The Planned Comparison between the satisfied dieters, and the dissatisfied dieters also yielded no significant effect. The Planned Comparison which contrasted the satisfied non-dieters with the other three participant groups, did not yield a significant effect.

Weight/Size Teasing: The 2 (satisfaction: satisfied/dissatisfied) x 2 (dieting: dieter/non-dieter) revealed no significant findings. The Planned Comparison between the dissatisfied dieters, and the dissatisfied non-dieters, did not yield a significant effect. The Planned Comparison which compared the satisfied dieters, and the dissatisfied dieters, also yielded no significant effect. The Planned Comparison between the satisfied dieters, and the other three participant groups, also yielded no significant effect.

Media:

Awareness Subscale: A 2 (satisfaction: satisfied/dissatisfied) x 2 (dieting: dieter/non-dieter) ANOVA was conducted with the Awareness Subscale scores as the

dependent variable. However, no significant findings were produced. This result suggests that body satisfaction, and dieting behaviour did not influence the participants overall awareness of the societal norms regarding the thin ideal. The Planned Comparison between the dissatisfied dieters, and the dissatisfied non-dieters, did not yield a significant effect. The Planned Comparison which compared the satisfied dieters, and the dissatisfied dieters, also yielded no significant effect. The Planned Comparison which contrasted the satisfied non-dieters with the other three participant groups, did not yield a significant effect.

Internalization Subscale: When a 2 (satisfaction: satisfied/dissatisfied) x 2 (dieting: dieter/non-dieter) ANOVA was carried out with the Internalization Subscale scores as the dependent variable, a significant main effect of satisfaction was produced $F(1,52) = 12.30$, $p < .001$. This finding shows that those women who were satisfied with their body, were less likely to internalize the societal norms regarding the thin ideal, in comparison to their dissatisfied counterparts (17.73 vs 24.80). There were however, no significant findings where dieting behaviour was concerned. The Planned Comparison between the dissatisfied dieters, and the dissatisfied non-dieters, did not yield a significant effect. The Planned Comparison which compared the satisfied dieters, and the dissatisfied dieters also yielded no significant effect. The Planned Comparison which contrasted the satisfied non-dieters with the other three participant groups, did however, reveal a significant effect $F(1,52) = 14.47$, $p < .001$. This indicates that the satisfied non-dieters, were significantly less likely to internalize societal norms regarding the thin ideal, in comparison to the other three participant groups (15.53 vs 23.18).

Exercise:

The 2 (satisfaction:satisfied/dissatisfied) x 2 (dieting: dieter/non-dieter) ANOVA regarding exercise produced no significant findings. The Planned Comparison between the dissatisfied dieters and the dissatisfied non-dieters, did not yield a significant effect. The Planned Comparison which compared the satisfied dieters, and the dissatisfied dieters, also yielded no significant effect. The Planned Comparison which contrasted the satisfied non-dieters with the other three participant groups, did not yield a significant effect.

Weight Preoccupation:

Within this project, weight preoccupation was assessed through administering a modified version of the Stroop test to the participants. The pertinent variable here was the times taken to complete the target card of the Stroop task. In order to ensure that any effects on the target card were not due to overall speed effects across the participant groups, a 2 (satisfaction: satisfied/dissatisfied) x 2 (dieting: dieters/non-dieters) ANOVA on the times for the Target card was conducted, with the times for the control and colour cards as covariates. However, no significant findings were produced. The Planned Comparison

between the dissatisfied dieters, and the dissatisfied non-dieters did not yield a significant effect. The Planned Comparison which compared the satisfied and the dissatisfied dieters, also yielded no significant effect. The Planned Comparison between the satisfied non-dieters, and the other three participant groups, did not yield a significant effect.

CHAPTER IV

DISCUSSION

The aim of this particular project, was to examine a non-clinical sample of dieters and non-dieters, both those satisfied, and those dissatisfied with their bodies. Subsequently, four distinct categories of women were distinguished from within the sample. These groups consisted of satisfied dieters, satisfied non-dieters, dissatisfied dieters, and dissatisfied non-dieters. Possibly one of the most interesting findings of this project, concerned the fact that it was possible to differentiate four distinct participant groups from within the sample. The important points to remember here was the fact that those women who were dissatisfied with their body, were more likely to be dieters, while those women who were satisfied with their body, were almost equally likely to be dieters or non-dieters. The important implications with these findings is the fact that body dissatisfaction is not the only issue which motivates dieting behaviour, while being satisfied with one's body does not necessarily prevent a woman from dieting. The other important thing to note from these results, was the finding that the dieters were only slightly more prone to be dissatisfied with their body rather than satisfied, while those women who were non-dieters, were much more likely to be satisfied with their body rather than dissatisfied. This latter finding implies that although a woman may feel satisfied with her body, she is still almost as equally as likely to still be dieting, rather than not dieting, while those woman who are non-dieters, are much more likely to be satisfied with their body rather than dissatisfied. This finding thus lends partial support to the study conducted by Heatherton (1993), whereupon it was found that dieters were more dissatisfied with their bodies in comparison to non-dieters.

Very little research has included and combined both dieting and body satisfaction in one study in this manner, and as such, very little is known about the type of individuals who fall into these various categories. The group which is most particularly striking is that of the satisfied dieters. It would appear from this particular group of individuals, that being satisfied with one's body does not appear to protect, or prevent one from dieting in an effort to lose weight. This is a most contradictory, even paradoxical group of women, as one would naturally assume that if a women felt satisfied with her body, then she would have no need or desire to embark upon a diet. This however does not appear to be the case, and indicates that dieting behaviour is a rather complex entity, apparently motivated by a number of variables, not just body dissatisfaction. It should really come as no surprise that such a group does exist, particularly when taking into consideration the values and ideals conveyed within today's society. One possible explanation could be that in order to be satisfied within today's culture which emphasizes thinness, a women has to diet in an effort to maintain her figure, and body satisfaction. Such a concept was mentioned within the study conducted by French, et al. (1994), in which a comparison was made between

women who were dieting to lose weight, women dieting to maintain their weight, and women who were non-dieters. Thus the satisfied dieters within this project, could in fact correspond to be that of a 'maintainer' as mentioned in the French et al. (1994) study. There is quite a distinct difference between dieting to lose weight, and dieting to maintain a weight in which one is satisfied with. If in fact the satisfied dieters do correspond to that of a 'maintainer', then dieting to maintain one's weight, could be linked to feelings of body satisfaction. However, not every woman who is satisfied with her body diets, as so clearly indicated by the existence of the satisfied non-dieting group. Another possible explanation is that dieting is such a common, almost expected phenomenon within the female population, that even those women who are satisfied with their body, still feel the need to embark on such practices.

The other group of women who are noteworthy of discussion is that of the dissatisfied non-dieters, who although probably not quite as remarkable as the satisfied dieters, are in need of further review. This particular group of women are almost at the extreme opposite of the satisfied dieters, as not only are this group dissatisfied with their body, they are not motivated, nor do they feel that they need to diet. This again suggests that being dissatisfied with your body, is not the sole motivation for beginning a diet. The remaining two groups were not so unexpected, and consisted of dissatisfied dieters, and satisfied non-dieters. These two groups appear more clear-cut, as it makes sense that those women who are dissatisfied with their body diet, while those who are satisfied with their body do not.

The participants were also tested on a number of different measures, the first of which was depression. The results however produced no significant findings, suggesting that within this sample, the depression measure did not differentiate between the participant groups. These findings thus do not support those of Rierdan, et al. (1988), nor do they comply to the findings of Noles, et al. (1985), who both found body dissatisfaction to be significantly associated with depression. The results do not support the findings of Koenig and Wasserman (1995), either, whereupon failed dieting attempts were found to be associated with depression. This may partly be due to the fact that within this project, it was just dieting behaviour which was examined, rather than failed dieting attempts. The findings do however give partial support to the study conducted by Bartlett, et al. (1996), in which it was concluded that a history of weight cycling was not associated with depression. The point must be made however, that only dieting behaviour, not weight cycling, was examined within this project, and as such, should not be taken out of context.

The second area of interest within this project concerned the issue of self-esteem. However, no significant findings were produced, which suggests that within this sample, self-esteem scores did not differentiate between the participant groups. Such a result was somewhat unexpected however, and as such, does not fit with past research efforts which have found a link between self-esteem, body dissatisfaction, and dieting behaviour

(McCaulay, et al. 1988; Mintz and Betz 1986; Akan and Grilo 1995). It is difficult to explain the discrepancies which exist between the past literature findings, and the results from this project. These findings could however be due to a sampling effect. The participants within this project were selected through answering advertisements which were in the local newspaper, or which were posted around the University. To answer such an advertisement requires a certain amount of self-confidence, and self-esteem, and as such, this sample may have inadvertently been comprised of women who were all generally self-assured, and who had reasonably high levels of self-esteem. As such, there may have been no distinct differences in levels of self-esteem within the participants.

The third area of interest within this project concerned the issue of childhood teasing with regards to one's weight/size, and general appearance. Again however, no significant findings were produced, which suggests that the general appearance, and the weight/size teasing scores, did not differentiate between the participant groups. These were quite unexpected results, as the past literature cites some consistent findings where the issues of weight/size teasing, and body dissatisfaction are concerned (Thompson & Heinberg 1993; Grilo, et al. 1994; Berscheid, et al. 1973). One possible explanation for these rather unexpected findings, could be related to the New Zealand culture, which has in the past been described as being a "strong male macho culture...a culture in which you are often not able to express yourself" (Drummond, 1996, p. 41). As such, admitting to being teased about one's weight/size or general appearance may not come easily within a culture which has a 'hardened' attitude ingrained into its way of life. Within such a culture, being teased may not seem out of the ordinary, or it may have been an issue which was just not talked about. As such, these participants may not have viewed such behaviour as being adverse, or may have been reluctant to discuss the issue.

The fourth area of interest concerned the issue of sociocultural norms regarding the thin ideal. This particular field has gained a lot of attention from researchers in recent years, who have been concerned with the way in which the mass media may contribute to feelings of body dissatisfaction, and dieting behaviour. No significant findings were produced with the scores from the SATAQ Awareness Subscale as the dependent measure, which suggests that the awareness scores did not differentiate between the participant groups. However, when the Internalization Subscale scores were examined, a significant main effect of satisfaction was revealed, which indicates that those women who were satisfied with their body, were less likely to internalize the societal norms regarding the thin ideal, in comparison to those women who were dissatisfied with their body. The Planned Comparison which contrasted the satisfied non-dieters with the other three participant groups also yielded a significant effect, which indicates that the satisfied non-dieters were significantly less likely to internalize societal norms regarding the thin ideal, in comparison to the other three participant groups. The results regarding body satisfaction provide support for several other research efforts, including the study conducted by Stice, et al.

(1994), in which it was found that greater ideal body stereotype internalization was associated with increased body dissatisfaction. The findings produced within this project concerning societal ideals are most significant, and quite indicative of the role that societal ideals has on a women's level of body satisfaction. It becomes apparent that if a women does not internalize the norms regarding the thin ideal, then she is more likely to be satisfied with her own body. Such a finding clearly demonstrates that the images portrayed by the mass media can have a most unfavourable influence on a women's level of body satisfaction.

Internalization of societal norms appears to be an extremely important factor where the issue of body satisfaction is concerned. It became apparent from this project, that those women who were satisfied with their body, were significantly less likely to internalize societal norms regarding thinness. Internalization of cultural norms was also an important factor within the Planned Comparisons, whereupon it was revealed that the satisfied non-dieters were significantly less likely to internalize societal ideals in comparison to the other participant groups. It would seem reasonable to assume that the satisfied non-dieters constitute women who are extremely satisfied with their body. For this reason, it is particularly interesting to note that the one factor which differentiates this group from the other participants, is their tendency to not internalize often unattainable weight ideals. An interesting point here is the fact that internalization of societal norms not only differentiated women who were satisfied or dissatisfied with their body, this factor also differentiated between those women who were dieters or non-dieters, as demonstrated by the findings of the planned comparison. Such a finding brings us back to the point made earlier on, concerning the differences between an affective state (body satisfaction/body dissatisfaction), and behaviour (dieter/non-dieter), and implies that internalization of societal norms is not only likely to influence a women's evaluation of her body, but it is also likely to influence her decision to diet or not. Thus it would appear that internalization of societal ideals is a particularly powerful factor which can influence a woman's affective state, and behaviour.

The findings concerning body satisfaction and internalization of societal norms, provide sufficient support for the notion that the thin ideal as conveyed by every medium of the mass media, can in fact have most adverse effects on a women's level of satisfaction with her body. It appears that it is the internalization of such ideals which is more likely to produce the greatest body dissatisfaction. This finding suggests that while society remains obsessed with emulating the ideal women as tall, and slender, one can expect a large proportion of the female population to feel dissatisfied with their bodies. Increases in levels of body dissatisfaction could prove to be disastrous, particularly when taking into consideration the findings of Gleaves et al. (1993), and Bunnell et al. (1992), in which body dissatisfaction was found to be associated with bulimia nervosa. Body dissatisfaction has also been linked to depression (Mable et al. 1986; Noles et al. 1985), and lowered

levels of self-esteem (Akan & Grilo, 1995; Mintz & Betz, 1988), both of which are most adverse to a woman's level of well-being. With these findings in mind, it would seem reasonable to suggest that perhaps the role that the media has in conducting such messages to the public at large should be questioned. The public should be made aware of just how potentially detrimental these messages can be to a woman's level of body satisfaction, and as such, the mass media should perhaps have to comply to stricter standards with regards to the images and messages that they convey.

Another point that must be made concerns the findings of past research efforts (Richins, 1991; Stice & Shaw, 1994), which implies that body satisfaction is a rather fluctuating precarious state. Within these studies it was found that by simply viewing magazine advertisements which conveyed images of thin women, the participants tended to feel dissatisfaction with their own bodies. A possible implication of this finding, is that perhaps if the mass media highlighted women who were plumper, and thus more realistic in size to those images conveyed today, women may feel more satisfied with their own bodies. Realistically however, for the mass media to portray such images, there would of course have to be a huge turnabout in ideals where female attractiveness is concerned.

These findings also indicate that there are a significant proportion of women who do not adhere to the societal norms regarding the thin ideal, and as such, do not internalize these culturally prescribed standards of beauty. It would appear that such action may not only contribute to some women feeling more satisfied with their own body, but may also contribute to non-dieting behaviour. How a women manages to not internalize these messages which are conveyed by the media regarding beauty and thinness is a question worthy of future research. If those mechanisms were able to be employed by women in the Western world, perhaps women could learn to appreciate, and feel satisfied with their body, and its own unique qualities.

The fifth area of interest within this project concerned the issue of exercise. No significant findings were produced however, which indicates that within this project, frequency of exercise did not differentiate between the participant groups. The findings to date regarding exercise have been quite conflicting, and as such, this project's findings only highlights the fact there is still much unknown about the issues of exercise, body dissatisfaction, and dieting behaviour. Researchers such as Davis and Fox (1993), have cited exercise as contributing to increases in body satisfaction, whereas Davis and Cowles (1991), found exercise to be associated with greater feelings of body dissatisfaction. The findings regarding dieting behaviour and exercise are also conflicting, with studies such as that conducted by Davis, et al. (1993), citing restrained eating to be associated with higher levels of physical activity, while Biener and Heaton (1995), found that the dieters within their sample were not more likely to engage in regular exercise. It becomes apparent that there are no real consistent findings where the issue of exercise, body satisfaction, and

dieting behaviour are concerned. Exercise could be motivated by one, or several factors, and as such body satisfaction, body dissatisfaction, dieting behaviour, or non-dieting behaviour, may be just one of many factors which motivate women to exercise. It becomes apparent that this is indeed one area which certainly warrants further investigation, so as to obtain more consistent, replicable findings.

Age was another variable within this project which was presumed to be associated with body satisfaction, and dieting behaviour. A significant finding of satisfaction was produced, indicating that within this project, those women who were satisfied with their body, were more likely to be older in comparison to those women who were dissatisfied with their body. A significant effect of dieting also emerged within this project, indicating that those women who were dieters were significantly older in comparison to those women who were non-dieters. Again, there have been a number of quite conflicting findings where age and body dissatisfaction have been concerned, but this project's results do lend support to the research effort of Cash, et al. (1986), where it was concluded that the younger women were the most dissatisfied with their bodies. However, the results lend no support whatsoever for the study carried out by Tiggemann (1992), nor do they correspond to the findings of Hetherington and Burnett (1994). Within this latter study, it was the younger women who were found to display more disinhibited eating patterns, while this project found that those women who were dieters, were significantly older in comparison to those women who were non-dieters.

The final area of interest within this project concerned the issue of weight preoccupation, which was assessed through administering a modified version of the Stroop test. No significant findings were produced however, which suggests that weight preoccupation did not differentiate between the participant groups. There are only a limited number of past research efforts which have examined body dissatisfaction and weight preoccupation, but unfortunately this project's results do not support these past efforts, in which a link between body dissatisfaction, and weight preoccupation was found (Davis & Fox 1993; Richards, et al. 1990). This project's findings are quite contradictory to these two studies, suggesting that weight preoccupation may not be such a significant factor where body dissatisfaction is concerned.

Summary:

Thus the results from this project revealed that those women who were satisfied with their body were significantly older in comparison to those women who were dissatisfied with their body, while those women who were dieters, were also significantly likely to be older in comparison to those women who were non-dieters. A particularly pertinent finding concerned the issue of internalization of societal norms, whereupon it was found that those women who were satisfied with their body, were less likely to internalize the

culturally prescribed ideals regarding thinness and beauty. It was also interesting to note that those women who were satisfied non-dieters, were significantly less likely to internalize societal norms regarding the thin ideal, in comparison to the other three participant groups.

A rather unexpected finding from this project, concerned the fact that no significant findings were produced where depression, self-esteem, teasing, exercise, and weight preoccupation were concerned. It would appear from the lack of significant findings, that the variables that were examined within this project, did not differentiate between the participant groups. It would thus seem reasonable to assume that some other factor(s), which were not taken into consideration within this project, may significantly differentiate between these participant groups. This was quite an unexpected result, particularly when we take into consideration the strong findings which have been produced in the past where these variables, body dissatisfaction, and dieting behaviour have been examined. One possible explanation for this finding could be the fact that a non-clinical sample was investigated within this project, while many of the past studies within these areas of interest have focused upon rather strict clinical samples. Another possible explanation for these findings, could be the fact that perhaps depression, self-esteem, teasing, exercise, and weight preoccupation, are not as strongly associated with body dissatisfaction and dieting behaviour as once was thought. These variables could be important predictors of body dissatisfaction and dieting behaviour amongst a group of women with anorexia or bulimia nervosa, but they may not be as strongly associated with such behaviour amongst women within the general population. Such women may still feel dissatisfied with their body, or they may still diet in an effort to lose weight, but just not to the extreme of those women within a clinical population.

Future Research Directions:

It becomes apparent from this project, that there are indeed a number of areas which deserve further investigation. The first of these concerns the issue of dieting, which has emerged as a rather complex behaviour. It becomes obvious that dieting behaviour is not always linked to body dissatisfaction, as so clearly indicated by the emergence of the satisfied dieters, and the dissatisfied non-dieters. Such a finding indicates that body dissatisfaction can not be the sole motivator of dieting behaviour. Therefore, an important area for future research efforts concerns identifying those other factors, besides body dissatisfaction, which motivates dieting behaviour. One possible way of attaining such findings, could be through identifying a sample of women who were either contemplating going on a diet, or who were currently dieting. Then using either a questionnaire, or through an informal interview, those factors which they felt lead to, or felt were important in their decision to diet could be identified. From this, common answers could be selected, and then it could be determined amongst another sample of dieters, if those factors

identified in the first group, were the same within the second sample of dieters. There are many viable reasons as to why a woman may decide to diet. For example, a woman may choose to diet in an effort to enhance her level of fitness, or in an effort to begin a healthier life-style. These are just suggestions however, and as such, it is really up to future researchers to uncover other potential motivators of dieting behaviour.

A group which is certainly worthy of further examination in the future, is that of the satisfied dieters. There are many questions left unanswered where this particular group of women are concerned, and as such, many areas which need to be addressed by future researchers. For example, it is important to determine the extent and frequency in which such behaviour occurs within the population at large, as well as trying to determine the type of women who tend to fall into the category of satisfied dieter, as well as identifying the motivation behind such behaviour. That is, why do those women who are satisfied with their body still feel that they have to diet? Another important point to take into consideration is the notion of dieting to maintain one's weight, and the link that such behaviour has to body satisfaction. It was suggested earlier that the satisfied dieters could in fact correspond to be that of a 'maintainer', as mentioned within the study carried out by French, et al. (1994). Thus, rather than dieting lose weight, the satisfied dieters, could in fact be dieting to maintain a weight which they feel satisfied with. This is an area which really needs to be addressed by future researchers, as dieting to maintain one's weight, could turn out to be an important component to overall female bodily satisfaction. It would also certainly be worth while to examine more closely populations of non-dieting woman, who as a group, appear to be more likely to be satisfied with their body rather than dissatisfied. This is especially interesting, particularly when we consider that those women who were satisfied were almost as equally as likely to be dieters rather than non-dieters. Another issue for future reference where dieting and body satisfaction is concerned, focuses upon those group of women who were dissatisfied with their body, but who were non-dieters. Again, this suggests that body dissatisfaction is not the only motivation for wanting to diet, providing even more support for a need for more research into these areas.

Another area of concern is that of societal norms regarding the thin ideal, and the role in which they play within a women's level of body satisfaction. It became apparent from this project, that those women who were satisfied with their body, were less likely to internalize these societal ideals of thinness, in comparison to those women who were dissatisfied with their body. It was also revealed that the satisfied non-dieters were significantly less likely to internalize societal ideals regarding thinness in comparison to the other three participant groups. Such a finding suggests that internalization of such norms may not only contribute to feelings of dissatisfaction with one's own body, it may also lead to dieting behaviour. This latter finding is most concerning, particularly when we take into consideration the already high rates of dieting behaviour within the female population, as well as the many health risks which are associated with dieting. The interesting, and more positive finding

to emerge here, was the fact that there were women who did not internalize such norms and ideals. How a woman manages to not internalize such ideals, is an area which is certainly worthy of future attention, particularly when the mass media is such a powerful commodity. If researchers were able to identify common mechanisms in which these women employed to not take to heart the norms and ideals as portrayed by the media, such strategies could be taught and made public to others. On a grand scale, such efforts could increase levels of body satisfaction, while decreasing dieting behaviour within the female population.

Another possible area for future research efforts concerns the notion that body satisfaction appears to be a rather sensitive issue. This was demonstrated by the fact that by simply viewing thin models (Richins, 1991; Stice and Shaw, 1994), participants tended to feel dissatisfaction with their own bodies. It would be interesting to determine if in fact viewing plumper, more realistic looking models would increase levels of body satisfaction. Such investigation would have to be carried out within a controlled environment, as no doubt it would prove very difficult to persuade the mass media in its present state of mind, to convey images which represented something other than thin, taunt female bodies. On a grand scale, such efforts may even contribute to more women within the general population feeling happy, and satisfied with their own bodies. However a note of caution must be offered where the issue of internalization of societal norms, and body satisfaction are concerned. It is apparent that not internalizing societal norms and body satisfaction are indeed associated, but it is difficult to determine if not internalizing such norms results in increased body satisfaction per se. There may also be a number of extraneous variables besides internalization, which may have contributed to such satisfaction, but were not accounted for within this project. It must be said however, that not internalizing societal norms, does appear to be an important variable, and as such, the role in which it plays within a woman's level of body satisfaction deserves closer investigation.

Although not the focus of this project, the point must also be made, that it is not just females who are pressured by society to adhere to strict culturally prescribed standards of attractiveness. Men also have to bear the brunt of the media's images, although it could be argued that striving to obtain the ideal muscular male image is not as physically detrimental as striving for extreme thinness. Nonetheless, the mass media does appear to have a lot to answer to with regards to both male and female personal happiness, and subsequent bodily satisfaction. Another side issue which is worthy of consideration, is the possibility of satisfied dieters, satisfied non-dieters, dissatisfied dieters, and dissatisfied non-dieters, existing within a male population. That is, do such diverse groups exist within male populations, and if so, do the same factors which differentiate female dieters and non-dieters, act to differentiate male dieters, and non-dieters? It is not uncommon for males to be concerned about their weight, or even to be dieting in an effort to take care of their

bodies (Jeffery, Adlis, & Forster, 1991). However, it would be fair to assume that the motives behind male and female dieting behaviour are quite different. Women not only have a more extensive history of dieting in comparison to men (French, et al. 1994), they would be more likely to be dieting to lose weight, while men on the other hand would be more likely to be dieting to gain weight. As such, there would be quite different motivations behind such behaviour. Examining the occurrence of such behaviour within a sample of men, would be an interesting focus for future researchers.

Taking into consideration the conflicting findings within the literature which concern exercise, body dissatisfaction, and dieting behaviour, as well as the lack of significant findings from this project, it becomes more than apparent that there is a definite need for closer examination of the link which exists between these three variables. It makes sense that all of these variables are linked in some manner, but it still remains unclear, as to how they are linked. It became clear that exercise did not differentiate the various participant groups within this project, which leaves no clear picture as to the role in which exercise plays within body satisfaction and dieting behaviour. Further research is needed so as to close the gap between the discrepancies which currently exist within the literature.

Limitations of this Project:

There are a number of limitations associated with this study, all of which should be taken into consideration when reviewing the final results. The first of these limitations concerns the measure which was used to determine the participants level of satisfaction with their body. This was a most crucial measure, as body satisfaction was one of the main features of this project. The measure used within this project was that of the Body Image Assessment (BIA). There are many advantages with using the BIA, as it is extremely quick and easy to administer, while at the same time, extremely cost efficient. However, it is this simplicity that raises doubts as to its overall effectiveness at measuring such a complex matter as body satisfaction. Several researchers have evaluated the validity, and test-retest reliability of the BIA method (Williamson, Davis et al. 1989; Keeton, et al. 1990; Williamson, et al. 1993), and ideal discrepancy scores appears to be an important component in evaluating body satisfaction. However, it was thought that if the BIA was used in conjunction with another measure, a more conclusive, body satisfaction score may have been obtained. For example, using the BIA in conjunction with the Eating Disorder Inventory Body Dissatisfaction (EDI-BD) scale, or The Body Shape Questionnaire (BSQ) may have been more advantageous. The Body Dissatisfaction subscale of the EDI-BD (Garner, Olmstead, & Polivy, 1983), contains nine items which assess satisfaction with specific weight-related body sites, such as waist, hips and thighs, while the BSQ (Cooper, Taylor, Cooper, & Fairburn, 1987) is a 34 item measure of attitudinal body dissatisfaction, with higher scores reflecting greater body dissatisfaction. The BSQ, and the EDI-BD,

assess different aspects of body satisfaction which are not accounted for with the BIA, and as such, if they were used together, a more accurate measure of body satisfaction may have been obtained.

Another limitation of this project concerns the Modified Stroop test, which was used to assess the participants level of preoccupation with their weight. Weight preoccupation has been cited within the literature as being associated with body dissatisfaction, although only a limited number of studies have been conducted concerning these issues. There are many advantages in using the Modified Stroop test, in that it is extremely cost efficient, and relatively quick and easy to administer. Also, unlike other measures, the Modified Stroop Test does not rely on self-report, and therefore is not subject to demand effects (Cooper et al. 1992). To my knowledge, most of the past research which has focused upon the Modified Stroop, has been concentrated upon samples of either eating disordered individuals, or those individuals who are restrained eaters, with a high drive for thinness (Cooper et al. 1992; Ben-Tovim, et al. 1989; Channon, et al. 1988). Such studies often only incorporate non-eating disordered individuals into their study as a control group, and as such, these individuals are not the main focus of the study. The significant findings which were produced from these studies therefore resulted from a sample of women who would be more likely to be extremely weight preoccupied. This study however, focused solely upon a non-clinical sample, and as such, the Modified Stroop may not have been a sensitive enough instrument for this particular sample. The Modified Stroop may be best suited to a clinical sample, while it may have been more advantageous to utilise a measure which examined the concept of weight preoccupation in greater detail. Although the Stroop test is relatively time efficient, it is a quite monotonous task, and as such can be quite tiring to participants. Such monotony could result in participants making mistakes, and taking longer in completing the task, which may have hampered their times and subsequent results. Another thing to note was that the cards were presented to every participant in the same order, and as such, the results could have been due to an order effect, thus altering the findings unexpectedly.

The technique which was utilised to measure the occurrence of childhood teasing regarding weight/size and general appearance, also has limitations which need to be highlighted. When assessing such an issue as childhood teasing, researchers typically have to rely upon the participants ability to recall such events through answering questionnaires. As such, researchers become reliant upon the participants ability to recall such events, rather than having direct evidence of such teasing. Without direct evidence to fall back on, it becomes difficult to determine if the participants were teased any more than their peers, or do they just recall being teased more because of their body dissatisfaction or dieting behaviour. These techniques may hamper findings, and thus should be taken into consideration when examining research reliant upon such methods.

Another possible limitation of this project concerns the final sample size of 56 women. This is a relatively small sample, and as such, the four categorical groups did not contain an equal number of participants. A small sample size also reduces the ability to generalise the findings to the population at large. Although this project contains a relatively small number of participants, it is important to note that this sample comprises individuals from in, and around the Christchurch area, and as such does not focus entirely upon University students, as so many other research efforts do. This sample also contains individuals of a wide range of ages, and most importantly, it is a non-clinical sample. So many of the studies in the past tend to focus their research upon clinical samples, when it is also extremely important to be aware of what is happening within the general population at large. Body dissatisfaction and dieting behaviour have become so perverse within society, that it seems only a natural step to conduct research which targets those individuals within the general population. Another possible limitation associated with this particular sample, is the fact that it consisted of only female participants. A totally female sample was chosen due to the fact that the issues of body dissatisfaction and dieting behaviour, are in general, more issues which have been of concern to women, rather than men. However, the point must be made that a lot more pressure is now exerted upon the male population to look good, and conform to a rather muscular ideal. As such, many young men may be experiencing increased dissatisfaction with their body, and may even be turning towards diets in an effort to feel good. Many men may now be experiencing the same pressures which have for years been placed solely upon the female population, and as such, it is important for future researchers to not totally ignore this segment of the population.

Conclusion:

Unfortunately, there are still many questions left unanswered where the issues of body satisfaction and dieting behaviour are concerned. The first of these concerns the connection between body dissatisfaction an affective state, and dieting, a behaviour. Both have distinctive meanings, but are often connected. The link between these two was hoped to be unravelled through close examination of the dissatisfied dieters, and dissatisfied non-dieters, but no differentiating factors emerged. One strong finding to emerge from this project however, concerns the motivation behind dieting behaviour, whereupon it became more than obvious that body dissatisfaction does not always lead to dieting behaviour. This was demonstrated by the satisfied dieters, and the dissatisfied non-dieters. Thus, there must be some factor(s), other than body dissatisfaction, which leads these woman to diet. Probably the most unexpected group to emerge from this project was the satisfied dieters. This is a particularly interesting group of woman, as not only were they satisfied with their body, but they dieted. If a woman is satisfied with her body, why does she need to diet? This is another issue which needs addressing. Such a finding suggests that dieting has become such a pervasive behaviour within our society which demands beauty and thinness, that in order to achieve or maintain satisfaction with one's body, one must turn to dieting.

It seems that even feeling satisfied with one's body does not always seem to protect or prevent a woman from embarking upon a diet in an effort to lose weight, or maintain her svelte figure. It would seem that those women who were satisfied with their body, were almost as equally as likely to be a dieter or a non-dieter. Such a finding is most alarming, particularly when we take into consideration the many health risks associated with dieting behaviour. It is particularly disheartening to think that our society is such that the only way in which a woman can feel some satisfaction with her body is via dieting. It is of most concern to think that not only those women who were dissatisfied with their body, but also a significant proportion of the female population who feel satisfied with their body are dieting. It would thus seem reasonable to expect dieting behaviour to keep increasing in popularity, as long as society retains this obsession with thinness. A positive finding to emerge from this study, was the fact that those women who were non-dieters, were almost twice as likely to be satisfied with their body rather than dissatisfied. This suggests that non-dieting behaviour is a significant contributor to feelings of body satisfaction, and as such, the perils of dieting should be highlighted, while non-dieting behaviour should be encouraged from an early age. Women need to be educated with regards to the hazards which are so often associated with dieting behaviour, while the dieting industry needs to be exposed for the 'sham' in which it really is. Healthy living and eating should be encouraged from an early age within schools, so as women can then make an educated choice as to whether or not to engage in a life-threatening pursuit of thinness.

This brings us to the next issue of internalization of societal norms, which has emerged as being a significant issue where body satisfaction is concerned. Internalization scores significantly separated the satisfied non-dieters from the other three participant groups, which indicates that the satisfied non-dieters were significantly less likely to internalize cultural ideals regarding thinness in comparison to the other three participant groups. This finding suggests that those women who do not internalize societal norms are more likely to be satisfied with their body, and less likely to be dieting. Such a finding suggests that the images as depicted by the media, do have a most adverse effect on a woman's level of body satisfaction, and as such, their appropriateness needs to be questioned. Women need to be educated with regards to how detrimental these images can be, and how physically impossible it is to obtain such a figure for the majority of the population. This project's findings suggest that there are a proportion of the female population who do not internalize these societal ideals, and thus, are more likely to be satisfied with their bodies and non-dieters. The mechanisms by which these women employ to ignore these messages as displayed by the media, need to be identified, so as all women can adopt these techniques. If this is possible, such behaviour could in fact increase levels of body satisfaction, decrease dieting behaviour, possibly decrease the occurrence of eating disorders, and enable women to accept, and like their body for what it is, rather than striving to attain the impossible. In this respect, woman could perhaps come to terms with the fact, that there are so many more important things in life than attempting to strive for a body which is pre-

determined by societal ideals

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APPENDIX I

INFORMATION SHEET

Reason for the project: The aim of this study is to determine what factors play a role in developing body satisfaction. This study will endeavour to identify features of women who are satisfied with their body, as well as those features of women who are dissatisfied with their body, and try and determine if there are differences between the two groups.

Your role in this project: The very first task in this project involves asking you a number of questions regarding your dieting behaviour. You will then be asked to partake in a task which will determine how satisfied you are with your body. This task involves examining nine silhouettes of a woman, and choosing the one which you feel most accurately depicts your body size. You will then be asked to choose a silhouette which you feel most accurately depicts the body size in which you would most prefer. You will then be asked to complete a task which determines how preoccupied you are with your weight. This task involves you reading out aloud the colour of a number of different words that are printed on a card. After these tasks have been completed, you will be required to fill in a number of questionnaires which will include questions concerning your own thoughts, feelings and behaviours regarding a number of issues. For example, one particular question is focused upon the extent to which you exercise. Once the questionnaire has been completed, an informal interview will be conducted, whereupon you will be asked some questions regarding your own thoughts and feelings as to what you think has contributed to your own level of satisfaction with your body. There are no right or wrong answers where any of these tasks are concerned. What is most important is that you answer the questions as honestly as you can. Any idea is a valid opinion.

Risks associated with participation: There are absolutely no risks involved when participating in this project.

Confidentiality: All of the information that is collected in this project is completely confidential. Numbers, not names will be used to distinguish each participant.

Voluntary participation: Participation in this study is completely voluntary, and you have the right to withdraw from this study at any stage whatsoever.

Time required: This project will take approximately 50 - 60 minutes of your time.

Name of researcher and supervisors: Hayley Bruce, Dr Cynthia Bulik and Dr Lucy Johnston.

Contact phone number: If you should have any questions or queries regarding this project, feel free to give me a call at 3667001, extn 7190.

APPENDIX II**CONSENT FORM**

I agree to take part in the project described on the Information Sheet, on the understanding that participation is completely voluntary, and if at any stage of the project I want to withdraw from the experiment, I may do so.

Name: _____

Signature: _____

Date: _____

APPENDIX III

QUESTIONNAIRE

Age

Q.1

On the questionnaire are groups of statements. Please read the entire groups of statements in each category. Then pick out the one statement in that group which best describes the way you feel today, that is, *right now!* Circle the number beside the statement you have chosen. If several statements in the group seem to apply equally well, circle each one.

Be sure to read all of the statements in each group before making your choice.

- 0 I do not feel sad.
 - 1 I feel sad or blue.
 - 2 I am sad or blue all the time and I can't snap out of it.
 - 3 I am so sad or unhappy that I can't stand it.
-
- 0 I am not particularly pessimistic or discouraged about the future.
 - 1 I feel discouraged about the future.
 - 2 I feel I have nothing to look forward to.
 - 3 I feel that the future is hopeless and that things cannot improve.
-
- 0 I do not feel like a failure.
 - 1 I feel I have failed more than the average person.
 - 2 As I look back on my life, all I can see is a lot of failures.
 - 3 I feel I am a complete failure as a person (parent, husband, wife).
-
- 0 I am not particularly dissatisfied.
 - 1 I don't enjoy things the way I used to.
 - 2 I don't get satisfaction out of anything anymore.
 - 3 I am dissatisfied with everything.
-
- 0 I don't feel particularly guilty.
 - 1 I feel bad or unworthy a good part of the time.
 - 2 I feel quite guilty.
 - 3 I feel as though I am very bad or worthless.
-
- 0 I don't feel disappointed in myself.
 - 1 I am disappointed in myself.
 - 2 I am disgusted with myself.
 - 3 I hate myself.
-
- 0 I have not lost interest in other people.
 - 1 I am less interested in other people than I used to be.
 - 2 I have lost most of my interest in other people and have little feeling for them.
 - 3 I have lost all of my interest in other people and don't care about them at all.

- 0 I make decisions about as well as ever.
 1 I try to put off making decisions.
 2 I have great difficulty in making decisions.
 3 I can't make any decisions at all anymore.
- 0 I don't feel that I look any worse than I used to.
 1 I am worried that I am looking old or unattractive.
 2 I feel that there are permanent changes in my appearance and they make me look unattractive.
 3 I feel that I am ugly or repulsive looking.
- 0 I can work about as well as before.
 1 It takes extra effort to get started at doing something.
 2 I have to push myself very hard to do anything.
 3 I can't do any work at all.
- 0 I don't get any more tired than usual.
 1 I get tired more easily than I used to.
 2 I get tired from doing anything.
 3 I get too tired to do anything.
- 0 My appetite is no worse than usual.
 1 My appetite is not as good as it used to be.
 2 My appetite is much worse now.
 3 I have no appetite at all anymore.

Q.2

Please read each statement carefully, and place in the space provided the answer which represents your degree of agreement with each statement.

1 = STRONGLY AGREE
2 = AGREE

3 = DISAGREE
4 = STRONGLY DISAGREE

1. I feel that I'm a person of worth, at least on an equal plane with others.....
2. I feel that I have a number of good qualities.....
3. All in all, I am inclined to feel that I am a failure.....
4. I am able to do things as well as most other people.....
5. I feel I do not have much to be proud of.....
6. I take a positive attitude toward myself.....
7. On the whole, I am satisfied with myself.....
8. I wish I could have more respect for myself.....
9. I certainly feel useless at times.....

10. At times I think I am no good at all.....

Q.3

Each question pertains to the time period of when you were growing up. Please respond by circling the appropriate number for the following scale:

NEVER (1)

FREQUENTLY (5)

Never

Frequently

- | | | | | | |
|---|---|---|---|---|---|
| 1. When you were a child, did you feel that your peers were staring at you because you were overweight? | 1 | 2 | 3 | 4 | 5 |
| 2. When you were a child, did you ever feel like people were making fun of you because of your weight? | 1 | 2 | 3 | 4 | 5 |
| 3. Were you ridiculed as a child about being overweight? | 1 | 2 | 3 | 4 | 5 |
| 4. When you were a child, did people make jokes about your being too big? | 1 | 2 | 3 | 4 | 5 |
| 5. When you were a child, were you laughed at for trying out for sports because you were heavy? | 1 | 2 | 3 | 4 | 5 |
| 6. Did your brother(s) or other male relatives call you names like "fatso" when they got angry at you? | 1 | 2 | 3 | 4 | 5 |
| 7. Did your father ever make jokes that referred to your weight? | 1 | 2 | 3 | 4 | 5 |
| 8. Did other kids call you derogatory names that related to your size or weight? | 1 | 2 | 3 | 4 | 5 |
| 9. Did you feel like people were pointing at you because of your size or weight? | 1 | 2 | 3 | 4 | 5 |
| 10. Were you the brunt of family jokes because of your weight? | 1 | 2 | 3 | 4 | 5 |
| 11. Did people point you out of a crowd because of your weight? | 1 | 2 | 3 | 4 | 5 |
| 12. Did you ever hear your classmates snicker when you walked into the classroom alone? | 1 | 2 | 3 | 4 | 5 |

13. When you were growing up, did people say you dressed funny?	1	2	3	4	5
14. Did people say you had funny teeth?	1	2	3	4	5
15. Did kids call you funny looking?	1	2	3	4	5
16. Did other kids tease you about wearing clothes that didn't match or were out of style?	1	2	3	4	5
17. Did other kids ever make jokes about your hair?	1	2	3	4	5
18. When you were a child were you scoffed at for looking like a weakling?	1	2	3	4	5

Q.4

Please read each of the following items and circle the number that best reflects your agreement with the statement.

1) Women who appear in TV shows and movies project the type of appearance that I see as my goal.

1 2 3 4 5

completely
disagree

neither agree
nor disagree

completely
agree

2) I believe that clothes look better on thin models.

1 2 3 4 5

completely
disagree

neither agree
nor disagree

completely
agree

3) Music videos that show thin women make me wish that I were thin.

1 2 3 4 5

completely
disagree

neither agree
nor disagree

completely
agree

4) I do not wish to look like the models in the magazines.

1 2 3 4 5

completely
disagree

neither agree
nor disagree

completely
agree

- 5) I tend to compare my body to people in magazines and on TV.
1 2 3 4 5
-
- completely disagree neither agree nor disagree completely agree
- 6) In our society, fat people are not regarded as unattractive.
1 2 3 4 5
-
- completely disagree neither agree nor disagree completely agree
- 7) Photographs of thin women make me wish that I were thin.
1 2 3 4 5
-
- completely disagree neither agree nor disagree completely agree
- 8) Attractiveness is very important if you want to get ahead in our culture.
1 2 3 4 5
-
- completely disagree neither agree nor disagree completely agree
- 9) It's important for people to work hard on their figures/physiques if they want to succeed in today's culture.
1 2 3 4 5
-
- completely disagree neither agree nor disagree completely agree
- 10) Most people do not believe that the thinner you are, the better you look.
1 2 3 4 5
-
- completely disagree neither agree nor disagree completely agree
- 11) People think that the thinner you are, the better you look in clothes.
1 2 3 4 5
-
- completely disagree neither agree nor disagree completely agree

12) In today's society, it's not important to always look attractive.

1 2 3 4 5

completely
disagree

neither agree
nor disagree

completely
agree

13) I wish I looked like a swimsuit model.

1 2 3 4 5

completely
disagree

neither agree
nor disagree

completely
agree

14) I often read magazines like *Cosmopolitan*, *Vogue*, and *Glamour* and compare my appearance to the models.

1 2 3 4 5

completely
disagree

neither agree
nor disagree

completely
agree

Q.5

Below are a couple of questions which are directed towards your level of exercise activity. Please circle the answer which best applies to you.

Do you partake in any sort of exercise activity?

YES/NO

If you answered YES to the above question, could you please indicate approximately how many hours per week you would spend exercising. Please circle the answer which best applies to you.

1-2 hours
per week

3-4 hours
per week

5-6 hours
per week

7 or more hours
per week

Thank you very much for your time and co-operation in filling out this questionnaire. Could you please check over your answers, so as to ensure that **every** question has been answered.

Thanks once again.

Hayley Bruce.