

# **Gender Differences in Body-Esteem, Body Dissatisfaction and the Effects of the Medias ‘Thin Ideal’**

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### **Abstract**

The issue surrounding body-esteem and dissatisfaction seems to be an escalating problem within society, as the media increasingly celebrates thin ideals. The aim of the research was to investigate whether mass media had a direct influence on body-esteem and body dissatisfaction. A Quantitative analysis was the chosen method. 90 participants were used for analysis, split equally for both genders. The analysis revealed that male and female participants experienced similar levels of body-esteem, with the media playing a powerful predictor for body-esteem levels; with female participants scoring higher than males. Both male and female participants revealed low levels of body-esteem and body dissatisfaction as a result of the media; however females were shown to be more influenced by media than males.

## **Introduction**

Exposure to mass media is said to have a direct effect on the way young people – especially women, perceive their own bodies. Advertising, the mass media and consumer culture highly profile artificial ‘body perfect’ ideals and media images depicting ultra-thin, airbrushed and digitally altered models are seen to be directly linked to body dissatisfaction, unhealthy eating, extreme dieting and intense fitness/weight training for both sexes. In recent years, there has been a noticeable increase in academic and popular interest of body image. Researchers from a number of disciplines have become interested in factors that affect people’s experiences of the latter, and in the impact of body image on behaviour. The significant rise in referral for cosmetic surgery operations, concerns about unhealthy eating, and an increase in the use of drugs designed to make men and women thinner or more muscular have inspired researchers to try to understand the motivations and possible influences behind these behaviours.

Today, we live in a society where obsessing over the way we look is a normal way of life; the media push images of what they consider to be the ‘perfect ideal body’ on to the public, this perfect body is often impossible to attain on your own and has the potential to cause serious health complications. The issues of body satisfaction, dissatisfaction, and even eating disorders are certainly not new topics for concern, but it is safe to say they are definitely on the increase. Throughout the latter half of the twenty-first century, people have become ‘slaves to the scales’ and have lost control on what is truly considered ‘normal’ and ‘healthy’. The media gives the impression that you have to be thin and beautiful to be happy and successful. However, numerous researchers and studies have claimed the opposite; starving oneself, extreme weight lifting, exercising and dieting can, in the most extreme circumstances lead to serious health complications and on occasion, even death. The media

bombards the population with images of 'beauty ideal' so much so that it has got to the point where if a person does not meet with these expectations from the media, then they are considered unattractive and lazy as they are not doing anything about changing themselves; thus we live in a society where eating disorders prevail and unhealthy and dangerous behaviours are on the increase.

Women are generally more prone to negative self-concepts and body image than men (Henriques & Calhoun, 1999). It was found that self-concept is consistent in both males and females until they reach their adolescent years. After the adolescent years, particularly in females, the older they get, the lower their self-concept becomes. The media appears to have a larger hold on its viewers during these years, causing these changes in self-concept. Beauty is what is most often portrayed in media targeted towards women, and success and achievements is targeted towards the men ("Body Attitude", 2001; Von Bergen & Soper, 1996).

Media images, such as those shown within women's celebrity lifestyle magazines can have the potential to directly affect women, while indirectly causing the formation of an unrealistic body ideal that is often represented in the media. Females are said to be much more likely than males to experience these concerns over their body image and it is for this exact reason that a majority of studies carried out only include women. However, in an early study on male body image, 95 per cent of men who attended college expressed dissatisfaction with some part of their bodies, subsequently 70 per cent expressed a discrepancy between their current and ideal body shape (Mishkind, Rodin, Siberstein and Striegel-Moore, 1986).

## **Body-Esteem and Self-Esteem**

Body-esteem is a term that refers to a person's inner picture of his or her outward appearance and is often referred to as body image. It has two components: perceptions of the appearance of one's body, and emotional responses to those perceptions. It has been defined as a "person's perceptions, thoughts and feelings about his or her own body" (Grogan, 1999) and as "the picture of our own body which we form in our own mind" (Schilder, 1950). From early childhood and onwards our body image affects our thoughts, emotions and behaviours in everyday life (Cash, 2004). Body dissatisfaction can come from many outlets; some research has claimed that it is a result of an individual's actual body size or shape compared to their ideal body size or shape; or simply as feelings of discontent for their body (Ogden, 2000).

One of the main reasons for body dissatisfaction is a discrepancy between a perceived body and an ideal body; this can certainly be influenced by the media, family and peers, with a failure to achieve the ideal, resulting in lack of self-worth and self-criticism (Furnham and Greaves, 1994). For men, there is a tendency to be less dissatisfied with body image when compared with women. However, many wish that certain parts of their bodies could be changed, some of these include: stomach, chest and arms, whereas women tend to be generally dissatisfied with their bodies as a whole with particular attention to their bottoms, stomachs, hips and thighs (Grogan, 1999)

Self-esteem is often seen as a personality trait and is closely linked to body-esteem, which means that it tends to be stable and enduring. Self-esteem can involve a variety of beliefs about the self, such as the appraisal of one's own appearance, beliefs, emotions and behaviours. Self-esteem is said to be the most powerful predictor of body satisfaction scores, even more so than body fat levels (Guinn, Semper, Jorgensen and Skaggs, 1997).

Body-esteem, self-esteem and body satisfaction/dissatisfaction has generally been thought of to be a female preoccupation (Orbach, 1993). However, additional research evidence has found that body dissatisfaction levels among the male population appears to have increased from 30 to 40 per cent since the 1970's (Berscheid, Walster and Bornstedt, 1973) to 75 per cent in the 1990's (Chaudhary, 1996) suggesting that the current society and consumer culture we live in is having a direct impact on not only female body dissatisfaction but male dissatisfaction too.

Grogan and Wainwright (1996) found that positive views of our bodies (applying to both men and women of different age ranges) was consistently linked with positive feelings about ourselves and gave a boost to self-confidence and power in social situations. However, attempts to achieve the perceived body ideal can lead to excessive and unhealthy exercising, dieting, a poor body image, low self-esteem and depressive attitudes that have the potential to have disastrous consequences such as severe eating disorders like anorexia and bulimia.

### **The Rosenberg Self-Esteem Scale**

The Rosenberg Self-Esteem Scale is perhaps the most widely used self-esteem measure in Social Science research. Dr. Rosenberg is the author and editor of numerous books and articles, and his work on the self-concept, particularly the dimension of self-esteem, is world-renowned. Self-esteem is a positive or negative orientation toward oneself; an overall evaluation of one's worth or value. People are motivated to have high self-esteem, and having it indicates positive self-regard, not egotism. Self-esteem is only one component of the self-concept, which Rosenberg defines as "totality of the individual's thoughts and feelings with reference to himself as an object." Besides self-esteem, self-efficacy or mastery, and self-identities are important parts of the self-concept. (Rosenberg, 1986)

Much of Rosenberg's work examined how social structural positions like racial or ethnic statuses and institutional contexts like schools or families relate to self-esteem. Here, patterned social forces provide a characteristic set of experiences which are actively interpreted by individuals as the self-concept is shaped. Rosenberg viewed the self as made up of two elements - "identity" which represents cognitive variables, and "self-esteem" representing affective variables. The cognitive variable, or "identity," involves perceiving and interpreting meaning. He referred to "self-esteem" as the subjective life of the individual, largely one's thoughts, feelings, and behaviours. He determined that self-esteem was made up of two components: 1) feelings of self-worth based primarily on reflected appraisals, and 2) feelings of efficacy, based on observations of the effects of one's own actions. One's social behaviour is then a product of the two jointly operating cognitive and affective variables. At least four key theoretical principles - reflected appraisals, social comparisons, self-attributions, and psychological centrality - underlie the process of self-concept formation. (Rosenberg, 1986).

### **Social Comparison Theory**

Festinger (1954) coined the term 'Social Comparison'. He theorized that individuals would compare themselves to others who they perceive to be similar to themselves by rating and evaluating themselves through comparison. There are two types of comparisons according to this theory, a downward or upward comparison. A downward comparison is when an individual compares himself or herself to another person whom they perceive to be worse off, and this then heightens their own self-esteem. An upward comparison is when an individual compares himself or herself to someone they perceive to be superior to them, causing feelings of depression, anger and a lack of self-worth.

The Social Comparison theory claims that people compare themselves and others (family, peers, colleagues etc) with other people and images that they see as being representative of realistically attainable goals. But what happens when the influence of media images has women now making the comparison of themselves and unrealistic goals? Why has society placed such importance upon physical beauty so much so that women begin to see their self worth as dependent upon the physical? (Dorian, 2002). For example, societal values changed drastically in Fiji when satellites and television were introduced. After 38 months of exposure to these media images, females participants (of an average age of 17) changed their societal values and body image to reflect the western values of which they had been exposed. The girls were now more body conscious and more interested in dieting, whereas before there was little talk of dieting and body satisfaction was much higher. Similarly, the same effect was found in Iran where western television was banned. Women were only shown on television with almost all of their bodies covered. It was found that Iranian women had higher body satisfaction than their American counterparts (Dorian, 2002).

### **History of the 'Ideal' Female Body**

Throughout history, the perceived standard of male and female beauty often has been unrealistic and difficult to attain. Those with money and higher socio-economic status were seen to be far more likely to be able to conform to these standards.

In the 19th century, women with tiny waists and large busts came to be valued in society. It was desirable for an upper-class man to be able to span a woman's waist with his hands. If women were too frail to work, plantation owners could justify the use of slaves (Fallon, 1994). In these times, much emphasis was placed on female fragility, which then made a woman a more attractive candidate for marriage. The ideal wealthy woman of the time was sickly and prone to headaches; and the fine art of fainting was taught in finishing

schools throughout the country. Women of significant financial means would go as far as having ribs removed to further decrease their waist size. Despite being painful and causing health problems such as shortness of breath (which could lead to pneumonia) and dislocated visceral organs, corsets became the height of fashion (Thesander, 1997).

During the time of the Second World War, body ideals changed yet again. With their husbands overseas, young women went to work so that the industry could thrive. In their spare time, some of them formed professional sports teams. Society then valued strong and physically able women. However, things changed after the war and these values shifted yet again to emphasize traditional family and gender roles. Women took to wearing dresses and skirts - highlighting the importance of fertility, thus the population favoured a more curvaceous frame consisting of wide hips, a small waste and a big bust, like that of Marilyn Monroe, one of the most famous and well-known iconic sex symbols of all time. (Brumberg, 1997)

Another major change was set to take place in the 1960s. In this era, the focus for women was on equality – both in the home and the workplace. Women of the decade yearned for the popular boyish body type, with no womanly curves - like that of the popular model, Twiggy. “Slimness came to exemplify unconventionality, freedom, youthfulness, and a ticket to the ‘Jet-set’ life in 1960s Britain, and was adopted as the ideal by women of all social classes” (Grogan, 2008). Studies and research of the female body portrayed in the media between the 1960’s and 1980’s shows a reliable move towards thinner and thinner body types and ideals; this move has remained to the present day (Grogan, 2008).

## **History of the 'Ideal' Male Body**

The study of the male body is a relatively recent phenomenon. Until the 1980s, the study of body image and attractiveness was largely restricted to women. Women's bodies have historically been represented much more frequently in the media than men's, and descriptions of women tend to be more embodied than those descriptions of men (Bordo, 2003).

In ancient Greece, men were often presented nude and statues were sculpted carefully to emphasize clearly defined and toned muscles. The male body was considered far more attractive than its female counterpart and continued to dominate art until the mid 1800's when the focus then shifted to the female body (Grogan, 2008). From then onwards, the male body was rarely publicized in art, except for paintings and photography aimed towards a homosexual audience until the 1980's. It was at this time that the male body made its reappearance in common mainstream media.

The 1980's and 1990's saw an increase in the objectification of the naked male body in photographs and advertisements that followed the typical conventions of photographing the female body – with the subjects eyes or face averted away from the camera (Pultz, 1995). Muscular actors or 'action heroes' such as Arnold Swarzenegger and Sylvester Stallone exemplified the well-muscled and toned male body ideal as portrayed in the popular media of the 1990's. The 1990's were seen as a turning point, as the male body lost its homosexual connotations, and the media felt confident and happy to use the naked male torso in mainstream advertising; selling everything from perfume to orange juice (O'Kelly, 1994).

“Once, advertisers would have been fearful of linking their products with images that might have been thought homoerotic. Now, even Marks and Spencer advertises its socks with pictures of hunky men. . . . Mainstream women’s publications such as *Marie Claire* regularly feature articles on men and their bodies and have no qualms about including revealing pictures”.

(O’Kelly, 1994: 32)

### **Current Media Influence and Health Implications**

Men and women are both represented in all forms of the media but sexual differentiation pervades all media images with the emphasis for males on muscle mass and on thinness for females (Ogden and Harris, 2003). Historical analyses of media images of women have reported that the preferred woman’s body has become consistently smaller over the past century than it had at any other time before (Orbach, 1978). It is suggested that the thin ideal is the result of successful marketing by the fashion industry that has become the standard of cultural beauty in the industrialised affluent societies of the twentieth century (Gordon, 1990). Leit, Pope and Gray (2001) calculated that the average PlayGirl centrefold man had lost 12 pounds of fat while gaining around 27 pounds of pure muscle over the last 25 years. Similarly, Pope, Katz and Hudson (1993) found that men who had ‘body-dysmorphic disorder’ became obsessed with weight lifting and training and used anabolic steroids to achieve the complete opposite effect of anorexia nervosa – to become extremely muscular.

Body image disturbance, often viewed as a continuum of satisfaction and dissatisfaction with physical appearance (Thompson, Heinberg and Tantleff-Dunn, 1999) has

been closely linked to low self-esteem, depression and social anxiety (Cash, 1990; Frederick and Morrison, 1996; Thompson, 1992). Body dissatisfaction is now recognised as a precursor to dieting and often brings about disordered eating (Twamley and Davis, 1999). The vast majority of such research has solely focused on females who, over a number of years have reported much more body disturbance than males (Rodin, Silberstein and Striegel-Moore, 1985, Thompson, 2006; Thompson et. al., 1999) but attention on males' body image has been slowly increasing (Pope, Phillips and Olivardia, 2000).

Findings from recent research has found that today, boys viewed the ideal man as having muscular legs, arms, chest, back, biceps, triceps and a good tan to finish it all off. These bodies were attributed to body-builders or sports athletes such as boxers by the boys in the study. Therefore, it is easy to see that boys learn early on in their lives that their identities are closely linked with the physical characteristics they see in body builders and athletes (Grogan and Richards, 2002). As a result of the heightened interest in male body image, Men's Health Magazines have been becoming increasingly more common in recent years. These magazines promote increased awareness of men's health issues and offer the reader definite ideals as to how to mould and shape the body into the ideal, most popular and most desirable physique (Jackson, Stevenson and Brooks, 2001).

However, it is not just men that have a view pre-defined by the media about the ideal male body. Thompson and Tantleff (1992) found that participants of both sexes evaluated men that had muscular chests positively, using descriptors such as assertive, sexually active, confident and popular. Negative descriptions such as 'lonely' and 'depressed' were given to those men with the least muscular chests, therefore it can be seen that men with muscular chests, arms, legs and of an average build are typically assigned positive personality traits.

Twenty five years ago, the average fashion model was 8 per cent thinner than the average women of the age. Today, that percentage has risen from 8 percent to 23 per cent – possibly reflecting a combination of rising obesity rates in the general population and progressively thinner body ideals. Health and fitness magazines are also targeted, articles from such magazines talk about ‘the importance of moderate diet and exercise’ but the pages of the magazines are filled with advertisements promoting appetite suppressants and diet supplements. Television shows also continue to feature thin actors and actresses in their lead roles. More recently, shows such as ‘The Swan’ (2004) ‘Dr. 90210’ (2004) which feature work from plastic surgeons and extreme makeovers has been the subject of major criticism for positively promoting unhealthy body images. In ‘The Swan’ young women are kept away from family and friends over a period of several weeks in order to undergo an intensive exercise and diet regime. The show employs the help of plastic surgeons to perform breast augmentation, facelifts and Botox and collagen injections, as well as hair stylists and make-up artists. The final make-over is showcased in a beauty-style pageant where the formally ‘ugly ducklings’ compete against each other for the acclaimed title of ‘The Swan’. Shows like these promote the ‘quick-fix’ way of losing weight and viewers often turn to such extreme ways to get the desired body instead of visiting their doctors for a healthy diet and exercise plan.

Similarly, body dissatisfaction in the male population is also observed in seeking to change the body through painful plastic surgery to achieve the ‘ideal’ male physique seen in the media, without dieting or exercise. The Belvedere Clinic in London reported that in 1989 only 10 per cent of its clients were indeed male; however, this has a big increase to 40 per cent by 1994. Procedures such as silicone pectoral implants and removal of stomach fat by liposuction or liposculpture are often the most requested (Baker, 1994). More recently, in

2003, a total of 8.7 million cosmetic surgery procedures were performed on males in the U.S.A., this showed a 28 per cent increase in procedures over just one year. (American Society of Plastic Surgeons, 2003). Further research has shown that male plastic surgery patients have a higher rate of body dissatisfaction in comparison to males in a normative sample. (Pertschuk, Sarwer, Wadden and Whitaker, 1998)

In 1986, Snow and Harris concluded that data from research indicates that overweight women have almost completely disappeared as models in women's magazines and over the past 35 years have become much thinner. In addition, studies among women have shown that those who were exposed to images of the thin ideal body showed decreased levels of body-esteem (Irving, 1990). The media representations make both men and women more dissatisfied with their bodies and weight. Research shows that the male population are being presented with increasingly more muscular and unattainable masculine body images than 1 to 2 decades ago, and are becoming more and more aware of their body image and how they look due to the targeting of young men by the advertising industry (Mort, 1988)

Children entering puberty are at a higher risk of media influence compared to any other. In the culture we live in today, magazines aimed at older age groups such as Heat, OK! and Closer have been seen to have shown images of extremely thin models, and over the past few years some of these images can even be seen in the pages of magazines aimed at young girls entering puberty. Herbozo et al (2004) shows how media that is aimed at children can contain messages putting importance on physical appearance and body stereotypes. This research suggests that socio-cultural factors like exposure to the media, dramatically influences body dissatisfaction and can often lead to the development of emotional, physical and/or mental health problems. They conclude by stating that children are extremely susceptible to media messages and are more likely to perceive imagery linked to thinness and

obesity in the media as real rather than what is actually is – artificial. The consequences of such influence can bring about negative attitudes to obesity, prejudice towards obesity and even disordered eating throughout adolescence and adult life.

Tiggemann (2002) suggests that these thin ideals that are portrayed in the media are an art of a “complex cultural script that links thinness and attractiveness to happiness”. The media seems to have an obsession with thinness shown through articles and photography of fashion models and actresses in magazines, newspapers and the internet. The celebrities featured in these articles may themselves have an eating disorder, or at least the means by which they can employ the assistance of those who are able to help them attain unnatural ideals which are unrealistic to the public. Adrian Furnham and Nicola Greaves (Grogan, 1999) wholly agree that the unavoidable failure to match the ideals portrayed in the media leads to self-criticism, guilt and self disgust - which then leads to the formation of depressed feelings about oneself, which then inevitably leads to the development of an eating disorder.

**Aims:**

The aim of this study is to investigate whether mass media has a direct influence on body-esteem and body dissatisfaction, and whether higher levels of media exposure will cause lower levels on body perception and body-esteem scales. Overall the results of this study should contribute to the literature within the fields of self-esteem, body-esteem and the effects of the media in young men and women and may serve clinically useful information which could result in interventions in schools for young girls and boys to further their awareness of the media’s influence on body image and body ideals.

This study focuses on adult male and female college students. The purpose of conducting this research is set out in the following hypotheses:

Hypothesis 1: There will be a significant difference in body esteem for males and females

Hypothesis 2: There will be a significant difference in self esteem for males and females

Hypothesis 3: There will be a significant difference in media influence over both men and women, with females being more subjective than males

Hypothesis 4: Participants who score higher on the Socio-Cultural Attitudes towards Appearance questionnaire will score lower on the Body Esteem scale

## **Method**

### *Participants*

A total of 90 participants were invited to take part in this study. Of these 90, 45 were females and 45 were males. Participants were gathered using a convenience sample via an online link posted in a browser. The surveys were posted online via Google Docs and the browser link was then attached into the News Feed within the social networking website, Facebook, or emailed directly to the participant once they had provided their email address. The purpose of the research was relayed to each participant, as well as the ethical considerations and the rights of participants during the research process.

### *Materials*

Five questionnaires were used to measure the relationship between media influence, self-esteem and body-esteem.

*Rosenberg Self-Esteem Scale, SES. (Rosenberg, 1965).*

While designed as a Guttman scale, the Rosenberg Self-Esteem Scale was used and scored as a Likert scale. The questionnaire contained 10 items intending to measure self-esteem and were answered on a four point scale ranging from strongly agree to strongly disagree. Each item was rated once, the rating goes from 0 – 5, 0 indicating that the participant strongly agrees with each statement and 5 indicating the participant strongly disagrees with each statement. Total scores range from 10 to 50 with 10 indicating very low self-esteem and 50 indicating very high self-esteem. This and the other measures incorporated into the questionnaire were posted online and were accessed via a browser link.

*The Social Comparison Scale, SCS. (Allan and Gilbert, 1995).*

This is an established measure of self-perceptions of social rank and relative social standing. The 11 items cover judgments concerned with rank, attractiveness and how well the person thinks they 'fit in' with society in comparison to others. The scale has been found to have good reliability, with Cronbach alphas of .88 and .96 with clinical populations and .91 and .90 with student populations (Allan and Gilbert, 1995, 1997).

*The Body-Esteem Scale, BES. (Franzoi and Shields, 1984)*

The Body-Esteem Scale investigates characteristics in young women and young men related to body esteem. This particular scale is closely compared with the Body Cathexis Scale – the degree of feeling satisfaction or dissatisfaction with various parts of the body. The Body-Cathexis Scale consisted of 40 questions on body parts and functions on a 5-point scale. Items were then summed and divided by 40, making the highest score a five, and the lowest score a 1. Higher scores indicated a higher degree of satisfaction with one's body.

The Body-Esteem Scale amended this by adding three gender-specific subscales like physical attractiveness, upper body strength and physical condition for men, and for the women, sexual attractiveness, weight concern and physical condition (Franzoi & Shields, 1984).

The format for the Body-Esteem Scale includes 35 items using 17 items from the Body-Cathexis Scale and 16 new items. The items are rated from 1 - 5, 1 indicating strong negative feelings and 5 indicating strong positive feelings. Three interrelated factors that describe major body-esteem dimensions are the subscales for the test. The Body Esteem Scale was correlated with the Rosenberg's Self-Esteem Scale (Rosenberg, 1965) to support

convergent validity. Total scores range from 32 to 160, with higher scores indicating a greater self-esteem in one's body.

*Socio-cultural Attitudes towards Appearance Scale – 3, SATAQ-3. (Heinberg & Thompson, 1995; Thompson et al., 1999)*

The Socio-cultural Attitudes towards Appearance Questionnaire-3 is a measure of one's endorsement of societal appearance ideals. SATAQ-3 measures multiple aspects of a societal influence upon body image and appearance in the role of both media messages and images. The questionnaire contains 30 items and is rated on a Likert scale of 5 points ranging from 'definitely disagree' to 'definitely agree' scored one to five on which best reflects their agreement with the statement. Total scores range from 30 to 150 with higher scores relating to greater internalizations and pressure felt by media to have the ideal body type.

The remaining items measured demographics and a final question asking each participant to rate their level of happiness from 1 (unhappy) to 10 (happy). In total there were 89 items. The questionnaires were completed online and the results returned in an excel file. This obviates the need for data entry by the researcher and the associated risk of human error

### *Procedure*

Initially, a pilot study was conducted to ensure the content and structure of the questionnaire, and the length of time taken to complete it was suitable for distribution. Participants were informed of the aims and nature of the research, and the web browser address was sent to 5 people. Participants were also asked to time themselves whilst answering the questionnaires to make sure it did not exceed the limit of 20 minutes. The completed questionnaire, as well as the time each participant took to complete it was returned by email. Upon receiving their responses, participants were then asked if they had any

difficulty or any other issues in completing the questionnaire, and if so, to send the feedback via email.

Permission was then sought from the supervisor, Dr. Chris Gibbons to administer the questionnaires. The questionnaire was uploaded online and the web browser address was posted on the researcher's Facebook page asking all males and females, who are attending third-level education and are above 18 years of age to complete the questionnaire along with a consent form. Replies were automatically recorded into an excel sheet and remained anonymous.

#### *Ethical considerations*

The study was approved by the University Ethics Committee. The information sheet that was administered to the participants emphasized that participation was entirely voluntary; that they were free to leave at any time; that being involved would have no affect on course progression and that confidentiality and anonymity would be maintained at all times.

#### *Data analysis.*

All data was inputted into SPSS 18 and then analyzed. Descriptive results were first taken to show the mean ages between men and women (22.18) and to identify the total scores on all scales. A Correlation Bivariate was then conducted to analyse the correlation between the predictor variables and the outcome measures e.g. between the media scale correlated against each outcome measure. T-tests were carried out to look for gender differences in each outcome measure.

## **Results**

Table 1 shows the lowest and highest scores reported, the mean and standard deviation for each of the sources of scores measured from questionnaires relating to Happiness, Social Comparison, Body-Esteem, Self-Esteem and Socio-Cultural Attitudes Towards Appearance; Tables 2 shows correlations between all tested variables; Tables 3 and 3.1 show the group statistics for gender and tested variables and the comparison of two independent samples using the t-test.

## Descriptive Statistics

**Table 1** – *Descriptives for key outcome measures*

	<b>Minimum</b>	<b>Maximum</b>	<b>Mean</b>	<b>Std. Deviation</b>
<b>Age of Participant</b>	18	25	22.18	2.144
<b>Happiness Scale</b>	1	10	6.46	2.040
<b>Social Comparison</b>	24	102	64.30	15.587
<b>Body Esteem</b>	59	161	112.20	22.196
<b>Self Esteem</b>	12	23	17.02	2.513
<b>Socio-Cultural Attitudes</b>	34	117	80.77	21.631

Table 1 shows the minimum and maximum scores calculated on each of the questionnaires as well as the minimum and maximum age of participants. It also shows the average/mean and standard deviation of the latter.

**Table 2 – Correlation between tested variables using a Pearson's R Correlation**

	<b>Age of participant</b>	<b>Socio-Cultural Attitudes Towards Appearance</b>	<b>Happiness Scale</b>	<b>Social Comparison Total</b>	<b>Body Esteem Total</b>	<b>Self Esteem Total</b>
<b>Age of participant</b>	1	-.135	.038	.030	.079	-.070
<b>Socio-Cultural Attitudes Towards Appearance</b>	-.135	1	-.282**	-.102	-.388**	.024
<b>Happiness Scale</b>	.038	-.282**	1	.601**	.742**	-.149
<b>Social Comparison</b>	.030	-.102	.601**	1	.707**	.135
<b>Body Esteem</b>	.079	-.388**	.742**	.707**	1	-.002
<b>Self Esteem</b>	-.070	.024	-.149	.135	-.002	1

As can be seen from the table above, there is a negative correlation between the age of participants and Socio-Cultural Attitudes towards Appearance (-.135), there is no correlation between age and happiness (.038), and no correlation between age and Social Comparison (.030). There is, however, a strong positive correlation between age and body-esteem (.079) and a strong negative correlation between age and self-esteem (-.070) showing that college students are particularly vulnerable to lower self-esteem.

Socio-Cultural Attitudes towards Appearance has a negative correlation with happiness (-.282). Similarly, Social Comparison and Socio-Cultural Attitudes Towards

Appearance show a strong negative correlation (-.102) and Socio-Cultural Attitudes Towards Comparison and body-esteem also shows a negative correlation (-.388) which supports the fourth hypothesis that states that 'Participants who score higher on the Socio-Cultural Attitudes towards Appearance questionnaire will score lower on the Body-Esteem Scale.' However, self-esteem has no correlation with Socio-Cultural Attitudes towards Appearance (.204)

Happiness and Social-Comparison show a positive correlation (.601) as does Happiness and Body Esteem (.742). Happiness and Self-Esteem have a negative correlation (-.149)

Social Comparison and Body-Esteem have a positive correlation (.707) but surprisingly Social-Comparison and Self-Esteem was found to have no correlation at all (.135)

**Table 3 – Group statistics for gender**

	<b>Gender</b>	<b>Mean</b>	<b>Std.Deviation</b>	<b>Std.Error Mean</b>
<b>Happiness Scale</b>	Male	6.22	1.976	.295
	Female	6.71	2.096	.312
<b>Social Comparison</b>	Male	64.44	17.969	2.679
	Female	64.16	17.398	2.593
<b>Body Esteem</b>	Male	113.84	23.377	3.485
	Female	110.56	21.083	3.143
<b>Self Esteem</b>	Male	17.02	2.800	.417
	Female	17.02	2.221	.331
<b>Socio-Cultural Attitudes Towards Appearance</b>	Male	71.73	19.721	2.940
	Female	89.80	19.763	2.946

**Table 3.1 – Independent Samples T-test**

	<b>t</b>	<b>Df</b>	<b>Sig. (2-tailed)</b>	<b>Mean Difference</b>
<b>Happiness Scale</b>	-1.139	88	.258	-.489
<b>Social Comparison</b>	.077	88	.938	.289
<b>Body Esteem</b>	.701	88	.485	3.289
<b>Self Esteem</b>	.000	88	1.000	.000
<b>Socio-Cultural Attitudes Towards Appearance</b>	-4.341	88	.000	-18.067

## **Inferential Statistics**

### *T-test Analysis*

Hypothesis one proposed “there will be a significant difference in body esteem for males and females.” In order to determine this, an independent samples T-test was conducted to compare body-esteem scores for male and female participants. The results from this test indicated that there was not a statistically significant difference in the mean body-esteem for males and females. There was no significant difference for males [M=113.84, SD=23.3] and females [M=110.56, SD=21.083;  $t(88)=.701$ ,  $p=.485$ ]. The magnitude of the difference in the means was rather small. Thus, hypothesis one was not supported.

Hypothesis two proposed “there will be a significant difference in self-esteem for males and females”. In order to determine this, an independent samples T-test was conducted to compare self-esteem scores for males and females. There was not a statistically significant difference in the mean self-esteem scores for male and female participants. There was no significant difference for males [M=17.02, SD=2.800] and females [M=17.02, SD=2.221;  $t(88)=.000$ ,  $p=1.00$ ]. The magnitude of the difference in the means was very small. Thus, hypothesis two was not supported.

Hypothesis three proposed “there will be a significant difference in media influence over both men and women, with females being more subjective than males”. In order to determine this, an independent samples T-test was conducted to compare media influence from the Socio-Cultural Attitudes towards Appearance questionnaire for male and female participants. There was a significant difference between media influence scores for males

[M=71.73, SD=19.72] and females [M=89.80, SD=19.76,  $t(88) = -4.34$ ,  $p = .000$ ]. The magnitude of the difference in the means was quite large, with females having a higher mean than males. Thus, hypothesis three was supported.

#### *Pearson's R Correlation Analysis*

A series of Pearson R correlation analyses were conducted to examine the relationship between body-esteem and Socio-Cultural Attitudes towards Appearance for males and females.

Hypothesis four proposed “participants who score higher on the Socio-Cultural Attitudes towards Appearance questionnaire will score lower on the Body-Esteem Scale”. In order to determine this, a Pearson's Correlation was conducted to compare the Body-Esteem scores and Socio-Cultural Attitudes towards Appearance scores for males and females. Socio-Cultural Attitudes towards Appearance and Body-Esteem showed a negative correlation (-.388). Thus hypotheses four was supported.

## Discussion

### **Introduction**

The research carried out investigated the media's influence on body-esteem and body dissatisfaction among male and female college students in Ireland. The research focused on different patterns of body disturbance and media influences from a number of outlets. These included; Rosenbergs Self Esteem Questionnaire (Rosenberg, 1965), which is a 10-item self-report measure of global self-esteem. It consists of 10 statements related to overall feelings of self-worth or self-acceptance; The Body-Esteem Questionnaire (Franzoi & Shields, 1984) which measures different dimensions of body satisfaction and The Social Comparison Scale (Allan & Gilbert 1995) which measures self-perceptions of social rank and relative social standing. The study also included Socio-Cultural Attitudes Towards Appearance (Heinberg & Thompson, 1995; Thompson et al., 1999) which is a measure of one's endorsement of societal appearance ideals, whilst looking at level of interest in magazines, celebrity culture, movies and other forms of mass media which promote a thin body ideal, and finally, a one item scale asking the participant to rate their level of happiness (1 being unhappy, and 10 being happy). The research was determined to uncover how each of these measures would affect both male, and female college perspective in Ireland. Some of the scales or questionnaires may have appeared long to the respondent – with some of the questionnaires containing 30-35 items, however, they pinpointed very relevant issues relating to them and body image dissatisfaction.

## **Interpretations of findings**

### **Hypothesis one:**

“There will be a significant difference in body esteem for males and females”.

Results indicated from hypothesis one, that there was not a statistically significant difference in the mean body esteem scores for male and female college students. Thus, hypothesis one was not supported as both male and female participants' experience similar levels of body esteem.

The current result found that, although there was not a significant difference in the mean body-esteem scores between male and female participants, they do however indicate that it is not only women but also men who score relatively low in terms of body-esteem, and in regards to this case, with men scoring slightly higher. Research carried out by Franzoi et al (2012) supports this, as similar results were found in a recent study that examined similarities and differences in women and men's comparison tendencies and perfection beliefs when evaluating their face, body shape and physical abilities, as well as how these tendencies and beliefs relate to their body-esteem. Results concluded that women were more likely than men to compare themselves to the same sex whom they perceived as having either similar or better physical qualities than themselves. More men than women held body perfection beliefs for all three body domains, and men were most likely to rely on future temporal comparison when evaluating their body shape. Comparison tendencies and perfection beliefs also were differentially related to women's and men's body-esteem: Whereas women relied on self-critical social comparison strategies associated with negative body-esteem, men's comparison strategies and perfection beliefs were more self-hopeful.

Further research supporting this infers that across gender, females report more issues and greater concern about their weight and 'drive for thinness', leading to lower self-esteem and body-esteem, whereas males reported a greater drive for muscularity. The relationship between weight concerns, self-esteem and body-esteem was stronger for females, and for males, greater self-esteem and body-esteem was associated with a greater drive for muscularity and fitness . However, according to Gingras et al (2004) body image dissatisfaction has become so widespread and prevalent in society that it is commonly termed a 'normative discontent', and this is especially evident among women. The present study concluded that men are showing similar body esteem-scores. Thus it may be speculated that we are all, including men, more obsessed with our appearance and speculation may suggest that males in modern society, have become overly concerned with their looks.

Fredrickson and Roberts (1997), Phillips and de Man (2010) and Wong et al (2009) all found that being slim brings with it 'personal success, popularity and attractiveness' therefore females are typically socialised into the current perception of the ideal woman. Thus, a possible reason for low scores on female body-esteem measures could be stemming from this perceived idea that if you are not slim, you are not attractive.

### **Hypothesis two:**

“There will be a significant difference in self-esteem for males and females”.

Results indicated from hypothesis two that there was not a statistically significant difference in the mean self-esteem scores for male and female college students. Thus hypothesis two was not supported as both male and female participant's experienced similar

levels of self-esteem.

The present results did not support the second hypothesis, as it concluded that, there was not a statistically significant difference in self-esteem for male and female college students. Research carried out by Nauert (2011) discovered men and women have comparable self-esteem during adolescence and early adulthood and that among both genders, self-esteem increases during adolescence, then slows in young adulthood. The American Psychological Association (2011) found similar results “contrary to popular belief, there is no significant difference between men’s and women’s self-esteem during either of those life phases”

Results still indicated that the margin between male and female levels of self-esteem was very small. The University of Wisconsin-Madison carried out research out 150,000 respondents of the Psychology department of the University stating “Popular assumptions about a cavernous self-esteem gender gap may be greatly exaggerated”. The University of Wisconsin-Madison study, led by Professor Janet Shibley-Hyde and researcher Kristen Kling, consisted of an analysis of hundreds of self-esteem studies done since 1987. Researchers concluded that males have only slightly higher levels of self-esteem than females across most ages.

However, gender and self-esteem studies in a wide range of western countries have determined that adolescent females, on average, have a lower sense of self-esteem than adolescent males (Baumeister, 1993; Pipher, 1994). These findings, whilst not completely supportive of this current research, give an indication as to why male participants, although nearly on par with female participants, scored slightly higher in the self-esteem questionnaire.

Kling (1999) further supports this with research from two analyses. In analysis one, a computerized literature search yielded 216 effect sizes, that represented the testing of 97,121 respondents. The overall effect size showed a small difference favouring males. In Analysis two, gender differences were examined, using 3 large nationally representative data sets from the National Centre for Education Statistics (NCES). All of the NCES effect sizes, which collectively summarize the responses of approximately 48,000 young Americans, indicated higher male self-esteem. Taken together, the two analyses provide evidence that males score higher on standard measures of self-esteem than females, but the difference is relatively small.

Further results indicated that levels of self-esteem do not differ greatly across gender. Marčić and Grum (2011) asked a total of 339 participants, aged from 19 to 63 years, to fill out various questionnaires including 'Adult Sources of Self-Esteem Inventory', 'Rosenberg Self-Esteem Scale', 'Instability of Self-Esteem Scale' and 'Contingent Self-Esteem Scale'. The results showed that males and females do not differ in self-esteem or self concept.

Research has shown that self-esteem differences in gender come to light in mid to late adulthood, and the sample for the current research was college students mainly between the ages of 18 and 25 - showing why the results from this study concluded that there was no significant difference between male and female scores of the respective measures.

**Hypothesis three:**

“There will be a significant difference in media influence over both men and women, with females being more subjective than males”.

Results indicated from hypothesis three that there was a statistically significant difference in the mean Socio-Cultural Attitude towards Appearance – media influence scale scores for male and female college students. Thus hypothesis three was supported as female participants scored much higher than male participants on the Socio-Cultural Attitudes towards Appearance questionnaire (SATAQ).

The present results supported the third hypothesis, as it concluded that, there was a statistically significant difference in the levels of media influence from SATAQ scores for male and female college students.

Heinberg, Thompson, and Stormer (1995) introduced the Socio-cultural Attitudes towards Appearance Questionnaire (SATAQ) to measure awareness of cultural beauty standards, particularly the thin body ideal, and the degree to which the standards have been internalized. As found across a wide range of research, when it comes to media influence and body dissatisfaction, women are always more influenced by it than men. Rozin and Fallon (1988) found that both college women and the mothers of college women were dissatisfied with their bodies and desired to be thinner. Although their sample of mothers, born around 1940, and their sample of daughters, born in the late 1960s, would appear to have been exposed to quite different body ideals during their formative years, Rozin and Fallon found that their samples did not differ in their level of body dissatisfaction. Subsequent studies have replicated these results and reported high levels of body dissatisfaction among women of all

ages but no evidence of generational differences in the degree of body dissatisfaction (e.g., Lamb et al., 1993; Stevens & Tiggemann, 1998; Webster & Tiggeman, 2003).

Research carried out by Cashel et al (2003) evaluated the utility of the Socio-cultural Attitudes Towards Appearance Questionnaire (SATAQ; L. J. Heinberg, J. K. Thompson, & S. Stormer, 1995) for the assessment of diverse college groups, including men, women, minorities, and sorority members. Significant group differences were observed on the scales assessing awareness of socio-cultural pressures to be thin and internalization of these attitudes. These scores were highest among the Caucasian women.

Social media represents an identity that is modern, connected, and more often than not, rather daring. It is an identity that is understood to be comfortable with a certain amount of transparency, promotes information, and has a global outlook, as technology crosses various boundaries. It is participative in nature, and this opportunity to add new layers to their identities is part of what makes social media so attractive to women, this could be a possible explanation for the underlying reason as to why women are more influenced by media than and media ideals than men, they get 'sucked' into the idea of it and the idea that surrounds it, and as a result are more subjective.

**Hypothesis four:**

“Participants who score higher on the Socio-Cultural Attitudes towards Appearance questionnaire will score lower on the Body-Esteem scale”

Results indicated from hypothesis four that there was a negative correlation between Socio-Cultural Attitudes towards Appearance and Body-Esteem showing that the higher the

participants scored on the Socio-Cultural measure (the more influence you have from media ideals) the lower your score becomes on the Body-Esteem measure. Thus hypothesis four was supported.

The present results supported the fourth hypothesis, as it concluded that, there was a negative correlation between the levels of media influence from taken from the SATAQ scores and the levels of body-esteem for male and female college students.

According to Leon Festinger's (1954) social comparison theory, individuals have a tendency to rate and evaluate themselves through comparisons with others. Such comparison-based evaluations increase with perceptions of similarity. Social comparison theory differentiates between two types of comparisons: downward and upward. When one downwardly compares, or compares oneself to those perceived as worse off, one exhibits heightened self-esteem and decreased anger. However, when one upwardly compares, or compares oneself to those seen as being superior, increases in depression and anger are felt, as well as a decrease in feelings of self-worth and body satisfaction. With regards to the current research, this is a theory that can explain the negative correlation between the two variables of body-esteem and Socio-Cultural Attitudes towards Appearance; because celebrities' images are readily visible to the public, they become social references for many individuals. Though we might not always see celebrities as similar to ourselves, The Social Comparison Theory also holds that we seek out individuals with highly valued assets with whom to upwardly compare ourselves.

This theory helps explain the drive for thinness many women with eating disorders express. For the average person, an upward comparison would be a comparison of one's self

with a highly thin and attractive media depicted model (Cattarin, 2000). This helps explain a possible correlation or link between media exposure and its subsequent effects on body image, drive for thinness, and other eating disorder symptoms. If we see individuals on television or in magazines, billboards and advertisements that we perceive as having qualities that are highly discrepant from our own self-image, we are increasingly motivated to close the gap (Botta, 2000).

Further supportive research comes from Dorian (2002) when it was found that societal values changed drastically in Fiji when satellites and television were introduced. After 38 months of exposure to these media images females (of an average age of 17) changed their societal values and body image to reflect the western values of which they had been exposed. The girls were now more body conscious and more into dieting whereas before there was little talk of dieting and body satisfaction was much higher. Similarly, the same effect was found in Iran where western television was banned. Women were only shown on television with almost all of their bodies covered. It was found that Iranian women had higher body satisfaction than their American counterparts.

In addition, research conducted by Snow and Harris (1986) concluded that data from research indicates that overweight women have almost completely disappeared as models in women's magazines and over the past 35 years have become much thinner. In addition, studies among women have shown that those who were exposed to images of the thin ideal body showed decreased levels of body-esteem (Irving, 1990).

## **Implications of research**

Sexuality was an implication within this research, as the researcher did not ask any participants involved what their sexuality was. Research has shown that sexuality does in fact have quite a large impact on body image and body satisfaction. Many researchers, particularly within the feminist tradition, have focused on the social pressures experienced by women to conform to a particular or ideal body shape in order to be more attractive to men. Charles and Kerr (1986) found that most women within their research wanted to stay slim in order to maintain a sexual relationship with a partner, showing that for heterosexual females, body dissatisfaction stems from a key factor – perceived pressure from sexual partners. In support of this research, Cash (2004) reported that women who have a negative body perception experience fear of intimacy in sexual relationships. These findings were supported by research carried out in another study, Lamb et al (1993) found that women tended to believe that men preferred a much more slimmer figure, than the figure or body shape the men themselves actually chose.

With regard to homosexual females, there has been very little research carried out in relation to the degree of pressure exerted on women who choose female sexual partners, although the general consensus is that lesbians are under considerably less pressure to be slender or thin than heterosexual women. A study by Striegel-Moore et al (1990) in the U.S.A found that heterosexual women and homosexual women did not greatly differ in their degree of body dissatisfaction, although it was noted that the lesbian group had higher levels of self-esteem a much lower frequency of dieting. In 2004, Conner et al concluded that both homosexual and heterosexual women are under mainstream pressure from society to be thin,

and that gender may make a better predictor of eating and exercise motivations than sexuality.

Most studies have found that homosexual males are less satisfied with their bodies than heterosexual men. Possible reasons for the latter could be the pressures that they receive from the gay community, as it is generally agreed that gay male sub-culture places an elevated importance on the appearance of the body (Lakoff and Scherr, 1984). Gay men may be under much more extreme pressure than heterosexual males in relation to body image, in a context which they are the objects of the male gaze (Atkins, 1998). Studies of body satisfaction in gay men generally suggested that there is a tendency to show much higher levels of body concern and body dissatisfaction than heterosexual men. Mare Mishkind et al (1986) found that homosexual males expressed greater dissatisfaction with body shape, waist, biceps, arms and stomach. There was a greater discrepancy between ideal and actual body shape and a greater preoccupation with weight. Tiggemann (2003) focused on an Australian sample of 52 gay men, 55 gay women and 51 heterosexual men. Findings concluded that homosexual males scored higher than the other two groups on drive for muscularity and drive for thinness. There were no differences found for self-esteem when compared to heterosexual men, however it was found that both of the groups scored higher on self-esteem than women.

Ethnicity was another implication that was noticed by the researcher, previous research has proven that the ethnical background of a person is related to cultural influence. It is important to note here, that less research focuses on men when it comes to body dissatisfaction and body-esteem, and even less research has been done on ethnical differences and body satisfaction in the male population. (Grogan, 1999)

In 1998, Molloy and Herzberger created a quantitative survey based on self-esteem and body image among African Americans and Caucasian female students. There were a higher number of Caucasian participants, totalling 69, compared to African American participants, of which there were 45. Even with the smaller sample number, African American women showed much higher levels of self-esteem and were more positive about body image than Caucasian women. Molly and Herzberger (1998) chose to focus on a community college across America to widen the results, as the majority of previous research carried out on Ethnicity and body image, solely focused on adolescent females.

Further supporting the latter, Ahmed, Waller, and Verduyn (1994) found that Asian schoolgirls living in the United Kingdom were more satisfied with their weight than their Caucasian counterparts.

The figure rating scale was used to measure responses of Caucasian, Kenyan, and Asian-decent individuals resident in the United Kingdom. It was concluded that Caucasians attributed more positive characteristics to the thinner figures on the scale than any of the other ethnic groups used in the study. (Furnham and Alibhai, 1983). Similarly, Furnham and Baguma (1994) presented thin and fat figures to native British participants and native Ugandan participants. As previously hypothesised by the researchers, the Ugandan participants rated the heavier set figures on the scale much more positively than the British participants did.

Thus it is clear to see from previous literature, that Caucasian women tend to be more concerned about their weight than that of any other ethnic group, but little research has been conducted on males, body image and ethnicity.

## **Limitations**

Limitations were present within this research as it was carried out in partial fulfilment of the requirements of an undergraduate degree. As the research required certain questionnaires and scales to be used that would uphold the ethics committee, it became difficult to find particular measures that would be suitable for completion in a college environment. In addition, a time limit of twenty minutes was given to complete all the relevant questionnaires, so it would not take over the participants' time.

A major limitation in the current research was that the data collected from the questionnaires and scales was rather narrow and some of the answers did not always reflect how the person may really feel about a subject, so there was the possibility of having to pick an answer that was the closest match, rather than it being an exact answer as there were no spaces or opportunities for the participants to elaborate further.

A subsequent limitation was the sample size. The current study gathered data from 90 participants, including 45 male participants and 45 female participants. A bigger sample may have established a better or more conclusive result as it would have provided a more accurate description of body esteem, self esteem, body dissatisfaction and media influence in an Irish Society.

The age of the participant was another limitation. In the demographic data section of the questionnaire the researcher did not consider any college students to be under the age of eighteen, therefore, those who were under the age of eighteen either did not answer or may have claimed that they were eighteen years old. However, it was the case that the researcher was only looking for participants over the age of eighteen, due to ethical considerations. It may have also served useful to have a much wider age range, since the research was aimed at

college students the age range could have been extended to cater for mature students as well as undergraduates.

Furthermore, the choice of data was Quantitative Research, which held its own limitations as it restricted the participants in their choice of answer, forcing them to answer questions using a Likert Scale. If the data were to be Qualitative, an in depth analysis could have been carried out and as a result, the data collected may have differed. For time considerations, qualitative research was not possible to complete.

There were also problems with the layout of some of the questionnaires; they could have been made more user-friendly. The Rosenberg Self Esteem Questionnaire, The Socio-Cultural Attitudes towards Appearance Questionnaire, and The Body Esteem Questionnaire were all set out as a 5 point Likert scale. Some of the questions were worded in such a way where there was a possibility that the questionnaire could become confusing, and in order for the participant to answer correctly, they would have to keep referring back to the 5 point Likert scale to choose the correct answer. This could have become quite tedious resulting in the possibility of participants guessing which number correlated to a particular point on the scale.

There were also limitations with the Socio-Cultural Attitudes towards Appearance Questionnaire. Whilst it did cater for male and female participants, there were some questions that were aimed more towards a female audience, such as 'I do not feel pressure from TV or magazines to look pretty'. The same question worded differently could have been included to keep a balance between the genders, which in turn would have got a more accurate result. On the whole, further questions relating to different types of media, such as the internet, could have been included, instead of simply asking questions about models, television and magazines.

Finally, general limitations for the present study are that it did not account for individual physical and psychological factors that may influence individual body concerns. In addition, it did not account for variables such as peer pressure, as previous research has shown that peers are the most influential factor that contributes to women's low body esteem. Peer pressure on women and men emerged as more important than media influences. (Sheldon, 2012)

### **Future research**

With regard to future research, the implications that are stated above (limitations of the present study) should all be considered.

Additional aspects that should be considered within the research is the subject of ethnicity (as mentioned previously). Much of the research on gender differences, media influence, body dissatisfaction and self-esteem has shown that there are many differences among the latter between ethnicity groups (Molloy and Herzberger, 1998, Smith et al, 1999).

In addition, another aspect that should be considered within the research is a hypothesis based around age differences in a much wider context, as much of the research looks at a specific age group or groups.

Finally, research on sexuality and body image has given strong implications that homosexual males suffer far more from body dissatisfaction and poor body-esteem than any other group, for that reason, it also needs to be considered within research (Hatfield and Sprecher, 1986).

## **Conclusion**

Throughout history, body image has been determined by various factors, including politics and media. Exposure to mass media (television, movies, magazines, Internet, art etc) has been found to be a major predictor in body esteem levels and body dissatisfaction. The messages that the media portray can be very influential, and the 'thin ideal' put across can have the potential to cause damaging effects on both men and women's self-esteem, body esteem and body satisfaction as people have the tendency to compare themselves to the ultra-thin, airbrushed models we see in the media.

This research did not support its first hypothesis 'there will be a significant difference in body esteem for males and females'. It has, however, proven that body dissatisfaction is on the rise among the male college students, and that as a group, they are more body conscious and aware of their looks now, when compared with previous decades.

The current research did not support its second hypothesis 'there will be a significant difference in self-esteem for males and females' which again, shows that male college students are now more in sync with that of female college students when it comes body perfect ideals.

The current research was supported by the third hypothesis 'there will be a significant difference in media influence over both men and women, with females being more subjective than males'. Thus showing that although body-esteem levels were very similar for both genders, media is still found to hold a more powerful influence over the female population.

Lastly, the current research supported the fourth hypothesis ‘participants who score higher on the Socio-Cultural Attitudes towards Appearance questionnaire will score lower on the Body-Esteem Scale’ which clearly shows that media is one of the most powerful predictors of negative body-esteem levels and body dissatisfaction.

## References

Ahmad, S., Waller, G., & Verduyn, C. (1994). Eating attitudes among Asian school girls: The role of perceived parental control. *International Journal of Eating Disorders*, 15, 91–97

Allan, S. & Gilbert, P. (1995). A social comparison scale: Psychometric properties and relationship to psychopathology. *Personality and Individual Differences*, 19, 293-299.

American Psychological Association (2011) Retrieved March 27<sup>th</sup> 2012 from:

<http://www.apa.org/news/press/releases/2011/07/youth-self-esteem.aspx>

American Society of Plastic Surgeons. (2003). *Journal of the American Society of Plastic Surgeons*. Lippincott Williams and Wilkins. U.S.A.

Atkins, D. (ed.) (1998) *Looking queer: Body image and identity in lesbian, bisexual, gay and transgender communities*, New York: Harrington Park Press.

Baker, P. (1994). Under pressure: what the media is doing to men. *Cosmopolitan*. November, 129 – 132.

Baumeister, R.F. (Ed.), (1993). *Self-esteem: The puzzle of low self-regard*. New York: Plenum.

Berschied, E., Walster, E., and Bornstedt, G. (1973). 'The happy American body: a survey report.' *Psychology Today*, 7, 119 – 131.

Body attitude, gender, and self-concept: A 30-year perspective (2001). *Journal of Psychology*, 4, 413-429.

Bordo, S. (2003) *Unbearable weight: Feminism, Western culture, and the body* (10th anniversary edn), Berkeley, CA: University of California Press.

Botta, R. A. (2000). The mirror of television: A comparison of Black and White adolescents' body image. *Journal of Communication*, 50, 144-159.

Cattarin, J., Thompson, J. K., Carmen T., & Robyn, W. (2000). Body image, mood, and televised images of attractiveness: The role of social comparison. *Journal of Social and Clinical Psychology*, 19, 220-239.

Cash, T. F. (1990). The Psychology of physical appearance: Aesthetics, attributes and images. Cited in T.F Cash and T. Pruzinsky (Eds.), *Body images: Development, deviance and change*. New York: Guilford Press.

Cash, T. F. (2004). Understanding Body Images: Historical and Contemporary Perspectives. Cited in T.F. Cash and T. Pruzinsky (Ed.), *Body Image: A handbook of theory, research, and clinical practice*. New York. The Guilford Press.

Cash, T.F. (2004) 'Body image: Past, present and future,' *Body Image: An International Journal of Research*, 1: 1-5.

Cashel, M. L., Cunningham, D., Landeros, C., Cokley, K., and Muhammad, G. (2003) Socio-cultural attitudes and symptoms of bulimia: Evaluating the SATAQ with diverse college groups. *Journal of Counseling Psychology*, Vol 50(3), 287-296

Charles, N. and Kerr, M. (1986) 'Food for feminist thought,' *Sociological Review*, 34: 537–72.

Chaudhary, V. (1996). 'The state we're in.' *The Guardian*, 11<sup>th</sup> June, 14.

Conner, M., Johnson, C. and Grogan, S. (2004) 'Gender, sexuality, body image and eating behaviours,' *Journal of Health Psychology*, 9(4): 505–15.

Dorian, L., and Garfinkel, P. (2002). Culture and body image in western culture: *Eating and Weight Disorders*. 7(1), 1-19.

Fallon, P. (1994) *Feminist Perspectives on Eating Disorders*. New York, Guilford Press.

Festinger, L. (1954) A theory of social comparison processes. *Human Relations*, 7, 117–140.

Frederick, C. M., and Morrison, C. S. (1996). Social physique anxiety: Personality constructs motivation, exercise attitudes and behaviours. *Perceptual and Motor Skills*, 82(1), 963 – 972

Franzoi, S.L. & Shields, S.A. (1984). The Body-Esteem Scale: Multidimensional structure and sex differences in a college population. *Journal of Personality Assessment*, 48, 173-178.

Fouts, G., and Burgaff, K. (2000). Television situation comedies: Female weight, male negative comments and audience reactions. *Sex Roles*, 42, 483 – 491.

- Fredrickson, B. L., and Roberts, T. A. (1997). Objectification Theory: Towards Understanding Womens Lived Experiences and Mental Health Risks, 173 – 206.
- Furnham, A., & Alibhai, N. (1983). Cross-cultural differences in the perception of female body shapes. *Psychological Medicine*, 13, 829–837.
- Furnham, A., & Baguma, P. (1994). Cross-cultural differences in the evaluation of male and female body shapes. *International Journal of Eating Disorders*, 15, 81–89.
- Furnham, A., and Greaves, N. (1994). ‘Gender and locus of control correlates of body image dissatisfaction.’ *European Journal of Personality*, 8, 183 – 200.
- Gingras, J., Fitzpartick, j., McCargar, L. (2004). Body Image of Chronic Dieters: Lowered Appearance Evaluation and Body Datisfaction. *Journal of the American Dietetic Association*, 1589 - 1592
- Gordon, R. (1990). *Anorexia and bulimia: anatomy of a social epidemic*, Oxford: Blackwell.
- Grogan, S. (1999). *Body Image*. Routledge. London, United Kingdom.
- Grogan, S. (1999). *Body image: understanding body dissatisfaction in men, women and children*. London: Routledge.
- Grogan, S. (2008). *Body image: Understanding body dissatisfaction in men, women, and children* (2nd ed.). East Sussex: Routledge. London, United Kingdom.

Grogan, S., and Richards, H. (2002). Body image: Focus groups with boys and men. *Men and Masculinities*, 4(3), 219-232.

Grogan, S., and Wainwright, N. (1996). 'Growing up in the culture of slenderness: girls' experiences of body dissatisfaction.' *Women's Studies International Forum*, 19, 665 – 673

Guinn, B., Semper, T., Jogensen, L. and Skaggs, S. (1997). 'Body image perception in female Mexican American Adolescents.' *Journal of Adolescent Health*, 15, 464 – 472

Hatfield, E., and Sprecher, S. (1986) Mirror, mirror: the importance of looks in everyday life. Retrieved on 27<sup>th</sup> March 2012, from:  
<http://books.google.ie/books?id=xkxyillgxyUC&pg=PA29&lpg=PA29&dq=Hatfield+and+Sprecher,+1986+sexuality+and+body+image&source=bl&ots=Xqw0ZOebz1&sig=NQThllq4CVSZxzFDrXIB1YT2exw&hl=en&sa=X&ei=gStyT-nIB-HM0QWIm6UC&ved=0CCIQ6AEwAA#v=onepage&q&f=false>

Herbozo, S., Tantleff-Dunn, S., Gokee-Larose, J., and Thompson, J. K. *Beauty and Thinness Messages in Children's Media: A Content Analysis*. *Eating Disorders: The Journal of Treatment and Prevention* (2001 – 2004) Vol 12. No. 1. Spring 2004, 21 – 34.

Heinberg, L. J., Thompson, J. K., & Stormer, S. (1995). Development and validation of the Sociocultural Attitudes Toward Appearance Questionnaire. *International Journal of Eating Disorders*, 17, 81–89.

Henriques, G., & Calhoun, L. G. (1999). Gender and ethnic differences in relationship between body esteem and self-esteem. *Journal of Psychology*, 4, 357-368

Irving, L. M. (1990). Mirror images: effects of the standard of beauty on the self and body-esteem of women exhibiting various levels of bulimic symptoms. *Journal of College Student Psychotherapy*, 3, (2-4), 57 – 73.

Jackson, P., Stevenson, N, and Brooks, K. (2001). *Making Sense of Men's Magazines*. Oxford: Polity Press.

Kling, C., Hyde, J., Showers, J., Buswell, B. (1999) Gender differences in self-esteem: a meta-analysis. *Psychological Bulletin*, Vol 125(4), 470-500.

Lakoff, R.T. and Scherr, R.L. (1984) *Face value: The politics of beauty*, Boston: Routledge and Kegan Paul

Lamb, C. S., Jackson, L. A., Cassiday, P. B., & Priest, D. J. (1993). Body figure preferences of men and women: A comparison of two generations. *Sex Roles*, 28, 345–358.

Leit, A., Pope, Jr., H. G., and Gray, J. J. (2001). 'Cultural expectations of muscularity in men: The evolution of playgirl centrefolds.' *International Journal of Eating Disorders*, 29(1), 90 – 93

Marcic, R., and Grum, D, K., (2011) Gender Differences in Self-Concept and Self-Esteem, Components. *Studia Psychologica*; Vol53(4), 373 – 384.

Mishkind, M. E., Rodin, J., Silberstein, L. R., and Striegel-Moore, R. H. (1986) The Embodiment of Masculinity. *American Behavioural Scientist*, 29(5), 545 – 562.

Molloy, B., & Herzberger, S. (1998). Body Image and Self-Esteem: A Comparison of African-American and Caucasian Women. *Sex Roles*, 38 (7-8), 631-643.

Mort, F. (1988). 'Boys own? Masculinity, style and popular culture'. Cited in R. Chapman

and J. Rutherford (Eds.), *Male order: unwrapping masculinity* London: Laurence and Wishart.

Nauert, R. (2011) 'Males, Females Have Similar Self-Esteem Issues in Early Adulthood' Retrieved March 27<sup>th</sup> 2012 from: <http://psychcentral.com/news/2011/07/15/males-females-have-similar-self-esteem-issues-in-early-adulthood/27783.html>

Ogden, J. (2000). *Health Psychology a textbook*. 2<sup>nd</sup> Edit. Open University Press. Great Britain.

Ogden, J., and Harris, (2003). *The psychology of eating: form healthy to disordered behaviour*. Oxford. Blackwell.

O'Kelly, L. (1994) 'Body talk,' *The Guardian*, 23 October: 30–2.

Orbach, S. (1978). *Fat is a Feminist Issue...How to Lose Weight Permanently Without Dieting*. London: Arrow Books.

Orbach, S. (1993). *Hunger strike: the anorectic's struggle as a metaphor for our age*. London: Penguin.

Pertschuk, M. J., Sarwer, D. B., Wadden, T. A. and Whitaker, L.A. (1998). Body image dissatisfaction in male cosmetic surgery patients. *Aesthetic Plastic Surgery*, 22, 20 – 24.

Phillips, N., and de Man, A. (2010). Weight Status and Body Image Satisfaction in Adult Men and Women. *North American Journal of Psychology*, 12(1), 171 – 183.

Pipher, M. (1994). *Reviving Ophelia: Saving the selves of adolescent girls*. New York: Ballantine.

Pope, H., Katz, D. And Hudson, J. (1993) 'Anorexia nervosa and "reverse anorexia" among 108 male bodybuilders', *Comprehensive Psychiatry*, 34, 406 – 409.

Pope, H. G., Phillips, K. A., and Olivardia, R. (2000). *The Adonis Complex: The secret crisis of male body obsession*. New York: The Free Press.

Posovac, H. D., Posovac, S., and Posovac, E. (1998). Exposure to media images of female attractiveness and concern with body weight among young women. *Sex Roles*, 38, 187 – 201.

Rodin, J., Siberstein, L. R., and Striegel-Moore, R. H. (1985) Women and weight: A normative discontent. Cited in T.B. Sonderegger (Ed.), *Nebraska Symposium on Motivation*. Vol. 32. *Psychology and gender* (pp. 267 – 307). Lincoln, NE: University of Nebraska.

Rosenberg, M. (1965). *Society and the adolescent self-image*. Princeton, NJ: Princeton University Press.

Rosenberg, M. (1986). *Conceiving the Self*. Krieger: Malabar, FL.

Schilder, P. (1950). *The image and appearance of the human body*. New York: International Universities Press.

Sheldon, P. (2012) Pressure To Be Perfect: Influences on College Students' Body Esteem. *Southern Communication Journal*, Vol 75(3), 227 – 298

Smith, D., et al. (1999). Body image among men and women in a biracial cohort: the CARDIA study. *International Journal of Eating Disorders*, 25 (1), 72-82.

Striegel-Moore, R.H., Tucker, N. and Hsu, J. (1990) 'Body image dissatisfaction and disordered eating in lesbian college students,' *International Journal of Eating Disorders*, 9: 493–500.

Rozin, P., & Fallon, A. (1988). Body image, attitudes toward weight, and misperceptions of figure preferences of the opposite sex: A comparison of men and women in two generations. *Journal of Abnormal Psychology*, 97, 342–345.

Snow, J. T. and Harris, M. B. (1986). 'An analysis of weight and diet content in five women's interest magazines.' *The Journal of Obesity and Weight Regulation*, 5, 194 – 214.

Stevens, C., & Tiggemann, M. (1998). Women's body figure preferences across the life span. *Journal of Genetic Psychology*, 159, 94–102.

Thesander, M. (1997) *The Feminine Ideal*. Reaktion Books, London, United Kingdom.

Thompson, J. K., Heinberg, L. J., and Tantleff, S. (1991). The physical Appearance Comparison Scale (PACS). *The Behaviour Therapist*, 14, 174.

Thompson, J. K. (1992). Body Image: Extent of disturbance, associated features, theoretical models, assessment methodologies, intervention strategies and a proposal for a new DSM-IV diagnostic category body image disorder. Cited in M. Herson, R. M. Eilser and P. M. Miller (Eds.), *Progress in behaviour modification category (pp. 3 -54)*. Sycamore, IL: Sycamore Publishing Company.

Thompson, J. K., and Tantleff-Dunn, S. (1992). Female and male ratings of upper torso: Actual ideal, and stereotypical conceptions. *Journal of Social Behaviour and personality*, 7, 345-354.

Thompson, J. K. (1996) *Body image eating disorders and obesity: An Integrative guide for assessment and treatment*. Washington DC: American Psychological Association.

Thompson, J. K., and Heinberg, L. J., Altabe, M., and Tantleff-Dunn, S. (1999). *Exacting Beauty*. Washington DC: American Psychological Association.

Thompson, J. K., and Heinberg, L.J. (1999). The Medias influence on body image disturbance and eating disorders: We've reviled them, now can we rehabilitate them? *Journal of Social Issues*, 55, 339 – 353.

Tiggemann, M. (2002) *Medias Influence on Body Image*. Cited in Cash, T. F. and Pruzinsky, T. (Eds.), *Body Image: Development, Deviance and Change* (pp. 80 – 109). New York, Guilford.

Tiggemann, M. (2003) Media exposure, body dissatisfaction and disordered eating: Television and Magazines are not the same! *European eating disorders Review*, 11, 418 – 430.

Twamley, E. W., and Davis, M. C. (1999). The sociocultural model of eating disturbance in young women. The effects of personal and family environment. *Journal of Social and Clinical Psychology*, 18(4), 467 – 489.

University of Wisconsin-Madison (1999) Retrieved on March 27<sup>th</sup> 2012 from:

<http://scienceblog.com/community/older/1999/E/199904345.html>

Von Bergen, C. W., & Soper, B. (1996). Self-esteem and self-concept confusion in males and females. *College Student Journal*, 4, 418-424.

Webster, J., & Tiggemann, M. (2003). The relationship between women's body satisfaction and self-image across the life span: The role of cognitive control. *Journal of Genetic Psychology*, 164, 241–252.

Wong, MMC., Tso, S., and Lui, SSY. (2009). Accuracy of Body Weight and Perception and Figure Satisfaction in Young Adults with Psychotic Disorders in Hong Kong. *College of Psychiatrists: Hong Kong*, 19(3), 107 - 111

## **Appendix 1**

### **Participant Information Sheet.**

Study title – Does the media negatively influence body image and self-esteem?

My name is Tara Mansfield. I am a student studying a BA (Hons) degree course in Psychology and I am undertaking research into the effects of the mass media body-esteem and body-dissatisfaction as part of my degree at Dublin Business School.

The vast majority of research carried out in this particular field has focused on females participants only; therefore I am inviting both male and female college students to take part in this research.

Your participation is entirely voluntary and you are free to leave at any point whilst filling out the various questionnaires, and if you wish, you can have your contributions discarded and removed from any analysis I carry out.

The aim of this study is to investigate whether mass media has a direct influence on body-esteem and body dissatisfaction

Filling out the various questionnaires will roughly take around 10 – 15 minutes. Only I or my BA (Hons) supervisor, Dr Chris Gibbons, will have access to your answers. The findings will be used to measure the amount of media you are subject to and how you feel about yourself. No record of names will be kept. All contributions will be treated anonymously.

Previous research in this area, using focus groups, has found that participants tend not to find the experience distressing. However, it is important that if, at any time, you do feel uncomfortable that you are aware that you have the right to leave at any time.

In addition, as a student of the university, if that experience causes discomfort it is important that you are aware of the student counselling facilities available. The student counselling contact number is *01-4178748*. However, it is my intention to ensure this experience is one that is not an uncomfortable one.

If you have any queries about the study beyond that provided here please feel free to contact me at **1463962@mydbs.ie** or by phone on **0851506849**.

## Appendix 2

### Participant Consent Form

#### A questionnaire study on Gender Differences in Body-Esteem, Body-Dissatisfaction and the Media's 'Thin Ideals'

Name of participant.....

Name of Researcher – Tara Mansfield.

*Please initial beside each point*

1. I confirm that I have read and understand the Participant information sheet dated.....for the above study. I have had the opportunity to consider the information and, if questions were asked have had these answered satisfactorily.....
2. I understand that the information I contribute in completing the questionnaire may be looked at and analysed by the researchers Tara Mansfield and Dr Chris Gibbons.....
3. I agree to participate in this research .....
4. This agreement is of my own free will .....
5. I realise that I may withdraw from the study at any time without giving a reason and without any effect on my education, .....
6. I have been given full information regarding the aims of the research and have been given information with the Researcher's names on and a contact number and address if I require further information. ....

7. I recognise that all personal information provided by myself will remain confidential and no information that identifies me will be made publicly available .....

Signed: ..... Date: .....

*(by participant)*

Print name: .....

*Signed on behalf of researchers*

Signed: ..... Date: .....

### Appendix 3

Gender (please circle/highlight)      Male                  Female

Age: \_\_\_\_\_

### SOCIAL COMPARISON SCALE

Please circle a number at a point which best describes the way in which you see yourself in **comparison to others**.

For example:

Short      1    2    3    4    5    6    7    8    9    10                  Tall

If you put a mark at 3 this means you see yourself as shorter than others; if you put a mark at 5 (middle) about average; and a mark at 7 somewhat taller.

If you understand the above instructions please proceed. Circle one number on each line according to how you see yourself in relationship to others.

### **In relationship to others I feel:**

Inferior	1	2	3	4	5	6	7	8	9	10	Superior
Incompetent	1	2	3	4	5	6	7	8	9	10	More competent
Unlikeable	1	2	3	4	5	6	7	8	9	10	More likeable

Left out	1	2	3	4	5	6	7	8	9	10	Accepted
Different	1	2	3	4	5	6	7	8	9	10	Same
Untalented	1	2	3	4	5	6	7	8	9	10	More talented
Weaker	1	2	3	4	5	6	7	8	9	10	Stronger
Unconfident	1	2	3	4	5	6	7	8	9	10	More confident
Undesirable	1	2	3	4	5	6	7	8	9	10	More desirable
Unattractive	1	2	3	4	5	6	7	8	9	10	More attractive
An outsider	1	2	3	4	5	6	7	8	9	10	An insider

### **ROSENBERG SELF-ESTEEM SCALE**

Instructions: Below is a list of statements dealing with your general feelings about yourself. If you strongly agree, circle **SA**. If you agree with the statement, circle **A**. If you disagree, circle **D**. If you strongly disagree, circle **SD**.

- |   |    |   |   |    |
|---|----|---|---|----|
| 1. On the whole, I am satisfied with myself             | SA | A | D | SD |
| 2. At times, I think I am no good at all.               | SA | A | D | SD |
| 3. I feel that I have a number of good qualities.       | SA | A | D | SD |
| 4. I am able to do things as well as most other people. | SA | A | D | SD |
| 5. I feel I do not have much to be proud of.            | SA | A | D | SD |

- |    |  |    |   |   |    |
|----|--|----|---|---|----|
| 6. | I certainly feel useless at times.   | SA | A | D | SD |
| 7. | I feel that I'm a person of worth, at least on an equal plane with others. | SA | A | D | SD |
| 8. | I wish I could have more respect for myself.                               | SA | A | D | SD |
| 9. | All in all, I am inclined to feel that I am a failure.                     | SA | A | D | SD |
| 10 | I take a positive attitude toward myself.                                  | SA | A | D | SD |

### **BODY ESTEEM SCALE**

Instructions: On this page are listed a number of body parts and functions. Please read each item and indicate how you feel about this part or function of your own body using the following scale:

1 = Have strong negative feelings

2 = Have moderate negative feelings

3 = Have no feeling one way or the other

4 = Have moderate positive feelings

5 = Have strong positive feelings

If you understand the above instructions please proceed. Place the number of the corresponding answer next to each question.

1. body scent \_\_\_\_\_

2. appetite \_\_\_\_\_

3. nose \_\_\_\_\_
4. physical stamina \_\_\_\_\_
5. reflexes \_\_\_\_\_
6. lips \_\_\_\_\_
7. muscular strength \_\_\_\_\_
8. waist \_\_\_\_\_
9. energy level \_\_\_\_\_
10. thighs \_\_\_\_\_
11. ears \_\_\_\_\_
12. biceps \_\_\_\_\_
13. chin \_\_\_\_\_
14. body build \_\_\_\_\_
15. physical coordination \_\_\_\_\_
16. buttocks \_\_\_\_\_
17. agility \_\_\_\_\_
18. width of shoulders \_\_\_\_\_
19. arms \_\_\_\_\_
20. chest or breasts \_\_\_\_\_
21. appearance of eyes \_\_\_\_\_
22. cheeks/cheekbones \_\_\_\_\_

23. hips \_\_\_\_\_
24. legs \_\_\_\_\_
25. figure or physique \_\_\_\_\_
26. sex drive \_\_\_\_\_
27. feet \_\_\_\_\_
28. sex organs \_\_\_\_\_
29. appearance of stomach \_\_\_\_\_
30. health \_\_\_\_\_
31. sex activities \_\_\_\_\_
32. body hair \_\_\_\_\_
33. physical condition \_\_\_\_\_
34. face \_\_\_\_\_
35. weight \_\_\_\_\_

### **SOCIO-CULTURAL ATTITUDES TOWARDS APPEARANCE**

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

**Definitely Disagree = 1**

**Mostly Disagree = 2**

**Neither Agree Nor Disagree = 3 Mostly Agree = 4**

**Definitely Agree = 5**

1. TV programs are an important source of information about fashion and "being attractive." \_\_\_\_\_
2. I've felt pressure from TV or magazines to lose weight. \_\_\_\_\_
3. I do not care if my body looks like the body of people who are on TV. \_\_\_\_\_
4. I compare my body to the bodies of people who are on TV. \_\_\_\_\_
5. TV commercials are an important source of information about fashion and "being attractive." \_\_\_\_\_
6. I do not feel pressure from TV or magazines to look pretty. \_\_\_\_\_
7. I would like my body to look like the models who appear in magazines. \_\_\_\_\_
8. I compare my appearance to the appearance of TV and movie stars \_\_\_\_\_
9. Music videos on TV are not an important source of information about fashion and "being attractive." \_\_\_\_\_
10. I've felt pressure from TV and magazines to be thin. \_\_\_\_\_
11. I would like my body to look like the people who are in movies. \_\_\_\_\_
12. I do not compare my body to the bodies of people who appear in magazine \_\_\_\_\_
13. Magazine articles are not an important source of information about fashion and "being attractive." \_\_\_\_\_
14. I've felt pressure from TV or magazines to have a perfect body. \_\_\_\_\_
15. I wish I looked like the models in music videos. \_\_\_\_\_
16. I compare my appearance to the appearance of people in magazines. \_\_\_\_\_
17. Magazine advertisements are an important source of information about fashion and "being attractive." \_\_\_\_\_
18. I've felt pressure from TV or magazines to diet. \_\_\_\_\_
19. I do not wish to look as athletic as the people in magazines. \_\_\_\_\_
20. I compare my body to that of people in "good shape." \_\_\_\_\_
21. Pictures in magazines are an important source of information about fashion and "being attractive." \_\_\_\_\_

22. I've felt pressure from TV or magazines to exercise. \_\_\_\_\_
23. I wish I looked as athletic as sports stars. \_\_\_\_\_
24. I compare my body to that of people who are athletic. \_\_\_\_\_
25. Movies are an important source of information about fashion and "being attractive."  
\_\_\_\_\_
26. I've felt pressure from TV or magazines to change my appearance. \_\_\_\_\_
27. I do not try to look like the people on TV. \_\_\_\_\_
28. Movie stars are not an important source of information about fashion and "being attractive."  
\_\_\_\_\_
29. Famous people are an important source of information about fashion and "being attractive."  
\_\_\_\_\_
30. I try to look like sports athletes. \_\_\_\_\_