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**EXAMINING THE IMPACT OF REPEATED EXPOSURE TO IDEAL MEDIATED  
BODY IMAGES ON BODY SATISFACTION, SELF-ESTEEM,  
AND DISORDERED EATING IN FEMALES**

by

**Alexandra Hendriks**

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**A Dissertation Submitted to Faculty of the  
DEPARTMENT OF COMMUNICATION  
In Partial Fulfillment of the Requirements  
For the Degree of  
DOCTOR OF PHILOSOPHY  
In the Graduate College  
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As members of the Final Examination Committee, we certify that we have read the dissertation prepared by Alexandra Hendriks entitled Examining the impact of repeated exposure to ideal mediated body images on body satisfaction, self-esteem, and eating disorders in females.

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*For the first and most vital teachers in my life, Drs. Stewart and Sherry Ferguson,*

*and*

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## ABSTRACT

Based on principles related to the self-concept, social comparison theory, self-discrepancy theory, and cultivation theory, this study predicted that increases in exposure to mediated ideal bodies would be associated with a greater likelihood to hold beauty-related beliefs and values consistent with those presented in mainstream media. The study further predicted that, by altering the fidelity of the relationship between the ought self and the ideal self, individual difference variables (i.e., body mass index, self-monitoring, intrasexual competitiveness, and self-efficacy) would interact with media exposure to affect body satisfaction. Body satisfaction, in turn, would interact with importance of the physical self to the self-concept to affect self-esteem, which would predict patterns of disordered eating. To test these predictions, 202 undergraduate females completed a survey during class time. Results revealed that fashion magazine consumption (but not television consumption) was positively correlated with beauty-related beliefs. While media exposure did not directly predict body satisfaction, body mass and self-efficacy were direct predictors of body satisfaction. Self-monitoring interacted with body weight and fashion magazine consumption to influence body satisfaction, as did intrasexual competitiveness. Body satisfaction and self-esteem were positively correlated with each other and negatively correlated with characteristics of eating disorders. The implications of these results, as well as suggestions for future research, are discussed.

**“Mirror, mirror, on the wall, who in this land is fairest of all?”**

**—The Grimm Brothers (1857)**

## **CHAPTER I**

### **INTRODUCTION**

**A number of studies have established that physical beauty is associated with positive outcomes (see Dion, Berscheid, & Walster, 1972) such as social confidence, psychosocial adjustment, sociability, independence, and excitement (Brigham, 1980; Eagly, Ashmore, Makhijani, & Longo, 1991). Individuals who are attractive do better in our society--they are more successful, happier, and more self-sufficient. As a result, attractiveness sells, particularly for women.**

**Understanding the importance of capitalizing on the widespread desire to be beautiful, advertisers and mediated content providers bombard North Americans with messages about beauty. One out of every 10.8 commercials includes messages about attractiveness (Downs & Harrison, 1985), and magazines targeting females contain 10.5 times as many ads and articles about diet and weight loss as magazines targeting men (Andersen & DiDomenico, 1992). Ironically, these magazines also include significantly more messages about food (Silverstein, Perdue, Petersen, & Kelly, 1986a). Slim actresses and models also dominate most television shows and magazine pages.**

**But what are the effects of such pervasive images? Overall, results of studies examining the effects of mediated ideal female bodies (thin and straight bodies typical of those portrayed in fashion magazines and on many television shows) are contradictory,**

with some researchers finding direct relationships, others detecting indirect relationships, and still others finding results in the direction opposite from what they had predicted.

A number of studies have shown that exposure to mediated ideal bodies directly affects perceptions that females have of their own bodies--more particularly, that exposure decreases their levels of body satisfaction (Irving, 1990; Kalodner, 1997; Stice & Shaw, 1994; Turner, Hamilton, Jacobs, Angood, & Dwyer, 1997) and self-esteem (Irving, 1990) and increases their feelings of self-consciousness (Wegner, Hartmann, & Geist, 2000), anger (Pinhas, Toner, Ali, Garfinkel, & Stuckless, 1999), hostility (Pinhas et al., 1999), and depression (Pinhas et al., 1999).

Turner and colleagues (1997) found that females who read fashion magazines, as opposed to news magazines, were more likely to express body dissatisfaction, frustration with their weight, and a desire to be thin. Harrison and Cantor's (1997) study of undergraduates confirmed that exposure to fashion (but not news) magazines predicts a drive for thinness. Using hierarchical multiple regression, Stice and Shaw (1994) also found that exposure to thin images predicts depression, stress, guilt, shame, insecurity, and degrees of body satisfaction among females. After viewing images of mediated ideal bodies, 95% of women in Thompson's (1991) study overestimated their body sizes (on average by 25%), and 40% overestimated one of four body parts (cheeks, waist, hips, or thighs) by at least 50%.

In Cusumano and Thompson's (2000) study of grade school children, girls who reported feeling pressure from the media to diet were significantly more likely than those who did not to express dissatisfaction with their bodies. Exposure to ads that portray

women as sex objects, as opposed to neutral ads, results in greater tendencies for women to judge their bodies as large and discrepant from their ideal bodies (Lavine, Sweeney, & Wagner, 1999). Lavin and Cash (2000) reported that women exposed to messages emphasizing the benefits associated with physical attractiveness were more likely than those exposed to control messages (i.e., messages about television violence) to express negative attitudes toward their bodies. Finally, Akiba (1998) reported that body satisfaction was significantly higher in Iranian women (where Western media is banned) than in American women.

On the other hand, Cusumano and Thompson (1997) did not find any correlation between media exposure to female fashion models and body satisfaction, eating disorders, self-esteem, or degree of obesity. Kalodner (1997) found that exposure to thin models (as compared to controls) increased body consciousness and anxiety in females, but also increased feelings of competence. Contrary to expectations, Harrison and Cantor (1997) found that viewing shows with heavy main characters predicted body dissatisfaction. This effect did not occur for females viewing shows with thin or normal weight characters. Although Myers and Biocca (1992) also established support for the notion that most women overestimate their body sizes, contrary to previous findings, subjects exposed to body-image commercials overestimated their body sizes significantly less than subjects viewing neutral commercials. As well, these subjects showed lower levels of subsequent depression than those in the control condition. These authors contend that these types of reactions could occur because female viewers imagine themselves in the place of the models (thus, inheriting the models' bodies). However,

they presume that the effects would only be short-lived, with the potential to reverse in the long term, leading to lower levels of self-esteem.

Posavac, Posavac, and Posavac (1998) found that exposure to mediated ideal body images increased concern with weight, but only for those women with initially low body satisfaction scores. That is, women with low levels of body dissatisfaction did not express higher concern with body weight after viewing mediated ideal body images. Those who expressed high levels of body dissatisfaction were more dissatisfied after viewing the images. Heinberg and Thompson (1995) also found that Caucasian females with high levels of body disturbance (i.e., cognitive distortions related to physical appearance) were distressed after exposure to television commercials focusing on appearance, but felt better (in terms of mood and body satisfaction) after exposure to commercials that did not focus on appearance. These effects did not occur for Caucasian females without prior body image disturbance. Finally, Hamilton and Waller (1993) found that women with eating disorders who viewed images of mediated ideal female bodies, as opposed to neutral images, were more likely to overestimate their body sizes. This effect did not occur for women without eating disorders.

The inconsistencies in the above findings reinforce the need for a stronger theoretical rationale to fully understand why and when media influence body image and, in turn, self-esteem, body satisfaction, and likelihood to engage in disordered eating. Rather than taking a traditional approach to media effects, hypothesizing direct effects of the media on individuals, this theoretical rationale will focus on the variables that moderate the relationship between media exposure and various outcomes in an attempt to answer the

**following question: Which individual characteristics put some girls and women at greater risk of negative influence with regard to mediated ideal body images? Specifically, the current study will explore (1) whether media exposure affects beliefs about social reality, (2) the individual difference variables that moderate the relationship between exposure to mediated images of females and body satisfaction, (3) the relationship between body satisfaction and self-esteem, and (4) the relationship between self-esteem and disordered eating. This study will also examine the individual characteristics that distinguish women who seek out mediated content high in ideal body images from those who do not.**

## CHAPTER II

### THEORETICAL RATIONALE AND HYPOTHESES

#### Self

##### *Self-Concept*

All individuals have some type of structured thoughts and feelings about their selves, labeled the *self-concept*. The self-concept emerges out of the need for individuals to differentiate themselves from others—to establish unique identities. Thus, the self-concept is not present at birth, but rather “arises in the process of social experience and activity” (Mead, 1934, p. 135).

While popular vernacular often refers to the self-concept as if it is a single entity, it should be regarded as multidimensional. Shavelson, Hubner, and Stanton (1976) proposed a model dividing the self-concept into (1) the *academic self* (i.e., feelings regarding one’s intellectual abilities in various subjects such as English, history, math, and science), (2) the *social self* (i.e., feelings regarding one’s competence in relationships with peers and significant others), (3) the *physical self* (i.e., feelings regarding one’s physical ability and physical appearance), and (4) the *emotional self* (i.e., feelings regarding one’s emotional states). Byrne and Shavelson (1996) later employed confirmatory factor analysis to validate this model with elementary and high school students; their study confirmed the explanatory power of the model (at least as it applies to Western cultures).

While the components that make up the self-concept do not vary significantly from person to person, the importance that individuals attribute to different components of their self-concepts does vary. Some individuals will place greater importance on some components of their selves than on other components. Rosenberg (1979) explains:

Some elements of an attitude structure are central, others are peripheral; some congeal into larger wholes (as in types), others are detached, standing in splendid isolation. It is not just the parts, but also the relationships among the parts, that constitutes the whole. (p. 17)

Rosenberg further argues that, in addition to looking at the content of the self-concept, we should consider the direction (favorable vs. unfavorable), intensity (strong vs. weak), salience (forefront of consciousness vs. subconscious), accuracy (correct vs. false), consistency (consistent vs. contradictory), stability (firm vs. shifting), clarity (sharp vs. vague), and verifiability (objective vs. subjective) of self-relevant cognitions. Some individuals may highly value their physical selves, believing that it is essential to appear attractive and stylish but not as important to come across as intelligent. Others may value appearing educated and knowledgeable over appearing attractive. Still others may value both physical appearance and education equally. In other words, while all females have self-perceptions regarding their physical appearance, physical appearance will be more central to some females' self-concepts than to others.

While the self-concept is generally stable, not changing dramatically over time (Adamson & Lyxell, 1996), people will go through periods when they reevaluate their selves, slightly modifying what they regard as salient, important, and relevant (Byrd & Stacey, 1995). For example, Rosenberg (1982) argues that during adolescence individuals

begin to view themselves less in terms of a social exterior and more in terms of a psychological interior. Correspondingly, adolescents are more likely than children to describe their selves as complex and abstract rather than as global and concrete.

### *Social Comparison*

Ideas regarding our self-concept do not crystallize overnight; they develop over time, primarily through comparisons with others. Kruglanski and Mayseless (1990) define *social comparisons* as “comparative judgments of social stimuli on particular content dimensions” (p. 196). Festinger’s (1954) theory of *social comparison* explains how and why social comparisons take place. Festinger argues that when people experience uncertainty and ambiguity regarding their selves, they seek information to relieve this uncertainty. While Festinger regarded the self as comprised solely of abilities and opinions, other researchers expanded this conception of the self to include additional components such as emotions, traits, and physical appearance. Although people prefer objective standards of self-evaluation, such information is often not available, and they must turn instead to others as a basis of comparison. A woman may, for example, step on a balance to determine her weight (objective standard). However, she can only determine if she is overweight, underweight, or of average weight if she compares the number that she obtains to the weight of others (social comparison).

People engage primarily in one of two types of social comparison: *downward comparison* (i.e., looking to people who appear to be worse off than they are) and *upward comparison* (i.e., looking to others who appear to be more fortunate than they are) (Olson & Evans, 1999). While downward comparisons often lead to positive moods (Wills,

1981, 1991) and high self-esteem (Morse & Gergen, 1970), upward comparisons are likely to result in negative moods (Bower, 1991), low self-esteem (Morse & Gergen, 1970), and feelings of inadequacy, particularly when this comparison is made with respect to an aspect of the self-concept that the individual regards as central. Thus, comparisons with reference groups of individuals who are more successful, attractive, and popular are likely to result in blows to the self-esteem, particularly in individuals who are motivated by inclusion and affection needs.

One source of information about others that is accessible to virtually all individuals in Western society is the media. Research confirms that individuals often use media as means of obtaining information necessary for social comparison, particularly in relation to physical appearance and beauty norms (e.g., Botta, 1999; Martin & Kennedy, 1993; Richins, 1991). In fact, studies suggest that teenage girls evaluate media as second only to peers and parents as “sources of information and influences on their attitudes and behaviors” (Garner, Sterk, & Adams, 1998). Females identify with and compare themselves with mediated models (Richins, 1991; Weirtheim, Paxton, Schutz, & Muir, 1997). Furthermore, the more females make these comparisons, the more they endorse a thin body ideal (Botta, 1999).

When given a choice, individuals are more likely to compare themselves with similar others (see Festinger, 1954; Morin & Jones, 1972; Samuel, 1973; Suls & Miller, 1977; Zanna, Goethals, & Hill, 1975). Festinger explains, “If the only comparison available is a very divergent one, the person will not be able to make a subjectively precise evaluation of his opinion or ability” (p. 121). Individuals are thus more likely to compare themselves

with models in magazines and characters on television that approximate their age and ethnic groups. For example, young girls are more likely to seek out teen magazines for information on trends in fashion rather than magazines targeting older audiences such as *Ladies Home Journal* or *Redbook*. Similarly, African Americans prefer to compare themselves with other African Americans rather than Caucasians or Hispanics.

Milkie's (1999) research on ninth and tenth grade students confirmed that Black girls were unlikely to compare themselves with females in mainstream magazines since most of these individuals were White. This decrease in likelihood to compare oneself with magazine models corresponds with an increased congruency between actual and perceived ideal body image among Blacks compared to Whites (Parnell, Sargent, Thompson, Duhe, Valois, & Kemper, 1996). Moreover, compared to Whites, Blacks exhibit higher levels of body satisfaction and less problematic eating behavior (Henriques, Calhoun, & Cann, 1996).

Social comparison begins by a very young age (Ruble, 1983). However, Martin and Kennedy's (1993) experimental study of female pre-adolescents and adolescents revealed that, as females get older, they are more likely to compare their physical selves with models in magazines. At the same time, their self-perceptions of physical attractiveness decrease. The largest increase in social comparison with media figures occurs between fourth and eighth grade, just when females are beginning to develop mature bodies that begin to differ from the types presented in magazines targeting girls and women. It is at this time that they begin to perceive discrepancies between their bodies and the ones that prevail in the media.

### *Actual, Ideal, and Ought Selves*

Through the process of social comparison, individuals not only develop objective self-relevant cognitions (*actual selves*), but they also develop ideas regarding how they would ideally like to be (*ideal selves*) and how they believe others would like them to be (*ought selves*) (see Higgins, 1987, 1989; Rosenberg, 1979). While the ideal self plays an important role in shaping how one feels about the actual self, the importance of the ought self will vary depending upon the individual. For many individuals, the ought self will contribute to the formation of the ideal self; however, in some individuals, the ought self will have little fidelity with the ideal self given that social norms are not important to certain people.

To extend this idea, individuals develop ideas regarding their actual, ideal, and ought *physical* selves. For the purposes of this work, the *actual physical self* represents the objective standards by which an individual's physical body can be judged either by the self or others (e.g., weight and height). The *ideal physical self*, on the other hand, refers to physical attributes that individuals desire to possess; the *ought physical self* represents the subjective norm, that is an individual's perception of the physical body that she thinks she should possess based on social norms (including mediated norms). When inconsistency exists among the actual, ideal, and ought selves (or bodies), self-discrepancies occur.

### *Self-Discrepancies*

*Self-discrepancies* consist of mismatches between the actual, ideal, and ought selves. Discrepancies between the actual and the ideal selves result in discomfort and low self-esteem (Higgins, Bond, Klein, & Strauman, 1986; Higgins, Roney, Crowe, & Hymes, 1994; Strauman, Vookles, Berenstein, Chaiken, & Higgins, 1991). Discrepancies between the ought and the actual selves will impact the ideal self only to the extent that an individual believes that it is important to conform to social norms. Thus, the impact of the ought self on the ideal self will depend upon the importance that individuals attribute to the social norm.

Discrepancies can also occur between individuals' ideal, actual, and ought *physical* selves. Discrepancies between the actual physical self and the ideal physical self result in lowered body satisfaction. For instance, a woman who desires a thin and fit body (ideal), but who is overweight and out of shape (actual), will experience body dissatisfaction if she is confronted with this discrepancy. Discrepancies between the actual physical self and the ought physical self will result in lowered body satisfaction only in females who value social norms (and thus allow the ought physical self to inform the ideal physical self). For example, a woman who is aware of the mediated ideal (ought self), and who has an overweight body (actual self), will not experience dissatisfaction if she chooses to reject this norm (and thus her ideal does not reflect this norm).

The more discrepant one's actual body from one's ideal body, the more an individual is likely to experience discomfort and body dissatisfaction. Higgins and colleagues (1986) explain, "the greater the magnitude and accessibility of a particular type of self-

discrepancy possessed by an individual, the more the individual will experience the type of discomfort associated with that self-discrepancy” (p. 7). Thus, compared to women whose bodies only diverge slightly from their ideal bodies, those whose bodies diverge substantially from their ideal bodies will experience greater dissatisfaction when confronted with this ideal (e.g., by means of exposure to fashion magazines or fashion television).

Discrepancies between ideal and actual bodies are common among North American females of all ages (Collins, 1991; Fallon & Rozin, 1985; Garner, Garfinkel, Stancer, & Moldofsky, 1976; Graham, Eich, Kephart & Peterson, 2000; Parkinson, Tovée, & Cohen-Tovée, 1998; Spillman & Everington, 1989; Thompson, 1991; Tiggemann, 2001). Graham and colleagues (2000) found that only 29% of adolescents in their study selected ideal bodies that corresponded with their actual bodies. When broken out by gender, 80% of girls chose ideal bodies that were thinner than their actual bodies whereas only 24% of boys did the same. In their studies of elementary and junior high school girls, Parkinson and colleagues (1998) and Collins (1991) concluded that pre-adolescent and adolescent females overwhelmingly desire thinner bodies. Replications of these studies on young adult females (17 to 25 years) and females 40 and older lead to similar conclusions (Lamb, Jackson, Cassidy & Priest, 1993; Thompson, 1991).

Using self-discrepancy theory as a framework, Strauman and colleagues (1991) performed hierarchical regression analysis to determine whether self-discrepancies predicted body satisfaction. They found that discrepancies between actual physical selves and ideal physical selves were associated with greater levels of body dissatisfaction.

Harrison (in press) also concluded that brief exposure to mediated ideal body images on television made body size discrepancies more salient. Women with high body satisfaction are also able to more accurately judge the weight of thin celebrities (King, Touyz, & Charles, 2000). Thus, it appears that those with the lowest body satisfaction are most likely to magnify the discrepancies between themselves and mediated models.

If we accept that females engage in comparison with others in an effort to better understand themselves, and that one source of such comparison is the media, we need to examine the messages that females are receiving from the media.

### Media

One place that females can go to get information on their “ought physical selves” (which in turn may shape their “ideal physical selves”) is the media. Reviews of mainstream media demonstrate the pervasiveness of a *mediated ideal body*. Unrealistically thin female bodies, becoming thinner over time, characterize this image. Garner, Garfinkel, Schwartz, and Thompson (1980) conducted a content analysis of weight and body changes from 1959 to 1978 in Miss America contestants and Playboy centerfolds. Their results revealed that the mean weight of these women was well below the mean weight of average women during the same period. As well, the mean bust and hip sizes decreased significantly over time, while the mean height increased. Ideal female bodies presented in mainstream media were, thus, significantly thinner and taller in 1978 than in 1959. A replication of this study by Wiseman, Gray, Mossimann, and Ahrens (1992) found that body size continued to decrease between 1979 and 1988 for Miss America contestants and remained constant for Playboy centerfolds. Most of these

images portrayed women who were 13% to 19% below the expected weight for their height.

Recent longitudinal analyses provide further evidence for an increasingly thin and straight media ideal. Based on a small sample of ads ( $n=27$ ), Percy and Lautman (1994) concluded that female body sizes depicted in advertisement had decreased by close to 50% since the turn of the century. Silverstein and colleagues' (1986a; Silverstein, Peterson, & Perdue, 1986b) conducted a more extensive analysis of models appearing in *Ladies Home Journal* and *Vogue* (from 1901 to 1981) and movie actresses appearing in Hollywood movies (from 1933-1973). Their study confirmed the trend toward a thinner and straighter mediated female ideal. Finally, Morris, Cooper, and Cooper's (1989) time series analysis (of eight time periods between 1967 and 1987) revealed a steady rise in the mean height of models working for a London agency and a similar increase in the "androgynous" body shape (i.e., a body that is tall, lean, and straight). From an observational standpoint, current trends such as the "waif" look suggest that standards of beauty have not changed during the past decade.

Popular prime time programs that cater to large audiences of girls and women (e.g., "Ally McBeal," and "Friends") include a disproportionate number of young, attractive, White, and thin female actresses (Fouts & Burggraf, 1999; Signorelli & Mehta, 2000; Silverstein et al., 1986a). Glamorized, beautiful, thin female actresses populate the daytime soap operas; and lean, often emaciated-looking women are the standard on fashion television and on the runways of Paris, New York, and Milan. Supermodels such as Niki Taylor, Naomi Campbell, and Heidi Klum and actresses such as Nicole Kidman,

Meg Ryan, and Halle Berry typify the slim ideal prevalent in Western media today. A recent issue of *US Weekly* magazine ("Diet Secrets", April 2002) reports weights for today's most popular actresses that are well below healthy adult weights (e.g., Halle Berry: 5'7", 112 lbs.; Cameron Diaz: 5'9", 126 lbs.; Gwyneth Paltrow: 5'9", 120 lbs.; Julia Roberts: 5'9", 120 lbs.). Additionally, a recent content analysis of 28 prime time situation comedies suggested that 33% of central female characters were below average weight and that, the thinner the female character, the more positive comments she received from males (Fouts & Burggraf, 1999). However, anecdotal evidence suggests that even models and actresses have difficulty attaining the standards that they set, forcing them to engage in unhealthy practices including food deprivation, smoking, diet pills, laxatives, purging, and substance abuse.

Based on the above findings, it is not surprising that 95% of women can recognize and identify the ideal body shape espoused by television (Murray, Touyz, & Beumont, 1996), and many feel pressure to conform to this ideal by striving for thinner bodies (Borzekowski, Robinson, & Killen, 1999). Seventeen percent of *Psychology Today* readers agreed they would be willing to give up five years of their lives to be their ideal weight; 24% would give up at least three years of their lives (cited in Fidelman, 1997). Attempting to achieve this ideal, females engage in numerous body-altering behaviors: they make themselves up; seek out cosmetic surgery; paint their nails; wax and shave their legs; pierce their ears, noses, and belly-buttons; fast; tan; and diet. Many women seek out doctors to remove fat from their hips, stomachs, and faces while others request

to have fat added to their breasts and lips. Diet drugs to help with weight loss, bleach products to whiten teeth, and hair dye to cover gray are now standard fare in drugstores.

### Social Reality

Although media depict extremely thin images as normative, this standard does not conform to the actual body shapes and weight of most females in our society. Nor does this standard coincide with biological predispositions. Male and female bodies tend to resemble each other in childhood; however, differences begin to occur during puberty (Furnham, Tan, & McManus, 1997). Raphael and Lacey (1992) explain that women's bodies are fatter and more curvaceous than men's bodies. Fatty tissue in the hips and breasts facilitates reproduction; in fact, 22% of a woman's body weight must be fat for menarche to occur (Frisch, 1974). Thus, women with high waist-to-hip ratios\* and low body mass indexes report having more difficulty becoming pregnant than those with low waist-to-hip ratios and higher body mass indexes (Furnham, Tan, & McManus, 1997). Male bodies, on the other hand, are likely to be straight, with broad shoulders and narrow hips. Ironically, current mediated depictions of ideal female bodies seem to approximate the biological norm for male bodies more closely than that for female bodies. Thus arises the potential for dissatisfaction in female audiences who do not meet the standard.

### Effects

#### *Cultivation of Perceptions of Social Reality*

As a result of recurrent themes presented in mainstream media, such as the recurrent image of the ideal female body, long-term exposure to television and other media has

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\* According the National Academy of Sciences (1991), a waist-to-hip ratio above 0.80 is not healthy.

subtle and cumulative effects on shaping views of social reality (Gerbner, 1969; Gerbner & Alexander, 1985; Gerbner & Gross, 1976; Gerbner, Gross, Jackson-Beeck, Jeffries-Fox, & Signorelli, 1978; Gerbner, Gross, Morgan, & Signorelli, 1994). Gerbner and colleagues' studies of cultivation theory provide support for the idea that heavy television viewers are more likely than light television viewers to perceive the world in a way that conforms to television reality; they come to adopt the television reality as their own social reality. Thus, because media present thin, attractive women as normative and desirable, individuals who consume a lot of media are likely to hold beliefs that are consistent with those they see repeatedly in the media. Myers and Biocca (1992) explain: "There may be some cumulative effect of all these messages. It is reasonable to imagine that each of these body messages is just one strike on a chisel sculpting the ideal body inside a young woman's mind" (p. 111).

In support of this argument, recent research suggests an increase in the likelihood for men and women to regard underweight females as more attractive than normal weight females. In the early 1940s, Sheldon & Stevens (1942) found that Americans had negative perceptions of *ectomorphic* (straight and lean) bodies. Lerner (1969) reported that individuals had negative perceptions of both *ectomorphic* and *endomorph* (round) bodies. Both females and males viewed *mesomorphic* (muscular) body types most positively. However, by 1985, Fallon and Rozin reported that individuals perceived the *ectomorph* body as most desirable for females and the *mesomorph* as most desirable for males. Spillman and Everington (1989) found that both male and female college students associated *ectomorphic* bodies with sexual appeal, ability to get dates, exercise,

knowledge about nutrition, and a concern with appearance; they associated mesomorphic bodies with competence, friendship, health, happiness, intelligence, and aggression. Endomorphs, on the other hand, were characterized as being sloppy dressers, stressed out, and depressed.

Henss (1995) recently revealed that, when provided with choices among 12 different sketches of female bodies, both male and female respondents rated underweight females and males as most attractive; they also selected the female figures with the 0.8 waist-to-hip ratios as most attractive. Interestingly, these results contradicted findings by Singh (1993a, 1993b, 1994), who reported that subjects tended to perceive females with “normal” body weights as significantly more attractive than underweight or overweight females. While inconclusive, the above findings suggest there may be a trend toward viewing leaner bodies as more attractive, both in terms of media presentations and at a societal level. This study proposes that media are at least partially responsible for this trend.

#### *Cultivation of Beliefs about the Self and Associated Behaviors*

Cultivation research has traditionally been limited to predictions about perceptions of the social world and beliefs associated with these perceptions. But, does it matter if television creates beliefs regarding the social world if these beliefs have no subsequent effects on beliefs about self and associated behaviors? It seems important to go beyond simply predicting changes in beliefs about the world in general and to also examine whether exposure to mediated ideal female images affects beliefs toward the self (i.e., body satisfaction and self-esteem) and behaviors associated with these beliefs (i.e., diets,

exercise, and eating disorders). Posavac and colleagues (1998) summarize the key problem that mediated depictions can have:

Because current media images of ideal female beauty are narrowly defined, exaggerated, and emphasize thinness, exposure to media images may make salient the discrepancy between a female perceiver's conception of her own weight and the standard accepted by society. (p. 188)

This discrepancy, which can create a sense of unease, may influence women's satisfaction with their bodies and, in turn, their self-esteem and perceptions of self-worth. Body dissatisfaction and low self-esteem, in turn, increase the likelihood that females will develop eating disorders (Cash & Deagle, 1997; Katzman & Wolchik, 1984; Leon, Fulkerson, Perry, & Cudeck, 1993; Stice, Schupak-Neuberg, Shaw, & Stein, 1994). The next section will highlight the importance of studying the problems of low self-esteem, body dissatisfaction, and disordered eating.

*Self-esteem.* Self-esteem, which can be conceptualized on a continuum from high to low, can be described as an individual's feelings of self-worth. Individuals with *high self-esteem* have overall positive feelings about the self, believing they are individuals of worth and value. Fennell (1998) describes *low self-esteem* as a "learned, negative, global judgment about the self ('me as a person') which, once in place, shapes how the person thinks, feels, and behaves on a day-to-day basis" (p. 219). People with high self-esteem are therefore more likely than those with low self-esteem to express satisfaction with life (Crandall, 1973) and general happiness (Bachman, 1970). Low self-esteem can have detrimental effects all aspects of an individual's life. Leary, Schreindorfer, and Haupt (1995) explain:

People with low self-esteem tend to be more anxious, depressed, lonely,

jealous, shy, and generally unhappy. They are also less assertive, less likely to enjoy close friendships, and more likely to drop out of school. Furthermore, they are more inclined to behave in ways that pose a danger to themselves and others: low self-esteem is associated with unsafe sex, teenage pregnancy, aggression, criminal behavior, the abuse of alcohol and other drugs, and membership in deviant groups. (p. 297)

Self-esteem evolves from the differential importance of various components of the self-concept (Rosenberg, 1979). In other words, one's self-esteem will be most affected by dimensions that are most central to the self and least affected by those which are least central to the self.

*Body satisfaction.* Body satisfaction, defined as positive feelings associated with one's physical self, plays an important role in affecting many females' self-esteem. Whereas low self-esteem results from large discrepancies between actual and ideal selves, low body satisfaction results from large discrepancies between actual and ideal bodies. Thus, body satisfaction is more specific than the global measure of self-esteem (see Rosenberg, 1979).

Most females in the United States regard their physical appearance as central to their self-concepts and feelings of self-worth. In support of this assertion, a study by Geller, Srikameswaran, Cockell, and Zaitsoff (2000) revealed that 20.3% of female adolescents rate body shape and weight as the most important attribute to their feelings of self-worth. They rate body shape and weight as more important than their intimate relationships, friendships, face, personality, personal development, competence at school, and competence at other activities. Unfortunately, many females in Western cultures are not satisfied with their bodies and thus experience *body dissatisfaction* (i.e., negative feelings associated with one's physical body).

Eighty-percent of high school students in Larson's (1991) study reported that they wanted to weigh less than their current weight even though only 23% were above normal weight ranges. Moreover, 30% picked an ideal weight that was below the normal weight range. Eisele, Hertgaard, and Light's (1986) study of girls 12 to 14 years old revealed that only 14% of subjects were satisfied with their weights; 78% wished they weighed less. Again, only 19% were considered overweight according to national health standards. American females are least satisfied with their hips, buttocks, and thighs and most satisfied with their hands and eyes (Hamilton & Chowdary, 1989).

Confirming the role of the visual in perceptions of body image, women who are blind, or partially blind, are significantly less likely than sighted women to express body dissatisfaction and to display attitudes characteristic of disordered eating (Baker, Sivyer, & Towell, 1998). Moreover, compared to congenitally blind women, women blinded later in life express significantly more body dissatisfaction and a greater propensity for disordered eating.

Body dissatisfaction in adolescents is not a problem limited to the United States. A study of Israeli high school students (Brook & Tepper, 1997) revealed that 44% of them perceived themselves to be obese (the rates were three times higher for girls than for boys) and 53% wanted to lose weight (girls expressed this desire four times more frequently than boys). Only 10% of these students were obese by health standards. In Australia, 77% of adolescents reported a desire to lose weight and 36% had used extreme forms of dieting within the past month (Grigg, Bowman, & Redman, 1996). Females in

the United Kingdom also reported seeking ideal bodies significantly thinner than their current weights (Parkinson et al., 1998).

*Disordered eating.* The American Psychiatric Association (APA) (1994) estimates that 3% of all females suffer from eating disorders. However, as many as 15.4% of female high school and college students meet the criteria (as outlined in the DSM-IV) for a major eating disorder (Pope, Hudson, Yurgelun-Todd, & Hudson, 1984). Many more females who are not classified as having eating disorders engage in risky behaviors to control their weight. Lachenmeyer and Muni-Brander (1988) reported that 9.5% of high school females used diet pills to lose weight, 2.7% used laxatives, 13.1% engaged in restrictive eating, and 12.5% binged and purged. Grigg and colleagues (1996) also found that 33% of Australian adolescents (14-16 years) engaged in at least one disordered eating behavior.

*Anorexia nervosa*, the most serious of eating disorders, is most likely to develop in females between the ages of 12 and 25 (Vandereycken, 1988). The essential features of anorexia include (1) obsessive and frantic drives toward thinness (Casper & Zachary, 1984), (2) a refusal to maintain body weight over a minimal normal weight for age and height, (3) an intense fear of gaining weight or becoming fat (even though underweight), (4) a distorted body image, and (5) amenorrhea (APA's DSM-IV, 1994). Furthermore, anorexics are more likely to overestimate their body sizes than those without this disorder (Garner et al., 1976).

The onset of *bulimia nervosa* occurs slightly later than anorexia. Females are most likely to develop this disorder between 16 and 19 years old (Johnson, Stuckey, Lewis, &

Schwartz, 1982). Bulimia is characterized by a tendency toward uncontrollable overeating that may be followed by self-induced vomiting (Eisele et al., 1986). A typical bulimic is a single Caucasian female in her early 20's who is well educated and of average weight for her height (DSM-IV, APA, 1994; Johnson et al., 1982). Field, Camargo, Taylor, Berkey, and Colditz (1999) found that, compared to girls who did not engage in social comparisons with mediated figures, girls who engaged in such comparisons were more likely to display purging behavior symptomatic of bulimia.

Not surprisingly, eating disorders are associated with severe health risks such as amenorrhoea, ketosis, reduced body mass, reduced muscle tissue, insomnia, fatigue, irritability, lack of concentration (Mallick, 1983), suicide, and death (Crisp, Palmer, & Kalucy, 1976). According to the APA (1994) mortality rates for anorexia nervosa range from 5% to 18%. The individuals that manage to survive disordered eating can suffer deep emotional and physical wounds (e.g., depression, anxiety, brittle bones, tooth damage, and kidney damage).

Eating disorders have also been associated with a tendency to feel pressure to adhere to traditional gender roles (Martz, Handley, & Eisler, 1995), a drive for perfectionism (Bastiani, Rao, Weltzin, & Kaye, 1995), an achievement orientation (Bruch, 1978; Garner, Olmstead, Bohr, & Garfinkel, 1982), depression (see Strober, 1992 for a review), a desire for control in one's life (Strober, 1992), dysfunctional parent-child relationships (Minuchin, Rosman, & Baker, 1978; Waller, Calam, & Slade, 1988), and marital problems (Van den Broucke & Vandereycken, 1989).

### Individual Difference Variables

While past research in mass communication has often limited the variables of study to independent and dependent variables, an important component of a theoretical rationale for media influence with regard to body image includes a focus on the moderators that affect the relationships among mediated ideal body images and body satisfaction, self-esteem, and eating disorders (Stice & Shaw, 1994). In other words, it is important to consider the individual characteristics that account for the strengthening or weakening of the relationship between the ought self (in this study conceptualized as the media norm) and the ideal self. Only certain types of females will be influenced by the ought self, as not all individuals place a strong importance on the social norm. Thus, focusing on the characteristics that distinguish this group of females becomes important in predicting the impact of mediated ideal images on the ideal self, and the stronger the congruency between the ideal self and the actual self, the greater the body satisfaction.

While this methodological approach makes sense, given the multidimensional nature of communication and the interactivity of communication-related variables, mass communication research has not traditionally focused on moderating variables. Rubin (1993) argues, “We need to examine elaborated models of media effects that consider social and psychological attributes, motivation, attitudes, behavior, and outcomes” (p. 103). Eveland (1997) concurs, contending that mass communication researchers need to “become more cognizant of the importance of interactions and nonlinearity for both theoretical and methodological reasons” (p. 400). Consequently, the current study will explore individual characteristics that influence the relationship between media exposure

and body satisfaction, which in turn affects females' likelihood to develop low self-esteem and eating disorders. These individual characteristics include body weight, self-monitoring, intrasexual competitiveness, and self-efficacy. While this list is not meant to be exhaustive, it does attempt to identify some potentially important characteristics that differentiate women who are negatively affected by the mediated norm (or the ought self) from those who are not. The rationale for including each of these individual difference variables is described below.

### *Body Weight*

*Body weight* can be regarded as a relatively objective measure of one's body mass, which must be considered in proportion to one's height. Unlike underweight females, average and overweight females' bodies do not conform to the typical bodies presented on television and fashion magazines. Consequently, heavier women feel less positive about their weight and sexual attractiveness after viewing mediated ideal images than thinner women do (Henderson-King & Henderson-King, 1997). Overweight females are also more likely than thinner females to express low body esteem (Hendry & Gillies, 1978). Thus, body weight is likely to moderate the effect of mediated images on women such that women with bodies that do not conform to the mediated norm are likely to experience greater dissatisfaction when confronted with this norm than those with bodies that do conform to this norm.

### *Self-Monitoring*

While body weight is likely to play a role in moderating media exposure and body satisfaction, its impact will also be affected by the importance that individuals attribute to

the social norm. While some people highly value the opinion of others (i.e., the ought self), others are not overly concerned with social norms (e.g., non-conformists).

Correspondingly, some individuals are more likely than others to modify their behaviors and self-presentations to meet situational demands (Snyder, 1974, 1979, 1987). More specifically, Snyder argues that some individuals (i.e., *high self-monitors*) show high (a) concern with self-presentation/social appropriateness, (b) propensity to engage in social comparison, (c) ability to self-regulate expressive behavior, and (d) ability to adapt their behavior to situations. However, people who are not concerned with self-presentation (i.e., *low self-monitors*) are unlikely to adapt their behavior to meet situational demands. Snyder (1979) explains, “High self-monitoring individuals are thought to construct their person-in-situation scenarios by reading the character of each situation that confronts them to identify a prototype of the ideal person” (p. 104). Low self-monitors, however, always play the same character; they rely on ingrained notions of self to guide their behavior and presentations in various types of situations (Hamid, 1989). Not surprisingly, high self-monitors show more concern for their weight than low self-monitors (Henderson-King & Henderson-King, 1997).

Since high self-monitors adapt their expressive behavior and self-presentational cues to meet the perceived needs of their social environments, they are likely to look to others to learn how to dress, act, and speak in hopes of appearing socially competent. Thus, high self-monitors engage in social comparison because they require information on what is socially acceptable to validate and/or modify their self-concepts. Low self-monitors, on the other hand, are more internally motivated; they tend to behave and present themselves

in about the same way, regardless of the situation. A low self-monitor, for example, is not likely to dress to fit a normative standard but rather to wear whatever she feels comfortable in. Thus, low self-monitors are less likely to be influenced by those around them.

### *Intrasexual Competitiveness*

People often assume that one of the reasons females engage in social comparison, and thus strive to be thin, is to attract significant others. However, the evidence for this claim is not well established. Women actually select ideal physical bodies that are significantly thinner than the figures that men select as ideal for women (Rozin & Fallon, 1988; Lamb et al., 1993). Moreover, differences exist in the ideal images of females portrayed in media targeting women versus those targeting men. While both of these media genres have followed a trend toward thinner females over time (see Garner et al., 1980; Morris et al., 1989; Wiseman et al., 1992), magazines targeting men (e.g., *Playboy*, *Maxim*, & the Swimsuit Edition of *Sports Illustrated*) feature females with more voluptuous bodies than magazines targeting women (e.g., *Vogue*, *Glamour*, *Cosmopolitan*, & *Mademoiselle*). Similar trends exist on television and in advertisements that cater to male audiences (e.g., “Baywatch”, “The Sopranos”, and commercials advertising beer) versus female audiences (e.g., “Ally McBeal”, Revlon ads, and ads for clothing). Therefore, alternatives to the claim that females strive to be thin to attract and retain men must be considered.

One such hypothesis, emerging from an evolutionary perspective on eating disorders, concerns the role of *intrasexual competition* in body image disturbances and eating

disorders (see Abed, 1998). Rewards associated with being physically attractive are well documented (see Dion, Berscheid, & Walster, 1972; Cash, 1990). Since North American society regards thin women as physically attractive, it follows that thin women are more likely to be socially rewarded. Thinness has become “symbolic of strength, independence, and achievement (previously male-dominated traits), as well as attractiveness” (Percy & Lautman, 1994, p. 302). Thus, intrasexual competition emerges when females try to gain a competitive advantage over other females, not only to attract members of the opposite sex, but also to gain status among females. Weight control is one means by which females can attain higher status among females.

Studies of competitiveness and eating disorders provide support for the argument that the drive toward thinness is linked with the desire for females to compete with each other. More specifically, Burckle, Ryckman, Gold, Thornton, and Audesse (1999) concluded that hyper-competitiveness (defined as the need to be successful at all costs and the willingness to exploit others to obtain this success) was strongly related to eating disorders, whereas more constructive forms of competitiveness were not. Striegel-Moore, Silberstein, Grunberg, and Rodin (1990) found that university students with eating disorders displayed significantly higher competitiveness than those without eating disorders. Huon and colleagues (1999) also found that peer competitiveness was a strong predictor of dieting status. Members of all-female organizations (e.g., dancers, sorority members, and girls who attend private schools) display higher rates of disordered eating than individuals who are not members of such organizations (Garner & Garfinkel, 1980; Garner, Rosen, & Barry, 1998; Schulken, Pinciario, Sawyer, Jenson, & Hoban, 1997). For

example, Garner and Garfinkel (1980) found that dancers from highly competitive dance schools were more likely to exhibit eating disorders than those from less competitive environments. They found the same effect for female models. Similarly, Rucinski (1989) found that 48% of female competitive ice skaters demonstrated eating disorder symptomatology. While part of this heightened competitiveness is likely due to the demands of their disciplines, it is also possible that increased competitiveness results from the increased standard present in such groups.

Assuming that intrasexual competition does in fact account for some of the variance in eating disorders, media that present unrealistically thin images as the norm create a heightened standard by which females have to compare themselves, thus elevating the level of competition among women (see Abed, 1998). As such, females who are heavy media consumers are likely to experience a heightened sense of intrasexual competitiveness if they value the mediated norm. Media set a rigorous standard of comparison that makes these females more prone to eating disorders. Thus, we would expect that females who express high levels of intrasexual competitive drives are more likely to experience dissatisfaction with their bodies if they do not meet the mediated standard than those who display low levels of intrasexual competition.

### *Self-Efficacy*

*Self-efficacy*, the belief in one's ability to effectively perform a behavior, affects the nature of the goals people set for themselves. People *high in self-efficacy* in a given area will set higher goals and will work harder to attain their goals in this area (Bandura, 1989). Thus, women with high levels of self-efficacy to meet the mediated ideal are more

likely to believe that they can attain figures similar to those presented on television and in fashion magazines (e.g., women who are tall but just need to lose a few pounds, women who have similar body shapes, etc.). However, women with *low self-efficacy* [e.g., women whose body weights are far from the mediated ideal or who have attributes (e.g., they are 4' 10") that would make it impossible to attain this ideal] will set lower goals and, consequently, experience decreased self-esteem because they cannot meet the standard and obtain the resulting rewards. Self-efficacy is strengthened through mastery experiences, modeling, social persuasion, and inferences regarding one's physiological state (Bandura, 1991). Regardless of the method they use to attain self-efficacy, people who perceive themselves as being capable of conforming to the standard of beauty presented on television and in fashion magazines are more likely to experience body satisfaction and high self-esteem if they are exposed to such content on a regular basis, compared to those with low self-efficacy.

#### Seeking out Mediated Ideal Female Images

The previous section provides an argument for the inclusion of individual difference variables that moderate the impact of media images of females on body satisfaction. However, it is also interesting to consider features that characterize those who seek out mediated content dominated by ideal body images (e.g., fashion magazines and fashion television) to determine whether those most at risk are also those who seek out this content.

People consume media with varying degrees of activity. Sometimes they consume media passively, and other times, they critically process the content in active ways

(Palmgreen, 1984; Palmgreen & Rayburn, 1985; Palmgreen, Wenner, & Rosengreen, 1985; Rubin, 1986). Ruggiero (2000) explains, “Different individuals tend to display different types and amounts of activity in different communication settings and at different times in the communication process” (p. 8). For example, Stormer and Thompson’s (1996) study of female college students revealed that some individuals internalize sociocultural messages about the importance of thinness, whereas others simply demonstrate awareness of the messages. Their study supports the idea that some viewers are more likely to accept the messages provided about body image, whereas others may notice but reject them, demonstrating differing degrees of cognitive elaboration of mediated messages.

Motivations for consuming mediated content facilitate predictions regarding the degree to which people will actively process messages (Gantz, 1977). Laswell (1948) identified four primary functions of the media—surveillance, correlation, socialization, and entertainment. Since then, many researchers have offered alternative typologies for classifying the needs that media fulfill and the motivations for seeking out different media (e.g., Katz, Gurevitch, & Haas, 1973; Levy & Windahl, 1985; McQuail, Blumler, & Brown, 1972). Regardless of the typology employed, the main argument is the same—individuals seek out media to fulfill different needs, depending upon their motivations for viewing/processing the messages (Katz, Blumler, & Gurevitch, 1974). Furthermore, one’s motivation for consuming mediated messages affects one’s recall of these same messages (Blumler, 1979). For example, individuals who seek out fashion magazines to obtain information on trends in fashion and beauty are likely to process this content more

actively and to recall more of what they read than individuals flipping through a magazine to distract themselves in a dentist's office. Thus, Blumler contends that the gratifications individuals seek from media affect the outcomes of this exposure.

Assuming we accept that, at least some of the time, individuals actively seek out media to meet certain needs, it follows that people will selectively seek out different types of media and different types of content, depending upon their needs at that time (see Rubin, 1993). Swanson (1987) emphasizes the importance of focusing more attention on the role of uses and gratifications in relation to specific types of media content. The current study seeks to respond to this call by examining the motivations for viewing and the gratifications received from mediated ideal body images. While it is not possible to completely avoid mediated ideal images (as they are pervasive in our society), it is likely that some people have greater exposure to this content than others. Thus, it becomes interesting to consider the profile of those who seek out media dominated by ideal female body images. This information can facilitate the future design of messages that specifically target this group.

Based on the above rationale and operational definitions, the next section turns to a formal explication of the theoretical framework.

### **Theory of Media Influence on Body Satisfaction, Self-Esteem and Disordered Eating in Females**

#### ***Boundary Conditions***

To construct a strong theoretical rationale, researchers must set boundaries on their theories—particularly in early phases of research. These boundaries, as well as the

theoretical specifications, limit the focus of study. Thus, the theoretical framework outlined below informs the measures employed in the study as well as the procedures through which the theory is tested.

This study specifically examines the role of images presented on Western television and in Western fashion magazines. The author recognizes the importance of other sociocultural factors such as family relationships, peer relationships, education, and culture in contributing to the problems of low self-esteem, low body satisfaction, and disordered eating. As Bishop (2000) explains, “The media are one cultural force—part of the backdrop against which our body images are played out. Mediated messages are perhaps the most obvious of these forces, but they still are part of a larger picture” (p. 283). However, the domain of interest for the purposes of this study is restricted to the influence of mediated images.

This theory also limits its focus to the study of females. This does not imply that studying the effects of mediated ideal images on self-esteem, body satisfaction, and eating disorders in males is not important; however, studies consistently find gender differences in relation to body satisfaction. Compared to males, females are less satisfied with their bodies and express greater body distortion and lower body esteem (Graham et al., 2000; Parkinson et al., 1998). Moreover, mediated images of females are qualitatively different than those of males. Male representations on television appear to be growing more diverse and multidimensional (Hanke, 1990, 1998; Nixon, 1997) while representations of women remain unidimensional and unrealistic. Thus, the problems associated with poor body image appear to be more pressing for females.

### *Assumptions*

The following section summarizes the assumptions made for theory building purposes:

- 1) Through a drive to differentiate themselves from others, individuals develop a self-concept.
- 2) The physical self represents one dimension of the self-concept.
- 3) The importance that individuals attribute to different dimensions of their self-concepts varies, with some dimensions being central and others being more peripheral.
- 4) The more central a specific dimension of the self, the more likely one is to look for devices or techniques to validate that particular dimension.
- 5) The self-concept is malleable, changing over time.
- 6) Through social comparison, individuals develop actual, ideal, and ought selves.
- 7) The importance of the ought self, which can help to inform the ideal self, differs from individual to individual, with some individuals placing a high value on this component of the self and others placing little or no value on this component of the self.
- 8) Upward physical comparisons result in decreases in body satisfaction in individuals who place a high value on the ought physical self.
- 9) When the actual self is discrepant from the ideal self, individuals experience discomfort and body dissatisfaction; the greater the magnitude of the discrepancy, the greater the dissatisfaction.

- 10) Some females engage in extreme behaviors in an attempt to meet their ideal self, which can result in disorders such as anorexia nervosa and bulimia.
- 11) Media influence people by presenting persistent and consistent images of social norms.
- 12) Some individuals consume more mediated content than other individuals.
- 13) Western media present a normative ideal female body that is unnaturally thin and straight (i.e., it does not correspond with the normative female body in Western cultures).
- 14) Current mediated images make salient the discrepancy between actual and ought bodies, which can inform the ideal body.
- 15) Females who are underweight by health standards approximate the mediated ideal more than those who are of average weight or overweight.
- 16) Individuals vary in the degree to which they seek validation from the outside world.
- 17) In an effort to remain competitive in the social and sexual environment, females display varying levels of intrasexual competitiveness.
- 18) Females express varying levels of confidence in their ability to match the mediated ideal.
- 19) Individuals use media to meet specific needs.
- 20) Needs influence the manner in which people process messages.

### *Propositions*

Given the assumptions outlined above, the following propositions can be forwarded:

- 1) **Discrepancies between a female's actual physical self and the mediated ideal will result in lowered body satisfaction in females who place a high value on the social norm (i.e., the ought self). If this type of a discrepancy does not exist, these females will experience satisfaction.**
- 2) **Discrepancies between a female's ideal physical self and the media norm will result in lowered self-esteem only for those females who hold their physical selves as central to their self-concepts.**
- 3) **Repeated exposure to mediated presentations of unrealistically thin females as the norm result in perceptions that being thin is good and valued.**
- 4) **Heavy viewers of mainstream media are more likely than light viewers of mainstream media to demonstrate awareness of the media norm.**
- 5) **Females who are underweight by health standards are more likely to express heightened body satisfaction following exposure to mediated content than those who are of normal weight or overweight.**
- 6) **Because they look to the outside world for validation, high self-monitors are more likely than low self-monitors to compare themselves to mediated figures.**
- 7) **By presenting an unrealistic normative body, media images of female bodies heighten levels of intrasexual competition.**

- 8) Females whose bodies most closely approximate the current mediated standard are most likely to express confidence in their ability to match the mediated ideal.
- 9) Low body satisfaction and low self-esteem increase females' likelihood of developing disordered eating.

### *Hypotheses*

- H1a: A linear relationship exists between television consumption and beliefs about reality such that the more television females watch, the more likely they are to believe that thinness is good and valued.
- H1b: A linear relationship exists between fashion magazine consumption and beliefs about reality such that the more females consume fashion magazines, the more likely they are to believe that thinness is good and valued.
- H2a: There is an ordinal interaction between television exposure and weight such that heavy television consumption is associated with lower body satisfaction in females who are of average weight or overweight than in those who are underweight. This effect is less pronounced in females who are light television consumers.
- H2b: There is an ordinal interaction between magazine exposure and weight such that heavy consumption of fashion magazines is associated with lower body satisfaction in females who are of average weight or overweight than in those who are underweight. This effect is less pronounced in females who are light consumers of fashion magazines.

- H3a:** There is an interaction among television exposure, self-monitoring, and weight such that heavy television consumption is associated with lower body satisfaction in females who are high self-monitors and who are of average weight or overweight than in those who are low self-monitors and/or who are underweight. This effect is less pronounced in light television consumers.
- H3b:** There is an interaction among magazine exposure, self-monitoring, and weight such that heavy consumption of fashion magazines is associated with lower body satisfaction in females who are high self-monitors and who are of average or overweight than in those who are low self-monitors and/or who are underweight. This effect is less pronounced in light consumers of fashion magazines.
- H4a:** There is an interaction among television exposure, intrasexual competitiveness, and weight such that heavy television consumption is associated with lower body satisfaction in females who are high in intrasexual competitiveness and who are of average weight or overweight than in those who are low in intrasexual competitiveness and/or who are underweight. This effect is less pronounced in light television consumers.
- H4b:** There is an interaction among magazine exposure, intrasexual competitiveness, and weight such that heavy consumption of fashion magazines is associated with lower body satisfaction in females who are high in intrasexual competitiveness and who are of average weight or overweight than in those who are low in intrasexual competitiveness and/or who are underweight. This effect is less pronounced in light consumers of fashion magazines.

- H5a:** There is an ordinal interaction between television exposure and self-efficacy such that heavy television consumption is associated with lower body satisfaction in females who indicate low self-efficacy to meet the mediated ideal than in those who indicate high self-efficacy to meet the mediated ideal. This effect is less pronounced in light television consumers.
- H5b:** There is an ordinal interaction between magazine exposure and self-efficacy such that heavy consumption of fashion magazines is associated with lower body satisfaction in females who indicate low self-efficacy to meet the mediated than in those who indicate high self-efficacy to meet the mediated ideal. This effect is less pronounced in light consumers of fashion magazines.
- H6:** There is a disordinal interaction between body satisfaction and importance of the physical self to the self-concept such that low body satisfaction is associated with lower self-esteem in females who ascribe high importance to their physical selves than in those who ascribe low importance to their physical selves. Conversely, high body satisfaction is associated with higher self-esteem in females who ascribe high importance to their physical selves than in those who ascribe low importance to their physical selves.
- H7:** Decreases in self-esteem will be associated with increases in behaviors characteristic of eating disorders.

### *Research Questions*

As discussed previously, in addition to examining the individual characteristics that affect whether a female is influenced by the media or not, it is interesting to consider the

**characteristics associated with females who seek out mediated content high in ideal images. Thus, the following research questions are posited:**

**RQ1: What individual traits characterize individuals who seek out mediated content high in ideal body images?**

**RQ2: What motivations do females have for seeking out mediated content high in ideal body images?**

## CHAPTER III

### METHODOLOGY

#### *Participants*

Adult participants were recruited from large undergraduate classes in communication at the University of Arizona. A total of 202 female students completed the survey. The average age of respondents in the sample was 21.8 years ( $SD = 5.0$  years), with age ranging from 19 years to 54 years. The sample was broken down by ethnicity as follows: 83.7% Caucasian/White, 5.4% Hispanic/Latino, 3.5% African-American/Black, and 7.4% "Other." The majority of respondents identified themselves as single (86.1%) and heterosexual (97.4%). Additionally, 47.8% of respondents indicated that they had smoked at least one cigarette in the past 30 days, of which 18.8% agreed that they smoked cigarettes to control their weight. Eight percent of respondents had had some type of plastic surgery at some point in their lives, and 1.5% of respondents were pregnant or suspected that they might be pregnant.

#### *Procedures*

Respondents completed a paper and pencil survey during class time; they were offered extra credit for their participation. The survey took approximate 30 minutes for students to complete. To ensure that students did not complete the survey more than once, those who had already completed it in another class were offered an alternative extra credit activity. Students who opted to participate in the study had to sign an informed consent form, which briefly explained the study procedures and purpose (see Appendix A for a copy of the consent form and Appendix B for a copy of the questionnaire).

## Measures

### *Predictor Variables*

***Exposure to television content.*** To determine overall level of exposure to television, respondents indicated the average amount of television they watched on a typical weekday, Saturday, and Sunday. Average weekly television consumption was calculated by multiplying average weekday television consumption by five and then adding average Saturday and average Sunday television consumption. Subsequently, average daily television consumption was calculated by dividing weekly consumption by seven. On average, respondents reported watching 2.43 hours ( $SD = 1.65$ ) of television per day. Heavy versus light viewership was computed by splitting the sample at the median (2.07); thus, light viewers watched 2.07 hours of television per day or less whereas heavy viewers watched more than 2.07 hours of television per day.

A modified version of Potter's (1987) categorizations of television content was also included in the survey for purposes of exploratory analysis. Consequently, respondents indicated how many hours they spent watching each of the following types of programs in an average week: (1) daytime soap operas ( $M = .86$ ,  $SD = 1.9$ ), (2) information (news and documentaries) ( $M = 3.13$ ,  $SD = 3.5$ ), (3) situation comedies ( $M=3.06$ ,  $SD = 3.0$ ), (4) action adventure/horror shows ( $M = .71$ ,  $SD = 1.9$ ), (5) primetime soap operas/serials ( $M = .73$ ,  $SD = 1.5$ ), (6) movies on television ( $M = 2.03$ ,  $SD = 2.5$ ), (7) sports ( $M = 1.13$ ,  $SD = 2.3$ ), (8) cartoons ( $M = .20$ ,  $SD = .65$ ), (9) music videos ( $M = 1.53$ ,  $SD = 2.6$ ), (10) reality-based television ( $M = .85$ ,  $SD = 1.8$ ), (11) daytime talk shows ( $M = .34$ ,  $SD = .94$ ),

(12) late-night talk shows ( $M=.79$ ,  $SD = 1.2$ ), (13) game shows ( $M=.37$ ,  $SD = .98$ ), (14) fashion television ( $M = .65$ ,  $SD = 1.5$ ), and (15) other programs ( $M = .27$ ,  $SD = 1.2$ ).

*Exposure to fashion magazines.* Respondents also indicated how many minutes they spent flipping through and/or reading magazines in an average week, and how many minutes they spent consuming different genres of magazines in an average month (e.g., fashion magazines, entertainment magazines, trade magazines, sports magazines, music magazines, general interest magazines, magazines related to hobbies, and business/financial magazines). On average, respondents reported spending 44.4 minutes per week ( $SD = 64.5$  minutes) reading and/or flipping through magazines; they spent an average of 51.4 minutes per month ( $SD = 73.3$  minutes) reading and/or flipping through fashion magazines. Light versus heavy fashion magazine consumption was computed by splitting responses at the median (30 minutes). Table 1 provides a breakdown of the average time respondents reported consuming different genres of magazines per month.

**TABLE 1—Mean monthly consumption by magazine genre**

<b>Genre</b>	<b>Mean (<i>SD</i>)</b>
Fashion	51.4 mins (73.3)
Arts & Entertainment	31.2 mins (50.8)
News	30.1 mins (109.5)
Fitness	14.3 mins (38.0)
Music	8.0 mins (24.2)
Sports	7.1 mins (29.7)
Other	12.6 mins (43.2)

*Dimensions of the self-concept.* To measure the relative importance of various dimensions of the self-concept (i.e., the physical self, intellectual self, emotional self, and social self), survey items probed respondents regarding the importance of various components of the self (with 0 being *Extremely Unimportant* and 5 being *Extremely Important*). The scale for the physical self included the following items: body, physical attractiveness, facial appearance, sense of style, and ability to attract a romantic partner ( $M = 3.80, SD = 0.76$ ). The scale assessing the importance of the social self was comprised of friendships, romantic relationships, family relationships, popularity with same sex friends, popularity with opposite sex friends, and social skills ( $M = 4.10, SD = 0.58$ ). The intellectual scale included grades at school, knowledge of current affairs, intelligence, success at one's career, and competence at work or school ( $M = 4.20, SD = 0.57$ ). Finally, the scale measuring the emotional self consisted of ability to express one's emotions, sensitivity, and ability to empathize with others ( $M = 4.11, SD = 0.76$ ). Each of these scales demonstrated acceptable reliabilities, with coefficient alphas at or above .69 (physical  $\alpha = .84$ , social  $\alpha = .69$ , intellectual  $\alpha = .76$ , emotional  $\alpha = .76$ ). Table 2 provides the correlational relationships among these variables.

TABLE 2 – Pearson correlation coefficients

	PHYSICAL	SOCIAL	EMOTIONAL	INTELLECTUAL
PHYSICAL	1.00	.55*	.29*	.23*
SOCIAL	--	1.00	.39*	.30*
EMOTIONAL	--	--	1.00	.25*
INTELLECTUAL	--	--	--	1.00

\* $p < .01$

*Body mass index.* The body mass index (BMI) was used to calculate subjects' weight in proportion to their height. This widely employed index was computed by dividing subjects' weight in kilograms by their height in meters squared ( $\text{kg}/\text{m}^2$ ). The BMI correlates highly with other measures of body mass such as skinfold thickness and body density (Garrow & Webster, 1985). The Center for Disease Control (CDC) reports that a BMI less than 18.5 categorizes an adult (i.e., 21+ years old) as underweight, a BMI of 18.5 to 24.9 classifies an adult as healthy/of average weight, and a BMI 25 or higher classifies an adult as overweight (see <http://www.cdc.gov/nccdphp/dnpa/bmi/bmi-adult.htm>). The average BMI of respondents in this sample was 22.1 ( $SD = 3.3$ ); 7.5% of respondents were underweight by CDC standards, 77.6% were average weight, and 14.9% were overweight.

For purposes of this study, the sample was split into three groups based on BMI scores. Thus, individuals with BMIs equal to or less than 20.53 were classified as "underweight" (representing 33.3% of the sample), individuals with BMIs greater than 20.53 and less than or equal to 22.50 were "average weight" (representing 32.8% of the sample), and individuals with BMIs greater than 22.50 were "overweight" (representing 33.9% of the sample). Dividing the sample this way allowed for equal cell sizes.

There has been some discussion in the literature over whether self-reported body weights are accurate predictors of actual body weight (see Brooks-Gunn, Warren, Rosso, & Garguilo, 1987; DelPrete, Caldwell, English, Banspach, & Lefebvre, 1992; Koslowsky & Scheinberg, 1994; Ziebland, Thorogood, Fuller, & Muir, 1996). Specifically, some researchers have found that individuals tend to underreport their weight, particularly

individuals who are overweight; however, these underestimations tend to be minor (Koslowsky & Scheinberg, 1994; Ziebland et al., 1996). Moreover, studies of large samples of youth and adults reveal high correlations (from .90 to .98) between self-reported weight and objective measures of weight (Goodman, Hinden, & Khandelwal, 2000; Palta, Prineas, Berman, & Hannah, 1982; Shannon, Smiciklas-Wright, & Wang, 1991). Thus, most researchers (e.g., Black, Taylor, & Coster, 1998; Goodman et al., 2000; Ziebland et al., 1996) agree that self-reported weight is a valid proxy for actual weight and preferable to more obtrusive measures of weight such as scales or skinfold triceps.

*Ideal weight.* In addition to measures of actual weight, subjects were asked to indicate their ideal weight. Subtracting actual from ideal weight provided a measure of discrepancy. A negative score indicated that the individual wanted to weigh less; a positive score indicated that the individual wanted to weigh more. The mean discrepancy score among females in the sample was  $-11.1$  pounds ( $SD = 12.4$  pounds). Thus, on average, females wished they weighed 11 pounds less. Only 2.5% of respondents wished they weighed more; 13.6% reported an ideal weight that corresponded with their actual weight.

*Self-monitoring.* Subjects were classified as either high or low self-monitors based on their responses to a subset of 11 items from Snyder's (1974) self-monitoring scale ( $M = 2.28$ ,  $SD = 0.75$ ). For each item on this scale, respondents indicated their level of agreement from *Strongly Disagree* (0) to *Strongly Agree* (5). Examples of such items included the following: (1) I guess I put on a show to impress or entertain people. (2) I

sometimes appear to be experiencing deeper emotions than I actually am. (3) I may deceive people by being friendly when I really dislike them. After reverse coding the appropriate items, the Cronbach's alpha for the scale was .74. Respondents were broken into high and low self-monitoring groups based on a median split, with scores equal to or less than 2.28 classifying individuals as low self-monitors and responses greater than 2.28 classifying individuals as high self-monitors.

*Intrasexual competitiveness.* The survey included a number of items designed to probe *intrasexual competition*. The overall scale consisted of 14 vignettes probing competitive behaviors among females. Subjects rated the degree to which they believed that the main character's behavior in each vignette was appropriate. The overall intrasexual competitiveness scale included items probing *intrasexual competition for status* and items probing *intrasexual competition for mates*. These vignettes were written in the third person to mitigate social desirability biases in responses. An example of a vignette measuring intrasexual competitiveness for status follows:

*Mary and Jane are writing reports on similar topics. Jane, who is struggling with the material, asks Mary for help. Mary, who feels that she has worked too hard on her report to give what she has earned to Jane, gives Jane a thick stack of printouts from a computer search that she knows did not yield any useful information.*

Similarly, the following is an example of a vignette tapping tendencies toward intrasexual competition to attract mates:

*Jane and Mary, who are both single, signed up for carpentry classes in*

*hopes of meeting eligible bachelors. Both are excited when they discover that many single men are in the class. However, as the class progresses, Mary is frustrated by the fact that all the men are paying attention to Jane. Mary convinces Jane that she is a lousy carpenter and that she should drop the class.*

For each vignette, respondents indicated whether they perceived Mary's behavior as appropriate on a scale from 0 to 5 where 0 was *Completely Inappropriate* and 5 was *Completely Appropriate*. The intrasexual competitiveness scale, consisting of all 14 items, yielded a high internal reliability (Cronbach's alpha = .86)†.

Respondents were divided into "high" and "low" intrasexual competitiveness groups, based on the median of the overall scale. As such, respondents with a score of 1.14 or lower on the overall intrasexual scale were classified as "low" in intrasexual competitiveness; those with a score higher than 1.14 were classified as "high." Overall, subjects tended to express low levels of intrasexual competitiveness—the average score on the intrasexual competitiveness scale was 1.29 ( $SD = .75$ ).

*Self-efficacy.* To measure self-efficacy, respondents indicated their level of agreement with the following statements on a scale of 0 to 5 where 0 was *Strongly Disagree* and 5 was *Strongly Agree*: (1) It would not take much effort for me to look like most models in magazines. (2) No stylist or make-up artist could make me look like most actresses on

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† Intrasexual competitiveness was initially divided into two subscales (ie., competition for status and competition for mates); however, these scales were highly correlated ( $.79, p < .0001$ ) and were thus combined into one general intrasexual competitiveness scale.

television. (3) With a little work, my body could look like that of most models in magazines. (4) My body is similar to that of most actresses on television. (5) No stylist or make up artist could make me look like most models in magazines. (6) My body could never look like the bodies of most actresses on television. (7) It would take a lot of effort for me to look like most actresses on television. After reverse-coding the appropriate items, the scale demonstrated strong internal reliability (Cronbach's alpha = 0.83) ( $M = 2.74$ ,  $SD = .98$ ). A median split was used to break respondents into categories so that respondents with a mean score on the self-efficacy scale less than or equal to 2.57 were classified as low on self-efficacy whereas those with a mean score above 2.57 were classified as high on self-efficacy.

#### *Dependent Variables*

*Cultivation effects.* To measure generalized beliefs and values (also termed *second-order effects*) regarding body image, this study probed females' acceptance of the body image norms set by mainstream media. While a direct measure of cultivation effects did not exist for body-related issues, *the awareness subscale* of Heinberg, Thompson, and Stormer's (1995) Sociocultural Attitudes Toward Appearance Questionnaire (SATAQ) included items designed to assess individuals' awareness of societal attitudes about thinness/attractiveness. Thus, the scale for cultivation effects borrowed the following items (with slight modifications) from this subscale: (1) In our society, fat people are not regarded as attractive. (2) Attractiveness is very important if you want to get ahead in our society. (3) It's important for people to work hard on their physiques if they want to succeed in today's culture. (4) The thinner a woman is, the better she looks. Researchers

have confirmed the reliability and validity of the SATAQ awareness subscale on both adults and adolescents (Heinberg et al., 1995; Smolak, Levine, & Thompson, 2001). The cultivation scale also included several new items such as the following: (1) Looking good is the key to a happy relationship. (2) Women who are thin are rewarded in our society. (3) Men would always prefer to be with a slim woman. This 14-item scale asked respondents to rate their agreement with each item from *Strongly Disagree* (0) to *Strongly Agree* (5). After reverse-coding the appropriate items, one item was deleted from the scale, to yield a Cronbach's alpha of .75.

*Self-esteem.* Rosenberg's (1965, 1979) unidimensional 10-item scale of global self-esteem was employed to measure this construct (Cronbach's alpha = .87). For each item on this scale, respondents indicated their agreement (on a six-point Likert scale where 0 meant *Strongly Disagree* and 5 meant *Strongly Agree*) with statements such as the following: (1) On the whole, I am satisfied with myself. (2) At times I think I am no good at all. (3) I feel like a person who has a number of good qualities. (4) I take a positive attitude toward myself. Rosenberg's scale is probably the most widely used measure of self-esteem. As such, it has been validated on diverse populations of different ethnic, age, and social backgrounds (e.g., Banos & Guillen, 2000; Ferring & Flipp, 1996; Kienhorst, de Wilde, Van den Bout, & Diekstra, 1990; Shapurian, Hojat, & Naverahmadi, 1987; Sheasby & Barlow, 2000; Utsey & Ponteretto, 2000).

*Body dissatisfaction.* The *body dissatisfaction subscale* of the Eating Disorders Inventory (EDI-BD) (Garner, Olmstead, & Polivy, 1983) measured satisfaction with one's body. This scale was comprised of nine items including the following: (1) I think

my thighs are too large. (2) I think my stomach is just the right size. (3) I feel satisfied with the shape of my body. Respondents indicated their agreement with each item on a scale of zero to five, with 0 being *Strongly Disagree* and 5 being *Strongly Agree*. To score the EDI, a “3” is given to the most extreme response (i.e., 5), followed by a “2” for the next most extreme response (i.e., 4), and a “1” for the next response (i.e., 3). All other responses (i.e., 2, 1, 0) earn a score of “0”. The overall scale score is computed by summing all item scores on the scale. Garner and colleagues (1983; Garner, 1991) have established discriminant and convergent validity for this scale. The scale’s internal reliability was high (Cronbach’s alpha = .88).

*Disordered eating.* Subscales of the Eating Disorders Inventory (EDI), developed by Garner and colleagues (1983), were also used to measure behaviors characteristic of disordered eating. Garner and colleagues (1983) have demonstrated convergent and discriminant validity on each of these scales; they cross-validated the scales on large samples of clinical and nonclinical females. These scales are scored in the same way as the body dissatisfaction scale (see above).

The seven-item *drive for thinness* subscale (Cronbach’s alpha = .87) assessed excessive concern with dieting, preoccupation with weight, and pursuit of thinness. This six-interval scale, bounded by *Strongly Disagree* and *Strongly Agree*, identified individuals who displayed characteristics of anorexia nervosa. Items on this scale included the following: (1) I think about dieting. (2) I feel extremely guilty after overeating. (3) I am terrified of gaining weight. (4) If I gain a pound, I worry that I will keep gaining.

The *bulimia subscale* (Cronbach's alpha = .74) measured tendency to binge, purge and engage in other bulimic behaviors. This seven-item scale consisted of items such as the following: (1) I eat when I am upset. (2) I stuff myself with food. (3) I eat moderately in front of others and stuff myself when they are gone. Respondents indicated the extent to which they agreed with each statement on a six-point scale from *Strongly Agree* to *Strongly Disagree*.

*Uses and gratifications.* Finally, the following open-ended question for respondents who read fashion magazines and/or watched fashion television was included in the survey: Why do you read fashion magazines and/or watch fashion television? Responses to this question provided information to address the second research question that dealt with females' motivations for seeking out media content high in ideal body images.

## CHAPTER IV

## RESULTS

All hypotheses were tested at a significance level of .05. Data analysis was conducted using SPSS 10.0.

*Preliminary Analysis*

Table 3 presents the means and standard deviations of the dependent variables, as well as the correlations among these variables. Cultivation effects correlated positively with body dissatisfaction, drive for thinness, and bulimia and negatively with self-esteem. On average, respondents expressed high self-esteem ( $M = 3.95$ ), moderate body dissatisfaction ( $M = 8.70$ ), and moderate drive for thinness ( $M = 6.91$ ). The average respondent displayed a low tendency toward bulimia ( $M = 2.82$ ). Body dissatisfaction correlated negatively with self-esteem and positively with drive for thinness and bulimia. Self-esteem also correlated negatively with drive for thinness and bulimia, which correlated positively with each other.

TABLE 3—Means, standard deviations, and correlations for the dependent variables

	Mean	SD	(1)	(2)	(3)	(4)
(1) Cultivation effects	3.01	.63				
(2) Body Dissatisfaction	8.70	6.95	.38*			
(3) Self-esteem	3.95	.76	-.29*	-.33*		
(4) Drive for thinness	6.91	5.54	.54*	.59*	-.28*	
(5) Bulimia	2.82	3.24	.31*	.39*	-.38*	.41*

\* $p < .0001$

### *Hypotheses 1a & 1b*

The first set of hypotheses predicted a linear relationship between television/fashion magazine consumption and beliefs about social reality. That is, the more television/fashion magazines females viewed/read, the more likely they would be to believe that thinness was good and valued.

Hypotheses 1a and 1b were tested in SPSS 10.0 using one-tailed Pearson correlation coefficients to examine the relationships among overall television exposure, fashion magazine exposure, and cultivation effects. The predicted correlation between overall television exposure and cultivation effects was non-significant  $r(196) = .00, p > .05$ . However, the predicted correlation between fashion magazine consumption and cultivation effects was positive and significant,  $r(193) = .16, p < .05$ . Thus, as consumption of fashion magazines increased, females were more likely to believe that thinness was good and valued.

### *Hypotheses 2a & 2b*

Hypotheses 2a and 2b predicted an interaction between television/fashion magazine exposure and weight. That is, heavy consumption would be associated with lower body satisfaction in females who were of average weight or overweight (in relation to their height) but not in those who were underweight. This effect would be less pronounced in females who were light consumers.

Hypothesis 2a was tested with a 2 (TV Exposure: Heavy/Light) X 3 (Weight: Under/Average/Over) univariate ANOVA for the dependent variable body dissatisfaction. The predicted interaction between television exposure and body mass

index (BMI) was not significant,  $F(2,191) = .36, p > .05$ . However, there was a significant main effect for BMI,  $F(2,191) = 12.55, p < .0001, \eta^2 = .12$ . Underweight respondents were least dissatisfied with their weight ( $M = 5.70, SD = 6.39$ ), followed by average weight respondents ( $M = 9.00, SD = 6.47$ ) and overweight respondents ( $M = 11.45, SD = 6.72$ ). A Tukey's HSD post hoc test of individual mean differences yielded significant differences between the underweight and average weight conditions ( $p < .05$ ) and between the underweight and overweight conditions ( $p < .05$ ), but not between the average weight and overweight conditions.

Hypothesis 2b was tested with a 2 (Fashion Magazine Exposure: Heavy/Light) X 3 (Weight: Under/Average/Over) univariate ANOVA for the dependent variable body dissatisfaction. The predicted interaction between fashion magazine exposure and BMI was not significant,  $F(2,188) = .78, p > .05$ . However, a significant main effect for BMI emerged,  $F(2,188) = 10.75, p < .0001, \eta^2 = .10$ , with dissatisfaction increasing as weight increased from underweight to average/overweight.

### *Hypotheses 3a & 3b*

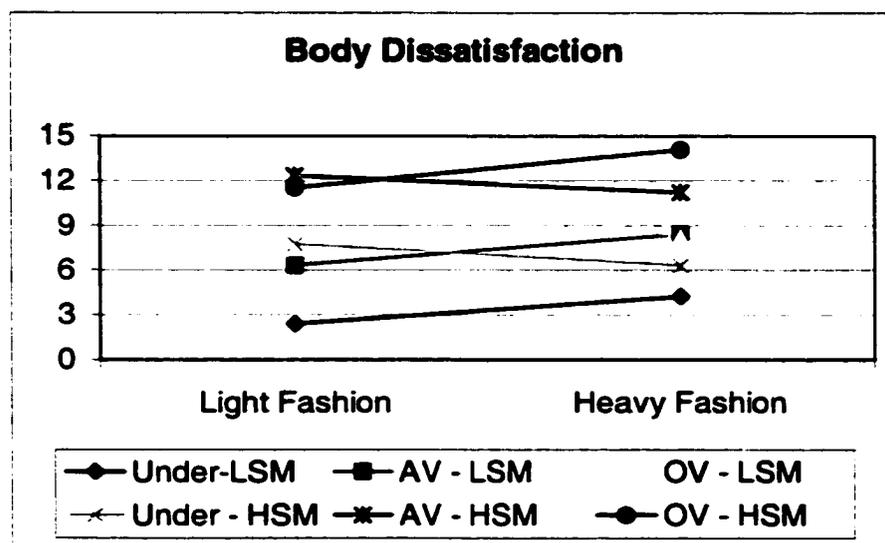
Hypotheses 3a and 3b predicted interactions among television/fashion magazine exposure, self-monitoring, and weight. More specifically, the study predicted that heavy media consumption would be associated with lower body satisfaction in high self-monitors of average weight or overweight than in low self-monitors and/or underweight individuals. This effect would be less pronounced for light media consumers.

Testing hypothesis 3a involved the use of a 2 (TV Exposure: Heavy/Light) X 3 (Weight: Under/Average/Over) X 2 (Self-Monitoring: Low/High) univariate ANOVA.

with body dissatisfaction as the dependent variable. Results of this analysis revealed that the hypothesized three-way interaction was not significant,  $F(2,185) = 1.50, p > .05$ . However, there was a significant main effect for BMI,  $F(2,185) = 11.77, p < .0001, \eta^2 = .11$  and a significant main effect for self-monitoring,  $F(1,185) = 12.43, p < .001, \eta^2 = .06$ . Examination of the means for self-monitoring revealed that high self-monitors ( $M = 10.16, SD = 7.45$ ) were more likely than low self-monitors ( $M = 7.27, SD = 6.05$ ) to express body dissatisfaction.

Hypothesis 3b was also tested with a 2 (Fashion Magazine Exposure: Heavy/Light) X 3 (Weight: Under/Average/Over) X 2 (Self-Monitoring: Low/High) univariate ANOVA, with body dissatisfaction as the dependent variable. The hypothesized three-way interaction was statistically significant,  $F(2,182) = 3.09, p < .05, \eta^2 = .03$ . Figure 1 provides a chart of the interactions as well as the cell means. Examination of the means for light fashion magazine readers revealed similar levels of body dissatisfaction in overweight low self-monitors ( $M = 12.47, SD = 6.24$ ) and overweight high self-monitors ( $M = 11.55, SD = 6.32$ ). Heavy fashion magazine consumption, on the other hand, was associated with significantly higher body dissatisfaction in overweight high self-monitors ( $M = 14.08, SD = 8.50$ ) than in overweight low self-monitors ( $M = 8.25, SD = 5.53$ ). Levels of fashion magazine consumption did not significantly impact underweight and average weight respondents; however, high self-monitors in these groups expressed greater body dissatisfaction than low-self monitors.

**FIGURE 1—Mean body dissatisfaction by self-monitoring, weight, and fashion magazine consumption**



	Light Fashion	Heavy Fashion
Underweight – Low self-monitoring	2.40	4.26
Average – Low self-monitoring	6.33	8.43
Overweight – Low self-monitoring	12.47	8.25
Underweight – High self-monitoring	7.75	6.33
Average – High self-monitoring	12.33	11.20
Overweight – High self-monitoring	11.54	14.08

#### *Hypotheses 4a & 4b*

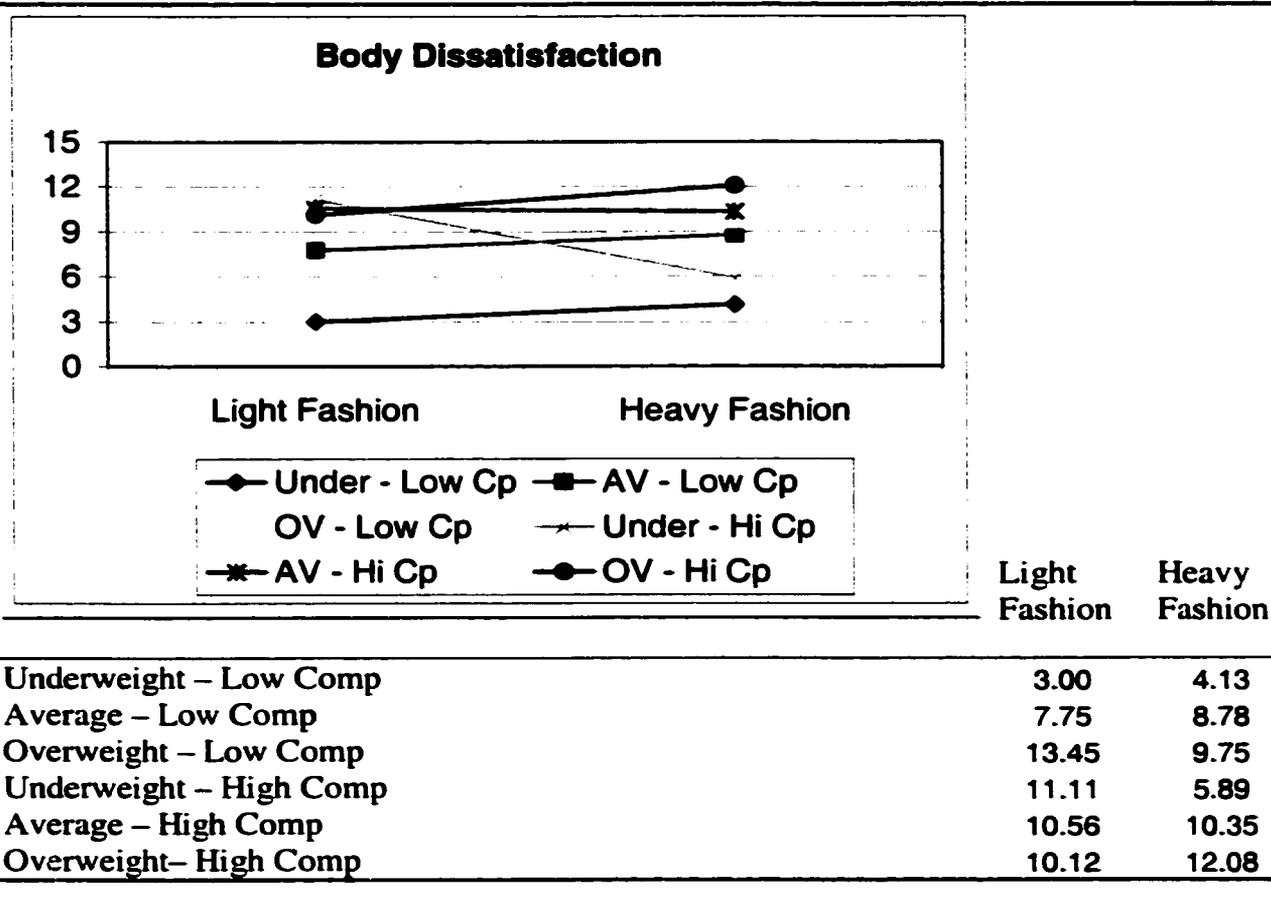
Hypotheses 4a and 4b predicted significant interactions among television exposure/fashion magazine exposure, intrasexual competitiveness, and weight. Specifically, heavy media consumption would be associated with lower body satisfaction in females who were high in intrasexual competitiveness and who were of average weight or overweight than in those who were low in intrasexual competitiveness and/or who were underweight. This effect would be less pronounced in light consumers.

Hypothesis 4a was tested with a 2 (TV Exposure: Heavy/Light) X 3 (Weight: Under/Average/Over) X 2 (Intrasexual competitiveness: Low/High) univariate ANOVA, with the dependent variable body dissatisfaction. The hypothesized three-way interaction was not significant,  $F(2,183) = 1.63, p > .05$ . There was a significant main effect for BMI,  $F(2,183) = 13.27, p < .0001, \eta^2 = .13$  and for intrasexual competitiveness,  $F(1,183) = 4.68, p < .05, \eta^2 = .03$ . Examination of the cell means for competitiveness revealed that highly competitive females ( $M = 9.34, SD = 6.53$ ) expressed greater body dissatisfaction than less competitive females ( $M = 8.02, SD = 7.24$ ).

Testing hypothesis 4b involved the use of a 2 (Fashion Magazine Exposure: Heavy/Light) X 3 (Weight: Under/Average/Over) X 2 (Intrasexual competitiveness: Low/High) univariate ANOVA, with the dependent variable body dissatisfaction. The hypothesized three-way interaction was statistically significant,  $F(2,180) = 3.26, p < .05, \eta^2 = .04$ . There was also a significant main effect for BMI,  $F(2,180) = 10.18, p < .001, \eta^2 = .10$  and a significant main effect for intrasexual competitiveness,  $F(1,180) = 4.98, p < .05, \eta^2 = .03$ . Examination of the cell means (see Figure 2) revealed that body dissatisfaction levels in overweight respondents high in competitiveness increased slightly with increased fashion magazine consumption. Conversely, body dissatisfaction levels in overweight respondents low in competitiveness decreased with increased fashion magazine consumption. On the other hand, fashion magazine consumption did not influence body dissatisfaction in average weight respondents, regardless of their level of competitiveness. Similarly, fashion magazine consumption patterns did not affect expressed levels of body dissatisfaction in underweight respondents low in

competitiveness. However, among underweight respondents high in intrasexual competitiveness, body dissatisfaction was substantially higher for light fashion magazine readers than for heavy readers.

**FIGURE 2—Mean body dissatisfaction by competitiveness, weight, and fashion magazine consumption**



*Hypotheses 5a & 5b*

Hypotheses 5a and 5b predicted an interaction between television/fashion magazine exposure and self-efficacy, such that heavy TV/magazine consumption would be

associated with lower body satisfaction in females with low self-efficacy than in those with high self-efficacy. This effect would be less apparent among light consumers.

To test Hypothesis 5a, a 2 (TV Exposure: Heavy/Light) X 2 (Self-Efficacy: High/Low) univariate ANOVA was conducted, with body dissatisfaction as the dependent variable. While the predicted interaction between self-efficacy and television exposure was not significant,  $F(1,194) = .22, p > .05$ , a significant main effect emerged for self-efficacy,  $F(1,194) = 19.78, p < .0001, \eta^2 = .09$ . Analysis of the means revealed that females who did not perceive the mediated ideal as attainable expressed significantly greater body dissatisfaction ( $M = 10.76, SD = 7.10$ ) than those who believed that they could attain this ideal ( $M = 6.56, SD = 6.05$ ).

Hypothesis 5b was also tested using a 2 (Fashion Magazine Consumption: Heavy/Light) X 2 (Self-Efficacy: High/Low) univariate ANOVA, with body dissatisfaction as the dependent variable. Again, the interaction between self-efficacy and fashion magazine consumption was not significant,  $F(1,191) = .00, p > .05$ . However, there was a significant main effect for self-efficacy,  $F(1,191) = 17.72, p < .0001, \eta^2 = .09$ , with expressed body dissatisfaction significantly higher in those low in self-efficacy than in those high in self-efficacy.

Finally, to determine the extent to which self-efficacy was associated with body mass index (BMI), a two-tailed Pearson's correlation coefficient between BMI and self-efficacy was conducted. Not surprisingly, there was a significant negative correlation between BMI and self-efficacy,  $r(200) = -.20, p < .01$ .

### *Hypothesis 6*

Hypothesis 6 predicted an interaction between body satisfaction and importance of the physical self to the self-concept, such that low body satisfaction would be associated with lower self-esteem in females who ascribed high importance to their physical selves than in those who ascribed lower importance to their physical selves. Conversely, high body satisfaction would be associated with higher self-esteem in females who ascribed high importance to their physical selves than in those who ascribed lower importance to their physical selves. For purposes of this analysis, body satisfaction was split into high and low groups based on the median (7.00). Importance of the physical self was computed in the same way (3.60). Thus, a 2 (Body dissatisfaction: High/Low) X 2 (Importance of the physical self: High/Low) univariate ANOVA was employed to test the impact of body satisfaction and importance of the physical self on self-esteem.

The hypothesized interaction was not significant,  $F(1,198) = .64, p > .05$ . However, there was a significant main effect for body dissatisfaction,  $F(1,198) = 23.18, p < .0001, \eta^2 = .11$ . Self-esteem was lower in individuals who expressed high body dissatisfaction ( $M = 3.69, SD = .81$ ) than in those who expressed low body dissatisfaction ( $M = 4.20, SD = .61$ ), regardless of the importance that they attributed to their physical selves.

### *Hypothesis 7*

The final hypothesis predicted that low self-esteem would be associated with greater tendencies toward disordered eating. To test this hypothesis, Pearson correlation coefficients were conducted among self-esteem, drive for thinness, and bulimia. As reported previously (see Table 3), significant negative correlations existed between self-

esteem and drive for thinness,  $r(201) = -.28, p < .0001$ , and between self-esteem and bulimia,  $r(201) = -.38, p < .0001$ . Thus, decreases in self-esteem were associated with substantial increases in drive for thinness and bulimic tendencies. A chi-square analysis further revealed that individuals with low self-esteem were more likely than those with high self-esteem to have been diagnosed with an eating disorder at some point in their lives and/or to report having an eating disorder for which they had never received treatment (21.1% of those with low self-esteem vs. 8.7% of those with high self-esteem) ( $\chi^2 = 6.13, df = 1, p < .05$ ).

### *Research Question 1*

The first research question sought to understand the characteristics distinguishing heavy consumers of content high in mediated ideal body images from light consumers of such content. Groups were first compared on demographic characteristics such as age, ethnicity, marital status, and sexual orientation.

Chi-square analyses did not reveal significant differences between heavy fashion magazine readers/fashion television viewers and light readers/viewers in terms of ethnicity or sexual orientation. However, a 2 (Heavy/Light) X 2 (Single/Not Single) chi-square analysis revealed that heavy fashion magazine readers (94.0%) were significantly more likely than light readers (76.6%) to be single ( $\chi^2 = 11.88, df = 1, p < .001$ ). This did not hold true for fashion television viewers. An independent samples t-test also revealed that fashion television viewers ( $M = 20.8$  years,  $SD = 2.6$  years) were significantly younger than those who did not watch fashion television ( $M = 22.3$  years,  $SD = 5.8$

years),  $t(195) = 2.50, p < .05$ . Significant age differences did not exist between light and heavy fashion magazine readers.

To further address the above research question, independent samples t-tests compared heavy ( $n = 101$ ) and light ( $n = 94$ ) fashion magazine readers and fashion television viewers ( $n = 66$ ) and non-viewers ( $n = 133$ ) on the following dependent measures: body mass index, importance of the physical self, importance of the social self, importance of the emotional self, importance of the intellectual self, intrasexual competitiveness, and self-monitoring. Given the exploratory nature of these analyses, Bonferroni adjustments were employed to mitigate against Type I error. Thus, a significance level of .007 (.05/7) was used for these tests.

Compared to light consumers of fashion magazines, heavy consumers of fashion magazines weighed significantly less in relation to their height,  $t(192) = 3.00, p < .007$ ; they also valued their physical,  $t(193) = -3.65, p < .0001$ , and social selves,  $t(193) = -3.16, p < .007$ , more than light consumers. Light and heavy consumers did not differ significantly in terms of how much they valued their emotional or intellectual selves. Heavy consumers did express higher intrasexual competition than light consumers,  $t(191) = -2.89, p < .007$ , but did not display differences in self-monitoring. Table 4 presents the means and standard deviations for each of the dependent variables.

TABLE 4—Means and standard deviations by fashion magazine consumption

	Light ( <i>n</i> = 94) Mean ( <i>SD</i> )	Heavy ( <i>n</i> = 101) Mean ( <i>SD</i> )
BMI	22.86 (3.44)	21.47 (3.02)
Importance of physical self	3.62 (.72)	4.00 (.72)
Importance of social self	3.97 (.62)	4.23 (.53)
Importance of emotional self	4.07 (.66)	4.20 (.79)
Importance of intellectual self	4.11 (.63)	4.26 (.50)
Intraseual competitiveness	1.13 (.72)	1.43 (.75)
Self-monitoring	2.26 (.72)	2.33 (.79)

Compared to non-viewers, fashion television viewers placed greater value on their physical selves,  $t(197) = -4.74, p < .0001$ . Other significant differences did not emerge between fashion television viewers and non-viewers (see Table 5).

TABLE 5—Means and standard deviations by fashion television consumption

	Non-Viewers ( <i>n</i> = 133) Mean ( <i>SD</i> )	Viewers ( <i>n</i> = 66) Mean ( <i>SD</i> )
BMI	22.50 (3.43)	21.33 (2.81)
Importance of physical self	3.63 (.78)	4.15 (.59)
Importance of social self	4.05 (.59)	4.23 (.55)
Importance of emotional self	4.07 (.73)	4.23 (.75)
Importance of intellectual self	4.17 (.58)	4.24 (.55)
Intraseual competitiveness	1.24 (.73)	1.38 (.77)
Self-monitoring	2.26 (.73)	2.34 (.79)

*Research Question 2*

The second research question dealt with motivations for seeking out content high in mediated ideal body images. To address this issue, responses to the open-ended question asking individuals why they read fashion magazines and/or watched fashion television were grouped into categories based on the most frequent responses. Table 6 provides a breakdown of responses by the 103 females who answered this question.

The most common motivation for consuming content high in mediated ideal body images appeared to be for information: 78.6% of respondents indicated that they read fashion magazines and/or watched fashion television to obtain information on trends in fashion, hairstyles, and make-up. As well, 15.5% said they enjoyed reading the articles and horoscopes in these magazines. The secondary motivation for consuming such content appeared to be for entertainment and escapism—19.4% of individuals indicated that they read fashion magazines and watched fashion television because it was entertaining and/or it made them laugh. Nine percent of respondents said that these magazines helped to relieve boredom and pass time.

TABLE 6—Motivations for consuming fashion magazines and fashion television

Motivation	% (n = 103)	Example
Trends in fashion/hair	78.6%	<i>“I like to see the new styles.”</i>
Entertainment/Escape/Relaxation	19.4%	<i>“To escape from the rigors of life.”</i>
Articles/Horoscopes	15.5%	<i>“It has interesting articles.”</i>
Pass time	8.7%	<i>“To kill time when I have nothing else to do.”</i>
Celebrities	6.8%	<i>“To see what’s going on with the celebrities.”</i>
Other	2.9%	<i>“I flip through Cosmo because my roommate reads it.”</i>

### *Supplementary Analyses*

H2a-b, H3a-b, H4a-b, H5a-b, and H6 were also tested with multiple regression. As such, separate hierarchical regression models were constructed for each hypothesis, with the independent and moderating variables input into each model first (as continuous rather than categorical variables) followed by their interactions. These analyses did not reveal any additional significant findings ( $p < .05$ ).

## CHAPTER V

### DISCUSSION

Results of this study confirm that poor body image is a widespread problem among young women—even among the most educated. Female university students express feelings of high esteem toward their selves in general. However, confirming previous research (e.g., Brook & Tepper, 1997; Eisele et al., 1986; Grigg et al., 1997; Larson 1991; Parkinson et al., 1998), they do not esteem their bodies to the same degree. Although only 14.9% of respondents in this study were overweight by CDC standards for adults, 83.9% expressed the desire to weigh less. In fact, on average, respondents wanted to weigh 11 pounds less—a weight that would move many of these females into the underweight category.

Contrary to expectations, the relative importance that females placed on their physical selves did not impact the relationship between body satisfaction and self-esteem. Regardless of the importance that they attached to their physical selves, women with low body satisfaction were more likely than those with high body satisfaction to express low self-esteem. It is noteworthy, however, that the vast majority of females in this study appeared to value their physical selves, with little variability among individuals. This sample also placed a high value on their intellectual, social, and emotional selves.

College students represent a unique portion of the female population in that their lives tend to be more balanced than females of other ages and in other life situations (e.g., young mothers or young professionals). While a primary focus of college will be

intellectual pursuits, social pursuits are also allotted a high priority during this time in a young woman's life. Furthermore, placing a high value on physical appearance, as well as emotional sensitivity, can help to enhance college females' inclusion in social groups such as sororities and clubs; it can also increase the likelihood that these women will be successful in pursuing romantic relationships. Given their instrumental nature, it is not surprising that young college females tend to highly value each of the dimensions of their selves. Studying a larger cross-section of females, including females who allow specific dimensions of their selves to become central, to the exclusion of others, would provide a fairer test of the hypothesis.

Young adult females are routinely exposed to mainstream media that feature ideal female body images, particularly print media. While respondents watch an average of 2.4 hours of television per day, the most popular genres of programs they view include situation comedies, news, documentaries, and movies on television. Music videos and sports are also popular with this group, but to a lesser extent. Thus, the televised content that these women are consuming is not necessarily the content that is most associated with ideal female bodies (e.g., soap operas and dramatic series). While a third of female university students watch some fashion television in a typical week, 75% read and/or flip through fashion magazines. Respondents spend an average of 51 minutes per month reading and/or flipping through fashion magazines—significantly more time than with any other genre of magazine. Compared to light readers, heavy fashion magazine readers have lower body mass indexes (BMI), value their physical and social selves more, and express higher levels of intrasexual competition.

Most of the women who consume fashion magazines actively process the content. Seventy-nine percent of fashion magazine and fashion television consumers use these media to learn more about trends in clothing, hair, and make-up. Sixteen percent enjoy reading the articles and horoscopes in fashion magazines. Only 19.4% of respondents consume fashion magazines/fashion television for entertainment; 8.7% employ them to pass time. While this study does not provide specific information on motivations for viewing television in general, it is reasonable to assume that television is often consumed in a passive manner. Individuals watch television while cooking, cleaning, and studying; they also use television as a distraction and to relieve boredom. Results of this study suggest that fashion magazines engage readers in an active way, encouraging readers to pay attention to the messages they carry—messages that emphasize beauty and thinness at all costs.

This study predicted that increases in exposure to the ideal body images featured on television and in fashion magazines would be associated with a greater likelihood to value physical attractiveness and thinness. Contrary to expectations, amount of television consumption did not predict the value that someone would place on beauty and thinness. However, the greater the exposure to fashion magazines, the greater was the likelihood that respondents would hold beliefs congruent with the dominant beliefs and values presented in mainstream media. Thus, consistent with the cultivation hypothesis, the more women consumed fashion magazines, the more likely they were to believe in the importance of attractiveness and the more likely they were to value thinness. Moreover,

the more they held these types of beliefs, the more likely they were to express body dissatisfaction, low self-esteem, a drive toward thinness, and bulimic tendencies.

While the data partially support the cultivation hypothesis, they also warrant a caution. This study only establishes a correlational relationship between fashion magazine consumption and beauty-related beliefs. That is, it is not possible to conclude that fashion magazine consumption influences beauty-related beliefs. Women may seek out magazines that reflect the value they *already* place on attractiveness rather than change their beliefs to conform to the values advocated by these magazines. Further research is necessary to understand the causal linkages between fashion magazine consumption and beauty-related beliefs. However, it is noteworthy that three in four women seek out fashion magazines despite the fact that less than ten percent of women have bodies that conform highly with those presented in these magazines (i.e., underweight bodies). Thus, the argument that only thin women seek out this content does not appear plausible. Furthermore, the fact that young college women are learning the value of thinness and attractiveness from somewhere cannot be ignored. The increasing trend toward obesity in North American society does not support the idea that they are learning such values simply by observing the individuals in their social environment. Even the women on college campuses tend to have average weight rather than underweight bodies.

Whatever the causal factors may be, the results of this study do support the conclusion that females who believe in the importance of beauty and thinness (whether heavy or light consumers of media) not only tend to feel worse about themselves, but

they are also more likely to engage in behaviors characteristic of disordered eating than those who do not hold these beliefs. Thus, de-emphasizing the importance of beauty and thinness (whether through media or other means) and emphasizing the importance of other traits and activities in young females' lives (e.g., intellectual pursuits and physical activity) may be important in warding off problems associated with poor self-esteem and disordered eating.

This study also predicted that media exposure would not directly affect body satisfaction but would interact with body weight, self-monitoring, intrasexual competitiveness, and self-efficacy to influence body satisfaction. Confirming theoretical predictions, media exposure was not a direct predictor of body satisfaction. However, BMI and self-efficacy were *direct predictors of body satisfaction* rather than *moderators*. Furthermore, contrary to expectations, overall television exposure did not interact with body weight, self-monitoring, intrasexual competitiveness, or self-monitoring to predict body dissatisfaction. Significant interactions did occur among fashion magazine consumption, weight, and self-monitoring and among fashion magazine consumption, weight, and intrasexual competitiveness (see below). As body satisfaction and self-esteem decreased, tendencies to display attitudes and behaviors characteristic of anorexia nervosa and bulimia increased. Thus, addressing the problem of low body satisfaction among young adult females appears important in conquering behaviors and attitudes associated with disordered eating.

While media exposure did not interact with body weight or self-efficacy to influence body satisfaction, results suggested that media effects were operative on some level. For

example, underweight respondents were most satisfied with their bodies, followed by average weight respondents and overweight respondents. Thus, the body size associated with the greatest satisfaction conformed to the one presented most frequently in mainstream media [instead of the one that is normative in the demographic group (average/healthy weight)]. Moreover, the slimmer the individual, the more she believed that she approximated (or could easily approximate) the mediated ideal, indicating an awareness of this ideal. Respondents who believed they approximated this ideal expressed significantly greater body satisfaction than those who did not (accounting for 9% of the variance in body dissatisfaction). In fact, females who did not believe that they could achieve the mediated ideal tended to express high body dissatisfaction, whereas those who believed they could achieve this ideal tended to express low body dissatisfaction.

People who looked to others for validation (i.e., high self-monitors) were also significantly more likely than those who did not (i.e., low self-monitors) to experience body dissatisfaction. Moreover, fashion magazine consumption interacted with self-monitoring and body weight to influence body satisfaction. As predicted, heavy fashion magazine readers were more likely to express body dissatisfaction if they were high self-monitors and average/overweight than if they were low self-monitors and/or underweight. Expressed levels of body dissatisfaction did not differ among overweight light consumers of fashion magazines, regardless of their self-monitoring levels. As expected, heavy fashion magazine consumption was associated with lower body satisfaction than light consumption in overweight high self-monitors. Interestingly,

however, heavy consumption of fashion magazines was associated with *higher* body satisfaction than light consumption among overweight low self-monitors.

These results suggest that women with bodies that diverge from the mediated ideal experience dissatisfaction if they are high self-monitors who actively seek out media featuring ideal images of women. In other words, as self-discrepancy theory would predict, women who value the social norm (or the ought self) are likely to experience dissatisfaction if they are highly aware of this norm (e.g., they are heavy readers of fashion magazines) and yet they do not measure up with this norm (i.e., they are not underweight). However, women whose bodies diverge from the mediated ideal actually feel better about themselves if they do not feel the need to obtain approval from others (i.e., they are low self-monitors) and they are heavy fashion magazine readers (i.e., they are highly aware of the norm). Perhaps, rather than comparing themselves unfavorably with the models, the women who do not seek validation from fashion magazines identify with the models in these magazines, putting themselves in the place of these women. This argument lends support for previous findings by Myers and Biocca (1992) and Harrison (1997).

Alternatively, the tendency for overweight women who do not look to others for validation, but who are heavy fashion magazine consumers, to think for themselves may lead them to pay little attention to the ideals perpetrated by the media that they consume. Brehm's theory of psychological reactance (1966) would suggest that such women may choose to deliberately defy norms because they believe that these norms threaten their behavioral freedoms. Such individuals would not place much value on the ought self:

thus, they would not allow the mediated norm to inform their ideal self. In fact, the ideal for these women would be to differ from the norm. Thus, a discrepancy between the ideal and the actual would not exist for these types of women. This explanation is consistent with the finding that average weight and underweight women, who are low self-monitors, do not experience the same increases in body satisfaction with increased consumption of fashion magazines. These women may not have the same desire for non-conformity; while the opinions of others may not be highly important to them, they may not have the same need for rebelliousness as their more reactant counterparts.

Intrasexual competitiveness and weight also interacted with fashion magazine consumption to influence body satisfaction. More particularly, heavy consumption of fashion magazines was associated with lower body satisfaction in overweight females high in intrasexual competitiveness than in overweight females low in intrasexual competitiveness and/or average/underweight females. However, light fashion magazine consumption was associated with similar levels of body dissatisfaction in highly competitive overweight females, refuting the role of magazine consumption in impacting body satisfaction.

Interestingly, underweight women who displayed high levels of intrasexual competitiveness expressed significantly lower body satisfaction if they were light fashion magazine readers than if they were heavy readers. (This effect did not occur for underweight females low in intrasexual competitiveness.) Presumably, heavy consumers (who were underweight) felt good because they viewed themselves as solid competitors with the women in the magazines. Thus, exposure to mediated ideal images may actually

be beneficial to some women, boosting the body esteem of females who approximate the media norm and who feel the need to compete with other women.

As in the case of self-monitoring, heavy fashion magazine consumption was associated with higher body satisfaction than light consumption among overweight women who expressed low levels of intrasexual competitiveness. This same effect did not occur for overweight women who expressed high levels of competitiveness. Again, women who do not feel the need to compete with models may instead identify with them, extracting benefits by vicariously living through the models. Alternatively, they may be engaging in reactant behavior, choosing deliberately to defy social norms in an effort to regain freedom. Future studies examining this topic should incorporate measures of reactance, conformity, and identification in order to address some of these possible explanations for the results revealed in this study.

On the whole, females who express low levels of intrasexual competitiveness are more satisfied with their bodies than those who express high levels of intrasexual competitiveness. In fact, compared to other groups, underweight females low in intrasexual competitiveness expressed the highest body satisfaction. Thus, messages encouraging greater cooperation among females (and discouraging competition) appear important in boosting the body satisfaction and self-esteem of young women. Moreover, discouraging participation in sports and activities that encourage high levels of competitiveness with other females (e.g., figure skating, gymnastics, and dance) may be important in warding off poor body satisfaction and eating disorders. However, encouraging participation in more cooperative activities and sports (e.g., team sports) will

help youth to maintain slim and fit bodies, while at the same time discouraging heightened levels of competition with other females (at least on an individual level), which is likely to increase body satisfaction.

These results provide insight into variables that are important in affecting body satisfaction. However, further research is necessary to more fully understand the inter-relationships and causal directions among these variables. Most likely, those women who place a high value on beauty and thinness and who feel the need to compete and obtain validation from others will seek out media that, in turn, reinforce and solidify existing beliefs and create new beliefs similar to those already held. By encouraging young women to become more internally motivated (i.e., to focus on their own goals and desires rather than those of others) and to become less competitive, we may also be encouraging women to increase their body satisfaction and self-esteem and indirectly decreasing the likelihood that these women will develop eating disorders.

### *Limitations*

Several limitations impede interpretation of the results. First, this study employed overall television exposure as a proxy for exposure to mediated ideal body images. Given the recent trend in specialized television networks, cultivation theory's presumption that all content is equal may be flawed. Many heavy television viewers have relatively little exposure to television's ideal female bodies due to the nature of the content that they watch (e.g., discovery shows, documentaries, or nature shows), whereas some light viewers primarily watch content high in mediated ideal body images (e.g., dramatic series and soap operas). While this study broke television consumption down by genre, it did

not include a content analysis to determine the prevalence of mediated ideal body images in each of the various genres. Nor was a secondary literature available to offer this information. However, cultivation effects are stronger when researchers use theme-specific content rather than total television viewing as predictors (see Potter & Chang, 1990; Tan, 1979). Once content analyses of program genres are conducted, better measures of exposure to mediated ideal body images on television should be incorporated into studies assessing the impact of television exposure on body satisfaction, self-esteem, and eating disorders. Addressing this shortcoming will help to provide a more solid test of the hypotheses related to television exposure. At this time, it is unclear whether methodological deficiencies account for the lack of support rather than the true non-existence of a relationship.

A second limitation of the study concerns the nature of the intrasexual competitiveness measure. Although this measure demonstrated strong reliability, the mean and variability of scores on the scale were surprisingly low. Feedback from respondents suggested that they did not perceive the items on the scale as separate from one another, but instead tended to judge each item based on the ones that occurred previously. Thus, respondents may have given more extreme responses to items because they were judging them as a whole. In the future, instructions need to clarify and emphasize that each item on the scale is independent.

The nature of the sample also limits the study. Results from female university students cannot be generalized to all females. Furthermore, had a broader subsection of females been sampled (e.g., children, adolescents, women at home during the day),

results may have differed due to the nature of the content that these females consume (e.g., daytime soap operas, music videos, primetime serials), as well as personality and demographic characteristics unique to these females. Moreover, the number of hours watched by women in university (2.4 hours each day) is not necessarily representative of the hours viewed by the larger population. Many university students participate in a social life that is far more active than that enjoyed by other age groups. Their first years of independence from home and their quest for partners may motivate a greater stress on interpersonal associations, which translates into less time with media. Future research on children, adolescents, and adults from various demographic and social backgrounds will provide further insight into the extent to which these results can be generalized.

Problems inherent with self-reported media exposure further hinder this study. Respondents may engage in selective recall of television and magazine content. They may also underestimate the amount of media that they consume in order to meet what they perceive to be social norms. Finally, remembering how much media one typically consumes may be difficult. Studies employing multiple methods to assess exposure to television and magazines will help to address these shortcomings.

An additional limitation of this study results from the correlational nature of results. This study provides initial information on variables that may moderate the relationship between media exposure and body satisfaction. However, future studies need to occur in experimental settings where exposure to mediated ideal images is controlled to (1) avoid problems with self-reported media exposure, (2) help parse out the direction of the relationships among variables, and (3) mitigate against threats to internal validity.

Researchers could, for example, (1) pre-test all subjects on beauty-related beliefs, body satisfaction, and self-esteem; (2) randomly assign respondents to intervention and control groups; (3) expose the intervention group to visual and/or auditory messages that emphasize mediated ideal bodies; (4) expose a control group to neutral messages; and (5) post-test all respondents on beliefs, body satisfaction, and self-esteem. This approach would help to determine whether exposure to beauty-related messages and images influences beliefs, values, and feelings about the self or whether beliefs, values, and feelings influence exposure.

Experimental studies that expose individuals to several messages on a limited number of occasions have an inherent weakness, however, since messages emphasizing beauty appear repeatedly over many years. Thus, several newly introduced messages may have limited effects on strongly held pre-existing belief systems. Research including younger populations will be important in determining whether there is a point at which additional images no longer have an impact on females and whether there are critical time periods in which females are most influenced by media images.

The interactions predicted in this study may apply most readily to younger females who have not yet fully internalized the messages presented in mainstream media. By the time they reach university, females have been bombarded with images of mediated ideal female bodies for many years. There may be a saturation point at which all women have internalized the media ideal and exposure to additional mediated ideal images has little additional impact. This argument is bolstered by results of this study that suggest that women value the mediated ideal: Regardless of their current weights, most women strive

to be thinner; they are most satisfied with underweight bodies; and those who most approximate the mediated ideal express the greatest satisfaction with their bodies.

Longitudinal studies that track media consumption patterns over time and that examine the type and nature of media exposure will also help to determine the cumulative effects of exposure on beliefs and body satisfaction.

### *Conclusion*

While the content of media are not under the control of most individuals, individuals and organizations can use media to educate young women about body image issues. Understanding the profile of females who are most affected by mediated ideal body images is crucial to this process. In addition to providing information concerning the relationships among media exposure, body satisfaction, self-esteem, and disordered eating, this study has identified females who are most at risk of experiencing body dissatisfaction (i.e., high self-monitors, individuals who express high levels of intrasexual competitiveness, women with high body mass indexes, and women with low self-efficacy to meet the mediated ideal). The study also reveals interesting results regarding a group of females who do not appear to be affected by the social norms presented by the media (i.e., non-conformist women who do not place much value on the opinions of others and/or who do not feel the need to compete with other females). Increasingly, research in this area refutes a model of direct media effects and rather suggests that more complex relationships are operating. As such, mass communication researchers confront the challenge to delve deeper into the role of moderating and mediating variables through complex study designs and the use of more innovative research methods.

**APPENDIX A**

**SUBJECT CONSENT FORM**

**SUBJECT'S CONSENT FORM  
THE IMPACT OF REPEATED EXPOSURE TO IDEAL MEDIA ETD BODY IMAGES  
ON BODY SATISFACTION, SELF-ESTEEM, AND DISORDERED EATING**

I AM BEING ASKED TO READ THE FOLLOWING MATERIAL TO ENSURE THAT I AM INFORMED OF THE NATURE OF THIS RESEARCH STUDY AND OF HOW I WILL PARTICIPATE IN IT. IF I CONSENT TO DO SO, SIGNING THIS FORM WILL INDICATE THAT I HAVE BEEN SO INFORMED AND THAT I GIVE MY CONSENT. FEDERAL REGULATIONS REQUIRE WRITTEN INFORMED CONSENT PRIOR TO PARTICIPATION IN THIS RESEARCH STUDY SO THAT I CAN KNOW THE NATURE AND RISKS OF MY PARTICIPATION AND CAN DECIDE TO PARTICIPATE OR NOT PARTICIPATE IN A FREE AND INFORMED MANNER.

**PURPOSE:** I am being invited to participate voluntarily in the above-titled research project. The purpose of this project is to help the researcher understand how exposure to media (television and magazines) influences people's self-perceptions, attitudes, and behaviors.

**SELECTION CRITERIA:** I am eligible to participate because I am a college student 18 years of age or older. Approximately 700 college students will be enrolled in this study.

**PROCEDURE:** If I agree to participate, I will be asked to consent to answering questions about the following: 1) demographic information; 2) my opinions and feelings about physical attractiveness; 3) my feelings about myself; 4) my perceptions of others' behavior; 5) my eating habits; 6) the amount and type of media I watch/read, and 7) my attitudes toward sex. This survey will take about 25 minutes to complete.

**RISKS:** Participation in this project does not involve any known risks.

**BENEFITS:** There are no direct benefits to me as a participant, but this project may create a heightened sense of self-awareness regarding body image issues and exposure to media.

**CONFIDENTIALITY:** My answers will be completely anonymous and my name will only appear on this detachable consent form and will not be used in the data analysis in any way or published in any way. Only the principal investigator will have access to the data collected.

**CONTACTS:** I can obtain further information from the principal investigator Alexandra Hendriks, Ph.D. Candidate, at (520) 626-3558. If I have questions concerning my rights as a research subject, I may call the Human Subjects Committee office at (520) 626-6721.

**AUTHORIZATION**

Before giving my consent by signing this form, the methods, inconveniences, risks, and benefits have been explained to me and my questions have been answered. I may ask questions at any time and I am free to withdraw from the project at any time without causing bad feelings. My participation in this project may be ended by the investigator for reasons that would be explained. New information developed during the course of this study which may affect my willingness to continue in this research project will be given to me as it becomes available. This consent form will be filed in an area designated by the Human Subjects Committee with access restricted to the principal investigator, Alexandra Hendriks, or an authorized representative of the Communication Department. I do not give up any of my legal rights by signing this form. A copy of the signed consent form will be given to me.

-----  
Subject's Signature

-----  
Date

**INVESTIGATOR'S AFFIDAVIT**

I have carefully explained to the subject the nature of the above project. I hereby certify that to the best of my knowledge the person who is signing this consent form understands clearly the nature, demands, benefits, and risks involved in his/her participation and his/her signature is legally valid. A medical problem or language or educational barrier has not precluded this understanding.

-----  
Signature of Investigator

-----  
Date

**APPENDIX B**  
**QUESTIONNAIRE**

**UNIVERSITY OF ARIZONA**

**Study on Self-Perceptions and the Media (Females)**

**Directions:**

Please answer questions in the order they are provided. If at any time a question makes you feel uncomfortable, you may opt not to answer it. You may also choose to stop completing the survey at any time.

There are no right or wrong answers so try very hard to be honest in your responses.

All responses are completely anonymous and confidential.

**THANK YOU VERY MUCH FOR YOUR HELP ON THIS PROJECT. IF YOU HAVE ANY QUESTIONS AT ALL REGARDING THIS SURVEY, PLEASE DO NOT HESITATE TO CONTACT:**

**ALEXANDRA HENDRIKS, Ph.D. CANDIDATE  
PHONE: (520) 626-3558  
E-MAIL: HENDRIKS@EMAIL.ARIZONA.EDU**

## **SECTION 1**

**First, I would like to ask you some questions about yourself. Please answer as honestly as possible. If you aren't sure, take your best guess.**

**1 HOW OLD ARE YOU?** \_\_\_\_\_ years old

**2 HOW TALL ARE YOU?** \_\_\_\_\_ feet, \_\_\_\_\_ inches tall

**3 HOW MUCH DO YOU WEIGH (if you're not sure, take your best guess)?** \_\_\_\_\_ pounds

**4 WHAT WOULD YOU IDEALLY LIKE TO WEIGH?** \_\_\_\_\_ pounds

**5. WHAT IS YOUR ETHNIC BACKGROUND?**

- a. African-American/Black
- b. Asian-American/Pacific Islander
- c. Caucasian/White
- d. Hispanic/Latino/Chicano/Puerto Rican/Cuban
- e. Native American/American Indian
- f. Other

**7. WHICH OF THE FOLLOWING BEST DESCRIBES YOU?**

- a. Single, never married
- b. Living with my significant other, not married
- c. Married
- d. Divorced
- e. Separated
- f. Widowed

**SECTION 2**

Next, we are interested in your perceptions regarding beauty. Please think about adult females in the United States and answer the following questions in the space provided (with a number from 0 to 100). Don't worry about what the right answer might be. We are only interested in what you think.

a.	What percentage of women feel comfortable wearing bikinis on public beaches?	____%
b.	What percentage of women are taller than 5'7"?	____%
c.	What percentage of women are satisfied with their weight?	____%
d.	What percentage of women wear a size 7 dress or smaller?	____%
e.	What percentage of women wake up looking beautiful?	____%
f.	What percentage of women exercise on a regular basis?	____%
g.	What percentage of women can be considered slim?	____%
h.	What percentage of women are overweight?	____%
i.	What percentage of women have a waist size smaller than 28 inches?	____%

Using a six-point scale from 0 to 5 where "0" means "Strongly Disagree" and "5" means "Strongly Agree", please circle the number for each item below which best describes how much you disagree or agree with each statement.

		Strongly Disagree				Strongly Agree
a.	Clothes look better on thin people.	0	1	2	3	4 5
b.	In our society, fat people are not regarded as attractive.	0	1	2	3	4 5
c.	Attractiveness is very important if you want to get ahead in our society.	0	1	2	3	4 5
d.	It's important for women to work hard on their bodies if they want to succeed.	0	1	2	3	4 5
e.	In today's society, it's not important to always look attractive.	0	1	2	3	4 5
f.	Men would always prefer to be with a slim woman.	0	1	2	3	4 5
g.	The majority of women worry about their weight.	0	1	2	3	4 5
h.	Most women have to work hard to look good.	0	1	2	3	4 5
i.	We live in a country with many beautiful women.	0	1	2	3	4 5
j.	Most women look good in a bathing suit.	0	1	2	3	4 5
k.	The thinner a woman is, the better she looks.	0	1	2	3	4 5
l.	Thin women are more likely to succeed in the workplace.	0	1	2	3	4 5
m.	Looking good is the key to a happy relationship.	0	1	2	3	4 5
n.	The skinnier I am, the more attractive I am.	0	1	2	3	4 5

**SECTION 3**

The next set of questions ask about how you feel about **YOURSELF**. Using a six-point scale where "0" means "Strongly Disagree" and "5" means "Strongly Agree", please circle the number for each item below which best describes how much you disagree or agree with each statement.

		Strongly Disagree					Strongly Agree
a.	I feel that I am a person of worth, at least on an equal plane with others.	0	1	2	3	4	5
b.	I feel like a person who has a number of good qualities.	0	1	2	3	4	5
c.	All in all, I am inclined to feel like a failure.	0	1	2	3	4	5
d.	I am able to do things as well as most other people.	0	1	2	3	4	5
e.	I feel I do not have much to be proud of.	0	1	2	3	4	5
f.	I take a positive attitude toward myself.	0	1	2	3	4	5
g.	On the whole, I am satisfied with myself.	0	1	2	3	4	5
h.	I wish that I could have more respect for myself.	0	1	2	3	4	5
i.	I certainly feel useless at times.	0	1	2	3	4	5
j.	At times I think I am no good at all.	0	1	2	3	4	5
k.	It would not take much effort for me to look like most models in magazines.	0	1	2	3	4	5
l.	No stylist or make-up artist could make me look like most actresses on television.	0	1	2	3	4	5
m.	With a little work, my body could look like that of most models in magazines.	0	1	2	3	4	5
n.	My body is similar to that of most actresses on television.	0	1	2	3	4	5
o.	No stylist or make-up artist could make me look like most models in magazines.	0	1	2	3	4	5
p.	My body could never look like the bodies of most actresses on television.	0	1	2	3	4	5
q.	It would take a lot of effort for me to look like most actresses on television.	0	1	2	3	4	5

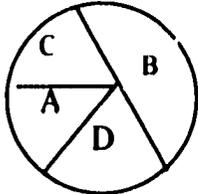
**SECTION 4**

Next, I would like you to divide a circle into pieces where each piece represents how important you think each of the characteristics listed below is to **WHO YOU ARE** as a person. If one of these dimensions is very important to who you are, it will receive a big piece of the circle. If one is not very important, it will receive a smaller piece. If one dimension is not at all important, you may decide to leave it out of the circle completely or one dimension may take up the entire circle. Write in the letter for each piece to represent what it stands for.

- A. your **Intellectual Self** (e.g., your intelligence, knowledge, education, competence at work or school)
- B. your **Social Self** (e.g., your friendships, romantic relationships, competence in dealing with other people)
- C. your **Physical Self** (e.g., your body shape, your weight, your face, your physical attractiveness)
- D. your **Emotional Self** (e.g., your sensitivity, your ability to empathize with others, your moods)

**EXAMPLE 1:**

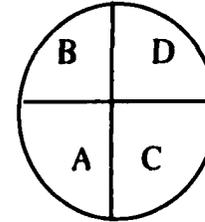
Mary believes her social relationships are extremely important to who she is as a person. Therefore, she gives the biggest piece of her circle to her social self (B). Her physical self (C) is also important to her, but not as important as her social self. Her intellectual self (A) and emotional self (D) are least important to her.



**EXAMPLE 1**

**EXAMPLE 2:**

Jane values her intellectual (A), social (B), physical (C), and emotional (D) selves fairly equally so her pieces are all about the same size (though D and C have slightly more importance).

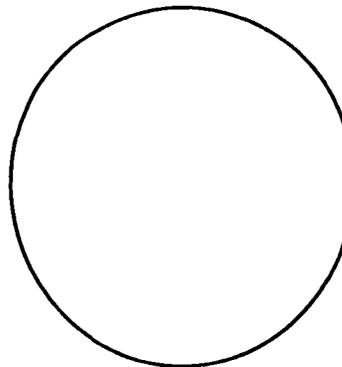


**EXAMPLE 2**

**NOW IT IS YOUR TURN...**

Please divide this circle into up to four pieces, representing how important each is to **WHO YOU ARE**

- A) your **Intellectual Self**,
- B) your **Social Self**
- C) your **Physical Self**, and
- D) your **Emotional Self**.



**YOUR ESTIMATE**

Now, please rate how important each of the following is to WHO YOU ARE AS A PERSON on a six-point scale where "0" represents "Extremely Unimportant" and "5" represents "Extremely Important."

		Extremely Unimportant			Extremely Important		
a.	Your intelligence	0	1	2	3	4	5
b.	Your body	0	1	2	3	4	5
c.	Your friendships	0	1	2	3	4	5
d.	Your romantic relationships	0	1	2	3	4	5
e.	Your physical attractiveness	0	1	2	3	4	5
f.	Your success at your career	0	1	2	3	4	5
g.	Your family relationships	0	1	2	3	4	5
h.	Your knowledge of current affairs	0	1	2	3	4	5
i.	Your grades at school	0	1	2	3	4	5
j.	Your popularity with same sex friends.	0	1	2	3	4	5
k.	Your social skills	0	1	2	3	4	5
l.	Your competence at work or school.	0	1	2	3	4	5
m.	Your sense of style.	0	1	2	3	4	5
n.	Your ability to empathize with others.	0	1	2	3	4	5
o.	Your sensitivity.	0	1	2	3	4	5
p.	Your facial appearance.	0	1	2	3	4	5
q.	Your ability to express your emotions.	0	1	2	3	4	5
r.	Your popularity with opposite sex friends.	0	1	2	3	4	5
s.	Your ability to attract a romantic partner.	0	1	2	3	4	5

**SECTION 5**

These questions ask about how you see yourself in comparison to others. Using a 6-point scale where "0" is "Strongly Disagree" and "5" is "Strongly Agree", circle the number for each item below which best describes how much you disagree or agree with each statement.

		Strongly Disagree				Strongly Agree
a.	I can't leave the house without putting make-up on.	0	1	2	3	4 5
b.	Ads for clothing items make me feel dissatisfied with the way that I look.	0	1	2	3	4 5
c.	I wish I looked more like the models in cosmetic advertisements.	0	1	2	3	4 5
d.	I'm pretty satisfied with my physical appearance.	0	1	2	3	4 5
e.	I wish I could change the way that I look.	0	1	2	3	4 5
f.	Music videos that show thin women make me wish that I were thin.	0	1	2	3	4 5
g.	I do not wish to look like the models in magazines.	0	1	2	3	4 5
h.	Photographs of thin women make me wish that I were thin.	0	1	2	3	4 5
i.	It is important to me to have perfect skin.	0	1	2	3	4 5
j.	When I look at my slim friends I wish I could look just like them.	0	1	2	3	4 5
k.	I don't wear swimsuits around other women because I don't look as good as they do.	0	1	2	3	4 5
l.	Before going to a party I worry about whether I will look as attractive as my friends.	0	1	2	3	4 5
m.	I look at other women's figures to see how well I measure up.	0	1	2	3	4 5
n.	I often compare my body to the bodies of other women.	0	1	2	3	4 5
o.	If women think that I am attractive, they will stay away from my partner.	0	1	2	3	4 5
p.	I feel powerful when I am thinner than other women.	0	1	2	3	4 5

		<b>Strongly Disagree</b>					<b>Strongly Agree</b>
q.	When I buy clothes, I think about what other women will think about them.	0	1	2	3	4	5
r.	I watch what I eat because I want a body that will impress men.	0	1	2	3	4	5
s.	The skinnier I am, the more attractive I am to men.	0	1	2	3	4	5
t.	I would be concerned about my appearance at a coed gym (with both men & women).	0	1	2	3	4	5
u.	When I buy clothes, I think about what men will find attractive.	0	1	2	3	4	5
v.	I prefer to go out to clubs with female friends who are less attractive than I am.	0	1	2	3	4	5
w.	I don't care if other women think I dress too provocatively because men like it.	0	1	2	3	4	5
x.	I would not be concerned about my appearance at a women-only gym.	0	1	2	3	4	5
y.	I love to play competitive sports.	0	1	2	3	4	5
z.	When I play any game, my main goal is to win.	0	1	2	3	4	5
aa.	My friends would not say that I am a competitive person.	0	1	2	3	4	5
bb.	I don't like to be in situations where I have to compete with other women.	0	1	2	3	4	5
cc.	When playing a game with female friends, I would prefer to tie than win.	0	1	2	3	4	5
dd.	I don't really enjoy playing competitive games.	0	1	2	3	4	5
ee.	When playing a game with male friends, I would prefer to tie than win.	0	1	2	3	4	5
ff.	Having a romantic partner is important to me.	0	1	2	3	4	5
gg.	I exercise because I want a body that will impress men.	0	1	2	3	4	5
hh.	I worry about what my body will look like as I get older.	0	1	2	3	4	5

**SECTION 6**

Please read the following hypothetical stories and indicate on a scale of 0 to 5 with "0" being "Completely Inappropriate" and "5" being "Completely Appropriate" how appropriate **MARY'S** behavior is in each case.

	How appropriate is <u>Mary's</u> Behavior?	Completely Inappropriate	Completely Appropriate
a.	Mary is Jane's immediate supervisor in a department store. Mary is afraid that Jane is very ambitious and may be after her job. One day, Jane tells Mary that she has an idea for an advertising campaign. Mary dismisses it, telling Jane that it would never work, but later submits the same idea to her own supervisor, representing it as her own.	0	1 2 3 4 5
b.	Mary and Jane are writing reports on similar topics. Jane, who is struggling with the material, asks Mary for help. Mary, who feels that she has worked too hard to give what she has earned to Jane, gives Jane a thick stack of printouts from a computer search that she knows did not yield any useful information.	0	1 2 3 4 5
c.	Mary's boss has been interviewing all the employees at the firm because management reported there might soon be layoffs. During Mary's interview, her boss asks her what she thinks of Jane's performance on the job. Not wanting to appear to derogate Jane, Mary sweetly says that she thinks Jane has been coping very well with her drinking problem and that Jane's job performance should be considered acceptable, considering what she must be going through. Unknown to Mary's boss, however, Jane does not drink to excess.	0	1 2 3 4 5
d.	Mary and her boyfriend Jim are at a party. During the entire evening, Mary notices Jim looking at Jane, who is wearing a very revealing dress. Irritated but not wanting to complain, Mary tells Jim that she had heard that Jane had recently contracted a sexually transmitted disease.	0	1 2 3 4 5
e.	Jane confides to Mary that she is romantically interested in Jim, but that he never seems to notice her. Mary, who is also interested in Jim, tells Jane that she thinks Jim hasn't noticed her because he is already romantically involved with someone else. Mary knows this is a lie but says this so she can go after Jim herself.	0	1 2 3 4 5
f.	Mary overhears her boyfriend Jim telling his buddy Jack that he thinks Jane has a very attractive body. The next day, while Jim goes out, Mary casually mentions to Jack that Jane had extensive cosmetic surgery and derogates her figure as artificial. When Jim returns, Jack tells Jim about Jane's surgery and ridicules how Jim had been admiring her.	0	1 2 3 4 5
g.	Mary and Jane are best friends. Jane has recently learned that she has been accepted to attend Harvard on a full scholarship. Mary, who desperately wanted to attend Harvard, was not accepted and must instead attend Boston College. Mary begins to distance herself from Jane, eventually ceasing communication with her altogether.	0	1 2 3 4 5

	How appropriate is <u>Mary's</u> Behavior	Completely Inappropriate	Completely Appropriate
h.	Mary and Jane have been selected to represent their community in a regional mountain biking meet. Mary attended this meet the previous year and knows that succeeding on this course requires specific adjustments to one's bike. While Mary and Jane are friends and are expected to collaborate on the course, Mary decides not to reveal this information to Jane, fearing that it could result in Jane beating her in the competition.	0	1 2 3 4 5
i.	Mary's friend Jane is always talking about what a fantastic golf player she is. Mary has never considered herself to be a very good player. One day Mary and Jane decide to play together and Mary beats Jane. Mary feels great satisfaction and tells Jane's friends that she is the better player.	0	1 2 3 4 5
j.	Mary and Jim receive their grades on a difficult midterm exam. Mary, who studied very hard for the exam, receives a B. After Jim receives his exam and smiles, he gets up and goes to the bathroom. Mary peeks over at Jim's grade.	0	1 2 3 4 5
k.	Jane and Mary, who are both single, signed up for carpentry classes in hopes of meeting eligible bachelors. Both are excited when they discover that many single men are taking part in this class. However, as the class progresses, Mary is frustrated by the fact that all the men are paying attention to Jane. Mary convinces Jane that she is a lousy carpenter and that she should drop the class.	0	1 2 3 4 5
l.	Mary, who works out at a local gym both as a means of getting in shape and as a way to meet single men, is frustrated by the fact that there are so many attractive women who attend the gym. Thus, Mary spends close to an hour getting ready for her workout every day.	0	1 2 3 4 5
m.	Jane and Mary are going out to a club together. Jane asks Mary if she looks good in her new outfit. While Mary actually thinks the outfit makes Jane look fat, she tells Jane that she looks great so guys will not pay attention to her.	0	1 2 3 4 5
n.	Jane, Mary's good friend, has a crush on Jim. Mary considers Jim to be attractive, but she is not as interested in him as Jane is. However, one night Jim calls Mary and asks her out. Mary accepts the offer.	0	1 2 3 4 5
o.	Mary and Jane receive their grades on a difficult midterm exam. Mary, who studied very hard for this exam, receives a B. After Jane receives her exam, she gets up and goes to the bathroom. Mary peeks over at Jane's grade.	0	1 2 3 4 5

**SECTION 7**

These questions ask about your eating habits and your feelings about your body. Using a six-point scale where "0" means "Never" and "5" means "Always", circle the number for each item which best describes you.

		Never				Always
a.	I eat sweets and carbohydrates without feeling nervous.	0	1	2	3	4 5
b.	I think that my stomach is big.	0	1	2	3	4 5
c.	I eat when I am upset.	0	1	2	3	4 5
d.	I stuff myself with food.	0	1	2	3	4 5
e.	I think about dieting.	0	1	2	3	4 5
f.	I think that my thighs are too large.	0	1	2	3	4 5
g.	I feel extremely guilty after overeating.	0	1	2	3	4 5
h.	I think my stomach is just the right size.	0	1	2	3	4 5
i.	Only outstanding performances are good enough in my family.	0	1	2	3	4 5
j.	I am terrified of gaining weight.	0	1	2	3	4 5
k.	I feel satisfied with the shape of my body.	0	1	2	3	4 5
l.	I exaggerate or magnify the importance of weight.	0	1	2	3	4 5
m.	I have gone on eating binges where I have felt that I could not stop.	0	1	2	3	4 5
n.	As a child, I tried very hard to avoid disappointing my parents and teachers.	0	1	2	3	4 5
o.	I like the shape of my buttocks.	0	1	2	3	4 5
p.	I am preoccupied with the desire to be thinner.	0	1	2	3	4 5
q.	I hate being less than best at things.	0	1	2	3	4 5
r.	I think about bingeing (overeating).	0	1	2	3	4 5
s.	My parents have expected excellence of me.	0	1	2	3	4 5
t.	I think that my hips are too big.	0	1	2	3	4 5
u.	I eat moderately in front of others and stuff myself when they're gone.	0	1	2	3	4 5
v.	If I gain a pound, I worry that I will keep gaining.	0	1	2	3	4 5
w.	I feel that I must do things perfectly or not do them at all.	0	1	2	3	4 5
x.	I have the thought of trying to vomit in order to lose weight.	0	1	2	3	4 5
y.	I think that my thighs are just the right size.	0	1	2	3	4 5
z.	I think that my buttocks are too large.	0	1	2	3	4 5

aa.	I eat or drink in secrecy.	0	1	2	3	4	5
bb.	I think that my hips are just the right size.	0	1	2	3	4	5
cc.	I have extremely high goals.	0	1	2	3	4	5
dd.	I cut my food into small pieces.	0	1	2	3	4	5
ee.	I take longer than others to eat meals.	0	1	2	3	4	5
ff.	Other people think that I am too thin.	0	1	2	3	4	5
gg.	I feel that others would prefer if I ate more.	0	1	2	3	4	5
hh.	I feel that others pressure me to eat.	0	1	2	3	4	5
ii.	I do not avoid eating when I am hungry.	0	1	2	3	4	5
jj.	I do not display self-control around food.	0	1	2	3	4	5
kk.	I am usually on some type of diet.	0	1	2	3	4	5
ll.	I eat foods that are low in fat content.	0	1	2	3	4	5
mm.	I exercise regularly.	0	1	2	3	4	5
nn.	I try to eat less food when other people are watching me.	0	1	2	3	4	5

Please answer "Yes" or "No" to the following questions by circling the appropriate answer.

a.	Have you ever been diagnosed with an eating disorder?	YES	NO
b.	Do you have an eating disorder but you have never received treatment?	YES	NO
c.	Have you ever had plastic or cosmetic surgery?	YES	NO
d.	Have you smoked at least one cigarette in the past 30 days?	YES	NO
e.	Do you smoke cigarettes to control your weight?	YES	NO
f.	Are you pregnant or do you suspect that you might be pregnant?	YES	NO

**SECTION 8**

Please indicate how true the following statements are with regard to **YOURSELF** by using a six-point scale where "0" means "Completely False" and "5" means "Completely true."

		Completely False					Completely True						
a.	I find it hard to imitate the behavior of other people.	0	1	2	3	4	5	0	1	2	3	4	5
b.	My behavior is usually an expression of my true inner feelings, attitudes, and beliefs.	0	1	2	3	4	5	0	1	2	3	4	5
c.	At parties and social gatherings, I do not attempt to do or say things that others will like.	0	1	2	3	4	5	0	1	2	3	4	5
d.	I can only argue for ideas which I already believe.	0	1	2	3	4	5	0	1	2	3	4	5
e.	I can make impromptu speeches even on topics about which I have almost no information.	0	1	2	3	4	5	0	1	2	3	4	5
f.	I guess I put on a show to impress or entertain people.	0	1	2	3	4	5	0	1	2	3	4	5
g.	When I am uncertain how to act in a social situation, I look to the behavior of others for cues.	0	1	2	3	4	5	0	1	2	3	4	5
h.	I would probably make a good actor.	0	1	2	3	4	5	0	1	2	3	4	5
i.	I rarely need the advice of my friends to choose movies, books, or music.	0	1	2	3	4	5	0	1	2	3	4	5
j.	I sometimes appear to others to be experiencing deeper emotions than I actually am.	0	1	2	3	4	5	0	1	2	3	4	5
k.	I laugh more when I watch a comedy with others than when alone.	0	1	2	3	4	5	0	1	2	3	4	5
l.	In a group of people I am rarely the center of attention.	0	1	2	3	4	5	0	1	2	3	4	5
m.	In different situations and with different people, I often act like very different people.	0	1	2	3	4	5	0	1	2	3	4	5
n.	I am not particularly good at making other people like me.	0	1	2	3	4	5	0	1	2	3	4	5
o.	Even if I am not enjoying myself, I often pretend to be having a good time.	0	1	2	3	4	5	0	1	2	3	4	5
p.	I'm not always the person I appear to be.	0	1	2	3	4	5	0	1	2	3	4	5
q.	I would not change my opinions (or the way I do things) to please someone else or win their favor.	0	1	2	3	4	5	0	1	2	3	4	5
r.	I have considered being an entertainer.	0	1	2	3	4	5	0	1	2	3	4	5
s.	In order to get along and be liked, I tend to be what people expect me to be rather than anything else.	0	1	2	3	4	5	0	1	2	3	4	5
t.	I have never been good at games like charades or improvisational acting.	0	1	2	3	4	5	0	1	2	3	4	5
u.	I have trouble changing my behavior to suit different people and different situations.	0	1	2	3	4	5	0	1	2	3	4	5
v.	At a party, I let others keep the jokes and stories going.	0	1	2	3	4	5	0	1	2	3	4	5
w.	I feel a bit awkward around others and do not show up quite as well as I should.	0	1	2	3	4	5	0	1	2	3	4	5
x.	I can look anyone in the eye and tell a lie with a straight face (if for the right end).	0	1	2	3	4	5	0	1	2	3	4	5
y.	I may deceive people by being friendly when I really dislike them.	0	1	2	3	4	5	0	1	2	3	4	5

**SECTION 2**

The next section asks questions about your television viewing and magazine reading habits. Again, please provide your best guess if you are not sure of an answer.

- a. On the average **weekday** (Monday-Friday), how many hours of TV do you watch? \_\_\_\_ hours
- b. On the average **Saturday**, how many hours of TV do you watch? \_\_\_\_ hours
- c. On the average **Sunday**, how many hours of TV do you watch? \_\_\_\_ hours
- d. What are your three favorite television shows?
  - 1. \_\_\_\_\_
  - 2. \_\_\_\_\_
  - 3. \_\_\_\_\_

Think about the different types of TV programming that you watch. In an **average week**, how many hours do you spend watching each of the following types of TV programming? If you do not watch any of that type, please put a 0 in the space beside that category.

a.	Daytime soap operas	____ hours (per week)
b.	Information (news and documentaries)	____ hours (per week)
c.	Situation comedies/comedy shows	____ hours (per week)
d.	Action adventure/horror	____ hours (per week)
e.	Primetime soap operas/serials	____ hours (per week)
f.	Movies on television	____ hours (per week)
g.	Sports	____ hours (per week)
h.	Cartoons	____ hours (per week)
i.	Music video	____ hours (per week)
j.	Reality-based TV (e.g., Cops, Survivor)	____ hours (per week)
k.	Daytime talk shows	____ hours (per week)
l.	Late-night talk shows	____ hours (per week)
m.	Game shows	____ hours (per week)
n.	Fashion television	____ hours (per week)
o.	Other (Please specify _____)	____ hours (per week)

During an average week, how many minutes do you spend flipping through and/or reading magazines? \_\_\_\_\_ minutes (per week)

What three magazines do you flip through and/or read the most?

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Think about the different types of magazines that you read and/or flip through. In an average month, how many minutes do you spend reading and/or flipping through each of the following types of magazines? If you do not spend any time, please put a 0 for that category.

a.	Arts and Entertainment (e.g., US, Entertainment Weekly, People)	_____ minutes (per month)
b.	News (e.g., Time, Newsweek, U.S. News & World Report)	_____ minutes (per month)
c.	Fashion (e.g., Vogue, Cosmo, Elle, Allure, Mademoiselle, Glamour)	_____ minutes (per month)
d.	Teen (e.g., Teen, YM, Seventeen)	_____ minutes (per month)
e.	Financial and Business (e.g., Forbes, Business Week)	_____ minutes (per month)
f.	General Interest (e.g., Readers Digest, TV Guide)	_____ minutes (per month)
g.	Fitness (e.g., Health, Shape)	_____ minutes (per month)
h.	Music (e.g., Rolling Stone, Spin)	_____ minutes (per month)
i.	Sports (e.g., Sports Illustrated, Maximum Golf, Surf Magazine)	_____ minutes (per month)
j.	Trade & Computer (e.g., PC World, Merchants News)	_____ minutes (per month)
k.	Family/Parenting (e.g., Family Circle, Good Housekeeping)	_____ minutes (per month)
l.	Hobbies/interests (e.g., Cigar Aficionado, American Photo)	_____ minutes (per month)
m.	Other (please specify _____)	_____ minutes (per month)

If you watch fashion television and/or flip through fashion or beauty magazines, can you briefly explain why you do so in the space below?

**SECTION 10**

Think about **YOURSELF** at this point in time. Being as honest as possible, please indicate how you compare to your peers on these characteristics, using the scale provided below.

		Extremely Low					Extremely High						
a.	Jealous	0	1	2	3	4	5	0	1	2	3	4	5
b.	Attractive face	0	1	2	3	4	5	0	1	2	3	4	5
c.	Responsible	0	1	2	3	4	5	0	1	2	3	4	5
d.	Desire children	0	1	2	3	4	5	0	1	2	3	4	5
e.	Controlling	0	1	2	3	4	5	0	1	2	3	4	5
f.	Emotionally stable	0	1	2	3	4	5	0	1	2	3	4	5
g.	Faithful to partners	0	1	2	3	4	5	0	1	2	3	4	5
h.	Aggressive	0	1	2	3	4	5	0	1	2	3	4	5
i.	Financially secure	0	1	2	3	4	5	0	1	2	3	4	5
j.	Loyal	0	1	2	3	4	5	0	1	2	3	4	5
k.	Generous	0	1	2	3	4	5	0	1	2	3	4	5
l.	Good sense of humor	0	1	2	3	4	5	0	1	2	3	4	5
m.	Possessive	0	1	2	3	4	5	0	1	2	3	4	5
n.	Healthy	0	1	2	3	4	5	0	1	2	3	4	5
o.	Independent	0	1	2	3	4	5	0	1	2	3	4	5
p.	Enthusiastic about sex	0	1	2	3	4	5	0	1	2	3	4	5
q.	Intelligent	0	1	2	3	4	5	0	1	2	3	4	5
r.	Attractive body	0	1	2	3	4	5	0	1	2	3	4	5
s.	Sociable	0	1	2	3	4	5	0	1	2	3	4	5
t.	Manipulative	0	1	2	3	4	5	0	1	2	3	4	5
u.	Kind and understanding	0	1	2	3	4	5	0	1	2	3	4	5
v.	Ambitious	0	1	2	3	4	5	0	1	2	3	4	5

Think about the kind of person you would consider an IDEAL SAME SEX FRIEND. Considering the characteristics of your past and present friends, which characteristics would you prefer an ideal friend to be high on and which would you prefer an ideal friend to be low on? Being as honest as possible, please indicate how your ideal friend would compare to your peers on these characteristics, using the scale provided below.

		Extremely Low					Extremely High
a.	Emotionally stable	0	1	2	3	4	5
b.	Ambitious	0	1	2	3	4	5
c.	Controlling	0	1	2	3	4	5
d.	Enthusiastic about sex	0	1	2	3	4	5
e.	Faithful to partners	0	1	2	3	4	5
f.	Financially secure	0	1	2	3	4	5
g.	Jealous	0	1	2	3	4	5
h.	Attractive body	0	1	2	3	4	5
i.	Aggressive	0	1	2	3	4	5
j.	Generous	0	1	2	3	4	5
k.	Good sense of humor	0	1	2	3	4	5
l.	Possessive	0	1	2	3	4	5
m.	Healthy	0	1	2	3	4	5
n.	Independent	0	1	2	3	4	5
o.	Attractive face	0	1	2	3	4	5
p.	Intelligent	0	1	2	3	4	5
q.	Kind and understanding	0	1	2	3	4	5
r.	Loyal	0	1	2	3	4	5
s.	Manipulative	0	1	2	3	4	5
t.	Responsible	0	1	2	3	4	5
u.	Desires children	0	1	2	3	4	5
v.	Shares my values	0	1	2	3	4	5
w.	Shares my interests	0	1	2	3	4	5
x.	Sociable	0	1	2	3	4	5

Think about the kind of person you would consider an **IDEAL PARTNER** for a long-term (several years or more) romantic/sexual relationship. Being as honest as possible, please rate the kind of person you think would be ideal for such a relationship on the characteristics listed below.

		Extremely Low					Extremely High						
a.	Healthy	0	1	2	3	4	5	0	1	2	3	4	5
b.	Faithful to partners	0	1	2	3	4	5	0	1	2	3	4	5
c.	Loyal	0	1	2	3	4	5	0	1	2	3	4	5
d.	Independent	0	1	2	3	4	5	0	1	2	3	4	5
e.	Financially secure	0	1	2	3	4	5	0	1	2	3	4	5
f.	Jealous	0	1	2	3	4	5	0	1	2	3	4	5
g.	Aggressive	0	1	2	3	4	5	0	1	2	3	4	5
h.	Attractive body	0	1	2	3	4	5	0	1	2	3	4	5
i.	Generous	0	1	2	3	4	5	0	1	2	3	4	5
j.	Good sense of humor	0	1	2	3	4	5	0	1	2	3	4	5
k.	Possessive	0	1	2	3	4	5	0	1	2	3	4	5
l.	Attractive face	0	1	2	3	4	5	0	1	2	3	4	5
m.	Enthusiastic about sex	0	1	2	3	4	5	0	1	2	3	4	5
n.	Desires children	0	1	2	3	4	5	0	1	2	3	4	5
o.	Intelligent	0	1	2	3	4	5	0	1	2	3	4	5
p.	Kind and understanding	0	1	2	3	4	5	0	1	2	3	4	5
q.	Controlling	0	1	2	3	4	5	0	1	2	3	4	5
r.	Manipulative	0	1	2	3	4	5	0	1	2	3	4	5
s.	Responsible	0	1	2	3	4	5	0	1	2	3	4	5
t.	Emotionally stable	0	1	2	3	4	5	0	1	2	3	4	5
u.	Shares my values	0	1	2	3	4	5	0	1	2	3	4	5
v.	Ambitious	0	1	2	3	4	5	0	1	2	3	4	5
w.	Shares my interests	0	1	2	3	4	5	0	1	2	3	4	5
x.	Sociable	0	1	2	3	4	5	0	1	2	3	4	5

Using the scale below, please indicate the extent to which you agree or disagree with the following statements by circling the appropriate number where "0" means "Strongly Disagree" and "5" means "Strongly Agree."

		Strongly Disagree					Strongly Agree
a.	Sex without love is okay.	0	1	2	3	4	5
b.	I can imagine myself being comfortable and enjoying "casual" sex with different partners.	0	1	2	3	4	5
c.	I would have to be closely attached to someone (both emotionally and psychologically) before I could feel comfortable and fully enjoy having sex with him or her.	0	1	2	3	4	5
d.	Because of my moral or religious beliefs, I feel that sex outside of a loving relationship is wrong.	0	1	2	3	4	5
e.	Because of my moral or religious beliefs, I feel that not being completely faithful to your partner is wrong.	0	1	2	3	4	5

Which of the following best describes your sexual orientation?

- a. Heterosexual
- b. Homosexual
- c. Bisexual

**THANK YOU VERY MUCH FOR YOUR PARTICIPATION!**

## REFERENCES

- Abed, R. T. (1998). The sexual competition hypothesis for eating disorders. *British Journal of Medical Psychology, 71*, 525-547.
- Adamson, L., & Lyxell, B. (1996). Self-concept and questions of life: Identity development during late adolescence. *Journal of Adolescence, 19*, 569-582.
- Akiba, D. (1998). Cultural variations in body esteem: How young adults in Iran and the United States view their own appearances. *The Journal of Social Psychology, 138*(4), 539-540.
- American Psychiatric Association. (1994). *Diagnostic and statistical manual of mental disorders (4th ed.)*. Washington, DC: Author.
- Andersen, A. E., & DiDomenico, L. (1992). Diet vs. shape content of popular male and female magazines: A dose-response relationship to the incidence of eating disorders? *International Journal of Eating Disorders, 11*(3), 283-287.
- Bachman, J. G. (1970). *Youth in transition: The impact of family background and intelligence on tenth-grade boys (Volume II)*. Ann Arbor, Michigan: Survey Research Center, Institute for Social Research.
- Baker, D., Sivyer, R., & Towell, T. (1998). Body image dissatisfaction and eating attitudes in visually impaired women. *International Journal of Eating Disorders, 24*(3), 319-322.
- Bandura, A. (1989). Regulation of cognitive processes through perceived self-efficacy. *Developmental Psychology, 25*(5), 729-735.
- Bandura, A. (1991). Self-efficacy mechanism in physiological activation and health-promoting behavior. In Madden, J., Malthysee, & Barchas (Eds.), *Neurobiology of Learning Emotion and Affect* (pp. 229-269). New York: Raven Press.
- Banos, R. M., & Guillen, V. (2000). Psychometric characteristics in normal and social phobic samples for a Spanish version of the Rosenberg Self-Esteem Scale. *Psychological Reports, 87* (1), 269-275.
- Bastiani, A. M., Rao, R., Weltzin, T., & Kaye, W. H. (1995). Perfectionism in anorexia nervosa. *International Journal of Eating Disorders, 17*(2), 147-152.
- Bean, J. A., Leeper, J. D., Wallace, R. B., Sherman, B. M., & Jagger, H. (1979). Variations in the reporting of menstrual histories. *American Journal of Epidemiology, 109*, 181-185.

Bishop, R. (2000). More than meets the eye: An exploration of literature related to the mass media's role in encouraging changes in body image. *Communication Yearbook*, 23, 271-303.

Black, D. R., Taylor, A. M., Coster, D. C. (1998). Accuracy of self-reported body weight: Stepped approach model component assessment. *Health Education Research*, 13, 301-307.

Blumler, J. G. (1979). The role of theory in uses and gratifications studies. *Communication Research*, 6, 9-36.

Borzekowski, D. L. G., Robinson, T. N., & Killen, J. D. (1999). Does the camera add 10 pounds? Media use, perceived importance of appearance, and weight concerns among teenage girls. *Journal of Adolescent Health*, 26(1), 36-41.

Botta, R. A. (1999). Television images and adolescent girls' body image disturbance. *Journal of Communication*, 49, 22-41.

Bower, G. H. (1991). Mood congruity of social judgements. In J. P. Forgas (Ed.), *Emotion and social judgments* (pp. 31-53). Elmsford, NY: Pergamon Press.

Brehm, J. W. (1966). *A theory of psychological reactance*. New York: Academic Press.

Brigham, J. C. (1980). Limiting conditions of the 'physical attractiveness stereotype': Attributions about divorce. *Journal of Research in Personality*, 14, 365-375.

Brook, U., & Tepper, I. (1997). High school students' attitudes and knowledge of food consumption and body image: Implications for school based education. *Patient Education and Counseling*, 30, 283-288.

Brooks-Gunn, J., Warren, M. P., Rosso, J., & Garguilo, J. (1987). Validity of self-report measures of girls' pubertal status. *Child Development*, 58, 829-841.

Bruch, H. (1978). *The golden cage: The enigma of anorexia nervosa*. Cambridge, MA: Harvard University Press.

Burckle, M. A., Ryckman, R. M., Gold, J. A., Thornton, B., & Audesse, R. J. (1999). Forms of competitive attitude and achievement orientation in relation to disordered eating. *Sex Roles*, 40(11/12), 853-870.

Byrd, M., & Stacey, B. (1995). Cross-sectional age differences in the self-conceptions of adults. *Psychological Reports*, 77, 540-542.

Byrne, B. M., & Shavelson, R. J. (1996). On the structure of social self-concept for pre-, early, and late adolescents: A test of the Shavelson, Hubner, and Stanton (1976) model. *Journal of Personality and Social Psychology*, 70(3), 599-613.

Cash, T. F. (1990). The psychology of physical appearance: Aesthetics, attributes, and images. In T. F. Cash & T. Pruzinsky (Eds.), *Body images: Development, deviance, and change* (pp. 51-79). New York: Guilford.

Cash, T. F., & Deagle, E. A. (1997). The nature and extent of body-image disturbances in anorexia nervosa and bulimia nervosa: A meta-analysis. *International Journal of Eating Disorders*, 22, 107-125.

Cash, T. F., & Henry, P. E. (1995). Women's body images: The results of a national survey in the U.S.A. *Sex Roles*, 33(1-2), 19-28.

Casper, D., & Zachary, D. (1984). The eating disorder as a maladaptive conflict resolution. *Individual Psychology*, 40, (4), 445-452.

Center for Disease Control. (2001). [Http://www.cdc.gov](http://www.cdc.gov).

Clifford, E. (1971). Body satisfaction in adolescence. *Perceptual and Motor Skills*, 33, 119-125.

Cok, F. (1990). Body image satisfaction in Turkish adolescents. *Adolescence*, 25(98), 409-413.

Collins, M. E. (1991). Body figure perceptions and preferences among preadolescent children. *International Journal of Eating Disorders*, 10(2), 199-208.

Crandall, R. (1973). The measurement of self-esteem and related constructs. In J. P. Robinson & P. R. Shaver (Eds.), *Measures of Social Psychological Attitudes: Revised Edition* (pp. 45-168). Ann Arbor, Michigan: Institute for Social Science Research.

Crisp, A. H., Palmer, R. L., & Kalucy, R. S. (1976). How common is anorexia nervosa? A prevalence study. *British Journal of Psychiatry*, 128, 549-554.

Cronbach, L. J. (1951). Coefficient alpha and the internal structure of tests. *Psychometrika*, 16, 297-334.

Cusumano, D. L., & Thompson, J. K. (1997). Body image and body shape ideals in magazines: Exposure, awareness, and internalization. *Sex Roles*, 37(9/10), 701-721.

Cusumano, D. L., & Thompson, J. K. (2000). Media influence and body image in 8-11-year-old boys and girls: A preliminary report on the multidimensional media influence scale. *International Journal of Eating Disorders*, 29, 37-44.

Damon, A., Damon, S. T., Reed, R. B., & Valadian, I. (1969). Age at menarche of mothers and daughters with a note on accuracy of recall. *Human Biology*, 41, 161-175.

DelPrete, L. R., Caldwell, M., English, C., Banspach, S. W., Lefebvre, C. (1992). Self-reported and measured weights and heights of participants in community-based weight loss programs. *Journal of the American Dietetic Association*, 92, 1483-1486.

Diet secrets of the Oscar women. (April, 2002). *US Weekly*, 373/374, 63-66.

Dion, K. K., Berscheid, E., & Walster, E. (1972). What is beautiful is good. *Journal of Personality and Social Psychology*, 34, 285-290.

Dornbusch, S. M., Carlsmith, J. M., Duncan, P. D., Gross, R. T., Martin, J. A., Ritter, P. L., & Siegel-Gorelick, B. (1984). Sexual maturation, social class, and the desire to be thin among adolescent females. *Developmental and Behavioral Pediatrics*, 5(6), 308-314.

Downs, A. C., & Harrison, S. K. (1985). Embarrassing age spots or just plain ugly? Physical attractiveness stereotyping as an instrument of sexism on American television commercials. *Sex Roles*, 13 (1/2), 9-19.

Duncan, P. D., Ritter, P. L., Dornbusch, S. M., Gross, R. T., & Carlsmith, J. M. (1985). The effects of pubertal timing on body image, school behavior, and deviance. *Journal of Youth and Adolescence*, 14(3), 227-235.

Eagly, A. H., Ashmore, R. D., Makhijani, M. G., & Longo, L. C. (1991). What is beautiful is good, but...: A meta-analytic review of research on the physical attractiveness stereotype. *Psychological Bulletin*, 110, 109-128.

Eisele, J., Hertsgaard, D., & Light, H. K. (1986). Factors related to eating disorders in young adolescent girls. *Adolescence*, 21 (82) 283-290.

Emmers-Sommer, T., & Allen, M. (1999). Surveying the effects of media effects. *Human Communication Research*, 25(4), 478-498.

Eveland, W. P. Jr. (1997). Interactions and nonlinearity in mass communication: Connecting theory and methodology. *Journalism and Mass Communication Quarterly*, 74, 400-416.

Fallon, A. E., & Rozin, P. (1985). Sex differences in perceptions of desirable body shape. *Journal of Abnormal Psychology*, 1, 102-105.

Fennell, M. J. V. (1998). Low self-esteem. In N. Tarrier, A. Wells, & e. al. (Eds.), *Treating complex cases: The cognitive behavioral therapy* (pp. 217-240). Chichester, England: J. Wiley.

Ferring, D., & Flipp, S. (1996). Measurement of self-esteem: Findings on reliability, validity, and stability of the Rosenberg Scale. *Diagnostica*, 42(3), 284-292.

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

Fidelman, C. (1997, August). *All about girls*. Montreal Gazette, p. E-6.

Field, A. E., Camargo, C. A., Taylor, B., Berkey, C. S., & Colditz, G. A. (1999). Relation of peer and media influences to the development of purging behaviors among preadolescent and adolescent girls. *Archives of Pediatric Adolescent Medicine*, 153, 1184-1189.

Field, A. E., Cheung, L., Wolf, A. M., Herzog, D. B., Gortmaker, S. L., & Colditz, G. A. (1999). Exposure to the mass media and weight concerns among girls. *Pediatrics*, 103(3), 5 pages.

Fouts, G., & Burggraf, K. (1999). Television situation comedies: Female body images and verbal reinforcements. *Sex Roles*, 40(5/6), 473-481.

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

Frisch, R. E. (1974). Menstrual cycles: Fatness as a determinant of minimum weight for height necessary for their maintenance or onset. *Science*, 185, 949-951.

Furnham, A., Tan, T., & McManus, C. (1997). Waist-to-hip ratio and preferences for body shape: A replication and extension. *Personality Individual Differences*, 22(4), 539-549.

Gantz, W. (1977). How uses and gratifications affect recall of television news. *Journalism Quarterly*.

Garner, A., Sterk, H.M., & Adams, S. (1998). Narrative analysis of sexual etiquette in teenage magazines. *Journal of Communication* 48 (4), 59-78.

Garner, D. M. (1991). *Eating Disorders Inventory—2: Professional Manual*. Odessa, FL: Psychological Assessment Resources.

Garner, D. M., & Garfinkel, P. E. (1980). Socio-cultural factors in the development of anorexia nervosa. *Psychological Medicine*, *10*, 647-656.

Garner, D. M., Garfinkel, P. E., Schwartz, D., & Thompson, M. (1980). Cultural expectations of thinness in women. *Psychological Reports*, *47*, 483-491.

Garner, D. M., Garfinkel, P. E., Stancer, H. C., & Moldofsky, H. (1976). Body image disturbances in anorexia nervosa and obesity. *Psychosomatic Medicine*, *38*, 327-336.

Garner, D. M., Olmstead, M. P., Bohr, Y., & Garfinkel, P. E. (1982). The eating attitudes test: Psychometric features and clinical correlates. *Psychological Medicine*, *12*, 871-878.

Garner, D. M., Olmstead, M. P., & Polivy, J. (1983). The eating disorders inventory: A measure of cognitive behavioral dimensions of anorexia nervosa and bulimia. In D. L. Darby, P. E. Garfinkel, D. E. Gardner, & D. V. Coscina (Eds.) *Anorexia Nervosa: Recent Developments in Research* (pp. 173-184). New York, NY: Alan R. Liss.

Garner, D. M., Rosen, L. W., & Barry, D. (1998). Eating disorders among athletes: Research and recommendations. *Child & Adolescent Psychiatric Clinics of North America Special Issue: Sports Psychiatry*, *7*(4), 839-857.

Garrow, J. S., & Webster, J. (1985). Quetlet's Index (W/H<sup>2</sup>) as a measure of fatness. *International Journal of Obesity*, *9*, 147-153.

Geller, J., Johnston, C., & Madsen, K. (1997). The role of shape and weight in self-concept: The Shape and Weight Based Self-Esteem Inventory. *Cognitive Therapy & Research*, *21*, 5-24.

Geller, J., Johnston, C., Madsen, K., Goldner, E. M., Remic, R. A., & Birmingham, C. L. (1998). Shape- and weight-based self-esteem and the eating disorders. *International Journal of Eating Disorders*, *24*, 285-298.

Geller, J., Srikameswaran, S., Cockell, S. J., & Zaitsoff, S. (2000). Assessment of shape- and weight-based self-esteem in adolescents. *International Journal of Eating Disorders*, *28*(3), 339-343.

Gerbner, G. (1969). Toward "Cultural Indicators": The analysis of mass mediated message systems. *AV Communication Review*, *17*(2), 137-148.

Gerbner, G., & Alexander, A. (1985). Soap opera viewing motivations and the cultivation process. *Journal of Broadcasting and Electronic media*, *29*, 259-273.

Gerbner, G., & Gross, L. (1976). Living with television: The violence profile. *Journal of Communication*, 26, 173-199.

Gerbner, G., Gross, L., Jackson-Beeck, M., Jeffries-Fox, S., & Signorelli, N. (1978). TV violence profile no. 9. The highlights. *Journal of Communication*, 28, 176-207.

Gerbner, G., Gross, L., Morgan, M., & Signorielli, N. (1994). Growing up with television: The cultivation perspective. In J. Bryant and D. Zillman (Eds.), *Media Effects: Advances in Theory and Research* (pp. 17-41). Hillsdale, NJ: Lawrence Erlbaum Associates.

Gilbert, P. (2000). Menstruation in schoolgirls: The normal menarche. *Professional Care of Mother and Child*, 10, 35-36.

Goodman, E., Hinden, B. R., & Khandelwal, S. (2000). Accuracy of teen and parental reports of obesity and body mass index. *Pediatrics*, 106, 52-58.

Graham, M. A., Eich, C., Kephart, B., & Peterson, D. (2000). Relationship among body image, sex, and popularity of high school students. *Perceptual and Motor Skills*, 90, 1187-1193.

Grigg, M., Bowman, J., & Redman, S. (1996). Disordered eating and unhealthy weight reduction practices among adolescent females. *Preventive Medicine*, 25, 748-756.

Hamid, P. N. (1989). Self-monitoring and locus of control as determinants of social interaction: A preliminary investigation. *Social Behavior and Personality*, 17(2), 125-134.

Hamilton, J. A., & Chowdhary, U. (1989). Body cathexis assessments of rural Scottish and American women. *Perceptual and motor skills*, 69, 11-16.

Hamilton & Waller (1993). Media influences on body size estimation in anorexia and bulimia: An experimental study. *British Journal of Psychiatry*, 162, 837-840.

Hanke, R. (1990). Hegemonic masculinity in "thirtysomething." *Critical Studies in Mass Communication* 7 (3), 231-248.

Hanke, R. (1998). Theorizing masculinity with/in the media. *Communication Theory* 8 (2), 183-202.

Harrison, K. (2001). Ourselves, our bodies: Thin-ideal media, self-discrepancies, and eating disorder symptomatology in adolescents. *Journal of Social and Clinical Psychology*, 20 (3), 289-323.

Harrison, K. (2000). Television viewing, fat stereotyping, body shape standards, and eating disorder symptomatology in grade school children. *Communication Research*, 27(5), 617-640.

Harrison, K., & Cantor, J. (1997). The relationship between media consumption and eating disorders. *Journal of Communication*, 47(1), 40-67.

Heinberg, L. J., & Thompson, J. K. (1995). Body image and televised images of thinness and attractiveness: A controlled laboratory investigation. *Journal of Social and Clinical Psychology*, 14, 325-338.

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.

Henderson-King, E., & Henderson-King, D. (1997). Media effects on women's body-esteem: Social and individual difference factors. *Journal of Applied Social Psychology*, 27(5), 399-417.

Hendry, L. B., & Gillies, P. (1978). Body type, body esteem, school, and leisure: A study of overweight, average, and underweight adolescents. *Journal of Youth and Adolescence*, 7(2), 181-195.

Henriques, G. R., Calhoun, L. G., & Cann, A. (1996). Ethnic differences in women's body satisfaction: An experimental investigation. *The Journal of Social Psychology*, 136(6), 689-697.

Henss, R. (1995). Waist-to-hip ratio and attractiveness: Replication and extension. *Personality Individual Differences*, 19(4), 479-488.

Herman-Giddens, M. E., Slora, E.J., Wasserman, R.C., Bourdony, C. J., Bhapkar, M.V., Koch, G. G., & Hasemeier, C. M. (1997). Secondary sexual characteristics and menses in young girls seen in office practice: A study from the Pediatric Research in Office Settings network. *Pediatrics*, 99, 505-512.

Higgins, E. T. (1987). Self-discrepancy theory: A theory relating self and affect. *Psychological Review*, 94, 319-340.

Higgins, E. T. (1989). Self-discrepancy theory: What patterns of self-beliefs cause people to suffer? In L. Berkowitz (Ed.), *Advances in experimental social psychology* (Vol. 22, pp. 93-136). San Diego, CA: Academic Press.

Higgins, E. T., Bond, R. N., Klein, R., & Strauman, T. (1986). Self-discrepancies and emotional vulnerability: How magnitude, accessibility, and type of discrepancy influence affect. *Journal of Personality and Social Psychology, 51*(1), 5-15.

Higgins, E. T., Roney, C. J. R., Crowe, E., & Hymes, C. (1994). Ideal versus ought predilections for approach and avoidance: Distinct self-regulatory systems. *Journal of Personality and Social Psychology, 66*(2), 276-286.

Huon, G., Hayne, A., Gunewardene, A., Strong, K., Lunn, N., Piira, T., & Lim, J. (1999). Accounting for differences in dieting status: Steps in the refinement of a model. *International Journal of Eating Disorders, 26*(4), 420-433.

Huon, G. Piira, T., Hayne, A. M., & Strong, K. G. (unpublished manuscript in submission). Assessing body and eating peer-focused comparisons: The Dieting Peer Competitiveness (DPC) scale.

Irving, L. M. (1990). Mirror images: Effects of the standard of beauty on the self- and body esteem of women exhibiting varying levels of bulimic symptoms. *Journal of Social and Clinical Psychology, 9*(2), 230-242.

Johnson, C. L., Stuckey, M. K., Lewis, L. D., & Schwartz, D. M. (1982). Bulimia: A descriptive survey of 316 cases. *International Journal of Eating Disorders, 2*, 3-16.

Kalodner, C. R. (1997). Media influences on male and female non-eating disordered college students: A significant issue. *Eating Disorders, 5*(1), 47-57.

Katz, E., Blumler, J. G., & Gurevitch, M. (1974). Utilization of mass communication by the individual. In J. G. Blumler & E. Katz (Eds.), *The uses of mass communications: Current perspectives on gratifications research* (pp. 19-32). Beverly Hills, CA: Sage.

Katz, E., Gurevitch, M., & Haas, H. (1973). On the use of mass media for important things. *American Sociological Review, 38*.

Katzman, M. A., & Wolchik, S. A. (1984). Bulimia and binge eating in college women: A comparison of personality and behavioral characteristics. *Journal of Consulting and Clinical Psychology, 52*, 423-428.

Kienhorst, C. W., de Wilde, E. J., Van den Bout, J., & Diekstra, R. F. (1990). Psychometric characteristics of a number of self-reporting questionnaires about "(un)well-being": A study of 9,393 secondary school students. *Nederland Tijdschrift voor de Psychologie en haar Grensgebieden, 45*(3), 124-133.

Killen, J. D., Taylor, C. B., Telch, M. J. (1986). Self-induced vomiting and laxative and diuretic use among teenagers: Precursors of the binge-purge syndrome? *Journal of the American Medical Association*, 255, 1447-1449.

King, N., Touyz, S., & Charles, M. (2000). The effect of body dissatisfaction on women's perceptions of female celebrities. *International Journal of Eating Disorders*, 27(3), 341-347.

Koslowsky, M., & Scheinberg, Z. (1994). Predicting actual weight from self-report data. *Educational and Psychological Measurement*, 54, 168-173.

Kruglanski, A. W., & Mayselless, O. (1990). Classic and current social comparison research: Expanding the perspective. *Psychological Bulletin*, 108, 195-208.

Lachenmeyer, J. R., & Muni-Brander, P. (1988). Eating disorders in a nonclinical adolescent population: Implications for treatment. *Adolescence*, 23(90), 303-312.

Lamb, 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(5/6), 345-358.

Larson, B. J. (1991). Relationship of family communication patterns to eating disorder inventory scores in adolescent girls. *Journal of the American Dietetic Association*, 91, 1065-1067.

Laswell, H. (1948). The structure and function of communications in society. In L. Bryson (Ed.), *The communication of ideas*. New York: Harper.

Lavin, M. A., & Cash, T. F. (2000). Effects of exposure to information about appearance stereotyping and discrimination on women's body images. *International Journal of Eating Disorders*, 29, 51-58.

Lavine, H., Sweeney, D., & Wagner, S. H. (1999). Depicting women as sex objects in television advertising: Effects on body dissatisfaction. *Personality & Social Psychology Bulletin*, 25(8), 1049-1058.

Leary, M. R., Schreindorfer, L. S., & Haupt, A. L. (1995). The role of low self-esteem in emotional and behavioral problems: Why is low self-esteem dysfunctional. *Journal of Social and Clinical Psychology*, 14(3), 297-314.

Leon, G. R., Fulkerson, J. A., Perry, C. L., & Cudeck, R. (1993). Personality and behavioral vulnerabilities associated with risk status for eating disorders in adolescent girls. *Journal of Abnormal Psychology*, 102, 438-444.

Lerner, R. M. (1969). The development of stereotyped expectancies of body build--Behavior relations. *Child Development*, 40, 137-141.

Levy, M. R., & Windahl, S. (1985). The concept of audience activity. In K. E. Rosengren, L. A. Wenner, & P. Palmgreen, (Eds.), *Media gratifications research: Current perspectives* (pp. 109-122). Beverly Hills, CA: Sage.

Mallick, M. J. (1983) Health hazards of obesity and weight control in children: A review of the literature. *American Journal of Public Health*, 73, 78-82.

Markus, H., Hamill, R., & Sentry, K. P. (1987). Thinking fat: Self-schemas for body weight and the processing of weight relevant information. *Journal of Applied Social Psychology*, 17(1), 50-71.

Martin, M. C., & Kennedy, P. F. (1993). Advertising and social comparison: Consequences for female preadolescents and adolescents. *Psychology & Marketing*, 10(6), 513-530.

Martz, D. M., Handley, K. B., & Eisler, R. M. (1995). The relationship between feminine gender role stress, body image, and eating disorders. *Psychology of Women Quarterly*, 19, 493-508.

McQuail, D., Blumler, J. G., & Brown, J. R. (1972). The television audience: A revised perspective. In D. McQuail (Ed.), *Sociology of mass communication*. Harmondsworth: Penguin.

Mead, G. H. (1934). *Mind, self & society*. Chicago, IL: The University of Chicago Press.

Milkie, M. A. (1999). Social comparisons, reflected appraisals, and mass media: The impact of pervasive beauty images on Black and White girls' self-concepts. *Social Psychology Quarterly*, 62(2), 190-210.

Minuchin, S., Rosman, B. L., & Baker, L. (1978). *Psychosomatic families: Anorexia nervosa in context*. Cambridge, MA: Harvard University Press.

Morin, S. F., & Jones, R. L. (1972, Sept.). *Social comparison of opinions among blind children and adolescents*. Paper presented to the meeting of the American Psychological Association, Honolulu.

Morris, A., Cooper, T., & Cooper, P. J. (1989). The changing shape of female fashion models. *International Journal of Eating Disorders*, 8, 593-596.

Morse, S., & Gergen, K. J. (1970). Social comparison, self-consistency, and the concept of self. *Journal of Personality and Social Psychology*, 16(1), 148-156.

Murray, Touyz, & Beumont (1996). Awareness and perceived influence of body ideals in the media: A comparison of eating disorder patients and the general community. *Eating Disorders*, 4(1), 33-46.

Myers, P. N., & Biocca, F. A. (1992). The elastic body image: The effect of television advertising and programming on body image distortions in young women. *Journal of Communication*, 42(3), 108-133.

National Academy of Sciences. (1991). *Diet and health*. Washington, DC: Author.

Nixon, S. (1997). Exhibiting masculinity. In S. Hall (Ed.), *Representation: Cultural representation and signifying practices* (pp. 291-336). Thousand Oaks, CA: Sage.

Olson, B. D., & Evans, D. L. (1999). The role of the big five personality dimensions in the direction and affective consequences of everyday social comparisons. *Personality & Social Psychology Bulletin*, 25(12), 1498-1509.

Palmgreen, P. (1984). Uses and gratifications: A theoretical perspective. In R. Bostrom (Ed.), *Communication yearbook 8* (pp. 20-55). Beverly Hill, CA: Sage.

Palmgreen, P., & Rayburn, J. D. (1985). A comparison of gratification models of media satisfaction. *Communication Monographs*, 52, 334-346.

Palmgreen, P., Wenner, L. A., & Rosengren, K. E. (1985). Uses and gratifications research: The past ten years. In K. E. Rosengren, L. A. Wenner, & P. Palmgreen (Eds.), *Media gratifications research: Current perspectives* (pp. 11-37). Beverly Hills, CA: Sage.

Palta, M., Prineas, R. J., Berman, R., Hannah, P. (1982). Comparison of self-reported and measured height and weight. *American Journal of Epidemiology*, 115, 223-230.

Parkinson, K. N., Tovée, M. J., & Cohen-Tovée, E. M. (1998). Body shape perceptions of preadolescent and young adolescent children. *European Eating Disorders Review*, 6, 126-135.

Parnell, K., Sargent, R., Thompson, S. H., Duhe, S. F., Valois, R. F., & Kemper, R. C. (1996). Black and White adolescent females' perceptions of ideal body size. *Journal of School Health*, 66(3), 112-118.

Percy, L., & Lautman, M. R. (1994) Advertising, weight loss, and eating disorders. In E. M. Clark & T. C. Brock (Eds.), *Attention and affect in response to advertising* (pp. 301-311). Hillsdale, NJ: Lawrence Erlbaum Associates.

Pinhas, L., Toner, B. B., Ali, A., Garfinkel, P. E., & Stuckless, N. (1999). The effects of the ideal of female beauty on mood and body satisfaction. *International Journal of Eating Disorders*, 25, 223-226.

Pope, H. G., Hudson, J. I., Yurgelun-Todd, D., & Hudson, M. S. (1984). Prevalence of anorexia nervosa and bulimia in three student populations. *International Journal of Eating Disorders*, 2, 75-85.

Posavac, H. D., Posavac, S. S., & Posavac, E. (1998). Exposure to media images of female attractiveness and concern with body weight among young women. *Sex Roles*, 38(3/4), 187-201.

Potter, W. J. (1987). Does television viewing hinder academic achievement among adolescents? *Human Communication Research*, 14, 27-46.

Potter, W. J., & Chang, I. C. (1990). Television exposure measures and the cultivation hypothesis. *Journal of Broadcasting & Electronic Media*, 34(3), 313-333.

Raphael, F. J., & Lacey, J. H. (1992). Sociocultural aspects of eating disorders. *Annals of Medicine*, 24(4), 293-296.

Richins (1991). Social comparison and the idealized images of advertising. *Journal of Consumer Research*, 18, 71-83.

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

Rosenberg, M. (1979). *Conceiving the self*. New York: Basic Books, Inc.

Rosenberg, M. (1982). Self-concept from middle childhood through adolescence. *Psychological Perspectives on the Self* (Vol. 3, pp. 107-136): Lawrence Erlbaum.

Rozin, P., & Fallon, A. (1988). Body image, attitudes to 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.

Rubin, A. M. (1986). Television, aging, and information seeking. *Language & Communication*, 6, 125-137.

- Rubin, A. M. (1993). Audience activity and media use. *Communication Monographs* 60 (1): 98-105.
- Ruble, T. L. (1983). Sex stereotypes: Issues of change in the 1970s. *Sex Roles*, 9, 397-402.
- Rucinski, A. (1989). Relationship of body image and dietary intake of competitive ice skaters. *Journal of the American Dietetic Association*, 89(1), 98-100.
- Ruggiero, T. E. (2000). Uses and gratifications theory in the 21st century. *Mass Communication & Society*, 3(1), 3-37.
- Samuel, W. (1973). On clarifying some interpretations of social comparison theory. *Journal of Experimental Social Psychology*, 9, 450-465.
- Schulken, E. D., Pinciario, P. J., Sawyer, R. G., Jenson, J. G., & Hoban, M. T. (1997). Sorority women's body size perceptions and their weight-related attitudes and behavior. *Journal of American College Health*, 46, 69-74.
- Shannon, B., Smiciklas-Wright, H., Wang, M. Q. (1991). Inaccuracies in self-reported weight and heights of a sample of sixth-grade children. *Journal of the American Dietetic Association*, 91, 675-678.
- Shapurian, R., Hojat, M., Naverahmadi, H. (1987). Psychometric characteristics and dimensionality of a Persian version of the Rosenberg Self-Esteem Scale. *Perceptual and Motor Skills*, 65(1), 27-34.
- Shavelson, R. J., Hubner, J. J., & Stanton, G. C. (1976). Self-concept: Validation of construct interpretations. *Review of Educational Research*, 46, 407-441.
- Sheasby, J. E., & Barlow, J. H. (2000). Psychometric properties of the Rosenberg Self-Esteem Scale among people with arthritis. *Psychological Reports*, 86 (3), 1139-1147.
- Sheldon, W. H., & Stevens, S. S. (1942). *The varieties of temperament: a psychology of constitutional differences*. New York, NY: Harper.
- Signorelli, N., & Mehta, M. (2000, November). *Body weight in primetime as a function of gender, race, and age*. Paper presented at the meeting of the National Communication Association's annual conference. Seattle, WA.
- Silverstein, B., Perdue, L., Peterson, B., & Kelly, E. (1986a). The role of the mass media in promoting a thin standard of bodily attractiveness for women. *Sex Roles*, 14(9/10), 519-532.

Silverstein, B., Peterson, B., & Perdue, L. (1986b). Some correlates of the thin standard of bodily attractiveness for women. *International Journal of Eating Disorders*, 5(5), 895-905.

Simmons, R. G., & Rosenberg, F., & Rosenberg, M. (1973). Disturbance in the self-image at adolescence. *American Sociological Review*, 38(5), 553-568.

Singh, D. (1993a). Adaptive significance of female attractiveness. Role of the waist-to-hip ratio. *Journal of Personality and Social Psychology*, 65, 293-307.

Singh, D. (1993b). Body shape and women's attractiveness. The critical role of waist-to-hip ratio. *Human Nature*, 4, 297-321.

Singh, D. (1994). Ideal female body shape: Role of body weight and waist-to-hip ratio. *International Journal of Eating Disorders*, 16(3), 283-288.

Smolak, L., Levine, M. P., & Thompson, K. (2001). The use of the sociocultural attitudes toward appearance questionnaire with middle school boys and girls. *International Journal of Eating Disorders*, 29, 216-223.

Snyder, M. (1974). The self-monitoring of expressive behavior. *Journal of Personality and Social Psychology*, 30, 526-537.

Snyder, M. (1979). Self-monitoring processes. In Berkowitz, L. (Ed.) *Advances in Experimental Social Psychology*. New York: Academic Press, 12, 86-128.

Snyder, M. (1987). *Public appearance/private realities: The psychology of self-monitoring*. New York: Freeman.

Spillman, D. M., & Everington, C. (1989). Somatotypes revisited: Have the media changed our perception of the female body image? *Psychological Reports*, 64, 887-890.

Stice, E., Schupak-Neuberg, E., Shaw, H. E., & Stein, R. I., (1994). Relation of media exposure to eating disorder symptomatology: An examination of mediating mechanisms. *Journal of Abnormal Psychology*, 103(4), 836-840.

Stice, E., & Shaw, H. E. (1994). Adverse effects of the media portrayed thin-ideal on women and linkages to bulimic symptomatology. *Journal of Social and Clinical Psychology*, 13(3), 288-308.

Stormer, S. M., & Thompson, J. K. (1996). Explanations of body image disturbance: A test of maturational status, negative verbal commentary, social comparison, and sociocultural hypotheses. *International Journal of Eating Disorders*, 19(2), 193-202.

Strauman, T., Vookles, J., Berenstein, V., Chaiken, S., & Higgins, E. T. (1991). Self-discrepancies and vulnerability to body dissatisfaction and disordered eating. *Journal of Personality and Social Psychology, 61*(6), 946-956.

Striegel-Moore, R. H., Silberstein, L. R., Grunberg, N. E., & Rodin, J. (1990). Competing on all fronts: Achievement orientation and disordered eating. *Sex Roles, 23*, 697-702.

Strober, M. (1992). Family factors in adolescent eating disorders. In P. J. Cooper & A. Stein (Eds.), *Feeding problems and eating disorders in children and adolescents* (Vol. 5, pp. 139-146): Harwood Academic Press.

Suls, J. M., & Miller, R. L. (1977). Social comparison processes: Theoretical and empirical perspectives. Washington, DC: Hemisphere.

Swanson, D. L. (1987). Gratification seeking, media exposure, and audience interpretations: Some direction for research. *Journal of Broadcasting and Electronic Research, 31*, 237-254.

Thompson, J. K. (1991). Body shape preferences: Effects of instructional protocol and level of eating disturbance. *International Journal of Eating Disorders, 10*(2), 193-198.

Tiggemann, M. (2001). Effect of gender composition of school on body concerns in adolescent women. *International Journal of Eating Disorders, 29*, 239-243.

Turner, S. L., Hamilton, H., Jacobs, M., Angwood, L. M., & Dwyer, D. H. (1997). The influence of fashion magazines on the body image satisfaction of college women: An exploratory analysis. *Adolescence, 32*(127), 603-614.

Utsey, S. O., & Ponterotto, J. G. (2000). Racial discrimination, coping, life satisfaction, and self-esteem among African Americans. *Journal of Counseling and Development, 78*(1), 72-81.

Van den Broucke, S., & Vandereycken, W. (1989). The marital relationship of patients with eating disorder: A questionnaire study. *International Journal of Eating Disorders, 8*(5), 541-556.

Vandereycken, W. (1988). Anorexia in adults. In B. J. Binder, B. F. Chaitin, & R. S. Goldstein. *The eating disorders: Medical and psychological basis of diagnosis and treatment*. New York: PMA Publishing Company.

Waller, G., Calam, R., & Slade, P. (1988). Family interactions and eating disorders: Do family members agree? *British Review of Bulimia and Anorexia Nervosa*, 3(1), 33-40.

Wegner, B. S., Hartmann, A. M., & Geist, C. R. (2000). Effect of exposure to photographs of thin models on self-consciousness in female college students. *Psychological Reports*, 86, 1149-1154.

Wertheim, E. H., Paxton, S. J., Schutz, H. K., Muir, S. L. (1997). Why do adolescent girls watch their weight? An interview study examining sociocultural pressures to be thin. *Journal of Psychosomatic Research*, 42, 345-355.

Williams, J. M., & Currie, C. (2000). Self-esteem and physical development in early adolescence: Pubertal timing and body image. *Journal of Early Adolescence*, 20, 129-150.

Wills, T. A. (1981). Downward comparison principles in social psychology. *Psychological Bulletin*, 90, 245-271.

Wills, T. A. (1991). Similarity and self-esteem in downward comparison. In J. Suls & Wills, T. A. (Eds.). *Social comparison: Contemporary theory and research* (pp. 51-78). Hillsdale, NJ: Lawrence Erlbaum Associates.

Wiseman, C. V., Gray, J. J., Mosimann, J. E., & Ahrens, A. H. (1992). Cultural expectations of thinness in women: An update. *International Journal of Eating Disorders*, 11, 85-89.

Zanna, M. D., Goethals, G. R., & Hill, J. F. (1975). Evaluating a sex-related ability: Social comparison with similar others and standard setters. *Journal of Experimental Social Psychology*, 11, 86-93.

Ziebland, S., Thorogood, M., Fuller, A., Muir, J. (1996). Desire for the body normal: Body image and discrepancies between self reported and measured height and weight in a British population. *Journal of Epidemiology and Community Health*, 50, 105-106.