Body image in middle school students

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ABSTRACT

Erin Lichtenwalner
BODY IMAGE IN MIDDLE SCHOOL STUDENTS
2006/2007
Dr. Frank Epifanio
School Psychology

This study was conducted to investigate the body images of Middle School aged students. A population of 62 students (37 males, 25 females) was given a survey that questioned their level of body image, their practice of weight-control behaviors, and the various potential influences on these areas. The results showed that this particular population had a higher level of body image than previous studies indicate. It also showed that students at this age are engaging in weight-control behaviors. The major influences on body image and weight-control behaviors were found to be peers and the media. This research, along with previous studies, implicates the need for prevention and intervention programs at this age level.
ACKNOWLEDGEMENTS

I would like to thank the teachers and students at the Egg Harbor Township Middle School for assisting with the research for this thesis. I would also like to acknowledge the dedication of my professors Dr. Frank Epifanio and Dr. Roberta Dihoff. I truly appreciate their continued support and assistance.
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CHAPTER I: INTRODUCTION

Need

There have been a rising number of diagnosed and undiagnosed eating disorders and unhealthy body-changing behaviors in our society; the idea of prevention is becoming more necessary. Unfortunately, today's society is starting to develop their poor body image at a younger age. The issue of poor body image does not affect one particular group, and is not limited to females, Caucasians, or those in the upper-middle socioeconomic class. All genders, races and classes have experienced negative behaviors associated with poor body image. These negative behaviors include the use of steroids, diet pills, laxatives, and cigarette, leading to serious illnesses like anorexia nervosa, bulimia nervosa, and binge eating disorder.

Most high schools in The United States have a Health curriculum that includes nutrition and sometimes even body image. Although nutrition is still a topic covered in all grades, it seems apparent that Middle Schools need to begin addressing ways to help students with self esteem, body image and healthy eating and exercise habits.

Purpose

The purpose of this study was to determine how middle school aged students feel about their body and their appearance, how they behave according to their body image, and what the major influences are on their self image.

Hypotheses
The first hypothesis of this study states that a majority of Middle School students have a negative body image. It was also hypothesized that Middle School aged students' body image influences their behaviors. The final hypothesis states that Middle School aged students' body image is influenced by gender, ethnicity, the media, peers, and families.

**Theory/Background**

There have been noted distorted eating behaviors that have taken place throughout the world for centuries. There are records of Greek and Egyptian cultures engaging in ritualistic fasts. There are also documented accounts of more hedonistic behaviors that resembled bulimia. In ancient Rome, the wealthy elite practiced the practice of binging and purging. Ancient Eastern religions practiced a spiritually motivated self-starvation that resembles today's definition of anorexia. Many early Christians engaged in radical fasting as a protest to the hedonism and materialism of that age. During the 17th and 18th centuries a belief developed that women who engaged in self-starvation were possessed by the devil. Although these documented behaviors could potentially fall under the category of an eating disorder, the major difference is that the people who engaged in this self-starvation and self-induced vomiting of these earlier times lacks the desire for thinness (Miller & Pumariega, 2001).

During the 19th century, the first sign of a desire for a certain body type, particularly a sickly body, was recognized. The term anorexia was defined. As a result, many studies were conducted to determine why people during this time turned to starvation or binging and purging (Miller & Pumariega, 2001). It is assumed that during this time, many people were beginning to understand the idea of body image.
Body image is paralleled by self-esteem. Self-esteem has been studied and theorized for hundreds of years. In the late 1800’s Psychologist William James created one of the first definitions of self-esteem. James’ description of the social self included the idea that people’s feelings about themselves are influenced by their interactions with others. He realized that people have the ability to develop feelings about themselves.

Charles Cooley and Herbert Mead were both sociologists who expanded upon the previous ideas of the self through the early 1900’s. They emphasized that the self is developed through interactions; it is influenced by people’s shared understandings of social roles, rules, symbols and categories.

One of the most widely noted theories belongs to Morris Rosenberg. In the 1960’s Rosenberg developed his own self-esteem theory, which was based on two factors. The first factor is self-appraisal and the second is social comparisons. Rosenberg expanded on the idea of self-appraisal by saying that humans develop a self-perception through other people’s perspectives. His idea of social comparison emphasizes that self-esteem comes from a comparison of ones self to others. Rosenberg developed a measurement for self esteem. His Self-Esteem Scale consists of a ten-question evaluation that measures global self esteem (Flynn, 2003).

Another well cited theory is the Social Comparison Theory. In the 1950’s, Leon Festinger proposed this theory. He believed that individuals have a drive to evaluate their opinions and abilities. He also believed that in the absences of objective, nonsocial criteria, individuals engage in social comparisons. The social comparison takes place when they compare their opinions and abilities to those of other individuals. Finally, whenever possible, social comparisons are made with similar individuals (Morrison et al.,
2004). Social comparison can be harmful when people begin to compare themselves with unrealistic images, such as super models, actors and media-created images.

Definitions of Terms

1. Anorexia Nervosa – This is a form of an eating disorder, which involves an aversion, and avoidance of food intake. Those who suffer from anorexia nervosa, also known simply as anorexia, reduce their weight through extreme dieting and starvation. Many times a person with anorexia has a fear of gaining weight and has a poor body image of themselves being overweight (Simon et al., 2001).

2. Binge Eating Disorder – An eating disorder in which one engages in excessive eating without a behavior to eliminate the food such as purging (Miller & Pumariega, 2001).

3. Body Image – The way that people perceive themselves, and the way that they believe others see them. It can change continuously throughout a persons’ life. It is influenced by life circumstances and changed as a person grows, develops and enters new situations (Benninghoven et al., 2006).

4. Bulimia Nervosa – Also known as bulimia, this is an eating disorder that involves cycles of binging and purging. This type of eating disorder is more common than anorexia nervosa. Most people with bulimia have normal to high-normal body weights, although it may often fluctuate because of their purging. This purging is not limited to self-induced vomiting, but can include enemas, laxatives, diet pills or drugs that can reduce fluids (Simon et al., 2001).
5. Eating Disorder – These are defined as extreme behavioral actions that a person uses to alter their appearance. These behaviors are usually displayed in the form of a compulsion to eat in a way to disturb physical health. Eating disorders can be displayed in many forms. Excessive over-eating is one form of an eating disorder; restricting and limiting food intake is another. Additionally, binging and purging is also a form of an eating disorder (Simon et al., 2001). All eating disorders have severe consequences and can even become fatal.

6. Global Self Esteem – This is defined as an individual’s positive or negative attitude toward the self as a totality (Flynn, 2003).

Assumptions

Due to the method of gathering information, one assumption in this study was that all students would answer the questionnaire openly and honestly. It was also assumed that the study was given to a wide range of students that include multiple socioeconomic levels, multiple cultures, and multiple intelligences. An additional assumption was that all students have had exposure to the media that was being tested as an influence on their body image. Further, it was also assumed that all students have interacted with peers in a way that could possibly influence their self-image.

Limitations

There were many limitations that could have influenced the outcome of this experiment. The duration of the intervention was a limitation. In order to make sufficient progress with the participants, a longer and more detailed educational intervention may have been necessary. Another possible limitation was the surveyed...
population. Although an effort was made to study a wide range of participants, the questionnaires were only distributed in one middle school. Additional limitations were the gender, ethnicity, socioeconomic background and exposure to specific target influences.

Summary

Chapter II will provide a detailed description of the research, theories and background revolving around issues of self-esteem, body image and disorders relating to these ideas. There are a number of studies that include researched hypotheses and examples of implementations that will be noted in Chapter II. The actual experimental design will be discussed in Chapter III. Chapter IV will provide the results from the experiment. Finally, the conclusions and discussion of the experiment will be found in Chapter V.
CHAPTER II: REVIEW OF THE LITERATURE

Introduction

This literary review gives details of multiple research conducted in the area of body image, specifically how it relates to adolescent boys and girls. The review gives various examples of articles and research with general references and more specific studies. The topics covered in this literary review are risk factors and gender differences for poor body image and unhealthy weight control behaviors, the influence of Western culture on body image and unhealthy weight control behaviors, ethnic influences, peer influences, media influences, consequent behaviors of poor body image, and prevention and intervention programs.

Risk Factors and Gender Differences

There is vast research conducted in the area of body image, specifically in the age group of adolescents. The topics expand from influences on body image to behaviors caused by body image. Stice and Whitenton (2002) discuss the risk factors for adolescent girls to have body dissatisfaction. They claim that body dissatisfaction is associated with marked emotional distress, thoughts about personal appearance, and unnecessary cosmetic surgeries. These researchers also believe that the pressures to be thin can be direct or indirect. Direct pressures can be from a parent urging their child to diet, and indirect could be peers praising an ultra-thin model in a magazine.

A direct pressure from family members can lead to body dissatisfaction, depression and self-esteem (Keery, 2003). Family members' focus and teasing on
adolescents can also lead to the development of restrictive eating. Keery found that paternal teasing was a significant predictor of thin-ideal internalization, social comparison, body dissatisfaction, depression, self-esteem and restrictive and bulimic eating behaviors. Maternal teasing was a significant predictor of restriction. Teasing by a sibling led to significantly higher levels of internalization, comparison, body dissatisfaction, restriction, bulimic behaviors, depression, and significantly lower levels of self-esteem.

Davidson and McCabe (2006) conducted an investigation that explored the relationship between body image and psychological and social functioning during early adolescent years. Their findings showed that girls were more dissatisfied with their bodies than boys, in addition to placing a larger emphasize on what others thought about their bodies. Girls also tended to conceal their bodies, while making more negative evaluations of themselves. Dissatisfaction with their bodies was predictive of low self-esteem in both genders. Low self-worth among girls was strongly associated with concerns about others’ negative evaluations of their appearance. Poor self-esteem in boys was most closely associated with negative ratings of attractiveness by others. Another influence on males was opposite-sex relationships. Same-sex relationships are more of an influence on females than males. Both genders experience a focus on an “imaginary audience” of peers who they feel are constantly evaluating and comparing them to others.

Over their one year study period, Stice and Whitenton (2002) found that some of the major risk factors of body dissatisfaction among adolescents include initial elevations in body mass during puberty, perceived pressure to be thin, thin-ideal internalization, and
deficits in social support. Additional research found that the previously stated risk factors can lead to detrimental behaviors that include substance abuse, sexual irresponsibility, and unhealthy weight loss behaviors (Wild et al., 2004).

Adolescence is a rapid period of change and several biological, psychological and social factors work together to influence adolescents’ focus on body image and body change strategies. Some of these factors include pubertal timing, identity formation, the development of same-gender and opposite gender relationships and increasing socio-cultural pressures to fit in with peers. Those adolescents who are at an increased risk are early developing females and late developing males (Ricciardelli et al., 2006).

Although many of these risk factors are mainly focused around female adolescents, there has been some research conducted in the area of adolescent males’ body image and consequent behaviors. Muth and Cash (as cited in Kostanski et al., 2004) found that body dissatisfaction is present for both sexes. In an evaluation of 277 college students, they found that 22% of males and 40% of females reported an overall unfavorable body image. Self-esteem has been shown to be associated with weight and body image concerns and has been shown to be a risk factor for unhealthy weight control behaviors in both genders (Wiseman et al., 2004). Wiseman, Peltzman, Halmi, and Sunday found that boys did report a level of body dissatisfaction, but it was in the opposite direction as girls. Boys wanted to gain weight and appear more muscular.

Due to the increase in concern for male adolescents’ utilization of harmful body shaping techniques, research has shifted away from studying primarily females. In Ricciardelli, McCabe, Lillis, and Thomas’ (2006) longitudinal study of preadolescent boys’ weight and muscle concern, they note that in the pursuit of the ideal male body,
preadolescent boys are displaying a lower self-esteem, depression, eating disorders, muscle dysmorphia, and utilizing steroids and other body building supplements. Two other causes of male body dissatisfaction, that these researchers note, are Body Mass Index and perceived pressures to change weight and muscles.

A study conducted by Furnham, Badmin, and Sneade (2002) focused on the hypothesis that females wish to be thinner, while males are equally divided between those who wish to be thinner and those who wish to be more muscular. Additional areas of their study focused on body dissatisfaction as it relates to self-esteem, and the negative reasons for exercise. The study was conducted on 111 boys and 124 girls, all ranging in age from twelve to thirteen years old in England. All participants completed a questionnaire that assessed their self-esteem, their reasons for exercise, their attitudes towards eating, and their level of body dissatisfaction.

Their results found that girls showed a greater discrepancy between ideal and actual body shape, expressed greater weight dissatisfaction, and had higher rates of abnormal eating attitudes and behaviors. The girls also tended to exercise more often for weight loss than boys, who reasons for exercising were for body fitness. This shows that overall, girls exercise for more negative reasons than boys. The majority of males (79.9%) and females (81.7%) selected an ideal figure different from their current figure when using the Contour Drawing Rating Scale. The research also found that 36.1% of males wanted to be heavier and 42.8% thinner. In contrast, only nine of the female participants wanted to be heavier.

Both genders showed significant correlations between self-esteem, reasons for exercising and body image. In the Eating Aptitude Test, the female participants’ scores
showed a significant correlation with attractiveness. Their self-esteem was found to be related to their weight control habits, showing that those with a lower self-esteem are more likely to exercise negatively to control their weight. For the male participants, a relationship was also found between eating attitudes and self-esteem. Boys showed that they exercise for both negative and positive reasons, both associated with a distorted body image.

This study showed that although females do display more unhealthy attitudes and behaviors towards their body, eating, and exercising, male adolescents also have strong feelings and consequent behaviors about their bodies. Further studies have been conducted specifically in the area of adolescent boys’ vulnerability to eating disorders. Garcia-Grau, Fuste, Miro, Saldana, and Bados (2004) conducted a study that investigated coping styles and vulnerability to eating disorders in adolescent boys.

171 males with a mean age of 15.74 years participated in this study. The data was collected using the Eating Disorders Inventory-2 and the Adolescent Coping Scale. The major influence that was found to predict eating disorders and body dissatisfaction in adolescent males was self-blame. The researchers define self-blame as a scale of dimension intropunitive avoidance, characterized by self-blaming excessively in the face of problems. Their results found that adolescent boys, who tend to feel overwhelmed by problems, blame themselves excessively or react by crying, shouting or taking drugs, show a higher predisposition towards developing an eating disorder.

It is usually an assumption that females are more emotional then men, the researchers in this study found a relationship between emotional personality traits and the use of emotion-focused coping strategies. Adolescent males are also more likely to binge
without purging. Some of these adolescents may be well adjusted and use adequate coping styles, however, some may be trying to avoid behaviors such as crying, shouting, or venting. Male adolescents may be trying to cope with their emotions and self-image in a positive way. For adolescent males, this can be difficult, especially when they are feeling the pressures to conform to societies “ideal” male image. The previous studies show that there are multiple risk factors associated with body dissatisfaction and consequent behaviors. These studies have confirmed previous findings that adolescents are exposed to a number of risk factors for negative body image regardless of gender.

Western Cultural Influences

In order to develop appropriate prevention and intervention programs for adolescents with negative body images, multiple influences must be examined. Two major influences over body image and consequent behaviors are culture and ethnicity. These areas have been widely researched. Research has been conducted cross-culturally, where ethnic groups are compared to investigate differences (Markey, 2004). Another method is to take an in depth look within cultural groups to investigate cultural processes. Markey has developed a tripartite model describing paths from culture to eating disorders. The culture can influence eating patterns, body image ideals, and perceptions of health. All of these can then influence eating patterns and disordered behaviors.

There has been extensive research conducted on the Western society and cultural influences on eating behaviors and body image. Body image dissatisfaction among females has become a normative component of their living within modern Western society (Kostanski et al., 2004). The socio-cultural norms of Western society place pressure on people to feel dissatisfied with their bodies and have a desire to conform to
the promoted “ideal” body image. Kostanski, Fisher and Gullone found that socio-cultural influences can be strongly influential to both sexes. They found that both obesity and the strong muscular male physique in Western society is just as important of an influence over males as the thin ideal is for females.

The incidence of eating disorders has been shown to increase in non-Western citizens who enter Western society (Lake et al., 1999). There is a rise in maladaptive eating patterns because of perceived pressure to fit into the new culture. Eating disorders seem to become more prevalent in women from non-Western cultures when they assimilate into the society because they begin to develop the society norms and values, specifically as they relate to the ideal female body shape. The Diagnostic and Statistical Manual of Mental Disorders (DSM-IV) published by the American Psychiatric Association (2000) states that a disturbance in perception of body shape is an essential feature of eating disorders. It also makes reference to the fact that in non-Western patients, a disturbed perception of body image may not be prominent and the expressed motivation for food restriction may not be to lose weight. This shows that Western society places a stronger emphasis on a specific body ideal that citizens of other countries may not be faced with.

One of the historic influences on young girls is the infamous toy doll, Barbie. Over the years, Barbie has been a favorite toy of eight to twelve year old girls (Kuther & McDonald, 2004). Barbie has been used to initiate imitation of social values and a construction of personal identities for young girls. Research has shown that young girls and boys perceive Barbie dolls as perfection. This has been found to lead to pressure on young girls to comply with Barbie’s ideals of social and physical perfection. An article
in Allure Magazine noted that to attain Barbie’s proportions, a healthy adult women
would have to grow 24 inches in height, five inches in the chest, and three point two
inches in the length of their necks (Tortolani, 2006). In addition, they would have to lose
six inches in their waist. The author also states that Barbie has always been something
that “we wish to be,” and her physical characteristics are what young girls and boys
consider to be attractive.

Research has also been conducted that investigates the influence of Western
culture on non-Western societies. Cross-cultural research has found an emergence of
anorexia nervosa in non-Western cultures that is attributed to a process of westernization
(Rieger et al., 2000). These other cultures are trying to become more westernized by
adopting the Western cultural value of thinness. Bemporad (as cited by Rieger),
maintained that eating disorders are the “price paid” for Western civilization. Reports
indicate that eating disorders are becoming increasingly prevalent in countries including
Spain, South Africa, Mexico, India, Fiji, China, Hong Kong, Singapore, Thailand, and
Japan (Markey, 2004).

A study conducted in China by Xie et al. (2006) found a significant increase in
body mass index (BMI) and a greater risk of obesity in mainland China. They note that
the influences on this rapid weight gain are the rapid economic development,
modernization, and industrialization during the last decades. In the past, a heavier
physique was considered a symbol of family fertility and wealth in China. However,
today’s ideals of body image have replaced previous feelings with a preference for a slim
physique in adolescents and youths. The researchers note that one of the influences on
these current ideals is the exposure to Western media, advertising, fashion, and lifestyle
among Chinese adolescents. This has lead to a shift in cultural beliefs and beauty ideals. This specific research gives an example to support the idea that Western society has a heavy influence on body image in adolescents in the United States and throughout the world.

Ethnic Influences

In addition to location of culture, ethnicity and background both play a role in body image. Beauty ideals and body norms vary among different ethnicities and religions within Western society. The majority of research has found that African-American women are less susceptible than Caucasian women to problems associated with poor body image and have a more positive perception of their bodies (Spurgas, 2005). Although African-American women tend to be heavier, research shows that they are more satisfied with their bodies and exercise less than their Caucasian counterparts (Aruguete et al., 2004). Studies have also found that Asian-American and Hispanic-American women who were more closely associated with a Caucasian culture were more likely to have distorted body images and consequent negative eating behaviors.

Aruguete, Nickleberry, and Yates (2004) found that the African-American participants in their study desired a body shape similar to what they considered healthy. In contrast, Caucasians desired a smaller body size than what they considered to be healthy. Ethnic influences on body image suggest that adolescents’ perception of themselves emanates primarily from family, friends, peers and the media. It is hypothesized that these sources may differ depending on the racial/ethnic groups (Nollen et al., 2006). The ideal body size of African-American girls is found to be most influenced by their families, while the ideal body size of Caucasian girls is mostly
influenced by the media and their same and opposite sex peers. It is speculated that African-American adolescents have heavier ideals and therefore increased body satisfaction at heavier weights. Conversely, Caucasian adolescents have thinner ideals and increased prevalence of weight preoccupation.

Altabe (1996) found that Caucasians and Hispanics showed the most disturbances in their bodies and African and Asian-Americans showed the least. She notes that her research shows that African-Americans had the most positive self-view and Asian-Americans placed the least importance on physical appearance. Story (as cited by Spurgas) conducted research among African-American, Caucasian, Native American, Asian, and Hispanic females. The results suggested that Hispanic females were more likely than any other ethnic group to use diuretics to maintain their weight. The findings also stated that Asian women have higher incidences of binge-eating, and that African-American women are more prone to use vomiting as a weight control method than women of other ethnicities.

Emerging research has challenged the previous beliefs that eating disorders and negative body-image was solely linked to Caucasian females. The current research conducted across diverse groups and developmental eras has found that eating and body image concerns are not uncommon among men, the non-affluent, or people of color (White & Grilo, 2005). Recent studies suggest that both African-American and Caucasian women are becoming more susceptible to problems associated with poor body image, including eating disorders (Spurgas 2004). In 1994, Pumariega et al. (as cited by Altabe, 1996) found that African-American women who read Essence magazine were just
as dissatisfied with their body weight as the predominately Caucasian *Glamour* magazine readers had been a decade earlier.

In the United States, the increase in eating disorders amongst African-Americans has been attributed to a rise in affluence and social status in this population (Caradas & Lambert, 2001). Although it is thought that African-Americans have different attitudes about weight, body size and attractiveness, the white cultural norms have had an increasing influence on African-Americans (Miller & Pumariega, 2001). It has also been found that levels of abnormal eating attitudes and body dissatisfaction among African-American women were at least as high as a similar survey of Caucasian women. African-Americans are now being exposed to a new body idea through African-American media. Primarily Caucasian ideas are being transmitted to African-American youth, particularly in the area of beauty ideals (Spurgas, 2004). These beauty ideals are most often impossible for African-American women to obtain, and can cause body image issues and consequent behaviors in young African-American women.

Nishina, Ammon, Bellmore, and Graham (2006) conducted a study that examined the association between body dissatisfaction and adjustment and the role of ethnicity in over 1100 urban ninth grade boys and girls. In addition to using a large, ethnically diverse population, Nishina, Ammon, Bellmore, and Graham utilized multiple measuring tools to collect their data. To measure body dissatisfaction, they utilized a body dissatisfaction scale. Physical development was measured using the Pubertal Development Scale, while depression symptoms were measured using the children’s depression inventory scale. Finally, self-esteem was calculated by using the global self-worth subscale from Harter’s self-perception profile for children. The researchers found
that in both boys and girls there were observed ethnic differences in body dissatisfaction which occurred because of differing cultural values about body shape and size, ethnic variations in media portrayals of body types, and differences in normative body types across ethnic groups.

Peer Influences

Developmental psychology has shown that early adolescents are characterized by a heightened self-consciousness and concerns about how other peers evaluate them (Davidson & McCabe, 2006). The peer influences that are most notably influential are same-sex and opposite sex relationships and teasing. Adolescent boys place a large emphasis on opposite-sex relationships. They believe that attractiveness and a good physique are important to peer popularity. If adolescent boys feel that they are popular with their peers, their self-esteem and body image are higher. Adolescent girls’ views of themselves are strongly associated with poor relationships with other girls. This may be because girls tend to form more emotional and intimate same-sex relationships than boys of the same age.

Wardle and Watters (2004) conducted a study to investigate the influence of teenage culture and peer relationships on weight concerns in adolescents. They hypothesized that exposure to older peers at school would be associated with thinner size ideals, increased concern about weight, and more dieting. After collecting data from over 200 adolescent participants, Wardle and Watters found that a variation in the age structure of the school environment is associated with differences in females’ weight and eating concerns. They also noted that in the early adolescent years (nine and ten years old), adolescents’ attitudes towards weight and teasing may be more easily influenced.
Their results showed that the more weight conscious environment provided by having older girls around impacts the attitudes of the younger children adversely.

Dohnt and Tiggemann (2006) found that girls who engage in more appearance related discussions and imitation of others had lower appearance satisfaction. As girls progress through the early years of schooling, the impact of peer discussions and imitations of others appears to be increasingly associated with negative self images and behaviors to control weight. With these discussion about appearance often comes negative comments and high incidence of teasing.

Peer teasing about general physical appearance is one of the most significant factors related to body image (Gleason et al., 2000). It is also noted that negative discussions and excessive social comparison predict body dissatisfaction in adolescents and college women. Women who recall being teased while growing up are more likely to report body dissatisfaction in adulthood than women who do not recall being teased (McLaren et al., 2004). Gleason, Alexander, and Somers (2000), conducted a study to investigate the impact of childhood teasing on young adults. After collecting data from over 150 twenty year old males and females, they found that childhood teasing is related to body image later in life. They also discovered that men and women were affected differently by different types of teasing. The researchers found that female body image was directly related to teasing regarding weight, appearance, and competence. Males' body image was more closely related to attacks on their personal competence. Overall, males seem to be less affected by teasing than males.

Identity formation is a major developmental piece of adolescence; therefore, teenagers are especially sensitive to weight related teasing (Yager et al., 2002). Girls
who are teased about their weight are more likely to develop psychological, body image, or eating disorders. Very overweight females seem to be the most affected by weight related teasing, but a high percentage of underweight females are also influenced by similar teasing. In a study conducted in over thirty-one public schools in Minneapolis, a higher percentage of overweight girls and boys who were teased about their weight engaged in unhealthy weight control and binge eating behaviors. It is obvious that this type of teasing leads to more severe eating disturbances later in life.

A study conducted among 4746 adolescents from Minneapolis, Minnesota focused on the prevalence of perceived weight-teasing and associations with unhealthy weight-control behaviors and binge eating (Sztainer et al., 2002). The researchers found that perceived weight-teasing by both peers and family members is common among adolescents. Overall, both genders experience teasing, but, as previously stated, girls experience more teasing and are more affected by the teasing. Non-overweight girls in this study reported higher levels of weight teasing than non-overweight boys. This study also confirmed the notion that weight teasing leads to unhealthy weight control habits.

Media Influences

There has been much speculation about the role of the media in body image and negative consequent behaviors in adolescents. Recent research suggests that as many as two-thirds of all high school females are dieting (Thomsen et al., 2002). Dieting has become so common that some feel that “normal” eating by many female adolescents may border on what has traditionally been considered negative eating behaviors. One of the major influences on these behaviors is the media infiltration of unattainable beauty ideals (Tiggemann, 2006).
The reading of fashion magazines and television consumption has been found to be correlated with body dissatisfaction, perception of overweight, and eating disorder symptoms. Reading fashion magazines presents adolescents with a number of thin ideals, as well as information on how to attain those ideals through dieting and exercise. In Tiggemann’s study, she aimed to investigate the precedence of media exposure and its relationship with body concerns and disordered eating behaviors. After collecting data from 214 girls in South Australia, Tiggemann found that the total time watching television was not related to body image concerns. However, the types of programming were related. Soap operas, music videos, certain sitcoms, entertainment news programs, and style channels seemed to have the most influence on girls’ body images and negative weight control behaviors.

Tiggmann (2005) also conducted a study to investigate the role of television on body image of adolescent boys and girls. She found that television viewing affects cognitive structures in both males and females, which influences weight and eating related behaviors. Tiggmann also looked into the motives for watching television. She found that watching television for the purpose of escaping negative affect or social learning was correlated with negative body image. The research shows that girls watched more for social learning and boys for enjoyment is consistent with the greater overall body concern among girls. Tiggmann found that television is a powerful source of self-socialization for adolescents.

The marketers of fashion, health, and beauty products have created a strategy to create a gap between the consumer and the ideal, and to then promise a solution for them to reach that ideal (Becker, 2004). During the time of adolescents, people are vulnerable
to want to reach those unattainable ideals, and practice any methods of reaching them. Young women, especially, can be under the impression that a person’s image can be reshaped and remade into that of a celebrity or a representation of this in the media. In one study, 502 high school females were studied to determine a relationship between reading fashion magazines and the use of dieting methods (Thomsen et al., 2002). The researchers found that reading these types of magazines encourages a desire or belief in the need to diet, regardless of the degree to which a young woman is already anxious about her weight. Maltby et al. (2005) found that teenage girls’ magazines frequently contain information about slimming down, binge eating, and other tactics used to control body weight.

Entertainment magazines, like People, tend to comment negatively on celebrities who have lost a large amount of weight, yet glorify them in later issues on how wonderful they look in a certain dress or outfit. In the October 9, 2006 issue of People, there was an article written about the drastic measures people are taking to achieve a thin physique. The celebrities that they cite are the very same ones who are the following week’s “Hot Pics” pages. An additional article in the October 9th issue gave real-life examples of teens and young adults struggling with unhealthy weight control behaviors. The article talks about their reasons for having an eating disorder, and their methods of treatment. Although this seems like it could be beneficial to the readers of People, the article contains many comments made regarding the women’s desire to go back to their bodies that they had with their eating disorder. The article also could have a negative affect on its readers because it gives explicit details of how the women in the article attained their ultra-thin bodies and their behaviors that they engaged in while they had
their eating disorders. This is example is one of many that can show how entertainment and fashion magazines can negatively influence its readers, particularly the adolescent readers who are more susceptible to imitating what they read.

In addition to reading fashion magazines and watching specific television shows, today’s youth has encountered a culture of celebrity worship. King, Touyz, and Charles (1998) studied 116 undergraduate females who were shown distorted photographs of celebrities. They wanted to investigate the young women’s perception of the celebrities’ bodies. The results showed a significant difference in the participants’ judgments of the thin celebrities. Women with low-levels of concern judged the celebrities more accurately than those who had a poor body image. These results suggest that females showing body dissatisfaction are more strongly affected by media exposure because of the way they perceive the images they are being presented with.

An additional study of celebrity worship among a large population of students found that there was a strong interaction between celebrity worship and body image with between the ages of 14 and 16 years old (Maltby et al., 2005). They found that the largest influence on those who worship celebrities came from those who had “intense-personal” worship. This means that they do not discuss their feelings with their friends and prefer to retain personal thoughts and interactions with the celebrity. Celebrity worship leads adolescents to believe that they can attain the same ideals that the adolescent celebrities have achieved. Female adolescents were proven to have a stronger response to their celebrity ideals; however, males may be increasingly more body conscious because of the media.
Keim (2006) found that males who take in the most music videos, prime-time television, and read men’s magazines are most likely to be less comfortable with their bodies. Baird and Grieve (2006) examined the influence of media on male’s body satisfaction. Their study found that viewing advertisements and media images with muscular male physiques decreases men’s body satisfaction. This research lends strong support that media presentation of socially ideal body shapes for both men and women generally leads to a negative comparison for most people.

In addition to multiple affects on males and females, the media can also influence ethnicities in different ways. In a study conducted among specifically African-American and Caucasian women, it was found that Caucasian women’s body image is related to mainstream media, and African-American women’s body image is related to African-American oriented media only (Schooler et al., 2004). Programs with predominately African-American casts were found to include a broader range of body types among their actors. It is hypothesized that African-American women may see other African-American women as allies, rather than competitors. This may help positively influence their body images.

Consequent Behaviors

The relationship between disorder eating and childhood obesity influences weight control behaviors and future weight gain (O’Dea, 2004). Recent studies have shown that disordered eating is very high among adolescents, with at least one of the following behaviors being practiced: fasting, skipping meals to lose weight, diet pills, vomiting, laxatives, smoking cigarettes, and binge eating. Adolescents who use extreme weight loss behaviors usually negatively influence the cycle of dieting, purging, binge eating,
and further weight gain. These behaviors can lead to major health problems during adolescent years, as well as later in life.

McCabe and Ricciardelli (2004) studied 430 adolescent boys and girls and the prevalence and influence on their unhealthy weight control behaviors. They believed that the timing of puberty in relation to the adolescents’ peers could play an important role in their body image and consequent behaviors. They found a clear association between engaging in competitive sports and the development of exercise dependency. The research also shows that both adolescent male and female athletes are more likely to report bulimic symptoms and engage in steroid use to enhance their performance. Exercise addiction has also been found in boys who mature later and had a strong focus on sports and early maturing girls who desired a smaller body physique. The study also showed that girls are more likely to engage in unhealthy behaviors to lose weight, while boys were more likely to engage in unhealthy behaviors to gain muscle.

An additional study by McCabe and Ricciardelli (2006) examined changes in extreme weight change attitudes and behaviors among adolescent boys and girls over a sixteen month period. Participants completed questionnaires evaluating the researched variables. McCabe and Ricciardelli hypothesized that there is an increase from early to middle adolescence in the use of extreme body change behaviors in both boys and girls. They found that 5.4% of adolescent boys and 5.5% of adolescent girls can be classified as being exercise dependent. 14.7% of boys and 19.4% of girls were classified as “at-risk” for developing exercise dependency. The researchers also found that there was a high usage of food supplements and laxatives. Females were found to use them to lose weight, while males were found to use them to increase muscle mass.
The results of the research found that girls are more likely to adopt extreme body change strategies in order to alter their bodies to conform to the socio-cultural norms. Girls are also more likely to have an obsession with food, demonstrate bulimic behaviors, and engage in excessive levels of exercise in order to lose weight. Young adolescent boys may not be as socially aware as their female peers, and therefore they display the extreme weight change behaviors later in adolescents. The researchers found that the focus that boys put on their bodies determines their level of dissatisfaction and the consequent unhealthy weight control behaviors.

In addition to behaviors to control body weight, adolescent females also face another area of concern. It has been found that teenagers with a low self-esteem and poor body images are more likely to be victims of abuse (Vezina et al., 2006). Researchers have noted that physical and psychological violence in romantic relationships is associated with depress and post-traumatic stress disorder. Data shows that the self-concepts of adolescent girls involved in severe violence that includes injury are especially negative.

**Prevention and Intervention Programs**

There are many ways to help prevent and deal with body image issues among adolescents. One of the major aims of prevention programs to improve body image, unhealthy eating habits, and childhood obesity is to encourage healthy eating and physical activity among children and adolescents without promoting weight loss attempts and the diet-binge cycle (O’Dea, 2004). An effective location for prevention and intervention is in schools. Schools must develop an environment of acceptance and safety that promotes personal health and strength (Akos & Levitt, 2002).
Research has shown that the most effective time to prevent negative body image and unhealthy weight control behaviors is during the elementary school years. Rather than implement intervention programs, when most behaviors and beliefs are already strongly established, primary prevention strategies can empower children to embrace their differences and engage in healthy behaviors.

The main objective of primary prevention is to promote knowledge, critical thinking skills, and realistic attitudes that can counteract unhealthy pressures about appearance, weight, and eating during their vulnerable adolescent years (Kater et al., 2002). Obviously, the idea of prevention is not always possible. In situations where students have never received prevention programs, interventions become necessary. Both prevention and intervention programs usually involve similar aspects. Most programs involve a foundation of knowledge that addresses influences such as gender and cultural influences, as well as acceptance of diversity in height, weight, and body fat. They also address the developmental changes that everyone experiences during puberty, the dangerous effects of unhealthy weight loss behaviors, the importance of a healthy diet and exercise plan, self-acceptance, life skills, and healthy coping mechanisms.

Multiple methods of interventions and prevention programs are often used with students of different ages. Almost every technique works in a school setting, usually supervised and initiated by a school counselor. School counselors need to be aware of both the risks of negative body image and the preventative and intervention practices. The methods that school counselors can implement are individual counseling sessions, group counseling sessions, health and physical education curriculums, family
consultations, community collaborations, and psychosomatic treatments (Akos & Levitt, 2002).

Individual counseling procedures encourage trusting one-on-one relationships, where those who need counseling can open up and feel comfortable sharing and accepting the methods of therapy. This interpersonal therapy approach focuses on developmental changes and social experiences that may trigger disordered eating behaviors. This can empower students with alternate ways to handle problems and to practice new behaviors. An approach commonly used during individual counseling is the cognitive behavioral approach, which consists of confronting a person’s false beliefs by helping them create a new, more positive belief. This can create new feelings in the individual, which can lead to more positive behaviors.

Research has found that adolescent males can benefit from individual counseling because of their potential feelings of embarrassment (Stout & Frame, 2004). Among males, there is a greater taboo against revealing a body image problem; therefore they may feel more comfortable in a more intimate setting. Another beneficial counseling program for both genders is group counseling. Group counseling can help students engage in activities and practice new behaviors with their peers (Akos & Levitt, 2002). Although peers can be a source of negativity, they can also be a source of strength and support within a counseling group. By observing and assisting other students with similar feelings and situations, peers can work to make changes within themselves.

Group counseling can be an effective way to change adolescent boys’ feelings towards their own bodies (Stout & Frame, 2004). Peer groups of idle and high school boys can help them learn that they are not alone in their feelings. When adolescent boys
see others in their peer group that have similar insecurities and can receive support from those peers, they can begin altering their own beliefs and behaviors. One suggestion from researchers is to have a separation of groups that are broken up into specific categories (Akos & Levitt, 2002). There could be groups of overweight students, average weight students, and underweight students. This could help students feel comfortable in their groups, while learning the importance of feeling good about themselves and engaging in healthy behaviors.

One area that has proven to be beneficial for adolescents who are struggling with their body image or for prevention of children developing negative body images is family. Counselors can encourage parents to help their children engage in healthy eating and exercise habits (Sztainer, 2005). Parents can promote positive feelings and behaviors through role modeling these behaviors, helping their children make healthy choices, focusing less on weight and more on behaviors and overall health, and providing a supportive environment to enhance communication.

Psychosomatic treatments were investigated in a 2006 study conducted in an inpatient treatment center for eating disorders (Benninghoven et al., 2006). Forty-one patients with anorexia and thirty-seven bulimic patients were provided with psychotherapeutic, pharmacological, medical, and nursing interventions. Their psychotherapeutic therapy included group therapy, family interventions, creative therapy, relaxation exercises, physical therapy, nutritional education, and emotional education. One major accomplishment from this method of intervention was an increase in weight among a majority of the patients. The patients also decreased their overestimation of weight, and their level of body dissatisfaction. Although many school counselors are
utilizing many of these approaches, they are being implemented in a less structured setting, and usually only one method is used for each student. This study shows how effective these methods can be when combined and implemented on a daily basis.

School counselors can also utilize classroom curriculums, particularly in health and physical education classes. Having these teachers address the emotional and physical changes that occur during puberty can positively influence all students. This can promote peer sharing and dialogue, as well as opportunities for students to help each other through individual body image issues. There are many specific intervention and prevention programs that can be utilized in classroom curriculums.

Mirror Mirror is a program that utilizes guided worksheets, role-playing, and counseling procedures within the classroom (National, 1999). This program was developed in the early 1990’s by the Nutrition Education Department and has been used in a number of school districts throughout the country. The program has a number of objectives that include helping students understand cultural attitudes about weight, understanding and accepting normal differences in growth patterns, and recognize the potential dangers of weight loss diets. Additionally, objectives to help school professionals include learning current theories of adolescent weight management, increase empathy for overweight individuals, recognize the signs of eating disorders and take appropriate actions, and develop effective programs related to teen weight, body size and self-esteem. Finally, the program aims to help parents increase understanding of their children’s self-esteem issues related to body weight.

The program entails identification of students at risk, techniques to implement the program, and materials to guide teachers and counselors through the program. The topics
that are covered include influences and attitudes about weight, factors affecting weight, guidelines for healthy eating, eating disorders, and guidelines for parents. This program is designed to help adolescents develop a more healthy lifestyle and positive body image and to reduce their obsession for creating an ideal body weight or shape.

One program is specifically targeted for upper elementary school aged students. The program, entitled “Healthy Body Image: Teaching Kids to Eat and Love Their Bodies Too (HBI),” encompasses eleven lessons to be delivered in a classroom setting (Kater et al., 2002). The first four lessons teach the intrinsic nature of body size, shape, and composition. These lessons teach children the limits to healthy weight and shape control, and the ways to accept diversity within themselves and others. The next four lessons emphasize the factors that can positively influence weight, body image, and well being. These lessons motivate children to practice healthy choices that can influence their health and weight. The final three lessons teach socio-cultural and life skills.

The study of the HBI program consisted of over 350 children in grades four, five and six. Students were given a pre-test, and received all eleven intervention lessons. They were then given a posttest and the results were compared. Both boys and girls demonstrated a significant increase in the ability to think critically about media messages regarding appearance. In addition, boys showed a decrease in prejudicial attitudes about body size, and improved choices regarding eating and physical activity. All scores for girls reflect an increase in the desire to improve self image, body size prejudices, and lifestyles behaviors. The results of this study suggest that it is possible to provide children with knowledge to utilize as they deal with increasing pressures about appearance, weight, and eating.
CHAPTER III: DESIGN

Sample

The sample group for this experiment came from four different Middle School classrooms. Over one-hundred students were given permission forms to be participants in the study. Sixty-two students received parent permission to participate. The participants were a mix of seventh and eighth grade boys and girls. These students range in age from twelve years old to fifteen years old. The socioeconomic backgrounds, as well as the ethnic backgrounds of the students were varied. The study included participants from a low socioeconomic status through an upper-middle socioeconomic status. The ethnic backgrounds of the students included a large number of Caucasian students and Asian-American students. There were also a number of Hispanic, Muslim, and African-American students who participated in the study.

Materials

The main material used in this study was a survey created by the experimenter. This survey was created by compiling questions related to the experimenter’s hypotheses (see appendix a). The survey contained a variety of questions that included multiple choice, fill in the blanks and a series of questions on a rating scale. Each student completed the survey’s independently in a quiet setting. For students who had trouble reading the survey, a teacher was able to read the questions to them. In this situation, the teacher only read the questions word for word and did not give interpretation or explanation of the questions.

Reliability/Validity of Scales
Test reliability was not taken for this survey. Face validity was shown due to the fact that the questions were understood by the participants.

Method

The first step in this study was to distribute parent permission forms and create a list of able participants. In order to maintain confidentiality and avoid bias, no form of identification was used on the survey. After the list of participants was in order, the teachers chose the exact time that they would distribute the survey. They decided on a date and chose a forty-five minute period that went from 8:50am – 9:35am.

Before distributing the survey, the teachers instructed the participants to stay quiet during the entire survey time and to complete the survey to the best of their abilities. They asked the participants to not use their names, and to try to answer all of the questions. Finally, they told the participants that they would not be able to help them with any parts of the survey. If there were words or questions that the participants were unable to read, the teacher was able to read the question word for word. The teachers explained that they would not be able to paraphrase or suggest answers to any of the survey questions. The participants were then given the survey. When a participant was finished, they were asked to turn their packet over and sit quietly until the forty-five minute period was over. At the end of the period, the teachers then collected the surveys and dismissed the participants.

Independent and Dependent Variables

The first part of the study was a correlations study. The different variety of comparisons came from gender, media influence and ethnic background. Each of these components was compared with each other to find any relationships that could influence
body image and body image behaviors. The second part of the study was an independent t-test. The dependent variable was gender, while the two independent variables were body image and weight-control behaviors.

Analysis of Data

The results of the surveys were analyzed by categorizing the questions based on their subject area. These subjects were males, females, weight control behaviors, peer influence, body image, family influence, and media influence. The different ethnicities were also recorded to determine if this was an area of influence. The results were taken as a total number, and then divided over the total possible answer. This gave the percentage of the students' responses. The data was analyzed as a nonparametric correlation. An independent samples t-tests was conducted with gender and body image level as well as gender and instance of weight control behaviors.

Summary

In this study, random classes from a Middle School were given a survey to complete in class. The students were asked to answer honestly, with the assurance that their identity would not be known. The surveys were collected and the researcher analyzed the data. Correlation and t-tests were conducted to provide various analysis of the level of body image in the students, as well as the instances of weight-control behaviors among these students. These tests were also conducted to determine a relationship between peers, the media, gender, ethnicity, and family pressures on body image and weight control behaviors. It was expected that the students would have a negative body image and engage in weight-control behaviors. It was also expected that
these two factors would be influenced by gender, ethnicity, peers, the media, and the participants' families.
CHAPTER IV: RESULTS

Introduction

The purpose of this study was to determine the level of body image among Middle School aged students, the influences on their body image, and the consequent behaviors from their body image. It was hypothesized that Middle School aged students have a negative body image of themselves. It was also hypothesized that this negative body image would influence the students' behavior. A final hypothesis was that the Middle School aged students’ body image was influenced by gender, the media, their peers, their ethnic backgrounds and their families.

Results

The data from this study was collected through a survey that was randomly given to a number of classes in a middle school setting. The surveys were anonymous and questioned many areas of the students’ lives, including their ethnic background, questions about their families, and the type of media that they are exposed to. In addition to these questions, the students were also asked to answer a series of questions based on a rating scale. These questions targeted their body image, family influences, peer influences, media influences, and consequent behaviors based on their body image.

A nonparametric correlations test was conducted to determine any specific relationships from the data, where \( N = 62 \). There was a significant positive correlation found between the media and level of body image in the students, where \( r = .393 \) and \( p = .000 \).
The results also show a significant correlation between peer influences and body image, with $r = .424$ and $p = .01$.

Figure 4.2 Level of body image in relationship to peer influence.
The nonparametric correlations test also showed a significant correlation between media influence and peer influence on Middle School aged students, with $r = .261$ and $p = .0$.

**Figure 4.3** Level of media influence in relationship to level of peer influence.

![Graph showing the relationship between media influence and peer influence](image)

Two independent sample t-tests were run with gender as the independent variable and body image and consequent behaviors being the dependent variables. In this t-test, the number of male participants was 37 and the number of female participants was 25.

Body image was measured in percent, with a higher percentage indicating a more negative body image. The t-test showed that the male participants had a mean body image percentage of 30.84%, with a standard deviation of 17%. The results of the t-test showed $t_{60} = -2.098$ and $p = .04$. Female participants had a mean body image percentage of 39.88%, with a standard deviation of 16.1%.
In the area of weight control behaviors, the results were given in percents. A higher percentage indicates a higher instance of weight control behaviors. The male participants had a mean instance of weight control behaviors of 20.65%, with a standard deviation of 11.63%. The female participants showed a mean instance of weight control behaviors of 13.6%, with a standard deviation of 9.77%. The results of the t-test also showed $t_{60} = 2.492$ and $p = .015$. 

Figure 4.4 Mean body image in males and females
In summary, a nonparametric correlations test was conducted on the data. A significant positive correlation was found between body image and media influence, body image and peer influence, and peer influence and media influence. There was no significant correlation between race and family influence on body image or behavior.

An independent t-test was conducted to investigate the relationship between gender, body image, and consequent behavior. It was shown that there is a significant difference among Middle School aged male and female body images, where females have a more negative body image than males. There is also significance in gender differences with weight control behaviors. In this area, Middle School aged males show a higher instance of weight controlling behaviors than females.
CHAPTER V: DISCUSSION

Review of Results

After reviewing the results, a small percentage of the participants had a negative body image of themselves. This result fails to prove the first hypothesis, which states that Middle School aged students have a negative body image of themselves. Within this hypothesis, there were additional findings regarding gender. The data collected shows that males in this age group have a more positive body image than females.

The second hypothesis stated that a negative body image would influence weight-control behaviors. This hypothesis was not able to be proved because of the failure to prove the first hypothesis. This finding contradicts many other studies. Low body satisfaction is one of the strongest indicators of weight control behaviors in adolescents (Sztainer et al., 2004). Although the current study does not prove this hypothesis, interesting findings were presented with the results from this area. The results found a higher negative body image in the female participants; however, they showed a higher instance of weight-control behaviors from the male participants. While most of the male participants did not indicate that they utilize weight-control behaviors that include limitations of food intake, the use of supplements, or the act of purging, they did respond higher to questions regarding exercise. In addition, more male participants indicated that they overate more than the female participants.

Other studies have indicated the rise in weight control behaviors among males. In today’s society, the value of a muscular body has increased in males, therefore men are reporting a higher level of body dissatisfaction than in the past (Baird & Grieve, 2006).
Although many studies find that a majority of females desire to lose weight, males are typically evenly split between those who wish to gain weight and those who wish to lose weight (Kostanski et al., 2004).

The results from the study were varied in the area of influences on body image. Therefore, the study failed to prove the last hypothesis. This hypothesis states that Middle School aged students’ body image was influenced by gender, the media, their peers, their ethnic backgrounds, and their families. There were specific areas in this hypothesis that were shown to be significant influences on body image. Specifically, peers and the media were found to be the most significant influences on Middle School aged students’ body images. Ethnicity and family were not found to be significant influences on body image or weight-control behaviors. This finding goes against previous research. Markey (2004) states that ethnic minority females may be at increased risk for disordered eating patterns due to poor body image.

Even though the results failed to prove this hypothesis, many of these results could have been influenced by certain limitations of the study. Although the participants were from multiple ethnic groups, there may not have been a large enough population of certain groups to show significance. In addition, the survey did not go into a lot of detail when questioning the participants in the areas of ethnicity and family influence.

Limitations

In the current study, there were a number of limitations. One is the reliability of the survey. This survey was created by the researcher and was made without any professional support. The questionnaire was created to inquire about specific areas that the researcher was investigating. The questions were not asked in a particular order, they
may not have been detailed enough, and there may not have been enough range with each area to provide accurate results from the participants. For more accurate results, the researcher could have utilized professional surveys or questionnaires.

In addition to the survey, the population of the participants was also a limitation in this study. Although the school that the participants attend is diverse in ethnicities and socio-economic status, the population chosen at random for the study was not as equally diverse. There was a lack of African-American participants and only a small number of Hispanic participants. The majority of the participants were Asian-Americans and Caucasian. In addition to ethnic backgrounds, there were a larger number of male participants than female participants in the study. This could also prove to be a limitation for the results of the study.

Finally, the reliability of the survey answers could be a limitation in the results of this study. The participants were a group of seventh and eighth grade students who may or may not have taken the survey seriously. Although they were assured anonymity, and they were asked to answer with all honesty, there is no guarantee that they did so. Some students may have answered randomly; others may have made up false answers. Not knowing if the participants were honest with their answers does cause a major limitation in the results of the study.

Conclusion

In conclusion, this study showed significance between gender influence on body image in Middle School aged students, as well as gender differences with weight control behaviors. There were also significant signs that peers and the media play influential roles in the body image of Middle School aged students. Although the study’s
hypotheses were found to be insignificant, further research should be conducted to focus on this specific age group.

Implications for Further Research

Many of the studies previously conducted do focus on various influences on body image and weight control behaviors such as gender, ethnicity, peers, and the media. However, there are not many studies conducted on the pre-adolescent and adolescent age group. This age group is crucial to investigate because of the rapidly decreasing age of the onset of weight-control diseases such as anorexia nervosa and bulimia. It is very important to understand the influences of negative body image on Middle School aged children. It seems that media and peer influences are significant with body image and weight control. It is important to continue researching other influences such as family pressure and ethnic background. An additional area of influence may be religious background. There are many laws and restrictions regarding food within various religions. These areas may be influential to those who practice their religion very strictly. For example, Christianity emphasizes eating together, Judaism has strict purity laws, and Mormons’ laws promote self-denial (Grenfell, 2006). These restrictions, combined with the social expectations could lead to negative body image and consequent weight-control behaviors.

If the causes of negative body image and weight control behaviors can be determined with this age group, more prevention and intervention programs can be implemented. Further research could greatly affect the trend of negative body image and the increase in intensity of weight control behaviors. Prevention and intervention
programs are needed, and additional research will help with the creation of effective programs.
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APPENDIX

SURVEY

Please complete the questions to the best of your ability. Please DO NOT use your name anywhere on this sheet. Your answers are confidential and NO ONE will know your identity.

Your honesty is greatly appreciated.

1. Age: __________

2. Sex:
   a. Male
   b. Female

3. Race
   a. Caucasian
   b. Hispanic
   c. African-American
   d. Asian-American
   e. Native-American
   f. Other (please indicate)

4. The Country in which you were born: ____________________________________________

5. Mother’s occupation: __________________________________________________________

6. Father’s Occupation: __________________________________________________________

   * If you live with someone else, please indicate their relationship and occupation:
   __________________________________________________________________________

7. How many hours of Television do you watch a day? __________

8. What are your favorite Television Shows?
   __________________________________________________________________________

9. Do you read any magazines or newspapers on a regular basis? a. Yes  b. No
   If YES, which ones?

10. Have you ever been teased about your weight? a. Yes  b. No

11. Have you ever been teased about how you look? a. Yes  b. No

12. Your approximate height: __________

13. Your approximate weight: __________
14. Your family members are:
   a. Mostly in good shape
   b. Could afford to lose weight
   c. Are overweight

15. Which 2 celebrities do you admire the most, and why:

Please answer each question according to the following rating scale:
0 – never  1 – sometimes  2 – often  3 – always

1. You respect your friends opinions on appearance
   0 - 1 - 2 - 3
2. You think you look worse than other people
   0 - 1 - 2 - 3
3. You follow celebrities and their trends
   0 - 1 - 2 - 3
4. You desire to look differently
   0 - 1 - 2 - 3
5. You want to lose weight
   0 - 1 - 2 - 3
6. You want to gain weight/muscle mass
   0 - 1 - 2 - 3
7. You have been teased by family members
   0 - 1 - 2 - 3
8. You have been teased by peers
   0 - 1 - 2 - 3
9. You play sports for a recreational or school team
   0 - 1 - 2 - 3
10. You feel like you don’t fit in
    0 - 1 - 2 - 3
11. You feel depressed
    0 - 1 - 2 - 3
12. You spend a lot of time worrying about your looks
   0 - 1 - 2 - 3
13. You feel that the thinner the person, the better looking
   0 - 1 - 2 - 3
14. You workout more than 5 hours a week
   0 - 1 - 2 - 3
15. You feel guilty when you miss a workout
   0 - 1 - 2 - 3
16. You diet
   0 - 1 - 2 - 3
17. You take supplements to control your weight
   0 - 1 - 2 - 3
18. You take laxatives to control your weight
   0 - 1 - 2 - 3
19. You skip meals
   0 - 1 - 2 - 3
20. You overeat
   0 - 1 - 2 - 3
21. You overeat then purge (throw up)
   0 - 1 - 2 - 3
22. You criticize yourself
   0 - 1 - 2 - 3
23. You worry what others think of you
   0 - 1 - 2 - 3
24. You admire celebrities because of their looks
   0 - 1 - 2 - 3
25. You look in the mirror often
   0 - 1 - 2 - 3
26. You are jealous of celebrities who are thinner than you
   0 - 1 - 2 - 3
27. You are jealous of celebrities who are more muscular than you
   0 - 1 - 2 - 3
28. You feel peer pressure to look a certain way
   0 - 1 - 2 - 3
29. You criticize others because of their looks
   0 - 1 - 2 - 3
30. You feel pressure to criticize others about their looks
   0 - 1 - 2 - 3.