

**Body Image Satisfaction Among Females**

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### **Abstract**

**Background:** Body image and satisfaction among females has changed from ancient to contemporary times. Previously, women's bodies were not represented in the media but, now women are represented. This research uncovered how to increase body image satisfaction among females ranging from adolescent to elderly.

**Objective:** The aim of this study was to understand how women's body image satisfaction impacted health and how increasing body image satisfaction can be used to prevent diseases and disorders like bulimia.

**Design and Method:** The research method was based on qualitative research with the aim of finding out why women experienced body image satisfaction while others experienced body image dissatisfaction. This included current peer-reviewed articles, ethnographic research, and conversations with about twenty participants at a commercial gym. Body image and satisfaction were assessed through conversational questions between the researcher and the individual at the gym. Individual information including their body image satisfaction was collected and reported in the Results section. The major research question is: *How do women show body image satisfaction or dissatisfaction in their body image?*

**Results:** The significance of this study is that for females, as body image satisfaction increased, health and well-being increased.

**Conclusions:** Yoga, mindfulness-based cognitive therapy, social media, and religious affirmations are all effective ways to increase body image satisfaction among females. Parents serving as role models also increase body image satisfaction. These interventions increased body image satisfaction and increased overall health and well-being.

**Keywords:** body image, yoga, mindfulness, body satisfaction, body dissatisfaction, women

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## Chapter 1: Introduction

### Statement of the Research Problem

In the words of Oprah, "I finally realized that being grateful to my body was key to giving more love to myself" and one should "only make decisions that support your self-image, self-esteem, and self-worth" (Kliest, 2018). Oprah's words support the claim that there needs to be more research on body image and satisfaction among females. According to researchers Hart, Damiano, and Paxton (2016), children develop body image and patterns of consuming food at an early age. It would be ideal for children to develop and maintain a healthy body image by following their parents in keeping a healthy, structured environment to learn and grow. The more positive the parent's view of body image, the more positive the child's view of his or her own body image. These positive behaviors can lead to a lifetime of body image satisfaction.

Women who are not taught to have high body image satisfaction will most likely have high levels of body image dissatisfaction throughout life if no one intervenes. Women, especially adolescent and college-aged, look to advertisements on the television, radio, and magazines for what their ideal body image should be instead of looking at their own bodies realistically. By having such poor body image satisfaction, women are developing eating disorders like bulimia nervosa and illnesses like clinical depression.

In response to this problem, more studies need to be conducted; however, studies by Delaney and Anthis (2010) and Moradi and Samari (2017) propose to investigate multiple options for preventing body image dissatisfaction. One solution to this problem is practicing mindfulness through yoga. In addition to yoga, engaging in mindfulness-based cognitive therapy greatly reduces depression especially among women with bulimia nervosa due to poor body

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image satisfaction. Other ways to improve body image satisfaction include social media and religion in order to form more realistic body image ideals.

### **Statement of the Purpose**

The differences between body image satisfaction and dissatisfaction among females were pronounced and deserved thorough investigation. I focused my research on how Body Image (how people think and feel about their own body) impacted or influenced overall well-being especially among females. I explored how body image satisfaction was associated with higher levels of physical activity as well as healthier eating patterns. I found out how body image satisfaction varied across cultures and uncovered how body image dissatisfaction could be improved by implementing interventions that increased body image satisfaction. I also looked into whether or not body image differed among females from childhood to elderly adulthood. My research examined how body image influenced physical, mental, social, emotional, and spiritual health among females.

### **Research Questions**

The following are the questions that I focused on in my research:

RQ1: How do women show body image satisfaction or dissatisfaction in their body image?

RQ2: Is there a relationship between body image satisfaction and physical activity?

RQ3: Is there a certain demographic of women experiencing body image satisfaction?

RQ4: How much does the media or the “thin ideal” influence women’s bodies?

### **Significance of the Study**

In the past, women’s bodies were not represented and there was a major focus on male’s bodies. Currently, there is more research that includes female’s bodies. Not only did these newer

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studies include female bodies, but they also distinguished between body image satisfaction and body image dissatisfaction among women. Although women's bodies are now gaining more representation in different forms of mass media like television and film, researchers Ganesan, Ravishankar, and Ramalingam (2018), reported that due to cultural influences, the body image of young adolescent college-aged Indian girls is becoming poorer. According to a study by Ganesan et al. (2018), over seventy-seven percent of the adolescent college-aged Indian girls reported experiencing body image dissatisfaction and yearned for a lower Body Mass Index due to social and cultural pressures to be thin. Body image is no longer just a problem in Western culture. Because of distorted Western ideals, young Indian girls, as well as girls in the East, are experiencing higher levels of body image dissatisfaction than ever before.

Although body image satisfaction among females can be a problem, there are multiple ways to ensure that girls, adolescents, and older women, receive interventions in order to help promote body image satisfaction. According to Hart, Damiano, and Paxton (2016), children can follow their parents who may act as role models for the children. Parents can help promote positive body image by eating healthy with one's children. In order to prevent eating disorders, which is also a problem particularly among adult women in Iran, participants can engage in mindfulness-based cognitive therapy. Researchers, Ruopeng, Mengmeng, and Zhang (2017), stated that this form of therapy was effective in decreasing feelings of depression and increasing body image satisfaction. Overall, by participating in activities that promote healthy body image, one can prevent the development of eating disorders and increase body image satisfaction.

### **Definition of Terms**

Body Image: how people think and feel about their own body

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Thin Ideal: social pressure to be thin or media-related emphasis of a thin and slim body with a small waist and almost no body fat

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## Chapter 2: Review of Literature

This Literature Review was begun in Junior Seminar and has been expanded upon so it has been a continuous work. Long ago, women were not seen as equal to or as important as men. Currently, more people are embracing women's bodies which was seen as rare in the past. Since more women's bodies are being represented in media, more research is now focusing on the impact, both negative and positive, that media, culture, and society have on women's body image satisfaction. This Literature Review answered the following research questions: How do women show body image satisfaction or dissatisfaction in their body image? Is there a relationship between body image satisfaction and physical activity? Is there a certain demographic of women experiencing body image satisfaction? How much does the media or the "thin ideal" influence women's bodies? This paper focused on women's body image satisfaction and how it related to physical activity, self-esteem, and overall health.

### **Body Image and Satisfaction: Past**

In the past, there were very few representations of women in media and art. Looking back at the rise of art in Africa, specifically Nok statuary in Nigeria, one can see that mostly men were represented. According to author Bernard de Grunne, the majority of the sculptures and statues dating back to 600 BC are of men with status, including "kings, soothsayers, and priests" (Grunne, 1999, p. 11). Even though art in Africa dates back to Nok statuary from 900 BC to 200 AD, it is only later on that women were represented. In addition to Western Africa, there was a rise in art in Central Africa. By looking at a sculpture called "Female Figure," one can see how an ideal woman's body should look in Africa in the past. This sculpture is of a woman with a protruding stomach, indicating she is carrying a child. The sculptor says that the figure "symbolizes hope and human life, especially growing life and a beating heart in a mother's

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womb” (Female Figure). Although there are very few images of women in the past, especially in Africa, the images of women that were represented and seen as ideal were of women who were pregnant or were of women who could conceive children. Having a body that could withstand child-birth was ideal in terms of women’s bodies in the past and additionally, the “Female Figure” represented female fertility.

Similar to how women’s bodies were not represented much in the past in Africa, women’s bodies were also under-represented in the ancient world as well as during the Renaissance in Italy. Jane Long, a professor of art history, wrote about how in the ancient world, the nude male body was celebrated the most because men’s bodies were seen as “a sign of heroic stature and importance” while women’s bodies were seen as lustful (Long, 2008, p. 8). Long discusses Botticelli’s painting called *Birth of Venus* and in contrast to the female body during medieval times, during the Renaissance, the female body was celebrated. The painting is of Venus, a nude woman, who is a goddess, standing on a conch shell surrounded by the ocean and three nymphs. Venus has features that are typical of the ideal Renaissance woman which includes having “an ideal figure with long neck and limbs, ample curves,” and represents procreation (Long, 2008, p. 5). In the past, similar to the ideal female body in Africa, the ideal female body in Renaissance Italy has curves and in order to be celebrated, the female must have a body that promotes fertility.

Although the ideal for women’s bodies varies across cultures, there exists a collective ideal for how a woman’s body should look. “Ford and Beach, an anthropologist and psychologist, concluded that it was a human universal that heavier women are viewed as the most attractive” (Heine, 2012, p. 467). Overall, in the past, both in Eastern and Western culture, the ideal body for women was larger compared to today.



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### **Body Image and Satisfaction: Present**

According to Ramos-Jimenez, Hernández-Torres, Urquidez-Romero, Wall-Medrano, & Villalobos-Molina (2017), the majority of college-aged students lead sedentary lifestyles because of academics, which put them at risk for developing poor health. Ramos-Jimenez et al. (2017) conducted a study in order to evaluate body image satisfaction as well as the relationship between sedentary behaviors and level of physical activity among women in a university setting. The research includes reports that as physical activity level increased, chronic disease decreased. Additionally, as physical activity level increased, body image satisfaction increased. This study includes athletes and non-athletes ages eighteen to thirty-five. These tests were designed to see if there is a relationship between physical activity level and health. Specifically, the researchers provided participants with two questionnaires to evaluate body image satisfaction and physical activity. In terms of results, Ramos-Jimenez et al. (2017) found that women who were non-athletes perceived their bodies as obese and had low self-esteem while women who were athletes perceived their bodies as thin and had higher levels of self-esteem. Those who reported high levels of physical activity and fitness perceived themselves with “better physical and sports skills” and “showed lower Body Mass Index and participate in sports frequently” (Ramos-Jimenez et al., 2017, p. 602). Overall, this study showed that as body image satisfaction increased, the levels of sports participation among university students increased.

As women age, their bodies change. These changes can either lead to an increased life expectancy or it can lead to body deterioration and poor self-image. Although, body image satisfaction has “not been studied enough in elderly populations,” it is recommended that in order to improve quality of life, one can participate in daily physical activity, eat proper nutritious foods, and practice self-care. Specifically, “a positive body image promotes physical

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and emotional health and strengthens self-esteem” (Latorre Roman et al., 2014, p. 851). Researchers, Latorre Roman, García-Pinillos, Huertas Herrador, Cózar Barba, & Muñoz Jiménez (2014) conducted a study that analyzed elderly people and their “body satisfaction in non-institutionalized” settings in addition to body mass index and walking pace (Latorre Roman et al., 2014, p. 851). In order to study the relationship between body image satisfaction and health-related indicators like weight, height, and walking speed, the researchers gathered sixty-eight women ages seventy-two and up and gave them questionnaires to complete. The questionnaires used assessed body image satisfaction and measured the perception of one’s health. In order to measure body composition, body mass index was calculated and gait speed was measured. Latorre Roman et al. (2014) discovered that elderly women have higher levels of body image satisfaction in comparison to younger women and only 5.6 percent of the elderly participants reported body image dissatisfaction. Specifically, the higher the levels of body image satisfaction, the higher their perception of health, the higher the gait speed, and the lower the body mass index among the elderly.

### **Body Image and Dissatisfaction: Present**

Similar to the study by Latorre Roman et al. (2014), that stated younger women experienced higher levels of body image dissatisfaction than older women, Ganesan, Ravishankar, and Ramalingam (2018) found that body image dissatisfaction was a growing problem among adolescent college-aged girls in India. Body image is defined as “how people think and feel about their own body” and “relates to a person’s perceptions, feelings, and thoughts about his or her body and is usually conceptualized as incorporating body size estimation, evaluation of body attractiveness, and emotions associated with body shape and size” (Ganesan, Ravishankar, & Ramalingam, 2018, p. 42). There exists a major problem where

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“perception of overweight and dissatisfaction with body size, rather than actual weight appears to be a potent force behind girls’ dieting and weight control behaviors” (Ganesan et al., 2018, p. 42). Although there is not much research on body image in India, researchers Ganesan et al. (2018) set out to find exactly how many young adolescent college-aged Indian girls were experiencing body image dissatisfaction as well as whether or not weight control behaviors were occurring. In order to find this information, Ganesan et al. (2018) conducted a cross-sectional study that included 1200 college girls in urban India. The researchers studied adolescent girls ages eighteen to nineteen and provided them with questionnaires that measured self-esteem, depression, social and cultural pressure, media influence, body mass index, and body image dissatisfaction. In order to measure body image dissatisfaction, students chose a figure that they currently perceived of themselves as well as the figure they wished to have. The researchers found that over seventy-seven percent of adolescent girls were dissatisfied with their body image. In the West, the ideal female body “changed from being heavier to being remarkably thin” (Heine, 2012, p. 467). The results showed that Indian girls are now adopting a more Western ideal in which the ideal female body is thin. Similarly, they are adopting weight control habits that may lead to long-term illnesses related to mental as well as physical problems like depression and becoming malnourished.

Similar to Latorre Roman et al. (2014) and Ganesan et al. (2018) younger women experience higher levels of body image dissatisfaction than older women. According to Mangweth-Matzek, Rupp, Hausmann, Assmayr, Mariacher, Kemmler, & Biebl (2006) “although clinical eating disorders and body image distortions are typical for young female populations aged eighteen to twenty-five, there is evidence that eating disorders and body image distortions do occur in women of midlife and beyond” (Mangweth-Matzek et al., 2006, p. 583). Mangweth-

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Matzek et al. (2006) aims to understand the eating behavior, body attitudes in elderly women, and the amount of disordered eating in women older than sixty years of age. In order to measure these variables, psychiatrist Mangweth-Matzek et al. (2006) took a random sample of one thousand women and gave them a questionnaire which measured depression and included “current eating behavior, weight history, body attitude, and disordered eating” (Mangweth-Matzek et al., 2006, p. 583). The results from the study showed that almost half of the elderly women in the study had distorted views of the self as well as had high levels of body image dissatisfaction. Additionally, over eighty percent of the elderly women in this study attempted to control their body weight in an unhealthy manner. Because of this, a significant portion of these women were diagnosed with eating disorders of either anorexia nervosa or bulimia nervosa.

In summary, even though most of the elderly women had a “Healthy Eating behavior and normal body weight, the majority reported dissatisfaction with weight” (Mangweth-Matzek et al., 2006, p. 586). This study, as well as the studies by Latorre Roman et al. (2014) and Ganesan et al. (2018), showed that although the majority of women who typically experienced eating disorders were younger women, Mangweth-Matzek et al. (2006) claimed that there were some elderly women who developed eating disorders.

### **Body Image and Children in the Future: Parent Intervention**

According to a study by Ganesan, Ravishankar, and Ramalingam (2018), many adolescent girls are reporting issues related to body image dissatisfaction. These researchers found that over seventy-seven percent of the girls in the study had body image dissatisfaction and tried to control their weight by eating less and skipping daily meals. In order to prevent long-term problems like eating disorders, it is important to begin during childhood to teach children how to avoid peer pressure and negative body image. In a study by Hart, Damiano, and Paxton

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(2016), a desire for thinness, awareness of dieting, and unhealthy eating patterns have been found to emerge in children as young as five. This study also found that “thirty-two percent of girls and twenty-six percent of boys aged five to nine years are estimated to be overweight or obese” (Hart et al., 2016, p. 458). Body image dissatisfaction has now become an important public health issue which is why it is important to teach children healthy body image and eating patterns early in childhood. This can prevent disordered eating like “binge eating” and emotional eating, as well as “less physical activity, depressive symptoms, and clinical eating disorders in children and adolescents” (Hart et al., 2016, p. 458). Researchers Hart et al. (2016) conducted a study which tested for the effectiveness of the intervention Confident Body Confident Child. The researchers set up a randomized controlled trial of four groups. Parents also completed two questionnaires which tested for “knowledge of parenting strategies to prevent unhealthy eating and body dissatisfaction in young children” (Hart et al., 2016, p. 462). After six weeks of being given the Confident Body, Confident Child intervention, results showed that the group that received the Confident Body, Confident Child resource pack along with the parent workshop received the most significant results. These parents reported using behaviors that increased body image satisfaction and increased healthy eating habits among their children. As parents exercised positive behaviors related to eating and body satisfaction in the family environment, they positively impacted their own children’s eating habits and body image satisfaction.

### **Body Image and Adolescents and Adults in the Future: Intervention**

Ganesan, Ravishankar, and Ramalingam (2018) found that body image dissatisfaction was prevalent among adolescent college-aged girls in India. In addition to intervening early during childhood, young adults and adolescents can seek intervention through religious pursuits. Boyatzis, Kline, and Backof (2007), conducted a study which tested “whether college women’s

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body image would improve after reading religious and spiritual affirmations about their bodies.” The researchers sampled college women and created an experimental, randomly assigned design in order to test for changes in body image satisfaction. Before being tested, the participants completed a pretest which measured body image and religiosity level. After being tested, the women were randomly assigned to conditions including religious, spiritual, or control condition. After being exposed to the affirmations, the women looked at photographs of fashion models that promoted the “thin ideal,” or social pressure to be thin, in the United States. Next, participants completed a posttest survey measuring their body esteem which were then compared to their pretest body esteem scores. Results showed that across groups, the Religious group received the most positive change scores in terms of self-esteem and body image satisfaction. Conclusively, reading religious or spiritual affirmations about one’s body increased women’s body image satisfaction.

According to Delaney and Anthis (2010), yoga can serve as an intervention to improve body image satisfaction. Delaney and Anthis (2010) conducted a correlational study that focused on women’s participation in various types of yoga and how these different types of yoga “improve body image and body awareness, while decreasing body objectification and disordered eating” (Delaney & Anthis, 2010, p. 63). The women surveyed ranged from ages twenty-three to eighty-one. In order to measure the participants’ levels of yoga and how it relates to body image, surveys were distributed to various women’s Yoga centers. Five questionnaires were included which assessed how much women listened to their bodies, how satisfied women were with their bodies, whether or not the women had eating disorders, and how others viewed one’s body. To measure how the level of yoga may influence body awareness, Delaney and Anthis (2010) divided the surveys into three groups consisting of: high mind-body, medium mind-body, and

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low mind-body. Those in the high mind-body group included participants who attended classes that were physically demanding, required precise control over one's body, but also included special emphasis on understanding the self through meditation. This study found that the high mind-body groups had more body control, less objectified body consciousness, and more body awareness and satisfaction in comparison to the medium mind-body group and low mind-body group.

Similar to the study by Delaney and Anthis (2010), an increase in mindfulness leads to an increase in body image satisfaction according to Moradi and Samari (2017). Moradi and Samari (2017) wanted to test how effective mindfulness-based cognitive therapy was as an intervention targeting women, ages eighteen to forty, with clinically diagnosed instances of bulimia nervosa, a serious eating disorder. This is "characterized by eating large amounts of food in a short period and then adjusting extra calories by vomiting or other extreme actions" (Moradi & Samari, 2017, p. 394). Accompanying such behaviors are "impaired perception of body weight, obsessive thoughts about food, exercise and distorted body image" (Moradi & Samari, 2017, p. 394). Moradi and Samari (2017) conducted a quasi-experimental study with pretest and posttest and a control group. In order to examine the relationship between mindfulness and body satisfaction, Moradi and Samari (2017) distributed a questionnaire, to women in clinics who were bulimic, which measured the intensity of overeating. The participants were then randomly assigned to either a group that received mindfulness-based cognitive therapy or a group that did not receive therapy. Additionally, two questionnaires were distributed which measured depression and body image satisfaction. Those who participated in cognitive-behavior therapy went to sessions which included talk-therapy, journaling, mindfulness, meditation, awareness of one's body, and review of past thoughts. Moradi and Samari (2017) found that "mindfulness-based cognitive therapy

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reduced depression in subjects of intervention group compared to the subjects of control group, in the posttest.” Depression decreased by almost forty percent in the intervention group.

According to Moradi and Samari (2017), mindfulness-based cognitive therapy reduced depression and increased body image satisfaction.

Ruopeng, Mengmeng, and Zhang (2017) say that obesity is a main cause of preventable death around the world and in order to combat obesity, interventions need to be implemented. Although social media is new in comparison to mass media like radio, television, and newspapers, it can provide the same if not better results in terms of increasing body image satisfaction. Also, “from 2005 to 2015, the adoption of social media among US adults increased from three percent to sixty-five percent” (Ruopeng et al., 2017, p. 670). The researchers conducted a study to test the effectiveness of social media on women’s body image. They used questionnaires and a keyword search in databases like PsycINFO to estimate the effectiveness of social media-based interventions. The majority of these interventions “used Facebook, followed by Twitter and Instagram” in order to expose the experimental groups to web-based counseling and health-related articles addressing obesity, dietary behavior, and physical activity (Ruopeng et al., 2017, p. 670). Social media can be used to promote positive body image and can serve as a forum for discussion about problems related to health and because social media can reach such a large audience world-wide, it is an ideal method of spreading health information. Social media can be seen as harmful or negative and a person may look at and begin to strive for an unhealthy weight because the “thin ideal,” or social and cultural pressure to be thin, is being encouraged online. Although social media can be considered harmful, it can also be seen as positive. For example, by looking at healthy bodies and interacting with a supportive online community, social media can increase body image satisfaction. Without intervention, one may develop long-



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term issues such as heart disease and cancer. The researchers found that through social media-based intervention, participants reported significant improvements in body mass index. The control group received no intervention and the experimental groups received social media interventions via online articles and web-based counseling. These interventions targeted women who may have conditions like obesity or are survivors of cancer. Researchers Ruopeng et al. (2017) found that interventions that utilized Facebook, Twitter, and Instagram, and social media-based interventions, were effective and associated with a decrease in body weight, body mass index, and waist circumference, as well as an increase in daily number of steps taken.

### **Conclusion**

In conclusion, body image and satisfaction among females is something that is only recently gaining the attention of researchers. In the past, women's bodies, both in the East and the West, were seen as unequal when compared to men's bodies. Men's bodies were seen as heroic and women's bodies were seen as either lustful or only good for carrying a child. Previously, there was a preference for women who were heavier in the East and in the West. However, as time elapsed in the West, "thinner women became the ideal" according to anthropologist and psychiatrist Ford and Beach (Heine, 2012, p. 467). In a study by Ramos-Jimenez et al. (2017), it was found that as body image satisfaction increased, sports participation increased. In terms of the elderly, the higher the levels of body image satisfaction, the higher the perception of health and the lower the body mass index. Many young adults experience body image dissatisfaction due to pressure from the media, culture, and society. Ganesan et al. (2018) found that over seventy-seven percent of adolescent Indian girls were dissatisfied with their body which shows that body image dissatisfaction is a problem in the West as well as in the East. Even though the majority of women who reported body image dissatisfaction were young

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women, this issue also affected the elderly. In order to combat the problems related to body image dissatisfaction, interventions can be implemented.

In terms of the future, by intervening early in a child's development, one can prevent body image dissatisfaction, obesity, and eating disorders. Parents should serve as role models, promote healthy eating habits and body image satisfaction, and create a supportive family environment for their children. As adolescents and young adults, interventions related to religion, yoga, and mindfulness are effective in increasing body image satisfaction. More recently, social media is becoming an effective way to promote positive health behaviors like physical activity and healthy eating. By using social media that includes health articles and web-based counseling on platforms like Facebook, Twitter, and Instagram, one can increase body image satisfaction while decreasing body weight and risk of developing eating disorders. Overall, reducing body image dissatisfaction, increasing physical activity, eating a nutritious diet, and keeping positive affirmations all impact body image satisfaction as well as health in a positive way.

In the next portion of my research, I will delve into the methods used in order to answer the research questions. The methods section includes study design, sample populations, investigative techniques, and data collection. The methods section includes exploratory and qualitative research like an ethnography as well as conversations in order to measure body image satisfaction among females and determine if there is a relationship between body image satisfaction and physical activity. Additionally, this involves using the Purchase College Library to find peer-reviewed articles. The methodology also includes whether or not there is a certain demographic of women experiencing body image satisfaction and if the media influences women's perception of their bodies.

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## **Chapter 3: Methodology**

The purpose of this study was to understand how body image satisfaction among females impacted their health and how increasing body image satisfaction can prevent diseases and disorders. The key research problem was that women's bodies were not represented in the past and there needed to be more research on body image and satisfaction among females. The main research question that was explored was: How do females show body image satisfaction or dissatisfaction in their body image? The following include specific step by step procedures that I used in the methods section of my research in order to understand how body image satisfaction among females impacted their health.

### **Purpose**

Most authors conducted a cross-sectional study in order to measure body image satisfaction among women. These authors also used questionnaires to measure body image satisfaction, physical activity, and eating habits. Hart, Damiano, and Paxton (2016) conducted a randomized controlled trial and Ruopeng, Mengmeng, and Zhang (2017) used a keyword search and a meta-analysis. Additionally, many authors used pretest posttest designs like Hart, Damiano, and Paxton (2016), Moradi and Samari (2017), and Boyatzis, Kline, and Backof (2007).

### **Paradigm**

Body Image and satisfaction is important to me because it is vital that one maintains good habits in terms of health. It is important to eat healthily, exercise regularly, and keep a positive self-image in order to be healthy. It is also vital that one keeps active and prevents possible illnesses like diabetes, obesity, and eating disorders.

### **Study Design**

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I conducted qualitative research in order to find out the reasons why women experienced body image satisfaction while others experienced body image dissatisfaction. Qualitative research “describes qualities or characteristics” and is “collected using questionnaires, interviews, or observation, and frequently appears in narrative form” (“All Guides: Data Module #1,” 2019). Quantitative research “is used when a researcher is trying to quantify a problem, or address the "what" or "how many" aspects of a research question. It is data that can either be counted or compared on a numeric scale” (“All Guides: Data Module #1,” 2019). Qualitative research is the best choice for this research because it involves looking at patterns in phenomena and not just numerical data. This research also helped in terms of exploring new information about body image satisfaction among women and also revealed important problems and difficulties that exist within the phenomena. Qualitative research helps in evaluating the usefulness of a particular intervention.

This research is exploratory. I used this type of study because conducting only quantitative research will not provide the motivation behind a behavior. Within the qualitative design, I conducted an ethnographic study. An ethnographic study is the systematic study of people in their natural environments. Ethnographic research involves the researcher observing a particular collection of people that share a culture. This means that the researcher engaged in participant observation and became heavily involved in the everyday life of the people being observed. This design was best for my study because it involved observation through fieldwork and was most convenient in terms of explaining body image satisfaction.

### **Phase One**

In terms of methodology, I entered Phase One of the research methods process by searching Purchase College Library and using Discovery Search as well as searching Books and

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Media in order to find peer-reviewed articles and edited books for the Literature Review. The keywords that I used to search were: children and body image, adolescence and body image, elderly and body image, old age and body image, body image and dissatisfaction, and body image and satisfaction. Regarding my own experience, I utilized the help of the staff and met with the librarian. I received help looking for peer-reviewed academic articles, popular current articles, historical articles and books, and articles on the internet.

### **Phase Two**

I entered Phase Two of the research methods process by engaging in ethnographic research and observation and entered Phase Three by conducting conversations with peer participants directed through questions at a local suburban gym. I also used content analysis of written material. The following are the questions that I asked participants:

- Q1: How often do you engage in physical activity each week?
- Q2: How satisfied with your body are you?
- Q3: Do you worry about how others perceive your body?
- Q4: Has the media ever negatively influenced how you feel about yourself?
- Q5: Have you ever felt pressure to fulfill the “thin ideal” or media-related emphasis of a thin and slim body with a small waist and almost no body fat?
- Q6: Has your body image changed as you have gotten older?
- Q7: Do you think your perception and attitude of body image affects your health?
- Q8: Where do you buy your workout clothes?
- Q9: What is your age?
- Q10: What is your ethnicity?
- Q11: Do you work?

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- Q12: What is your annual income?
- Q13: How far away do you live from the gym facility?

Through conversation, I was able to gain insight into which population experienced body image satisfaction the most and which population experienced body image satisfaction the least. I utilized an ethnography in order to observe behavior related to body image and satisfaction and I investigated body image and satisfaction using primary data. I also gained knowledge through fieldwork by observing behaviors at the gym. I used an ethnographic approach to answer questions I used to conduct research. These questions include: How can women show body image satisfaction in their body image? How can women show body image dissatisfaction in their body image? Is there a relationship between body image satisfaction and physical activity? Is there a certain demographic of women experiencing body image satisfaction? How much does the media or the “thin ideal” influence women’s bodies? In order to show body image satisfaction, one can look at demographics like race, ethnicity, and age.

Furthermore, by looking at attire, level of intensity (being social vs. being engaged), and frequency of gym goers, one can show body image satisfaction. In addition to completing ethnographic research, I also conducted conversations with peer participants in order to answer specific research questions. I was able to measure body image satisfaction as well as body image dissatisfaction by listening to the answers given by my peers during the conversations.

### **Population and Sample**

The population that I studied is women. My sampling plan was convenience because of easy accessibility. Specifically, I studied females aging from adolescence to elderly age. Additionally, a portion of these females were college-educated. I also had approximately fifteen participants in Phase Two of the research methods which involved an ethnography. I conducted a

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random sampling of females ages eighteen to sixty-five. In addition to an ethnography, I had about twenty participants in peer conversations. These women ranged from ages thirty to eighty.

Participants received no monetary gifts and were not paid.

### **Investigative Techniques**

I used behavior observation like an ethnography as well as conversations with peer participants. The variables that I used are body image satisfaction, physical activity level, and dietary habits. The researchers Ganesan, Ravishankar, and Ramalingam (2018) used Body Mass Index to measure physical activity level of participants. In order to measure body image satisfaction and dietary habits, Ganesan et al. (2018) used self-report questionnaires including pretest and posttest reports.

### **Instrumentation**

I used a journal, made notes with a pencil, and sat in the same spot each time during yoga class.

### **Data Collection**

I used a pencil and notepad to write my notes. Also, I went at the same time of day and sat in the same spot during each yoga class. I observed during the entire duration of class.

### **Data Analysis Plan**

I collected descriptive statistics as well as descriptive research like observation studies.

### **Ethical Consideration (Human Subject Protections)**

I did not submit for IRB. All phases of the research was completed in an ethical manner.

### **Assumptions**

I needed to take for granted that those being observed to test my hypothesis were from a

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somewhat athletic background and put great value into maintaining health and well-being. In order to avoid bias, I had participants re-assess my results and reviewed my findings with peers. This means that I had my peers look over my results and findings. My peers were able to see if there were any gaps or inconsistencies in my research and checked for alternate explanations. They also were able to confirm whether or not my conclusions were credible and rational.

### **Limitations**

There were a few shortcomings in the studies on body image and satisfaction. Ramos-Jimenez, Hernandez-Torres, Urquidez-Romero, Wall-Medrano, and Villalobos-Molina (2017) found that among college students, as body image satisfaction increased, physical activity level increased. This study has a few limitations. The study was not randomly conducted and there was no “independent test to evaluate the state of fitness as all data were through self-report” (Ramos-Jimenez et al., 2017, p. 605). In the future, the study should require participants to complete physical fitness tests that measured speed and body mass index in order to measure physical fitness and its relation to body image satisfaction. Although both Ramos-Jimenez et al. (2017) and Latorre Román, García-Pinillos, Huertas Herrador, Cózar Barba, and Muñoz (2014) found that as body image satisfaction increased, physical activity levels increased, Latorre Román et al. (2014) found that body image satisfaction is something that has not been studied often among aging populations. The key limitation of this study is that it does not consider the influence of other factors such as “psychological (depression, mood state, disorders food), nutritional, and physical activity level” (Latorre Román et al., 2014, p. 856). There needs to be more research that incorporates mental, physical, and emotional influences on body image satisfaction among the elderly.



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Although Ganesan, Ravishankar, and Ramalingam (2018) reported high levels of body image dissatisfaction among college going adolescent girls in India, they only studied girls in one college. By only focusing on one college, there is less variety and generalizability in terms of social, economic, and cultural differences. Further studies should include interventions to “improve awareness on ideal body weight, media literacy, and harmful effects of extreme weight control measures have to be planned.” The youth need to “maintain a healthy body weight” and need to be “protected from the pressure of negative body image and weight control practices” (Ganesan et al., 2018, p. 45). Both Ganesan et al. (2018) and Mangweth-Matzek, Rupp, Hausmann, Assmayr, Mariacher, Kemmler, Whitworth, and Biebl (2006) found that in addition to body image satisfaction, women also may report body image dissatisfaction. Although the majority of participants who report body image dissatisfaction are young women, the elderly population is also affected by body image dissatisfaction. There is minimal research explaining eating disorders among elderly women. Mangweth-Matzek et al. (2006) found that there were few limitations in the study. First, there was a “high drop-out rate that limits the generalizability of our findings” (Mangweth-Matzek et al., 2006, p. 686). Second, many of the participants did not respond to the questions on the questionnaires. Third, having participants fill out questionnaires is less reliable compared to clinical interviews. Further studies should include interviews of participants.

Hart, Damiano, and Paxton (2016) found that by promoting healthy body image and eating patterns in children ages two to six years of age, parents can raise an overall healthy child. In order to complete the questionnaires related to body image and satisfaction, Hart et al. (2016) had to rely on self-report data by parents instead of observational data. Another limitation in this study is that the majority of participants were “well-educated adults from relatively advantaged

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urban areas. The generalizability of the results to adults of other education, social, or ethnic backgrounds is therefore not clear” (Hart et al., 2016, p. 470). Future research should include more ethnic, economic, and geographic diversity. Also, there should be a focus on long-term growth of children and they should be able to self-report data in addition to parents.

Moradi and Samari (2017) conducted a study that focused on the effectiveness of mindfulness-based cognitive therapy. This study is limited because it only recruited thirty participants from two nutritional clinics. Additionally, the study only lasted three months. Future studies should have a larger treatment group and should have a longer time limitation.

Mindfulness-based cognitive therapy should also be tested on participants with other illnesses related to binge eating disorder. Similar to Moradi and Samari (2017), Delaney and Anthis (2010) found that women who participated in high levels of mind-body awareness, such as mindfulness meditation in yoga, had higher levels of body image satisfaction. The limitations of this study include the “lack of randomized controls” and limiting the current study to women (Delaney & Anthis, 2010, p. 70). Also, the study was limited to the classes offered by the yoga facility. Future research should include men as well as women, and greater racial, age, and economic diversity. Future studies should examine the importance of emphasizing a fully integrated mind-body practice rather than only the fitness aspects of yoga.

There has been little research that addresses religion in relation to body image. The majority of “reviews of religion and health do not mention body image at all” (Boyatzis, Kline, and Backof, 2007, p. 553). Future studies should investigate the “effect of affirmations on body image in more diverse samples” (Boyatzis et al., 2007, p. 559). The study by Boyatzis et al. (2007) consists of mostly white women. Future studies should include more racial diversity and positive effects of religious affirmations should be studied in women diagnosed with disorders.

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In addition to utilizing religion as an intervention method, Ruopeng, Mengmeng, and Zhang (2017) found that social media can be used as an intervention method to decrease body weight, body mass index, and waist circumference. There were several limitations in the research by Ruopeng et al. (2017). First, in addition to using social media, many studies in the review included other interventions “such as wearable devices, emails, text messages, phone calls, face-to-face or Web-based counseling, and physical activity courses” (Ruopeng et al., 2017, p. 678). The effects should include the “overall effectiveness of social media-based health promotion interventions” and not just social media alone. Similarly, the participants were “mostly young and middle-aged adults, whereas older adults that have the lowest social media adoption rate were not assessed” (Ruopeng et al., 2017, p. 678). Because of generational differences, this study may suggest that social media interventions may not be adaptable to older populations. Future studies should include large, randomized probability samples, “a longer follow up period” to evaluate long-term effects of social media interventions on “weight-related behaviors and body weight status,” and enrollment of adults sixty-five years of age and older (Ruopeng et al., 2017, p. 679).

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### Chapter 4: Results

The purpose of this study was to understand how body image satisfaction among females impacted their health and how increasing body image satisfaction can prevent diseases and disorders. The key research problem was that women's body image satisfaction was not represented in media and research in the past and there needed to be more research on body image and satisfaction among females. The main research question that was explored was:

RQ: How do females show body image satisfaction or dissatisfaction in their body image?

The research question was answered through an ethnographic study. I found that among females, body image satisfaction increased as physical activity increased and body mass index decreased. I conducted ethnographic research in order to measure body image satisfaction. During ethnographic research, I entered Phase Two of my research and took field notes during a yoga session. Field notes are "notes created by the researcher during the act of qualitative fieldwork to remember and record the behaviors, activities, events, and other features of an observation. Field notes are intended to be read by the researcher as evidence to produce meaning and an understanding of the culture, social situation, or phenomenon being studied" (Schwandt). Here are my field notes after observing yoga at a nearby commercial gym:

When I first entered the yoga room at the commercial gym, I noticed that there was good lighting and multiple mirrors in the front of the room in order to see one's self. The room was rectangular and had wooden floors. There was also soft Indian music playing in the background. This music included the accompaniment of flutes, harps, tuning forks, didgeridoos, djembe drums, and rain sticks. I chose to sit in the back of the yoga room in order to see and observe everyone. The majority of the people that I saw were Caucasian women who were middle-aged.

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These middle-aged women were toned and slightly muscular and wore brightly colored athletic tops and spandex pants. The students that sat in the front were mostly older in age and were the most flexible and experienced in terms of practicing yoga. These students also performed advanced yoga poses and movements. There were a few Caucasian men participating in yoga. There were also some young students, who were Caucasian, African-American, Hispanic, and Asian, with college logos on their shirts. I saw two women who were of Indian descent and these women were dressed in saris which is their traditional cultural attire. Most of the time the entire class was practicing a yoga pose (Ex. Downward dog is when you shape your body in an upside-down V). Very few of those in the yoga class were on their phones or doing something else like reading or listening to music through headphones. At the end of class, two women were conversing in Spanish language. During the final minutes of class, a number of students took the time to re-hydrate by drinking water which shows that these participants practice self-care. Towards the end of class, mindfulness meditation was practiced where everyone sat on their mats with their legs crossed and cleared their minds of negative thoughts. The cost of a yoga class is included in a ninety-dollar monthly gym membership fee. The attendees are members of the commercial gym and must be members to participate.

In addition to field work, I entered Phase Three of my research and conversed with about twenty participants. In order to find out more about body image satisfaction among females, I engaged in conversations with fellow gym-goers at a commercial gym nearby. The following are my results after having conversations with participants at a close commercial gym.

### ***Q1: How do women show body image satisfaction or dissatisfaction in their body image?***

We can show body image satisfaction or dissatisfaction among females by looking at demographics like race, ethnicity, and age. Furthermore, by looking at attire, level of intensity

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(being engaged vs. disengaged in activity), and frequency of gym-goers, one can show body image satisfaction or dissatisfaction. According to Ferguson, a contributor at Huffington Post, “the clothes you choose reflect and affect your health and overall confidence.” In addition to Ferguson, “Professor Pine of the University of Hertfordshire writes in her book *Mind What You Wear: The Psychology of Fashion*, ‘if I dress up for a meeting or a special occasion, it can alter the way I walk and hold myself’” (Ferguson, 2017). Ferguson continues “clothes don’t just affect your confidence levels, they can affect your success, as ‘clothing significantly influences how others perceive and respond to you’” (Ferguson, 2017). Ferguson mentions Kim Peterson, of Uniquely Savvy, and states that she “helps people champion themselves through personal brand, body and color analysis, wardrobe analysis, personal shopping, and style consulting for individuals” (Ferguson, 2017). This indicates that as body image satisfaction increased, attention women spent dressing themselves increased and as body image dissatisfaction increased, attention women spent dressing themselves decreased.

Noted in Table 1, sixty percent (n=12), more than half of the participants, reported being satisfied or very satisfied with their bodies. Forty percent (n=8) of the participants reported being dissatisfied with their bodies.

| Table 1  |                     |
|--|---------------------|
| <i>Q1: How satisfied with your body are you?</i> |                     |
| <u>Level of Satisfaction</u>                     | <u>Participants</u> |
| Very dissatisfied                                | 0                   |
| Dissatisfied                                     | 8                   |
| Satisfied  | 11                  |
| Very Satisfied                                   | 1                   |
| <i>Total</i>                                     | 20                  |

Sixty-five percent (n=13) of those who partook in the research claimed that they bought their workout clothing at a store. Noted in Table 2, participants’ clothes were mostly bought at

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brick and mortar stores. Additionally, there was no significance between high end, mid-range, and low-end clothing purchased.

| Table 2   |                     |
|---|---------------------|
| <i>Q2: Where do you buy your workout clothes?</i> |                     |
| <i>Source</i>                                     | <i>Participants</i> |
| Online (No designation from participants)         | 6                   |
| Macy's  | 3                   |
| Modell's  | 2                   |
| Gap   | 1                   |
| Lululemon   | 2                   |
| Marshall's  | 2                   |
| Old Navy  | 2                   |
| Target  | 1                   |
| Other   | 1                   |
| <i>Total</i>                                      | 20                  |

### ***Q2: Is there a relationship between body image satisfaction and physical activity?***

According to Ramos-Jiménez, Hernández-Torres, Urquidez-Romero, Wall-Medrano, & Villalobos-Molina (2017), there exists a “positive relationship between intensity of body image satisfaction and physical activity level” (Ramos-Jiménez et al., 2017, p. 599). This means that the higher the body image satisfaction, the higher the levels of physical activity. Students with high body image satisfaction are more likely to engage in physical activity. Students with low body image satisfaction are less likely to engage in physical activity. “Also, a positive self-esteem is related to sports participation and physical activity in children, adolescents, and adults” (Ramos-Jiménez et al., 2017, p. 599). This means that students may experience low body image satisfaction due to poor self-esteem and students may experience high body image satisfaction due to high levels of self-esteem.

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In Table 3, participants between five and ten hours of weekly activity (n=6) count for thirty percent of the sample. Of the participants, thirty-seven percent (n=7) engaged in physical activity between two and five hours.

| Table 3  |                     |
|--|---------------------|
| <i>Q3: How often do you engage in physical activity each week?</i> |                     |
| <u>Number of Hours</u>   | <u>Participants</u> |
| 0  | 0                   |
| 1-2  | 4                   |
| 2-5  | 7                   |
| 5-10   | 6                   |
| 10-15  | 1                   |
| 15-20  | 1                   |
| 20+  | 0                   |
| <i>Total</i>   | 19                  |

In Table 4, out of all of those who partook in the research, sixty-five percent (n=13) were within the one to five miles range in terms of proximity to the gym facility. Less than one percent (n=1) of the participants lived over twenty miles away from the gym facility.

| Table 4  |                     |
|--|---------------------|
| <i>Q4: How far away do you live from the gym facility?</i> |                     |
| <u>Number of Miles</u>                                     | <u>Participants</u> |
| Less than 1 mile   | 4                   |
| 1-5 miles  | 13                  |
| 6-10   | 2                   |
| 11-15  | 0                   |
| 16-20  | 0                   |
| Over 20 miles  | 1                   |
| <i>Total</i>   | 20                  |

### ***Q3: Is there a certain demographic of women experiencing body image satisfaction?***

According to Heine, “within the United States, African-Americans have heavier ideal body weights than European-Americans and feel less social pressure towards thinness” (Heine,



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2012, p. 468). There is a certain demographic of women experiencing body image satisfaction. Middle-aged Black and African-American women as well as middle-aged Caucasian women experienced the most body image satisfaction. However, women who are of European descent have experienced higher levels of body image dissatisfaction than African-Americans because the ideal female body is heavier for African-Americans than for Caucasian women.

Of the participants, Hispanic women reported the highest body image dissatisfaction. Out of all the Hispanic women reporting about body image (n=6), sixty-seven percent reported body image dissatisfaction. Out of all those surveyed, the most satisfied (n=4) were African-American women. See Table 5 in the Appendix.

### ***Q6: What is your age?***

Of the participants, twenty-one percent (n=4) were elderly and within the sixty-one and eighty age groups while no one reported being in the eighty-one to ninety or ninety-one to one hundred age ranges. Similarly, no one reported being in the eighteen to twenty or twenty-one to thirty age groups.

| Table 6                      |                     |
|------------------------------|---------------------|
| <i>Q6: What is your age?</i> |                     |
| <u>Age</u>                   | <u>Participants</u> |
| 18-20                        | 0                   |
| 21-30                        | 0                   |
| 31-40                        | 5                   |
| 41-50                        | 6                   |
| 51-60                        | 4                   |
| 61-70                        | 3                   |
| 71-80                        | 1                   |
| 81-90                        | 0                   |
| 91-100                       | 0                   |
| <i>Total</i>                 | 19                  |

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### ***Q7: Do you work?***

In Table 7, all of those who contributed to the research reported that they worked either part-time or full-time with ninety percent (n=18) working full-time. Ten percent (n=2) of the participants reported that they worked part-time.

| Table 7                 |                     |
|-------------------------|---------------------|
| <i>Q7: Do you work?</i> |                     |
| <u>Answer</u>           | <u>Participants</u> |
| Full-time               | 18                  |
| Part-time               | 2                   |
| No work                 | 0                   |
| Work from home          | 0                   |
| <i>Total</i>            | 20                  |

### ***Q8: What is your annual income?***

In Table 8, of the participants, fifty percent (n=9) were within the \$80,001-120,000 range and no one had an annual income of more than \$200,001. The suburban area of White Plains, New York, where the commercial gym is located, has a “median household income of \$87,550” (Data USA). Seventy-eight percent (n=14) of participants are above the median income in White Plains, New York.

| Table 8                                |                     |
|--|---------------------|
| <i>Q8: What is your annual income?</i> |                     |
| <u>Number of Dollars</u>               | <u>Participants</u> |
| 0-40,000                               | 0                   |
| 40,001-80,000                          | 4                   |
| 80,001-120,000                         | 9                   |
| 120,001-160,000                        | 4                   |
| 160,001-200,000                        | 1                   |
| 200,001-240,000                        | 0                   |
| 240,001+                               | 0                   |
| <i>Total</i>                           | 18                  |

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### **Q4: How much does the media or the “thin ideal” influence women’s bodies?**

According to researchers “Ford and Beach,” in the East and the West “it was a human universal that heavier women are viewed as the most attractive” (Heine, 2012, p. 467). However, currently in the West, “if you were to look at the covers of women’s magazines in the West today you likely would conclude that the kind of female body viewed as attractive is remarkably thin. If you opened those magazines and read some of the articles you would find a great deal of attention placed on losing weight, new diets, exercise regimes, and the occasional story about the high prevalence of eating disorders” (Heine, 2012, p. 467). Women who have high body image satisfaction are less likely to be negatively influenced by the media because of positive body image and high self-esteem. Women who have high body image dissatisfaction are more likely to be negatively influenced by the media because of poor body image and low self-esteem.

### **Q9: Do you worry about how others perceive your body?**

### **Q10: Has the media ever negatively influenced how you feel about yourself?**

According to Tables 9 and 10, the media negatively influences women’s feelings about themselves twenty-five percent of the time.

Seventy percent (n=14), over two-thirds of the participants, did not worry about how others perceived their bodies. Thirty percent (n=6) of those who took part reported worrying about how others perceived their bodies.

| Table 9  |                     |
|--|---------------------|
| <i>Q9: Do you worry about how others perceive your body?</i> |                     |
| <u>Answer</u>  | <u>Participants</u> |
| Yes  | 6                   |
| No   | 14                  |
| <i>Total</i>   | 20                  |

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Only twenty-five percent (n=5) of contributors claim that the media negatively influenced how one feels about oneself. Seventy-five percent (n=15) of those who participated claimed that the media did not negatively influence how one felt about oneself.

| Table 10  |                     |
|---|---------------------|
| <i>Q10: Has the media ever negatively influenced how you feel about yourself?</i> |                     |
| <u>Answer</u>   | <u>Participants</u> |
| Yes   | 5                   |
| No  | 15                  |
| <i>Total</i>  | 20                  |

***Q11: Have you ever felt pressure to fulfill the “thin ideal” or media-related emphasis of a thin and slim body with a small waist and almost no body fat?***

From my observations, twenty percent (n=4) reported that they felt pressure to fulfill the “thin ideal” or the media-related emphasis of a thin and slim body with a small waist and almost no body fat. In Table 11, it is evident that eighty percent, the majority of those who participated (n=16), reported that they were not impacted by the “thin ideal.”

| Table 11   |                     |
|--|---------------------|
| <i>Q11: Have you ever felt pressure to fulfill the “thin ideal” or media-related emphasis of a thin and slim body with a small waist and almost no body fat?</i> |                     |
| <u>Answer</u>  | <u>Participants</u> |
| Yes  | 4                   |
| No   | 16                  |
| <i>Total</i>   | 20                  |

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### ***Q12: Has your body image changed as you have gotten older?***

Out of all those who participated, eighty-five percent (n=17) say that their body image has changed as they have aged. Very few women (n=3) claimed that their body image changed as time has elapsed.

| Table 12  |                     |
|---|---------------------|
| <i>Q12: Has your body image changed as you have gotten older?</i> |                     |
| <u>Answer</u>   | <u>Participants</u> |
| Yes   | 17                  |
| No  | 3                   |
| <i>Total</i>  | 20                  |

### ***Q13: Do you think your perception and attitude of body image affects your health?***

Half of those who participated (n=10) reported that their perception and attitude of body image affected their health. Similarly, the remaining half (n=10) of those who participated claimed that their perception and attitude of body image did not impact their health.

| Table 13   |                     |
|--|---------------------|
| <i>Q13: Do you think your perception and attitude of body image affects your health?</i> |                     |
| <u>Answer</u>  | <u>Participants</u> |
| Yes  | 10                  |
| No   | 10                  |
| <i>Total</i>   | 20                  |

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### **Limitations**

In terms of limitations, my ethnographic study was limited in terms of population and I was only able to collect my sample at one gym. This limits the generalizability of my results. Another limitation was time limitation. I was only able to observe people for one hour but would have liked to follow up with the participants by conducting a longitudinal study and see how their body image satisfaction may have changed over a longer period of time. My conversations with my peers also had limitations because I was only able to speak with participants who were mostly ages thirty and above and this research did not include young adults. According to Ruopeng et al. (2017), young adults may be more likely to be influenced by the media and the pressures of maintaining the “thin ideal.” In terms of future studies, I would have conversations with young adults as well as middle-aged and elderly because the participants who engaged in social media regularly were “mostly young and middle-aged adults, whereas older adults that have the lowest social media adoption rate were not assessed” (Ruopeng et al., 2017, p. 678). Because of generational differences, this could mean that social media interventions may not be adaptable to older populations. Additionally, I would observe people in more than one gym and in areas that are very diverse. I would include larger groups and compare their results in order to find out who experiences body image satisfaction the most.

### **Chapter 5: Discussion**

The purpose of this study was to understand how body image satisfaction among females impacted their well-being and how increasing body image satisfaction can prevent diseases and disorders. The key research problem was that women's body image satisfaction was not represented in media and research in the past and there needed to be more research on body image and satisfaction among females. The main research question that was explored was: How do females show body image satisfaction or dissatisfaction in their body image? In addition to this, other research questions that were explored were: Is there a relationship between body image satisfaction and physical activity? Is there a certain demographic of women experiencing body image satisfaction? How much does the media or the "thin ideal" influence women's bodies? The following are my conclusions after investigating these research questions:

After reviewing the results of the study, it was evident that the higher the body image satisfaction, the higher the physical activity levels and the lower the body mass index. The most important findings from my research showed that by intervening early in development, especially during early childhood, obesity, diabetes, and eating disorders can be prevented.

After looking at body image satisfaction across cultures, it was apparent that Hispanic women reported the highest body image dissatisfaction and African American women reported the highest body image satisfaction followed by Caucasian women and Asian women. These women were middle-aged ranging from ages forty to sixty years old. According to Heine (2012), today in the West, the ideal female body encourages the "thin ideal" that is viewed as attractive and extremely thin. Perhaps Hispanic women had the highest dissatisfaction because of the impact of Western culture on Hispanic cultural beliefs about the female body. Although both Hispanic and African American women were exposed to negative images of the thin ideal,

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perhaps African American women were affected less due to strong cultural beliefs. In Africa, being called 'fat' is considered a compliment and there is less social pressure towards fulfilling the "thin ideal."

Through my conversations with peers, I found that twenty-five percent of the females claimed that the media had negatively influenced their body image as well as how the participants felt about themselves and twenty percent of the participants reported that they felt pressure to fulfill the "thin ideal" or media-related emphasis of a thin and slim body with a small waist and almost no body fat. By looking at participant B and participant D, it is evident that being exposed to the negative aspects of the media like the promotion of the "thin ideal" may lead to higher levels of body image dissatisfaction. Researchers Boyatzis, Kline, and Backof (2007) found that females who were exposed to advertisements of thin ideal images were associated with a decrease in body image satisfaction and an increase in disordered eating. Research by Boyatzis et al. (2007) show that women like participant B may experience low levels of body image satisfaction because of exposure to the media's message promoting an unrealistic "thin ideal."

My research is impactful because it addresses the issue of body image satisfaction of females which was neither studied nor addressed in the past and many people did not feel as though women's bodies were important until recently. Although women's bodies are now shown in advertisements and in the media, the majority of these images are perpetuating a "thin ideal" which is not how the average women's body looks. Due to this, females, especially adolescents, are now controlling their weight in an unhealthy manner in order to reach their goal of attaining the "thin ideal." Additionally, young girls are developing eating disorders both in the East and in the West. The problem has become so widespread that interventions have been created in order



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to combat these eating disorders. Surprisingly, elderly women as well as young adolescent girls are experiencing body image dissatisfaction. More elderly women are reporting symptoms of “body image dissatisfaction which is leading to an increase in eating disorders” (Mangweth-Matzek, Rupp, Hausmann, 2006, p. 586).

Early intervention may help to improve body image satisfaction and some effective interventions include parents as role models for children, mindfulness-based cognitive therapy, social media, yoga, and religion. Parents can serve as role models for their children by having healthy eating patterns and by expressing confidence in their own body image.

Additionally, mindfulness-based cognitive therapy is also an effective intervention method. Mindfulness “reduced depression, anxiety, and stress” as well as “increased the body image scores” in women with the eating disorder bulimia nervosa (Moradi & Samari, 2017, p. 394). Women who were exposed to social media that promoted a healthy body experienced a “reduction of body weight, body mass index, and waist circumference” (Ruopeng et al., 2017, p. 670). In addition to social media, by participating in yoga classes that highlight the “mind aspects of yoga (e.g. meditation and breathing),” one can increase body image satisfaction (Delaney & Anthis, 2010, p. 62). Religion is linked to mental well-being and young, college-aged women can gain better body awareness and satisfaction by incorporating Christian-based affirmations that “emphasize God’s love and acceptance of their bodies” (Boyatzis et al., 2007, p. 553). By intervening early, one can prevent the negative impact of body image dissatisfaction such as obesity and eating disorders that could potentially lead to death.

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Appendix

Table 5

*Q5: What is your ethnicity and satisfaction level?*

| <u>Ethnicity</u>                          | <u>Satisfaction Level</u> | <u>Participants</u> |
|---|---------------------------|---------------------|
| Asian                                     | Dissatisfied              | 0                   |
|   | Satisfied                 | 2                   |
| Black/African-American                    | Dissatisfied              | 2                   |
|   | Satisfied                 | 3                   |
|   | Very Satisfied            | 1                   |
| Caucasian                                 | Dissatisfied              | 1                   |
|   | Satisfied                 | 3                   |
| Hispanic/Latino                           | Dissatisfied              | 4                   |
|   | Satisfied                 | 2                   |
| American-Indian/Alaska<br>Native          | Dissatisfied              | 0                   |
|   | Satisfied                 | 0                   |
| Native Hawaiian/Other<br>Pacific Islander | Dissatisfied              | 0                   |
|   | Satisfied                 | 0                   |
| Mixed                                     | Dissatisfied              | 1                   |
|   | Satisfied                 | 1                   |
| <i>Total</i>                              |                           | 20                  |