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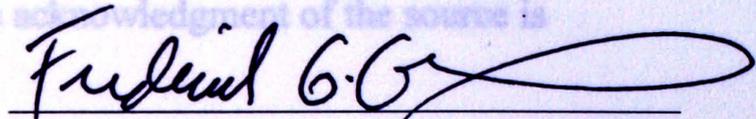
ETHNIC DIFFERENCES IN BODY IMAGE SELF-CONSCIOUSNESS  
DURING PHYSICAL INTIMACY

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TENILLE ELIZABETH DAVIS

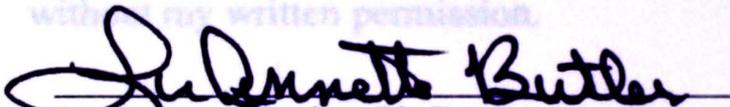
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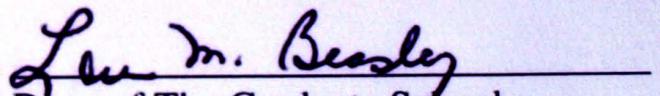


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ETHNIC DIFFERENCES IN BODY IMAGE SELF-CONSCIOUSNESS  
DURING PHYSICAL INTIMACY

A Thesis Defense  
Presented for the Master of Arts  
Degree  
Austin Peay State University

Tenille Elizabeth Davis

July, 2002

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## DEDICATION

This thesis is dedicated to my loving and supportive parents

Bernard and Laretta Davis

to my sisters and brother

Mildred Ann, Tommie, Denai, Bernadette, and Laurie,

and to all of my nieces and nephews.

Your love has always been my strength.

## ACKNOWLEDGMENTS

I would like to thank God from whom all blessings flow; without You, I am nothing. I would like to thank my major professor, Dr. “Rick” Grieve, for his patience, support, guidance on this and other projects throughout my education experience at APSU. I would also like to thank the other committee members, Dr. Lu Annette Butler and Dr. Rhonda Miles-Bryant, for their comments and assistance.

A special thanks to several people who have supported and encouraged me throughout my educational career: Marcus Thomas and Bernice Johnson, for your love and support, Nova Walker-Carter, for your editing expertise, and Caren Ellison, for just being there.

## ABSTRACT

This study examined ethnic differences in body image self-consciousness during physical intimacy. The study consisted of 80 participants, 44 Caucasian females and 36 African-American females. The hypotheses suggested that African Americans will exhibit a lower degree of physique anxiety, and thus will be less self-conscious during physical intimacy in comparison to their Caucasian counterparts. Two questionnaires, the Body Image Self Consciousness Scale (BISC) and Social Physique Anxiety Scale (SPAS), assessed participants' levels of social physique anxiety and self-consciousness during physical intimacy. Participants' responses were analyzed based on the total score obtained on the BISC and SPAS. Results indicated no significant ethnic differences on the SPAS and the BISC. Results also indicated that the two groups did not differ significantly when assessing their BMI's. Implications to previous studies were discussed.

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## CHAPTER I

### INTRODUCTION

Research studies have concluded that women's bodies are examined and sexualized more frequently than men's bodies (Fredrickson & Roberts, 1997; Wolf, 1991). One author suggests that women have become socialized to make "objects" or spectacles of themselves. Therefore, they have become adept to presenting their bodies to others, particularly males, for evaluation (Spitzack, 1990). Consequently, women have resorted to dieting practices and behaviors that usually result in unrealistic goals, unhealthy lifestyles, and distorted body images. Researchers have noted that some women diet to increase their self-confidence, establish affiliation with a group, or acquire self control over their lives. Caucasian adolescent girls, in particular, engage in "fat talk," which is dialogue about body dissatisfaction and the need to lose weight, as a means of establishing group affiliation (Parker et al., 1995). The pervasiveness of these rituals and beliefs have prompted query concerning the influences of distorted perceptions of body images. Although society judges people by their physical appearance, researchers have noted that there are some gender and ethnic differences that influence body image self-consciousness (Fallon & Rozin, 1985; Molloy & Herzberger, 1998).

#### Gender Differences in the Perception of Body Image and Related Factors

Gender differences in body image self-consciousness can be attributed to societal standards and norms. These norms can be better understood by factors that contribute to the ideal male and female body images portrayed as the preferred size within their

culture. For example, Wiseman, Gray, Moismann, and Ahrens (1992) noted that the body sizes of women in Playboy magazines and Miss America pageants steadily decreased from 1978 to 1988. Similarly, Pope, Olivardia, Gruber, and Borowiecki (1999) noted parallel trends between the increasing muscular physiques of male action toys and male models in the media. Abell and Richards (1996) conducted an investigation of gender and class differences in body shape satisfaction and self-esteem. The study consisted of 41 male and 43 female participants. The results indicated that males desired to weigh more than their actual size,  $F(1, 83) = 24.71, p < .001$ . The males also desired to have larger figures than their actual size,  $F(1, 83) = 17.66, p < .001$ . These depictions of idealized body images have subsequently provoked males to desire heavy, muscular physiques, and females to prefer thinner physiques (Franzoi & Shields, 1984).

Although both males and females express some dissatisfaction concerning their body images, the extent to which the dissatisfaction affects each gender differs. In Abell and Richards' (1996) study, high self-esteem scores correlated with figure satisfaction for females, but not for males. McKinley (1998) further explains that the objectified body consciousness has greater consequences for females than males in terms of their body esteem. In this study consisting of 164 females and 163 males, the women had higher levels of surveillance, body shame, actual/ideal weight discrepancy, and lower levels of body esteem,  $F(1, 297) = 21.03, p < .001$ , in comparison to the men in the study. These results can be attributed to the cultural standards for women to watch their bodies as objects (McKinley, 1998). Thus, females engage in pathological eating habits in order to

meet the criteria for what is portrayed as attractive (Wiseman et al., 1992). The ideal body size portrayed by models in the media represents the thinnest 5% of women, which indicates that “a statistical deviation has been normalized” so that 95% of women constantly feel inferior (Seid, 1989, pgs. 257-278).

These unattainable expectations have caused some negative consequences for women relative to their body image. In comparison to their male counterparts, women generally display higher levels of dissatisfaction with their body shape, hold pathogenic values relative to dieting, are more disturbed about becoming overweight (Akande, 1993; Klesges, 1983), and have more negative perceptions of their body image (Demarest & Langer, 1996).

Fallon and Rozin (1985) conducted a study examining perceptions men and women have of their body image. The study consisted of 227 female and 248 male students, who rated their current figures, their ideal figures, and the figures they believed were most attractive to the opposite sex by choosing one of the nine figurative drawings that best depicted their perceptions in each category. The participants were presented male and female silhouettes ranging in sizes from very thin to very heavy (1 = thinnest). The women in the study rated their current figures as heavier than both their ideal figure and the figure they believed was most attractive to the opposite sex (Fallon & Rozin, 1985). On the other hand, the men’s ratings indicated less of a discrepancy between their actual and ideal sizes, which indicated that they are more satisfied with their body figures. However, both the men and the women demonstrated a distorted view of what they believed the opposite sex preferred (Fallon & Rozin, 1985). The female figure that

the women in the study perceived to be most attractive to men was thinner than the figure preferred by men. In contrast, the male figure that the men in the study perceived to be the most attractive to women was heavier than the women's ratings (Fallon & Rozin, 1985).

### Ethnic Differences in the Perception of Body Image and Related Factors

Researchers suggest that the image perceived as the "ideal figure" has decreased in size over the years and the standards of beauty have become more restrictive, many women have developed distorted body images and have become frustrated with their inability to achieve that body size (Molloy & Herzberger, 1998). This becomes problematic for women because of potential internalization of negative assessments of themselves and assessments of others (Fredrickson & Roberts, 1997; McKinley & Hyde, 1996). Women generally report more negative perceptions concerning their body image than men (Akande, 1993; Klesges, 1983) and display similar reactions of pleasure and displeasure to comments concerning their body image (Henriques & Calhoun, 1999). However, research indicates that ethnic differences are a contributing factor in the extent to which body esteem is influenced.

In comparison to Caucasian females, African American females have a more positive perception of their body image (Cash & Henry, 1995). Researchers have noted that this can be attributed to African Americans' broad definition of beauty. African Americans implement more fluid and flexible definitions of beauty, which consider the naturally full body of a woman (Nielsen, 2000) and personality traits (Parker et al., 1995), as opposed to their Caucasian counterparts, whose definitions tend to be more

rigid and fixed (Allan, Mayo, & Michel, 1993; Kumanyika, Wilson, & Guilford-Davenport, 1993; Parker et al., 1995). Parker et al. (1995) conducted a longitudinal study and analyzed data drawn from focus groups, individual interviews, and surveys. The results indicated that the African American adolescents' perception of an "ideal" girl was described in terms of personality traits, such as smart, friendly, not conceited, easy to talk to, fun to be with, and possessing a good sense of humor. Among these adolescents, beauty was summed-up by the term "looking good," which was determined by public image and overall attractiveness rather than weight.

The respondents also indicated that dietary practices were not as significant as was noted among the Caucasian adolescents. The majority (64%) of the African American adolescents reported that they preferred to be "a little overweight" rather than "a little underweight" (Parker et al., 1995). As a result, African American females tend to be less obsessed and concerned about dietary practices and behaviors, more satisfied and more self-confident about their weight (Abrams, Allen, & Gray, 1993; Akan & Grilo, 1995; Nielsen, 2000; Rucker & Cash, 1992). These findings are significant because the average African American female tends to weigh more (about 20 pounds) than her Caucasian counterpart (Henriques, Calhoun, & Cann, 1996).

Since African American females tend to be more satisfied and display more self-confidence concerning their weight (Nielsen, 2000), they are less at risk of developing eating disorders than Caucasian females (Gray, Ford, & Kelly, 1987; Hsu, 1987; Streigle-Moore, Silberstein, & Rodin, 1986). Analysis of interviews and survey data from the Teen Lifestyle Project (Parker et al., 1995) contended that Caucasian adolescents viewed

dieting as a means of gaining control of their lives by becoming popular, being successful, and having romantic relationships. In other words, researchers have argued that Caucasian females' self concept is evaluated and determined by their perceived appearance, shape, and weight (Streigle-Moore et al., 1986). Thus, they tend to engage in more restrictive dieting behaviors (Harris, 1994), as opposed to their African American counterparts whose dieting practices tend to be more realistic and less extreme (Molloy & Herzberger, 1998).

Henriques et al. (1996) examined possible ethnic differences in body satisfaction. Post hoc analyses indicated that the body satisfaction of the Caucasian women was affected by the type of feedback they received about their bodies. Positive and negative feedback positively correlated with scores on the Body Esteem Scale (BES). On the other hand, the African American women in the study were not significantly affected by positive or negative feedback (Henriques et al., 1996). Implications of these findings are relevant to understanding the pathology of bulimia nervosa, because women diagnosed with this disorder tend to be self-conscious about how others perceive them (Streigle-Moore et al., 1993).

Perceptual differences in body image and body esteem can be attributed to models with which each ethnic group identifies. As mentioned, the media plays a central role in relaying messages about "ideal images" and subsequent results associated with achieving that image, by displaying ultra-thin models and the multimillion dollar diet industry that is advertised frequently in magazines and on television (Myers & Biocca, 1992). Content analysis of popular magazines revealed that articles concerning body weight were ten

times more likely to appear in magazines geared toward female readers than in magazines geared toward male readers (Andersen & DiDomenico, 1992). Myers and Biocca (1992) suggest that these messages that promote thinness are internalized, and propel women to strive to become slender. For example, Fouts and Burggraf (1999) conducted a study examining female body images and verbal reinforcements from television situational comedies. The study consisted of 28 prime-time television situation comedies, which were examined for content analysis of the body weights of central female characters, verbal comments they received from other characters relating to body weight, and self-comments concerning their body weight and dieting behaviors. Results indicated that the central female characters tended to be below average weight, and above average weight characters were underrepresented on the situation comedies examined. Of those central characters, it was noted that the thinner the female the more positive comments she received from males. Results also indicated that in comparison to other female characters, the central female characters received more positive comments from male characters on the show. These results reiterate and support the notion that men perceive the female body as an object of admiration, and the male is expected to make comments concerning the female physique. Therefore, according to the study, the most effective means of receiving attention and being considered attractive is for the female to remain slim (Fouts & Burggraf, 1999).

### Factors that Contribute to Ethnic Differences in Perception of Attractiveness

The physical standard of beauty within the American culture has traditionally been modeled in the media, displaying ultra-thin body sizes that are genetically and

biologically characteristic of Euro-Americans (Harris, 1994). Media messages are ultimately unavoidable, yet there are some ethnic differences between African American and Caucasian females concerning perceptions of body images. The literature addresses protective factors that mitigate distorted body images of African American females. These include their models by which the “ideal” body size is determined (Molloy & Herzberger, 1998), perception of what men of their culture desire (Parker et al., 1995), and masculine or androgynous personality traits (Harris, 1994).

The first factor is particularly relevant to understanding why media messages do not affect the perceptions of African American females extensively as they do for their Caucasian counterparts. Parnell and colleagues (1996) examined ideal body size beliefs of 89 African American and 255 Caucasian adolescents. The participants were asked to identify factors that influenced their responses to four different body size perception and/or preference questions. The four questions included personal preference regarding appearance of certain body parts, comparison of certain body areas to a model silhouette, choosing the “about right” female body size from the nine silhouettes, and choosing the “about right” male body size from the nine silhouettes. In comparison to the African-American participants, the Caucasian participants reported that they were more influenced by magazines, best female friend, and other close friends in deciding ideal body size. In comparison to their Caucasian counterparts, the African American adolescents reported that they were more influenced by mother/grandmother, siblings, and teachers/administrators in deciding ideal body size (Parnell et al., 1996). These results suggest that the African-American adolescent females’ perception of “ideal” body

size and preference are more influenced by adult role models than are Caucasian adolescent females' perceptions. Caucasian adolescent females' body size perceptions and preferences are more influenced by peer group and the media than are African American females' perceptions (Parnell et al., 1996).

On the other hand, African-American females who identify more with the dominant culture are more at risk for developing body image distortions and eating disorders (Bowen, Tomoyasu, & Cauce, 1991). The extent to which they interact and identify with the African American culture can predict self-esteem, well-being, and depression (Pyant & Yanico, 1991). Kumanyika et al. (1993) conducted a study to determine current attitudes of African American females concerning weight loss and obesity. Participants were considered to be normal weight if their body mass index (BMI) was less than 27.3. Participants whose BMI's were equal to or lower than 17.5 were considered low weight. The moderate to overweight categories ranged from BMI's of 27.3 to 32.2. Participants whose BMI's were greater than or equal to 32.3 were considered severely overweight. Of the 500 African American females in the study, 427 indicated that they were not satisfied with their weight. The difference between their current size and their desired size was +4.0 lbs. for the low-weight women and -13, -29, and -62 lbs., respectively, for women in the normal, overweight, and severely overweight categories (Kumanyika et al., 1993). However, 40% of the women in the overweight category reported that they consider their figures to be attractive or very attractive. This result suggests that African American women are more tolerant of being overweight, and

their social environment is less negative about obesity. In the African American culture, overweight was noted as not necessarily synonymous with being unattractive.

The implications of these findings are consistent with the results of Allen's (1989) study, which examined weight management activities among African American women. The results of that study contend that although most of the participants in the study had been overweight for an extended amount of time by biomedical standards, they did not perceive themselves as overweight individuals. These distorted body images can be attributed to the models that the women of this culture tend to evaluate and use for comparison. Allen (1989) argued that awareness of being overweight usually came from social or health encounters, in which African American women compared their body image with other African American women. As previously noted, African American women on average weigh more than Caucasian women. Bowen, Tomoyasu, and Cauce (1991) further explained that heavy women who interact with other heavy women tend not to attack their own weight as often as those who interact with thinner women.

The second protective factor addresses African American females' perceived desires of men of their culture. Generally, females' judgment of beauty is partially based upon the perception of what men of their culture desire (Molloy & Herzberger, 1998; Nielsen, 2000; Parker et al., 1995). Women from both African American and Caucasian cultures hold distorted views of what men in their culture actually prefer, by assessing that men desire shapes that are smaller than the ones the men actually prefer (Demarest & Allen, 2000; Fallon & Rozin, 1985). Although both cultures reported some distorted views of what men of their cultures desired, Caucasian females had higher levels of

distortion as opposed to their African American counterparts who reported more accurate ideas of what men found most attractive (Demarest & Allen, 2000). Molloy and Herzberger's assessment of women's perception of themselves and their bodies found that African American women were less likely than Caucasian women to select thin, toned women's images to illustrate what men find attractive.

Previous studies conducted by Greenberg and LaPorte (1995) and Powell and Kahn (1995) confirm these perceptions. Greenberg and LaPorte conducted a study consisting of 63 African American men and 116 Caucasian men. The study asked the participants to rank in order of attractiveness, a series of silhouettes that ranged from 1 (thinnest) to 9 (heaviest). Results indicated that the Caucasian men chose significantly thinner figures as their first choice, than their African American counterparts. The Caucasian men also wished that their girlfriends were significantly thinner than their African American counterparts (Greenberg & LaPorte, 1995).

Similarly, Powell and Kahn conducted a study consisting of 38 African American women, 59 Caucasian women, 33 African American men, and 60 Caucasian men. The male participants were asked to choose one of the nine silhouettes they found most attractive. They were also asked to rate the silhouettes ranging from 1 (never) to 5 (definitely) on how likely they would ask that woman out and how likely they would be ridiculed by their friends if they dated a woman of that size. The results indicated that there was no significant difference in what each ethnic group found attractive. However, the African American men reported less of a desire to date thin women, than their Caucasian counterparts. Both groups expressed increasingly less desire to date, and

greater fear of ridicule as the silhouettes became larger than 5. However, there was a significant race effect, which indicated that African American men were more willing to date and felt that they would be less ridiculed if they dated women with a larger silhouette than the Caucasian men.

Based on these findings, it can be concluded that, in comparison to Caucasian males, African American males prefer larger women, and do not consider extremely skinny females attractive (Molloy & Herzberger, 1998; Nielsen, 2000; Parker et al., 1995). Although African American males and females do not idealize obesity, Harris, Walters, and Waschull (1991) found that African American men are more likely than Caucasian men to accept a date with an overweight female. To better understand the dynamics of these findings, Kumanyika et al. (1993) found that 54% and 49% of moderately and severely overweight (respectively) women in their study reported that their husband or boyfriend liked the idea of them trying to lose weight. Of the women who were severely overweight, only 36% reported that their husband thought they were very overweight. The researchers also found that the majority of the women did not believe that their weight caused difficulty in personal or family relationships or in getting a job.

Finally, African American women's gender roles serve as a protective factor. The sex-role socialization perspective of body attitudes suggests that androgynous and masculine women tend to feel more positive about their bodies than feminine and undifferentiated women (Spence & Helmreich, 1978). Research corroborates this perspective by revealing that masculine and androgynous individuals report higher levels

of self-esteem, have a more positive body image, and are more satisfied with their sexuality than those who are more feminine or undifferentiated (Kimlicka, Cross, & Tarnai, 1983). African American females were more likely to describe themselves with masculine traits than their Caucasian counterparts (Molloy & Herzberger, 1998). The gender schema theory states that gender-typed (masculine males and feminine females) individuals are more likely than non-gender-typed individuals to be affected by appearance and stereotypical appearances (Bem, 1981).

The social environment, perception of the female body image most desirable to men of their culture, and masculine traits protect African American females from assimilating into the dominant culture's ideologies of body images. However, these protective factors are superseded when attitudes and values of the dominant culture are adopted. Assimilation into the beliefs of the dominant culture places African American females at risk of adopting the unhealthy attitudes about weight, becoming more dissatisfied with their bodies, and having a higher rate of eating disorders (Nielsen, 2000). Nielsen has noted that an increasing number of African Americans are interacting and identifying more with the upper class culture, resulting in dissatisfied perceptions of their bodies. In support of this notion, Allan et al. (1993) found that African American females of lower socioeconomic status were heavier and perceived heavier body images as more attractive than African American females of higher status and Caucasian females of all socioeconomic status.

## The Present Study and Hypothesis

Previous research has identified and reported implications concerning the influences of factors on a female's perception of body-image. However, little is known about whether a female's distorted perceptions of body images foster body image self-consciousness, which is a heightened awareness or concern of bodily appearance. Even less is known about how her self-consciousness is related to sexual experience, a period during which the body is completely exposed. Dove and Wiederman (2000) noted that internalized objectification can potentially cause sexual dysfunctions if the individual is preoccupied with thoughts concerning the appearance of the body to the extent that the individual becomes mentally disconnected from the sexual interaction.

Wiederman (2000) examined these notions to provide empirical evidence that provides understanding about the extent to which body image self-consciousness during intimacy effects a female's sexual experience. He hypothesized that a higher degree of self-consciousness would result in fewer heterosexual experiences for women and more problematic experiences during sexual interaction with their partners. The study consisted of 209 college females who completed a questionnaire that correlated body weight with degree of self-consciousness during physical intimacy. According to Wiederman, approximately 35% of those females experienced body image self-consciousness during physical intimacy with a male partner. Wiederman's research also concluded that women with higher degrees of body image self-consciousness during physical intimacy tended to have fewer heterosexual experiences, were less sexually assertive with partners, and avoided sexual activities with a partner more frequently than

those with lower degrees of body image self-consciousness. Results from this study also indicated that although some women were not overweight according to BMI, they expressed concern about their bodily appearance during physical intimacy. The data from this research was unable to explain this finding. However, it is suggested that the internalization of a distorted perception of an “ideal” body image played a central role in their self-consciousness during physical intimacy with a heterosexual partner.

Based on the results and findings of previous studies, this study examined whether ethnic differences of females influenced body image self-consciousness during physical intimacy with a partner. Furthermore, this study examined how differences in degrees of body image self-consciousness related to each group’s sexual experience. In consideration of the factors (social environment, perception of the female body image desired by men of their culture, and exhibition of androgynous traits) protecting African-American women from internalizing distorted body images, the present study hypothesized that they will exhibit a lower degree of body image self-consciousness than Caucasian women during physical intimacy. The second hypothesis under study suggested that African-American women will report lower levels of social physique anxiety than Caucasian women. The third hypothesis suggested that the average weight of African-American women will be more than Caucasian women’s average weight.

## CHAPTER II

## METHODS

*Participants*

Research participants were initially 84 females recruited from a small mid-south university (annual enrollment about 7,000). Four women who identified with an ethnicity other than the two groups examined in this study were excluded from further analysis. The final sample consisted of 80 females, 44 Caucasians and 36 African Americans. The average participant was 22.19 years old ( $SD = 5.14$ ), ranging in age from 17 to 40 years. The average height of the participants was 64.85 inches ( $SD = 2.82$ ), and the average weight was 153.33 pounds ( $SD = 40.19$ ). All participants were volunteers and were offered research credit toward a class grade.

*Design*

The design for the present study was a between group quasi-experimental design. There were two dependent variables, the levels of social physique anxiety and self-consciousness during physical intimacy. The independent variable was the ethnicity of the participant (African-American vs. Caucasian).

*Measures*

*Demographics.* Participants were asked their age and race. They were also asked to indicate their current relationship status by indicating one of the six categories that applied to them: not dating anyone currently, casually dating one or more people, dating one person exclusively, living with a romantic partner, engaged or planning to marry, and married. The participants were asked to indicate whether they were currently sexually

active with a partner by answering “yes” or “no” to the question (see Appendix A).

*Body size.* Participants were asked to report current height and weight (see Appendix A). Height and weight were converted into a Body Mass Index (BMI) according to Quetelet’s index ( $\text{kg}/\text{m}^2$ ; Garrow & Webster, 1985). Research indicates that BMI is an accurate and convenient measure of overall adiposity because it accounts for an individual’s height and weight (Brodie & Slade, 1988; Hanna, Wrate, Cowen, & Freeman, 1995).

*Body-image self-consciousness.* The Body Image Self Consciousness Scale (BISC; Wiederman, 2000) is a 15-item questionnaire (see Appendix B) which requires the participant to describe her self-consciousness and concern about how an intimate partner perceives her bodily appearance. The questionnaire specifically measures self-consciousness during intimacy with a partner. This was done by using a Likert scale where 0 = *never*, 1 = *rarely*, 2 = *sometimes*, 3 = *often*, 4 = *usually*, and 5 = *always*. Based on this scale, scores could range from 0 to 75. Higher scores indicate greater body image self-consciousness. The BISC has been found to have good construct validity, test-retest reliability, and incremental validity (Wiederman, 2000). The 21-day test-retest reliability was examined using undergraduate females. The scores indicated that the internal consistency coefficients (alphas) were strong for both administrations;  $\alpha = .96$  ( $N = 32$ ) at the first administration and  $\alpha = .97$  ( $N = 25$ ) for the second administration. The test-retest correlation was  $r = .92$  (Wiederman, 2000). Compared to other related scales, the BISC correlated well, with  $r$ ’s ranging from .75 to .92 (Wiederman, 2000).

*Social physique anxiety.* The Social Physique Anxiety Scale (SPAS; Hart, Leary, & Rejeski, 1989) is a 12-item self-report which measures social physique anxiety (see

Appendix C). This is done by using a 5-point scale: 1 = *not at all*, 2 = *a little*, 3 = *moderately*, 4 = *quite a bit*, and 5 = *extremely*. The responses indicated the participants' agreement with how much the statement is a characteristic of them. Based on this scale, scores could range from 0 to 60. Higher scores indicate greater social physique anxiety. When compared to other related scales, the SPAS correlated well with *r*'s at a midpoint of .54 (McAuley & Burman, 1993). The internal consistency coefficient (alpha) was .90 (Hart et al., 1989).

**Procedure**

Each participant was given an Informed Consent Document (see Appendix D), which explained the study and indicated that all answers were confidential and participation would be anonymous. Consenting participants then completed the Demographic form, the BISC, and the SPAS. After completing the forms, the participants were given vouchers for research credit and debriefed (see Appendix E).

*Analysis by age.* To determine if there were statistically significant differences between the BISC and SPAS, a Pearson correlation analysis was performed. The results indicated that age and the total scores on the BISC significantly correlated with each other,  $r = .307, p = .004$ . The analysis also indicated that age and the total scores on the SPAS significantly correlated with each other,  $r = .316, p = .004$ .

*Analysis of Relationship Status.* To examine the effect of relationship status, the one-way Analyses of Variance (ANOVAs) with relationship status were performed on the total scores of the BISC and SPAS, as well as BSAI scores. The results indicated that there was no significant difference among participants in the six types of

## CHAPTER III

## RESULTS

*Racial Analysis.* A two-sample  $t$ -test was performed on the total score of the BISC grouped by ethnicity. Results indicated no significant differences between the two groups,  $t(1, 78) = 1.59, p = .12$ . The mean scores for each group are presented in Table 1.

A second two-sample  $t$ -test was performed on the total score of the SPAS grouped by ethnicity. Results indicated no significant difference between the two groups,  $t(1, 74) = 0.58, p = .56$ . The mean scores for each group are presented in Table 1.

The third two-sample  $t$ -test was performed on BMI scores grouped by ethnicity. The analysis indicated that the African American women's average BMI ( $M = 27.35, SD = 5.96$ ) was greater than the average BMI of the Caucasian women ( $M = 25.22, SD = 5.72$ ) (see Table 1). However, this difference was not statistically significant,  $t(1, 76) = 1.60, p = .11$ .

*Analysis by age.* To determine if there is a relationship between the total scores on the BISC and SPAS, a Pearson correlation analysis was performed. The results indicated that age and the total scores on the BISC negatively correlated with each other,  $r = -.307, p = .004$ . The analysis also indicated that age and the total scores on the SPAS negatively correlated with each other,  $r = -.316, p = .004$ .

*Analysis of Relationship Status.* To examine the effect of relationship status, two one-way Analyses of Variance (ANOVAs) with follow-up Scheffe tests were performed on the total scores of the BISC and SPAS, as well as BMI scores. The results indicated that there was no significant difference among participants in the six types of

relationships on the total score of the BISC,  $F(5, 76) = 1.79, p = .12$  or the SPAS,  $F(5, 74) = 1.65, p = .16$ . The results also indicated that there was no significant difference among participants in the six types of relationships on BMI,  $F(5, 75) = .61, p = .69$ .

Table 1. Mean Total Scores on the BISC, SPAS, and BMI

	N	Mean	SD
BISC			
Caucasian	44	20.14	15.77
African American	36	15.06	11.99
SPAS			
Caucasian	42	33.81	5.92
African American	34	33.03	5.68
BMI			
Caucasian	44	25.22	5.72
African American	34	27.35	5.96

## CHAPTER IV

## DISCUSSION

The purpose of this study was to examine ethnic differences in the levels of social physique anxiety and body self-consciousness. The first hypothesis predicted that ethnic differences among females would be significantly related to body image self-consciousness during physical intimacy. The findings from the current study indicated that the Caucasian and African American females reported similar levels of body image self-consciousness. The average total response suggests that both groups frequently replied “never,” “rarely,” and “sometimes” to the questionnaire items. This is inconsistent with previous studies, which suggest Caucasians were at risk of distorted body image perceptions due to rigid and fixed definitions of beauty (Allan, Mayo, & Michel, 1993; Kumanyika, Wilson, & Guilford-Davenport, 1993; Parker et al., 1995), and the potential of internalizing negative assessment of themselves (Fredrickson & Roberts, 1997; McKinley & Hyde, 1996).

Wiederman (2000) has noted that when women view themselves as good sex partners, they are least concerned about their body image during physical intimacy. This finding suggests that women, in general, are more likely concerned with other factors, such as technique and pleasure, rather than appearance during physical intimacy. Consistently, Trapnell, Meston, and Gorzalka (1997) noted that body image nor sexual experience was related to self focus, preoccupation with one’s physical or behavioral appearance to others, and preoccupation with one’s thoughts and feelings in general. As previously noted, Caucasian and African American women base their judgment of beauty

on what men of their culture desires (Molly & Herzberger, 1998; Nielsen, 2000; Parker et al., 1995). However, little is known about the effects of sexual esteem on the overall body image perception, which may mitigate negative assessments of their body image, at least during the time of physical intimacy.

The second hypothesis predicted that African American females would exhibit a lower level of social physique anxiety than their Caucasian counterparts. The findings suggested that both groups reported similar levels of social physique anxiety. Both groups responded “sometimes” to the majority of the questions concerning social physique anxiety. This finding is inconsistent with previous studies that suggest African American females, when compared to Caucasian females, are more satisfied and display more self-confidence concerning their weight (Abrams, Allen, & Gray, 1993; Akan & Grilo, 1995; Nielsen, 2000; Rucker & Cash, 1992), and are more likely to describe beauty in terms of public image and overall attractiveness (Parker et al., 1995). In contrast, Henriques and Calhoun (1999) argue that, generally, women display similar reactions of pleasure and displeasure to comments concerning body image. They also suggest that ethnicity may be an influential factor that determines the extent that body esteem affects the female’s overall self-concept. This argument gives some validity to the insignificance in the level of social physique anxiety, in that the study was not designed to analyze contributing factors of social physique anxiety and self-esteem.

As expected, the African American females’ average weight was greater than the average weight of their Caucasian counterparts. According to the National Center for Health Statistics (1990), the African American females’ average BMI met the criteria

( $BMI \geq 27.3$ ) for obesity,  $M = 27.35$ ,  $SD = 5.96$ . However, several of the Caucasian female participants also met the criteria for obesity,  $M = 25.22$ ,  $SD = 5.72$ . This result is inconsistent with studies which suggest that the average weight of Caucasian females is significantly less than African American females (Henriques, Calhoun, & Cann, 1996).

One factor that may have contributed to this inconsistency is the overgeneralization of the results of previous studies. When studying distorted eating habits and body perceptions, most studies focus on anorexic and bulimic eating patterns. As previously mentioned, African American females are at a significantly lower risk of adopting these patterns. Thus, these behaviors are more often attributed to Caucasian females. Researchers argue that the results of such studies are overgeneralized, resulting in a misrepresentation of the magnitude of distorted eating behaviors and body perceptions of Caucasian females (Bond & Cash, 1992; Osvold & Sadowsky, 1993; Root, 1990). Harris (1994) suggests that, similar to Caucasians, African American females hold distorted body perceptions and practice distorted eating patterns, such as compulsive eating behavior, global body dissatisfaction, and body areas dissatisfaction.

It is not surprising that age negatively correlated with the BISC and SPAS. This finding suggests that the older the female is the more comfortable she is with her body image during physical intimacy. Current findings also suggest that the older the female is the lower the level of anxiety exhibited in social settings. Consistently, previous studies have noted that age positively correlated with sexual experience and body size (Andres, 1995; Wiederman, 2000).

The age of the participants may have been one factor that contributed to the insignificant difference among participants' in the six types of relationships on the total score of the BISC and SPAS. Wiederman (2000) suggests that BISC scores were significantly higher among women not currently involved in a committed relationship. Thus, age may be serving as an influential factor, decreasing the levels of self-consciousness and anxiety of the participants in committed and non-committed relationships.

Some limitations regarding these findings deserve discussion. First, it should be noted that the size of the sample is such that the results should be interpreted with caution. Secondly, the size also reduces the extent to which the results are generalizable and should only be attributed to individuals that fit the profile of the participants in this study. Finally, the BMI of the participants was subjectively reported and thus may be biased. As noted from previous studies (Betz, Mintz, & Speakmon, 1994), it is likely that most of the participants may have overestimated or underestimated the actual weight, which may have influenced the outcome of the study.

The current findings do not support results from previous studies, suggesting that Caucasian and African-American females should differ in their levels of body image self-consciousness and social anxiety. However, the results prompt certain questions concerning the current attitudes and body-image perceptions of Caucasian females. The results indicating minimal discrepancy between the BMI's of the two groups of female, and the low levels of body image self-consciousness and social anxiety are theoretically significant when analyzing previous findings in this particular area of study. Future

research may consider the possibility of a shift in body image perceptions and attitudes of Caucasian females that may be influenced by their association with African American females. Perhaps, the Caucasian females have also developed protective factors that have not yet been explored by researchers. In conclusion, further research in the area of body-image is needed in order to better understand and generalize current perceptions, attitudes, and behaviors of African American and Caucasian females. Such results would be significant in the process of understanding and eliminating distorted behaviors, distorted body perceptions, and other factors that place so many females at risk of eating disorders and health problems.

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## APPENDICES

## APPENDIX A

## Demographics &amp; Body Size

Please answer the following questions about yourself.

Age: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Ethnic Origin: \_\_\_\_\_ Caucasian  
\_\_\_\_\_ African American / Black  
\_\_\_\_\_ Other

**Current Relationship Status:**

\_\_\_\_\_ Not dating anyone  
\_\_\_\_\_ Casually dating one or more people  
\_\_\_\_\_ Dating one person exclusively  
\_\_\_\_\_ Living with romantic partner  
\_\_\_\_\_ Engaged or planning to marry  
\_\_\_\_\_ Married

**Are you currently sexually active with a male partner(s)?**

\_\_\_\_\_ Yes  
\_\_\_\_\_ No

## Body Image Self-Consciousness

Directions: For each of the following questions circle the number that indicates how often you agree with each statement.

The term partner refers to someone with whom you are sexually intimate.

1. I would feel very nervous if a partner were to explore my body before or after having sex.  

0	1	2	3	4	5
Never	Rarely	Sometimes	Often	Usually	Always
  
2. The idea of having sex without any covers over my body causes me anxiety.  

0	1	2	3	4	5
Never	Rarely	Sometimes	Often	Usually	Always
  
3. While having sex I am concerned that my hips and thighs would flatten out and appear larger than they actually are.  

0	1	2	3	4	5
Never	Rarely	Sometimes	Often	Usually	Always
  
4. During sexual activity, I am concerned about how my body looks to my partner.  

0	1	2	3	4	5
Never	Rarely	Sometimes	Often	Usually	Always
  
5. The worst part of having sex is being nude in front of another person.  

0	1	2	3	4	5
Never	Rarely	Sometimes	Often	Usually	Always
  
6. If a partner were to put a hand on my buttocks I would think, "My partner can feel my fat."  

0	1	2	3	4	5
Never	Rarely	Sometimes	Often	Usually	Always
  
7. During sexual activity it is difficult not to think about how unattractive my body is.  

0	1	2	3	4	5
Never	Rarely	Sometimes	Often	Usually	Always
  
8. During sex, I prefer to be on the bottom so that my stomach appears flat.  

0	1	2	3	4	5
Never	Rarely	Sometimes	Often	Usually	Always

9. I (would) feel very uncomfortable walking around the bedroom, in front of my partner, completely nude.
- |       |        |           |       |         |        |
|-------|--------|-----------|-------|---------|--------|
| 0     | 1      | 2         | 3     | 4       | 5      |
| Never | Rarely | Sometimes | Often | Usually | Always |
10. The first time I have sex with a partner, I worry that my partner will get turned off by seeing my body without clothes.
- |       |        |           |       |         |        |
|-------|--------|-----------|-------|---------|--------|
| 0     | 1      | 2         | 3     | 4       | 5      |
| Never | Rarely | Sometimes | Often | Usually | Always |
11. If a partner were to put an arm around my waist, I would think, "My partner can tell how fat I am."
- |       |        |           |       |         |        |
|-------|--------|-----------|-------|---------|--------|
| 0     | 1      | 2         | 3     | 4       | 5      |
| Never | Rarely | Sometimes | Often | Usually | Always |
12. I only feel comfortable enough to have sex if it were dark so that my partner could not clearly see my body.
- |       |        |           |       |         |        |
|-------|--------|-----------|-------|---------|--------|
| 0     | 1      | 2         | 3     | 4       | 5      |
| Never | Rarely | Sometimes | Often | Usually | Always |
13. I prefer having sex with my partner on top so that my partner is less likely to see my body.
- |       |        |           |       |         |        |
|-------|--------|-----------|-------|---------|--------|
| 0     | 1      | 2         | 3     | 4       | 5      |
| Never | Rarely | Sometimes | Often | Usually | Always |
14. I (would) have a difficult time taking a shower or bath with a partner.
- |       |        |           |       |         |        |
|-------|--------|-----------|-------|---------|--------|
| 0     | 1      | 2         | 3     | 4       | 5      |
| Never | Rarely | Sometimes | Often | Usually | Always |
15. I (would) feel anxious receiving a full-body massage from a partner.
- |       |        |           |       |         |        |
|-------|--------|-----------|-------|---------|--------|
| 0     | 1      | 2         | 3     | 4       | 5      |
| Never | Rarely | Sometimes | Often | Usually | Always |

## Body Appearance Questionnaire

Directions: For each of the following questions please circle the number that best describes the degree to which the statement is characteristic or true of you.

1. I am comfortable with the appearance of my physique/appearance.  

1	2	3	4	5
Not at all	A little	Moderately	Quite a bit	Extremely
  
2. I worry about wearing clothes that might make me look too thin or overweight.  

1	2	3	4	5
Not at all	A little	Moderately	Quite a bit	Extremely
  
3. I wish I wasn't so uptight about my physique/appearance.  

1	2	3	4	5
Not at all	A little	Moderately	Quite a bit	Extremely
  
4. There are times when I am bothered by thoughts that other people are evaluating my weight or muscle development negatively.  

1	2	3	4	5
Not at all	A little	Moderately	Quite a bit	Extremely
  
5. When I look in the mirror I feel good about my physique/figure.  

1	2	3	4	5
Not at all	A little	Moderately	Quite a bit	Extremely
  
6. Unattractive features of my physique/appearance make me nervous in certain social settings.  

1	2	3	4	5
Not at all	A little	Moderately	Quite a bit	Extremely
  
7. In the presence of others, I feel apprehensive about my physique/figure.  

1	2	3	4	5
Not at all	A little	Moderately	Quite a bit	Extremely
  
8. I am comfortable with how fit my body appears to others.  

1	2	3	4	5
Not at all	A little	Moderately	Quite a bit	Extremely

9. It would make me uncomfortable to know others were evaluating my physique/figure.
- |            |          |            |             |           |
|------------|----------|------------|-------------|-----------|
| 1          | 2        | 3          | 4           | 5         |
| Not at all | A little | Moderately | Quite a bit | Extremely |
10. When it comes to displaying my physique/figure to others, I am a shy person.
- |            |          |            |             |           |
|------------|----------|------------|-------------|-----------|
| 1          | 2        | 3          | 4           | 5         |
| Not at all | A little | Moderately | Quite a bit | Extremely |
11. I usually feel relaxed when it is obvious that others are looking at my physique/figure.
- |            |          |            |             |           |
|------------|----------|------------|-------------|-----------|
| 1          | 2        | 3          | 4           | 5         |
| Not at all | A little | Moderately | Quite a bit | Extremely |
12. When in a bathing suit, I often feel nervous about the shape of my body.
- |            |          |            |             |           |
|------------|----------|------------|-------------|-----------|
| 1          | 2        | 3          | 4           | 5         |
| Not at all | A little | Moderately | Quite a bit | Extremely |

## Informed Consent Document

You are about to participate in a study that focuses on body image self-consciousness during physical intimacy. **Please read the following material carefully.** It describes the purpose of the study, the procedure to be used, risks and benefits of your participation, and what will happen to the information that is collected from you.

1. **The purpose of the study** is to examine the levels of body image self-consciousness during physical intimacy.
2. **The procedures to be used in this study.** First you will be asked to fill out a personal information questionnaire. Then, you will be asked to complete a 15-item questionnaire regarding your body image self-consciousness during intimacy, and a 12-item questionnaire regarding your feelings about your body appearance. When the questionnaire is completed, you will be given a copy of this informed consent and a debriefing form that will explain the research further.
3. **Risks and benefits of participation.** There are no known risks from participating in this study. However, due to the nature of the questionnaires presented, it is possible that past experiences or other feelings could arise from participation. It is our responsibility to respond to any and all problems that may occur and appropriate assistance will be provided. You will either be referred to Dr. Grieve, a clinical psychologist, or to the campus-counseling center. Benefits to you are minimal, but we feel that this opportunity to participate will enhance your knowledge about the nature of research in psychology. Extra credit will also be an option depending on your instructor's policy. If your instructors do award extra credit for participating in research, then be sure to obtain the "certificate of participation" from the researchers and take it to your instructor.
4. **After the information or data are collected** from you, it will be securely stored separately from any identifying data; additionally, electronically stored data will be password protected. To ensure confidentiality, you will be assigned a participant number, which will be the only means of identification. In other words, the identities of all participants will not be known at the time of analysis, and will not be presented at any time during the study. All data obtained will be used only for purposes of instruction and scientific publication, and all data will be confidentially protected. Information will be made public in the form of averages, which makes it impossible to tell who the participants were.

If you have any questions regarding this study, please contact Tenille Davis at 645-3371 or Dr. Frederick Grieve at 221-7235.

If you have any questions regarding the right of research participants, please contact the Office of Grants and Sponsored Research, Box 4517, Austin Peay State University, Clarksville, TN 37044, (931) 221-7881.

### **Informed Consent Statement**

Please read the statements below. They describe your rights as a participant in this research study.

**1. I agree to participate in the present study being conducted by Tenille Davis, who is under direct supervision of Dr. Rick Grieve.**

**2. I agree to:**

- 1. Fill out the personal information questionnaire (6 items).**
- 2. Fill out the Body Image Self-Consciousness Questionnaire (15 items).**
- 3. Fill out the Body Appearance Questionnaire (12 items).**
- 4. Total time involved (approximately 15 minutes).**

**3. I have been informed in writing of the procedures to be followed as well as the risks and benefits to me for participating. I have been given an opportunity to ask questions about my participation.**

**4. I understand that I do not have to answer any item that I choose not to.**

**5. I understand that I may terminate my participation at any time without penalty or prejudice and that I may have all data obtained from me destroyed. Data will be destroyed up until the time of publication; for at that time we are unable to remove data.**

**6. I realize that by signing this form, I willingly consent to participate in this study. I also acknowledge that I have been given a copy of this consent form to keep.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

## Debriefing Statement

There are no right and wrong answers to the questions that you have just completed. As previously stated, we examined the level of body image self-consciousness during physical intimacy. We are particularly interested in ethnic differences as it relates to the level of body image self-consciousness experienced during physical intimacy.

Previous research indicated that Caucasian females have more negative perceptions of their body image (Cash & Henry, 1995), hold more fixed and rigid definitions of beauty (Allan, Mayo, & Michel, 1993; Kumanyika, Wilson, & Guilford-Davenport, 1993; Parker et al., 1995), and are more obsessed and concerned about dietary practices and behaviors (Abrams, Allen, & Gray, 1993), as opposed to their African American counterparts. As a result, Caucasian females tend to be less satisfied and are less self-confident about their weight than African American females (Akan & Grilo, 1995; Nielsen, 2000; Rucker & Cash, 1992).

Previous research examined how self-consciousness relates to sexual experience, a period during which the body is completely exposed. Wiederman (2000) concluded that women with higher degrees of body image self-consciousness during physical intimacy tended to have fewer heterosexual experiences, were less sexually assertive with partners, and avoided sexual activities with a partner more frequently than those with lower degrees of body image self-consciousness. Based on these findings, the current study hypothesized that Caucasian females will exhibit a higher degree of body image self-consciousness than African American females during physical intimacy.

Little research has been conducted on the topic of sexual experiences. Thank you again for your participation.

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