Why Adolescents Are Not Happy With Their Body Image?

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Abstract

Adolescent girls are highly aware of their appearance and invest significant cognitive and emotional resources in their relation with the physical body. A plethora of studies illustrate that in this developmental period, girls are over-concerned with weight and shape and are susceptible to adopt unhealthy appearance management strategies. The article aims to investigate characteristics of body image in adolescence as well as factors that contribute to body image dissatisfaction. We analyze the importance of appearance for adolescent girls by looking at its effects on self-esteem and at its role in social relations. We also focus on the mechanisms that shape the attitude toward body image by exploring how messages from media and significant others are received and internalized. Last, we analyze empirical data available for Romanian girls and suggest possible key areas for interventions.

Keywords: adolescence, body image, thinness ideal, social relations

Introduction
Adolescence is a time period with significant physical changes to which the person has to adjust. Among significant challenges, first intimate relationships bring to front the relevance of physical attractiveness in self-evaluation. This context facilitates a focus of attention on the physical body which is analyzed, compared and evaluated against the appearance of peers and the social norms. Body image, as “a person’s perceptions, thoughts and feelings about own body”, becomes one of the central focuses of adolescents (Grogan, 2008, p.3). The perceptive dimension refers to the mental representation of the physical body. Thoughts and feelings contribute to the attitude dimension. Regarding the attitude toward body, researchers distinguish between appraisal of appearance (satisfaction / dissatisfaction) and the importance placed on appearance (Cash & Pruzinski, 2002).

Studies show that, in adolescence, body image is more relevant for self-esteem compared to adulthood (Grogan, 2008). Girls’ ideal of thinness becomes evident even in preadolescence with some studies showing that around 50% of girls aged 9 to 12 years old would like to have a thinner body (Sands & Wardle, 2003). Also, girls prefer to be underweight rather than having a weight above average: girls aged 9 to 18 years old with BMI above the 50th percentile were more dissatisfied with their body image compared to girls below the 50th percentile (Calso, Sonneville, Haines, Blood, Field, & Austin, 2012). For these reasons, more and more adolescents resort to cosmetic surgeries in order to alter parts of their body. From less invasive procedures such as Botox injections to more extensive and complicated cosmetic surgeries, the interventions have a single purpose: to improve appearance. Studies show that these procedures are considered an option especially when a person experiences high levels of body shame and uses appearance fixing as a strategy to cope with dissatisfaction. In high developed societies, cosmetic surgery is perceived as a routine if the shape of body and/or face doesn’t correspond with the ideal standards. If in Asian societies, the tendency is to alter the traditional face traits, in Western Europe and United States of America, teenage girls are mostly preoccupied with their weight and body shape. They develop specific criteria of evaluating physical appearance such as a flat abdomen or a small waist. Another criterion, with high impact due to social media is the so called “thigh gap” which is the presence of a space between the inner thighs when a girl stands with her feet together (Tyler, 2013). It is known as thigh gap and it can be achieved only with severe dieting and in the presence of a specific body structure.

Therefore, the teenagers’ effort of altering appearance through unhealthy practices does not come as a surprise. Body image disturbance seems to increase the risk for smoking initiation in
adolescent girls (Clark, Croghan, Reading, Schroeder, Stoner, Patten & Vickers, 2005) and is the leading cause of eating disorders (Thompson, Heinberg & Altabe, 1999). Also, dissatisfaction with weight and shape may conduct to unhealthy exercise (Holland, Brown & Keel, 2013) and substance use such as laxatives, diuretics or diet pills. In a qualitative study, Rudd and Lennon (2000) showed that teenagers who practice these behaviors are aware of their unhealthiness but they ignore this risk in order to comply with social norms of beauty. Also, they hold the belief that the body is under individual control, therefore they experience guilt if they fail to follow their routine in managing appearance (Rudd et al., 2000).

Management of appearance comes as a personal responsibility. Feminists consider that women’s perceived responsibility regarding appearance is linked to the gender role. For instance, Orbach Susie, a British feminist psychotherapist who adopts the social – constructivism perspective on body image, states that women’s uncomfortable relation with their bodies lies in sex inequalities. Women are socialized to acquire a particular type of body in order to be attractive for men. Orbach considers this perception being rooted in a patriarchal society, where men are expected to act and exercise control over others while women are expected to present themselves and to exercise control only in the limited home environment or toward themselves (Blood, 2005).

In adolescence, when girls are preoccupied with gaining adolescent males’ attention and with being popular, controlling appearance seems crucial. A trimmed look sends messages of self-discipline and it is a way of exercising power and agency over life (Bordo, 1993 cit. in Reicher & Koo, 2004). Power is another key concept extensively used by feminists to explain the management of appearance. Susan Bordo argues that the body is not just a symbol that reflects social and cultural meanings but also an instrument that can be used to exert power and control over environment. Also, behavior of others as well as social relations can be influenced through managing own looks. Therefore, the physical appearance can reflect the person’s ability to manage own life and to exercise both self-control and control in the social context. Even though girls are aware that that a body in accordance with the social norms has plenty of benefits in the social arena, they also learn that self-control is a necessary cost. In this context, self-regulatory behaviors such as dieting and weight control are perceived as normal behaviors (Reicher et al., 2004).

If in traditional communities, the management of the appearance is dictated by the women’s role in different life stages, modern society rather emphasizes women’s agency in managing appearance (Callero, 2003). Being free to develop “personalized looks” poses risks in
terms of vulnerability to recipes of success promoted through consumer culture. This phenomenon is obvious among teenage girls, whose identity is not well defined yet.

Together, all these facts draw attention toward the relevance of body image for teenage girls and the need to understand the motives that lie behind the high amount of attention directed toward appearance.

**Body image (dis)satisfaction: cognitive and emotional correlates**

The strong connection between self-esteem and body image has been widely documented. For instance, Goldenberg, McCoy, Pyszczynski and Solomon (2000) showed that a high body satisfaction significantly contributed to self-esteem. The authors combined negative versus positive feedback to a cognitive task with exposure to images of beauty promoted in media. Participants that were told that they failed in the cognitive task had higher levels of body image satisfaction compared to those who received positive feedback. Furthermore, data suggests that the variation of self-esteem during adolescence is mainly due to changes in the attitude toward body (Paxton, Neumark-Sztainer, Hannan & Eisenberg, 2006). If body image satisfaction is a relevant resource of enhancing global self-esteem among adolescents, negative feelings toward their body image, corroborated with high awareness of appearance, seems to contribute to depressive symptoms. In adolescence, girls, more than boys, experience depressive symptoms and the onset of this gender imbalance is associated with increased body image dissatisfaction as well as with eating disorders (Benas, Uhrlass & Gibb, 2010). There is consistent evidence that girls’ depressive symptoms in adolescence are predicted by body image dissatisfaction as a consequence of pubertal changes (Ferreiro, Seoane & Sena, 2014). At some extent, distress is associated with any changes that occur in our lives. The distress girls feel during puberty is doubled by a high awareness of what their bodies should become. Due to pubertal changes, girls gain fat that is usually not distributed according to the ideal thin body promoted in the media.

Perfectionism is a relevant individual risk factor in developing eating disorders and body image dissatisfaction (Bardone-Cone, Wonderlich, Frost, Bulik, Mitchell, Uppala & Simonich, 2007). Perfectionist persons set high standards in different life domains and criticize severely their performance. Initially viewed as a one-dimensional construct, perfectionism is described as having multiple dimensions (Hewitt, Flett, Besser, Sherry & McGee, 2003). Relevant in relation with body
image dissatisfaction is the distinction between social and personal dimensions of perfectionism (Hewitt, Flett, Besser, Sherry & McGee, 2003). The perception that society sets high standards for an individual (socially prescribed perfectionism) was found to be associated with thin ideal internalization, weight dissatisfaction and bulimic symptoms (Tissot & Crawther, 2008; Grammas & Schwartz, 2009). The personal dimension of perfectionism includes having high expectations directed toward oneself. In the domain of eating disorders, self-oriented perfectionism was found to be related to restrictive eating behavior and to be a relevant predictor of anorexia (Bardone-Cone, Wonderlich, Frost, Bulik, Mitchell, Uppala & Simonich, 2007). Also, Tissot and Crawther (2008) showed that self-oriented perfectionism strengthens the relation between socially prescribed perfectionism and thin ideal internalization.

Being over-concerned with weight and shape can lead to misinterpretations of body related information. Distortions of weight are common features in anorexia (Collins, 1987). To a lower extent, they are also encountered among persons without eating disorders (Bergstrom, Stenlund & Svedjehall, 2000). First considered perceptive dysfunctions, distortions of weight and shape are recognized to be generated and maintained by cognitive biases such as attention bias or selective interpretational biases. Mussap, McCabe and Ricciardelli (2008) illustrated that errors in body size estimation were predicted by concerns with appearance. The evaluation of body weight is frequently inaccurate. Brener, Eaton, Lowry and McManus (2004) showed that almost half of underweight adolescents considered their weight were normal while almost half of normal weight girls thought they were overweight. McCabe, Ricciardelli, Sitaram and Mikhail (2006) showed that overestimation of body size was predicted by depression and by social and media influences.

**Body image (dis)satisfaction: interpersonal and social correlates**

When puberty sets in early or when the thin models of beauty are reinforced by significant others, girls are vulnerable in developing negative feelings toward themselves. The question of why the attitude toward body image has such a strong impact on general well-being can be answered only by taking into consideration the sociocultural meanings of appearance. As Fredrickson, Hendler, Nilsen, O’Barr and Tomi-Ann Roberts (2011) mentioned “teenage girls are all about their bodies. And when they were not, the world around them was” (p. 693). Along with serving biological functions, the physical body, through appearance, sends messages about the social status, the affiliation to a group and even personality traits.
Peers play an important role in the development of body image dissatisfaction (Littleton & Olledick, 2003) and their criticism toward one’s body has a significant contribution to the internalization of thin ideal (Jones, Vigfustottir & Lee, 2004). Social interactions between adolescents create a context where thin ideal is promoted and reinforced while failure to attain a perfect body is severely penalized through teasing, negative feedback and even social exclusion (Jones & Crawford, 2006). The general belief among adolescent girls is that an attractive person is more socially desirable compared to an unattractive one. For instance, in a cross-sectional study, Xie, Li, Boucher, Hutchins and Cairns (2006) brought evidence that in early adolescence, attractiveness is considered the most important contributor to popularity. Moreover, it was found that attractiveness can diminish the effect of negative social behavior on popularity. Similarly, Rosen and Underwood (2010) documented that facial attractiveness influenced how aggressive teenagers were perceived. If aggressive, those with low facial attractiveness were perceived as being less popular compared to those with high facial attractiveness.

In adolescence, conversations about appearance management and fat reduction are frequent topics. A significant amount of studies documented an association between ‘fat talk’ and body image dissatisfaction (Tompkins, Martz, Rocheleau & Bazzini, 2009; Compeau & Ambwani, 2013). It has been suggested that adolescents who engage in those types of conversations are not necessarily preoccupied with appearance, but they are rather concerned with group acceptance and social integration (Tompkins et al., 2009). The involvement in general conversations about appearance leads to the spread of body image concerns and body dissatisfaction among teenagers by activating the internalization of thin ideal (Jones et al. 2004). Also, for adolescent girls, body image satisfaction is significantly connected to social competencies (Jones, 2004). Overweight teenagers and those who are visibly physical different receive more frequent negative feedback related to appearance compared to normal weight persons. This conveys the message that, in order to be socially accepted you have to look good.

On the other hand, having friends is a protective factor against the development of negative feelings directed toward their own body when it fails to conform to the standards of beauty (Caccavale, Farhat & Iannotti, 2012). Jones (2004) pointed that, for girls, body image is a much more social phenomenon compared to boys. The author examined the contribution of body talk, social acceptance and body ideal internalization in the development of body image dissatisfaction. While for girls, body talk and social acceptance were relevant contributors, for boys only the internalization of the ideal body image mattered. Therefore, the belief that a perfect body increases
the chances for social acceptance is not surprising among girls. They develop a culture of “appearance based acceptance” (Jones, 2004, p.824) with specific standards of beauty, standards that are irrational for others, such as the most recent so called thigh gap. In this context, the attitude toward their own body is dependent on the extent that a girl fits the social standards of beauty and considers these standards important.

Social context reinforces the media effects or favor the development of unrealistic expectations toward their own body. Significant others send messages regarding appearance expectations and standards. Parents, siblings, and peers influence attitudes toward appearance through direct comments, teasing or modeling. The girls’ attitude toward appearance is initially copied from the mother who models the relevance of appearance. Studies show that mothers’ concerns with her own appearance relate to her daughters’ development of dissatisfaction, eating disorders and thin ideal internalization (Meesters, Muris, Hoefnagels & Gemert, 2007). The mother is the one who offers frequent negative feedback and encourages weight control (Kluck, 2012). The author show that parents attitude toward children’s appearance becomes more negative as they grow older. Their purpose is to encourage weight loss. Usually parents are not aware of the negative consequences of criticizing a teenager’s weight or appearance.

Parents provide positive feedback as well. The influence of positive feedback on body image satisfaction is a subject of debate, studies showing that positive feedback can also be detrimental. For instance, Herbozo, Menzen and Thompson (2013), in a cross-sectional research, concluded that for teenagers with some levels of body dissatisfaction, positive feedback had a negative effect. They speculated that this type of feedback might draw attention toward the relevance of appearance and activate negative emotions.

**Body image (dis)satisfaction: Objectified body image and cultural thin ideal**

A particularity that favors the belief that appearance is an instrument in social relations is the women's tendency to perceive the body as an aesthetic object that should be displayed rather than to focus on the functions of the body. The importance of the aesthetic aspect of different body parts, especially in social contexts, gives voice to the belief that the body is an object whose value is based on appearance. The phenomenon was conceptualized under the name of *Objectified Body Consciousness Theory* (Fredrickson & Roberts, 1997). Direct consequences of this belief are frequent
body surveillance, shame and the illusion that appearance can be controlled. Being used to think of the body in terms of how it appears to others, girls frequently scan their appearance in search for flaws. Socialized to rather dislike their body, girls will not focus on the beautiful features but on the unattractive ones. As a direct effect, when interacting with others, they feel anxious and ashamed because they somehow expect others to adopt the same critical position.

Studies confirm that when the body is objectified, girls are more sensitive to others feedback and rely on it when assessing own appearance. Fea and Brannon (2006) showed that, in this case, any positive comment influences the participant’s mood by providing reassurance of their appearance. If the positive feedback is not received, they conclude they are unattractive. For example, in body dysmorphic disorder (i.e. characterized by distress with an imagined or slight defect in appearance) both self-evaluation and the perceived evaluation from others are rather negative. In contrast, in the context of a healthy body image, even if self-evaluation of appearance is negative, teenagers consider they are rather positively evaluated by others (Anson, Veale & Silva, 2012). Thus, when considering body image dissatisfaction as a risk factor for unhealthy behaviors, it is more valuable to measure the fear of negative appearance evaluation instead of the personal opinion toward their own body (Choi, Leshner & Choi, 2008. Starting as a social issue, the management of appearance becomes a personal battle. The neglect of the internal symptoms, correlated with the need to control the image, encourages frequent diet or other risk behaviors.

One mechanism through which adolescents develop body image concerns especially in social contexts is thin ideal internalization, with studies showing that adolescent girls are especially influenced by the cultural thin ideal (Groesz, Levine & Murnen, 2002). Thompson and Chad (2002) showed that girls with appearance anxiety would like a much thinner body compared to those with low levels of anxiety. The pathological relation with the body is developed and reinforced in a society that promotes models of success mostly impossible to attain. Then, the normal physical development of the woman’s body puts her further from the ideal body.

Another mechanism that is proposed to explain the association between viewing models of beauty the development of body image dissatisfaction and appearance anxiety is the social comparison process. We usually compare ourselves with others for many reasons: self-evaluation, self-development or self-enhancement (Myers & Crowther, 2009). The targets in social comparison are chosen based on similarities. When comparing our own appearance, this rule does not apply. Although far from the normative standards, the thin ideal promoted in the media is considered a
relevant goal. The reason behind this is the frequent natural exposure to such images which makes them highly available. It was showed that even a short presentation of thin models leads to increases in body image dissatisfaction. The effect is higher for girls that are overweight, are frequently on a diet, have a low self-esteem or high pre-existing levels of body image dissatisfaction (Want, 2009).

However, there are also teenagers who develop a critical discourse about media images of beauty. In experimental designs where participants had to analyze the appearance of the models, the effect on body image dissatisfaction was lower than in experiments where participants were given distracter processing instructions (Want, 2009). Also, Yamamiya, Cash, Melnyk and Posavac (2005) illustrated that visualizing thin models does not lead to body image dissatisfaction if girls are asked to develop arguments against the thin models. The effectiveness of resistance is dependent on holding critical media skills in order to be able to undermine the credibility of the images. The development of critical media skills is an important objective in prevention programs. Still, as long as society penalizes unattractive and overweight women, these prevention programs have a small benefit on the long term (Donaghue and Clemitshaw (2012).

**Body image and Romanian adolescents**

There is a growing data pool on body image and weight related concerns among Romanian adolescents. For example, Health Behavior in School Aged Children (HBSC) is a WHO collaborative cross-national study that collects data every four years on 11-, 13- and 15-year-old boys’ and girls’ health, health behaviors and well-being. It has also extensive data on eating patterns, dieting and body image problems among adolescents (Currie et al., 2012). The 2009/2010 Romanian HBSC data reports that girls were increasingly unsatisfied with their body adiposity as they grew up: while 19.5% of the 11 years old girls perceived themselves as being too fat, 27% of their 15 year-old counterparts believed the same thing. More importantly, in the HBSC Romanian sample, 20% of the girls believing they were too fat had, in fact, a BMI falling within the normal range. Therefore, feeling fat may be a result of the culturally prescribed ideal of thinness/beauty without necessarily having a relationship with the actual body size. These body image problems go hand in hand with pronounced body dissatisfaction, which in turn, proves predictive for using maladaptive strategies to control ones weight. Indeed, in the 13-15 years-old Romanian girls’ samples, an average rate of 15% of the girls were ‘disappointed with body’, 9% ‘hated’ their body, and 10% were ‘annoyed’
with their body. As a result, an average of 15% of the 11-15 years old was on a diet at the time of the HBSC study with 7% of the girls having been dieting for 5 times or more. Whereas most of the girls preferred classical ways of controlling their weight (exercising, eating smaller portions, drinking more water etc.), it is worrisome that 21% of those aged 11-15 stated that they restricted intake of foods from certain categories, 5% used purging, 3% used pills and 4% were smoking in order to lose weight (Tăut, unpublished).

Some other studies with Romanian adolescents point to similar conclusions. One of our studies explored the developmental patterns of body image, as well as the individual and social factors that contribute to the development of the attitude towards body image. We used a cross-sectional design and surveyed a sample of 250 girls, aged 15-20 coming from urban areas. Our results showed that satisfaction with appearance varied across age such as older adolescent girls were more satisfied with appearance compared to younger girls. Conversely, younger adolescents internalized to a higher extent the thin ideal. We also found that thin ideal internalization moderated the relation between weight and body image satisfaction. Girls who considered this standard relevant were more dissatisfied when having a higher weight compared to girls who did not value a very thin body. These results suggest that a more critical attitude toward media models might lead to a positive body image. (Nanu, Tăut & Băban, 2013).

In order to explore social factors associated to body image, we focused on appearance related feedback from significant others and on body talk as relevant contributors to the development of body image. The participants were 119 girls, aged 15-19 years old and the study was cross-sectional. We assessed the frequency of appearance related feedback and the frequency of getting involved in conversations regarding management of appearance. Both feedback and body talk were related to body image satisfaction. Adolescent girls who frequently participated in appearance related conversations were rather dissatisfied with their appearance. The relation was significant for both positive - as well as for negative valence appearance conversation. Also, thin ideal internalization mediated between general conversations about appearance and body image dissatisfaction, pointing it as a potential mechanism behind the relationship. Therefore, our results showed that body talk leads to body image dissatisfaction only if a girl adopts the thin ideal as a personal standard (Nanu, Tăut & Băban, 2013). However, feeling socially accepted had also relevant influence in the relationship between negative feedback and body image satisfaction, pointing it as another potential mechanism. Therefore, girls, who stated they received frequent appearance related negative feedback, but had friends and were accepted by the others, had a higher
satisfaction with body compared to those that reported they were not socially accepted (Nanu, Tăut & Băban, 2013).

**Concluding remarks**

It is obvious that body image concerns in adolescence cannot be ignored. Among adolescent girls, appearance is a relevant way of expressing identity. Teenage girls are highly aware of their appearance once they enter puberty and they understand that the body is a strong instrument in social relations. In this context, perhaps the most worrisome aspect is that media is the main voice asserting meanings to different body shapes. Through media, clear norms of how girls should look like, what should they eat and what products could be used to improve appearance are transmitted. The purpose of these standards is not just to make girls more likeable but also to conform to cultural norms of beauty, just like one has to conform to other cultural standards as well (in terms of food habits, family relations, position in society etc.).

Also, media inoculates the belief that we can control appearance and we can be as aggressive as we want if the purpose is to achieve perfection. The society reinforces these beliefs by associating beauty with success and severely penalizing failure. In a society with increasing rates of obesity, parents are concerned about their children weight and often verbalize this concern by giving messages about weight control, dieting and the relevance of being thin. A teenager, for whom health is not perceived as a relevant concern, attributes these messages to the importance of appearance for a successful life. In this matter, the best practice to promote a positive body image might be to actually ignore the image and focus on the functions of the body. While this strategy is frequently used by elderly people, it might be beneficial for teenagers also. Indeed, studies show that physical activity has positive effects on self-esteem and on body image (Lyu & Gill, 2012).

Empirical data as well as theoretical approaches mentioned in this paper do suggest that there is no simple causal relation between the physical body and satisfaction with appearance.
Feelings about the physical body are influenced by cultural representations of beauty, by the gender roles, and by how an individual creates meanings around body image. Along with individual interventions, public health institutions should develop programs for educating the society to question and reconsider the value of appearance.

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