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# **Female body – an anthropological perspective on body representations and practices in adolescence**

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## Abstract

In the last few decades, a good deal of attention has been paid by both medical and social scientists to the growing body dissatisfaction considered responsible for the emergence and widespread of many risky practices intended to alter physical appearance (such as steroid use or cosmetic surgery), as well as psychiatric disturbances (such as depression, body dysmorphic disorder or eating disorders), which represent a serious threat to a person's health and well-being. Considerable evidence has been accumulated that body image concerns not only affect genders in different ways, but they appear relatively early in life, causing significant distress in girls no more than five or six years old.

With the world getting a whole lot smaller, the “tyranny of slenderness” and the “drive for muscularity” are no longer ‘western’ but global beauty standards. The increasing globalization and exposure to Western media assured that these body ideals permeated cultures all over the world, generating similar concerns among the specialists in various scientific fields over the distinctive pathology associated with their uncritically adoption.

The concept of body image, once limited to the study of distorted body perceptions caused by brain damage, is currently addressed by psychologists, sociologists, nutritionists, feminists, and even media literacy specialists. Their productive contributions are presented in the theoretical considerations section of the paper. Psychologists are particularly interested in the multidimensional (perceptual, affective, cognitive, behavioral) nature of the construct; sociologists reveals the cultural relativity of body ideals (as opposed to the deterministic biologists who advocate the existence of some universal standards); nutritionists explore the role of weight-related distress in the etiology of eating disorders; feminists denounce the beauty canons as a means of controlling women bodies by the patriarchal society, while media specialists deconstruct gender stereotypes and beauty myths, encouraging the consumers to develop critical skills who could help them resist negative media messages. The anthropological perspective assumed by the present research provides an integrative framework to all these preexisting but distinct approaches.

The literature review focuses the main dimensions of the body image construct and the multitude of the assessment methods. An emphasis was put on two different perspectives on beauty and attractiveness standards (namely the evolutionary theory and the socio-cultural one), which provide complementary explanations on the transmission of body ideals, favoring either the role of selection in valuing those traits that seem to maximize the chances of reproductive success, or the role of culture in constructing and imposing body ideals through the main socio-cultural channels (family, social networks, and media). Further, brief but hopefully concise examinations of the

individual (gender, body mass index, pubertal status, self-esteem and personality traits) and social (family, congeners, mass media) factors involved in the development of body image assure a theoretical foundation for the current study. The section finally consider the impact of body image on biological, psychological and social functioning, highlighting specific gender- and age-related vulnerabilities and presenting a rationale for choosing the female adolescents as the investigation group.

The sample was composed by 270 teenage girls and 225 teenage boys, aged 14 to 19 years. The research design was intended to allow subjects' classification by sex, age group, pubertal status, body mass index (long-established and used in the biomedical anthropology) and economic condition. The methods used to collect, group, categorize and process the relevant information were carefully selected. The research employed a structured questionnaire survey of with closed response categories, many of which used a version of Likert Scaling. The questionnaire was divided into specific sections, according to the precise topic investigated (eating habits, physical activity, smoking and alcohol use, body image); it includes unstandardized questions that evaluate teens' attitudes and practices, as well as standardized instruments that assess diet quality, self-esteem and body image dimensions. Some of them, such as Rosenberg self-esteem Scale, were already used in Romanian psychological studies. Others, like Body Image Avoidance Questionnaire (Rosen et al., 1991), Body Parts Satisfaction Scale (Berscheid et al., 1973; Frederick *et al.*, 2014) or Body-Image Questionnaire (Bruchon-Schweitzer, 2001) constitute a novelty in Romania. To ensure the accuracy of data, anthropometrical measurements were performed by the investigator. The study fully respect the principles enunciated in the Declaration of Helsinki for medical research involving human subjects.

The objectives were: (a) to assess cognitive and behavioral dimensions of body image among female adolescents and to perform a comparative analysis with the male sub-sample; (b) to analyze the biological factors (sex, age, body mass index) and psychosocial ones (self-esteem, appearance-related feedback from the significant others) involved in the development of body image in order to underline the specific vulnerabilities and to identify the potentially protective variables; (c) to investigate the eating habits, physical activity engagement, alcohol and tobacco use and to analyze them according to gender, age, weight status and (if relevant) economic level in order to identify the appearance management strategies adopted by female and male participants and to contribute to a better understanding of body image impact on health behaviors.

The main hypothesis under consideration is that there is a gender-related vulnerability, translated in higher body dissatisfaction (with shape, size, different aspects of appearance) among

teenage girls than among boys. We also presumed that certain factors involved in the development of body image (either individual or social) contribute differently to body image construction, representing hotspots, which require differentiated strategies to improve. Accordingly, we expected behavioral dimension of body image (i.e. strategies for coping with appearance-related distress) to reflect the differences between genders regarding body dissatisfaction; in this sense we anticipated that both body-image avoidance behaviors and appearance-fixing behaviors (such as dieting, intensive exercising and smoking) to be strongly influenced by gender.

The results were as follows. We recorded a significant effect of gender and BMI on the evaluation of body image, but not of age. Girls were more dissatisfied than boys with an increased BMI, while boys are equally dissatisfied with a low and high BMI. Dissatisfaction with the current silhouette was also influenced by the distorted perception of other gender's expectations regarding the ideal body. Both sexes demonstrated a strong adhesion to narrow cultural criteria regarding the ideal body size and dimensions, which ignore or violate medical standards: 59.32% of the underweight girls were happy with their weight, although the health consequences (especially reproductive one) are considerable; equally, 49.02% of the normal weight girls and 19.35% of the normal weight boys aspired to an unnecessary and potentially dangerous weight loss; on the contrary, 44.44% of the overweight boys declared themselves satisfied with their weight (which raises the question of promoting a weight management without affecting body self-esteem). The body parts satisfaction score was not significantly influenced by gender, while age brought significant changes only among girls, where the scores followed a downward trend. Girls reported significant lower satisfaction towards nose, hips, buttocks, legs, height and weight. Consistent with the literature, female dissatisfaction targeted mainly the lower body.

Gender was a more salient factor than age and body mass class in influencing the level of self-esteem. Consistent with the literature, we recorded significant gender differences in global self-esteem, with boys scoring higher than girls. Within both female and male samples, neither age nor body mass class did not influence significantly the level of self-esteem. The Rosenberg score was positively correlated with the Body Parts Satisfaction Score and negatively correlated with the Body Image Avoidance Score for both genders, but the low value of these correlations suggested a virtual modest protective value of self-esteem in managing body discontent and preventing the adolescents from adopting maladaptive body image avoidance behaviors. Between the Rosenberg score and the discrepancy score we found little if any correlation, and only in the female sample, making uncertain the impact of dissatisfaction with body shape and size upon global self-esteem.

For both genders, the most important appearance-related pressure was constituted by their own expectations; as far as the exterior sources were concerned, a significant difference between sexes was observed: boys nominated sources from proximity (like parents, friends, others), while girls indicated media pressure. For them, the sport coach was a quasi-inexistent source of pressure, while for boys his importance reached the first place in those aged 18-19 years. Significantly higher proportions of girls received sometimes/often negative feedback about their appearance. Neither age, nor body mass had a significant effect, although the frequency increases with BMI. Analyzing the frequency of negative feedback among dissatisfied or satisfied subjects, we found significant differences between dissatisfied girls and boys, as well as between dissatisfied and satisfied girls, which led us to the conclusion that the negative feedback has an indubitable contribution to the generation / maintenance of negative body image among girls. For both sexes, the main source of negative feedback was represented by their colleagues, followed by other people, while the main source of positive feedback was represented by the friends, followed by the parents. This hierarchy did not vary with BMI, or by gender, except for the 18-to19 year-old boys whose parents were the main sources of positive feedback.

Significantly higher percentages among female adolescents adopted body image avoidance behaviors as part of the appearance management. Body image avoidance score correlated both with the objective parameters of body size as BMI, and with the subjective ones such as the discrepancy score. The appearance fixing behaviors did not differ significantly between genders. Not only those with a positive discrepancy score engaged in weight control behaviors: 13.74% of the girls and 21.00% of the boys scoring zero on Stunkard's Figure Rating Scale (presumed satisfied) reported such practices that can not be interpreted as a strategy of fixing but as a means of prevention. For all those engaged in weight management, first option was some form of physical activity; dietary came second.

Investigation of tobacco use – taking into account both subjects' weight status and their beliefs on weight reducing effects – led to results that did not support the hypothesis of smoking as a means of weight control among the adolescents. Although the data did not indicate the weight-related concern as a decisive factor in smoking onset, they pointed towards other risk factor for the girls – namely the presence of a smoking relative. Considering the frequency of alcoholic beverages consumption and the believes on their benefits, we could not establish a clear relation between body dissatisfaction and alcohol. However, we recorded a significant increase in the frequency of weekly and monthly consumption of beer among dissatisfied boys and a significantly increased percentage of dissatisfied girls that nominated both medical and psychological positive effects of alcohol.