



Gender and race differences in young adults' body dissatisfaction [☆]

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Abstract

Differences by gender and race (White or Black) in two aspects of college students' body dissatisfaction—dissatisfaction with specific body parts and physique anxiety—were examined. Four hundred and ninety-one students completed surveys assessing both aspects of body dissatisfaction and eight risk factors for body dissatisfaction from biological, psychological, and sociocultural domains. Mean levels of dissatisfaction with body parts varied by gender, race, and a Gender \times Race interaction. Mean levels of physique anxiety varied by gender and race. Both dissatisfaction with body parts and physique anxiety were correlated with risk factors from each domain, and factors from each domain accounted for unique variance in each aspect of body dissatisfaction. Because the prediction of each aspect of body dissatisfaction did not vary by gender, race, or a Gender \times Race interaction, findings validate a general multidimensional risk model of body dissatisfaction for young adults.

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1. Introduction

Because dissatisfaction with one's body is a reliable predictor of disordered eating, depression, impaired sexual functioning, and diminished quality of life (Cash, Morrow, Hrabosky, & Perry, 2004), identifying the predictors of body dissatisfaction has practical significance. Previous research indicates that body dissatisfaction is complexly determined in that it is linked to risk factors from biological, psychological, and sociocultural domains.

The biological factor most frequently linked to body dissatisfaction is body mass index (BMI) which is the ratio of weight to height-squared. BMI has been found to be positively correlated with body dissatisfaction for female children, adolescents, and adults (Fingeret & Gleaves, 2004; Kostanski, Fisher, & Gullone, 2004; Presnell, Bearman, & Stice, 2003).

Three psychological factors have been linked to body dissatisfaction. Self esteem has been negatively correlated with body dissatisfaction for adolescent females (Furnham, Badmin, & Sneade, 2002), adult women (Fingeret & Gleaves, 2004), and adult men (Silberstein, Striegel-Moore, Timko, & Rodin, 1988). Perfectionism has been positively correlated with a desire for a body that is high in muscle mass for adult men (Davis, Karvinen, & McCreary, 2005) and to body dissatisfaction for female college students (Pearson & Gleaves, 2006). Finally, external locus of control has been positively correlated with body dissatisfaction for both male and female college students (Pokrajac-Bulian & Zivicic-Becirevic, 2005).

The sociocultural factors linked to body dissatisfaction reflect the influence that parents, peers, and the media have on setting one's ideal body image. Perceived pressure from mothers and fathers to lose weight has been positively correlated with body dissatisfaction for adolescent boys (Ricciardelli & McCabe, 2001), and perceived pressure to lose weight from mothers, fathers, and the media has been positively correlated with body dissatisfaction for adolescent girls (Dunkley, Wertheim, & Paxton, 2001).

Previous research on the correlates of body dissatisfaction indicates that body dissatisfaction is linked to variables from the biological, psychological, and sociocultural domains. This research, however, has at least four limitations. The first limitation is that much of the research using a multi-domain model to predict body dissatisfaction has focused only on adolescents (Paxton, Eisenberg, & Neumark-Sztainer, 2006). High levels of body dissatisfaction, however, also have been reported for both adult men and women (Cash et al., 2004).

The second limitation is that much of the research based on a multi-domain risk model of body dissatisfaction has included only females (Fingeret & Gleaves, 2004; Roberts, Cash, Feingold, & Johnson, 2006). However, attention to body dissatisfaction in males is warranted because high levels of body dissatisfaction have been reported for males during adolescence (Kostanski et al., 2004; Presnell et al., 2003) and adulthood (Pokrajac-Bulian & Zivicic-Becirevic, 2005; Silberstein et al., 1988).

The third limitation is that although researchers have identified body dissatisfaction as being jointly influenced by biological, psychological, and sociocultural factors (Stice & Whitenton, 2002), few studies have addressed how these factors in concert predict body dissatisfaction. Evidence that factors from each domain account for unique variance in body dissatisfaction is key to validating multi-domain risk models, but evidence related to this issue is scarce (Fingeret & Gleaves, 2004).

The final limitation is that few studies using a multi-domain risk model of body dissatisfaction have examined the generality of the model across demographic variables such as gender and race. Gender is of interest because females report greater body dissatisfaction than males (Cash et al.,

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