Support for the uniqueness of body dissatisfaction from drive for muscularity among men

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Abstract

This study explored whether three dimensions of men’s body dissatisfaction (muscularity, body fat, and height) are distinct from drive for muscularity (body image, behaviors, and attitudes) in a sample of 368 college men. If body dissatisfaction is a unique construct, then it will be associated with psychological well-being above and beyond the variance accounted for by drive for muscularity body image, behaviors, and attitudes. Findings revealed such incremental evidence, supporting body dissatisfaction’s unique contribution to all five investigated indices of psychological well-being. Overall, body dissatisfaction and drive for muscularity are not completely parallel constructs, highlighting the need to assess men’s dissatisfaction with their muscularity, body fat, and height for a more comprehensive picture of their body image.

Keywords: Male body dissatisfaction; Muscularity dissatisfaction; Body fat dissatisfaction; Height dissatisfaction; Drive for muscularity body image; Drive for muscularity attitudes; Drive for muscularity behaviors

Introduction

Although the body-image literature historically has focused mostly on women and their desire to become thinner, many researchers (e.g., Leit, Pope, & Gray, 2001; McCreary & Sasse, 2000; Tylka, Bergeron, & Schwartz, 2005) recently have argued that men also experience body-image concerns and have spearheaded much investigation in this area. This research has indicated that, unlike women, men’s body image appears to be linked to their aspirations for increased muscle mass (Jacobi & Cash, 1994; McCreary & Sasse, 2000; Morrison, Morrison, Hopkins, & Rowan, 2004). Men’s perceptions of their muscularity impact their well-being, suggesting that body image is an important topic of empirical and clinical interest for men (Pope, Phillips, & Olivardia, 2000).

Appropriately, many scholars have focused on men’s drive for muscularity when conceptualizing men’s body image. Drive for muscularity reflects dissatisfaction with current level of muscularity and preoccupation with performing behaviors geared toward increasing muscularity. Because body image contains behavioral as well as emotional, cognitive, and perceptual components (Thompson, Heinberg, Altabe, & Tantleff-Dunn, 1999), drive for muscularity can be classified as a facet of men’s body image.

Several measures have been constructed to assess drive for muscularity, such as the Drive for Muscularity Scale (DMS; McCreary & Sasse, 2000) and the Drive for Muscularity Attitudes Questionnaire (DMAQ; Morrison et al., 2004). The DMAQ is a brief 8-item instrument that contains one overall drive for muscularity attitudes factor...
(Morrison et al., 2004), whereas the DMS is more comprehensive as it contains two distinct factors that assess men’s desire to become muscular and their behaviors geared toward increasing their muscle mass (McCreary, Sasse, Saucier, & Dorsch, 2004). The Muscle Dysmorphic Disorder Inventory (MDDI; Hildebrandt, Langenbucher, & Schlundt, 2004) assesses a closely related construct, muscle dysmorphia, and is divided into three subscales: drive to increase body size, intolerance of appearance, and impairment in daily activities due to preoccupation with weight training.

In addition to muscularity, other aspects central to men’s body image have been uncovered. For instance, Ridgeway and Tylka (2005) noted that college men consistently stated that they wanted to be leaner and taller as well as more muscular. The focus on lowering body fat may be subtle, however. Studies have reported only modest differences between men’s self-ideal ratings on fat-based silhouettes (Pope, Gruber, et al., 2000), and only approximately a third of boys are on diets to lose weight (a third are on diets to gain weight, and a third do not report dieting; McCreary & Sasse, 2002). Some men may want to lower their body fat in an attempt to showcase their muscle and to appear similar to the mesomorphic and tall societal ideal body type (Hildebrandt et al., 2004). Nevertheless, preliminary research has suggested that body fat and height dissatisfaction, along with muscularity dissatisfaction, were related to college men’s well-being (Tylka et al., 2005). Because the DMS and DMAQ solely focus on muscularity, they do not address body fat and height dissatisfaction. To date, only the Male Body Attitudes Scale (MBAS; Tylka et al., 2005) contains subscales that assess men’s dissatisfaction with these three aspects.

Although the MBAS muscularity subscale may be conceptually similar to the DMS muscularity body image subscale and the DMAQ, these measures may not be assessing the same construct. First, the MBAS muscularity subscale inquires about men’s dissatisfaction with a greater number of specific body areas shown to be of concern to men (Ridgeway & Tylka, 2005): arms, chest, back, shoulders, upper legs, and calves. The DMS asks about dissatisfaction with arms, chest, and legs; the DMAQ asks about dissatisfaction with back, arms, and legs. Second, this MBAS subscale is different in that its items are tailored to reflect the characteristics of muscularity men desire with each body area (e.g., stronger and larger arms; broader, larger, and more defined chest; a larger and more defined back; broader shoulders; larger calves; Ridgeway & Tylka, 2005).

However, it remains to be determined whether men’s body dissatisfaction with their muscularity, body fat, and height are empirically distinct from their drive for muscularity body image, behaviors, and attitudes. Although men’s body dissatisfaction would be expected to correlate significantly with drive for muscularity because both constructs emphasize the mesomorphic ideal body type promulgated by the media, they should not be completely parallel constructs for the reason that each is theorized to be an individual component of men’s body image (Tylka et al., 2005). Therefore, this study explored whether body dissatisfaction is empirically distinct from drive for muscularity among men. Given that drive for muscularity is related to well-being (e.g., Adams, Turner, & Bucks, 2005; McCreary & Sasse, 2002; Olivardia, Pope, Borowiecki, & Cohane, 2004), men’s body dissatisfaction should be associated with psychological well-being above and beyond the variance accounted for by drive for muscularity if it is indeed unique and salient. If such incremental evidence is obtained, then it would benefit psychologists to assess men’s body dissatisfaction along with drive for muscularity in order to gain a more comprehensive understanding of their male clients’ and research participants’ body image.

Method

Participants

Participants were 368 college men (mean age = 19.11 years, SD = 1.90, age range 18–30 years) from a large Midwestern university. They identified as Caucasian American (84.5%), Asian American (6.3%), African American (5.2%), Latino (2.4%), or multiracial (1.6%). Men reported being first year students (84.9%), sophomores (8.2%), juniors (2.5%), seniors (1.4%), or graduate students (3.0%). They indicated that they were heterosexual (97.3%), gay (1.9%), or bisexual (.8%). Their average reported weight was 78.88 (SD = 14.33) kilograms (i.e., 173.9 [SD = 31.6] pounds), their average reported height was 180.09 (SD = 6.86) centimetres (i.e., 70.9 [SD = 2.7] inches), and the average BMI calculated from these values was 24.3 (SD = 3.9) which was within the normal range recommended for men (Kuczmarski & Flegal, 2000).

Constructs and measures

Body dissatisfaction

The MBAS (Tylka et al., 2005) contains three subscales, which have been confirmed via factor
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