

AN ABSTRACT OF THE DISSERTATION OF

Shweta Reddy Linga for the degree of Doctor of Philosophy in Design and Human Environment presented on June 5, 2008.

Title: Relationships Among Individuals' Personality, Self Esteem, Age, Perceived Social Support, Appearance Schema, Appearance Appraisal and, Body Image Coping Strategies.

Abstract approved:

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This study investigated the relationships among the individual's chronological age, personality, perceived social support, appearance schema, appearance appraisal and the resultant coping strategies to overcome body dissatisfaction. Thirty four hypotheses were developed to meet the objectives of this study. The objectives were achieved by conducting two studies. Each of the two studies collected data utilizing both quantitative and qualitative methods of survey and semi structured interviews respectively.

Study 1 tested six hypotheses, investigating the relationship between self esteem, personality, social support and appearance appraisal. The survey included a sample size of 260 female undergraduate students each completing four standardized measures of self esteem, personality, perceived social support and appearance appraisal. The quantitative data were analyzed using multiple regression. The semi-structured interviews were conducted with 15 students. The respondents in this study were in the age range of 18-25 years. The multiple regression analysis indicated that self esteem and neuroticism

demonstrated significant effect on appearance appraisal. Although the results were inconsistent regarding the moderating effect perceived social support. The semi-structured interviews were analyzed by coding the transcribed interviews thematically, and identifying common patterns of behavior, reasons, and expectations of the respondents. The findings from interviews indicated that perceived social support had an influence on how women appraised their appearance. The interviews also illustrated that appraisal of the social environment as stressful or non stressful was dependent to some extent on the individual's self esteem.

Study 2 tested twenty eight hypotheses, investigating the relationship between age, personality, appearance schema, appearance appraisal and the resultant coping strategies to overcome body dissatisfaction. This survey included a sample size of 277 female respondents in the age range of 18-86 years each completing four standardized measures of personality, appearance schema, appearance appraisal and body image coping strategies. The data analysis of the quantitative data was conducted using path analysis. The semi-structured interviews were conducted with 15 women between the ages of 24- 65 years. The path analysis showed that neuroticism and age significantly predicted the appearance schema, appearance appraisal and body image coping strategy. The analysis also demonstrated that appearance schema and appearance appraisal mediated the relationship between independent variables (personality and age) and dependent variable (body image coping strategies). The interviews illustrate that women perceptions and behavior towards appearance are defined and modified through individual experiences and events across life.

The findings of Study 1 (utilizing analysis of qualitative and quantitative data) demonstrated that self esteem and Neuroticism significantly and substantively predicted appearance appraisal, whereas the findings related to interaction effect of perceived social support failed to demonstrate significance. The direct effect of perceived social support on appearance appraisal was found to be inconsistent. Nevertheless, findings of Study 2 failed to demonstrated direct effect of Neuroticism on appearance schema and body image strategies. Although significant indirect effects of Neuroticism on the coping strategies through appearance schema, as well as indirect effect of Neuroticism on the coping strategies through appearance appraisal were found. Although the study aimed to test the mediating effect of appearance schema and appearance appraisal, it was found that appearance schema demonstrated both mediating and moderating effect whereas, appearance appraisal demonstrated only mediating effects on the relationship between personality and body image coping strategies. Increase in chronological age was found to have a significant negative relationship with appearance schema. The effect of age on coping strategies demonstrated that increase in age was strongly associated with increase in use of appearance fixing strategy.

This study has implications for the field of social psychology of appearance and personality psychology. The findings of the present study imply that a relationship does exist between self esteem and appearance appraisal, as well as personality traits of neuroticism and appearance appraisal. Hence, the results have implications for counselors to encourage women and their family to emphasize on the protective effect of self esteem that can prevent women from negatively appraising their appearance and use harmful

strategies to overcome their body dissatisfaction. Furthermore, in case of future studies investigating the role of personality it would be valuable to investigate the relationship of appearance behavior with individual traits rather than the five factors. We also recommend including self efficacy in studies investigating cohort effect or age effects on appearance related behavior.

Finally for future research it would be valuable to utilize longitudinal designs and a heterogeneous population which will assist in observing if these findings could be generalized to a larger population across U.S.A.

Relationships Among Individuals' Personality, Self Esteem, Age, Perceived Social
Support, Appearance Schema, Appearance Appraisal and, Body Image Coping Strategies

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I understand that my dissertation will become part of the permanent collection of Oregon State University libraries. My signature below authorizes release of my dissertation to any reader upon request.

Shweta Reddy Linga, Author

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TABLE OF CONTENTS

	<u>Page</u>
Chapter 1: General Introduction	2
Theoretical Framework.....	4
Research Questions.....	6
Objectives	6
Chapter 2: Study 1.	8
Introduction.....	9
Literature Review.....	11
Self Esteem	11
Personality.....	13
Social Support.....	16
Perceived Social support.....	19
Appearance Appraisal	20
Method	23
Instrument Development.....	23
Perceived Social Support Scale	25
Appearance Appraisal Scale	30
Final Quantitative Data Collection	33
Procedure	33
Measures	33
Quantitative Analysis.....	36
Demographic Characteristic of the Sample	38

TABLE OF CONTENTS (Continued)

	<u>Page</u>
Descriptive Statistics.....	38
Hypotheses Testing.....	49
Qualitative Study	50
Interviews.....	50
Analytic Approach	51
Demographic Description	52
Results.....	53
Assessment of environment	53
Self	56
Social support providers	57
Motivation.....	60
Appearance Appraisal	61
Discussion.....	63
Conclusion	65
References	69
Chapter 3: Study 2	78
Introduction.....	79
Literature Review.....	81
Body Image Dissatisfaction	82
Age.....	82

TABLE OF CONTENTS (Continued)

	<u>Page</u>
Personality.....	85
Appearance Schema.....	88
Appearance Appraisal.....	90
Coping.....	91
Coping Strategies.....	92
Body Image Coping Strategies.....	94
Methods.....	101
Participants.....	102
Measures.....	103
Procedure.....	107
Quantitative study.....	110
Descriptive statistics.....	108
Hypotheses Testing.....	110
Qualitative Analysis.....	124
Analytic Approach.....	124
Demographic Description.....	126
Results.....	127
Importance of appearance.....	127
Change in perception of appearance.....	130
Centrality of Appearance.....	131

TABLE OF CONTENTS (Continued)

	<u>Page</u>
Appearance Dissatisfaction.....	132
Appearance Appraisal	133
Coping Strategies	135
Discussion.....	138
Conclusion	141
References	143
Chapter 4. General Conclusion	148
Bibliography	152

LIST OF APPENDICES

<u>Appendix</u>	<u>Page</u>
A Study 1 Institutional Review Board Application	166
B Study 1 Online Informed Consent Document	169
C Study 1 Informed Consent Document (Paper format)	172
D Study 2 Institutional Review Board Application	175
E Study 2 Online Informed Consent Document (with extra credit)	179
F Study 2 Online Informed Consent Document (including raffle)	182
G Study 1 Interview Schedule	185
H Study 2 Interview Schedule	187
I Study 1 Survey	188
J Study 2 Survey	202

LIST OF FIGURES

<u>Figure</u>	<u>Page</u>
1.1 Lazarus and Folkman's (1984) transactional stress and coping model	5
2.1 Hypothesized Model testing H1-H3	22
2.2 Hypothesized Model testing H4-H6	22
2.3 Scatter matrix of all variables included in H1 to H3	39
2.4 Scatter matrix of all variables tested in H4 to H6	40
2.5 Line graph for variables tested in H1to H3	41
2.6 Line graph for variables tested in H4 to H6	41
2.7 Residual plot for Appearance Appraisal when testing H1-H3	42
2.8 Residual plot for Appearance Appraisal when testing H4-H6	42
3.1 Complete Model developed from literature review	98
(Inclusive of all paths)	
3.2 Effect of personality traits on body image coping strategies	99
3.3 Model indicating indirect paths to test mediating effects	100
3.4 Age distribution of sample population.....	103

LIST OF TABLES

<u>Table</u>	<u>Page</u>
2.1 List of 16 items used to develop the Perceived Social Support Scale	26
2.2 Results of the Final Factor Analysis	28
2.3 List of 6 finalized items in the Perceived Social Support Scale	30
2.4 Results of the First Factor Analysis in development of Appearance Appraisal Scale	31
2.5 Results of the Final Factor Analysis in the development of Appearance Appraisal Scale	32
2.6 Correlations, Means and Internal Reliabilities for Measures used to test H1-H3 Study1.....	45
2.7 Correlations, Means and Internal Reliabilities for Measures used to test H4-H6 Study1.....	48
2.8 Demographics of Study 1 Interview Respondents	52
3.1 Big Five Structure	105
3.2 Correlations, Mean, Standard deviations and reliability measures for all variables used in Study2.....	109
3.3 Path Analysis Results: Estimates of Direct Effect.....	111
3.4 Path Analysis Results: Estimates of Indirect Effect	118
3.5 Demographics of Respondents	126

**Relationships Among Individuals' Personality, Self Esteem, Age, Perceived Social
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and,
Body Image Coping Strategies**

CHAPTER 1

Introduction

Individuals are gradually persuaded and at times compelled by socio-cultural norms and expectations to psychologically invest and pay attention to their physical aesthetics, resulting in a strong association of self with the body appearance. Studies have demonstrated that an increase in one's investment in physical appearance is positively associated with body dissatisfaction (Altabe & Thompson, 1996; Cash & Pruzinsky, 1990; Muth & Cash, 1997). The resulting distress caused by body dissatisfaction can manifest itself emotionally, behaviorally and cognitively (Rumsey & Harcourt, 2005). Body dissatisfaction may motivate individuals to engage in weight loss activities, grooming through use of make-up and clothing products, use of intrusive and non intrusive procedures to enhance and modify their appearance.

Reports of the American Society of Plastic Surgeons (ASPS; 2007) noted that nearly 11 million cosmetic plastic surgery procedures were performed in 2006, out of which women accounted for 90% of all cosmetic plastic surgery procedures resulting in 9.9 million procedures; while men had 1.1 million procedures. The plastic surgery industry is worth more than \$8 billion. A 657% increase in breast augmentation and a 412% increase in liposuction since 1992 indicates the increase in women who opt for such procedures. In America between 1999 and 2004, the retail sales of weight loss products had increased almost 90% (Hesse-Biber, 2007). It was also estimated that in 2004, approximately \$40 billion was spent on weight loss products and approximately \$12.5 billion was spent on surgeon's fees (Sarwer, Pruzinsky, Cash et al., 2006).

Concurring with these statistics, Sarwar, Cash, Magee et al. (2005) also found that 40% of the college aged women in their study stated that they would consider having cosmetic procedure in the near future, whereas 48% would consider cosmetic procedure in their middle age.

Psychology Today's Body Image Survey found that 57 % of women were dissatisfied with their appearance, clearly indicating that a large population of women experience normative discontent with regard to their body (Garner, 1997). Among those who experience this benign form of discontent are individuals who are resilient and do not allow appearance or body dissatisfaction to dominate their daily lives. On the other hand, there are individuals who utilize different coping strategies to reduce their body dissatisfaction. Literature on body image indicates that black women tend to have a more positive body image as compared to white women (Smith et al., 1999; Harris, 1995; Celio, Zabinski & Wilfley, 2004). Based on the findings from studies on black women, Choate (2005) suggests that emphasis on qualities such as, self-esteem over all individual confidence and competence, family and peer support could provide means of positive coping for women.

Previous research (Cash, 2002; Striegel-Moore & Cachelin, 1999; Taylor & Altman, 1997; Choate, 2005) indicates that there is dearth of research examining the protective factors that buffer some women from developing body dissatisfaction. Therefore, the purpose of this study was to investigate the relationships among individual characteristics of women (age, personality traits, self esteem) and the socio-psychological factors (appearance schema, perceived social support, appearance appraisal) resulting in

utilization of different coping strategies to overcome body dissatisfaction (avoidance, appearance fixing and, positive rational acceptance). The findings from this study could be utilized by counselors to emphasize on those protective factors that can prevent women from negatively appraising their appearance and use of harmful strategies to overcome their body dissatisfaction.

Theoretical Framework

In order to understand the process of stress and coping in the domain of appearance, this study applied Lazarus and Folkman's (1984) cognitive theory of psychological stress and coping. Utilizing the transactional stress and coping model, the person and the environment are in a dynamic, mutually reciprocal, bidirectional relationship and coping efforts constantly change to meet evolving demands of a stressful situation (Penley, Tomaka, & Wiebe, 2002). According to this model, an individual's cognitive appraisal of an event influences his/her stress response and coping efforts. Thus, the premise of this theoretical approach emphasizes that in order to determine an individual's coping strategy or strategies it is essential to analyze his/ her appraisal of the demanding situation.

Appraisal is an evaluative process that reflects the person's subjective interpretation of the event, hence it is not the event that causes stress but appraising an event as 'stressful' that generates stress (Carver, Scheier & Weintaub, 1989; Folkman et al., 1986). Besides, when the threat caused by a stressor exceeds the available coping skills and resources of the person it results in stress (Pakenham & Bursnall, 2006;

Folkman et al., 1986). Appraisal occurs at two levels, in the primary phase, an individual evaluates the threat involved in a given situation and in case it is appraised as threatening or challenging, the individual engages in secondary appraisal which involves the evaluation of an individual's resources to manage the event (Hassinger, Semenchuk & O'Brien, 1999; Lazarus & Folkman, 1984). Thus, primary appraisal is when an individual encounters an external event; he/she categorizes the encounter as relevant, positive or stressful and its significance to their well being. Secondary, appraisal takes place once the stressor has been identified and the individual takes into account the available coping strategies that could reduce stress (Lazarus & Folkman, 1984). Finally, appraisal involves both outcome expectancy and efficacy expectation (Bandura, 1977; Lazarus & Folkman, 1984), whereby the available coping options are assessed in order to determine that a particular coping strategy will reduce stress and that the strategy can be executed effectively by the individual. Although the processes involved in appraisal are viewed as a linear sequence, they do not necessarily occur in an unbroken stream (Lazarus & Folkman, 1984). Thus, in this study appraisal was operationalized as one construct.

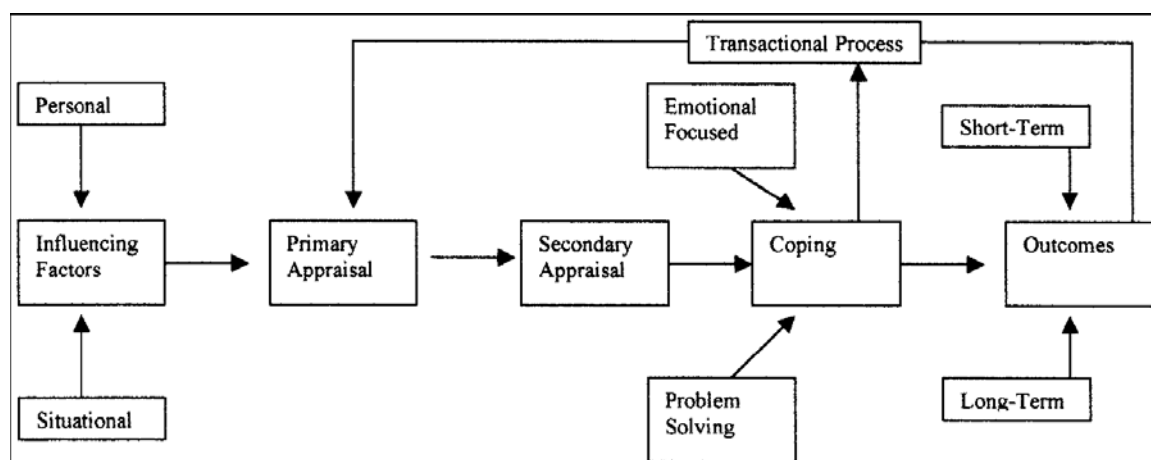


Figure 1.1. Lazarus and Folkman's (1984) transactional stress and coping model

Research Questions

The research questions addressed in this study are as follows:

- Do individual traits such as self esteem and personality determine the appraisal of one's appearance?
- What is the role of social support in the appraisal of one's appearance?
- What psychological factors determine individuals' choice of coping strategy to overcome dissatisfaction with one's appearance?
- Are there significant relationships between individual characteristics (age, self esteem and, personality) and the coping strategies they chose to overcome their dissatisfaction with appearance?
- Do socio-psychological factors of perceived social support, appraisal and schema moderate or mediate the relationship between individual characteristics (age, self esteem and, personality) and the coping strategies they chose to overcome dissatisfaction with their appearance?

Objectives of study

In order to fulfill the purpose of the research study, four objectives were identified:

1. To identify the relationships among self esteem, perceived social support and appearance appraisal.
2. To identify the relationships among personality, perceived social support and appearance appraisal.

3. To examine the relationships among personality, age and body image coping strategies.
4. To examine the mediating effect of appearance schema and, appearance appraisal on the relationships among personality, age and body image coping strategies.

The above four objectives of this study were fulfilled by conducting two research studies. Objectives 1 and 2 were addressed in Study1, whereas objectives 3 and 4 were addressed in Study 2. To establish the theoretical foundation for the research, literature was reviewed and summarized for each of the two studies separately. In Study 1, I addressed the concepts of self esteem, personality perceived social support and appraisal of body dissatisfaction. In Study 2, I addressed the concepts of personality, age, appearance schema, appearance appraisal and body image coping strategies.

RELATIONSHIP AMONG SELF ESTEEM , PERSONALITY,
SOCIAL SUPPORT AND APPEARANCE APPRAISAL

Reddy, S. and Burns, L. D.

CHAPTER 2

Study 1

Introduction

Based on social learning theory (Bandura, 1986; 1977), we know that family members, peers and even strangers can influence an individual's beliefs, attitudes and behaviors in a given situation, thus the indomitable influence of the one's social environment is clear from Douglas's (1973, p.93) remark, "the social body constrains the way the physical body is perceived." Societal considerations affect both perceptual and attitudinal components of body image among women (Monteath & McCabe, 1997). Research in the area of body image clearly indicates that socialization processes take place through media, peer, family and contributes towards negative attitudes developed by women towards their own appearances (Paxton, Shutz, Wertheim, & Muir; 1999; Hesse-Biber, 2007; Groesz, Levine, & Murnen, 2002). As Giddens (1991, p.172) observes, "all of us, in modern social conditions, live as though surrounded by mirrors; in these we search for the appearance of an unblemished, socially valued self". Thus a person's social-cultural environment can create a stressful environment in which the individual is pressured to comply with the prevalent norms of physical appearance.

Folkman and Lazarus (1984, p.19) define psychological stress as, "a particular relationship between the person and the environment that is appraised by the person as taxing or exceeding his or her resources and endangering his or her well being". Thus, stress arises when an individual perceives and judges that his/her resources are taxed or

overwhelmed in a given situation. Although as per transactional model of stress and coping (Lazarus & Folkman, 1984), variability in stress can be examined by knowing one's cognitive appraisal (or evaluation) of person-environment transaction(s), one's coping strategy, coping efficacy and the effectiveness of the coping strategy (Aldwin, 2007); it is also important to take into consideration the resources that an individual accesses in the stressful situations.

One of the resources that individuals access when coping with a stressor is social support (O'Brien & DeLongis, 1997) which can take the form of formal or informal support. Social support operates by affecting one's assessment of the stressor, knowledge of coping strategies and one's self-concept (Cohen & Hoberman, 1983) which could have both short-term and long term implications on an individual's psychological functioning. Social support can also influence the appraisal process through reappraisal of resources and stressor. In studies related to health and well-being, positive outcomes and buffer effects of social support have been found (Dunkel-Schetter & Bennett, 1990) such as healthy coping abilities, decreased depression, increased personal competence in time of stress, generalized positive affect, sense of stability, recognition of self worth and life satisfaction or psychological well being (Langford et al., 1997).

The process of assessing or appraising an event as stressor or non-stressor can depend on both stressor characteristics as well as individual characteristics of the person. Thus, although the socio-cultural perspective for body image posits that socio-cultural values influence individual values and behavior (Jackson, 2002), there are also those who remain resilient to these pressures (Chaote, 2005), which clearly indicates that individual

differences are important in evaluating (or appraising) the stressfulness of a given situation or transaction. Hence, the inclusion of personality and self esteem measures as control variables when modeling the effects of social support on appearance appraisal makes it possible to examine individual differences in perceived social support and its effect on appearance appraisal. In general, the extent to which individual's personality and self esteem operate as determinants of perceived social support is critical to fully understanding the relationship between perceived social support and appearance appraisal.

Literature Review

To establish the theoretical foundation for the research, literature was reviewed and summarized. In the current study, I have addressed the concepts of self esteem, personality perceived social support and appraisal of one's appearance. In this section I discuss and explain the concepts of global self-esteem, personality traits, perceived social support and, appearance appraisal. A summary of research related to body dissatisfaction utilizing these concepts is presented and the description of how these variables will be utilized in this study has also been provided. Finally, based on the literature review the hypotheses were developed for investigation and the results presented from the hypotheses testing.

Self esteem

One of the two independent variables in this study is global self-esteem, a critical component of an individual's self concept that determines self evaluative processes

(Newcomb & Keefe, 1997). Self-esteem refers to people's representations of their typical, or general, global feelings of self-worth and self-esteem level reflects people's representations of how they typically feel about themselves across time and context (Rosenberg, 1986). Individuals with high and low self-esteem differ in a number of beliefs they hold about themselves and these beliefs influence how they act in particular situations, the goals they pursue in life, how they perceive life events and interactions with other individuals, the strategies they utilize to cope and adapt to the changing environments (Robin et al., 2001). Exline and Lobel (1997) and Baumeister, Tice, & Hutton (1989) emphasize that when faced with potentially threatening information, individuals with high self-esteem have multiple means of preserving a positive view of the self. These techniques may include drawing upon various cognitive and behavioral techniques that could protect or repair their self-images. Since the maintenance and enhancement of self-esteem helps people feel good about themselves (Schutz, 1998), it is obvious that individuals with higher self-esteem tend to hold more positive beliefs about themselves than do individuals with lower self-esteem (Story, 2004; Schutz, 1998). Schutz's (1998) also found that with increasing self-esteem people felt less threatened and stressed by events that included failure and criticism, thus people with higher self-esteem regarded a threat to one aspect of their self-image as less severe than subjects with lower self-esteem.

Researchers of body image found that lower satisfaction with one's own body is related to lower self-esteem (Franzoi & Shields, 1984; Rosen & Alan, 1986). The importance of physical self as an important aspect of one's 'self system' is argued for by

Fox (1997), and which is further emphasized by Buss (2001), who identified appearance and social influence among the sources of self-esteem besides ability, mortality, social rewards, and vicariousness.

Monteath and McCabe's (1997) findings support the argument that self-esteem mediates the relationship between societal factors and body satisfaction. It is also not surprising that self esteem is positively correlated with perceived adequacy and availability of social support (Dunkel-Schetter, Folkman & Lazarus, 1987; Sarason et al., 1990) because it is through close relationships that one's sense of self worth develops or increases (Newcomb & Keefe, 1997).

There are gender differences that can not be ignored when discussing the association between self esteem and appearance of individuals. Harter's (1993) cross sectional study of boys and girls revealed that physical attractiveness was an important factor contributing to self esteem among girls and that decreased perceptions of attractiveness among girls was associated with lower self-esteem, although the results were not consistent across both the genders. Thus, it is not surprising that women who do not attribute excessive importance to weight and shape in determining their self-esteem tend to be protected from negative body image (McFarlane, McCabe, Jarry, Olmsted, & Polivy, 2001).

Personality

This study utilizes personality traits as independent variables. According to Newcomb and Keefe (1997), personality refers to several aspects of individual psychological functioning that reflect the unique characteristics, attitude, affect and

propensities of an individual. It has been found that an individual's personality is developed early in life, become more stable with increasing age and has been found to be consistent cross-sectionally (Newcomb & Keefe, 1997), thus personality traits reflect patterns of behavior that could be generalized over time and across situations (Suls & David, 1996; Procidano & Smith, 1997). According to the traits perspective, traits are not behavior but summary statements describing the probability and latency of response in terms of different sensitivities to situations and differential response biases (Revelle, 1995). As explained by Schutz (1998), in personality psychology taxonomy would permit researchers to study specified domains of personality characteristics as in the case of five factor model (Goldberg, 1993), rather than examining separately the variety of attributes that characterize individuals. In the five factor model, the dimensions are derived from analyses of the natural-language terms that people use in order to describe themselves and others. Caspi, Roberts & Shiner (2005) explain that in personality research the broad traits such as, Extraversion, Neuroticism, Openness, Agreeableness and Conscientiousness represent the most general dimensions of individual differences in personality; which are determined by lower level traits (e.g., sociability, dominance) that, in turn, are indicated by more specific responses (e.g., talkative, good at leading others).

The characteristics that differentiate Neuroticism in individuals are anxiousness, vulnerability to stress, lacking of confidence, easily frustrated, prone to guilt, moodiness, anger, and insecurity in relationships; whereas the traits associated with Extraverts are outgoing, expressive, energetic, and dominant that includes lower order traits: social inhibition or shyness (feelings of discomfort in social encounters), sociability,

dominance, and energy/activity level (Caspi, Roberts & Shiner, 2005). However, individuals with higher scores in Agreeableness are characterized as helpful, trusting and straightforward, whereas those high in Conscientiousness are reliable, hard working, and self disciplined (Costa & McCrae, 1985). According to Caspi, Roberts and Shiner (2005), Conscientiousness is indicated by six lower-order traits such as, self-control versus behavioral impulsivity, attention, achievement motivation, orderliness, responsibility, and conventionality. Lastly, the personality type Openness is characterized by core traits such as, imaginative, creative, aesthetic sensitivity, quick to learn, clever and insightful (Caspi, Roberts & Shiner, 2005).

The personality traits of Extraverts indicate that they are highly motivated to interact and socialize with others and thus, the probability that extraverts would seek social support during times of stress; similarly, Agreeable people have a higher probability of receiving social support as they are more likely to have extensive social networks (Watson, David & Suls, 1999). Pierce et al. (1997) observe that personality may influence social support processes in a number of ways such as individual's ability to elicit support from others, individual's participation in constructing their social network, appraisal or interpretation of support provider's behavior and, support recipients ability to utilize the assistance provided. While investigating social support it is important to consider that the personality traits of the social support recipients differ (Jung, 1987), where some individuals being more likeable than others or more capable of evoking feelings of sympathy in others (Pearlin, 1985), at the same time it also likely that individuals might differ in their utilization of social support (Dunkel-Schetter, Folkman,

& Lazarus, 1987) and persons with certain personality styles may have varying needs of social support (Hobfoll, 1983).

As mentioned above, certain patterns of behavior are associated with specific personality traits over time and across situations. In body image literature, Davis and Fox (1993) found Neuroticism and body focus (a construct related to concept of centrality) had an interacting effect in women. Thus, at high levels of Neuroticism and body focus, women reported excessive weight preoccupation. Davis (1997) points out that body image has a dual role both as a consequence and as an antecedent of psychological functioning and thus, the most commonly reported correlated of weight and diet concerns among women are low self esteem, high Neuroticism, and perfectionism.

Social support

Social support is the assistance and protection provided to an individual by another person or persons (Langford et al., 1997; Cohen et al., 1985; Cohen & Syme, 1985). Social support can be physical, instrumental, material or emotional resource that one's social network provides. Social support involves the interaction between persons experiencing real or perceived personal problems and stressful life events and their close friends and relatives (Jung, 1987). The three most commonly identified functions of social support are: providing instrumental help (aid), emotional support (to) and affirmation which are acknowledgment of one's value or agreement with one's attitude (Aldwin, 2007; House & Kahn, 1985; Jung, 1987). Social support operates by influencing one's appraisal of the stressfulness of a situation (Cohen et al., 1985) through the provision of information and advice in times of stress (Thoits, 1986). According to

Jung (1987), social support provides coping assistance which results in cognitive or affective changes in the receivers. The social support providers reassure, listen, and discuss problems in order induce cognitive or perceptual changes by restructure the recipients' appraisals of self, the problem or situation, blame or responsibility, possible remedies, or future prospects. On the other hand affective changes occur as a result of the support provider actions such as, emotional expressions of love, interest, and concern, or even anger in some cases, might serve to activate the motivation and affect of depressed persons.

Research (Lee-Baggley, Preece, & DeLongis 2005; Ryan & Solky, 1997; Langford et al., 1997) clearly shows that increased social support can buffer against psychological distress (Feldman, Downey, & Schaffer-Neitz, 1999), assist in the maintenance of physical and psychological well-being (Cohen & Syme, 1985; Thoits, 1982), has a direct and immediate impact on one's ability to cope with stressors through perceived control, positive control, positive affect, sense of stability, and recognition of self (Stroebe & Stroebe, 1996) and it is associated to positive mental health outcomes through successfully dealing with stress (O'Brien & DeLongis, 1996), lower rates of depressive symptoms, milder temperament, lower stress, decreased loneliness, and a more positive self-image (Pierce, Sarason, & Sarason, 1991; Reis & Frank, 1994). Thus, social support is effective in enhancing well-being because it is inarguably an important provider of coping assistance (O'Brien & DeLongis, 1997; Thoits, 1986). Although according to Cohen et al. (1985), perception of available support is a more sensitive indicator of its buffering effects than objective existence of that resource because the

appraisal of stress is based on a person's beliefs about available support as opposed to its actual availability. DeLongis and Holtzman's (2005) study reveals that when support receivers felt supported, they used a greater variety of coping strategies. Lincoln, Chatters, and Taylor's (2003) results indicated that perceived support showed significantly stronger relations with emotional functioning measures than either received support measures or counts of supportive individuals. Procidano and Smith (1997) clarified that perceived support and enacted support has no relation with each other and this is because people have a tendency to construe other's behavior in terms of traits. This process happens spontaneously and requires very little information.

Women's greater propensity to seek social support is especially consistent across studies (Thoits, 1995). Procidano and Smith (1997) summarized that women reported higher perceived support, had more effective support skills, were more likely to seek support openly and tended to establish more functional support networks. Chaote (2005) emphasized that women function most optimally in the context of emotionally supportive relationships through which they can express these conflicted feelings and that it is a hallmark of adaptive development for women.

The body image literature suggests that regardless of people's actual physical characteristics, the self-perceptions, beliefs and feelings related to their own appearance are likely to influence how they believe others view them; thus although social feedback is undoubtedly important in shaping an individual's view of their appearance, the individuals' beliefs and behaviors can also influence the nature of feedback (Cash & Fleming, 2002). Hence, those individuals who have poor social and personal interactions

viewed their bodies negatively (Lerner & Javanovic, 1990). It has also been found that lower self esteem is associated with lower satisfaction with one's own body (Franzoi & Shields, 1984; Rosen & Alan, 1986) probably resulting from a diminished sense of self worth. Although, one of the protective factors against negative body image development is social support from friends and family (Striegel-Moore & Cachelin 1999; Chaote, 2005), eating disorder literature indicates that one's family and friends can mediate the cultural messages associated with thinness (Hesse-Biber, 2007).

Perceived social support

Based on previous research findings (Cohen & Wills, 1985; Heller & Swindle, 1983) we know that perceived social support can reduce stress by influencing the appraisal process. Perceived social support is the subjective judgment that one's social network will provide effective help during times of need (Lakey & Scoboria, 2005). The perception or belief pertaining to availability emotional support appears to be a much stronger influence on mental health than the actual receipt of social support (Dunkel-Schetter & Bennett 1990). Although, there is a weak relationship between enacted social support and perceived social support, perceived support is undoubtedly influenced in part by past experiences such as perceptions of family environment and to the family member's actual reactions to the person (Mankowski & Wyer, 1997).

Primarily viewed as a form of social influence, there has been increasing awareness that the personality of support recipients also play a role in social support processes (Pierce, Lakey, Sarason, & Sarason, 1997), thus in this study the effect of personal characteristics of the perceiver (using personality and self esteem) and their

perceived social support have been investigated. As explained by Lakey and Scoboria (2005), trait and social influence models are not mutually exclusive, and both types of mechanisms could operate simultaneously. For example, when a support recipient judges the supportiveness of a given provider, this judgment reflects both the recipient's characteristic and levels of perceived support (i.e., trait perceived support), as well as the perceived support that results from interacting with or thinking about that specific support provider.

This study also investigated the influence of perceived social support on the resultant appraisal of the stressor (sociocultural appearance ideals) because the underlying mechanism of the stress-buffering effect of social support. As clarified by Lakey and Cohen (2000), social support results in reducing the perceived threat of situation and increasing the belief that necessary resources are available, thereby affecting the appraisal of threat.

Appearance Appraisal

Appraisal is an evaluative process that reflects the person's subjective interpretation of the event, hence it is not the event that causes stress but appraising an event as stressful that generates stress (Carver, Scheier & Weintaub, 1989; Folkman et al., 1986). Appraisal process takes places once the stressor has been identified (determined as relevant or a threat to one's well being) and the available coping strategies or resources to overcome stress has been evaluated (Hassinger, Semenchuk & O'Brien, 1999; Lazarus & Folkman, 1984). In this study the influence of appraisal of one's

appearance on the relationship between individual traits (personality and self esteem) are examined.

Appearance appraisal has been operationalized in this study as the psychological assessment of prevalent socio-cultural appearance standards. In a culture where appearance is given immense importance, the social environment may impose standards on one's appearance and require individual to cope with such standards. The prevailing socio-cultural appearance standards (external environment) may or may not result in stress depending on the individual's assessment of these standards (or its significance) as either threatening or relevant to their well being.

The two objectives of this research study were: (1) to identify the relationships among self esteem, perceived social support and appearance appraisal; (2) to identify the relationships among personality, perceived social support and appearance appraisal. The objectives were fulfilled through Study 1 in which the following six hypotheses were tested.

H1: Self esteem will be a significant predictor of appearance appraisal.

H2: Perceived social support will be a significant predictor appearance appraisal when controlling for self esteem effects.

H3: Perceived social support will significantly moderate the relationship between self esteem and appearance appraisal.

H4: Personality traits (Neuroticism, Extraversion, Agreeableness, Conscientiousness and, Openness) will significantly predict appearance appraisal.

H5: Perceived social support will be a significant predictor appearance appraisal when controlling for personality effects.

H6: Perceived social support will significantly moderate the relationship between personality traits and appearance appraisal.

From hypotheses H1 to H6 two models for understanding the relationships between independent and dependent variables in Study 1 were developed. The following models were developed to indicate the relationships investigated in this study.

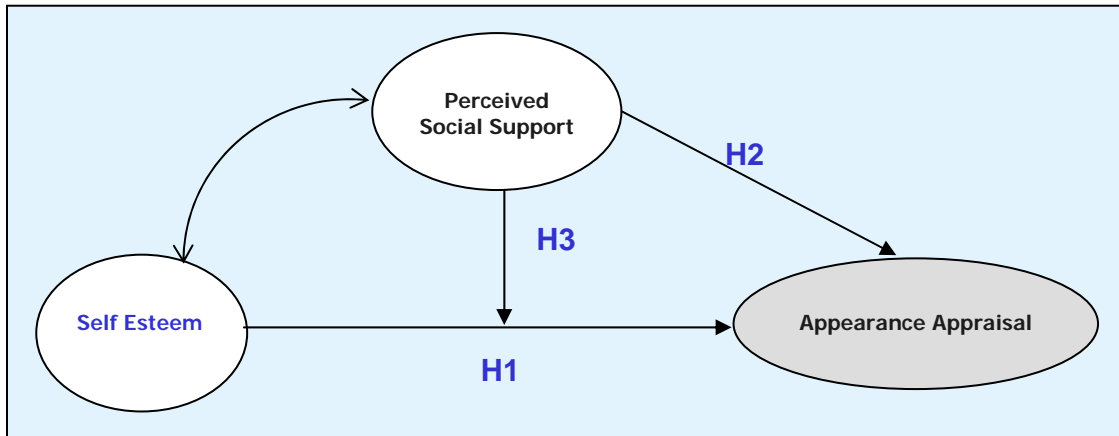


Figure 2.1 Hypothesized Model 1. Testing moderating effect of social support on the relationship between self esteem and appearance appraisal

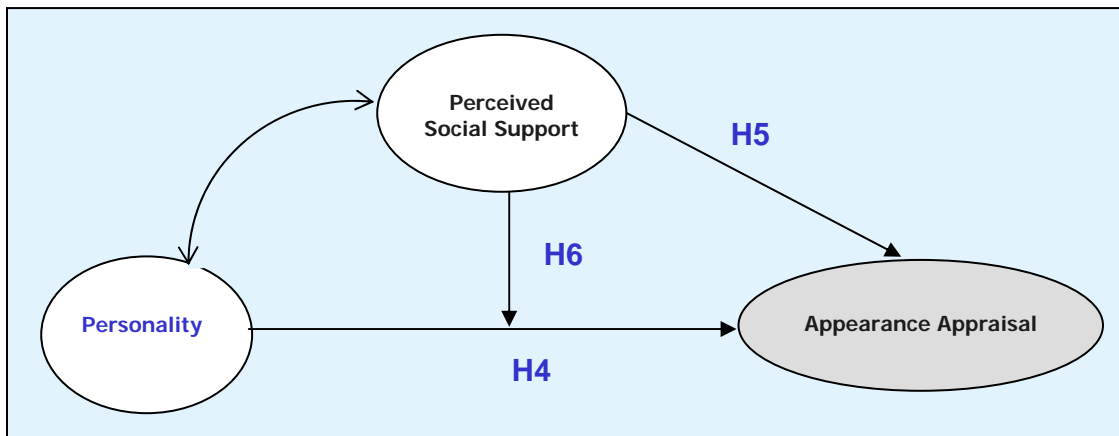


Figure 2.2 Hypothesized Model 2. Testing moderating effect of social support on the relationship between personality and appearance appraisal

Method

This study investigated the relationships among the variables self esteem, personality, social support and appearance appraisal. This study utilized both quantitative and qualitative approaches to fulfill the objectives. I begin this method section with quantitative approach to test the hypotheses H1 to H6 and present the results from the analysis performed. Following which I present my qualitative method of semi structured interviews, analysis and results.

As seen in Figure 2.1, hypothesized model 1 outlines the hypotheses 1, 2 and 3. The model clearly shows the three variables and the relationships that are tested in this study. Similarly, Figure 2.2 is the hypothesized model 2 that outlines the hypotheses 4, 5 and 6.

All variables in this study were measured on a Likert scale of 1(strongly disagree) to 5(strongly agree) suggesting that the variables would be identified as continuous variables for analysis purpose. In this study multiple regression was utilized to assess the predictive utility of the variables. The moderating effect of perceived social support (PSS) was tested using interaction variable; in model 1 the interaction variable used was “self esteem X perceived social support” and in case of model 2 the interaction variable used was “personality trait X perceived social support”.

Instrument Development

Previous researchers on body image, dress and appearance management have used a variety of instruments to measure both psychological and sociological aspects of

appearance-related domains. However, none of the instruments specifically measured the appraisal pathway that may determine the individuals' dissatisfaction or satisfaction with their appearances. Also there were no scales in social psychology of appearance that measured perceived social support. Thus for the purpose of this study, two new instruments were designed to measure the appraisal of one's appearance and perceived social support.

The process of developing the instrument was conducted in two stages. In the first stage, preliminary data were collected from 147 undergraduate female students enrolled in two courses offered by the Department of Design and Human Environment. Self-administered questionnaire containing 80 items that measured participants' perceived social support (PSS) in the domain of appearance and a subsequent section consisting of 14 items that measured appearance appraisal (AA) were distributed. The second stage included the final data collection in which additional questions were added to the appearance appraisal part of the questionnaire. In one class participants received extra credit for their participation; in the other class no incentive was given to participate in the survey. The survey respondents were female undergraduate students in the age range of 18-25 years.

In the following section a detailed description of the scale development process has been provided. The development of perceived social support (PSS) scale and that of appearance appraisal differed in the steps that were taken to arrive at the final scale, although the same statistical methods (principal component analysis, Varimax rotation and alpha reliability) of analysis were used for developing both scales.

Perceived Social Support Scale

The PSS scale was developed based on Multidimensional Scale of Perceived Social Support (Zimet et al., 1988; Zimet et al., 1990) and, Hesse-Biber's (2007) qualitative study on 'how young women experience being a body in their families, peer groups and school environments'. In order to measure the perceived social support (PSS) from each category of social support provider: parent 1, parent 2 (if applicable), sibling(s), friend, and significant other, 16 items were used per category (see Table 2.1). The categories of parent 1 and parent2 were used taking into consideration that there are a growing number of single parent families and families with same gender parents.

The alpha for PSS parent1 (mother) was 0.848, for PSS parent2 (father) was 0.828, for PSS sibling(s) was 0.858, for PSS friend(s) was 0.806 and, for PSS significant other was 0.868. The factor analysis was conducted in order to detect the patterns of interrelationships among variables and to determine which items were to be eliminated or retained in the item pool based on the clusters of variables and their redundancy (Agresti & Finlay, 1999; Clark & Watson, 1995). Whereas, the Cronbach alpha was used to create a theoretically based measure of a target construct with the aim to measure one target construct and only this construct as precisely as possible (Clark & Watson, 1995).

The final developed scale was a result of performing principal component analysis, Varimax rotation and alpha reliability test in three steps as described below:

STEP 1: the first principal component analysis revealed at least four factors with eigen values over 1.00 for each of the five social support provider category. Hence in order to reduce the discrepancy in the items measuring PSS from each of the five categories of

Table 2.1

List of 16 items used to develop the Perceived Social Support Scale

Variable	Item description
1	He/she helps me in maintaining my self confidence when I feel dissatisfied with my appearance.
2	He/she emphasizes more important aspects of my life than appearance.
3	He/she discusses the importance of physical health over physical appearance.
4	He/she suggests that I must do something to improve my appearance.
5	He/she does not care how I look.
6	He/she believes that appearance is an important aspect of how one is evaluated (or treated) by others.
7	He/she appreciates my achievements in other spheres of my life more than my appearance.
8	He/she makes negative comments on how I look.
9	He/she provides me with emotional support when I am unhappy with my appearance.
10	He/she appreciates my unique qualities other than my appearance.
11	He/ she passes negative remarks on other people's appearance.
12	Engages in activities that can improve his/her appearance.
13	Engages in activities to improve his/her health.
14	He/she appreciates individuals on the basis of their appearance.
15	He/she rarely discusses other people's physical appearances.
16	He/she frequently engages in activities that can help in maintaining or reducing his/her weight.

social support, I reduced the number of factors to one crucial factor by eliminating items that closely resembled one another or lacked uniqueness.

STEP 2: A second factor analysis was conducted which revealed one factor with eigen values over 3.00 from this analysis all items with factor loading over .500 were selected. I also conducted Cronbach Alpha to test reliability.

STEP 3: to arrive at the six common items seen in Table 2.3, I chose the common items that measured PSS from each category of social support provider and then ran factor analysis as well as alpha reliability test. This final factor analysis (see Table 2.2) was performed with the intention that items loading .600 would be kept as potential items. The analysis revealed that factor loading of each of the six items for all five categories of social support providers was more than .600 and that alpha was more than .70.

As seen in Table 2.3, the list of six finalized items used to measure PSS in this study were decided on the basis of the above described Factor analysis and alpha reliability results.

Table 2.2

Results of the Final Factor Analysis

Relationship Initial Eigen Values					
Category	Factor	Total	% of Variance	Item	Loading
Parent1 (Mother)	1	3.54	28.47	pss1. He/she helps me in maintaining my self confidence when I feel dissatisfied with my appearance.	.845
			25.64	pss2.He/she emphasizes more important aspects of my life than appearance.	.862
			55.61	pss3. He/she discusses the importance of physical health over physical appearance.	.666
			42.36	pss7. He/she appreciates my achievements in other spheres of my life more than my appearance.	.759
			52.40	pss8. He/she makes negative comments on how I look.	-.686
			40.81	pss9. He/she provides me with emotional support when I am unhappy with my appearance.	.769
Parent2 (Father)	1	3.27	33.21	pss1. He/she helps me in maintaining my self confidence when I feel dissatisfied with my appearance.	.817
			29.81	pss2.He/she emphasizes more important aspects of my life than appearance.	.837
			61.42	pss3. He/she discusses the importance of physical health over physical appearance.	.621
			51.65	pss7. He/she appreciates my achievements in other spheres of my life more than my appearance.	.695
			57.03	pss8. He/she makes negative comments on how I look.	-.655
			39.00	pss9. He/she provides me with emotional support when I am unhappy with my appearance.	.781

Relationship Initial Eigen Values

Category	Factor	Total	% of Variance	Item	Loading
Sibling(s)	1	3.55	28.22	sb1. He/she helps me in maintaining my self confidence when I feel dissatisfied with my appearance.	.847
			27.02	sb 2.He/she emphasizes more important aspects of my life than appearance.	.854
			51.79	sb 3. He/she discusses the importance of physical health over physical appearance.	.694
			40.52	sb 7. He/she appreciates my achievements in other spheres of my life more than my appearance.	.771
			60.90	sb 8. He/she makes negative comments on how I look.	-.625
			35.63	sb 9. He/she provides me with emotional support when I am unhappy with my appearance.	.802
Friend(s)	1	3.16	23.21	f1. He/she helps me in maintaining my self confidence when I feel dissatisfied with my appearance.	.876
			36.03	f2.He/she emphasizes more important aspects of my life than appearance.	.799
			71.76	f3. He/she discusses the importance of physical health over physical appearance.	.531
			51.92	f7. He/she appreciates my achievements in other spheres of my life more than my appearance.	.693
			60.42	f8. He/she makes negative comments on how I look.	-.624
			40.37	f9. He/she provides me with emotional support when I am unhappy with my appearance.	.772
Sig. other	1	3.76	33.79	so1. He/she helps me in maintaining my self confidence when I feel dissatisfied with my appearance.	.813
			18.11	so2.He/she emphasizes more important aspects of my life than appearance.	.904
			64.05	so3. He/she discusses the importance of physical health over physical appearance.	.599
			26.95	so7. He/she appreciates my achievements in other spheres of my life more than my appearance.	.854
			52.63	so8. He/she makes negative comments on how I look.	.688
			27.65	so 9. He/she provides me with emotional support when I am unhappy with my appearance.	.850

Table 2.3

List of 6 finalized items in the Perceived Social Support Scale

Item Description
He/she helps me in maintaining my self confidence when I feel dissatisfied with my appearance.
He/she emphasizes more important aspects of my life than appearance.
He/she discusses the importance of physical health over physical appearance.
He/she appreciates my achievements in other spheres of my life more than my appearance.
*He/she makes negative comments on how I look.
He/she provides me with emotional support when I am unhappy with my appearance.

The reverse coded item is identified by the star symbol ()*

Appearance Appraisal Scale

Based on Roesch and Rowley's (2005) multidimensional, dispositional measure of appraisal, a scale was developed to measure appearance appraisal. The 16 items used to measure the appraisal construct (see Table 2.4) were: *challenge* (representative of optimistic and self-efficacious thoughts associated with an appraisal of challenge), *threat* (representative of feelings associated with a threatening situation such as anxiety, helplessness), and *resources* (representative of an appraisal of resources available to assist in coping).

The items used to develop the appearance appraisal scale were tested for reliability using Cronbach's standardized alpha, $\alpha = 0.786$. Factor analysis (principal component analysis, PCA) with varimax rotation was conducted to determine which items were to be eliminated or retained in the item pool (see Table 2.4). Thus, the appearance appraisal resulted in a scale that consisted of 6 items (see Table 2.5); where

Table 2.4

Results of the First Factor Analysis in development of Appearance Appraisal Scale

Initial Eigen Values				
Factor	Total variance	% of	Item	Loading
1	4.862	24.31	I am willing to work on my appearance (clothes, makeup, body weight etc).	0.791
			I have skills necessary to overcome my appearance dissatisfaction.	0.597
			I think the social importance given to appearance is stressful.	0.721
			My appearance is only a small part of who I am.	0.697
			When I am dissatisfied with my appearance, I tend to feel negative about other aspects of my life as well.	0.652
			When I feel unhappy with my appearance, I discuss my feelings with someone close.	0.597
			I have help available to me, if I want to improve my appearance.	0.784
			Good looks is valuable quality a person can have.	0.684
			I have what it takes to look good.	0.688
2	3.607	18.03	I can overcome the distress caused by my appearance dissatisfaction.	0.414
			I do not let social pressure to look good affect me.	0.764
			The pressure to comply with the current appearance standards is threatening to my self beliefs.	-0.631
			The social importance given to good looks doesn't bother me.	0.554
			People don't always judge you on your looks.	0.586
			Everyone experiences distress as a result of appearance dissatisfaction.	-0.547
			No one can overcome the social pressure to look good.	-0.706
3	1.790	08.95	I become anxious, when I am under pressure to look good.	-0.661
			I don't let my appearance shortcomings bother me.	0.666
4	1.266	06.33	Feeling dissatisfied with one's appearance can have long-term consequences on the individual's self belief.	0.562
			No one can be completely satisfied with their appearance.	0.536

higher scores on ‘appearance appraisal’ scale reflected the participant’s positive appraisal of her appearance.

The principal component analysis revealed 4 factors with eigen values over 1.00. Table 2.4 for the results of the first factor analysis, from which it was decided that all items loading over .500 on more than one factor would be run through another factor analysis. Table 2.4 also includes the items which loaded over .500 on the factors without being confounded. The factor loading from second analysis revealed one factors with eigen values over 1.00. The second factor analysis was performed with the intention that items loading .600 on the factors would be kept as potential items and furthermore the number of factors being measured was reduced to one crucial factor.

Table 2.5

Results of the Final Factor Analysis in the development of Appearance Appraisal Scale

Eigen Values				
Factor	Total variance	% of	Item	Loading
1	2.949	49.16	*I become anxious, when I am under pressure to look good (Reverse).	-0.657
			I do not let my appearance shortcomings bother me.	0.824
			I can overcome distress caused by my appearance dissatisfaction.	0.653
			I do not let social pressure to look good affect me.	0.708
			Social importance given to good looks doesn’t bother me	0.672
			*When I am dissatisfied with my appearance, I tend to feel negative about other aspects of my life as well.	-0.678

Note: The reverse coded items are identified by the star symbol (*)

Final Quantitative Data Collection

Procedure

The self administered survey including instruments measuring self esteem, personality traits, perceived social support and appearance appraisal was used to collect data in this study. The comprehensive online survey and paper format survey were tested for usability and to access the time required to complete the survey. Thus, all participants were informed that the maximum time required to complete survey was 20 minutes. With prior permission from the instructors of three courses, students enrolled in Department of Design and Human Environment and Human Development and Family Sciences were requested to volunteer to participate in the study.

Measures

The survey included Rosenberg's self esteem scale, Big five inventory (BFI; John and Srivastava, 1999), perceived social support scale (see Table 2.3) and appearance appraisal scale (see Table 2.5).

Personality

In this study the personality traits of participants was assessed through the 44 item Big Five Inventory (BFI; John and Srivastava, 1999). The five factors are assessed with 8 items measuring Neuroticism (N), 8 items measuring Extraversion (E), 10 items measuring Openness to Experience (O), 9 items measuring Agreeableness (A), and 9 items measuring Conscientiousness (C). The items are rated on a five -step scale from 1 “disagree strongly” to 5 “agree strongly”. The advantages of the BFI are its efficiency,

taking only about five min. of administration time and easy to comprehend. Furthermore, BFI items are shorter and easier to understand which can be used even with less educated samples. Since this study utilizes the BFI to identify personality traits, we will present findings taking into consideration that the instruments BFI and NEO- FFI define two of the five factors, Openness and Extraversion, somewhat differently (John & Srivastava, 1999).

The inventory provides a measure of the five factors of personality: Neuroticism (N), Extraversion (E), Openness to Experience (O), Agreeableness (A), and Conscientiousness (C). Internal consistency reliabilities (α) for the BFI in the current study ranged between Extraversion, $\alpha = 0.871$ and Openness $\alpha = .762$. The reliability and validity of the scale and the convergent and discriminant correlations have been found to strong between the NEO-PI-R and the 44-item BFI in previous studies that have utilized the scale to measure personality traits (Gosling, Rentfrow, & Swann, 2003).

Self esteem

Self-esteem or global self-evaluations was assessed using the 10-item Rosenberg Self-Esteem Scale (RSE; Rosenberg, 1965). Global self-esteem reflects several factors such as people's affective states, their specific self-views, and the manner in which they frame these self-views (Johnson, 1998). Rosenberg self esteem scale is the most popular measure of the trait of self esteem, it is a questionnaire that inquires about feelings of self worth and confidence in oneself (Buss, 2001). Responses will be made on a 5-point Likert scale ranging from strongly disagree (1) to strongly agree (4) based on the participant's level of agreement with each statement. It has test-retest reliabilities

exceeding .80. Sample items include positively worded statements such as, “On the whole, I am satisfied with myself”, “All in all, I am inclined to feel that I am a failure” and “I take a positive attitude toward myself”. The RSE is scored by reversing responses on negative items and summing across all items.

Perceived Social support

To achieve the objective of this study, a scale was developed to measure perceived social support in the domain of appearance. The items in the scale enabled us to measure the perceived social support that individuals received from her parent(s), siblings, friends and significant other. The social support scale was designed to measure the perceived adequacy of support from the following sources: parent(s), sibling(s), friend(s), and significant other. The scale was developed on a 5-point Likert-type scale, ranging from strongly disagree (1) to strongly agree (5). Factor Analysis (principal component analysis and varimax rotation) were used to validate the scale and, the coefficient alpha was used in order to establish the reliability of the scale. All the 6 items that were used to measure PSS for each category of social support provider and 5 items used on the PSS scale were positively formulated items and 1 item was negatively formulated which was reverse coded. Thus, higher score indicated a positive perceived social support.

Appearance Appraisal

In addition to the PSS scale, this study also resulted in development of a scale that would measure appearance appraisal. The scale utilized 5-point Likert-type scale items,

ranging from strongly disagree (1) to strongly agree (5). No items were reverse scored. Among the 6 items used on the appearance appraisal scale, 4 were positively formulated items and 2 items were reverse coded (see Table 2.5). Although the scale measure appraisal on a continuum, a positive appearance appraisal was indicated by participants higher mean score.

Quantitative Analysis

Data were collected from undergraduate students using a self-administered survey consisting of the Rosenberg self-esteem scale, Big Five Scale measuring personality traits, appearance appraisal scale, and scale measuring perceived social support from mother, father, siblings, friends and significant others. Data were collected from the respondents using the self report technique. Multiple regression was utilized to test the moderating effect of social support on the relationship between (a) self esteem and appearance appraisal, and (b) personality and appearance appraisal.

Findings of the survey are presented in the following order:

- Demographic characteristics of the sample population
- Descriptive Statistics for Study 1
- Testing hypotheses H1 to H3 :

H1: Self esteem will be a significant predictor of appearance appraisal.

H2: Perceived social support will be a significant predictor appearance appraisal when controlling for self esteem effects.

H3: Perceived social support will significantly moderate the relationship between self esteem and appearance appraisal.

- Testing hypotheses H4 to H6 :

H4: Personality traits (Neuroticism, Extraversion, Agreeableness, conscientiousness and, Openness) will significantly predict appearance appraisal.

H5: Perceived social support will be a significant predictor appearance appraisal when controlling for personality effects.

H6: Perceived social support will significantly moderate the relationship between personality traits and appearance appraisal.

Demographic Characteristics of the Sample

The 260 female undergraduate students enrolled in DHE were approached as a part of in-class activity for extra credit, whereas students in HDFS were not offered an extra credit incentive. Although data were collected from both men and women, only data collected from female participants were used to fulfill the objective of this study. The 260 female undergraduate students were between the ages of 18 to 25 years. The ethnic background of the subjects was predominantly White American / Caucasian non Hispanic ($n=223$) with an exception of 13 African American/Black women, 4 Latin American / Hispanic women, 4 Asian/Pacific islander women, 8 Native American women and 8 were from other ethnicities or mixed ethnicities. In the sample population utilized the marital status as reported by the respondents was: 239 women were single (never married), 17 women were partnered, 2 were married, 1 was separated and 1 was divorced.

Descriptive Statistics

The hypothesized relationships between self esteem, perceived social support and appearance appraisal as well as relationship between personality, perceived social support and appearance appraisal were tested using scatter plots, Pearson's correlation and multiple linear regression.

Data collected from 260 female respondents in the age group of 18-25 years were analyzed to test the hypotheses for Study1. The rationale for the sample size was based on the number of variables measured in this study. A total of 260 female students completed the final questionnaire. The sample consisted of students from the Department of Design and Human Environment (DHE) as well as the Department of Human

Development and Family Sciences (HDFS) at Oregon State University. The data collection for this study utilized both online survey and paper format questionnaires completed by DHE undergraduates (n=198) and HDFS undergraduates respectively (n=62). Subjects enrolled in DHE were given extra credit whereas subjects enrolled in HDFS were not offered the incentive of extra credit as an exchange for participating in the study.

Before running the multiple regression analysis the data was examined using scatter plot to ensure that relationships existed among the variables and that the relationships were linear. The scatter plots as shown in Figure 2.3 and Figure 2.4 provide an assessment of the linear relationships between predicting variables and dependent variables for testing (i) H1 to H3 and; (ii) H4 to H6 respectively.

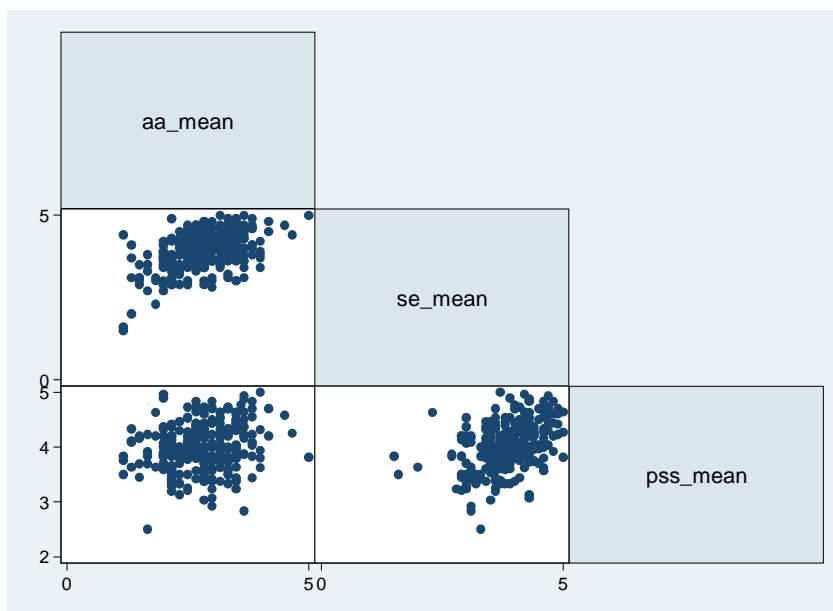


Figure 2.3 Scatter matrix of all variables included in H1 to H3

Figure 2.4, scatter matrix of all variables included in H1 to H3 indicates a linear relationship between appearance appraisal (DV) and Perceived social support from providers (mother, father, sibling(s), friend(s) and significant others). On the other hand, Figure 2.4, the scatter matrix of all variables included in H4 to H6 revealed that Neuroticism is negatively related to both appearance appraisal and perceived social support.

The line graphs (see Figure 2.5 and Figure 2.6) have also been utilized to show the direction of the relationship between the dependent variables and the predictors. Lastly, a comparison of the two residual plots revealed that the regression model would be appropriate for the analysis (see Figure 2.7 and Figure 2.8).

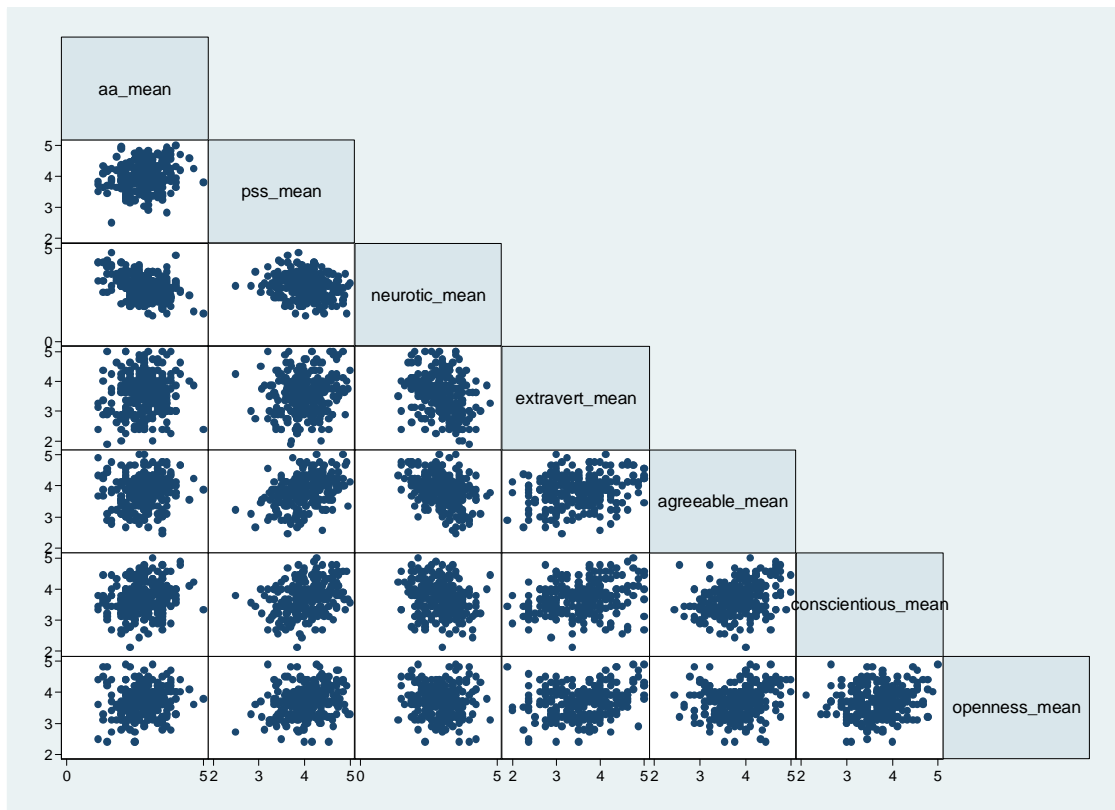


Figure 2.4 Scatter matrix of all variables tested in H4 to H6

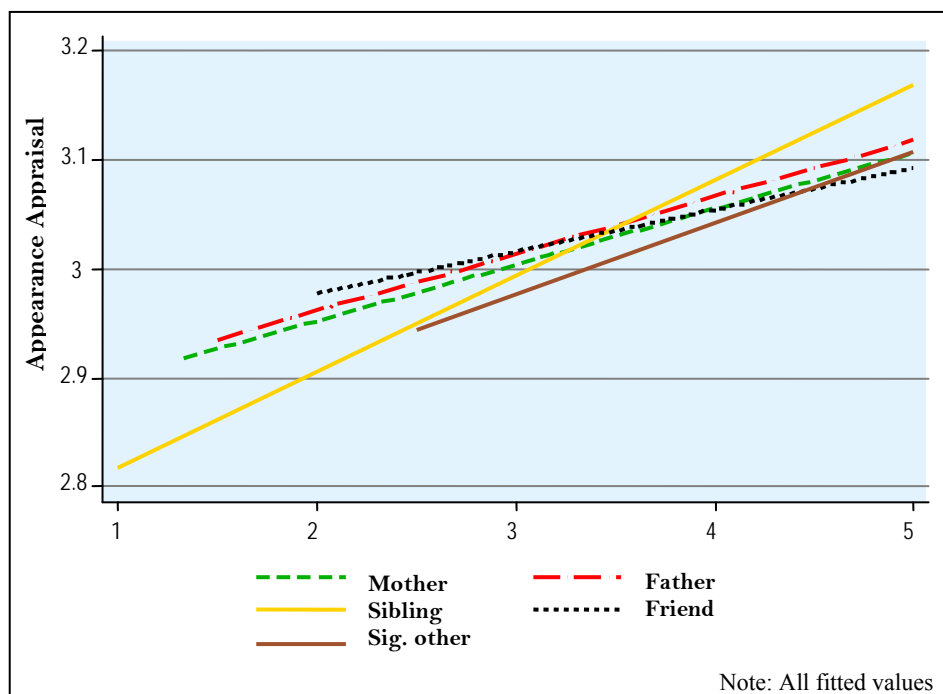


Figure 2.5 Line graph for variables tested in H1 to H3

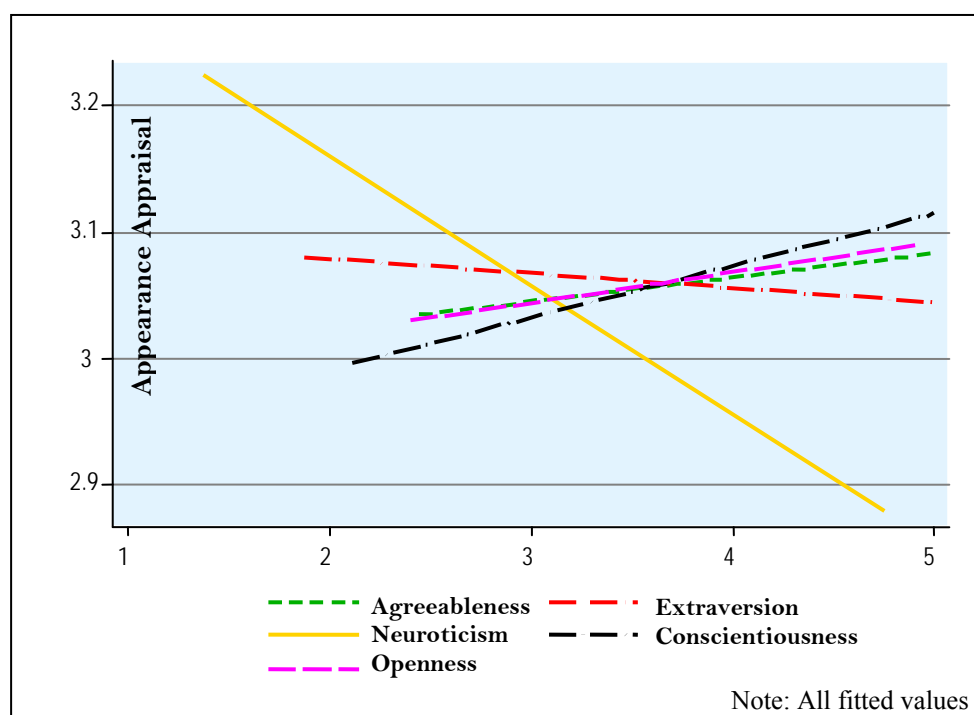


Figure 2.6 Line graph for variables tested in H4 to H6

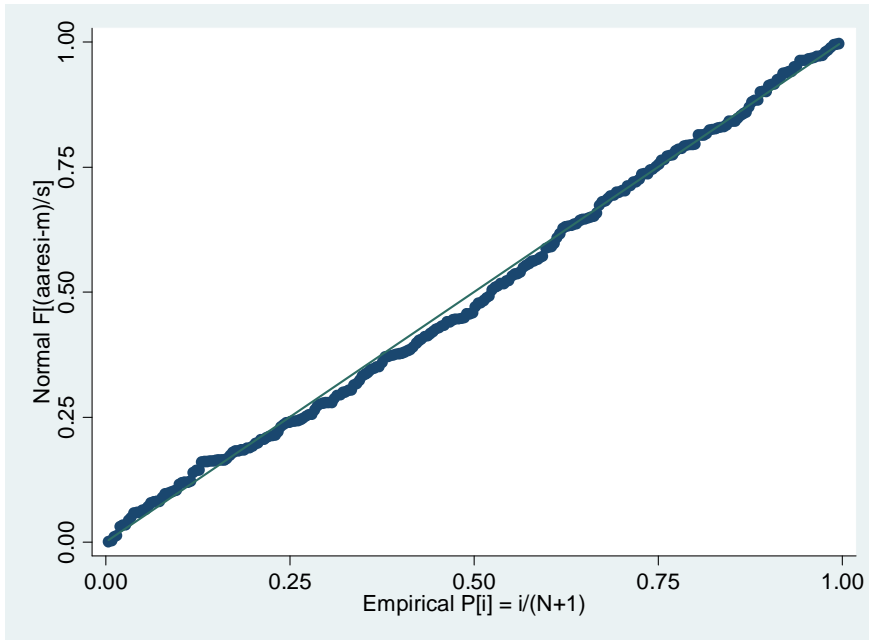


Figure 2.7 Residual plot for Appearance Appraisal when testing H1-H3

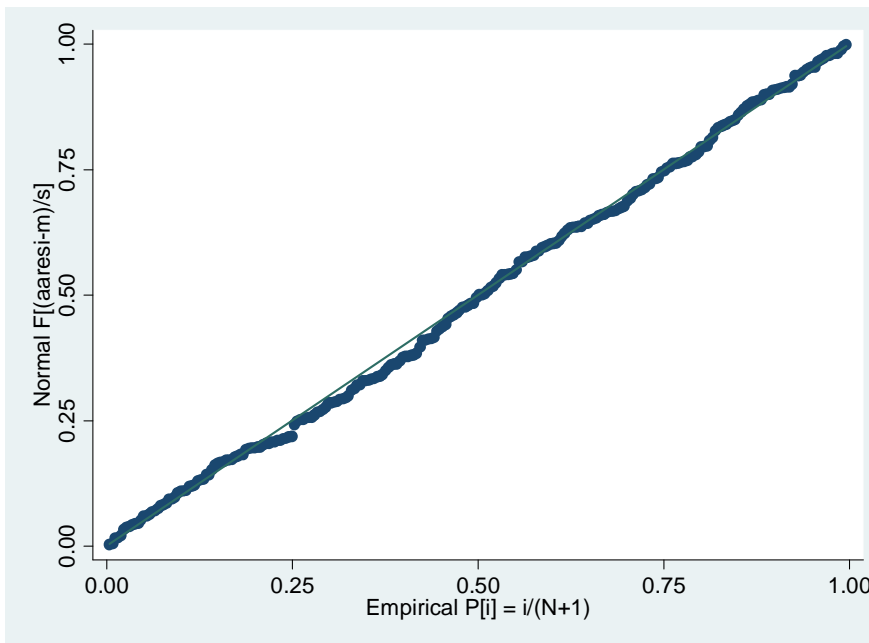


Figure 2.8 Residual plot for Appearance Appraisal when testing H4-H6

In order to achieve the objectives of Study 1, interaction variables were generated to the test moderating effect of social support on the relationship between: (i) SE on appearance appraisal (AA) and, (ii) Personality traits on appearance appraisal (AA). However, the independent variables of self esteem (SE) and personality perceived as well as the moderating variable ‘perceived social support’ (PSS) were continuous variables. Therefore, for the purpose of testing interaction effect these variables were centered around their respective mean value (Aiken & West, 1991).

Social support is one of many functions served by the individuals in one’s social network (Balaji et. al., 2007). Social network refers to individuals or groups that are associated by relationships such as, kinship, friendship, sexual behavior, monetary exchanges (Balaji et. al., 2007). In addition to providing needed social support, social networks expose individuals to social regulation, monitoring or peer pressure (Balaji et. al., 2007) which could also create stress, conflict or disappointment or lack of effective help in a given situation (Rooks & Pietromonaco, 1987). Thus as argued by Balaji et. al. (2007), the nature and quality of social ties are better indicators of social support than the quantity of social ties.

In the current study, social support was measured based on the quality of perceived support from individual’s parents, siblings, friends and significant others because although substantial literature on social support highlights the positive features, problematic social ties can having negative affect than lack of supportive relationships (Fiore. Becker & Coppel, 1983; Balaji et. al., 2007). Thus, items were phrased such that it would either indicate a positively or negatively observed or received support from the

members in respondent's social network. The scale measuring perceived social support was a Likert scale where the responses were measured from 1=strongly disagree to 5 = strongly agree. The perceived social support was not dependent on the number of members in one's social network but instead on the quality of social support received from the social network members. For example not all respondents had a network that consisted of two parents, sibling(s), friend(s) and significant other. Some respondents only had two social support providers and perceived positive social support from the two members in their network, thus number of members in one's network and perceived social support may not necessarily be positively correlated. Each respondent's perceived social support was calculated as row mean of perceived social support from the available social support providers, where some respondents had all five social support providers others had between two to four social support providers.

The following section presents the results of testing the following three hypotheses:

H1: Self esteem will be a significant predictor of appearance appraisal.

H2: Perceived social support will be a significant predictor appearance appraisal when controlling for self esteem effects.

H3: Perceived social support will significantly moderate the relationship between self esteem and appearance appraisal.

As the Table 2.6 shows, scores on the Self esteem (SE) were significantly associated with Perceived Social Support (PSS) scores from all categories (Mother,

Table 2.6

Correlations, Means and Internal Reliabilities for Measures used to test H1-H3 Study1

Measures	1	2	3	4	5	6	7	8
1. AA	1.00 n=260							
2. SE	0.490** n=260	1.00						
3. PSS (overall)	0.205** n=260	0.401** n= 260	1.00					
4. PSS Mother	0.138* n=249	0.282** n= 249	0.642** n= 249	1.00				
5. PSS Father	0.061 n=226	0.214** n=226	0.701** n=226	0.268** n=222	1.00			
6. PSS Sibling	0.145* n= 235	0.295** n= 235	0.671** n=235	0.275 n=224	0.312** n=208	1.00		
7. PSS Friend	0.150 n= 252	0.233** n= 252	0.582** n=252	0.164* n=242	0.243** n=219	0.160* n=228	1.00	
8. PSS Sig.Other	0.078 n=169	0.300** n=169	0.683** n=169	0.286** n=165	0.3735** n=149	0.242* n=160	0.403 n=166	1.00
Mean	2.813	3.878	4.018	4.109	3.906	3.771	4.146	4.271
SD	0.677	0.589	0.431	0.669	0.687	0.728	0.559	0.629
Alpha (α)	0.786	0.869	-----	0.848	0.822	0.862	0.796	0.867

Note. N= 273: AA = Appearance Appraisal Scale; SE = Self Esteem; PSS(overall) = Total social support from mother, father, sibling(s), friend(s) and significant other; PSS Mother = Perceived Social Support from Father; PSS Parent 2 = Perceived Social Support from Parent 2; PSS Sibling =Perceived Social Support from Sibling; PSS Friend= Perceived Social Support from Friend; PSS Sig Other =Perceived Social Support from Significant Other.

* $p < .05$. ** $p < .001$.

Father, Sibling, Friend and Significant other) indicating that the positive perceived social support is associated with increase in self esteem. The table also indicates that Appearance Appraisal (AA) scores were significantly associated with SE, perceived social support from mother and significant other. The associations between the measures of perceived social support from mother, father, sibling, friend and significant other were moderately significant but they did not indicate redundancy. PSS (available perceived social support) is significantly correlated to both self esteem ($r = 0.40, p < 0.001$) and appearance appraisal ($r = 0.20, p < 0.001$).

To examine the predictive utility of perceived social support from separate individuals (Mother, Father, Sibling, Friend and Significant other), measured by the 5 separate scales instead of a single measurement of overall social support and self esteem as measured by the Rosenberg global self esteem scale in accounting for variance in appearance appraisal, regression analysis was conducted for each of the measures. Row mean scores were utilized to during the analysis. Row mean ignores missing values (number of members providing social support may only 1, 2, 3 or 4. for example, if the respondent only had 2 persons providing support, then row mean will enable me to take a mean of the perceived social support from their network.

Appearance appraisal scores regressed on self esteem (SE) and overall perceived social support (PSS) from mother, father, siblings, friends and significant others revealed that the independent variables accounted for 24.95%

variance ($R^2 = 0.249$) in appearance appraisal and demonstrating significance, $F(3, 256) = 28.37, p < 0.0001$ considering that the sample size $N = 260$. Supporting H1, the analysis revealed that self esteem was significant predictor ($\beta = 0.49, p < 0.0001$) of appearance appraisal. Although the results did not support H2, as PSS failed to demonstrate significant effects on the appearance appraisal scores. Lastly, an interaction between SE and PSS failed to predict ($\beta = 0.096, p < 0.08$) appearance appraisal, thus failing to support H3.

In the following section we present the results relevant to the following hypotheses:

- H4: Personality traits (Neuroticism, Extraversion, Agreeableness, conscientiousness and, Openness) will significantly predict appearance appraisal.
- H5: Perceived social support will be a significant predictor appearance appraisal when controlling for personality effects.
- H6: Perceived social support will significantly moderate the relationship between personality traits and appearance appraisal.

Table 2.7

Correlations, Means, Standard Deviations and Alpha Reliabilities of Measures used to test H4 - H6

Measures	1	2	3	4	5	6	7
1. AA	1.00						
2. Neuroticism	-0.419**	1.00					
3. Extraversion	0.117	-0.277**	1.00				
4. Agreeableness	0.119	-0.367**	0.206**	1.00			
5. Conscientiousness	0.221**	-0.243**	0.220**	0.345**	1.00		
6. Openness	0.073	-0.090	0.213**	0.1664†	0.165 †	1.00	
7. PSS	0.205**	-0.164 †	0.131*	0.412**	0.309**	0.184†	1.00
Mean	2.814	2.955	3.556	3.835	3.696	3.695	4.018
SD	0.677	0.641	0.657	0.485	0.509	0.478	0.431
Alpha (α)	0.786	0.813	0.871	0.775	0.772	0.763	-----

Note. $N= 273$: AA = Appearance Appraisal Scale; Big five Scale was used to measure Neuroticism (N), Extraversion(E), Agreeableness(A), Conscientiousness(C) and, Openness (O); PSS (mean of Perceived Social Support from Mother, Father, Sibling, Friend and Significant Other).

** $p < .001$. † $p < .01$ * $p < .05$.

Hypothesis Testing

To test the above listed hypotheses, multiple regression and Pearson's correlations were utilized to predict the influence of personality traits (Neuroticism, Extraversion, Agreeableness, conscientiousness and Openness) and perceived social support on appearance appraisal. Correlations, means, standard deviations, and internal consistencies for all measures used in this study are presented in Table 2.7. As the Table 2.7 shows, scores on the personality traits of Neuroticism, Extraversion, Agreeableness, Conscientiousness and Openness were all significantly associated only with PSS. Besides the exception of Neuroticism which was negatively correlated with PSS, other four traits were positively correlated with PSS.

Table 2.7 also shows that among the five personality traits, Neuroticism and Conscientiousness were significantly associated with appearance appraisal. Neuroticism was negatively correlation appearance appraisal, thus indicating that increase in neurotic traits (measured on an ascending scale of 1 to 5, where 1 is the least positive appraisal and 5 is the most positive appraisal) was correlated to reduced appearance appraisal. On the other hand, Conscientiousness was positively correlated to appearance appraisal indicating that increase in conscientiousness was associated with positive appraisal of their appearance. The table also indicates that appearance appraisal (AA) scores were significantly associated with PSS. The scores on appearance appraisal and overall perceived social support (PSS) were positively correlated indicating that increase in perceived social support demonstrates a positive impact on one's appearance appraisal.

In this study we conducted multiple regression, where appearance appraisal was regressed on perceived social support and the five personality traits. The results revealed that the predictors (Personality traits, PSS and interaction variables) accounted for 23.44% of the variance ($R^2 = 0.234$) in appearance appraisal, thus demonstrating significance, $F(11, 248) = 6.90, p < 0.0001$. Supporting H4 partially, the analysis revealed that Neuroticism ($\beta = -0.418, p < 0.0001$) demonstrate significant effect; although Agreeableness ($\beta = -0.118, p < 0.077$), conscientiousness ($\beta = .112, p < 0.073$) failed to predict appearance appraisal. Results also indicated that perceived social support significantly predicted appearance appraisal ($\beta = 0.144, p < 0.05$), thereby supporting H5. The results failed to demonstrate significant effect of interaction variables (interaction between PSS and personality traits) on appearance appraisal, thus failing to support H6.

Furthermore, I also conducted analysis for the study using 260 respondents and then using only 223 White American / Caucasian non Hispanic population. The results failed to demonstrate significant difference when I conducted regression.

Qualitative Study

Interviews

The purpose of the qualitative study was performed to demonstrate the individual difference in perception of social support, the resultant appraisal of stress related to appearance. Semistructured interviews were conducted that lasted from 45 to 60 minutes. They took place in University library or an empty class room in the Department depending on the interviewee's convenience and choice. Interviews were open-ended and

designed to generate rich, detailed information. Participants were encouraged to discuss their thoughts, feelings, experiences, and personal narratives regarding the importance they placed on appearance, appraisal of social environment and their perceived social support from parents, siblings, friends and significant others. They shared their reflective moments as well as the conversations they had with others. The interviews were designed to investigate the general set of concerns derived from the literature, yet at the same time the interviews remained flexible so that new emerging themes were also explored (Patton, 1990). The prior quantitative research guided the investigation and analysis, yet allowing scope for new themes to emerge. It also helped in organizing and providing prior knowledge to assign themes to the qualitative data.

Analytic Approach

Data were coded thematically, and common patterns of behavior, reasons, and expectations were identified through repeated readings of the transcripts. This study utilized Strauss & Corbin (1998) approach. First stage involved open coding in order to generate topical themes which allowed sections of narratives to be classified into distinct categories for each code. As similarities in experience, patterns, and emergent themes appeared, categories of phenomena were labeled and entered into a code list (Berkowitz & Marsiglio, 2007); the second stage of analysis involved axial coding, or looking at the variability and linkages within topics and; the third level of analysis involved selective coding, integrating and refining categories, and relating them to other concepts.

Demographic Description

All respondents were recruited from undergraduate female population enrolled in College of Health and Human Sciences, Oregon State University. Table 2.8 shows that all women were above the age of 18 and under the age of 25 years. 13 respondents described their ethnicity as White/ Caucasian American, only one respondent was Hispanic / Mexican and another had a mixed ethnicity (Black & White American). Among the fifteen interviewees, thirteen students had Design and Human Environment as major, one student had Nutrition as major and one had Health Promotion & Health Behavior major.

Table 2.8

Demographics of Study 1 Interview Respondents

Respondent	Age	Major	Ethnicity
1	18	Apparel Design	White American/ Caucasian
2	20	Interior	White American/ Caucasian
3	20	Merchandising management	Hispanic/Mexican
4	20	Merchandising management	Black & White American
5	20	Health Promotion and Health Behavior	White American/ Caucasian
6	20	Apparel Design	White American/ Caucasian
7	21	Merchandising management	White American/ Caucasian
8	21	Apparel Design	White American/ Caucasian
9	21	Nutrition	White American/ Caucasian
10	20	Apparel Design	White American/ Caucasian
11	22	Merchandising management	White & Native American
12	23	Merchandising management	White American/ Caucasian
13	23	Merchandising management	White American/ Caucasian
14	24	Merchandising management	White American/ Caucasian
15	24	Merchandising Management and Business Marketing	White American/ Caucasian

Results

In this section, I explain young women's participation in appearance enhancing or maintenance activities by demonstrating their appraisal of social environment, the factors influencing them to engage in appearance enhancing or maintenance activities, their observation of others appearance coping strategies and their individual strategies to overcome feeling of appearance dissatisfaction.

Assessment of environment

Respondents reported their perception of the university's social environment explaining their assessment of the pressure to engage in appearance enhancing or maintenance activities. Change in environment from previous educational institute to a public University environment influences their assessment of current environment. With regard to pressures related to appearance standards, there were ten young women who assessed the current environment in the public university to be less stressful than their previous educational institute. Among the fifteen interviewees, twelve of them were in either merchandising management or apparel design majors. Among these twelve interviewees, ten of them reported that importance placed on appearance was more dominant in apparel and fashion associated discipline than in others. One respondent also reported that the lack of cultural or ethnic diversity may be one of the reasons that the campus social environment may come across as a stressful. She said, "Last year, I went to Hawaii. Everyone looks different there in BYU and I felt more comfortable with my appearance there. But here it is kind of the same lot of white people, lot of blonde girls in sweat pants."

One of the young women who had previously studied at a private high school made an observation of her current school's social environment.

I think students pay a lot of attention to what they look like. I am in a sorority and there is a lot of pressure to have like high end things and designer things and wear Seven jeans and have the biggest Coach bag or Ugg boots. I think people feel a strong need to fit in and look like everyone else.

In some cases, the prevalent stereotype of beauty for the Caucasian young women also resulted in perception of stress or assessment of stressful social environment.

I have curly hair, so I always wish that I had straight hair because it's a stereotype of what pretty girls are today. My friend and I were talking that we have been working out a lot lately and our age group go out to work cause there is a stereotype of how a healthy fit college kid, we are older than most girls in our majors so the pressure to work out and look fit.

It was also interesting to find that the social comparison or peer pressure mattered for those with lower self esteem, where as it did not have an effect on those with higher self esteem. For example, one respondent said, "but coming to college (from high school) there is...I don't know there is less pressure because I am comfortable with who I am and I have had my own style. I don't care if it is super fancy or not." Indicating the importance that young women may place on appearance of individuals, the respondent further reported about a girl friend of hers who expressed desire to be friends with those who looked good and dressed well.

One of my friends from high school wants to be friends with a girl because of she like the way this girl looks. Because this girl dresses well, wears designer things. I can't imagine wanting to be friends with someone because they good looking. I like

my best friends because they are intelligent, smart and hilarious and so witty, that to me is so much more attractive than when someone just looks good.

Pressure to conform may also create stressful situations for some, especially in the initial years of university when young girls try and adapt themselves to the new standards imposed by their peer group. For instance, two respondents who had grown up in small towns found it stressful to fit in with the new appearance standards. One of the respondents stated:

It does (stress) when it came to like going out and hanging out with a group girls and stuff I would compare myself. Like when I first got here and we were going out to party. I didn't know that ... 'oh wow I need to start getting dressed up'. Because the first actual party thing or whatever I went in my freshmen year, I went to I wore sweat shirt and jeans and a guy there was really rude to me and commented on that. Then I was like 'that's how really things are' so I sort of kind of conform to it and you notice that other people who are getting the attention because of what they are wearing.

Another respondent made an interesting observation regarding the media generated stereotype of Caucasian women and the pressure that young Caucasian women experienced as a result of being consumers of these magazines.

Being a white American blonde white girl because that is the dominant image, I see the media and I feel that I fit right in. My best friend, on the other hand is Asian and she feel like she has no one to identify with. I think that on a certain level it makes her less susceptible to the media because there are very few people to identify with, very few celebrities because there is very less representation. Whereas, I feel like that the media is my mirror with white blonde hair blue eyed girl. I kind of feel that I am could be at a disadvantage because I have got girls that are representation of me or girls that I am supposed to be ...you know.

Self

I assessed respondents' overall orientations towards engaging in appearance enhancing and maintenance activities to understand why some women were highly invested in their appearance, performing activities to improve or maintain their appearance. One of the respondents revealed that appearance had been central to her self esteem and said, "I would still feel bad about certain parts of myself, although for the most part I have a pretty good self esteem but there are times when it goes down."

Prior studies have demonstrated that self esteem protects women against developing disorder associated with body image (McAllister & Caltabiano, 1994). The response of some women demonstrated the importance of high self esteem as a buffer against developing negative self image.

It was this very high self esteem and there is nothing wrong with you sort of thing when I was growing up. I have always had some sort of confidence. There are bigger things to worry about and it [appearance related concerns] passes and no one cares. There is happy medium between caring and not caring.

It was also interesting to find that young women analyzed the pressures and the reason for those in their age group to experiment with their appearances, in other words, giving importance to appearance during this phase of their lives. One respondent assesses, "I think this time of our lives is when lot of people are finding ourselves and so lot of people struggle with their appearance and with self identity. There is a lot of pressure, I know but I don't feel the pressure."

Social support providers

Learning the coping strategies to overcome stress or distress with unpleasant situation takes place within a social context and from those whom we are closely associated with in our lives. A final example illustrates the probable influence of social learning

I met her [best friend] in my freshmen year and right after I started losing weight she lost about 60 pounds. She was a very large girl when I met her. In the past 3 years, we have like toned and she is a stickler and its weird because I didn't really try loosing weight with eating. I just worked out a lot and it just kinda worked for me but she still checks every label. Her mom actually literally has eating issue like she is size 2 and like her mom hasn't eaten carbs [carbohydrate] in the last 5 years. She is on an Atkins diet. She has a lot of different influence in her family than I do. She [best friend] eats bacon all the time, she will order whipped cream for dessert and like cheese and salad. No carbs [carbohydrates], it's crazy.

Most of the respondents accessed social support from their mothers, girl friends, sister and significant other. The interviews revealed that few respondents did overcome the feeling of appearance concerns or dissatisfaction by discussing their concerns with mothers or friends. For example, one respondent mentioned 'I think that like my mom influences me, I have a few close friends and I think that I really value their take. I try to eat vegetables and things in their natural form. I used to calculate the calories and stuff but now I don't do that'. Those who were involved romantic relationships indicated that the support of the boyfriend or partner was valuable. For instance one respondent remarked, "Well my fiancé has really helped me with that because I voice my concerns to

him. I will try to be perfect and at times when I am insecure about something, he would trivialize it by remarking ‘are you kidding me?’”

Emphasizing the importance of social support, another respondent reflected on an innovative coping strategy that her mom introduced to her as a young girl.

Couple of weeks ago, I was at home and I was looking at the books I had. It’s called ‘Don’t give it away’ it’s like a work book journal meant for girls, it’s most inspiring. My mom gave me this little work book and the pages in it are like ‘what I like about my body’ and list them. Then there is what I don’t like about my body, but I still like myself because... It very interesting and, then there is this page called notes from the heart and then a blank page to write.

Shopping for clothing products could create dissatisfaction in young women; especially change in one’s clothing size. Five respondents reported that although increase in apparel size may be an indication of physical change it is likely to affect their appraisal of body. Illustrating this concern a respondent reported, “I did not buy jeans for two years because I grew out of my jeans and I just didn’t like the number that I fit into. So I just didn’t buy anything. Yeah if I didn’t fit into size six then I wouldn’t get whatever it was”. Similar sentiments were revealed by another respondent who also found shopping stressful, “I can’t ever find something that really fits my body because all the sizes are so generic, so shopping is really difficult. I just hate doing it because I don’t like to have to try so many different things and have nothing that fits me...that is really stressful thing and it makes me feel real worse about myself that I can’t fit into clothes and I just try and avoid standing in front of mirrors”.

However, one respondent reported that she was taught to overcome the social pressure of being a particular size (in clothing) very innovatively by her mother, especially considering that sizing varies across brands.

My parents really taught us well, 'sizing is just a number'. I'd rather wear a 6 or 8 that actually fits me as opposed to squeeze in a 2 and 4 with stuff hanging out or the shirt rips. I rather look good than look like I should have gotten a bigger size. When I had an accident I could not walk for 3 months. I had to get pants so she would say. if it bothers you that much just rip the tag out, no one will ever know and people can tell if you are a size 2 or 8.

Overall, the respondents reported they received social support from family members however, one of the respondents also mentioned that motivation to receive positive appraisal from her mother was important.

Even though my dad says more negative things, they mean a lot but if she [mom] criticizes ... because I am closer to my mom I will take it to heart, may be she matters more. I want to make her proud or think I am prettier or whatever. Like when my mom compliments me, they are the best compliments. I will remember those forever and my dad's criticizing things just gets by.

It was also interesting to notice that parental influence may not necessarily determine the importance one gives to their appearance. For example, one of the respondents to whom appearance was central aspect of self assessment mentioned, "I definitely know my parents have influenced me in education and to be successful. In terms of my appearance and religious beliefs they have very little to do with that. They tell me 'you don't need to diet, you don't need to tan, you don't need to know these things'. It is great that they tell me that, because they try to reinforce that I am fine the

way I am and I appreciate that”. For another respondent whose mother was critical about her own appearance motivated the daughter to develop a healthier self concept.

She [mother] will say [about her own self], ‘I am so fat’ and I will tell her ‘mom you don’t say that around a teenage girl’. She will say, ‘I am not talking about you it’s about me’. Well I am sure it does affect me in my self perceptions but more than that I think it makes me not want to be like her and her perception of herself. I want to have a better perception of myself than she has of herself.

Stress could also be result from those who are traditionally considered to be social support providers, for example one of the respondents reported about her mother, “If I am insecure now, it was a huge insecurity in high school. I figured out what I wanted to wear more [in University] versus what my mom wanted to see on me. I never really felt good in what my mom wanted to see on me because it never really looks good on me, it looks good on her but she put it on me. Dieting, I have never done a serious diet. I am a vegetarian so I eat very healthy but diet to lose weight never. Only as a child because my mom made me, it sort of weird but yes”.

Motivation

One of the fifteen respondents reported losing 50 pounds by engaging in regular exercise but she did not regulate her eating habits. She explained her motivation for losing weight.

I wanted to look better in clothes and I wanted to wear shirts that I would have never been able to wear before and, that is my favorite feeling to put on a shirt and go ‘oh that looks hot’

Although none of the respondents in this study mentioned current use of unhealthy eating practices to loose weight, comments from respondent further highlight the association between media and young women's feeling of appearance dissatisfaction.

As long as the girls who model the clothes are real thin, the girls who wear the clothes are going to think they need to be real thin.

Other reasons that respondents provided as motivational factors among young women were sexual attraction, social display or social competition.

I think it is some sort of competition, like you know trying to attract the opposite sex or beat out someone to it or trying to either impress someone or trying to show people that you are a certain way.

Among the fifteen respondents, eight women engaged in some form of physical exercise and when probed four respondents claimed that health was their primary motivation, while the other four respondents claimed that they were motivated by appearance as well as health concerns. Illustrating this sentiment a respondent reported, "I definitely don't want to loose weight in an unhealthy way that would be a bad idea. It's probably mostly motivated by my wanting to loose weight just so that look better but at same time its added advantage to that is being healthier."

Appearance Appraisal

The respondents' were asked if they experienced dissatisfaction and the coping strategies they utilized to overcome the dissatisfaction. I assessed respondent's the difference in how some women engaged in appearance fixing activities while others

dismissed or rejected the feeling of dissatisfaction with appearance. Coping strategies to overcome dissatisfaction reveal a considerable intra individual difference. One respondent stated, “I also feel bad about some aspect of my appearance and you have to focus on something else”. Although all fifteen women reported being dissatisfied with some aspect of their physical appearance, it was evident that different coping strategies were used by the young women to overcome this dissatisfaction.

Among the fifteen respondents, only two interviewees reported actively engaging in appearance fixing behavior to reducing appearance dissatisfaction and one interviewee indicated use of avoidance coping strategy. Among these women those who reported having a good self esteem indicated use of rational coping strategy. The analysis revealed that coping strategy used by each respondent was clearly associated with the centrality of appearance to their self-concept. Demonstrating the use of appearance fixing coping strategy to overcome her appearance dissatisfaction, one of the respondents reported:

I have always been self conscious about how short I am. I feel like I look kind of stocky and you know there have been various things. As I have gotten older, I have learnt the tricks to try to diverting attention from what I perceive as my flaws and for me there is satisfaction in that. You know like I said the resources that I have, I feel like tanning is one of them because that makes me look thinner. So the fact that I have access to resources that can help me over come some of those insecurities, for now at least.

The interviews also revealed that a few respondents used positive rational acceptance coping strategy. This was evident in the response given by another respondent.

Usually the models in the magazines are airbrushed and they have stylist and makeup artist. They have all this stuff that normal people don't have; its sort of unattainable to look at that and want to be that...it is unrealistic.

Another important theme that emerged was that young women associated being thin as healthy. However, it was interesting that none of the respondents in this study made this assumption, yet four of them mentioned that this was a common perception among young women. One of the respondents, a nutrition major student observed, "I think a lot of times I see that my friends are perfectly fine and I know that they think that they aren't healthy enough because they are not thin enough". Another respondent explains, "they [celebrities] are the best dressed and you do not look the same in those clothes if you don't look like them (thin) and its hard because you want to be wearing what's in right now". Emphasizing the popular belief a respondent mentions popular quote by a celebrity called Victoria Beckham, 'you can never be too rich or too thin', the respondent based on her observation suggests, "I think a lot of girls credit skinnier is being healthy". Among the fifteen respondents, none seemed to use avoidance as their coping strategy to overcome appearance dissatisfaction.

Discussion

The purpose of this study was to identify factors that protect women from negatively appraising their appearance. Thus, I investigated the relationship between individual characteristics of women (age, personality, self esteem) and the socio-psychological constructs (appearance schema, perceived social support, appearance appraisal) resulting in utilization of different coping strategies to overcome body

dissatisfaction (avoidance, appearance fixing and, positive rational acceptance). The first objective of the present study was to identify the relationship among self esteem, perceived social support and appearance appraisal. The findings from both qualitative and quantitative studies supported Hypothesis 1, indicating that self esteem was a significant predictor of women's appearance appraisal, whereby increase in one's self esteem significantly predicted their positive appearance appraisal. The quantitative results failed to support (Hypothesis 2) the prediction that a positively perceived social support would have an influence on one's appearance assessment (positive appearance appraisal). Although the qualitative study found that in the case of most interviewees positive social support predicted a positive assessment of one's appearance.

Results from testing Hypothesis 3 and Hypothesis 6 revealed that the moderating effect of social support on the relationship between self esteem and appearance appraisal failed as well as, the moderating effect of social support on the relationship between personality and appearance appraisal failed to demonstrate significance. Since limited empirical research is available on social support and its effects on body dissatisfaction the role of social support remains inconclusive. Williams' (2004) study of college women demonstrated that women in the positive body image group reported greater perceived social support, compared to other groups; although previous research (Stice et al., 2002) investigating adolescent girls reported that deficits in social support predicted increase in body dissatisfaction.

This study also found that Neuroticism significantly predicted one's negative appearance appraisal. Consistent with previous studies increase in Neuroticism scores are

positively associated with body dissatisfaction, in other words Neuroticism predicted negative evaluation of one's appearance (Kvalem et. al., 2006; Davis, Claridge, and Brewer (1996). The qualitative results found that perceived social support was an important factor that could assist young women in developing positive appearance appraisal and coping strategies. The interviews also illustrated that appraisal of the social environment as stressful or non stressful was dependent to some extent on the individual's characteristics such as self esteem. Dissatisfaction with some aspect of their physical appearance was evident among all respondents, yet we found individual differences in coping strategies utilized by them. From the interviews it was clear that the appraisal of appearance, perception of environment as stressful and coping strategies utilized were dependent on the centrality of appearance to one's self concept.

Considering that the findings of qualitative and quantitative were not found to be consistent , I tested perceived social support for mediating effect. The regression results showed that PSS did not mediate the relationship between self esteem and appearance appraisal; also PSS failed to demonstrate mediating effect on the relationship between neuroticism and appearance appraisal.

Conclusion

The results of the present study indicate that self esteem was crucial in determining women's appraisal of their appearance. Women with higher self esteem (HSE) tend to appraise their appearance more positively than women with lower self esteem (LSE). The quantitative findings converge with Mendelson, White & Mendelson's (1996) findings demonstrating self-esteem was associated with feelings

about one's appearance. The results of qualitative study concurred with Crocker's (2002) findings from longitudinal study of an ethnically diverse sample of 642 college freshman that external contingencies of self-worth, especially appearance have high costs for stress. The findings from the interviews of the current study also indicate that although women with higher self esteem did observe that the university environment did contribute to the one's consciousness of how to dress and to fit in with peers, yet these women with HSE did not experience the pressure to comply to the prevalent appearance standards in the university set up.

Findings of the current study indicated that increase Neuroticism significantly predicted women's negative appraisal of their appearance. Thus concurring with previous findings (Davis & Cowles, 1989; Davis and Fox, 1993; Johnson et. al., 2007) dissatisfaction with one's appearance was predicted by traits associated with Neuroticism.

In this study, quantitative findings demonstrated inconclusive results regarding the influence of perceived social support on individual's appearance appraisal. The findings revealed that when controlling for self esteem, perceived social support failed to predict appearance appraisal; although perceived social support significantly predicted appearance appraisal when controlling for personality. We also found that perceived social support did not demonstrate moderating effect on: (1) the relationship between self esteem and appearance appraisal, (2) the relationship between personality and appearance appraisal. On the other hand, the qualitative findings revealed that in case of most young women, positive perceived social support did moderate the effect of

prevalent sociocultural pressure of appearance standards on appraisal of appearance; yet negative social support did not necessarily indicate a negative appearance appraisal. Thus the findings suggests that future studies investigate the role of perceived social support (in the context of appearance evaluation) and explore other internal (intra individual) factors that contribute in preventing an individual from evaluating their appearance negatively.

This study has implications for the field of social psychology of appearance and personality psychology. Findings of the present study imply that a relationship does exist between self esteem and appearance appraisal, as well as personality traits of neuroticism and appearance appraisal. Hence, the results have implications for counselors to encourage young women's and their family to emphasize on the protective effect of self esteem that can prevent women from negatively appraising their appearance and use of harmful strategies to overcome their body dissatisfaction. The results can also be used by counselors to advice the family of young women who demonstrate higher traits of Neuroticism regarding the influence it may have on their negative body evaluation.

It is important to note the limitations of this research when interpreting the results of this study. Based on the findings from this study on the relationship between personality factors and appearance evaluation, I recommend that for future studies we could test the relationships between specific lower level traits and appearance related behavior. First, this study is largely limited to White American/ Caucasian young women in Northwest U.S.A. Secondly, a majority of participants were Apparel Design and Merchandising Management students thus indicating the probability of bias towards

appearance-related topics. For future research, I recommend using a heterogeneous population that would allow the findings to be generalized to a larger population across U.S.A.

References

- Abell, S. C. & Richards, M. H. (1996). The relationship between body shape satisfaction and self-esteem: An investigation of gender and class differences. *Journal of Youth and Adolescence*, 25(5), 691-703.
- Agresti, A., & Finlay, B. (1999). *Statistical Methods for the Social Sciences* (3rd ed.). New Jersey: Prentice Hall.
- Aiken, L., & West, S. (1991). *Testing interactions in multiple regression*. Hillsdale NJ: Lawrence Erlbaum.
- Aldwin, C. M. (2007). *Stress, coping and development: An integrative perspective* (2nd Ed.). New York: Guilford Press.
- Altabe, M., & Thompson, J. K. (1996). Body image: A cognitive self-schema construct. *Cognitive Therapy and Research*, 20(2), 171-193.
- American Society of Plastic Surgeons (2006). *2006 Plastic surgery statistics*. Retrieved on May 28, 2007, from <http://www.plasticsurgery.org/media/statistics/2006-Statistics.cfm>
- Bandura, A. (1977). *Social learning theory*. New York: General Learning Press.
- Bandura, A. (1986). *Social foundations of thought and action: A social cognitive theory*. Upper Saddle River, NJ: Prentice-Hall, Inc.
- Balaji, A. B., Claussen, A. H., Smith, D.C, Visser, S. N., Morales, M. J., Perou, R. (2007). Social support networks and maternal mental health and well-being. *Journal of Women's Health*, 16(10), 1386-1396.
- Baumeister, R.F., Tice, D.M., & Hutton, D. G. (1989). Self-presentation motivations and personality differences in self-esteem. *Journal of Personality*, 57, 547-579.
- Berkowitz, D., & Marsiglio, W. (2007) Gay men: Negotiating procreative, father, and family identities. *Journal of Marriage and Family*, 69 (2), 366–381.
- Buss, A. (2001). *Psychological dimensions of the self*. Thousand Oaks: Sage Publication.
- Carver, C. S., Scheier, M. F., & Weintaub, J. K. (1989). Assessing coping strategies: A theoretically based approach. *Journal of Personality and Social Psychology*, 56, 267-283.

- Cash, T. F., & Fleming, E. C. (2002). Body image and social relations. In T. F., Cash & Pruzinsky T. (Eds). *Body image: A handbook of theory, research, and clinical practice* (pp. 277-286). New York: Guilford.
- Cash, T.F., & Pruzinsky, T. (Eds.) (1990), *Body images: Development, deviance, and change*. N.Y.: Guilford Press.
- Caspi, A., Roberts, B. W., & Shiner, R. L. (2005). Personality development: Stability and change. *Annual Review Psychology* 56,453-484.
- Celio, A. A., Zabinski, M. F., & Wilfley, D. E. (2004). African American body images. In T. F. Cash & Pruzinsky, T. (Eds.). *Body image: A handbook of theory, research, and clinical practice*. New York: Guilford.
- Choate, L. H. (2005). Toward a theoretical model of women's body image resilience. *Journal of Counseling and Development*, 83, 320–330.
- Clark, L. A., & Watson, D. (1995). Constructing validity: Basic issues in objective scale development. *Psychological Assessment*, 7(3), 309-319.
- Cohen, S. & Hoberman, H. M. (1983). Positive events and social supports as buffers of life change stress. *Journal of Applied Social Psychology*, 13(2), 99-125.
- Cohen, S., Mermelstein, R., Kamarck, T., & Hoberman, H. M. (1985). Measuring the functional components of social support. In I. G. Sarason, & B. R. Sarason (Eds.), *Social support: Theory, research and applications*(pp. 73-94). Boston: Martinus Nijhoff Publishers.
- Cohen, S. & Syme, S. L. (Eds). (1985). *Social support and health*. Orlando, FL: Academic Press.
- Cohen, S., & Wills, T. A. (1985). Stress, social support, and the buffering hypothesis. *Psychological Bulletin*, 98, 310–357.
- Costa, P.T., & McCrae, R. R. (1985). *The NEO personality inventory manual*. Odessa, FL: Psychological Assessment Resources.
- Crocker, J. (2002). The costs of seeking self-esteem. *Journal of Social Issues*, 58(3), 597–615.
- Crocker, J., & Knight, K. M. (2005). Contingencies of self-worth. *Current Directions in Psychological Science*, 14(4), 200–203.

- Davis, C. (1997). Body image, exercise and eating behaviors. In K. R. Fox (Ed.), *The physical self* (pp.143-174). Champaign, IL: Human Kinetics.
- Davis, C., Claridge, G., & Brewer, H. (1996). The two faces of narcissism: Personality dynamics of body esteem. *Journal of Social and Clinical Psychology, 15*, 153–166.
- Davis, C., & Cowles, M. (1989). Comparison of weight and diet concerns and personality factors among female athletes and non-athletes. *Journal of Psychosomatic Research, 33*(5), 527-536.
- Davis, C., & Fox, J. (1993). Excessive exercise and weight preoccupation in women. *Addictive Behaviors, 18*, 201-211.
- DeLongis, A., & Holtzman, S. (2005). Coping in context: The role of stress, social support, and personality in coping. *Journal of Personality, 73* (6), 1-24.
- Douglas, M. (1973). *Natural symbols: Explorations in cosmology*. Harmondsworth: Penguin.
- Dunkel-Schetter, C., & Bennett, T. L. (1990). Differentiating the cognitive and behavioral aspects of social support. In B. R. Sarason, I. G., Sarason, & G. R., Pierce (Eds.), *Social support: An interactional view* (pp. 267-296). New York: Wiley.
- Dunkel-Schetter, C., Folkman, S. & Lazarus, R. S. (1987). Correlates of social support receipt. *Journal of Personality and Social Psychology, 53*, 71-80.
- Exline, J. J., & Lobel, M. (1997). Views of the self and affiliation choices: A social comparison perspective. *Basic and Applied Social Psychology, 19*(2), 243-259.
- Feldman, S. I., Downey, G., & Schaffer-Neitz, R. (1999). Pain, negative mood, and perceived support in chronic pain patients: A daily diary of people with Reflex Sympathetic Dystrophy Syndrome. *Journal of Consulting and Clinical Psychology, 67*(5), 776-785.
- Fiore, J., Becker J., & Coppel D. B. (1983). Social network interactions: A buffer or a stress. *American Journal of Community Psychology, 11*, 423-439.
- Folkman, S., Lazarus, R. S., Gruen, R. J., & DeLongis, A. (1986). Appraisal, coping, health status, and psychological symptoms. *Journal of Personality and Social Psychology, 50*(3), 571-579.
- Fox, K. R. (Eds.). (1997). *The physical self*. Champaign, IL: Human Kinetics.

- Franzoi, S., & Shields, S. (1984). The body esteem scale: Multidimensional structure and sex differences in a college population. *Journal of Personality Assessment*, 48, 173–178.
- Garner, D. M. (1997). The 1997 body image survey results. *Psychology Today*, 30, 30-46.
- Giddens, A. (1991). *Modernity and self-identity: Self and society in the late modern age*. Cambridge: Polity Press.
- Goldberg, L. R. (1993). The structure of phenotypic personality traits. *American Psychologist*, 48, 26-34.
- Gosling, S. D., Rentfrow, P. J., & Swann W. B. (2003) A very brief measure of the Big-Five personality domains. *Journal of Research in Personality*, 37, 504–528.
- Groesz, L. M., Levine, M. P. & Murnen, S. K. (2002). The effect of experimental presentation of thin media images on body satisfaction: A meta-analytic review. *International Journal of Eating Disorders*, 31, 1-16.
- Harter, S. (1993). Causes and consequences of low self-esteem. In R. F. Baumeister (Eds.), *Self esteem: The puzzle of low self-regard* (pp. 88-116). New York: Plenum.
- Harris, S. M. (1995). Family, self, and sociocultural contributions to body image attitudes of African American women. *Psychology of Women Quarterly*, 19, 129–145.
- Hassinger, H. J., Semenchuk, E. M., & O'Brien, W. H. (1999). Appraisal and coping responses to pain and stress in migraine headache sufferers. *Journal of Behavioral Medicine*, 22(4), 327-340.
- Heller, K., & Swindle, R.W. (1983). Social networks, perceived social support, and coping with stress. In L.A. Jason R.D. Felner, J. Moritsugu, & S.S. Farber (Eds.), *Preventive Psychology: Theory, research and practice in community intervention* (pp. 87-103). New York: Pergamon.
- Hesse-Biber, S. N. (2007). *The cult of thinness* (2nd ed.). New York: Oxford University Press.
- Hobfoll, S. E. (1983). Limitations of social support in the stress process. In I. G. Sarason & B. R., Sarason, (Eds.), *Social support: Theory, research and application* (pp.391- 414). Boston: Martinus Nijhoff Publishers.

- House, J. S., & Kahn, R. L. (1985). Measures and concepts of social support. In S. Cohen and S. L. Syme (Eds.), *Social support and health* (pp. 83-108), Orlando, FL: Academic Press.
- Jackson, L. A. (2002). Psychological attractiveness: A sociocultural perspective. In T. F. Cash & T. Pruzinsky (Eds.), *Body image: A handbook of theory, research, and clinical practice* (pp.13-21). New York: Guilford.
- John, O. P., & Srivastava, S. (1999). The big five trait taxonomy: History, measurement, and theoretical perspectives. In L. A., Pervin & O. P. John (Eds.) (2nd ed.) *Handbook of personality: Theory and research* (pp. 154-196). New York: Guilford.
- Johnson, M. (1998). Self-esteem stability: The importance of basic self-esteem and competence strivings for the stability of global self-esteem. *European Journal of Personality*, 12, 103-116.
- Jung, J. (1987). Toward a social psychology of social support. *Basic and Applied Social Psychology*, 8(1/2), 57-83.
- Kvalem, I. L., Soest T. V., Roald H. E., Skolleborg K. C. (2006). The interplay of personality and negative comments about appearance in predicting body image. *Body Image*, 3, 263-273.
- Lakey, B., & Cohen, S. (2000). Social support theory and selecting measures of social support. In S. Cohen, L. U. Gordon & B. H. Gottlieb (Eds.) *Social support measurement and interventions: A guide for health and social scientists*. New York: Oxford.
- Lakey, B., & Scoboria, A. (2005). The relative contribution of trait and social influences to the links among perceived social support, affect, and self-esteem. *Journal of Personality*, 73(2), 361-388.
- Langford, C. P. H., Bowsher, J., Maloney, J. P., & Lillis, P. P.(1997). Social support: A conceptual analysis. *Journal of Advanced Nursing*, 25, 95-100.
- Lazarus, R. S., & Folkman, S. (1984). Cognitive appraisal processes. *Stress, appraisal and coping* (pp.22-54). New York: Springer Publishing.
- Lee-Baggley, D., Preece, M., & DeLongis, A. (2005). Coping with interpersonal stress: Role of big five traits. *Journal of Personality*, 73(5), 1141-1180.
- Lerner, R. M., & Jovanovic, J. (1990). The role of body image in psychosocial development across the life span: A developmental contextual. In T. F. Cash & T.

- Pruzinsky (Eds.), *Body images: Development, deviance, and change* (pp.110-127). Guilford Press, New York.
- Lincoln, K. D., Chatters, L. M., & Taylor, R. J. (2003). Psychological distress among Black and White Americans: Differential effects of social support, negative interaction and personal control. *Journal of Health and Social Behavior*, 44(3), 390-407.
- Mankowski, E. S., & Wyer, R. S. (1997) Cognitive causes and consequences of perceived social support. In G. R. Pierce, B. Lakey, G. Sarason, B. R. Sarason, (Eds.), *Sourcebook of social support and personality* (pp.141-165). New York: Plenum Press.
- McFarlane, T., McCabe, R. E., Jarry, J., Olmsted, M. P., & Polivy, J. (2001). Weight-related and shape-related self-evaluation in eating- disordered and non-eating disordered women. *International Journal of Eating Disorders*, 29, 328–335.
- Mendelson, B. K., White, D. R., & Mendelson, M. J. (1996). Self-esteem and body esteem: Effects of gender, age, and weight. *Journal of Applied Developmental Psychology*, 17(3), 321-346.
- Monteath, S. A., & McCabe, M. P. (1997). The influence of societal factors on female body image. *The Journal of Social Psychology*, 137(6), 708-727.
- Muth, J. L., & Cash, T. F. (1997). Body-image attitudes: What difference does gender make? *Journal of Applied Social Psychology*, 27, 1438-1452.
- Newcomb, M. D., & Keefe, K. (1997). Social support, self esteem, social conformity, and gregariousness: Development patterns across twelve years. In G. R. Pierce, B. Lakey, G. Sarason, B. R. Sarason (Eds.), *Sourcebook of social support and personality* (pp.303-333). New York: Plenum Press.
- O'Brien, T. B., & DeLongis, A. (1996). The interactional context of problem-, emotion-, and relationship-focused coping: The role of the Big Five personality factors. *Journal of Personality*, 64, 775–813.
- O'Brien, T. B., & DeLongis, A. (1997). Coping with chronic stress: An interpersonal perspective. In B. Gottlieb (Ed.), *Coping with chronic stress* (pp. 161–190). New York: Plenum Press.
- Pakenham, K. I. & Bursnall, S. (2006). Relations between social support, appraisal and coping and both positive and negative outcomes for children of a parent with multiple sclerosis and comparisons with children of healthy parents. *Clinical Rehabilitation*, 20, 709-723.

- Patton, M. Q. (1990). *Qualitative evaluation methods*. Beverly Hills, CA: Sage.
- Paxton, S. J., Schutz, H. K., Wertheim, E., & Muir, S. L. (1999). Friendship clique and peer influences in body image concerns, dietary restraint, extreme weight loss behaviors and binge eating in adolescent girls. *Journal of Abnormal Psychology*, 108, 255–266.
- Penley, J. A., Tomaka, J., & Wiebe J. S. (2002). The association of coping to physical and psychological health outcomes: A meta-analytic review. *Journal of Behavioral Medicine*, 25(6), 551-603.
- Pearlin, L. I. (1985). Social structure and processes of social support. In S. Cohen & L. Syme (Eds.), *Social support and health* (pp. 43-60). New York: Academic Press.
- Pierce, G. R., Lakey, B., Sarason, G., Sarason, B. R., & Joseph, H. J. (1997). Personality and social support processes: A conceptual overview. In G. R. Pierce, B. Lakey, G. Sarason, B. R. Sarason (Eds.), *Sourcebook of social support and personality* (pp. 3-18). New York: Plenum Press.
- Pierce, G. R., Sarason, I. G., & Sarason, B. R. (1991). General and relationship-based perceptions of social support: Are two constructs better than one? *Journal of Personality and Social Psychology*, 61(6), 1028-1039.
- Procidano, M. E., & Smith, W. W. (1997). Assessing perceived support. In G. R. Pierce, B. Lakey, G. Sarason, B. R. Sarason (Eds.), *Sourcebook of social support and personality* (pp. 93-106). New York: Plenum Press.
- Reis, H. R., & Frank, P. (1994). The role of intimacy and social support in health outcomes: two processes or one? *Personal Relationships*, 1, 185-197.
- Revelle, W. (1995). Personality processes. *Annual Review of Psychology*, 46, 295-328.
- Robins, R. W., Tracy, J. L., Trzesniewski, K. Potter, J. & Gosling, S. D. (2001). Personality correlates of self-esteem. *Journal of Research in Personality*, 35, 463-482.
- Roesch, S. C., & Rowley, A. A. (2005). Evaluating and developing a multidimensional, dispositional measure of appraisal. *Journal of Personality Assessment*, 85(2), 188–196.
- Rook, K. S., & Pietromonaco, P. (1987). Close relationships: Ties that heal or ties that bind?" In W. H. Jones & D. Pearlman (Eds.), *Advances in personal relationships* (Vol.1,pp.1–35). Greenwich, CT: JAI Press.

- Rosen, G., & Alan, R. (1986). Relationship of body image to self concept. *Journal of Consulting and Clinical Psychology*, 32, 100–107.
- Rosenberg, M. (1965). *Society and the adolescent self-image*. Princeton, N.J.: Princeton University Press.
- Rosenberg, M. (1986). Self-concept from middle childhood through adolescence. In J. Suls & A. G. Greenwald (Eds.), *Psychological perspectives on the self* (Vol. 2). Hillsdale, NJ: Erlbaum.
- Rumsey, N., & Harcourt, D. (2005). *The psychology of appearance*. Open University press: New York.
- Ryan, R. M., & Solky, J. A. (1997). What is supportive about social support? On the psychological needs for autonomy and relatedness. In G. R. Pierce, B. R. Sarason, & I. G. Sarason (Eds.), *Handbook of social support and the family* (pp.3-23). New York: Plenum Press.
- Sarason, B. R., Pierce, G. R., & Sarason, I. G. (1990). Social support: The sense of acceptance and the role of relationships. In B. R. Sarason, I. G. Sarason, & G. R. Pierce (Eds.), *Social Support: An interactional view* (pp. 97-128). New York: John Wiley & Sons.
- Sarwer, D. B., Pruzinsky, T., Cash, T. F., Goldwyn, R. M., Persing, J. A., & Whitaker, L. A. (Eds.) (2006). *Psychological aspects of reconstructive and cosmetic plastic surgery*. New York: Lippincott Williams & Wilkins.
- Schutz, A. (1998). Coping with threats to self-esteem: The differing patterns of subjects with high versus low trait self-esteem in first-person accounts. *European Journal of Personality*, 12, 169-186.
- Stice, E., Presnell, K., & Spangler, D. (2002). Risk factors for binge eating onset in adolescent girls: A 2-year prospective investigation. *Health Psychology*, 21, 131-138.
- Story, A. L. (2004). Self-Esteem and self-certainty: A mediational analysis. *European Journal of Personality*, 18, 115–125.
- Strauss, A., & Corbin, J. (1998). *Basics of qualitative research: Techniques and procedures for developing grounded theory*. Thousand Oaks, CA: Sage.
- Striegel-Moore, R. H., & Cachelin, F. M. (1999). Body image concerns and disordered eating in adolescent girls: Risk and protective factors. In N. Johnson, M. Roberts,

- & J. Worell (Eds.), *Beyond appearance: A new look at adolescent girls* (pp. 85–108). Washington, DC: American Psychological Association.
- Stroebe, W., & Stroebe, M. (1996). The social psychology of social support. In E. T. Higgins, & A. W. Kruglanski, (Eds.), *Social psychology: Handbook of basic principles* (pp. 597-621). New York: Guilford Press.
- Suls, J., & David, J. P. (1996). Coping and personality: Third time's the charm? *Journal of Personality*, 64(4), 993-1005.
- Thoits, P. A. (1986). Social support as coping assistance. *Journal of Consulting and Clinical Psychology*, 54, 416–423.
- Thoits, P. A. (1995). Stress, coping, and social support processes: Where are we? What next? *Journal of Health & Social Behavior*, 36(5), 53-79.
- Turner, S. L., Hamilton, H., Jacobs, M., Angood, L. M., & Dwyer, D. H. (1997). The influence of fashion magazines on the body image satisfaction of college women: An explanatory analysis. *Adolescence*, 603-614.
- Watson, D., David, J. P., & Sulz, J. (1999). Personality, affectivity and coping. In C. R., Snyder, (Ed.) (1999). *Coping: The psychology of what works* (p.70). New York: Oxford University Press.
- Williams, E. F. (2004). Positive body image: Precursors, correlates, and consequences. *Dissertation Abstracts International*, 64(10B), 5268.
- Zimet, G. D., Dahlem, N. W., Zimet, S. G., & Farley, G. K. (1988). The multidimensional scale of perceived social support. *Journal of Personality Assessment*, 52, 30–41.
- Zimet, G. D., Powell, S. S., Farley, G. K., Werkman S., & Berkoff K. A. (1990). Psychometric characteristics of the multidimensional scale of perceived social support. *Journal of Personality Assessment*, 55(3/4), 610 – 617.

RELATIONSHIP AMONG AGE, PERSONALITY, APPEARANCE SCHEMA,
APPEARANCE APPRAISAL AND BODY IMAGE COPING STRATEGIES

Reddy, S. L. and Burns, L. D.

CHAPTER 3

Study 2

Introduction

Regardless of an individual's actual physical characteristics, their own perceptions, beliefs, and feelings about their appearance often determine how they believe others view him/her (Cash & Fleming, 2002, p.277). This perception of one's own appearance appears to determine their attitudes and behaviors towards appearance related activities and perception of other's appearance. Body dissatisfaction can be either dissatisfaction with body attributes or dissatisfaction with overall appearance. But it is important to understand that an individuals' discontent with a part of his/her body does not necessarily mean they are dissatisfied with their overall body because some people might dislike a certain part of their body yet retain overall feeling of attractiveness or physical acceptability (Cash, 2002). Thus, body dissatisfaction, represents an attitudinal or affective dimension (Garner & Garfinkel, 1981).

Although *Psychology Today's* Body Image Survey found that 57 % of women were dissatisfied with their appearance, indicating that a large population of women experience normative discontent with regard to their body (Garner, 1997). Based on prior research (Cash & Pruzinsky, 2002; Fox, 1997) we know that there are individual differences in the extent of body dissatisfaction one experiences and the coping strategies one selects to overcome this dissatisfaction. The individual differences in behavior and attitude can be due to internal factors, external factors or determined by the interaction

between the internal and the external. Internal factors here refer to self –related psychological processes whereas, external factors here refers to the socio-cultural environment in which the individual is situated.

In psychology the use of traits is common to explain attitudinal or behavioral intra individual differences. According to McCrae and Costa (1994), personality traits can be used to identify inherent dispositions or regularities in one's behavior that are stable over time. Personality traits (i.e., Neuroticism, Extraversion, Agreeableness, conscientiousness and, Openness) represent typical reactions or behavioral dispositions of an individual to a situation and are strongly related to differences in affective experience (Clark & Watson, 1999), thus, it is probable that differences in personality traits will influence one's appraisal or evaluation of his/her appearance .

Another psychological construct called appearance schema (Cash & Labarge, 1996; Cash, Melnyk, & Hrabosky, 2004; Cash, Santos, & Williams, 2005) can help us understand differences in individual behavior in the domain of appearance. Individuals make generalization about objects, people and situations to make sense of the information or cues they receive from the environment. Schemas that an individual develops with regard to an object, person, place or situation will guide the processing, perception and appraisal of the information or cues (Segal, 1988). Thus, similarly individuals develop schema about their appearance and these appearance-related self-schemas determine centrality of appearance to one's sense of self (Cash, Melnyk, & Hrabosky, 2004) and thereby impact their psychological evaluation and investment of time, money and, psychological resources into appearance domain.

To reduce the stress or discomfort (psychological, emotional, and physical) caused by body dissatisfaction the individual engages in coping. Individuals use cognitive and behavioral efforts to overcome the dissatisfaction or feeling of discomfort. Although research shows that body dissatisfaction has been found to remain relatively stable across the lifespan, the psychological impact of the dissatisfaction decreases as women age (Striegel-Moore & Franko, 2002). This suggests that increase in age is associated with women resolving their distress more effectively than younger women. Thus, it would be useful to investigate if the changing demand as one grows older results in use of different coping strategies than when one is younger or if the centrality of appearance reduces as one grows older.

Thus based on the fact that normative discontent is common among women of all ages, although the psychological impact of the body dissatisfaction is reduced as women age. The purpose of this study is to investigate the psychological changes that take place in women's perception and reaction to body dissatisfaction as they age and factors that protect older women from the negative impact of body dissatisfaction.

Literature Review

In Study 2, the concepts of personality, age, appearance schema, appearance appraisal and body image coping strategies are addressed. In the current chapter, I explain the basic concepts and constructs of body dissatisfaction, age, personality traits, appearance schema, appearance appraisal and body image coping strategies in the section below. A summary of research related to body dissatisfaction utilizing these concepts is

presented and the description of how these variables will be utilized in this study is also given. Finally the hypotheses were developed for investigation (see p. 97) and the results from the hypotheses testing presented (see p.120).

Body Dissatisfaction

Body dissatisfaction, represents an attitudinal or affective dimension (Garner & Garfinkel, 1981). Body dissatisfaction can often be traced to particular body areas, such as the width of the hips, the protrusion of the abdomen, or the dimpled flesh on the back of the legs (Pokrajac-Bulian & Živčić-Bećirević, 2005). Although body dissatisfaction has been found to remain relatively stable across the lifespan, the psychological impact of the dissatisfaction decreases as women age (Striegel- Moore & Franko, 2002). Compared to younger women, older women reported larger ideal body shapes and less body monitoring, lower anxiety about appearance and less dieting to lose weight (Tiggemann, 2004).

Age

In this study, age is one of the independent variables and measured as the individual's chronological age (number of living years since biological birth). Increase in chronological age is assumed to be associated with increase in number of experiences across one's life-span and the resilience to psychologically stress probably because one's life-experiences tend to influence his/her cognition, behavior, appraisal of different events and the effectiveness of various coping strategies. Although stress and coping are complicated psychological processes and one's age cannot be utilized in order to

determine the positive or negative effects of the event, the process of appraising a stressor may depend on the availability of coping resources or coping strategy outcome previous life-experience.

Although changing demands as one grows older may require different coping strategies than when one is younger, traits perspective maintains that disposition towards coping tends to remain stable across one's life-span (McCrae & Costa, 1986; Costa & McCrae, 1993). On the other hand, Brandstädter (1999) opines that coping strategies change as a result of aging because problems faced in early adulthood are controllable and thus problem focused coping would be appropriate; whereas in later life problems become more uncontrollable (such as, reduced physical functionality and deterioration in state of health) and thus, people use emotion focused coping to compensate for these deficits. Aldwin et al. (1996) showed that individuals in midlife used more problem focused coping than older adults but it could be argued that the difference was indicative of the change in nature of stress (from episodic to chronic) that accompanies normative aging and, which in turn affects individual's appraisal and coping strategies. Aldwin (2007) suggests that although problem focused coping strategies become more context specific because older adults conserve their energy to cope with pressing issues and thereby use adaptive or compensatory strategies that could minimize the effect of stressor.

Normative aging results in body appearance changes which may have significant implications on the way in which they view themselves, thus evaluation of individual's cognitive, affective and behavioral reaction to changes in body shape, size and

appearance is an important aspect of understanding psychological and behavioral adaptation throughout adulthood (Davis, 1997). Changes across the life-span could either be sudden or incremental, which require the individual to cope with either alterations in the external appearance of the body, functional capacities of the body, or the internal or subjective experience of identity (Powell & Longino, 2001). Research in body image and body appearance related areas have shown mixed results; whereas some studies have found that despite frequent persistence of appearance concerns beyond young adulthood (Tiggemann & Lynch, 2001; Montepare, 1996), ‘healthier’ responses to appearance concerns occurred due to changing priorities and increasing awareness (Johnston, Reilly & Kremer, 2004; Halliwell & Dittmar, 2003). On the other hand, Tiggemann (2004) noted that the relationship between body dissatisfaction and self esteem appeared to be weaker among 50-65 year olds than cohorts of 20-35 years and 35-50 years. Harris and Carr (2001) also reported that higher levels of appearance concerns were found largely among 18-30 year old women and 18-21 year old men, whereas the prevalence of appearance concern is reported to reduce among those who are 61 years and over.

Physical changes that are a part of the natural process of aging could be perceived by individuals either as a positive indicator of maturity and wisdom or negatively as an indicator of aging process that needs to be accepted or one that must be controlled. Hence, the individual’s appraisal of “aging” could determine the appraisal of the physical aging body and thus the coping strategies that they adopt emphasize the importance of investigating individual trait differences in perception body across different stages of aging.

Personality

Dispositional research on coping reveals that coping styles themselves can be assessed as dispositional tendencies and coping strategies are related to specific traits (Watson & Hubbard, 1996). For instance, Costa and McCrae (1986) show that people high in Neuroticism tend to experience negative emotions such as anxiety, depression, and anger, and they are likely to appraise stressful situations as threats rather than challenges while extraverts tend to be energetic, cheerful and gregarious, and they tend to view stressful situations as challenges, people high in Openness tend to be untraditional and imaginative, and they appreciate aesthetic experiences.

This study utilizes the Big Five Inventory (BFI; John & Srivastava, 1999) which is based on the five factor model. The five factor personality dimensions have been derived from analysis of natural language terms people use to describe themselves and others called the lexical approach. Furthermore, the big five taxonomy serves as an integrative function as it represents diverse systems of personality description in a common framework (John & Srivastava, 1999). Personality psychologists agree that the five factor model is an adequate taxonomy to describe structural aspects of individual differences (Mervielde & De Fruyt, 2000).

Caspi, Roberts and Shiner (2005) explain that these five are broad traits that represent the most general dimensions of individual differences in personality which are captured by successive lower levels traits. Caspi et al. (2005) elaborate that each of the five factors are distinguished by the following lower order traits: Extraversion is captured by four lower order traits of social inhibition or shyness, sociability, dominance, and

energy/activity level; Neuroticism is distinguished by anxious, vulnerable to stress, guilt-prone, lacking in confidence, moody, angry, easily frustrated, and insecure in relationships; Conscientiousness also sometimes referred as constraint includes at least six lower-order traits of self-control, attention, achievement motivation, orderliness, responsibility, and conventionality; Agreeable individuals identified by traits such as, cooperative, considerate, empathic, generous, polite, and kind; Openness is indicated through traits such as, creativity, vivid imagination, aesthetically sensitive, willingness to try different activities, intellectual curiosity and strong values.

Few studies in the area of body dissatisfaction or in appearance related area have focused on personality traits to explain individual differences. Studies utilizing Neuroticism-Stability scale of the Eysenck Personality Questionnaire-Revised, found that Neuroticism were inversely related to body esteem (Davis, Claridge & Cerullo, 1997) and that women scoring high on Neuroticism were increasingly appearance oriented (Davis Dionne, & Shuster, 2001). Kvaem et al. (2006) using the Big Five Inventory (BFI), found that scoring high on Neuroticism was related to negative appearance evaluation and high appearance orientation; however being extrovert predicted more positive appearance evaluation and being more appearance oriented than being introvert.. Whereas Johnson et. al.'s (2007) investigating relationship between appearance management behavior and personality traits (measured using NEO-FFI), found Neuroticism had a significant relationship with appearance emphasis. Although Openness to experience as a broad factor had a significant negative relationship with appearance

emphasis, but Extraversion as a broad factor had a significant positive relationship with appearance emphasis.

Investigating the relation between the Big Five traits and self-objectification among women, Miner-Rubino et. al. (2002) found a positive correlation between self-objectification and measures of negative affect, including Neuroticism, indicating that high scores on Neuroticism are related to women taking more of an observer's perspective on their own body. Self-objectification was in the same study also negatively related to Agreeableness and Openness, while Extraversion and conscientiousness were not significantly correlated with preoccupation with physical appearance. In this study, Extraversion scale of the EPQ (Eysenck Personality Questionnaire), the dominance scale of the PRF (Personality Research Form), the Rathus Assertiveness Scale, and the Surgency scale of the Goldberg Big Five scale were used to measure the Extraversion/Surgency construct. While, Neuroticism assessed using the Neuroticism scale of the EPQ and the Emotional Stability (reverse-coded) scale of the Goldberg Big Five measure. However, the remaining Big Five traits were measured using the Goldberg Big Five scale.

Besides lack of research using personality traits to understand appearance related behavior and attitudes, the studies have utilized different scales to measure the same construct making it difficult to compare the findings. Although, review of body image literature indicates a consistent and definite association between Neuroticism, Extraversion and appearance related behavior or attitudes. There is lack of empirical evidence demonstrating the influence of Agreeableness, Conscientiousness and

Openness. For example, one prior study (Johnson et. al., 2007) investigated and demonstrated negative relationship between Openness' and appearance emphasis. Findings from Miner-Rubino et.al. (2002) and Johnson et. al. (2007) studies did not demonstrate consistency in relationship between Agreeableness and appearance related behavior or attitude. However, prior studies (Johnson et. al., 2007; Miner-Rubino et. al., 2002) have failed to demonstrate significant relationship between Conscientiousness and appearance related behavior or attitude.

Appearance Schema

To organize and guide the processing of self-related information an individual develops certain cognitive generalizations about themselves which are referred to as self schemas (Markus, 1977; Cash & Labarge, 1996). Schema influence the processing of information about the self in several domains, such as memory, attention, personality, sex role identity, the social self and body appearance (Cash & Labarge, 1996). Schema being cognitive structures that guide the processing of information, also guide individual's perception and appraisal (Segal, 1988). Negatively oriented schemas lead to negative attention and thus negative appraisal. Appearance-schematic individuals are more psychologically invested in their appearance evaluation as a standard of self evaluation and self-worth and thus tend to encode, process and react to an array of appearance-related stimuli (Cash & Labarge, 1996; Cash, Melnyk, & Hrabosky, 2004; Cash, Santos, & Williams, 2005). For example, Brown and Dittmar (2005) found that appearance schema mediates the impact of thin media models. Schematicity here refers to the perceived importance of appearance to one's sense of self by an individual. Therefore,

appearance-related self-schemas are central to the understanding of body image experiences in everyday life (Cash, Melnyk, & Hrabosky, 2004).

Those women who report negative body image tend to engage in the process of body surveillance (McKinley, 2002), constantly watching themselves as though they are being observed, evaluating themselves against other women, and paying a great deal of attention to others' perceptions of and reactions to their appearance (Choate, 2005). Variety of individual and social-cultural characteristics shape body-image attitudes, such as body-image evaluation and investment. Research (Cash, 1994; Cash & Labarge, 1996; Cash, 2002; Cash, Melnyk, & Hrabosky, 2004) confirms that body image attitudes include both evaluative component (self-ideal discrepancies, body satisfaction-dissatisfaction), as well as investment component (the importance or cognitive-behavioral salience of one's appearance). The evaluative aspect refers to cognitive appraisals and beliefs, whereby the individual evaluates the body appearance satisfaction or dissatisfaction. On the other hand, investment is the cognitive salience of appearance (appearance schema) or the attention to appearance indicating the psychological importance of one's own appearance (Cash 1994; 2002).

Cash (2002) proposed that persons with negative body-image attitudes and schemas have distorted or dysfunctional thought processes regarding their appearance (e.g., magnifying and over-generalizing defects, excessive use of appearance related causal attributions for negative events, and biased social comparisons). In turn, individuals engage in coping strategies to manage their potentially distressing body-image experiences. But research (Cash & Labarge, 1996; Cash, Melnyk, & Hrabosky,

2004) also shows that valuing and attending to one's appearance and engaging in appearance-management (or grooming) behaviors to feel or present one's self attractive are not consistently maladaptive, it becomes maladaptive only when investment or beliefs pertaining to one's appearance is equated to one's self-worth. Cash, Melnyk, and Hrabosky (2004) found that individuals with greater schematic investment in appearance experienced significantly larger self-ideal discrepancies (i.e., more body image dissatisfaction), greater internalization of appearance-related media ideals, and more frequent dysphoric body image emotions in a range of situational contexts.

Appearance Appraisal

Appraisal is an evaluative process that reflects the person's subjective interpretation of the event, hence it is not the event that causes stress but appraising an event as stressful that generates stress (Carver, Scheier & Weintaub, 1989; Folkman et al., 1986). Appraisal process takes place once the stressor has been identified (determined as relevant or a threat to one's well being) and the available coping strategies or resources to overcome stress has been evaluated (Hassinger, Semenchuk & O'Brien, 1999; Lazarus & Folkman, 1984). In this study we investigate the appraisal of one's appearance and its influence on the relationship between individual traits (personality and self esteem) on their selection of coping strategies.

Appearance appraisal has been operationalized in this study as the psychological assessment of prevalent socio-cultural appearance standards. In a culture where appearance is given immense importance, the social environment may impose standards on one's appearance and require individual to cope with such standards. The prevailing

socio-cultural appearance standards (external environment) may or may not result in stress depending on the individual's assessment of these standards (or its significance) as either threatening or relevant to their well being. Thus, when an event is assessed as a threat to one's well being or causes psychological distress then the appraisal is negative in nature.

Coping

Body image dissatisfaction causes stress (Davis, 1997) to those individuals who consider appearance central to their assessment of self-worth (Cash & Labarge, 1996). 'Stress is that quality of experience which either through over arousal or under arousal results in psychological distress' (Aldwin, 2007, p.24). Stress being a part of daily life, coping or successfully managing challenges is important to understand individual differences in coping. Coping is a mechanism conceptualized as a transaction between an individual and the environment in which the individual's objective is to reduce the psychological, emotional, and physical burdens associated with a stressful situation (Folkman & Lazarus, 1988; Snyder & Dinoff, 1999). It consists of "constantly changing cognitive, behavioral, and emotional efforts to manage particular external and/or internal demands that are appraised as taxing or exceeding the resources of the person" (Lazarus & Folkman, 1984, p. 51). Coping refers to individual's cognitive and behavioral effort aimed towards managing (reducing, minimizing, mastering, or tolerating) the internal and external demands of the person-environment transaction that is appraised as taxing or exceeding the person's resources (Folkman et al., 1986). Two major functions coping are

dealing with the problem that is causing the distress (problem-focused coping) and regulating emotion (emotion-focused coping) (Folkman et al., 1986).

Coping Strategies

Research on coping has primarily distinguished the two broad categories of emotional- focused and problem- focused coping strategy claiming that emotion-focused coping. Although Folkman and Lazarus (1985; Lazarus, 1993; Folkman et al., 1986) maintained that both forms of coping could reduce psychological distress and that people use both problem-and emotion-focused coping in most stressful episodes, varieties of studies showed that emotion-focused was maladaptive whereas problem focused coping resulted in positive adaptive coping. Stanton and Franz (1999) point out that studies that suggest emotion focused coping as maladaptive have used the term emotion–focused coping inappropriately due to problems in conceptualization and measurement of emotion focused coping. The core difference between the two coping strategies is that problem-focused strategies are directed at managing and modifying the sources of stress, and emotion-focused coping regulates the emotional responses to stressors (Snyder & Dinoff, 1999; Stanton & Franz, 1999). Thus, in order to clarify the two strategies conceptually, Snyder (1999) replaced problem- focused coping with the term approach strategy and emotion-focused coping with the term avoidance strategy (Snyder & Pulvers 2001; Snyder & Dinoff, 1999). Furthermore, Snyder also asserts that emotion focused coping can either be active emotion focused coping or passive emotion focused coping. Thus, this study has chosen to categorize coping strategies into problem focused (problem

fixing) approach, passive emotion focus (avoidance) approach and active emotion focused (positive rational) approach.

Thus based on the above discussion, coping strategies of individuals can be classified into three main categories: problem-focused coping, passive emotional (or avoidance) coping and active emotional (or adjustive) coping. Problem-focused coping is employed when the situation is appraised as changeable; thereby coping is directed at defining the problem, generating alternative solutions, weighing the alternatives in terms of their costs and benefits, choosing among them, and acting (Hassinger, Semenchuk, & O'Brien, 1999). Whereas, passive emotion-focused coping occurs when there has been an appraisal that nothing can be done to modify harmful, threatening, or challenging person-environment transactions. Hence, this form of coping is associated with less adaptive as they are less effective ways to deal with stress, since they do not reduce stress in most situations. Lastly, active emotion focused coping is adjustive in nature, this strategy enables the individual to temporarily escape thereby reducing emotional distress through avoidance, distancing, selective attention, positive comparisons and finding positive value in negative events (Hassinger, Semenchuk, & O'Brien, 1999).

Lazarus and Folkman (1984) emphasize that the consequences of coping strategies depend on the individual, the specific stressor, and the demands of the context. Thus there are variety of approaches to assess individual's coping strategies (Cohen, 1995) and one of coping measures is designed to assess coping strategies in specific situations (Hassinger, Semenchuk, & O'Brien, 1999). In this study coping strategy is measured in specific context of body image and since research has revealed that

personality dispositions predispose people to use certain types of coping strategies (Suls, David & Harvey, 1996; Watson & Hubbard, 1996; McCrae & Costa, 1986), one of the objectives is to investigate personality differences in use of specific body image coping strategies.

Research linking measures of coping style to personality traits have found that Neuroticism is inversely associated with use of problem focused strategies (Watson & Hubbard, 1996); persons scoring higher in Extraversion are more likely to engage in positive thinking, seeking support and employ more problem-focused coping than emotion-focused coping strategies (Rim, 1986); Agreeableness is positively correlated to positive reappraisal and active coping and planning (Watson & Hubbard, 1996) and; Conscientious people use more active coping, planning and restrained coping whereas engaged less in disengagement or denial (Watson & Hubbard, 1996). However, research has been inconclusive regarding the influence of Openness on coping strategies (McCrae & Costa, 1986; Watson & Hubbard, 1996; David & Suls, 1999).

Body Image Coping Strategies

In body image literature, it is evident that in order to cope with distress caused from body dissatisfaction, individuals engage in a strategies ranging from cognitive to behavioral actions or reactions that help in accommodating or adjusting to these distressing factors (Cash, 2002). To over come body image dissatisfaction people engage in variety of purposeful actions such as grooming and appearance management activities.

Cash, Santos and Williams (2005) narrowed three body image coping strategies: avoidance, appearance fixing, and positive rational coping. Avoidance entails attempts to

evade threats to one's body image thoughts and feelings; appearance fixing concerns efforts to change one's appearance by concealing or correcting a physical feature perceived as flawed and; and positive rational coping involves mental and behavioral activities that emphasize the use of positive self-care or rational self-talk and the acceptance of one's experiences. Positive rational coping was also associated with less dysfunction when compared to avoidant and appearance fixing strategies (Cash, Santos & Williams, 2005). The study also revealed that among women, a more favorable body image quality of life was related to less use of avoidant coping and greater use of positive rational acceptance (Cash, Santos & Williams, 2005). Lastly, the greater use of positive rational acceptance was associated with less discrepancy in self-ideals, less frequent body image dysphoria, less probability of defining oneself on the basis of appearance, and had more favorable quality-of-life experiences related to their body image (Cash, Santos & Williams, 2005).

The purpose of Study 2 was to gain further understanding of (a) the relationships among personality, age and body image coping strategies; and (b) the mediating effects of appearance schema and appearance appraisal on the relationship between independent variables of personality, age and dependent variable of body image coping strategies.

To indicate the relationships investigated in this study the hypothesized models as shown in Figure 3.1, Figure 3.2 and Figure 3.3 were developed. The following hypotheses were tested in this study:

H1: Increase in Neuroticism would predict an increase in appearance schema.

H2: Increase in Neuroticism would predict decrease in appearance appraisal.

- H3: Neuroticism would predict increasing use of avoidance coping strategy.
- H4: Increase in Extraversion would predict decrease in appearance schema.
- H5: Increase in Extraversion would predict increase in appearance appraisal.
- H6: Extraversion would predict increasing use of positive rational acceptance coping strategy.
- H7: Extraversion would predict decreasing use of avoidance coping strategy.
- H8: Increase in Agreeableness would predict a decrease in appearance schema.
- H9: Increase in Agreeableness would predict increase in appearance appraisal.
- H10: Agreeableness would predict increasing use of positive rational acceptance coping strategy.
- H11: Agreeableness would predict decreasing use of avoidance coping strategy.
- H12: Increase in Conscientiousness would predict a decrease in appearance schema.
- H13: Increase in Conscientiousness would predict an increase in appearance appraisal.
- H14: Increase in Conscientiousness would predict increase in use of positive rational coping strategy.
- H15: Increase in Conscientiousness would predict decrease in use of avoidance coping strategy.
- H16: Increase in Openness would predict decrease in appearance schema.
- H17: Increase in Openness would predict in positive appearance appraisal.
- H18: Increase in appearance schema will predict increase in use of appearance fixing coping strategy

H19: Increase appearance schema will predict increase in use of avoidance coping strategies.

H20: Positive appraisal of appearance will predict decrease in use of avoidance coping strategy.

H21: Positive appraisal of appearance will predict increase in use of positive rational coping strategy.

H22: Positive appraisal of appearance will predict decrease in use of appearance fixing strategy.

H23: Increase in age will predict the use of positive rational coping strategies.

H24: Increase in age will predict decrease in use of avoidance coping strategy.

H 25: Increase in age will predict decrease in appearance schema.

H26: Increase in age will predict positive appearance appraisal.

H27: Appearance schema will mediate the relationship between personality and appearance appraisal.

H28: Appearance appraisal will mediate the relationship between personality and body image coping strategies.

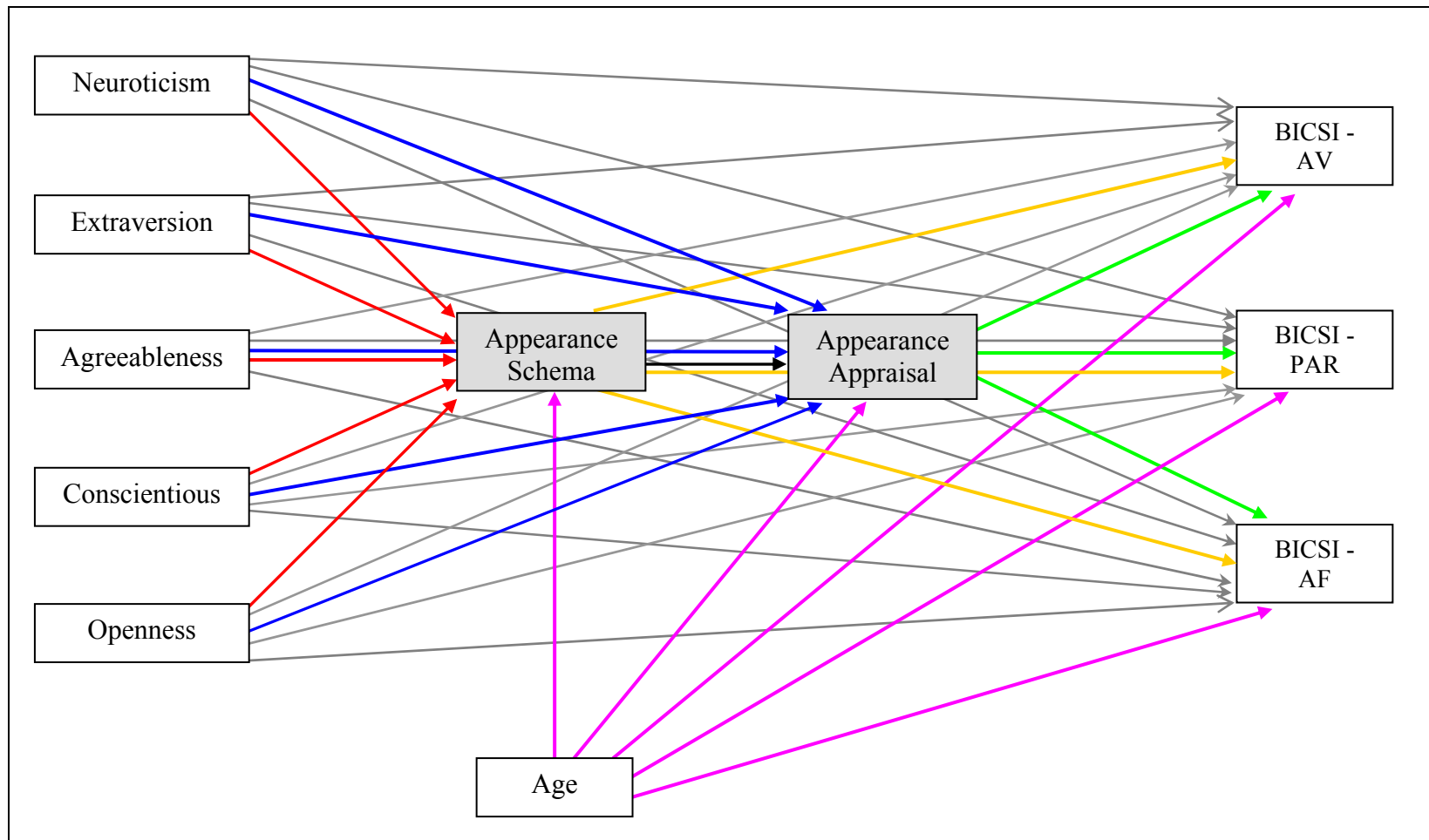


Figure 3.1 Complete Model developed from literature review (inclusive of all paths)

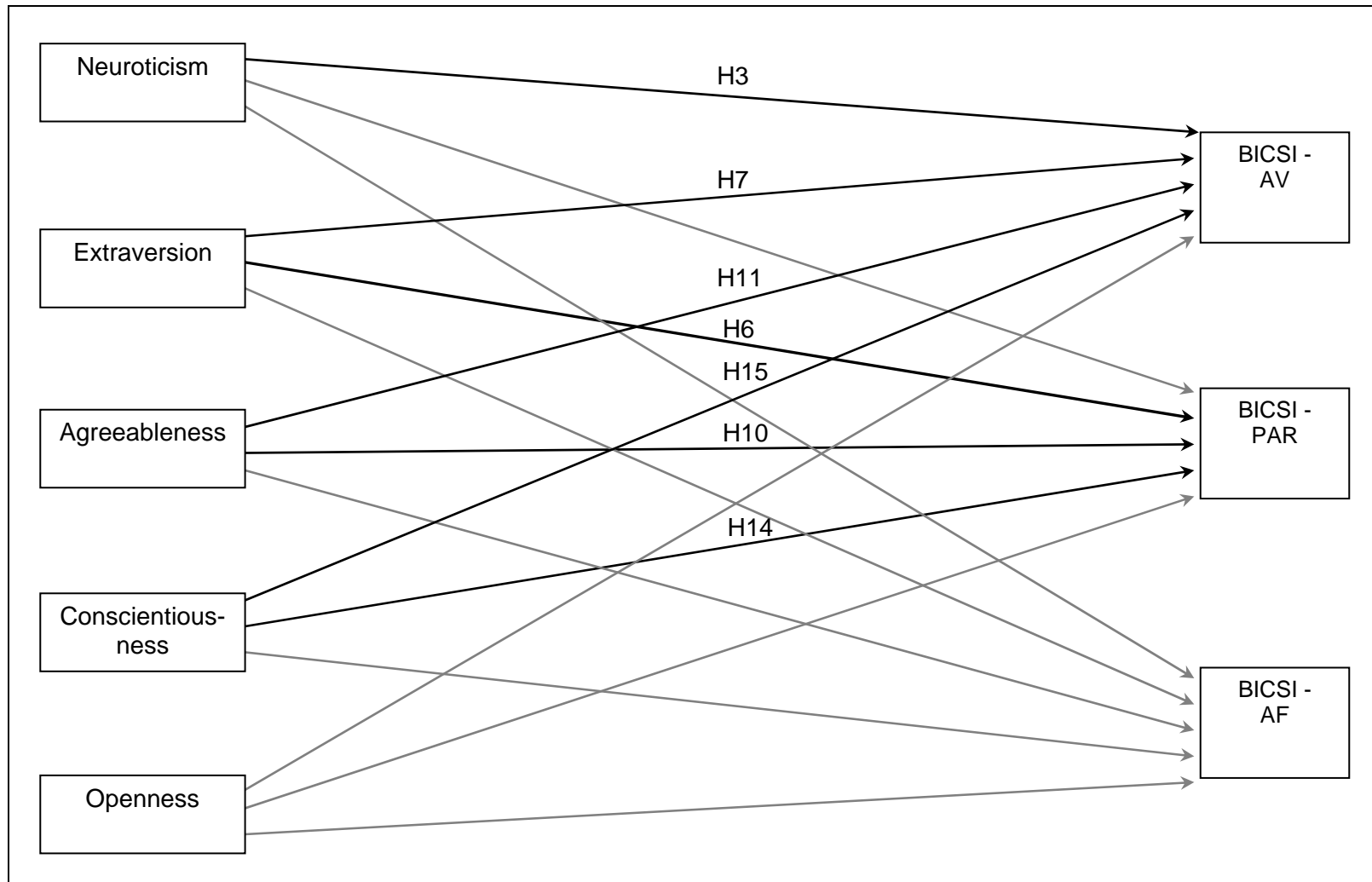


Figure 3.2 Effect of Personality traits on Body Image Coping Strategies

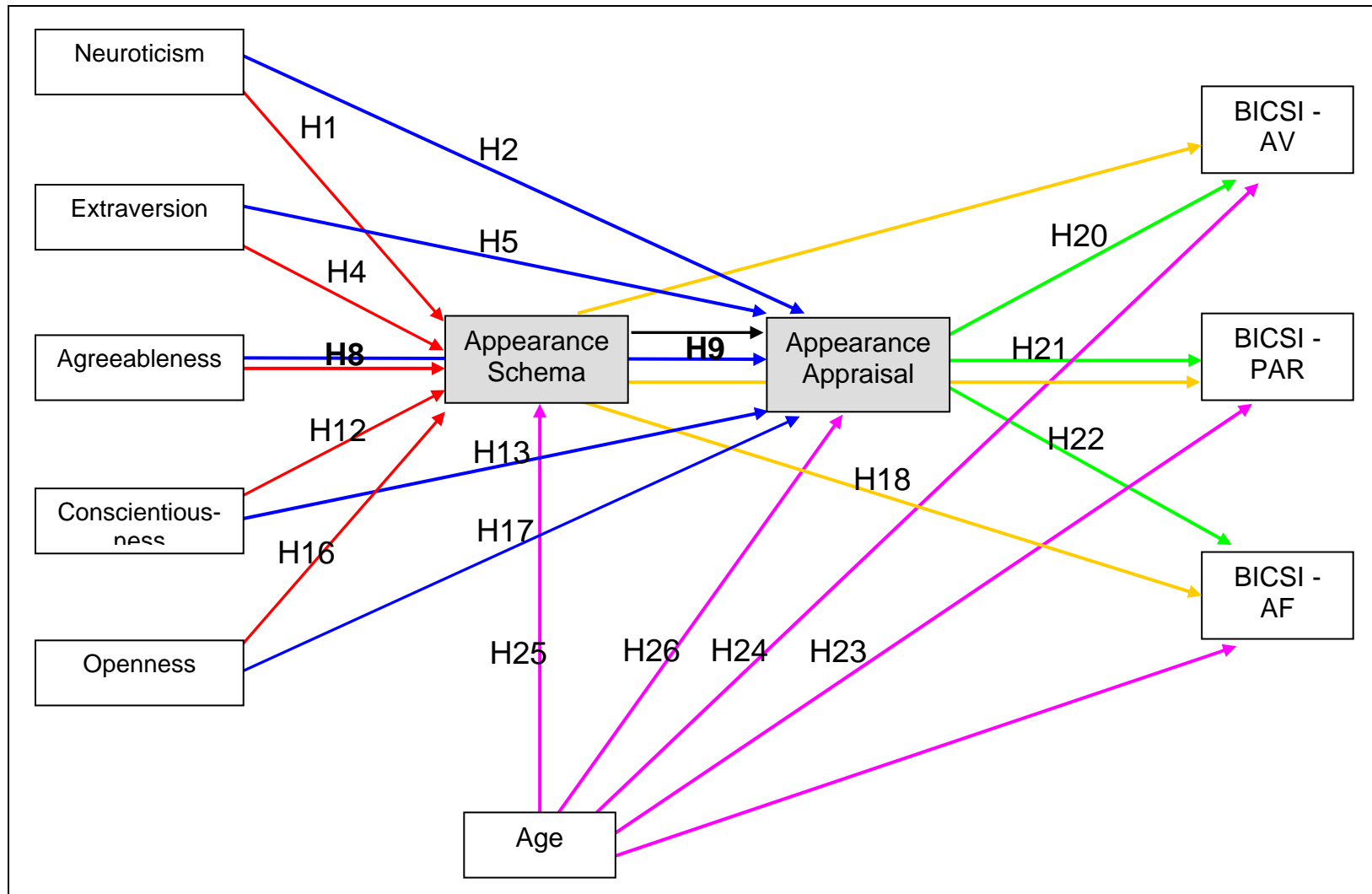


Figure 3.3 Model indicating indirect paths to test mediating effects

Method

This study was designed to investigate the role of personality and age in body image dissatisfaction experienced by the participants and the corresponding coping strategies used to them to overcome this dissatisfaction. The model explores the role of appearance appraisal in the choice of body image coping strategies used by the participants. Path analysis was used to estimate direct and indirect effects of personality and age on body image coping strategy; specifically, the mediating effect of appraisal on body image coping strategy will be examined.

To test the relationship between the exogenous and endogenous variables a conceptual model was developed as depicted in the Figure 3.1. The following analyses were subsequently conducted, I first considered the effect of personality traits and chronological age on the appraisal of body image dissatisfaction. Next I tested the effect of personality and age on the coping strategies used by participants to overcome body image dissatisfaction. Finally, I tested the mediating effect of appearance schema and appearance appraisal. Testing these hypotheses allowed me to predict body image coping strategies that certain personality types and age groups (cohorts) are likely to use in order to overcome body image dissatisfaction. It also allowed me to determine the association between appraisal and the resulting coping strategies used by participants in the area of body image.

Participants

Participants were 277 females between the ages of 20 to 86 years. The younger women's population was drawn from female students enrolled in the department of Design and Human Environment. Students were approached as a part of in-class activity for extra credit. The women over the age of 55 years were accessed through the Centre for Healthy Aging Research, Oregon State University. Other participants were accessed from Samaritan Health Services Employee list. Although data were collected from both men and women, only data collected from female participants were utilized to fulfill the objectives of this study. The demographic characteristics of the sample indicated that the respondents who took the survey were predominantly of American White/ Caucasian (259) ethnicity and the rest were distributed as 6 Asian, 4 Hispanic, 4 Native American and 4 chose others as their option (probably due to combination of different ethnicities). Among the respondents, 34 had high school education, 31 had associate degree, 73 had a bachelor's degree, 5 had license or certificate, 80 had college education, 47 had master's level of education and 6 had received education more than master's. The employment status of the respondents revealed that 113 were employed full time, 76 were in a part time employment, 25 were not currently employed, 11 were employed only seasonally and 48 were retired. The age distribution of the sample is displayed in Figure 3.4.

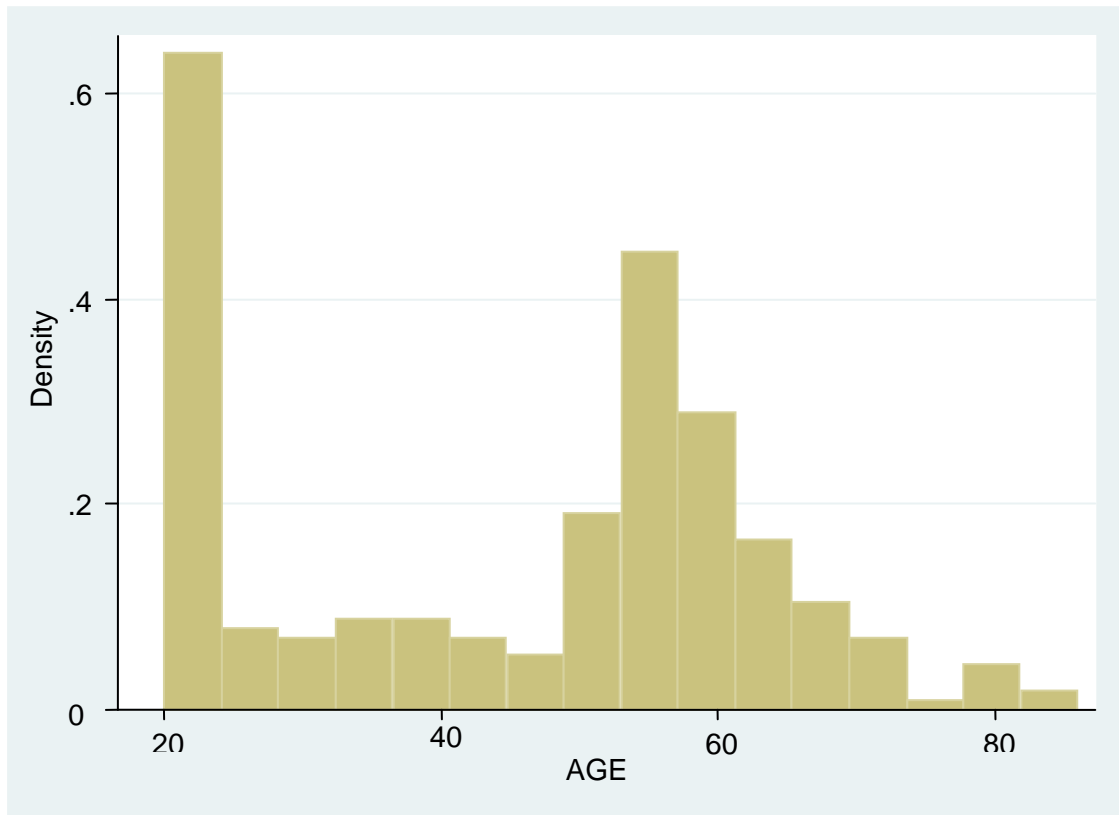


Figure 3.4 Age Distribution of Sample Population

Measures

A demographic sheet (including items of gender, age, income, and etc.), Body Appearance Schema –Revised (ASI-R), the Big Five Inventory (BFI), Appearance Appraisal Scale and Body Image coping Strategies Inventory (BICSI) were used to collect data for the present study. The total time it took participants to complete the survey was estimated at 20- 25 minutes.

Appearance Schema Inventory

The cognitive-behavioral aspect body image is the ‘investment’ aspect (Muth & Cash, 1997) and appearance schema inventory is a attitudinal scale measuring the extent

to which one views appearance as a measure of overall self-worth, and the behaviors that involve the enhancement and management of appearance (Cash, 2002; Chaote, 2005).

ASI assesses dysfunctional body image investment, as opposed to more adaptive valuing and managing of one's appearance (Cash, 2000b). The Appearance Schemas Inventory-Revised (ASI-R) is a 20- item instrument that assesses body image investment in relation to certain beliefs or assumptions about the importance, meaning, and influence of appearance in one's life (Cash, Melnyk, & Hrabosky, 2004). Using Cronbach's alpha the internal consistencies of the overall ASI-R and the two factors (subscales), termed 'self-evaluative salience of appearance' and 'motivational salience of appearance' (Cash, 2000b) were .88 for women and .90 for men (Cash, Melnyk, & Hrabosky, 2004).

Personality

This study utilized personality traits as independent variables. According to trait perspective there is general consensus among researchers regarding the five robust factors that are utilized to describe personality traits. In the Big Five structure the personality traits are measured on the following dimensions as shown in Table 3.1 (John & Srivastav, 1999).

Thus, in this study the personality traits of respondents were assessed through the 44 item Big Five Inventory (BFI) from John and Srivastava (1999), In this inventory 8 items measure Neuroticism (N), 8 items measure Extraversion (E), 10 items measure Openness to Experience (O), 9 items measure Agreeableness (A), and 9 items measure Conscientiousness (C). The items were rated on a five -step scale from 1 "disagree strongly" to 5 "agree strongly". The advantages of the BFI are its efficiency, taking only

about five min. of administration time and easy to comprehend. Furthermore, BFI items are short and easy to understand.

Table 3.1

Big Five Structure

	Name of Factor	Number of items measuring the factor	Dimensions measured
1	Extraversion	8	Energetic, Sociable, Positive emotionality
2	Neuroticism	8	Negative Affectivity, Nervousness, Self-consciousness
3	Agreeableness	9	Altruistic, Cooperative, Trustful
4	Conscientiousness	9	Dependable, Controlled, Constrained
5	Openness	10	Intellectual, Imaginative, Unconventional

Appearance Appraisal

According to Lazarus and Folkman's (1984) transactional model stress is experienced when the potential stressor (external event) is perceived as exceeding one's resources (i.e., the appraisal). Thus, consistent with traditional trait-state theory (Chaplin, John, & Goldberg, 1988) and measures it is possible that some individuals are predisposed to consistently appraise stressors as challenging or threatening. The purpose of this scale will be to identify whether participant appraises socio-cultural standards of appearance as threat or relevant to his/her well being.

Based on Roesch and Rowley's (2005) multidimensional, dispositional measure of appraisal, we will develop a scale that indicates appearance appraisal. The scales tapped three types of appraisal: *challenge* (representative of optimistic and self-efficacious thoughts associated with an appraisal of challenge), *threat* (representative of feelings associated with a threatening situation such as anxiety, helplessness), *resources* (representative of an appraisal of resources available to assist in coping).

Factor Analysis (principal component factor analysis) and varimax rotation were used to validate the scale. Factor analysis revealed patterns of interrelationships among the variables and identified redundant strongly inter-correlated variables thereby assisting in reducing the large number of variables to a smaller number of statistically uncorrelated variables (Agresti & Finlay, 1999).

Body Image Coping Strategies

There is a variety of approaches to the assessment of individual coping strategies (Cohen, 1995). Coping strategies can be assessed as a dispositional trait or as the use of a specific strategy. Coping measures can also be designed to assess coping strategies in specific situations or to assess coping across a variety of situations (Hassinger, Semenchuk & O'Brien, 1999). Although coping behavior demonstrates trait characteristics of stability and consistency across situations (David, 1997; Watson, David & Suls, 1999), yet in this study I choose to measure coping strategies pertaining specifically to body image dissatisfaction.

This study attempted to utilize a more dispositional approach to body-image coping. The 29-item Body Image Coping Strategies Inventory (BICSI) from Cash, Santos

and Williams, (2005) was used to measure how individuals characteristically manage threats or challenges to body-image experiences. Sample items include: “I make a special effort to hide or “cover up” what’s troublesome about my looks”, “I try to figure out why I am challenged or threatened by the situation” and “I try to ignore the situation and my feelings”. The participants will indicate their choices of coping strategies by checking in the appropriate space on the 5-point Likert scale from strongly disagree (1) to strongly agree (5). The items in the scale have been designed to tap three different body-image coping strategies: avoidance, appearance fixing, and positive rational acceptance. Appearance fixing concerns efforts to change one’s appearance by concealing or correcting a physical feature perceived as flawed. Avoidance entails attempts to evade threats to one’s body-image thoughts and feelings. The third strategy, positive rational acceptance, involves mental and behavioral activities that emphasize the use of positive self-care or rational self-talk and the acceptance of one’s experiences.

Procedure

The participants were approached to take part in the study and those who volunteer; they will be informed of the length and purpose of the study. Participants were informed that they could withdraw from the study at any time without penalty. They were also assured of the anonymity of their responses. After which, the questionnaire including measures of personality, body appearance schema, appearance appraisal, body image coping strategies and demographics were distributed to the participants. The questionnaire was anticipated to take a maximum of 25 minutes.

The younger women enrolled in a DHE class and students were offered extra credit in lieu of their participation, whereas the population from CHAR as well as employees of the Health Service Organization were given an opportunity to participate in a raffle which gave 5 rewards of \$50 VISA gift cards to selected participants.

Quantitative Study

Descriptive Statistics

Table 3.2 shows correlations, means, standard deviations for the ten observed variables and alpha for eleven observed variables. The outcome variables of body image coping strategies included three different strategies of avoidance, appearance fixing and positive rational acceptance. The coping strategy of avoidance showed significant correlation with the five personality traits, appearance schema's self evaluation factor and appearance appraisal. As expected avoidance was positively correlated to Neuroticism and was negatively correlated to the other personality traits of Extraversion, Agreeableness, Conscientiousness and Openness. Avoidance was also negatively correlated to appearance appraisal. The coping strategy of appearance fixing was significantly correlated to Neuroticism, Agreeableness, Conscientiousness, Openness, appearance schema, age and the three body image coping strategies (avoidance, appearance fixing and positive rational acceptance). The coping strategy of positive rational acceptance was significantly correlated to appearance schema, age and appearance fixing. Positive rational acceptance was positively correlated with above mentioned variables of appearance schema (both factors of motivation and self evaluation), age and appearance fixing.

Table 3.2

Correlations, Mean, Standard deviations and reliability measures for all variables used in Study 2

Measures	1	2	3	4	5	6	7	8	9	10	11
1. AA	1.00										
2. Neuroticism	-0.4584**	1.00									
3. Extraversion	0.142*	-0.293**	1.00								
4. Agreeableness	0.196*	-0.395**	0.160*	1.00							
5. Conscientiousness	0.277**	-0.362**	0.192*	0.394**	1.00						
6. Openness	0.085	-0.172*	0.267**	0.256**	0.207**	1.00					
7. Appearance Schema	-0.635**	0.2692**	0.096	-0.503	-0.082	0.026	1.00				
8. AF	-0.629**	0.303**	-0.001	-0.155*	-0.208**	-0.050	0.779**	1.00			
9. PRA	0.003	0.032	0.072	0.044	-0.047	0.111	0.177*	0.253**	1.00		
10. AV	-0.508**	0.324**	-0.202**	-0.209*	-0.323**	-0.170*	0.292**	0.394**	-0.032	1.00	
11. Age	0.267**	-0.231**	-0.086	0.108	0.125*	-0.031	-0.337*	-0.430*	-0.248**	-0.088	1.00
Mean	3.081	2.826	3.266	3.888	3.826	3.646	3.242	3.159	3.149	2.410	4.510
SD	0.680	0.713	0.727	0.542	0.580	0.568	0.621	0.700	0.644	0.706	1.790
Alpha (α)	0.779	0.839	0.870	0.814	0.818	0.823	0.907	0.881	0.884	0.852	-----

Note. N= 277: AA = Appearance Appraisal Scale; Big five Scale was used to measure Personality traits [Neuroticism (N), Extraversion(E), Agreeableness (A), Conscientiousness (C) and, Openness (O)]; Body Appearance Schema (BAS) [BASM = -Motivation; BASS = Self Evaluation]; Age ; Appearance Appraisal and; Body Image Coping Strategies (AV =avoidance, AF =appearance fixing, and PRA= positive rational acceptance)

* $p < .05$. ** $p < .001$.

Hypothesis Testing

Path analysis provides a technique to estimate presumed causal relations among observed variables (Kline, 2004). Using Path analysis, all the 29 hypotheses in the conceptual model (see Figure 3.1) were tested. The conceptual model consisted of six exogenous variables (age, five personality traits of Neuroticism, Extraversion, Agreeableness, Conscientiousness and Openness) and five endogenous constructs (appearance schema, appearance appraisal, three body image coping strategies of avoidance, positive rational acceptance and appearance fixing). Path analysis was conducted by a maximum likelihood estimation procedure using Mplus Version 5.

Based on the conceptual model 28 hypotheses were tested in this study. Results of the study found that 14 hypotheses were supported and 14 hypotheses failed to be supported. The results of the direct effects tested are shown in Table 3.3, whereas the indirect effects are shown in Table 3.4.

Direct Effect

The hypotheses related to Neuroticism revealed that the proposed positive relationship between Neuroticism and appearance schema (Hypothesis1) was supported ($\beta = 0.27$, $z = 4.35$, $p \leq 0.001$). Similarly, Hypothesis 2 predicting a negative relationship between Neuroticism and appearance appraisal ($\beta = -0.22$, $z = -4.34$, $p \leq 0.001$) was supported. However, the results failed to demonstrate a positive relationship between Neuroticism and use of avoidance coping strategy, Hypothesis3 ($\beta = 0.03$, $z = 0.53$, $p \leq 0.597$).

Table 3.3

Path Analysis Results: Estimates of Direct Effect

Hypothesis #	Variables	Standardized Coefficient	SE	Z	two tailed <i>p</i> - value
H1	Neuroticism → Appearance Schema	0.274	0.063	4.348	0.000***
H2	Neuroticism → Appearance Appraisal	-0.220	0.051	-4.338	0.000***
H3	Neuroticism → Avoidance	0.033	0.063	0.529	0.597
	Neuroticism → Appearance Fixing	-0.042	0.045	-0.931	0.352
	Neuroticism → Positive Rational Acceptance	0.025	0.071	0.354	0.724
H4	Extraversion → Appearance Schema	0.141	0.059	2.393	0.017*
H5	Extraversion → Appearance Appraisal	0.107	0.046	2.336	0.019*
H7	Extraversion → Avoidance	-0.077	0.055	-1.398	0.162
	Extraversion → Appearance Fixing	-0.030	0.039	-0.754	0.451
H6	Extraversion → Positive Rational Acceptance	-0.010	0.063	-0.162	0.871
H8	Agreeableness → Appearance Schema	0.063	0.063	0.994	0.320

Hypothesis #	Variables	Standardized Coefficient	SE	Z	two tailed <i>p</i> - value
H9	Agreeableness → Appearance Appraisal	0.012	0.048	0.251	0.802
H11	Agreeableness → Avoidance	-0.025	0.058	-0.437	0.662
	Agreeableness → Appearance Fixing	-0.046	0.041	-1.115	0.265
H10	Agreeableness → Positive Rational Acceptance	0.060	0.065	0.920	0.358
H12	Conscientiousness → Appearance Schema	-0.004	0.062	-0.068	0.946
H13	Conscientiousness → Appearance Appraisal	0.122	0.047	2.582	0.010*
H15	Conscientiousness → Avoidance	-0.160	0.057	-2.815	0.005**
	Conscientiousness → Appearance Fixing	-0.068	0.041	-1.686	0.092
H14	Conscientiousness → Positive Rational Acceptance	-0.095	0.065	-1.473	0.141
H16	Openness → Appearance Schema	0.012	0.058	0.211	0.833
H17	Openness → Appearance Appraisal	0.006	0.045	0.144	0.886
	Openness → Avoidance	-0.067	0.053	-1.264	0.206

Hypothesis #	Variables	Standardized Coefficient	SE	Z	two tailed <i>p</i> - value
	Openness → Appearance Fixing	-0.028	0.038	-0.740	0.460
	Openness → Positive Rational Acceptance	0.090	0.060	1.493	0.135
	Appearance → Appearance Schema Appraisal	-0.570	0.041	-13.93	0.000***
H19	Appearance → Avoidance Schema	0.028	0.068	0.414	0.679
H18	Appearance → Appearance Schema Fixing	0.583	0.045	12.946	0.000***
	Appearance → Positive Rational Schema Acceptance	0.238	0.077	3.101	0.002**
H20	Appearance → Avoidance Appraisal	-0.424	0.069	-6.150	0.000***
H22	Appearance → Appearance Appraisal Fixing	-0.195	0.051	-3.825	0.000***
H21	Appearance → Positive Rational Appraisal Acceptance	0.231	0.081	2.868	0.004**

Hypothesis #	Variables	Standardized Coefficient	SE	Z	two tailed <i>p</i> - value
	Age → Appearance Fixing	0.071	0.015	-4.722	0.000***
H23	Age → Positive Rational Acceptance	-0.078	0.022	-3.522	0.000***
H24	Age → Avoidance	-0.022	0.021	1.048	0.294
H26	Age → Appearance Appraisal	0.007	0.017	0.389	0.698
H25	Age → Appearance Schema	-0.092	0.020	-4.666	0.000

Note. $N = 277$. Est. /S.E. Critical Value (z) above 1.960, 2.576, and 3.291 are significant at $*p \leq .05$, $**p \leq .01$, $***p \leq .001$, respectively (two- tailed tests).

The results related to Extraversion revealed that Hypothesis 4, predicting a negative relationship between Extraversion and appearance schema was supported ($\beta = 0.14, z = 2.393, p \leq 0.02$). Similarly, the results also demonstrated support for Hypothesis 5, predicting positive relationship between Extraversion and appearance appraisal ($\beta = 0.11, z = 2.336, p \leq 0.02$). However, the results failed to support Hypothesis 6, positive relationship between Extraversion and use of positive rational acceptance coping strategy ($\beta = -0.010, z = -0.162, p \leq 0.871$). The results also failed to support Hypothesis 7, negative relationship between Extraversion and use of avoidance coping strategy ($\beta = -0.077, z = -1.398, p \leq 0.162$).

The results failed to support all four hypotheses related to Agreeableness; Hypothesis 8 (predicting negative relationship between Agreeableness and appearance schema), Hypothesis 9 (predicting positive relationship between Agreeableness and appearance appraisal), Hypothesis 10 (predicting positive relationship between Agreeableness and positive rational acceptance coping strategy) and Hypothesis 11 (predicting negative relationship between Agreeableness and use of avoidance coping strategy).

The results related to Conscientiousness failed to support Hypothesis 12, (predicting negative relationship between Conscientiousness and appearance schema) and Hypothesis 14 (predicting positive relationship between Conscientiousness and use of positive rational coping strategy). Nonetheless, the results supported Hypothesis 13, predicting positive relationship between Conscientiousness and appearance appraisal (β

= 0.122, $z = 2.582$, $p \leq 0.01$). Similarly the Hypothesis 15 predicting negative relationship between Conscientiousness and use of avoidance coping strategy was also supported ($\beta = -0.160$, $z = -2.815$, $p \leq 0.01$).

Finally the results pertaining to Openness, failed to support Hypothesis 16 (predicting negative relationship between Openness and appearance schema) and Hypothesis 17 (predicting positive relationship between Openness and positive appearance appraisal).

The result supported Hypothesis 18, predicting that an increase in appearance schema will demonstrate an increase in use of appearance fixing coping strategy ($\beta = -0.583$, $z = 12.946$, $p \leq 0.001$). The results also revealed that increase in appearance schema demonstrated increase in use of positive rational coping strategy ($\beta = 0.238$, $z = 3.101$, $p \leq 0.01$). Although, the results failed to support Hypothesis 19, as predicted increase in appearance schema failed to demonstrate positive relationship with avoidance coping strategy.

Results pertaining to appearance appraisal reveal that Hypothesis 20, predicting inverse relationship between positive appraisal of appearance and use of avoidance coping strategy was supported ($\beta = -0.424$, $z = -6.150$, $p \leq 0.001$). The results supported Hypothesis 21 revealing that positive appearance appraisal and positive rational coping were positively related ($\beta = -0.231$, $z = 2.868$, $p \leq 0.01$). Similarly, supporting Hypothesis 23 the results revealed that positive appearance appraisal demonstrated decrease in use of appearance fixing coping strategy ($\beta = -0.195$, $z = -3.825$, $p \leq 0.001$).

The results failed to support Hypothesis 24, demonstrated instead a significant negative relationship between increase in age and use of positive rational coping strategies ($\beta = -0.216$, $z = -3.590$, $p \leq 0.001$). Similarly results also failed to support Hypothesis 25, predicting an inverse relationship between increase in age and use of avoidance coping strategy ($\beta = 0.057$, $z = 1.049$, $p \leq 0.294$). Although the results indicated that increase in age demonstrate a significant decrease in appearance fixing coping strategy ($\beta = -0.181$, $z = -4.699$, $p \leq 0.001$). Furthermore, Hypothesis 26 was not supported as increase in age failed to demonstrate positive appearance appraisal. However results supported Hypothesis 27, as increase in age demonstrated significant decrease in appearance schema ($\beta = -0.266$, $z = -4.812$, $p \leq 0.001$).

Indirect Effect

Testing the mediation by appearance schema and appearance appraisal the results revealed that indirect effect from Neuroticism to avoidance coping through appearance schema (Hypothesis 28) failed to demonstrate significance. However, indirect effect from Neuroticism to appearance fixing coping through appearance schema was significant ($\beta = 0.160$, $z = 4.071$, $p \leq 0.001$). The results also show that indirect effect from Neuroticism to positive rational coping through appearance schema was significant ($\beta = 0.059$, $z = 2.481$, $p \leq 0.02$).

It was also found that appearance schema may be acting as moderator, buffering the effect of increase in age on use of coping strategies. The direct effect of age on appearance fixing ($\beta = -0.181$, $z = -4.699$, $p \leq 0.001$) where as the indirect path from

Table 3.4

Estimates of Indirect Effect in Full Model

Parameters	Variables		Standardized Coefficient	SE	Z	two-sided <i>p</i> -value
Neuroticism to:	Appearance Schema Avoidance	→	ns			
	Appearance Schema Appearance Fixing	→	0.160	0.039	4.071	0.000***
	Appearance Schema Positive Rational Acceptance	→	0.065	0.026	2.503	0.012**
	Appearance Appraisal Avoidance	→	0.093	0.026	3.538	0.000***
	Appearance Appraisal Appearance Fixing	→	0.043	0.015	2.849	0.004**
	Appearance Appraisal Positive Rational Acceptance	→	-0.051	0.021	-2.389	0.017**
	Appearance Schema Appearance Appraisal	→	-0.156	0.037	-4.199	0.000***
Extraversion to:	Appearance Schema Avoidance	→	ns			
	Appearance Schema Appearance Fixing	→	0.082	0.035	2.334	0.020*

Parameters	Variables	Standardized Coefficient	SE	Z	two-sided <i>p</i> -value
	Appearance Schema → Positive Rational Acceptance	ns			
	Appearance Appraisal → Avoidance	-0.045	0.021	-2.189	0.029*
	Appearance Appraisal → Appearance Fixing	ns			
	Appearance Appraisal → Positive Rational Acceptance	ns			
Agreeableness to:	Appearance Schema → Avoidance 7	ns			
	Appearance Schema → Appearance Fixing	ns			
	Appearance Schema → Positive Rational Acceptance	ns			
	Appearance Appraisal → Avoidance	ns			
	Appearance Appraisal → Appearance Fixing	ns			
	Appearance Appraisal → Positive Rational Acceptance	ns			

Parameters	Variables		Standardized Coefficient	SE	Z	two-sided <i>p</i> -value
Conscientiousness to:	Appearance Schema Avoidance	→	ns			
	Appearance Schema Appearance Fixing	ns→				
	Appearance Schema Positive Rational Acceptance	→	ns			
	Appearance Appraisal Avoidance	→	-0.052	0.022	-2.294	0.017*
	Appearance Appraisal Appearance Fixing	→	-0.024	0.011	-2.136	0.033*
	Appearance Appraisal Positive Rational Acceptance	→	ns			
Openness to:	Appearance Schema Avoidance	→	ns			
	Appearance Schema Appearance Fixing	→	ns			
	Appearance Schema Positive Rational Acceptance	→	ns			

Parameters	Variables	Standardized Coefficient	SE	Z	two-sided <i>p</i> -value
Age to:	Appearance Appraisal → Avoidance	ns			
	Appearance Appraisal → Appearance Fixing	ns			
	Appearance Appraisal → Positive Rational Acceptance	ns			
	Appearance Schema → Avoidance	ns			
	Appearance Schema → Appearance Fixing	-0.155	0.034	- 4.584	0.000***
	Appearance Schema → Positive Rational Acceptance	-0.063	0.024	-2.588	0.010**
	Appearance Appraisal → Avoidance	ns			
	Appearance Appraisal → Appearance Fixing	ns			
	Appearance Appraisal → Positive Rational Acceptance	ns			

Parameters	Variables		Standardized Coefficient	SE	Z	two-sided <i>p</i> -value
Appearance to: Schema	Appearance Appraisal → Avoidance		0.242	0.044	5.518	0.000***
	Appearance Appraisal → Appearance Fixing		0.111	0.030	3.692	0.000***
	Appearance Appraisal → Positive Rational Acceptance		-0.132	0.47	-2.794	0.005**

Note. $N = 277$. Unst., unstandardized; St., standardized

Est. /S.E. Critical Value (z) above 1.960, 2.576, and 3.291 are significant at $*p \leq .05$, $**p \leq .01$, $***p \leq .001$, respectively (two-tailed tests).

age to appearance fixing through appearance schema shows a reduced effect ($\beta = -0.155$, $z = -4.584$, $p \leq 0.001$). Similarly, direct effect of age on positive rational coping ($\beta = -0.216$, $z = -3.590$, $p \leq 0.001$) and the indirect effect from age to positive rational acceptance through appearance schema ($\beta = -0.063$, $z = -2.588$, $p \leq 0.01$) shows reduced effect. Testing the role of appearance schema for moderating effect using interaction variables in regression it was found that interaction variable 'age X appearance schema' significantly predicted positive rational acceptance.

Lastly, the mediating effect of appearance appraisal was tested. The indirect effect of Neuroticism on avoidance coping strategy through appearance appraisal (Hypothesis 29) was found to be significant ($\beta = 0.093$, $z = 3.538$, $p \leq 0.001$). Similarly, the indirect effect of Extraversion on avoidance coping strategy through appearance appraisal was also significant ($\beta = -0.045$, $z = -2.189$, $p \leq 0.05$). However, indirect effect of Agreeableness or Openness through appearance appraisal on avoidance coping strategy failed demonstrate significance. Nevertheless, the indirect effect of Neuroticism on appearance fixing coping strategy through appearance appraisal (Hypothesis 29) was found to be significant ($\beta = 0.043$, $z = 2.849$, $p \leq 0.01$). Similarly, indirect effect of Conscientiousness on appearance fixing coping strategy through appearance appraisal (Hypothesis 29) was found to be significant ($\beta = -0.024$, $z = -2.136$, $p \leq 0.05$). Indirect effect of appearance schema on appearance fixing coping strategy through appearance appraisal was found to be significant ($\beta = 0.111$, $z = 3.692$, $p \leq 0.001$). Furthermore, the indirect effect of Neuroticism on positive rational coping strategy through appearance appraisal was found to be significant ($\beta = -0.046$, $z = -2.369$, $p \leq 0.02$).

Qualitative Analysis

The purpose of the study was to examine the variations among responses of women. The quantitative aspect of this study fails to reveal the individual variability and unique explanations for their attitude and behavior towards appearance. Therefore, the semi-structured interviews focused on capturing the individual perceptions and behavior of women towards importance of appearance, change in perception and behavior toward appearance, appraisal of body dissatisfaction and coping strategies employed by women to overcome appearance dissatisfaction.

The interviews were conducted with 15 women at the University Library or in an empty classroom. The interviews were in-depth, yet loosely structured interviews. Interviews were transcribed verbatim, which were eventually coded, and sorted in various ways to search for salient themes in the interviewees' accounts. For example, after examining each respondent's account independently, I compared responses across reports according to individual factors such as importance of appearance, change in perception and behavior toward appearance, appraisal of body dissatisfaction and coping strategies employed by women to overcome appearance dissatisfaction.

Analytic Approach

Qualitative research design was chosen to provide evidence in support of the findings from the quantitative study. The qualitative design was chosen for its utility in capturing the variation in how individuals feel, think, and act in the domain of appearance across life in order to determine the influence of age on individual perception and

behavior toward appearance. This design began with a general set of concerns derived from the literature, yet the flexibility to allow for the emergence of themes not originally anticipated was maintained during the interviews (Patton, 1990). Thus, the prior quantitative research guided the investigation and analysis, yet allowing scope for new themes to emerge. It also helped in organizing and providing prior knowledge to assign themes to the qualitative data.

As explained by Kuczynski & Daly (2002), the utilization of open-ended nature of the survey is indicative that the respondents' responses cannot be regarded as exhaustive. We also took into consideration that since the age of respondents in this interview varied greatly, the resultant experience that they drew upon to provide examples for the study also varied. Finally, open-ended questions suggest general topics but provide individuals with the freedom to respond with answers that are uppermost in their minds rather than following a researcher's agenda (Kuczynski & Daly, 2002). Thus, not every respondent covered similar range of issues or topics in relation to appearance.

The principles of open and, axial coding (Strauss & Corbin, 1990) were followed during data analysis by the researcher. The foremost step in the analysis of the data entailed an inductive approach of identifying key themes that emerged across all the 15 transcribed interviews. Eventually broader concepts are identified from the recurring similarities across themes. Axial coding is the aspect of analysis which involves identification of how the various themes are connected.

Demographic description

Table 3.4 shows that respondents were recruited from Oregon State University student population and from Center for Healthy Aging Research (CHAR). The respondents were all female ($n = 15$) and the majority of respondents ($n = 14$) described their ethnicity as White/ Caucasian American with exception of one respondent whose ethnicity was a combination of White & Native American.

Table 3.5

Demographics of Respondents

Respondent	Age	Ethnicity	Education
1	22	White American/ Caucasian	Masters
2	25	White American/ Caucasian	Masters
3	25	White American/ Caucasian	Masters
4	32	White & Native American	Masters
5	33	White American/ Caucasian	Masters
6	36	White American/ Caucasian	Masters
7	44	White American/ Caucasian	Masters
8	52	White American/ Caucasian	Bachelors
9	56	White American/ Caucasian	Bachelors
10	56	White American/ Caucasian	Bachelors
11	57	White American/ Caucasian	More than Masters
12	58	White American/ Caucasian	Bachelors
13	65	White American/ Caucasian	Bachelors
14	65	White American/ Caucasian	More than Masters
15	68	White American/ Caucasian	Bachelors

Results

I assessed the importance of appearance to the respondent, their orientation towards engaging in activities as a way to understand why some women were highly invested in their appearance and others dismissed it. These results support the prediction that age influenced both appearance appraisal and coping strategies utilized to overcome dissatisfaction with one's appearance. Besides, other interesting themes emerged such as difference in cultural influence within the U.S.A. For example, the women from Oregon approached toward appearance and their approach towards aging resulted in healthier activities. It is also likely that the women over the age of 50 interviewed in this study were volunteers in CHAR and thus results may be biased. The following section presents the primary themes that emerged from the 15 interviews conducted. The themes are summarized as (a) importance of appearance, (b) change in perception of appearance (c) appearance appraisal

Importance of appearance

The interviews revealed that there are two constructs that are closely linked in the domain of appearance: (1) The importance appearance has in one's life and; (2) importance one gives to appearance. Appearance may be important to some individuals only to the extent that it is a part of one's routine. As pointed out by one respondent aged 36, "Even if I am exhausted I will do myself to look awake and like I have my act together. It helps me grounded and helps me focus for the day."

Respondents were asked 'to what extent does an individual's appearance would contribute to the overall assessment of the person' and eleven respondents said it would

contribute marginally. We observed that there was a difference in the perception among the women in younger age cohort (under 45 years) versus the women in the older age cohort (over the age of 50 years). As reflected in the following observation made by a respondent aged 58 years:

“In your 50s and 60s I think that you have experienced what makes a difference in a person and usually it is not appearance, where you have seen the exceptions to the rule and you have seen it happen enough times to realize that just because somebody looks a certain waybut then what you thought may not necessarily be correct.. I think as people get older they get a little more accepting and then when you are get 70 you are very set in your ways.”

The respondent further provided an illustration explaining that her mother's (a woman aged above 70 years) concern regarding appearance and the importance she placed on appearance arose due to her experiences in her early childhood day.

“My mother grew up during the great depression in 1929-1930. She was about 6 years or so, and her parents were immigrants. During the depression it was ‘you immigrants are taking all of the jobs from the real Americans’ especially because there were very few jobs to be had, so for her it is very very important to be American and because she was the first generation to be born in this country, so it was very very important for her to look the part... for some people appearance is important because if you are dressed nicely, you are in the middle class and doing well and that is very important to her.”

Interviews also revealed that a four respondents developed their attitude towards appearance as a reaction against socially prevalent (stereotypical) expectations that were mediated by either their parental or peers. Two respondents aged 57 and 58 reflected back on their childhood and revealed that their behavior stemmed as a reaction to social pressures related to appearance. A respondent aged 57 year old said, “When I was

younger, I was really insecure about my appearance. I would say my mother was insecure about her appearance and kind of instilled it in the three of us (respondent and respondent's sisters). She was critical if she thought we weighed too much and I sort of rebelled and went the opposite way. There was something about that which really irritated me and so I went the other way." Similar response was also demonstrated by a younger respondent in her 20s, "Because I know it (appearance) is being noticed more than usual, I try not to judge it or notice it".

Demonstrating the importance of life events on one's priorities and concerns was well demonstrated in the response of one of young women aged 32. The respondent had faced severe hardships as a result of her mother's death (when the respondent was much young) and subsequently loss of contact with her father and thus in comparison to those concerns, appearance concerns were of no importance to this respondent. Other explanation for an individual giving importance that emerged from the interviews was the culture and change in preference of appearance across different generations. A respondent age 44 said, "I think it is a generational thing. I think looking around campus there are a good number of the young women who don't put make up at all and I think it's could be a regional thing because in Washington (state) everyone wore make-up but in Oregon women don't. I notice here in Oregon that lot of older women don't wear makeup or don't wear makeup as much and they look great. I don't know if it's the lifestyle thing. I wish I can embrace that myself. My mother in-law and my mom were both from southern states and they all wore make-up everyday." A 52 years old respondent referred to the culture that impacted her thinking immensely, "I guess because

I am a child of the 60s, so I am not into all the things that people do to artificially look a certain way. I am more into looking at them and getting a sense of who they are on the inside.

Change in perception of appearance

The interviews revealed that there was considerable inter individual variability regarding the changing importance of appearance across one's life. For example, a 65 year old respondent reports:

“In college I guess you try to attract guys and you took a little more care. Once I had kids I didn't have time (laughs) to worry about it. I think its sort of ebb and flow with what is going on in your life like when I got divorced 15-16 years ago, of course then if you want to go back into the dating scene you have to pay more attention and now I just lost 30 pounds and that is more for health reasons. I don't have any health problems but to avoid them.”

Whereas on the other hand, another respondent over the age of 56 years revealed:

“I think in terms of my clothing selections not much has changed. I have had the same basics. I don't follow the trends; I like cotton clothing and things that are comfortable. Comfort is very important to me. The only thing that has changes is that I weigh more, I am heavier now and I think never aware of trying to be slender to attract somebody. I followed my own mind and I was not necessarily looking for a partner for lot of my single life. I was quiet content so I would say not much has changed. In fact, I probably own some of the same clothes that I would have worn then if they haven't worn out.”

One of the respondent who was above the aged 57 years observed that “belonging to older age group that it is liberating to be older person because society's expectation of women fall to the younger women, whether the expectation was of being beautiful or

being very accomplished.” While another respondent aged 56 perceived the expectations on appearance differently.

I think it does change. You are more conscious or probably more careful about it but also want to be look like you are not caught in an older stage. I see women my age who look older and a part of it is the style that they wear, the way they hold themselves and the way they dress. I would prefer to keep up with the times, not that I want to look youthful but I want to look my best for me. I guess I am more interested in that because as I grow older I don't want to appear like caught in an era.

Centrality of Appearance

Demonstrating the influence of schema on how we perceive our cues in our environment, respondent aged 65 years stated, “May be I am much more a people person, oriented towards people, their behavior and, their actions than I am to seeing what they look like. I guess it's the things I am doing are more interesting and what people have to say is more interesting than what they are looking like.” It was also interesting to note that people developed schemas based on their own experiences for example a respondent who appraisal her appearance stating that “I would need a whole face and body transplant to look very nice” and the respondent has utilized her own experience to created parameters of assessing others and also reveals the coping strategy of rational acceptance, “I expend my energy on different things, part of it is because even if I were to expend a lot of energy I would never be a beautiful person and I don't necessarily think that the way you dress or look necessarily tells you about the person.”

We observed that when health becomes primary concern for an individual at any age, then appearance is not as central to one's self concept. For example a respondent

aged 36 and suffering with diabetes noted:

I take my dogs for a walk for 45 minutes most days. I stretch on the floor and go for kick boxing class at school about two times a week. It is over all health. My own personal motivation is to keep my diabetes under control, my blood sugar in range. So I have to pay attention to the complicated dynamic and I have to calculate in snack and stress and hormones. I want to be in shape because I feel proud of who I am. Exercise also helps with good posture and it is a good pain reliever because of back pains. I have had enough injuries to know that if I keep working out my body feeling better.

Another respondent who is a cancer survivor had a similar response, “I am walking, doing yoga, I am starting to run. Its more like ‘yes, I need to exercise’. It is more about being at a healthier weight but it is also a de-stressing thing for me. Its overall health not primarily weight.”

Appearance Dissatisfaction

Consistent with Tiggemann (2004) findings, the interviews revealed that twelve women reportedly experienced dissatisfaction with some aspect of their appearance. A respondent aged 65 discusses her current appearance dissatisfaction:

I think weight is probably one of the main things. When I was heavier I look into the mirror and nothing looked good when you tried them on, you wore baggier clothes that didn’t fit that well. And as I got older some colors didn’t look as good on me, especially with my hair going gray some colors didn’t look as well.”

It was also interesting to find that appearance may not be important during one’s younger years but as the signs of aging become obvious in one’s appearance it might make person conscious of their aging self and that may be distressing. For example one

respondent in her late 50s voices the concerns of aging appearance, “It was really distressing on a certain level to realize I look old. Suddenly I care that I look old and I don’t like that feeling. It definitely has changed. I really didn’t care about how I looked until I hit 45.

Appearance Appraisal

Appraisal of one’s appearance also undergoes change as we observed through interviews of women. For example a respondent aged 44 explained how her evaluation of appearance modifying or enhancing activities were a product of her socialization, but now that she was a mother herself she questioned it as she was to explain to her young impressionable daughter:

My mom was raised in such a way that it was unthinkable to go out without make up, the whole face, foundation and everything and she still does that. I am not quiet so much but it is still deeply ingrained in me and I have been questioning that recently especially now that my daughter is looking at make-up.

On the other hand, for some women growing older resulted in change with regard to familial social support. For instance, few women with daughters experienced that as the daughters grew older they gave advice on matters of appearance. A respondent aged 52 whose college going daughter (21 years old) has an influence on the clothes that the respondent now wears. The respondent illustrated their mother–daughter relationship:

My older daughter is now my fashion consultant (smiles). She’s going to be 21 and I don’t even like to go and buy clothes without her because I will buy something and she will say ‘mom’. So I now get my advice of what to wear from my daughter and that’s fun because if it weren’t for her I would probably be wearing very matronly clothes. She has told me ‘mom you got a good figure, don’t hide it.

It was also interesting to find that although most respondents in our study discussed their mothers, daughters or sisters while explaining their approach to appearance enhancement or importance of appearance. I found that those respondents whose mothers placed a great deal of emphasis on appearance did not necessarily imbibe the same approach, instead some respondents rebelled and decided that appearance need not be important. At the same time there were also respondents who continued to be affected by their mother's pressure until much later in their lives (in their 50s and 60s).

Besides we also found that some respondents attributed their approach towards appearance to the events in their lives or the period in which they grew up or the culture (for example, Oregon versus Arkansas) in which they grew up. Similar to the influence of respondents' mother on them, we noticed that the influence of those respondents who were mother themselves provided evidence that there are variety of factors that may influence a child's appearance behavior other than the mother's attitude to appearance. For instance one respondent who believed in natural appearance noted:

I think to some degree I had a lot of my attitude forged in the 60s and early 70s where I was raised in the whole era of natural and... we fought real hard for the right to be ourselves and to be proud of it and not be ashamed. I remember getting into big fights with mom over that. Recently, I had a conversation with my twenty year old and she said if I had tones of money I might consider getting a boob job. I said 'oh my god please don't ever do that!! What's the point?' and she said, 'that's easy for you mom because you have bigger boobs'. And I said to her, 'I looked just like you until I had kids and nursed babies, so there's nothing wrong with the way you look' and so I talked to her.

Reflecting upon a different approach to appraisal of appearance was a respondent aged 65 year old who said, "I think when you get older, it is just not as

important. It is not important as your family, your friends and your health and that type of thing, your priority changes.”

Coping Strategies

Analysis of the fifteen interviews conducted for this study revealed that the coping strategies women commonly used to overcome appearance dissatisfaction were appearance fixing and positive rational acceptance strategies. In majority (twelve) of the cases it was a combination of both coping strategies that helped maintain respondents' self image.

Appearance fixing

Coping strategies that is motivated by health were prominent among women across all the age groups. One of the respondents aged 65 year reports, “I went to weight watchers and joined a gym and hopefully this time the weight stays off. I go to gym and do some weight stretching and cardio machine. I think it is may be a little more on the health side.” Another respondent who wasn't interested in engaging in too many physical activities said, “I bike not for recreation but for run errands or go to work. I walk on a tread mill not to loose weight. I don't care much about how much I weigh, I care about how I feel and that I am healthy. I have the belief that being slender is not automatically guarantee good health. I think that it is more important what we eat and what are mental state is and that sort of thing. I do walk because it makes me feel better, I know its good for me but I don't go to a gym.”

Sentiments reflected by a respondent aged 36 showed that although appearance fixing may initiate the involvement in appearance fixing activity, yet it may not be the only driving force:

My weak body image place has always been my belly. I do sit ups and I try to both accept what it is besides saying to myself that its good to have a healthy little belly because I am a woman and we have layers of fat ... its fine. I also dress in a way that emphasizes other parts. Then again I try to work out mainly to clear my head more so than to get a flat belly. It is beginning goal, but then I end up feeling more energized and healthier, so the end result is better.

Positive rational acceptance

Similar to Tiggemann's (2004) findings, this study revealed that although most women across all age groups experienced dissatisfaction with some aspect of appearance. Yet, we found that increase in age could be associated to increasing use of positive rational acceptance coping strategy among these women. Demonstrating the gradual increase in use of positive rational approach as women gain maturity with increase in chronological age, a respondent aged 33 years mentions, 'I still have weight issues but not as severe as in junior high. As you get older you get comfortable with yourself, you still think about it but it is more of what I want of me versus what someone is thinking about me. I think as you get older you become more comfortable in your skin. May be cause you have been so long with it you have to be (laughs)."

In another interview we found that a respondent aged 57 presented her views on the new technology of body enhancement. The respondent expressed that in her mind she

would go through constant dialogues with her own self trying to dissuade herself from opting for any of the intrusive measures. The respondent reported:

“I don’t understand why people are so driven to look younger than they are. The funny thing is I am at an age now where I have some wrinkles. Although, I don’t mind my gray hair but I look at my wrinkles and think ‘oh I don’t like the wrinkles’. So then I remind myself, how I always admired women who were just natural for their age. I have a dialogue in my head and I can see the temptation now but at the same time, I have admired people who felt comfortable in their own skin and allowed themselves to age and then I would doubt I would have plastic surgery.”

Once again it was interesting to find that although seven women reported some use of appearance fixing strategy, yet they did not choose intrusive change. For example a respondent aged 56 mentioned, “You know I earned all these lines on my face and I just think there is something about being your age and accepting that with some amount of grace and making the most of what I have. I am not changing it that being said, I do get my hair done and what I get is what they call a weave.”

Although research in health studies have demonstrated that increase in age predicts increase in positive rational coping, we found that utilization of this coping strategy was also common. For example a woman aged 25 stated, “I can’t go fix it, I am who I am. I just have to focus on what I can control about myself and what I can’t.”

Discussion

The purpose of this study was to understand the following: (a) the relationships among personality, age and body image coping strategies; (b) the mediating effects of appearance schema and appearance appraisal on the relationship between independent variables of personality, age and dependent variable of body image coping strategies.

The study found that although the direct relationship between Neuroticism and the coping strategies failed to demonstrate significance, the indirect paths between Neuroticism and appearance fixing through appearance schema were significant indicating that appearance schema determined the strength of relationship between Neuroticism and all the coping strategies. As shown in Table 3.3, the results demonstrated a positive relationship between Extraversion and appearance appraisal, as well as Conscientiousness and appearance appraisal. The findings of this study reveal that appearance schema (measuring the centrality of appearance) mediated the relationship between Neuroticism and appearance appraisal. The probable reason for inconsistency in the findings of this study and other studies could be due to the use of different tools in measuring the constructs.

In this study, age was measured on a continuum and rather than using cohorts or categorizing the sample on the basis of age range. The qualitative findings from this sample indicated that females across different ages experienced body dissatisfaction. It was therefore not surprising that the results of path analysis and interviews found that increase in age did not demonstrate a positive appraisal of appearance. The qualitative study revealed that women who had more experience or experienced stressful; situation

in other aspects of their lives (such as, coping with health related issues or living through the experience of witnessing one's own children suffering from psychological, behavioral or pathological issues) tended to be less judgmental about their own appearance and of others. Thus, the interviews revealed that women perceptions and behavior towards appearance are defined and modified by their experiences across life. The study also found that unlike our prediction (based on research investigating health relevant topics), increase in age and use of positive rational coping strategies were negatively related. Confirming our prediction based on findings in health related topics, positive appraisal determined increasing use of positive rational coping. The findings are very useful for understanding the association between age, appearance appraisal and coping strategies women utilize across different age groups.

Concurring with Crocker & Wolfe (2001), the findings of this study also showed women with higher appearance schema (women who believed that their appearance is strongly contingent to their self-worth) appraised their appearance more negatively. Besides increase in appearance schematicity also predicted a reduction in the use of positive ration coping strategy. But surprisingly the results indicate that individuals who demonstrated appearance schematicity also use positive rational acceptance, although they did not demonstrate increasing use of avoidance coping. Hence, for future research I would suggest the inclusion of constructs such as, self efficacy or internal versus external control and attribution in the studies utilizing life span or life course approach to understand the changes occurs in appearance related behavior.

Concurring with Paxton and Phythian (1999; Tiggemann, 2004), the qualitative findings from this sample indicated that females across different ages experienced body dissatisfaction and thereby the appearance appraisal is not influenced by the individual's age. The quantitative results revealed that use of appearance fixing coping reduced with increase in the age of women, besides increase in age resulted in decreased use of appearance fixing strategies among the women. The findings also demonstrate that increase in age predicted reduction in appearance schematicity. Hence, with increase in age the centrality of appearance to one's assessment of self worth reduces across an individual's life.

Thus, as anticipated personality and age (personal characteristics) demonstrated significant influence on the body image coping strategies. One of the important implications that emerged from the data is related to the often overlooked influence of life experiences and important life changing events may determine the focus or attention one places on different domains of one's life. It is also important to consider the transactional nature of the extent of importance one gives to appearance and the importance of appearance in one's life. Here it is useful to mention that although in most cases increase in age is associated with more experience, there are exceptions when the situational event demands coping skills far more crucial to one's wellbeing than one's appearance.

Conclusion

The lack of correlations among the two traits (Agreeableness and Openness) , with appearance related behavior in the current study as well as past studies could be attributed to the lack of validity of the traits (measuring these factors) to explain appearance related behavior. Although the five personality factors have successfully explained inter individual variability in health related studies, not all the lower level traits may be valid in investigating appearance related behavior. Furthermore, incase of future studies investigating the role of Personality it would be valuable to investigate the relationship of appearance behavior with individual traits rather than the five factors,

It is important to note the limitations of this research. First, this study is largely limited to White American/ Caucasian women who belong to the educated group. Secondly as the data from this study suggests, it is possible that perceptions of appearance and other appearance enhancing or modifying behaviors may be influenced by the fact that women in both age cohorts were all currently residing in Oregon and may have internalized the dominant or prevalent culture. However, although this study yields information that could be interpreted as developmental process of body image, yet we must consider ‘cohort influence’ which suggests that experiences of women born at different time periods differ due to the events associated with those time periods. Besides during interviews when recollecting past experiences it is likely that those experiences were interpreted by the respondent in light of the present (Ross & Buehler, 2003). Also we can not discount the probability of selection biases; women who have strong opinions (negative or positive) towards appearance related activities and behavior could have been

represented due to the questionnaire's focus on appearance-related issues; thus leading in turn to a potential threat to the representativeness of the body image scores as compared to the general population (Kvalem et al., 2006).

Another concern that may emerge from inconsistency in findings from qualitative and qualitative methods regarding the body image coping strategies. The qualitative study found the women indicated use of positive rational coping where as the quantitative findings did not show significant use of positive rational coping among women older than 25 years. Thus, it would be important to investigate if there was need for any revision in the content of the items measuring positive rational acceptance coping strategy in the BICSI scale.

Lastly, future research utilizing longitudinal designs and a heterogeneous population would assist in observing if these findings could be generalized to a larger population across U.S.A.

References

- Aldwin, C. M. (2007). *Stress, coping and development: An integrative perspective* (2nd ed.). New York: Guilford Press.
- Aldwin, C. M., Sutton, K. J., Chiara, G., & Spiro, A. (1996). Age difference in stress, coping and appraisal: Findings from the normative aging study. *Journals of Gerontology: Psychological Sciences*, 51B, 179-188.
- Brandstädter, J. (1999). The self in action and development: Cultural, biosocial, and ontogenic bases of intentional self development. In J. Brandstädter, & R. M. Lerner (Eds.), *Action and self development: Theory and research through the life span* (pp. 373-400). Thousand Oaks, CA: Sage.
- Brown, A. & Dittmar, H. (2005). Think “thin” and feel bad: the role of appearance schema activation, attention level, and thin–ideal internalization for young women’s responses to ultra–thin media ideals. *Journal of social and clinical psychology*, 24(8), 1088-1113.
- Carver, C. S., Scheier, M. F., & Weintaub, J. K. (1989). Assessing coping strategies: A theoretically based approach. *Journal of Personality and Social Psychology*, 56, 267-283.
- Cash, T. F. (2002). Cognitive-behavioral perspectives on body image. In T. F., Cash & Pruzinsky T. (Eds). *Body image: A handbook of theory, research, and clinical practice* (pp. 38– 46). New York: Guilford.
- Cash, T. F., & Fleming, E. C. (2002). Body image and social relations. In T. F. Cash & T. Pruzinsky (Eds.). *Body image: A handbook of theory, research, and clinical practice* (pp.277-286). New York: Guilford.
- Cash, T.F. (2000). Manual for the Appearance Schemas Inventory. Unpublished manuscript, Old Dominion University, Norfolk, VA.
- Cash, T. F. (1994). Body-image attitudes: evaluation, investment, and affect. *Perceptual and Motor Skills*, 78, 1168– 70.
- Cash, T. F., & Labarge, A. S. (1996). Development of the appearance schemas inventory: a new cognitive body-image assessment. *Cognitive Therapy and Research*, 20, 37-50.
- Cash T. F., & Pruzinsky, T. (Eds.). (2002). *Body image: A handbook of theory, research, and clinical practice*. New York: Guilford.

- Cash T. F., Melnyk, S. E., & Hrabosky, J. I. (2004). The assessment of body-image investment: an extensive revision of the appearance schemas inventory. *International Journal of Eating Disorder*, 35, 305–16.
- Cash, T. F., Santos, M. T., & Williams, E. F. (2005). Coping with body-image threats and challenges: validation of the Body Image Coping Strategies Inventory. *Journal of Psychosomatic Research*, 58, 191– 199.
- Caspi, A., Roberts, B. W., & Shiner, R. L. (2005). Personality development: Stability and change. *Annual Review of Psychology*, 56, 453–84.
- Choate, L. H. (2005). Toward a theoretical model of women's body image resilience. *Journal of Counseling and Development*, 83, 320–330.
- Clark, L. A., & Watson, D. (1999). Temperament: A new paradigm for trait psychology. In L. A. Pervin, & O. P. John (Eds.), *Handbook of personality: Theory and research* (2nd ed., pp. 399–423). New York: The Guilford Press.
- Clark, L. A., & Watson, D. (1995). Constructing validity: Basic issues in objective scale development. *Psychological Assessment*, 7(3), 309-319.
- Cohen, F. (1995). Measurement of coping. In S. V. Kasl, & C. L. Cooper, (Eds.), *Research methods in stress and health psychology* (pp. 283-305). New York: John Wiley & Sons.
- Costa, P. T., & McCrae, R. R. (1993). Personality, defense, coping and adaptation in older adulthood. In E. M. Cummings, A. L. Greene & Karraker, K. K. (Eds.), *Life-span development psychology: Perspectives on stress and coping* (p 277-293). Hillsdale, NJ: Erlbaum.
- Crocker, J., & Wolfe, C. T. (2001). Contingencies of self-worth. *Psychological Review*, 108, 593–623.
- David, J. P., & Suls, J. (1999). Coping efforts in daily life: Role of big five traits and problems appraisals. *Journal of personality*, 67(2), 265-294.
- Davis, C. (1997). Body image, exercise and eating behaviors. In K. R. Fox (Ed.), *The physical self* (pp.143-174). Champaign, IL: Human Kinetics.
- Davis, C., Claridge, G., & Brewer, H. (1996). The two faces of narcissism: Personality dynamics of body esteem. *Journal of Social and Clinical Psychology*, 15, 153–166.

- Davis, C., Claridge, D. G., Cerullo (1997). Personality factors and weight preoccupation: a continuum approach to the association between eating disorders and personality disorders, *Journal of Psychiatric Research* 31 (4), 467-480.
- Davis, C., Dionne, M., & Shuster, B. (2001). Physical and psychological correlates of appearance orientation. *Personality and Individual Differences*, 30, 21–30.
- Folkman, S., and Lazarus, R. S. (1985). If it changes it must be a process: Study of emotion and coping during three stages of a college examination. *Journal of Personality and Social Psychology*. 48: 150–170.
- Folkman, S., & Lazarus, R. S. (1988). Coping as a mediator of emotion. *Journal of Personality and Social Psychology*, 54, 466– 75.
- Folkman, S., Lazarus, R. S., Gruen, R. J. & DeLongis, A. (1986). Appraisal, coping, health status, and psychological symptoms. *Journal of Personality and Social Psychology*, 50(3), 571-579.
- Garner, D. M. (1997). The 1997 body image survey results. *Psychology Today*, 30, 30-46.
- Garner, D. M., & Garfinkel, P. E. (1981). Body image in anorexia nervosa: Measurement, theory, and clinical implications. *International Journal of Psychiatry in Medicine*, 11, 263–284.
- Halliwell, E., & Dittmar, H. (2003). A qualitative investigation of women's and men's body image concern and their attitude towards aging. *Sex Roles*, 49 (11/12), 675-684.
- Harris, D. & Carr, A. (2001). Prevalence of concern about physical appearance in the general population. *British Journal of Plastic Surgery*, 54, 223-226.
- Hassinger, H. J., Semenchuk, E. M., & O'Brien, W. H. (1999). Appraisal and coping responses to pain and stress in migraine headache sufferers. *Journal of Behavioral Medicine*, 22(4), 327-340.
- Johnson, T. W., Francis, S. K., & Burns, L. D.(2007). Appearance management behavior and the five factor model of personality. *Clothing and Textiles Research Journal*, 25(3), 230-243.
- John, O. P., & Srivastava, S. (1999). The Big Five trait taxonomy: History, measurement, and theoretical perspectives. In L. A. Pervin, & O. P. John (Eds.) (Handbook of personality: Theory and research (2nd ed., pp. 102–138). New York: The Guilford Press.

- Johnston, O., Reilly, J., & Kremer, J. (2004). Women's experiences of appearance concern and body control across the lifespan: Challenging accepted wisdom. *Journal of Health Psychology, 9*(3), 397- 410.
- Kuczynski, L., & Daly, K. (2002). Qualitative methods for inductive (theory-generating) research. In L. Kuczynski (Ed.), *Handbook of dynamics in parent-child relations* (pp. 373-392). Thousand Oaks, CA: Sage.
- Kvalem, I. L., Soest T. V., Roald H. E., Skolleborg K. C. (2006). The interplay of personality and negative comments about appearance in predicting body image. *Body Image, 3*, 263–273.
- Lazarus, R. S., & Folkman, S. (1984). Cognitive appraisal processes. Stress, appraisal and coping (pp.22-54). New York: Springer Publishing.
- Markus, H. (1977). Self-schemata and processing information about the self. *Journal of Personality and Social Psychology, 35*, 63-78.
- McCrae, R. R., & Costa, P. T. (1986). Personality, coping and coping effectiveness in an adult sample. *Journal of Personality, 54*, 385-405.
- McCrae, R. R., & Costa, P. T. (1994). The stability of personality: observations and evaluations. *Current Directions in Psychological Science, 3*(6), 173-175.
- McKinley, N. M. (2002). Feminist perspectives and objectified body consciousness. In T. F. Cash & T. Pruzinsky (Eds.), *Body image: A handbook of theory, research, and clinical practice*(pp. 55–64). New York: Guilford Press.
- Mervielde, I., & De Fruyt, F. (2000). The 'Big Five' personality factors as a model for the structure of children's peer nominations. *European Journal of Personality, 14*, 91–106.
- Miner-Rubino, K., Twenge, J. M., & Fredrickson, B. L. (2002). Trait self-objectification in women: Affective and personality correlates. *Journal of Research in Personality, 36* (2), 147–172.
- Montepare, J. M. (1996). An assessment of adults' perceptions of their psychological, physical and social age. *Journal of Clinical Geropsychology, 2*, 117-128.
- Patton, M. Q. (1990). *Qualitative evaluation methods*. Beverly Hills, CA: Sage.
- Paxton, S. J., & Phythian K. (1999). Body image, self-esteem, and health status in middle and later adulthood. *Australian Psychologist, 34*(2), 116-121.

- Pokrajac-Bulian, A. & Živčić-Bećirević, I. (2005). Locus of control and self-esteem as correlates of body dissatisfaction in Croatian university students. *European Eating Disorders Review*, 13, 54–60.
- Powell, J. L., & Longino, C. F. (2001). Towards the postmodernization of aging: The body and social theory. *Journal of Aging and Identity*, 6(4), 199-207.
- Rim, Y. (1986). Ways of coping, personality, age, sex and family structural variables. *Personality and Individual Differences*, 7, 113-116.
- Segal, Z.V. (1988) Appraisal of the self-schema construct in cognitive models of depression. *Psychological Bulletin*, 103, 147–162.
- Snyder, C. R. (1999). *Coping: The psychology of what works*. New York: Oxford University Press.
- Snyder, C. R. & Dinoff, B. L. (1999). Coping: Where have you been? In C. R., Snyder, (Ed.) (1999). *Coping: The psychology of what works* (pp.3-19). New York: Oxford University Press.
- Snyder, C. R. & Pulvers, K. M. (2001). Dr. Seuss, the coping machine and “oh, the places you’ll go”. In C. R., Snyder, (Ed.) (2001). *Coping with stress: Effective people and processes* (p.3-29). New York: Oxford University Press.
- Stanton, A. L. & Franz, R. (1999). Focusing on emotion: An adaptive coping strategy? In C. R. Snyder, (ed.) (1999), *Coping: The psychology of what works* (pp 90-118). New York: Oxford University Press.
- Suls, J., David, J. P., & Harvey, J. H. (1996). Personality and coping: Three generations of research. *Journal of Personality*, 64(4), 711-735.
- Strauss, A., & Corbin, J. (1998). *Basics of qualitative research: Techniques and procedures for developing grounded theory*. Thousand Oaks, CA: Sage.
- Tiggemann, M. (2004). Body image across the adult lifespan: Stability and change. *Body Image*, 1, 29-41.
- Tiggemann, M., & Lynch, J. E. (2001). Body image across the life span in adult women: The role of self-objectification. *Developmental Psychology*, 37(2), 243-253.
- Watson, D., & Hubbard, B. (1996). Adaptational style and dispositional structure: Coping in the context of the five factor model. *Journal of Personality*, 64, 737-774.

CHAPTER 4

General Conclusion

The present study investigated the relationship of four endogenous variables of self esteem, five personality factors (Neuroticism, Extraversion, Agreeableness, Conscientiousness and Openness) perceived social support and chronological age with the five exogenous variables of appearance schema, appearance appraisal and, three body image coping strategies. The purpose of this study was to identify potential risk and protective factors for body image dissatisfaction. Concurring with previous studies, I found that appearance related dissatisfaction is evident throughout a woman's life span (Pliner, Chaiken,& Flett, 1990) and in fact normative discontent is common (Rodin et al., 1984). The quantitative and qualitative findings of Study 1 and study 2 enabled me to draw conclusions that could have implications on sociological understanding of the research body image or appearance related behavior. Besides the studies demonstrates to researchers in Personality Psychology the influence of traits on appearance related behavior.

The traits of self esteem and personality have both demonstrated the effect of high and low self esteem, as well as dominant and weak traits of Neuroticism. The study indicate that self esteem was crucial in determining women's appraisal of their appearance. Regarding Neuroticism, the findings of the current study indicated that with the increase in Neurotic traits significantly predicted negative appearance appraisal were. Based on the findings from this study on the relationship between personality factors and appearance evaluation, I recommend that for future studies researchers could test the

specific relationships between traits and appearance related behavior. The role of perceived social support tested in Study 1 (quantitative and qualitative results) failed to demonstrated conclusive results regarding the influence of perceived social support on individual's appearance appraisal. Hence, future studies investigating the role of perceived social support (in the context of appearance evaluation), should explore other internal (intra individual) factors that contribute in preventing an individual from evaluating their appearance negatively.

The findings of this study highlight the need to include traits such as self esteem and specific personality traits when studying the evaluative dimension of body image. The lack of correlations among the two personality factors (Agreeableness and Openness) with appearance related behavior in the current study as well as past studies suggests that there is a likelihood that the lower level traits (among the five factors) measuring these two factors may lack validity in explaining appearance related behavior.

Although the five personality factors have successfully explained inter individual variability in health related studies, not all the lower level traits may be valid in investigating appearance related behavior. Furthermore, incase of future studies investigating the role of personality it would be valuable to investigate the relationship of appearance behavior with individual traits rather than the five factors,

Utilization both qualitative and quantitative methods of investigation, the findings of this research demonstrated that self esteem is a significant predictor of women's appearance appraisal, According to the Contingencies of Self-Worth model (Crocker & Wolfe, 2001) people differ in their criteria of self-esteem evaluation and thus each

individual may value qualities that he/she believes determine person of worth and value. Based on the interviews with both younger (18-25 years) and mature women (25-65 years), the study suggests that in comparison to the women over 50 years, younger women in their early 20s, lack the holistic perspective to assess their self worth which may contribute to the centrality of appearance to one's self worth (appearance schematicity). Appearance is the most readily available measure of evaluating oneself or others when there is paucity of information in a new or unfamiliar situation. This lack of information is at times counteracted with one's experience in similar situation and thus allowing the person make a weighted decision.

Furthermore, experience can contribute to one's self efficacy. Based on Karademas & Kalantzi-Azizi's (2004) discussion on self efficacy, this study makes an argument that it is self-efficacy of the mature women that distinguishes their perception and appraisal of appearance dissatisfaction. This study has found significant effect of 'age' on constructs of appearance schema and appearance appraisal because increase in chronological age would correlate to individual's self efficacy, thus for future investigation cohort effect or age effects on appearance related behavior, it would be valuable to include self efficacy.

However, this study yields information that could be interpreted as developmental process of body image, yet we must consider cohort influence on the experiences of women born at different time periods. Besides during interviews when recollecting past experiences it is likely that those experiences were interpreted by the respondent in light of the present (Ross & Buehler, 2003). Also we can not discount the probability selection

biases; women who have strong opinions (negative or positive) towards appearance related activities and behavior could have been represented due to the questionnaire's focus on appearance-related issues, leading in turn to a potential threat to the representativeness of the currently gathered scores on appearance related items (Kvalem et al., 2006).

Bibliography

- Abell, S. C. & Richards, M. H. (1996). The relationship between body shape satisfaction and self-esteem: An investigation of gender and class differences. *Journal of Youth and Adolescence*, 25(5), 691-703.
- Agresti, A., & Finlay, B. (1999). *Statistical methods for the social sciences* (3rd ed.). New Jersey: Prentice Hall.
- Aiken, L., & West, S. (1991). *Testing interactions in multiple regression*. Hillsdale NJ: Lawrence Erlbaum.
- Aldwin, C. M. (2007). *Stress, coping and development: An integrative perspective* (2nd Ed.). New York: Guilford Press.
- Aldwin, C. M., Sutton, K. J., Chiara, G., & Spiro, A. (1996). Age difference in stress, coping and appraisal: Findings from the normative aging study. *Journals of Gerontology: Psychological Sciences*, 51B, 179-188.
- Altabe, M., & Thompson, J. K. (1996). Body image: A cognitive self-schema construct. *Cognitive Therapy and Research*, 20(2), 171-193.
- American Society of Plastic Surgeons (2006). *2006 Plastic surgery statistics*. Retrieved on May 28, 2007, from <http://www.plasticsurgery.org/media/statistics/2006-Statistics.cfm>
- Bandura, A. (1977). *Social learning theory*. New York: General Learning Press.
- Bandura, A. (1986). *Social foundations of thought and action: A social cognitive theory*. Upper Saddle River, NJ: Prentice-Hall, Inc.
- Balaji, A. B., Claussen, A. H., Smith, D.C, Visser, S. N., Morales, M. J., Perou, R. (2007). Social support networks and maternal mental health and well-being. *Journal of Women's Health*, 16(10), 1386-1396.
- Baumeister, R.F., Tice, D.M., & Hutton, D. G. (1989). Self-presentation motivations and personality differences in self-esteem. *Journal of Personality*, 57, 547-579.
- Berkowitz, D., & Marsiglio, W. (2007) Gay men: Negotiating procreative, father, and family identities. *Journal of Marriage and Family*, 69(2), 366–381.
- Brandstädter, J. (1999). The self in action and development: Cultural, biosocial, and ontogenic bases of intentional self development. In J. Brandstädter, & R. M.

- Lerner (Eds.), *Action and self development: Theory and research through the life span* (pp. 373-400). Thousand Oaks, CA: Sage.
- Brown, A. & Dittmar, H. (2005). Think “thin” and feel bad: the role of appearance schema activation, attention level, and thin–ideal internalization for young women’s responses to ultra–thin media ideals. *Journal of Social and Clinical Psychology, 24*(8), 1088-1113.
- Buss, A. (2001). Psychological dimensions of the self. Thousand Oaks: Sage Publication.
- Carver, C. S., Scheier, M. F., & Weintaub, J. K. (1989). Assessing coping strategies: A theoretically based approach. *Journal of Personality and Social Psychology, 56*, 267-283.
- Cash, T. F. (2002). Cognitive-behavioral perspectives on body image. In T. F., Cash & Pruzinsky T. (Eds). *Body image: A handbook of theory, research, and clinical practice* (pp. 38– 46). New York: Guilford.
- Cash, T. F., & Fleming, E. C. (2002). Body image and social relations. In T. F. Cash & T. Pruzinsky (Eds.). *Body image: A handbook of theory, research, and clinical practice* (pp.277-286). New York: Guilford.
- Cash, T.F. (2000). *Manual for the appearance schemas inventory*. Unpublished manuscript, Old Dominion University, Norfolk, VA.
- Cash, T. F. (1994). Body-image attitudes: evaluation, investment, and affect. *Perceptual and Motor Skills, 78*, 1168– 70.
- Cash, T. F., & Labarge, A. S. (1996). Development of the appearance schemas inventory: a new cognitive body-image assessment. *Cognitive Therapy and Research, 20*, 37-50.
- Cash T. F., Melnyk, S. E., & Hrabosky, J. I. (2004). The assessment of body-image investment: an extensive revision of the appearance schemas inventory. *International Journal of Eating Disorder, 35*, 305–16.
- Cash, T.F., & Pruzinsky, T. (Eds.) (1990), *Body images: Development, deviance, and change*. N.Y.: Guilford Press.
- Cash T. F., & Pruzinsky, T. (Eds.) (2002). *Body image: A handbook of theory, research, and clinical practice*. New York: Guilford.
- Cash, T. F., Santos, M. T., & Williams, E. F. (2005). Coping with body-image threats and challenges: validation of the body image coping strategies inventory. *Journal of Psychosomatic Research, 58*, 191– 199.

- Caspi, A., Roberts, B. W., & Shiner, R. L. (2005). Personality development: Stability and change. *Annual Review of Psychology*, 56, 453–84.
- Celio, A. A., Zabinski, M. F., & Wilfley, D. E. (2004). African American body images. In T. F. Cash & Pruzinsky, T. (Eds.). *Body image: A handbook of theory, research, and clinical practice*. New York: Guilford.
- Choate, L. H. (2005). Toward a theoretical model of women's body image resilience. *Journal of Counseling and Development*, 83, 320–330.
- Cohen, F. (1995). Measurement of coping. In S. V. Kasl, & C. L. Cooper, (Eds.), *Research methods in stress and health psychology* (pp. 283-305). New York: John Wiley & Sons.
- Cohen, S. & Hoberman, H. M. (1983). Positive events and social supports as buffers of life change stress. *Journal of Applied Social Psychology*, 13(2), 99-125.
- Cohen, S., Mermelstein, R., Kamarck, T., & Hoberman, H. M. (1985). Measuring the functional components of social support. In I. G. Sarason, & B. R. Sarason (Eds.), *Social support: Theory, Research and applications* (pp. 73-94). Boston: Martinus Nijhoff Publishers.
- Cohen, S. & Syme, S. L. (Eds.). (1985). *Social support and health*. Orlando, FL: Academic Press.
- Cohen, S., & Wills, T. A. (1985). Stress, social support, and the buffering hypothesis. *Psychological Bulletin*, 98, 310–357.
- Costa, P.T., & McCrae, R. R. (1985). *The NEO personality inventory manual*. Odessa, FL: Psychological Assessment Resources.
- Costa, P. T., & McCrae, R. R. (1993). Personality, defense, coping and adaptation in older adulthood. In E. M. Cummings, A. L. Greene & Karraker, K. K. (Eds.), *Life-span development psychology: Perspectives on stress and coping* (p 277-293). Hillsdale, NJ: Erlbaum.
- Clark, L. A., & Watson, D. (1999). Temperament: A new paradigm for trait psychology. In L. A. Pervin, & O. P. John (Eds.), *Handbook of personality: Theory and research* (2nd ed., pp. 399–423). New York: The Guilford Press.
- Clark, L. A., & Watson, D. (1995). Constructing validity: Basic issues in objective scale development. *Psychological Assessment*, 7(3), 309-319.

- Crocker, J., & Wolfe, C. T. (2001). Contingencies of self-worth. *Psychological Review*, 108, 593–623.
- David, J. P., & Suls, J. (1999). Coping efforts in daily life: Role of big five traits and problems appraisals. *Journal of personality*, 67(2), 265-294.
- Davis, C. (1997). Body image, exercise and eating behaviors. In K. R. Fox (Ed.), *The physical self* (pp.143-174). Champaign, IL: Human Kinetics.
- Davis, C., Claridge, G., & Brewer, H. (1996). The two faces of narcissism: Personality dynamics of body esteem. *Journal of Social and Clinical Psychology*, 15, 153–166.
- Davis, C., Claridge, D. G., Cerullo (1997). Personality factors and weight preoccupation: a continuum approach to the association between eating disorders and personality disorders. *Journal of Psychiatric Research*, 31(4), 467-480.
- Davis, C., Dionne, M., & Shuster, B. (2001). Physical and psychological correlates of appearance orientation. *Personality and Individual Differences*, 30, 21–30.
- Davis, C., & Fox, J. (1993). Excessive exercise and weight preoccupation in women. *Addictive Behaviors*, 18, 201-211.
- DeLongis, A., & Holtzman, S. (2005). Coping in context: The role of stress, social support, and personality in coping. *Journal of Personality*, 73(6), 1-24.
- Douglas, M. (1973). *Natural symbols: Explorations in cosmology*. Harmondsworth: Penguin.
- Dunkel-Schetter, C., & Bennett, T. L. (1990). Differentiating the cognitive and behavioral aspects of social support. In B. R. Sarason, I. G., Sarason, & G. R., Pierce (Eds.), *Social support: An interactional view* (pp. 267-296). New York: Wiley.
- Dunkel-Schetter, C., Folkman, S. & Lazarus, R. S. (1987). Correlates of social support receipt. *Journal of Personality and Social Psychology*, 53, 71-80.
- Exline, J. J., & Lobel, M. (1997). Views of the self and affiliation choices: A social comparison perspective. *Basic and Applied Social Psychology*, 19(2), 243-259.
- Feldman, S. I., Downey, G., & Schaffer-Neitz, R. (1999). Pain, negative mood, and perceived support in chronic pain patients: A daily diary of people with Reflex Sympathetic Dystrophy Syndrome. *Journal of Consulting and Clinical Psychology*, 67(5), 776-785.

- Fiore, J., Becker J., & Coppel D. B. (1983). Social Network interactions: A buffer or a stress. *American Journal of Community Psychology*, 11, 423-439.
- Folkman, S., Lazarus, R. S., Gruen, R. J., & DeLongis, A. (1986). Appraisal, coping, health status, and psychological symptoms. *Journal of Personality and Social Psychology*, 50(3), 571-579.
- Folkman, S., and Lazarus, R. S. (1985). If it changes it must be a process: Study of emotion and coping during three stages of a college examination. *Journal of Personality and Social Psychology*, 48, 150-170.
- Folkman, S., & Lazarus, R. S. (1988). Coping as a mediator of emotion. *Journal of Personality and Social Psychology*, 54, 466- 75.
- Fox, K. R. (Eds.). (1997). *The physical self*. Champaign, IL: Human Kinetics.
- Franzoi, S., & Shields, S. (1984). The body esteem scale: Multidimensional structure and sex differences in a college population. *Journal of Personality Assessment*, 48, 173-178.
- Garner, D. M. (1997). The 1997 body image survey results. *Psychology Today*, 30, 30-46.
- Garner, D. M., & Garfinkel, P. E. (1981). Body image in anorexia nervosa: Measurement, theory, and clinical implications. *International Journal of Psychiatry in Medicine*, 11, 263-284.
- Giddens, A. (1991). *Modernity and self-identity: Self and society in the late modern age*. Cambridge: Polity Press.
- Goldberg, L. R. (1993). The structure of phenotypic personality traits. *American Psychologist*, 48, 26-34.
- Gosling, S. D., Rentfrow, P. J., & Swann W. B. (2003) A very brief measure of the Big-Five personality domains. *Journal of Research in Personality*, 37, 504-528.
- Groesz, L. M., Levine, M. P. & Murnen, S. K. (2002). The effect of experimental presentation of thin media images on body satisfaction: A meta-analytic review. *International Journal of Eating Disorders*, 31, 1-16.
- Halliwel, E., & Dittmar, H. (2003). A qualitative investigation of women's and men's body image concern and their attitude towards aging. *Sex Roles*, 49 (11/12), 675-684.

- Harter, S. (1993). Causes and consequences of low self-esteem. In R. F. Baumeister (Eds.), *Self esteem: The puzzle of low self-regard* (pp. 88-116). New York: Plenum.
- Harris, S. M. (1995). Family, self, and sociocultural contributions to body image attitudes of African American women. *Psychology of Women Quarterly*, 19, 129-145.
- Harris, D. & Carr, A. (2001). Prevalence of concern about physical appearance in the general population. *British Journal of Plastic Surgery*, 54, 223-226.
- Hassinger, H. J., Semenchuk, E. M., & O'Brien, W. H. (1999). Appraisal and coping responses to pain and stress in migraine headache sufferers. *Journal of Behavioral Medicine*, 22(4), 327-340.
- Heller, K., & Swindle, R.W. (1983). Social networks, perceived social support, and coping with stress. In L.A. Jason R.D. Felner, J. Moritsugu, & S.S. Farber (Eds.), *Preventive psychology: Theory, research and practice in community intervention* (pp. 87-103). New York: Pergamon.
- Hesse-Biber, S. N. (2007). *The cult of thinness* (2nd ed.). New York: Oxford University Press.
- Hobfoll, S. E. (1983). Limitations of social support in the stress process. In I. G. Sarason & B. R., Sarason, (Eds.), *Social support: Theory, research and application* (pp.391- 414). Boston: Martinus Nijhoff Publishers.
- House, J. S., & Kahn, R. L. (1985). Measures and concepts of social support. In S. Cohen and S. L. Syme (Eds.), *Social support and health* (pp. 83-108), Orlando, FL: Academic Press.
- Jackson, L. A. (2002). Psychical attractiveness: A sociocultural perspective. In T. F. Cash & T. Pruzinsky (Eds.), *Body image: A handbook of theory, research, and clinical practice* (pp.13-21). New York: Guilford.
- John, O. P., & Srivastava, S. (1999). The big five trait taxonomy: History, measurement, and theoretical perspectives. In L. A., Pervin & O. P. John (Eds.) (2nd ed.) *Handbook of personality: Theory and research* (pp. 154-196). New York: Guilford.
- Johnson, M. (1998). Self-esteem stability: The importance of basic self-esteem and competence strivings for the stability of global self-esteem. *European Journal of Personality*, 12, 103-116.

- Johnson, T. W., Francis, S. K., & Burns, L. D. (2007). Appearance management behavior and the five factor model of personality. *Clothing and Textiles Research Journal*, 25(3), 230-243.
- Johnston, O., Reilly, J., & Kremer, J. (2004). Women's experiences of appearance concern and body control across the lifespan: Challenging accepted wisdom. *Journal of Health Psychology*, 9(3), 397-410.
- Jung, J. (1987). Toward a social psychology of social support. *Basic and Applied Social Psychology*, 8(1/2), 57-83.
- Karademas, E. C., & Kalantzi-Azizi A. (2004). The stress process, self-efficacy expectations, and psychological health. *Personality and Individual Differences*, 37, 1033-1043.
- Kuczynski, L., & Daly, K. (2002). Qualitative methods for inductive (theory-generating) research. In L. Kuczynski (Ed.), *Handbook of dynamics in parent-child relations* (pp. 373-392). Thousand Oaks, CA: Sage.
- Kvalem, I. L., Soest T. V., Roald H. E., Skolleborg K. C. (2006). The interplay of personality and negative comments about appearance in predicting body image. *Body Image*, 3, 263-273.
- Lakey, B., & Cohen, S. (2000). Social support theory and selecting measures of social support. In S. Cohen, L. U. Gordon & B. H. Gottlieb (Eds.) *Social support measurement and interventions: A guide for health and social scientists*. New York: Oxford.
- Lakey, B., & Scoboria, A. (2005). The relative contribution of trait and social influences to the links among perceived social support, affect, and self-esteem. *Journal of Personality*, 73(2), 361-388.
- Langford, C. P. H., Bowsher, J., Maloney, J. P., & Lillis, P. P. (1997). Social support: A conceptual analysis. *Journal of Advanced Nursing*, 25, 95-100.
- Lazarus, R. S., & Folkman, S. (1984). Cognitive appraisal processes. *Stress, appraisal and coping* (pp. 22-54). New York: Springer Publishing.
- Lee-Baggley, D., Preece, M., & DeLongis, A. (2005). Coping with interpersonal stress: Role of big five traits. *Journal of Personality*, 73(5), 1141-1180.
- Lerner, R. M., & Jovanovic, J. (1990). The role of body image in psychosocial development across the life span: A developmental contextual. In T. F. Cash & T.

- Pruzinsky (Eds.), *Body images: Development, deviance, and change* (pp.110-127). Guilford Press, New York.
- Lincoln, K. D., Chatters, L. M., & Taylor, R. J. (2003). Psychological distress among Black and White Americans: Differential effects of social support, negative interaction and personal control. *Journal of Health and Social Behavior*, 44(3), 390-407.
- Mankowski, E. S., & Wyer, R. S. (1997) Cognitive causes and consequences of perceived social support. In G. R. Pierce, B. Lakey, G. Sarason, B. R. Sarason, (Eds.), *Sourcebook of social support and personality* (pp.141-165). New York: Plenum Press.
- Markus, H. (1977). Self-schemata and processing information about the self. *Journal of Personality and Social Psychology*, 35, 63-78.
- McCrae, R. R., & Costa, P. T. (1994). The stability of personality: observations and evaluations. *Current Directions in Psychological Science*, 3(6), 173-175.
- McCrae, R. R., & Costa, P. T. (1986). Personality, coping and coping effectiveness in an adult sample. *Journal of Personality*, 54, 385-405.
- McFarlane, T., McCabe, R. E., Jarry, J., Olmsted, M. P., & Polivy, J. (2001). Weight-related and shape-related self-evaluation in eating- disordered and non-eating disordered women. *International Journal of Eating Disorders*, 29, 328-335.
- McKinley, N. M. (2002). Feminist perspectives and objectified body consciousness. In T. F. Cash & T. Pruzinsky (Eds.), *Body image: A handbook of theory, research, and clinical practice* (pp. 55-64). New York: Guilford Press.
- Mervielde, I., & De Fruyt, F. (2000). The 'Big Five' personality factors as a model for the structure of children's peer nominations. *European Journal of Personality*, 14, 91-106.
- Miner-Rubino, K., Twenge, J. M., & Fredrickson, B. L. (2002). Trait self-objectification in women: Affective and personality correlates. *Journal of Research in Personality*, 36 (2), 147-172.
- Monteath, S. A., & Montepare, J. M. (1996). An assessment of adults' perceptions of their psychological, physical and social age. *Journal of Clinical Geropsychology*, 2, 117-128.
- McCabe, M. P. (1997). The influence of societal factors on female body image. *The Journal of Social Psychology*, 137(6), 708-727.

- Muth, J. L., & Cash, T. F. (1997). Body-image attitudes: What difference does gender make? *Journal of Applied Social Psychology*, 27, 1438-1452.
- Newcomb, M. D., & Keefe, K. (1997). Social support, self esteem, social conformity, and gregariousness: Development patterns across twelve years. In G. R. Pierce, B. Lakey, G. Sarason, B. R. Sarason (Eds.), *Sourcebook of social support and personality* (pp.303-333). New York: Plenum Press.
- O'Brien, T. B., & DeLongis, A. (1996). The interactional context of problem-, emotion-, and relationship-focused coping: The role of the Big Five personality factors. *Journal of Personality*, 64, 775-813.
- O'Brien, T. B., & DeLongis, A. (1997). Coping with chronic stress: An interpersonal perspective. In B. Gottlieb (Ed.), *Coping with chronic stress* (pp. 161-190). New York: Plenum Press.
- Pakenham, K. I. & Bursnall, S. (2006). Relations between social support, appraisal and coping and both positive and negative outcomes for children of a parent with multiple sclerosis and comparisons with children of healthy parents. *Clinical Rehabilitation*, 20, 709-723.
- Patton, M. Q. (1990). *Qualitative evaluation methods*. Beverly Hills, CA: Sage.
- Paxton, S. J., & Phythian K. (1999). Body image, self-esteem, and health status in middle and later adulthood. *Australian Psychologist*, 34(2), 116-121.
- Paxton, S. J., Schutz, H. K., Wertheim, E., & Muir, S. L. (1999). Friendship clique and peer influences in body image concerns, dietary restraint, extreme weight loss behaviors and binge eating in adolescent girls. *Journal of Abnormal Psychology*, 108, 255-266.
- Penley, J. A., Tomaka, J., & Wiebe J. S. (2002). The association of coping to physical and psychological health outcomes: A meta-analytic review. *Journal of Behavioral Medicine*, 25(6), 551-603.
- Pearlin, L. I. (1985). Social structure and processes of social support. In S. Cohen & L. Syme (Eds.), *Social support and health* (pp. 43-60). New York: Academic Press.
- Pierce, G. R., Lakey, B., Sarason, G., Sarason, B. R., & Joseph, H. J. (1997). Personality and social support processes: A conceptual overview. In G. R. Pierce, B. Lakey, G. Sarason, B. R. Sarason (Eds.), *Sourcebook of social support and personality* (pp. 3-18). New York: Plenum Press.

- Pierce, G. R., Sarason, I. G., & Sarason, B. R. (1991). General and relationship-based perceptions of social support: Are two constructs better than one? *Journal of Personality and Social Psychology*, 61(6), 1028-1039.
- Pokrajac-Bulian, A. & Živčić-Bećirević, I. (2005). Locus of control and self-esteem as correlates of body dissatisfaction in Croatian university students. *European Eating Disorders Review*, 13, 54–60.
- Powell, J. L., & Longino, C. F. (2001). Towards the postmodernization of aging: The body and social theory. *Journal of Aging and Identity*, 6(4), 199-207.
- Procidano, M. E., & Smith, W. W. (1997). Assessing perceived support. In G. R. Pierce, B. Lakey, G. Sarason, B. R. Sarason (Eds.), *Sourcebook of social support and personality* (pp. 93-106). New York: Plenum Press.
- Reis, H. R., & Frank, P. (1994). The role of intimacy and social support in health outcomes: two processes or one? *Personal Relationships*, 1, 185-197.
- Revelle, W. (1995). Personality processes. *Annual Review of Psychology*, 46, 295-328.
- Rim, Y. (1986). Ways of coping, personality, age, sex and family structural variables. *Personality and Individual Differences*, 7, 113-116.
- Robins, R. W., Tracy, J. L., Trzesniewski, K. Potter, J. & Gosling, S. D. (2001). Personality correlates of self-esteem. *Journal of Research in Personality*, 35, 463-482.
- Roesch, S. C., & Rowley, A. A. (2005). Evaluating and developing a multidimensional, dispositional measure of appraisal. *Journal of Personality Assessment*, 85(2), 188–196.
- Rook, K. S., & Pietromonaco, P. (1987). Close relationships: Ties that heal or ties that bind?" In W. H. Jones & D. Pearlman (Eds.), *Advances in personal relationships* (Vol.1, pp.1–35). Greenwich, CT: JAI Press.
- Rosen, G., & Alan, R. (1986). Relationship of body image to self concept. *Journal of Consulting and Clinical Psychology*, 32, 100–107.
- Rosenberg, M. (1965). *Society and the adolescent self-image*. Princeton, N.J.: Princeton University Press.
- Rosenberg, M. (1986). Self-concept from middle childhood through adolescence. In J. Suls & A. G. Greenwald (Eds.), *Psychological perspectives on the self* (Vol. 2). Hillsdale, NJ: Erlbaum.

- Rumsey, N., & Harcourt, D. (2005). *The psychology of appearance*. Open University press: New York.
- Ryan, R. M., & Solky, J. A. (1997). What is supportive about social support? On the psychological needs for autonomy and relatedness. In G. R. Pierce, B. R. Sarason, & I. G. Sarason (Eds.), *Handbook of social support and the family* (pp.3-23). New York: Plenum Press.
- Sarason, B. R., Pierce, G. R., & Sarason, I. G. (1990). Social support: The sense of acceptance and the role of relationships. In B. R. Sarason, I. G. Sarason, & G. R. Pierce (Eds.), *Social support: An interactional view* (pp. 97-128). New York: John Wiley & Sons.
- Sarwer, D. B., Pruzinsky, T., Cash, T. F., Goldwyn, R. M., Persing, J. A., & Whitaker, L. A. (2006) (Eds.). *Psychological aspects of reconstructive and cosmetic plastic surgery*. New York: Lippincott Williams & Wilkins.
- Schutz, A. (1998). Coping with threats to self-esteem: The differing patterns of subjects with high versus low trait self-esteem in first-person accounts. *European Journal of Personality*, 12, 169-186.
- Segal, Z.V. (1988) Appraisal of the self-schema construct in cognitive models of depression. *Psychological Bulletin*, 103, 147-162.
- Snyder, C. R. (1999). *Coping: The psychology of what works*. New York: Oxford University Press.
- Snyder, C. R. & Dinoff, B. L. (1999). Coping: Where have you been? In C. R., Snyder, (Ed.) (1999). *Coping: The psychology of what works* (pp.3-19). New York: Oxford University Press.
- Snyder, C. R. & Pulvers, K. M. (2001). Dr. Seuss, the coping machine and “oh, the places you’ll go”. In C. R., Snyder, (Ed.) (2001). *Coping with stress: Effective people and processes* (p.3-29). New York: Oxford University Press.
- Stanton, A. L. & Franz, R. (1999). Focusing on emotion: An adaptive coping strategy? In C. R. Snyder, (ed.) (1999), *Coping: The psychology of what works* (pp 90-118). New York: Oxford University Press.
- Stice, E., Presnell, K., & Spangler, D. (2002). Risk factors for binge eating onset in adolescent girls: A 2-year prospective investigation. *Health Psychology*, 21, 131-138.

- Story, A. L. (2004). Self-Esteem and self-certainty: A mediational analysis. *European Journal of Personality, 18*, 115–125.
- Strauss, A., & Corbin, J. (1998). *Basics of qualitative research: Techniques and procedures for developing grounded theory*. Thousand Oaks, CA: Sage.
- Striegel-Moore, R. H., & Cachelin, F. M. (1999). Body image concerns and disordered eating in adolescent girls: Risk and protective factors. In N. Johnson, M. Roberts, & J. Worell (Eds.), *Beyond appearance: A new look at adolescent girls* (pp. 85-108). Washington, DC: American Psychological Association.
- Stroebe, W., & Stroebe, M. (1996). The social psychology of social support. In E. T. Higgins, & A. W. Kruglanski, (Eds.), *Social psychology: Handbook of basic principles* (pp. 597-621). New York: Guilford Press.
- Suls, J., & David, J. P. (1996). Coping and personality: Third time's the charm? *Journal of Personality, 64*(4), 993-1005.
- Suls, J., David, J. P., & Harvey, J. H. (1996). Personality and coping: Three generations of research. *Journal of Personality, 64*(4), 711-735.
- Thoits, P. A. (1986). Social support as coping assistance. *Journal of Consulting and Clinical Psychology, 54*, 416–423.
- Thoits, P. A. (1995). Stress, coping, and social support processes: Where are we? What next? *Journal of Health & Social Behavior, 36*(5), 53-79.
- Tiggemann, M. (2004). Body image across the adult lifespan: Stability and change. *Body Image, 1*, 29-41.
- Tiggemann, M., & Lynch, J. E. (2001). Body image across the life span in adult women: The role of self-objectification. *Developmental Psychology, 37*(2), 243-253.
- Turner, S. L., Hamilton, H., Jacobs, M., Angood, L. M., & Dwyer, D. H. (1997). The influence of fashion magazines on the body image satisfaction of college women: An explanatory analysis. *Adolescence, 603*-614.
- Watson, D., David, J. P., & Sulz, J. (1999). Personality, affectivity and coping. In C. R., Snyder, (Ed.) (1999). *Coping: The psychology of what works* (p.70). New York: Oxford University Press.
- Williams, E. F. (2004). Positive body image: Precursors, correlates, and consequences. *Dissertation Abstracts International, 64*(10B), 5268.

- Watson, D., & Hubbard, B. (1996). Adaptational style and dispositional structure: Coping in the context of the five factor model. *Journal of Personality*, 64, 737-774.
- Zimet, G. D., Dahlem, N. W., Zimet, S. G., & Farley, G. K. (1988). The multidimensional scale of perceived social support. *Journal of Personality Assessment*, 52, 30-41.
- Zimet, G. D., Powell, S. S., Farley, G. K., Werkman S., & Berkoff K. A. (1990). Psychometric characteristics of the multidimensional scale of perceived social support. *Journal of Personality Assessment*, 55(3/4), 610 – 617.

APPENDICES

Appendix A

Study 1 Institutional Review Board Application



Design and Human Environment

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APPLICATION TO USE HUMAN SUBJECTS IN RESEARCH

1. BRIEF DESCRIPTION

Factors determining perceived importance of appearance.

This study is being conducted for a doctoral dissertation. The research proposed in this application is designed to investigate how individuals' perceptions of social and cultural standards of appearance are developed through observed learning and experience. There is currently limited research on how individuals develop their views regarding the importance of appearance. Results from this project will be used to establish the role of one's individual characteristics and that of social learning in evaluating the importance of appearance. Results will inform scholars of the psychology of appearance and the findings from this study will be utilized to write manuscripts that will be submitted to peer –refereed academic journals for publication.

2. BACKGROUND AND SIGNIFICANCE

Previous research (Dunkel-Schetter, Folkman and Lazarus, 1987; Cohen and Wills, 1985; Cohen, Mermelstein, Kamarck, and Hoberman, 1985) have found beneficial effects of social support on individuals assessment of stressors. Yet, in the field of Appearance Psychology, the influence of perceived social support on appearance perception has not been investigated. The results from the proposed study will indicate the influence of one's individuals traits and those learned from observing family, friends and significant others on one's assessment of socially determined appearance standards.

3. METHODS AND PROCEDURE

Data will be collected for this study through survey and semi- structured interview methods. Survey will be conducted using both paper format questionnaire and online questionnaire. Research participants will be recruited from the students enrolled in Design and Human Environment (DHE) department and Human Development and Family Sciences (HDFS) department at Oregon State University. The participants for

survey and interview will be requested to volunteer through emails and announcements will be made in classrooms (with the prior permission of the instructors) requesting students to take part in the survey and interviews.

The participants will be approached for recruitment through the permission of the instructor. At the beginning of the class, the student investigator will make an announcement regarding the purpose of and the topic of research (see Recruitment Scripts attached). After which the students will be requested to volunteer and take part in the study. Students will be informed about their right to choose whether or not they want to be a part of the study. For students being requested to take the online survey, the student investigator will provide information regarding the web link to online survey.

In case of DHE 270, DHE 240 and DHE 400's section 1, 2 and 3 students, the Instructor will inform the students regarding extra credit that they can earn for participating in the Survey (see Instructor's Letter of Permission attached).

The respondents will not be asked to fill in their personal details such as name, address or phone numbers. Although a demographic sheet will request for information regarding respondent's gender, age, ethnicity, marital status, education level and annual household income because previous studies have shown that socio-economic status of individuals influence their appearance standards, types of appearance enhancing strategies they engage in and, the extent of their involvement in improving their physical appearance. The online questionnaire will include items scales such as Rosenberg global self esteem and Costa & McCrae's personality scale that have established reliability and validity through previous studies. In addition, respondents will also be requested to respond to questions that indicate their assessment of socially determined standards of appearance and their perceived social support.

The name of the participants will not be associated with their responses neither during the data analysis nor presentation process. Results will be reported in such a manner that the participants will not be identified. Upon completion of data analyses the online data responses and the paper format questionnaires will be destroyed.

At the beginning of participating in the survey, all the participants will individually read the letter of informed consent (see Attachments). In case of paper format questionnaire participants will sign the consent form and; in case of online survey participants the consent form will be viewed as the first page and only those consenting will proceed to complete the questionnaire. Participants will complete the questionnaire within a maximum time of 20 minutes. Students completing the paper format questionnaire as a part of in class activity will be able to clarify any questions pertaining to the survey with the student investigator present. On the other hand, online respondents will be provided with the email address and official telephone of

the student investigator to clarify any questions the respondent may have pertaining to the questionnaire.

On completing the survey, participants will be requested to volunteer to take part in semi-structured interviews. In case of semi structured interviews, results will be reported in such a manner that the participants will not be identified and the participants can not be associated with their responses. Volunteers to the semi-structured interviews will be requested to consent to an audio recording prior to the interviews. Audio recording will be necessary as it will enable researchers to transcribe the interviews precisely. Upon completion of the data analysis the questionnaires and audio tapes will be destroyed.

4. BENEFITS AND RISKS

Participants may receive extra credit for completion of the survey (see Instructor's Letter of Permission attached). Instructors providing extra credit will clearly announce in their respective classes the possibility of earning extra credit points for volunteering participation in the survey. All students enrolled in the course will have the same opportunity for receiving extra credit. No risks will be incurred by the subjects involved in the study. Some subjects may find participation of particular interest to them.

5. SUBJECT POPULATION

A total of 400 students enrolled in the Design and Human Environment (DHE) department and Human Development and Family Sciences (HDFS) department at Oregon State University will be recruited for this study. Only data collected from students above the age of 18 years will be considered as relevant to the study.

6. INFORMED CONSENT

In case of paper format survey, participants will read and sign the informed consent form at the beginning of the survey. In case of online survey, the consent form will be the first page of survey and only those who consent will proceed to complete the survey.

7. ANONYMITY OR CONFIDENTIALITY

The participants' name will not be associated with the responses and the identity of the subjects will not be revealed in the reporting of the results of this study. In case of volunteers who take part in semi structured interviews, results will be reported in such a manner that the identity of participants can not be associated with their responses. Surveys, transcribed and audio recorded interviews will only be available to the primary investigator and student researcher. Upon the completion of the study the surveys and the interview audio tapes will be destroyed.

Appendix B

Study 1 Online Informed Consent Document



Design and Human Environment

Oregon State University, 224 Milam Hall, Corvallis, Oregon 97331

Tel 541-737-9736 | Fax 541-737-0993 | E-mail dheoffice@oregonstate.edu

Website <http://www.hhs.oregonstate.edu/dhe/index.html>

Project Title: Factors determining perceived importance of appearance.

Principal Investigator: Leslie Davis Burns, Design & Human Environment

Co-Investigator(s): Linga Shweta Reddy, Design & Human Environment

WHAT IS THE PURPOSE OF THIS STUDY?

You are being invited to take part in a research study designed to investigate how individuals' perception of social and cultural standards of appearance are developed through observed learning and experience. There is currently limited research on how an individual develops his or her views regarding the importance of appearance. Results from this project will be used to establish the role of one's individual characteristics and that of social learning in evaluating the importance of appearance. Results will inform scholars of the psychology of appearance and the findings from this study will be utilized to write manuscripts that will be submitted to peer-reviewed academic journals for publication.

WHAT IS THE PURPOSE OF THIS FORM?

This consent form gives you the information you will need to help you decide whether to be in the study or not. Please read the form carefully. You may ask any question about the research, the possible risks and benefits, your rights as a volunteer, and anything else that is not clear. When all of your questions have been answered, you can decide if you want to participate in this study.

WHY AM I BEING INVITED TO TAKE PART IN THIS STUDY?

You are being invited to take part in this study for a research project. Your participation will provide data to aid in the understanding of the psychology of appearance; particularly the influence of one's social support. You must be at least 18 years of age to participate.

WHAT WILL HAPPEN DURING THIS STUDY AND HOW LONG WILL IT TAKE?

Participation will include your completion of a questionnaire as a part of in-class activity. Your responses to the questionnaire, together with the responses received from other

participants will be combined and used for statistical summaries only. If you agree to take part in this study, your involvement will last for a maximum time of 20 minutes. Those survey participants who volunteer to take part in the interviews will be contacted subsequently. The semi-structured interviews will last anywhere between 45 minutes to a maximum of 1 hour.

WHAT ARE THE RISKS OF THIS STUDY?

There are no foreseeable risks incurred by the subjects involved in this study. Indeed, you may find the survey interesting to complete. Although, you could find that a few questions require you to assess your past experiences and you might find this discomforting.

WHAT ARE THE BENEFITS OF THIS STUDY?

We do not know if you will benefit from being in this study. However, results of the study will be used to inform scholars of the psychology of appearance and directly benefit future work in this area.

WILL I BE PAID FOR PARTICIPATING?

You could earn extra credit points from your instructor for participating in this survey. The amount of extra credit is arranged by the instructor. All participants receive the same amount of extra credit.

In case of interview, you do not receive any payment or compensation for participating. If you decide to take part in the study, it should be because you really want to volunteer.

WHO WILL SEE THE INFORMATION I GIVE?

The information you provide during this research study will be kept confidential to the extent permitted by law. To help protect your confidentiality, we will only use identification code numbers on data forms and the responses will be stored in secure folder until the data analysis is completed, after which the paper format questionnaires will be shredded and the responses received through Online survey will be deleted permanently from the computer system. There will be no information on the questionnaire that will serve as a link to the participants' identity and if the results of this project are published your identity will remain confidential.

DO I HAVE A CHOICE TO BE IN THE STUDY?

If you decide to take part in the study, it should be because you really want to volunteer. You will not lose any benefits or rights you would normally have if you choose not to volunteer. You can stop at any time during the study and still keep the benefits and rights you had before volunteering.

You will not be treated differently if you decide to stop taking part in the study. You are free to skip any question in the questionnaire that you would prefer not to answer. If you choose

to withdraw from this project before it ends, the researchers may keep information collected about you and this information may be included in study reports.

WHAT IF I HAVE QUESTIONS?

If you have any questions about this research project, please contact: Leslie Davis Burns, 541-737- 3796, Leslie.Burns@oregonstate.edu or Linga Shweta Reddy, 541-737-3797, redysh@onid.orst.edu

If you have questions about your rights as a participant, please contact the Oregon State University Institutional Review Board (IRB) Human Protections Administrator, at (541) 737-4933 or by email at IRB@oregonstate.edu.

Your consent to participate in this study is indicated by your completion of the online questionnaire.

Appendix C

Study 1 Informed Consent Document (Paper format)



Design and Human Environment

Oregon State University, 224 Milam Hall, Corvallis, Oregon 97331

Tel 541-737-9736 | Fax 541-737-0993 | E-mail dheoffice@oregonstate.edu

Website <http://www.hhs.oregonstate.edu/dhe/index.html>

INFORMED CONSENT DOCUMENT

Project Title: Factors determining perceived importance of appearance.

Principal Investigator: Leslie Davis Burns, Design & Human Environment

Co-Investigator(s): Linga Shweta Reddy, Design & Human Environment

WHAT IS THE PURPOSE OF THIS STUDY?

You are being invited to take part in a research study designed to investigate how individuals' perception of social and cultural standards of appearance are developed through observed learning and experience. There is currently limited research on how an individual develops his or her views regarding the importance of appearance. Results from this project will be used to establish the role of one's individual characteristics and that of social learning in evaluating the importance of appearance. Results will inform scholars of the psychology of appearance and the findings from this study will be utilized to write manuscripts that will be submitted to peer-refereed academic journals for publication.

WHAT IS THE PURPOSE OF THIS FORM?

This consent form gives you the information you will need to help you decide whether to be in the study or not. Please read the form carefully. You may ask any question about the research, the possible risks and benefits, your rights as a volunteer, and anything else that is not clear. When all of your questions have been answered, you can decide if you want to participate in this study.

WHY AM I BEING INVITED TO TAKE PART IN THIS STUDY?

You are being invited to take part in this study for a research project. Your participation will provide data to aid in the understanding of the psychology of appearance; particularly the influence of one's social support. You must be at least 18 years of age to participate.

WHAT WILL HAPPEN DURING THIS STUDY AND HOW LONG WILL IT TAKE?

Participation will include your completion of a questionnaire as a part of in-class activity. Your responses to the questionnaire, together with the responses received from other participants will be combined and used for statistical summaries only. If you agree to take part in this study, your involvement will last for a maximum time of 20 minutes. Those survey participants who volunteer to take part in the interviews will be contacted subsequently. The semi-structured interviews will last anywhere between 45 minutes to a maximum of 1 hour.

WHAT ARE THE RISKS OF THIS STUDY?

There are no foreseeable risks to participating in this study. Indeed, you may find the survey interesting to complete. Although you could find that a few questions require you to assess your past experiences with other individual and you might find this discomforting.

WHAT ARE THE BENEFITS OF THIS STUDY?

We do not know if you will benefit from being in this study. However, results of the study will be used to inform scholars of the psychology of appearance and directly benefit future work in this area.

WILL I BE PAID FOR PARTICIPATING?

No, you do not receive any payment or compensation for participating in this survey and the interview. If you decide to take part in the study, it should be because you really want to volunteer.

WHO WILL SEE THE INFORMATION I GIVE?

The information you provide during this research study will be kept confidential to the extent permitted by law. To help protect your confidentiality, we will only use identification code numbers and the responses will be stored in secure folder until the data analysis is completed, after which the responses received through Online survey will be deleted permanently from the computer system. There will be no information on the questionnaire that will serve as a link to the participants' identity and if the results of this project are published your identity will remain confidential.

DO I HAVE A CHOICE TO BE IN THE STUDY?

If you decide to take part in the study, it should be because you really want to volunteer. You will not lose any benefits or rights you would normally have if you choose not to volunteer. You can stop at any time during the study and still keep the benefits and rights you had before volunteering.

You will not be treated differently if you decide to stop taking part in the study. You are free to skip any question in the questionnaire that you would prefer not to answer. If you choose to withdraw from this project before it ends, the researchers may keep information collected about you and this information may be included in study reports.

WHAT IF I HAVE QUESTIONS?

If you have any questions about this research project, please contact: Leslie Davis Burns, 541-737- 3796, Leslie.Burns@oregonstate.edu or Linga Shweta Reddy, 541-737-3797, redydysh@onid.orst.edu

If you have questions about your rights as a participant, please contact the Oregon State University Institutional Review Board (IRB) Human Protections Administrator, at (541) 737-4933 or by email at IRB@oregonstate.edu.

Your signature indicates that this research study has been explained to you, that your questions have been answered, and that you agree to take part in this study. You will receive a copy of this form.

Participant's Name (printed):

(Signature of Participant) (Date)

Appendix D

Study 2 Institutional Review Board Application



Design and Human Environment

Oregon State University, 224 Milam Hall, Corvallis, Oregon 97331

Tel 541-737-9736 | Fax 541-737-0993 | E-mail dheoffice@oregonstate.edu

Website <http://www.hhs.oregonstate.edu/dhe/index.html>

APPLICATION TO USE HUMAN SUBJECTS IN RESEARCH

1. BRIEF DESCRIPTION:

You and Your Body: Strategies for Enhancement

This study is being conducted for a doctoral dissertation. The research proposed in this application is designed to examine the relationships among age, appearance schema, personality, self esteem, social support, body image appraisal, and body image coping strategies. There is currently limited research on the strategies people use to enhance their body features. The data collected for this study will be statistically analyzed and summarized. Results from this project will be used to complete the dissertation requirement and presented to the graduate committee. Findings from this study will inform scholars of the psychology of appearance and the findings from this study will be utilized to write manuscripts that will be submitted to peer-refereed academic journals for publication.

2. BACKGROUND AND SIGNIFICANCE:

The investment and strong association of self with the physical appearance among women results in critical evaluation of the body resulting in body dissatisfaction (Cash & Pruzinsky, 1990; Thompson, 1990; Muth & Cash, 1997). Based on the findings from studies on black women, Choate (2005) suggests that emphasis on qualities such as, self-esteem (Celio et al., 2002), over all individual confidence and competence (Petersen, 2000), family and peer support (Celio et al., 2002) could help as a means of positive coping mechanism for women. Previous research (Cash, 2002; Striegel-Moore & Cachelin, 1999; Taylor & Altman, 1997; Choate, 2005) indicates that there is dearth of research examining the protective factors that buffer some women from the development of negative body image. Hence, this study proposes to examine the relationship between effect of age, appearance schema, personality, self esteem, social support, appraisal and body image coping strategies.

3. METHODS AND PROCEDURES:

Data will be collected for this study through survey and semi- structured interview methods. Research participants will be recruited from the students at Oregon State University, volunteers from the Life Registry at Center for Healthy Aging Research (Oregon State University) and employees of Samaritan Health Services. This study will involve maximum 650 participants. The participants for survey and interview will be requested to volunteer through emails and announcements will be made in classrooms (with the prior permission of the instructors) requesting students to take part in the study.

The student participants will be approached for recruitment through the permission of the instructor. At the beginning of the class, the student investigator will make an announcement regarding the purpose of and the topic of research (see Recruitment Script attached). After which the students will be requested to volunteer and take part in the study. Students will be informed about their right to choose whether or not they want to be a part of the study. For students being requested to take the online survey, the student investigator will provide information regarding the web link to online survey.

In case of DHE 400 students, the Instructor will inform the students regarding extra credit that they can earn for participating in the Survey (see Instructor's Letter of Permission attached).

Online survey participants will be provided web link at which the web survey could be accessed and responded to. Participants will be informed about their right to choose whether or not they want to be a part of the study. The consent forms will be displayed as the first page of the survey and will be followed by the questionnaire. Those who complete the survey and submit will be assumed to have consented to take part in the survey. Completion of the questionnaire would take maximum of 25 minutes.

The respondents will not be asked to fill in their personal details such as name, address or phone numbers. Although a demographic sheet will request for information regarding respondent's gender, age, ethnicity, marital status, education level and annual household income because previous studies have shown that socio-economic status of individuals influence their appearance standards, types of appearance enhancing strategies they engage in and, the extent of their involvement in improving their physical appearance. The demographics information will also enable to describe the sample so that the findings can be compared to other research studies.

Besides measuring individual's age and personality, the questionnaire will utilize several scales to measure their behavior, beliefs and views on importance of appearance, evaluation of body image distress and coping strategies utilized to overcome body image dissatisfaction. An identification number will be generated in

the data base during data entry for each respondent so that the name of the participants can not be associated with their responses neither during the data analysis nor the data presentation process.

On completing the survey, participants will be requested to volunteer for semi-structured interviews. In case of semi structured interviews, results will be reported in such a manner that the participants will not be identified and the participants can not be associated with their responses. Volunteers to the semi-structured interviews will be requested to consent to an audio recording prior to the interviews. Audio recording will be necessary as it will enable researchers to transcribe the interviews precisely. Upon completion of the data analysis the questionnaires and audio tapes will be destroyed.

4. RISKS/BENEFIT ASSESSMENT:

Risks – There are no foreseeable risks incurred by the subjects involved in this study. You could find that a few questions require you to assess your past experiences and you might find this discomforting.

Benefits – There is no direct benefit to the participants. Some subjects may find participation of particular interest to them.

5. PARTICIPANT POPULATION:

Participants will be recruited from the students at Oregon State University, volunteers from the Life Registry at Center for Healthy Aging Research, Oregon State University, administrative staff at Oregon State University, Benton county library members and students attending classes at Linn- Benton community college in Corvallis and Albany. This study will involve no more than 650 participants.

6. SUBJECT IDENTIFICATION AND RECRUITMENT:

A statement will be made in the recruitment materials and informed consent statement that invites only those individuals in the age group of 18 to 80 years to participate in the study. The participant population will not be restricted to a gender or ethnic group.

To ensure that participants' identities cannot be linked to their responses, identification number will be generated during data entry. Completion of the entire questionnaire would take maximum of 25 minutes. The semi- structured interviews will be conducted in the university premise or in the interviewee's residence depending on the interviewee's preference. The semi-structured interviews could take 45 minutes to a maximum of 1 hour. In case of volunteers who take part in semi structured interviews, results will be reported in such a manner that the identity of participants can not be associated with their responses. Upon completion of the data analysis the questionnaires and audio tapes will be destroyed.

7. **COMPENSATION:**

Student enrolled in DHE 400 will receive extra credit for completion of the survey (see Instructor's Letter of Permission attached). The Instructor will clearly announce in their respective classes the possibility of earning extra credit points for volunteering participation in the survey. The students participants enrolled in DHE 400 will not be entitled to enter the raffle.

All the other participants taking this survey will be given an incentive, participants will be entered into a raffle to win prepaid VISA gift card. The participants will be asked to provide their email address. A raffle number will be generated for each participant and at the end of the study 5 winners will be announced. Winners of the Raffle will be emailed and informed. The each of the 5 winners would receive a \$ 50 worth prepaid VISA gift card.

8. **INFORMED CONSENT PROCESS:**

The second page of the questionnaire will include a letter explaining the purpose of study, what participation in this study entails, information on confidentiality, an explanation of the risks/ benefits, and contact information regarding participant's rights. Informed consent is documented by completion of the questionnaires. Participants will read the informed consent form at the beginning of the survey.

9. **ANONYMITY OR CONFIDENTIALITY:**

There will be no information gathered using the survey or the semi structured interview will serve as a link to the participants' identity.

Appendix E

Study 2 Online Informed Consent Document (with extra credit)



Design and Human Environment

Oregon State University, 224 Milam Hall, Corvallis, Oregon 97331

Tel 541-737-9736 | Fax 541-737-0993 | E-mail dheoffice@oregonstate.edu

Website <http://www.hhs.oregonstate.edu/dhe/index.html>

Project Title: You and Your Body: Strategies for Enhancement.

Principal Investigator: Leslie Davis Burns, Design & Human Environment

Co-Investigator(s): Linga Shweta Reddy, Design & Human Environment

WHAT IS THE PURPOSE OF THIS STUDY?

You are being invited to take part in a research study designed to investigate how you feel about your body features and strategies you use to enhance your body features. There is currently limited research on the strategies people use to enhance their body features. Results from this project will be used to complete the dissertation requirement and presented to the graduate committee. Results will inform scholars of the psychology of appearance and the findings from this study will be utilized to write manuscripts that will be submitted to peer –refereed academic journals for publication.

WHAT IS THE PURPOSE OF THIS FORM?

This consent form gives you the information you will need to help you decide whether to be in the study or not. Please read the form carefully. You may ask any questions about the research, the possible risks and benefits, your rights as a volunteer, and anything else that is not clear via email or by calling on the telephone number provided. When all of your questions have been answered, you can decide if you want to participate in this study.

WHY AM I BEING INVITED TO TAKE PART IN THIS STUDY?

You are being invited to take part in this research project. Your participation in this study is voluntary. Your participation will provide data to aid in the understanding of the psychology of appearance; particularly strategies used by people in enhancing their body features. You must be at least 18 years of age to participate.

WHAT WILL HAPPEN DURING THIS STUDY AND HOW LONG WILL IT TAKE?

Participation will include your completion of an online questionnaire, the link to this questionnaire will be provided to you via email. Your responses to the questionnaire, together with the others, will be combined and used for statistical summaries only. If you agree to take part in this study, your involvement will last for an estimated time of

maximum of 25 minutes. Those survey participants who volunteer to take part in the interviews will be contacted subsequently. The semi-structured interviews will last anywhere between 45 minutes to a maximum of 1 hour.

WHAT ARE THE RISKS OF THIS STUDY?

There are no foreseeable risks incurred by the subjects involved in this study. Indeed, you may find the survey interesting to complete. Although, you could find that a few questions require you to assess your past experiences and you might find this discomforting.

WHAT ARE THE BENEFITS OF THIS STUDY?

We do not know if you will benefit from being in this study. However, results of the study will be used to inform scholars of the psychology of appearance and directly benefit future work in this area.

WILL I BE PAID FOR PARTICIPATING?

You could earn extra credit points from your instructor for participating in this survey. The amount of extra credit is arranged by the instructor. All participants receive the same amount of extra credit.

In case of interviews, you do not receive any payment or compensation for participating. If you decide to take part in the study, it should be because you really want to volunteer.

WHO WILL SEE THE INFORMATION I GIVE?

The information you provide during this research study will be kept confidential to the extent permitted by law. To help protect your confidentiality, we will generate identification numbers for each completed questionnaire so that the responses cannot be linked to identity of the respondent. The responses to online surveys are automatically generated in a coded format and will be stored in a secure folder. There will be no information on the questionnaire that will serve as a link to the participants' identity and if the results of this project are published your identity will remain confidential.

DO I HAVE A CHOICE TO BE IN THE STUDY?

If you decide to take part in the study, it should be because you really want to volunteer. You will not lose any benefits or rights you would normally have if you choose not to volunteer. You can stop at any time during the study and still keep the benefits and rights you had before volunteering.

You will not be treated differently if you decide to stop taking part in the study. You are free to skip any question in the questionnaire that you would prefer not to answer.

WHAT IF I HAVE QUESTIONS?

If you have any questions about this research project, please contact: Leslie Davis Burns, 541-737- 3796, Leslie.Burns@oregonstate.edu or Linga Shweta Reddy, 541-737-3797, redysh@onid.orst.edu

If you have questions about your rights as a participant, please contact the Oregon State University Institutional Review Board (IRB) Human Protections Administrator, at (541) 737-4933 or by email at IRB@oregonstate.edu.

Your consent to participate in this study is indicated by your completion of the online questionnaire.

Appendix F

Study 2 Online Informed Consent Document (including raffle)



Design and Human Environment

Oregon State University, 224 Milam Hall, Corvallis, Oregon 97331

Tel 541-737-9736 | Fax 541-737-0993 | E-mail dheoffice@oregonstate.edu

Website <http://www.hhs.oregonstate.edu/dhe/index.html>

Project Title: You and Your Body: Strategies for Enhancement.

Principal Investigator: Leslie Davis Burns, Design & Human Environment

Co-Investigator(s): Linga Shweta Reddy, Design & Human Environment

WHAT IS THE PURPOSE OF THIS STUDY?

You are being invited to take part in a research study designed to investigate how you feel about your body features and strategies you use to enhance your body features. There is currently limited research on the strategies people use to enhance their body features. Results from this project will be used to complete the dissertation requirement and presented to the graduate committee. Results will inform scholars of the psychology of appearance and the findings from this study will be utilized to write manuscripts that will be submitted to peer –refereed academic journals for publication.

WHAT IS THE PURPOSE OF THIS FORM?

This consent form gives you the information you will need to help you decide whether to be in the study or not. Please read the form carefully. You may ask any questions about the research, the possible risks and benefits, your rights as a volunteer, and anything else that is not clear via email or by calling on the telephone number provided. When all of your questions have been answered, you can decide if you want to participate in this study.

WHY AM I BEING INVITED TO TAKE PART IN THIS STUDY?

You are being invited to take part in this research project. Your participation in this study is voluntary. Your participation will provide data to aid in the understanding of the psychology of appearance; particularly strategies used by people in enhancing their body features. You must be at least 18 years of age to participate.

WHAT WILL HAPPEN DURING THIS STUDY AND HOW LONG WILL IT TAKE?

Participation will include your completion of an online questionnaire, the link to this questionnaire will be provided to you via email. Your responses to the questionnaire, together with the others, will be combined and used for statistical summaries only. If you agree to take part in this study, your involvement will last for an estimated time of maximum of 25 minutes. Those survey participants who volunteer to take part in the interviews will be contacted subsequently. The semi-structured interviews will last anywhere between 45 minutes to a maximum of 1 hour.

WHAT ARE THE RISKS OF THIS STUDY?

There are no foreseeable risks incurred by the subjects involved in this study. Indeed, you may find the survey interesting to complete. Although, you could find that a few questions require you to assess your past experiences and you might find this discomforting.

WHAT ARE THE BENEFITS OF THIS STUDY?

We do not know if you will benefit from being in this study. However, results of the study will be used to inform scholars of the psychology of appearance and directly benefit future work in this area.

WILL I BE PAID FOR PARTICIPATING?

Every individual who volunteers to participate in this study will be entered in the RAFFLE if they are willing to provide an email address. After the data collection procedure is completed 5 random winners will be selected and announced. Each winner will be given a prepaid Visa gift card worth \$50.

WHO WILL SEE THE INFORMATION I GIVE?

The information you provide during this research study will be kept confidential to the extent permitted by law. To help protect your confidentiality, we will generate identification numbers for each completed questionnaire so that the responses cannot be linked to identity of the respondent. The responses to online surveys are automatically generated in a coded format and will be stored in a secure folder. There will be no information on the questionnaire that will serve as a link to the participants' identity and if the results of this project are published your identity will remain confidential.

DO I HAVE A CHOICE TO BE IN THE STUDY?

If you decide to take part in the study, it should be because you really want to volunteer. You will not lose any benefits or rights you would normally have if you choose not to volunteer. You can stop at any time during the study and still keep the benefits and rights you had before volunteering.

You will not be treated differently if you decide to stop taking part in the study. You are free to skip any question in the questionnaire that you would prefer not to answer.

WHAT IF I HAVE QUESTIONS?

If you have any questions about this research project, please contact: Leslie Davis Burns, 541-737- 3796, Leslie.Burns@oregonstate.edu or Linga Shweta Reddy, 541-737-3797, redysh@onid.orst.edu

If you have questions about your rights as a participant, please contact the Oregon State University Institutional Review Board (IRB) Human Protections Administrator, at (541) 737-4933 or by email at IRB@oregonstate.edu.

Your consent to participate in this study is indicated by your completion of the online questionnaire.

Appendix G

Study 1 Interview Schedule

Person # _____
 Year of birth: _____
 Ethnicity: _____
 Highest level of education: _____
 Date of interview: _____

As you know, I am a PhD candidate at Oregon State University. I am conducting this research as a part of my dissertation requirement to complete my doctorate. My area of interest is “appearance psychology” and hence the purpose of my research is to understand how young adults evaluate their own appearance.

I request you to provide me with your opinions and views on questions relating to appearance evaluation. You are free to choose the questions you want to answer and refuse to answer questions you are not comfortable to answer. I have a tape recorder with me. It is standard practice to record interviews as a back up to my notes. The interview is confidential in that no individual or any information directly identifiable with the interviewee will be named in the report corresponding with these interviews.

I would first request you to complete a questionnaire. Please read the informed consent form and if you agree to be a part of this study then proceed and complete the questionnaire.

I would also like to inform you that as a means of keeping the discussion focused and to avoid deviations, I am using power point slides on which the questions will be presented in a pre-determined order.

Are there any general questions you would like to ask me about the research before we begin?

Questions:

1. Among college/university students, how important is it- to look good (clothes, make-up, weight, hairstyle, color of hair etc)?
2. In your opinion, how prevalent is appearance dissatisfaction among college or university students?
3. Would you say ‘you are satisfied or dissatisfaction with your appearance’?
[If ‘satisfied’ go to question 4a; if ‘dissatisfied’ go to question 4b]
- 4a. How do you overcome the feeling of appearance dissatisfaction?
- 4b. In your opinion, why do individual’s experience appearance dissatisfaction?
5. Have you made any changes in your diet or exercise or clothing style or make-up in the past couple of years?
6. What prompted these changes?

7. Who among your family members, friends and boyfriend/girlfriend tend to influence your thinking the most?
8. How do you suggest these young college/university students can overcome their appearance dissatisfaction?

Appendix H

Study 2 Interview Schedule

Person # _____
 Year of birth: _____
 Ethnicity: _____
 Highest level of education: _____

As you know, I am a PhD student at Oregon State University. I am conducting this research as a part of my dissertation requirement. My area of interest is “consumer psychology” and hence the purpose of my research is to understand the factors that influence one’s overall evaluation of self.

I request you to provide me with your opinions and views on questions relating to importance of appearance in judging oneself. You are free to choose the questions you want to answer and refuse to answer questions you are not comfortable to answer. I have a tape recorder with me. It is standard practice to record interviews as a back up to my notes. The interview is confidential; hence no names or information directly identifiable with the interviewee will be reported.

Are there any general questions you would like to ask me about the research before we begin?

Questions:

1. How important is one’s appearance to their overall evaluation as a person?
2. When evaluating the overall person, why do some people place more importance than others on appearance?
3. Do you think the importance an individual gives to his/her own appearance changes as they grow older?
4. Looking back do you notice any changes in the level of importance you placed on appearance criteria while judging your overall self?
5. In order to look good, what are the different activities (dieting, exercise, make up, color of hair, hair style, style of clothes) you have tried?
6. In the future what kinds of activities would you consider using to improve your appearance?
7. Does importance one places on appearance change as individual goes through the transition of being single to being in a marriage /living with a partner, then being a parent, to eventually being a grandparent?

Appendix I

Study 1 Survey

Your Experience

Appearance dissatisfaction in this study refers to 'feelings of unhappiness and inadequacy when evaluating your own appearance'.

Evaluating "Appearance" could include:

- body height, body weight, body shape and size etc.*
- shape and size of individual body part(s) etc.*
- overall body proportion.*
- facial features or overall face etc.*
- hair color, hair length, hair style etc.*
- dental structure or color of teeth etc.*
- eye shape or eye color etc.*
- skin color or skin texture etc.*
- over all dressed or clothed appearance.*

▶ Have you ever experienced dissatisfaction with your appearance?

- ☐ never
- ☐ rarely
- ☐ sometimes
- ☐ often
- ☐ always

General Feelings About Myself

Below is a list of statements dealing with your general feelings and opinions about yourself. Read each statement carefully. For each statement, choose the response that best represents your opinion. Choose SD if you strongly disagree or the statement is definitely false. Choose D if you disagree or the statement is mostly false. Choose N if you are neutral on the statement, you cannot decide, or the statement is about equally true and false. Choose A if you agree or the statement is mostly true. Choose SA if you strongly agree or the statement is definitely true.

	SD	D	N	A	SA
	1	2	3	4	5
On the whole, I am satisfied with myself.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
At times, I think I am no good at all.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel that I have a number of good qualities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am able to do things as well as most other people.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel I do not have much to be proud of.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I certainly feel useless at times.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel that I'm a person of worth, at least on an equal plane with others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I wish I could have more respect for myself.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All in all, I am inclined to feel that I am a failure.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I take a positive attitude toward myself.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Beliefs About Myself

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Here are a number of characteristics that may or may not apply to you. Indicate the extent to which you agree or disagree with each of the statements. For each statement, choose the response that best represents your opinion. Choose SD if you strongly disagree or the statement is definitely false. Choose D if you disagree or the statement is mostly false. Choose N if you are neutral on the statement, you cannot decide, or the statement is about

equally true and false. Choose A if you agree or the statement is mostly true. Choose SA if you strongly agree or the statement is definitely true.

► I SEE MYSELF AS SOMEONE WHO...

	SD	D	N	A	SA
	1	2	3	4	5
Is talkative.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tends to find fault with others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does a thorough job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is depressed, blue.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is original, comes up with new ideas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is reserved.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is helpful and unselfish with others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can be somewhat careless.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is relaxed, handles stress well.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is curious about many different things.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is full of energy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Starts quarrels with others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is a reliable worker.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can be tense.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is ingenious, a deep thinker.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Generates a lot of enthusiasm.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has a forgiving nature.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tends to be disorganized.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Worries a lot.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has an active imagination.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tends to be quiet.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is generally trusting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tends to be lazy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is emotionally stable, not easily upset.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is inventive.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has an assertive personality.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Can be cold and aloof.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Perseveres until the task is finished.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can be moody.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Values artistic, aesthetic experiences.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is sometimes shy, inhibited.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is considerate and kind to almost everyone.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does things efficiently.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Remains calm in tense situations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prefers work that is routine.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is outgoing, sociable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is sometimes rude to others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Makes plans and follows through with them.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gets nervous easily.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Likes to reflect, play with ideas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has few artistic interests.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Likes to cooperate with others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is easily distracted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is sophisticated in art, music, or literature.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Availability of Social Support

In this section we have chosen NOT to categorize PARENTS into mother and father . We hope that this will give children with single parent or step parents or parents of same gender an opportunity to answer relevant questions appropriately. Hence, we have categorized parental figures in your life as PARENT 1 and PARENT 2. If this section is not applicable to you, you may skip it and answer questions relevant to social support received from Sibling(s) or Friend(s).

▶ PARENT 1.

- ☐ male
- ☐ female
- ☐ not applicable

Support received from PARENT 1. Read each statement carefully. For each statement, choose the response that best represents your opinion. Choose SD if you strongly disagree or

the statement is definitely false. Choose D if you disagree or the statement is mostly false. Choose N if you are neutral on the statement, you cannot decide, or the statement is about equally true and false. Choose A if you agree or the statement is mostly true. Choose SA if you strongly agree or the statement is definitely true.

	SD	D	N	A	SA
	1	2	3	4	5
He/she helps me in maintaining my self confidence when I feel dissatisfied with my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she emphasizes more important aspects of my life than appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she discusses the importance of physical health over physical appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she suggests that I must do something to improve my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she does not care how I look.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she believes that appearance is an important aspect of how one is evaluated (or treated) by others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she appreciates my achievements in other spheres of my life more than my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she makes negative comments on how I look.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she provides me with emotional support when I am unhappy with my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she appreciates my unique qualities other than my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she passes negative remarks on other people's appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she engages in activities that can improve his/her appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she engages in activities that can improve his/her health.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she appreciates individuals on the basis of their appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she rarely discusses other people's physical appearances.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she frequently engages in activities that can help in maintaining or reducing his/her weight.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

▶ PARENT 2 (if applicable)

- ☐ male
- ☐ female
- ☐ not applicable

Support received from PARENT 2. Read each statement carefully. For each statement, choose the response that best represents your opinion. Choose SD if you strongly disagree or the statement is definitely false. Choose D if you disagree or the statement is mostly false. Choose N if you are neutral on the statement, you cannot decide, or the statement is about equally true and false. Choose A if you agree or the statement is mostly true. Choose SA if you strongly agree or the statement is definitely true.

	SD	D	N	A	SA
	1	2	3	4	5
He/she helps me in maintaining my self confidence when I feel dissatisfied with my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she emphasizes more important aspects of my life than appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she discusses the importance of physical health over physical appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she suggests that I must do something to improve my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she does not care how I look.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she believes that appearance is an important aspect of how one is evaluated (or treated) by others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she appreciates my achievements in other spheres of my life more than my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she makes negative comments on how I look.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she provides me with emotional support when I am unhappy with my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she appreciates my unique qualities other than my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she passes negative remarks on other people's appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

He/she engages in activities that can improve his/her appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she engages in activities that can improve his/her health.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she appreciates individuals on the basis of their appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she rarely discusses other people's physical appearances.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she frequently engages in activities that can help in maintaining or reducing his/her weight.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

►Indicate your siblings.

- ☐ sister(s)
- ☐ brother(s)
- ☐ both [brother(s) and sister(s)]
- ☐ none

►Among your siblings [sisters)/brother(s)/both], whom are you are closest to:

- ☐ sister(s)
- ☐ brother(s)
- ☐ both [sister(s) and brother(s)]
- ☐ none
- ☐ not applicable

►Among your siblings (sister(s)/brother(s)/both), who influences your views the most:

- ☐ sister(s)
- ☐ brother(s)
- ☐ both [sister(s) and brother(s)]
- ☐ not applicable

Read each statement regarding the SIBLING(S) WHO INFLUENCES YOUR THINKING

THE MOST. For each statement, choose the response that best represents your opinion. Choose SD if you strongly disagree or the statement is definitely false. Choose D if you disagree or the statement is mostly false. Choose N if you are neutral on the statement, you cannot decide, or the statement is about equally true and false. Choose A if you agree or the statement is mostly true. Choose SA if you strongly agree or the statement is definitely true.

	SD	D	N	A	SA
	1	2	3	4	5
He/she helps me in maintaining my self confidence when I feel dissatisfied with my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she emphasizes more important aspects of my life than appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she discusses the importance of physical health over physical appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she suggests that I must do something to improve my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she does not care about how I look.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she believes that appearance is an important aspect of how one is evaluated (or treated) by others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she appreciates my achievements in other spheres of my life more than my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she makes negative comments on how I look.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she provides me with emotional support when I am unhappy with my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she appreciates my unique qualities other than my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she passes negative remarks on other people's appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she engages in activities that can improve his/her appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she engages in activities that can improve his/her health.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she appreciates individuals on the basis of their appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she rarely discusses other people's physical appearances.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she frequently engages in activities that can help in maintaining or reducing his/her weight.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

► Friend(s) whose views matter to you the most:

- ☐ male
- ☐ female
- ☐ both
- ☐ not applicable

Read each statement regarding your FRIEND(s) who influences you the most. For each statement, choose the response that best represents your opinion. Choose SD if you strongly disagree or the statement is definitely false. Choose D if you disagree or the statement is mostly false. Choose N if you are neutral on the statement, you cannot decide, or the statement is about equally true and false. Choose A if you agree or the statement is mostly true. Choose SA if you strongly agree or the statement is definitely true.

	SD	D	N	A	SA
	1	2	3	4	5
He/she helps me in maintaining my self confidence when I feel dissatisfied with my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she emphasizes more important aspects of my life than appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she discusses the importance of physical health over physical appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she suggests that I must do something to improve my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she does not care about how I look.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she believes that appearance is an important aspect of how one is evaluated (or treated) by others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she appreciates my achievements in other spheres of my life more than my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she makes negative comments on how I look.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she provides me with emotional support when I am unhappy with my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she appreciates my unique qualities other than my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she passes negative remarks on other people's appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

He/she engages in activities to that can improve his/her appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she engages in activities that can improve his/her health.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she appreciates individuals on the basis of their appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she rarely discusses other people's physical appearances.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she frequently engages in activities that can help in maintaining or reducing his/her weight.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

►My Significant Other:

- ☐ boyfriend
- ☐ girlfriend
- ☐ partner/spouse (husband or wife)
- ☐ other
- ☐ not applicable

Read each statement regarding your SIGNIFICANT OTHER carefully. For each statement, choose the response that best represents your opinion. Choose SD if you strongly disagree or the statement is definitely false. Choose D if you disagree or the statement is mostly false. Choose N if you are neutral on the statement, you cannot decide, or the statement is about equally true and false. Choose A if you agree or the statement is mostly true. Choose SA if you strongly agree or the statement is definitely true.

	SD	D	N	A	SA
	1	2	3	4	5
He/she helps me in maintaining my self confidence when I feel dissatisfied with my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she emphasizes more important aspects of my life than appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she discusses the importance of physical health over physical appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she suggests that I must do something to improve my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she does not care about how I look.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

He/she believes that appearance is an important aspect of how one is evaluated (or treated) by others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she appreciates my achievements in other spheres of my life more than my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she makes negative comments on how I look.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she provides me with emotional support when I am unhappy with my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she appreciates my unique qualities other than my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she passes negative remarks on other people's appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she engages in activities to that can improve his/her appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she engages in activities that can improve his/her health.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she appreciates individuals on the basis of their appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she rarely discusses other people's physical appearances.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
He/she frequently engages in activities that can help in maintaining or reducing his/her weight.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How I Assess My Appearance Shortcomings

► The statements below are based on how individuals evaluate dissatisfaction with thier own appearance. Decide on the extent to which you personally disagree or agree with each statement and enter a number from 1 to 5 in the space on the left. There are no right or wrong answers. Just be truthful about your personal behavior and thoughts.

	SD	D	N	A	SA
	1	2	3	4	5
I become anxious, when I am under pressure to look good.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am willing to work on improving my appearance (clothes, makeup, body weight etc).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I don't let my appearance shortcomings bother me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I can overcome the distress caused by my appearance dissatisfaction.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I do not let social pressure to look good affect me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have skills necessary to overcome my appearance dissatisfaction.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I think the social importance given to appearance is stressful.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The pressure to comply with the current appearance standards is threatening to my self beliefs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Feeling dissatisfied with one's appearance can have long-term consequences on the individual's self belief.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No one can be completely satisfied with their appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The social importance given to good looks doesn't bother me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People don't always judge you on your looks.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My appearance is only a small part of who I am.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When I am dissatisfied with my appearance, I tend to feel negative about other aspects of my life as well.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When I feel unhappy with my appearance, I discuss my feelings with someone close.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have help available to me, if I want to improve my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Everyone experiences distress as a result of appearance dissatisfaction.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No one can overcome the social pressure to look good.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good looks is valuable quality a person can have.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have what it takes to look good.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

General Information About Yourself

► Gender

☐ Male

☐ Female

► Year of birth

(format: any numeric value)

Marital Status

- ☐ Never married
- ☐ Married
- ☐ Partnered
- ☐ Separated
- ☐ Divorced
- ☐ Widowed

Ethnic Background

- ☐ White / Caucasian (not Hispanic)
- ☐ Asian / Pacific Islander
- ☐ African American / Black
- ☐ Native American
- ☐ Latin American / Hispanic
- ☐ Other (please specify below)

If your response to the previous question (Ethnic Background) was "OTHER", please specify your ethnic background

Religious affiliation or System of belief

Education: (Please check the highest level attained)

- ☐ Less than High School Graduate

- ☐ High School Graduate
- ☐ License or Certificate
- ☐ College
- ☐ Associate's Degree
- ☐ Bachelor's Degree
- ☐ Master's Degree
- ☐ Higher than Master's Degree

Employment: (please check one)

- ☐ full-time
- ☐ part-time
- ☐ not presently employed
- ☐ other

► Please provide your student ID number for receiving the Extra credit for having participated in the survey.

(format: any numeric value)

This study also includes personal interviews. Would you like to volunteer for a personal interview ?

- ☐ Yes
- ☐ No
- ☐ Maybe

Please provide us with your e-mail ID, if you wish to volunteer for the personal interview. The interview will take 45 minutes to a maximum of 1 hour. Interviews will be conducted during the Term Spring 2008.

(format: name@domain.[com|org|edu|biz|info])

Appendix J

Study 2 Survey

I describe myself as

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Here are a number of characteristics that may or may not apply to you. Indicate the extent to which you agree or disagree with each of the statements. Choose SD if you strongly disagree or the statement is definitely false. Choose D if you disagree or the statement is mostly false. Choose N if you are neutral on the statement, you cannot decide, or the statement is about equally true and false. Choose A if you agree or the statement is mostly true. Choose SA if you strongly agree or the statement is definitely true.

► I SEE MYSELF AS SOMEONE WHO IS...

	SD	D	N	A	SA
	1	2	3	4	5
Is talkative.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tends to find fault with others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does a thorough job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is depressed, blue.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is original, comes up with new ideas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is reserved.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is helpful and unselfish with others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can be somewhat careless.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is relaxed, handles stress well.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is curious about many different things.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is full of energy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Starts quarrels with others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is a reliable worker.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can be tense.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is ingenious, a deep thinker.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Generates a lot of enthusiasm.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Has a forgiving nature.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tends to be disorganized.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Worries a lot.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has an active imagination.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tends to be quiet.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is generally trusting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I see myself as someone who tends to be lazy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is emotionally stable, not easily upset.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is inventive.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has an assertive personality.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can be cold and aloof.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Perseveres until the task is finished.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can be moody.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Values artistic, aesthetic experiences.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is sometimes shy, inhibited.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is considerate and kind to almost everyone.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does things efficiently.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Remains calm in tense situations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prefers work that is routine.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is outgoing, sociable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is sometimes rude to others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Makes plans and follows through with them.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gets nervous easily.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Likes to reflect, play with ideas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has few artistic interests.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Likes to cooperate with others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is easily distracted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is sophisticated in art, music, or literature.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Describe your appearance related beliefs

'Appearance' in this study refers to overall physical appearance that includes:

- body height, body weight, body shape and size etc.

- *shape and size of individual body part(s) etc.*
- *overall body proportion.*
- *individual facial features or overall face etc.*
- *hair color, hair length, hair style etc.*
- *dental structure or color of teeth etc.*
- *eye shape or eye color etc.*
- *skin color or skin texture etc.*
- *over all dressed or clothed appearance.*

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► The statements below are beliefs that people may or may not have about their physical appearance and its influence on their life. Decide on the extent to which you personally disagree or agree with each statement and enter a number from 1 to 5 in the space on the left. There are no right or wrong answers. Just be truthful about your personal beliefs.

	SD	D	N	A	SA
	1	2	3	4	5
I spend little time on my physical appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When I see good-looking people, I wonder about how my own looks measure up.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I try to be as physically attractive as I can be.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have never paid much attention to what I look like.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I seldom compare my appearance to that of other people I see.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I often check my appearance in a mirror just to make sure I look okay.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When something makes me feel good or bad about my looks, I tend to dwell on it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If I like how I look on a given day, it's easy to feel happy about other things.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If somebody had a negative reaction to what I look like, it wouldn't bother me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

When it comes to my physical appearance, I have high standards.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My physical appearance has had little influence on my life.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dressing well is not a priority for me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When I meet people for the first time, I wonder what they think about how I look.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In my everyday life, lots of things happen that make me think about what I look like.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If I dislike how I look on a given day, it's hard to feel happy about other things.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I fantasize about what it would be like to be better looking than I am.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Before going out, I make sure that I look as good as I possibly can.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
What I look like is an important part of who I am.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
By controlling my appearance, I can control many of the social and emotional events in my life.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My appearance is responsible for much of what's happened to me in my life.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Your Experience

► Have you experienced being dissatisfied with your appearance?

- ☐ never
- ☐ rarely
- ☐ sometimes
- ☐ often
- ☐ always

How I Evaluate My Appearance Shortcomings

► The statements below are based on individual's evaluation of their own appearance. Decide on the extent to which you personally disagree or agree with each statement. Choose SD if you strongly disagree or the statement is definitely false. Choose D if you disagree or the statement is mostly false. Choose N if you are neutral on the statement, you cannot decide, or the statement is about equally true and false. Choose A if you agree or the statement is mostly true. Choose SA if you strongly agree or the statement is definitely true. There are no right or wrong answers. Be truthful about your personal behavior and thoughts.

	SD	D	N	A	SA
	1	2	3	4	5
I become anxious, when I am under pressure to look good.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am willing to work on improving my appearance (clothes, makeup, body weight etc).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I don't let my appearance shortcomings bother me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I can overcome the distress caused by my appearance dissatisfaction.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I do not let social pressure to look good affect me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have skills necessary to overcome my appearance dissatisfaction.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I think the social importance given to appearance is stressful.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The pressure to comply with the current appearance standards is threatening to my self beliefs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Feeling dissatisfied with one's appearance can have long-term consequences on the individual's self belief.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No one can be completely satisfied with their appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The social importance given to good looks doesn't bother me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People don't always judge you on your looks.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My appearance is only a small part of who I am.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When I am dissatisfied with my appearance, I tend to feel negative about other aspects of my life as well.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When I feel unhappy with my appearance, I discuss my feelings with someone close.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have help available to me, if I want to improve my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Everyone experiences distress as a result of appearance dissatisfaction.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No one can overcome the social pressure to look good.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good looks is valuable quality a person can have.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have what it takes to look good.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Coping with Appearance Dissatisfaction

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► Using the scale below, indicate how well each way of coping methods describes what you actually do or would do. There are no right or wrong answers. It doesn't matter how helpful or unhelpful your ways of coping are. Please answer truthfully how you overcome the dissatisfaction with your appearance.

	SD	D	N	A	SA
	1	2	3	4	5
I do try some activities or methods to look more attractive.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I spend extra time trying to fix what I don't like about my looks.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I think about what I should do to change my looks.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I compare my appearance to that of physically attractive people.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I make a special effort to hide or "cover up" what's troublesome about my looks.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I make a special effort to look my best.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I think about how I could "cover up" what's troublesome about my looks.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I fantasize about looking different.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I spend more time in front of the mirror.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I seek reassurance about my looks from other people.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I remind myself that I will feel better after awhile.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I tell myself that I am probably just overreacting to the situation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I tell myself that the situation will pass.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I tell myself that I probably look better than I feel that I do.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I remind myself of my good qualities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I try to figure out why I am challenged or threatened by the situation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I tell myself that there are more important things than what I look like.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I tell myself that I'm just being irrational about things.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I tell myself that the situation is not that important.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I react by being especially patient with myself.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I consciously do something that might make me feel good about myself as a person.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I make no attempt to cope or deal with the situation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I try to ignore the situation and my feelings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I react by overeating.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I try to tune out my thoughts and feelings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I withdraw and interact less with others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I avoid looking at myself in the mirror.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I eat something to help me deal with the situation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I tell myself that I am helpless to do anything about the situation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I Currently Engage in the Following Activities

► Decide on the extent to which you personally engage in the activities listed. Enter your response based on the frequency of your engagement in these activities ranging between Never, Rarely, Sometimes, Often and Always. There are no right or wrong answers. Just be truthful about your personal behavior.

	Never	Rarely	Sometimes	Often	Always
	1	2	3	4	5
I exercise (such as, yoga or jogging or going to Gym etc).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I eat healthy food (such as vegetables, fruits etc).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I use make up to enhance my appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I regulate the amount of food I eat.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I avoid smoking.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I engage in activities to improve my dental appearance such as bleaching teeth, cosmetic dental procedures etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I change the color of my hair.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I use skin enhancing treatments and procedures.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I engage in activities to change the color of my skin such as bleaching, tanning etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I change my hair style.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I use fashion contact lenses to change the color of my eyes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When I buy food products, I tend to check for their calorie contents.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Are there any other activities that you engage in besides those mentioned above ?

- ☐ Yes
- ☐ No

What are these activities?

What is the primary motive for you engaging in the activities mentioned above?

- ☐ Health
- ☐ Appearance
- ☐ Both
- ☐ Other

To improve my appearance I have previously used:

- ☐ cosmetic surgery
- ☐ implant procedures
- ☐ laser treatment
- ☐ none of the above

► In the future, I would consider using cosmetic surgery to improve my appearance?

- ☐ Yes
- ☐ No
- ☐ Maybe

► In the future, to improve my appearance I would consider using implant procedure.

- ☐ Yes
- ☐ No
- ☐ Maybe

General Information About Yourself

Responses to the section below provides the demographic characteristics of the respondents. This will help us to compare findings from other studies.

► Gender

- ☐ Male
- ☐ Female

► Year of birth

(format: any numeric value)

Your ethnic background

- ☐ White / Caucasian (not Hispanic)
- ☐ Asian (includes Indian subcontinent)/ Pacific Islander
- ☐ African American / Black
- ☐ Native American
- ☐ Latin American / Hispanic
- ☐ Other (please specify below)

If your response to the previous question was "OTHER". Please specify your ethnic background.

Your religious affiliation or System of belief

Education (Please check the highest level attained)

- ☐ Less than High School Graduate
- ☐ High School Graduate
- ☐ Associate's Degree
- ☐ Bachelor's Degree
- ☐ License or Certificate
- ☐ College
- ☐ Master's Degree
- ☐ Higher than Master's Degree

Employment (please check one)

- ☐ Full-time
- ☐ Part-time
- ☐ Not presently employed
- ☐ Seasonal
- ☐ Retired

Occupation

Annual household income (before taxes)

- ☐ under \$20,000.00
- ☐ \$21,000.00 - \$40,000.00
- ☐ \$41,000.00 - \$60,000.00
- ☐ \$61,000.00 - \$80,000.00
- ☐ \$81,000.00 - \$100,000.00
- ☐ over \$100,00.00

▶ To receive your extra credit for participating in this survey, please provide your student ID number.

Would you be willing to volunteer to participate in an personal interview as a part of this study (for which you would Not receive extra credit)? The personal interview would last for atleast 45 minutes to a maximum of 1 hour .

☐ Yes

☐ No

☐ Maybe