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THE INTERNATIONAL JOURNAL IJHC OF HEALING AND CARING

WHOLISTIC HEALING WHP PUBLICATIONS

WHOLISTIC HEALING WHR RESEARCH

**May, 2015** **Volume 15, No. 2**

# An Investigation of Relationship Satisfaction on Resilience and Body Image

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## Abstract

The aim of this study was to explore the association between relationship satisfaction and low body image. The current research also investigated whether body image dissatisfaction (BID) was affected by ethnic diversity. Past research has examined many factors which are highly related to BID; however, there is a paucity of research investigating relationship satisfaction, resilience, and body image as interrelated factors. A community sample consisting of male and female participants (*N* = 169) classified as "in a relationship" completed an online survey. A hierarchical multiple regression analysis demonstrated, consistent with expectations, that resilience was a predictor of relationship satisfaction and body image. A mediation analysis revealed a bidirectional relationship between relationship satisfaction and body image, not mediated by resilience. Implications to this study are discussed in regards to couples' therapy and interventions for body image and resilience.

Key words: body image, resilience, relationship satisfaction, couples, ethnicity

## Introduction

Body image is a perception which has the capacity to become self-consuming in the way individuals evaluate their self-worth (Choate, 2005). Many females are dissatisfied with their body image, as they are influenced by their immediate environment and what they have been socialized to believe (Healey, 2014). This is also true for males; however this phenomenon is not as readily observable in males when compared with females (Choate, 2005; Demarest & Allen, 2000; Johnson & Petrie, 1995). For instance, females are predominantly more likely to develop an eating disorder or low self-esteem as a result of low body image, whereas males may be dissatisfied with their body image, but it usually does not affect their self-esteem to such an extent (Choate, 2005). With males the obsession is with meeting culturally constructed male body image ideals; namely, to be bulky with large amounts of muscle mass (Grammas & Schwartz, 2009).

Body image, particularly low body image, has been discussed in multiple varying life contexts (Esberger, 1978), suggesting that it is a complex, self-consuming and potentially, self-destructive entity of an individual. For females, body image is about the thin-ideal and with males it is the obsession with muscle mass. There are many issues which can result from low body image, and there is a plethora of research which discusses the influence of social media and expectations of an

unrealistic idea of perfection (Park, 2005). Low body image can cause mental health disorders and even impact the way an individual interacts in an interpersonal relationship (Cash & Smolak, 2011; Jackson, et al., 2014). Further, poor body image can negatively impact evaluations of the *quality* of relationships and interactions (Cash & Smolak, 2011).

Low body image results from a negative perception of the physical self. Self-esteem on the other hand, is a person's perception of his or her overall worth as a human being (Peck & Richard, 2008; Rosenberg, 1965). Research suggests a correlation between low self-esteem and low-body image (Lennon, Rudd, Sloan, & Kim, 1999). High self-esteem has been associated with positive body image and non-traditional ways of thinking (Lennon, Rudd, Sloan, & Kim, 1999). Body image satisfaction and self-esteem are internal, subjective evaluations of people's appearance or evaluation about themselves, yet these evaluations appear to be based on core beliefs and values which are influenced through their external world (Cash & Smolak, 2011). Therefore, society and social relationships may be factors which can also affect body image satisfaction. It is suggested that relationships are considered to be the core social factors that influence body image (Cash & Smolak, 2011).

According to Haworth-Hoeppner (2000), universal media images influence the development of body image, however there are differences across cultural identity. There is research which has found that diverse ethnic cultures, such as African American (Miller, Gleaves, Hirsch, Green, Snow, & Corbett, 2000) are more likely to be satisfied with their bodies than European or American females, even though they have equal concerns about their appearance. Black females are less likely to diet and have a more flexible definition of beauty which is not specific to body weight (Sanderson et al., 2013). Studies have suggested that females with weak racial identity and self-esteem are more likely to internalise with Western Cultural norms of beauty (e.g. thin-ideal; Choate, 2005; Sanderson et al., 2013).

Another important factor in the development of body image is the extent to which family members believe, convey, and adopt sociocultural pressures regarding the importance of thinness and beauty (Choate, 2005). Maladaptive weight control patterns may be fostered through the family environment. Teasing about eating habits which occurs from family members may generate unhealthy eating behaviours and attitudes towards food (Krug et al., 2012). Low body image is a major risk factor for eating disorders. A lack of encouragement from family members for attaining personal growth and lack of emphasis on individuality have been evident in patients with eating disorders (Latzer, Hochdorf, Bachar, & Canetti, 2002), and these may initially impact body image.

In intimate relationships, Paap and Gardener (2011) found that males were more displeased with their partner's size than females. Further, the partners who had a distorted body image perceived their partner to be less satisfied in their relationship. In contrast, Bove and Sobal (2011) found that relaxing about one's weight normally begins soon after individuals are fully committed to the relationship. Individuals presented less concern about weight gain when it became less relevant to their partners within their marriage. This was evident in the amount of weight talk that was involved (Bove & Sobal, 2011), which usually occurred during early marriage.

While the research has highlighted these issues in relationships, there are protective factors which impact body image. Resilience can be described as the ability to rebound from adversity and become more empowered and more resourceful (Walsh, 2006). Resilience allows an individual to recover from adverse circumstances and function appropriately, and the behavioral component of resilience enables people to remain effective at home and work, and enhances the ability to focus on relevant tasks and goals and to carry them out (Robertson & Cooper, 2013).

There is a lack of empirical research which explores resilience as a protective factor or buffer to developing a negative body image (Choate, 2005). There is research however, which suggests that relationship satisfaction may be a factor which can affect body image (Paap & Gardener, 2011). However, there are few studies which have integrated and explored the two together. Improving resilience in individuals with low body image may positively impact their body satisfaction and self-esteem. Resilience may in fact be a protective factor in maintaining a healthy body image (Snapp, et al., 2012). Choate (2005) developed a theoretical model of 'Women's Body Image Resilience' and proposed a protective five-factor model for body image resilience; family-of-origin support, gender role satisfaction, positive physical self-concept, effective coping strategies and sense of holistic balance and wellness. The first factor, family-of-origin support, suggests that girls with parents at home, who promote positive and healthy attitudes around body weight and shape, are more likely to have increased body image resilience (Choate, 2005). Choate defines gender role satisfaction as a female's perceptions of normative femininity and masculinity. Specifically, females who internalize the pressures and expectations of society set on females are less likely to have body image resilience. Choate states positive physical self-concept (the involvement of physical activities which enhance fitness and health) can influence a woman's ability to appreciate her body. That is to say, if the woman is involved in a sport which does not encourage leanness (e.g., gymnastics), then it is more likely to provide a buffer to negative feelings about her physical self.

Another potential protective factor in body image is the effectiveness of coping strategies (Choate, 2005). The ability to cope with external stressors with problem-focused solutions and critical thinking allows females a buffer against unrealistic societal ideals of body image as well as the capacity to more easily adapt to developmental stage transitions. Last, the fifth protective factor of Choates's model is a 'sense of holistic balance and wellness'. This incorporates and combines all of the previous factors as deemed necessary for the development of resilience. The relation of the first four factors to the last is noteworthy. Body image resilience incorporates the balance and wellness of many other factors within a person's life, in addition to those already mentioned.

**Ethnicity and body image**

The thin-ideal has been promoted since the 1960's in Western Society. It has been assumed by society that the body can be used as an entity, which can enhance people's self-worth and self-identity (Featherstone, 2006). Research originally suggested that low body image and eating disorders were more represented in white, middle-to-upper-class females (Caldwell, Brownell, & Wilfley, 1997). However, the thin-ideal is seemingly on the rise in other ethic and social sectors, and poor body image is a major contributor to eating disorders (Peck & Richard, 2008).

Grammas and Schwartz (2009) found that for males in diverse ethnic groups, Asians had higher body dissatisfaction than African Americans and Caucasians and African Americans had a higher degree of body satisfaction than Caucasians (Grammas & Schwartz, 2009; Miller et al., 2000; Smith et al., 1997). However, an extensive meta-analysis by Ricciardelli et al. (2007) revealed that there were no consistent patterns that reflected the nature of body image concerns across cultural groups. Across all studies, African American males displayed a more positive body image than Caucasian-American males. This area of diversity and the impact of body dissatisfaction requires further research.

**Present research**

The present study explored the association between relationship dissatisfaction and low body image, and whether low resilience was a predicting factor for low body image and relationship dissatisfaction. Finally, the current research investigated whether there was a discrepancy of body image dissatisfaction due to ethnic diversity. To further ascertain the effects of resilience on body image and

relationship satisfaction the aforementioned limitations were addressed. Firstly, this research used a wider demographic of couples, not just marital couples. The purpose of the current study was to reflect and expand some aspects of past research; Ghezelseflo et al. (2013), Miller et al. (2000), Paap and Gardner (2011), Choate (2005), and Snapp et al. (2012) and target a larger sample in order to increase generalizability of a male and female population. Further, the majority of past research mentioned has been based on the US population, whereas the present research concentrated on the Australian population of males and females. The current research integrated the two factors of body image and relationship satisfaction and tested whether relationship satisfaction was a predictive factor for low body image and low resilience.

1. It was hypothesized that individuals who reported greater relationship satisfaction, and reduced body image dissatisfaction (BID), would also report higher resilience
2. It was expected that individuals who reported higher resilience and BID would report greater relationship satisfaction
3. Last, it was hypothesized that ethnicity of non-westerners (African, South American, European, Middle Eastern, and Asian) would positively correlate with BID and would reflect as a higher body satisfaction

## Methods

Ethical approval was granted for the current study by the Bond University Human Research Ethics Committee.

### Participants

The original sample consisted of 262 but due to incompletion of survey materials, only 169 participant data were used. The 169 participants (46 males and 123 females) were of a community sample and each participant was classified as “in a relationship”. This included 13.6% who were married and 86.4% “others” who were either engaged, dating or in a relationship. Forty two percent of participants were of western ethnicity and 58% were from other countries and regions (i.e., African, South American, European, Middle Eastern, and Asian). Participants voluntarily completed an online confidential and anonymous survey and were recruited via social media Facebook). Participants’ ages ranged between 18- 71, with a mean age of 23.71 (*SD* = 5.75).

#### *Demographics*

Participants initially completed a demographic section including age, gender, relationship status and ethnic background. There were then three scales included in the survey.

### Materials

#### *The Connor-Davidson Resilience Scale (CD-RISC; Connor & Davidson, 2003)*

The CD-RISC is a 25-item scaled designed to measure the resilience of individuals in the general population. Respondents answer each item using a 5-point Likert Scale ranging from 0 (not true at all) to 4 (true nearly all of the time). Participants indicate how strongly they agree to the statements. Higher scores on the CD-RISC indicate higher resilience level. Items are statements which describe situations or feelings that are in accordance to how resilient the participant may have been over the last month (e.g. “I am able to adapt when changes occur”).

The CD-RISC scale has been considered one of the most valid and reliable measures of resilience (Windle, Bennet, & Noyes, 2011). Construct validity has been reported in multiple studies (e.g., Roberts et al., 2007). Research has also demonstrated the CD-RISC to possess high internal consistency (Cronbach’s α = .91), with significant correlations between the CD-RISC and the

Rosenberg Self-Esteem Scale (Yu & Zhang, 2007). For the current study, reliability analyses demonstrated that the CD-RISC possessed high internal consistency, Cronbach's α = .89.

***The Relationship Assessment Scale (RAS; Hendrick, 1988)***

The RAS is a 7-item scale designed to measure general relationship satisfaction and is appropriate for married couples, couples who are living together, dating, gay couples, and also provides a measure for friendship satisfactions. Respondents answer each item using a 5-point Likert Scale ranging from 1 (low satisfaction) to 5 (high satisfaction). This scale has been validated and has demonstrated high internal consistency ($\alpha$ = .86; Hendrick, 1988). In the present study, reliability analyses indicated that the RAS possessed high internal consistency, Cronbach's α = .83.

***Situational Inventory of Body image Dysphoria (SIBID; Cash, 2002)***

The Situational Inventory of Body image Dysphoria (SIBID) is a 50 item questionnaire which measures an individual's negative body image and body image dissatisfaction. Each item is rated on a 5-point Likert Scale ranging from 0 (never) to 4 (always or almost always). Each item is a statement in a variety of situations where people may experience negative feelings about their own physical appearance. Respondents indicate how often the respondent has negative feelings about their physical appearance in each situation. A high score indicates high body dissatisfaction. The SIBID scale has demonstrated internal and external validity (Winstead & Cash, 1984) and high internal consistency, testing in male ($\alpha$ = .96) and female ($\alpha$ = .96) populations (Cash, 2002). For the current study, reliability analyses demonstrated that the SIBID possessed excellent internal consistency, Cronbach's α = .97.

## Results

To produce a reliable regression, ratio of cases to predictors was calculated using the equation $N = 50 + 8 (k)$ for testing a full regression model (Green, 1991). It was calculated that a minimum sample of 74 cases was required. After data cleaning, a sample of $N$ = 169 was used, fulfilling the requirements for sample size.

All statistical analyses were computed through SPSS (2013). A hierarchical multiple regression analysis (MRA) was run to test the initial two hypotheses of this study. Alpha was set to $\alpha$ = .05 for significance. A linear regression was also run to test the third hypothesis of this study.

The data was initially cleaned via visual examination. Consequently, 93 cases were removed due to incomplete and unusable survey data. Prior to the main data analyses, assumptions of regression were initially checked. Boxplots indicated that there were several univariate outliers in the dataset, based on Field's (2009) guidelines. In particular, outliers were present in the relationship satisfaction and resilience variables. However, these outliers were not removed from the analysis as further analyses including Mahalanobis distance indicated that means were representative of cases within variables (Field, 2009). There was one multivariate outlier detected as the case was larger than the critical chi-square value of 16.27. Regression analyses were conducted with and without this case. There was no substantial difference found and therefore, the outlier was retained in the data set. Inspection of histograms showed normally distributed variables. Additionally skewness and kurtosis fell with the acceptable range of +3.0 and -3.0. The assumption of linearity was checked with visual inspection of scatterplots; linear relationship between variables was confirmed. Pearson's correlations displayed in Table 1 assessed the assumptions of multicolinearity and singularity. Correlations obtained were found to be acceptable (see Table 1 for means and standard deviations of the study variables).

**Table 1:** ***Descriptive statistics for predictor variables, BID, Relationship Satisfaction and Resilience***

| Variable | Min | Max | *M* | *SD* |
|---|---|---|---|---|
| BID | .00 | 8 | 3.37 | 1.85 |
| R/ship Satisfaction | 13 | 35 | 29.70 | 4.44 |
| Resilience | 35 | 97 | 70.10 | 12.58 |

*Note:* Min. = Minimum, Max. = Maximum, *M* = mean, *SD* = standard deviation, BID = Body Image Dissatisfaction

**Data Analysis**

**BID and Relationship Satisfaction as Predictors of Resilience.** To test the hypothesis that BID and relationship satisfaction predicted resilience, a hierarchical MRA was conducted. The model was statistically significant, $F(2, 166) = 16.82$, $p < .001$, accounting for 16.9 % of the variance in scores in resilience. Correlations between predictor variables for the hierarchical MRA are presented in Table 2.

**Table 2. Bivariate Correlations, Means, and Standard Deviations of Predictor Variables, BID, Relationship Satisfaction and Resilience**

| | *M* | *SD* | *1* | *2* | *3* |
|---|---|---|---|---|---|
| 1 BID | 3.37 | 1.85 | - | | |
| 2 Resilience | 70.10 | 12.58 | .32*** | - | |
| 3 Relationship Satisfaction | 29.70 | 4.44 | -.26* | .34*** | - |

*Note:* ***$p < .001$ * $p < .05$

Table 3 displays the unstandardized regression coefficients (B), Standard Error of the unstandardized beta coefficient (SE B), the standardized regression coefficients (β), $R$, $R^2$ and $\Delta R$ for each step of the hierarchical regression of BID and relationship satisfaction prediction resilience. The predictor variables were entered based on research with relationship satisfaction being entered into the last step. At Step 1, BID accounted for 9.9% of variance in Resiliency scores, with BID found to be a negative predictor $F(1, 167) = 18.39$, $p < .001$. Therefore, as BID increased, resilience decreased. At Step 2, relationship satisfaction contributed 6.9% of variance to predicting positively toward resilience over and above BID. This addition to the model was significant $\Delta F(1, 166) = 13.84$, $p < .001$. Therefore, as relationship satisfaction increased, so did resilience.

**Resilience and BID as predictors of Relationship Satisfaction.** To test the hypothesis that resilience and BID predicted relationship satisfaction, a second hierarchical–MRA was conducted. The model was statistically significant, $F(2, 166) = 10.04$, $p < .05$, accounting for 14.2 % of the variance in relationship satisfaction scores.

**Table 3.** ***Hierarchical Multiple Regression Predicting Resilience from BID and Relationship Satisfaction***

| Predictors | *R* | $R^2$ | $\Delta R^2$ | B | *SE* B | β |
|---|---|---|---|---|---|---|
| Step 1 | .315*** | .099 | | | | |
| Constant | | | | 77.342 | 1.924 | |
| BID | | | | -2.15*** | .501 | -.315 |
| Step 2 | .411*** | .169 | .159 | | | |
| Constant | | | | 52.686 | 6.881 | |
| BID | | | | -1.66*** | .500 | -.243 |
| Relationship Satisfaction | | | | .774 | .208 | .273 |

*Note*: *** $p < .001$

Table 4 displays the unstandardized regression coefficients (B), Standard Error of the unstandardized beta coefficient (SE B), the standardized regression coefficients (β; *R,* $R^2$, and Δ*R*) for each step of the hierarchical MRAon resilience and BID predicting relationship satisfaction. The predictor variables were entered based on research with BID being entered into the model at the last step. At Step 1, resilience accounted for 11% of variance in relationship satisfaction, with resilience found to be a positive predictor $F(1, 167) = 21.43$, $p < .001$. Therefore, as resilience increased, so did relationship satisfaction. At Step 2, BID contributed 2.8% of variance and was a negative predictor toward relationship satisfaction over and above resilience. This addition to the model was significant $\Delta F(1, 166) = 5.37$, $p < .05$. Therefore, as BID increased, relationship satisfaction decreased.

**Table 4.** ***Hierarchical Multiple Regression Predicting BID from Relationship Satisfaction and Resilience***

| Predictors | *R* | $R^2$ | $\Delta R^2$ | B | *SE* B | β |
|---|---|---|---|---|---|---|
| Step 1 | .337*** | .114 | | | | |
| Constant | | | | 21.366 | 1.830 | |
| Resilience | | | | .119*** | .026 | .337 |
| Step 2 | .376*** | .142 | .028 | | | |
| Constant | | | | 24.158 | 2.171 | |
| Resilience | | | | .099*** | .027 | .282 |
| BID | | | | -.422* | .182 | -.176 |

*Note:* *$p < .05$ ***$p < .001$

**Ethnicity and Body Image.** To test the hypothesis that there would be differences in BID between various ethnicities, a one-way analysis of variance (ANOVA) was conducted. The analysis was not significant, $F(1, 167) = .002$, $p = .962$. This finding indicates that there was no statistically significant difference in BID among the different ethnic groups reported by participants.

## Discussion

It was predicted that greater relationship satisfaction and reduced BID would be predictors of higher resilience (Connor & Davidson, 2003) and the results of the current study supported this hypothesis. Those who had low relationship satisfaction and high BID were more likely to have a low level of resilience.

The present results are also in accordance with Migerode et al. (2012), who emphasized the importance of social support being an even greater impact on an individual's well-being than resilience. The impact of repeatedly comparing one's appearance to that of others (particularly upward social comparisons) may facilitate a thin-ideal internalization, which in turn, contributes to bodily dissatisfaction (Vatarian & Dey, 2013). This is in fact highlighted by Choate (2005) as a key component to thin-idealization; a woman compares herself not only to the cultural ideal but additionally to other females (Choate, 2005). The current results possibly suggest that if individuals are in relationships where they feel threatened by their partners' past relationships, for example, the individuals may compare themselves to those persons. This could also be true for other people whom they might see as a threat, (by using upward comparisons to thinner women; Vatarian & Dey, 2013), resulting in BID.

Relationship satisfaction also had an effect on resilience, with relationship satisfaction being a positive predictor. Those who had greater relationship satisfaction scored higher on resilience. Long-standing relationships have been found to have a positive effect in regards to feelings of satisfaction with one's own life (Ingersoll-Dayton, Campbell, Kurokawa, & Saito, 1996). Resilience also positively predicted relationship satisfaction in the current study, although BID was found to be a negative predictor of relationship satisfaction. Individuals who had a low body image score were more likely to score high on resilience. The present study is consistent with existing research which has found adults with negative feelings about their own appearance are more likely to rate their romantic relationship satisfaction as lower than other adults (Cash & Smolak, 2011).

Walsh (2006) suggested those who are highly resilient are able to move forward with their lives after adversity. More resilient individuals are perhaps more likely to forgive their partners for disputes in a relationship, resulting in higher relationship satisfaction. The ability to 'let go' (Walsh, 2006) of negative relationship experiences may contribute to a more positive current relationship.

Couples' relationships, although perhaps stressful, enhance individuals' life satisfaction and general health. Blieszner (2007) discussed this idea of challenging and stressful events that occur between couples due to their relationship, but the life satisfaction that also exits, as a paradox. This was supported by the inverse relationship that the current study found between these variables. Resilience affected relationship satisfaction and relationship satisfaction affected resilience. Each variable appeared to be a predictor of the other. This bidirectional relationship suggests that relationship satisfaction and resilience may be difficult to disentangle. Moreover, they each influenced body image disturbance. Esberger originally (1978) discussed body image as a continuum, changing throughout life stages and circumstances. Resilience and relationship satisfaction may therefore become complex factors in the arena of body image.

To further investigate the inverse relationship between body image and relationship satisfaction, a mediation analysis was conducted. The analysis tested whether resilience was a mediator of body image and relationship satisfaction. Resilience was expected to mediate the relationship as it has demonstrated to underlie many factors which impact an individual's overall holistic balance and wellness (Choate, 2005). However, the mediation was not significant. This may have been due to the relationship between resilience and relationship satisfaction potentially having equal effects in influencing an individual.

To investigate whether ethnicity (African, South American, European, Middle Eastern, and Asian) would positively impact body image, a one-way ANOVA was conducted. The results did not support this hypothesis, as there was no statistically significant difference in the BID of various ethnicities. Past research suggests that the thin-ideal is emphasized is a Western societal trend (Choate, 2005). For the past 40 years (Featherstone, 2006), research suggests that those within Western society are more likely to believe that attractiveness and social success is correlated with a thin physique. Further, there have been studies that suggest females from diverse ethnic cultures, such as the African American culture (Miller, Gleaves, Hirsch, Green, Snow, & Corbett, 2000), are more likely to be satisfied with their bodies than European or American females. However, they have equal concerns about their appearance, as indicated in the present study. As there are many areas of research that support this, it can be concluded that the current sample may have been too small in order to identify these factors.

An advantage of the current study over past research is that it used the RAS (Hendrick, 1988). Compared to past research (Bove & Sobal, 2011) the RAS uses questions which are more general and target couples who do not necessarily have to be married. The RAS has been created to target general relationships including gay couples, couples living together, couples who do not live together, and with minimal changes, even relationships between friends. The RAS has high generalizability to the relationship itself; the items identify relationship satisfaction as an overall total and not any specifics of the relationship (i.e., sexual satisfaction; Ghezelseflo et al., 2013). Additionally, many past studies have examined married couples (Bove & Sobal, 2011), yet body image issues appear more likely to occur in other, non-marital relationships, as individuals tend to relax about weight after marriage (Bove & Sobal, 2011).

Another advantage to the present study is that it has tested a highly varied cross-cultural population, with over half of the participants being culturally diverse. Demerest and Allen (2000) found that dissatisfaction with body shape was greater among the females regardless of ethnicity. As participants were from Australia, they may have had diverse cultural backgrounds, yet their ideals may have been influenced by Western cultural ideals. Studies have suggested that females with weak racial identity and self-esteem are more likely to internalise Western cultural norms of beauty (Sanderson, Lupinski, & Moch, 2013). This could account for the non-significant findings regarding ethnicity in the present research.

There were limitations within the current study which should also be considered. The use of self-report measures only may have impacted the validity and accuracy of information due to positive impression management issues. Predictions suggest that the relationships found between the variables are only highly likely to occur, yet may not be relevant to the whole population.] A community sample was used within the current study, and although this has applicability to the general population, it decreases the generalizability to clinical populations.

Although body image concerns are more focused in younger populations (Jackson et al., 2014), future studies should attempt to target a wider age range, as the mean age of participants in the current study was relatively young.. However, this may be due to the paucity of investigations into older

populations in regards to body image concerns. Future research should explore ethnicity regarding how strongly individuals identify with their ethnic backgrounds, as this may be a more accurate predictor of whether individuals identify highly with Western cultural norms of beauty.

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