

# Sociocultural Perspectives on Body Image

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## Glossary

**aesthetic sports** Sports where appearance is emphasized or judged, for example, gymnastics, cheerleading.

**affective** To do with feelings, emotions.

**appearance schemas** The linking of appearance with happiness and success such that appearance becomes the major basis for evaluating the self.

**body esteem** The amount of esteem (positive thoughts and feelings) accorded the body.

**causal model** A model where one variable is proposed to actual lead to or cause another, as opposed to simply being related.

**cognitive-behavioral therapy** Identifying, challenging, and modifying maladaptive thoughts and behaviors.

**correlational research** Research that determines the relationship between two variables measured at the same point in time.

**dietary restraint** Habitual dieting behavior and thoughts.

**drive for thinness** Motivation or wish to be thinner.

**experimental research** Research where the variable of interest is manipulated in a controlled way.

**face validity** The extent to which something looks like it measures what it claims to measure.

**internalization** The incorporation and adoption of particular ideals as one's own.

**lean sports** Sports where a lean body is advantageous, for example, long distance running.

**longitudinal research** Research that measures variables of interest across time.

**media literacy** A set of knowledge, attitudes, and skills that enable critical analysis of the nature of the mass media.

**meta-analysis** A statistical technique that evaluates the overall result across a large number of different studies.

**moderating variable** A variable that influences the strength of connection between two other variables.

**protective factor** A factor that protects against subsequent undesirable outcomes, that is, it predicts lower levels of the undesirable outcome.

**risk factor** A factor that predicts a subsequent undesirable outcome.

**social comparison** The seeking of knowledge about the self by comparing oneself with other people.

**sociocultural environment** The social and cultural practices, beliefs, and traditions within a particular society.

**structural equation modeling** A technique for testing the overall fit and strength of causal connections assumed on the basis of prior theory.

## Introduction

Body image has become an increasingly important construct in contemporary Western societies. For example, in a recent series of Mission Australia surveys of tens of thousands of young Australians aged 11–24 years, body image was rated as their number one concern, ahead of issues such as family conflict, coping with stress, or alcohol use. This finding illustrates two general points. First, young people (and others) have a shared understanding of what is meant by the term 'body image', so much so that it has become part of the modern vocabulary. Second, body image is both important to and problematic for them.

The importance of appearance in general, with a particular focus on the body, is on display almost everywhere – on billboards, in shop windows, in magazines, and in the ordinary conversations of individuals. The considerable amount of money, time, and effort invested in the pursuit of beauty through clothes, hair, cosmetics, exercise, and dieting, as well as the increasing popularity of cosmetic surgical procedures, offers further testament to the importance of body image. In addition, there is a great deal of evidence that body image is experienced negatively by many people. In fact, the majority of

women and girls are dissatisfied with their bodies, particularly with their body size and weight and shape, and they wish to be thinner. There is also increasing evidence that men and boys are likewise beginning to experience body dissatisfaction, albeit at lower rates (for the moment) than their female counterparts. For men, the wish is generally to be more muscular. Thus, dissatisfaction with the body's weight and shape has aptly been described as a 'normative discontent' for both sexes. Further, it is a discontent that has real ramifications in individual lives. For example, satisfaction with appearance has been shown to be one of the major contributors to overall levels of global self-esteem. Accordingly, how we feel about our appearance is an important component of how we feel about ourselves as a whole.

What, then, is the reason behind these current high levels of body dissatisfaction (and associated behaviors like disordered eating) experienced by many people, especially young women and girls? When this question is asked of lay individuals, they almost invariably attribute the blame to the fashion industry and the mass media, in particular to the unrealistically thin models portrayed in fashion magazines. These influences, the fashion industry and mass media, form part of the wider sociocultural environment that provides the context for all that we

do. Many body image and eating disorder theorists similarly focus on the sociocultural environment.

Thus, this article sets out to introduce and describe what has become in the literature one of the dominant theoretical frameworks for viewing body image, namely the sociocultural perspective. This perspective holds sociocultural ideals and pressures as paramount to the genesis of body image disturbance, and so is the most in accord with lay or everyday explanations (as above). The article also presents a review of evidence supporting the sociocultural model. In so doing, it seeks not only to document what is known, but also to identify gaps in the existing knowledge for future research on sociocultural influences.

### Overview of the Sociocultural Model

There exist several more specific forms of the sociocultural model, but the perspective is best thought of as a heuristic or conceptual model providing a general framework for viewing and investigating body image and disordered eating. Although, as we will see, the perspective does not deny the importance of individual characteristics, the focus is very much on the influences and forces that occur within a particular sociocultural environment. These refer not only to aspects of the physical environment, but rather also to the social and cultural practices, norms, and beliefs of a society, and accordingly will be specific to that society. Despite the fact that specific societal ideals and practices will differ across time and across cultures, the basic processes outlined in the sociocultural model still hold.

At its most basic, the sociocultural model holds that (1) there exist societal ideals of beauty (within a particular culture) that are (2) transmitted via a variety of sociocultural channels. These ideals are then (3) adopted or internalized by individuals, so that (4) body satisfaction (or dissatisfaction) will be a function of the extent to which individuals do (or do not) meet the ideal prescription. Such satisfaction or dissatisfaction will then have (5) affective and behavioral consequences of its own (e.g., eating disorders).

Although the above represents the crux of the sociocultural model, this simple form of the model strictly would have everyone suffering from extreme body dissatisfaction and eating disorders. This is clearly not the case. Hence, the model also recognizes that (6) there will be individual differences in response. More formally, there exist a variety of biological and psychological characteristics that moderate the links in the model, and ultimately determine an individual's degree of vulnerability to sociocultural pressures. Figure 1 provides a schematic representation of the whole model.

How do the components proposed by the sociocultural model operate in contemporary western society? (1) Current female beauty ideals can readily be gleaned from a casual flick through any women's fashion magazine. This will reveal a plethora of young, tall, long-legged, large-eyed, moderately large breasted, tanned but not too tanned, and clear-skinned women with usually Caucasian features. But perhaps the most obvious and consistent physical characteristic shared by these models is that they are also very thin. Not only do they have naturally thin figures, but digital modification techniques are

also often used to further slice off pounds and inches from waists, hips, and thighs. Thus, current societal standards for female beauty inordinately emphasize the desirability of thinness. (2) These ideals are then transmitted by powerful and pervasive sociocultural influences, most notably the media, family, and peers, and hence the sociocultural model is sometimes referred to as the tripartite model. (3) Despite the thin ideal being impossible for most women to achieve by healthy means, it is nevertheless accepted and internalized by many, that is, adopted and incorporated by the woman as the reference point against which to judge herself. (4) As it is virtually impossible for women to match this thin ideal, they are invariably disappointed, resulting in body dissatisfaction. (5) This, in turn, may lead to dieting and other usually futile (and most often unhealthy) attempts to pursue thinness, ultimately resulting in disordered eating symptoms.

A parallel process operates for men, but in this case (1) the ideal is a mesomorphic and muscular V-shaped body, with broad shoulders, well-developed upper body, flat but muscular stomach (a 'six-pack'), and narrow waist and hips. (2) As is the case for women, this ideal is transmitted through a variety of sociocultural influences, and again this hyper-muscular ideal is impossible for most men to achieve by healthy means. Nevertheless, it is (3) internalized by many, (4) resulting in body dissatisfaction, and (5) a potentially unhealthy pursuit of muscularity (via compulsive exercise, supplements, or steroids).

### Evidence in Support of the Sociocultural Model

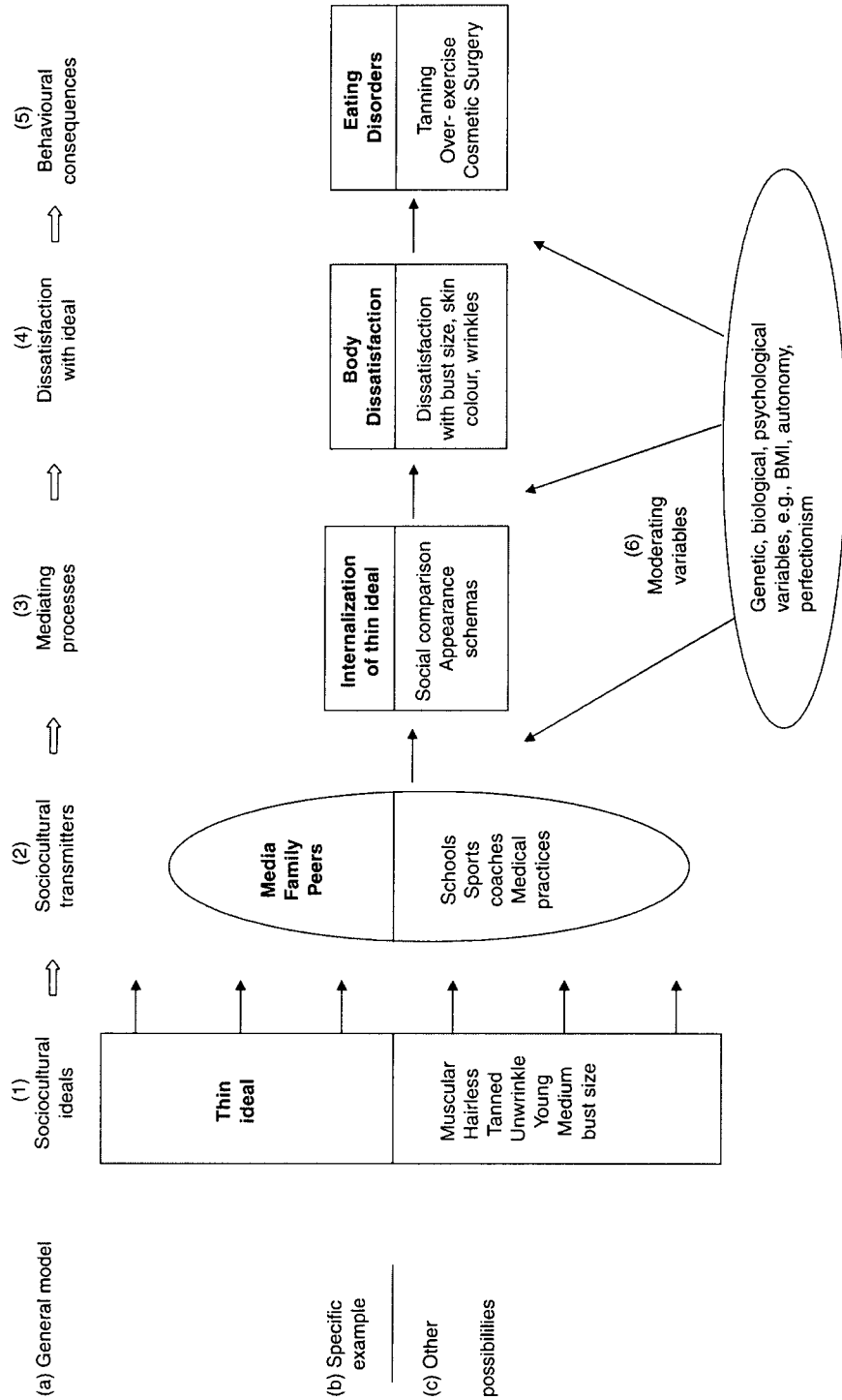
As can be seen, the sociocultural model offers a relatively simple, easily understood, and face valid framework for understanding contemporary body image. Further, it offers a causal model, where influence runs from sociocultural ideals and agents to body image disturbance. But importantly, is there any empirical evidence to support the model? The next section answers this question by presenting a summary of the considerable body of existing research that does support the steps proposed in the sociocultural model.

### Evidence for the Existence of Sociocultural Ideals

A number of converging lines of evidence point to the fundamental importance of sociocultural ideals of appearance in all aspects of body image. Logically, to the extent that there exist different beauty ideals across time and/or culture, these will be related to different body image outcomes. And indeed, research has now documented not only considerable changes over time in beauty ideals within Western societies, but also differences among cultures, particularly between Western and non-Western cultures.

#### *Changes over time*

Art and literature indicate that aesthetic ideals for female beauty have fluctuated markedly throughout history. As an example, for centuries (1400–1700), a rounded abundant body – what we would now view as fat – was considered sexually appealing and beautiful, as illustrated in the paintings of Rubens. More recently, however, particularly in the latter half of the twentieth century, the societal beauty ideal for



**Figure 1** Schematic representation of (a) general sociocultural model, (b) most applicable and researched specific example, and (c) other possibilities within the sociocultural framework.

women in Western countries has become increasingly thin. An analysis of Miss America pageant winners and Playboy centerfolds, which can be taken as epitomes of female beauty, documented a significant decrease in body size from the 1950s to 1990s. By the 1990s, the majority of the women pictured had weights that were 15% or more below the expected weight for their height (one of the formal diagnostic criteria for anorexia nervosa). This indicates that these latter women have a genetically very unusual body shape, one possessed by less than 5% of the population, and therefore one that is impossible for the majority of women to attain (certainly by healthy means).

Other formal content analyses of visual media including women's and teenage fashion magazine covers and content, film, and television confirm this trend over recent decades. For example, significantly underweight female characters are now overrepresented (more than 30%) on prime-time television, and also receive more positive comments from the male characters. Similarly, the adult female characters in recent video games have much smaller waists and hips than real women. As a clear reflection of changing ideals, fashion shop mannequins have likewise become thinner and less curvaceous over the late 1990s. Interestingly, the same time period has seen a corresponding increase in both diet and exercise articles and advertisements.

Further, there is no doubt that these levels of thinness have not abated but continued as the ideal into the 2000s, but with a greater focus on being toned as well as being thin. One estimate is that the average fashion model has a body mass index (BMI) of 16.3, well below the normal healthy range of 18.5–24.9. In addition, most recently, there has been renewed focus on breast size. In fact, the current female beauty ideal has been described somewhat paradoxically as 'curvaceously thin'. Although she possesses an extremely small waist and narrow hips, she possesses a medium bust size, so that her lower half is disproportionately thin compared to her upper half. This unusual fat distribution is even genetically rarer than the tubular noncurvaceous thin ideal of the late 1990s. Accordingly, it is virtually impossible for most women to attain this ideal by any amount of diet and exercise; rather it would require cosmetic surgical augmentation.

In men, there is similar evidence that the cultural norm for the ideal body has become increasingly muscular over the latter part of the twentieth century. For example, Playgirl centerfold (male) models increased in both BMI and fat-free mass index across the 1970s to 1990s, with many male ideals exceeding the upper limit of muscularity attainable without the use of anabolic steroids. More generally, there has been a documented increase in the use of lean, bare-chested, and muscled male bodies in fashion magazines and advertising, as well as a parallel increase in articles and advertisements for exercise and nutritional supplements targeted at men. In addition, there has been a very large increase in the uptake of gymnasium and fitness center membership.

In contrast, and perhaps ironically, over the same time period (from the 1960s or so), real men and women have become fatter and heavier. Thus, for both genders, the body size and shape of the average adult has become increasingly different from the respective sociocultural ideal. In fact, it is probable that the discrepancy between the average and ideal is greater at this point in time than ever before in recent history. It

is therefore not surprising that many people experience their bodies negatively.

The same trends in sociocultural ideals are reflected in media specifically marketed at children (e.g., children's television), and in children's toys. For example, the Barbie doll represents a cultural icon of female beauty that is owned by 99% of 3- to 10-year-old girls in the United States. She provides an aspirational role model in terms of appearance, activities, and life outcomes for young girls. Yet, her weight and body proportions are unrealistic, unhealthy, and unattainable, as fewer than 1 in 100 000 women are likely to have proportions at all similar to Barbie's. In one unique experimental study, 5- to 8-year-old girls reported lower body esteem and a greater desire to be thinner after brief exposure to images of the Barbie doll.

Many boys, on the other hand, habitually play with male action toys, that is, small plastic figurines of various adventure heroes, for example, GI Joe and Luke Skywalker. These can likewise be taken as representations of the sociocultural ideal for male body shape. Studies have now documented that these figurines have become markedly more muscular during the last few decades (since the 1970s), and many contemporary action toy figures exceed the levels of muscularity attained by even the largest of human bodybuilders.

#### **Cultural differences**

The prevalence of different beauty ideals and levels of body concern in different cultures offers strong support to the sociocultural model. In many non-Western countries, particularly those less developed socioeconomically (e.g., in Africa), plumpness is valued as a sign of health or fertility, and also denotes affluence. Under these circumstances, fatness would be seen as attractive and sexually appealing, while thinness would be seen as unattractive, precisely the opposite of Western beauty ideals. In support, earlier cross-cultural comparisons confirmed that adherence to the thin ideal was much lower in developing or non-Western societies, with commensurate low levels of body dissatisfaction and a virtual absence of eating disorders.

More recently, however, there is growing consensus that the idealization of thin and the related body dissatisfaction have become transnational phenomena, a development usually attributed to the globalization of Western media. The International Body Project (published in 2010) represents the largest cross-cultural survey of body ideals to date, with a convenience sample of more than 4000 women and 3000 men from 41 sites in 26 countries organized into 10 world geographic regions. There was little difference in ratings of attractive or ideal female figures or body dissatisfaction across the world regions. Although body dissatisfaction was highest in the Americas (North and South), effect sizes were very small. Importantly, in non-Western societies, more self-reported exposure to Western media was associated with preference for a thinner female figure (by both men and women), in a way that exposure to local media was not, thereby implicating media portrayals of idealized beauty in the development of body weight ideals.

An instructive example of both cultural differences and shifts over time in beauty ideals is provided by the case of Fiji. Traditionally, a fatter body shape plus a robust appetite have been highly valued in Fijian society. Hence body

dissatisfaction, dietary restraint, and disordered eating were very rare. However, 3 years after the introduction of television (which occurred around 1995), many adolescent girls now expressed admiration for the television characters and sought to emulate them in many ways, including body shape. Around three-quarters of the girls surveyed now felt too big or fat and close to 70% had dieted to lose weight, reflecting the change in aesthetic ideal. Sadly, this was accompanied by the emergence of disordered eating and self-induced vomiting to control weight.

Some other research has also examined differences in body ideals in different ethnic groups within a particular (usually Western) country. For example, Black women in the United States generally accept a wider range of body weights as ideal and are more satisfied with their own weight and appearance than White women are, despite they are (Black women) having an actual larger body size. In particular, they place more value on large buttocks ('a big butt'). Further, the strength of their African American cultural identity has been associated with greater body satisfaction. However, over time, there has been a reduction in the differences between Black and White women. A further example of cultural effects comes from the International Body Project (above), which found differences between urban and rural sites within several countries. Here, the rural participants held less thin ideals and experienced less body dissatisfaction than their urban counterparts.

Not only are there ethnic differences within a particular culture, but there may also exist a variety of subcultures that differ in their emphasis on appearance. In particular, within Western cultures, differences in occupation or interest have been related to body image. Research has consistently documented that members of subcultures where ideal body pressures are amplified (e.g., ballet dancers, fashion models, athletes in lean or aesthetic sports, gymnasts, members of fitness centers, and gay men) do indeed have higher rates of body dissatisfaction and eating disorders.

### **Evidence Concerning Sociocultural Transmission of Ideals and Its Effects**

The three particular sociocultural influences that have been identified as the most important transmitters of sociocultural ideals are parents, peers, and the media. Each will receive specific attention in other articles. In general terms, the role that each of these plays in body dissatisfaction and disordered eating has now been supported by a large body of correlational research. For example, there is evidence that parents can influence the body image of their children in both direct and indirect ways. Direct means include parental commentary about the child's weight or appearance, or the imposition of particular rules about food and eating, for example, surrounding snacks or meal times. Indirect means include unintended parental modeling of their own weight concerns and weight loss behaviors. For example, even quite young children can understand and articulate that their mother is 'on a diet'.

The role of peers has been mostly studied among adolescents, but is relevant also to younger children and to women. For example, many adult women and girls engage in 'fat talk', a

script in which they seek reassurance from their peers for their anxieties about being or becoming fat. Adolescent girls who are part of a particular friendship group tend to have similar levels of body image concern, drive for thinness, and dietary restraint. Similarly, younger girls appear to share norms about body ideals. Specific peer influences that have been demonstrated to influence body image include comments from peers about weight and shape, peer modeling of weight concerns and weight control techniques, conversations among friends about weight or appearance, and the shared belief (and actuality, in some situations) that popularity is dependent on conforming to the thin (or muscular) ideal. Finally, one of the most strongly established correlates of body dissatisfaction is weight- and shape-based teasing. In the playground, probably the surest way to make a contemporary girl cry is to call her 'fat'. Such teasing most often comes from peers, both girls and boys, but can also come from parents, siblings, or others in the social environment.

However, the most powerful and pervasive transmitter of the sociocultural ideals of beauty are the mass media. Men and women of all ages, as well as children, are exposed to a variety of forms of media promulgating beauty ideals on a daily basis. For example, virtually every American household has at least one television, which is switched on for around 7 h a day, and over 80% of teenage girls regularly read fashion magazines, mostly to gain information on style and beauty. Extensive correlational and experimental research supports the link between exposure to fashion magazines and particular forms of television (notably soap operas and music videos) and body image. Meta-analytic reviews have confirmed that media exposure is associated with increased levels of internalization of the thin ideal, body dissatisfaction, and eating disorder symptoms in women, with some women particularly vulnerable, notably those already high in body concern. Interestingly, effects are larger for adolescent women (under 18 years) than adult women. A smaller meta-analysis has confirmed that media exposure is also associated with negative body image among men. Research is just beginning to address newer forms of the media, for example, the Internet, which can be accessed at any time and have come to play an increasingly central role in contemporary adolescent lives. There exist many sites with a strong appearance focus, including health, beauty, magazine, clothing, and celebrity sites (as well as pro-ana[anorexia] or pornography sites). Hours spent on the Internet, particularly on social networking sites such as Facebook, have now been shown to be associated with weight dissatisfaction and drive for thinness in adolescent girls.

While the media, family, and peers have been identified as major conveyors of sociocultural ideals, it needs to be remembered that there are many other potential sources of influence. These include spouses, teachers, sports coaches, ministers, and medical practitioners, as well as situations like ballet classes or fitness centers. Thus, these ideals are virtually everywhere around us. Furthermore, multiple sources do not exert their influence in isolation, but rather do so concurrently and in interaction. For example, adolescent girls exist in an appearance subculture where reading teen magazines, watching music videos, listening to their

mothers, and talking with their friends about clothes or other appearance-related topics, all reinforce each other.

### Evidence on Mediating Mechanisms

The existence of particular societal ideals does not necessarily translate into body dissatisfaction for individuals who do not meet these ideals. What is required is that the ideals be accepted as self-relevant, viewed as important, and engaged with in some way. Accordingly, earlier versions of the sociocultural model proposed internalization of the thin (or muscular) ideal as the mediating mechanism by which societal messages from parents, peers, and the media lead to body dissatisfaction. Internalization refers to the acceptance and adoption of societal ideals as goals for oneself. Research, including longitudinal designs, has now shown that internalization reliably predicts body dissatisfaction, and also mediates (i.e., accounts for or explains) the relationships between peer and media influences and body dissatisfaction and disordered eating.

More recently, several other mediating processes have been proposed, notably social comparison and appearance schemas. Social comparison refers to the human tendency to seek self-knowledge by comparing with others. Of course, when a woman compares her appearance with that in the idealized media images, she almost invariably finds herself lacking and dissatisfied. In addition, thin ideals are not presented in a vacuum but rather as parts of complex cultural scripts that link thinness and attractiveness to happiness, desirability, and status. Thus, over time, individuals develop appearance schemas where appearance becomes the core basis for evaluating the self and others, and hence self-worth becomes contingent on meeting societal ideals.

Other proposed mediators include perceived pressure from the media (or family or friends), or trying to look like the media images. It should be noted that all of these suggested mediators are psychological processes situated within the individual. All have empirical support and most likely they work in tandem. Indeed, the body image field as a whole could usefully address the conceptual and measurement overlap in these constructs. It may be that some processes occur developmentally earlier and lay the groundwork for others. For example, the idea that appearance is important (appearance schemas) may be the most basic, while internalization of ideals and social comparison likely require more sophisticated cognitive processing.

### Evidence on Consequences of Body Dissatisfaction

The specific outcome postulated by the sociocultural model is body dissatisfaction, which is the major affective component of body image. However, this also has important behavioral consequences of its own. For women in particular, dissatisfaction with body weight and shape often leads to attempts (usually futile) to lose weight, potentially resulting in unhealthy eating, dieting and/or exercise patterns, and ultimately clinical eating disorders. Indeed, meta-analytic reviews identify body dissatisfaction as one of the few consistent and robust risk factors for eating disorders.

### Evidence on Moderating Processes

As indicated earlier, in its simplest form, the sociocultural model would have everyone suffering from extreme body dissatisfaction and eating disorders because we all live in the same sociocultural environment and are exposed to the same sociocultural pressures. Thus, the model recognizes that there must be biological and psychological individual characteristics that moderate the strength of the links proposed in the model, making some people especially vulnerable, and others more resilient, to sociocultural pressures.

For example, the extent to which a particular woman accepts or internalizes the societal thin ideal is likely moderated by the psychological variables of self-esteem and autonomy, such that women with high self-esteem and autonomy will be less influenced by societal ideals and pressures. Similarly, the extent to which internalization of the thin ideal translates into body dissatisfaction will surely be determined by the woman's biology - her actual weight and degree of fatness. Finally, the link between body dissatisfaction and eating disorders will undoubtedly be moderated by many personality variables such as perfectionism, as very many women (and men) experience body dissatisfaction, yet only a few go on to actually develop clinically diagnosable eating disorders. Importantly, overlaid across this, individual genetic predisposition may also influence individual biological and psychological characteristics, and so play an important moderating role in each of the proposed links.

Although there is evidence that characteristics such as weight and self-esteem are related to body dissatisfaction and disordered eating, their specific moderating roles in the sociocultural model have received little attention. The small amount of existing evidence is very patchy and unsystematic. Hence, these (and other) moderating influences warrant much closer investigation.

### Evaluation of the Model as a Whole

Most research has focused on specific components of the sociocultural model. However, a series of studies with adolescent and young adult samples has attempted to test the entire sociocultural model as it applies to women in contemporary Western society by the use of structural equation modeling. In general, their modeling shows that perceived influence from parents, peers, and the media leads to internalization of the thin ideal and comparison on the basis of appearance which, in turn, lead to body dissatisfaction and finally to disordered eating patterns. Usually, a direct effect from media influence to disordered eating is also shown. These results indicate overall support for the sociocultural model. Preliminary tests of aspects of the model in male samples indicate that the model appears also to apply to men's body image.

As indicated above, the sociocultural model has been applied primarily in the realm of body weight and shape in order to explain the outcomes of body dissatisfaction and disordered eating. This is not surprising given that current beauty ideals so strongly emphasize these physical attributes. In principle, however, the perspective applies equally well to other aspects of body image. First, there are other societal

ideals for features such as skin color and texture, breast size, or size of eyes, which can potentially be internalized and make people feel deficient. Second, there are other messages transmitted by sociocultural influences. For example, alongside the glorification of the thin ideal comes a very strong anti-fat message. There is also a parallel idolization of youth and denigration of aging. Finally, there are a commensurate variety of other behavioral responses, ranging from the depilation of body hair to tanning, to cosmetic surgery, which have just begun to be investigated from the sociocultural perspective.

### **Limitations and Recommendations for Future Research**

In the main, the claims of the sociocultural model have been investigated among White adolescent and young adult (college-aged) women. Although there is growing research interest in the body image of men, the experience of other groups (preadolescent children, adult men and women, and more ethnically diverse samples) warrants more research attention. The influence of other sociocultural agents, such as sports coaches and medical practitioners, as well as newer forms of the media, for example, the Internet, also should be addressed. Important remaining tasks are the specification of mediating processes and the identification of moderating variables. These latter are particularly important as they refer to those individual differences (biological, psychological, or social) that make some people vulnerable to sociocultural pressures to conform to the ideal, but others more resilient to the same pressures. Finally, other increasingly common behaviors such as cosmetic surgery should be investigated from within the theoretical framework of the sociocultural model.

Perhaps the biggest limitation in the existing research is that it is primarily correlational, and hence cannot determine causal directions. For example, in the case of the effects of media, while it is tempting to conclude that exposure to a large dose of thin idealized images leads to body dissatisfaction in accord with the causal sequence proposed in the sociocultural model, the converse causal assumption is equally plausible: body dissatisfaction may lead to heightened use of the media. Yet, there is surprisingly little longitudinal evidence indicating that sociocultural influences actually precede body concerns in time, a necessary condition for causality. In particular, there is virtually no evidence that media exposure is temporally antecedent to body dissatisfaction in adolescent or adult women, although television exposure is predictive in young girls. In fact, most likely the relationships between sociocultural influences and aspects of body image will turn out to be complex, multiply determined, and bidirectional.

One valuable longitudinal study of family and peer effects is Project EAT (Eating Among Teens), which followed a large cohort of ethnically diverse adolescents over 5 years. The study found that weight (BMI), weight-related teasing by family or peers, parental weight concerns and behaviors, and having a friend who was dieting, all predicted subsequent body dissatisfaction or eating disturbance 5 years later. On the other

hand, having frequent family meals, a positive atmosphere at family meals, and frequent lunch intake emerged as protective factors. These findings need to be qualified, however, as typically they did not apply to all age and gender subgroups, indicating that different predictors may emerge at different stages of development (e.g., young versus middle adolescence). Furthermore, there were methodological limitations as all measures consisted of single items.

### **Implications for Body Image Interventions**

In addition to offering a greater understanding of negative body image and disordered eating, the sociocultural model also offers a number of potential different targets for intervention, corresponding to the steps of the model. As the model holds societal beauty ideals as transmitted by sociocultural agents as ultimately responsible, these ideals and agents can be targeted. For example, many advocacy groups are calling for the presentation of a broader range of body shapes as beautiful by the media, and more generally for a decrease in the emphasis on beauty and appearance. Others are calling for a ban on the use of airbrushing and digital modification techniques, or at least for warning labels to alert women and girls that the images have been altered in this way. Other examples include schools adopting zero-tolerance policies around weight-related teasing, parents being educated to refrain from commenting on their daughter's weight, and fitness centers taking down their posters displaying thin (or muscular) idealized figures. Thus, there is potentially a range of diverse ways in which the sociocultural environment could be modified to improve overall body image. However, given the multiple sources and pervasiveness of societal beauty ideals, it is unlikely that any one change will be sufficient to confer much benefit.

Fortunately, the sociocultural model also offers intervention at the individual level. For example, if women and girls can be educated to not accept and internalize the thin ideal and to not compare themselves with the models in fashion magazines, then body satisfaction should be preserved. In other words, interventions can be aimed at disrupting the link between sociocultural ideals/agents and body dissatisfaction. This is precisely what media literacy and cognitive behavioral programs seek to do in different ways, and both have proved quite successful. Finally, to the extent that moderating factors which either increase or decrease vulnerability can be identified, these can be targeted to protect individuals. Fostering overall autonomy or self-esteem will have additional positive benefits beyond body image and also carries the advantage that the intervention can be implemented without any specific reference to sociocultural ideals.

### **Conclusion**

The primary purpose of any theoretical model is to convey a greater understanding of the phenomenon under study and to generate testable hypotheses. In this, the sociocultural

model has performed very well. Further, at a general level, the model is well supported, although more longitudinal evidence is required. In additionally suggesting targets for intervention, the model can contribute to policy and practical attempts to lower current levels of body dissatisfaction and disordered eating. In sum, the perspective that focuses on sociocultural ideals and pressures has proved a very useful general framework for understanding contemporary body image.

*See also:* Body Image and "Fat Talk"; Body Image Development – Adolescent Boys; Body Image Development – Adolescent Girls; Body Image Development – Boy Children; Body Image Development – Girl Children; Body Image: Familial Influences; Body Image in Non-Western Societies; Body Image: Peer Influences; Cognitive-Behavioral Perspectives on Body Image; Internalization of Thin-Ideal and Muscular-Ideal; Media Influences on Female Body Image; Media Influences on Male Body Image; Muscularity and Body Image; Preventing Body Image Problems: Ecological and Activism Approaches; Preventing Body Image Problems: Public Policy Approaches; Preventing Body Image Problems: School-Based Approaches; Social Comparison Theory and Body Image; Teasing, Appearance-Related.

## Further Reading

- Dohnt, H., and Tiggemann, M. (2006). The contribution of peer and media influences to the development of body satisfaction and self-esteem in young girls: A prospective study. *Developmental Psychology* **42**, 929–936.
- Levine, M. P., and Murnen, S. K. (2009). "Everybody knows that mass media are/are not [pick one] a cause of eating disorders": A critical review of evidence for a causal link between media, negative body image, and disordered eating in females. *Journal of Social and Clinical Psychology* **28**, 9–42.
- Neumark-Sztainer, D. R., Wall, M. M., Haines, J. I., et al. (2007). Shared risk and protective factors for overweight and disordered eating in adolescents. *American Journal of Preventative Medicine* **33**, 359–369.
- Shroff, H., and Thompson, J. K. (2006). The tripartite influence model of body dissatisfaction and eating disturbance: A replication with adolescent girls. *Body Image* **3**, 17–23.
- Swami, V., Frederick, D. A., Aavik, T., et al. (2010). The attractive female body weight and female body dissatisfaction in 26 countries across 10 world regions: Results of the International Body Project I. *Personality and Social Psychology Bulletin* **36**, 309–325.
- Sypceck, M. F., Gray, J. J., and Ahrens, A. H. (2004). No longer just a pretty face: Fashion magazines' depictions of ideal female beauty from 1959 to 1999. *International Journal of Eating Disorders* **36**, 342–347.
- Thompson, J. K., Heinberg, L. J., Altabe, M., and Tantleff-Dunn, S. (1999). *Exacting Beauty: Theory, Assessment, and Treatment of Body Image Disturbance*. Washington, DC: American Psychological Association.
- Tiggemann, M. (2011). Sociocultural perspectives on human appearance and body image. In: Cash, T. F., and Smolak, L. (eds.) *Body Image: A Handbook of Science, Practice, and Prevention*, 2nd ed., pp. 12–19. New York: Guilford Press.
- Wertheim, E. H., Paxton, S. J., and Blaney, S. (2004). Risk factors for the development of body image disturbances. In: Thompson, J. K. (ed.) *Handbook of Eating Disorders and Obesity*, pp. 463–494. Hoboken, NJ: Wiley.