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I WANT TO LOOK LIKE THAT:
THE ROLE OF IDEAL-TYPE MEDIA IN DISORDERED EATING BEHAVIOURS

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A dissertation submitted in partial fulfilment of the requirements for the award of the Degree of Master of Arts in Psychological Research

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DECLARATION

This work has not been previously submitted in whole, or in part, or the award of any degree. It is my own work. Each significant contribution to, and quotation in, this dissertation from the work, or works, of other people has been attributed to, and has been sited and referenced.

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ABSTRACT

The relationship between media exposure and disordered eating disordered behaviours is not without complexity and contestation in the existing literature. Much knowledge of this relationship stems from studies done in highly modern societies that are saturated with media images of a certain kind. This study examined this relationship in a sample of South African university students, who could be expected to have reasonably high levels of media exposure. It examined the relationship via both quantitative and qualitative methods. In the quantitative part, 222 second-year psychology students at the University of Cape Town completed the Eating Attitudes Test (EAT-26). Analyses of the EAT-26 scores and demographic variables using multiple regression showed that both the sex of subjects ($\beta = 0.23$, $p < 0.001$) and their levels of media exposure ($\beta = 0.17$, $p < 0.001$) were significantly related to a higher risk of the development of symptoms of anorexia nervosa. Ethnic identity was not ($\beta = -0.11$, $p = 0.09$). Women obtained scores on the test that indicated they were more “at risk” for anorexia nervosa than men, especially women with higher levels of media exposure. Using grounded theory, the second part of the study indicated that there are numerous factors, some related to the media, that predispose women to disordered eating behaviours. The interviewees were then more likely to use ideal-type media heavily to further their disordered eating behaviours. However, numerous differences existed between the women in the manners they chose to use and interpret the media. Heavy use of the media led to the participants attempting a number of strategies to change their appearance to resemble those in the media, to various degrees of success. This had a number of consequences for the women. Firstly, their emotions were affected, predominantly in a negative way. They also had a strong desire to change their appearance and “look like that”: The female ideal. The pressure to be thin was also strongly felt by these women. Finally, a number of them realised that reaching the ideal body was somewhat impossible. The model developed by the qualitative research indicated that the media are not necessarily always the cause of pathological eating, but that they interact with other factors in the development of symptoms of anorexia nervosa for these women.
1. INTRODUCTION

This chapter will firstly discuss anorexia nervosa, which is both a psychological and physical problem. While the aetiology of this eating disorder is acknowledged to be somewhat complex, exposure to media that depict ideal body types has been strongly proposed as a sociocultural factor that promotes and maintains disordered eating in individuals. The chapter will also review existing literature on the relationship between media exposure and eating attitudes and behaviours.

1.1 Definitions Of Anorexia Nervosa

Diagnostic Criteria

Garfinkel and Garner (1982) compare anorexia nervosa to starvation in that anorexic individuals refuse food more often than not, but they are preoccupied with eating and various foods. A feature common to those with anorexia nervosa that explains this is their drive for thinness. This exists in conjunction with the belief of an unacceptably high body weight; therefore a disturbance in body image (Garfinkel & Garner) is experienced. The result is that the individual will have an extreme fear of gaining weight, and will regularly engage in behaviours to avoid this. Harrison and Cantor (1997) believe that to counteract this, individuals with anorexia nervosa will not eat enough food to maintain the minimum body weight that is considered normal.

This is in agreement with one subtype of anorexia nervosa, namely the restricting type, as identified by the American Psychiatric Association's (1994) Diagnostic and Statistical Manual of Mental Disorders in the diagnosis of eating disorders. Individuals suffering from this subtype of anorexia nervosa will heavily restrict food intake by dieting or fasting, or will promote weight loss by excessive exercise. The second subtype is the binge-eating or purging type, in which individuals vomit or use laxatives, enemas or diuretics either after eating an excessive amount of food, or simply after eating a small amount of food (American Psychiatric Association, 1994) to avoid gaining weight. However, to be diagnosed with anorexia nervosa, individuals' symptoms must meet the necessary criteria:
A. Refusal to maintain body weight at or above a minimally normal weight for age and height (e.g., weight loss leading to maintenance of body weight less than 85% of that expected; or failure to make expected weight gain during period of growth, leading to body weight less than 85% of that expected).

B. Intense fear of gaining weight or becoming fat, even though underweight.

C. Disturbance in the way in which one’s body weight or shape is experienced, undue influence of body weight or shape on self-evaluation, or denial of the seriousness of the current low body weight.

D. In postmenarcheal females, amenorrhea, i.e., the absence of at least three consecutive menstrual cycles (A woman is considered to have amenorrhea if her periods occur only following hormone, e.g., oestrogen, administration). (American Psychiatric Association, 1994, pp. 544-545).

As can be seen by the loss of menstrual cycles for women, anorexia nervosa can have consequences for one’s physical health. In addition, individuals may develop lanugo hair on various parts of their body and they may become dehydrated due to restricting fluids, excessive vomiting or the use of diuretics and laxatives (Garfinkel & Garner, 1982). More seriously, they may develop cardiovascular problems, impaired renal function and early osteoporosis (American Psychiatric Association, 1994).

However, sometimes individuals will only exhibit some of the above-mentioned physical and psychological symptoms of anorexia nervosa, often to a smaller degree. The eating behaviours of individuals who do not fit the criteria for anorexia nervosa may be disordered behaviours.

*Disordered Eating: Not quite an Eating Disorder yet*

Eating behaviours are defined as the “total caloric intake per unit time, frequency of ingestion, caloric density of food ingested, volume of food ingested, circumstances surrounding initiation of eating environmental determinants of ingestion of food or context in which food is served, ingested and or rejected” (Kaufman, 1980, pp. 37-38). The rejection of food in some manner is usually an indication of disordered eating attitudes or behaviours. Indeed, the American Psychiatric Association (1994) identifies that the beginning of anorexia nervosa is often an
individual's reduction in total food intake with the aim of weight loss. In other words, many individuals diet due to weight consciousness (Casper & Offer, 1990). What begins as an exclusion of foods containing many calories may lead to a diet with only a few foods allowed (American Psychiatric Association, 1994).

Eating attitudes and behaviours that are pathological or disordered are not necessarily indicative of an eating disorder per se, such as anorexia nervosa. However, those who meet some but not all criteria for this eating disorder are described as “sub threshold for the disorder” (American Psychiatric Association, 1994, p. 543), or susceptible for the development of anorexia nervosa. The identification of abnormal eating behaviours may therefore be useful to detect at-risk individuals in a population, that is, those that are prone to the development of anorexia nervosa.

Garfinkel and Garner (1982) argue that the majority of young women in contemporary, Western society have a drive for thinness and in relation, a fear of being overweight. It would therefore seem that most women at least of a certain age, are at risk of developing anorexia nervosa. However, abnormal dietary habits must be included in their behaviours to make them at risk for the development of this disorder. With this in mind, the prevalence of pathological eating attitudes and behaviours that are in line with anorexia nervosa will be discussed.

1.2 Prevalence, Sex and Onset of Disordered Eating
The American Psychiatric Association (1994) report that 0.5 to 1% of females in late adolescence to early adulthood exhibit all four criteria for anorexia nervosa. It is therefore expected that the percentage of those with abnormal eating behaviours that do not meet all of the criteria for anorexia nervosa would be higher. In the United States of America, Casper and Offer (1990) found that two thirds of female adolescents in their study were preoccupied both with their weight and with dieting in that they experienced body dissatisfaction and were afraid to gain weight. However, only 14% of the male adolescents feared weight gain. Fellow Americans Harrison and Cantor (1997, p. 41) reported that “between 4% and 22% of college-age females report engaging in anorexic or bulimic behavior.” These findings suggest that females and males may not be equally at risk of the development of anorexic-like behaviours.
Much of the literature on eating disorders shows that females are more at risk of developing anorexia nervosa. According to the American Psychiatric Association (1994), 90% of cases of anorexia nervosa occur amongst females. Gordon (1990) also identifies the female to male ratio of prevalence for eating disorders as approximately nine to one.

Previous South African studies also provide evidence for the higher prevalence of disordered eating among females. Regarding anorexia nervosa specifically, a previous study among university students indicated that those who had a “propensity for anorexic-like behaviour” (Le Grange, Telch & Tibbs, 1998, p. 251) and therefore scored highly on the Eating Attitudes Test were predominantly women. In fact, 92% of high scorers were female (Le Grange et al., 1998). A recent study has also indicated a similar pattern in adolescents, with 81% of those at high risk for the development of anorexia nervosa being female, a significantly larger number than males at risk (19%) (Russell, 2003). However, this should not lead to the assumption that males do not suffer from disordered eating attitudes and behaviours, but rather to the acknowledgement that females are more at risk.

While America is a well-established benchmark of Westernised living, the American Psychiatric Association also identifies (1994) South Africa as a country where anorexia nervosa and disordered eating with symptoms of anorexia nervosa are common. A recent South African study conducted with students from various tertiary institutions in Cape Town and Durban found that an alarming rate of anorexic-like behaviour was evident, as 9% of these students admitted to engaging in anorexic-like behaviours (Le Grange et al., 1998).

Undergraduate college or university students are especially susceptible to the development of pathological eating patterns (Harrison & Cantor, 1997). The majority of these students can be classified into the age group of early adults, and age is one of the factors that may predispose an individual to anorexia nervosa (Garfinkel & Garner, 1982). The American Psychiatric Association (1994) affiliates the onset of disordered eating with a life event that consists of a great deal of change and is therefore stressful. Starting college or university may be identified as such an event.
Becker, Burwell, Gilman, Herzog and Hamburg (2002) suggest that a reason for the increasing number of incidents of eating disorders in industrialised in comparison to developing societies is the cultural mechanisms at play. The media are identified as prominent components of Western culture.

1.3 Depiction of Body Ideals in the Media

The issue at hand is the contribution of the media to the increasing prevalence of abnormal eating attitudes and behaviours. For women in particular, “the tall, slender and yet curvaceous body type...sets an impossible standard for many women” (David & Johnson, 1998, p. 38). The media are thus recognised as vehicles that promote thinness or slenderness as an ideal for women. Additionally, media equate this body type with both beauty and success for women especially. A number of existing studies have found that the media have been influential in promoting the ideal, which has become increasingly slimmer over the past twenty years (Garner, Garfinkel, Schwartz & Thompson, 1980; Spillman & Everington, 1989). Morris, Cooper and Cooper (1989) found that from 1967 to 1987, the sample of female fashion models used, who have an idealised body type, changed to a large degree. Models became taller and less curvaceous. Both their bust and hip size decreased in comparison to the size of their waist, and the result is a “more tubular shape for models” (Morris et al., 1989, p. 596). Garner et al. (1980) and Wisemann, Gray, Mosimann and Ahrens (1992) found similar results with regards to Playboy centrefolds and Miss America contestants. Winners of the contest were found to be especially thin. A decline in weight led to the angular, lean body shape that is popular today. Furthermore, an increase in diet articles (Garner et al.) and exercise articles (Wisemann et al., 1992) are present in women’s magazines in comparison to the past.

Silverstein, Peterson and Perdue (1986, p. 902) went one step further and found “that a thin standard of bodily attractiveness is related to weight obsessions and eating disorders among women”. In the United States of America, this has led to 76% of females who diet acknowledging that their motivation for doing so is cosmetic rather than health concerns (Schwartz, Thompson & Johnson, 1982).
The body ideal that is portrayed for men is somewhat different to that of females. The ideal that males are expected to aspire to is to be in shape and fit. Men allegedly aspire to have a mesomorphic build (Casper & Offer, 1990; Spillman & Everington, 1989). This body type is perceived as “athletic,” “more masculine and more adventurous” (Casper & Offer, p. 384).

1.4 Theoretical Models
Various models have been proposed in an attempt to provide an explanation for the role of media consumption in the aetiology of disordered eating behaviours for men and women. The following models exist in the realm of psychology, media studies and feminism.

Psychological Explanations
The following psychological theories have been shown to contribute in some way to the explanation of the relationship between media exposure and anorexia nervosa: Social identity theory, social learning theory, social comparison theory and social discrepancy theory.

Social identity theory suggests that the self-image of an individual constitutes both a personal and social identity. The latter includes identifying with a social group of which it is socially acceptable for the individual to be part of (Waller & Shaw, 1994). It is possible that the mass media play a significant role here, since the possession of an ideal body type indicates that individuals will be socially accepted (Tiggemann & Pickering, 1996; Waller & Shaw).

The second psychological theory, namely social learning theory, or modelling in particular, proposes that individuals require models on whom they can base their behaviour (Bandura, 1971; 1977). These are often found in the mass media, which are seen as playing “an influential role in shaping behaviours and social attitudes” due to the “abundant and varied symbolic modelling provided by television, films and other visual films” (Bandura, 1977, p. 39). However, vicarious reinforcement in the form of positive reinforcement and punishment (Fouts, 2000) influences whether an individual will act on what they have observed to be acceptable and unacceptable through the mass media. Positive reinforcement for women is indicated to be the attainment of a thin, ideal body type, therefore meeting at least some of the standards for attractiveness and social acceptance and desirability (Harrison & Cantor, 1997; Kaufman, 1980;
Waller & Shaw, 1994). For men, however, positive reinforcement would probably be somewhat different, namely attaining an improved body shape that fits the ideal (Anderson & DiDomenico, 1992; Malkin, Warnian & Chrisler, 1999). Heavier women are more likely to receive punishment in the form of negative comments in the media (Fouts, 2000).

Social comparison theory also provides an explanation for the relationship between media exposure and disordered eating behaviours by proposing that media images are used as references against which individuals evaluate their own body image (Waller & Shaw, 1994). However, individuals who are exposed to these body types often do not match the ideal, which is known as contrast effects (Irving, 1990). Thus individuals are likely to view themselves and their own body negatively, assisting the development of a poor body image (Wegner, Hartmann & Geist, 2000). This is especially the case for women, as the ideal woman portrayed by the media is increasingly slim (Irving, 1990; Wegner et al., 2000). In advertisements especially, male and female models are often unrealistically attractive, and female models are often incredibly thin (Richins, 1991). According to Kilbourne (1994), only five percent of the thinnest women in a normal weight distribution can reach this ideal. These individuals may therefore go to great lengths in order to obtain the desired body type (Botta, 2000; Silverstein et al., 1986) in the form of exercise and dieting.

The final psychological theory is social discrepancy theory, an extension of social comparison theory. Harrison (2001) poses this theory as an explanation for the medias' role in eating disorders. Individuals hold beliefs about two selves: Firstly, the actual self that represents who they are at present; and secondly, the ought-self, who is what they believe they should be and look like. When there is a difference between these two selves, an ideal discrepancy occurs (Harrison, 2001). A discrepancy between the actual level and the ideal level of an attribute, that is, slenderness and being muscular, causes dissatisfaction with appearance (Richin, 1991). The perception of an ideal self regarding body shape can develop from exposure to specific media that promote thin ideals for women and muscular ideals for men. A large discrepancy between the two selves, as influenced by the media, may lead to symptoms of eating disorders, especially an increase in negative emotions, according to Harrison (2001).
Media Explanations
Two theories have been posed to explain the relationship between exposure to ideal media and anorexia symptomatology: Media cultivation theory and the uses and gratifications theory.

Media cultivation theory assumes that the media cultivate the audience’s perception of social reality in two ways: Firstly, the ideal body form is constantly valued and repeatedly shown to media users. Secondly, certain types of figures are constantly omitted from the media. This leads to viewers having similar conceptions of what human body shapes and weights should be (Smolak & Levine, 1996). The media therefore cultivate the audience’s perception of social reality through the selective presentations of characters (Tan, 1979) and beauty and appearance norms and values of being slim and fit (Kaufman, 1980; Tan, 1979).

In comparison to the above-mentioned theory, which places emphasis on the role of the media on the audience, the uses and gratifications model emphasises the role of individuals. It proposes that individuals have agency, that is, they choose what, when and for how long they are exposed to a particular source of the media (Smolak & Levine, 1996). Thus individuals play an important role in their selection of certain media, such as fashion magazines that represent the thin ideal (Thomsen, McCoy & Williams, 2001).

Feminist Positions
None of the above-mentioned theories apply specifically to one sex (Waller & Shaw, 1994). However, since women are viewed as the predominant sufferers of disordered eating, feminists have put forward explanations for the development of symptoms of anorexia to which the media can be applied. These are the principles of control and containment versus power and freedom and the mothers and daughters theory.

Lawrence’s (1984) control and containment versus power and freedom model suggests that symptoms of anorexia nervosa develop as a strategy of control. In today’s context, women desire to be more in control of their lives, but are still not in the position of optimum social power (Lawrence, 1984) to control their environment. Kilbourne (1994, p. 405) suggests that advertising in particular can reduce “the political to the personal”. Women are offered freedom
through dieting and exercising, and the power to control their weight. The changing roles in contemporary, Western society and the increasing opportunities that are becoming available to women are “trivialized, reduced to the private search for the slimmest body” (Kilbourne, 1994, p. 406). The media suggest to women that a slender body can empower them and put them in control, while curvaceous women are linked to the previous feminine stereotype, that is, the powerless woman (Kilbourne, 1994).

In the mothers and daughters theory, Chernin (1986) believes that eating disorders should also be viewed as a hidden struggle for the development of the self. This is due to the change in tradition or cultural significance that is attached to the female body. Due to the growing number of opportunities for women, conflicts between mother and daughter are increasingly common (Chernin, 1986). This is partly due to the separation of the mother's roles and values, and to daughters' achievements often superseding those of their mothers. However, the young woman is often aware of the positive roles that her mother has played in her life. Not consuming a sufficient amount of food is therefore seen as resolving guilt while simultaneously shunning the traditional female body (Chernin, 1986). Advertisements further add to the conflict experienced. On one hand, women are still shown to be the main caretakers and nurturers like their mothers. On the other hand, advertisements suggest that they should diet to become slender (Kilbourne, 1994), the epitome of beautiful women in the Western world.

1.5 Review of Empirical Studies of the Media
Like the feminist perspectives of the relationship between media and disordered eating, the majority of empirical studies only focus on the relationship between women's use of the media and anorexic symptoms, because the thin ideal posed by the media is directed towards women. Most previous studies only take one key concept of the media into account. The literature on media exposure often differentiates between viewing and reading sources.

*Written Media Sources*

it has been found that the thin models and celebrities that are prevalent in numerous women's magazines are related to the eating attitudes, behaviours and moods of the women who are exposed to them.
Pinhas, Toner, Ali, Garfinkei and Stuckless (1999) found that exposure to slides of models from popular women's magazines had an immediate effect on the mood states of female college students. This was especially true for those who had higher scores on an eating disorder measure. They felt angry, hostile, and more depressed after viewing the slides. The findings suggested that: "Women, particularly those who are dissatisfied with their bodies or have other psychological features of eating disorders, are more vulnerable to these images than others" (Pinhas et al., 1992, p. 225). Hawkins (2000) also concluded that after college women were exposed to photographs of thin-ideal images, their mood became more negative. In particular, those with disordered eating became significantly more depressed.

Hamilton and Waller (1993) found that photographs of women in fashion magazines affected women who were diagnosed with anorexia nervosa and a comparison group without an eating disorder differently. When exposed to these slim women, anorexic participants overestimated their own body size by 25%, while those in the comparison group exhibited no overestimation (Hamilton & Waller). King, Touyz and Charles (2000) also found that college students overestimated body size. However, both those with concerns and those who lacked concerns about their own bodies overestimated the size of heavy celebrities. Only the high body shape concern group exhibited "inaccuracy due to underestimation for the thin celebrities" (King et al., 2000, p. 345).

Evidence also indicates that exposure to photographs of women who represent the thin ideal has an effect on the reader's self-consciousness, and leads to a decrease in self-esteem (David & Johnson, 1998). Furthermore, in a recent study, college students who were exposed to photographs of slender models not only reported greater self-consciousness in general, but importantly, more body self-consciousness. This indicates that they evaluated their own bodies more negatively (Wegner et al., 2000). Similarly, the women in Hawkin's (2000) and Posavac's (1998) studies, especially those with disordered eating patterns, reported a significant level of body dissatisfaction after media exposure. In a study with adolescent girls, Field et al. (1999) found that 69% reported that photographs in fashion magazines influenced their perception of the ideal body type. Fifty-nine percent reported an increase in body dissatisfaction, while 47% experienced a desire to lose weight due to exposure to these pictures (Field et al.). Exposure to
this form of media was therefore positively correlated with more weight concern. Posavac, Posavac and Weigel (2001) found that those female college students in their study that were exposed to slides of fashion magazines were more concerned with their weight and desired to be slimmer. In comparison, the control group who were “exposed to neutral slides” (Posavac et al., 2001, p. 333) did not experience the above-mentioned concerns.

Magazines promote the ideal body type for readers, but also increasingly offer methods to obtain a slim body shape. Magazine covers encourage weight loss by exercise, dieting and even cosmetic surgery, according to Malkin et al. (1999). Furthermore, 94% of the covers of women’s magazines exhibited a thin female model or celebrity in conjunction with messages regarding weight loss and body shape, especially traditional magazine covers and fashion magazine covers. Snow and Harris (1986) found similar patterns on women’s and teenage girls’ magazine covers.

Advertisements inside magazines often even encourage abnormal eating attitudes and behaviours to lose weight. Kilbourne (1994, p. 400) gives an advertisement for a bathing suit as an example, with the accompanying slogan as follows: “Starving and suffering got you into this shape. But it takes more than that to give you the figure you’ve strived for”. Indeed, Snow and Harris’ (1986) study provided evidence for the increase in advertisements that use words to promote weight control, thinness and therefore encourage weight loss for all the women’s and teen magazines that were analysed.

However, written media sources also include books. Many diet books encourage weight loss for the reader, but Wooley and Wooley (1982) argue that certain books aim to endorse more than weight loss. They found that the infamous Beverly Hills Diet offered a method of direct training in anorexic behaviours and attitudes, with the primary aim for readers advocated as “being and feeling thin” (Wooley & Wooley, p. 60). Alarmingly, an eating disorder in the form of anorexia nervosa is proposed as a cure for being overweight in this well-read diet book.

**Television**

Television advertisements and programmes often expose female viewers to a certain body type,
namely the Western cultural ideal of being slim equated with being beautiful, successful and happy. In an early study, Kaufman (1980) found that the body types represented on television programmes, food commercials and non-food commercials were thin. Eighty-eight percent "were thin or average in body type" (Kaufman, 1980, p. 44). In a more recent study, Fouts (2000) found a similar percentage, 76%, of the female characters in the eighteen situation comedies that he included were below average weight. Similarly to magazines, television also offers messages on how to achieve a similar appearance to the thin television characters, albeit non-effective ones. Kaufman (1980) identifies a television diet found in a number of programmes and advertisements that are inconsistent with weight loss, rather being associated with problems in weight control and nutrition in everyday life. Television therefore "offers a paradoxical message about ideal appearances and actual eating behaviour" (Kaufman, 1980, p. 44).

A number of investigations have also identified that being thin is the ideal appearance as represented on television. This in turn affects how viewers rate the importance of being slim and beautiful. Tan (1979) found that following exposure to beauty commercials, adolescent girls rated being beautiful as more important than the subjects that were exposed to advertisements of neutral products. However, beauty characteristics were not rated as crucial components by either the experimental and control group for the roles "success in job or career" and "success as wife" (Tan, 1979, p. 288) in this early study, but this may have changed due to the ever changing Western social context. In a more recent, and possibly more relevant study conducted by Harrison (2000b), female children in grade school rated being thin as an ideal trait.

According to Heinberg and Thompson (1995, p. 325), female university students that watched "appearance-related commercials", that is, those that demonstrated thin, attractive women, became depressed in comparison to those who watched neutral commercials. This was especially the case for those participants who already had disturbances with their own body image. Not all findings showed this relationship. There is also evidence that suggests that exposure to ideal body-type television programmes and advertisements leads to lower scores of depression (Myers & Biocca, 1992). Coolican (2000), however, found no difference between those who viewed Baywatch and those who viewed X-Files in her study. No difference between
self-esteem or body dissatisfaction, possible predictors of eating disorders, was evident for the group that was exposed to ideal television programmes.

Further findings also provide evidence that television does not play a role in the development of eating disordered attitudes and behaviours. Regarding body size estimation, according to Myers and Biocca (1992), exposure to programmes and commercials that depicted ideal body types in comparison to neutral images led to less body image or body size overestimation. It therefore appears that in this study, “body image advertising made the young women feel thinner that they normally do” (Myers & Biocca, p. 126). Harrison (2000b, p. 632) found that grade school females do overestimate their own body size, but this only occurs if they are “interpersonally attracted to thin female characters”.

According to Tiggemann and Pickering (1996), the content of the television advertisements or programmes that one is exposed to is crucial. In their study, adolescent girls were found to perceive their own bodies as overweight after viewing certain television programmes. Females were dissatisfied with their weight after watching soap dramas, serials and movies. Watching music videos that “depict women as thin and beautiful, scantily clad and involved in implicit sexual and subservient behaviour” (Tiggemann & Pickering, p. 200) predicted the women’s drive for thinness. It also appears that exposure to certain television programmes and characters may have an inhibitory effect on the development of eating disorders. Watching programmes with sports themes negatively predicted body dissatisfaction for participants (Tiggemann & Pickering).

In a recent study conducted by Heinberg and Thompson (1995), those women who scored highly on body image disturbance became even more dissatisfied with their appearance after viewing commercials with thin and attractive women. According to Botta (2000), after viewing television with thin characters, female participants idealised and compared themselves with these images. This led to a higher drive for thinness and conversely, a higher level of body dissatisfaction in Botta’s (2000) study. Only the idealisation of television images was found to be a negative predictor of personal ideal size, meaning that the more television characters that the woman idealised, the thinner their personal ideal size was (Botta, 2000).
A reason for these contradictory findings is possibly the studies’ differences in methods, from factorial design (Myers & Biocca, 1992) to multivariate analysis of variance (Heinberg & Thompson, 1995). Coolican’s (2000) study used an experimental design. This sometimes complicates a direct comparison of the studies’ findings.

Even though a conclusion cannot be made from the results of the above-mentioned studies, at least two studies provide evidence for a direct relationship between television exposure and eating disorders. Harrison (2000b, p. 628) found that television viewing was a significant predictor of eating disorder symptomatology with regards to “restrained eating associated with a strong desire to lose weight” for school children. A similar finding was established with a sample of adolescent girls in Fiji with an increase of scores of anorexic-like behaviours after the introduction of television. Those who were exposed to television in their home were three times as likely to be at high-risk for anorexia nervosa (Becker et al., 2002).

1.6 Sex and the Media
It is generally accepted that modern society places more pressure on women to be slim in comparison to men. A number of studies on television and disordered eating suggest that the opinion of others may play an indirect role in the development of symptoms of eating disorders. The young boys in Harrison’s study (2000b) were more likely to negatively stereotype fat characters that they viewed on television. In a recent study (Fouts, 2000), 14% of central female characters received negative comments from males regarding their weight or bodies, and the number of critical remarks increased with the body weight of characters. These comments included sarcasm, mockery, ridicule and helpful suggestions to lose weight or how to dress to disguise being overweight. Following exposure to commercials that depicted slender models, the awareness of the opinion of males in general or a male partner proved to be a significant predictor of various disturbed attitudes about the body and eating behaviours (Crowley, 1999).

This type of behaviour also extends to exposure to magazines. After viewing slides of slender women, both men and women identified attractiveness as being important. Men, however, viewed slenderness as a crucial quality for their partner to possess, even refusing to date women who were not perceived as thin enough (Reed, 1999). However, most of the studies that were
mentioned earlier have only utilised female participants. Only a small percentage of empirical studies have attempted to differentiate between men and women with regards to media exposure.

For women, the ideal is to be slim and lose weight or diet if necessary to obtain this body type (Anderson & DiDomenico, 1992; Garner et al., 1980; King et al., 2000; Morris et al., 1989; Wisemann et al., 1992) while for men the ideal is being in shape and toned (Anderson & DiDomenico, Malkin et al., 1999). Mass media re-iterate these ideals by placing more body-orientated articles in general in women’s magazines. Malkin et al. compared covers of popular men’s and women’s magazines. While 78% of the covers of women’s magazines contained a message about bodily appearance, no such messages were evident on the cover of men’s magazines. Furthermore, while 94% of the female magazine covers depicted a slender female model or celebrity, only 3% of men’s magazines depicted a male on the cover. However, men’s bodybuilding magazines or health magazines were excluded from this study (Malkin et al.).

Previous literature indicated that women’s magazines were 10.5 times more likely to include advertisements as well as articles that promoted weight loss (Anderson & DiDomenico, 1992), while men’s magazines were more likely to include articles and advertisements that focused on building their bodies up, indicating a definite sex differentiation (Anderson & DiDomenico). There was not a significant difference between the number of shape advertisements and articles in men and women’s magazines.

It is possible that the number of male bodies in advertisements is on the increase, especially regarding the depiction of undressed men (Pope, Olivardia, Borowiecki & Cohane, 2001). This is indicative that the physical appearance of men is becoming increasingly important, and that they are under pressure to look more muscular (Pope et al., 2001). However, it still appears that the media are more influential for female users. Women are often found to have higher levels of measures of ideal media influence (Cusumano & Thompson, 2000). Furthermore, following exposure to thin-ideal and various other media such as sports or in-shape type media in previous studies, it was predominantly the female participants who showed symptoms of disordered eating behaviours (Cusumano & Thompson; Harrison, 2000a; Reed, 1999). This study therefore aims
to investigate sex differences with regards to the predominance of disordered eating behaviours in university students, based on the findings of the somewhat sparse research on the topic.

1.7 Ethnic Identity and the Media
Another important demographic characteristic to be considered in this study, especially in a multi-racial country such as South Africa is ethnic identity. Previous studies indicate that black individuals\(^1\) respond to ideal body types in a much more similar way to white users than in previous years. A recent study indicated that black and white girls watch similar amounts of television, and that this is related to eating-disordered behaviours. Both ethnic groups desired to be thin, and idealised female characters prior to comparing their own bodies to these female ideals (Botta, 2000).

The connection between media exposure and disordered eating behaviours in non-Western societies has only recently been explored. Toro, Cervera and Perez (1988) found that in ten frequently read Spanish women’s magazines, 22.5% of advertisements encourage weight loss for aesthetic reasons, that is, to appear thin, either directly or indirectly, but Dulce, Hunter and Lozzi (1999) found no apparent relationship between exposure to television and magazines and symptoms of anorexia among Cuban Americans of university age.

Evidence points to a relationship between media consumption and disordered eating attitudes and behaviours in populations that are becoming increasingly Westernised. It is proposed that individuals that are exposed to and accepting of these Western ideals are more likely to have symptoms of eating disorders. However, Lake, Staiger and Glowinski (2000) found that in a study with students in Australian universities that were born in Hong Kong and Australia, traditional Hong Kong-born and Australian subjects were more susceptible to “Western attitudes towards eating and body image” (Lake et al., 2000, p. 87) than their modernised counterparts. Australians were, however, more dissatisfied with their bodies in general.

A more recent study comparing Australian and Estonian university students showed different results (Tiggemann & Ruutel, 2002). These two countries were compared due to their different histories of media exposure. Estonia was only introduced to “commercialised Western, largely

\(^1\)Black refers to black African, Indian and Coloured South Africans.
American-based media depicting thin-idealised bodies” (Tiggemann & Ruutel, p. 736) following its independence in 1992. However, the results concluded that there was no significant difference regarding body concern, as women from both countries had a high drive for thinness and a high concern for dieting. Television and fashion magazine consumption was also higher for the Estonians, indicating their interest in Western media and the body ideals that are depicted. Similarly, Becker et al. (2002) found that following three years of exposure to television, 29.2% of the female adolescent participants were highly at risk for developing anorexia nervosa. Those who lived in Fijian households with television sets were three times more likely to be at risk of developing anorexia nervosa symptoms. Dieting also became more popular, as 69% reported engaging in this behaviour, and 74% of the sample felt “too big or fat at least some of the time” (Becker et al., p. 511). Important indicators of disordered eating were therefore significantly more prevalent following the introduction of television in Fiji.

There is a lack of academic literature that includes how exposure to the mass media is increasing for individuals who previously had little access to media that promote Western ideals. While empirical research does exist with South African students from different ethnic backgrounds, these aimed to assess a possible correlation between the modernisation, that is to “espouse Western sociocultural ideals” (Wassenaar, le Grange, Winship & Lachenicht, 2000, p. 230) of black students and higher levels of disordered eating. While the previous literature does indicate that the risk of eating disorders is increasing (le Grange et al., 1998; Wassenaar et al., 2000), these studies did not take the media specifically into consideration.

*Media Exposure in South Africa*

It is therefore necessary to include the patterns of media exposure of South Africans, who seem to be regularly exposed to ideal-type media, as much past research shows this to be related to a higher number of eating disorders in a population. Films and television are quite popular among South Africans. According to the South African Advertising Research Foundation (2003), approximately 17% of the population have attended at least one film in the previous 12 months, with 1.5% of the population viewing one film each week.
Television viewing patterns also indicate that films and series with tall and slim female celebrities are among the most popular choices of viewing. Soap opera dramas that are predominantly produced internationally, are equally popular, and contain mainly white actors and actresses. An interesting finding is an increase in the viewership of local dramas such as *Isidingo* and *Generations* (South African Advertising Research Foundation, 2003), which are programmes with both white and black actors and actresses. Sport is also popular, indicating that men are also exposed to this form of entertainment. In particular, wrestling programmes have featured as extremely popular (South African Advertising Research Foundation, 2003).

Finally, popular programmes for both men and women include music programmes that promote glamorous individuals such as music specials on various celebrities, such as the slender singer, Celine Dion. Programmes that promote a more glamorous change for ordinary individuals such as *Idols* and *Pop Stars* are becoming increasingly popular (South African Advertising Research Foundation, 2002). However, the South African population also accesses written sources of the media that portray the ideal.

Readership of the majority of magazines (South African Advertising Research Foundation, 2003) has increased steadily in the past three years alone. Magazines promoting entertainment, celebrities, fashion models and the South African public in general such as *YOU, Huisgenoot* and *Drum*, reach thousands of readers each week. The *Edgars Club Magazine* is also extremely popular, with approximately two and a half thousand subscribers. While this magazine covers a variety of topics, advertising the fashion at the store is its main priority. Readers are therefore exposed to models regularly. The number of readers of magazines that focus more explicitly on fashion, models and celebrities and appearance in general, such as *Elle, Femina* and *Marie Claire* are also on the increase. *Cosmopolitan* has taken over *Fair Lady’s* role as the most popular women’s fashion magazine. Its dedicated readership has increased per month from 631 per 1000 in 1999 to 874 per 1000 in 2003 (South African Advertising Research Foundation, 2003). While sports magazines such as *Runners World* and *Golf Digest* are not generally well read, the most popular one is *Sports Illustrated*, which caters for a primarily male market. Interestingly, one of the most popular newspapers is *Soccer Laduma*, which features soccer stars,
whose readership has over doubled since 1999 (South African Advertising Research Foundation, 2003).

However, if one considers the men's magazines that promote health, fitness and lifestyle such as FHM and Men's Health, readership is definitely steadily increasing, especially since these magazines are recent introductions to the South African market. Men's Health in particular, gained almost 100 per 1000 dedicated readers since 2002 (South African Advertising Research Foundation, 2003).

1.8 Contributions and Limitations of Studies

Studies Including more than One Kind of Medium
The above-mentioned empirical studies only consider one medium source. The consequence is that the results of these studies cannot be generalised to other sources of media exposure. With reference to previous literature, neither television nor magazines seem to have a stronger relationship with eating disorders than the other. For this reason, it makes sense that media sources should be combined in order to assess their relationship with eating attitudes. There is some empirical evidence for the relationship between the exposure to a combination of different mediums and disordered eating behavioural patterns and attitudes.

Stice, Schupak-Neuberg, Shaw and Stein (1994) examined the relationship between media exposure and eating pathology through the use of structural equation modelling. Media exposure consisted of "the number of health and fitness, beauty and fashion, and entertainment, arts and gossip magazines" and the "number of hours of comedy, drama and game shows" (Stice et al., 1994, p. 837) that female university students read and watched. Results indicated that the media had an effect on symptoms of disordered eating, and that this was mediated through sex-role endorsement, internalisation of ideal body type and body dissatisfaction. Cusumano and Thompson (2000) devised a similar scale that significantly predicted body dissatisfaction and the internalisation of media influences among pre-adolescent girls. A leading researcher in the utilisation of television and magazines to study the role of media consumption in the development of pathological eating attitudes and behaviour is Kirsten Harrison. Consumption of media that depicted and promoted thinness led to symptoms of disordered eating, an increased
drive for thinness, body dissatisfaction and feelings of ineffectiveness for female undergraduate students (Harrison & Cantor, 1997). In the same study, for men, magazine readership predicted the endorsement of slenderness and dieting for themselves. However, television viewing was not a significant predictor. A more recent study by Harrison (2000a) indicated that for females, exposure to television with overweight characters, magazines that depicted thin as ideal and sports magazines predicted eating disorder symptomatology. For males, only the younger adolescents’ exposure to overweight television characters predicted dissatisfaction with their own bodies. The present study therefore aims to adopt this type of media composite in order to evaluate the relationship between all possible mediums and disordered eating behaviours.

Lack of Academic Literature on the Internet
A cause for concern is the neglect of an increasingly influential media source in academic literature on eating disorders: The Internet. While academic literature has considered the possibility of the Internet as a treatment plan, what has not been adequately considered is this medium’s potential for the promotion of disturbed and disordered eating behaviours. The world has become a global village, with an increasing amount of its inhabitants being influenced by the medias’ ideals of appearance (Underwood, 2000). The Internet can be used in “many different ways and for many different purposes, including entertainment, education, information retrieval and communication” (Kraut et al., 1998, p. 1017). The utilisation of the Internet to privatise entertainment and to obtain previously inaccessible information makes it similar to television in that it may have major consequences for society, according to Kraut et al.

There is academic evidence that the Internet is an “acceptable and feasible format for treatment delivery” (Zabinski et al., 2001a, p. 129). The Internet has been proposed as a mechanism for the reduction of risk factors of eating disorders for female college students. Previous studies administered computerised psycho-educational programmes to students such as synchronous Internet relay chat, or IRC (Zabinski et al., 2001a), and the Student Bodies Internet programme (Celio et al., 2000; Zabinski, et al., 2001b). The programmes led to a decrease in body dissatisfaction, preoccupation with shape and weight and disordered eating behaviours (Celio et al.; Zabinski et al., 2001a, 2001b).
While the above-mentioned Internet programmes are clearly beneficial for participants, potential risks are also evident in patient-to-patient e-mail support groups. Sansone (2001) found that one female anorexic patient in his treatment plan who simultaneously suffered from obsessive compulsive disorder began to compare her height and weight with that of her online partners. Thus it was concluded that comparison with others is "an inherent risk with peer contact of any sort" (Sansone, 2001, p. 375).

Dunn (2003) agrees that specific websites can act as peer groups, even though the physical presence of members is absent. She argues that pro-anorexia, or as they are commonly becoming known as, "pro-ana" websites, provide a space where "through dialogue, competitiveness is present, advice is offered, ideals of femininity are established, colloquial language is used and conflict sometimes exists" (Dunn, 2003, para. 2).

Indeed, pro-anorexia websites provide the often-isolated anorexic with a community, or power base of support for users (Hill, 2001), and this "support" is less intimidating than the support offered in treatment (Dias, 2003). They are often an opportunity to anorexics on the Internet for instant friendship (Rothman-Morris, 2002). In forums such as the voy forum, a free messageboard service, girls chat and support each other. They offer tips on how to fast, eat less and prevent binges. Many refer to this as "being a buddy" to other users with anorexia nervosa (http://www.voy.com). Further evidence of these pro-anorexia websites as a community is the specialised terminology used. They have names such as princessana and ana-sane asylum.

Dunn (2003) also argues that support of an anorexic identity, as provided by these websites is in sharp contrast with the support of loved one's. These sites offer "how to" sections: Advice and tips to users on dieting, food avoidance or fasting (Dias, 2003) as well as which food increases satiety but is very low in kilojoules. Fat-free jelly, celery with mustard and Special K are promoted by one website. Low kilojoule drinks are another suggestion, such as Coca-Cola light and fat free coffee (http://www.princessana.4t.com/custom.html). Users can also calculate their body fat and body mass index (http://www.plagueangel.net/grotto).
In a similar fashion to magazines and television, these websites often depict photographs of their ideals (Hellmich, 2001), (http://www.princessana.4t.com/custom.html). Even more alarming are the pictures of women who have suffered or even died from anorexia nervosa. These triggers are aimed at providing inspiration for viewers. While one website specifies that it is pro-choice and not pro-ana, if one chooses the anorexia section in comparison to the recovery section, you are introduced to a set of photographs that are aptly named “bone pictures”. The mainly unknown women that are depicted are extremely emaciated, but celebrities’ battles with the disease are included as further inspiration (http://www.realm2-blessedbe.com/starvingforperfection). Dias (2003) perceives that these pictures are included to inspire loyalty to anorexia from the women and to distract them from their hunger.

Finally, Rothman-Morris (2002, para. 8) identifies a religious component to pro-ana websites and says: “as with any religion there are commandments”. One section on a website indeed is called “know thine enemy” (http://www.plagueangel.net/grotto) which is clearly food. Ana is also almost like a god to many members of this online community, as they worship her.

Dunn (2003, par. 5) concludes that even in cyberspace where “people can escape their own body, even pretend to have a perfect body, in pro-ana sites, this offer is not taken up. In the absence of the body, the body becomes paramount”. Thus the present study attempts to take a step towards the need to investigate the Internet’s role in conjunction with other media sources in promoting disordered eating behaviours. In this sense it constitutes an exploratory study into this specific area of research.

The majority of the empirical studies that attempt to establish a relationship between media and disordered eating behaviours make use of quantitative methods. Most of these studies are correlational. While it is tempting to come to the conclusion that exposure to “a large dose of thin idealised images leads to dissatisfaction with one’s body, a correlation cannot determine causality” (Tiggemann & Pickering, 1996, p. 202). This is somewhat expected, given that disordered eating is thought to originate from multiple sources such as “familial, psychological, biological and sociocultural factors” (Harrison & Cantor, 1997, p. 64). The major problem with correlational studies is that how exposure to the media influences disordered eating attitudes and
behaviours is not covered. Even experimental research cannot conclusively identify the specific reasons why exposure to media causes dissatisfaction with subjects' bodies (Posavac, 1998). Qualitative research can best answer the above-mentioned questions.

1.9 Closing the Gap: Qualitative Studies

Posavac (1998) suggests that media exposure may not affect all women equally. This study found that those who were satisfied with their own body shape would not find media images as threatening. It is therefore important to examine in some detail how those that are dissatisfied with their bodies are more likely to develop disordered eating behaviours after exposure to 'thin-ideal' body images (Posovac, 1998). A gap in the literature is evident, as only two studies have addressed how this happens in detail. Becker et al. (2002) conducted open-ended, semi-structured interviews to find themes that explained television's influence on eating attitudes and behaviours. This study showed that participants admired the appearance of characters, and the majority of interviewees identified television as a major influence for body shape and weight. Participants expressed a desire to lose weight to resemble Western television characters, while some subjects associated being slim with success in jobs and work at home. Television was also identified as having a major impact on traditional values or behaviours.

A second study also made use of semi-structured, in-depth interviews to examine anorexic outpatients' experience of media sources and how the use of these sources has influenced their eating disordered behaviours (Thomsen et al., 2001), namely by internalisation of the thin ideal. The findings indicated that for many anorexic women, exposure to the media influenced their eating disorder. They seemed to be addicted to reading certain magazines, namely fashion and beauty magazines.

These women seemed to make use of comparison rituals against media figures that were explained by two motives: self-evaluation and self-improvement. Self-evaluation was described as their comparison of their physical attractiveness to those in fashion magazines, often familiarising themselves with the models' details. Self-improvement was described as attempts to learn how to duplicate the appearance of these individuals. Cognitive distortions were also evident as a method for these women to develop their disordered eating thoughts and behaviours,
as anorexic outpatients utilised the messages in magazines that aimed to warn readers about the dangers of anorexia rather as tools to engage in disordered eating behaviours. Closely related, the media played a cognitive dissonance reducing function, as the women were committed to a behaviour that has negative consequences by distorting internal and external reality (Thomsen et al., 2001).

1.10 The Present Study

Part One: The Survey

The research question is as follows: Is there a relationship between media exposure or participants' use of media sources and disordered eating behaviours in general? As discussed above, the hypothesis is that if such a relationship does exist, it will be positive, namely that one's chance of developing disordered eating behaviours and attitudes increases with one's consumption of media sources. In addition, the Internet will be included as a component of media exposure in this study. Although there is not much available academic literature on this medium, it is expected that its inclusion would not change the expected hypothesis about the relationship between the media and eating behaviours.

While media exposure is high, and the Western cultural ideal that South Africans are exposed to is slimness for women and muscularity for men, this is not to assume that South Africans of different cultures may accept these ideals. It is therefore an important component of this research to consider the different ethnic groups within the context of South Africa, as this may affect the outcome. Sex is also included as an important variable in this study, and due to previous studies, the hypothesis is that women are more exposed to thin-ideal media, and will therefore be more prone to developing eating disorders. Men, however, are also put under societal pressure to be fit and look good and may therefore not be as prone to eating disorders but rather to keeping in shape even if extreme measures are necessary.

In order to test the relationship between media exposure and eating behaviours simultaneously with sex and ethnic identity, a survey via a questionnaire was employed, leading to quantitative analysis in the form of multiple regression. The survey consisted of a modified demographic
measure (See Appendix A) that was developed in South Africa, as well as measures that determine disordered eating.

Part Two: The Interview

The second research question in this study was how exposure to the mass media influences the eating attitudes and behaviours of certain South Africans. The researcher wanted to assess the feelings, emotions and cognitions that these individuals have about the media. I also wanted to give participants a chance to discuss the role of the Internet as well, and how it has or has not contributed to their sometimes anorexic-like behaviours and attitudes. The study also aimed to gain information on how sex relations and sex stereotypes affected their cognitions and motivations to use the media in a certain way.

The purpose of this study was also to provide a descriptive explanation of “media use grounded in the reality and experiences” of students that have anorexic tendencies, similarly to Thomsen et al. (2001, p. 52). This study will investigate the nature of the role that media exposure and use play in the development of eating disordered behaviours in the context of South Africa. The reason for this is that the content of South African media may or may not differ from an international context. The reason for the use of the principles of grounded theory was to build an explanatory model of how the students who are at risk for anorexia nervosa use the media and what effect they have on their eating attitudes and behaviours, and to follow Thomsen et al.’s lead. This study adheres to the principles of grounded theory more closely than Thomsen et al., with the main deviation being in the development of the phenomenon of the axial coding step (see chapter 4), as the phenomenon was already obtained from the quantitative data. Thus various theoretical models can be considered that may assist in the explanation for the role of the media in disordered eating behaviours more coherently. However, no hypotheses will be made with regards to an explanation. A theory will instead be developed out of the data that is extracted in the study.

The simplest method to establish if a relationship between media consumption and disordered eating does exist is to conduct a quantitative study. However, a quantitative study cannot explain
the mechanisms of this relationship and give rich, in-detailed information. Therefore method triangulation is proposed for this study.

Methodological Triangulation
Multiple methods were used to study the relationship between media exposure and disordered eating behaviours in this study. Denzin (1978, p. 362) advocates the use of “between-method triangulation”, as using at least two data collection strategies to conduct research. The major reason for utilising this type of triangulation is that different methods have both strengths and weaknesses, and the “flaws of one method are often the strengths of the other” (Denzin, 1978, p. 302).

In the present study, two types of research design, quantitative and qualitative research strategies, therefore constitute the study. The reasons for the inclusion of both of these strategies are two-fold: Firstly, quantitative research in the form of a correlational questionnaire has its advantages as the existence of a relationship between media exposure and disordered eating behaviours can be investigated. However, the weakness of questionnaires is that they cannot expand on the relationship between media exposure and anorexic-type behaviour and attitudes. Qualitative research can therefore play a vital role in explaining the mechanisms underlying individuals’ use of the media to further their disordered eating patterns.
2. METHOD

2.1 Part One: Quantitative Research

The initial research question asks if there is a relationship between media exposure and disordered eating with regards to symptoms of anorexia nervosa. Questionnaires are well suited to answer this research question posed by the first part of the study, and are especially relevant when studying attitudes (Robson, 1993). Since most individuals know how to complete questionnaires (Breakwell, Hammond, & Fifé-Shaw, 1995), questionnaires are also suitable for use with the participants of the study.

2.1.1 Participants

University students were chosen on the basis of age, as one would also expect most students to be aged 18-25, therefore coinciding with the development of disordered eating in late adolescence or early adulthood. It is also expected that university students are exposed to some degree of media, at the very least.

A total of 222 undergraduate students at the University of Cape Town participated in the present study, 177 of which were women while 45 were men. All were registered for a second-year psychology course, their ages ranging from 18 to 32 years old. The average age was 19.82 years old and the standard deviation 1.52. While as mentioned earlier, eating disorders are more likely to occur in individuals that are younger than 25 years of age, those in the sample that were older than this were included for two reasons. Firstly, disordered eating behaviours can still be found in older individuals, as they do not simply cease at a certain age. Secondly, the low standard deviation indicated that few participants’ ages differed significantly from the mean age of 19.82 years old.

Regarding ethnicity, for the purpose of the study the sample was divided into white and black participants. Of the respondents, 152 (68.47%) classified themselves as white, while 70 (31.53%) classified themselves as black. Twenty-four (10.81%) of the participants were black Africans, while 33 of the participants were coloured (14.86%). Eleven (4.95%) students
classified themselves as Asian, and only one participant (0.45%) identified themselves as being of some other ethnic identity that was not included in the questionnaire. Thirty-one (68.89%) of the male participants were white, while the remaining 14 (31.11%) were black. One hundred and twenty-one (68.36%) of the female participants were white and the remaining 56 women (31.64%) were black. The sample was also sub-divided into five language groups, namely Afrikaans-, English-, Xhosa-, Zulu-speaking participants and those that spoke other languages. Seven participants were Afrikaans-speaking (3.15%), seven were Xhosa-speaking (3.15%), two were Zulu-speaking (0.9%) and ten spoke other languages such as Taiwanese, Portuguese and Sotho (4.5%). The majority of the participants were English-speaking (196, or 88.3%). Since English is the medium of instruction and administration at the University of Cape Town, the use of the language and understanding it posed no problem for participants. All participants also spoke English at least to their friends.

2.1.2 Measures

This study formed part of a larger study, and constituents of the questionnaire that were not of interest in the current study will not be elaborated on. The first relevant part of the questionnaire aimed to elicit demographic information about participants, while the second section was a well-established measure of pathological eating (See Appendix A).

Biographical/Demographic Data

Section A included demographic characteristics of participants. The questions aimed to elicit the participants’

- sex
- ethnic identity
- media exposure

Media Exposure: A Composite Variable

Much previous research indicates that exposure to the media is related to pathological eating behaviours and an increase in various symptoms of these behaviours (Botta, 2000; Stice et al., 1994). Mass media, however, are considerably complex mechanisms of communication. They consist of various medium sources, which often depict the ideal body type for men and women
to a different degree. Some forms of the media may also be more influential on their users than others. Since media exposure is a multifaceted variable, it is difficult to capture it with a single measure. The included composite variable for the media therefore consisted of the sum of the scores of participants’ responses to questions on television possession and exposure (Botta, 2000), Internet use and frequency, magazine or newspaper reading and frequency and finally, if participants dedicate their leisure time to the media.

Television exposure: Participants scored two points if they possessed a television at home and zero points if they did not, because television is likely to contain ideal body types.

Internet access at home: Participants also scored two points if they had access to the Internet at home and zero points if they did not have access to the Internet at home.

Frequency of Internet use: Three points were given for daily access, two points for weekly access and one point for monthly access.

Magazine/newspaper exposure: Participants were firstly asked if they had a favourite source of reading material. Zero points were given if participants did not have a favourite.

Harrison (2000a) categorised magazines into five genres in her study on the relationship between media and eating disorders. They were as follows:

- Fashion magazines: The results of this study indicated that for women, interest in thin-ideal magazines was a significant predictor of symptoms of anorexia, and to a lesser extent for men (Harrison, 2000a). For this reason, a score of two points was given if individuals listed a fashion or ‘glossy’ magazine.

- Entertainment and gossip magazines: Participants were awarded two points if they listed a gossip or entertainment magazine such as YOU magazine.

- Health and fitness magazines: Two points were also rewarded to participants who listed a fitness and health magazine, such as Shape and Men’s Health.

- Sport and activities magazines: One point was given for sports-orientated magazines, such as Sports Illustrated.
• News and current affairs: Zero points were awarded for newspapers or magazines that did not depict body types.

Frequency: Three points were given if they read their favourite magazine regularly, or almost every time it was published, two points if they read it sometimes, or half the issues, and one point if they seldom read it, or once or twice in a year. This follows Field et al.’s. (1999) classification of fashion magazine exposure into infrequent, moderate and high readers.

One question aimed to find out who participants considered to possess the ideal body (See Appendix A), be it a celebrity or someone else such as a friend or themselves. Their responses were placed into the following five categories according to body shape or type.

• The first category is that of extremely slim/thin body types. This is due to a large majority of magazines and advertisements utilising models that are “extremely slender” and indicating that one should aim to attain a similar appearance even if it is necessary to “starve themselves” (Kilbourne, 1994, p. 401) in order to reach this goal. Participants were given four points for choosing an extremely thin individual as an ideal body type.

• Many celebrities can be classified as being thin, but not excessively thin as in the category above. Respondents who rated thin celebrities such as Penelope Cruz as having an ideal body, were given two points.

• Some celebrities can be classified as being of normal weight (Field et al., 1999) or average weight, including men. Participants were given one point for choosing celebrities with this body type as ideal.

• A fourth category consists of celebrities who have distinctly curvaceous figures, but cannot be classified as overweight, such as Jennifer Lopez. Participants were also given one point for choosing celebrities with this body type as ideal.

• Those responses that indicate famous athletes as having ideal body types constitute the fifth category. Due to the disagreement of past findings of the effect of exposure to sports on body satisfaction and drive for thinness, female participants were given one point if they rated an athletic body as ideal. Two points were awarded to male participants if they rated a muscular body as ideal, as this is becoming the most coveted body type for men to possess.

• The final category was that of overweight celebrities (Field et al., 1999), friends or those who chose their own body type as ideal. These students were given a score of zero, as this was
indicative that the thin-ideal media for women and the muscular, fitness-orientated media for men did not have a significant effect on ideal appearance.

Placing various celebrities into categories is a very subjective exercise for one researcher and Denzin's (1978) proposed method of investigator triangulation was therefore utilised. I thus used multiple researchers who were familiar with the media and with inter-rater reliability techniques due to their education instead of one researcher in order to “remove the potential bias that comes from a single person to ensure a greater reliability” (Denzin, 1978, p. 297). An equal number of men and women were chosen in an attempt to eradicate gender bias. To establish inter-rater reliability regarding categories of body-type, these four raters, consisting of postgraduate students and a newly employed woman, were also independently shown large pictures of male and female celebrities that constituted ideal body types for the participants, and then asked to place the celebrity into one of the categories. Inter-rater reliability was then measured so that the occurrence of actual agreement could be compared to the most agreement possible with relation to which categories the celebrities belonged. The number of raters that agreed on which category a celebrity should be placed were added up and divided by the sum of the total number of possible agreements for each celebrity, that is, five, including the researcher. Inter-rater reliability for the 27 celebrities assessed was 0.87 or 87%. This assisted in categorising difficult cases and also removed researcher effects that may previously have gone unnoticed.

The final component of the composite media variable constituted a question regarding utilisation of leisure time. Two points were given to each media-orientated activity in which participants participated in their leisure time, such as going to watch films. A maximum score of four was given, since the questionnaire only asked for two leisure activities.

The responses for all of the above-mentioned media-orientated questions were then added together. The maximum score for the entire composite variable was 20 points. A score of 0-6 is considered low, meaning that the participant has a low level of exposure to media that depict ideal body types. A score of 7-13 is considered a medium level of exposure to thin- and muscular-ideal media for women and men respectively. A score of 14-20 is considered high ideal-type media exposure.
The Eating Attitude Test (EAT-26)

This 26-item test aims to measure participants' risk of developing an eating disorder, not only to identify those who already can be diagnosed as having anorexia nervosa (Garner & Garfinkel, 1979). The maximum score that a respondent can achieve on the test is 78, with a minimum score, or no risk, being zero. A score of 19 and below is equivalent to participants being at low risk of developing anorexia nervosa. A cut-off score of 20 and above may indicate a clinical diagnosis of anorexia nervosa in a clinical population, and indicates disordered eating patterns in members of a non-clinical population, or those who are highly at risk of developing anorexia nervosa (Garner, Olmsted, Bohr & Garfinkel, 1982). The specificity and sensitivity of the EAT-26 have been found to be acceptable for high scores. The cut-off point of 20 has a sensitivity of 88.1% while the specificity is 96.1% (Mana et al., 1983). It is possible that there are non-cases amongst those with clinical scores, and therefore Garner et al. (1982) as well as Mann et al. (p. 577) also recommend conducting interviews with those who score above 20 in order to discover "those high EAT scorers who are not cases". While Garner et al.'s findings are somewhat old; these authors developed the EAT-26 and therefore are regarded as experts on the use of the test.

This instrument is viewed as reliable because it has a high level of internal consistency (Garner & Garfinkel, 1979). The reliability of the EAT-26 has also been established in previous studies by the calculation of Cronbach’s alpha, a measure of internal consistency. The reliability coefficient for the EAT-26 for another South African, Basil Russell’s (2003) study was established as 0.66. Cronbach’s alpha was calculated in the current study by comparing participants’ scores on the first half of the EAT-26 with their scores on the second half of the test, and the value of reliability for the EAT-26 was considerably higher, at 0.90. A possible explanation for the differing levels of internal consistency is the difference in samples used by the researcher. Since the sample in Russell’s (2003) study was comprised of high school learners while the present study utilised university students, a difference in results was expected.

The instrument is also valid, as it has both concurrent (r=0.87, p<0.001) validity (Garner & Garfinkel, 1979) and criterion-related validity (Garner et al., 1982). It can therefore predict group membership accurately. It is also an economical “screening instrument in non-clinical
settings” (Garner et al., p. 877). However, it must be taken into consideration that in one study, the predictive value was only 53% accurate (Mann et al., 1983), indicating that researchers should exercise caution when using the questionnaire as a screening device.

The EAT-26 has proved acceptable with many previous studies on eating behaviours (Lake et al., 2000; Timko, Striegel-Moore, Silberstein, & Rodin, 1987). The wording was not adapted for this study because the EAT-26 has successfully been used in previous South African studies (le Grange et al., 1998; Wassenaar et al., 2000).

2.1.3 Procedure
The study followed the ethical guidelines prescribed for human subjects by the University of Cape Town, and was approved by an ethics committee of the university. The questionnaire was originally constructed in English, and it was not considered necessary to translate it. The respondents study in English, as the University of Cape Town is a predominantly English-medium university.

Pathologies of development were presented as part of a second-year psychology course. The students were informed in the previous lecture that they would be asked to complete questionnaires on their eating attitudes and behaviours, but no information was given on eating disorders. Lectures on eating disorders, however, did follow in the two days after the data collection. The questionnaire was presented as part of research for a Masters degree and of the curriculum.

The following day, questionnaires thus were distributed to students during their lecture period. Students were informed that participation was voluntary. They could leave the lecture theatre, or could stay but decide not to complete the questionnaire. The cover letter attached to the questionnaire further explained the purpose of the research and ensured confidentiality but not anonymity. The researcher and two assistants were on hand to attend to possible difficulties in understanding and answering questions. Students separated the first page that included their personal details from the rest of the questionnaire, and these were collected separately to ensure that only the researcher would be able to identify participants. Not one of the students attempted
to leave the lecture theatre or refused to complete the questionnaire. Only a few incomplete questionnaires were handed in. The response rate can therefore be estimated at 100 percent.

2.2 Part Two: Qualitative Research

To explore the manner in which female students at risk for anorexia nervosa utilise the media in great depth, a different kind of method was required. In-depth interviews, guided by grounded theory methodology, were used. The researcher had completed post-graduate courses that dealt with this methodology both theoretically and practically.

2.2.1 Pilot Study

Since the format of the interviews with the selected participants was somewhat unusual, it was thought prudent to conduct at least one trial interview prior to the actual study which:

- Served to familiarise the researcher with the interview schedule;
- Allowed me to assess if there were unnecessary questions asked, and if there were additional areas to be covered;
- Proved helpful in identifying areas of difficulty, where the interviewee did not clearly understand the question or was uncomfortable talking about a specific topic;
- Assessed whether the average length of the interview, approximately one hour, was as expected; and
- Aimed to determine if the face-to-face technique of the interview was actually successful in collecting the type of data on the topic that “you think/hope the interview might cover” (Smith, 1995, p. 12).

One interview with a 19-year-old female, who was known to the researcher and was not part of the original study, was conducted approximately one week prior to the main study. It was thought that someone familiar to the researcher would be more inclined to give honest feedback, hence the choice of a trial interviewee who was familiar with the interviewer. She did have one complaint though; namely that the interview was a bit repetitive and this made it “a bit boring”. However, I took into consideration that the time of the interview was in the late afternoon, after she had completed a day at work and was admittedly tired. Therefore, it was concluded that the interview schedule was acceptable and did not require any modifications.
Once this interview was conducted and the appropriateness of the interview format confirmed, potential participants could be selected.

2.2.2 Participants
The selection criteria for the participants were as follows: They needed to have obtained scores above the cut-off on the EAT-26 and medium to high scores of media exposure. As determined from part one of the study, a total of 33 women and zero men that completed the questionnaire were identified as scoring in the clinical range of the EAT-26 and they therefore obtained scores of 20 or higher. From this pool of possible interviewees, four did not provide their contact details, and were excluded. From the remaining 29, 15 had at least a medium level of exposure to thin-ideal media. One potential participant had relocated to Pretoria, and another refused to participate due to the time constraints of her present studies.

Ten interviewees were then randomly selected from the 13 potential candidates. The participants aged from 20 to 25 years old. The average or mean age of the participants was 21 years old, with a standard deviation of 1.49. All ten interviewees were women. The sex of participants was especially important, as the quantitative section of the present study indicated that women were significantly more at risk of developing anorexia nervosa.

Nine of the ten participants were white and one was coloured. It must be noted that neither men nor black participants were excluded from the pool of interviewees, but there were no men that showed a high number of anorexia nervosa symptoms and they were therefore not considered for the interviews.

2.2.3 Measures
For the purposes of the study I showed the participants an interview schedule, advertisements and magazines. Firstly, I included a set of questions to ask participants. Banister, Burman, Parker, Tayler and Tindall (1994) suggest that it is useful to have a list of topics that one can draw on in the form of questions to ensure that the interview runs smoothly, and that the interviewer does not have difficulty in what to ask next. These questions were based on an interview schedule that was utilised in previous research on how female anorexic patients experienced the media and how their use of the media influenced their eating disorder (Thomsen
et al., 2001) but with some modification. The questions had to fit the specific context of a sample of non-clinical participants, as participants have not formally been diagnosed with anorexia nervosa, in comparison with clinical outpatients. Further questions on the topic of the Internet were also included, as well as a small number of questions that were extracted from the existing body of academic literature, mainly consisting of quantitative studies.

A small number of main questions under each media source, namely magazines, television and the Internet, were therefore the main constituents of the interview schedule. The interview consisted of main questions around certain topics to direct the flow of conversation, but sub-questions were tailored to the position of the interviewee and the initial comments that they made (Banister et al., 1994). I then asked these questions if necessary to act as probes or prompts (Smith, 1995) to elicit more detail from interviewees. Participants therefore had the opportunity to talk about and share their own experiences in detail (See Appendix B).

Advertisements were firstly used as an aid to stimulate discussion about ideal body types. Two advertisements depicting women from the Donna Claire clothing range and a further two depicting models from the Cosmopolitan were shown to participants. They were asked to choose what they believed to be the ideal body type, and discuss why. One fashion advertisement purposefully depicted two attractive, athletic men with the female models in order to assess whether participants noticed this, and to stimulate a conversation about sex relations (See Appendix C).

Copies of women's magazines were made available to participants to once again stimulate conversations, especially about magazine covers and slimming products and articles. These included fashion magazines such as Cosmopolitan, Elle, Marie Claire, Fair Lady, entertainment magazines such as YOU and Hello and fitness or health magazines such as Shape.

2.2.4 Procedure
Potential participants were contacted via telephone to discuss the actual research and to ask them to participate. Once they had agreed to be interviewed, an appointment was arranged.
The interviews were conducted in a setting that was both accessible and familiar to participants in order to lead to the minimum amount of disturbance during the interview (Smith, 1995). Since the majority of subjects were students at the University of Cape Town, the interviews took place on campus, in a room reserved for consultation in the psychology building. One interview took place in the home of the participant.

The interviews were conducted in English, since all of the participants had English as their first language. Interviewees signed a consent form (see Appendix D), which ensured confidentiality through anonymity and emphasised that they could withdraw from the research process if they felt uncomfortable at any stage. All of the participants’ names were therefore replaced with pseudonyms in this study so that they will not be identifiable to others.

Participants were asked if they would complete the EAT-26 in the same way as they did previously. Following this, the actual interview began, and topics covered were magazines, television and the Internet. At the end of the interview, participants were given an opportunity to reflect on the process so that they were aware that their feedback was valued.

Interviewees were thanked for their participation, and I read out a uniform referral note on where they could obtain a diagnosis or assistance with regards to their disordered eating behaviours if so desired. Prior to the study, a psychologist who specialises in eating disorders agreed to act as a referral person. His business card was given to all of the participants in the event that they felt they needed his services. Finally, interested participants were told that they would receive an e-mail of the actual study’s abstract, and would be notified when the final results would be available. All interviews took approximately one to one and a half hours to complete.

**Transcription**

All of the interviews were tape-recorded. Over a period of time, the researcher transcribed what was said in the interviews onto a computer file for easier access to the data in order to provide “rich, detailed data” (Charmaz, 1995, p. 33) with which to work.
3. RESULTS AND DISCUSSION FOR QUANTITATIVE SECTION

This chapter firstly summarises the distribution of men and women’s eating scores on the EAT and their levels of media exposure. The same scores are compared for black and white participants. Following this, the bulk of the chapter consists of the results of the multiple regression analysis, so that a number of factors can be analysed at the same time.

3.1 Distribution of EAT-26 Scores by Sex

Table 1: Frequency Distribution of EAT-26 Scores for Men and Women

<table>
<thead>
<tr>
<th>EAT-26 Score</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>M</td>
<td>SD</td>
</tr>
<tr>
<td>Normal (0-19)</td>
<td>45</td>
<td>3.84</td>
<td>4.07</td>
</tr>
<tr>
<td>High (20 or higher)</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>45</td>
<td>3.84</td>
<td>4.07</td>
</tr>
</tbody>
</table>

_EAT-26 Scores in the Normal Range_

Table 1 indicates that all the men scored within the normal range on the EAT-26, and were therefore not considered to be at risk for anorexia nervosa. The table also indicates that the average score of the men in this range is positioned in the bottom half of the range (M=3.84, SD=4.07). Table 1 indicates that most women (143) scored within the normal or low-risk range, the majority scoring in the low risk category (80.79%). The average score for women in this category is also quite low, but higher than that for men (M=5.87, SD=5.02).

_EAT-26 Scores in the High Range_

Thirty-three (14.93%) of the participants’ scores fell within the high-risk range of the EAT-26. As Table 1 indicates, all of the identified at-risk students are women but this is only a small percentage of the total female sample (18.75%). Their average score is well over the minimum of 20 (M=31.48, SD=7.99).

It must be noted that while 222 students were included in the study, a total of only 221 EAT-26 scores are accounted for in the above table. This is due to one female respondent not completing
the EAT-26 section of the questionnaire. The researcher was therefore unable to give her a final score for this section of the questionnaire.

*Means for Eating-Disorder Symptomatology by Sex*

The mean for women is much higher at 10.78 (SD=11.5) than for men at 3.84 (SD=4.07). Therefore women seem to be more vulnerable to developing symptoms of anorexia nervosa than men are. A t-test indicates that the difference between mean scores is statistically significant ($t=3.91$, $df=219$, $p<0.01$).

### 3.2 Distribution of EAT-26 Scores by Ethnic Identity

**Table 2: Frequency Distribution of EAT-26 Scores for White and Black Participants**

<table>
<thead>
<tr>
<th>EAT-26 Score</th>
<th>White $N$</th>
<th>$M$</th>
<th>$SD$</th>
<th>Black $N$</th>
<th>$M$</th>
<th>$SD$</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Normal (0-19)</td>
<td>124</td>
<td>5.47</td>
<td>5.04</td>
<td>64</td>
<td>5.22</td>
<td>4.58</td>
<td>188</td>
</tr>
<tr>
<td>High (20 or higher)</td>
<td>28</td>
<td>31.82</td>
<td>8.11</td>
<td>5</td>
<td>29</td>
<td>7.89</td>
<td>33</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>152</td>
<td>10.32</td>
<td>11.73</td>
<td>69</td>
<td>6.99</td>
<td>6.99</td>
<td>221</td>
</tr>
</tbody>
</table>

*EAT-26 Scores in the Normal Range*

Table 2 indicates that 124 out of the 152 (81.58%) white participants scored within the normal range on the EAT-26. The table also indicates that the average score in this range is reasonably low ($M=5.47$, $SD=5.04$). The above table also indicates that 64 out of the 69 black students (92.75%) have scores within the normal or low-risk range of the EAT-26, which is clearly the majority of black respondents. Their mean score is very similar to that of the white participants, and is therefore also quite low ($M=5.22$, $SD=4.58$).

*EAT-26 Scores in the High Range*

Of the thirty-three participants that have scores that fell within the high-risk range of the EAT-26, 28 were white women (84.85%). Their mean score is 31.82 ($SD=8.11$). Only five of the thirty-three women (15.15%) who are at risk for the development of anorexia nervosa are black students. Their average score is 29 ($SD=7.89$).
Means for Eating-Disorder Symptomatology by Ethnicity
Mean scores on this measure indicate that white participants' mean score at 10.32 (SD=11.73) is higher than the mean for black participants (M=6.99; SD=6.99). An independent t-test indicated that the difference between the mean white and black scores reach levels of statistical significance (t=2.25, df=219, p=0.03).

3.3 Relationship between Media Exposure and EAT-26 Scores

Table 3: Frequency Distribution of Media Exposure

<table>
<thead>
<tr>
<th>Exposure</th>
<th>Men</th>
<th>Women</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>9</td>
<td>35</td>
<td>44</td>
</tr>
<tr>
<td>Medium</td>
<td>35</td>
<td>115</td>
<td>150</td>
</tr>
<tr>
<td>High</td>
<td>1</td>
<td>27</td>
<td>28</td>
</tr>
<tr>
<td>Total</td>
<td>45</td>
<td>177</td>
<td>222</td>
</tr>
</tbody>
</table>

Low Level of Media Exposure
According to Table 3, 44 (19.81%) of respondents are only exposed to a small level of ideal body type media. Nine of these participants are men (20%) and 35 are women (19.77%).

Medium Level of Media Exposure
Table 3 also indicates that the majority of the participants (150 or 67.57%) have a medium level of exposure to ideal-type media. Thirty-five (77.78%) are male respondents, while a smaller percentage, 115 (64.97%) are female students.

High Level of Media Exposure
Table 3 indicates that 28 (12.62%) participants have a lot of exposure to this type of media. Only one man (2.22%) has a high level of media exposure, while 27 women (15.25%) have much exposure to ideal-type media. What is really of interest is if EAT-26 scores appear to increase with the level of media exposure, and Table 4 addresses this question.
Table 4: Means and Standard Deviations for Media Exposure and EAT-26 for Men and Women

<table>
<thead>
<tr>
<th>Level of Media Exposure</th>
<th>Men</th>
<th>Women</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Media Exposure</td>
<td>EAT-26</td>
</tr>
<tr>
<td></td>
<td>$M$</td>
<td>$SD$</td>
</tr>
<tr>
<td>Low</td>
<td>4.44</td>
<td>1.74</td>
</tr>
<tr>
<td>Medium</td>
<td>9.14</td>
<td>1.77</td>
</tr>
<tr>
<td>High</td>
<td>14</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>8.31</td>
<td></td>
</tr>
</tbody>
</table>

Low Level of Media Exposure

Table 4 indicates that men ($M=4.44$, $SD=1.74$) and women ($M=4.51$, $SD=1.38$) have similar scores on levels of low media exposure. Men’s average EAT-26 score when they are not often exposed to ideal-type media is low ($M=3.33$, $SD=1.87$). Women, had a higher mean score of 7, and there was also more variability among participants ($SD=8.53$). Both men and women are at low risk for anorexia nervosa when they have little exposure to ideal-type media.

Medium Level of Media Exposure

Table 4 indicates that men ($M=9.14$, $SD=1.77$) and women ($M=9.95$, $SD=1.96$), as expected, have comparable levels of media exposure in this category. Men once again have low EAT-26 scores ($M=4.06$, $SD=4.50$), while women’s scores are higher ($M=11.09$) and vary more ($SD=11.70$).

High Level of Media Exposure

As Table 4 shows, the one man in this category ($M=14$) and the women ($M=14.78$, $SD=0.93$) just met the criteria for frequent use of the media. While the man’s EAT-26 score was one, the women’s mean score was 13.67, again with much variation between participants ($SD=13.23$). They are still not at a high risk for the development of anorexia nervosa.
Means of Media Exposure for Men and Women

An independent t-test indicates that the difference between the mean female (9.61) and male (8.31) respondent's scores on exposure to ideal-body media is statistically significant ($t=2.31$, $df=220$, $p=0.02$). It is thus shown that in general, male and female students are exposed to similar amounts of these types of media, but more females are exposed to a higher level of media, meaning that they see and read more about the female ideal body type, namely the slender woman. This finding is consistent with Harrison and Cantor's (1997) study that revealed that men and women had similar exposure to the media, but women watched more television with thin characters and read more fashion magazines than men. Harrison (2000a) replicated these findings in a later study, but also found that women watch a larger amount of television that contains the aversive body type of heavy characters than men, thus influencing their eating behaviours as they did not want to be overweight. In her study men were more exposed to their ideal media, namely sports television programmes and read sports magazines.

It seems that the higher the level of media exposure, the higher the scores on the EAT-26 for some participants, but this is not always the case and it is not known if this correlation is significant. The important question is how to include sex and ethnic identity's influence on eating behaviours together with media exposure. This can be answered by conducting a multiple regression analysis. A default analysis, the standard method of multiple regression, was run because the research is mainly confirmatory, with the only exploratory measure of the composite variable being the inclusion of the Internet. Sex and ethnic identity, both nominal variables, are appropriate for this regression analysis because they are dichotomous. Together with media exposure they were the independent or predictor variables. The dependent variable was the scores obtained on the EAT-26 inventory. The results of the analysis are shown below.
3.4 Multiple Regression Analysis

Table 5: Regression Summary for EAT-26

R= .34 R²=.11 Adjusted R²=.10
F(3,217)=9.36 p<.00001 Std.Error of estimate: 10.22

<table>
<thead>
<tr>
<th>Variable</th>
<th>B</th>
<th>SE B</th>
<th>β</th>
<th>SE β</th>
<th>t(218)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sex</td>
<td>6.10</td>
<td>1.73</td>
<td>0.23*</td>
<td>0.06</td>
<td>3.53</td>
</tr>
<tr>
<td>Ethnicid</td>
<td>-2.56</td>
<td>1.51</td>
<td>-0.11</td>
<td>0.07</td>
<td>-1.70</td>
</tr>
<tr>
<td>Mediaex</td>
<td>0.55</td>
<td>0.21</td>
<td>0.17*</td>
<td>0.07</td>
<td>2.65</td>
</tr>
</tbody>
</table>

*p<.001

The first result that is indicated by the above table is the overall significance of the model. The adjusted R² was 0.10, therefore a substantial proportion of total variance explained by the model. The model is also statistical significant (F (3, 217)=9.36, p<0.01).

Table 5 also indicates which of the individual predictor variables are significant by considering their regression coefficients. The dependent variable consists of scores on the EAT-26. The results as shown in the table indicate that sex is a significant predictor (β=0.23; t=3.53; p<0.001) of the risk of development of symptoms of anorexia nervosa, as was media exposure (β=0.17; t=2.65; p<0.001). Ethnic identity of participants was proven not to be a significant predictor of possible anorexia nervosa symptomatology (β=-0.11; t=-1.70; p=0.09). Sex is a slightly better predictor, as its regression coefficient is higher than that of the media exposure variable. Female respondents are therefore at more risk for the development of possible anorexia nervosa symptomatology than male students, and are simultaneously more exposed to ideal-type media.

3.5 Regression Diagnostics

This important step of multiple regression allows closer inspection of the data. The following statistical manipulations help to make a decision regarding which variables to include in the model. Even though sex and media exposure have both been identified as significant predictors
of the risk of anorexic symptoms developing, the removal of one of them or of a number of cases may improve the model.

Table 6: Redundancy of Independent Variables

<table>
<thead>
<tr>
<th></th>
<th>Tolerance</th>
<th>R-Sq.</th>
<th>Partial Cor.</th>
<th>Semi-part. Cor.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sex</td>
<td>0.97</td>
<td>0.03</td>
<td>0.23</td>
<td>0.23</td>
</tr>
<tr>
<td>Ethnicid</td>
<td>0.96</td>
<td>0.04</td>
<td>0.11</td>
<td>-0.11</td>
</tr>
<tr>
<td>Mediaex</td>
<td>0.94</td>
<td>0.06</td>
<td>0.18</td>
<td>0.17</td>
</tr>
</tbody>
</table>

It is necessary to calculate the tolerance of the predictor variables to find out how independent the predictors are, or their level of overlap and also to find out if instability will be a potential problem in the above model (Howell, 1997). It is imperative to look out for extremely low levels of tolerance (close to 0) as this threatens the stability of a model, and conversely, high $R^2$ values (close to 1). Table 6 indicates that sex (0.97), ethnic identity (0.96) and media exposure variables (0.94) have very similar tolerance levels. These high levels of tolerance are very close to the optimal level of 1. High tolerance means low multicollinearity, or a low correlation between variables. They therefore exist quite independently to each other, as the level of overlap or correlation between the three variables is reasonably close to zero, with media exposure having the highest level of correlation with the other variables ($R^2=0.06$). The level of multicollinearity is therefore acceptable, as each of the three predictors contribute to the EAT-26 measure separately. One also needs to consider individual cases, not just the variables, to see if the model can be improved by looking closely at influence and the residuals of cases.

3.6 Cook’s D: An Indicator of Influence

Howell (1997) defines influence as high on leverage and indicative of a large residual. The reason for calculating Cook’s D is that it is useful as an indicator of influence. It is advisable to identify cases with high values of Cook’s D as they can skew or bias the results (Bokhorst, 2002), and should therefore be removed. Cases that have values of Cook’s D that are over 1 are considered to be of high influence, and the rule is to remove them to reduce MS residual (Howell, 1997). The minimum Cook’s D value in this model is 0, and the maximum is only 0.05. The case with the highest influence is therefore nowhere close to 1, and therefore no cases were removed based on influence. However, it is also necessary to consider the residuals.
3.7 The Residuals

Figure 1: Scatterplot of Residuals Versus Predicted Values for EAT-26

The scatterplot in Figure 1 can identify possible departures from linearity, as multivariate outliers may change the coefficients, and may therefore possibly need to be removed, and the analysis rerun (Howell, 1997). One needs to inspect the pattern formed by the points in the graph, as in a linear model the errors of prediction as shown by the points on the graph above, should be random and the regression slope should be zero. However, there seems to be more spread in the residuals in the top half of the graph. If the data is sorted from high to low EAT-26 scores the prediction is accurate for lower scorers on the EAT-26. However, the 33 cases of at-risk individuals seem to have larger residuals, indicating that the regression model does not always work for these participants. To improve the model, the two cases with the highest residuals that are greatly at risk for anorexia nervosa could be removed. The first one has the highest score on the EAT-26. At 53 points, one would expect her media exposure score to be in the high range, but it is only 12. The other woman who faces possible exclusion has an EAT-26 score of 43, and
a media exposure score of only 9. Ideal-type media therefore may not play a major role in her disordered eating attitudes and behaviours. The residuals do not otherwise seem to pose a serious problem as overall the amount of error is not too large.

**Figure 2: Histogram of Raw Residuals for EAT-26 Scale**

The histogram is included because it indicates if the residuals indicate a departure from multivariate normality, or if the model is acceptable and approximate normality is evident (Bokhorst, 2002). By visually inspection of the histogram in Figure 2, it can be seen that it is positively skewed, since the highest columns (57 observations between −10 and −5; 60 observations between −5 and 0) of values are on the left-hand side of the graph. After this, however, the histogram’s values begin to decline towards the right. There is also evidence of extreme values, but this only constitutes one column of the histogram (1 observation between 40-45). The figure therefore is indicative of a slight departure from multivariate normality, but the general shape still resembles that of a normal distribution. The model is therefore acceptable for use.
4. RESULTS AND DISCUSSION FOR QUALITATIVE SECTION

The results of the survey were not surprising, given the volume of previous research on the relationship between media exposure and disordered eating. This next section, consisting of interviews, acts as a follow-up to the survey to provide an in-depth look at high scorers on the EAT-26 and their patterns of media exposure. The additional use of qualitative methodology is something new in this area, and has not been attempted before in South Africa. The mechanisms of the relationship between media exposure and disordered eating attitudes and behaviours, and how this differs for different individuals, can further be explained. This chapter uses grounded theory to pull apart the data and then put it back together. The women’s responses are used to build a better model of understanding of these mechanisms and the model also allows for individual differences, since it promotes comparative analyses among data. Before this, however, one needs to look at the interviewees’ current EAT-26 scores in comparison to the ones that they had completed during the survey.

4.1 Participants’ EAT-26 Scores

Before analysing the data obtained through the interviews I showed participants the EAT-26 questionnaires that they had completed the previous year and asked whether or not they would complete it in the same manner in the present situation.

The majority of interviewees commented that they would complete the EAT-26 in the same way. The consequence of this is that most of the interviewees are still in the high-risk range for anorexia nervosa. Six out of the ten participants believed that their eating attitudes and behaviours had not changed in any way.

Three of the interviewees believed that while they would generally answer the EAT-26 in the same manner, they would now answer a small number of questions differently. Two of the participants admitted that they while they still had issues with eating attitudes and behaviours, the level of engagement in a minority of these behaviours have decreased. Rachel said that she would answer the EAT-26 in “pretty much the same way”, but “a couple of items are a bit different”. The change referred to “The one to do with the bingeing, that would move to rarely.”
Hayley answered that a few of her disordered behaviours had decreased in frequency. In particular, she said that “Ok, well the first one: Am I terrified of being overweight? That would now be usually or often, more than always. Um, I do still, I never avoid eating but I am preoccupied with food. Yah, I’m always aware of calorie content, and this is probably never-vomiting after eating.”

Catherine also answered that the majority of her abnormal eating attitudes and behaviours would remain stable, but one had changed. In contrast with the above-mentioned interviewees who found that they engaged in a small minority of behaviours to a lesser degree, one of her disordered behaviours had actually increased.

One of the participants changed the majority of her answers due to a recent visit to the doctor, who gave her a diagnosis of slightly “insulin resistant” or “diabetic”, with potential problematic body organs being “my liver and pancreas”. The way that Eve’s eating attitudes and behaviours have changed is that they are no longer as disordered as they were before. However, some are still pathological, as indicated by the following quotes:

*E: umm. I go on eating binges... and then, but that I think it’s a student thing.*
*Yah. Umm. Yah, cut my food into small pieces, some. Umm. I’m aware of calorie contents – of course I am.*
*Particularly avoid foods with high carbohydrate content. Umm well I kind of try eat as balanced as possible.*
*I would like to be thinner, preoccupied with the desire to be thinner but not thinner as in thin, as in thinner as in healthy as in better weight like better control of your body.*
*Umm., then. take longer than others to eat my meals but I always eat slowly.*
*Avoids foods with sugar in them. Uh as much as possible.*
*Displays self control around my food, usually, yes. I can like if I don’t feel like eating then I won’t even if there is food.*
*I feel uncomfortable after eating sweets, I do normally yes. If I eat like a chocolate I would say did you really need that chocolate and I’ll feel a bit bad.*
*Engage in dieting behaviour. I’m not dieting at the moment but I normally do try and stick to eating healthy and you know that kind of thing, and um sometimes I use diet aids but not at the moment.*

### 4.2 Definition of Grounded Theory

“Grounded theory is a general methodology for developing theory that is grounded in data that is systematically gathered and analysed” (Strauss & Corbin, 1994, p. 273). This method is
inductive, beginning with individual experiences and then developing more abstract categories to put the data together and explain it better by identifying relationship patterns within it (Charmaz, 1995). Grounded theory basically breaks down data and then builds it back up again by axial coding, as will be discussed below (See Appendix E for visual representation of the process).

4.3 Data Analysis according to Grounded Theory

The Development of Concepts or Codes
The text was analysed “sentence by sentence” as suggested by Flick (2002, p. 178), and Strauss and Corbin (1998). This was done to provide a high level of detail with regards to coding, as it was necessary to take the data apart line by line so that all of the important and relevant concepts would be included. It also helps to keep the researcher closely focused on the data, and to begin to take an analytical stance towards the work (Charmaz, 1995). The aim in conceptualising segments of text is to describe the phenomena that are present, or as Strauss and Corbin (p. 63) refer to it: “labelling phenomena”. As a line or a sentence was read, it was questioned: “What is this? What does it represent?” (Strauss and Corbin, p. 63).

The Development of Categories
Since a great number of concepts were found in the text, the next step was to begin to develop categories around the concepts to “reduce the number of units” (Strauss & Corbin, 1998, p. 65) that will be worked with. Here constant comparison was necessary in order to develop sufficient categories. Firstly, comparisons were made between the different interviewees. Their different actions, situations and experiences were assessed across the data. It was also necessary to compare data with the same participant at different points in time, as suggested by Miller (2000).

Open Coding: Developing Categories in Terms of their Properties and Dimensions
Constructing properties then further developed the categories. Strauss and Corbin (1998, p. 69) describe these as “characteristics or attributes of a category”. Strauss and Corbin’s way of naming properties was found to be too brief, as the properties did not seem to adequately describe the phenomena. The length of the properties’ names was therefore extended. Each property was then located on a dimensional range, that is, dimensions that “represent locations of
a property along a continuum" (Strauss & Corbin, p. 69) because the dimensions may better describe the phenomena later on, such as putting the extent of a participants’ mothers’ influence on her eating behaviours on a continuum from low to high, and deciding how visible models’ protruding bones are (See Appendix F for examples).

Theoretical Sampling
In keeping with the constant comparative method, questions were continuously asked about the data, and about similarities and differences between the participants (Strauss & Corbin, 1998).

Axial Coding
After breaking the data down in open coding, this crucial step helped to establish relations between categories (Flick, 2002; Strauss & Corbin, 1998). It also aided me in putting the data back together in a logical manner, in the form of a paradigm model. However, it was here that I deviated slightly from the grounded theory methodology, as the phenomenon did not emerge unexpectedly from the data.

Thus major categories that made up the phenomenon were identified from the data, as they were the most relevant to the research question “from the developed codes and the related code nodes” (Flick, 2002, p. 182). The major categories were also linked, so that theory was generated that is grounded in the experiences of the participants regarding their use of magazines, television and the Internet and how it is related to their disordered eating attitudes and behaviours. However, since the quantitative results indicated that there was a relationship between media exposure and the development of anorexia nervosa, it was expected that those at-risk participants would utilise the media to further their disordered eating attitudes and behaviours.

4.4 Interpretation
The following section concentrates on the paradigm model, which links categories and their subcategories together. It elaborates on these relations and also on the relations between different categories (Flick, 2002) and was developed in order to explain how the phenomenon of heavy media use came to be for the interviewees, and what influence this had on their lives.
4.4.1 Causes/Predisposing Factors

There were various factors that could possibly have led to participants’ heavy use of ideal-type media (See Appendix G for list). These consist of the following:

Influence of Parents

Jemima’s mother seemed to have a major influence on her eating attitudes and behaviours. In fact, the extent of this influence was so high that she cited her as “the main influence in my life and on my eating behaviours.” The manner in which she controlled her daughter’s eating behaviours was through instruction, as “She would always tell me don’t eat this”. The choice for the interviewee to lose weight therefore did not seem to be entirely hers. Her mother would frequently tell her that she “must be thin,” and therefore the participant felt that weight loss was necessary for her. Kilbourne (1994) acknowledges that mothers certainly do play a role in their daughters’ attitudes towards food and their weight. She cites a study reported in the American Family Practitioner (1988) as evidence in which half of the dieting girls in the sample were encouraged to lose weight by their mothers.

Indirect Media Influence

Jemima’s mother simultaneously had a high level of thin-ideal media exposure, as she frequently watched television. It was therefore her desire for Jemima to have the appearance of a model, making the choice somewhat an external one for her.

J: My mother is a frequent watcher of TV that portrays thin women like Miss South Africa, various beauty contests and she also reads the Fair Lady a lot.

Influence of Siblings

Another contributing factor was shown to be the participants’ siblings. However, while this cause seemed to be an external one, with the siblings paying the main role, it actually has to do with the interviewee’s feelings about herself. Catherine was by far the youngest in the family, and had one much older brother and sister. Her position in the family could have contributed to her feelings of inferiority in comparison to them. However, it seems more likely that her perception of “Like, me not thinking that I was good enough, better than my brother and sister…I didn’t think I was better, or the same as my sister and brother” was due to her own
feelings of low importance. Indeed, Gordon (1990, p. 98) reminds us that many females with anorexia nervosa have extreme feelings of ineffectiveness, and that is partly due to “growing up in a family which places intense emphasis on achievement and performance” and that extreme dieting thus often becomes their way of achieving superiority.

**Influence of Peers**

The negative reaction of peers towards women who were larger than the ideal also emerged as a relevant category. For some of the interviewees, this began while they were still of a school-going age. The following quote expresses the direct experience of being differentially treated by peers due to one’s size, and insinuates that the level of teasing for Catherine was quite high.

_C: and I used to get teased a lot...No, I got teased quite a bit._
_E: Yah, I think, my main issue was actually coming to varsity and seeing discrepancies due to body image and how people are treated due to how they look._
_G: ...that are beautiful and thin and even other girls in your school._

The above quotes strongly suggest that the differential treatment occurred not only in school, but once they reached university, peers responded to slender women in a more positive manner. Another way in which older peers influenced girls while still in high school was through their concern about their own figure. In Hayley’s school, grade twelve girls gave the grade eight girls warned them about the forthcoming increase in the size of their figures, as “you’ve all still got this tiny baby figure, and they’re like, just wait your hips grow, yah.” This led to this specific participant becoming conscious of her body, as “It was the first time I felt conscious of it...and that’s when you start becoming aware of it”. Female peers also influenced women in yet another way, namely that of comparison.

_B: I get it when I see a thin person, then I get it really big...when there’s a real person standing next to me._
_A: But I always compare myself to other people that I don’t know._
_N: Some of the girls are thin? And these, they’re not even models, they’re people like me, they’re girls that you will see._

Comparing themselves to other slender women in such close proximity led the female participants to desire weight loss, as is suggested by the following:
A: Like, I wanna be like her, I wanna look like her.
B: And I think, fuck, I need not to eat.

This fits in with one of the diagnostic criteria for anorexia nervosa according to the American Psychiatric Association (1994). These women have an intense fear of weight gain or of becoming fat due to comparison with other slender women.

Modelling of Behaviours
The majority of participants seemed to have learnt a great deal of weight loss techniques from others. The mother was the predominant figure whose behaviour the women seemed to model their own on. This was especially the case for the mother’s use of diet aids.

J: My mother used this (Leanor)
G: My mom bought some Herbex tablets

This revealed that participants were not only exposed to their mothers’ method of weight loss, but also that diet products were highly available to them. Jemima added that “But it did work for my mommy, but then she stopped taking it”, providing evidence for her perception of the role of the diet aid in her mother’s high level of weight loss.

Rachel modelled her behaviour on her mother’s in a slightly different manner. Her mother’s level of satisfaction with her body is low according to the interviewee as:

R: She is concerned about these kind of things as well...Um, my mum as well, has a lot of similar concerns as me...
...whereas my mum will also slide into a kind of depression and say oh yes, we’ll never get like this...

This provides evidence for her mother’s depression about her appearance, and her priority of weight loss. The interviewee seems to have been extremely aware of her mother’s body issues, and has imitated these to a large degree.

Bandura (1977) identifies parents as traditional role models for their children. This includes Jemima’s father. However, he did not directly or intentionally promote unhealthy methods of
weight loss. He possessed a high level of fitness, as "my father was always athletic...he liked to exercise and run up to Muizenberg". Jemima used to accompany her father on his regular cycling trips. She had a different reason for exercising to her father, as she participated in it as a means to lose weight. While her desire to lose weight was quite high, her father seemed more interested in maintaining his level of fitness.

"Much social learning occurs on the basis of causal or direct observation of behaviour as it is performed by others in everyday situations" (Bandura, 1977, p. 39). This means that others with whom the women have frequent contact can also act as models for their eating attitudes and behaviours. This was indeed proved the case for a number of interviewees.

J: But then my cousin used that but then she got too thin because everyone said: "Did you see Candice, she doesn't look nice anymore, it doesn't suit her man".
E: My friend was using Bioslim...
N: Yah, I know my brother has tried it as well.

All of the above quotes indicate that the women's friends and other family members had used slimming aids. These products had proved to be highly effective on weight loss as this statement shows: "Did it work for her? Yes it did". The participants also had a strong desire to model the behaviour that they observed, such as Eve's friend who "told me about it and then I looked into it...so yah, that would, it would make me consider seriously wanting to buy it"

Special Event
A final external factor that could have possibly influenced participants’ maladaptive use of the media was a special event in their lives that required an optimum level of personal attractiveness. The description of the event is given as follows:

J: Towards the end of matric, or standard nine...that's when I tried everything. Cos before my matric ball...
G: Also like in matric, that was when I lost a lot of weight because that was also the time of the matric dance...
H: When I was in matric and we had the matric dance
Participants primarily felt a strong desire to obtain a slender appearance, and weight loss was a high priority for them.

_J: I didn’t want anything to hang over._
_G: ...and everyone wants to look good and thin..._

Jemima admitted that the pressure to fit into her clothes for the occasion was extremely high, as she “had to fit into the dress and my stomach had to show”. This event actually led to Hayley visiting appearance-orientated websites in order to “look at all the catalogues and see all the dresses and stuff like that.” These sites also contained weight loss advertisements “and at the top it would have this strip that said lose ten pounds now, something arb like that.” For Hayley, weight loss was a high priority.

_Childhood Personality Disposition_

Internal factors, or psychological issues that the women have within themselves also seem to have led to a specific use of ideal-type media.

_C: I just didn’t feel good about myself._
_J: So if I do lose the weight, will I still feel, will I be happy or is it something else?_

The discussions provided evidence for the interviewees’ longstanding low levels of self-confidence and self-esteem. They were not satisfied with themselves, not only with regards to weight, but also to other aspects of their lives. David and Johnson (1998, p. 38) found that those women with lower levels of self-esteem were more at risk of the “third-person effect” and were more at risk of being influenced by the negative effects of the media and more likely to develop an eating disorder.

_Previous Body Size_

Catherine mentioned that she was “quite large” in a previous description of her figure. Having a heavy body weight in childhood seemed to predispose her to look at the media as an inspiration to lose weight.
Pre-existing Vulnerabilities to Eating Disordered Behaviours

A number of women already possessed some of the criteria for anorexia nervosa before they began their maladaptive use of thin-ideal magazines, television and Internet.

J: I was really bad with the bingeing and the vomiting and stuff...

This indicates that this woman seriously rejected her food in the way of self-induced vomiting in the past. This fits in with the purging sub-type of anorexia nervosa described by the American Psychiatric Association (1994).

According to both the American Psychiatric Association (1994) and Garfinkel and Garner (1982), a disturbance in body image is a criterion of anorexia nervosa. The result is that those with anorexia nervosa are not satisfied with their body even though they are underweight. This appeared to be the case for Britney, who had always experienced body dissatisfaction.

B: I just always felt uncomfortable with my body.... I do think that I don't have the perfect body...

Thus the amount of comfort that she had with her own body was very low. Another common feature of anorexia nervosa is the women’s drive for thinness (Garfinkel & Garner, 1982). Even though the women are already slender, they still desire weight loss as Britney’s statement indicates: “And I do wish I was thinner…”

Britney and Catherine admitted to having being diagnosed with anorexia nervosa. This was a past diagnosis that took place while the women were in high school, and their level of awareness of the eating disorder was still low. At present, the women are aware of their eating disorder as it was freely admitted that “I mean, I do have eating issues.” Catherine’s responses fit the restricting sub-type of anorexia nervosa perfectly as the following quotes show.

C: So I used to starve myself and then like do three hours of gym, or four a day, and stuff like that.
The compulsive exercise and starvation had two effects on Catherine:

1) A great deal of weight loss,
2) An improvement in her self-confidence.

According to the American Psychiatric Association (1994), the restricting anorexic realises the desired amount of weight loss predominantly through an excessive amount of exercise and a severe restriction of food intake. However, Catherine also expressed a negative consequence of this type of anorexia nervosa, which is an extreme decrease and eventual lack of energy due to food restriction, as “Yah, I was so tired. I just used to go home and sleep and wake up and do the same thing.”

Williams et al. (2003, p. 129) also found that the anorexic women that they interviewed had “pre-existing problems and vulnerabilities”. A small number of interviewees in this study also already exhibited symptoms of anorexia nervosa before they began to use the media heavily.

_Current Emotional State_

Interviewees exhibited certain moods that seem to exist before they begin to feel insecure about their own bodies.

_B_: It also depends on what mood I’m in, do you know what I mean? Cos sometimes I’m sitting in varsity and fifty really skinny people walk past and it doesn’t even register. And then if I’m sitting there and I’m feeling all like blue and fat and horrible and ugly, and if one averagely thin person walks past it might make me feel insecure.

_E_: Um if I was feeling a bit crappy then I would...Like um...kind of depressed or just feeling negative about how I look.

_Um...like you mean if I had a really bad day at varsity...and then I felt depressed._

The negative state that seems to trigger off pathological eating attitudes and behaviours seems to be indicative of depression. The American Psychiatric Association (1994) identifies depressive symptoms as an associated feature of anorexia nervosa. Dias (2003) also sees anorexic behaviour to be a strategy for dealing with emotional pain.

Britney identified the absence of her boyfriend as the reason for her depression. Concentrating on the issues with her weight therefore acts as a diversion for her real feelings, as she will “rather
just obsess about my weight. And about my looks, so that’s rather an outlet so I don’t have to focus on the other stuff.” Eve said that “a really bad day at varsity” would leave her in a negative mood. These feelings led to their feeling insecure about their bodies and dissatisfied about their attractiveness.

B: So now I’m feeling insecure.
E: You know, just thinking I don’t look nice.

Summary of Causes/Predisposing Factors
Some of the above-mentioned causes are external, meaning that others influenced participants. Their parents, and mothers especially, influenced their feelings on eating directly, by instruction, and indirectly, by their own choice of media used. They modelled their own eating behaviours on their mothers’ and others’ close to them, use of diet techniques and feelings about their body and weight. One woman also modelled her father’s exercise behaviour, and she copied his cycling routine to lose weight. Peers also affected the women, as they compared themselves with the slender, “beautiful” girls in school and university, therefore desiring weight loss. A related external cause is a special event in the form of the matric dance, where the women wanted to have an optimum level of slenderness and turned to the media for weight loss tips.

Another cause that specifically looks external, but actually relates to Catherine’s self-esteem, is her siblings. She felt negatively about her own feelings and capabilities in comparison to her brothers and sisters. Internal causes are those that refer to the participants’ issues with themselves. Two women had long-standing low levels of self-esteem, possibly rooting from their previous experience of being overweight. Clearly some of the interviewees were already at risk for either the purging or the restricting type of anorexia nervosa before they began to use the media in a specific way, as they expelled their food through vomiting or heavily restricted their food intake and exercised compulsively. Relating to this, some of the women admitted to feeling depressed, an emotional state that often co-exists with anorexia nervosa, before they begin to heavily use the ideal-type media.

A number of factors, both internal and external, therefore seem to act as triggers for the women’s pattern of media use. It is important to notice that some of these seem related to each other. An
interaction between causes therefore seems to take place. The women also seem to be able to be more in control of some of the factors than others.

4.4.2 Phenomenon: Heavy Use of Ideal-Type Media

The central “ideal, event, happening” (Strauss & Corbin, 1998, p. 100) is that the interviewees used the media frequently, often in an unhealthy sense to different degrees. Since there were a number of possible ways in which they pathologically and sometimes critically utilised the media that they were exposed to, there were a number of subcategories within the phenomenon, many of which were somewhat interrelated (See Appendix G for list).

Description of Ideal Body Type

Participants identified models and slender celebrities as having a figure in which the body parts are exactly in proportion to each other. When describing the level of proportion of the ideal women’s body, participants identify their body parts as being very neat or well in proportion.

\[
N: \text{Everything is in perfect proportion} \\
J: (..) I mean, her body's in proportion (..) \\
R: They're all very neatly in proportion, even if some are a little bit bigger. \\
\text{All perfectly in proportion, nothing is out of place or a bit fatter than their should be...}
\]

The majority of the interviewees choose models or slender celebrities who possess bodies that closely resemble the ideal body.

\[
N: \text{So it would probably like be ideal I think} \\
F: \ldots but just like flat and toned, thin \\
Yah, well she's rather thin because of her height \\
H: Well, they're all got the same sort of shape. All tall and skinny... \\
\ldots well most of them are the same, like, thin... \\
I: It sounds to me that you're saying thin is beautiful? \\
H: Yah. \\
\ldots it's always got a skinny woman...
\]

It is clear that the ideal body type is the slender one. The description of the ideal as “tall, slender and yet curvaceous” agrees with research conducted by David and Johnson (1998, p. 38).
The chosen ideals for participants, however, vary with regards to their levels of curvaceousness, as some possess a lack of curves.

N: she's got no, like, curve or anything.
C: I dunno, more and more you don't see a model who's got slight curves or you know...

Some models do have a somewhat more voluptuous figure with a number of curves, according to participants.

J: It's voluptuous. They have curves, it's not like a straight figure.
R: some have a very straight and down boy type figures, and others are a bit more curvy...
F: But I like the voluptuous look, you know you've got fat in the right places. Yah, shapely, not like a stick.

So while the voluptuousness of models and actresses vary, one aspect of their body type that they do have in common is their lack of fat, which seems to be a major criterion for the choice of an ideal for the majority of participants.

B: They've got no body fat, well they do have some, but you know, yah they're just thin.
A: They won't have fat mannequins...like the thin mannequins.
H: There's no, like bulges or it doesn't look like she's got much fat on her at all.
R: ...but never kind of fat.

Some women went one step further to clarify what type of women had the ideal body by providing examples:

N: Probably Carrie, but the actresses, all the other Hollywood actresses are so thin as well, so it's like Gwyneth Paltrow, Jennifer Aniston, um, who else yah, Cameron Diaz, that's a huge one.
C: Courtney Cox probably.
B: Or like Cameron Diaz, really, she's a big one.
Um, like Natalie Imbruglia.
F: What's her name? From Lara Croft?
I: Angelina Jolie?
J: (Whispers) Angelina Jolie! (Laughs)
R: Jennifer Aniston, on the magazine (she is on the cover of the Fair Lady in front of her), or um, is that Victoria Beckham? I think one of those two. They're both very, very thin, and um, everyone's idea of what is attractive.
The female celebrities who the women have chosen as ideal seem to have similarities. They all have a high level of slenderness. Besides the small size of the ideals, Nicole and Britney directly admit to celebrities having a high level of impact on them, with comments like “that’s a huge one” and “really, that’s a big one.” The question that remains is what body characteristics do these actresses and models have in common? The interviewees describe the various body parts of ideal women as depicted in the media as follows:

\[\text{N: I think she has a tiny ass and a little waist as well um I think that’s probably the hugest and the thin thighs as well yah.}\
\text{Yah, see, they’re also, like look at her arms, they’re tiny.}\
\text{I think it’s like mainly their waists, yah, and their thighs as well. They’re like, not very thick at all. And here as well, she’s like thin-thin, and has flat stomach.}\
\text{C: No, well I love that part. The collarbones and the hips, the hip bones sticking out there and the collarbones sticking out.}\
\text{B: Um, I like her shoulders, her arms, her boobs, her stomach.}\
\text{A: Her stomach... She has a flat stomach.}\
\text{Small waist I like this [hip bones, collar bones], flat stomach.}\
\text{G: Well, she has a nice figure, and boobs...}\
\text{H: Yah, they’ve got these perfect flat tummies, big boobs.}\
\text{R: Um, but I think especially her stomach, it fits in with the article and for me, that’s one of my personal complexes so to me that’s more what I’d be looking at in this.}\
\text{...but here I would be looking at their legs first and then there probably as well [stomach area], and even their arms being stretched out there as well.}\

The above quotes suggest that the participants concentrate intensely on, almost analysing, certain slender body parts of celebrities. Interviewees concentrate on a number of ideal women’s body parts because they are not just concerned with one slender body part, but on the ones they themselves have issues or “complexes” with. Catherine and Anne found protruding bones to be particularly attractive. The higher the bones’ level of visibility, the more attractive they are found to be. Participants also notice that a high number, often “all” models or celebrities have slender body parts. This provides evidence for these women’s repeated, voluntary exposure to slender celebrities.

The perception that thin is the ideal is reinforced by the fact that almost all women prefer thin models to heavier ones when shown photographs of both models. This is a voluntary decision, not only for the majority of interviewees, but also for “anyone”, as the following quotes show:
N: Which women? These definitely [the thin ones]
C: These two [indicates the thin models]
I: So you prefer these to these [larger women]?
F: Yah, but I think anyone would, realistically, even if they say they wouldn’t.
A: Those two are attractive more [points to thin models].
G: Ok, well these two definitely...
H: Well the women at the top.
I: So you prefer the women at the top [the thin women]?
H: Yah.
I: Ok, so say now you had to choose between those two pictures? [the thin models and the Guess models]
J: [Points to thin models]

There is a definite contradiction with Jemima’s responses. She earlier describes an attainable, voluptuous figure such as “Beyonce...and say Jennifer Lopez” as two of her ideals, but then prefers the extremely slender models’ appearance and chooses a similarly slender woman as her ideal. She says that a vital quality of a model is that “they mustn’t be too, too big”. Eve, however, perceives the epitome of female beauty to be a “round” shape and “she’s got a full body she’s got a big bosom and big buttocks and thighs”. The level of slenderness for her ideal is low in comparison to the other interviewees because for her, roundness was a necessity.

While the slender body as described above seems to be the primary aspect of the ideal women, there seems to be other features that “fit the stereotype” according to one of the woman. Ethnic identity is one of the defining features, as the women chosen as models are predominantly white, as noted not only by the coloured interviewee, but also by one of the white women.

N: Definitely, I mean there are a couple of magazines with the cover of black girls but also like very, very thin, pretty, stunning skin But it’s usually white women, usually blonde hair...
J: They hardly ever show black, or people of colour. It’s usually white models.
To be thin and then light-skinned, then you will get to be, you get the exposure and you get the attention man.
...and attractive is light of complexion, you’re thin...

The thin ideal is therefore predominantly white, and it seems that the results indicated similarly to Botta (2000) that media are mainstreaming black young women towards the ideal of beauty
portrayed by the media. Snow and Harris (1986) also confirmed that the number of black models in magazines is decreasing, and that white models are the majority.

While white models and actresses are perceived to be the ideal, it seems imperative that they have a specific skin type. "Stunning, smooth skin" is necessary whether the model is white or black. According to participants, white models should have "tanned" skin.

Height is another criterion for the ideal. Interviewees perceive all models as "tall". Another criterion as suggested earlier, is the ideal women's hair. The length of hair is an issue, as most have "long hair". The hair colour of ideal women also seems to play a role, and while not all ideal women are blonde, most do have light hair. The facial features of ideal celebrities tie closely with their thinness and defined body.

\[ N: \text{Yah, yah, like her bone structure, definitely. She's got high bone structure, like very defined nose as well. Like, very like, yah.} \]
\[ H: I\text{ suppose they have high cheekbones and their jawline. Like, thin...} \]

The above quotes indicate that the chosen ideal celebrities' facial features are prominent. The fact that their bones are well-defined indicates that their faces are slender in a similar way to their bodies.

Admiration and Criticism of Females Depicted in the Media

While it is somewhat expected for females with high exposure to ideal-type media to prescribe to the stereotypical image of the ideal woman, the interviewees express an extreme appreciation for the slender celebrities depicted in the media. Firstly, being slender is often associated with having a perfect appearance.

\[ N: \text{...she's got the perfect body.} \]
\[ R: \text{You're gonna choose models for a magazine, especially swimsuit who have basically flawless figures.} \]
\[ They're pretty much perfect, um, good figures, pretty faces, the whole thing... \]
\[ ...there's the whole idea as well that they're perfect. \]
\[ F: They're all anorexic and perfect and that. \]
While Nicole and Rachel believe that those celebrities that receive much media attention have achieved perfection with regards to their appearance, Fay discusses perfection with anorexia nervosa interchangeably, in a decidedly unhealthy manner.

Perfection is not a prerequisite for those celebrities that are not in the foreground. For example, the MTV dancers are considered to be imperfect, but this is acceptable because “The dancers I don’t think look so perfect because they’re in the background, aren’t they?” However, Rachel still finds them attractive “so I think the dancers have to look good, but I think the dancing is a little bit more important, and they obviously look great but I don’t think nearly as perfect.” Extreme slenderness is undoubtedly the asset belonging to models and female celebrities that is participants most admire:

F: Yah, well she looks like she’s got a good figure, you know. She’s got a good body.
She just looks thin everywhere. Like here, very thin.
B: She’s kind of, she has a really good, nice body.
They’re thin.
C: No, it’s just everything. Her whole figure.
N: Yah everyone there is stunning absolutely...
R: Um, the thing with me is that I don’t really concentrate on one part, the whole package must just be thin.
H: ...she’s just, got a gorgeous body... Everything really.
G: ...really attractive and skinny. Yah, they’re beautiful.
...and she has a really good body.
A: She’s good a nice figure, a very nice figure.
"...but her figure’s attractive.

The above quotes indicate the interviewees’ appreciation of ‘model’-type bodies. Not only do the women find extremely thin female celebrities and models very attractive, but thinness is also seen to have a big influence on the attractiveness of celebrities. Some participants also identify specific slender body parts that they admire.

F: When I was younger, like this, the collarbones used to irritate me, but now I think it’s quite nice. I dunno, her hipbones are like, sticking out.
Fay seems to have a contradictory opinion about the visibility of models’ bones. She seems to appreciate protruding collarbones, but seems to dislike protruding hipbones. Other body parts that women admire are as follows:

B: Yah, well, I think her body’s nice. Um, I like her shoulders, her arms, her boobs, her stomach. Her legs are maybe a bit big, but they’re quite nice.
N: ...the beautiful legs, you know stomach everything...
A: ...her stomach...

The “sexy” appearance that these women admire also has to do with additional features of the ideal women. Participants find them striking, as the following quotes suggest:

F: I mean, she’s beautiful.
B: I mean she looks hot. I just think she’s sexy.
C: Because they look beautiful...It’s more like (sigh) they just look so beautiful...
N: Her face is also really stunning but I mean it’s the whole body thing. ...They [thinner models] just look a lot prettier...
E: ...she looked beautiful.
G: Her face is pretty. It’s nice as well.
Yah, I mean all these models [thin models] are beautiful...
J: Yah, her face. Yah, she has that certain quality, you can’t say ok, this is what makes her beautiful, it’s just something about her.
H: Well they’re all pretty.
Um, but they’ve got Brooke Logan and Taylor, like one of the most beautiful women in the world...
A: She’s pretty.

Firstly, it seems that participants admire these ideal women’s high level of beauty. Models’ and female celebrities’ faces seem to be of secondary importance to their bodies, as being slender is seen as a bit more important and plays a more influential role in overall appearance.

N: ...and I like her hair as well...
E: They’re always neat and groomed. Their hair is always nice, their, they don’t ever wear too much make-up so they look kind of real.
G: ...like she always has nice hair

Secondly, women perceive the ideal woman to be well-groomed, which adds to their attractiveness. Approval of hair originates from the fact that it is well looked after and styled.
The make-up worn by ideal women is another contributing factor to their attractiveness, because it appears that only a small amount is worn although a big effort is put into grooming.

Ideal women also possess certain personality characteristics, or at least their characters do. Rachel and Eve admire the high level of confidence displayed by attractive women. Gail admires a certain actress’s independent characteristic, as she appears to possess strength. She further admires another favourite character’s interest in love, as it is important to her as well.

R: Um, confidence
E: ...it’s a woman who looks confident...
G: I like Amber because she doesn’t take shit from anyone, not even from the Foresters. She is a tough cookie, and it looks like she doesn’t need a man. Ok, she is married to Rick, but it’s like, she can definitely cope without him and she doesn’t take shit in the end. Liz is the kind of girl who is willing to make an effort. She is willing to take a chance and to be adventurous, especially when it comes to love. I like that...

This seems to be an example of the halo effect, as participants extend other positive characteristics to attractive celebrities because of one quality—their looks. A previous study’s findings indicate a similar attractiveness halo effect, with photographs, with participants perceiving more attractive individuals as more honest (Zebrowitz, Voinescu & Collins, 1996). Another study found that the halo effect was contingent on women’s weight, as participants awarded slim white women with higher life success, overall attractiveness and personality ratings than heavier women (Wade & DiMaria, 2003).

While the interviewees clearly admired the majority of the ideal women’s appearance, they also criticised certain aspects. The criticism directed towards the ideal can to be divided into three types. The first is genuine dislike of the extremely thin, almost emaciated appearance of ramp models by some of the participants.

F: It’s just, like unhealthy.
B: Um, she looks good but I think she’s a bit thin. That’s not because of the picture that’s just my idea of her, she’s a bit thin. I don’t like, I don’t like Posh Spice, I think she’s too thin.
The catwalk look...Horrible. Yah, awful... but in reality they’re just too thin.
E: I would still think they were too skinny though.
...and these women are too thin.
They’re now getting just painfully thin, that’s not normal for me... It would make me feel better if they were more normal, kind of thing and they’re not.
...and like now, with the last series that I watched they got incredibly skinny. It’s actually quite shocking how really skinny they got.
...like all her muscles were like really thin and standing out and it was quite shocking because she was in a Leotard and I actually got quite a fright..."
H: Like on FTV, you see all these people walking up and down this ramp, and they’re literally like skin and bone.... They’ve always got these very drawn faces and maybe it’s just the way they’ve been made up...but they always look sickly.
J: So, but in this picture you see bones [referring to thin models] and that’s also not nice. ...but showing this you see the ribs and the hiphbones and stuff [other thin model].
...but I don’t think she looks nice here (laughs). A bit too thin, yah.
G: But sometimes she looks too thin. I don’t like it when she looks anorexic you know?

These participants think that specific slender women, mainly the ramp models, have an unhealthy appearance. They acknowledge that the size of certain celebrities is too thin. Britney, however, gave a somewhat contradictory response about the unattractiveness of ramp models. While she firstly admits that she does not find them attractive at all, she then finds them attractive on the catwalk, as their body is suitable for their job: “I mean clothes look really nice on them and they look good on the catwalk.” Eve even believes that the size of these women is abnormal. She has been shocked by the extreme weight loss of more than one celebrity.

The second type of criticism seems to act more as a rationalisation for the interviewees. The criticism is aimed at celebrities’ and models’ faces, and not at their bodies as indicated by the following quotes:

F: I actually don’t think she looks that great, but anyway...
I don’t think she’s nice at all.
Not that she’s got an ugly face, but I don’t think she’s that beautiful. I think she’s pretty normal...
I just think she’s ugly.
B: Her face is alright.
She’s a bit, not the kind of person I, I mean she’s pretty, I dunno, I don’t think she’s that pretty. I mean, she looks good there because, like, I dunno, there’s just something about her face that makes it not that striking. I think it’s because her features are a bit...
...but she’s not perfect..., but I just don’t think her face, it’s not perfect. Jaw or something, I dunno, anyway...
...they often look kind of manly, you know, and sort of.
...a lot of them because they’re so tall and they’re so big, and you know, they’ve got such strong features to look good in things...

J: Like, if I had to see her in the road today, I wouldn’t even know that it was her, I wouldn’t even look twice maybe, she might look that ordinary.

...or that one has a funny chin, you know.

G: But the girls were watching it as well, but they were saying things like do we have to watch this, and she is not that pretty in real life.

A: Yah. Well, I don’t think she’s like that pretty, like her face...

These quotes indicate that these women believe that some of the women who are regarded as the most beautiful women in the world have a mediocre appearance, and are not altogether attractive. However, some of them indicate that a large number of women who are exposed to the ideal, “need to like say that”, presumably to feel better about their own appearance.

Finally, the last type of criticism is somewhat expected. Participants insult what they perceive to be the larger body parts of female celebrities and models.

F: Her legs are like, they don’t have shape...No, they just straight, there’s no shape.

B: Her legs are maybe a bit big...

N: Jennifer Lopez and the whole thing is that she’s got such a big bum... but she’s got a huge ass...

E: Like we would have said ooh, no this is too big, something like that.

Or if I’d seen a certain celebrity had gotten really, really thin or really, really fat then I would have said, wow have you seen, Jennifer Lopez had gotten fat or something.

H: On Friends there’s always like this play on the fact that Monica used to be this huge, obese girl... because she was fat.

J: Like I said, I also do that, like I’m thinking with Beyonce, and I see her and say ok, well she’s getting a little bit fat.

I think when I went to Alicia Keys, her gallery, I saw that she had round thighs

G: ...and then I didn’t really like the way she looked then...Well, she had funny ankles back then!

...but her stomach and legs are not that nice hey.

The above quotes show that the women concentrate on and dislike the body parts of the ideal that are of a larger size, or are more shapely than other parts. What is of interest is that the majority of women who criticise larger body parts or weight gain of celebrities are also those who criticise the extremely slender ‘ramp model’ type of women. Thus the ideal of being curvaceous yet slender still seems to reign for the interviewees. Admiration for ideal women portrayed in the media is in agreement with the findings of Becker et al. (2002). Her findings indicate prevalent
admiration for characters on television regarding their body type but also for other factors such as their hairstyle.

(U)nattraciveness of Heavy Models

Admiration for ideal women is often coupled with a lack of admiration for heavier models’ appearance. The advertisements seem to trigger off a discussion about these models’ unattraciveness. The majority of women find larger women unattractive due to their size.

F: obese, you know, like really fat, like huge, yah just really big, like their thighs are like this (indicates fat thighs with her hands), something like that.
A: Yah, I dunno. But I think she’s fat, I dunno.
N: They kind of all over, not overweight but they are all slightly larger than normal.
G: They are not really that attractive to me as they’re a bit big.
I: So don’t you find the other women attractive at all?
C: No (laughs) because they are slightly large.

Since the majority of participants do not find the larger models attractive, it makes sense that they do not aspire to obtain their figures. In fact, they have an aversion to weight gain.

F: Well, I wouldn’t like to look like this, personally. I mean I don’t like that look specifically.
R: That’s just not something you strive towards, their, well figure...
A: I don’t have, or I don’t want a figure like them (laughs)

Participants provide various reasons for the dislike of these women’s appearances. The visibility of heavier women’s fat is one of these:

J: I think the thing I don’t like about, being heavier is if you move your body you tend to see fat.
Like cellulite and folds and rolls and all of that.
People mustn’t start to say, haai, she’s got big hips and gees, did you see her stomach and did you see the flab under her arms.
F: ...like their thighs are like this (indicates fat thighs with her hands...)

Another reason given is the health risk of being overweight: “It’s unhealthy to be overweight.” Fay believes that it is a necessity for overweight individuals to lose weight “so they should be looking at ways to lose weight, for the health reason.” Heavier models also do not seem to enjoy
their modelling shoot as much as slender models. They appear “just much more passive” and “they don’t seem to be enjoying themselves” as much as the “thin models”. They also seem just to be “posing” for the shoot and are not seen as spontaneous. A final common reason for the unattractiveness of these models is their unfashionable clothing.

B: ...wearing really crap clothes.
R: ...and they’re in less trendy clothes and they’re more covered up and it’s just if you are that size then you should be covering yourself up more which I think you would be...
N: Yah all their clothing is hiding like they kind of all over...
G: ...maybe because I wouldn’t wear the clothes...
E: ...so I mean the Donna Claire women at the bottom look like they are wearing more older women’s clothes...

The women do not seem to be in the right target bracket for these clothes, and especially dislike clothes that conceal their bodies so much, even though both Rachel and Nicole seem to believe that all-over concealment is somewhat necessary for heavier models to “hide” the fat. The majority of the women are unable to relate to the size of large models and therefore do not find them attractive. They do, however, have specific beliefs about who will find these heavy models attractive.

R: They are, that’s obviously a range for bigger women and um, I suppose it could appeal to some people, with a bigger figure, but not to me, personally...
A: But like overweight women will find these attractive. Like, so cos they can relate to them.

This seems to be the case to a certain extent. The heavier participants with body issues admire certain characteristics of larger models and celebrities, but the main assets that they appreciate do not really relate to the body. Heavier models’ possession of confidence shows this:

E: You have to be comfortable with yourself to allow yourself to be taken photos of you...
J: Even though, these women are heavier, [large women] there are things that I actually admire about them. They look good, they seem (.) confident, cos I mean to be in a magazine you have to have a lot of confidence. That’s what I admire in them.

The heavier model’s content with themselves and their size was also a desired characteristic as Eve believes that “they look comfortable and yah, comfortable with themselves and happy with themselves and they’re doing modelling.”
Previous research has also found that women associate negative characteristics with being overweight. Spillman and Everington (1989) found that subjects associated overweight people with being a slopy dresser, stressed, depressed and unsuccessful. Kaufman (1980) also found that obese and overweight television characters were associated with similar characteristics.

Models’ Satisfaction with Life and Appearance

The majority of participants begin to indicate their non-critical consumption of the media here, as they assume that slender celebrities are content with their lives. Firstly and foremost is the assumption that models enjoy their modeling shoots.

H: They look like they’re having a lot more fun…
R: ...they look really happy... like they’re enjoying themselves...
In that [thin photos] they look happy and they’re having a good time and that’s a good life.
...yeh and they’re all jumping around there, um... and energetic...
...and you want to you know, be a part of that.
E: These women look like they are having fun... These women are enjoying their, themselves.
A: ...looks like they’re having fun.
N: Um because they look like they are having more fun...
C: Like if you watch the interviews on that EPTN or whatever, I dunno, when she does a film, it just seems like she well, they have so much fun you know. That’s just the way they are, they’re all vibrant and boisterous and yah.

These quotes suggest that models and celebrities both enjoy their jobs and appear to have a lot of fun. Britney is aware of the models’ actual feelings about the shoot because her boyfriend is a model. She believes that they are not really happy, indicating a more critical attitude. The interviewees also compare the slender models’ enjoyment of their job with the larger models’ job dissatisfaction, and they perceive the larger models to dissatisfied with their job and with life in general, as “they look miserable” and do not “look like they’re having as much fun as them (points to thin models).”

It seems that not only do slender models and celebrities enjoy their job, but also that they are more content with their lives in general.
H: It's just that they're so completely outrageous and they're having fun all the time and they appear to just do whatever they want to do...
You always see her on TV, like happy endings...
R: ...and the fact that they seem so happy and having a good time...
N: They look happy
Fun, freedom yah...
Well, they look like, really chilled, yah
C: ...and she looks very fun loving...

Interviewees perceive ideal women as fun-loving, content and happy with their lives. They appear to be relaxed and have a large amount of freedom. The reason given for the ideals’ general contentedness is their satisfaction with their body type and overall attractiveness.

H: ...because they are beautiful and young and sort of living in San Fransisco and they can get away with anything.
Um, because everyone's beautiful you assume that they've got these relationships because they're beautiful.
E: ...as comfortable as she looks like she's feeling...
A woman who looks like she's having fun in her body, um...
A: It's like my one friend, actually [F], she used to work at Cacuccio's restaurant, and apparently they only hire waitresses if you're thin and you're pretty.
N: Yah, they all look really happy, and I don't know, I think that they would be really pleased with themselves, because they don't have the extra, whole thing [of extra weight]. But I mean, look at her, she's smiling, I mean she's really happy, [referring to a picture on her collage] because she's thin, well, that's what I...

Basically, as indicated above, participants believe that the ideal woman has no limitations with regards to their activities due to their attractiveness. Anne actually has first hand experience of the priority of ideal appearance in the attainment of certain jobs, as being “thin and pretty” are prerequisites. Becker et al. (2002, p. 511) also found in their study that television provides slender role models “concerning work or career issues”, and the subjects felt that weight loss would increase their chance of obtaining a career and success.

So how do these women believe that this works? The majority of participants believe that being attractive actually increases the self-confidence of ideal women.

C: She's more like confident, she comes across to me as more confident than Jennifer Aniston. She looks very confident...
B: Yah. Well more also they just look much more confident than they do, cos they're jumping and shouting.

Some participants do believe that ideal women have to put some effort into maintaining their perfect, slender appearance:

H: ...but they've got personal trainers and train like two times a day, and um, I'm not quite sure.
G: You can see that Jennifer Aniston works at it. Well, like she has to work hard to get that body.
J: Then all of them have a physical, a personal trainer and they eat less and they follow strict diets to look like this.
They all look like they have to work really hard to keep that stomach flat.

Only a few interviewees therefore believe that celebrities and models have to do a certain amount of work to maintain their appearance. However, two of these women are not certain about this. Only Jemima is aware that celebrities modify imperfections in their appearance using the above-mentioned methods, and are able to do this due to their financial ability to spend money on weight loss.

Behaviour and Consequential Inspiration

Some of these women identify pictures of the ideal women that are often the focus of the media as an inspiration for thinness, as they believe that "anyone would aspire to that". Their past practice with these pictures, namely searching for slender women in magazines and them cutting them out, has been somewhat unusual:

C: Mm, I used to do that a lot.... cut it out...
I used to go through a magazine and find every single thin person I could find and then stick it on my walls and my cupboards.
Whenever I'm in my room or like I used to put it on the fridge as well.

Catherine therefore used to regularly cut out pictures, but would also make them as visible as possible by pinning them up to various surfaces. Nicole actually brought the poster of magazine pictures that she has pinned up on the inside of her cupboard along to show me exactly what it constituted:
Nicole actually provides examples of the type of women that she chooses for her collage, and
they all have a very slender as opposed to curvaceous body, and are not wearing much clothing.

Rachel also cuts out pictures of models, but extends her behaviour to weight loss tips:

    R: But it seems I'll try to print or cut something out from it...
    No, I'll cut things out occasionally but I'll keep them somewhere. I don't like them lying
     around
     ...more for the fact that it looks odd if other people see it, but if I knew nobody else was
got to see it then I'd put it up, but um, no.

The difference between Rachel and the previous two women is that her pictures are more
concealed, as she is concerned about others' reactions to the pictures that she cuts out. This is
also a possible explanation for the pictures not providing much inspiration for weight loss as
"seeing pictures of beautiful women as well, it doesn't inspire me". These pictures act as a
motivation for weight loss for the other two women:

    C: Just to like, keep me going, yah about my weight.
    Well, it was like a motivation to keep me, yah, not to, well to diet. I would look at the
pictures all the time...
    N: Yes, so that every time I see it, then, um, I'm kind of reminded of what I want to be and
then that will like, stop me from eating the extra chocolate or, yah.
    Um, well, it's been on my cupboard for so many years I've kind of lost the motivation
now but at first it did help, because every time I looked at those I was like, uh (makes
shocked noise), ok, I'm gonna keep fit, I'm gonna lose weight, lose, lose lose.
Effectiveness? Yeh, yah, but if I put new pictures on of different people, I'd probably be
like, a little bit more, like, inspired.

While these visible pictures were previously effective for these women, due to repeated
exposure, the motivation to lose weight decreased. However, replacing the old pictures with new
ones renew inspiration for the participant.
These findings concur with Thomsen et al.'s (2001) study with anorexic outpatients who reported similar behaviours. Their practice included placing the cut-outs in files, scrapbooks, on bedroom walls, refrigerators and doors. Ideal women that were chosen were also extremely slender models and acted as motivators for the anorexic women’s achievement of this body type.

**Comparison with Female Ideals**

The women admit to often comparing themselves to the ideal women depicted in various media sources, as Anne who says that: “yah, it does a bit. I’m always looking at other people, at their figures.” On the other hand, Fay is not always aware of her comparison with models as it is on a subconscious level but she is aware of the large role that magazines play in her comparison. The following words also show that she believes that media sources affect all women:

> F: Yah, but obviously you can’t help looking at the people in the picture, not that you necessarily want to be like them, but subconsciously you can’t help thinking, well you know. I do look at them...
> And if it’s subconscious, you won’t know, so you can’t admit it.
> I think it’s in everyone’s mind, thinking this.

The interviewees’ comparison with ideal women results in their awareness of their dissimilarity to models and female celebrities, as the following lines indicate:

> E: I would probably look at it and go wow she looks really lovely but I don’t look like that...
> I won’t be able to get into a bather like that and appear as comfortable as she looks like she’s feeling...
> G: Well, no not really. I mean, I don’t look like any of them at all
> Well, she is older than me but she has a better body
> C: It’s more like (sigh) they just look so beautiful...so when I look at them, and I know what I look like it’s like a huge difference.
> J: ...ok, this is what I’m supposed to look like, to be like, and and and, it’s not.
> R: Um, I think it’s a nice bikini and I’d like to be able to wear that but I wouldn’t because, I wouldn’t try, yeah. I wouldn’t look anything like that in it...
> ...you’re faced with somebody with so much of a better figure than yourself in it...
> N: You know, and then you kind of look at yourself, and there’s no way, like I’m nowhere near there...
The participants’ comparisons to actresses and models make them feel that they have an inferior body type, even if the ideal is older than them. For Rachel, comparison heightens her own complex, as she perceives her stomach as fat: “Um, but I think especially her stomach, it fits in with the article and for me, that’s one of my personal complexes so to me that’s more what I’d be looking at in this.” Participants also feel that it is impossible to have the same appearance in clothes that are modelled and shown in the media, and that they are unable to fit into revealing outfits.

Gail and Britney admit to comparing themselves to ideal women, but the level of comparison is not as high as the other participants. The reason that Britney gives for her lack of comparison with women depicted in magazines is the difference in medium between “the magazines and me.”

\[G: \text{...but I don't normally compare them to me.}\]
\[B: \text{So like, you don't, well I don't like really compare myself to a magazine, you know a picture.}\]

These findings fit in well with the social comparison theory, as these women use the ideal images depicted in the media as benchmarks against which they evaluate their bodies (Waller & Shaw, 1994). Once women do not match this ideal, they view their own bodies negatively (Wegner et al., 2000). Thomsen et al. (2001) also found that the anorexic patients in their study predominantly used glamour magazines for comparison and self-evaluation. The subjects also expressed a surprising familiarity with a number of models, being able to identify them by name.

**Identification with Models and Actresses**

The interviewees in the current study also express familiarity with certain ideal women. Firstly, they express a personal reference to certain models. These quotes indicate the participants’ awareness of the admired women’s names:

\[N: \text{Um, cos I think, Kerry is like more the ideal...}\]
\[H: \text{Jennifer and Brad, and the perfect couple, the most beautiful people...}\]
\[G: \text{Kerry McGregor-because she went to our school and we know her.}\]
\[A: \text{Joey}\]
Only Catherine does not appear familiar with a South African model: “Any model? I don’t really know all of them by name. There’s also one with brown hair, I don’t know her name.” Gordon (1990) also adds that the media may encourage identification, even glamourising the self-destructive behaviour of anorexia nervosa in magazines and on television.

Eve mentions a “personal involvement with them, even though you don’t know them,” which is going one step further to just knowing female celebrities by name. She also admits to enjoying this personal involvement:

E: *It is kind of, when you’re watching a TV programme you get personally involved and it’s something you enjoy...*

Not only are participants able to identify models and actresses by their first name or character name, but they are often able to relate to celebrities for certain reasons.

C: *It’s just I dunno, maybe it’s because of the brown hair I’m more...*
N: *I kind of see maybe a little bit of myself in her.
And Charlotte, I like her because she’s innocent and she’s naïve...*
...and she’s quite short as well so...
H: *Like, sometimes it’s completely bizarre but other times it’s like, like I’ll be exactly the same as one of the characters on screen...*
Um, I might try and cover it up like she did
J: *Cos, but how I see it is if I see her or one of the big, the little bit bigger girls picking up weight I’m like, they’re actually real, like look there, they get fat like I also get fat. She’s, she’s short.*
J: *I also sometimes feel like that, and () she was also on the outskirts and didn’t quite fit in, yah. And I feel in that way that’s one of the very little characters I can relate to.
B: *...but she’s not perfect. So you kinda feel, um, like an affinity to her.*

These women seem to have an affinity to certain ideal women due to similar physical characteristics such as hair colour or height. They also seem to relate to celebrities’ apparent imperfections with regards to their appearance, such as their weight fluctuations and fat body parts, as they obviously perceive their own appearance as imperfect as well. Rachel believes it is easier to relate to unknown cover models, as they are more likely to be “a normal person.”
G: She’s a bit of a dork really.
Yah, I do, and sometimes I can identify with her...
A: Yah, Joey’s like this shy type, innocent girl.
B: Um, I suppose maybe just like that kind of fun, happy, ditzy sort of.

The above quotes show that these women can also identify with certain personality characteristics of ideal women, or with their characters at least. However, they seem to identify mainly with their more negative personality traits, such as being naïve and a bit awkward.

Reassurance of Participants

Comparison to ideal celebrities also leads to the utilisation of the media as reassurance for their own appearance. Interviewees identify a lot of jealousy of slender celebrities, because of their inability to reach that size: “I dunno, maybe they’re jealous if they’re a lot bigger than them and they can’t get to that size.” They therefore have to vocalise the imperfections of models’ appearance in order to gain security about their own appearance.

J: Like if it’s like women of the year or whatever, it’s like, no this one’s legs is not nice or that one has a funny chin, you know. Just to make themselves feel better about who they are, about what they look like.
G: ...and she is not that pretty in real life.
I: So they were justifying why they look like they do?
G: Yah, they do.

Judging ideal women as not totally attractive therefore acts as justification of their own appearance. Other interviewees use family and friends to reassure them, like in Thomsen et al.’s (2001) study. Once the realisation occurs that models have a superior appearance, discussion turns primarily to boyfriends, who are asked to simultaneously rate models and reassure participants about their own attractive body parts.

R: I’ll want my boyfriend to come over and look at this picture: What does he think of it, how will I look in that outfit-will I look completely awful compared to this model, and it normally turns into quite a thing, where we’ll sit down and carry on paging through all the fashion models.
...and how nice does she really look and I’ll have him rating all of them...
It’s a kind of reassurance thing as well, if I find a picture of someone I think is extra specially thin, I get someone to reassure me that um, but they have this thing wrong with them instead, and this is better about you.
My boyfriend is more likely to be reassuring so he’ll point out oh, look how ugly she is in this particular way or like how much nicer this part of yours is compared to this part of hers.

B: But I mean, I have all this because my boyfriend’s a model and he’s working with all these women all the time so I’ve really had to kind of adjust myself to think, well he loves me and it’s ok.

H: ...and he’ll just sit through the whole thing and say oh, she’s beautiful, she’s beautiful, but he thinks she’s beautiful and I know that he knows that I’m beautiful too...

Rachel turns to her boyfriend for reassurance because “he’ll um, he knows it’s a bit of a sensitive topic for me.” Her mother, on the other hand, does not provide reassurance since she perceives the models to have a superior appearance “and then we’ll get onto a conversation about how inadequate I am compared to, how fat I am, how awful I am, this part is of.” She also expresses to her daughter her belief in their inability to attain a model’s appearance, as “oh yes, we’ll never get like this...

Reduction in Cognitive Dissonance

Cognitive dissonance is a term coined by Festinger (1964), the pioneer of social comparison theory. It can explain individuals’ participation in behaviour that may be dangerous to them, such as anorexia nervosa. Women are aware of these possible dangers, and must therefore distort reality to achieve their primary goal, that is, weight loss. Thin-ideal media therefore assist them by portraying messages that help them continue with their disordered eating, even though other sources such as family and friends express extreme concern over participants’ eating behaviours.

N: Well, my mom was like, you better start eating, you know don’t stop eating. She would get quite, like moaning, start moaning about it.

C: Um, my family, they were like no, Catherine, you’re a fantastic person, you’re this and that, you don’t need to. That just started to make me feel guilty so I decided to stop.

People would you’re too skinny, my parents would be like that, yah.

Catherine also adds that her parents’ concern made her feel guilty about her disorder. Others also noticed her small size, and perceived her as extremely thin. This is similar to Thomsen et al.’s (2001) findings that family members and friends told the anorexic participants that they were too thin and even pleaded with them to consume more food, while the media promoted
slenderness and even gave them tips for weight loss. For Nicole, however, both friends and the media played a role in reducing cognitive dissonance:

N: Probably the magazines, like going yeah, I'm starting to look like this, that's cool, that's good. I guess if you could call that support. But friends, especially the guy friends would comment like wow, you've lost so much weight, you're looking stunning. The girlfriends also, my friend would say, aah, you've lost a lot of weight since standard nine, you're so skinny, so I would kind of get support from them as well.

For Catherine, glamour magazines do more than simply promote the ideal as they also contain diet articles for the use of readers, and therefore provide instruction for her desired weight loss.

C: There was this article in Cosmo, it must have been last month and it was on this whole dieting technique and stuff like that. So there must have been a few articles in a row and like what you should do, and then you know, body mass index and then they have pictures of all these stunning people... And if I read something, I like carried on reading and I was like no, but guys, this is how you should do it, this is how you should lose weight and to look like that this is what you should do.

Friends play a similar role to those in Thomsen et al.'s (2001) study, discouraging exposure to magazines, as they know it will have negative consequences for the interviewee. They command that she ceases her exposure to certain articles that promote weight loss:

C: ...and my friend's boyfriend was reading it and I quickly lent over and I was like, please can I see that, please can I see that. So then I like grabbed it, and everyone was like stop it: don't. So they were like, we don't want to hear it.

Critical Consumption of the Media
The subjects in this study are all intelligent university students with the majority of them having done at least one advertising course. They are therefore aware that some aspects of ideal women are doctored, but they mainly perceive this as the concealment of flawed facial features:

C: And like pimples, or face or anything it's just the make-up.
J: ...because I mean, it's that make up that makes them look like, () these people who want to look like them.
And and the make-up, the complexion: you have to have that bronzy colour.
F: Their makeup and hair and that, not like they get up in the morning and look like that.
B: ... so I know that they don’t actually look like this. Um, and when you look at their portfolios compared to what they look like, it’s very different.
Yah, and when they don’t have all their makeup on then they don’t look as pretty.
E: Of course these pictures are doctored... they have like perfect varnished skin...
A: Like if they’ve got a slight flaw in their skin, or a pimple some of them, then it will take it out.
Like the tone, the tone of their skin, like they make them look healthy, like you can see the glow on their cheeks.

Participants therefore believe that make-up plays a major role in the models’ facial attractiveness. They are also aware of other techniques used to improve the appearance of models in particular, such as computerisation: “It’s computerised. She’s probably computerised as well”. Airbrushing is another popular method of changing the texture of models’ skin, as “um they probably airbrushed it and just made it look smoother…” and “the people are airbrushed, their skin is always airbrushed and perfect.” Various other techniques are used as well, such as lighting, the role of a tan, and the low angle of the camera to increase height.

F: Well you see the lighting...
... and the tan that she’s got. If you’ve got more of a tan then you tend to look a bit thinner, maybe, and the suntan lotion and it’s fake tan that they use, so.
And the camera angle, I mean because of the low camera angle she looks taller and that,

The majority of the women recognise that magazines do not represent reality, but they do not want to acknowledge that the models or celebrities’ bodies have been modified as well. They instead choose to believe in the stability of their bodies, perceiving them to be identical in the media and in real life.

N: ... but I think the whole shape or whatever is the same.
G: She is another natural beauty.
J: Her body shape would, would probably be the same...
F: She’s probably thin in real life, I mean, I’m not saying that...
B: I mean they still have really good bodies
I: Ok, and their figure, do you think that they change that at all?
A: No, not at all.

While these participants do not think that the models’ figures have been modified at all, a small number of participants seem aware of some type of modification. Gail admits that this acts as
reassurance for her own body: “But then I think about it and tell myself that she is not real, well her body is not real, and her stuff is probably fake.” Otherwise, Catherine has a close association with a fashion magazine editor, and he lists the following as techniques that he utilises to improve body appearance:

*C: and he always says to me that people have got cellulite, you know they’ve got thicker legs but he does it, he does what he does, and he makes them thinner. He like shades them so it looks like it’s the shadow instead of the actual leg.*

Eve provides evidence for possible change in the level of critical consumption. Her previous belief about a certain celebrity’s appearance in a magazine was: “last year I would have looked at it and gone wow Jennifer Lopez looks so lovely you know, wow she looks lovely and I would have thought uh you know it is kind of airbrushed but I would still would have thought this must be how she looks.” She is now aware that airbrushing is the technique used to decrease the size of celebrities’ bigger body parts: “lets take Jennifer Lopez for instance. She’s got a full body, she’s got a big bosom and big buttocks and thighs, but in these magazines they would airbrush it away so it looks like she’s got twig legs and no backside.”

*Cognitive Response to Diet Advertisements*

The interviewees seem to have a particular interest in advertisements that promote various slimming aids, exercise machines and even cellulite cream—in other words, products that promote weight loss. Firstly, they are all extremely aware of the prevalence of diet advertisements in newspapers, magazines and on television, especially in commercials.

*R: Often newspapers, I find as well. They have a lot of, just new weight loss products.
C: Yah, there are a lot of ads, mostly ads...and there's also there’s a lot of those.
A: But like I've noticed that they always have those pop up things, lose so many pounds that sort of thing. Like with hotmail, they always send you those junk mail things, like lose weight now and that sort of thing.
G: I have seen stuff on how to lose weight though.
I've actually had e-mails that tell you how to lose weight.
N: Yes, it's all over
H: Yah, like every second advert is a diet advert.*
Interviewees are thus conscious of the frequency of diet advertisements in various media sources, especially the newer products. A number of the women are also familiar with some of the products, as suggested by the following:

*C:* Like Leanor.
...*that Lemon I dunno, that lemon stuff that’s for diet. That new stuff.*
*A:* Like Like the Vitalinea, that advert.
*E:* She’s supposed to represent Leanor...
*N:* Oh yah Bioslim

They are interested in these advertisements, and in the products because “that’s what I’m interested in: losing weight”, and “normally I only go and look things up that have to do with weight.” (A)

*R:* ...*but the diet kind of ones, especially the longer ones which show, as we said before like, the before and after things.*
*But the minute you believe it’s actually possible, it’s very entertaining...*
*C:* Yah, I’ll look at it and I’ll read it...
...*but then others do catch your eye when they like, bring out a new product, especially with Verimark, when they brought out Bioslim and they bring out a new thing, like a variation of it, then does, yah.*
The Internet normally, when I go onto Netscape normally, it has this huge thing with this scale sometimes. It’s like, some things catch my eye, like that, like if there’s a flash, and it will say: lose weight now, find out how, stuff like that, and I’ll click on it, and open it up to see.
*B:* I’d read them, I always read them, but just more out of interest...
*A:* I always look at those.
*E:* I do read them and see what’s going on with them.
*I’d be interested in seeing it, definitely. I’d watch it and stuff.*
*F:* I look at the new products like for cellulite, the creams for that... There was a stage actually, it was over summer, like a few years ago when I looked at that cellulite cream.
*G:* Well, you know I do look at things like that...
*N:* Yes! And um, yah, so sometimes I listen to them, especially the gym kind of things.
*H:* I would probably look at it. I usually do read over...

The majority of participants frequently read or watch this type of advertisement, especially those for novel products. Their interest in these advertisements promote temptation for the use of diet aids, as the commercials play an influential role in the possibility of the use of the product.
C: Her figure, yah definitely her figure. And the words of the article and that I suppose.
I: And maybe consider buying it?
F: Yah, definitely.
R: ...and tempting to use that thing.
H: Yes, I think the ad does influence it. Cos I mean if you see it the whole time in the magazine and in the different magazines then you see the same thing, then when you in the shop and you see it, you think, maybe this might work.
E: Um, I think, maybe I should try that, maybe I should. So I would, I would have thought about trying it...
R: So the supposedly herbal stuff is a lot more tempting, herbal water loss tablets and things like that.
J: Something in my head says try it...
And then I wanted to use the Leanor...

The cognitive process evoked by exposure to these advertisements is the possibility of utilising the products. This is the case for the majority of women even though they believe that the use of diet aids is ineffective for weight loss in the long-term, because of their knowledge of the working mechanisms of these products.

R: Oh, that kind of thing. Well, I have a bit of background in science and um, so I know logically these things can't possibly work. Logically, I know it can't work...
C: Yah, but that stuff didn't really work (giggles).
B: but I know they don't work, so.
A: ...but it's always like these diet pills and things like that and I don't believe in diet pills.
E: ...and often they're a load of nonsense...
F: I didn't think it worked...
I don't think they actually work, it's a waste of your time...
G: We know that even if they do work for a while, you know, it can only be short term.
...they are supposed to make you feel less hungry or whatever.
...like a "quick fix" like the ads show—you know lose 10 kilos in two weeks or whatever.
N: ...and like basically cause you can't even look at food you kind of don't even want to go near food, it suppresses your appetite.
...it's like uhh (clenches fist), just taking a pill and then everything can look like that.
H: These quick fix diet things, like diet pills...
I know for a fact that on TV there's this ad for um, Bioslim and the one girl comes on and she says she's been using Bioslim for like six months whatever, and I know her, and she's never taken Bioslim in her life! And the pictures that they show of her before and after and when those pictures are taken, she actually weighs exactly the same weight. They've just, in the one picture she's wearing big, frumpy clothing and she was, like, she wasn't smiling and she had no makeup on and in the other picture she'd be all done up.
J: ...giving them vain hope that they might lose the weight. And all of them that are desperate to lose the weight hey, they buy into this, and how much money aren't they
going to waste and how much time or effort are they going to put into this, and I mean, most of the time it’s hopeless.

The participants are also aware that slimming aids can only possibly lead to short-term success, but they still have a strong desire for these products to work due to their drive for thinness.

R: ...but there’s a part of me that hopes that there might be something fantastic and believable about this one, that it might just work and be worth a go.
N: ...but some of them, like the Bioslim, one says do you dream of eating like your favourite foods and still not losing weight, I mean and still not gaining weight? And I always answer: Yes!
J: But sometimes I wish it does work.

The result is that they become disappointed with their use of slimming aids: “But um, I’m usually pretty disappointed in them.” They then still choose to be repetitively exposed to these advertisements and commercials for certain reasons.

R: Um, no, if it comes on again and there’s nothing I want to watch, if I’m just channel hopping, then I’ll probably watch it again.
I’ve watched it a number of times and I do find it very entertaining and compelling to watch it. Um, I don’t really get bored of those kind of things.
C: Otherwise I’ll just look at it once, listen to them, and then if I see it again on TV, then I’ll just cut off.
B: Oh god no, I’d just change the channel. No, as soon as I see George Ford or whatever, no I just change.
E: So the first time you watch it intensely and the next time you recognise that it’s on, and look at it a bit. I like watching those things actually, I have a fascination of looking at things like this, like before pictures and after pictures.
N: ...sometimes I listen and I kind of just sit there with this cynical look...
H: ...and you do get quite caught up in it I do pay attention to the adverts.
I find it quite interesting the way they try to prove it to you, when you see pictures of people beforehand and then you see them on-screen and they have lost so much weight.

While one or two women do try to dissociate themselves from these types of advertisements after the first exposure, the majority admit that they are fascinated with these advertisements. One woman also expresses a contradictory attitude, as she first says that she ignores these commercials, but then admits to being unable to avoid exposure to them. These advertisements seem to captivate the women’s attention, and the majority frequently watch or read them. This
heavy use of media was also the case for the participants in Williams et al.’s (2003) study. Some participants go one step further, and admit that they are addicted to certain ideal media.

**Addictive Behaviour**

Firstly, Britney became unintentionally addicted to a soap opera on television, because “you just sort of get sucked in.” Other women admit to an obsession with glossy magazines that contain a high number of models.

*C: Yah, I was more obsessed when it came to magazines.*

*H: I think I was just more obsessive. To a certain extent, I am still obsessive...*

*R: Any. Any magazine I can get my hands on, women’s magazines, yah.*

This last statement indicates that Rachel is not at all particular about which magazines she reads, as long as she can read them. This addictive behaviour also extends to fashion television for Catherine, in which the models are extremely slender. She is exposed to fashion television whenever it is available, “yah, when I go home on holidays or when I’m over at friends’ places who have got DSTV. I always just sit and watch it.” “Yah, like magazines and other media, even DSTV, especially with that fashion TV? I analysed that one quite a bit.” She also finds the ramp models “very, very attractive. It’s just that.”

Thomsen et al. (2001) refer to this as feeding the addiction. Patients in their study also became obsessed with magazines and television, and needed it in a similar manner to the way drug addicts need drugs. Media use was therefore compulsory for them.

**Modelling**

It seems that participants eclectically use principles of different psychological theories to explain their use of the media as it suits them. Bandura (1977) identifies those portrayed in the mass media as acceptable models for women. Indeed, research has found that women do model their behaviour on that of ideal women, as being slender is rewarded in Western society (Harrison & Cantor, 1997; Waller & Shaw, 1994). The current study also found that certain women modelled their behaviour on ideal body types in various ways, but all had weight loss as a common goal.
Nicole has modelled her previous eating behaviour on a specific celebrity’s weight loss regime, requiring the consumption of a specific type of food:

\[ N: \text{Someone, I think I dunno who it was, but one of the women from Hollywood who is really thin, I think it was Gerri Halliwell, but she eats like jellybeans or jellysots like non-stop.} \]

The reason for following this diet is two-fold. Firstly, the level of fat in the food is low, but the level of satiety caused by consumption is high, “cos there's no fat in them and she says that that’s what keeps her, or that’s one of the things that she eats to keeps her in check. Not keeps her in check, but fills her up.” However, Nicole feels disappointed by this diet as it proved ineffective, as “Um, it didn’t work like really well cos I kinda didn’t see the correlation to like, sweets and um, losing weight but um, it was a nice thought.”

The women also use various weight loss tips that occur frequently on the Internet. Nicole and Rachel admit that use of these ‘tips’ is highly probable, even if it is just for short-term use.

\[ N: \text{I would probably read the tips and then see what they had to say, maybe something could be useful...} \]
\[ R: \text{Um, the advantages of like, giving up dairy or something like that, yeah. Yah, mainly to do with like eating behaviours and things like that.} \]
\[ I: \text{Ok, so do you follow the advice that maybe you'd seen on one of these websites?} \]
\[ R: \text{Um, yes actually I do, for a while. I don't think I'd be able to stick to it for very long...} \]

Catherine also uses the Internet to calculate her body mass index:

\[ C: \text{Actually I looked up something to do with weight cos I wanted to find out more about that BMI, that body mass index. I wanted to find out how to calculate it and what range, and what would be underweight and what would be, like right on the border. So I did do that, yah. I just wanted to see where I stood. (giggles) Well, yah. I stood in normal. But I don't want to be normal. No, not underweight... Like between normal and underweight, like on the borderline, like joining (gestures with hands)} \]

She therefore actually uses the Internet to calculate her weight gain since her apparent recovery from anorexia nervosa. According to the website, she is of normal weight and she rejects this,
therefore triggering the desire for weight loss. Most pro-anorexia websites have online tools that enable users to calculate their body mass index, and this causes them to evaluate their weight in the same manner as the interviewee (http://www.plagueangel.net/grotto).

Finally, Britney admits to modelling at least one certain celebrity's fashion sense, but says that she is not always aware of it. She therefore believes that it is not intentional.

\[B: I've \textit{never kind of modelled myself on someone else}. I \textit{think maybe unconsciously I'll like wear something I've seen someone [famous] wear, but it's never like a conscious thing, like oh they look cool.}\]

\textit{Medias' Support for (fellow) Anorexics}

Staying with the use of the Internet, some interviewees acknowledge the existence of pro-anorexia websites, but claim that they have never experienced this first-hand:

\[N: \textit{I just heard about it, I've never like been onto one of those sites.}\]
\[C: \textit{No, I never really saw them.}\]

Nicole is also aware of the content of these sites, and perceives that they provide assistance to those with anorexia nervosa.

\[N: \textit{I just heard um, that they were giving girls tips on kind of how, it was kind of for the anorexics.}\]

They are interested in these sites for two reasons. Firstly, the affirmation of other anorexics' existence, as "Just to see if there were other people in the same situation as me. Just to, yah, see that there are other people out there." Secondly, interviewees want to verify that others have similar thought patterns to them, and "to see what other people are thinking. Just to see that I'm not the only one who is crazy. Pretty much." While Catherine does not really perceive it to be possible for anorexics to offer each other support, "Um, not really because they can't really give support", Nicole thinks that these websites are useful for that reason, as "It's good that they get support." She contradicts herself, however, by then saying that she dislikes these type of websites "cos it's like encouraging people to do things that are very destructive to themselves."
Even though in sense I’ve probably done it to myself, not to that extent.” She also adds magazines to her list of support systems for her disordered eating behaviour:

\[ N: \text{Probably the magazines, like going yeah, I’m starting to look like this, that’s cool, that’s good. I guess if you could call that support.} \]

This agrees with Dunn’s (2003) finding that these websites are supportive of the non-recovery of users, and promote an anorexic lifestyle. Even though no other peers are physically present, fellow anorexic users still act as a bodiless peer group. Dias (2003) adds that the support that anorexics receive from each other on such websites is less intimidating than the professional support that treatment provides.

Description of Recovery Process

While websites such as the ones described above do not promote recovery from the eating disorder, some of the participants are aware that, to feel better about their own bodies, it is necessary to avoid certain media sources, especially if they are trying to change their pathological eating attitudes and behaviours. Fashion television, with its depiction of extremely slender models is one such source:

\[ B: \text{Maybe, I know watching like the fashion channel, fashion TV, I never watch it...} \]

This type of television has the ability to trigger feelings of fatness, with the result being that Britney only watches it infrequently “…cos I know if I watch it I just start getting completely like, oh my God, I’m so fat.” More common, however, is the avoidance of diet infomercials:

\[ J: \text{...the infomercials on dieting and exercising not actually that much anymore.} \]
\[ C: \text{I’ll just skip through them and I’ll go onto other things. I don’t always like looking at those things.} \]

Jemima believes that there was an association between her previous exposure to diet advertisements and her disordered eating patterns. The diet commercials have a similar effect to fashion television on Catherine, as they act as a trigger:
J: I used to I think, towards the end of matric, standard nine, to my first year, that’s when I like, tried everything.
C: I become more down and I keep thinking oh my god, they look like that. Yah, they do have an impact on me definitely, yah.

The participants in Thomsen et al.’s (2001) study also added that avoiding certain media was an important part of their recovery, and they became more selective in their exposure. Another similar finding was that exposure to ideal-type media triggered “the bad old feelings” (Williams et al., 2003, p. 130).

Alternative Use

The women also utilise the media in other ways than to further their disordered eating patterns. However, the next two alternative uses still have to do with their appearance. Firstly, some of the women are interested mainly in the fashion content of magazines. Fashion and clothing are somewhat of a priority for these women. They find “fashion things in there and pretty things” in magazines.

E: if I was looking at this fashion magazine it would be for fashion. So it would be stuff I would be wanting to wear.
But also probably more to look at new bathers, new styles because it’s top designers designing
C: I just like the whole fashion, and the celebrities and that kind of thing, yah.
G: I firstly check out the fashion and stuff, yah.
Well, I always look at the fashion adverts, you know the ones about clothes!
A: I think it’s the women that watch that more actually, because of like, first of all, looking at the different bikinis and that sort of thing.
Mm, if I’m looking for a like, a certain pair of jeans or something, like Levis or Diesels.
R: I’ll turn to all the fashion pages
J: Um, I like to look through the fashion magazines, mostly for the trends that the models are wearing...
Not really, I dunno, because, because I’m interested in fashion so I tend to go for the magazines that (.) show a lot of that.
The thing with me is that, I love clothing
B: [I like] looking at the fashion
Well like when I see some, either I’ll see some clothes that I really like, cos I like clothes and I’ll think, ooh, where can I get that?

The above quotes show that the majority of the participants have their love for fashion in common. Their feelings about clothes are quite intense. They are exposed to a high number of
fashion pages and are especially interested in swimwear. Advertisements for beauty products are also high on the participants’ priority list, and magazines frequently depict these.

E: Then there’s always the cosmetics stuff, the stuff that says use new Almay or whatever. There’s always like beauty creams...
G: make-up
N: It’s more the adverts, like especially the make-up stuff. Like, all of them, and the hair dye and stuff like that
F: I guess things to do with me. Like hair care products...
H: I can give you a very arb one, like dishwashing liquid. Just like if a new product comes out and it’s better than the one I’m using. Like many a skin or hair product. Like they’ve always got these Pond’s Institute ads, and if I see something that applies to my skin, then I’ll probably go out and try it.

These women are interested in a number of beauty products that relate to them, and they especially pay attention to new products. Nicole suggests that these advertisements depict attractive, slender, glamorous women in comparison to advertisements for other arbitrary products that she is not particularly interested in, such as for “washing powder, they’ll have like a mother not a model”.

One common factor of these products is that they aim to improve the women’s appearance. Rachel directly says that she uses magazines for self-improvement, as “this magazine is that it promotes the best possible life.” It gives her the cognitive imagination to improve her life and therefore the ability to imagine change in her life: “Being able to just think about this perfect possible life that they’re trying to promote to you.”

It is to be expected that the interviewees, who are students, use the media for research purposes to some degree. This is especially the case for the Internet, which is used for educational purposes, as it is easier to retrieve information (Kraut et al., 1998).

C: Um, normally I do just go on for research...
N: it’s usually just for research.
A: Like, stuff that I need to know. Like for work, for varsity.
F: Yah, just for varsity work. Only if I need to for something, and if I have to look up something.
H: ...and to find research.
B: Oh, well I go on to look things up.
Another common use of the Internet is for communication purposes, according to Kraut et al. (1998), as indicated by the following quotes:

F: I check e-mail
H: Just to check my mail. Like, I use the Internet purely to communicate...
B: ...and I go onto my e-mail at hotmail, and I chat on MSN to friends...
A: Chatrooms, like IRC, I used to.

Anne and Britney both use chatrooms on the Internet to communicate. As Zabinski et al. (2001a, 2001b) and Celio et al. (2001) showed in their research, this is not necessarily a negative thing. Internet relay chat especially is a possible treatment mechanism for anorexia nervosa.

Exposure to the media also acts as a form of relaxation for these women. This is because they perceive the level of required effort to watch television or read magazines as low, as not much cognition is necessary.

E: Although there are times when you just feel like lying in front of the TV, on the couch and watching some TV and you don’t want to be disturbed because it does actually help you switch off from everything else and relax.
You don’t need that many brain waves.
C: I go lie on the couch and just watch it. I’m just chilling out, and I relax.
G: I find it relaxing, yah, just a way to relax.
N: but it’s a nice way to just kind of switch off, and don’t think about anything.
R: Um, I find it a very good way to relax
F: No, I just switch off.
H: And it’s just a way of (.) taking up some time, relaxing really, just to read the completely useless articles that they put in.
B: I’m trying to think, I dunno, like if I just wanna like zone out then I like sit and read a magazine.

Television is useful as a relaxation technique or tool. It makes it possible for these women to "zone out" from reality. Rachel even uses new magazines as an excuse: To avoid a discussion with her parents about her life:

R: Um, like if I go back to my parent’s house and they want to talk to me and discuss what’s going on at varsity and what’s going on in my life in general...and I spot on the coffee table, I spot a new magazine, then I’m looking for the quickest exit to make an excuse and go and sit down and read the magazine.
Eve and Rachel echo the ability of ideal media to distract individuals from reality.

E: Well they are nice to look at, they are a distraction from whatever you doing. A bit of a distraction from life, if I’m going to watch a movie...
R: And it’s just um, a nice way to daydream and just imagining what, you know, you can just get lost in them...

Since magazines and television depict “other people’s lives, other peoples’ problems”, the concentration on others’ issues assists them in escaping their own negative feelings:

E: I think it would make me feel better to look at a magazine because it’s a bit of escapism. If I was having a bad day and picked up a magazine, the reason why I picked up the magazine would be to escape from feeling bad.

The reason given for this escapism is the attractiveness of the media, such as the beauty of the location of modelling shoots:

E: It’s also a bit of escapism, because you see beautiful people on TV, in a beautiful location.
H: They always go to these exotic islands, like somewhere amazing where there’s palm trees and white sand.
It adds to the glamour...

Eve further explains television’s distinctive abilities by describing a specific type of television show that can play this role:

E: Um, I like happy things, feel good things, like sitcoms, there’s a few of my favourites that I like to watch.

Again, the women in Williams et al.’s (2003) study utilised the media in a similar way. The participants saw media use as a fantasy of escaping reality, and as a somewhat maladaptive coping mechanism for their problems in life. A final alternative use of the media is as a solution to the boredom experienced by the interviewees.

G: I only watch TV when I have nothing else to do.
N: but in the afternoons when there’s like nothing to do, especially in the holidays, it’s like something to do.
It seems that since there are only a limited number of options to solve boredom, television, magazines and the Internet are all utilised regularly. Indeed, Gail also adds that she has a habitual interest in a certain television programme because she is exposed to it when she is bored at work:

G: Well, I watch Bold because, well I watch it at work, I don't know, I think it's more of a habit.

Summary of Phenomenon
As shown above, there are a large number of ways in which participants use ideal-type media. Some were not particularly surprising, and include the following: The body type identified as ideal constituted of proportional body parts, very slender, some curves, no body fat and tall. These women admire the slenderness of these models and celebrities as well as their overall appearance. In fact, a halo effect is evident as the women associate slenderness with other positive characteristics, such as confidence. They generally do not admire overweight celebrities and models' appearances at all, but further criticism for the slender ideal is a somewhat surprising finding. The interviewees do not favour ramp models' appearance and see them as unhealthy and emaciated, indicating a not altogether maladaptive opinion. Other criticism is directed at the mediocrity of ideals' faces, which is believed to be rationalisation for their dissatisfaction with their own appearance. Another expected finding is the women's sometimes non-critical consumption of the media, and their belief in the models' complete satisfaction and happiness with their life because of their slenderness and attractiveness.

Ideal-type media also include advertisements and commercials for diet products, and the cognitive response to these is quite complex for the women. Contradictions come to the
foreground, with awareness existing for the non-effectiveness of these products coupled with fascination with diet aids, extreme desire for their effectiveness and temptation for use.

An interesting finding is the way in which participants use constituents of various psychological theories to explain their use of the media. They compare themselves with ideals, and try to identify with them, which results in awareness of their dissimilarity and inferiority. This fits in with social comparison theory. They then turn to the media for reassurance, either criticising ideal women or asking friends and family to reassure them about their own appearance. At other times participants model their eating attitudes and behaviours on those seen in the media, either copying admired celebrities alleged diets or using weight loss tips offered by the media. Participants are also not completely passive as they choose which media sources to use and how to use them, such careful selection and avoidance of certain magazines that are not conducive to their recovery process, and being aware of modifications to the media. This fits in with a media explanation: The uses and gratifications theory (Smolak & Levine, 1996).

A surprising and adaptive use of the media is their critical consumption. Firstly, a number of interviewees are critical of the medias' depiction of ideal women, and are aware that certain aspects of celebrities' appearances are changed, even if they perceive this to be mainly facial flaws. They also use the media in other ways, such as for fashion, relaxation, and communication and as a solution to boredom. However, some of them use the media to distract themselves from reality. This escapism is a maladaptive coping mechanism for issues in their lives.

Of serious concern are the extremely maladaptive manners in which some of the women use ideal-type media. Firstly, their behaviour with weight loss tips and pictures of slender women is extreme. They cut these out and put them up to act as motivation for weight loss. Secondly, they use the media to reduce cognitive dissonance and to reinforce the desire to lose weight while often neglecting to pay attention to the dangers extreme weight loss can cause. Thus the media are in conflict with friends and family who are concerned with disordered eating behaviours. Some participants directly identify the medias' support of anorexic behaviours by magazines but especially by pro-anorexia websites. For one woman, the existence of other
anorexics is important for her mental well-being. Some of the women admit to being addicted to media that depict a lot of slender models. However, some are aware that they need to avoid this obsessive use of the media to recover, as it triggers negative feelings about their own bodies.

The above-mentioned factors act together for these women to make up their heavy use of the media. This analysis of the data also helps to identify which uses are maladaptive, and these are the majority of them. It also demonstrates that heavy use is not always maladaptive, as participants show some foresight about the media and critically reflect on their depiction of ideals. This is important. The women also have different ways of utilizing the media, which interacted with other specific existing conditions.

4.4.3 Intervening Conditions

The heavy use of ideal-type media does not exist in a vacuum, as there are factors in the structural context that have facilitated the phenomenon (Strauss & Corbin, 1998). These can be biological, technical or cultural and in this situation, the factor that played a role in increasing the use of ideal-type media in this specific way for these women was cultural, as it consisted of men’s differing attitudes towards women based on their size (See Appendix G).

Gender-Role Endorsement: The Role of Men

Endorsement from the opposite sex aids these women’s use of ideal-type media. Men seem to accept the model-type body portrayed in the media as the ideal. The type of women that the majority of male friends and family members are attracted to fits the “stereotypical view of females”: slender, beautiful and often with hardly any clothing on.

F: Oh, they think ooh, she’s hot. I mean I’ve seen my friends, my guy friends reading it and going ooh, she’s hot or whatever.
Yah, I would have joked about it with my guy friends. I’ll joke about, oh did you watch the swimsuit edition? You probably dropped everything to watch it. I’m sure they all watched it.
E: Yah, in raunchy poses and stuff.
So it’s not the real representation of a woman’s body. So they’re seeing kinda fakeness, so if they’re quite young guys they could be kind of indoctrinated in inverted commas into thinking that this is what a woman’s body always looks like, you know, and that can be negative.
Men would be interested in watching loads of attractive women in bathers, romping around on some beautiful location.
H: I mean, guys go for that. Skinny, bionde, dork tan, I don't know.
...and he'll just sit through the whole thing and say oh, she's beautiful, she's beautiful I think guys watch it just because they ogle over the girls' bodies.
C: I just started to become more aware that that's what, you know, not the ideal but that's what a lot of guys look at these things, like on TV and stuff, and that's what they see.
...This is what they want [Kerry McGregor]. Yah, so then I became more aware of that, definitely.
Yah, well I know quite a lot of my friends, they'll, like, they'll see an average person walking past and they'll say oh no, she's pretty but then as soon as like a model-type person walks past they'll go oh my word.
G: I know that when we went out the other night, they were showing an old one on TV, and all the guys were pervin' over the hot girls...
B: Oh they just look at the hot chicks basically, and it does it for them, whatever they do.
J: Um (), because () they were chosen to be celebrities or people we see on TV, there must be something right about them. So because the majority of people [celebs] look like that, so that's the thing they should go after.
A: Mm, I've spoken to my guy friends and most of them say ok, they don't like the skinny, skinny girls but like, obviously the girl has to be attractive and like, the way her body's made up. Mm, a model, yah. Christina Storm. Thin, attractive, pretty, long hair.
N: Probably because women are the ones that are classed, like all over the TV screen as the ideal.
Because the guy's focusing his attention on the ideal, stunning, thin woman.

The above quotes indicate that men prefer the female ideal body type. It is also suggested that the media have a huge influence on men's idea of attractiveness. Indeed, some of the interviewees have a high level of exposure to certain magazines and television programmes that are renowned for their depiction of beautiful, slender celebrities and models.

E: Men's Health, I mean my brother's older than me and he used to squizz through the Cosmo and Fair Lady and stuff.
H: Yah, well like especially the Swimsuit edition.
R: Yes, yes. My brother writes it down on his calendar, so yes I think they're definitely interested in those. I think moviewise, when you have a lead female, a lead perfect figured, beautiful, gorgeous female, they watch that kind of thing.
C: And they see Sports Illustrated and they think, you know, that's what they find attractive. That's what they want you know?
J: The Cosmo to look at the girls!
N: Well I know a lot of my guy friends love to look at the Cosmo and they always pour over the pictures of the women and especially of Kerry McGregor and they love that...
Not only are these men exposed to this type of media, but they often have a specific type of behaviour with pictures of models and celebrities found in magazines: They actively choose to “stick that up on their wall, and if you go into a guy’s room and you see all these beautiful, skinny women in large as life size.”

These women believe that men are “indoctrinated” to an unreal representation of women’s bodies, and that this has an influence on men’s cognition because “I think the media does influence a lot of what we think.” Gail clearly expresses that men then begin to “compare them to other women and obviously the ones in the mags look better, well most of the time.” The majority of the women agree: The more a woman resembles a model, the higher the possibility of the obtainment of a man’s attention:

F: I know some guys will think, ooh, their girlfriend has to be thin...
Superficial men, they’re only going to look for perfect, thin girlfriends, they’re not going to look at personalities...
H: I suppose with um, (.) with that it’s like, you’re young and beautiful you’re gonna have a man.
C: Because, well, males would therefore be attracted to me and stuff like that.
J: Because my peers, my male friends, when I sit in their company they will always look at the girl and she is definitely not built the way I’m built.
I: More attractive to who?
A: Members of the opposite sex.
They won’t go for like a fat girl, you know?
Mm, firstly if you know you’re talking to a guy or whatever, you’ll make yourself out to be the way they want you to be.
N: The guys are probably there cause the girls are so attractive I mean if you were one of those women there [large women], I don’t think you would have the guys there.
...and all the normal women are going what about me and there’s no ways that I or anyone, kind of, like me will look like her. So I will kind of like lose a chance of getting the guy’s attention in that area, which is an area that women want, I guess, to get guys’ attention. I mean, you want the guy to appreciate you, and to like, look at your body and say oh, you’re so thin, you know, pretty, whatever, whatever. Because the guy’s focusing his attention on the ideal, stunning, thin woman.

The interviewees believe that males prefer thin girls, and that they are interested more frequently in slender women. Average-sized girls only receive a small amount of desired attention from men, while the majority goes to model-type women.
While the majority of these women believe that being thin is a prerequisite for gaining a boyfriend, Rachel and Hayley disagree slightly. They believe that slenderness is not a necessity for the obtainment of a man, but that there is an association between a women’s appearance and the quality of men available. As your slenderness increases, so does your chance of attracting an extremely good-looking and well-built man.

*R:* Any girl pretty much should be able to get a guy.
*Um, no, slightly superior to normal guys.* Yah, it’s kind of better than your imagination of the everyday guy and you think that if you look like this kind of girl, if you’re this thin and perfect, then you’ll attract a better class of guys than you would otherwise get I think. The more perfect you look, you can kind of move up the ladder in what kind of guy you can get. So, perhaps if you look like these model girls then you can get model guys.

*H:* Also, I mean that guy’s topless, he’s also got an awesome body and to get that sort of quality in a man you have to be thin and beautiful.

Much previous research agrees with the present findings. Firstly, in past studies, men presented more favourable attitudes to slender women in the media (Fouts, 2000; Harrison & Cantor, 1997) and reacted more negatively to women who failed to match the ideal (Fouts, 2000). Furthermore, even grade school boys admitted to being more attracted to thin female characters on television (Harrison, 2000b). Another similar finding was that in previous studies, men perceived thinness to be an important quality for their partner to possess (Reed, 1999), and women therefore named these beauty characteristics as very important as they wished for men to desire them (Crowley, 1999; Tan, 1979).

**Summary of Intervening Conditions**

These results indicate that men’s attitudes reinforce these women’s heavy use of ideal-type media. The interviewees perceive men, or at least the men that they are acquainted with, to heavily favour women who meet the ideal. This is due to men’s repeated exposure to media that depict the ideal women. Their behaviour includes sticking up pictures of models and celebrities. The participants therefore think that because men are indoctrinated to slender women, they compare other women to these ideals. The majority of men then want their girlfriends to be slim. These findings again indicate how others influence these women’s cognitions, and this is another example of an external factor.
5.3.4 Action/Interaction Strategies

These refer to how individuals manage, handle, carry out or respond to a phenomenon, and they can either fail or succeed. Basically, it is what is said or done in response to the phenomenon (Strauss & Corbin, 1998). The women respond to the phenomenon in various ways, and to different degrees of success regarding their weight loss (See Appendix G for list).

Change in Eating Patterns

The majority of interviewees have attempted some method of weight loss in response to their exposure to the ideal-type woman, but these vary. Some participants are aware of the importance of the consumption of a healthy diet for weight loss. They try to eat an adequate amount of food and attempt to be rational about their diet, as shown by the following quotes:

G: You have to try something that is more of a lifestyle, do you know what I mean? Yah, like I went on weight watchers to lose my weight but I ate healthy...
B: I've learnt that uh, you know the only way is through healthy eating.
J: ...and by eating the right food I'm going to live longer, I'm going to be healthier.
A: ...and eat healthily.
R: sometimes I'm quite rational about it, and I think well...
I dunno healthy eating and I'm eating a decent amount and um, (...) with more of a health concern in it as well, and just hope the weight goes with the healthy diet.
H: ...and ate the right foods

Rachel also perceives a healthy, balanced diet as one that she will be able to continue for a longer duration: “The first option of following a more healthy diet, I think that would last longer, because it's just easier to maintain my willpower, to maintain it longer”.

Unfortunately, a number of the participants rather turn to a diet in the conventional sense of the word in an attempt to lose weight. Some of the women directly admit to dieting as a response to ideal-type media, as weight loss “has to do with, like, looking at magazines and stuff”, or exposure to “a poster up or like those big billboards…” or feeling that “I'm supposed to be on this crash diet because of this particular picture I saw.” The interviewees try a number of diets that are supposed to affect their metabolism, or assist weight loss in some manner. They also begin to avoid certain foods that they perceive as unhealthy or fattening, and the result is a cessation of certain foods in their diet. The reason for their diets becoming restricted is that
weight loss is a priority for them, and they believe that food restriction is effective for weight loss:

A: Like I haven't eaten chocolate in four years.
I must have read it somewhere and it said if you start your day off by drinking a glass of boiling water with honey and lemon in it, So we'd like try that for a while, then it speeds up your metabolism.
I've like limited my amount of food, like, overall food and stop eating rubbish food.
I've like cut out bread and carbohydrates and that sort of thing.
N: ...then that will like, stop me from eating the extra chocolate or, yah.
H: ...and tried different diets and stuff
R: ...and then I'm more inclined to crash diet and I'll just, um, try to eat very little in a day, for as long periods as possible without eating, yah.

As Rachel's response insinuates, some women engage in crash diets where they attempt to starve themselves. This seriously dangerous behaviour is practiced by a number of the women, because they believe that the less one eats, the more weight can be lost.

N: Um tried to go like, the whole, starving route, or not starving but like, eating a lot less and that kind of thing.
Cos it does work, I mean, not eating, you're gonna lose weight.
C: Same. Starve myself.
Pretty much, I had like an apple a day.
Till last year. That would be from standard seven, well, three, four, seven years.

Nicole was, however, aware of the side effects of starving herself, as it made her feel "really terrible" because "you don't have any energy and you're just so tired all the time and all you want to do is sleep and you can't concentrate in lectures". Despite all of these negative side effects, she considers starvation as a possibility for weight loss in the future as "yah even now I probably would try it if I really wanted to lose weight".

This fits in with the restricting type of anorexia nervosa. According to the American Psychiatric Association (1994), these individuals utilise dieting or fasting in response to potential weight gain. In response to the media specifically, Field et al. (1999) found that pre-adolescent and adolescent females responded in a similar way to fashion magazines in their study. A number of the subjects turned to dieting as a weight loss method in order to look like slender models.
A decrease in the amount of food eaten is not the only possible change in eating patterns. A few of the participants respond to the media by increasing the amount of food eaten, which clearly defeats the objective of weight loss. The type of food eaten can vary from nutritious to unhealthy.

\[G:\ I\ am\ normally\ eating\ dinner.\]
\[\ldots\ except\ occasionally\ I\ will\ eat\ chips\ and\ have\ a\ coke.\]
\[J:\ Eat\ldots\]
\[And\ the\ longer\ I\ sit,\ the\ more\ I\ run\ to\ the\ kitchen\ and\ nibble\ type\ of\ thing.\]
\[A:\ Like\ if\ it\ is\ it\ will\ be\ like,\ while\ I'm\ eating\ supper.\]

There are various reasons given for the increase in food eaten during exposure to television. Firstly, Gail's concentration seems to be diverted from the food to the television as “you concentrate on what is on TV, not on what you are eating.” Jemima agrees, but cites the boredom caused by advertisements as the reason for her constant snacking: “I think it's because you're sitting there and doing that, because ok, while the programme's on it's like you're into it, but when it comes to an advert then it's like, (sighs) you think what now... Because I'm bored so I'm going to make myself something to eat quickly and then I'll come back to sit.” Finally, the availability of food in the house also plays a role in how much is consumed during television exposure, because: “There’s always snacks in the house then I would run to get one.”

These participants have developed counter-responses to this increase in food consumption. Gail makes a conscious effort to avoid food while watching television due to the possibility of overeating: “I try not to eat unless I am eating dinner.” Jemima makes a concerted effort to avoid television. She now has other preferred activities that she partakes in:

\[J:\ So\ instead\ of\ doing\ that\ I\ go\ to\ my\ room\ and\ I\ either\ sleep\ for\ that\ first\ half\ an\ hour\ when\ I\ get\ home\ till\ I,\ cos\ I\ mean,\ the\ walk\ from\ the\ station\ is\ like,\ damn\ long!\ And\ if\ I\ see\ later\ on,\ then\ I\ start\ studying\ and\ go\ over\ the\ things\ we\ did\ in\ class.\]

**Use of Slimming Aids**

Another response to ideal-type media is the use of products that allegedly promote weight loss. This is often, but not always, a response to diet advertisements and commercials that cognitively
affect these women. Various types of products are used. Anne and Fay admit to consuming specific diet products, such as non-fat yoghurt.

A: Yah, I do eat Vitalinea.
F: But if I do find something that's fat-free, like the Danone.

Fay also frequently enjoys Special-K, a low fat cereal. This is often recommended by pro-anorexic websites as a food that provides maximum satiety but minimum kilojoules (http://www.princessana.4t.com/custom.html).

The majority of these women, however, have also previously tried at least one diet aid in the form of appetite suppressant tablets. The following types of diet products are supposed to contain herbal ingredients, at least to a certain degree.

J: That Herbex, I used that.
N: I've taken them [Leanor].
C: Like Leanor, yah.

Others admit to using a number of different diet pills.

C: Yah, I went on, what's that stuff called, Bioslim, yah, Bioslim. I've pretty much been on all of them.
H: I mean I've used plenty of diet pills...

The description of the type of various diet aids used is that they are supposed to minimise fat, regardless of the health risks. Rachel also uses diuretics, which promote a loss of water in the body.

R: ...but some kind of fat burner kind of product
Um, and I've taken some diuretic kind of pills, water loss pills...
H: Um, the informa system and then I tried Bioslim, Um, I tried drinking those meal supplements in place of a meal...
Lots of diet pills, and tried different diets and stuff...
Clearly the objective of the use of these products is weight loss, and the participants differ in their perception of the levels of effectiveness of slimming aids. The majority of participants see these diet products as ineffective:

\[ C: \text{Yah, but that stuff didn't really work (giggles).} \]
\[ H: \text{...but they don't work} \]

Nicole, however, disagrees with this as she previously experienced a large amount of weight loss primarily due to the use of diet aids. She explains the working mechanisms of the products, namely the suppression of one’s appetite:

\[ N: \text{You can't even look at food; you kind of don't even want to go near food, it suppresses your appetite.} \]

Not all of the women have utilised the growing market of diet products. A number of participants do not use any type of diet tablets, as indicated by the following:

\[ A: \text{No, I haven't used it. I've never taken diet tablets...} \]
\[ F: \text{I've never taken action, no.} \]
\[ E: \text{...but I haven't used it.} \]

However, Gail does have diet tablets in her possession, therefore making future use of the products possible.

\[ G: \text{My mom bought some Herbex tablets but they just sit in the cupboard...} \]

According to the American Psychiatric Association (1994), the purging type of anorexic often uses various methods to prevent weight gain after eating, including tablets such as diuretics and laxatives. Excessive exercise is also listed as a potential way to avoid weight gain.

*Change in Exercise Habits*

Participants utilise various forms of exercise as a means for weight loss, since their level of desired weight loss is high and losing weight is a priority for them.
J: ... doing exercise it's going to keep me healthy and it's going to keep me in shape
A: No, it's more for my figure.
F: I don't go to gym that often but I have my stages...
E: I mean, I didn't change like drastically with my body weight, but my shape. I felt more athletic, I felt toned, I felt healthier, I felt more in control of my environment and what was going on.

Some of the women clearly engage in exercise as a response to being exposed to celebrities and models with ideal figures. Following exposure to ideal women in the media, Nicole says that she is "gonna keep fit, I'm gonna lose weight, lose, lose lose". Catherine and Hayley both participate in exercise as a possible means to gain certain celebrities' desired appearance with regards to their bodies:

I: So have you then ever done anything to look more like her, other than going to gym?
C: Gym, pretty much yah
H: I suppose if I went to gym like, every day and did my forty-five minutes of training... then I would look like that.

These women participate in various types of exercise in order to lose weight, from jogging, which seems to be the choice type of exercise, to Tae Bo.

J: I ran up to Muizenberg and I don't know if you know where, do you know where Marina de Gama is...
A: Yah, I run.
C: So I just started to go to gym
E: I started doing Tae Bo
H: Yah, I'd usually go to an aerobics class a day, and when I was in matric I'd usually go to gym before school and again after school and I'd rock climb like, three times a week and I'd train for that
At the beginning of the year I was like, jogging...

What these interviewees do seem to have in common is the frequency of exercise as they exercise often, most of them daily. The duration of exercise is also similar, as it is often long, even for hours at one time:

J: I also exercised a lot...
C: but normally I used to gym quite a lot,
then like do three hours of gym, or four a day, and stuff like that
Yah, before school for two hours, after school for about four hours
E: I did it four times a week. I got really involved
H: I went to gym like, every day and did my forty-five minutes of training
Yah, I'd usually go to an aerobics class a day, and when I was in matric I'd usually go to
Gym before school and again after school and I'd rock climb like, three times a week and
I'd train for that.
I was like, jogging every afternoon...

Catherine directly admits that she is a compulsive exerciser, and that a positive relationship is
especially evident between weight gain and amount of exercise, as “I felt that I’ve put on weight,
then I like start exercising, like compulsively.”

The majority of girls in Field et al.’s (1999) study wanted to exercise either to lose weight or to
improve shape. Alarmingly, there was a significant positive relationship between the initiation
of exercise and exposure to magazine pictures and articles.

Summary of Action/Interaction Strategies
Due to their exposure to ideal-type media, it is to be expected that these women, some of
whom were already at risk of anorexia nervosa before media exposure, begin to eat less in order
to lose weight. While some participants aim for a healthy balanced diet, many severely restrict
their diet in a decidedly unhealthy way. A surprising finding is that the minority of participants
actually eat more due to media exposure. Since this is clearly not in conjunction with the aim of
weight loss, they have developed deliberate strategies to counteract this.

Another finding is that a number of women use various types of slimming aids following
exposure to ideal women, clearly with the objective of weight loss. These vary from the use of
diet foods to diet pills, such as appetite suppressants and diuretics. Another important strategy is
the change in participants’ exercise habits. The majority of them increase their participation in
various types of exercise after seeing ideal models and celebrities in order to lose weight and
resemble celebrities.
It is important to identify these strategies because some of the attempted weight loss methods may be indicative of anorexia nervosa. On the whole, these strategies are not only ineffective for most participants as they do not achieve the desired effects, but they are also maladaptive.

4.4.5 Consequences

Strauss and Corbin (1998) believe that consequences refer to action/interaction strategies, but this research also identifies that the consequences can result from the phenomenon of ideal-type media. They can take place in the present and the future. The first, shorter-term consequence is an almost immediate change in their feelings or emotions (See Appendix G for list).

Emotions

For the minority of participants, exposure to models and female celebrities has a lack of effect on them. The impact of the ideal woman on their self-esteem is low:

F: I feel fine.
E: And I would feel okay about looking at her like that. It wouldn’t really affect me in any way.
G: I don’t really feel anything when I see these characters you know. I normally feel fine, it’s just because I know her. Yah, I don’t mind seeing girls like this.

A reason that Fay gives for this lack of effect is her alleged satisfaction with her body, as “Yah, I’m happy about my figure.” Another reason for this lack of impact of the media is said to be Catherine’s repeated exposure to certain media sources:

C: Like if it has a huge impact on me, some things don’t but some things will. But if I see it over and over and over again, sometimes it’s just like, you know, oh well.

These findings are somewhat in agreement with Coolican’s (2000) study, whose results indicated that women exposed to television programmes with ideal bodies did not show any significant change in self-esteem.

A somewhat surprising finding of these interviews was that for Eve and Nicole, the media can actually influence positive feelings. While this does not really apply to their bodies, the media seem to have the ability to promote happiness and lift depression:
E: So...if I was feeling okay and happy and I just wanted to look at a magazine, I’d feel oh like oh yah that’s a nice bath or she looks pretty or that’s a really nice place to be or whatever.
N: Always like if I wanted something to do, or I felt depressed, then I’d get a magazine and then I’d kind of feel, aghh, maybe life isn’t so bad because it’s quite interesting, like, just looking at the pictures, so yah.

Myers and Biocca (1992) also found that television might have a positive effect on one’s mood. Their subjects had lower scores of depression after being exposed to commercials that contained the ideal body type.

When it comes to the effect of the media on feelings about their bodies, the majority of participants identify the consequences as negative emotions.

C: Um, and it does, I mean whenever I see pictures of any thin, of any thin people and stuff it always, no matter who it is it’ll make me feel euh[horrible] and then I’ll start.
G: Well, she is older than me but she has a better body, so that makes me feel a bit yuck.
I: And how do these women, like let’s say Cameron Diaz, how does she make you feel about yourself?
N: Um, quite terrible!

These negative feelings refer to the interviewees’ selves, and to their bodies especially because of the small size of female celebrities. Nicole clearly believes that the media are the sole cause of her negative self-image, “....cos I mean I’ve got no reason to have a bad self-image at all, because like family’s fine, duh duh duh, so the only place it could have come from is the media.” This is because the ideal women portrayed in the media make her feel “Pathetic, like really, probably mess up their self-esteem as well. I mean, if I watched something like that, I’d probably feel horrid afterwards, I think I’d feel like really, really terrible, like really bad.” It makes Britney feel “like really insecure, like ok, I don’t look like that six foot model so, does that mean I’m bad?”

Closely related to this, Catherine goes as far to express her disgust with her appearance following exposure to models as “They make me feel disgusting. Disgusted about myself.”
Hawkins (2000) and Reed (1999) found similar changes in their subjects' self-esteem levels following exposure to thin-ideal media. Irving (1990) also found that women expressed lower self-evaluations following exposure to thin models, and Wegner et al.'s (2000) participants were more self-conscious about their bodies.

Exposure to the thin ideal seems to lead to a various array of negative emotions for the interviewees. Models especially, seem to make them feel quite threatened and intimidated, as indicated by the following:

E: ...and I would think like if I was a bit younger like last year when you did the interview, I would feel a bit threatened by that.
G: Well, they are actually quite intimidating, you know, to people like me anyway.
N: ...and that's quite intimidating because...then you have this pressure on you to look good.

The reason given for the perception of models as threatening seems to fit well with social comparison theory, because upon comparison with the ideal the participants feel inadequate.

N: It makes me feel that I am totally inadequate that I can never be like that.
R: Cos you know they're local ads as well so those people actually must be around here somewhere. It makes me feel very inadequate.

Exposure to ideal-type media appears to have a major influence on these women's mood states. Firstly, it often leads to the women feeling guilty about their own eating behaviours, especially after the consumption of junkfood. They experience shame frequently because they perceive themselves as eating an unacceptable amount of food.

H: I'll feel quite bad afterwards but I enjoyed my smartie eggs, so.
C: ...and I start feeling guilty that I eat so much and stuff, I dunno, that's just how I normally feel when I see these things. Normally.
G: I mean ok, sometimes I feel bad when I am eating a chocolate or pigging out when I see Rachel.
N: ...in my mind, I definitely have this feeling of guilt, like I shouldn't be eating this while I'm reading.
Jemima has a slightly different reason for her guilt, and that is her preference for the ideal body shape. She feels that she is betraying herself and women with her body shape:

*J: I'm big. I somehow preferred the picture of this woman [thin] over the picture of the bigger women. I felt guilty in a way...*

Stice and Shaw (1994) also found that exposure to the ideal body negatively affected women's affect, as they exhibited significantly more shame and guilt about themselves.

Another mood that is affected by exposure to this type of media is that of anger, and related to this but not as intense, frustration.

*N: ...and I think angry that I'm not like that. The whole, the lingerie models, it makes me so angry cos obviously all the guys are like blown away by those girls. Because I just get so angry, it's like uhh (clenches fist), just taking a pill and then everyone can look like that. I just feel kind of frustrated.*

This anger is directed towards the media, and for Nicole at least, towards herself because she does not have the ideal body type. Heinberg and Thompson (1995) and Pinhas et al. (1999) both found that the female subjects in their respective studies experienced a greater amount of anger after exposure to thin, attractive women.

Both of the above-mentioned studies also found that following exposure to these media images, women were significantly more depressed. A high number of participants in the present study also admit to feeling depressed, as well as hopeless, after seeing fashion models or slender celebrities:

*R: but it's depressing when you realise that you can't. It pulls my mood down, it really rubs the depression in when I talk about these things with my mum. Morbid, kind of; curiosity in these things though, we like to look at them, but we know how depressed it'll make us afterwards, they don't have an uplifting effect. C: Mm, I dunno. I become like, I become more down and I keep thinking oh my god...*
N: Um, usually after I’ve eaten, like a lot of junk food and stuff, then I look at it and then I just, get more depressed...
...that just makes me feel like ooh, you know it’s kind of, you lose hope...

It seems that for the above-mentioned women, the media reinforce an already-existing depression. After exposure to this type of media, they feel increasingly depressed but still consume it. While participants harbour the above-mentioned emotions towards themselves, some of the women also express negativity towards the models themselves. Firstly, they are jealous of the models’ slender appearance because it is the desired body shape:

H: Um, () I guess jealousy to an extent, that’s quite a strong word
C: I really envy them yah.
I: Because they are very thin?
C: Mm.
B: Um, () a bit jealous I suppose, when you see, you know, like really attractive people.
Yah, kind of a bit, like, jealous. Like, she’s quite. Or like Cameron Diaz, really, she’s a big one.

The women often feel annoyed and irritated with models, again due to their attractive appearance. Anne, however, admits that even though “I get irritated sometimes but like I still, it is more attractive on a thin person.” Rachel finds them “a bit annoying.” Other interviewees express a much stronger attitude towards models: They hate them because of their “gorgeous bodies”;

H: I hate her.
N: ...and kind of hate her for being like that and she’s got the perfect body.
...and silly bitch or whatever! That’s exactly what it’s like, it’s like I hate you!

Finally, some of the women feel a certain degree of sympathy for models, especially the ramp models, due to their extreme slenderness.

E: ...and they’d look so skinny and pale and like, really unhealthy and you’d actually like, worry for them.
H: I feel sorry for them almost
Yah, but I mean I find it sad that for adults hey, they’ve got the status and everything, but there’s still pressures on them. For them to feel that they have to become skeletal man, I think that’s sad.
Jemima feels concerned for the models' health because they are under so much pressure to be so slender, and it makes them feel uncomfortable to be exposed to them.

**Desire to Change Appearance**

A longer-term consequence of these women's heavy use of the media is that they all desire to modify their external appearance in some way or another. While Fay says that celebrities have an influence over aspects of her appearance such as her hairstyle as "maybe I've seen a nice hairstyle and I'm going for a haircut and I'll think, maybe that's a nice hairstyle or something like that", the majority of the interviewees admire female celebrities' ideal bodies.

The participants all have one desire in common: The desire to resemble women with ideal body types. In particular, slender models have the desired appearance, as is shown by the following:

*I: So you're saying most people know that they should look like the people they see in the magazines?*

*F: Like, everyone would like to...

*H: Yah, I think it's the type of body everyone would like to have

*C: they look like that, I want to look like that

*I: So would you say that you would like to look like this?

*C: (wistfully) Aah, I'd love it! (smiles)

*I: I'm more, I mean, I wanna look like that.

*A: Her figure, yah.

*N: Yah like this chick has got the most stunning body like I would want to be like her so I want to buy the magazine cause it kind of makes me feel that if I get this then maybe I could look like that. (laugh)

...like just looking at it I would love to be like one of these people

...looking at magazines and stuff, because you kind of just feel, oh, I really want to look like that.

These women yearn to look like the models and slender women that are represented in the media, and they perceive that a large number of women in general have similar needs. However, Gail and Britney have slightly different views. They do find the models' appearance desirable, and wish to covet it, but they also find individuality important.

*G: Well, I do think that oh, I wish I looked like her.

*I do think that I would like to look like them, but then I think I am me, not them.*
B: Um, I think she looks nice, and I suppose part of me would be, you know, oh I want to look like her but I've always wanted to kind of be individual, so I've never kind of modelled myself on someone else.

Two of the participants further contribute to the understanding of this desire by describing the cognitive process involved. Fay believes that it is a subconscious process, one that she is not always aware of and cannot really control as “obviously you can’t help looking at the people in the picture, not that you necessarily want to be like them, but subconsciously you can’t help thinking, well you know.” Caroline agrees, as she also believes that she cannot control the desire to change her appearance when “I go through magazines or when I see someone on TV and I say oh, I wish I looked like that. You know, things like that, yah. I still do it. I’ve just got less control over it, yah.” She however, adds that her cognitions constitute her actively wanting to change her appearance following exposure to ideal media, as indicated by the following quote:

C: What do I think? What goes through my head? I wanna be like that.

Finally, Fay believes that the media only have “very short-term” effects on her desire to change her appearance. The duration of these type of thoughts are quick.

F: Maybe it will stick in my mind for a minute and then go out. It won’t be like a month long thing that I’ll like strive to be like that person, it’s not really like that. It’s a thought, a slight thought, but then it goes out of my head and something else comes in.

This desire to change appearance is coupled with a strong motivation for participants to resemble female ideals. They aim to have a specific model’s or female celebrity’s appearance, and sometimes truly believe that they can attain this body.

J: Yah, and with people like Angelina Jolie like I was telling you: Then sometimes I think, I can do it, I can look like that. Yes, motivation mostly.
R: ...it’s something that you would strive towards. ...but you could actually aim for something like that.
So what is the reason for these women coveting a celebrity-type body? Nicole vocalises it quite clearly: The media portray the slender woman as perfect. And she wants “to be like that because that’s what they say is the perfect image.”

Much previous research also indicates that after being exposed to Western ideals in the media, female subjects desired to change their appearance and body shape in order to resemble the ideal that they had seen (Becker et al., 2002; Field et al., 1999; Tiggemann & Ruutel, 2002).

**Pressure to be Thin**

According the participants, the belief in Western culture is that the cultural ideal for women is to be slender. The duration of the reception of the message to be thin is long, as they have been exposed to this for their whole lives.

\[ F: \text{But it’s obviously, you know, you want to be thin, but I dunno, maybe that’s just how I’ve grown up.} \]
\[ H: \text{...that is, that’s the way a woman should look} \]

A major component of Western culture is obviously the mass media. Magazines, television and even the Internet regularly put pressure on these women to lose weight.

\[ R: \text{It’s um, watching these things and seeing pictures of beautiful women as well, it doesn’t inspire me, it’s more of a negative thing that would push me into doing something about it, like sticking to this new diet or, yah.} \]
\[ C: \text{Yah, I think it’s because we are exposed to that and that’s what they push for not females, well I wouldn’t say that they push females to look like that but I dunno... That’s [Kerry] the type of model that they show on things. So that’s you know.} \]
\[ I: \text{...but I’ve found part of myself and that what is portrayed on TV or in magazines is not necessarily real or what I should conform to either. But sometimes you do feel that the pressure is on.} \]
\[ N: \text{Pressured to look like that} \]
\[ \text{Like very, very like lose weight kind of thing, look like me.} \]

These women are put under so much pressure by ideal-type media that they lose some of their agency. In other words, they feel that they do not have as much of a choice about their appearance as the media govern it. In fact, a lot of the women see weight loss as a necessity, as indicated by the following quotes:
E: I would look at her and go gee you know wow I really need to do something about this kind of thing.
B: I need to get thinner
R: I must do something about it...

Celebrities often act as motivators for weight loss, especially if they have exhibited a change in weight to obtain their current slenderness:

R: Besides being driven to slim down to be that size
...although I had a renewed drive to do something about it as well.
C: Like with her I noticed that she was fatter, and then she lost a lot of weight. So then I thought, well if she can do it you know, I can, so then I started.
B: Well, sometimes I look and I see that she's like really thin, and I think, oh cool, I need to get thinner whatever.

Finally, it seems that for Nicole, the pressure to be thin has extended to her younger sister. Her sister is extremely aware of the small size of the women in the media. Due to the high frequency with which she purchases magazines, they play a big role in the pressure that she is under to be slim.

N: Oh yah, I also watched Legally Blonde with my sister as well, but also, she's got the blonde hair, the figure, the boy, you know, like everything, and yah, I think there's a huge pressure as well. My sister's in standard six, grade eight, and she's also like, oh she's so thin, and I'm so fat compared to her.
...and she's very much influenced by them, cos she buys them all the time and she'll do anything to kind of look thinner...

Previous studies also indicate that the media put women under increased pressure to be thin (Irving, 1990). This pressure led to decreased body satisfaction for the female sample in particular in one study (Cusumano & Thompson, 2000).

**Inability to Reach Ideal**

The final result is that these women realise that it is impossible for them to resemble someone else, but that the proximity of the ideal body type is especially far for them.

F: You can never make yourself look like someone else, it's more about what you can do.
R: Like no you actually can't be like that, you can't actually; this life is all a bit impossible for you.
C: But I still look at her and say I wanna look like that but you know it's almost impossible.
N: Then you kind of look at yourself, and there's no way, like I'm nowhere near there, or there's no way that I can like, get near there, and I don't think anyone else could.

They begin to question their own appearance, as they cannot seem to understand why they are unable to reach this type of slenderness:

H: I wonder why can't I look like that?
...but just sort of a feeling of why can I not look like that.

Not only is the ideal figure unattainable, but it is also impossible for them to resemble models and female celebrities in other areas. They cannot fit into clothes like models can, as “Um, I think it’s a nice bikini and I’d like to be able to wear that but I wouldn’t because I wouldn’t look anything like that in it, I wouldn’t try, yeah.” It is also impossible to resemble the face of celebrities, unless some similarity already exists.

R: Not face-wise, but I think that's a bit impossible anyway...
I: Do you think you could look more like...
C: Her than Jennifer Aniston. Yah, well, not, well kinda.

Summary of Consequences

This section identified the effects of heavy use of ideal-type media on these women. In the short-term, it modifies emotions almost immediately. A surprising result is that some participants do not believe that their self-esteem is affected at all, while others actually perceive the media to have a positive effect on their self-esteem. On the whole though, the media lead to participants feeling negatively about their bodies and decreasing their self-esteem. They also find models threatening and intimidating during comparison with them. Guilt also features in post-exposure to ideal-type media, and shame about the perceived large amount of food consumed. A number of them feel frustrated and angry due to their exposure to ideal women. They feel hopeless and depressed following exposure to ideal-type media, but for some this depression is longstanding and existed prior to exposure. Negative feelings such as jealousy,
annoyance and irritation, and more intensely, hate are directed towards models. Finally, a more concerned attitude is sympathy for the ramp models, as they worry about their health.

The next three consequences are more long-term. Firstly, participants experience a strong desire to change their appearance to resemble ideals, be it their hairstyle, or as the majority admit, a desire to change their bodies. They want to "look like that": The slender celebrity. Secondly, they feel that this specific type of the media puts them under a lot of pressure to be thin. In a sense, mass media somewhat regulate their weight loss. Finally, it is vital to notice that the majority of participants are unable to reach the ideal in the long run, as they cannot attain the "perfect" figure or beautiful face of models and celebrities.

Strauss and Corbin (1998, p. 106) also identify that "consequences at one point in time may become part of the conditions in another". This may be the case here, as these consequences may facilitate further heavy use of ideal-type media. Due to their negative feelings and desire to be thin, but inability to attain the desired appearance, participants may turn to the media for instruction and to feel better as has been hinted at throughout the results section. The possibility exists that factors interact with each other, and that the model may not be unidirectional.
5. CONCLUSION

5.1 Summary of Findings of Part One

Relationship between Media Exposure and Pathological Eating Attitudes and Behaviours

The results supported the first hypothesis of the study. They indicated that higher scores of media exposure correlate positively with higher scores on the EAT-26. Exposure to magazines that promoted slim, ideal body-types, exposure to any television, Internet and idealised celebrities who represent these body types, together with spending leisure time spent viewing television and reading magazines, was seen to significantly predict the risk of development of anorexia nervosa for the majority of participants.

These findings are consistent with much previous research that found a positive relationship between exposure to the media and various symptoms of disordered eating that is indicative of anorexia nervosa, such as body dissatisfaction (Tiggemann & Pickering, 1996), over-estimation of body size (Hamilton & Waller, 1993; King et al., 2000) and a great amount of weight loss (Toro et al., 1988). The findings of the present study are also consistent with studies that made use of a composite media variable. Stice et al. (1994) found significant direct effects of media exposure on symptoms of eating disorders for college students, while Cusumano and Thompson (2000) found media pressure to be a significant predictor of body dissatisfaction, a symptom of disordered eating, for pre-adolescents. The results of the current study seem to agree with previous literature that utilised a composite media variable.

Multiple regression was the method used to analyse the results in this study. Only a small number of existing studies were actually comparable in their analysis of data. While the results of this study indicated that the entire composite media variable was positively and significantly related to the possible development of anorexia nervosa symptomatology, Harrison and Cantor (1997) found that only magazine reading was a significant predictor of EAT-26 scores. Television was only shown to be a significant predictor of body dissatisfaction, but not of anorexia nervosa. A more recent study (Harrison, 2000a) also indicated that thin-ideal magazine exposure positively predicted anorexia nervosa, while television was only related to bulimia.
Social comparison theory can provide a framework for the explanation of how the mass media provide body types, which are held up as references against which individuals compare their own bodies (Waller & Shaw, 1994). Movies, television, magazines and the Internet feature individuals who have been especially prepared to look attractive (Irving, 1990). These individual models or celebrities are used as a social standard, and the consumers of the media compare themselves with them for self-evaluation. To explain the positive relationship between the media and symptoms of disordered eating, a contrast effect must exist. According to Irving (1990), individuals compare themselves to those ideals put forward by the media and therefore evaluate their own looks as inferior. This may then motivate them to improve their own bodies by various measures.

This theory therefore attempts to explain why individuals are affected by the figures projected by the media, or the positive correlation between media exposure and disordered eating. Most existing theories, however, neglect to explain why the relationship between media consumption is not significantly related to a high risk of disordered eating development for all participants, as closer inspection of the current findings indicate. Firstly, not all media users compare themselves with individuals that are portrayed by the media, who Levine and Smolak (1996) refer to as extreme positives. Some media users rather choose to compare themselves with someone who is similar to themselves with regards to body shape or size, such as their peers, and they are then not as likely to desire weight loss. This indicates that post-exposure, some individuals would therefore be more satisfied with their own bodies, even if they do not fit the standard portrayed by the media. Secondly, when individuals who are content with their bodily appearance, and have a body shape similar to the ideal type depicted in magazines and television, they may be more immune to influences of the media (Posavac, 1998). Contrast effects are therefore not present during physical comparison with media figures.

*Relationship between Sex and Possible Symptoms of Anorexia Nervosa*

The second hypothesis of the study was also supported because sex was a significant predictor of disordered eating behaviour. This is in fact one of the most consistent findings of previous studies, including South African studies (Le Grange et al., 1998). The finding that women are more likely to develop symptoms of anorexia nervosa are so commonplace that the majority of
previous studies only used women as participants to indicate their vulnerability to eating disorders, and as in this research, the heavy influence that the media have on them. They found that exposure to thin-ideal media puts subjects more at risk of developing symptoms of eating disorders (Field et al., 1999; Posavac et al., 2001; Wegner et al., 2000). This was especially the case for women who already exhibited symptoms of eating disorders (Hamilton & Waller, 1993; Heinberg & Thompson, 1995; Posavac, 1998).

Only a few studies took into account the possibility of both men and women being affected by the media. Previous research (Cusumano & Thompson, 2001; Harrison, 2000a) found media exposure to be related to disordered eating in both male and female children (Harrison, 2000b). The general consensus is that women were exposed to media that dealt primarily with weight loss issues, while men received messages via the media that concentrated on being muscular and fit (Anderson & DiDomenico, 1992; Malkin et al., 1999).

Social comparison theory can once again provide a plausible explanation for the results of sex differentiation. The ideals that women and men are exposed to in the media are very different. The media’s pervasive use of thinness as an ideal standard for women (Anderson & DiDomenico, 1992; Silverstein et al., 1986) means that this is the reference point for bodily attractiveness. However, the image of tall, slender and beautiful women does not correlate with many women’s actual body size. This discrepancy is likely to cause body dissatisfaction and anxiety (Waller & Shaw, 1994) in these women. For some, it may contribute to the development of disordered eating, or trigger off episodes of pathological eating behaviours if disordered eating already exists in the individual. The ideal image for men as portrayed by the media is a muscular and fit body (Anderson & DiDomenico; Malkin et al., 1999). Thus male consumers of the media are not exposed to a thin ideal for themselves as women are. While comparison with this standard of bodily attractiveness may also cause dissatisfaction with the average man’s physique, this does not mean that males are becoming more at risk for traditional disordered eating like anorexia or bulimia nervosa. It does seem that Western society is gradually placing substantially more value on “the physical appearance of men’s bodies” (Pope et al., 2001, p. 191), therefore providing a more relevant reference for body shape. However, for men that have body types that are significantly different to the muscular, powerfully-built physique that is increasingly
portrayed by the media, it is assumed that they would not want to lose weight, but would instead want to gain muscle. The implications of this may be frequent visits to gymnasiums and fitness centres, the use of steroids and various supplements to build muscles for some men (Pope et al.). Therefore in some ways, symptoms of men's disordered eating are the reverse of those of anorexia nervosa.

**Relationship between Ethnicity and Disordered Eating Attitudes and Behaviours**

The findings of the current study show that in the multicultural context of South Africa, there is a not significant relationship between ethnic identity and the possible development of symptoms of anorexia nervosa, especially for women. One must bear in mind that there were a low number of black participants in this study, and ethnicity was not really its main focus.

Previous South African studies with university students did find white female participants to be more at risk for anorexia nervosa (Le Grange et al., 1998; Wassenaar et al., 2000). These studies, did not, however, take media exposure into account unlike Botta (2000), who in her American study found no major difference between black and white adolescent girls' exposure to media. Both groups desired to be slender and idealised thin female celebrities. It is assumed that all of the subjects in the current study, since they are university students, have been modernised and exposed to the ideal to at least some degree. This provides a possible explanation for the fact that white and black participants are equally at risk for anorexia nervosa.

**5.2 Summary of Findings of Part Two**

**Causes/Predisposing Factors**

There were both internal and external factors that lead to the phenomenon. Internal causes were those that were inherent to the participants. External causes were the outside agencies that influence participants' cognitions, attitudes and feelings. The implication is that the causal pattern is a complex one. Some of the main findings recur again later, such as the women's modelling of mass media figures, participants' depression and their low levels of self-esteem. The possibility therefore exists that the factors interact with each other. An extremely important finding is the already existent symptoms of anorexia nervosa. Some participants were already at-risk for the development of an eating disorder. The conclusions are: a) ideal-type media did not
necessarily cause disordered eating for these women, b) some of the women were predisposed to the development of pathological eating attitudes and behaviours. These findings can therefore help us in the future to possibly identify those factors that make women who are already at risk of anorexia nervosa more likely to heavily use the media in a maladaptive way, further promoting their disordered eating.

*Phenomenon: Use of Ideal-Type Media*
It was found that participants heavily use ideal-type media. Various theories can explain different aspects of how they use the media, such as modelling, a component of social learning theory, social comparison theory and uses and gratifications theory. One can again interpret this as women's use of the media being a complex process, one that is at times difficult to explain. An interesting finding was that of the halo effect. The participants' admiration of ideal women's bodies extended to their other characteristics. What is understood by this is that they made superficial assumptions about ideal women's lives based on only one aspect of their appearance. A significant finding is that heavy use is not simultaneous with maladaptive use of the media, and it is important to be able to identify which uses are actually not conducive with disordered eating patterns. However, it was found that the majority of the women used it in a destructive manner.

*Intervening Conditions*
The finding was that men's attitudes facilitated the heavy use of ideal-type media in a number of ways. Importantly, men's general approval of the ideal-type women's body reinforced this use. The implication of this is that these women want to have the appearance that men desire, so they turn to the media not only for examples of the ideal body but possibly also for further instruction on how to obtain it.

*Action/Interaction Strategies*
A significant finding was that these women do have agency and are in control of their strategies. Their chosen responses to the media were modifications to existing behaviours, such as eating patterns, exercise routines and the use of slimming aids, which is possibly where disordered
eating attitudes and behaviours begin for some participants. These strategies did fail for some participants.

**Consequences**

In the short-term, the women’s emotions were mainly negatively affected. Importantly, depression and self-esteem were also referred to earlier as causes for some of the participants. Two other significant short-term consequences were the desire to change bodily appearance and the immense pressure to be slender. This can be interpreted as the medias’ influence not only on women’s thoughts, but also on their feelings, which may prove helpful in designing a treatment plan for women with eating disorders. In the long-term, the significant finding was the women’s inability to reach the ideal appearance, since some of the strategies failed to achieve their goal. A possibility was that the interviewees possibly then start a cycle, and go back to the media for instruction on reaching the ideal body that the media depict. However, more research is needed to reach this conclusion. While this may be a possibly limitation of the current study, there were also a number of strengths.

### 5.3 Strengths and Limitations of the Current Study

A possible strength of the first part of the current study is that it attempted to differentiate media exposure into different body types, allocating more points to participants’ media consumption that depicted ideal body types for men and women. This is in line with previous studies that found that the content of media exposure did make a difference to their scores on measures on eating disorders (Field et al., 1999; Cusumano & Thompson, 2001; Harrison, 2000a).

Another positive aspect of the study was the inclusion of a composite media variable, as the majority of previous research did not include more than one type of mass medium (Fouts, 2000; Hamilton & Waller, 1993; Heinberg & Thompson, 1995; King et al., 2000). Furthermore, the majority of these studies only used female participants, obviously then only exposing them to slender women that symbolise those found in the media (Pinhas et al., 1992; Posovac, 1998). This study took men into account to consider the medias’ effect on their eating attitudes and behaviours (Anderson & DiDomenico, 1992; Harrison, 2000a; Malkin et al., 1999).
Another strength is the inclusion of the Internet as a component of the composite media variable, therefore addressing a previously unrepresented arena of academic work. However, there was also a limitation with the use of the Internet in that content of what the respondents were exposed to was also not taken into consideration. Internet sources that depicted cultural ideals of body type were not questioned; only frequency and possession were questioned. This is partly due to the fact that the Internet is a reasonably recent source of media, one on which previous studies investigating the relationship between it and disordered eating behaviours is significantly absent.

A similar possible problem existed with regards to television. Television shows and films were not differentiated into thin-ideal shows, like soap dramas such as Melrose Place (Harrison & Cantor, 1997), movies such as Clueless in comparison to Fight Club, and music videos or programmes (Tiggemann & Pickering, 1996). Sports programmes and matches were also not separated from other viewing preferences. However, television content’s role as a predictor of eating disordered is not as established as magazines, as there is evidence that it does not contribute significantly to abnormal eating attitudes and behaviours (Coolican, 2000; Harrison, 2000a). The extent of exclusion of the content of television as a limitation is therefore somewhat questionable.

Other limitations of the study refer to the type of data collection undertaken. Firstly, the self-administered questionnaires relied on the self-reports of respondents' current eating behaviours and media consumption. One can never be entirely convinced that written responses are completely truthful. Since Western society has certain expectations for women, namely to be thin and attractive, female respondents may have underestimated their actual weight. However, since eating disorders are seen to have “destructive effects on individuals” (Schwartz et al., 1982: 21), their cessation has become a source of interest for those in the mental health profession. It is therefore also possible that at-risk respondents who are at risk may have responded untruthfully to the EAT-26 scale in order to avoid being identified as having an eating disorder.

As a screening tool, the EAT-26 does not allow for participants’ explanations for their disordered eating, and researchers can only speculate about them. Individual factors may differ, with media exposure perhaps only further contributing to eating attitudes and behaviours that have already
gone awry. The direction of the relationship between media exposure and anorexia nervosa cannot be measured by this test. It may therefore be worthwhile to consider that the exposure-disorder relationship is “bidirectional. Media users may be affected by what they view but they also selectively expose themselves to media content that is congruent with their existing worldview” (Harrison, 2000a: 138).

Since convenience sampling was used, it is likely that the findings can be extended to other populations of South African universities that were historically white who were participating in psychological studies, but probably not to other faculties. It is also highly unlikely that the findings can be extended to the general population of South Africa. However, results are congruent with previous research conducted in the majority of cross-cultural contexts.

The measure that the study utilised, namely the EAT-26, has proved to be both valid and reliable (Garner et al., 1982). It is also appropriate for use with South African samples. However, it seems that since men have different ideals regarding body shape and ideals, perhaps these instruments are not as useful for male subjects. Further research needs to be conducted in this manner in order to test this theory, and perhaps lead to the development of more valid measures that can be applied to both sexes equally.

The second part of the study deals effectively with some of these limitations. Firstly, interviews provided participants with the opportunity to explain to the researcher why and how media sources make them feel about their own bodies, and what role they have played in the disordered eating attitudes and behaviours, if any. The women could openly discuss whatever they felt was relevant with regards to magazines, television and the Internet. They could therefore discuss their own experiences. Secondly, what type of television and what websites they visited and if these depict ideal body types can be questioned. The fact that the interviews were semi-structured, and the questions prescribed, guided the process. This ensured that the areas of interest were covered. Finally, the interviews were conducted in a non-threatening and non-invasive manner. The result was that participants felt comfortable, and that I was “totally like down to earth and non-judgemental and stuff” and they thought that I “did pretty well.” On the negative side, I realised that I needed to be more observant during the actual interview process
because afterwards I noticed a number of contradictions from the participants. It would have been interesting and probably quite helpful to discuss these with the women.

5.4 Suggestions for Further Work

Regarding the quantitative section and the analysis of data, other variables that may have had an effect on the respondents' eating behaviours were available, but were not seriously considered. For example, students' religious beliefs may influence the manner and content of their eating behaviours, regardless of their media exposure. Furthermore, the socio-economic status of the students may influence not only how much food they eat, but also what type of food is eaten, for example, by students living in a residence of the University of Cape Town.

While the sex of the participants was considered in the analysis of data, the sexual identity of participants was not. At the risk of reinforcing stereotypes, it must be acknowledged that homosexual male and female participants may desire body types that do not correlate with the assumed body ideal for their sex. A proportion of homosexual men may identify more with the feminine ideal of being slender and may therefore be more prone to developing eating disorders. A percentage of lesbian women may also dissociate themselves with this feminine ideal, and may rather wish to attain a muscular, well-toned body type. However, more research needs to be conducted to find out if sexual identity differentiation does indeed exist.

Regarding the interviews, a future suggestion is to compare those identified as anorexic by professionals with those with normal eating patterns to see if they utilise the media in different ways. Another possibility is to consider the relationship between other causes of anorexia nervosa and the media specifically. Some of these have already surfaced without being directly questioned about, such as family and peers and personality disposition to name a few. In future, asking directly about the role of these factors could prove fruitful.

A final suggestion is to conduct this type of study using a broader spectrum of participants. As mentioned earlier, South Africa is a diverse country, and the ambitious attainment of a general picture of the population's exposure to the media and percentage of disordered eating behaviours could go a long way in deciding what policies and so forth need to be implemented.
5.5 Implications of the Study

This study indicates that clinicians need to be aware of and better trained to deal specifically with issues of disordered eating. It would be useful for practitioners to determine the prevalence of these disorders in specific populations, such as the student population of universities, what symptoms to look for and how to prevent eating disorders. Professionals can speak to high-risk population groups about eating disorders and the media. In other countries, the media and the Internet in particular, are already being proposed as possible methods of treatment for those individuals who exhibit eating disorder symptomatology and have access to the media (Zabinski et al., 2001b). Therefore an implementation plan can also possibly make use of the impact of the media in a positive manner.

The interviews also showed that ideal-type media do not cause eating disorders, but there is more of an interaction with other problems that lead to individuals heavily using the media to further their maladaptive behaviours. Psychologists can therefore play more of a preventive role and identify underlying factors that make certain women vulnerable to the negative influence of the media to further their disordered eating attitudes and behaviours.

If further research indicates a consistent pattern of high media exposure as being positively related to the development of disordered eating behaviours, perhaps it could influence South African policies regarding both media and advertising standards and ethics. Less emphasis could possibly be placed on being slender and glamorous models and celebrities, and advertisements that promote weight loss for women will be paid special attention to. However, it does seem that entire magazines and all television shows are related to disordered eating. Therefore it is necessary to re-consider the feminine icon of beauty and thinness that is emphasised in the media in general. This is no easy feat.

Therefore while this somewhat exploratory South African study was not completely unproblematic, with further research it can be utilised in the development of eating disorder prevention and intervention plans. The content of media shown to the public can be monitored more closely if it is proven that media exposure is significantly related to disordered eating behaviours.
REFERENCES


STUDY ON EATING BEHAVIOURS

classified by students of

the DEPARTMENT OF PSYCHOLOGY at the

UNIVERSITY OF CAPE TOWN

The following questionnaires have been designed to find out more about thoughts, feelings and behaviours you may have about eating and your body. There are five different sections, and it will take no more than 50 minutes to complete them all.

Participation in the study is completely voluntary, and you are free to choose not to complete the questionnaires. However, we urge you to participate. The information is important to us and to local health services, and you may find out things about yourself that are interesting and useful to you.

This study is conducted in two parts, and filling in these questionnaires is part one. In the second part of the study, we would like to talk with SOME of you individually about your answers. At the bottom of this page you will see that we ask for your name and contact details. This will allow us to contact you for part two of this study.

Your answers will be strictly confidential. At the top of this page and the next one you will see a number. When you hand in your completed questionnaires, please tear off the first page, and hand it in separately from the rest of the pages. The only way to connect your identifying information with your answers to the questions will be through this number. Only the two researchers will be able to make this connection, and thus have access to your answers.

If you feel that you want to fill in the questionnaire, but do not want to fill in your name and contact details, we still would like you to complete the questionnaire.

Name: ___________________       Surname: ___________________

Telephone number (h) _________ (cell) _________

E-mail address: ________________

Please follow the instructions for each section carefully, and try to be completely honest.

THANK YOU VERY MUCH FOR PARTICIPATING IN THIS STUDY
SECTION A

Section A consists of questions relating to your family and educational background. Your answers will be strictly confidential, so please try to be completely honest. Read each question carefully and tick the appropriate answer (where indicated) or fill in the response that best applies to you.

1. How old are you?  
   _______ years

2. What is your gender? (Please tick one)  

3. What is your year of study? e.g. 1st year, 2nd year, etc.  
   _______ year

4. (a) What job is it you want to do one day? e.g teacher  
        ____________________________
   (b) Is your choice of career the same or different than what your parents want you to do?  
        [1] The same  
        [2] Different

5. (a) What language do you mostly speak at home?  
        [1] Afrikaans  
        [2] English  
        [3] Xhosa  
        [4] Zulu  
        [5] Other(s) (please specify)  
        ____________________________

   (b) What language do you mainly speak to your friends?  
        [1] Afrikaans  
        [2] English  
        [3] Xhosa  
        [4] Zulu  
        [5] Other(s) (please specify)  
        ____________________________

   (c) How many people sleep in the same room as you?  
        ________

6. Which of the following do you or your family have at home? Please mark as many as necessary.  
   [1] Telephone  
   [4] Electricity

IF Yes, how often do you access the internet?
   [1] At least once a day
   [2] At least once a week
   [3] At least once a month

8. Most South African institutions, including the government, still ask questions about ethnic identity, mainly for reasons of employment equity and affirmative action. If you were asked to which ethnic group you belong, how would you reply? Please tick the appropriate category. Feel free to write in an ethnicity not on the list.
   [1] African (black)
   [2] Coloured
   [5] Other (please specify)  ___________

9. What is the total number of years you have lived in a city since birth?  ___________ years

10. What is your religious affiliation?
    [1] Agnostic
    [2] Buddhism
    [3] Christian
    [5] Islam
    [7] None
    [8] Other (please specify)  ___________

11. What work does your father (or the male person who brought you up) do? Please describe it in a few words.

______________________________________________________________________________

12. What work does your mother (or the female person who brought you up) do? Please describe it in a few words.

______________________________________________________________________________
13. What is your father's (or the male person who brought you up) highest educational qualification?

14. What is your mother's (or the female person who brought you up) highest educational qualification?

15. Do you have a family history of being overweight? [1] Yes [2] No

16. Do you consider yourself to be:
   [1] very underweight
   [2] a little underweight
   [3] normal weight
   [4] a little overweight
   [5] very overweight

17. Who has a body type that you would consider as ideal? (that is, is there a movie star, sport star, rock star or any celebrity you would like to look like). Write his or her name in this space:

18. Do you think older women should be heavy? [1] Yes [2] No

19. Do you have a favourite magazine or newspaper that you enjoy reading? [1] Yes [2] No

If Yes, please give the name of the magazine or newspaper

If Yes, how often do you read this magazine or newspaper?
   [1] Regularly i.e. almost every time it appears
   [2] Sometimes i.e. about half the time it appears
   [3] Seldom i.e. once or twice a year
20. What is your favourite dish or meal? e.g. pizza; ngush

How often do you eat your favourite meal?
   [1] Once or twice a day
   [2] Once or twice a week
   [3] Once or twice a month

21. Please name two things you do most often when you have free time or leisure time; for example, going to the movies, reading, listening to music, etc.

22. Do you smoke cigarettes as a means to control your weight?  
   [1] Yes  
   [2] No

THANK YOU FOR YOUR ANSWERS SO FAR. NOW PLEASE TURN TO THE FOLLOWING PAGES AND CONTINUE WITH THE REST OF THE QUESTIONS. THERE ARE FOUR MORE SECTIONS.
Please circle the number under the column which applies best to each of the numbered statements. Most of the questions directly relate to food or eating, although other types of questions have been included. Please answer each question carefully.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>ALWAYS</th>
<th>USUALLY</th>
<th>OFTEN</th>
<th>SOMETIMES</th>
<th>RARELY</th>
<th>NEVER</th>
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<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
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<td>avoid eating when I am hungry</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>3</td>
<td>find myself preoccupied with food</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
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<td>4</td>
<td>have gone on eating binges where I feel I may not be able to stop</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
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<tr>
<td>5</td>
<td>cut my food into small pieces</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
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<tr>
<td>6</td>
<td>am aware of the calorie content of foods that I eat</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
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<tr>
<td>7</td>
<td>particularly avoid foods with a high carbohydrate content (e.g., bread, rice, potatoes, etc.)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
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<tr>
<td>8</td>
<td>feel that others would prefer if I ate more</td>
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<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
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<tr>
<td>9</td>
<td>vomit after I have eaten</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>10</td>
<td>feel extremely guilty after eating</td>
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<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>11</td>
<td>am preoccupied with a desire to be thinner</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
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<tr>
<td>12</td>
<td>think about burning up calories when I exercise</td>
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<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
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<tr>
<td>13</td>
<td>Other people think that I am too thin</td>
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<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
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<tr>
<td>14</td>
<td>am preoccupied with the thought of having fat on my body</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
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<tr>
<td>15</td>
<td>take longer than others to eat my meals</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
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<tr>
<td>16</td>
<td>avoid foods with sugar in them</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
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<tr>
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<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>18</td>
<td>feel that food controls my life</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>19</td>
<td>display self-control around food</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
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<td>feel that others pressure me to eat</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
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<tr>
<td>21</td>
<td>give too much time and thought to food</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
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<td>22</td>
<td>feel uncomfortable after eating sweets</td>
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<td>3</td>
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<td>6</td>
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<td>23</td>
<td>engage in dieting behaviour</td>
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<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
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<tr>
<td>24</td>
<td>like my stomach to be empty</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>25</td>
<td>enjoy trying new rich foods</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>26</td>
<td>have the impulse to vomit after meals</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
</tr>
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</table>
APPENDIX B: INTERVIEW SCHEDULE

➢ MAGAZINES

1) Tell me about the magazines that you like to read on a regular basis?

   Probes: a) What do you like most about these particular magazines?
   
   b) When did you start reading (particular magazines)?
   
   c) Was there a particular reason that you began reading (particular magazines)?
   
   d) What caused you to choose THIS magazine (probe pre- and post-eating disordered 
   
   behaviour)?
   
   e) Is there anything that you do not like about (particular magazines)?
   
   f) Which do you do more of, read the articles or look at the pictures? Why? Explain?

2) Do you ever pay attention to the advertisements in these magazines? (Each magazine)

   Probes: a) Which ads do you pay the most attention to when you read these magazines?

   b) Which is more important to you? The adverts or the articles? Why?

3) Can you tell me more about why you read these magazines or look at the ads that you do?

   Probes: a) Explore emotions, feelings—when you read them how do they make you feel?

   b) What do you think about as you read and look at these magazines and ads?

   c) Do you find that most models have something in common in the way they look?

   d) How do they make you feel about your body?

4) Is there a particular time when you most enjoy or feel you “need” to look at one, or all of your magazines. Explain?

5) Where are you when you read these magazines?

6) What are you normally doing when you read these magazines?

7) Do you talk about what you read/see in these magazines with your friends?

   a) Can you please provide an example?
8) How important are these magazines to you (each one)? Would you rather read these magazines than be with friends and family? If so, why?

9) How do you think the magazines that men read differ from the ones you read?
   b) Do you think that they feel differently to women when they look at magazines?

[Have range of magazines, from ‘glossy’ fashion magazines, to Fair Lady, to Runner’s World. Once they have identified a type of magazine, these can be used to further explore how the interviewee feels when they are exposed to the ‘ideal’ body type. For example, can ask what they like about a model-while showing them her picture]

➢ TELEVISION

1) Tell me about the television shows that you like to watch on a regular basis.
   Probes: a) What is it that you like most about each particular TV show?
   b) When did you start watching this show (each one)?
   c) Why did you start watching this show (each one)?

2) Who are your favourite characters on these TV shows?
   Probe: a) What do you like about them?

3) Can you describe the physical characteristics of these characters?
   Probe: a) Which of these do you think are the most important characteristics and why?
   b) What do you think makes this person stand out from others?
   c) Would you like to look like them?
   d) How do they make you feel about your own body?

4) What do you think are the most important emotional, personality characteristics of these characters?

5) How do you identify, or think you are like, the character (each one)?
6) Would you like to be like this person? Why?

7) Have you ever done something in order to look more like this character (each one)?
a) What means would you go to have a body like theirs?

8) Do you feel that you watch a lot of television/
a) Have you always watched this amount of television?
b) Have you always watched the same type of television?

9) Do you ever pay attention to the ads when you are watching television?
Probes: a) Which ads do you pay the most attention to?

10) How do you feel inside as you watch television?
Probes: a) Explore emotions and feelings—anything special or different?
   b) What do you think about as you watch television?
   c) Is there a particular time when you most enjoy or feel you ‘need’ one, or all, of your television programmes?

[If information indicates a preference for music videos, explore feelings and emotions felt during viewing]

11) What are you normally doing when you watch television?

12) Do you talk about what you have seen on television with your family or friends? Explain by example?

13) How important are these television programmes to you?
a) Would you rather watch TV than be with your friends and family sometimes?

14) Do you think that men watch different programmes to women like yourself?
a) How do you think this affects them?
➢ **THE INTERNET:**

1) What type of things do you look at on the Internet?

2) Do you ever come across articles and pictures of thin models and actresses on the Internet?
   a) Do you ever see adverts that tell you how to lose weight?
   b) How did you come across these?
   c) Have you ever used what you saw or read on these sites in an attempt to lose weight?

3) How important is it to you that you look like these people?

4) How do you feel about your own body when you go on these sites?

5) Who is with you when you go on to these sites?

6) Where are you when you go on the Internet?
   a) If at home, do you look at different sites than at varsity?
Dazzle in glitzy gold and bewitching black
This page, from left to right: Sheer golden top R280, cropped elasticated pants R190, golden sandals R220; Sheer tunic R230, grey skirt R210, glass-heeled mules with vinylite upper R280; Sheer jacket R170, glittery tunic R210, elasticated pants R190, mules R240.

Opposite page, from left to right: V-neck dress R280, sequined mules R260; Sparkle top R270, skirt with satin trim R230, ankle-strap sandals R220; Pleated top with cami R170, crushed lace-trim skirt R220, diamante thongs R300.
APPENDIX D: CONSENT FORM:

I, ________________________, understand that the purpose of this interview is to find out more about my eating behaviours and how this may be affected by the media that I am exposed to.

My participation in the interview is voluntary, and I am aware that if the interview becomes uncomfortable for me at any stage, I do not have to continue.

I understand that the interviewer will make use of what has been said in the interview for research purposes, but I realise that my name and details will be kept strictly confidential.
APPENDIX E: VISUAL REPRESENTATION OF GROUNDED THEORY

OPEN CODING

CATEGORIES

CONCEPTS

PROPERTIES DIMENSIONS

AXIAL CODING

CAUSES

PHENOMENON

INTERVENING CONDITIONS

ACTION/INTERACTION STRATEGIES

CONSEQUENCES
APPENDIX F: EXAMPLES OF OPEN CODING
CAUSES/PREDISPOSING FACTORS:

INFLUENCE OF PARENTS:

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<tr>
<th>Concept</th>
<th>Property</th>
<th>Dimension</th>
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<tbody>
<tr>
<td>Mother’s influence on eating behaviours</td>
<td>Extent of influence</td>
<td>Low …………………… High</td>
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<tr>
<td>Mother’s instructions of eating behaviours</td>
<td>Choice to lose weight</td>
<td>Involuntary ………… voluntary</td>
</tr>
<tr>
<td>Mother’s commandment for her to be thin</td>
<td>Desired size</td>
<td>Thin …………………… Heavy</td>
</tr>
</tbody>
</table>

INFLUENCE OF SIBLINGS:

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<th>Property</th>
<th>Dimension</th>
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</thead>
<tbody>
<tr>
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<td>Feelings of importance</td>
<td>Low …………………… High</td>
</tr>
<tr>
<td>Position in family with siblings</td>
<td>Age order of siblings</td>
<td>Youngest ………… oldest</td>
</tr>
<tr>
<td></td>
<td></td>
<td>x (brother)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>x (sister)</td>
</tr>
</tbody>
</table>

INDIRECT MEDIA INFLUENCE:

<table>
<thead>
<tr>
<th>Concept</th>
<th>Property</th>
<th>Dimension</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mother’s exposure to thin ideal media</td>
<td>Level of exposure</td>
<td>Low …………………… High</td>
</tr>
<tr>
<td>Mother’s desire for her to be</td>
<td>Choice to resemble model</td>
<td>Internal ………… External</td>
</tr>
</tbody>
</table>
PHENOMENON: HEAVY USE OF IDEAL-TYPE MEDIA
DESCRIPTION OF IDEAL BODY TYPE

C:
CONCEPT: Preference of thin models
QUOTE: These two (indicates the thin models)

CONCEPT: Attractiveness of protruding bones
QUOTE: “No, well I love that part. The collarbones and the hips, the hip bones sticking out there and the collarbones sticking out.” “The collarbones and the body…”

CONCEPT: Example of ideal body type
QUOTE: (TC) “So then if you had to choose a model or celeb that you’d like to look like, who would it be?”
(CC) “Courtney Cox probably.”

CONCEPT: Models’ lack of curves
QUOTE: “but I dunno, more and more you don’t see a model who’s got slight curves or you know, slighter larger than her, than Kerry McGregor. That’s [Kelly] the type of model that they show on things. So that’s you know.”

<table>
<thead>
<tr>
<th>Concept</th>
<th>Property</th>
<th>Dimension</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preference of thin models</td>
<td>Choice</td>
<td>Voluntary...........Involuntary</td>
</tr>
<tr>
<td>Attractiveness of protruding</td>
<td>Bones’ level of visibility</td>
<td>Low...............High</td>
</tr>
<tr>
<td>bones</td>
<td></td>
<td>x</td>
</tr>
<tr>
<td>Example of ideal body type</td>
<td>Level of slenderness</td>
<td>Low...............High</td>
</tr>
<tr>
<td>Models’ lack of curves</td>
<td>Level of voluptuousness</td>
<td>Low...............High</td>
</tr>
</tbody>
</table>

B:
CONCEPT: Thinness of model
QUOTE: “Um, she’s thin, but not skinny, just like sexy thin.”

CONCEPT: Description of model’s various body parts
QUOTE: “her shoulders, her arms, her boobs, her stomach. Her legs are maybe a bit big…”
“Kind of like nice, thin arms and legs.”

CONCEPT: Model’s lack of body fat
QUOTE: “But they’ve not got any fat, so they look cool.”
“They’ve got not body fat, well they do have some, but you know, yah they’re just thin.”

CONCEPT: Example of attractive model/TV celebrity
QUOTE: “Um, like Natalie Imbruglia.”
“Yah, I’m just trying to think (...) I think Angelina Jolie is quite nice.”
“Well, sometimes I look and I see that she’s like really thin…”

CONCEPT: Influential celebrity’s ideal body type [level of impact]
QUOTE: “Or like Cameron Diaz, really, she’s a big one.”

<table>
<thead>
<tr>
<th>Concept</th>
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<th>Dimension</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thinness of model</td>
<td>Level of slenderness</td>
<td>Low...............High</td>
</tr>
<tr>
<td></td>
<td></td>
<td>x</td>
</tr>
</tbody>
</table>
APPENDIX G: PARADIGM MODEL FOR INTERVIEWS-ROLE OF THE MEDIA

➢ PRECIPITATING FACTORS/CAUSES:
  • INFLUENCE OF PARENTS
  • ROLE OF SIBLINGS
  • INDIRECT MEDIA INFLUENCE
  • MODELLING OF BEHAVIOURS
  • CURRENT/EXISTING EMOTIONAL ISSUES/STATE
  • ROLE OF PEERS
  • (CHILDHOOD) PERSONALITY DISPOSITION
  • SPECIAL EVENT
  • PREVIOUS BODY SIZE
  • PREVIOUS VULNERABILITY TO EATING DISORDERED BEHAVIOUR

➢ PHENOMENON: HEAVY USE OF IDEAL-TYPE MEDIA
  • The following are subcategories:
  • Description of ideal body type
  • Admiration and criticism of characters
  • Unattractiveness of heavy models
  • Models' satisfaction with appearance
  • Behaviour and consequential inspiration
  • Comparison
  • Identification with models
  • Reduction of cognitive dissonance
  • Critical consumption of media
  • Addictive behaviour
  • Reassurance for own body
  • Cognitive response to diet advertisements
  • Modelling of models'/celebrities' method of weight loss (weight loss tips)
  • Support for fellow anorexia nervosa sufferers
  • Description of recovery process: Avoidance of media
    Selective use of media
  • Alternative uses of media: Relaxation
    Escapism
    Fashion advice
    Motivation to purchase products
    Research purposes
    Solution to boredom

➢ CONDITION: MEN'S PERCEPTION OF FEMALE IDEAL

➢ STRATEGIES
➢ CHANGE IN EATING PATTERNS
  • Eating more
  • Eating less
- USE OF SLIMMING AIDS
- INCREASE IN EXERCISE

- CONSEQUENCES
  - MOTIVATION/DESIRE
    - To change appearance
  - PRESSURE:
    - To be thin
  - EMOTIONS:
    - Threat
    - Jealousy
    - Hate
    - Disgust
    - Depression
    - Annoyance/Irritation
    - Intimidation
    - Inadequacy
    - Hopelessness/despair
    - Guilt (often related to eating more)
    - Embarrassment
    - Sympathy (for FTV models)
    - Acceptance
    - Neutrality
    - No effect
    - Self-confidence
    - Anger
    - Frustration
    - Increase in positive feelings
    - Decrease in self-esteem
    - Discomfort

- INABILITY TO REACH IDEAL