

My Culture is My Identity: Understanding Cultural Aspects that
Permeate Ethnic Minorities' Feelings Regarding Their Bodies

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Dedication Page

This dissertation is dedicated to Celeste F. Williams. From day one, your love was always unconditional and I am so blessed to have had you as a grandmother for almost 26 years.

Without you, there would have been no me. I miss you Grandma. Rest in Power!

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“I again saw under the sun that the race is not to the swift and the battle is not to the warriors, and neither is bread to the wise nor wealth to the discerning nor favor to men of ability; for time and chance overtake them all.” ~Ecclesiastes 9:11 NASB

You are the source of my strength. You are the strength of my life. I LIFT MY HANDS IN TOTAL PRAISE TO YOU! Thank you Lord for ordering my steps and blessing me beyond measure. Thank you to the Blessed Mary, ever Virgin and my patron saint, Saint Mary Magdalene for your unyielding faithfulness both to our Lord and Savior Jesus Christ and to me through my prayers.

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Running head: MY CULTURE IS MY IDENTITY

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Table of Contents

Abstract.....	13
Chapter I: Introduction.....	14
Background and Rationale.....	14
Purpose of the Study.....	18
Research Questions.....	18
Assumptions, Limitations, and Delimitations.....	19
Assumptions.....	19
Limitations.....	20
Delimitations.....	21
Definition of Terms.....	21
Summary.....	23
Chapter II: Review of Literature.....	24
Historical Context.....	24
Cultural Identity.....	24
Cultural Identity and Body (Dis)satisfaction.....	26
Cultural Identity and Self-Esteem.....	31
Self-Esteem and Body (Dis)satisfaction.....	34
Thin Ideal Internalization and Black and Latina Women.....	38
Summary and Conclusion.....	41
Chapter III: Methods and Procedures.....	45
Qualitative.....	45
Quantitative.....	46

Research Design.....	46
Identification of Participants.....	48
Population.....	48
Sample.....	48
Inclusion Criteria.....	48
Exclusion Criteria.....	49
Description of the Setting.....	50
Data Gathering Tools.....	50
Qualitative.....	50
Quantitative.....	52
Data Gathering Procedures.....	54
Data Analysis Plan.....	56
Qualitative.....	56
Quantitative.....	58
Data Quality Measures.....	59
Qualitative.....	59
Quantitative.....	61
Ethical Considerations.....	62
Summary.....	63
Chapter IV: Results.....	64
Qualitative Interviews.....	64
Coding.....	66
Central Phenomenon: Body Image.....	71

Weight.....	71
Breast Size.....	74
Hair.....	77
Category: Interpersonal Impacts.....	78
Family.....	79
Peers.....	80
Relationship Partners.....	82
Category: Cultural Expectations.....	83
Mixed Messages.....	84
Food.....	85
Ideal Woman.....	87
Category: Mainstream Values.....	89
Thin Ideal.....	89
Quantitative Findings.....	91
Characteristics of the Sample.....	91
Relationships among the Variables.....	92
Influence of Body Satisfaction on Self-Esteem.....	93
Chapter V: Discussion.....	95
Introduction.....	95
Qualitative Research Discussion.....	95
Quantitative Research Discussion.....	104
Implications for Clinical Practice.....	105
Limitations and Future Directions.....	106

Summary.....	108
References.....	109
Appendix A: Standardized Email Recruitment Script.....	119
Appendix B: Participant Letter.....	120
Appendix C: Informed Consent.....	121
Appendix D: IRB Approval.....	126
Appendix E: Demographic Data.....	127
Appendix F: Multidimensional Body-Self Relations Questionnaire-Appearance Scales (MBSRQ-AS), Body Areas Satisfaction Subscale (BASS).....	128
Appendix G: Rosenberg Self-Esteem Scale (RSES).....	129
Appendix H: Unstructured Interview Guide Questions.....	130
Appendix I: Confidentiality Agreement for Undergraduate Research Assistants.....	131

List of Tables

Table 1: Age Ranges of Unstructured Interview Participants.....65

Table 2: Means and Standard Deviations of the Measures.....92

Table 3: Intercorrelations Between Variables.....93

List of Figures

Figure 1: An adapted paradigm model.....68

Figure 2: The conceptual model based on the formulated theory.....70

Abstract

The purpose of this grounded theory mixed method research study was to ascertain and understand the cultural experiences of Black and Latina women and how these cultural concepts influenced their body dissatisfaction, body satisfaction, and self-esteem. In order to investigate these concepts, twenty women who self-reported their race/ethnicity as Black or Latina participated in unstructured qualitative interviews in order to understand their lived experiences. Additionally, one hundred and fifty Black and Latina women were administered an online quantitative survey battery that assessed demographic information, ethnic identification, body area satisfaction, and self-esteem.

Qualitative data was analyzed using grounded theory, and a paradigm and conceptual model were derived from that data. The Central Phenomenon, Body Image, was encapsulated by beliefs and attitudes about weight, breast size, and hair. Three influential categories, Interpersonal Impacts, Cultural Expectations, and Mainstream Values, interacted and influenced the Central Phenomenon of Body Image. Each influential category contained one or more sub-variables which also contributed to the theoretical understanding of Body Image for these women.

Quantitative data were analyzed through the use of a multiple linear regression to assess whether levels of body satisfaction influenced levels of self-esteem and whether a sense of belonging to one's ethnic group influenced levels of self-esteem. Results demonstrated that body satisfaction and a sense of belonging to one's ethnic group significantly predicted self-esteem.

Keywords: culture, body image, self-esteem, Black, Latina, grounded theory

Chapter I: Introduction

Chapter one will provide a brief foundation of background information that speaks to the rationale of conducting this study. The purpose of this study, as well as the research questions to be assessed will be provided. Throughout both this chapter and the subsequent chapter, key terms will be operationalized as needed.

Background and Rationale

The increasing displeasure that women in Western cultures feel towards their bodies demonstrates that body dissatisfaction is a persistent and pervasive problem in the Western world (Grabe & Hyde, 2006). Rucker and Cash (1992) proposed that “body image dissatisfaction can be conceptualized as the degree to which a person’s self-perception of body size is discrepant from their perceived ideal body size” (p. 297). Garner (2002) and Thompson and van den Berg (2002) proposed that body dissatisfaction is a multidimensional concept that comprises multiple elements beyond just one’s perceptual body size. According to Garner (2002), body dissatisfaction is composed of one’s body size as well as dysfunctional maladaptive feelings and beliefs regarding one’s weight and shape. Thompson and van den Berg (2002) imparted that body image attitudes consist of four aspects: (1) global subjective dissatisfaction, which is one’s overall satisfaction or dissatisfaction with one’s appearance; (2) affective distress, which is comprised of one’s emotions, anxiety, and discomfort regarding one’s appearance; (3) cognitive appraisal of appearance, including appearance investment, maladaptive thoughts and beliefs regarding one’s body, and body-focused schemas; and (4) behavioral avoidance of situations or objects (e.g. mirrors) that promote body dissatisfaction and body image concerns.

According to the National Center for Education Statistics (2016), over 17.2 million undergraduate students were enrolled in degree-granting postsecondary institutions in 2014. Out

of those 17.2 million students who were enrolled, approximately 9.6 million students were White, 2.4 million students were Black, 2.9 million students were Latinx, and 2.3 million students comprised other races and ethnicities (National Center for Education Statistics, 2016). Much of the research conducted on body dissatisfaction has utilized a convenience sample of college students who were primarily White. Although body dissatisfaction occurs at all stages of the lifespan, the prevalence of eating psychopathology tends to cluster the highest in adolescence to the mid-twenties (Johns Hopkins).

Although the clear majority of research on body image and body dissatisfaction speaks to Western culture and utilizes a college convenience sample, there is a significant dearth of research that focuses on understanding body dissatisfaction in ethnic minority females throughout the lifespan, particularly the two largest ethnic minority female groups, Black women and Latinas. Although research has been limited, the literature that exists has generally shown that Black women often have a more positive view of their bodies than White women (Altabe, 1998; Miller et al., 2000). White women have been consistently shown to have relatively greater body dissatisfaction than Black, Latina, and Asian women (Altabe, 1998; Gluck & Geliebter, 2002). The predominant reason given for these differences is that ethnic minorities have embedded cultural factors, associated with their race/ethnic group membership, that protect them from the body dissatisfaction that plagues White women in Western society. Grabe and Hyde (2006) proposed that Black culture potentially places less emphasis on thinness for women, which subsequently leads to greater body satisfaction in Black women. Other protective factors that have been proposed for Black women include Black men's preference for larger women, as well as Black women having friends and family who support larger body sizes, as opposed to

thin body sizes, because larger body sizes are healthier (Allan, Mayo, & Michel, 1993; Molloy & Herzberger, 1998).

The sociocultural model proposes that body dissatisfaction occurs as a result of internalizing a thin body ideal that is defined by one's culture (James, Phelps, & Briggs, 2001; Stice, 1994). Thin ideal internalization manifests incongruence between one's current body shape and size and one's ideal body shape and size (James et al., 2001; Stice, 1994). The sociocultural model proposes that the media, family, and one's peer group serve as significant sources of sociocultural pressure to be thin through reinforcement of the thin ideal (Stice, 1994; Stice, Maxfield, & Wells, 2003).

Extant research demonstrates the importance of the thin ideal as it relates to body dissatisfaction. Sociocultural pressure to be thin has been shown to be associated with drive for thinness and body dissatisfaction (Levine, Smolak, & Hayden, 1994). Body dissatisfaction has been demonstrated to be a result of thinness promotion by peers and family (Kichler & Crowther, 2009; Presnell, Bearman, & Stice, 2004; Stice 1998). Although research speaks to the impact of the thin ideal, current research contends that thin ideal internalization is more prominent in White women in Western society (Schooler, Ward, Merriwether, & Caruthers, 2004). Compared to White women, Black women and Latinas generally report less thin ideal internalization (Shaw, Ramirez, Trost, Randall, & Stice, 2004). Some research has suggested that these effects are translating from ethnic minority women to White women. Roberts, Cash, Feingold, and Johnson (2006) suggest a novel proposal whereby ethnic minority women in the media are having a positive influence on the beauty ideals espoused by White women. The authors propose that White women are internalizing the body satisfaction and body positive attitude of ethnic

minority women, leading White women to demonstrate more body satisfaction in a world where the thin ideal is diminishing (Roberts et al., 2006).

The construct of self-esteem is one that has not received a great deal of attention for ethnic minority women in body image literature. Some studies have found that for Black and Latina women, self-esteem does not significantly influence body dissatisfaction. Caldwell, Brownell, and Wilfley (1997) conducted a comparative study on Black and White females who indicated through self-report that they had engaged in dieting at least one time in the previous three years. When assessing whether the participants had differing levels of self-esteem, Caldwell and colleagues (1997) found that the Black and White women did not differ significantly in their levels of self-esteem. These findings were upheld by Snooks and Hall (2002), who found no significant differences in levels of self-esteem in their sample of African American, Mexican American, and White women despite the BMIs of the ethnic minority women being significantly higher than the White women.

Although studies assessed self-esteem as a predictor of body dissatisfaction and include ethnic minorities within their sample, the sample sizes for ethnic minorities are often limited and are not representative of racial/ethnic characteristics of the United States. As a result, one cannot ascertain whether significant results are being influenced by the vast majority of the sample, which is often White females. However, one study found significant results for self-esteem, albeit in an adolescent population. In a sample of Mexican American adolescent girls, Romo, Mireles-Rios, and Hurtado (2016) found that participants reported that their friends experienced lower self-esteem if they believed that they were overweight. Additionally, being teased about one's weight led to lower self-esteem (Romo et al, 2016).

As the literature speaks to cultural factors shaping body satisfaction in ethnic minority women, it appears important that research should shift past cross-cultural comparison. Instead, current research should be focused on understanding the cultural aspects of ethnic minority women that act as protective factors from body dissatisfaction. Furthermore, research should investigate whether the thin ideal is a construct that is relevant for ethnic minority women, or if body dissatisfaction is derived from constructs other than thinness.

Purpose of the Study

Through the use of a grounded theoretical methodology, the purpose of the present mixed methods study was to understand the influence of culture and cultural factors and self-esteem on the self-reported body satisfaction and dissatisfaction of Black and Latina college-enrolled women.

Research Questions

As indicated previously, research that assessed the concept of self-esteem for ethnic minorities is profoundly limited. The same can be said in regards to literature that provides accounts of the lived experiences of ethnic minorities in regards to body satisfaction and dissatisfaction beyond comparison with samples of White women. As a result, the principal investigator chose to not formulate hypotheses and instead utilized an exploratory approach. The principal investigator examined the following questions:

- Do specific cultural factors of Black and Latina women, who are currently enrolled in college, influence their level of body dissatisfaction?
 - If so, what are these cultural factors and how do these factors influence their level of body dissatisfaction?

- Is the thin ideal a relevant construct to ascertain body dissatisfaction in Black and Latina women?
- Do specific cultural factors of Black and Latina women, who are currently enrolled in college, influence their level of body satisfaction?
 - If so, what are these cultural factors and how do these factors influence their level of body satisfaction?
- Do specific cultural factors of Black and Latina women, who are currently enrolled in college, influence their self-esteem?
 - If so, what are these cultural factors and how do these factors influence their self-esteem?
- Controlling for race and ethnicity, do levels of body satisfaction significantly predict levels of self-esteem for Black and Latina women?
- Controlling for race and ethnicity, does a sense of belonging to one's ethnic group significantly predict levels of self-esteem for Black and Latina women?

Assumptions, Limitations, and Delimitations

Assumptions. One assumption of this study was that participants would respond truthfully to both the qualitative and quantitative assessments. All research participants were volunteers and were informed of their rights as research participants, which included their right to confidentiality, their right to anonymity, and their right to withdraw from the study at any time without any ramification. As a result of these rights, the principal investigator assumed that research participants would feel secure enough to provide a truthful narrative for the qualitative interview and accurately self-report for the quantitative assessments.

A second assumption of this study was that the constructs that were assessed in this study were relevant and of interest to Black and Latina women. Although research has demonstrated that White women typically are more body dissatisfied than Black and Latina women, the principal investigator contended that body satisfaction and body dissatisfaction are still relevant constructs for Black and Latina women as research findings are not homogeneous in regards to ethnic minority body satisfaction. Furthermore, current research may not be assessing these constructs properly for ethnic minorities and a grounded theory methodology in conjunction with a quantitative methodology may assist in providing a novel understanding of body satisfaction and dissatisfaction for Black women and Latinas.

Limitations. For the sake of generalization, the current research combined women of African and Afro-Caribbean descent into the “Black woman” category and women of Mexican, Central American, and Latino Caribbean descent into the “Latina woman” category. Although this is characteristic of extant research, this decision was based on the inability to obtain a statistically significant percentage of women from each of the ethnic groups subsumed under the two categories and the assumption that group differences within the two categories are relatively small and not statistically meaningful for the constructs being assessed. However, it should be noted that this decision was a limitation in the study because there is a significant degree of diversity based on country of origin. Furthermore, African influences from the transatlantic slave trade permeate Latino Caribbean countries. For example, an individual from Puerto Rico can be ethnically Latino; however, their racial group is Black. It would be remiss to assume that an individual whose family lineage is from Kenya is inherently similar to a Black woman who cannot trace her lineage past St. Louis. Yet, for parsimony and the ability to draw tentative

conclusions, this dissertation utilized the combined “Black woman” and “Latina woman” categories.

Delimitations. When considering the role of peers and significant others, existing research typically assumes that one’s peer group and one’s romantic partner preferences are homogenous regarding the race/ethnicity of the participant and are heterosexual, if they are not specifically assessing sexual minorities. Conversely, the unconstitutionality of anti-miscegenation laws, the Supreme Court ruling regarding marriage equality, and the increased tolerance of interracial dating and non-heterosexual romantic relationships demonstrates that relevant conclusions may not be derived about a woman’s body image that is colored by messages from men from her ethnic group. To provide a more accurate picture of the influence of peers and significant others on body satisfaction and dissatisfaction, constructs such as race/ethnicity and gender identity of close peers and romantic interests, as well as the ethnic identification and sexual orientation of participants were directly assessed in this study.

Definition of Terms

The following operational definitions were used in this research study:

Biculturalism. The ability to navigate two cultures that one is acquainted with (Guan, Lee, & Cole, 2012).

Black women. Women whose cultural ancestry can be significantly traced back to the continent of Africa.

Body dissatisfaction. The affective consequence of the discrepancy between one’s perceived body size and one’s ideal body size (Rucker & Cash, 1992).

Body image. The concept of body image encapsulates three aspects, cognitive, affective, and behavioral, of one's appearance (Capodilupo & Kim, 2014; Cash & Pruzinsky, 1990; Thompson, 2004).

Body satisfaction. Body satisfaction has been defined in several ways. However, the most relevant means to operationalize body satisfaction in this study is to utilize the definition of *body-cathexis*, which is the degree to which one is content with one's body as a whole (global body-cathexis) or particular aspects of one's body (Jourard & Secourd, 1955).

Cultural factors. Factors that are relevant to one's culture that can influence one's level of body satisfaction or body dissatisfaction.

Ethnic identity. Ethnic identity involves one's understanding of one's ethnic group membership and their emotional and cognitive appraisal of that membership (Taijfel, 1981).

Latina women. Women whose cultural ancestry can be significantly traced back to Spain, Latin America, and/or Latino-Caribbean Countries.

Race. Race is both a biologically and socioculturally-based concept. Biologically, "a race of people are those that have a specific combination of physical, genetically inherited characteristics that distinguish them from other groups" (Casas, as cited by Mio, Barker, & Tumaming, 2009, p. 9). The three main biologically-based racial groups are Caucasoid, Negroid, and Mongoloid (Mio et al., 2009). Race as a sociocultural-based concept involves individuals being classified according to their "characteristics, values and behaviors" (Mio et al., 2009, p. 9).

Relevant construct. Relevant constructs are concepts that are important to the population of interest (i.e., Black women and Latinas).

Self-esteem. Global self-esteem encapsulates one's general beliefs and attitudes that are superimposed on the self (Balcetis, Cole, Chelberg, & Alicke, 2013).

Sociocultural model. The sociocultural model proposes that body dissatisfaction occurs as a result of internalizing a thin body ideal that is defined by one's culture (James et al., 2001; Stice, 1994). Thin ideal internalization manifests incongruence between one's current body shape and size and one's ideal body shape and size (James et al., 2001; Stice, 1994). The sociocultural model proposes that the media, family, and one's peer group serve as the significant sources of sociocultural pressure to be thin through reinforcement of the thin ideal (Stice, 1994; Stice, Maxfield, and Wells, 2003).

Thin ideal internalization. Thin ideal internalization is the adoption of the Western cultural body ideal of thinness and utilizing upward social comparisons to equate one's current body to the cultural body ideal (James et al., 2001; Stice, 1994).

Summary

Chapter one provided background information that assisted in outlining the rationale and purpose of conducting this research study. Additionally, the research questions being assessed as well as assumptions, limitations, and delimitations for the study were outlined. Significant terms utilized throughout this research study were operationalized and defined. The subsequent chapter will provide a comprehensive review of the literature regarding different cultural influences of body dissatisfaction. As race and ethnicity as a cultural construct is predominant in the literature, it will heavily influence the review.

CHAPTER II: REVIEW OF LITERATURE

Historical Context

The impetus of the comprehensive review of literature is to discuss the extant research that supports the purpose of the study and that discusses the historical and theoretical framework that sets the foundation of this study. The literature accomplished the following goals:

1. To demonstrate the current knowledge that has been ascertained regarding culture and its relevance to body dissatisfaction and body satisfaction.
2. To demonstrate whether extant research has identified any relevant concepts in Black and Latinx culture that may have a significant influence on body dissatisfaction and/or body satisfaction.
3. To discuss what is currently known regarding the role of culture and self-esteem, particularly if there are specific factors in Black and Latinx culture that influence self-esteem positively or negatively.
4. To establish whether any research exists regarding body dissatisfaction's or body satisfaction's relationship with self-esteem.
5. To exhibit what is currently known regarding the influence, if any, of the thin ideal on Black and Latina women.

Cultural Identity

Guan, Lee, and Cole (2012) proposed that culture encapsulates both internal identification and external factors that demonstrate one's culture. In regards to internal cultural identification, Guan and colleagues (2012) defined cultural identity as "the extent to which one's cultural group...contributes to one's identity or sense of self" (p. 248). Cultural identification involves both an understanding of values and norms inherent to one's culture and embracing

those cultural values and norms as formative in one's life (Guan et al., 2012). The internal aspects of cultural identity formation demonstrate one's connection to one or more cultural groups and how one identifies oneself based on one's sense of belongingness to one or more cultural groups.

External cultural identity involves the aspects of one's environment that assist in defining one's sense of self (Guan et al., 2012). In this respect, one can internally identify with one's ethnic group membership, yet share an external cultural identity with someone whose internal identity is significantly discrete from one's internal cultural identity. For example, a Nigerian American woman may internally identify with both the Nigerian culture and Black culture in the United States. Her internal cultural identification is divergent from an Israeli American woman who internally identifies with the Israeli culture, the Jewish culture, and self-reports as White. However, both the Nigerian American woman and the Israeli American woman share the values of the external American culture and the American culture influences their worldview in a way that is fundamentally different from women who identify as merely Nigerian or Israeli.

Guan and associates (2012) defined biculturalism as one's ability to navigate two cultures with which one is acquainted with. Biculturalism is evident in the example above, in which both women are both ethnically and nationally identified and navigate those two identities as they conceptualize and understand their worlds. "Ethnic identity is an element of one's self-concept that is manifested both from the awareness that one is a member of an ethnic group as well as 'the value and emotional significance attached to that membership'" (Tajfel, as cited by Williams, 2009, p. 11 - 12). Ethnic minorities who are bicultural possess a multidimensional ethnic identity construct that involves identification with one's ethnic group, belongingness to one's ethnic group, evaluation of oneself in terms of the values and norms of one's ethnic group,

surrounding one's self to other members of one's ethnic group, and actively engaging with one's ethnic group (Demo & Hughes, 1990; Phinney, 1992; Williams, 2009).

Cultural Identity and Body (Dis)satisfaction

Body satisfaction and dissatisfaction research has historically focused on basic comparisons between White samples and ethnic minority samples. For example, Altabe (1998) conducted comparative quantitative and qualitative research on 335 White, Black, Latino, and Asian American undergraduate students taking psychology courses. Results demonstrated that Whites were more body dissatisfied and had more body size discrepancies than Latinos and Blacks, and Blacks self-reported higher body satisfaction, higher positive appearance self-ratings, less body self-discrepancy, and more positive cognitions than Whites and Latinos (Altabe, 1998).

Using a meta-analytic framework, Grabe and Hyde (2006) analyzed 98 studies to determine whether White women exhibited higher body dissatisfaction than ethnic minority women and the moderating factors for these ethnic group differences. Like Altabe (1998), Grabe and Hyde (2006) found that White women were more body dissatisfied than Black women, and Latinas were more body dissatisfied than Black women. However, there was not a significant difference between White women and Latinas on body dissatisfaction (Grabe & Hyde, 2006). When comparing Black and White women, Sabik, Cole, and Ward (2010) found that Black women were more body satisfied, their self-worth was less connected to their weight and shape, and they were less focused on thinness as compared to White women who had the highest scores on these constructs. However, when Black women were less ethnically identified and more identified with American culture, their body satisfaction decreased and their desire to be thin increased (Sabik et al., 2010).

Miller et al. (2000) conducted a comparison study on body image between White, Black, and Latino male and female college students (40 students for each ethnic group, 20 students per gender per ethnicity). Although all groups rated appearance as important, Blacks were significantly more body satisfied overall and satisfied with specific areas of their bodies than Whites and Latinos, and self-reported more body esteem than Whites (Miller et al., 2000). Black women self-reported that they were more sexually attractive than Latinas and White women (Latinas ranked higher than White women as well), and had more self-esteem regarding their weight in comparison to Latinas and White women (Miller et al., 2000). Harris (1994) had analogous results, finding that Black women expressed significantly more general body satisfaction, body areas satisfaction, and weight satisfaction than White women.

Using a grounded theory approach, Capodilupo and Kim (2014) sought to understand the influence of culture and the importance of specific variables in Black culture that influence body image in Black women. Grounded theory was utilized as a means to remove any potential confounds that could be introduced by utilizing assessments normed in White populations or promoting ideas of thinness and dieting, which is geared towards mainstream beauty ideals that are primarily White (Capodilupo & Kim, 2014). The qualitative study included participants between the ages of 21 and 35 who self-identified as Black or African American and had a minimum education level of some college in a focus group setting.

Results of the focus groups indicated that for Black women, body image encapsulates more than just body shape and size; rather it includes overall appearance such as hair, skin, definition of specific body areas, and attitude (Capodilupo & Kim, 2014). How one chooses to wear one's hair, whether it be natural, relaxed, or extensions/weave promotes different connotations about who one is from society, and the participants expressed internalization that

relaxed long hair or straight weave is favored by society (Capodilupo, 2015). Participants expressed a consistent message of a light skin tone being favored by society and in particular, Black men (Capodilupo & Kim, 2014). This is consistent with Altabe (1998) and Capodilupo (2015) who found that Blacks felt that light skin was an ideal trait. Specific attitudinal traits were listed as more important than outer beauty. Exuding self-confidence and projecting beauty were attitudinal aspects that focus group participants believed could transcend outward beauty and were important aspects for Black women's body image (Capodilupo & Kim, 2014).

Capodilupo and Kim (2014) found that focus group participants felt that Black women's body image was influenced by preferences of Black men and messages that they received from their families. For example, participants' body satisfaction was shaped by their belief that Black men desired women with large hips, breasts, and behinds, with Eurocentric features such as long extensions/weaves (Capodilupo, 2015; Capodilupo & Kim, 2014). In contrast, black families promoted larger body sizes and provided supportive contexts for larger women; some participants reported body shaming for being too thin, while being praised by their White friends for their thinness (Capodilupo & Kim, 2014).

Like Capodilupo and Kim's (2014) study regarding skin color, Swami, Henry, Peacock, Roberts-Dunn, and Porter (2013) conducted a quantitative study of South Asian and African Caribbean British adult participants which investigated skin tone dissatisfaction compared to British Whites. The authors sought to investigate whether the ethnic minority participants would have a preference for lighter skin tones based on a history of lighter skin being favored, which stems as far back from the colonization and slavery (other times for non-Black cultures) and continues now in media campaigns and internalized oppression in ethnic minority communities. Forty-six percent of the sample were ethnic minority Britons with self-reported skin tone

dissatisfaction, particularly towards a desire for a lighter skin tone (Swami et al., 2013). What was interesting is that the White Britons had higher skin tone dissatisfaction than the ethnic minority Britons; they desired a darker skin tone. Therefore, although Western society promotes more positive traits with lighter skin tones, White Britons found their skin tone to be undesirable, which may speak to White Britons holding a different meaning for skin tone as compared to ethnic minority Britons (Swami et al. 2013). Also, women, regardless of ethnicity, in this study were more skin tone dissatisfied than men, and individuals who were more skin tone dissatisfied were more body dissatisfied (i.e., they had less appreciation for their body appearance) (Swami et al. 2013).

The findings that White Britons had higher skin tone dissatisfaction than ethnic minority Britons are monumental and need to be replicated in an American sample. They highlight the importance of skin color for all cultures, not just for ethnic minority samples. Historically, pale skin has been favored in aristocratic societies for White cultures. However, despite health risks such as skin cancer and premature aging, tanning, both naturally and through artificial mechanisms has increased since the 20th century. Perhaps colorism in white culture has evolved and meaning has been attached to darker skin as opposed to fair skin. Future research should investigate this.

A qualitative study that encapsulated narrative group data from focus group discussions of Latina and Black women's opinions regarding body ideals was conducted by Rubin, Fitts, and Becker (2003). The study included 18 participants (10 Latina/Chicana, 8 Black) between the ages of 18 and 60 who self-identified as Latina, Chicana, Black, or African American and had at least some college education. Results indicated that their culture has assisted the participants with body positivity and assists them with combatting negative messages from the dominant

culture. Focus group participants expressed more acceptance of diverse body sizes as opposed to a standard beauty ideal for Black and Latina women (Rubin et al., 2003). In addition, “both focus groups endorsed a multifaceted beauty ideal that promotes personal style, self-care, and spirituality” (Rubin et al., 2003, p. 55). This message was reminiscent of the theme of “exuding self-confidence and promoting beauty” that was provided by the participants in the Capodilupo and Kim (2014) study. Specifically, grooming, presenting oneself as put together, and having good hygiene were proposed to be far more important than weight in regards to beauty (Rubin et al., 2003). In addition, participants expressed a connection between their bodies and religion, including that their bodies are temples and therefore they should be cherished, valued, accepted, and nurtured, as opposed to admonished and changed (Rubin et al., 2003).

Utilizing a quantitative exploratory framework, Kuba, Harris-Wilson, and O’Toole (2012) proposed factors that may contribute to body dissatisfaction and eating psychopathology in 2nd generation Mexican American women who were first-generation college students. The authors identified that these women came from families where their parents had limited education and carried traditional gender values; the parents expected academic achievement, yet still had high expectations for their daughters to fulfill their traditional female gender roles (Kuba et al., 2012). The traditional gender values were inconsistent with the values that the women had internalized from the dominant culture, such as assimilation and high achievement and success. Furthermore, the women internalized the body ideals of the dominant culture, which promoted body dissatisfaction and weightism (Kuba et al., 2012). The pressure to conform to parents’ traditional Mexican ideals and values as well as the pressure to conform to adopted American cultural values lead to acculturative stress, which may result in eating psychopathology as a mechanism to control the stress (Kuba et al., 2012).

Cross-cultural research targeting body dissatisfaction constructs for Black women, Latina women, and White women indicate, in general that Black women self-report the highest levels of body satisfaction (Altabe, 1998; Harris, 1994; Miller et al., 2000). Across studies, Black women appear to report more positive views regarding their appearance, their weight, their sexual attractiveness, and their body esteem (Altabe, 1998). The main source of body dissatisfaction appears to be in skin tone dissatisfaction, with a preference for lighter skin tones (Capodilupo & Kim, 2014); however, even White women appear to be more skin tone dissatisfied than Black women (Swami et al., 2013). The overall theme for these research findings demonstrates that Latinas are generally more body dissatisfied than Black women, yet are more body satisfied than White women (Grabe & Hyde, 2006).

For Black and Latina women, there are specific cultural factors that are important to their degree of body satisfaction and/or dissatisfaction. This includes constructs such as hair (texture and style), skin tone, attitude, messages from men and family, grooming, and spirituality (Capodilupo & Kim, 2014; Rubin et al., 2003). Future cross-cultural research needs to be mindful about understanding these constructs as they hold a significant role for Black and Latina body image.

Cultural Identity and Self-Esteem

Research assessing the concept of self-esteem in an ethnic minority population, particularly in body-focused research, is limited. Using path analyses, Skorek, Song, and Dunham (2014) assessed whether self-esteem mediated the relationship between three of the big five personality traits (i.e., conscientiousness, emotional stability/neuroticism, and extraversion) and body esteem, and whether self-esteem would not mediate the relationship of the other two of

the big five personality traits (i.e., agreeableness and openness) and body esteem. The sample consisted of both males and females, and 165 participants were undergraduate females, and 127 participants (42.6%) self-identified as “Hispanic American.”

Skorek and colleagues (2014) found unexpected results; specifically, full mediation was found, but self-esteem mediated the relationship between each personality trait and body esteem. The researchers concluded that scoring low on these personality traits made one more likely to have low self-esteem leading to lower body esteem (Skorek et al., 2014). In regards to the Hispanic American participants, self-esteem mediated the relationship between conscientiousness and body esteem and extraversion and body esteem (Skorek et al., 2014). Therefore, the findings indicated that Hispanic Americans who are less reliable, organized, prompt, assertive, extroverted, and energetic may suffer from lower self-esteem, which may lead to issues with body esteem.

Using a grounded theory approach, Hesse-Biber, Livingstone, Ramirez, Barko, and Johnson (2010) sought to understand the “attitudes about body image and racial identity among Black women at a predominantly White college in the United States” (p. 697). The qualitative study included 34 Black female participants between the ages of 18 and early 20s, who were enrolled as undergraduate and graduate students, and engaged in one-on-one interviews with the principal investigator. The results of the interviews placed the individuals in four groups: *Group 1*: White Enough, *Group 2*: Black and Proud, *Group 3*: Floaters, “Not Black Enough, Not White Enough,” and *Group 4*: Bridge Builders (Hesse-Biber et al., 2010). Groups 2 and 4, which consisted of 23 out of the 34 participants were the most well-adjusted. Group 2 had high ethnic identity, acceptance of Black cultural ideals of beauty, high body esteem, and high self-esteem (Hesse-Biber et al., 2010). Group 4 were bicultural and not strongly ethnically aligned with any

group; therefore, they did not ascribe to the beauty ideals of any group. These individuals had high levels of self-confidence and were highly body satisfied (Hesse-Biber et al., 2010).

Groups 1 and 3, which consisted of 11 of the 34 participants were the least well-adjusted. Group 1 had low ethnic identity, and strong identity with White culture due to growing up completely enmeshed in white culture and with white peers (Hesse-Biber et al., 2010). Their beauty ideals were consistent with the thin ideal and they had a history of body image difficulties. Group 3 identified with both Black and White culture, but were prone to body dissatisfaction and low self-esteem if they were not accepted by either culture (Hesse-Biber et al., 2010). They ascribed to both Black and White body ideals, although they did not fully conform to either. They had friends of both ethnic groups, but their friends did not intermingle (Hesse-Biber et al., 2010). This study demonstrated how inherently unique and divergent racial identity can be for black women at predominantly white institutions of higher education.

Oney, Cole, and Sellers (2011) investigated whether specific racial identity constructs would moderate the relationship between body dissatisfaction and self-esteem in a sample consisting of Black male and female college students. The racial identity constructs that were assessed were how strong someone identified with their racial group (racial centrality), how positive someone felt about their racial group (private regard) and how positive others feel about someone's racial group (public regard) (Oney et al., 2011). Oney and colleagues (2011) found that body dissatisfaction was associated with self-esteem, and for college students who had low race centrality, body dissatisfaction was related to low self-esteem. Low body dissatisfaction was associated with high self-esteem in these Black college students. In terms of ethnic identity, being highly ethnically identified and having positive feelings about your racial group was shown to be associated with high self-esteem (Oney et al., 2011). Additionally, Black college

students with high private regard for their racial group and low body dissatisfaction self-reported higher self-esteem. In general, the sample felt that non-Blacks had low public regard, and the results demonstrated that individuals who exhibited high body dissatisfaction had lower self-esteem when they believed that non-Blacks had low public regard for Black people and Black culture (Oney et al., 2011). The findings of this study illustrated the importance of racial identity and how for Black individuals, being highly racially identified and having positive feelings about being Black promotes increased self-esteem.

Although these studies appear vastly different, they speak to the relationship between personality and self-esteem and body dissatisfaction in Blacks and Latinx individuals. Latinx individuals who are internalizers, less person-focused, and more introverted are at risk for lower self-esteem and, in turn, lower body esteem. It may be important to consider interventions directed at Latinx individuals' connections with others and ensuring that they are accountable to others. As these studies demonstrate, Black women with strong ethnic identity or strong bicultural identity have built cognitive resources to maintain body esteem, self-esteem, a strong peer network, and strong body satisfaction. However, those who are not ethnically identified or those who have an insecure bicultural identity are consistently dealing with personality pressures to conform because they never feel as if they truly fit. As a result, they may experience body dissatisfaction and low-self-esteem.

Self-Esteem and Body (Dis)satisfaction

Self-esteem is a prominent factor that predicts both body satisfaction and body dissatisfaction. Appearance also plays a prominent role in one's identity and can influence one's self-esteem and self-concept. Aversive self-awareness may occur when people compare

themselves to societal standards and realize that they are unable to achieve these standards. Negative affect often arises due to this self-discrepancy (Heatherton & Baumeister, 1991).

In a quantitative study, Verplanken and Tangelder (2011) sought to demonstrate whether negative affect regarding one's body was associated with implicit and explicit body dissatisfaction, negative self-esteem, and eating psychopathology in undergraduate males and females. According to the results, negatively thinking about one's body both habitually and automatically is a mechanism that is specifically associated with body dissatisfaction, low self-esteem, and eating psychopathology. Significant positive correlations were found between negative appearance-focused beliefs and body dissatisfaction and habitual negative appearance-focused thinking and implicit body dissatisfaction. Thus, results showed that increased, habitual, negative appearance-focused beliefs is a significant predictor of body dissatisfaction, and habitual negative appearance-focused thinking is a significant predictor of low self-esteem when one is body dissatisfied (Verplanken & Tangelder, 2011). These results indicate the pervasiveness of negative thinking in the relationship between self-esteem and body dissatisfaction, and how negative thinking precipitates the reduction of self-esteem and the transition from body satisfaction into dissatisfaction.

Festinger (1954) proposed social comparison theory, which has become one of the hallmark theories utilized to explain why body dissatisfaction develops. Festinger's (1954) initial two hypotheses were that one has an innate need to appraise one's cognitions and capabilities and that one has the need to compare one's appraisal with the cognitions and capabilities of others. Festinger (1954) notes that these comparisons are merely subjective appraisals and the subjective nature of these appraisals makes them highly unstable. Inherently, the opinion is only from one person, so if the person is evaluating oneself against another and

one feels that one has done better, one will feel good and if not, one will feel bad. Festinger (1954) stated that individuals will often compare themselves to individuals with whom they are most similar; it is highly unlikely that they will compare themselves to someone who is highly divergent.

There are two types of social comparisons, upward social comparisons and downward social comparisons (Festinger, 1954). Upward social comparisons are social comparisons that involve comparing ourselves to individuals whom we believe are better than us (Festinger, 1954). In regards to body image, these are individuals whom we believe are more attractive, have a better body physique, and may have a body ideal that we are striving toward. Upward social comparisons involve the aspiration to improve one's current situation and making comparisons to more attractive others and decisions to reach one's ideal level of attractiveness. Downward social comparisons are social comparisons that involve comparing ourselves to individuals whom we believe are not as good as ourselves (Festinger, 1954). In regards to body image, these are individuals whom we believe are less attractive, have a poorer body physique, and have a body size and shape that we are hoping to avoid. Downward social comparisons involve boosting our self-esteem. Our bodies may not be ideal, but there are people who are much worse.

Research suggests that having awareness of female body ideals shapes self-esteem in undergraduate women. Balecetic, Cole, Chelberg, and Alicke (2013) conducted a two-part quantitative study with 53 undergraduate women in order to assess whether there was a relationship between awareness of female body ideal and self-esteem and whether the internalization of female body ideals mediates the relationship between the awareness of female body ideals and self-esteem. Utilizing a questionnaire battery, a body evaluation task, and eye

tracking recordings to assess awareness of female body ideals, Balecetis and colleagues (2013) found that undergraduate women who were aware of female body ideals had lower self-esteem at baseline. In addition, results demonstrated that the relationship between awareness of female body ideals and self-esteem was mediated by internalization of these female body ideals, which is inherently thin ideal internalization (Balecetis et al., 2013). Balecetis and associates (2013) also found that when undergraduate female participants assessed their appearance through their peer's ideal standards, their global self-esteem decreased above and beyond the effects of their self-reported awareness of female body ideals, thin ideal internalization, and their personal measures of physical fitness. Therefore, the views of their peers were even more significant to their own views, which were body-focused social comparisons. Bessenoff and Snow (2006) conducted a similar study and found that undergraduate females who internalized a cultural norm of thinness and having a body that was discrepant from that cultural standard resulted in body shame.

The use of social comparisons was also demonstrated in another study. Jones and Buckingham (2005) utilized a quantitative social comparison study where they sought to assess how undergraduate females (9% African American; 3% Hispanic out of 120 participants) with different levels of self-esteem (high self-esteem vs. low self-esteem) would score in regards to affective ratings, internalizations of sociocultural norms for body esteem, and contingencies of self-worth after being exposed to either attractive or unattractive pre-rated photos that were used for upward or downward social-focused comparison. Women with high self-reported self-esteem were more positive—more positive affect, less negative affect, and less internalization of sociocultural norms for body esteem and contingencies of self-worth. The relationship between social-focused comparisons of attractiveness and body esteem depended on self-esteem in that

participants with self-reported low self-esteem had greater body esteem after downward social comparisons compared to upward social comparisons, as to be expected; yet, individuals with self-reported high self-esteem had lower body esteem after downward social comparisons as compared to upward social comparisons (Jones & Buckingham, 2005). The authors did not delineate the participants by race, which was a limitation, as 79% of the population was Caucasian and race/ethnicity factors may have been relevant, yet were not investigated.

In summary, these research studies highlight that negative affect and social comparisons are significant constructs in the manifestation of low self-esteem and body dissatisfaction. Negative beliefs and consistently thinking negatively are associated with body dissatisfaction and may result in negative self-esteem for individuals who are body dissatisfied. Additionally, women who utilize upward social comparisons in relation to female body ideals have lower self-esteem and are more body dissatisfied, particularly if they already have low self-esteem initially. However, high initial self-esteem can be a protective factor for upward social comparisons, thin ideal internalization, negative affect, and internalization of cultural body ideals.

Thin Ideal Internalization and Black and Latina Women

Research assessing thin ideal internalization in Black and Latina women is scant. Most research involves comparison to White samples on body image constructs and measures normed on White samples. Whether the findings from these studies highlight the true experiences of Black and Latina women will always be in question until studies utilize representative samples and measures that are normed appropriately with constructs that are culturally representative.

As mentioned previously, Black and Latina women have been shown to be less affected by the thin ideal White woman. Their standard of beauty is one that focuses less on being a

particular weight, and focuses more on curves and shape, and utilizing aspects other than thinness for self-evaluation (Kelch-Oliver & Ancis, 2011). In one study, Black women reported that they were unaffected by the physically attractive ideal White woman in media presentations (Frisby, 2004).

Utilizing the concept of cultural identity, Guan and contributors (2012) proposed that the degree to which a Black American woman identifies with either the American culture or the Black culture will determine the body ideal to which she subscribes. Guan et al. (2012) hypothesized that Black women who identify with the dominant American culture will have a thin body ideal, while Black women who identify with the Black culture will have a thick body ideal. The hypotheses were supported, which speak to the idea that the standard of beauty in Black culture is one that is divergent and is focused less on thinness. Parham-Payne (2013) found that even when Black participants had BMIs that placed them in the “right weight” or “overweight” categories, they often expressed a desire to weigh more.

In a qualitative study conducted by Capodilupo and Kim (2014), focus group participants felt that Black women’s body image was influenced by preferences of Black men. The majority of the participants described a cultural ideal for women that was discrepant from the thin ideal. Participants described that Black men preferred “large breasts, shapely hips, and a full backside” (Capodilupo & Kim, 2014, p. 43). In the study, “One woman stated, “You want curves, hips, and a butt. It’s not what mainstream society thinks is ideal, but it’s what our men like”” (Capodilupo & Kim, 2014, p. 43). This assertion is consistent with research that suggests that White men have thinner body size preferences and prefer that their significant others lose weight more often than Black men (Greenberg & LaPorte, 1996).

Black families are also a significant factor in reducing the influence of the thin ideal for Black women. In the qualitative study conducted by Capodilupo and Kim (2014), participants provided the following accounts:

[in my family] you don't hold back on eating because you're trying to stay small. You eat because that's what you do! It's part of your culture, that's how you show love, it's how you bond with your family. Another participant shared a similar sentiment: If you ask a Caribbean woman this, if they do lose weight and become a Size 10, their family members will ask them, 'What's wrong? Are you sick? Have you been eating?' The majority of the women felt the thin ideal was irrelevant for them... (p. 43 – 44).

In contrast, Latinas may receive conflicting messages regarding thinness. In the qualitative study conducted by Rubin and associates (2003), many of the Latina participants recounted stories of their mothers and aunts who utilized compensatory mechanisms (e.g., diet pills, diet teas, and laxatives) to control their weight, yet did not change their diet or implement exercise. Additionally, Latina mothers provide their daughters with nicknames focused on their weight and express concern if their daughters lost or gained weight (Rubin et al., 2003).

In another study, Franko et al. (2013) rated and coded cover photos and articles from *Latina* magazine from the mid-1990s to 2011 in order to assess whether media content that was directed at Latina women promoted messages of the thin ideal over time. Results of the quantitative content analyses demonstrated that body shape and size of the models varied over time, with larger models in the earlier years, smaller models in the midpoint, and larger models in the late years (Franko et al., 2013). Additionally, the results indicated that content within the magazine promoted more body image acceptance and a decrease in thin ideal promotion at

midpoint (Franko et al., 2013). This finding is surprising considering that the models used in the midpoint years were smaller than the earlier and later years.

Although research generally speaks to the lack of influence of the thin ideal on ethnic minority women, there has been some research that contends that Black and Latina women are influenced by messages of thinness. Poran (2006) conducted a qualitative study of 15 Black New York City college women using notecards to discuss body image in a focus group setting. Participants indicated that they actively feel pressure to be thin and utilized the focus group session to make body-focused comments regarding perceived body flaws. Participants were both aware of the thin ideal and internalized the thin ideal as applicable to their life and to their body (Poran, 2006).

Overall, findings support the assertion that Black and Latina women are less influenced by the thin ideal as compared to White women. Black women who are more ethnically identified with Black culture are less affected by White beauty portrayals, may desire to gain weight even when they are “the proper weight” or overweight, and are supported by Black men and Black families who promote curves and larger body areas. However, there is some research that indicates that Black women may be cognizant of sociocultural pressure to be thin. Although Latina women are less affected than White women by the thin ideal, these findings demonstrate that they also receive conflicting messages at times from their families and the media regarding their weight and shape.

Summary and Conclusion

The purpose of this literature review was to provide an overview of the current research in order to establish what is currently known about culture, the role of culture and body

satisfaction and dissatisfaction, how self-esteem is associated with culture, body satisfaction, and body dissatisfaction, and the function of thin ideal internalization for Black and Latina women.

The existing research demonstrates numerous findings. Black and Latina women should be considered as bicultural individuals, as they are consistently navigating an American culture with dominant Westernized body ideals that are often based in thinness, while maintaining their Black or Latino cultural body ideals that ascribe to more body diversity, acceptance, and larger body sizes.

The findings from studies examining the relationship between ethnicity and body satisfaction and dissatisfaction indicate that Black women are the most body satisfied, followed by Latina women, and then White women. Black women are particularly dissatisfied with skin tone as they have a preference for lighter skin tones and a desire to be lighter. Additionally, qualitative studies have found specific cultural factors that are essential to promoting body satisfaction and dissatisfaction for Black and Latina women. These factors are less relevant to body size and shape, and instead promote large body sizes, more body acceptance, and body positivity.

There is limited research on the relationship between cultural identity and self-esteem in Black and Latina women, particularly in the context of body image literature. Future research should be directed in this area. However, the research reviewed here demonstrates that Latinx who are less connected to others and less accountable to others may be at risk for lower self-esteem and lower body esteem. Additionally, Black women who identify exclusively with White culture or who have an insecure separate identification with Black and White cultures have been shown to experience more body dissatisfaction and lower self-esteem as they attempt to conform to body ideals and try to fit into a place where they might not fit.

Research examining self-esteem and body satisfaction and dissatisfaction has primarily focused on low self-esteem and body dissatisfaction. The findings of these studies have demonstrated that negative affect and upward social comparisons are fundamental constructs that predict lower self-esteem and promote body dissatisfaction. However, high self-esteem may protect women from body dissatisfaction, and they may be less influenced by body-focused image ideals in society.

Current research has generally supported that the thin ideal may not a relevant construct for Black and Latina women, although these women are likely aware of the dominant cultural view and may be exposed to conflicting messages at times. For Black women, family networks and Black men are often a source of support and promotion of larger body ideals. For Latina women, mothers may inadvertently promote the thin ideal through body-focused nicknames or when mothers comment about their own bodies and discuss their dieting behaviors.

The purpose of this mixed methods study was to utilize a grounded theoretical methodology to understand the potential influence of culture and cultural influences and self-esteem on the body satisfaction and dissatisfaction that is self-reported by Black and Latina college-enrolled women. As grounded theory was used for the qualitative methodological framework, the theory was derived from the lived experiences provided by the participant narratives. However, the work of Capodilupo and Kim (2014) and Rubin and associates (2003) provided a foundational theoretical basis for this study. Through the use of unstructured qualitative interviewing, the current study sought to assess whether Black and Latina women participants would report similar findings to Capodilupo and Kim (2014) and Rubin et al. (2003) in regards to Black and Latinx cultural influences on body image and beauty ideals, the constructs that encapsulate body image (i.e. whether body image is more than just thinness for

Black women and Latinas), and aspects of their bodies in which they are body satisfied and/or aspects of their body in which they are dissatisfied. Additionally, like Capodilupo and Kim (2014), the current study sought to establish how family and partner preferences would influence body size ideals and also body satisfaction and dissatisfaction.

The current study also sought to expand upon these seminal works. To my knowledge, neither Capodilupo and Kim (2014) nor Rubin and associates (2003) assessed for participant sexual orientation or considered that Black and Latina women may have partners that are not racially homogenous. Capodilupo and Kim (2014) presented participants' narratives involving Black males' preferences for female body size and body areas. However, this may not be relevant to a Black woman who interracially dates. To my knowledge, no literature exists regarding the influence of partner preferences in interracial relationships or non-heterosexual relationships; these would be novel findings for the current study.

This study aspired to be a foundational study of several that assess the body-focused experiences of Black and Latina women. Subsequently, because quantitative measures have been normed primarily on college-aged, White, middle class and higher socioeconomic status females, one outcome of this study and subsequent works could be to use the results to create psychological assessment instruments that properly capture the body image experiences of ethnic minority women.

CHAPTER III: METHODS AND PROCEDURES

The preceding chapters established a foundation for understanding what is currently known about Black and Latinx culture, and the role that it plays in the manifestation of body satisfaction, body dissatisfaction, and self-esteem in Black and Latina women. Furthermore, the preceding chapters investigated the role of thin ideal internalization for Black and Latina women in regards to their body satisfaction and dissatisfaction. This chapter will discuss the methodology that was employed for the current mixed method research study. The following research questions were assessed:

Qualitative

- Do specific cultural factors of Black and Latina women, who are currently enrolled in college, influence their level of body dissatisfaction?
 - If so, what are these cultural factors and how do these factors influence their level of body dissatisfaction?
 - Is the thin ideal a relevant construct to ascertain body dissatisfaction in Black and Latina women?
- Do specific cultural factors of Black and Latina women, who are currently enrolled in college, influence their level of body satisfaction?
 - If so, what are these cultural factors and how do these factors influence their level of body satisfaction?
- Do specific cultural factors of Black and Latina women, who are currently enrolled in college, influence their self-esteem?
 - If so, what are these cultural factors and how do these factors influence their self-esteem?

Quantitative

- Controlling for race and ethnicity, do levels of body satisfaction significantly predict levels of self-esteem for Black and Latina women?
- Controlling for race and ethnicity, does a sense of belonging to one's ethnic group significantly predict levels of self-esteem for Black and Latina women?

Research Design

The research design for this study was a mixed methods approach that was accomplished through a qualitative interview and an online survey battery that included ten demographic questions and nineteen survey questions from two different measures. The impetus of selecting a mixed methods approach was the desire to understand the lived experience of the participants beyond what is feasible through the self-reported answers that result from a quantitative methodological framework (Creswell & Plano Clark, 2007). As demonstrated in the review of literature, most research conducted with samples of Black and Latina women used quantitative methodology. Capodilupo and Kim (2014) and Rubin et al. (2003) were the only studies in the literature review that addressed the concepts of culture, body satisfaction, and body dissatisfaction in Black and Latina women, respectively, from a qualitative focus group framework. These studies provided an intimate look at the experiences of these women that transcended the words "satisfaction" and "dissatisfaction." This speaks to the importance of capturing one's qualitative appraisal as one's self-report via a quantitative survey is limited in breadth and depth.

Pragmatism is also an appropriate theoretical and philosophical concept that is relevant for mixed method designs. Pragmatism is the idea that the best choices are those that deliver the appropriate result that one seeks to achieve. Therefore, in the case of research studies,

investigators should utilize the appropriate methods to address the questions being assessed as opposed to using a one size fits all approach (Creswell & Plano Clark, 2007; Morgan, 2007). Therefore, some research questions require qualitative designs, while other research questions call for quantitative methodology. While qualitative research is significantly lacking for the constructs assessed in this study, quantitative research is still valuable and can expand our understanding and our knowledge.

Capodilupo and Kim (2014) proposed that one barrier to utilizing a quantitative research methodology framework that employs current quantitative assessments is that most quantitative assessments for body image and eating psychopathology were normed primarily on convenience samples derived primarily from college-aged (18 – 22) White women. This normative group may not represent or be reflective of the experiences of ethnic minority women. As the motivation for choosing a mixed methods design was to understand the lived experiences of the participants, the decision was made to utilize grounded theory as the theoretical approach.

Grounded theory was developed by Glaser and Strauss (1967) in the field of sociology, and was proposed as an alternative means to standardized research, which advises that in order to conduct research, one must operate from a theoretical framework established a priori. In contrast, grounded theory proposes that “substantive concepts and hypotheses [can] emerge first, on their own...” (Glaser & Strauss, 1967, p. 34) which allows the researcher to either propose a novel theory based on their data or to be more objective regarding how the data may or may not fit into an existing theory as opposed to compelling the data to fit into a theory to demonstrate significant publishable results. In qualitative research, grounded theory allows the theoretical framework to develop the themes and the concepts derived from coded interview content (Charmaz, 2006; Strauss & Corbin, 1998).

Identification of the Participants

Population. The population for this study consisted of ethnic minority women in the United States who ethnically identify as Black or Latina. Hispanic/Latino/Latinx and African American/Black American are the two largest ethnic minority groups in the United States of America (United States Census Bureau). These women were required to be currently enrolled in college.

Sample. Two types of sampling methods were employed. The first sampling method applied was convenience sampling, which involved sampling from a population of volunteers that were easily accessible (Sarafino, 2005). This was accomplished through advertising through faculty in the Psychology Department at the two-year college where the principal investigator has an adjunct faculty appointment. The second sampling method exercised was snowball sampling, which involved current research subjects recruiting potential research subjects from their social networks (Sarafino, 2005). Additionally, a limited sample of participants were referred to the study by a faculty member at a small Midwestern four-year college.

Inclusion Criteria.

A participant was included in the study if she met the following inclusion criteria:

- Completed both or either the qualitative data and/or the quantitative data
- Ethnicity was Black or Latina at birth
- Gender identity was female
- Enrolled in college
- Willingly consented to participate in the study
- Proficient in the oral and written English language without the use of a translator

Exclusion Criteria.

A participant was excluded from the research study if she met the following exclusion criteria:

- Data was incomplete for both the qualitative and quantitative sections of the analyses
- Did not ethnically identify as Black or Latina or ethnically identified as Black or Latina, but their ethnicity at birth was neither Black nor Latina
- Gender identity was not female
- Not enrolled in college at the time of participation
- Was unwilling to consent to participate in the study
- Was not proficient in both the oral and written English language without the use of a translator

According to Creswell (1998), grounded theory methodologies should employ a sample size of 20 – 30 participants. In contrast, Morse (1994) proposed that a sample of 30 – 50 participants was needed for grounded theory. A general recommendation regarding qualitative studies is that qualitative studies should determine the sample size by the amount of time that is dedicated to the study, the objectives of the study, and the amount of resources that are allocated to the study (Patton, 1990). This mixed-methods design followed the grounded theory recommendations from Creswell (1998) and the proposed minimum sample size was $N = 20$.

A statistical power analysis was conducted using G*Power to determine the sample size necessary for the quantitative aspect of the mixed-method study (Faul, Erdfelder, Buchner, & Lang, 2009). The power analysis determined that for a linear multiple regression, the proposed minimum sample size required was $N = 43$. The power analysis conducted was a priori, and the

input parameters were as follows: fixed model, single regression coefficient, one-tailed, effect size $f^2 = 0.15$, α error probability = .05, power ($1 - \beta$ err prob) = .80, and number of predictors = 2.

Description of the Setting

The sample was derived from psychology courses in a large community college system located in a large metropolitan city in Texas. In regards to the racial and ethnic background of students who were enrolled in courses during the Fall semester of 2016, 44.7% were White, 36.4% were Hispanic/Latino, and 8.5% were African American/Black. Interestingly, gender identity data were not published. However, snowball sampling resulted in participants that attended other local colleges and universities and participants that attended colleges and universities outside of the local metro area. As the participation criteria did not require the participant to meet with the principal investigator face-to-face, it was feasible to sample outside of the state of Texas.

Data Gathering Tools

Qualitative. This mixed-method design utilized an unstructured qualitative interview. Zhang and Wildemuth (2009) defined unstructured interviews as interviews where the principal investigator had “no predefined theoretical framework, and thus no hypotheses and questions about the social realities under investigation” (p. 2). Inherently, unstructured interviewing is appropriate for use in a grounded theory framework, as unstructured interviewing allows the principal investigator to discover thematic content derived from the interviewees lived experiences (Zhang & Wildemuth, 2009). Theory development is a primary reason to utilize unstructured interviews (Zhang & Wildemuth, 2009) and grounded theory (Glaser & Strauss,

1967); therefore, this lends credibility to the usefulness of unstructured interviewing as an appropriate mechanism for this mixed method design.

As the interview was unstructured, the principal investigator was not required to develop a tool or request permission to use a tool. However, it was important to develop a general introductory question to commence the interview and allow the interviewee to control the interview while the principal investigator listened and guided the conversation (Zhang & Wildemuth, 2009). Furthermore, Zhang and Wildemuth (2009) suggested that unstructured interviews can employ the use of guide questions that help to ensure that an interviewer covers the topics that he or she intends to cover and assists with data analysis as the data are more consistent when comparisons are being made across interviews. A list of guide questions for the qualitative interviews can be found in Appendix H.

The unstructured interview was used to answer the following research questions in a conversational framework:

- Do specific cultural factors of Black and Latina women, who are currently enrolled in college, influence their level of body dissatisfaction?
 - If so, what are these cultural factors and how do these factors influence their level of body dissatisfaction?
 - Is the thin ideal a relevant construct to ascertain body dissatisfaction in Black and Latina women?
- Do specific cultural factors of Black and Latina women, who are currently enrolled in college, influence their level of body satisfaction?
 - If so, what are these cultural factors and how do these factors influence their level of body satisfaction?

- Do specific cultural factors of Black and Latina women, who are currently enrolled in college, influence their self-esteem?
 - If so, what are these cultural factors and how do these factors influence their self-esteem?

Research participants were also afforded the opportunity to provide information regarding their experiences growing up in their culture of origin, socializing with peers, dating, and interacting with family members. Furthermore, participants were able to explain how these sociocultural networks may have shaped their body satisfaction, body dissatisfaction, and/or self-esteem.

Quantitative. The research study employed 11 demographic questions created by the principal investigator and two self-report survey tools that consisted of nine and ten questions respectively. One demographic question assessed the participants' level of ethnic identity, particularly their attachment to and sense of belongingness towards their ethnic group. This question was scored on a 7-point Likert scale with higher scores indicating higher levels of ethnic identity. The impetus for including this question was to assess if women with higher ethnic identity, who in turn, may reasonably be assumed to be more influenced by their culture, demonstrate different levels of self-esteem. The demographic questions can be found in Appendix E.

The first tool was the Multidimensional Body-Self Relations Questionnaire-Appearance Subscales, Body Areas Satisfaction Scale (MBSRQ-AS, BASS; Cash, 2000). The BASS is a 9-item subscale of the MBSRQ-AS and it is scored on a 5-point Likert scale, ranging from (1) definitely dissatisfied to (5) definitely satisfied, that assesses satisfaction with specific aspects of one's body. Higher scores indicate greater levels of body satisfaction. The MBSRQ in its

entirety and its scoring manual was purchased by the principal investigator from Dr. Thomas F. Cash's website for its use for educational research. The BASS can be found in Appendix F.

The benefit of the BASS is that unlike other body image based survey tools, it focuses on different aspects of appearance as opposed to just weight. In fact, weight-based appearance encapsulates only one out of the nine questions of the BASS. Williams (2009) and Capodilupo and Kim (2014) proposed that ethnic minority women may be less influenced by their weight and more focused on specific body areas due to cultural norms or preferences from peers or relationship partners. Therefore, it was ideal to find a quantitative measure that was not biased with questions targeted only to drive for thinness, weight, and food and calorie restriction activities as these are more associated with Western, White samples. An additional benefit of the BASS is that it can be used to assess both body satisfaction and dissatisfaction, thereby being useful for answering the following quantitative research questions:

- Controlling for race and ethnicity, do levels of body satisfaction significantly predict levels of self-esteem for Black and Latina women?

The second tool was the Rosenberg Self-Esteem Scale (RSES; Rosenberg, 1965). The RSES is a 10-item survey scored on a 4-point Likert scale from (1) strongly agree to (4) strongly disagree. The RSES assesses one's self-esteem and higher scores indicate lower self-esteem. The RSES is an open source tool that is easily found on the internet; it does not require permission for its use. It is regularly used in quantitative research to assess self-esteem and has psychometric data available in US samples and cross-culturally. The RSES can be found in Appendix G.

Body satisfaction and body dissatisfaction are self-focused constructs and most of the questions in the RSES assess aspects of self-esteem or ask the examinee to be internally self-

focused. Two questions in the RSES, questions four and five, are less directly relevant as it pertains to body satisfaction and dissatisfaction. These questions assess one's performance ability relative to others and one's feeling of pride (Rosenberg, 1965). Despite the lack of relevance, upward social comparisons (Festinger, 1954) involve judgments on various aspects of the self, including the body, which may be relevant to body satisfaction and dissatisfaction. The RSES was correlated with the BASS to assess whether one's level of body satisfaction predicted one's level of self-esteem.

Data Gathering Procedures

The principal investigator initially attempted to recruit participants using the standardized email recruitment script (see Appendix A) that was sent out to faculty colleagues as a request to be disseminated to students in their courses. Interested participants who received the standardized email recruitment script contacted the principal investigator via email. Potential participants received the Participant Letter (see Appendix B), the Informed Consent documentation (see Appendix C), and the College of Saint Mary Rights of Research Participants document. Potential participants were required to electronically or wet sign, date, and return the informed consent document before they could proceed with the study. As the quantitative section of the mixed methods design required more participants than the qualitative section, the principal investigator solicited additional participants for quantitative survey participation only.

After the informed consent document was returned, participants received instructions to access a password-protected quantitative survey battery administered via SurveyMonkey and the link to an online calendar via Doodle to schedule a qualitative interview session (if necessary) with the principal investigator either face-to-face or via Skype. The participant was instructed to indicate if she would like to participate in the interview, and if so, how she was participating in

the interview, her Skype information (if applicable), and a phone number or email address to use for a reminder 24 hours before the interview was scheduled.

The qualitative interview involved the greatest amount of engagement between the principal investigator and the participant. The principal investigator briefly reviewed the purpose of the qualitative interview and how it would be conducted. Additionally, the principal investigator reviewed the College of Saint Mary Rights of Research Participants document so that the participant was well informed of her rights. The participant was offered an opportunity to ask questions before and after the interview, and also was afforded the opportunity to stop the interview at any time to ask questions as needed. Interviews were conducted for approximately one hour. The principal investigator held both face-to-face and Skype interviews in her office at her private therapy practice. This location afforded a locked confidential space with white noise outside the room to maintain privacy. Participants who utilized Skype interviews were asked to pick a quiet and private location where they could speak frankly and securely without interruption. Other significant interactions between participants and the principal investigator occurred if the participants had questions or concerns regarding the research process.

Participants interacted with the principal investigator through the College of Saint Mary email, a google voice number that is utilized as the principal investigator's phone number for her private therapy practice, or face-to-face. Participants were contacted through their medium of choice, either via email or phone calls. Text messaging was not utilized due to security and confidentiality concerns. The principal investigator purchased an encrypted flash drive to be used exclusively to store participant data. This data included the recorded qualitative interviews, the transcriptions of the interviews, each saved survey data file, and the master SPSS quantitative data file containing the combined quantitative data. This flash drive remained with the principal

investigator at all times, and the principal investigator was the only person privy to the password. Additionally, all participant data was double encrypted for additional protection of confidentiality.

Data Analysis Plan

Mixed method designs require both qualitative and quantitative data analyses (Creswell & Plano Clark, 2007).

Qualitative. Grounded theory is an innovative approach to analyzing data because it allows the researcher to “code and categorize data as you collect them” (Charmaz, 2006, p. 26). In grounded theory, the data are consistently changing as the investigator works to refine the coding (Charmaz, 2006). The constant comparison procedure is the identification of new or recurrent themes in order to achieve theoretical saturation (Health & Cowely, 2004; Strauss & Corbin, 1998). This involves a multi-level coding process.

Grounded theory coding involves a three-level coding process. Level one coding, is also referred to as initial coding or open coding (Charmaz, 2006; Health & Cowely, 2004; Strauss & Corbin, 1998). Charmaz (2006) proposed that initial coding is the time to “study fragments of data –words, lines, segments, and incidents—closely for their analytic import” (p. 109). The purpose of the initial coding phase is to gather fragments of data to start making interpretations and meaning from those fragments.

During initial coding, the researcher should be asking the following questions:

- What is this data a study of? (Glaser & Strauss, 1967)
- What do the data suggest? Pronounce? Leave unsaid?
- From whose point of view?

- What theoretical category does this datum indicate? (Charmaz, 2006, p. 116).

For this research study, the principal investigator used key phrases from the interview transcriptions as codes to make meaning of the data. The principal investigator read through the transcripts of the interviews and wrote out coding phrases from interview content. Additionally, the principal investigator color-coded significant thematic categories that arose within the interview content as they were potentially relevant later during level two coding. Charmaz (2006) proposed that coding should begin early as it helps with identifying thematic codes later during focused coding. Follow-up interviewing occurred after initial category determination in order to confirm that thematic categories are relevant to the sample.

Level two coding is also referred to as axial coding or focused coding (Charmaz, 2006; Strauss & Corbin, 1998). Axial coding involves analyzing the initial codes for overarching codes that cover a number of initial codes and a significant amount of data (Charmaz, 2006). Charmaz (2006) proposed that grounded theory is very much a case conceptualization process, and focused coding is the conceptualization piece of coding process as the researcher is analyzing the meaning of the prominent initial codes. The goal of level two coding is to compare codes and determine which codes might be beneficial future categories for the theoretical model (Charmaz, 2006).

Level three coding is also called selective coding or theoretical coding (Charmaz, 2006; Strauss & Corbin, 1998). This final level involves the formulation of the theoretical model as the researcher takes the categories and the themes and organizes them in a way that demonstrates causal relationships through inductive and deductive thinking (Strauss & Corbin, 1998). During theoretical coding, a core category is selected and theoretical sampling is used to systematically relate the core category to other subcategories.

All coding in the current study occurred electronically to ensure that notes and codes were not misplaced. Furthermore, electronic coding allowed for expedient modifications as needed. Microsoft Word's review tab allowed for in-document commenting, the home tab allowed for in-document highlighting, and the principal investigator had a program named "Stickies" preloaded on her MacBook Air, which allowed the principal investigator to use electronic stickie notes for memo writing. Additionally, the use of NVivo as a data analytic tool to assist in data coding was paramount in organizing and managing an electronic coding system.

Two trained, unpaid, undergraduate research assistants assisted the principal investigator in transcribing the interviews and the principal investigator reviewed the transcriptions to ensure accuracy. The principal investigator sought to hire highly motivated undergraduate assistants who were planning to pursue post-secondary education and needed a letter of recommendation. Although the research assistants did not receive financial compensation for their time, they received valuable research experience for their curriculum vitae, and their participation assisted with data quality through cross-checking.

Quantitative. All quantitative data were entered into SPSS. The quantitative data were first scored using the scoring tools provided by each individual assessment tool. Descriptive statistics (means, standard deviations) were calculated. In order to assess the quantitative question of whether body satisfaction significantly predicts self-esteem for Black and Latina women, a multiple linear regression was conducted, entering the BASS score and the sense of belonging score as predictors, and the RSES score as the dependent variable. Race was initially intended to be held constant, but due to differences in the percentages of Latina and Black participants, this regression was not run holding this variable constant. Correlation assessments

were run on the BASS score, ethnic identity score, and the RSES score to assess bivariate relationships.

Data Quality Measures

Qualitative. Zhang and Wildemuth (2009) state that unstructured interviewing requires a specific skill set prior to embarking. In order to control for interviewer effects and to keep the interview topics relatively consistent between interviews, the principal investigator was the only individual that conducted the interviews and each interview was videotaped. As the principal investigator had ten years of unstructured interviewing experience and regularly administers weekly unstructured therapeutic interviews, the skill set was appropriate for the task.

Undergraduate research assistants were cross-checked by the principal investigator to ensure data quality and fidelity to the data collection, data transcription, and data entering procedures. Transcribing interview data can be both a long and tedious process; in order to prevent fatigue and reduce transcription error, no more than two interviews were transcribed per person during a transcription session. Although undergraduate research assistants completed a confidentiality agreement (see Appendix I), the principal investigator attempted to maintain participant confidentiality from the undergraduate research assistants by forgoing the use of the participant's name during the qualitative interview and saving the recorded interview with an identification number that was not attached to any participant identifiable information.

Shenton (2004) proposed that there are four main quality criteria that a qualitative researcher may address: credibility, transferability, dependability, and confirmability, with credibility having the most provisions that often overlap in other criteria. One method by which to establish credibility is "the adoption of research methods well established both in qualitative

investigation in general and in information science in particular” (Shelton, 2004, p. 64). The current research design accomplished this task through conducting a grounded theory methodological approach as it was specifically outlined by Charmaz (2006) and Glaser and Strauss (1967).

An additional method of credibility that was used during the unstructured interviews was member checks. Member checks occur in the moment and require the participant to verify the accuracy of the data that they have provided (Shelton, 2004). The impetus of this quality measure is to ensure that the participants have conveyed to the researcher what they intended to say (Shelton, 2004).

This research design conducted member checks through reflective listening during the unstructured interview. This involved the interviewer using active listening where a concerted effort was made to understand what the speaker is attempting to convey, and then verbally offering back what that person said as a means to confirm whether they heard them correctly. An example of a reflective listening statement is, “So what I’m hearing you say is that as a Black woman, being overweight is not as important as having shapely hips and thighs, is that correct?” In this manner, the participant has a chance to confirm whether the principal investigator properly understood them and the interview can continue.

The principal investigator also member checked by sending the transcripts of the interviews to the research participants for their review and conducting follow-up interviews for clarification of content and themes. Participants were offered the opportunity to review their transcripts for discrepancies in content; if any discrepancies in content were found, they were offered the opportunity to engage in a follow-up interview to ensure that their lived experience was captured and documented appropriately. The follow-up interview followed the same

protocol as the initial interview, and included videotaping, transcription, and a chance for the participant to check the transcription for accuracy. Participants were also offered follow-up interviews if there were no discrepancies in content found. Participants had the choice to engage in a follow-up interview to further elucidate content previously discussed or to provide additional thoughts that they failed to recall during the initial interview.

Quantitative. Psychometric data for the MBSRQ-AS has been shown to be good. Internal consistency is $\alpha = .88$, while test-retest reliability has been shown to be $r = .91$ (Cash, 2000). For females, internal consistency for the BASS is $\alpha = .73$. One-month test-retest reliability for females for the BASS is $r = .74$ (Cash, 2000).

The RSES has consistently been demonstrated to be a reliable measure. Internal consistency ranges of the RSES were reported as $\alpha = .85$ to $\alpha = .88$ for college samples (Campbell & Hemsley, 2009; Rosenberg, 1965). Test-retest reliability was shown to be $r = .82$ to $r = .85$ (Blascovich & Tomaka, 1991).

A reliable measure is one that consistently provides a constant accurate score, for a particular person, each time (Graziano & Raulin, 2007). Even if a measure is reliable, people are not; threats to reliability included research assistants becoming careless during data entry or participants changing during the measurement period which reduced the reliability of their answers (Graziano & Raulin, 2007).

A valid measure is a measure that accurately measures what it intends to measure. One threat to validity is confounding variables that may be operating outside of the researcher's awareness (Graziano & Raulin, 2007). In this study, the quantitative aspect is assessing whether body dissatisfaction or body satisfaction influences self-esteem. The results may demonstrate a

positive or negative influence, however, that influence may be due to an extraneous factor, and not body satisfaction or dissatisfaction; therefore, it impedes the ability to make conclusions about cause and effect in cross-sectional research. External validity is also threatened due to the sampling method employed. External validity is “the degree to which the research findings generalize to individuals, settings, and time periods other than those examined in the study” (Sarafino, 2005, p. 477). The use of a convenience sample employs a selection bias and the results may not generalize to all areas of the United States or to all Black and Latina women in the United States.

Ethical Considerations

Prior to the commencement of any research activities, approval by the Institutional Review Board and the College of Saint Mary was obtained and can be found in Appendix D. In order to protect the confidentiality of research participants, the names of participants were not attached or associated with the submission of their qualitative or quantitative data. In addition, participants who completed both the quantitative and qualitative data did not have their data linked; all data were independent from each other. All data were de-identified and assigned an arbitrary identification number.

All members of the research data team signed a confidentiality agreement (see Appendix I) asserting that they will maintain confidentiality for all participants, secure participant data, refrain from sharing and discussing the nature of the interviews or any of the participant data except in the context of completing their work responsibilities, and demonstrate respect for participants at all times. Although undergraduate research assistants completed a confidentiality agreement, the principal investigator attempted to maintain participant confidentiality from the undergraduate research assistants by forgoing the use of the participant’s name during the

qualitative interview and saving the recorded interview with an identification number that was not attached to any participant identification.

Participants were provided with an informed consent documentation outlining the nature and purpose of this study. Furthermore, participants received the College of Saint Mary Rights of Research Participants document. As the purpose of this study was disclosed to the participants initially, no debriefing was necessary. However, participants were given the chance to ask the principal investigator questions regarding the research after their qualitative interview. Additionally, participants were able to contact the principal investigator via email at any time regarding questions or concerns.

All data were electronically stored and received double encryption. All files were password protected and were secondary encrypted on a password protected USB flash drive that was kept with the primary investigator at all times, and was exclusively used to store participant data. The principal investigator plans to destroy the data after five years.

Summary

The purpose of this mixed method research study was to assess the lived experiences of Black and Latina women and understand the influence of their culture on their body satisfaction, body dissatisfaction, and their self-esteem. Chapter three provided an overview of the research methodology, participant information, including participant selection and participant characteristics, data gathering, analytics, and quality as well as ethical considerations.

CHAPTER IV: RESULTS

The purpose of this mixed method research study was to understand the cultural experiences of Black and Latina women and how these cultural concepts influenced their body dissatisfaction, body satisfaction, and self-esteem. This chapter will provide results from both the qualitative and quantitative data as derived from unstructured interviews and a short survey battery. The process by which the data were derived will be discussed, followed by data analysis and a discussion of the findings for both the qualitative interview and quantitative research questions.

Qualitative Interviews

The principal investigator conducted 20 interviews via Skype over a period of several months. Each interview was transcribed, and in order to validate the accuracy of the transcription, member checking, through the provision of a copy of the transcribed interview to the participant, was used. Eleven interviews were conducted with women who self-reported their race/ethnicity as Black/African American, while nine interviews were conducted with women who ethnically identified as Latina/Latinx.

It should be noted that one participant in the Black group self-identified as Afro-Jamaican American as she felt that label more adequately reflected her ties to Jamaica and the Caribbean as opposed to Africa. Additionally, one participant who was placed in the Latina group identified as Afro-Latina as her father was ethnically Latino from Cuba, but racially black, and her mother was Latina and born in Guatemala. Ages of the interview participant sample ranged from 24 years to 58 years, with the average age of Black female interview participants of 38.55 years and the average age of Latina interview participants was 35.44 years. The age range data of the interview participants is found in Table 1.

Table 1

Age Ranges of Unstructured Interview Participants

<u>Age group</u>	<u>N</u>	<u>M</u>	<u>SD</u>
20 – 29	6	26.5	1.9
30 – 39	8	36.5	2.7
40 – 49	4	45.5	1.3
50+	2	55	4.2

The principal investigator utilized six guide questions for the interviews. However, during the course of the interviews, three additional questions (questions 7 – 9) emerged based on the content of early interviews. The questions examined during the interviews are as follows:

1. Talk to me about yourself, your family of origin and your cultural background.
2. Growing up, what messages did you receive from members of your immediate and extended family about your body?
3. How were the messages that you received from your family the same or different than the messages being presented in mainstream society?
4. Regarding appearance, what aspects of your appearance influence your self-esteem in a positive way and what aspects of your appearance lower your self-esteem in a negative way? Why?
5. In your culture is being thin important? Why or why not? How have your family, peers, and your relationship partners emphasized or deemphasized thinness?
6. Do you believe that having a stronger identification with your culture makes you more likely to be satisfied with your body? Why or why not?
7. Do you think that dating interracially affects your body image?

8. In your culture, what do you believe is the cultural standard for a woman's body?
9. Is there anything else that you want to add about culture, body image, self-esteem, thinness, or anything else that we didn't cover?

Coding

During the axial coding stage (second level of coding), a visual illustration of the key concepts was formulated. Buckley and Waring (2009) proposed that in grounded theory, depicting key concepts in a visual form allows the relationships between categories to be displayed. Strauss and Corbin (1998) called this model a paradigm model, and this study utilized similar variables within this model (see Figure 1) in order to depict the significant concepts that emerged from the first two levels of coding, the relationships between variables, and to set a foundation for the conceptual model that was derived during selective coding (third level of coding).

During axial coding, the central phenomena or core concepts derived from the second level of coding included body shame, mixed messages, and culturally acceptable appearance. Causal conditions are any factors that influence and precipitate the central phenomena. In the paradigm model, these include weight and appearance-related teasing and criticism, adoption of mainstream beauty values, cultural norms, and value-based beliefs. Strategies are focused, and goal-oriented mechanisms that are dedicated to managing the central phenomena. These include actively trying to lose weight by diet and exercise, ignoring messages, and internalizing criticism and adopting the values of others.

The context involves the location or the individuals involved who influence the use of the strategies. For this model, contexts included the family unit, peers, relationship partners, the media, one's childhood and adolescence, and school. Intervening conditions enable or restrict

the strategies utilized within a particular context. This model included a number of intervening strategies such as cultural expectations, genes and heredity, parent/child relationships, sociocultural pressure, stages of life and lifespan development, and feeling different and/or feeling alone. Finally, the consequences result from the strategies used. These were body dissatisfaction, body acceptance, resentment, understanding, confusion, and education regarding body confidence to the next generation.

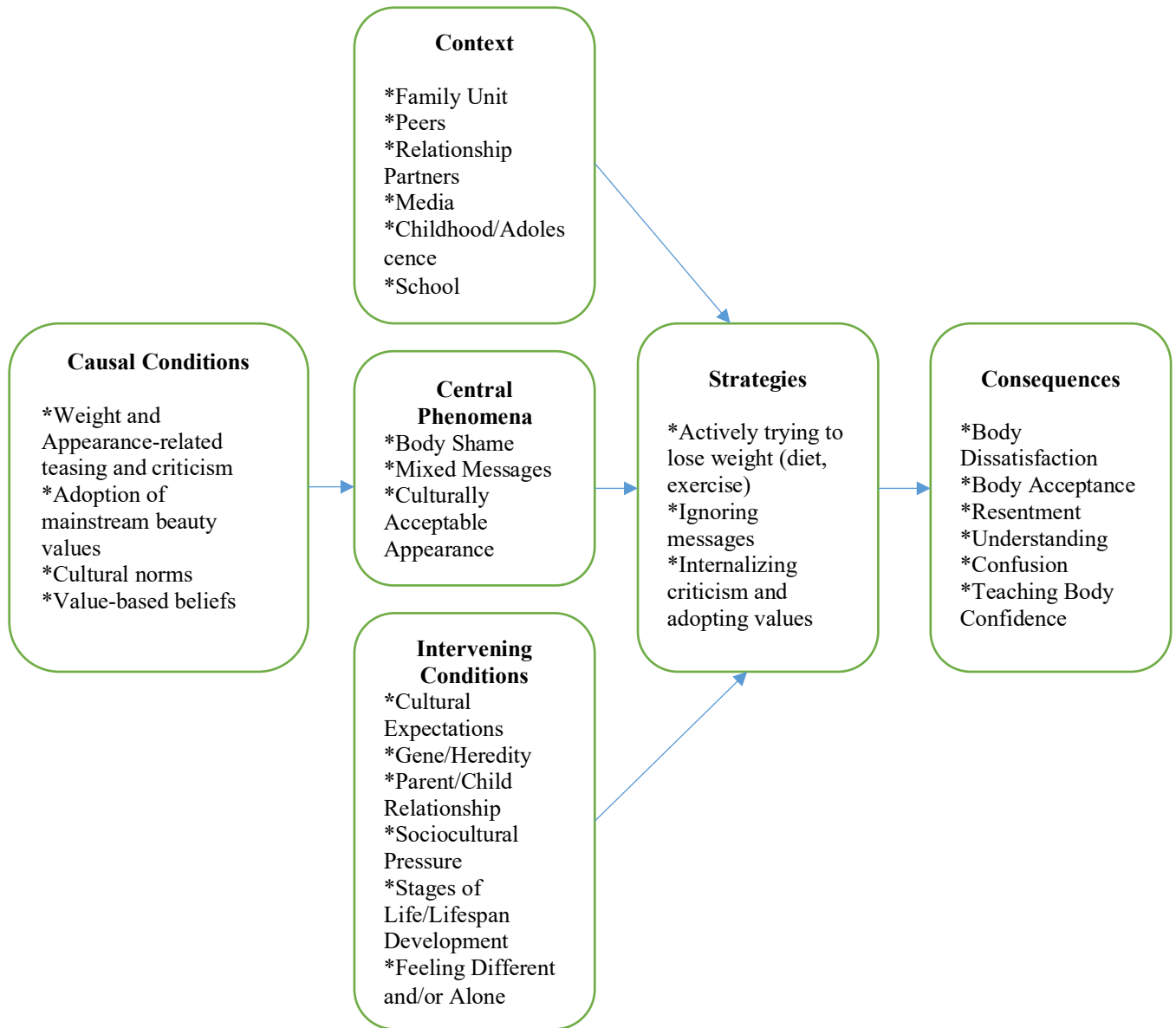


Figure 1. An adapted paradigm model. This figure illustrates the significant concepts and relationships that emerged from first and second level coding.

During selective coding, the transcribed interviews and the paradigm model were used to assist the principal investigator in deriving a central phenomenon (core category) and influential categories that have a relationship with the central phenomenon. The conceptual theoretical model is depicted in Figure 2, and the central phenomenon selected was Body Image. The significant sub-variables that encapsulate Body Image were weight, breast size, and hair. Body Image was selected as the central phenomenon because the central concepts of the paradigm model either influenced the concept of body image or were an attitudinal component of body image. The sub-variables that captured body image were derived from the variables that were most frequently mentioned by interview participants as factors that influenced their body image. While there were other factors mentioned, these three factors, on average, were the most universal irrespective of age and race/ethnicity.

Three influential categories were selected, Interpersonal Impacts, Cultural Expectations, Mainstream Values, and each influential category contained sub-variables. The influential categories are in rectangles, while the sub-categories that are associated to each influential category are circles that are connected to the rectangle. The sub-variables for Interpersonal Impacts were Family, Peers, and Relationship Partners. Mixed Messages, Food, and the Ideal Woman were sub-variables of Cultural Expectations. The Thin Ideal was the only sub-variable for Mainstream Values.

Influential categories and sub-variables that contain a significant relationship are connected in the conceptual model through the use of arrows. For example, in Figure 2, there are arrows connecting the sub-category of Family to the Central Phenomenon of Body Image, to the sub-variable of Mixed Messages (on Cultural Expectations), and to the sub-variable of the Thin Ideal (on Mainstream Values). This demonstrates that Family was connected to these concepts

and variable, whereby one’s family had a significant interpersonal influence on one’s body image, one’s family imparted both mixed cultural messages and mainstream values of the thin ideal on Black and Latina women in this study.

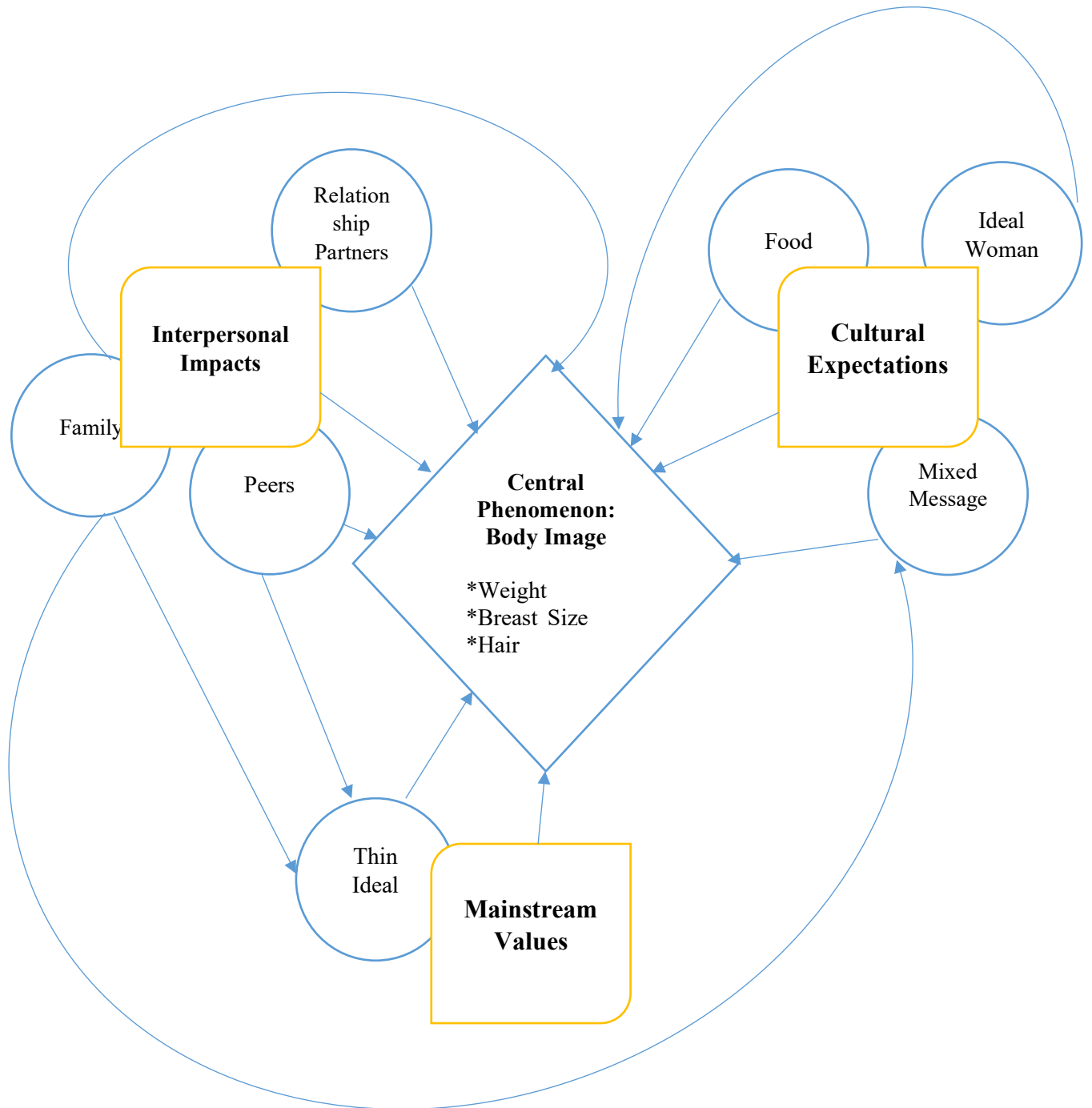


Figure 2. The conceptual model based on the formulated theory.

Central Phenomenon: Body Image

The female interview participants discussed their personal experiences with their bodies. Body image was examined both in the context of the self and one's personal attitudes regarding one's body, but also in the eyes of other contexts as demonstrated in Figure 2. Much of the discussion centered around the attitudinal component of body image from contexts other than the self and how those attitudes shaped both the attitudes and perceptions that one had of one's own body image. Therefore, the attitudes of others and/or the mainstream promoted body satisfaction or dissatisfaction. The following quote from a Black participant, who acknowledged that she has "a fear of being fat," demonstrated how the attitudes of others shaped her body dissatisfaction:

"Make sure you're not consuming pasta cuz we know pasta is your favorite dish, because you are going to be big as a house." They chastised me about being too thin and now they were on my back about what I ate because I don't want to get too big because I should try to lose weight. It's mainly my mom and my youngest Aunt. They are just critical.

Weight. Most interview participants, regardless of race/ethnicity expressed dissatisfaction with their weight. One Black female stated, "The biggest thing that I don't like is probably my weight. I am more self-conscious and a little bit more insecure." Some women expressed a persistent dissatisfaction with their weight because they had been overweight all their lives, while others contended that their body dissatisfaction due to weight occurred through age or a significant life event. One Latina woman stated:

I've been overweight all my life... I remember the test in high school when they asked

you what you wanted to be, and I said that I would be happy if I was skinny. All my life I was happy, I had nice parents, nice house, that's the only thing that was bad.

Another Black woman, in her late 30s, discussed how she had consistently been insecure about her weight, even when she was 100+ lbs. lighter than her current weight:

I've always been self-conscious of my body—I've always been underweight and too thin for so many years, but now that I've gained some weight, I'm psychologically freaked out by the numbers. I'm 230 lbs. and I'm 5'8, but I don't look like I weigh 230. I'm 12/14 and I'm solid and curvy. 230 is like extreme from 140 or 150 [her previous weight post-high school]. I'm self-conscious in my own body because I'm not used to all of the weight. Even though I don't feel heavy, some days I look in the mirror and don't like the way my clothes look on me...

Another Latina participant in her early 50s described how the weight that she gained during her pregnancy had a profound negative effect on her body image:

When I got married, I had one son and I became pregnant at the age of 22. I gained about 130 lbs. without eating because that was my body. I look at food and I gain weight. I went from a size 6.5 shoe to a size 12. I'm talking about a transformation. My face changed. I got almost suicidal—in my mind, I went through a deep deep depression. I had my son early, 6 weeks early, and I was on bed rest for 2 months....What happened during that pregnancy was, I was young, and I was vain; I used to walk into a room and guys would look and give me attention. I wasn't looking for attention; it was the traumatic experience that I had as a young girl when I lost weight and people told me that I was cute and I got attention from boys. I liked the attention. It feels good. In my mind,

I was so ugly because I would walk into a room and nobody would look. It took away the joy of the pregnancy.

Not all participants in the current study stated that they were overweight. Some participants self-reported that they were thin, yet they still expressed body dissatisfaction tied to their thinness. For these participants, being thin was not advantageous as it was a body shape that was not celebrated in the Black and Latinx culture. One Latina participant said, “Growing up I’ve never been completely happy with being skinny. I wanted to gain weight, but gain it in all the right places.” Another Black female who had been thin all of her life discussed the messages that she received about her weight and how they made her feel:

I think growing up, I’ve always been kind of small so my family was always telling me that I was too small and I needed to eat more, so that was something that I’ve always been aware of—my petite figure has always been a conversation in my family. I’ve always been told that I need to get some meat on my bones, so I’ve always been conscious of how small I am.

Despite the vast majority of participants expressing dissatisfaction with their weight, a few participants expressed body satisfaction and noted that weight was not a factor that detrimentally influenced their body image. The one participant who self-identified as Afro-Jamaican noted her satisfaction with her body and messages that she told herself every morning to promote her self-esteem:

Things that influence my self-esteem are that I have a nice athletic build, that I enjoy working out, I’m evened out. I’m comfortable in my skin and I have the ability to wear what I want to wear, and I can express myself in a way where it is not extra. I always

focus on the inner me—you're fearfully, wonderfully made, you're going to have a good day today, so regardless, my outside is on point because I can't focus on anyone else's.

These quotes illustrate that most of the interview participants expressed weight-related dissatisfaction. They spoke of feeling both self-conscious and insecure about their weight either currently or at one time in their lives. Even participants who were not overweight expressed weight-related dissatisfaction that was associated with their thin bodies. Very few participants stated that they were satisfied with their weight and exhibited body acceptance.

Breast Size. Several participants, both Black and Latina, who had large breasts expressed body dissatisfaction in regards to their breast size. This body dissatisfaction was precipitated by modesty messages from parents, criticism from family and general dissatisfaction due to an increased breast size as a result of life events such as pregnancy. For example, one Black participant stated:

I grew up having a larger chest than most girls my ages, so I was always told to cover my chest because it would be a distraction to other people. I have always worn clothes to downplay that my boobs are bigger than other people's.

A Latina participant in her mid-30s expressed how her breast size resulted in body shame:

While we are very petite, my body type is very different than the rest of my family. I'm bigger chested—I'm rocking double and triple Ds here and they literally grew out of nowhere. I went from nothing in 8th grade to I grew boobs, grew 5 inches. I had that transition and after that there was a lot of messages like "cover it up, don't let the boys look at you;" just being very aware of how my body was sexually seen from outside people. Literally to this day I follow this rule: I have a mole on my breasts and there was

always this rule in my house that if you could see the mole, you couldn't wear that out. It was really hard because I did gymnastic and I did dance. It was very hard to be an extra small body wise, but to have these big ol' boobs—I didn't know how to handle it. I felt very ashamed of having this womanly body. It wasn't kosher in my family to be sexually there.

When asked whether her family provided her with the same or different body image based messages presented in mainstream society, a Black participant in her mid-30s provided the following:

Same—I feel like they perpetuated stereotypes that certain clothing is only for certain body types and that I needed to be ashamed of my breasts, whereas my friends were praising them and saying how lucky I was and saying that they wished they had them.

Furthermore, participants expressed that they received competing messages from their families and their peers and/or media regarding their breast size. A Black participant in her late 20s described the conflicting messages that she had to contend with from her family, friends, and media about her breast size:

My family would always tell me to cover my chest. My parents would always buy me bras that would provide me with support, but minimize the fact that they were so large, but mainstream and my friends would tell me to flaunt it, show them what you got. My friends when I got to college would say, "I wish I had your boobs, you need to wear low cut shirts and show them off, you got it." I see that in mainstream in society that people are paying to get boobs my size, but for me, it's been something that I've been ashamed

of. So, it's kind of conflicting because my friends and media are like embrace what you have, but my family have been like, try to hide it.

Another Latina participant provided a similar experience of conflicting messages from their family compared to the mainstream society and her peer group:

It was really hard for me, especially when I got a little older, my friends were like, “you’ve gotta show this off, you’ve gotta get free drinks, you’re tiny and you’ve got big boobs, you’re attractive and you should be showing that off.” It was really hard to me to understand that in “white people world” I had an ideal body type—I was cute, I was perky, I had big boobs—you should want to show off, you are going to get attention, and I should use this to the benefit of me and my friends to get into the club, to get the free drinks. However, I still had my mom in the back of my mind clicking her tongue saying, “you know you look slutty; you know you are giving the boys the wrong idea.” I felt very caught between the two messages, like I know I’m not supposed to be doing this, but why the hell are you not taking advantage of it? It was really hard for me because it was a constant battle between two worlds because I might as well show what I got, yet feeling very ashamed to the point that in college I was still wearing a lot of bust minimizer bras.

The Black and Latina women in the study who self-reported that they had larger breasts, stated that they have been consistently unhappy throughout their lives with the size of their breasts. These women consistently expressed that they received modesty messages from their families that implored them to keep their breast covered so as to not give off the impression of being sexually promiscuous. In contrast, they received messages from their peers that were supportive and encouraged them to flaunt their breasts and to be proud of their size. These conflicting messages were difficult to manage, and they continued to exhibit body shame.

Hair. Some interview participants highlighted the importance of hair in regards to their body image. While some participants listed their hair as one of their features that promotes positive self-esteem, others discussed the importance of hair for women in regards to self-presentation. For example, one Black participant provided insight on the role of hair in one's self-presentation to the world:

Myself and my daughter's hair, we keep it in twists, braids, and nice ponytails. We always have to keep our hair nice and neat whenever we are out in the community... It's important that we teach our young boys and girls to embrace who they are. ...our young girls should not wear revealing clothing and they should keep their hair nice and neat. Keep their natural hair and embrace who they are.

A Latina interview participant contended how her hair is an aspect of her appearance that influences her self-esteem: "I like my hair...my hair has always been healthy and full."

Some of the Black female participants utilized natural, non-chemical hair styles. One participant discussed how her choice to wear her hair natural led to comments from her mother who is a hair stylist:

Hair was very important. I just got my hair straightened a few weeks ago and my mom said, "Oh, your hair is so cute." It's been cute, but to her, my natural hair is not what she would like for me to wear my hair. Growing up, my hair was always straight, and I started getting relaxers when I was 4. My mom's a beautician, and my hair was always done and always straight—never anything different.

That same participant contended that she receives pressure from her mother to chemically relax her daughter's natural hair, despite the fact that her daughter loves her curly hair:

She will sometimes say things about my daughter and straightening her hair and I tell her that I'm not doing that until she's old enough to understand and make the decision for herself. I want her to be proud of the way her hair grows out of her head and know that it's fine. Even her and my sister don't talk that much because my mom has backward views—like I'll tell her I talked to her and she said, "how is R, how is her hair?"

In contrast, one participant, who chemically straightened her hair, discussed the pressure that she felt for being a Black woman with chemically straightened hair as opposed to natural hair, which is becoming more acceptable in society:

Hair is something that I have struggled with currently because I tend to wear my hair straight and I get texturizers every now and then, but this mainstream thing of being natural is going on, and I struggle with what it means to be a Black woman and wearing my hair straight and paying for those services.

For many women in this study, hair was very important to their self-presentation, self-esteem, and body image. These quotes demonstrate that Black and Latina women value having healthy hair that is kept neat when out in society. For some of the Black participants, wearing their hair natural was extremely important to their self-concept. Two Black participants also discussed pressures they felt regarding their hair care; one stated that she felt pressure to chemically straighten her natural hair and her daughter's natural hair, while another participant felt pressure to conform to the new trend of wearing her hair natural.

Category: Interpersonal Impacts

Almost all of the interview participants discussed the significant impact that interpersonal external forces exhibited on their body image and self-esteem. The three major groups that were

discussed within the interviews were family (both immediate and extended), peers, and relationship partners.

Family. Family was reported as the major source of interpersonal influence for the Black and Latina women's body image and self-esteem. Participants implicated their mothers, grandmothers, and aunts as the primary sources of interpersonal messages; however, some male family members (fathers and brothers) either provided judgment or failed to acknowledge when these women felt that they were making positive gains with their weight. A Latina graduate student said, "I'm starting to get a double chin and the other day my brother was like, you're too young for that, you've got to do something about that." One Black female participant in her mid 20s stated:

The summer before freshman year in high school, I felt that I needed to be skinny. I felt pressure mostly from my grandma. She told me that if I didn't stop eating, I would get fat. We were poor, so we never had money for good and healthy food.

Another Black female participant in her late 30s described the criticism she received from her family despite the fact that she was considered thin in her youth:

I feel like I suffer from body image issues already, which is why I wanted to participate in this study. As a kid, I was very thin, as in underweight thin. My mom's side of the family would chastise me about being thin. "If you stand behind a pole, you'll disappear. Are you depressed? You're looking skinny. I can see your bone collar."

Also, a Latina interview participant described how the pressure that she received from her mother led to the use of compensatory mechanisms to control her weight:

When I was going through puberty and adolescence and my mom started making comments about my body changing and gaining weight, that's when I started taking diet pills and lying about eating, whether I had ate or not. I wanted to reverse puberty and be skinny. It was a lot of pressure from my mom to maintain a certain look.

A second Latina participant felt a lack of support from her father regarding her weight:

My dad—say if I'm working towards getting healthier, he won't acknowledge it. In his eyes, I will always be overweight. He's overweight, his girlfriend is overweight, my sister is overweight...we are all just bigger people. I don't know if he does it to take attention away from his own weight.

These quotes from Black and Latina participants establish that family is not a source of support for them in regards to their body image and self-esteem. Instead, their family members, particularly their female family members and occasionally their male family members, provided criticism about the size of their bodies and encouraged them to gain weight if they believed that they are too thin or to eat less and work out if they believed that the participant was overweight.

Peers. For the Black and Latina participants, their current peer group primarily served as a source of support for them in terms of their body image and self-esteem. One Black participant stated:

I have very, very supportive friends who are supportive of my size; we are all supportive of each other. We try to go on non-judgmental rules, and we will be honest, but we try to be supportive of who we are.

Another Black participant described how having friends who shared her cultural background promoted body satisfaction and body acceptance:

I think as an African American female, having African American peers has been able to make me feel more confident in my body. I don't necessarily feel that my Black parents have made me feel confident in my body. I think culturally there is this idea that one shouldn't necessarily be thin, but my peers have shown me that Black women come in all shapes and sizes. If I only based it off of what my parents and family said, I don't think I would be as comfortable.

Although peers were generally a source of support, they could indirectly pressured some of the participants by consistently discussing dieting and losing weight. One Latina participant in her mid 20s described how early in her life, her peers were a source of criticism and body shame:

I think there is a social capital that you do get from being thinner—you are included. I went to a Catholic school when I was younger and it was all Latinos, and I was teased nonstop about my weight. They called me things like lard and cow because one day, I had on a training bra with a t-shirt and I already had a C-cup. People around me were really throwing the daggers there.

In contrast to messages that the women received from their families, peers provided a consistent source of support regarding their body size. Specifically, peers who shared the same cultural background often provided positive cultural messages about body image that were not expressed by the family unit. Only one participant described weight-related teasing from her peer group as a child, although she acknowledged that these were school peers and not peers that she actively tried to befriend.

Relationship Partners. Most participants conveyed that their relationship partners acted as a significant source of support for their body image. Many of the women discussed that their current partners promoted body positivity and exhibited body acceptance regardless of their weight and shape. A Black female participant in her late 30s reported on the support that her husband provided her regarding her body:

My husband doesn't have any issue for my size. He acknowledges that I want to get my little pudge in my gut down because I acknowledge it, but he says it's not a big deal and he still says that I look nice.

Although all current partners were reported to be supportive, some participants provided accounts of former partners or experiences with potential partners where they felt judged about their bodies, they experienced body shame from their partners, or they felt ignored by partners due to the size of their bodies. A Black female graduate student stated, "I have been in situations where I don't get picked to be someone's partner because I'm not as thick and I am small." One Latina participant recounted how a former boyfriend's preference for partners of another race promoted body dissatisfaction:

My first relationship was very disrespectful (he was White by the way). He posted on one of those Asian reddit pages to go on a date with him and he wouldn't admit that he had a thing for Asian women. Asian body structure is pretty different and for a long time, I had a bit of a complex against Asian women, but it wasn't like it was their fault. I had a deep resentment and I was like, what are we doing here because if that's something that you want, I'm never going to be able to fulfill that.

Another Black participant recounted how several of her former partners have either directly made negative comments regarding her body or put pressure on her to lose weight:

I have had some relationship partners that were supportive and accepting of my body and others that were rude and disrespectful when I gained weight. My college sweetheart who I dated for four years was horrible to me when I gained weight and he started cheating on me and called me names—a lot of emotional abuse. I felt some pressure from some guys that I dated when I was getting my Masters to lose weight, especially because they were both very healthy and in shape. I dated a guy for three years and when I gained weight due to a medication, I found a list on his computer of the things he didn't like about me and the first thing was that I was overweight.

The statements from the women in this study showed that relationship partners provided both positive and negative messages that influenced their body satisfaction and dissatisfaction. All of the women who were currently involved in a romantic relationship stated that their partners were very supportive of their body shape and size and provided positive messages of body acceptance. However, past partners and potential partners were not always supportive. Participants discussed how they believed that some of their relationships did not progress due to their weight and how they felt that their former partners indirectly informed them that they were not satisfied with their body size.

Category: Cultural Expectations

Both the Black and Latinx cultures appear to have provided significant information to the women in the current study about how to perceive their bodies. Many participants conveyed that they received mixed messages regarding weight loss. Another mixed message, was food, as

participants conveyed how food in Black and Latinx cultures is important, the emphasis on its importance often conflicted with messages to lose weight and maintain a fit and healthy lifestyle. Additionally, there was a very clear cultural expectation for the ideal Black and Latina body that was conveyed by all participants.

Although not a significant concept as it was discussed in only a couple of interviews from Black interview participants, colorism was presented as a cultural expectation for Black women. For example, one Black participant said, "...we are always programmed that lighter is better." Another Black woman who was a doctoral student in her mid 30s mentioned how colorism is important in the Black community:

Although it is not an issue for me, I think skin color and colorism continues to be an issue in the Black community and has been since slave times. I see things on social media where women are cut down if they are too Black and other women are considered to not be Black if they are biracial and fair skin and ethnically identify as biracial. There's such an ignorant double standard and I think that it impacts children of color because it teaches them to not love the skin that they are in.

Mixed Messages. For both Black and Latina women, many of the mixed messages surrounded the need to lose weight, but not to lose too much weight. If they were considered to be too thin or "white thin," they were questioned as if they were sick or something was wrong with them. However, there was still the consistent expectation to be fit. For example, an Afro-Latina participant described the messages that she received in the Latinx culture,

In Latin culture, let's say that you lose 5 – 10 pounds; they say, "oh you look good, you needed to lose a little bit of weight, I didn't want to say something." Then when you lose

five more pounds or even in that same conversation, it's like "don't lose any more weight." Be shapely, be pretty, but don't be "White thin" because that's not appreciated. Curvy for sure is appreciated.

A similar example from a Black participant:

On one end, they weren't saying "oh be skinny like the models, don't eat, or you have to be thin to be successful;" however, they were critical on how I looked like such as, "you don't want to be so big that you're moving past everyone and you're knocking things off the table."

Additionally, Black female participants described that while it is appropriate for Black women to be thick, there was only a certain level of thickness that was appropriate and acceptable. For example, one woman stated that, "There's a mixed message in the African American community. You can be thick, but don't be obese because that's a problem. You can have some meat on your bones though."

These quotes demonstrate that Black and Latina women contend with divergent messages regarding what weight and body size is appropriate. What is interesting is that these messages are not only conflicting, but they are ambiguous; only a few pounds can separate being too thin and too big. More often than not, these women were completely unaware of what size would be the "perfect" body size.

Food. Food is a significant part of both Black and Latinx cultures. Food is not only intertwined in holidays and celebrations, but it is often an expression of love in many families. However, cultural foods for Blacks and Latinos are often high in calories and fat. Both Black and Latina interviewees discussed the role of food within their families and how the cultural

expectation to consume high calorie and high fat food comes in contrast with the message to lose weight and be fit. A Black interview participant in her mid 40s described how she had to contend with her grandmother's cooking while receiving negative comments regarding her weight:

My grandmother growing up probably sent mixed messages. She really didn't start getting on my nerves until I was a teenager, young adult, when she started making negative comments about my weight... It was always, "look at you, you're getting so big." My grandmother didn't change the way she prepared meals. I told my grandmother that I could have a bowl of ice and you could say that I was eating too much. You're the one preparing meals, and I'm always the first one you call.

A Latina interviewee described her frustration with her parents' expectations for her to eat unhealthy Mexican food while still managing her weight:

Food, it really pisses me off—my parents do this to me all the time. You're expected to be thin, to be beautiful, but at the same time, our culture's food is terrible for you. My parents didn't feed me vegetables growing up because what Mexican grows up eating broccoli? I don't know anybody that did. I think it's really frustrating for the body image for me because they fill you with food that's bad for you and it's an offense if you don't eat it; you can't turn anyone's food down in Hispanic culture. At the same time, why are you getting fat?

While food is a key element for culture in Black and Latinx families, it serves as a point of contention in regards to managing one's weight. These quotes show the frustration that interview participants exhibited over having to manage their family's expectations of being an

appropriate weight, while their families cooked and consumed cultural foods that are generally considered to be unhealthy. The inability to decline food or eat less of what they were offered only compounded the conundrum of maintaining a fit appearance while eating high calorie and high fat food.

Ideal Woman. Interview participants, both Black and Latina, emphasized that being curvy was culturally ideal for both Black and Latina women. For Black women, being thick instead of thin was a consistent term that was utilized by almost all interview participants. Some Latina participants also contended that thickness was a cultural ideal for Latinas as well. Most individuals who were thin emphasized how they desired the cultural ideal of thickness. One Black participant stated, “Being thin is definitely not emphasized for Black women. The emphasis is on being thick in the right places. The only parts of the body where thinness is acceptable are the waist and the stomach.”

One Black participant, who was naturally thin, discussed how the cultural expectation to be thick affected how she viewed her thin frame:

This is something I struggle with because I am thin, but in Black culture, there is a praise around being thicker and having curves. I have had to do a lot of positive self-talk around being comfortable in the body that I have. I don't necessarily think that being thin in my culture is praised. I was raised to keep eating, “you're not eating enough, you're so small;” those are the messages I constantly heard and that made me feel that being small was not the way I should be.

The specific body areas that were mentioned for the ideal Black and Latina women were big breasts, large butts, small waists, and big hips. For Latina women, the celebrity woman

consistently mentioned as the ideal Latina woman was Sophia Vergara. When asked what the cultural standard was for a Latina's woman's body, one participant responded, "Sofia Vergara—that's easy. Big boobs, small waist, big nice hips, big butt. People fetishize that too—people fetishize what it means to be Latina." Another Latina interviewee provided a similar appraisal of the Latinx culture and contended that the Latinx culture is responsible for these cultural standards:

The sexy siren—that is the epitome of what Latinas are. I think that sucks because those women are the exception to the rule. It's our fault as Latinx people because those TV stars that you see on telenovelas and Telemundo are cherry picked; they are hand-picked because they are lighter, taller, more thin-framed. We have perpetuated a standard of beauty that doesn't exist into our culture and that is then perpetuated into the wider society. Now everybody thinks that if you're Latina, you are going to be Sofia Vergara or Adriana Lima. We look very, very different. Think about Mexicans vs. Colombians vs. Guatemalans—we all look very distinctly different. It is that sexy, big boob, big ass, long hair—that is what we see as the epitome of beauty.

Despite these cultural standards for the ideal woman, some participants expressed how these standards were unrealistic for Black and Latina women in the same way that thinness is unrealistic. Participants spoke about how reality television stars such as Kim Kardashian are perpetuating this new ideal, which results in Black and Latina women seeking out plastic surgery to meet this ideal. For example, when asked about the cultural standard for Latina women, one participant said:

Be curvy, but with a flat stomach. Sometimes that's unrealistic. If I have fat in my ass, I'm going to have fat in other places. I feel like people are going out of their way to get surgery to look that way. It doesn't even look natural, but that's the look.

Another Black participant discussed how men perpetuate unrealistic expectations for women:

You are celebrated if you're thick—nice butt and hips, but if you're fat, that's not thick. If you are too thin, you're just a bag of bones. Where is the balance? Men in general have unrealistic expectations of how a woman should look physically; we were not born with super-duper flat tummies and big boobs. For a lot of men, that's the expectation. That's why we have things like butt injections.

The quotes provided by these women spoke to an ideal woman who has a body frame that is considered to be thick. This woman is neither thin nor fat, yet, the concept of what it means to be thick is not clearly defined. However, these participants spoke to specific body areas such as, large butts, breast, hips, and small waists and stomachs as characteristics of a woman who would be considered thick. While the "thick ideal" reduced some of the pressure for the participants to be thin, it placed pressure on women who were naturally thin and cannot meet that ideal. Even women who may be considered thick might not have the ideal body, and may feel pressure from their culture to engage in body-altering practices like plastic surgery to obtain a body that is reminiscent of Sofia Vergara or Kim Kardashian.

Category: Mainstream Values

Thin Ideal. Although the vast majority of women who were interviewed contended that the cultural standard for Blacks and Latinas consisted of women who were thick and curvy, some participants expressed how thinness was encouraged by members of their family or that they felt

particular pressure to adopt mainstream values of the thin ideal. For example, one Latina participant reported that compared to the messages presented by the mainstream society, the messages that she received from her family “were similar, the same—to value a thinner, skinnier body.” A Latina participant reviewed how her parents promote thinness despite not engaging in behaviors themselves that promote thinness:

Thinness has come up more as I have become older. My stepfather will say, “well...those pants don’t fit the same way or you’re eating a lot of junk, maybe you oughta work out or something.” Or my mom will say, “you’re getting a little bit of a muffin top, you might want to work on it before it gets out of control.” They will say things like that if they see a difference. They aren’t big on diets. They suggest me going to the gym, but they won’t do it themselves.

A Black female participant, who is also a mom, discussed the pressure that she felt both from the media and her family to have her body “snap back” post-pregnancy:

...being thin and being fit is celebrated. Those are the messages that I got when I was younger; thinner is better, smaller is better and that’s some of the messages that I see now in media. At first it was difficult to think about that after I had my kids because I had to have C-sections for them...I had this condition that caused my abdominal muscles to separate. Even if I worked out, it still looked like I was 6 months pregnant. It caused back pain so I got it surgically repaired. But even after I had that, my mom said, “you look good, you lost so much weight” and it wasn’t for lack of trying. I feel like it’s more pressure for moms to have a snapback body—it’s not for all people and it’s not for lack of trying. For me, it was really hard and no matter how I tried, I couldn’t get my belly to go down.

These quotes demonstrate that the thin ideal is relevant for Black and Latina women as they felt sociocultural pressure from society and from their family to be thin. Participants discussed how even if their family members were not thin, they still imparted values consistent with the thin ideal.

Quantitative Findings

Characteristics of the Sample. Black and Latina individuals ($N = 150$) completed the quantitative survey battery. All participants identified as female at birth, and with the exception of two participants ($N = 1$, non-binary femme; $N = 1$, gender queer), all participants currently self-identified as female, woman, cisgender woman, or cisgender female. The sample was disproportionately Latina/Latinx with 86% ($N = 129$) self-identifying as Latina/Latinx, 10.7% ($N = 16$) self-identifying as Black, and 2.7% ($N = 4$) self-identifying as Afro-Latina. More than three-quarters (78%, $N = 117$) of the sample were under the age of 40, with 39.3% ($N = 59$) between the ages of 20 – 29, 38.7% ($N = 58$) between the ages of 30 – 39, 17.3% ($N = 26$) between the ages of 40 – 49, 3.3% ($N = 5$) between the ages of 50 – 59, and 1.3% ($N = 2$) age 60 or older. The sample was highly educated, with 3.3% ($N = 5$) of individuals with 1 – 5 semesters of higher education completed, 24.7% ($N = 37$) of individuals with 6 – 10 semesters of higher education completed, 24% ($N = 36$) of individuals with 11 – 15 semesters of higher education completed, 21.3% ($N = 32$) of individuals with 16 – 20 semesters of higher education completed, 6% ($N = 9$) of individuals with 21 – 25 semesters of higher education completed, 2% ($N = 3$) of individuals with 26 – 30 semesters of higher education completed, and 2% ($N = 3$) of individuals with 31 or more semesters of higher education completed.

Almost 53% ($N = 79$) of survey participants recounted that the race/ethnicity of their close friends was the same as their race/ethnicity, while 32.7% ($N = 49$) of participants reported

that the race/ethnicity of their close friends was different. Fifty-eight percent ($N = 87$) of survey participants recounted that the race/ethnicity of their relationship partners was the same as their race/ethnicity, while 34.7% ($N = 52$) of participants reported that the race/ethnicity of their relationship partners was different. Sexual identification of the sample included 75.3% ($N = 113$) individuals who identified as heterosexual/straight/heteroflexible, 9.3% ($N = 14$) individuals who identified as bisexual, 2.7% ($N = 4$) individuals who identified as lesbian/gay, 6% ($N = 9$) individuals who identified as other sexual orientations including pansexual, asexual, fluid, and queer, and 6.7% ($N = 10$) individuals provided no identification or an identification that was not consistent with sexual identity. For descriptive purposes, means and standard deviations of study variables are included in Table 2.

Table 2

Means and Standard Deviations of the Measures

<u>Measure</u>	<u>N</u>	<u>M</u>	<u>SD</u>
Sense of Belonging	150	5.87	1.47
BASS	148	3.33	.96
RSES	148	17.48	2.11

Note. Sense of Belonging = A feeling of a sense of belonging and attachment to one's ethnic group, BASS = Body Areas Satisfaction, RSES = Self-Esteem

Relationships among the Variables. Bivariate correlational analyses were conducted to examine the relationships between variables that were used in subsequent analyses (see Table 3). Correlational analyses were conducted on sense of belonging to one's ethnic group, body areas satisfaction (BASS), and self-esteem (RSES) as these were the variables used in the multiple regression analyses. Body satisfaction was significantly related to both self-esteem and to a sense of belonging to one's ethnic group. Self-esteem was also significantly related to a sense of

belonging to one's ethnic group. Separate group correlations for Black and Latina women were not conducted as the sample size was skewed by race with 86% of the sample self-identified as Latina/Latinx.

Table 3

Intercorrelations Between Variables

Measure	1	2	3
1. BASS	-	-.572***	.882***
2. RSES	-.572***	-	-.811***
3. Sense of Belonging	.882***	-.811***	-

Note. BASS = Body Areas Satisfaction, RSES = Self-Esteem, Sense of Belonging = A feeling of a sense of belonging and attachment to one's ethnic group

*** $p < .001$

Influence of Body Satisfaction on Self-Esteem. A multiple regression was conducted to investigate whether body satisfaction predicted levels of self-esteem and whether a sense of belonging to one's ethnic group predicted levels of self-esteem. Initially, race/ethnicity was a planned control variable. However, due to 86% of the quantitative sample self-reporting as Latina/Latinx, it was determined that controlling for race was unnecessary. When investigating whether body satisfaction predicted levels of self-esteem, results demonstrated that there was a statistically significant regression, ($F[1, 146] = 71.02, p < .001$), with an R^2 of .327. Thirty-three percent of the variance of self-esteem is accounted for by body satisfaction. Body satisfaction significantly predicted levels of self-esteem, $\beta = .57, t(146) = 8.43, p < .001$. When investigating whether sense of belonging to one's ethnic group predicted levels of self-esteem, results demonstrated that there was a statistically significant regression, ($F[1, 146] = 281.46, p < .001$),

with an R^2 of .658. Sixty-six percent of the variance of self-esteem is accounted for by sense of belonging to one's ethnic group. Sense of belonging to one's ethnic group significantly predicted levels of self-esteem, $\beta = .81$, $t(146) = 16.78$, $p < .001$. Separate regression analyses for each group were not conducted due to the significant discrepancy in sample size between of Black and Latina women (14% vs. 86% respectively).

CHAPTER V: DISCUSSION

Introduction

The present study was novel in its approach by utilizing a grounded theory mixed method modality, with a study sample consisting of entirely Black and Latina women. This study provided a rich and deeper understanding of body image from the perspective of the Black and Latina women, and allowed the principal investigator to see how culture was implicated and intertwined with body image and self-esteem for these women. This chapter will provide interpretation of the results based on the a priori research questions, propose implications for clinical practice when working with Black and Latina women in a behavioral health setting, and offer recommendations for future directions of research.

Qualitative Research Discussion

The first qualitative research question and sub-question were: “Do specific cultural factors of Black and Latina women, who are currently enrolled in college, influence their level of body dissatisfaction? If so, what are these cultural factors and how do these factors influence their level of body dissatisfaction?” The research findings demonstrate that there are indeed cultural factors that influence the body dissatisfaction of Black and Latina women. Participants discussed how the mixed messages that they received both growing up and in present day resulted in both confusion regarding their appearance and feelings of having to maintain an ideal appearance that was consistent with ethnic minority cultural standards, but not mainstream standards.

According to participants, the consistent message that was presented to them was to be fit. In contrast to mainstream values, being fit did not mean to be thin; in fact, some women in

this study described how adopting mainstream ideals of thinness was discouraged by their family. While they were encouraged to not be mainstream thin or “White thin” as one participant named it, they also could not be fat. Participants expressed how this mixed message constituted a fine line between what was acceptable and what was discouraged, and it could involve just a few pounds. For example, participants reported how losing five to ten pounds was acceptable and even encouraged; however, they were discouraged to lose more, and if they lost five to ten pounds more, they were asked if they were ill and encouraged to eat. This cultural expectation not only resulted in hyperawareness of perceived imperfections in their bodies, but also dissatisfaction when they were unable to meet this very narrow standard.

A second factor that was implicated in this study in relation to body dissatisfaction was the interaction between food and expectations of weight maintenance. Participants conversed about how members of their families put pressure on them to monitor their weight or lose weight, yet did not alter the food that was prepared in the household. The expectation to eat cultural foods that were high in calories, fat, and sodium content and to never decline food because that would be viewed as disrespectful to the person who prepared the food was in sharp contrast to weight-related teasing and expectations for these women to lose weight while consuming these foods. For women who were naturally thin, they expressed a consistent pressure to consume more food and even admonishment that they were not eating enough if they continued to remain thin.

The second sub-question of the initial research question addressed the thin ideal: “Is the thin ideal a relevant construct to ascertain body dissatisfaction in Black and Latina women?” Although all participants indicated that maintaining a thin body was not the cultural ideal for Black or Latina women, some participants expressed that they felt pressure, primarily from

family, to be thin. These messages were typically presented after the participant gained weight as pseudo-encouragement or blatant criticism to lose weight and instead return to their previous bodies which were more in line with their family's expectation for body weight and shape. What is profound is that the majority of these women noted that the individuals providing these messages usually did not meet the standards that they sought to impart and were not actively working on maintaining their weight and shape. As a result, these women felt dissatisfied that their current appearance was not celebrated, and participants noted how they engaged in mechanisms to deal with their weight gain, such as the use of diet pills, having surgery on their abdomen, and constant body checking or body avoidance.

The second qualitative question and sub question were: "Do specific cultural factors of Black and Latina women, who are currently enrolled in college, influence their level of body satisfaction? If so, what are these cultural factors and how do these factors influence their level of body satisfaction?" Although body satisfaction was a construct that was communicated less often than body dissatisfaction, there were a few cultural-based aspects that participants discussed that promoted body satisfaction. These factors included support from peers and relationship partners, and strong ethnic identification with one's culture.

The vast majority of participants expressed that their friends, regardless of whether they discussed weight and dieting related issues, generally expressed support and helped to promote body satisfaction. Although participants were not specifically asked during the interview whether members of their peer group were the same race/ethnicity, individuals who indicated that they shared their race/ethnicity with their peer group often stated that their friends provided messages of body acceptance regardless of whether their body conformed to cultural standards of body size and shape or mainstream standards of body size and shape. A similar sentiment was

conveyed regarding relationship partners. Although some participants discussed previous relationships where they felt judged or felt pressure to lose weight, all women who were currently engaged in relationships expressed that their current partners were extremely supportive, which helped them to accept their bodies.

A little more than one third of interview participants contended that having a strong identification with their culture promoted body satisfaction. Although ethnic identification was not significant enough amongst the interviews to be included in the conceptual model, it did permeate other concepts and sub-variables within the model. Some of those concepts and sub-variables include Body Image, particularly the sub-variable of Hair, the sub-variable of the Ideal Woman (on Cultural Expectations) and the sub-variable of the Thin Ideal (on Mainstream Values). Participants spoke to how Black and Latinx cultural standards for appearance assisted them in rejecting mainstream values and pressures. For example, one Latina participant stated:

...I think if I looked at mainstream culture, I don't think my body type is model type, but if I looked at more ethnic magazines, I could see how my body is more reflective of that. That does protect me from some of the things that I see in mainstream culture.

The participants who supported this notion used the word “embrace” and described how the Black and Latinx cultures embraced being thick and embraced women with curves, and feeling more ethnically identified with their culture allowed them to be more satisfied with having a body type that reflected Black and Latinx cultural ideals. One Latina participant stated, “...as Hispanics, we are proud of our curves,” while another Black participant said, “the African American culture embraces thick females” and “I think that if I was born into this world white and overweight, I probably wouldn't have the level of self-esteem that I have.” One Black participant asserted, “...if you understand your body type because of your cultural reference,

then you're not surprised or shocked by the way you look...It helps you to be more realistic with yourself."

The final qualitative research question and sub-question were: "Do specific cultural factors of Black and Latina women, who are currently enrolled in college, influence their self-esteem? If so, what are these cultural factors and how do these factors influence their self-esteem?" Participants asserted that there were a number of cultural factors that influenced their self-esteem. In previous research, weight has often been considered as a factor that does not negatively influence Black or Latina women due to a protective factor within their culture that shields them from body dissatisfaction and lowered self-esteem due to their weight. However, the findings from this study demonstrated that weight is a significantly influences body dissatisfaction and negative self-esteem, and according to participants in this study, family played a significant role in decreasing self-esteem through weight-based criticism as opposed to protecting participants.

Almost all of the interview participants described experiences with their immediate and extended family that involved appearance-related assessment and disparagement regarding their weight and shape. Several women used the word "ashamed" when describing how their family members made them feel regarding either their weight, specific aspects of their body, or both. Other participants noted that they are "self-conscious" about their body as a result of messages to watch their food intake, comments about serving the individual smaller portion sizes to control their weight, or body-focused appraisals from family that indicate that they noticed that the person has gained weight and either needs to be careful or needs to start exercising. For individuals who were naturally thin, they described lack of acceptance from their family for

being too thin and continued pressure to gain weight, leading them to suggest that they had lowered self-esteem and self-acceptance of their bodies.

For participants with larger breasts, self-esteem was influenced by cultural messages of modesty or perceived judgment by family members. Black and Latina women with large breasts spoke of their breasts in a negative light, stating consistently that they felt ashamed of their breast size. This shame was precipitated both by messages that they need to cover up so as to not give the impression that they are sexually promiscuous and by being provided bust minimizing clothing, which they later continued to wear to decrease the appearance of their breasts. While more encouraging messages were provided by peers, all of these women listed their breasts as an area of their body that lowered their self-esteem.

Hair was primarily discussed as a positive aspect of these women's self-esteem. When naming parts of their body that either reduced or increased their self-esteem, several participants stated that hair was one aspect of their body that increased their self-esteem. Although hair generally seemed to improve self-esteem, one participant noted that even though she loved her natural hair and encouraged natural hair acceptance to her daughter, her mother made negative comments about the appearance of her hair and her daughter's hair because they wear it natural instead of chemically straightened. Despite these comments, hair was named as the feature that she loved the most about herself. Only one participant mentioned hair as a factor that lowered self-esteem. This was based on more cultural acceptance for Black women to wear their hair natural, while this participant continues to chemically straighten her hair.

Thickness and curviness were both listed by participants as aspects of an ideal body for Black and Latina women. Women whose bodies reflected this ideal had higher self-esteem. In contrast, individuals who reported that they were naturally thin felt pressure to conform to this

ideal and experienced less acceptance from family and men for having a body that did not subscribe to this cultural ideal. The women in this study talked about how these cultural standards can promote lower self-esteem because they are impractical and, as a result, people may get cosmetic surgery in order to obtain the large butt, breast, or small waist that is consistent with this cultural body ideal.

The qualitative findings from this study both support and challenge existing research in a number of ways. These findings lend support to body image being both a perceptual and attitudinal concept, that culture has a positive influence on body satisfaction and self-esteem, and that peers and relationship partners operate as support mechanisms that promote body satisfaction and positive self-esteem in Black and Latina women. However, the findings of this study challenge existing research by demonstrating that culture may not be a protective factor for all Black and Latina women; instead, Black and Latina women in this study exhibited body dissatisfaction and lower self-esteem primarily due to pressure and messages from their family members. Additionally, this research demonstrated that the thin ideal is a relevant construct for Black and Latina women, which is divergent from most extant literature.

First, instead of utilizing an existing theory, the use of grounded theory in this research study provided the opportunity for a theory to evolve from the narrative provided by the women who engaged in the interviews. The new theory formulated for this research study had a central phenomenon of Body Image, which was defined by the variables of weight, breast size, and hair. Body Image was negatively or positively influenced by Interpersonal Impacts (as defined by family, peers, and relationship partners), Cultural Expectations (as defined by mixed messages from family, cultural foods, and the ideal woman as defined by culture), and Mainstream Values (as defined by the thin ideal). Rucker and Cash (1992) proposed that body image is encapsulated

by “(1) perceptual body image (i.e., estimation of one’s body size, including perceptual distortion and discrepancy from idealized standards), and (2) attitudinal body image (i.e., affect, cognitions, and behaviors concerning one’s size/appearance)” (p. 291). The qualitative results of this study demonstrate that the central phenomenon of Body Image captured both the way these women perceived their bodies and the way they felt that others (i.e., family, peers, and partners) perceived their bodies, and the thoughts and behaviors that resulted as a result of those appraisals.

To my knowledge, this is the first mixed method study with qualitative data based in grounded theory that incorporated a sample of Black and Latina women. The use of a sample of Black and Latina women with no comparison to White women allows for less of a focus on comparison between the mainstream group versus ethnic minorities and more of a focus on the ability to understand the body image concerns of Black and Latina women from their own voices. Although previous research has found that Black and Latina women exhibit less body dissatisfaction, have more positive appearance-related appraisals, and are less focused on their weight as compared to white women (Altabe, 1998; Harris, 1994; Miller et al., 2000; Sabik et al., 2010), the qualitative results of this study demonstrate that Black and Latina women do exhibit some body dissatisfaction, have negative appearance-related appraisals, and often are preoccupied with their weight and shape. While this study was unable to determine whether Black and Latina women experience those constructs more or less than White women, the results show that these constructs are indeed relevant to Black and Latina women.

In this study, culture was shown to be both an influencer of body dissatisfaction and negative self-esteem and a promoter of body satisfaction and positive self-esteem. Existing research has proposed that culture for ethnic minority women is a protective factor for body

image disturbance and negative self-esteem (Grabe & Hyde, 2006; Rubin et al., 2003; Sabik et al., 2010). Research has demonstrated that body image preferences of ethnic minority men as well as supportive messages from family and peers help to form this protective factor for body image for Black and Latina women (Allan et al., 1993; Capodilupo & Kim, 2014; Molloy & Herzberger, 1998). Women in the current study identified peers and relationship partners as significant sources of support and positive influencers of self-esteem. Peers and partners provided supportive messages and ascribed to cultural values that promoted body acceptance and satisfaction regardless of the participants' body weight or shape.

In contrast, family members were generally a precipitant of body dissatisfaction and negative self-esteem for these women. Messages about weight and shape, cultural expectations of modesty and judgment about specific body areas (breasts, hair), mixed messages about losing weight and body size expectations, and pressures to consume cultural foods while still maintaining a fit figure all promoted body dissatisfaction and low self-esteem in Black and Latina participants who were interviewed. This finding is novel, and it demonstrates that Black and Latina women do experience body dissatisfaction and negative self-esteem. Like White women, one of the significant contributors to those factors is the family unit.

According to existing research, Black and Latina women are less likely than White women to adopt the thin ideal (Kelch-Oliver & Ancis, 2011; Shaw et al., 2007). As stated previously, there was no comparison to White women in this study; however, the findings in this study show that mainstream values such as the thin ideal predict poorer body image and self-esteem of Black and Latina women. Participants noted that they received pressure and messages from family that promoted the thin ideal and encouraged weight reduction to achieve thinness. This finding is in line with previous research that demonstrates that promotion of the thin ideal

by peers and family results in negative body image for women (Kichler & Crowther, 2009; Presnell et al., 2004; Stice, 1998). Additionally, it supports Poran's (2006) findings that Black women are both aware of and internalize the thin ideal. These findings, however, contradict Capodilupo and Kim's (2014) findings that families operate as significant buffers of the thin ideal. While these findings show that the participants' families provided messages that exhibited concern when these women lost weight, they also show that families provided criticism when the participants gained weight.

Quantitative Research Discussion

The quantitative questions assessed for this mixed method study were: "Controlling for race and ethnicity, do levels of body satisfaction significantly predict levels of self-esteem for Black and Latina women? Controlling for race and ethnicity, does a sense of belonging to one's ethnic group significantly predict levels of self-esteem for Black and Latina women?" The results of the regression analyses indicated that levels of body satisfaction significantly predicted levels of self-esteem in Black and Latina women. As women became more body satisfied, their self-esteem increased. Additionally, results indicated that a sense of belonging to one's ethnic group significantly predicted levels of self-esteem for Black and Latina women. Black and Latina women with a greater sense of belonging to their ethnic group exhibited increased self-esteem.

Frost and McKelvie (2004) found that body cathexis, which is the level of body satisfaction one feels towards specific body areas, was significantly related to self-esteem and positively predicted levels of self-esteem in male and female elementary, high school, and university students. Additionally, Tiggemann and Williamson (2000) demonstrated that having high self-esteem protected women from exhibiting body dissatisfaction. In regards to sense of

belonging to one's ethnic group and self-esteem, Hesse-Biber et al. (2010) found that Black women who were highly ethnically identified also exhibited high self-esteem, while Black women who had low ethnic identity or who were bicultural and ethnically identified with both Black and White culture were more likely to exhibit low self-esteem. The results of the current study support the findings of these earlier studies. Furthermore, these findings also demonstrate that self-esteem is a relevant construct for Black and Latina women as it relates to their body satisfaction and their sense of belonging to their ethnic group.

Implications for Clinical Practice

The prevalent societal message has been that clinicians should be mindful and attentive to body image disturbance and eating psychopathology in White women. These factors have been consistently considered to be issues that primarily affect high socioeconomic status White females in Western society (DiGiacchino et al., 2001). As a result, clinicians may ignore or may not be equipped to recognize body image disturbance in Black and Latina women, which may limit how they can effectively meet the women's treatment needs. It is important that clinicians who work with Black and Latina women are cognizant of cultural factors in Black and Latinx families and how these factors are influential in the promotion of body dissatisfaction and self-esteem. For example, a clinician will need to understand issues such as the inability to refuse food, the importance of cultural foods to Blacks and Latinas, and how ethnic minority women may be navigating conflicting messages that promote eating unhealthy foods while having an expectation to maintain an appropriate body weight.

Additionally, clinicians will need to assess the type of appearance-related messages that have been internalized in order to determine the focus of treatment. Although Black and Latina women may have internalized weight-based messages, some may be focused on attaining a

cultural standard of being fit with focus on specific body areas (i.e., large butt, large breasts, small waist, and wide hips), while other women may be focused on attaining a thin body. Clinicians should work with women to process the importance of these body ideals and understand where these messages are obtained from. If they come from the family unit and they have been ingrained over time, these women will need to work on decreasing the impact of these messages and restructuring their negative view of their bodies into positive views. Clinicians would be wise to assist women in seeing how peers and relationship partners can operate as beneficial sources of support and buffers of negative messages from family members in order to raise self-esteem.

The paradigm model, as depicted in Figure 1, would be useful for clinicians in working with Black and Latina female clients. This model depicts the precipitants that facilitate appearance-related issues, and the contexts and mechanisms by which these issues sometimes flourish into body dissatisfaction. Therapeutic case conceptualization can be facilitated through the use of this model as it will help to inform behavioral health practitioners about areas of intervention that are potentially relevant to investigate when working with Black and Latina clients to improve their body satisfaction and/or reduce their body dissatisfaction.

Limitations and Future Directions

Although the sample size for the quantitative data exceeded what was necessary to meet sufficient power, the vast majority of participants self-identified as Latina or Latinx. Although the Black women who participated by taking the quantitative survey are diverse demographically, they may be similar to each other in significant ways. As a result, the quantitative findings may not be generalizable to Black women in the United States as a whole. Additionally, both the qualitative and quantitative sample consisted of women who had at least

one semester or more of college education. Many of these women were highly educated, with one or more post-secondary degrees. While this study provided data from women of a wide range of ages, as opposed to a convenience sample of college undergraduates typically used in body image studies, these results may not generalize to Black and Latina women who have not engaged in any form of post-secondary education.

Another limitation is that only certain individuals self-selected to participate in the interview portion of the study. There were some individuals who chose to not follow-up with participation after initial contact and others who chose to never inquire about the interview. The women who chose to participate may be women who have a special interest in body image and culture, who have had significant body image issues which attracted them to the study, or who may have some other homogenous factors that influenced the thematic content of the interviews.

Although the demographic questionnaire assessed for sexual identification, none of the interview participants indicated that they were romantically involved with women. Future research should examine whether women who are romantically engaged with other women continue to find their partners as a source or support for their body image. Additionally, while it was only mentioned by a few Black interview participants, skin color satisfaction and the role of family and mainstream values of skin color may be a relevant concept to explore, particularly for Black women. Future research should assess whether skin color is a significant body image construct for Black women and whether values such as lighter skin preference detrimentally affect self-esteem.

Summary

While extant research has consistently proposed that Black and Latina women are far more insulated from body image concerns and self-esteem issues (as compared to White women) due to a perceived protective factor from their culture, this study demonstrates that Black and Latina women indeed experience body dissatisfaction and decreased self-esteem due to their bodies. Like White women, Black and Latina women experience body dissatisfaction due to their weight and contend with pressures both from family and mainstream society to maintain appearance related standards. In contrast to White women, Black and Latina women contend with mainstream societal pressures which promote the thin ideal and cultural pressures to embody a cultural body image standard of thickness and curviness. Furthermore, these women contend with non-weight based standards of beauty, such as hair and breast size, as well as mixed messages and cultural norms that produce negative appraisals of their body. Thus, the current study is important in that it assesses Black and Latina body image from both a quantitative framework and allows an in-depth qualitative examination of the interaction between culture and body image through a narrative lens.

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Appendix A

Standardized Email Recruitment Script

Dear Potential Interested Participant:

My name is Nicole Williams, and I am a doctoral candidate at the College of Saint Mary. I am currently recruiting individuals to participate in my Doctoral Dissertation research, which is investigating how culture shapes body satisfaction, dissatisfaction, and self-esteem for Black women and Latinas. I am looking for women who ethnically identify as Black or Latina and are enrolled in college to participate in this study. The study involves both a face-to-face or virtual interview component and a short online anonymous survey component.

If you are interested in participating, please contact me at NWilliams9343@cs.m.edu for more information. Additionally, if you know someone who may be interested in participating, please forward this correspondence to them. Thank you for your time and consideration.

Sincerely,

Nicole Williams, Ed.D.(c), LPC-Intern

NWilliams9343@cs.m.edu

Appendix B

Participant Letter

Dear Participant,

First off, I want to thank you for your interest in this research study. Taking the time to volunteer allows this project to come to fruition and allows my doctoral dream to become reality. I appreciate you.

You are being asked to participate in a mixed-methods research study that will examine the influence of culture on body satisfaction, body dissatisfaction, and self-esteem, as self-reported by Black and Latina women, who are currently enrolled in college. As your participation is voluntary, you may withdraw at any time. Your privacy is important and all of your responses will be kept secure, and your name will never be connected to the answers that you provide.

The research study consists of two parts. The first part involves the completion of a short online survey questionnaire via SurveyMonkey. The survey will first ask some general demographic questions, and then you will complete two short assessment measures. This part should take less than 15 minutes. The second part of the study involves the completion of either a face-to-face or a virtual (e.g. Skype) interview. The interview is unstructured, which means that it will be less like a traditional interview and more like a conversation. This part should take no more than one hour.

The consent form for participation in this study and the College of Saint Mary Rights of Research Participants document is included with this email. Please take your time to read both documents carefully, electronically sign and date the consent form, and return a copy of the form to me. Please keep a copy of the consent form as well as the Rights of Research Participants document for your records.

Please do not hesitate to contact me via phone or email with questions that you may have regarding the study at any time during the process. Once again, I appreciate your willingness to engage in this process.

Sincerely,

Nicole Williams, Ed.D.(c), LPC-Intern
NWilliams9343@csu.edu
512.593.8488

Appendix C

Informed Consent



Consent to Participate in a Research Study
Adult Participants

IRB Study #: CSM 1723 **Consent Form Approval Date:** 11.22.2017 **Expiration Date:** 12.31.2018

Title of the Study: My Culture is My Identity: Understanding Cultural Aspects that Permeate Ethnic Minorities' Feelings Regarding Their Bodies

Principal Investigator: Nicole M. Williams, Ed.D.(c), LPC-Intern

College of Saint Mary Department: Education

Contact Phone Number: 512.593.8488

Contact Email Address: NWilliams9343@csm.edu

Faculty Advisor: Shari M. Prior, Ph.D.

Faculty Advisor Email Address: SPrior@csm.edu

Faculty Advisor Phone Number: 402.399.2476

What are some general things you should know about research studies?

You are being asked to take part in a research study. Joining the study is voluntary. You may refuse to join, or you may withdraw your consent to be in the study, for any reason, without penalty. Research studies are designed to obtain new knowledge. This new information may help people in the future. You may not receive any direct benefit from being in the research study. There also may be risks to being in research studies. Details about this study are discussed below. It is important that you understand this information so that you can make an informed choice about being in this research study. You will be given a copy of this consent form. You should ask the researcher named above any questions you have about this study at any time.

What is the purpose of this study?

The purpose of the present study is to understand the influence of cultural aspects on body dissatisfaction, body satisfaction, and self-esteem, as self-reported by Black and Latina women, who are currently enrolled in college.

Participants Initials _____

You are being asked to participate in this study because you self-identify as female, Black or Latina and you are currently enrolled in college.

Are there any reasons why you should not be in this study?

You should not be in this study if you self-identify as male, you are not ethnically Black or Latina by birth, and/or you are not currently enrolled in college

How many people will take part in this study?

If you decide to participate in the study, you will be one of approximately twenty participants if you complete the qualitative interview and forty-three if you complete the online survey.

How long will your part in the study last?

Your participation should last no more than one hour for the interview. Your participation should last no more than fifteen minutes for the online survey.

What will happen if you take part in the study?

You will be asked to engage in an interview, either face-to-face or virtual that will ask you about: (1) your culture; (2) your body satisfaction; (3) your self-esteem; (4) the influence of culture on your body satisfaction; (5) the influence of your social networks on your body satisfaction; (6) weight and body satisfaction. The interview will be video recorded.

You will be also asked to complete two measures that will ask you about: (1) satisfaction with areas of your body; (2) your self-esteem and (3) some basic information about yourself.

You have the right to forgo answering any question for any reason, but it is requested that if you choose to answer a question, you answer it as truthfully as possible.

What are the possible benefits from being in this study?

Research is designed to benefit society by gaining new knowledge. You may not benefit directly from being in this research study. Your participation in this study will help to guide future research.

What are the possible risks or discomforts involved from being in this study?

It is believed that this study does not present any risks beyond those encountered in everyday life. However, it is possible that you may feel some discomfort or distress due to the sensitive and personal nature of some of the questions that are being asked in this study. If you are feeling distressed, you should make an appointment with counseling and psychological services at your

Participants Initials _____

college or university. There may be uncommon or previously unknown risks. You should report these risks to the principal investigator. A listing of low-cost psychological resources will be provided.

How will your privacy be protected?

Participants will not be identified by name in any paper or publication associated with this study. The names of participants will not be associated with any of the interview or survey data provided. Thus, the participant's data is anonymous. The principal investigator, research assistants, and the faculty advisor will be the only people who will have access to your responses. All participant data will receive secondary encryption.

Will it cost you anything to be in this study? Will you receive anything for being in this study?

It will not cost you anything to be in this study. You will not receive any compensation for being in this study.

What happens if you want to end the study early?

You may choose to not participate in the study or to stop participating in the study before it is over at any time. This will not affect your class standing or grades in any way. You will not be offered or receive any special consideration if you take part in this research.

What if you have questions about this study?

You have the right to ask and have answered any questions that you may have about this research. If you have questions or concerns, you should contact the principal investigator or the faculty advisor using the contact information provided at the beginning of this consent form.

What if you have questions about your rights as a research participant?

All research on human volunteers is reviewed by a committee that works to protect your rights and welfare. If you have questions or concerns about your rights as a research subject, you may contact Dr. Vicky Morgan, Chair of the Institutional Review Board at the College of Saint Mary, (Tel. 402.399.2675).

****PLEASE PRINT A COPY OF THIS FORM FOR YOUR RECORDS****

Participants Initials _____

Participant's Agreement:

I have read the information provided above. I know that I can ask questions prior to and after signing this form. I certify that I am at least 18 years of age. I voluntarily agree to participate in this research study.

Name

Date

Principal Investigator Certification Clause:

My signature certifies that all the elements of informed consent described on this consent form have been explained fully to the participant. In my judgment, the participant possesses the legal capacity to give informed consent to participate in this research and is voluntarily and knowingly giving informed consent to participate.

Name

Date

Phone

Although the Principal Investigator does not anticipate that you will face any distress as a result of participating in this research, if you happen to face any distress, here are some low cost therapy services around the Austin metro area:

Plumeria Counseling
2501 W. William Cannon Drive
Building 6, Ste. A
Austin, TX 78745
512.344.9181
info@plumeriacc.com

Samaritan Center for Counseling
8956 Research Blvd.
Bldg. 2
Austin, TX 78758
512.451.7337
Samaritan-center.org

Waterloo Counseling Center
314 E. Highland Mall Blvd.
Ste. 301
Austin, TX 78752
512.444.9922
waterloocounseling.org

Additional help can be found by dialing 2-1-1 on your phone and asking for mental health referrals.

Note: The Principal Investigator does not endorse any of these agencies as she is neither employed nor affiliated with any of these agencies.

Appendix D

IRB Approval



November 22, 2017

Dear Ms. Williams,

Congratulations! The Institutional Review Board at College of Saint Mary has granted approval of your study titled *My Culture is My Identity: Understanding Cultural Aspects that Permeate Ethnic Minorities' Feelings Regarding Their Bodies*.

Your CSM research approval number is **CSM 1723**. It is important that you include this research number on all correspondence regarding your study. Approval for your study is effective through December 31, 2018. If your research extends beyond that date, please submit a "Change of Protocol/Extension" form which can be found in Appendix B at the end of the College of Saint Mary Application Guidelines posted on the IRB Community site.

Please submit a closing the study form (Appendix C of the IRB Guidebook) when you have completed your study.

Good luck with your research! If you have any questions or I can assist in any way, please feel free to contact me.

Sincerely,

Vicky Morgan

Dr. Vicky Morgan
Director of Teaching and Learning Center
Chair, Institutional Review Board * irb@csm.edu

Appendix E

Demographic Data

- Age: _____ years old
- How many semesters of college education have you completed: _____ semesters
- What is your current gender classification? _____
- What was your biological sex at birth? _____
- What is your sexual orientation/how do you sexually identify? _____
- How do you ethnically identify? _____
- Think about the three to five people that you consider to be your close friends. Please indicate the race/ethnicity of your close friends. _____
 - Is the race/ethnicity of your close friends the same or different than your race/ethnicity? _____
- Think about the individuals that you have engaged in a romantic relationship with since the age of 18. Please indicate the race/ethnicity of the majority of your romantic relationship partners. _____
 - Is the race/ethnicity of your romantic relationship partners the same or different than your race/ethnicity? _____

Use this 1 to 7 scale to indicate how much you agree or disagree with the following statement:

1	2	3	4	5	6	7
Strongly Disagree	Mostly Disagree	Somewhat Disagree	Neither Agree Nor Disagree	Somewhat Agree	Mostly Agree	Strongly Agree

- I have a strong sense of belonging and attachment to my ethnic group.

Appendix F

Multidimensional Body-Self Relations Questionnaire-Appearance Scales (MBSRQ-AS), Body
Areas Satisfaction Subscale (BASS)

Use this 1 to 5 scale to indicate how dissatisfied or satisfied you are with each of the following areas or aspects of your body:

1	2	3	4	5
Definitely Dissatisfied	Mostly Dissatisfied	Neither Satisfied Nor Dissatisfied	Mostly Satisfied	Definitely Satisfied

- _____ 1. Face (facial features, complexion)
- _____ 2. Hair (color, thickness, texture)
- _____ 3. Lower torso (buttocks, hips, thighs, legs)
- _____ 4. Mid torso (waist, stomach)
- _____ 5. Upper torso (chest or breast, shoulders, arms)
- _____ 6. Muscle tone
- _____ 7. Weight
- _____ 8. Height
- _____ 9. Overall appearance

Appendix G

Rosenberg Self-Esteem Scale (RSES)

Circle one response for each of the following ten items.

	Strongly Agree	Agree	Disagree	Strongly Disagree
1. I feel that I am a person of worth, at least on an equal basis with others.	1	2	3	4
2. I feel that I have a number of good qualities.	1	2	3	4
3. All in all, I am inclined to feel that I am a failure.*	1	2	3	4
4. I am able to do things as well as most other people.	1	2	3	4
5. I feel I do not have much to be proud of.*	1	2	3	4
6. I take a positive attitude toward myself.	1	2	3	4
7. On the whole, I am satisfied with myself.	1	2	3	4
8. I wish I could have more respect for myself.*	1	2	3	4
9. I certainly feel useless at times.*	1	2	3	4
10. At times I think I am no good at all.*	1	2	3	4

***Items marked with an asterisk are reversed scored.**

Appendix H

Unstructured Interview Guide Questions

- 1) Talk to me about yourself, your family of origin and your cultural background.
- 2) Growing up, what messages did you receive from members of your immediate and extended family about your body?
- 3) How were the messages that you received from your family the same or different than the messages being presented in mainstream society?
- 4) Regarding appearance, what aspects of your appearance influence your self-esteem in a positive way and what aspects of your appearance lower your self-esteem in a negative way? Why?
- 5) In your culture, is being thin important? Why or why not? How have your family, peers, and your relationship partners emphasized or deemphasized thinness?
- 6) Do you believe that having a stronger identification with your culture makes you more likely to be satisfied with your body? Why or why not?

Appendix I

Confidentiality Agreement for Undergraduate Research Assistants

RESEARCH ASSISTANT CONFIDENTIALITY AGREEMENT
COLLEGE OF SAINT MARY
My Culture is My Identity: Understanding Cultural Aspects that Permeate Ethnic
Minorities Feelings Regarding Their Bodies

I, _____ [name of research assistant], agree to assist the primary investigator with this study by _____ [list research tasks]. I agree to maintain full confidentiality when performing these tasks.

Specifically, I agree to:

1. keep all research information shared with me confidential by not discussing or sharing the information in any form or format (e.g., recordings, transcripts, surveys) with anyone other than the primary investigator;
2. hold in strictest confidence the identification of any individual that may be revealed during the course of performing the research tasks;
3. not make copies of any raw data in any form or format (e.g., recordings, transcripts, surveys), unless specifically requested to do so by the primary investigator;
4. keep all raw data that contains identifying information in any form or format (e.g., recordings, transcripts, surveys) secure while it is in my possession. This includes:
 - keeping all digitized raw data in computer password-protected files and other raw data on a double encrypted flash drive;
 - closing any computer programs and documents of the raw data when temporarily away from the computer;
 - permanently deleting any e-mail communication containing the data; and
 - using closed headphones if transcribing recordings;
5. give, all raw data in any form or format (e.g., recordings, transcripts, surveys) to the primary investigator when I have completed the research tasks;
6. destroy all research information in any form or format that is not returnable to the primary investigator (e.g., information stored on my computer hard drive) upon completion of the research tasks.

Provide the following contact information for research assistant:

Printed name of research assistant _____

Address: _____

Telephone number: _____

Signature of research assistant _____

Date _____

Printed name of primary investigator _____

Signature of primary investigator _____

Date _____

