

BODY IMAGE IN PREADOLESCENT GIRLS

by

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## **Declaration**

I hereby declare that “*Body Image in Preadolescent Girls*” is my own work and that all the sources I have used or quoted have been indicated and acknowledged by means of complete references.

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## **Abstract**

People's psychological experience of their body can impact on their lives. Some theories hold that the media creates an impossible physical ideal. The demands of trying to achieve this ideal may lead to normative discontent and psychopathology. Girls are experiencing this pressure at a younger age and the onset of puberty can exacerbate this experience. The present study used case studies and thematic content analysis to explore the issue of body image in twelve preadolescent girls. The research found that hair and the ability of the body to *do* need to be encompassed in the definition of body image. While the participants appeared to have a positive perception of their body, there also appeared to be negative feelings. This suggested that the participants experienced confusion and ambiguous feelings about their body.

## **Key Words**

Body Image, preadolescence, eating disorders, self, identity, Gestalt.

# Contents

<b><u>Chapter 1: Introduction</u></b> -----	<b>pg.7</b>
1. Introduction -----	pg. 7
2. Problems and Rationale for Study -----	pg. 9
3. Research Approach -----	pg. 16
4. Research Methodology -----	pg. 17
5. Ethical Aspects -----	pg. 20
6. Definitions and Main Concepts -----	pg. 23
7. Chapter Outline -----	pg. 24
8. Conclusion -----	pg. 26
<b><u>Chapter 2: Literature Review</u></b> -----	<b>pg. 27</b>
1. Introduction -----	pg. 27
2. An Introduction to Body Image -----	pg. 28
3. Cultural Ideology on Body Image -----	pg. 30
4. The Developmental Theory of Erikson -----	pg. 38
5. Gestalt Psychology, Identity and the Self -----	pg. 43
6. Conclusion -----	pg. 47
<b><u>Chapter 3: Research and Methodology</u></b> -----	<b>pg. 49</b>
1. Introduction -----	pg. 49
2. Research Design -----	pg. 49
3. Data Collection and Analysis -----	pg. 51
4. Data Collection Methods -----	pg. 53
5. Findings -----	pg. 55
6. Conclusion -----	pg. 79

**Chapter 4: Conclusions and Recommendations -- pg. 81**

1. Introduction -----	pg. 81
2. Aims and Goals Revisited -----	pg. 81
3. Summary of Findings -----	pg. 82
4. Recommendations and Suggested areas for Further Research -----	pg. 85
5. Limitations -----	pg. 86
6. Conclusion -----	pg. 87

**Bibliography ----- pg. 89****Appendix I: Information Sheet and Consent****Form----- pg. 98****Appendix II: Question List ----- pg.101**

# **Chapter 1: Introduction**

## **1. Introduction**

*“The body has come to be recognized as a contested terrain on which struggles over control and resistance are fought out in contemporary societies” (Hancock, Hughes, Jagger, Paterson, Russel, Tulle-Winton & Tyler, 2000: 1).*

The above quote captures the essence of the following research. It aims to explore the battles that are fought through the body and how these are understood and experienced by preadolescent girls.

For many years, there has been an accepted belief of the dualism of the mind and the body. In this Western, philosophical discourse, the mind controls the body, which is merely a ‘prison’ for the mind- the true essence of the self. There has been a critique of this belief which has led to a reassessment of the body (Cranny-Francis, 1995: 1-8). This critique is common in feminist, class and race theory, because it is displaced onto dualisms of gender, class and race and gives it value. This results in a concept of a ‘normal’ body, which is masculine, Anglo and middle class. Anything else is judged as inferior, or ‘not normal’ (Cranny-Francis, 1995: 1-8).

As a result of this, the body became alien, ‘not me’, not self. The idea that nature is limiting started to be challenged, the body became malleable with the use of organ transplants, surgery, diet and exercise. The body came to reflect people’s life style choices and the way they wished to be seen by the world as well as who they chose to identify with (Hancock *et al.*, 2000: 1-7). However, Hancock *et al* (2000: 54) goes on to say “women in general do not have the same capacities to claim ownership of their identities as men, given that these are typically more of a reflection of male fantasies and expectations than an

expression of their own sense of self". Therefore, women's bodies reflect patriarchal desires and norms. However, this research should not suggest that only women are negatively affected by patriarchy, men are also victims, their bodies and behaviours are also influenced (Holliday & Hassard: 2001). However, it is not within the scope of this research to examine men's relationship with their bodies.

Body image comprises a person's feelings and attitudes towards their own body (Uys & Wassenaar, 1996:236). However, feelings and attitudes are affected by their external environment. In Western society (and increasingly other societies) in order for a woman to feel attractive, or merely normal, her appearance needs to conform to certain prescribed models. The ideal is often modelled in the media and the instruments of change (surgery, hair dyes, and clothes) are constantly flaunted, predominantly in advertising. Hancock *et al*, (2000:49) claim that the aim of advertising is to make people feel inadequate and that the only sure way to beauty/perfection/happiness is with their product. Advertising also targets younger children. The external has begun to be the only representation of the internal. If you are beautiful then the inference is that you will also be happy and successful.

This ideology was challenged by feminists circa 1970; they strove to make their identities more than a male fantasy. However, according to Dowd (2006: 64) the trend of feminism has passed and most women have moved back to a time when women overtly displayed their femininity (for example, hair flicking, batting eyelashes and the like) to attract men and show their worth. She also argues (2006: 68) that women who seek equality are often viewed by other people as "self narcissists and objects of rejection rather than affection". Dowd has a particularly negative view of women and tends to over generalise, however, her point is that feminism is not seen as being 'cool', and this has led women to revert back to some of the behaviours of their pre-feminism days. If this is the case, then this is affecting children's identities, as well as their feelings and

attitudes about their bodies. This issue will be further explored in the literature review and the research.

Young girls learn about the high value of appearance and they are increasingly internalising this. One example is the increasing number of teenagers who undergo plastic surgery (Twiggs, 2004: 55). Another example is that eating disorders affect children younger than ever before (Entwisle, 2006: 76). It is unclear where exactly this pressure on young girls comes from. Some studies suggest there is a relationship between the media and body dissatisfaction (Tiggemann, 2006). There also seems to be the influence of genetics and family history (Ross, 2003). The research also aims to explore the origin and nature of messages young girls receive about women and women's bodies.

A study on body image has shown that there is a strong link between negative body image and negative affect (for example, depression and anxiety) and, in fact, negative body image may be a predictor of low self esteem (Davidson & McCabe, 2006). The study done on adolescents by Davidson and McCabe (2006) showed that girls have a more dysfunctional body image than boys and that low self worth is strongly associated with negative evaluations by others. The above study highlights the importance of exploring and understanding body image because of the effect it has on other areas of people's lives. This particular study was done on adolescents but the following study investigates, in part, whether body image is experienced in a similar way in younger girls.

## **2. Problem and Rationale for Study**

The broad definition of body image used for this research is "the body as a psychological experience and a focus on the individual's feelings and attitudes towards his own body" (Uys & Wassenaar, 1996:236). However Morrison, Kalin and Morrison (2004: 572) suggest that there are two dimensions to body image. The first dimension is people's thoughts and beliefs about their body, and

the second is the behaviours that people display in order to manage or improve the way they look

Body image starts at birth, and is seemingly positive until adolescence when the body changes and there is a crisis in body image. A study done by O'Dea and Abraham (1999) suggests that there is a link between menarche and disordered eating. Puberty is viewed as more negative for girls than for boys, because changes, such as menstruation and an increase in body fat and body hair are unwelcome, while for boys a deepening of the voice and an increase in muscle is generally desirable (Davidson & McCabe, 2006). O'Dea and Abraham (1999) suggest that the reason eating disorders are most likely to start at this age is because puberty is often a time of low self-esteem and distress with body shape and weight. In order to improve their self-esteem, girls often try to change their physical appearance. At this stage peer relationships become more complicated and intimate; there is more concern over what others think. Children's appearance impacts on their social relationships. More attractive people appear to have more positive social interactions. It is not surprising then that 'social conformity peaks in early adolescence' (Davidson & McCabe, 2006). The desire for social conformity also seems to give some clarity to the increase in eating disorders in younger girls in the last ten to fifteen years (Entwisle, 2006:76).

Middle childhood (the ages between six and twelve years) is a period where children spend more time with peers, they have entered school, and hierarchies and rules develop (Keenan, 2002:204-205). In this developmental stage they start to obtain a multifaceted view of emotions and at the age of nine, children will understand that people can hold two emotions, but by the age of eleven they recognize that one event can cause simultaneously conflicting emotions (Keenan, 2002: 179). By middle childhood, children have already gained a high level of knowledge about sex and gender stereotypes but tend to be quite rigid. However, as they get older their growth of knowledge levels off, but they become more flexible and do not have such rigid stereotypes (Miller, Tranter & Ruble, 2006: 299- 306). When children get to puberty their body changes, and as

shown above, this can create turmoil, especially for girls. However, in middle childhood there are no dramatic physical changes. They continue to grow, but a growth spurt occurs, for both sexes, only in early adolescence (Keenan, 2002: 70). Developmental literature seldom discusses physical development at this age, and therefore it seems as though it is unlikely to create distress or, in fact, any particular emotion. This is understandable, since their bodies have looked mostly the same (albeit larger in size/bigger) for many years and it is mostly reliable and constant unlike during puberty where their bodies become unpredictable and maybe even alien. This is typical development; however, body image is becoming a greater area of concern for children of this age.

Entwisle (2006: 76) states that food obsessions are taking children away from typical childhood activities. She also refers to a British study in which a substantial number of children between five and eight years old wish they were thinner. Many children also display disordered eating without having full-blown eating disorders. What is influencing this shift? In her article, Entwisle (2006: 78) suggests that part of the reason is that young girls dress in a sexually alluring way is to mimic the style of their mothers.

Parental messages play an important role. The social learning theory argues that children watch and imitate the behaviour of same-sex models, the most powerful being the child's same-sex parent (Smith, Cowie & Blades, 1998: 158). Many mothers are on a diet themselves and often one or both parents say derogatory things about their daughters' bodies (Dugid, 2003: 70). Ross (2003) states that women who have eating disorders often had mothers who experienced problems with food and body image and that, in fact, eating disorders can be carried down the maternal line for many generations. As social learning theory states that women are most likely to learn about being a woman from their mothers. If a woman has low self esteem, constantly weighs herself, and puts down her own body, her daughter is likely to take on those behaviours.

Dowd (2006: 68) says that women have moved from fighting objectification to seeking it, and this is most apparent in female celebrities. Celebrities are known for what they look like, not, for example, what movie they acted in or the charities they get involved in. Popular magazines appear to laud celebrities such as Lindsay Lohan and Nicole Ritchie as they always look beautiful, glamorous and very thin. The magazines place more emphasis on their clothes and their weight than on their movies or television shows. Celebrities provide another model for girls to watch and imitate, to learn about womanhood. This contradicts the feminist movement and, in fact, undermines their ideas. Teenagers are considered among the heaviest consumers of mass media especially women's beauty and fashion magazines and so it seems likely that this is where young girls find their role models (Thomsen, Weber & Brown, 2002: 3). Uys and Wassenaar (1996: 240) state that there are two faulty assumptions inherent in the search for the perfect body. These are that the body is infinitely malleable; and that reward awaits the person who gets it. Celebrities certainly encourage this idea. Their bodies change for the role of a movie or just for fashion's sake and they are rewarded for their efforts with fame and wealth. Therefore, young girls receive this message, and aim for this ideal body in the belief that they will then be successful, that is rich, famous and the envy of all. When they cannot achieve this ideal, then girls are more likely to develop "eating disordered cognitions" which may eventually lead to eating disordered behaviour (Thomsen, Weber & Brown, 2002: 4). The studies done by Morrison, Kalin and Morrison (2004) and Thomsen, Weber and Brown (2002) find strong support for this idea. It seems that young girls' ways of being are limited to their observation of their mothers and what they see on television (Entwisle, 2006: 78). If eating disorders and a negative body image are seen in younger children and in greater quantities, then studies, such as the one being proposed, are not only telling us about eating disorders, body image or children, but are also teaching us about the social condition of women.

Despite the literature and some theorist's strong opinions about the impact of media on children, a 2006 study done by Tiggemann on the role of media

exposure on adolescent girls' body image, show that there appears to be a relationship, albeit unclear. She says that media images and body image occur together but there is no evidence that one precedes or affects the other. She states that the connection is unclear on the development of body image and that the type of media as well as the developmental age of the child may have a different effect. Another study by McCabe, Ricciardelli, Mellor and Ball (2005) found that indigenous Australian adolescents engaged in more strategies to lose weight than non-indigenous adolescents, despite fewer perceived media messages about losing weight. This discrepancy needs to be further explored, and if the influence of the media does not cause negative body image, then there needs to be further investigation as to where body dissatisfaction starts or some exploration as to what other factors might contribute to it.

There is a lot of literature (for example, Ackard, Kearney-Cooke & Peterson, 2000; Chapman, 1998; Kieren, Abate, Makar & Ceinwen, 1997; Martinez, 1998; Salter, 1997; Schlebusch, Pillay & Louw, 1992) on the topic of body image; however, these tend to be focused on altered body image, eating disorders or the media. As a result thereof, there appears to be a deficiency. The literature is not conclusive, and is often contradictory and there may be other aspects that have not been considered outside of the confines of that study. The majority of these studies are done in America and Canada. However, South Africa has its own unique culture and history. There is limited research on this topic in South Africa and it tends to be focused on black women's body image and racial differences (for example, Grange, Telch, & Tibbs, 1998; Senakal, Steyn & Mashego, 2001; Szabo, 1999; Caradas, Lambert & Charlton, 2001). Therefore, an explorative study on the issue of body image will positively contribute to the literature, especially in the South African context.

Fouché (2002c: 96) says a research problem is 'the "need for the study" or the "source of the problem".' For this study the research problem can be formulated as preadolescent girls have a negative body image that is affected by external factors such as the media and the girls' family. Therefore, this study will explore

girls' body image, the source and manner in which they learned about their bodies, and the effects of the messages they received: how they experience their body image.

The following South African experts were consulted for their opinion on the topic:

- Dr. Graham Alexander was consulted with regard to eating disorders and preadolescent girls. He has been the Director of the Eating Disorders Unit at Crescent Clinic in Cape Town for 13 years and is a clinical psychologist. He stated that the topic is important apropos understanding and treating eating disorders.
- Ms. Janine Clayton was consulted about gender issues and body image with regard to sexuality and gender construction. She is a clinical psychologist who works with the Triangle Project in Cape Town, which is aimed at gay, lesbian and transgender people. She said that body image is important in the construction of gender and sexuality.

### 2.1 Research Question

From the problem formulation the research question can be formulated as follows: How do preadolescent girls experience their body image. The research question is defined by Fouché (2002c: 95) as what exactly the researcher wants to find out by conducting the study. For the purposes of this study it encompasses preadolescent girls' attitudes and feelings towards their body as well as how they take care of and manipulate their body.

### 2.2 Goals and Objectives

In order to answer the research question, clear goals and objectives are required.

In Fouché (2002a: 107) a goal is defined as the main target, the aspiration to which the actions are directed. In this research, the goal was to explore body

image in preadolescent girls in order to determine their attitudes and feelings about their body.

The objectives are the concrete steps that need to be taken in order to reach the goal (2002a: 107). The objectives that follow from this were:

- To explore literature on the female body and the construction of body image within society.
- To explore developmental theory on preadolescent girls based primarily on Erikson's developmental stages and to gain an understanding of self and identity through Gestalt theory.
- To collect data through semi- structured interviews with a sample of preadolescent girls.
- To transcribe the interviews and analyze the data by means of a framework applicable for the analysis of qualitative data.
- To verify and interpret the research findings and describe it according to existing literature.
- To make recommendations for future research for gender and body image researchers as well as therapists who may be working with young girls and eating disorders.

### 2.3 Paradigm

A paradigm can be defined, as in Fouché and Delpont (2002a:266), as the “fundamental model or frame of reference [used] to organise our observations and reasoning... [A] world view, a basic set of beliefs or assumptions that guide their enquiries”. The researcher uses the Gestalt paradigm in this study.

Gestalt therapy is a holistic, process-oriented, dialogical, phenomenological, existential and field approach to people with a focus on contact, awareness, and personal responsiveness and responsibility. The uniqueness of each person is of utmost importance. The person is viewed as an integrated whole with the potential to grow and the capacity of mature self-expression (Kirchner, 2000).

Fundamental to these beliefs is the field. This refers to the fact that everything is connected to everything else. People affect and are affected by everything around them. Therefore to fully understand a person, one needs to understand their internal and external environment (Harris, 2005).

Consequently, for this research, the view is that each of the participants is an individual who is a product of their field, which includes her family and school environment, her thoughts, and her memories. An assumption that will guide the study is that each of those factors affects the participant at the time of the interview.

### **3. Research Approach**

#### **3.1 Qualitative Research**

According to Fouché and Delport (2002b:78) there are two types of research, qualitative and quantitative. For the purpose of this study, qualitative research was used.

Fouché and Delport (2002b:78) define qualitative research as research that draws out the participant's meaning, experience, or perceptions and it involves identifying the participant's beliefs and values that underlie the subject being studied. The goal is to understand rather than explain and to observe rather than to measure. Qualitative research attempts to understand reality from the position of an insider. Lammers and Badia (2005: 325) similarly define it but add that it is "non-experimental research that describes and interprets observations but does not seek to quantify observations numerically". Another source says that it involves methods of data collection and analysis that are non-quantitative and that it focuses on "quality", which refers to the essence of something with the researcher as the research instrument (Qualitative Social Science..., 2006).

Therefore, for the purposes of this study, qualitative research was undertaken in order to research, observe and explore body image in preadolescent girls.

### 3.2 Type of Research

Research can be basic or applied. For the purpose of this study basic research was utilized. Basic research is defined as “research engaged in for the purpose of increasing knowledge of fundamental processes; may have no immediate goals or applications” (Lammers & Badia, 2005: 321). Therefore, this research was about exploration, as its aim is to increase knowledge about girls’ perception of their bodies. The researcher utilized exploratory research to better understand the research participants’ experiences. Exploratory research is “conducted to gain insight into a situation, phenomenon, community or individual” (Fouché, 2002a: 109). For this study the phenomenon that was explored is body image.

### 3.3 Descriptive Research

Fouché (2002a: 109) explains descriptive research as research that describes the phenomenon being studied, which leads to a more rigorous examination and deeper understanding. This research used this strategy to describe the phenomenon of body image as experienced by the participants

This research therefore had a qualitative, basic descriptive design.

## **4. Research Methodology**

### 4.1 Research Procedure

During the study, the following procedures were followed:

- The introduction in Chapter 1 included important concepts, research approach and ethical concepts.
- A literature review was undertaken in Chapter 2 where the theories and ideas concerning body image and preadolescence were considered..
- Crawford Preparatory School was approached and the research was presented to the vice- principal. Permission was requested and received from the school to conduct the research there.

- Children were identified by the teachers in order to fit the sample and their parents were sent an information sheet and consent form. The completed consent forms were returned to the researcher (see Appendix I, page 101 for a copy of the consent form).
- The researcher phoned the parents who consented to the study. Questions and concerns were discussed and the parents were asked if their daughter had reached menarche.
- The researcher met with the children individually at school and conducted the semi-structured interviews (see Appendix II, page 101 for the question list). The children were asked to reflect on the process.
- Tape recordings and personal notes were taken of the interviews. The interviews were transcribed and the transcribed interviews were analysed for themes in Chapter 3.
- The themes were discussed and a literature control was conducted in Chapter 3.
- The methodology was further elaborated on in Chapter 3.
- The recommendations and implications of the research, as well as suggested areas for further research were considered and discussed in Chapter 4.

#### 4.2 Research Strategy

Fouché (2002b: 271-2) defines a research strategy as “all the decisions a researcher makes in planning the study... that determine the researcher’s choice and actions.” The strategy for this research was case studies.

A case study is defined by Adler and Clark (2003:190) as one or several detailed data sources that lead to a ‘multi-faceted’ understanding of the phenomenon being researched; in this case body image. This strategy can be further classified into three types of case studies, but the one that is most applicable for this research is collective case studies, whereby numerous cases are studied in order to understand a social issue or population. The individual case is used, not for its own interest, but rather to expand or corroborate theory on the phenomenon.

(Fouché, 2002b: 276). For this twelve cases were studied in order to elaborate on body image theory.

#### 4.3 Data Gathering (universe, population, sample, demarcation of sample)

Universe is “all potential subjects who possess the attributes in which the researcher is interested in” (Strydom & Venter, 2002: 198). For the purpose of this study, the universe can be described as all South African preadolescent girls in Gauteng aged 10-12 years.

A population is “a term that sets boundaries on the study units. It refers to individuals in the universe who possess specific characteristics (Strydom & Venter, 2002: 198)”. In this study the population was South African girls aged 10-12 from a variety of schools in Pretoria and Johannesburg.

A sample “comprises the elements of the population considered for actual inclusion in the study” (Strydom & Venter, 2002: 199). For this study, the researcher found ten girls, 10-12 years old from a variety of cultures and backgrounds.

A purposive sampling method will be utilized to select a sample of preadolescents from the population. “Purposive sampling occurs when the type of sample is based entirely on the judgement of the researcher, in that a sample is composed of elements that contain the most characteristic, representative or typical attributes of the population” (Strydom & Venter, 2002: 207). Strydom and Venter (2002: 208) define snowballing as a sampling technique whereby one participant gives you the information to other potential participants. The researcher will therefore approach a nearby school and request their assistance in identifying participants. All of these people will be requested to provide names of parents who might be interested in letting their child participate. These two sampling methods were chosen because they were the most suitable and practical for this kind of research, especially with the small number of participants desired for this study.

#### 4.4 Data Analysis

Content analysis was used, Adler and Clark (2003: 394-5) describe it as the systematic study of some form of communication. They further elaborate that this is an unobtrusive and flexible method of data collection. For the proposed study, the researcher will systematically analyse the interviews with the participants. The unit of analysis will be themes that can be picked up from their communication with the researcher. Adler and Clark (2003:386) state that content analyzers should be asking the questions “Who says what, to whom, why, how and with what effect?” The researcher was asking these questions in terms of body image. Who or what teaches these girls about their body? What messages do they give? And ultimately, what do the girls say to themselves?

### **5. Ethical Aspects**

Ethics is defined by Adler and Clark (2003:41) as an “abstract set of standards and principles that are used to determine appropriate and acceptable social conduct”. Strydom (2002: 62) states it is “a set of moral principles that are suggested by a an individual or group, are subsequently widely accepted, and offer rules and behavioural expectations about the most correct conduct towards experimental subjects and respondents, employers, sponsors, other researchers, assistants and students.” For researchers, these guidelines are there to protect the participants and ensure that no physical, psychological or emotional damage is caused from the research. In light of the above definition, the following ethical aspects were considered:

#### 5.1 Informed Consent

Informed consent means a person can be said to have given consent to participate in the study based upon knowing and understanding the facts, that is, the study’s purpose, how it will be analysed and the availability of the results. The participants need to be in possession of their reasoning faculties, not be

mentally retarded or mentally ill and without any impairment of judgment at the time of consenting and therefore, they agree to participate voluntarily (Adler & Clark, 2003: 52). In this research, informed consent will be obtained from the caregivers or parents, and verbal consent was obtained from the participants before interviewing them. The nature and purpose of the study were explained to them, as well as the fact that they could withdraw from the study at any time without any negative consequences. Feedback was given to all the participants and if they requested it, a copy of the research was given to them.

### 5.2 Confidentiality

Confidentiality refers to the ethical principle whereby information (such as the participants' names or the responses to questions) is accessible only to those who have been given permission to have access. This is based in the researcher's ability to protect the data (Adler & Clark, 2003: 55). For this research, that means that no information given by the participants was divulged without their express permission. Only the researcher knows their full names. In the interview only their first names were used, and in the research report a pseudonym was used. The researcher acknowledges that this topic may be sensitive for some of the girls involved; therefore confidentiality was of utmost importance in the research report too.

A typist was hired to transcribe the interviews from the Dictaphone recordings and confidentiality was guaranteed by making this person aware of the importance thereof and making her sign a confidentiality agreement. As the real name of the participants was used in the recordings, the researcher used someone who is very unlikely to know any of the participants. Most of the research was done at Pretoria, and the person who did the transcribing, lived in Johannesburg. Surnames were not used in the interviews, only first names. The transcribed interviews and tapes are to be kept in a locked cupboard for the duration of a year and will then be destroyed by the researcher. The transcribed interviews were utilized as case studies for analysis.

### 5.3 Harm to Experimental Subjects

The researcher has the responsibility to protect the participants from any possible physical and emotional damage. The participants and their parents were informed about the potential impact of the research. This offered children and their parents the opportunity to withdraw from the study, if they wished to (Strydom 2002: 64-65). In this study, the researcher was not aware of any physical or emotional harm that was likely to be done to the participants. However, the researcher used her skills as a counsellor and a training play therapist to address the issues sensitively and to debrief the participants. If necessary, the participants were referred to a psychologist.

## **6. Definitions and Main Concepts**

The following section includes the definitions of the main concepts present in the research:

### 6.1 Body Image

A definition for body image is elusive. There is a lot of literature on body image, but it is very rarely defined. When it is defined, it is often vague with important aspects omitted. Braun (2000: 511) suggests that this is because the body is seen as obvious and therefore not in need of definition. It is perceived as 'self-evident' (Braun, 2000:514). Salter (1997: 2) defines it as "how a person sees themselves, and how they are seen by others." However, Dolan and Birtchnell (1997: 5) argue that body image is not only a visual concept, but includes feelings and attitudes of body parts and as a whole. Garner (1997) states that it influences our behaviour, self-esteem and psychopathology.

The definition from Uys and Wassenaar (1996:236) seems to encompass all the different facets of body image. For the purpose of this study, body image was broadly defined as "the body as a psychological experience and a focus on the

individual's feelings and attitudes towards his own body." This study focused on the participants' psychological experience of their own bodies.

### 6.2 Preadolescence

Catherwood (2004: 130) defines adolescence as "the transition time between childhood and adulthood". The literature does not give specific ages, however there does seem to be a consensus that preadolescence starts with the onset of puberty. For girls this most notably is marked by their menarche which occurs at approximately 12 years of age (Catherwood 2004: 130).

The term preadolescence, in this study, then refers to the approximate ages 10 to 12 years old. This spans Erikson's stages of industry versus inferiority and identity versus role confusion (Hook et al, 2002: 277-284).

### 6.3 Self and Identity

Both of these terms are often employed in the research, and their meanings and uses are similar.

The self has been debated throughout psychology, philosophy and sociology for hundreds of years. However, for the purpose of this research, it can be generally defined as the essential qualities that make a person distinct from all others. It is an individual person from the perspective of that person; ie people's conception of themselves (Wikipedia, 2007).

Gestalt psychology states that the self can only be understood in relation to that which is not self. This means that ideas, information and material are assimilated into the self if they are perceived as nourishing or fulfilling a need. Therefore the self is dynamic and constantly changing (Yontef, sa).

Erikson described identity as "a subjective sense as well as an observable quality of personal sameness and continuity, paired with some belief in the sameness and continuity of some shared world image" (Erikson, 1970 as cited in Van

Wagner, 2007). It is about people having certain qualities or characteristics that separate them from people who are dissimilar. Identity is determined, to a large degree, by the behaviours, ideas, and clothes that people take on (Woodward, 1997: 12).

Self and identity are alike in that they are both about sameness and difference. However, the self is internal whereas identity is external. The self, or external, refers to the behaviour, beliefs or dress that identifies a person. It would appear as though they are connected in that the external identity represents the internal self. However, as discussed in Chapter 2, that is not always so.

## **7. Chapter Outline**

The composition of the thesis will be as follows:

### Chapter 1: Introduction and Methodology

This chapter will give an overview of the study and how it was undertaken. It starts with a general introduction to the idea of body image. It moves on to the rationale for the study. Then it gives an outline of the methodology used in the study and this includes the research approach, research methodology, ethical aspects and definitions of main concepts.

### Chapter 2: Literature Study and Theories

This chapter will include an outline of previous studies and literature on the subject of body image. It has 4 subsections:

- The first one contains a discussion on the definition of body image and discusses the influences on and effects of body image.
- The second subsection discusses the ideology underlying popular cultural beliefs concerning women's bodies. It also explores the literature on body image in South African women

- The third subsection examines the developmental theory of Erikson. It concentrates on his ideas on identity development and how identity changes and develops around puberty.
- The last subsection discusses Gestalt psychology and its beliefs on the self and identity.

### Chapter 3: Findings and Discussion

The third chapter reviews and elaborates on the methodology of the study. It then discusses the findings and compares it with the literature of Chapter 2. The findings are divided into the following subsections:

- The participants' view of themselves, which is further divided into physical attributes, abilities and interests, and personality attributes.
- Identity.
- The ideal self versus the real self.
- Contradictory statements.
- Likes and dislikes.
- Hair.
- Caring for the body, which is also further divided into hygiene and moisturising and beauty treatments.

### Chapter 4: Conclusion and Recommendations

The aims and goals that were first discussed in Chapter 1 are revisited and compared to what was actually achieved. The findings are then summarised and then recommendations and suggested areas for further research follow. The limitations of the study are then considered and it ends with the conclusion.

## **8. Conclusion**

This chapter was an introduction to the ideas and debates surrounding body image. The method of the study was briefly discussed and important concepts were explained. The next chapter will go into more detail on the ideas, debates and literature on body image.

## **Chapter 2: Literature Review**

### **1. Introduction**

*“If we place pornography and the tyranny of slenderness alongside one another, we have two of the most significant obsessions of our culture, and both of them are focused upon a woman’s body” (Kim Chernin as quoted in Lightstone,sa)*

This quote captures the essence of Chapter 2: the societal focus on women’s bodies. This chapter will explore how this obsession develops over the course of women’s lives and is internalized. To understand this, Chapter 2 will first explore the literature on body image. This includes a discussion of the conceptualization and definition of body image and then an examination of the influences of body image on people’s lives.

The second section will concentrate on the cultural influences on body image. The argument will focus on typical Western ideologies and how these affect a multi-cultural society such as South Africa. A discussion on how these ideologies are communicated to women throughout their lives, through mediums such as the media and children’s toys, will follow. This will serve to explain how the ideologies are deeply internalized and may be expressed through eating disorders and normative discontent.

The third section will examine the first five stages of the developmental theory of Erik Erikson. The discussion will be focused on the development of body image and his conception of middle childhood and adolescence. There will be a further examination of puberty and the physical, emotional, psychological factors and of life changes that occur during this time.

This will lead on to a discussion of Gestalt psychology. The Gestalt view of the self is further explained and its relationship with the environment is elaborated upon.

## **2. An Introduction to Body Image**

In this study, body image has been defined as, “the body as a psychological experience and a focus on the individual’s feelings and attitudes towards his own body.” (Uys & Wassenaar, 1996: 236). This section will elaborate on this definition and discuss the different aspects of body image.

Banfield and McCabe (2002: 373) state that body image is a multidimensional construct, but that these dimensions are unstable and inconsistent. This becomes most obvious when researching body image. Depending on the study, it has any number of dimensions included in the definition, for example, perception of body image; attitudes towards the body; fear of fatness, body distortion; preference for thinness (Banfield & McCabe, 2002: 373); satisfaction or dissatisfaction with body image. There are also many ways to measure it, such as figure drawings, questionnaires, and clinical interviews (Uys & Wassenaar, 1996: 236).

These differences indicate that there is no fixed definition or understanding within body image literature, which may lead to the following questions: are all researchers studying a similar concept? Can a researcher then use these findings for her own research? This uncertainty is an aspect that one needs to be aware of when reading about and doing body image research. These inconsistencies can also affect how body image disturbances are viewed and treated (Banfield & McCabe, 2002: 373). The implications arising for this study are therefore that the definition used has been formulated by the researcher, as there seems to be no standard definition. In addition to this, the literature study has limitations, as it is comparing the concept of body image throughout the literature. However, body image has often been differently understood and defined in each study.

Dolan and Birtchnell (1997: 5) define body image as “the accumulated sensory experience of the body organized into the preconscious body schema and postural model... [a] neural representation”. The researcher believes that this definition is limited as it does not include the psychological experience of the body. Lightstone (sa) asserts that body image is the perception, imagination, emotions and physical sensations that people have of and about their bodies. The researcher believes that this definition includes the psychological experience of the body but ignores the effects it has on a person’s life. Garner (1997) defines it as “a loose mental representation of the body’s shape and size”, but does go on to add that it influences a person’s behaviour. This definition is focused on people’s internal perceptions. Morrison, Kalin and Morrison (2004: 572) agree with this view, but add another component. These authors believe it also refers to the way people change or manipulate their body to manage or improve their appearance.

The definition of body image should encompass all of the above definitions. However, for the purpose of this research, the researcher would like to suggest that there is also a relationship between internal experience and external behaviour. People’s internal perceptions, emotions and sensations about their own body will, most likely, manifest itself in the behaviour that they take to manipulate their body. However, this may not necessarily be done to improve the way they look, as suggested by Morrison, Kalin and Morrison (2004: 572) in the previous paragraph, but can also include management and enhancement of health. Researchers appear to have ignored the notion that body image is not only about appearance, but also function. Ideally, body image should be focused around health, strength, fitness and capability which contribute to a general sense of well-being. This understanding is important for body image research because it means that external behaviours can be studied to give insight into the internal experience and includes health as a component, not only aesthetics

Body image is dynamic, it can be affected by the immediate experiences of the individual’s mood and environment (Lighstone, sa) and changes with a person’s age, sex or weight (Garner, 2007). However, it is also affected by the remote experiences

of history, culture and society (Banfield & McCabe, 2002: 374). It can be positively affected by pregnancy, long term relationships, participation in sports (Fox, 1997) or by being a feminist (Garner, 1997:18). It can be negatively affected by having just eaten or tried on clothes. It is dependent on a woman's phase in her menstrual cycle and sexual orientation (for example, homosexual men are more likely to be dissatisfied) (Fox, 1997). Objects, such as clothes, make-up, wheelchairs and catheters, can become part of a person's body image, and a change in appearance or function of the body can also lead to a change in body image (Salter, 1997: 3).

It affects a person's self-esteem, and enjoyment of sex (Ackard, Kearney-Cook & Peterson, 2000: 125). Sexual experiences reciprocally affect body image; good experiences are more likely to lead to a positive body image, and sexual abuse can be devastating on it (Garner, 1997: 18). Psychopathology can also be influenced by body image, for example, depression and eating disorders (Garner, 2007: 17; Markey & Markey, 2005).

To change their appearance people may induce vomiting, smoke, diet (Garner, 1997: 19) and exercise. Therefore, body image seems to have a large impact on many areas of people's experience, Garner, (1997) says that ultimately, it "govern(s) our life". It is for these reasons that it is crucial to study and understand this intangible but important construct. It is also important to understand how cultural ideologies affect body image because ideologies become behaviours and beliefs.

### **3. Cultural Ideology on Body Image**

This section will examine cultural beliefs on women's bodies and how the focus on women's bodies can be a means of oppression. It also explores how ideologies are developed, enforced and communicated to women through the media and other channels. These messages seem to create a culture of discontent for women and may even lead to eating disorders.

There appears to be an ingrained belief that beautiful is better, in everything from clothes, to cars and people. Fox (1997) claims that attractive people have advantages that others do not, for example, they are more likely to be popular, they have a better chance of getting a job and are more likely to get a higher salary. It appears that many people believe that what is beautiful is also good, and this extends to their beliefs of other people. This is evident in fairy tales, where the evil person is almost always ugly, and the heroine is almost always beautiful and good. The underlying belief is that if a person is beautiful he has other virtues such as intelligence and kindness (Fox, 1997). This may contribute to reason that women will go to, sometimes dangerous, lengths to achieve beauty.

Uys and Wassenaar (1996: 236) assert that a people's body image is dependant on the feedback that they receive. There appears to be a cultural phenomenon where everybody buys into the idea that beautiful is better, however, this idea undermines and traps women into certain behaviours.

Social constructionist approaches endeavour to explain the position of the body in society. They reject naturalist's views that social inequality is the result of biological inequality. In the case of women, naturalist's belief that they have frail bodies justifies their oppression. This argument has been used to validate inequalities in gender relations since the eighteenth century (Shilling, 1997: 73-77).

According to social constructionists the terms 'man' and 'woman' are, themselves, culturally specific terms, used to categorize people. This categorization is a means of oppression, because it separates men and women and as often happens with categories, one is made superior and one inferior; in this case men are made superior (Shilling, 1997: 83-84). The domination continues to be promoted through 'facts'. This is created from taking average differences, exaggerating them and making them absolute differences. Men and women are more alike than they are different, but these similarities are often ignored. Shilling (1997: 84) argues that if these differences were so obvious and natural, they would not need to be made evident with, for example, sex-type clothing. The 'norms' are then created by an

undercurrent of expectation and practices which change the body and the behaviour. This tactic is similar for oppression based on race and religion. An example of this is that there is more encouragement for boys to engage in more strenuous physical activities than girls because of their supposed superior strength. This changes boys' bodies to actually become stronger (Shilling, 1997: 83-84).

Greer (1971: 35-37) put forward a convincing argument on one way that women's bodies are culturally created. She describes how women's bones are shaped differently to men through cultural practices. She says that because of the more physically demanding work men do, and the nutrition that sustains that activity, their bones are stronger and more resilient. Women's bodies, however, are constrained by fashion and sex appeal. For many years women wore corsets and, more recently, high heels. These change the development of the bones; changing the angle of the spine and widening the pelvis. The work that is commonly undertaken by women, such as secretarial work affect the posture and hence, the skeleton. This is just one example, but this idea can be extended to other body parts and even behaviours.

The media is often held responsible for negative body image and eating disorders. Women are surrounded by a beauty standard that is presented as the ideal, and is impossible for the majority of women to achieve (Fox, 1997). Hartline (sa) calls it "constant, subtle attacks on our bodies". Thomsen, Weber and Brown (2002) conducted a study where they investigated the relationship between reading beauty magazines and pathogenic dieting behaviours in adolescent girls. The alleged motive of beauty magazines is to "encourage self improvement, personal development, and effective approaches to personal health care". However, studies investigating these magazines suggest that they show women's happiness and accomplishments are strongly linked to the way they look, and 'ultra-thinness' is presented as the ultimate form of health and beauty (Thomsen *et al*, 2002: 3). It has been suggested that the main readers of these magazines are those at the developmental level of identity and gender development and, not surprisingly, that teenagers are the most common readers of beauty magazines (Thomsen *et al*, 2002: 3).

It has been shown that when women become frustrated with their failure to attain the ideals presented in the media, some resort to unhealthy body and eating cognitions and behaviours that may eventually lead to an eating disorder (Thomsen *et al*, 2002: 4). Despite this, Markey and Markey (2005) claim that a large proportion of people on a diet at any given time do not need to lose weight. This shows that many women, who have healthy weights and bodies, are trying to become thinner. Children also pick up messages from the media. The study by Sherwood (2001) indicated that dieting is common for girls as young as ten years of age. Twenty five percent of the preadolescent girls in this study agreed with the statement “pictures of thin girls and women make me wish I were thin” (Sherwood, 2001).

The stronghold that the media has on society started after the First World War in America and Britain. The advent of the assembly line led to mass production and hence, a need for mass consumption. In addition the development of faster more efficient transport, and credit, meant that goods were available to more people, and not only the rich and upper-class. The department store was created and suppliers had to come up with new ways to entice people to buy their product and so advertising was established (Hancock *et al*, 2000: 48). The advertising industry needs people to be constantly open to its message, and it does this by attacking the person and making them feel constantly inadequate. In this way, people are always looking for ways to improve and hide their imperfections from the incessant scrutiny. The way people look has also come to represent who they are inside. The body has become a representation of the self (Hancock *et al*, 2000:49). What is chosen to be put on or in people’s bodies is supposed to represent who they really are. Therefore, advertisers are not just selling consumers a product, but a lifestyle, an identity and self, and it doesn’t need to be congruent with the real self or identity. The outside can tell the world that they are rich, beautiful, fabulous, and therefore, good and virtuous, even though the way they feel about themselves, their behaviour, and the reality of their lives may be none of those things.

Benson (1997: 123) extends the connection between the body and the self. She adds the dimension of morality. A bad body is overweight and uncared for, and it shows

the self to be lazy and weak (Benson, 1997: 123). A good body is in the control of its owner and is beautiful and thin and its owner is believed to be virtuous and supposedly happy. The body, therefore, becomes the medium through which messages about identity and the self are conveyed (Benson, 1997: 123).

Barbie dolls are a strong force in girls' lives. They are rated to be among the top two favourite toys of girls aged 8 to 12 (Kuther & McDonald, 2004: 40). An international study done on adolescents' experiences and views of Barbie Dolls (Kuther & McDonald, 2004) investigated the influence of Barbie dolls on young girls' self concept and body image. Those who find the doll offensive claimed that the doll represents an adult version of an ideal (yet impossible) version of female beauty that young girls aim for. Toys give children messages about cultural values and, in this case, prescribed gender roles and the concern is that girls will internalize stereotypical female roles (Kuther & McDonald, 2004:39-40). One participant says "she is like the perfect person when you are little that everyone wants to be like" (Kuther & McDonald, 2004: 48). This study found that Barbie dolls are pervasive in girls' experience and that they often use them to play out adult social scripts and this may influence their developing self concept. However, negative feelings were also described, and many girls had damaged and disfigured their dolls. The authors suggest that this may represent the girls' feelings about their developing female self and they "forsake or damage their own feminine identity" (Kuther & McDonald, 2004: 50). The researcher believes that the results of the Kuther and McDonald study show the kind of messages that young girls are receiving about what it means to be a woman. These messages place a value on women's bodies and are infused in popular culture such as the media and children's toys.

It seems that being a woman means to feel unhappy with appearance. Markey and Markey (2005) claim that body dissatisfaction and dieting are considered normal for women and preadolescent girls. People who are concerned about their weight are more vulnerable to dieting, and dieting may lead to an increase in weight, which in turn can lead to more drastic measures to lose weight. Dieting and weight fluctuations can negatively affect a person's mental health and may contribute to

depression and low self-esteem (Markey & Markey, 2005). Girls as young as five are expressing dissatisfaction with their bodies when they are heavier than their peers and by adolescence a majority of girls are concerned with their weight. Approximately half of children aged ten wish to be thinner than they are and more than a third have tried some form of weight loss (Karwautz & Treasure, 2000: 77). The normal experience that women have with body dissatisfaction and dieting is termed 'normative discontent' (Markey & Markey, 2005). It is revealing that discontent is considered normal, even expected.

Young girls also appear to experience this discontent. Entwisle (2006) discusses a British study of children aged five to eight years old. It explored girls' experience with their body and one of the results showed that 71% of seven year old girls in this study wanted to be thinner (Entwisle, 2006: 76). This appears to indicate that young girls are experiencing some form of normative discontent. Women and girls are living their lives with a constant feeling of inadequacy and failure. The researcher believes that these feelings can affect nearly every aspect of their lives, and behaviour.

Eating disorders may be an extension of normative discontent. Body dissatisfaction combined with low self esteem, insecurity in relationships, difficulty managing feelings, greater perceived pressure to be thin, the internalization of a thin body-ideal and dieting are factors which contribute to anorexia or bulimia (Karwautz & Treasure, 2000:76-77). Actual weight problems, however, are not likely to contribute (Papalia, Olds & Feldman 2006: 422). This indicates that there is a relationship between pressure to be thin and intra-psychic dynamics. It may also be read as a culture specific way to express pain. One theory of anorexics holds that they fear the desires of the body will obliterate the self (Benson, 1997: 122). As shown above, normative discontent affects children of a younger and younger age; eating disorders are also affecting younger children. A psychologist, quoted in Entwisle (2006:76), claims that the age for eating disorders to manifest used to be approximately 14 years, whereas now it now occurs closer to 12 years of age.

Some theorists hold that anorexia is a denunciation of the feminine identity, a resistance and a defiance against what is expected of them (Benson, 1997: 135). This argument states that anorexia is an active rejection of what it means to be a woman: menstruation, a rounded body, and breasts, as well as a rejection of other appetites, such as the sexual and emotional appetites. Therefore, anorexia can be read as a political act. Orbach (cited in Benson, 1997: 137) says “food is the medium through which women are addressed; in turn, food has become the language of their response”.

A study done by Ferron (1997) on adolescent body image found that the majority of American participants, both male and female, believe their body is a representation of their will power, courage, self-confidence and ability to adhere to certain rules. They do not believe it is connected to genetics or physiology. This leads to recriminations and guilt if the ideal is not achieved (Ferron, 1997). This suggests that adolescents believe their body to be malleable and if they cannot make it perfect, it indicates some personal or moral failing. Therefore, the cultural ideologies that have been discussed, that aim to undermine women’s perception of their body, appears to be working.

A large majority of studies on eating behaviours and body image have been conducted in North America and Western Europe. Many of the theoretical models that have been discussed up to now were based on Western cultural norms (Le Grange, Telch & Tibbs, 1998). The following section will examine the effects of Western ideals on different ethnic and racial groups. This is a pertinent issue in South Africa where there is a large urban area that is likely to be influenced by Western principles. In addition there are many people who live in rural areas with more traditional or African principles and they may be affected differently. However, there is also a wide range of people who are in the middle of these two extremes, namely people who were brought up in a rural area but go to the cities to work or study; or people whose parents have strong traditional African beliefs, who are surrounded by Western ideals in magazines, on television and at school. In

essence, South Africa is a “developing, ethnically diverse society with subsections that espouse Western ideology” (Le Grange, *et al*, 1998).

This cultural diversity is an area in the research which is contentious; theorists disagree and research yields different results. For example, two studies conducted on South African females show diametrically opposite results. A study done in 2001, involving 228 schoolgirls from a variety of races and cultural backgrounds, found that while black girls had a significantly higher mean Body Mass Index<sup>1</sup> (BMI), white girls had significantly greater dissatisfaction with their present body size and desired a significantly smaller body size than either the black or the coloured girls (Caradas, Lambert & Charlton, 2001). However, this study did indicate that there was an equal prevalence of abnormal eating attitudes across the races. Meanwhile, another study done in 1998 by Le Grange, Telch and Tibbs on 1,435 South African college students of different races reveal different results. Again the black participants had a higher BMI than the white participants, but there was considerable body dissatisfaction in both black and white women and that the black participants even had higher eating pathologies than the white participants (Le Grange, Telch & Tibbs, 1998). A more recent study by Le Grange, Louw, Russel, Nel and Silkstone (2006) confirmed that eating pathology is the same across all ethnic groups.

Theorists suggest that black women have a greater acceptance of their body and are less likely to succumb to thin ideals (and therefore eating disorders) because their ideal body is larger and so they have greater body image satisfaction. Some cultures view obesity as a sign of health and beauty and this protects them (Senekal *et al* 2001:44; Le Grange *et al*, 1998). Yet, the studies that show that body image dissatisfaction and eating disorders are similar across all racial groups suggest that this is a sign of assimilation into Western culture, and specifically Western body ideals (Le Grang *et al*, 1998; Wassenaar, Le Grange, Winshi &, Lachenicht, 2000; Senekal *et al*, 2001: 45). Le Grange *et al* (2006) suggest that ethnicity is neither

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<sup>1</sup> A measurement of weight calculated by measuring the person’s weight in kilograms and dividing it by their height in meters squared. A number between 18.5 and 24.9 is normal (Summerton, Shetty, Sandle & Watt, 2002: 298).

protective nor predictive; rather weight, self-esteem and age are more likely to be factors in eating pathology.

However, what could also account for some of the discrepancies, are the different definitions of body image and the different ways of measuring, as was discussed earlier, that are inherent in body image research. What may also explain the different results of the abovementioned research projects is the age difference of the participants in the study. This may suggest that as black women get older, they become more influenced by Western body ideals. The following section will discuss the developmental theory of Erikson, with a special focus on the body and body image and how this changes over the course of one's life.

#### **4. The Developmental Theory of Erikson**

This section will examine the developmental theory of Erik Erikson (1902- 1994). His theory is a macro theory of this study. The first three stages will be examined briefly, with a focus on body and body image. The stages during middle childhood and adolescence will be focused on more intensely as this will help to understand the participants of the study in context.

Erikson's view of development is a positive view of normal human development and personality. He developed a theory of psychosocial development based upon the child's interaction with the environment. The environment included caretakers, family and socio-cultural heritage (Maier, 1978). The relationship is also reciprocal; the child and the environment both give and take (Erikson, 1977: 224). Arguably, his greatest contribution was his work on adolescents. He believed adolescence was the most critical time for the development of the adult personality, unlike Freud who believed it was early childhood (Smith & Cowie, 1991: 223). This will be discussed further on in this chapter. Erikson also produced a theory of adult development (Papalia, Sterns, Feldman & Camp, 2002: 33).

A healthy ego, according to Erikson, is for the individual to know himself and others, and to be aware of his environment. He said that the infant does not have a healthy ego and that the ego develops throughout life in a predetermined plan (Freudian Slip, 2004). His theory of development has eight stages that cover the life-span of a person. Each stage has a 'crisis' or problem to overcome. If this is successfully negotiated, then there is a 'virtue' or strength that results (Papaila *et al*, 2002: 33). Each stage is dependent on successfully negotiating the previous stages, and regression to a previous stage is normal. These stages are innate and universal; however, the context is defined by the environment of the individual (Maier, 1978: 87-88).

**Basic trust versus mistrust** is the first stage. It covers the first 18 months of a child's life where the child learns about the reliability of the world. This takes place through feeding. A caregiver, who responds to the child's needs, creates the virtue of hope, which is the belief that the needs and desires of the child can be satisfied (Papalia *et al*, 2002: 214-215). Feeding alleviates discomfort and creates satisfaction within the child. Children at this age meet the world with their mouth, they give and receive love orally and they test the world with their mouths (Maier, 1978: 91).

The relationship with the caregiver is of utmost importance. It is the caregiver who creates a sense of trust in the child by being aware of and responding to that child's needs and a sense of trustworthiness within the framework of their culture. This forms the basis for the child's identity: a combination of being 'all right', of being oneself, and of becoming what others trust one will become (Erikson, 1977: 224). This stage is where children learn about food and their bodies; they also connect it to a sense of contentment and happiness and begin to form an identity.

The second stage is **autonomy versus shame and doubt**. This stage is marked by physical growth and by the development of motor skills and muscle control. At this age children learn to walk, run, climb and reach. They are also toilet trained, and here it is possible to see how much the child has assimilated social conventions (Maier, 1978: 94). In this stage the body is a means to explore the world, and the

developing mastery over their bodies is freeing and exciting. However, the child also learns that there are things about his body which are repellent to other people. The obstacle in this stage is shame and doubt and the virtue is will. Hook, Watts, and Cockroft (2002: 84) describe shame as an extreme form of self-consciousness, as being highly visible against one's own wishes. Erikson (1977: 227) describes it as "completely exposed and conscious of being looked at". This relates to what was discussed earlier about the development of advertising. Hancock *et al* (2000:49) said that advertisers put people under constant scrutiny, and this makes them self-conscious and therefore more likely to buy their product. It seems that this strategy may work because it takes people back to one of their earliest struggles in trying to overcome shame and doubt.

The third stage is **initiative versus guilt**; this occurs during the course of early childhood. Rapid physical growth continues and gender identification becomes a focus. The child begins to notice sex and gender differences and question his own behaviour to see if it is in line with his or her gender role (Maier, 1978: 102-103). The virtue that corresponds to this stage is purpose (Hook *et al*, 2002: 273). The awareness of gender differences combined with a strong desire for social acceptance mean that children mimic adult behaviour, and adult expectations. This can therefore be studied in order to understand the messages that adults are giving children.

Gender differences emerge with age. Some influential theories state that the experiences and expectations people encounter from birth direct them to the behaviours, attitudes, interests, skills and personality traits that their culture considers correct for women or men (Papalia, 2002: 300). These expectations are communicated by caregivers, parents and peers. Television is often a source of cultural expectations and children are likely to imitate what they see (Papalia, 2002: 305). One of the factors of this study is to investigate whether young girls believe that being a woman is connected to the way they look.

Erikson's stage of **industry versus inferiority** covers ages seven to eleven and correlates with the present or previous developmental age of the children in this

study. Physical development slows and children learn to use the symbols and tools of their culture (Maier, 1978: 106). Their energy and imagination is tamed and channelled into the work of that culture, in order to make them a productive, working member of society (Erikson, 1977: 231). Peers are important, they compare themselves to the group norm, and the corresponding virtue is industriousness (Hook *et al*, 2002: 86). They spend more time away from home as they go to school, and they begin to identify with other adults, but they cannot see all aspects of the person (Maier, 1978:108). This means that children at this age may turn to celebrities for role models, and only be able to focus on one aspect of what they see, such as the way they look, without seeing the other aspects, such as addictions, eating disorders, or unhappiness.

**Identity versus role confusion** is the stage that comprises puberty and adolescence. The children in this study have entered or were about to enter into this stage. The goal during this stage is to become an individual with a clear sense of self and a purpose in society (Papalia *et al*, 2002: 461). At this stage children understand consequences and test the warnings and threats they are given about their behaviour (Maier, 1978: 113). They are aware of the range of choices available to them and they are required to make life decisions. Among other things, they need to consider their behaviour, career, identity and sexual orientation. If they encounter limitations to their expression, they will fight as though for their life because it is said that ‘there is no feeling of being alive without a sense of identity’ (Erikson, 1968: 130). Although identity is developed throughout life, it is at this stage that it is most tumultuous, and afterwards, is more stable and consolidated (Smith & Cowie, 1991: 223). Erikson believed that society gives adolescents a psychological moratorium, or a time to try different identities without committing to any one. A successful resolution is achieved after one’s consideration and crisis and when there is fidelity to choices. Fidelity is the virtue of this stage. One of the dangers of this stage is diffusion, which occurs when the person does not make any commitment, but also does not consider his options. Another danger is foreclosure, which involves committing to an identity without consideration or crisis. These people are most likely to commit to parental or societal ideologies (Smith & Cowie, 1991: 224-225).

At this age, children might act cruelly towards people who are deemed 'different', with regard to aspects such as skin colour or dress. This is a defence against identity confusion, because adolescents help each other through this stage by forming cliques. At this stage, adolescents may be testing societal expectation of their body and testing how it fits into their identity. The risk is that a negative body image or even an eating disorder could become part of the person's identity.

The body also goes through physical changes at this time and there is a view that there is a body image crisis during puberty (O'Dea & Abraham, 1999; Henry & Kloep, 2002; Ferron, 1997). Puberty brings about undesirable body changes such as an increase in body fat, menstruation and body hair (O'Dea & Abraham, 1999: 671). In support of this, Henry and Kloep (2002: 83) state that depressive symptoms for women increase around puberty and become higher than for boys (whereas before puberty the symptoms are the same in both sexes) and it stays this way for the rest of their lives. It is thus apparent why Balk (1995: 56) states that menarche is "dramatic and potentially frightening" for a young girl.

The childhood body is well known, while the adult body is strange and unfamiliar. However, every time changes occur in the body (even natural or expected ones (such as) during puberty, body image also changes and there can be a resistance to the change and a need to maintain the perception of the body as it is. This could lead to incongruity between the imaginary or ideal self and the real self (O'Dea & Abraham, 1999: 671).

Puberty also signals the start of adolescence, which is a notoriously difficult time. Relationships, especially with parents, change as there is a struggle for autonomy and independence. This is reported to be worse with daughters than with sons (Balk, 1995: 58). Life decisions need to be made and a sexual identity must be established (Ferron, 1997). At this age, gender related role expectations come to the fore, whereas before, they were not so intense. For girls, these expectations include being less aggressive, less confident, less active, more dependent and more devoted to others than boys are expected to be (Balk, 1995: 60). Women, must accept a lower

social status, and they have less freedom than their male counterparts, as parents are often more protective of their daughters (Henry & Kloep, 2002: 83).

With all this looming in front of a preadolescent girl, puberty may be seen as something to avoid. However, it is inescapable and this can be the reason for an increase in depressive symptoms in young girls and why eating disorders commonly start around this age. There are, nevertheless, some positives for adolescent girls: they develop more intimate and more sophisticated relationships than boys and are better at sharing and communicating ideas and feelings with others (Balk, 1995: 61).

Puberty brings about body changes, which for girls are mostly negative. Therefore, intervention programmes need to start in early puberty (O’Dea & Abraham, 1999: 671; Sherwood, 2001). However, O’Dea and Abraham’s study on disordered eating attitudes in girls found that while eating disorders mostly start in the teenage years, pre-menarcheal girls have ‘body image issues’ (O’Dea & Abraham, 1999: 676-677). Also, menarche keeps occurring at an earlier age. In 1900, menarche occurred at about 15 years of age and in 2004 it was at about 12 years of age (Catherwood & Gillibrande, 2004: 130). Therefore, interventions might need to start even earlier than puberty. The following section will explore Gestalt psychology and how it fits into body image and ideas around identity and the self.

## **5. Gestalt Psychology, Identity and the Self**

Gestalt psychology is phenomenological, existential therapy that was founded by Frederick and Laura Perls in the 1940’s. Frederick Perl’s theory was strongly influenced by the politician and philosopher Jan Smuts, the physician Goldstein, the psychologist, Koffka, as well as, Wertheimer and Kohler (Mackewen, 1997: 14). ‘Gestalt’ is a German word meaning a whole or complete pattern, form or configuration (Mackewen, 1997: 15). It teaches awareness and a way of being “authentic and meaningfully responsible for oneself” (Yontef, sa).

The Gestalt view of the person is a 'functional, organismic whole' that is striving towards actualisation. The uniqueness of each person is emphasised, and is viewed as an integrated whole with the capability for growth and mature self-expression, all behaviour is purposive rather than random (Kirchner, 2000). Each individual has an innate self-regulation that strives to meet his needs (Mackewen, 1997: 17). The paradoxical theory of change states that the more people are themselves, the more growth and change can occur (Kirchner, 2000). This is a similar idea to Erikson's fifth stage where the adolescent tries to take on different identities. A successful resolution means that they discover the identity they are most comfortable with and stay faithful to that.

Koffka, Wertheimer and Koelher stated that people organize their perceptions into meaningful patterns and that a person will fill in the missing pieces in order to make a meaningful whole (in Kirchner, 2000). This is connected to Erikson's ideas of a child's ability during industry versus inferiority, where a child cannot see the whole picture. According to Gestalt theory children will try to make a whole and therefore, they may perceive that thinness equals happiness when there is no evidence to that effect.

Existential philosophy is concerned with responsibility, freedom and authenticity; phenomenology is about describing consciousness objectively (Kirchner, 2000). Yontef (sa) combines the ideas to state that existential phenomenologists are interested in people's experiences, feelings and relationships as experienced by them. This was the focus of this research: people's personal experiences of their bodies (as experienced by them.)

Smuts developed ideas of holism, which Perls expanded to become the field theory. This is the whole, in which each part can only be described in relation to all the other parts and each part is influenced by every other part including the here and now, and residues of the past (Yontef, Sa). Therefore, each person is influenced by their immediate and remote environment. Hence, the participants and their responses are influenced by their family, their school and their culture. This aspect of Gestalt

theory means that it is good for different cultures. This is important in South Africa because of its unique history, culture and people.

In Gestalt, the self is not viewed as a stable structure; rather it is “a changing process” (Mackewen, 1997: 73). The self can only be understood in term of the field. The self only exists because it is contrasted with what it is not, in other words, “there is no I without the other” (Kirchner, 2000). Therefore, the self is about creative tension between the internal and the external world- private experiences (such as feelings, thoughts, needs etcetera) and interpersonal events (such as obstacles, resources, relationships etcetera) (McConville, 1995: 7). Since the self exists only in relation to others, it is constantly changing in reaction to the field (Kirchner, 2000). The self develops by taking in ideas, information or other material, it considers the material and if nourishing or serving a need it is assimilated and taken into the self, or if not, it is then rejected (Yontef, Sa). It is the manager and coordinator of contact at the boundary between the internal and the external (Mackewen, 1997: 73).

The place where the internal self and the external environment meet is called the boundary. This boundary connects and separates, it allows information to pass between the two, and it has a protective function (McConville, 1995: 4). Adolescence is a time of opening between intra-psychic boundaries, there is a relationship with oneself that wasn't there before and where children begin to differentiate themselves from the family. Children have a “fluid...sense of belonging to the world, of fitting in with their families and playmates”. Afterwards they become aware of an internal world that doesn't concur with what is expected on the outside (McConville, 1995: 8). The boundary between the child self and family field are very permeable, and the child's experience is strongly shaped by the family. Their opinions, beliefs and prejudices are believed to be an objective reality, “meaning is organized for the child rather than actively constructed by her”, and this is called an introjection (McConville, 1995: 24). Therefore the child self is a self in the family field, it is not reflective and consequently, is lived rather than known. Healthy and mature adults differentiate and easily move between the intra-psychic

and the interpersonal. If this is successful, then it gives them a sense of being whole and integrated, and adolescence is where this process is started (McConville, 1995: 12).

There are different relationships between the internal self and the external world. *Contact* is the “functioning of the boundary of the organism and its environment” (McConville, 1995: 4) or a “responsive meeting with the other” (Kirchner, 2000). Essentially, contact is the place where the internal and external meet and the relationship they have with each other. Contact is always creative (Kirchner, 2000). It is expressed through seeing, hearing, tasting, touching, moving etcetera (Mackewen, 1997: 74).

However, sometimes there are disturbances at the contact boundary. For example, there is *confluence*, which is when the boundary is too permeable, and there is no ‘you’ or ‘I’ only a ‘we’. The person is uncertain about himself and easily adopts other beliefs or behaviours (Kirchner, 2000).

*Introjection* is when ideas are not considered before they are assimilated and something from the environment is experienced as belonging to the self (Kirchner, 2000). This is similar to Erikson’s foreclose. When this happens the person becomes rigid (Yontef, sa) and it can be seen with eating disorders. A person with an eating disorder is often very rigid, adhering to strict rules and ideas about eating behaviours and body standards.

*Projection* is when something (for example a need or feeling) that belongs to the individual is experienced as belonging to the environment (Kirchner, 2000). These three contact boundary disturbances are important, because they may help explain adolescents’ struggle to define their self. Perhaps what they want appears to belong to people in pictures and the belief that if they look like the picture, then they will have what the person in the picture has. Maybe, they take in that information from the environment too readily without truly considering it and they project their needs and desires onto the picture.

The last boundary disturbance to be discussed is *retroreflection*. This is when a response that is meant for the environment is substituted for a response meant for the self (Kirchner, 2000). This may be what some people with eating disorders experience. Their feelings are too overwhelming to be expressed (or they do not know how to express them in an acceptable way) and so those feelings are turned onto themselves. For example, they may feel anger and want to lash out and hurt; instead they turn that rage inwards and hurt themselves, because they don't know what else to do. This has the added benefit of making other people aware of your pain and also hurting them.

Gestalt psychology has great respect for the body (some psychologies are primarily interested with cognitions or the psyche) and view it as central to its framework. People are viewed as holistic beings where body, mind and soul are integral to the experience of the person, and to separate one aspect is to demolish the nature of the person (Mackewen, 1997: 159-163). Mackewen (1997: 162) states that people's psychological life is experienced in and through the body, and in turn the structure of the body represents, and is connected to, the internal self. Therefore, people's view of their body, which is their body image, is shaped by their history, feelings, cognitions as well as every aspect of the field.

## **6. Conclusion**

The developmental theory of Erikson was chosen for the macro-theory of this study because of its focus on environmental influences. The theories presented in this research explore the cultural development of body image and the creation of body image dissatisfaction. Gestalt theory has a strong holistic foundation and therefore believes in the ability of the environment to affect one's perception of their body. These sections are connected by the idea that while some aspects are innate, there are strong environmental influences on a person.

What emerges from the literature is the connection between the body and the self and identity, how the internal represents the external. This also connects the theories that are presented in this chapter. The well cared for and slim body represents a strong will and morally sound behaviour while an overweight body represents weakness. Erikson draws a connection between the developing body and the developing self. For Gestalt theory the self is about identifying what parts of the environment are like them and what parts are not. In terms of body image this could mean that girls look around and see idealised images of women and receive the messages that attractive people are happier and thus want to be a part thereof. However, when they look at themselves, they see they are not like that and the self is then understood to have failed.

The next chapter, Chapter 3, will elaborate on the methodology of the research. It will then analyse the transcribed interviews and compare it to the literature as explored in this chapter.

# **Chapter 3: Methodology and Findings**

## **1. Introduction**

The following chapter firstly reviews the research approach and methodology of the study, secondly it describes in detail the means and method of data collection (used). Thirdly, a detailed account of the data collection and analysis of data are provided.

## **2. Research Design**

### **2.1 The Framework for Research Design**

This research had a qualitative, basic descriptive design. Fouché and Delpont (2002b:78) describe qualitative research as research that draws out the participants' meaning, experience, or perceptions and it involves identifying the participants' beliefs and values that underlie the subject being studied. Basic research is undertaken to increase knowledge; to explore (Lammers & Badia, 2005: 321); and descriptive research describes the phenomenon, and creates a deeper understanding of it (Fouché, 2002a: 109). Thus the research aims to explore and gain a deeper understanding of the participants' subjective feelings about their body.

### **2.2 Gestalt Paradigm**

A paradigm can be defined, as in Fouché and Delpont (2002a:266), as the "fundamental model or frame of reference [used] to organise... observations and reasoning... [A] world view, a basic set of beliefs or assumptions that guide their enquiries". The paradigm that the researcher was working from in this study is the Gestalt paradigm.

Gestalt therapy is a holistic, process-oriented, dialogical, phenomenological, existential and field approach to people with a focus on contact, awareness, and personal responsiveness and responsibility. The uniqueness of each person is of

utmost importance. The person is viewed as an integrated whole with the potential to grow and of mature self-expression (Kirchner, 2000).

At the base of Gestalt therapy is the concept of the field. This refers to the inner world of the participant, the outer world of the environment and the relationship between them that is dynamic and constantly shifting (Joyce & Sills, 2001: 24). Everything is connected to everything else. A person affects and is affected by everything. Therefore to fully understand a person at a particular place and time, one needs to understand that who they are then is a combination of their history, their personalities, their assumptions, their internal world and the external environment (Harris, 2005).

Therefore, for this research, the Gestalt view of the participants was that they are individuals who are products of their field. The researcher used this belief as a basis for the research, in that what the participants said during the interviews revealed something about their internal world as well as their environment. This was the purpose of the research.

### 2.3 Strategies of Inquiry: Case studies

Fouché (2002b: 271-2) defines a research strategy as “all the decisions a researcher makes in planning the study... that determine the researcher’s choice and actions.” The strategy for this research was case studies.

Case studies are defined by Adler and Clark (2003:190) as one or several detailed data sources that lead to a ‘multi-faceted’ understanding of the phenomenon being researched; in this case that is body image. This strategy can be further classified into three types of case studies, but the one that is most applicable for this research is collective case studies, whereby numerous cases are studied in order to understand a social issue or population. The individual case is used, not for its own interest, but rather to expand or corroborate theory on the phenomenon. (Fouché, 2002b: 276). For the research twelve cases were studied in order to elaborate on body image theory.

### **3. Data Collection and Analyses**

During the study, the following procedures were followed:

- Children were identified by the teachers to fit the sample and their parents were sent an information sheet and consent form. The completed consent forms were returned to the researcher (Appendix I, page 98).
- The researcher phoned the parents who consented to the study. Questions and concerns were discussed and the parents were asked if their daughter had reached menarche.
- The researcher met with the children individually at school and conducted the semi- structured interviews (see Appendix II, page 101). The children were asked to reflect on the process.
- Tape recordings and personal notes were taken of the interviews. The interviews were transcribed and the transcribed interviews were analysed for themes (chapter 3).
- The themes were discussed and a literature control was conducted (chapter 4).
- The implications of the research and suggested areas for further research were considered (chapter 4).
- The parents and participants received feedback with a presentation, and the school was given a copy of the research.

#### **3.1 Data Gathering (universe, population, sample, demarcation of sample)**

Universe refers to “all potential subjects who possess the attributes in which the researcher is interested (in)” (Strydom & Venter, 2002: 198). For the purpose of this study, the universe can be described as all South African preadolescent girls in Gauteng aged 10-12 years.

A population is “a term that sets boundaries on the study units”. It refers to individuals in the universe who possess specific characteristics (Strydom & Venter,

2002: 198). In this study the population was South African preadolescent girls aged 10-12 from a variety of schools in Pretoria and Johannesburg.

A sample “comprises the elements of the population considered for actual inclusion in the study” (Strydom & Venter, 2002: 199). For this study, the researcher obtained 12 girls, aged 10-12 years old from a variety of cultures and backgrounds.

A purposive sampling method has been utilized to select a sample of preadolescents from the population. Purposive sampling occurs when the type of sample is based entirely on the judgement of the researcher, in that a sample is composed of elements that contain the most characteristic, representative or typical attributes of the population” (Strydom & Venter, 2002: 207). Strydom and Venter (2002: 208) define snowballing as a sampling technique whereby one participant gives you the information to other potential participants. The researcher approached some parents who she knew had children who fitted the sample. Those parents were in turn asked to provide names of other parents who might be willing to allow their children to participate. These two sampling methods were chosen because they were the most suitable and practical for this kind of research, especially with the small number of participants desired for this study.

### 3.2 Selection and Number of Participants

In total there are twelve participants. Three of the participants’ parents were approached directly because the researcher knew they had daughters who fitted the criteria. Crawford School was approached to participate in the study. After discussions with their Vice principle, information sheets and consent forms were handed out to approximately twenty scholars who were randomly selected by the teachers. Nine of the consent forms came back signed and these became the remaining nine participants.

### 3.3 Setting

The interviews were conducted in various settings. Nine of the interviews took place at Crawford School. Due to practical constraints (availability of classes) most of these interviews were conducted outside on the grass. In this way it was insured that there would be no interruptions. One interview was conducted in the school library; however, interruptions by another class disrupted the interview process. Three of the interviews were done in a private area of the children's home.

### 3.4 Length of the Study

The data was collected over an approximate period of six weeks. Each interview took between ten and twenty- five minutes.

### 3.5 Data Analysis

Content analysis was used. Adler and Clark (2003: 394-5) describe it as the systematic study of some form of communication. They further elaborate that this is an unobtrusive and flexible method of data collection. For the proposed study, the researcher systematically analysed the participants' interviews. The unit of analysis will be themes which emerge from their communication with the researcher. Adler and Clark (2003:386) state that content analyzers should be asking the questions "Who says what, to whom, why, how and with what effect?" The researcher was asking these questions in terms of body image. Examples of questions are: "Who or what teaches these girls about their body?" "What messages do they give?" "What do the girls say to themselves?"

## **4. Data Collection Methods**

Data was collected through semi-structured interviews with the participants, as well as by observation and by asking them to draw a person.

### 4.1 Semi-Structured one-to-one Interviews

This method of data collection was used in the study. A set of predetermined questions acted as a guide for the interviews (see Appendix II, page 101).

Semi-structured one-to-one interviews are used to obtain participant's points of view on a particular issue. This method guides the participant, but allows for flexibility. The participant may then introduce another idea or aspect that the researcher had not thought of. This method allows the interviewer to follow this direction, therefore gaining a fuller idea of the concept being studied (Greeff, 2002: 302).

For the purpose of this research, the concept being studied was body image. However, the interviews were often directed by the participant. The interview questions were chosen with care and purpose in order to elicit the participants' feelings about their body. At the start of the interview, the participants were asked to draw a person. The purpose thereof was to make the participant feel comfortable, and to have a non-threatening stimulus in order to start a discussion on bodies. For many of the participants this was successfully achieved. The questions were also all open ended, as recommended by Greeff (2002: 302). Greeff (2002: 292) states "every word that people use in telling their stories is a microcosm of consciousness". In this research the words were analysed and scrutinised to try to gain some insight into the participants' consciousness.

#### 4.2 Observation

Participant observation is often used in qualitative and exploratory studies, and is utilized to understand the participants' feelings more fully (Strydom, 2002: 278-279).

The analysis of this study is based purely on the words that the participants used. However, during the interviews, the researcher utilised observation and would often reflect on body language or tone of voice. In addition, before each transcription, the researcher has given information about the participant.

## **5. Findings**

From the transcribed interviews, some important ideas emerged. The participants gave an idea of how they viewed themselves and also discussed their perception of an ideal woman. These views are compared to see how close or far away from their ideal they perceive themselves to be. The participants often said contradictory things and this is discussed in the third section. After that there is an examination of the participants' feelings about their body.

The table below provides information about the participants. It indicates the age and the demographics, as well as whether the participants have reached menarche and certain important points or main ideas from the interviews.

Table 3.1 Summary of Participant Information

<b><u>Participant</u></b>	<b><u>Age</u></b>	<b><u>Menarche</u></b>	<b><u>Demographics</u></b>	<b><u>Main ideas from interview</u></b>
1	11	no	<ul style="list-style-type: none"> <li>• White</li> <li>• Jewish</li> </ul>	<ul style="list-style-type: none"> <li>• She is a religious Jew and there are many references to Judaism.</li> <li>• She is concerned with dressing modestly.</li> <li>• She likes being active.</li> <li>• She does well at school, but is modest about this.</li> </ul>
2	11	no	<ul style="list-style-type: none"> <li>• White</li> <li>• Jewish</li> </ul>	<ul style="list-style-type: none"> <li>• She mentions 'nice' a lot.</li> <li>• There are many questions she does not answer, but rather says she does not know.</li> <li>• She is fashion conscious and wants to be a clothes designer.</li> </ul>
3	11	no	<ul style="list-style-type: none"> <li>• White</li> <li>• Portuguese</li> </ul>	<ul style="list-style-type: none"> <li>• She is physically mature. She is tall and has developed breasts.</li> </ul>

				<ul style="list-style-type: none"> <li>• She is very concerned and distressed about her weight.</li> <li>• She believes she will become thinner when she is older.</li> <li>• Confidence is important to her.</li> </ul>
4	11	no	<ul style="list-style-type: none"> <li>• White</li> <li>• Maori</li> </ul>	<ul style="list-style-type: none"> <li>• She has lived in many countries.</li> <li>• She often compares herself to her sisters.</li> </ul>
5	11	no	<ul style="list-style-type: none"> <li>• White</li> </ul>	<ul style="list-style-type: none"> <li>• She is very concerned about being clever.</li> <li>• She is tall for her age.</li> <li>• She often mentions looks and fashion, but then says that it is not important.</li> </ul>
6	10	no	<ul style="list-style-type: none"> <li>• Black</li> </ul>	<ul style="list-style-type: none"> <li>• She is from Cameroon.</li> <li>• She spoke a lot about mothering.</li> </ul>
7	10	no	<ul style="list-style-type: none"> <li>• Indian</li> <li>• Muslim</li> </ul>	<ul style="list-style-type: none"> <li>• She spoke a lot about her religion.</li> <li>• She is concerned with women who dress immodestly.</li> </ul>
8	11	no	<ul style="list-style-type: none"> <li>• White</li> <li>• Jewish</li> </ul>	<ul style="list-style-type: none"> <li>• She participates in many sports.</li> <li>• She believes the women on television look perfect but that it is all fake.</li> </ul>
9	12	yes	<ul style="list-style-type: none"> <li>• White</li> </ul>	<ul style="list-style-type: none"> <li>• She does not want to appear vain.</li> <li>• She exercises regularly</li> <li>• She wants to help people who are overweight.</li> </ul>
10	12	yes	<ul style="list-style-type: none"> <li>• Indian</li> </ul>	<ul style="list-style-type: none"> <li>• She likes revealing outfits.</li> <li>• She is very concerned about the way she looks but liked the way she looked.</li> </ul>

				<ul style="list-style-type: none"> <li>• She is very concerned with confidence.</li> </ul>
11	11	no	<ul style="list-style-type: none"> <li>• White</li> </ul>	<ul style="list-style-type: none"> <li>• She does a lot of sport.</li> <li>• She talks about her family a lot, and is very proud of them.</li> <li>• She likes taking care of her body and does a lot for it.</li> <li>• She believes celebrities need more privacy.</li> </ul>
12	10	no	<ul style="list-style-type: none"> <li>• White</li> <li>• Portuguese</li> </ul>	<ul style="list-style-type: none"> <li>• She was extremely shy during the interview.</li> <li>• She read a lot.</li> <li>• She showed concern for people with handicaps.</li> </ul>

### **5.1 View of Themselves**

This section will discuss how the participant views herself. This is based mostly on two particular questions the researcher asked: ‘how would you describe yourself?’ and ‘how do you think others would describe you?’ The findings of this section can be divided into 3 broad categories: physical attributes, skills and abilities, and personality attributes.

#### **5.1.1 Physical attributes**

Some of the participants used physical attributes to describe themselves:

Participant 1: “*Short*”

Participant 2: “*Freckles*”

Participant 4: “*I am short*”

Participant 12: “*I have long hair; I have brownish blondish hair... I am pretty*”

Many of the physical descriptions are based on hair colour and height. Most of the physical descriptions appeared to be without value, they were simply facts. However some of the participants did place value on their physical attributes. Participant 7 felt pleased with her appearance:

Participant 7: *“I am really proud of myself ‘cause I am really pretty”*

Participant 3 perceived the way she looked negatively. While, in answer to the researcher’s question, she described herself as a nice, caring person, she portrayed herself as being overweight throughout the interview:

Participant 3: *“Well, that’s the kind of girl that everyone tells me I will become (about her picture).”*

Researcher: *“Ok what does that mean?”*

Participant 3: *“I’ll become thinner.”*

Researcher: *“So it sounds like it’s a bit of an issue for you, the way you look?”*

Participant 3: *“Ya... My clothes don’t fit me so I kind of get sad and start crying.”*

### 5.1.2 Abilities and interests

Many of the descriptions focused on things that the participants enjoyed doing and that they felt skilful with. Some of the girls described physical abilities:

Participant 1: *“[I am] very active”*

Participant 11: *“I love doing sport, I am very sporty.”*

Participant 12: *“I am really kind of strong for my age.”*

Some girls described intellectual abilities:

Participant 4: *“Intelligent.”*

Participant 11: *“I try hard to cope with the work in English because I am not that brilliant in it. I do pass school with very high marks. With History I am spot on.”*

Other girls described their interests:

Participant 1: *“I like shopping, I like wearing short skirts”*

Participant 12: *“I love to hang out with my friends, I love fashion, I love make up, going to the movies”*

The above quotes demonstrate that many of the participants describe themselves according to their physical or mental abilities. Lightstone (sa) believes that body image includes people’s emotions about their bodies. These participants display pride in what their bodies can *do*. They view it as a part of themselves, and yet the current literature does not appear to recognise the impact that this may have on body image.

### 5.1.3 Personality attributes

The participants described themselves most often in terms of their personalities:

Participant 3: *“[I am a] a fun, bubbly person.”*

Participant 6: *“Funny, playful, kind.”*

Participant 8: *“Fun, and naughty sometimes, um energetic. I can be mean, but it’s not a good thing. I am caring, I share, I can make friends very easily and I am nice to be around with.”*

Participant 9: *“I would describe myself as very helpful, very sensitive and very organized and I like doing all my stuff by myself like when I’m supposed to do something, I like doing it myself and stuff I don’t like people to help me. I don’t like people to help me. Mmm kind and generous and always there for people.”*

Participant 10: *“I am quite an alive person, I am bubbly as well”*

The majority of the participants in this category described themselves with positive personality attributes. While this is not directly connected to their bodies, it is connected to their sense of self. Benson (1997: 123) argues that a good- that is, thin-body represents a good person. However, these participants, for the most part, do not make that connection. For them, goodness is not related to the way they look, rather the way they behave.

Across all the categories, there were a great deal more positive descriptions than negative. Some examples of the negative comments are:

Participant 5: *"[I am a] bit on the pushy side..."*

Participant 7: *"Sometimes I can't keep my hair neat... Sometimes I am a bit naughty, and sometimes once in a while I get pimples."*

Participant 9: *"Sometimes I can be a little moody, it's a little bad."*

## **5.2 Identity**

All the participants described themselves in terms of their physical attributes, interests and abilities or personality attributes. However some of the participants viewed themselves in other ways as well. In Erikson's fourth developmental stage, identity versus role confusion, adolescents move from easily accepting their parent's beliefs and values to questioning them and forging their own identity (Smith & Cowie, 1991: 224-225). From some of the quotes it can be seen how the participants are currently identifying themselves. Two of the participants located themselves strongly within their families. Participant 4 compares herself to the other members of her family:

Participant 4: *"In my family I am short... I am the shortest... I am really very active compared to my other sisters"*

Participant 11 often uses the word 'we', and her likes and behaviour are part of the family structure:

Participant 11: *“I would also describe myself to be in a very great line of family history. My family’s done very wonderful things... We like being in nature. We are fun people. We do get serious once in a while, we do fight, but our family is pretty nice. We get along very well.”*

Participant 7 also uses the word ‘we’, but in this case she identifies strongly with her Muslim religion. She describes how it is acceptable to dress; she also talks about Ramadan and Islamic studies. It does not appear to be either a good thing or a bad thing, rather it is merely factual, a part of who she is. It permeates every aspect of the discussion:

Participant 7: *“That’s how we believe in our religion”*

Participant 1 is a religious Jewish girl, and her religion also permeates the interview. She also speaks about acceptable dress, and other Jewish references, such as ‘shabbos’ (the Sabbath which begins on a Friday night and lasts till Saturday night), ‘parsha’ (a weekly portion of Torah) and ‘kugel’ (slang term for a female who is very ‘girly’) come into the interview. Her religion appears to be a part of her identity and life.

Participants 4 and 11 clearly identify themselves as part of their family, while Participants 1 and 7 identify with their religion. These girls are introjecting their families’ beliefs and when they get older they will need to question these beliefs and reject them or assimilate them.

Another aspect of identity emerged: some of the girls felt that typical ‘girly’ things, such as fashion and makeup were a positive thing and others saw it as a negative thing:

Participant 1: *“My brothers think I’m a kugel, and my father says I’m a tomboy, and my mother says I have good taste, my mom doesn’t know about clothes”*

Participant 5: *“I don’t have that much fashion sense”*

Participant 7: *“I am basically just like a tomboy. Also I don’t worry about putting jewellery and all. I just buy a whole bunch of clothes and then the next year buy a whole bunch again. I don’t worry about accessories and all that and I like to put his perfumes. I don’t like the girls’ ones.”*

Participant 11: *“I’m a very girly girl, I love doing my hair with all these fluffy bauble things... I would also describe myself as wearing skirts, nice tops, pretty hair, jewellery type of girl.”*

Participant 12: *“I love fashion, I love make up”*

This is similar to the Gestalt idea of the self whereby certain things are assimilated into a person’s self, or rejected (Yontef, sa). In this case, ‘girly’ things are rejected or assimilated

From this section the different ways in which the participants view themselves can be seen. There appears to be three broad areas that the participants used to describe themselves: physical attributes, abilities and interests and personality attributes. Personality attributes are the most commonly used descriptions. In addition, most of the descriptions were positive. Some girls place themselves within the context of their family while others, their religion. Some girls view themselves as ‘girly’ while other reject this portrayal.

### **5.3 Ideal self versus real self**

This section describes and discusses the participant’s ideal view of a woman and how close or far from that ideal they perceived themselves to be. This section was mostly revealed when asking the participants ‘What is a woman?’, ‘Who is your favourite movie star and why?’ The findings for this section are also based on ideas or themes which tended to repeat themselves in the interviews.

Participant 2 mentions being 'nice' very often:

Participant 2: *"I think I look nice [with my hair down]..."*

Researcher: *"What is it like when you together as a family."*

Participant 2: *"Very nice..."*

Researcher: *"What do you think when you see a woman in magazines or on TV?"*

Participant 2: *"Some of them are nice. Some of them don't act nicely."*

Researcher: *"What makes them nice or not so nice?"*

Participant 2: *"Like in some movies... like... like have you seen Cheaper by the Dozen? The mother acts nicely and there's another mother who wears clothes for her body and everything and there's another person in the movie who doesn't act nicely."*

Researcher: *"So it sounds like it's a lot about the way they act and the kind of person they are?" But it also sounds like it's a bit about the way they look like! Can you tell me more about that?"*

Participant 2: *"Um... I dunno.."*

She perceives herself to be nice and therefore meets her own ideal:

Researcher: *"And how would other people describe you?"*

Participant 2: *"Nice..."*

Participant 5 seems to view intelligence as an ideal:

Participant 5: *"Well [Hermione Granger] is like the extreme clever type, and good looks and that kind of thing, and she's nice."*

Researcher: *"Ok, what do you think when you see her?"*

Participant 5: *"That I wish I could be slightly more like her... clever and all that. And she's extremely nice. That's my opinion."*

However, she views herself as nice and pushy which is far from her ideal.

Participant 6 appears to view motherhood as an ideal:

Participant 6: *“A woman is a female, that gives birth and women and men are different ‘cause women have things that men don’t have. Like breasts to feed their baby and...I’m not sure.”*

Researcher: *“So it seems to me a woman is a lot about being able to give birth and be a mother. Is there anything about what they do that makes a woman different?”*

Participant 6: *“Yes, like when a woman gets married and even if her husband leaves her and leaves her with the children she can still take care of them her self but if the husband is left alone with the children he can’t really do anything.”*

Researcher: *“OK. So you think women can cook and look after children.”*

Participant 6: *“Yes, but some men can also do that. I don’t think most of them can.”*

Researcher: *“But you think most women can?”*

Participant 6: *“Yes.”*

Participant 6: *“[I like women who] dress nicely like not with mini skirts, like some mothers think they still 18 when they supposed to dress like you.”*

Researcher: *“Like what about me?”*

Participant 6: *“Normally like how mothers dress.”*

Researcher: *“How do mothers dress?”*

Participant 6: *“With normal trousers and shirts that don’t show your tummy and things like that.”*

Researcher: *“Is that how your mother dresses?”*

Participant 6: *“Yes.”*

She does not describe herself as a mother, but in her drawing she describes a girl who received money for a birthday present and spent it on a birthday present for her mother. Later she says she wants to be a dentist because she likes taking care of other people and helping them. This seems to fit in with her ideas of nurturing and mothering. She appears to see herself as nurturing and aspires to that role in adulthood.

Participant 7 appears to view prettiness as the ideal:

Participant 7: *“[A woman] is the one that is pretty... [I like Hillary Duff because] she is pretty.”*

However, this participant does see herself as fitting this ideal. As discussed earlier, she views herself as pretty and this gives her great pride.

For participant 11 the ideal woman takes care of herself:

Participant 11: *“A woman is someone who really takes care of herself. She takes care of her skin, her pores, her nails... Vanessa Hudgens which I think personally is also one of my favourite stars because I look up to her she is not the one doing drugs or alcohol, she is one natural human beings, and she also has a balanced diet.”*

Participant 11 seems to feel that she does take care of herself:

Researcher: *“Do you do anything to take care of your body such as relaxing and exercising, or eating in a certain way?”*

Participant 11: *“Yes, I love doing exercise, I run, I do stretching, I also like treating my body. I use a Clinique herbal cream and body gel, you rub the cream and then you rub the herbal gel, and it smoothens your skin and it has SPF for the sun and then you*

*get for the winter. I also have a balanced diet, I eat fruit, I eat vegetables, I love salads - that's my main food. I also like eating a bit of meat now and then but not a lot of it. I also take care of my body by not roughening it up a lot by falling, bleeding, scratching myself. I am very happy with my life and I'm actually very happy I have a balanced diet. You must not eat too little and you must not eat too much. Ok, that's about it."*

Participant 3 clearly wants to be thinner and more confident:

Researcher: *"Who's your favourite movie star?"*

Participant 3: *"So many, Cameron Diaz, Jennifer Lopez quite a lot."*

Researcher: *"What do you like about these women?"*

Participant 3: *"They're confident, they're funny. They don't care what other people think..."*

Researcher: *"Is there anything you'd like to add on this topic?"*

Participant 3: *"I think people should be more confident about their body. If they're confident, they're lucky."*

Her view of herself is very different, as discussed above; she perceives herself to be overweight.

Participant 3 also connects confidence and thinness. However, she is not the only one. Participant 10's ideal is to be a model and for her this includes being 'skinny' and wearing 'skimpy' clothes. This idea recurs throughout the interview. However, she believes a woman has different attributes:

Participant 10: *"Well, [a woman is] a girl who is grown up and feels she's confident about herself and she understands life."*

These two participants, who were most concerned with weight, were the most physically mature. They both seem to have an ideal of being thin and being confident. Both girls were physically mature and participant 10 had reached menarche. Both of their interviews were filled with references to a thin ideal and how they compared to that. Participant 10 felt she lived up to it and displayed great pride about this while Participant 3 did not live up to her own ideal and this caused her great distress. Participant 10's feelings seem to support some theories (O'Dea & Abraham, 1999; Henry & Kloep, 2002; Ferron, 1997) that state body image changes negatively during puberty. However, Participant 10 felt good about her body. Perhaps this was only because she had met her ideal, she might not have felt so good about it if she believed she was lacking. There was, nevertheless, still a focus on the way her body looked.

It is important to note that this study used menarche as a predictor of puberty but, as seen with participant 3, there are other signs of puberty. Participant 9 had reached menarche, but did not show any more focus on her body than any of the other, less physically mature, participants. Therefore, it appears as though there may be other factors to consider when determining body image changes during puberty.

The two participants, who were most concerned with their weight, were also very concerned about 'being confident' and both ideas of thinness and confidence permeated their interviews. This indicates that there might be a connection, or perceived connection, between the two. Maybe the girls see being thin as a means to feeling good about themselves and that is what they really want, not necessarily to be thin. Perhaps if they saw women who are larger but still confident, it would create the same sense of envy and conformity.

Participant 3, who was unhappy with her weight, maintained that she would lose the weight when she is older:

Researcher: *Ok. What do you think when you see other girls who are overweight?*

Participant 3: *I just think, well, she'll lose it, just like I will.*

Researcher: *And what would happen if you didn't lose the weight?*

Participant 3: *I'd have to deal with it somehow.*

Researcher: *How would you deal with it?*

Participant 3: *I'd have to start eating healthier, exercise more.*

When asked what would happen if she did not lose the weight she replied “I'd have to deal with it somehow.” However, according to Thomsen *et al* (2002: 4), women who are frustrated with failure to attain their ideal body are more likely to develop an eating disorder. Therefore, this child might have a higher risk of developing an eating disorder.

This section has shown how close or far away from their ideal woman the participants think they are. They all have different criteria that define the ‘ideal woman’. These range from nurturing, to intelligence, to thinness, and some girls fulfil their own standards and some do not. This seems to suggest that while there is a great deal of literature on the pressures for females to conform to a certain physical ideal (Sherwood, 2001; Benson, 1997; Kuther & McDonald, 2004; Ferron, 1997; Markey & Markey, 2005), many girls still aspire to other things.

#### **5.4 Contradictory Statements**

An interesting theme emerged from the interviews: the participants often expressed contradictory ideas during the interview.

Participant 1 gives herself a partial compliment, saying that she is clever, but seems to withhold the full praise by prevaricating:

Participant 1: *“I'm sort of clever”*

Participant 3 perceives herself as being overweight. The interview is filled with references to this, and when other people tell her she is fat, she seems to be unhappy with this:

Researcher: *“What do you not like about your body?”*

Participant 3: *“Well I’m fat and when I get clothes sometimes they don’t fit me.”*

However, later on she says something different:

Participant 1: *“No, I’m fine with my body it’s just that some people make fun of it...”*

Participant 5 appeared to have many contradictory feelings:

Researcher: *“Ok, how else would you describe yourself?”*

Participant 5: *“Well, I’m nice, I don’t have that much fashion sense.”*

Researcher: *“Do you think it’s important to have fashion sense.”*

Participant 5: *“No, not really.”*

And later:

Researcher: *“What do you like about your body?”*

Participant 5: *“I like that I’m tall but sometimes I don’t like being that tall but other times it’s not that bothering...”*

Researcher: *“What do you not like about your body?”*

Participant 5: *“I wouldn’t mind being a bit shorter but I am not complaining that I am tall or anything.”*

When asked about her picture, her ambivalent feelings are expressed more overtly. When she is confronted about this, she is vague and unclear. She does not see the contradictions in what she has said:

Researcher: *“Can you talk about your picture.”*

Participant 5: *“Well the girl with, like, a short top and necklace and long, goldy hair has a handbag and nice watch - jeans – boot, that kind of thing.”*

Researcher: *“Seems like she is dressed very nicely. Do you know a girl like this?”*

Participant 5: *“No, no- one is this perfect. No one is perfect at all, but I know one girl who might be slightly like this. I like her a lot but she can be slightly sulky.”*

Researcher: *“In what way is she like the picture?”*

Participant 5: *“She has long hair and good fashion sense and she’s quite beautiful and she talks a lot.”*

Researcher: *“So you think this girl is perfect?”*

Participant 5: *“Well, no, but she’s as close to perfect as you going to get.”*

Researcher: *“What do you consider perfect?”*

Participant 5: *“Nice, kind, helpful, charming all of those qualities and then also beautiful, fashion sense and smart. But that stuff doesn’t matter as long as she is nice and helpful.”*

Researcher: *“You say that stuff doesn’t matter but you keep bringing it up. I was wondering if it does maybe matter a little bit.”*

Participant 5: *“Not much but if something is perfect then ya..”*

Participant 5 appears to struggle with physical attractiveness and personality attributes. Fashion and aesthetics seem important to her, but she will not own these feelings. Instead she says that other things are important, but does not see how contradictory her statements are.

Participant 6 also had ambiguous feelings about her body:

Researcher: *“Ok, so then what do you not like about your body?”*

Participant 6: *“My belly...”*

Researcher: *“What’s wrong with your belly?”*

Participant 6: *“My mom told me when I was born the doctors cut my belly wrong so then it’s a bit sticking out.”*

Researcher: *“Does that bother you.”*

Participant 6: *“Not really.”*

Researcher: *“But you said you don’t like it.”*

Participant 6: *“Ya, I don’t like it.”*

Some of the participants would say they did not like something about their body, and then later would deny this. Other participants would say that kindness and generosity were important, but then indicate that looks or fashion were important. None of the girls noticed these contradictions. This seems to indicate that there is conflict within the children especially with reference to their body. This might indicate that the girls are getting mixed messages; they are told that kindness and generosity are important but something else tells them that their appearance is really important. They also appear to feel guilty about their concern with their body because they recant it. Hartline (sa) states that females experience “constant, subtle attacks on [their] bodies”. It seems that these participants experience such feelings and struggle with them.

This also connects to Erikson’s developmental stage of autonomy versus shame and doubt. These girls are experiencing doubt about their feelings. Erikson also describes shame as the feeling of being constantly watched. Perhaps these girls feel that way.

In this section we see that the girls sometimes say contradictory things. This may indicate that there are contradictory feelings and thoughts about the topic they are discussing. The conflict often appears to be focused on the body. O’Dea and Abraham (1999: 671) and Sherwood (2001) argue that intervention programmes should start in early puberty. However, this study indicates that it might be beneficial to start intervention programmes even earlier. The girls in this study are already receiving and internalising messages about their body and this is when negative messages should be counteracted.

### **5.5 Likes and dislikes**

The previous sections tried to discern the participants' feelings about their bodies from answers given to indirect questions. This section is focused on the girls' answers to the direct questions 'What do you like about your body?' and 'What do you not like about your body'.

It emerged that many of the girls were not able to say what they liked about their bodies:

Participant 2: *"um... um...I dunno."*

Participant 3: *"Nothing really."*

Participant 4: *"Um ... it's a trick question ... not sure."*

Participant 6: *"I don't like anything"*

Despite some of the participants' reticence, other participants were willing to say what they liked. A common theme was their hair:

Participant 3: *"[I like] my hair "*

Participant 7: *"The only thing I like is my hair ... My hair is the prettiest part about me, 'cause it gives us our beauty that's what we believe."*

Participant 9: *"I like my hair, my hair is pretty..."*

Participant 11: *"Well, first of all my hair, because it's so wavy ..."*

Participant 12: *"I like my hair."*

General 'looks' or prettiness emerged as another common theme:

Participant 3: *"People say that I look very pretty..."*

Participant 5: *"I have good looks"*

Participant 12: *"I really like my looks..."*

Some of the participants felt they had many positive attributes and felt generally very happy with their bodies:

Participant 7: *“...I’m just perfect I just know that I am me and I am perfect. That’s how I feel about myself even though I know I am not...”*

Participant 10: *“But I am happy with my body... I like it the way it is”*

Participant 11: *“Well, first of all my hair, because it’s so wavy...eyes, my legs...My eyes are a nice colour, they change colour in whatever mood I am. When I am really happy they go in like a rainbow colour. What I like about my legs is that they are not too big or not too small. They are just right and I have got enough muscle. I don’t like my arms because I have scars and everything on them, but I do like my hands because they are very free and they like doing what they want, like every time I talk they do little actions. I also like the nails because you can paint them.”*

While it was difficult for some of the girls to say what they do like about their body, it was very easy for them to say what they do not like about their body. Every participant had something they did not like, even those who thought they were perfect and those who had nothing positive to say about themselves:

Participant 1: *“Um ... my legs...They are all ploppy.”*

Participant 2: *“Um...I go skew teeth ....um.”*

Participant 3: *“Well I’m fat and when I get clothes sometimes they don’t fit me.”*

Participant 4: *“My legs. I’ve got my dad’s legs, and that sucks... Thick and chunky when I am older”*

Participant 5: *“I wouldn’t mind being a bit shorter...”*

Participant 6: *“My belly...My mom told me when I was born the doctors cut my belly wrong so then it’s a bit sticking out.”*

Participant 7: *“Sometimes I am a bit naughty, and sometimes once in a while I get pimples.”*

Participant 8: *“I think my waist is too big and my shoulders, my feet, I think are bigger than normal, and ya.”*

Participant 9: *“I don’t like my nails- they’re wicked... like randy and stuff, I don’t know how to describe it.”*

Participant 10: *“I used to have acne.”*

Participant 11: *“I don’t exactly like my back and this part over here (sides of her torso)...Ya, I feel fat, that’s how I feel, I feel really big, I feel other people are really skinnier than me but my parents say I am actually the right size because when you get sick you do need a bit of body fat to help you.”*

Participant 12: *“Um... I get a lot of pimples on my body mostly. Sometimes my skin is sensitive so even if I bump it, it will make like a bruise.”*

This section has shown that these girls feel uncertain about what they like about their bodies, but they are sure about what they do not like. Three of the twelve participants could not give a single thing they liked about their bodies. In contrast, some of the girls had many positive things to say about their bodies. However, when they were asked what they do not like about their bodies, every participant had something to say without hesitation or reluctance. This seems to show that it is easier and more acceptable for them to admit that they do not like their bodies. This seems to correspond with the idea of normative discontent (Markey & Markey, 2005).

To further confirm this, Participant 3 was questioned further about her understanding of being ‘fat’:

Researcher: *What does being fat mean?*

Participant 3: *Overweight.*

Researcher: *Ok, what is the correct weight for your height? Do you know what you weigh? You don't have to tell me.*

Participant 3: *No I don't, but I know I'm overweight.*

This conversation appears to show that she is discontent with her looks but in an abstract way. She does not have a goal or a plan, just a vague notion that things will change when she gets 'older'. This seems to show that she has introjected the belief that she is overweight because she has not really considered what it means. She appears to have assimilated this belief and made it part of herself.

Participant 9 related what she liked her body but she appeared to be shy:

Researcher: *"Ok, what do you like about your body?"*

Participant 9: *"I like my hair, my hair is pretty ya, that's all I like about myself. And my personality."*

Researcher: *"You look a bit shy when I asked what you like about yourself. Is it hard to tell me what I like about myself?"*

Participant 9: *"Yah, not really but I don't think too much about myself."*

Researcher: *"Why?"*

Participant 9: *"Cause like I know people that have a big ego and they are not very kind and stuff and just think about themselves."*

This, perhaps, adds to the conflicting messages that girls are getting and therefore their conflicting feelings. They must be proud of who they are, but if they are proud, they are perceived as being vain.

## **5.6 Hair**

Hair has been a common theme in the interviews. All the participants spoke about their hair and it was a part of their bodies that they often liked. Hair is mentioned in other contexts as well:

- Researcher: *“Ok, how do you take care of your body?”*
- Participant 1: *“Quite well – like when I bath I have to wash every part. The most I take care of is my hair.”*
- Researcher: *“In what way?”*
- Participant 1: *“Like I always brush it. Basically every day I wash it. It’s never knotty.”*
- Researcher: *“What are you concerned about? Is it the way it looks or feels, or if it’s clean?”*
- Participant 1: *“The way it looks and if it’s clean? I don’t care about the way it feels.”*
- Participant 2: *“I wear my hair down [for shul].”*
- Researcher: *“And you like to wear your hair down? – Why?”*
- Participant 2: *“I think look nice and... um... I’ll put it up if I feel like it.”*
- Researcher: *“Sounds like you’re proud of your hair.”*
- Participant 2: *“Yes.”*

This conversation indicates that hair is important for the participants. The definition of body image that is used in this study includes people’s perception about their own body: their personal, psychological image of its shape and size (Garner, 1997). This study has shown that girls view their height and hair as an integral part of their bodies, and it appears that, for most girls, their hair contributes positively to their body image. This may be because it is relatively easy to change the styling thereof and therefore to conform to ideals.

### **5.7 Caring for the body**

The participants were asked ‘What do you do to take care of your body? (The researcher suggested eating, exercising or relaxing)’. This revealed what they thought they could manipulate and an aspect of their body that they felt was important. These form 3 broad areas themes which emerged fairly often- exercising, hygiene and moisturising and beauty treatments.

### 5.7.1 Exercise

The participants often used exercise as a way to look after their bodies:

Participant 1: *“...sometimes I put on weights on my arms and I box. At school we have to do jumping jacks. I do the most in the class and I sometimes do weights with my arms and stretch...I like boxing because when my brothers fight me I can... but they don't really fight me a lot... and, I don't know, just to be strong.”*

Participant 3: *“I do a lot of exercising. I do swimming. It relaxes me...and I'm good at it. I'm fast. I do it at school*

Participant 5: *“I do quite a bit or sports. Now that summer is here again I will probably do quite a bit or bike racing with my friends and nothing extreme competitive, just in my street 'cause its closed off... I also do horse riding and I do chess and hip hop and I am going to do swimming again now 'cause its summer again and I am also doing cubs...”*

Participant 7: *“ Usually I love bicycle riding and I learnt that it is a good way to exercise so usually when I get home every day, cause from school I go to madresah and I get home it's like 4 o'clock, so then I go bicycle riding then I changed and all that and then at about 5 I do my homework for about 2 hours and at about 7 I eat supper and go to sleep.”*

Participant 8: *“I just started swimming every day and I do gym and I do lots of sports. I do netball, I do swimming at school as well and sometimes I do tennis. I do do sports. I enjoy swimming a lot, netball is fun and I am good and it's nice to be around your friends and play with them, ya.”*

Participant 9: *“Yah, I exercise at gym every morning...”*

Participant 11: *“Yes, I love doing exercise, I run, I do stretching*

Participant 12: *“...once a week I go to the gym. I do sport...”*

The reasons given for these girls to do sports is because it is ‘fun’, ‘relaxing’, because it is ‘nice to be around your friends’ and to be ‘strong’. The reason for participating in sport is not to change their physical appearance as some people do (Garner, 1997:19).

### 5.7.2 Hygiene

Some of the participants viewed cleanliness as an important part of looking after themselves:

Participant 1: *“...when I bath I have to wash every part. The most I take care of is my hair...Like I always brush it. Basically every day I wash it. It’s never knotty. [I like] The way it looks and if it’s clean. I don’t care about the way it feels... I [also] put on deodorant every morning.”*

Participant 4: *“Usually after every sport I shower...Just to wash off all the sweat and stuff”.*

Participant 6: *“I wash myself with special soap and I always put deodorant after washing myself and when I go to parties I put deodorant and perfume.”*

These observations were spontaneously mentioned by these participants as no suggestion was given. There is also no mention of it in the literature. This is important, and the implications of this will be discussed in the fourth chapter.

### 5.7.3 Moisturising and beauty treatments

Some of the participants put cream on their bodies:

Participant 2: *“I do put cream on my hands and I want them to be soft.”*

Participant 12: *“...I put cream at night all the time. I take good care of my body”*

Others have massages or other treatments for their bodies:

Participant 9: “... *on the Sunday I do a skin treatment. I cleanse my skin and have like a facial and stuff, ya, every Sunday I go for massages and stuff.*”

Participant 10: “*Yah, well, um once in a while I go for a massage and then I have an apple, like it keeps me going.*”

Participant 11: “... *I also like treating my body I use a Clinique herbal cream and body gel, you rub the cream and then you rub the herbal gel, and it smoothens your skin and it has SPF for the sun and then you get for the winter...*”

The above was also spontaneously mentioned by the participants and, again, there is no mention of it in the literature. This aspect is thus important for the girls but has been overlooked by researchers.

This section has shown that the participants view exercise, hygiene, moisturising and beauty treatments as ways to look after their body. They do not do these things to necessarily change their appearance, but rather for a variety of reasons that include having fun and for relaxation. The literature mentions exercising as a method for weight control but does not mention the impact of hygiene, moisturising and beauty treatments on body image. This research, however, has revealed that these things may be valuable components of body image.

## **6. Conclusion**

This study has used a qualitative, basic, descriptive design. Chapter 3 has given a detailed account of the framework of the study and the methods of data collection and analysis.

In analysing the findings of transcribed semi-structured interviews, 5 broad themes have been found. The participants mostly describe themselves in terms of

personality attributes, and mostly positive attributes. Some of the girls feel that they compare well to their ideal women, and some compare badly. However, there are a lot of ambiguous feelings about their body. They also struggle to like their bodies, but appear to find it easier to express their dislike of certain aspects.

# **Chapter 4: Conclusion and Recommendations**

## **1. Introduction**

Throughout time, the body has been the focus of much debate. Its connection to or distance from the self has been a contentious issue. The current movement is towards the belief that the body is a reflection of the self (Hancock *et al.*, 2000: 1-7). Appearance represents morality, intelligence and virtue (Fox, 1997). Therefore, people strive for a perfect outward appearance to represent their perfect inward self. Women are specifically targeted with this message because of the cultural practice and subtle ideology of women as weak and inferior (Shilling, 1997: 83-84). The media promotes this too by exhibiting women who have a, culturally defined, perfect exterior (Fox, 1997). However, the impact that these messages have on young girls' body image is not fully understood.

Erik Erikson argued that identity develops throughout a person's life, but that individuals tend to struggle with it most during adolescence (Smith & Cowie, 1991: 223). The goal, after much experimentation, is to become an individual with a clear sense of self. Due to their age, the children in this study are likely to be beginning to negotiate the obstacles around puberty.

This study has been conducted in an attempt to understand how South African girls, who are beginning to navigate around their identity, experience and interpret messages that they receive about/on the female body.

## **2. Aims and Goals Revisited**

The aims and goals are revisited to see if the research achieved what it set out to accomplish.

In this research, the goal was to explore body image in preadolescent girls in order to determine their attitudes and feelings about their body.

The objectives that followed from this were:

- To explore literature on the female body and the construction of body image within society. Also, to explore developmental theory on preadolescent girls based primarily on Erikson's developmental stages and to gain an understanding of self and identity through Gestalt theory. These 3 topics were thoroughly explored and discussed in Chapter 2.
- To collect data through semi-structured interviews with a sample of preadolescent girls in order to transcribe and analyze.
- To analyze the data by means of a framework applicable for the analysis of qualitative data.
- To verify and interpret the research findings and describe them according to existing literature. Analysis and interpretation of the findings were discussed in Chapter 3.
- To make recommendations for future research for gender and body image researchers as well as therapists who may be working with young girls and eating disorders. Recommendations and suggestions for further research have been discussed in this chapter.

This research has achieved its objectives and therefore, the aim to explore body image in preadolescent girls has been accomplished by determining their attitudes and feelings about their body.

### **3. Summary of Findings**

A detailed discussion of the findings can be found in Chapter 3 where the transcribed interviews were analysed and examined. This summary is presented so that the reader can easily see how the recommendations and suggested areas for further research are reached.

- The first idea that emerged was the way that the participants' viewed themselves and the way they felt they were viewed by other people. This revealed three main areas:
  - physical attributes
  - skills and abilities
  - personality attributes

The physical descriptions were often based on their height and hair. The majority of descriptions were based on personality attributes most of which were positive. This section indicated that the girls took pride in what their bodies can *do* and that their abilities and personality attributes are seen by the participants as part of their self and part of their body image.

- The participants' identities were revealed through language. The participants often identified themselves within their families and within their religion. Distinctive 'girly' behaviours, such as fashion and makeup, were seen as positive and identified with or they were perceived as negative and then rejected.
- The participants' perceptions of their real selves were compared to their perception of the ideal woman. The results were mixed; some girls had already met that ideal while others did not. The ideal was quite diverse with a variety of attributes and behaviours being aspired to. Cleverness, caring for oneself, being a mother, general prettiness, thinness and confidence were goals that were mentioned. This showed that some girls highly value their looks and weight, while others value and aim for other traits.
- Many of the participants made contradictory statements. This appeared to indicate confusion and conflict within the girls about the value of their bodies and the value of positive behaviours.
- The participants' likes and dislikes were compared and it was found that many of the participants were unable, unwilling or too shy to say they liked a

part of their body. However, all the participants expressed what they did not like about their body without difficulty. This indicated that it was more acceptable to say you did not like your body and it reinforced the literature on normative discontent. It showed there may be further conflict within the participants when admitting that they liked a part of themselves made them appear vain.

- The participants' concern with their hair emerged as a strong theme throughout the interviews and across all sections and themes. It seems that the girls view their hair as an important part of their appearance. It was always mentioned positively and was therefore, concluded that hair contributes to a positive body image.
  
- The last theme that was analysed was the way the participants took care of their bodies. This section was divided into 3 subsections:
  - Exercising
  - Hygiene
  - Moisturising and beauty treatments

The participants took care of their bodies because they enjoyed doing so and found it was relaxing. These subsections may be valuable components of body image and it reveals ways to positively manipulate body image.

From the findings one can conclude that body image, at this age, has certain positive aspects, but there seems to be confusion about the way girls feel about themselves. There may be other components, such as the abilities and religion, which may influence body image and has thus far gone unnoticed. Thus the definition of body image also needs to be revisited.

#### **4. Recommendations and Suggested Areas for Further Research**

From the findings, the following recommendations and areas for future research can be indicated:

- The definition of body image that is used in this study includes an people's perception about their own body: their personal, psychological image of its shape and size (Garner, 1997). However, this study has shown that:
  - The definition of body image needs to be reconsidered to include, not only what a person thinks they look like, but also what they believe their body can do.
  - Girls view their hair as an integral part of their bodies, and it appears that, for most girls, their hair positively contributes to their body image. It may be because hair is relatively easy to change and therefore to conform to ideals. The researcher has found no reference to this in her research and so it seems that this aspect of body image has been neglected and may, therefore, be an area for further research.
- O'Dea and Abraham (1999: 671) and Sherwood (2001) argue that *intervention programmes* should start in early puberty. However, this study indicates that it might be beneficial to start intervention programmes even earlier. The girls in this study receive and internalise messages about their body and this is when negative messages should be counteracted.
- The *role of religion* in body image may have some impact on body image, and would therefore be an area for further research. Many religions have guidelines about behaviour and dress. They may also have views on the role of the body that might influence followers' view of their body. This aspect

could possibly be researched further/ is also recommended for further research.)

- The two participants who were most concerned with their weight were also very concerned about ‘being confident’ and both ideas of *thinness and confidence* permeated their interviews. This indicates that there might be a connection, or perceived connection, between the two. The possibility exists that these girls view being thin as a means to feeling good about themselves and that is what they really want, not necessarily the thinness. Should they see women who are larger but still confident, it would create the same sense of envy and conformity. This may be an area for further research.

## **5. Limitations**

The study may have had the following limitations:

- The sample was obtained in Gauteng, South Africa and therefore, the *transferability* of the findings may only be generalised to that population. Transferability refers to the ability of qualitative research to generalise its findings to other populations, and settings (De Vos, 2002: 352).
- The interviews are likely to have suffered the from *researcher effects*. This is described by Breakwell (2003: 247) as characteristics of the researcher that influence the way the participant responds to the interview. Gender, age, dress, demeanour can influence a participant’s response. The nature of the interview process for this research lends itself to this particular limitation. Therefore for this research, researcher effects may have influenced the participant’s responses. However, this limitation can be partially eradicated by having the same person conduct all the interviews which was the case in this research (Breakwell, 2003: 248).

- The interview was a *self-report method* and therefore relied on the participants being honest and accurate. However there is no way to know if this is the case. Breakwell (2003:247) lists numerous reasons that a participant might be dishonest. Examples that are possibly relevant for this research is that the participant may dislike or distrust the researcher or be too embarrassed to tell the truth. In this research all the participants only met with the researcher at the interview. It is possible that the participants did not feel they had a relationship with the researcher where they could comfortably divulge information that they felt was personal or embarrassing.
- In line with the Gestalt view of the *field*, each person is affected by his/her environment (Yontef, sa), and therefore the responses may have been influenced by factors that the researcher was not aware of.

## **6. Conclusion**

This research has shown that the current definitions of body image are limited and that there are other factors which contribute and affect people's perception and psychological experience of their body.

The research has also revealed that there is conflict within preadolescent girls about the mixed messages they are receiving from their environment. Young girls are systematically being taught to find fault with. The result is that they are likely to grow up to be women with normative discontent. The literature has shown that bodies represent the self and so it appears as though girls who are learning to hate their bodies are learning to hate themselves and this is being encouraged by contemporary ideology.

Dissatisfaction with one's body can lead to negative affect, eating disorders, anxiety, depression, low self-worth, low self-esteem. Therefore, it is imperative that at risk girls are identified as early as possible and that they receive intervention. However,

this is a problem which underlies modern culture and affects many women, and so, ideally, a cultural shift needs to take place.

As a final thought, this poem, by Eloise Klein Healy (2005: 444), is presented.

For The Girl Child

She who was told *smaller* and *smaller*,  
told *less* and *quiet*,

told to change or be changed-  
she has stood by her own side

the whole time it has taken  
to break the telling

and its iron hold over her muscles,  
to heal the strain

and the strangeness  
of her own disavowed body.

See now she has grown stronger  
than the strength it took  
to keep her small.

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# **Appendix I: Information Sheet and Consent Form**

## **Body Image in Preadolescent Girls**

My name is Kyla and I am doing my Masters degree in Play Therapy. As part of my degree I am required to do a thesis. I am interested in how young girls feel about their body. The study is for girls aged 9 to 12 years old, and it will take approximately half an hour. In this time, I will ask them to draw a picture and then we will discuss the picture and I will ask some questions. The interviews will be taped with a Dictaphone.

If you agree to this, please fill in the consent form and send it back with your child. I will then contact you to discuss the research with you. It has been arranged with the school that I will meet them during the day at a time that does not affect their school work.

I do not believe the study will do any physical or emotional harm, and it will be conducted with sensitivity. However, if necessary I will use my skills as a counsellor and a training Play Therapist to debrief the participants.

Please note that confidentiality is of utmost importance, the names of your children will not appear in the study. As well, you and your child have the right to withdraw at any stage without any negative consequences.

When the study is completed, you have the right to get feedback and, if you request it, a copy of the research.

Please feel free to contact me if you have any questions.

Regards,

Kyla Maimon (0823469635)

**Informed Consent**

I hereby give consent that my child can be included in this research. I understand that my child will be invited for an interview during which questions will be asked regarding her behaviour, as well as herself as a person. I give my consent that my child may be interviewed. I understand that his input during this interview will form part of this study.

I understand that my child will be interviewed for the time it takes to answer the questions which will be approximately half an hour. My child will be advised of the time of the interview and the interview will be scheduled at her and your convenience. I understand that the interview with my child will be recorded on a Dictaphone. The records will be kept in a safe place and used only for the purpose of the research by the researcher. I understand that records will not be used to victimize my child in any way or to use as evidence in a court of law.

**Risks and discomfort**

I understand that there are no known medical risks or discomforts associated with this study. My child will get ample breaks, if needed, during the interview.

**Benefits**

I understand that there are no direct benefits for my child for her participation in the study. However, the results of this study may lead to further understanding in the area of body image.

**Participation rights**

I hereby indicate that my child will participate in this study voluntarily. I understand that she has the right to withdraw at any stage.

**Confidentiality**

I understand that the researcher will protect the anonymity of my child and that all information will be kept strictly confidential. If there is any personal information

that the researcher would like to reveal, she will have to get my permission, as well as that of my child beforehand. The results of this study may be published in professional journals or presented at conferences. However, the records of my child, as well as her identity may not be revealed at all. If I have any questions or concerns, I will call Kyla Maimon Edinburg on 0823469635.

**Financial compensation**

I understand that my child will not receive any compensation for participating in this study.

**By signing this consent form, I confirm that I have read it and fully comprehend what is expected, as well as that the study has been explained to me. I do not violate any rights by signing this consent form.**

**Name of Child:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Parent/Guardian:** \_\_\_\_\_

**Contact Number:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## **Appendix II: Question List**

- Ask them to draw a person, and generally discuss it, focusing and elaborating on areas related to body image.
- How would you describe yourself?
- How would people describe you?
- What do you like about your body?
- What do you not like about your body?
- How do you take care of your body? (Do you eat certain things? do you exercise? how do you relax?)
- What is it like when you eat together as a family?
- What is a woman?
- What do you think when you see women in magazines or movies?
- Who is your favourite movie star?
- What do you like about him/her?
- What do you think or do when you see another girl who is overweight?
- What would you like to be when you grow up?
- Is there anything else you would like to add?
- What was this experience like for you?

