BODY DISSATISFACTION – IS AGE A FACTOR?

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Abstract. Body dissatisfaction can be defined as a perceptive component of body image, as a difference between ideal body and a current body size. Body dissatisfaction is present not only in women who have eating disorders but in non-clinical population as well and to such extent that many American psychologists consider it a normative aspect of women's identity. The goal of this study was to investigate the presence of body dissatisfaction in non-clinical population of women in Bosnia and Herzegovina and to determine the differences in the level of body dissatisfaction between younger and mature women. It was predicted that body dissatisfaction would be present in women regardless of their age and that young women would demonstrate higher levels of body dissatisfaction than older women. 215 women were divided into young (≥25) and mature (≤40) groups and completed Stunkard's body figure rating scale and a demographic questionnaire. Results were consistent with the hypothesis. Women showed body dissatisfaction while age showed to be a significant factor. Socio-cultural perspective on body dissatisfaction was used in discussing the results.

Key words: body dissatisfaction, body image, ideal body, thinness, body type.

INTRODUCTION

Body dissatisfaction can be defined as a perceptive component of body image, as a difference between ideal body and a current body size (Thompson, 1990: 2). Body dissatisfaction has been an issue not only for women who have eating disorders but also for non-clinical population as well and to such extent that many American psychologists consider it a normative aspect of women's identity (Rodin et al, 1985: 267). Although there are many theories about the dynamics of developing body dissatisfaction, most psychologists would agree that it is connected to a culturally defined standard of beauty or ideal of beauty. This ideal is, especially in western countries, often nothing more than a pathologi-
cal tendency towards thinness (Garner, 1997: 36). Studying age as a factor in body dissatisfaction, researchers noticed two trends – that young women show more body dissatisfaction and that body dissatisfaction is equally present but that women react to it differently depending on their age. Although it is mentioned in the literature as a phenomenon, higher body dissatisfaction in young women has been described in only a few published studies. In one such study, 180 women aged 20 to 50 were asked questions about their body image and their level of body dissatisfaction. Stevens and Tiggemann (1998: 98) noticed lower levels of body dissatisfaction in middle-aged women, especially those older than 40. Similarly, Lamb and colleagues (1993:350) studied attitudes about body and level of body dissatisfaction in two groups of women – a group younger than 20 and one older than 40. As they expected, both groups showed body dissatisfaction, although young women chose smaller body figures as ideal than mature women. In addition, younger women were more dissatisfied than the older women. Except for these studies, most published papers indicate the presence of body dissatisfaction in women of all ages regardless of their marital status, level of education and profession.

The goal of this study was to investigate the presence of body dissatisfaction in non-clinical population of women in Bosnia and Herzegovina and to determine the differences in the level of body dissatisfaction between younger and older women. It was predicted that body dissatisfaction would be present in women regardless of their age. In addition, it was assumed that young women would demonstrate higher levels of body dissatisfaction than older women.

**SUBJECTS AND METHODS**

Our study included a total of 215 women from Tuzla Canton, 85 of whom were older than 40 while 128 were younger than 25. Age ranged from 17 to 60, with a mean age of 32.63 ±16.63. The most common age reported was 19. Participants reported a variety of educational backgrounds, including completion of elementary school (51%), high school (77.2%) two-year college (7.4%), university (8.4%) and master's degree (1.9%). Participants' scores on the body-mass index (BMI) ranged from 15.50 to 36.70 with an average score of 22.36 ± 3.72.

The subjects completed Stunkard's body figure rating scale (Stunkard et al, 1980: 116) to measure the level of body dissatisfaction and a demographic scale, which was created for this study.

Stunkard's body figure rating scale consists of 9 silhouettes, which progressively change from extremely thin to extremely fat with figure 3 or 4 that show endomorphic-muscular type of body. Each figure is marked with a number from 1 to 9. Participants were asked to choose a number, figure, which most closely matches their own body, figure which they wish to have and the one they consider ideal in their country. The level of body dissatisfaction was figured as a difference between the ideal and the current body figure or country ideal and the current body figure. This instrument has reliable test-retest values of 0.71 to 0.92 and an adequate constructive validity (Thompson & Altabe, 1991: 617).

Demographic questionnaires consisted of questions about height, weight, place of living and level of education. BMI was calculated using data about height and weight.

The subjects completed questionnaires during a psychology class at the University of Tuzla and at local institutions (bank, public health center, elementary school). All partici-
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pants were notified of anonymity and confidentiality and that they were allowed to discontinue at any time, should they not feel like continuing. Additionally, they were told that they could speak to the researcher about the meaning of their answers in general.

After all questions were answered, participants received packets of questionnaires. Upon filling them out, thirteen women were interested in the meaning of their answers, while only one woman reported feeling upset. The researcher talked to her for about twenty minutes and gave her the phone number of a clinical psychologist that she had previously contacted.

RESULTS

Paired samples t-test was conducted with "current body type" and "ideal body type" as the within factor. A significant difference between body types was discovered (p < 0.001). Bosnian women perceived their current body type (3.87 ± 1.29) to be larger than their perceived ideal body type (3.38 ± 0.89) (see figure 1 and 2). In addition, paired samples t-test was conducted comparing women's "current body type" and "country ideal body type". Once again, significant differences between body types were detected (p < 0.001). Women perceived their own figures (3.87 ± 1.29) to be larger than their perceived country ideal (3.20 ± 0.89) (see figure 3). Significant differences were detected between two ideal body figures (p = 0.003). Women perceived their ideal body type (3.38 ± 0.89) to be larger than their country ideal body type (3.29 ± 0.89). Hence, participants selected smaller body figures when choosing either of the ideal body types than when choosing the figure that resembled their own body. Additionally, women considered the ideal body type in Bosnia to be smaller than their own ideal body type.

Fig. 1. Women's perception of current body type using Stunkard's body figure rating scale
In addition to these analyses, Kentall's Tau correlation method was used to determine the correlation between ideal body figure (personal ideal) and current body figure ($r = 0.605$). Precisely, women who perceive themselves as bigger showed a tendency to see their ideal as bigger. Results were similar when using "ideal in your country" ($r = 0.291$).
For subsequent analyses, body dissatisfaction scores were used representing the difference between an individual's current body type and their ideal body type. This was calculated by taking the score from personal ideal body type for each participant and subtracting their responses from personal ideal body type. Both of these questions have response options on a 1-9 scale, where higher scores coincide with bigger bodies.

Hence, for the resulting body dissatisfaction variable, higher scores would indicate that participants viewed their own bodies as larger than they would like, and lower scores would indicate that their bodies were smaller than they would like. In addition, second body dissatisfaction score was created using the same method, but substituting country ideal body type for personal ideal body type. These two body dissatisfaction scores will henceforth be referred to as "personal ideal" and "country ideal".

The difference in body dissatisfaction between young and mature women

One-way ANCOVA was conducted with the age category (young vs. mature) as independent variable, BMI as a covariate and body dissatisfaction (personal ideal) as a dependent variable. The preliminary analysis of homogeneity of slope was conducted and it was established that BMI did not influence differently young and mature women in determining their level of body dissatisfaction \((p = 0.78)\). Then, the results of ANCOVA tests showed statistically significant effect for the category of age \((p = 0.003)\). Taking a covariant in consideration, young women showed significantly more body dissatisfaction \((0.65 \pm 0.7)\) than mature women \((0.21 \pm 0.10)\). In addition, one-way ANCOVA test was conducted with country ideal as an independent variable. Preliminary analysis showed that BMI did not influence differently young and mature women \((p = 0.336)\). The ANCOVA results indicated significant effect for the category of age \((p < 0.001)\). Regulating a covariant, young women demonstrated higher level of body dissatisfaction \((0.89 \pm 0.09)\) than mature women \((0.17 \pm 0.14)\). As it was predicted, body dissatisfaction was more present in young women.

**DISCUSSION**

As we expected, body dissatisfaction is present in women from Bosnia and Herzegovina. They perceived their bodies as larger than their ideal bodies. These results are consistent with a trend which is rapidly spreading around developing countries. Participants also described the country ideal as thinner than their bodies. Therefore, body dissatisfaction is present in Bosnian women regardless of whether it was defined using personal ideal or country ideal. When two ideals were compared, personal ideal appeared much larger than the country ideal. It seems that Bosnian women, although dissatisfied with their bodies, are able to some extent to differentiate between that which they are trying to achieve and that which is pushed on to them as the ideal in their country. It is possible that when they were asked for personal ideal, women gave the real picture, picture of body which they would like to have, while for a country ideal they gave a picture of the body which they think others see as an ideal (taking in consideration opinions of other women, men, images from magazines, TV etc.).
Many studies have shown body dissatisfaction to be so present in women of all ages even to be a part of women's identity (Sanders, 1998: 20; Lee & Lee, 1996, 180; Mukai et al, 1998: 758). Although there is little evidence about differences in the level of body dissatisfaction between young and mature women in current studies, we assumed that young women would show more body dissatisfaction than older women. Most studies on this topic were done in western countries where obsession with physical appearance has been present quite longer than in Bosnia and Herzegovina. Mature women in western countries grew up with a pressure to achieve an ideal body, which even in their time was very thin. On the other hand, older women from Bosnia and Herzegovina did not have such experience, at least not to such an extent.

As we expected, young women showed much higher level of body dissatisfaction than older women. In order to determine that body dissatisfaction is not a reflection of higher body weight in older participants, we used BMI. This means that keeping body weight constant, young women were more dissatisfied with their bodies than older women.

It is possible that older women define their ideals more realistically than young women because they do not identify with models as symbols of beauty and fashion to such extent. These models are not similar to them considering either age or life style. Additionally, middle aged women are focused on taking care of others and transferring experiences, knowledge and abilities onto younger generations (Fulgozi, 1985: 136). Possibly, this focus "away from the self" influences the way older women perceive their bodies. In other words, that the importance of physical appearance is marginal to them while the care of others is primary. On the other hand, the period of adolescence requires combining personal capabilities and characteristics with different and unmerciful demands of society. This process makes young women more prone to the influence of the media and trends which present ideal bodies women are supposed to have in order to feel attractive.

Even if they take in account the ideal forced by the media from their time, older women in Bosnia and Herzegovina are in a much better position than younger women because the ideals of their time were much more realistically defined and easier to follow than the ideals which younger women have today.

**CONCLUSION**

Bosnian women demonstrated body dissatisfaction regardless of the way it was defined, through personal or country ideal. In addition, they defined country ideal as smaller then their own ideals. Comparing young and mature women, it was noted that young women showed much higher level of body dissatisfaction than mature women. A more precise picture of the body dissatisfaction problem and its relationship to other mental health problems would be drawn if similar studies included young and mature women from all regions of Bosnia and Herzegovina.
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Ključne reči: nezadovoljstvo telom, bodi imidž, idealno telo, mršavost, telesni tip