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Reciprocal relations between body satisfaction and selfesteem: A large 13-year prospective study of adolescents[★]



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ABSTRACT

Previous research has demonstrated that body satisfaction and self-esteem are highly correlated in adolescence, but reasons are poorly understood. We tested three explanations: (i) the two constructs are actually one; (ii) the correlation is explained by a third factor; (iii) there are prospective relationships between body satisfaction and self-esteem. A population based sample of Norwegian adolescents (n = 3251) was examined four times over a 13-year period. Confirmatory factor analysis showed that body satisfaction and self-esteem were separate constructs and the correlation between them was not attenuated when adjusting for 3rd variables. Autoregressive cross-lagged analysis showed reciprocal relations between body satisfaction and self-esteem. The prospective relationship between body satisfaction during adolescence and self-esteem in late adolescence and emerging adulthood was stronger than at later stages.

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Self-esteem may be conceived of as the overall evaluation of oneself as a person. Apart from being important in its own right, positive self-esteem has implications for a multitude of outcomes, including academic achievement (Huang, 2011), education and income (von Soest, Wichstrøm, & Kvalem, 2015), well-being (Kong, Zhao, & You, 2013), and depression (Kong et al., 2013). Hence, determining what leads an individual to construe or develop poor self-esteem may have important implications for prevention. According to a domain-specific view of the self, different sub-domains may have differential effects on the construction of one's overall self-esteem. Cross-sectional analyses have found that evaluation of one's physical appearance is highly related to global self-esteem, i.e. correlated in the range of .45—.75 during adolescence, as shown by studies from Western countries (van den Berg, Mond, Eisenberg, Ackard, & Neumark-Sztainer, 2010; Donnellan, Trzesniewski, Conger, & Conger, 2007; Wichstrøm, 1995a) and Asia (Chen, Fox, Haase, & Ku, 2010). Moreover, when the contribution of multiple domains is considered, body satisfaction has the largest contribution, by far, to the variance in self-esteem among adolescents (Wichstrøm, 1998) and young adults (Donnellan et al., 2007). These findings are corroborated by other research on the relationship between self-esteem and body dissatisfaction (van den Berg et al., 2010) and perceived obesity (Perrin, Boone-Heinonen, Field, Coyne-Beasley, & Gordon-Larsen, 2010). Body dissatisfaction is, however, an important outcome in its own, as it is related to a wide range of negative outcomes including depression and disordered eating (Ferreiro, Seoane, &

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Senra, 2014). What may account for this very strong correlation between self-esteem and body satisfaction, and are these correlations stronger in adolescence compared to older age groups? These are the principal questions driving the present research, which may important implications for prevention as well as our understanding of how self-esteem and its subcomponents interact over time. We consider three possible explanations.

Explanation 1: construct unity

First, self-esteem and body satisfaction may not be separate constructs. Although the seminal work of Harter and Marsh propose that self-esteem is a higher-order construct relative to body satisfaction (Harter, 1982; HYPERLINKMarsh, 1990a, 1990b), empirically respondents may not make the distinction between "me" as a person and "me" as a physical body. Hence, the two constructs may not be empirically distinguishable. One way to determine whether constructs are distinct is to test whether they exhibit factorial validity, i.e., whether the two constructs separates into distinct factors when using factor analysis. Moreover, discriminant validity should be evident. We argue that body satisfaction should exhibit higher correlations than self-esteem with perceptions and measures relating to the physical body, such as body mass index (BMI), perceived obesity, and evaluation of body parts. In contrast, we would expect self-esteem to exhibit higher correlations with social support, peer acceptance, and attachment compared to the correlation of body satisfaction with these variables. Peer acceptance (Birkeland, Breivik, & Wold, 2014) and attachment to parents (Wu, 2009) have been found to be highly correlated with self-esteem. Although the relationships between such social factors and body dissatisfaction have been addressed to some extent, social support has often (Gerner & Wilson, 2005; Presnell, Bearman, & Slice, 2004), but not always (Stice & Whitenton, 2002), been found to be unpredictive of body dissatisfaction, whereas findings on the relationship between attachment to parents and body dissatisfaction have been mixed (Cheng & Mallinckrodt, 2009; Vincent & McCabe, 2000). Peer popularity, a construct closely related to peer acceptance, has been found to correlate negatively with body satisfaction, albeit to a modest extent (Rancourt & Prinstein, 2010). However, previous research has not directly examined the discriminant validity of self-esteem and body satisfaction by comparing the magnitude of the respective correlations.

Explanation 2: third variables are causing the association

Second, the correlation between self-esteem and body satisfaction may be spurious due to third variables. Here we consider depression, social acceptance, dissatisfaction with body attributes, gender, and body mass index (BMI). Depression during adolescence predicts poor self-esteem during young adulthood (Gayman, Lloyd, & Ueno, 2011), and depression also predicts body dissatisfaction in adolescents (Stice & Bearman, 2001). The sociometer model suggests that perceived social acceptance and self-esteem are highly correlated (Leary, Terdal, Tambor, & Downs, 1995), and additional evidence suggest that social acceptance also correlates with ratings of physical appearance (Vannatta, Gartstein, Zeller, & Noll, 2009). Perhaps not surprisingly, evaluation of body parts correlates highly with overall evaluation and acceptance of one's physical appearance (Tiggemann & McCourt, 2013). However, dissatisfaction with specific body parts also correlates highly with self-esteem (van den Berg et al., 2010), thus making it a likely candidate for confounding. For a long time, it has been acknowledged that adolescent girls have lower body satisfaction than adolescent boys (Wichstrøm, 1999), and this gender difference is also observed in adults (Gentile et al., 2009; Mellor, Fuller-Tyszkiewicz, McCabe, & Ricciardelli, 2010). From adolescence onwards, females have lower overall self-esteem than males (Gentile et al., 2009). Hence, it is possible that at least some of the correlation between body satisfaction and self-esteem could be attributed to gender. In a similar vein, BMI, which correlates with both body satisfaction (Lawler & Nixon, 2011) and self-esteem (Wichstrøm, 1999), could act as a confounder in the body satisfaction—self-esteem relationship.

Explanation 3: causal influence between self-esteem and body satisfaction

Third, the correlation may represent a causal relation, either unidirectionally or bidirectionally. However, most of the work on the associations between global self-esteem and sub-domains of self-esteem has been cross-sectional. However, eight prospective studies have been reported, where the initial level of the outcome has been controlled. Three of these studies addressed only one of the directions between self-esteem and body satisfaction. Johnson and Wardle (2005) and Donnellan et al. (2007) examined the body dissatisfaction → self-esteem relation in adolescents, whereas HYPERLINKPaxton, Eisenberg, and Neumark-Sztainer (2006) analyzed the self-esteem → body dissatisfaction effect. All three studies found support for the investigated relation. Taken together, these studies indicate a reciprocal relationship between body satisfaction and self-esteem. Barker and Bornstein (2010), Tiggemann (2005), Mellor et al. (2010), Morin, Maiano, Marsh, Janosz, and Nagengast (2011), and Park and Epstein (2013) analyzed both directions simultaneously. All but Mellor et al. and Park and Epstein (boys only) found evidence for a slight body satisfaction → global self-esteem relationship, but not in the opposite direction. However, all of the studies that have found potential reciprocal relationships have examined early or middle adolescents. It may be argued that the importance placed on physical appearance is especially strong during adolescence and that self-concept becomes increasingly differentiated with age, implying that domains other than body satisfaction may contribute to self-esteem in later years. Therefore, research is limited on how body satisfaction and self-esteem are prospectively related in late adolescence and young adulthood (Friestad & Rise, 2004).

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