



# Body satisfaction, thin-ideal internalization, and perceived pressure to be thin among Canadian women: The role of acculturation and religiosity



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## ABSTRACT

In an online study, 143 Canadian women of various religious backgrounds completed measures of acculturation, religiosity, body satisfaction, internalization of the thin ideal, perceived pressure from media, and manner of dress. Heritage acculturation correlated with appearance satisfaction, but not weight satisfaction. After accounting for BMI and social desirability, higher heritage acculturation and lower mainstream acculturation were associated with lower perceived pressure from media. Thus, heritage acculturation across religious denominations may serve as a buffer against appearance dissatisfaction and perceived media pressure. Manner of dress among the Muslim subgroup and its relation to religiosity and acculturation were also assessed. Muslim women who dressed in greater accordance with Islamic principles reported lower heritage acculturation and greater religiosity. Thus, Muslim women's manner of dress was related to their religiosity and the extent to which they embraced cultural values. These findings are discussed in terms of the possible distinctions between heritage acculturation and religiosity.

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## Introduction

Body dissatisfaction and internalization of the thin ideal predict future depressive symptoms (Stice & Bearman, 2001) and the development of eating disorders (e.g., Stice & Shaw, 2002) among female adolescents and young women. Understanding how various factors may contribute to body image and internalization of the thin ideal is therefore critical in understanding eating disorders and depressive symptomatology. Recently, studies have attempted to assess how religious identity, religiosity, and culture relate to body image and internalization of the thin ideal. One's *religious identity* refers to the system of belief an individual identifies with, while one's *religiosity* refers to the level of devotion an individual has to his/her religion (Mattis & Jagers, 2001). *Culture* is defined as "systems of knowledge, concepts, rules, and practices that are learned and transmitted across generations" (American Psychiatric Association, 2013, p. 749).

Existing research suggests that religiosity is a protective factor for body dissatisfaction and thin-ideal internalization (e.g.,

Homan & Boyatzis, 2010). More specifically, church attendance and religiosity are positively associated with body satisfaction among adults (Homan & Boyatzis, 2009) and negatively associated with body dissatisfaction among female adolescents and adults with bulimia (Smith, Richards, & Maglio, 2004). People who have more insecure attachments with God are more likely to report thin-ideal internalization (Homan & Boyatzis, 2010). Experimental studies also suggest that the presence of religion may reduce one's susceptibility to body dissatisfaction. For example, when women read religious statements after being presented with an image of a thin model, they reported higher levels of body esteem (Boyatzis, Kline, & Backof, 2007) and lower levels of body dissatisfaction (Bell, 2011) compared to individuals who did not read religious statements. It is of note that the aforementioned literature is based on samples that are largely composed of individuals of Christian denominations.

In terms of culture, a meta-analysis revealed that across 15 studies, individuals of ethnic and/or racial minority groups reported lower levels of body dissatisfaction than did White individuals (Wildes, Emery, & Simons, 2001). However, variations in adherence to cultural values and practices among individuals within ethnic and racial groups exist (Sue & Sue, 2008). Therefore, individuals' levels of acculturation should be assessed rather than conducting group comparisons, as was done in many of the studies included in the meta-analysis. *Acculturation* refers to the

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process of psychological, sociocultural, political, and economic changes in attitude and identity that occur when individuals from different cultures interact (Berry, 1997). Berry posited that immigrants' acculturation strategies can be conceptualized using two orthogonal dimensions: maintenance of the heritage culture and adoption of the mainstream/host culture. Thus, in Canadian immigrant populations, *heritage acculturation* refers to embracing the values and societal norms of the country from which the individual immigrated, whereas *mainstream acculturation* refers to embracing the values and societal norms of the country to which the individual immigrated (i.e., Canadian values and practices).

Mainstream acculturation is especially important to consider if the host culture emphasizes a particular physical appearance as ideal, as do Western countries such as Canada. For example, eating disorders have previously been described as Western culture-bound syndromes (Lai, 2000). Soh, Touyz, and Surgenor (2006) have suggested that "ethnic minority groups in [Western] countries have [a] lower risk of eating pathology [which] is possibly due to a lower level of acculturation to the mainstream society" (p. 56). In support of these propositions, Ball and Kenardy (2002) found that after accounting for body mass index (BMI) and socioeconomic status, mainstream acculturation, as measured by the number of years women had lived in Australia, significantly predicted body weight dissatisfaction among a sample of over 10,000 women. Similarly, mainstream acculturation positively correlated with body dissatisfaction among Mexican American women (Poloskov & Tracey, 2013). Women's levels of acculturation also may be connected to the extent to which they internalize and/or feel pressure to attain the thin ideal. For example, among ethnic minorities, women who endorse mainstream acculturation reported higher levels of internalization of the thin ideal (Garcia-Rea, 2006). Indeed, Poloskov and Tracey (2013) found a significant positive association between mainstream acculturation and thin-ideal internalization among Mexican American women. These findings are not surprising when considering the proposition that internalization of the thin ideal actually "represents a domain-specific manifestation of acculturation to dominant culture" (Tolaymat & Moradi, 2011, p. 384).

At present, there is limited literature addressing the role of religiosity and acculturation on body satisfaction and internalization of the thin ideal among Muslim women (e.g., Homan & Boyatzis, 2009; Sussman, Truong, & Lim, 2007). It is important to include this understudied population in research given that Islam is the fastest growing religion in Canada (Statistics Canada, 2011). Moreover, the findings based on previous studies including Muslim participants are mixed. For example, among Muslim women in Britain, the frequency and conservativeness with which women wore the religiously prescribed headscarf, referred to as the *hijab*, was positively associated with body satisfaction, and negatively associated with internalization of the thin ideal and perceived pressure to adhere to media beauty standards (Swami, Miah, Noorani, & Taylor, 2013). In contrast, a study of Muslim women in the USA found no significant associations between the frequency of hijab use and internalization of the thin ideal (Tolaymat & Moradi, 2011).

While these studies conceptualized the hijab as an indicator of religiosity, Dunkel, Davidson, and Qurashi (2010) noted that the hijab also may reflect maintenance of one's heritage culture. Dunkel et al. (2010) found that women who wore non-Western clothing with a hijab reported less pressure to adhere to and internalize the thin ideal, compared to those who wore Western clothing without a hijab, after controlling for BMI. However, in their critique of this study, Tolaymat and Moradi (2011) noted that while all of the participants who indicated wearing non-Western clothing with a hijab were Muslim, the majority of participants who indicated wearing Western clothing without the hijab were non-Muslim. This calls into question whether the effects found were actually due to manner of dress or religious identity (Tolaymat &

Moradi, 2011). Although this result may be confounded by religious identity, a study among solely Muslim women also found that women who wore the hijab had significantly greater body satisfaction, lower internalization of the thin ideal, and perceived less pressure to adhere to media's beauty standards than women who did not wear the hijab (Swami et al., 2013). Mixed findings also exist among studies that do not assess acculturation in terms of the hijab. For example, Mussap (2009a) found that mainstream identification positively correlated with body dissatisfaction among Muslim women, whereas Abdollahi and Mann (2001) found no differences between Iranian women living in Tehran and Iranian women living in Los Angeles in terms of their ideal weight and shape concerns.

The aforementioned studies exemplify a tendency to indirectly assess religiosity and/or acculturation among Muslim women by measuring the use of the hijab and/or the conservativeness of it (i.e., how much the headscarf covers), as opposed to focusing on other underlying factors. Fittingly, Swami et al. (2013, p. 9) have noted that, "while use of the hijab itself may offer protection against negative body image, it may also be a proxy for some other, unmeasured protective factor." Consistent with this proposition, the contribution of religiosity to body dissatisfaction among Muslim women was mediated by the use of modest clothing (Mussap, 2009b). That is, Muslim women who are more religious tend to dress more modestly which results in lower levels of body dissatisfaction, suggesting that clothing preferences may reflect Muslim women's level of religiosity. As such, further research is necessary to determine if these proxies are truly reflective of higher levels of religiosity. Overall, despite the use of proxies for religiosity in past studies, research on Muslim women appears to yield results that are consistent with findings among Christian samples. Thus, religiosity as opposed to religious identity may play a key role in predicting body image and internalization of the thin ideal.

## The Present Study

Generally, studies assessing acculturation suggest that adherence to either mainstream or heritage culture may have an important relation to body satisfaction and internalization of the thin ideal. Much of the literature on acculturation conceptualizes acculturation along a single continuum from being entirely accepting of the dominant culture to completely rejecting it (e.g., Garcia-Rea, 2006). Given that Berry (1997) conceptualized acculturation along two orthogonal dimensions, the extent to which one embraces his/her heritage should be assessed in addition to adherence to the dominant culture. As well, there is a need for more accurate measurement of acculturation as some studies use proxies (e.g., number of years living in a particular country) rather than validated measures of this construct. Thus, in the current study, religiosity as well as both heritage and mainstream acculturation were examined. Our first aim was to assess potential associations between (a) acculturation, religiosity, and religious identity and (b) body esteem, internalization of the thin ideal, and perceived pressure to adhere to beauty standards set by media. This aim was investigated by administering validated measures of these constructs to first and second generation Canadian women between the ages of 18 and 25. Women of all religions were included in the study given our interest in religiosity. Efforts were made to ensure Muslim women represented a substantial portion of the sample since they are often neglected in this area of research. Extant research has tended to examine the association between religiosity and body image and internalization of the thin ideal among Muslim and non-Muslim women independent of each other. However, given that Mussap (2009b) found no significant differences between the two groups' levels of body dissatisfaction, the extent of one's devotion to a particular religion could be assessed among people of varying religions within one study. To demonstrate that

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