# THE RELATIONSHIP BETWEEN DATING AND BODY IMAGE IN ADOLESCENCE

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# Title

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### **ABSTRACT**

During adolescence, individuals often experience dating for the first time, and negative body image as a result of increased socialization. In this study, we sought to investigate the connection between dating and body image among adolescents. A self-report questionnaire was given to 85 girls and 75 boys, and included measures of current dating status, desired dating status, drive for muscularity, drive for thinness, and body dissatisfaction. We found no significant relationships between dating status and body image for girls or boys. However, when examining the links between desire to date and body image, we found that girls who wanted to date had significantly higher levels of drive for thinness and body dissatisfaction than girls who did not want to date. It is likely that adolescent girls who are interested in dating have greater body image concerns because they want to appear thinner and more attractive to potential dating partners.

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#### INTRODUCTION

Adolescence is a period in an individual's life during which numerous cognitive, physical, social, and emotional changes occur (Natsuaki, Biehl, & Ge, 2009). One of the most monumental changes that takes place during adolescence is the beginning of dating behavior, or the romantic involvement with another person. Another common characteristic of adolescence is changes in body image, or the thoughts and perceptions of one's own body, which typically include concerns about thinness and weight loss for girls, and muscularity and weight gain for boys, due to social pressures (Ricciardelli & McCabe, 2002). Both girls and boys at this time are likely to experience body dissatisfaction, likely due to social pressures (Schooler, Impett, Hirschman, & Bonem, 2008). Furthermore, research findings have shown that many adolescents associate a thin body image with success in their dating relationships (Smolak, Levine, & Gralen, 1993). The purpose of this study was to thoroughly examine the relationship between dating behavior and body image in adolescent girls and boys. More specifically, we sought to determine whether body image, which includes a drive for muscularity, drive for thinness, and body dissatisfaction, differs among girls and boys who are dating versus those who are not. In addition, we sought to determine if body image differs among girls and boys who want to date versus those who do not.

#### Adolescence

Puberty is the most visible change that takes place during adolescence. During puberty, adolescents grow very quickly with large increases in weight, including muscle mass and fat (Boxer, Petersen, & Tobin-Richards, 2001). With puberty, girls' bodies change by increasing body mass and fat, and becoming more curved, especially in the hips, while boys' bodies gain muscle mass and become larger overall (Vogt Yuan, 2007). One of the biggest changes that

occurs during puberty is the increase in sexual drive, which is thought to be caused by a rise in libido in both girls and boys (Crockett & Petersen, 1987). Another pubertal change is the remodeling of limbic circuits and cortical circuits, allowing for more adult decision-making tactics, social behavior, and cognition, which can also relate to dating behavior (Sisk & Zehr, 2005).

Girls typically experience these bodily changes as negative, since girls are socialized to meet the standards of the Western culture's thin ideal, which is a socially constructed idea that a woman's attractiveness depends solely on her physical appearance (Gershon, Gowen, Compian, & Hayward, 2004; Hesse-Biber, 1996; Vogt Yuan, 2007). The thin ideal includes a virtually unattainable thin body shape and a low body weight (Gershon et al., 2004; Hesse-Biber, 1996; Vogt Yuan, 2007). Just as the thin ideal influences girls' body image, the muscular ideal, or the virtually unattainable standards to have a body containing high muscle mass, influences adolescent boys' body dissatisfaction (Dorsch, McCreary, Sasse, & Saucier, 2004). As a result of the extreme muscularity displayed in the media, boys are more likely to view their bodies as too small, even after the increases in muscle mass that puberty brings, and attempt to further increase muscle mass (Vogt Yuan, 2007).

There is evidence which suggests that body dissatisfaction and dieting increase at puberty, which makes early maturing girls particularly susceptible to the effects of the societal pressure to obtain the ideal body size (Attie & Brooks-Gunn, 1989; Smolak et al., 1993). Long after puberty, early maturing adolescent girls may have increased negativity with regards to their body size in adulthood and may also have higher rates of dieting later in life (Smolak et al., 1993). There are several hypotheses as to why early maturing girls experience these difficulties. One hypothesis is that possessing a negative body image causes a desire to diet, which continues

to perpetuate body dissatisfaction, and in turn could result in the necessity of dieting becoming ingrained (Polivy & Herman, 1987; Smolak et al., 1993). Another hypothesis is that because these adolescent girls may perceive that they are not on time developmentally, they may be more susceptible to problems such as eating disorders (Smolak et al., 1993). This may be because they are attempting to compensate for their pubertal timing by changing their bodies in ways in which they perceive they can control, such as eating behaviors, to become thinner.

Although puberty tends to have negative outcomes for girls, boys tend to experience mostly positive outcomes. Research has shown that adolescent boys' body image becomes more positive with the experience of puberty than it was during childhood (Vogt Yuan, 2007). This may be the case because societal expectations are more in line with the changes happening in boys' bodies during puberty, such as gaining more muscle, but contradict the changes happening in girls' bodies (Vogt Yuan, 2007). This may be one reason as to why boys are likely to have better psychosocial adjustment after puberty versus before (Benjet & Hernandez-Guzman, 2001; Vogt Yuan, 2007). However, though research generally suggests that puberty can lessen the effects of body dissatisfaction among boys, this is not to say that some boys, especially those lacking muscularity, do not still struggle with body image concerns, since there are significant pressures to conform to the muscular ideal during adolescence (Vogt Yuan, 2007).

In addition to physical changes, many social changes occur during adolescence. As adolescents mature, they begin spending more time with friends than ever before (Berndt, 1990). These friendships also become much more intimate than elementary-aged friendships (Berndt, 1990). There appear to be differences between girls' friendships and boys' friendships, such as girls' friendships being more intimate than boys' friendships (Berndt, 1990). Although same-sex peers are typically preferred, adolescence is also a time in which individuals spend an increasing

amount of time with opposite-sex peers (Brendgen et al., 2002). Friendships with opposite-sex peers, as well as the formation of romantic relationships, contribute to healthy socio-emotional development in adolescents such that many skills are learned, including validation of one's worth, sensitivity, and caring about another's welfare (Bhurmester & Eurman, 1986).

During adolescence, both girls and boys who were most likely to date were also simultaneously experiencing puberty and peer pressure to date (Friedlander, Connolly, Pepler, & Craig, 2007). These important physical and social changes appear to be considered a "normal" part of human development (Friedlander et al., 2007). Thus, they warrant more attention in research, specifically body image concerns as one physical change happening during adolescence and dating experiences as a social change also occurring at this time.

# **Body Image**

Body image is a multidimensional construct and can include thoughts or perceptions of one's own body, including drive for muscularity, drive for thinness, and body dissatisfaction. Drive for muscularity is defined as the desire to possess high muscle mass, and conform to the ideal muscle mass that society upholds (Dorsch et al., 2004). Drive for thinness is an "excessive concern with dieting, preoccupation with weight, and the entrenchment in an extreme pursuit of thinness" (Garner, Olmsted, & Polivy, 1983, p. 17).). Although drive for muscularity and drive for thinness are separate constructs, they can also coexist. For example, individuals, especially boys, may simultaneously desire to become more muscular but lose fat, thereby experiencing both a drive for muscularity as well as a drive for thinness (Cohane & Pope, 2001; Gustafson-Larson & Terry, 1992; Olivardia, Pope, Borowiecki, & Cohane, 2004). Body dissatisfaction is "the belief that specific parts of the body associated with the shape change or increased 'fatness' are too large (e.g., hips, thighs, buttocks" (Garner et al., 1983, p. 18). There are two types of

body dissatisfaction, which include the disliking of the lack of muscularity apparent on one's own body and the disliking of the amount of fat on one's own body (Smith, Hawkeswood, Bodell, & Joiner, 2011). Body image has typically consisted of measurements of thinness and weight loss concerns for girls, and muscularity and weight gain concerns for boys (Ricciardelli & McCabe, 2002). However, research is now beginning to place more of an equal emphasis on how muscularity and thinness affect both girls and boys.

# Body image in adolescent girls

The idea of normative discontent is a concept that suggests body dissatisfaction has become so common among women that it is now considered to be the "norm" (Tantleff-Dunn, Barnes, & Larose, 2011). Studies have found that between 40% and 80% of adolescent girls surveyed displayed body dissatisfaction (Halliwell, Easun, & Harcourt, 2010; Kostanski & Gullone, 1998; Levine & Smolak, 2002). The most common areas of the body that girls were dissatisfied with were: hips, buttocks, stomach, and thighs (Levine & Smolak, 2002). Furthermore, Thompson, Heinberg, Altabe, and Tantleff-Dunn (1999) found that 42% to 45% of ninth through twelfth grade girls surveyed reported dieting in an effort to lose weight. Body dissatisfaction in girls has been associated with obsessive preoccupations with appearance, emotional distress, a desire for unnecessary cosmetic surgery, poor eating habits, low self-esteem, and depression (Stice & Shaw, 2003).

A large amount of the research available on body image in adolescent girls has stemmed from objectification theory (Fredrickson & Roberts, 1997; Schooler et al., 2008). According to objectification theory, girls attempt to mold their appearance in order to increase how attractive their bodies appear to others. An objectified view of oneself increases the opportunity for emotions such as shame and anxiety to become present in an individual's life (Miner-Rubino,

Twenge, & Fredrickson, 2002; Schooler et al., 2008) and to decrease self-esteem (Schooler et al., 2008; Tolman, Impett, Tracy, & Michael, 2006). This increase in shame and anxiety and decrease in self-esteem may be due to the unattainable nature of the thin ideal. If girls cannot reach this goal, they may see it as a reflection on themselves and their capabilities, which may result in negative emotions.

Western culture plays a significant role in the body dissatisfaction of adolescent girls in that the thin ideal holds girls to standards that are virtually unattainable (Gershon et al., 2004; Hesse-Biber, 1996). The thin ideal is continually heightened in that the media portrays women as extremely thin with very low body weight. In fact, these images have become leaner over time (Gershon et al., 2004). It is almost impossible for any woman, particularly adolescent girls, to obtain the thin ideal because their bodies become curvier with a larger amount of body fat during puberty (Vogt Yuan, 2007). In Western cultures, a higher body mass index (BMI), which may be the result of puberty, has also been found to contribute to greater dissatisfaction in adolescent girls (Paxton et al., 2005; Wertheim, Paxton, & Blaney, 2004). Girls are more likely than boys to view their bodies as being overweight, and make attempts to lose weight, which appears to be present even in many girls who obtain a normal weight (Vogt Yuan, 2007).

According to the dual-pathway model, body dissatisfaction is the result of sociocultural pressures from external sources such as peers, family, and the media which promote the thin ideal, and this in turn may contribute to a drive to be thin (Stice, 2001). The dual-pathway model states that women internalize the unattainable thin ideal, and as a result, develop body dissatisfaction when they do not meet the ideal shape and size expected for women (Stice, 2001). In turn, body dissatisfaction can predict increased dieting behaviors and increased negative affect in an attempt to bring one closer to the thin ideal (Cattarin & Thompson, 1994). Dieting

behaviors displayed in an effort to conform to the thin ideal may perpetuate the cycle of dieting and can result in eating disorders. Indeed, research has demonstrated that body dissatisfaction and a drive for thinness are linked with dieting and eating disorders among girls (Stice & Agras, 1998).

After adolescent girls experience puberty, they become increasingly aware of their bodies and their sexual attractiveness (Gershon et al., 2004). Adolescent girls value their own attractiveness more than adolescent boys value theirs (Gershon et al., 2004). As a result, adolescent girls generally struggle more with the necessity of being attractive (e.g., thin) in Western culture than boys (Davies & Furnham, 1986; Gershon et al., 2004). The perception that a girl's thinness determines her perceived attractiveness and dating potential may play a role in why girls place a higher importance on being attractive (Paxton et al., 2005). However, this is not to say that adolescent boys do not struggle with body image concerns.

# Body image in adolescent boys

Body image is rarely considered to be a significant part of boys' health because body dissatisfaction is typically considered to be a girls' issue, rather than a boys' issue (Paxton, Eisenberg, & Neumark-Sztainer, 2006; Schooler et al., 2008). This may be in part because boys have a range of body types that are considered to be acceptable by society, while the thin ideal is the only socially acceptable body type for girls (Vogt Yuan, 2007). However, the notion that boys do not struggle with body dissatisfaction is inaccurate. Although studies show that compared to boys, girls have lower levels of body satisfaction at all ages, boys still have body image concerns (Schooler et al., 2008).

With more studies being completed on adolescent boys' body image, it is now found that the prevalence of body dissatisfaction is occurring at a higher rate than previously hypothesized

(Carlson Jones, 2004; Schooler et al., 2008). In one study, for example, 45% of fourth grade boys displayed body dissatisfaction (Gustafson-Larson & Terry, 1992). However, adolescent boys struggle with body image in a different manner than girls. Adolescent boys are likely to idealize a muscular body, rather than a thin body, because society places different expectations upon the different genders. In general, girls strive for the thin ideal, and boys strive for the muscular ideal, which consists of high muscle mass and a V-shaped body (Dorsch et al., 2004). In order to achieve this muscular ideal, adolescent boys are more likely to aim for weight gain rather than weight loss (Furnham & Calnan, 1998; Schooler et al., 2008). For instance, in a study of ninth through twelfth graders, girls who had the highest rates of body dissatisfaction believed that they were overweight, whereas boys with the greatest rates of body dissatisfaction believed that they were underweight (Page & Allen, 1995). Boys typically consider their bodies to be inadequately small when compared to the muscular ideal and therefore make attempts to increase muscle mass to become larger (Vogt Yuan, 2007). Many boys are using extreme exercise behaviors, steroids, and dietary supplements to attempt to make their bodies look the way that they prefer (Ricciardelli & McCabe, 2002; Schooler et al., 2008).

As a result of the muscular ideal, boys suffer from a condition called muscle dysmorphia, which is when boys and men who are muscular have the perception that they are actually underdeveloped and thin-looking (Cohane & Pope, 2001). Muscle dysmorphia has been associated with anabolic steroid abuse, symptoms representative of anxiety, mood, and eating disorders, and lowered self-esteem (Cohane & Pope, 2001). Masculinity in men's culture plays a role in these pressures on boys to meet muscular standards that are virtually unattainable, causing boys to feel that they need to show qualities of strength, such as control and aggression, relates to the appearance of muscularity (Perry & OPauletti, 2011).

Not only do males desire a more muscular body, but there is evidence that some adolescent boys may also wish to be thinner. For example, in one study, 45% of fourth grade boys surveyed expressed a desire to change their weight, with 38% hoping to be thinner and 7% wanting to increase weight (Gustafson-Larson & Terry, 1992). This suggests that it is common for boys to desire a thinner body or a heavier body, rather than being satisfied with their current bodies (Cohane & Pope, 2001; Thompson, Corwin, & Sargent, 1997). However, when adult men are surveyed, they often desire a more muscular body over a body with more fat, since at this age muscle and fat are more distinguishable (Cohane & Pope, 2001; Olivardia, Pope, Borowiecki, & Cohane, 2004). Additional studies have found a positive correlation between various measures of self-esteem and body satisfaction in boys, indicating that boys with higher body satisfaction have higher self-esteem (Cohane & Pope, 2001; Folk et al., 1993; Rauste-von Wright, 1989). Interestingly, in a study of third-grade and sixth-grade boys, there was no correlation found between body satisfaction and self-concept in third-grade boys, but a strong positive correlation was found among a separate sample of sixth-grade boys (Folk et al., 1993). This suggests that between third and sixth grades, body image becomes an important component of boys' development.

Both girls and boys report height and a muscular shape/build are important factors that define attractiveness in boys (Jones, 2001). Clearly, boys perceive muscularity as being a main factor in attractiveness to girls, which likely contributes to their own drive for muscularity (Jones, 2001). Therefore, the way that others view an individual may contribute to his body image, which is why the role of dating in adolescence becomes important.

### **Dating during Adolescence**

Dating can mean different things to different people. For instance, dating can mean socializing with an individual who one is sexually attracted to or romantically interested in groups, going out on "dates" with an individual one is romantically interested in, or being in a "relationship" or "going steady" with a romantic partner (Paxton et al., 2005). For the purpose of this study, we defined dating as "times you go out with, spend time with, or encounter someone you are going out with and/or consider your boyfriend/girlfriend. Examples of this may include going to the movies, a game, a party, meeting at a party, or hanging out at home."

During early adolescence, it is much more common for adolescents to socialize in a mixed-gender group of individuals while maintaining close proximity to same-gender friends (Gondoli, Corning, Blodgett Salafia, Bucchianeri, & Fitzsimmons, 2011). Typically, dating, or romantic involvement with a significant girlfriend or boyfriend, begins around the ages of fourteen or fifteen, and is a result of involvement in peer groups containing mixed genders (Feiring, 1996; La Greca & Harrison, 2005). Young adolescents often become more involved in school function activities, girl-boy parties, and casual meetings (Gondoli et al., 2011). These mixed-gender activities appear to function as a connection to one-on-one heterosexual romantic relationships which are more common in later adolescence (Connolly & Goldberg, 1999; Gondoli et al., 2011). By the time adolescents reach the age of sixteen, the majority of students surveyed report having been involved or are currently involved in a romantic relationship (La Greca & Harrison, 2005).

The increasing instances of mixed-gender activities may lead to dating because they provide an opportunity for heterosexual adolescents to socialize more with the opposite gender, which in turn allows for increased dating opportunities. Research has consistently shown that

girls are more likely to date than boys (La Greca & Harrison, 2005), although boys typically begin dating at an earlier age (Friedlander, Connolly, Pepler, & Craig, 2007). Recent research has shown that younger adolescents appear to date for different reasons compared to older adolescents (Compian, Gowen, & Hayward, 2004). There is evidence that younger adolescents place more importance on their partner's physical features and fashionable clothing (Compian et al., 2004; Roscoe, Diana, & Brooks, 1987). Young adolescent girls who are dating also place a higher importance on the approval of others than do older adolescents (Roscoe et al., 1987; Smolak et al., 1993). Further, early and middle adolescents report that recreation, social status, formation of identity, and autonomy from parents are the main functions of dating, while older adolescents view commitment and care as important functions of dating (Collins, Siebenbruner, & Zimmer-Gembeck, 2001).

Research has indicated that dating is an important part of adolescence (Collins, 2003). By the time late adolescence is reached, individuals report a greater sense of intimacy with romantic partners than with parents, siblings, and friends (La Greca & Harrison, 2005). It appears that dating can be beneficial during late adolescence, but can have negative effects for those who date early. For example, there is an accumulation of evidence suggesting that adolescents' emotional well-being can be damaged by forming romantic relationships early (Compian et al., 2004; Natsuaki et al., 2009). These negative consequences are typically found in adolescents who date in early to mid-adolescence (Compian et al., 2004; Natsuaki et al., 2009). For instance, in one study, involvement in romantic relationships before mid-adolescence was correlated with decreased competence in employment, academics, and conduct (Natsuaki et al., 2009; Neemann, Hubbard, & Masten, 1995). However, these negative effects

appeared to decrease as the individuals became older (Natsuaki et al., 2009; Neemann et al., 1995).

Although both adolescent girls and boys are affected by dating during early adolescence, girls may experience more negative effects (Joyner & Udry, 2000; Natsuaki et al., 2009). Adolescent girls may feel pressure to date, as it affirms their desirability. Girls who mature early in particular may be pressured to date, because older individuals who are dating may pursue early maturing girls as a result of their older physical appearance (Magnusson, Stattin, & Allen, 1985; Schooler et al., 2008). Since it is likely that early maturing girls will be dating older individuals, there is a possibility that dates will be introducing them to more adult-like activities, such as alcohol-consumption and sexual behaviors, and adolescent girls may not yet have the cognitive and emotional skills to handle these situations (Magnusson et al., 1985; Schooler et al., 2008). In boys, the connection between puberty and dating is unclear (Friedlander et al., 2007). Some studies have found a positive correlation between puberty and dating in adolescent boys, meaning early maturing boys date earlier (Friedlander et al., 2007; Kim & Smith, 1999), while others have found no connection at all between the onset of puberty and dating (Friedlander et al., 2007; Susman et al., 1985). The connection found in early maturing boys and dating may not be as harmful for adolescent boys as it is for girls, since they may be more likely to date partners similar to their age or younger than them, and as a result are not as likely to be exposed to risky behaviors such as alcohol consumption and risky sexual behaviors.

Gender clearly plays a role in the effects dating can have on adolescents. Girls and boys are socialized very differently when it comes to dating expectations; therefore, high levels of adaptation may be necessary to conform to the dating world. In Western society, girls are socialized to focus on dyadic friendships and depend on communication styles which are

supportive of them, while boys are socialized to play in larger groups, use more limited forms of communication, and focus on power and dominance (Giordano, Longmore, & Manning, 2006). Masculinity in men's culture places high expectations of gender conformity onto adolescent boys and views deviation from the norm as very negative (Perry & Pauletti, 2011). As a result of these expectations for power, it has been hypothesized that boys tend to have an easier transition into the dating world as they are socialized to pursue girls, and generally report greater confidence during this transition (Giordano et al., 2006). As boys appear to display higher confidence levels during the transition into dating, it can be hypothesized that girls are socialized to be successful at emotional intimacy once they are in a relationship. Research shows that girls are socialized to be focused on putting forth effort into social relationships, and are more peoplefocused than boys (Perry & Pauletti, 2011). Girls and boys are also socialized differently in terms of sexual experiences. Research suggests that society upholds a traditional sexual script in which boys are seen as the initiators and girls are seen as the gatekeepers who make the decision whether a sexual experience will occur (Krahe, Bieneck, & Scheinberger-Olwig, 2007). This traditional sexual script can be problematic in that it pressures boys to be highly sexual, while girls are pressured to express both pure and sexual behavior, which is clearly unattainable.

It seems natural that as adolescents' bodies are growing and maturing, they also may become more interested in dating. The way in which an individual perceives that she or he is viewed by peers or potential dating partners may contribute to body image in adolescence. It is likely that there is a connection between dating and body image in adolescence, a connection that needs to be further explored.

# **Body Image and Dating**

A few studies have reported connections between dating and dieting in adolescents (e.g., Boyes, Fletcher, & Latner, 2007; Compian et al., 2004; Gondoli et al., 2011). This research has suggested that one of the main motivations for dieting is to increase attractiveness to romantic partners or potential romantic partners (Fletcher, 2002). As most of the participants in our current study identified as White, we focus primarily on other research and literature that has also included White samples. The link between dieting and dating may be due to body size, such that individuals who have higher BMIs are more likely to diet in order to make themselves appear more attractive. One study found that adolescent girls who carry an additional 10 pounds past their expected BMI scores have a 10% decrease in the probability of having dated (Cawley, 2001). Similarly, an additional 10 pounds past their expected BMI scores in adolescent boys is associated with a 7.3% decreased likelihood in dating at a minimum of once a month (Cawley, 2001).

There have been differences found with relation to dieting and dating between adolescent girls who have recently begun to menstruate and those who have not yet begun to menstruate. According to one study, post-menarcheal girls in sixth through eighth grades who simultaneously experienced the onset of menarche and began dating were more likely to display higher body dissatisfaction and a higher likelihood of disordered eating when compared to girls who did not begin both menarche and dating at the same time (Smolak, Levine, & Gralen, 1993). This may be the result of early adolescents being less mature and less equipped to handle the pressure to be thin, which can increase dieting behaviors in these early maturing girls. In another study of 12 and 13-year-old girls, the girls who considered themselves to be currently dating and were simultaneously experiencing menarche were likely to participate in dieting behaviors (Cauffman

& Steinberg, 1996). This may be due in part to the Western thin ideal body type, as girls assume that a successful romantic relationship requires thinness (Paxton et al., 1999; Schooler et al., 2008). This may contribute to elevated depressive symptoms in early maturing girls because it is unlikely that their bodies will meet the expectations of the Western culture's thin ideal (Ge, Elder, Regnerus, & Cox, 2001; Natsuaki et al., 2009). Studies have confirmed that adolescent girls believe that if they had a thinner body, they would be more competent in dating relationships (Paxton et al., 1991; Smolak et al., 1993).

There is also evidence that social involvement with opposite gender peers is associated with the experience of increased peer pressure for thinness, which is in turn negatively associated with increased levels of body dissatisfaction among heterosexual adolescent girls (Gondoli et al., 2011). In girls, heterosocial involvement has been positively correlated with unhealthy practices in weight management and body dissatisfaction, which suggests that mixed-gender interactions may negatively impact girls' body image (Compian et al., 2004; Gondoli et al., 2011). Adolescents learn that the thin ideal is considered to be attractive; therefore, peers are likely to promote and encourage the thin ideal as desirable through peer observations of the body, comparisons of individuals, and conversations (Gondoli et al., 2011; Jones et al., 2004; Paxton et al., 2005).

Among adolescent girls, thinness helps determine their popularity with boys, attractiveness, and dating success (Wertheim et al, 1997). Adolescent boys also report that a girl's thinness determines her dating potential and perceived attractiveness (Paxton et al., 2005). For example, 63% of adolescent boys surveyed said that a girl's thinness was important in judging attractiveness, and would impact their decisions of whether or not to date a girl (Paxton et al., 2005). Another reason that adolescent girls seem to place such a high importance on

dating is because having a boyfriend or dating enhances their popularity with peers (Compian et al., 2004), especially with female peers, which is considered to be very important at this age (Gershon et al., 2004). Since popularity depends upon dating, and the opportunity to date is dependent upon attractiveness, then it is clear as to why adolescent girls may perceive thinness and attractiveness to be very important (Gershon et al., 2004).

There are also connections between body image and dating in men. One study found that a drive for muscularity was stronger among non-dating men than men in various types of dating relationships (Giles & Close, 2008). Additionally, there was a stronger association between the use of 'men's lifestyle magazines' and a drive for muscularity among non-dating men versus men who were in a romantic relationship (Giles & Close, 2008). It can be hypothesized that non-dating men may feel more pressure to obtain the muscular ideal in order to attract a partner and enter into a romantic relationship; the use of magazines that promote the muscular ideal may increase this pressure. In addition, the pressure to be in a romantic relationship may cause men to place high criticism on their bodies because a good appearance helps them to reach their goal of entering into a relationship (Sanchez, Good, Kwang, and Saltzman, 2008).

For some men, instances of dieting may depend upon their partner's characteristics. For example, one study found that heterosexual men participated in higher levels of dieting when their female partners had high levels of self-esteem and low levels of depressive symptoms (Boyes et al., 2007). It is possible that men who are in romantic relationships with women who are confident feel increased amounts of pressure to match that level of confidence, and make attempts to increase their own confidence by dieting to become more physically attractive. Another study revealed that the main predictor of body dissatisfaction in heterosexual men was a lack of support from their female partners (Juarez & Pritchard, 2012). Clearly, the body image

of men can be affected by their dating partners. Although numerous studies have been conducted on connections between relationships and body image in adulthood, there is a need for research specifically focusing on adolescent boys.

Simply being in romantic relationships appears to be a large source of validation and self-worth in individuals (Murray, Griffin, Rose, & Bellavia, 2003). In a study by Sanchez et al. (2008), women and men who considered themselves to be single were found to have higher levels of body shame than individuals in romantic relationships, which appeared to be mediated by an increase in feeling urgency to find a mate. Body shame was defined as feeling guilt and shame when one's physical appearance does not conform to cultural standards and ideals (McKinley & Hyde, 1996). Sanchez et al. (2008) also found that for those who were currently in a romantic relationship, body shame about oneself predicted increased concerns regarding the appearance of romantic partners in both women and men; however, men expressed a greater concern for their partner's appearance than women.

Unfortunately, research has not yet fully examined the connections between body image and dating during adolescence. First, there has been no examination of the differences in type of body image, including drive for muscularity, drive for thinness, or body dissatisfaction. Second, there are no studies that examine whether individuals want to date or not, and how the desire to date may affect body image.

# **Present Study**

This study examined multiple aspects of body image in both adolescent girls and adolescent boys, including drive for muscularity, drive for thinness, and body dissatisfaction. Specifically, the present study investigated the following questions: Does body image, which includes a drive for muscularity, drive for thinness, and body dissatisfaction, differ among girls

and boys who are dating versus those who are not? Similarly, does body image differ among girls and boys who want to date versus those who do not? We tested these research questions separately for girls and boys.

Our first hypothesis was that girls who were dating would have higher levels of drive for thinness and body dissatisfaction than girls who were not dating, and boys who were dating would have lower levels of drive for muscularity and body dissatisfaction than boys who were not dating. Secondly, we hypothesized that girls and boys who wanted to date would have higher levels of drive for muscularity, drive for thinness, and body dissatisfaction than girls and boys who did not want to date.

#### **METHOD**

# **Participants**

The data used in the current study originated from a larger study which took place over a period of two years. This larger study examined the influence of sociocultural factors on adolescents' body image and eating behaviors. The participants in the current study (N = 160, 85girls and 75 boys) had complete data and included students who ranged in age from 12 to 16 years (M=13.78, SD=.91). The participants consisted of adolescent girls and boys in seventh through ninth grades from a middle school in a medium-sized, Midwestern city. The majority of the sample (90%) identified as White, 4.4% of the students identified as Native American, 1.3% identified as Hispanic, 1.3% identified as Black, 2.5% identified themselves as "other" and less than 1% chose not to disclose their ethnicity. Students' self-reports of weight and height were used to calculate body mass index (BMI). The average BMI of the adolescent girls in the study was 21.30, and the adolescent boys had an average BMI of 22.07, which are both considered to be in the normal range. The Centers for Disease Control and Prevention state that a BMI range that is considered to be normal for this age group is between 18.5 and 24.9. Although BMI may not be an accurate means of assessing body size, especially due to muscularity, it is the best and most widely-used measure available.

#### Procedure

Interested individuals received flyers and parental consent forms to take home. The adolescents who returned the parental consent forms then completed surveys after school. The surveys consisted of a signed assent form and an individual questionnaire. It took the students one to two hours to complete the survey. The surveys were taken in a large group while

researchers oversaw the students and assisted with answering questions when needed. The students received a twenty-five dollar gift card to a local mall to serve as compensation.

#### Measures

# Dating status

Items were created for the purpose of this study to assess dating status in adolescent girls and boys. Current dating status and the desire to date were reported. The definition of dating provided to the participants was, "times you go out with, spend time with, or encounter someone you are going out with and/or consider your boyfriend/girlfriend. Examples of this may include going to the movies, a game, a party, meeting at a party, or hanging out at home." Although the definition of dating we provided was inclusive, we did not specifically ask participants about their sexual orientation. The specific items about current dating status were: "are you currently dating someone exclusively" and "are you currently dating more than one person" with response options of yes or no. In the present study, we created two groups of individuals: those who were not dating and those who were dating (either one person or more than one person). For desire to date, we asked "do you want to date" with response options of yes or no.

#### **Body** image

There were two scales used in the present study to measure components of body image. The first scale was the 15-item Drive for Muscularity Scale (DMS) by McCreary and Sasse (2000). This scale measures adolescents' behaviors and attitudes surrounding muscularity, including weight lifting, the use of supplements, and perception of muscularity. Sample items included, "I feel guilty if I miss a weight-training session," and "I think I would feel more confident if I had more muscle mass." A 6-point scale ranging from 0 (*Never*) to 5 (*Always*) was used to score the items. Higher scores revealed higher drive for muscularity. In previous work,

convergent validity was shown such that individuals attempting to increase weight showed higher DMS scores than those not attempting to gain weight, and that increased DMS scores were associated with increased depressive symptoms and lower self-esteem in boys (Dorsch et al., 2004). Additionally, the DMS was found to accurately assess behavioral outcomes associated with the desire for muscularity by its positive correlation with the frequency of weight training in both girls and boys (r = .24) (McCreary & Sasse, 2000). Further, the DMS was found to possess good internal consistency reliability among both female ( $\alpha = .78$ ) and male ( $\alpha = .84$ ) adolescents (Dorsch et al., 2004). In the present study, internal consistency reliability (e.g., Cronbach's alpha) was .85 for girls and .85 for boys. See Appendix A for the complete scale.

The second scale used in the current study was the 65-item Eating Disorders Inventory (EDI) by Garner, Olmsted, and Polivy (1983) which measures eating behaviors, thoughts about eating, perceptions and thoughts about body size, and pressure on the self to lose weight. Two subscales of the EDI were used for the present study: the 7-item Drive for Thinness subscale and the 9-item Body Dissatisfaction subscale. See Appendix B for the complete scale.

The Drive for Thinness (DFT) subscale of the EDI measures restricting behaviors, the desire to lose weight, and the fear of gaining weight (Garner et al., 1983). Sample items from the DFT subscale included "I am terrified of gaining weight" and "I eat sweets and carbohydrates without feeling nervous." These items were also measured on a 6-point scale from 0 (*Never*) to 5 (*Always*), with items coded such that higher scores indicated a higher drive for thinness. The construct validity of the DFT was demonstrated by its connection to the clinical assessments of individual patients' drive-for-thinness characteristics (r = .53) (Garner et al., 1983). In a sample of 55 female college students, the DFT was also found to correlate highly with the Eating Attitudes Test, (EAT; Garner & Garfinkel, 1980) which measures atypical eating behaviors and

the likelihood of anorexia nervosa in high risk populations (r = .88) (Garner et al., 1983). Internal consistency reliability has been demonstrated such that Cronbach's alpha of the DFT was .92 among  $8^{th}$  grade girls (Blodgett Salafia, Corning, Gondoli, Grundy, & McEnery, 2007). In a study of 421 boys in grades 7 through 9, Cronbach's alpha ranged from .72 to .95 (McCabe, Ricciardelli, & Karantzas, 2010). In the present study, Cronbach's alpha was .87 for girls and .84 for boys.

The Body Dissatisfaction (BD) subscale measures the level of satisfaction with certain areas of the body such as thighs, waist, and buttocks (Garner et al., 1983). Sample items in the BD subscale included "I feel satisfied with the shape of my body" and "I think that my thighs are too large." The items were measured on a 6-point scale which ranged from 0 (Never) to 5 (Always). Items were coded such that higher scores indicated a higher body dissatisfaction. In a previous study of adolescents, construct validity for the BD subscale was demonstrated by its strong correlation with the DFT subscale of the EDI in girls (r = .63) (Espelage et al., 2003). Although we did not find specific estimates of validity among adolescent boys, we note that the BD subscale of the EDI has been used to study how gender is associated with eating disorder symptoms in men (Cantrell & Ellis, 1991), which indicates that it is a valid instrument for both genders. Reliability has been demonstrated in the BD subscale of the EDI, such that internal consistency (Cronbach's alpha) was .93 among eighth grade girls (Blodgett Salafia et al., 2007). Similarly, Cronbach's alpha was found to be acceptable for eight grade girls ( $\alpha = .94$  and boys ( $\alpha$ = .89) (Makinen et al., 2012). In the present study, Cronbach's alpha was .92 for girls and .86 for boys.

#### **RESULTS**

# **Analysis Plan**

In our study, we conducted two multivariate analyses of variance (MANOVAS) to examine whether body image differed among adolescents according to their dating status and desire to date. Our MANOVAs were run separately for girls and boys. For all analyses, we used the SPSS program 20.0, and our alpha level was set at .05 to determine significant differences.

Our first MANOVA focused on girls only and included drive for muscularity, drive for thinness, and body dissatisfaction as dependent variables and both dating status and desire to date as independent variables. We used this analysis to test our hypotheses that girls who are dating would have higher levels of drive for thinness and body dissatisfaction than girls who are not dating, and that girls who want to date would have higher levels of drive for muscularity, drive for thinness, and body dissatisfaction than girls who do not want to date. Our second MANOVA focused on boys only but included the same dependent and independent variables as the analysis for girls. For boys, we tested the hypotheses that boys who are dating would have lower levels of drive for muscularity and body dissatisfaction than boys who are not dating, and that boys who want to date would have higher levels of drive for muscularity, drive for thinness, and body dissatisfaction than boys who do not want to date.

# **Descriptive Statistics**

Our sample of 83 females and 75 males represented 128 adolescents who were not dating at all, and 30 adolescents who were currently dating, for a total of 158 participants. From the 83 female participants, 69 reported they were not currently dating, and 14 reported they were currently dating. Of the female participants, 61 reported they wanted to date, while 22 reported they did not want to date. Of the 75 male participants, 59 reported they were not currently

dating, while 16 reported they were currently dating. From the male participants, 58 reported they wanted to date, and 17 reported they did not want to date.

# **Model Testing**

A MANOVA was conducted to determine whether dating status and desire to date were related to drive for muscularity, drive for thinness, and body dissatisfaction in girls. Results indicated no significant findings for our dating status variable ( $\lambda = .99$ , F (3, 78) = .21, p = .89). Thus, our hypothesis that girls who were dating would have higher levels of drive for thinness and body dissatisfaction than girls who were not dating was not confirmed. See Table 1 for a summary of descriptive statistics.

Table 1

Descriptive Statistics of Desire to Date on Drive for Muscularity, Drive for Thinness, and Body Dissatisfaction in Girls

Body Image Variable/Desire to Date	M	SD
Drive for Muscularity/Desire to Date	11.83	8.84
Drive for Muscularity/No Desire to Date	7.59	7.81
Drive for Thinness/Desire to Date	13.15	8.97
Drive for Thinness/No Desire to Date	8.32	6.22
Body Dissatisfaction/Desire to Date	21.57	10.97
Body Dissatisfaction/No Desire to Date	15.00	11.44

However, results revealed a significant multivariate main effect for our want to date variable in girls ( $\lambda = .90$ , F (3, 78) = 2.81, p < .05,  $\eta^2 = .10$ ). Because Wilk's lambda was found

to be significant for our desire to date variable in girls, follow-up univariate Analysis of Variance (ANOVA) tests were performed to determine which body image variables were significantly different between girls who wanted to date and those that did not. ANOVA results indicated that significant effects were found for girls who wanted to date and drive for thinness, (F(1, 1) =5.42, p < .05,  $\eta^2 = .06$ ), and for girls who wanted to date and body dissatisfaction (F (1, 1) = 5.40, p < .05,  $\eta^2 = .06$ ). More specifically, girls who expressed a desire to date reported higher levels of drive for thinness than girls who did not have a desire to date (M = 12.97 and M = 8.32,respectively). In addition, girls who wanted to date had higher levels of body dissatisfaction than girls who did not want to date (M = 21.39 and M = 15.00, respectively). Therefore, our hypothesis that girls who wanted to date would have a higher drive for thinness and higher body dissatisfaction than girls who did not want to date was confirmed. There were no significant univariate results found for girls regarding desire to date and drive for muscularity (F (1, 1) = 3.64, p = .06,  $\eta^2 = .04$ ). Thus, our hypothesis that girls who wanted to date would have a higher drive for muscularity than girls who did not want to date was not confirmed. See Table 2 for results from the univariate ANOVAs.

A second one-way MANOVA was conducted to determine the relationship between dating status and desire to date with drive for thinness, drive for muscularity, and body dissatisfaction in boys. Results revealed no significant findings for boys regarding either dating status or desire to date ( $\lambda$  = .99, F (3, 70) = .22, p < .89;  $\lambda$  = .94, F (3, 70) = 1.42, p < .25, respectively). Since there were no significant multivariate effects found for boys on any of the variables, no follow-up univariate tests were conducted. Therefore, there were no significant differences between boys who wanted to date and those that did not, nor were there any significant differences between boys who were dating and those that were not on any of the three

body image variables. This indicates that none of our hypotheses for boys were confirmed. See Table 3 for a summary of descriptive statistics for boys.

Table 2

ANOVA Results of Desire to Date on Drive for Muscularity, Drive for Thinness, and Body Dissatisfaction in Girls

Body Image Variable	Sum of squares	df	MS	F	p	$\eta^2$
Drive for muscularity	269.26	1	269.26	3.64	.06	.04
Drive for thinness	349.71	1	349.71	5.42*	.02	.06
Body dissatisfaction	647.73	1	647.73	5.40*	.02	.06

Table 3

Descriptive Statistics of Desire to Date on Drive for Muscularity, Drive for Thinness, and Body Dissatisfaction in Boys

Body Image Variable/Desire to Date	M	SD
Drive for Muscularity/Desire to Date	19.90	10.93
Drive for Muscularity/No Desire to Date	13.76	8.39
Drive for Thinness/Desire to Date	8.50	8.40
Drive for Thinness/No Desire to Date	5.88	5.02
Body Dissatisfaction/Desire to Date	14.02	11.41
Body Dissatisfaction/No Desire to Date	12.71	8.92

#### DISCUSSION

One of the most monumental changes that occurs during adolescence is the beginning of dating behaviors. Changes in body image, including concerns of thinness and weight loss for girls, and muscularity and weight gain for boys, also occur during adolescence (Ricciardelli & McCabe, 2002). As a result of increased social pressures, including pressures to date, both girls and boys are likely to experience body image problems during this time (Schooler, Impett, Hirschman, & Bonem, 2008), which can include drive for muscularity, drive for thinness, and body dissatisfaction. The present study sought to understand the relationship between dating and body image in adolescent girls and boys. Specifically, we examined whether dating status and desire to date were associated with drive for muscularity, drive for thinness and body dissatisfaction in girls and boys.

# **Summary of Findings**

First, we found that adolescent girls who wanted to date reported higher levels of drive for thinness and body dissatisfaction than adolescent girls who did not want to date. Perhaps girls have a desire to date because dating increases social status and popularity with peers (Compian et al., 2001). In addition, girls may feel pressure to date because it may affirm their desirability. Previous work has suggested that adolescent girls believed that they would be more competent in dating relationships if they were thinner (Gondoli et al., 2011; Paxton et al., 1991; Smolak et al., 1993 Wertheim et al., 1997). Furthermore, studies have reported associations between dating and dieting in adolescents; particularly, adolescent girls who were currently dating were more likely to be dieting than adolescent girls who were not dating (Cauffman & Steinberg, 1996; Compain et al., 2004). The purpose of dieting may be to increase attractiveness to romantic partners or potential romantic partners (Fletcher, 2002). It is likely that adolescent

girls are dieting as a result of a drive for thinness and body dissatisfaction, in an effort to appear thinner and more attractive to potential dating partners. Girls may internalize Western culture's standards of thinness being equated with attractiveness, which determines one's ability to attract a dating partner. Thus, girls may be afraid that if their bodies do not meet the unattainable standards of Western culture, they will not have the opportunity to form romantic relationships. Adolescent girls may also hold the belief that being thin will make them happy in life, which in turn will make them better dating partners.

Although our study revealed that drive for muscularity was higher in adolescent girls who wanted to date than those who did not want to date, this association was not significant. Although muscularity is likely an important component of body image in adolescent girls, drive for thinness and body dissatisfaction constructs may play larger roles in overall body image. Prior research suggests that drive for muscularity is stronger in boys than girls (McCreary & Sasse, 2000). More specifically, adolescent boys report greater concerns of muscularity than adolescent girls, and girls express greater desires of weight loss and display more symptoms of disordered eating than adolescent boys (McCabe, Ricciardelli, & Finemore, 2002; Shoemaker & Furman, 2010). The pressure to be thin may be more influential for adolescent girls at this time, since society places high value on the thin ideal in girls (Gershon et al., 2004; Hesse-Biber, 1996), which provides for less focus on a drive for muscularity. Research supports this idea, stating that only 6-9% of adolescent girls report a desire to be more muscular (Ricciardelli & McCabe, 2003; Shoemaker & Furman, 2010), while 50% to 80% of adolescent girls report a desire to be thinner, and 20% to 65% of adolescent girls are currently dieting or have dieted in the last year (Wertheim & Paxton, 2012). It may also be hypothesized that it can be challenging for adolescent girls to achieve a desired amount of muscularity without compromising their

appearance of thinness, as increased muscle mass can also lead to a decreased appearance of thinness, even though the amount of fat on the body may not change.

Second, although there were significant findings for desire to date, there were no significant findings in regards to actual dating status for girls. It is possible that once girls are in a committed relationship, they gain confidence that their partners find them physically attractive, which increases body satisfaction and decreases drive for thinness and drive for muscularity. Previous research supports this idea in women, such that women who are in satisfying romantic relationships report increased body satisfaction (Boyes, Fletcher, & Latner, 2007; Friedman, Dixon, Brownell, Whisman, & Wilfley, 1999). Previous research has also identified that women in satisfying relationships report lower levels of dieting behaviors (Boyes et al., 2007; Markey, Markey, & Birch, 2001). It is likely that these findings are also true of adolescent girls. It is possible that girls who are more comfortable with their body size and shape seek out and maintain more satisfying relationships. In addition, it is likely that girls who are in satisfying relationships receive low amounts of criticism and high amounts of affirmation from their partners.

For adolescent boys, there were no significant connections found between body image and dating. To begin, boys' desire to date had no association with drive for muscularity, drive for thinness, or body dissatisfaction. Because adolescent boys are less likely to date than adolescent girls (La Greca & Harrison, 2005), perhaps they experience less pressure to date, and therefore are less concerned about maintaining an ideal body type to attract a dating partner. This also aligns with objectification theory (Fredrickson & Roberts, 1997), such that girls are socialized to be desirable according to their physical appearance more than boys). Additionally,

it is possible that dating does not contribute to popularity for boys as it does for girls, which may make dating less appealing for boys.

Dating status in adolescent boys also had no significant association with drive for muscularity, drive for thinness, or body dissatisfaction. Previous research shows that dating has less negative effects for boys than it does for girls (e.g., lower rates of depression, less changes in relationships with parents), which may mean that boys transition more easily into dating, and do not suffer the effects of ideal body pressures to the extent that girls suffer (Joyner & Udry, 2000; Natsuaki et al., 2009). It is likely that society does not place as much pressure on boys to look a certain way as it does for girls. For instance, Vogt Yuan (2007) found that society upholds a range of acceptable body types for boys, while only the thin ideal is acceptable for girls. Therefore, since boys may transition into dating easily, it would make sense that body image did not significantly differ whether the boys were dating or not. In addition, a study conducted by Giordano et al. (2006) found that boys report higher confidence levels throughout the transition to dating than girls. This may align with the cultural values of power and dominance that society upholds for men in an effort to play the role of pursuer in relationships. Therefore, the role of adolescent boys is to choose the girl they want to pursue, rather than a partner choosing to pursue them, which may allow for less pressure to obtain an ideal body to attract partners.

#### **Limitations and Future Directions**

There are several limitations to the present study. First, our sample consisted primarily of adolescents from European American descent, meaning that our conclusions can only be applied to White adolescents, rather than the general population. Studies have shown that African American adolescent girls tend to be more satisfied with their body weight and are less likely to participate in behaviors to lose weight than Caucasian adolescent girls (Casper & Offer, 1990).

Thus, it would be beneficial to examine the differences in body image concerns, dating status and desire to date in different ethnic groups. Second, our sample focused on early adolescents. It is possible that body image is less developed and dating is less common in early adolescence, but that we would see significant results in mid or late adolescence. Research is consistent with this idea, such that one longitudinal study of adolescents assessed the same group at age 13, 15, and 18, and found that over time, body dissatisfaction increased in girls over time (Rosenblum & Lewis, 1999). In addition to increases in body image, dating also appears to increase as adolescents grow older (Carver, Joyner, & Udry, 2003). For example, about 25% of 12-yearolds surveyed reported having been in a romantic relationship in the past 18 months, while that number increased to over 70% when 18-year-olds were surveyed (Carver et al., 2003). Future studies should focus on older adolescents in an effort to examine body image and dating when these constructs are more developed. Additionally, we did not include an item that addressed the participants' sexual orientation in the questionnaire. Furthermore, most of the research included in this manuscript focuses on heterosexual youth. It is possible that adolescents who identify as lesbian, gay, or bisexual have different concerns than heterosexual adolescents. Research supports this idea, as one meta-analysis found that lesbian women report higher body satisfaction than women who identify as heterosexual, while gay men report higher levels of body dissatisfaction than heterosexual men (Morrison, Morrison, & Sager, 2004). Further research is needed to address the relationship between dating and body image that uses a more inclusive and diverse sample.

In addition, our study did not obtain the pubertal status of the participants, which would be beneficial to include when studying the connection between dating and body image, particularly since prior research suggests that pubertal status plays a role in both dating status and body image (Magnusson et al., 1985; Schooler et al., 2008; Smolak et al., 1993). For example, Smolak et al. (1993) found that adolescent girls who experienced menarche and began dating simultaneously displayed higher rates of body dissatisfaction and disordered eating than girls who did not begin menarche and dating at the same time. Another study found that after experiencing menarche, early adolescent girls became dissatisfied with the shape changes and weight changes in their bodies (O'Dea & Abraham, 1999). In addition, during puberty, boys expressed a greater desire to bulk up their bodies in an effort to appear more sexually desirable (O'Dea & Abraham, 1999). Clearly, pubertal timing can affect the connections between dating and body image in adolescents; thus, future research should be careful to include measurements of both perceived and actual pubertal development.

Another limitation of our study is that we relied solely on the participants' answers to self-report questionnaires. The accuracy of self-reports can be questionable as a result of the participants' moods. Participants may answer differently depending on how they are feeling that particular day. Future research should gather assessments from others who are close to the participants, as adolescents may feel pressure to answer in such a way that causes them to seem appealing. Additionally, participants can overestimate or underestimate their body size, so it could be particularly helpful to assess partners' perspectives. We also did not specify a time period for the body image concerns, which could be important to include as it is possible that body image concerns are not occurring simultaneously with dating. Further, the measures we used seemed to be geared toward specific genders. For example, the Drive for Thinness subscale (Garner et al., 1983) appears to target areas of concern for girls, while the items on the Drive for Muscularity Scale (McCreary & Sasse, 2000) seem to relate more to boys.

Lastly, there are many additional variables worth considering. Our study focused solely on the negative effects that dating has on body image. Although dating has many negative effects on body image, it is likely that there are also positive connections between dating and body image, such as secure relationships promoting higher levels of body satisfaction. Future research should focus on positive effects in addition to the negative effects of dating on body image. In addition, there may be other important dating variables that were not considered in our study. For example, perhaps the amount of time that an adolescent has been dating affects her or his body image. Future research could also address mediating variables. It is possible that the quality of dating relationships affects body image in adolescents. Perhaps adolescents in dating relationships with high levels of conflict report greater body image concerns. For instance, previous research has revealed that when men were depressed, their female partners were more dissatisfied with their bodies and participated in increased levels of unhealthy dieting (Boyes et al., 2007). Furthermore, another study found that women who consider themselves to be involved in satisfying relationships report higher body satisfaction (Friedman et al., 1999).

### **Strengths**

Despite limitations, our study has multiple strengths. First, our sample included both adolescent girls and boys. The majority of research on body image in adolescents focuses solely on girls, because body dissatisfaction is seen as a "girls' issue" (Paxton et al., 2006; Schooler et al., 2008). However, research has shown that adolescent boys also struggle with body image issues at a higher rate than previously thought (Carlson Jones, 2004; Schooler et al., 2008). Therefore, our study provides valuable contributions regarding body image in adolescent boys. In addition, our sample consisted of middle school adolescents. This is a strength because the period of early adolescence is often neglected in the literature. Typically, late adolescents and

college-age women have been the focus of research on body image and dating (Boyes, Fletcher, & Latner, 2007; La Greca & Harrison, 2005).

Second, in our study, we attempted to thoroughly investigate the relationship between dating and body image in adolescent girls and boys. Whereas previous work has tended to focus exclusively on one body image variable, we examined drive for muscularity, drive for thinness, and body dissatisfaction separately. Examining numerous body image variables is beneficial because they measure different components of body image (e.g., fat, muscularity, and overall satisfaction of the body), and it provides a more specific understanding of each of these components of body image. It was particularly important to study these constructs because previous literature shows that girls have a desire to be thinner and boys have a desire to be more muscular (Ricciardelli & McCabe, 2002). Furthermore, our study included two dating variables including both dating status and desire to date. Dating status refers to whether or not adolescents are currently dating, and desire to date is an entirely different category that includes those who want to date. Therefore, it is important to include both variables, since it is possible that adolescents have a desire to date, but are not currently dating.

#### **Implications**

Since it is common in our society to struggle with body image issues, the findings from our study can be used to facilitate understanding of some of the pressures that adolescents are dealing with. Thus, we note that our study has implications for both therapy and education through prevention and intervention programs. First, adolescents struggling with body image issues may want to consider therapy services. Therapy has found to be helpful in changing thoughts toward the body (Legenbauer, Schutt-Stromel, Hiller, & Vocks, 2011).

It is important for clinicians to be acutely aware of the pressures for girls to be thin and boys to be muscular. These pressures can affect many aspects of development in adolescents, including sense of self and self-esteem. Clinicians should address these issues with adolescents, and explore how their body image was developed, and what cultural or family ideals influenced it. Clinicians will also need to focus on the thoughts and behaviors of the individual. According to one study, habitual negative thought patterns regarding appearance have an influence on body dissatisfaction (Verplanken & Tangelder, 2011). Therefore, these negative thought patterns may be identified, and through exploration can be replaced with more positive ideas that encourage self-esteem in the adolescent. The clinician can also address self-care with the client, in an effort to focus on beneficial ways of caring for the mind and body of the client that are not focused on negative thought patterns about body image. Clinicians should highlight internalized messages that adolescents receive from society regarding the thin ideal. It can also be helpful for the therapist to provide some education on healthy weight, and explore healthy options to cope with body image pressures and concerns, such as stress-reducing activities and relaxation techniques.

The family system has a large influence on each individual within the family. Family systems theory states that each individual is part of a family system, which also includes subsystems, such as the couple relationship and parent-child relationships (Cox & Paley, 2003). Family systems theory allows for the clinician to view the individual as part of a family system, which can facilitate exploration of the roles of the system and subsystems on the individual. For example, it can be beneficial to explore the cultural influences that have shaped each family member's body image, as they live within the same cultural context. This can also be an opportunity for family members to discuss the ways they are affected by body image, as they likely experience similar pressures from society. Research has shown that mothers and

daughters have similar rates of body dissatisfaction (Pike & Rodin, 1991). It is likely that their daughters adopt their mothers' body image concerns. Additionally, fathers play a role in influencing early adolescent girls' body dissatisfaction (Blodgett Salafia & Gondoli, 2011). Thus, the impact of fathers should not be discounted.

Clinicians can also help families to explore current messages that are being sent within the family system regarding appearance and the thin ideal in girls and the muscular ideal in boys. In many families, these messages are implicit rather than explicit, and are never openly discussed, but rather implied through statements that are non-direct. Clinicians may also explore the modeling that the parents and older siblings provided for the adolescent in terms of body image and dating. This also creates space for discovery of other family members' internalized beliefs about the thin ideal and muscular ideal, which are likely portrayed through modeling. Family therapy ultimately provides a safe place for the expression of feelings to be openly shared in a productive manner, and encourages communication (Duhig, Phares, & Birkeland, 2002).

In addition to therapy, prevention and intervention are also important in addressing body image concerns. Educators should provide specific definitions of body image, and the different pressures that girls and boys experience, such as the thin ideal and muscular ideal. Parents and schools need to be aware of the effects of peer pressure due to the thin and muscular ideals on adolescents, particularly those interested in dating. Since body dissatisfaction contributes to eating disorder symptoms, it is important for parents and educators to recognize this connection (Wichstrom, 2000). In particular, it would be helpful for parents and schools to have an awareness that adolescents who have a desire to date are likely to have more negative body image, in an effort to recognize the warning signs of eating disorders and other problematic behaviors in these particular groups. Research has shown that 12% of adolescent girls have an

eating disorder (Stice, Marti, Shaw, & Jaconis, 2009). Additionally, one study involving 5<sup>th</sup> grade boys found that 10% of these boys reported binge eating and 4.2% reported self-inducing vomiting (Pearson, Combs, & Smith, 2010). Therefore, education should also be provided on the signs and effects of eating disorders, so parents, schools, and peers can be aware when individuals may be struggling with an eating disorder, and in some way offer appropriate support and guidance. It is also important for parents to talk about body image concerns with their adolescent children at home. Thus, school counselors or other professionals should provide education and workshops about the impact of social pressures on adolescents to school employees, parents, and the students themselves.

In summary, this study has shown that adolescent girls who are interested in dating have a higher drive for thinness and higher rates of body dissatisfaction than adolescent girls who are not interested in dating. To our knowledge, no previous work has been able to tease apart the effects of multiple body image variables and multiple dating variables in both girls and boys. Due to the fact that early adolescence is a vulnerable period when these issues are likely to co-occur, we conclude that it is essential that the connections between dating and body image concerns are addressed. It is particularly important to provide education and therapy services, in hopes of improving adolescents' body image and preventing further problematic behaviors from developing, such as eating disorders.

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### APPENDIX A. DRIVE FOR MUSCULARITY SCALE (MCCREARY & SASSE, 2000)

Please circle the answer that best fits how often you do certain things.

		Never	Rarely	Sometimes	Often	Usually	Always
1.	I wish that I were more muscular.	0	1	2	3	4	5
2.	I lift weights to build up muscle.	0	1	2	3	4	5
3.	I use protein or energy supplements.	0	1	2	3	4	5
4.	I drink weight-gain or protein shakes.	0	1	2	3	4	5
5.	I try to consume as many calories as I can in a day.	0	1	2	3	4	5
6.	I feel guilty if I miss a weight-training session.	0	1	2	3	4	5
7.	I think I would feel more confident if I had more muscle mass.	0	1	2	3	4	5
8.	Other people think I work out too often.	0	1	2	3	4	5
9.	I think that I would look better if I gained 10 pounds in bulk.	0	1	2	3	4	5
10	. I think about taking steroids.	0	1	2	3	4	5
11	. I think that I would feel stronger if I gained a little more muscle mass.	0	1	2	3	4	5
12	. I think that my weight-training schedule interferes with other aspects of my life.	0	1	2	3	4	5

	Never	Rarely	Sometimes	Often	Usually	Always	
13. I think that my arms are too small	0	1	2	3	4	5	
14. I think that my chest is not broad enough.	0	1	2	3	4	5	
15. I think that my legs are not big enough.	0	1	2	3	4	5	

## APPENDIX B. EATING DISORDERS INVENTORY (GARNER ET AL., 1983)

Read each question and circle the number under the column which applies best for you.

	Never	Rarely	Sometimes	Often	Usually	Always
1. ** I eat sweets and carbohydrates without feeling nervous.	0	1	2	3	4	5
2. * I think that my stomach is too big.	0	1	2	3	4	5
3. I'm not sure how to name the feelings I have.	0	1	2	3	4	5
4. I eat when I am upset.	0	1	2	3	4	5
5. I stuff myself with food.	0	1	2	3	4	5
6. ** I think about dieting.	0	1	2	3	4	5
7. I get frightened when my feelings are too strong.	0	1	2	3	4	5
8. * I think that my thighs are too large.	0	1	2	3	4	5
9.** I feel extremely guilty after overeating.	0	1	2	3	4	5
10. * I think that my stomach is just the right size.	0	1	2	3	4	5
11. I feel ineffective as a person.	0	1	2	3	4	5
12. Only outstanding performance is good enough in my family.	0	1	2	3	4	5
13. ** I am terrified of gaining weight.	g 0	1	2	3	4	5

	Never	Rarely	Sometimes	Often	Usually	Always
14. I don't know what I'm feeling.	0	1	2	3	4	5
15. I'm a perfectionist.	0	1	2	3	4	5
16. I feel comfortable talking about my feelings	. 0	1	2	3	4	5
17. * I feel satisfied with the shape of my body.	0	1	2	3	4	5
18. I am open about my feelings.	0	1	2	3	4	5
19. I get confused about what emotion I am feeling.	t 0	1	2	3	4	5
20. I feel alone in the world.	0	1	2	3	4	5
21. I trust others.	0	1	2	3	4	5
22. ** I exaggerate or magnit the importance of weight. (i.e., make it a big deal)		1	2	3	4	5
23. I can clearly identify wha emotion I am feeling.	t 0	1	2	3	4	5
24. I have gone on eating binges where I have felt that I could not stop.	0	1	2	3	4	5
25. I feel generally in control of things in my life.	0	1	2	3	4	5
26. I find it difficult to be operabout my feelings.	en 0	1	2	3	4	5
27. I try very hard to avoid disappointing my parents and teachers.	0	1	2	3	4	5

	Never	Rarely	Sometimes	Often	Usually	Always
28. I can communicate with others easily.	0	1	2	3	4	5
29. * I like the shape of my buttocks.	0	1	2	3	4	5
30. ** I am preoccupied with the desire to be thinner.	0	1	2	3	4	5
31. I wish I were someone else.	0	1	2	3	4	5
32. I don't know what's goin on inside me.	g 0	1	2	3	4	5
33. I feel inadequate.	0	1	2	3	4	5
34. I keep my feelings to myself.	0	1	2	3	4	5
35. I hate being less than best at things.	t 0	1	2	3	4	5
36. I don't know what to call the emotions I feel.	0	1	2	3	4	5
37. I think about bingeing (overeating).	0	1	2	3	4	5
38. I get confused as to whether or not I am hungry.	0	1	2	3	4	5
39. I have close relationships	. 0	1	2	3	4	5
40. My parents have expected excellence of me.	d 0	1	2	3	4	5
41. I worry that my feelings will get out of control.	0	1	2	3	4	5

	Never	Rarely	Sometimes	Often	Usually	Always
42. * I think my hips are too big.	0	1	2	3	4	5
43. I have trouble expressing my emotions to others.	0	1	2	3	4	5
44. I eat moderately in front of others and stuff myself when they're gone.	0	1	2	3	4	5
45. I'm always thinking about how I could have done a better job.	0	1	2	3	4	5
46. I feel secure about myself.	0	1	2	3	4	5
47. I feel bloated after eating a small meal.	0	1	2	3	4	5
48. ** If I gain a pound, I worn that I will keep gaining.	ry 0	1	2	3	4	5
49. When I am upset, I don't know if I am sad, frightened or angry.	0	1	2	3	4	5
50. I feel that I must do things perfectly or not do them at all.	0	1	2	3	4	5
51. I have the thought of trying to vomit (throw up) in order to lose weight.	0	1	2	3	4	5
52. I have a low opinion of myself.	0	1	2	3	4	5
53. I'm never happy with my performance on something.	0	1	2	3	4	5

	Never	Rarely	Sometimes	Often	Usually	Always
54. * I think that my thighs ar just the right size.	re 0	1	2	3	4	5
55. I feel that I can achieve m standards.	y 0	1	2	3	4	5
56. * I think my buttocks are too large.	0	1	2	3	4	5
57. I have feelings I can't quite identify.	0	1	2	3	4	5
58. I eat or drink in secrecy.	0	1	2	3	4	5
59. * I think that my hips are just the right size.	0	1	2	3	4	5
60. I have extremely high goals.	0	1	2	3	4	5
61. When I am upset, I worry that I will start eating.	0	1	2	3	4	5
62. I need to keep people at a certain distance (feel uncomfortable) if someone tries to get too close.	0	1	2	3	4	5
63. I feel that I am a worthwhile person.	0	1	2	3	4	5
64. I feel empty inside (emotionally).	0	1	2	3	4	5
65. I can talk about personal thoughts or feelings.	0	1	2	3	4	5

# \*Body Dissatisfaction items

<sup>\*\*</sup>Drive for Thinness items