Taking the Ideal out of the Thin Ideal

Thesis

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Abstract

For years, scholars have studied the mass media’s impact on adolescent female body image. Studies have shown that the images of the “perfect body,” also known as the “thin ideal” adolescents see in the media negatively impacts body dissatisfaction and self-esteem. The purpose of this study was to test an entertainment education intervention with the goal of counteracting these negative effects. It tested the idea that the thin ideal’s perfect image could be debunked through showing adolescents the pain and suffering that these models go through in attempting to achieve this ideal body. The idea was that adolescents would see that the models’ lives are not all glamour and grace, but instead plagued with eating disorders and mental distress. The investigation hoped that seeing this new image would help protect the adolescents from negative effects. The study predicted that after seeing the reality behind the thin ideal, one’s self-discrepancy between her perception of her actual-self and her ideal-self would decrease, self-esteem would increase, and body dissatisfaction would decrease. After running a three-part experiment to test these ideas, however, the hypotheses were not supported.
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Table of Contents

Abstract ...........................................................................................................................................ii
Acknowledgements.....................................................................................................................iii
Vita................................................................................................................................................iv
List of Tables..................................................................................................................................viii
Chapter 1: Introduction................................................................................................................1
Chapter 2: Literature Review........................................................................................................3
  Entertainment Education..............................................................................................................4
  Transportation..........................................................................................................................7
  Identification/Empathy...............................................................................................................8
  Internalization............................................................................................................................9
  Self-Discrepancy Theory..........................................................................................................10
  Social Comparison Theory.......................................................................................................13
  Self-Discrepancy and Social Comparison Theory Combined..............................................15
  Hypothesis 1a, 1b, 1c................................................................................................................16
  Hypothesis 2a, 2b......................................................................................................................17
Chapter 3: Method.......................................................................................................................18
  Experimental Design................................................................................................................18
Appendix B: Sociocultural Attitudes Towards Appearance Scale..........................46
Appendix C: State Self-Esteem..............................................................................48
Appendix D: Body Rating Scale for 17-Year-Olds..............................................50
Appendix E: Semantic Differential for Self-Discrepancy.....................................51
Appendix F: PANAS-20 Mood Scale.................................................................53
Appendix G: Open-Ended Question..................................................................54
Appendix H: (Adapted) Transportation Scale...................................................55
Appendix I: Scale of State Empathy During Message Processing......................56
Appendix J: Media Exposure Questionnaire......................................................57
Appendix K: Demographic Questions...............................................................58
Appendix L: Distractor Questions & Manipulation Checks.................................59
Appendix M: Recruitment Message...................................................................60
Appendix N: Informed Consent...........................................................................61
List of Tables

Table 1. Descriptive Statistics for Variables in Pre-Test………………………………..44
Table 2. Descriptive Statistics for Variables in Initial Post-Test………………………..44
Table 3. Descriptive Statistics for Variables in Delayed Measure……………………...45
Chapter 1: Introduction

Every day, young women read magazines, watch TV shows, and see advertisements that display the media’s idea of the perfect woman. She’s tall and thin with long legs, white teeth, a clear complexion, and hair so silky it shines. But her looks are not all she has, this perfect looking woman also seems to have the perfect life. The media shows her laughing aside her handsome husband or smiling seductively as she sun bathes on a yacht in Bermuda. The picture of the thin ideal woman, however, often is not healthy. According to Goodman (2005, p. 194), “these media personalities weigh 23% less than the average woman, and the majority meet the weight for anorexia.” This phenomenon is what communication scholars refer to as the thin ideal, and for decades now academics have sought answers regarding how it affects young women across the world. For example, Thomsen (2001) noted that when the media consistently shows visual and editorial messages that suggest that in order to be beautiful, happy, and successful one must be thin, many young women may begin to internalize these media standards in a dangerously unhealthy way. These young women may cling to the unattainable ideal, trying to reach the media’s standards in hopes of obtaining happiness, beauty, and success, while simultaneously developing high levels of body dissatisfaction (Thomsen, 2001).
The effects of the thin ideal are even more important when one considers the prevalence of eating disorders in the United States. According to the National Eating Disorder Association, some 10 million men and 20 million women in the United States suffer from a clinically significant eating disorder. Harrison and Cantor (1997) named the mass media as a culprit in influencing this disordered eating amongst young women through impacting their values, norms, and aesthetic standards. Furthermore, Harrison and Canter (1997, p. 41) noted that, “historical trends, content analyses, and effects studies all suggest that media trends may indeed be linked to the internalization of thinness and, thus, to the development of eating disorders in media consumers.”

The present investigation looked into a possible entertainment education intervention to counteract these demonstrated negative media effects. Specifically, it hoped to reduce female participants’ levels of self-discrepancy to increase self-esteem and decrease body dissatisfaction. Through enhancing self-discrepancies, self-esteem, and body dissatisfaction, the investigation aimed to encourage participants to make self-enhancing, downward social comparisons when looking at the models.

First, the literature review will explain the background of thin ideal research. Then, it will move into the critical ideas and theories that construct this paper: entertainment education mechanisms of transportation and empathy levels, self-discrepancy theory, and finally social comparison theory. Once the hypotheses are discussed, the methods section will then explain the experimental mechanisms that were used to test the hypotheses, including the within-subjects repeated measures design. Next, the results section will report the findings from the experiment. The paper will conclude with discussion of the results as well as future research implications and study limitations.
Chapter 2: Literature Review

Chapter 2 will cover the theoretical background of the present investigation. It begins with an overview of body image research. Then it will discuss entertainment education mechanisms, self-discrepancy theory, and finally social comparison theory.

Grabe, Ward, and Hyde (2008)’s meta-analysis of body image literature provided support for the link between the media’s thin ideal and body dissatisfaction. According to this meta-analysis the scholars found that media exposure was, indeed linked to women’s generalized dissatisfaction with their bodies, which increased their investment in their appearance, and often even increased their support for disordered eating behavior. Thus, it seems well established that the media’s thin ideal is affecting the female population for the worse, so now the question must become: is there a way to attenuate or even counteract these negative effects?

Some scholars have looked into the question of attenuating the negative effects and have studied body image via more traditional, explicit interventions. For example, Halliwell et al. (2011) used a video developed by the Dove Self-Esteem Fund. The study looked to see if watching the Dove video called “Evolution,” which shows a young woman’s photo being airbrushed and digitally altered, ending on a billboard that reads, “No wonder out perception of beauty is distorted,” had any significant impact on young women’s (ages 10-13) body dissatisfaction, general body image, and state body esteem. The scholars found that the girls who did not watch the video before viewing the
idealized models had lower state body dissatisfaction and lower state body esteem, but girls who viewed the video were protected from these negative effects (Halliwell et al., 2011).

Strahan et al. (2008) studied a different kind of intervention that focused on sociocultural body image norms. The experimental group consisted of young girls (mean age 12.5 years) who were involved in the intervention that instructed them to challenge the sociocultural body image norms in a school day, classroom setting. The scholars found that the girls who were in this intervention were less likely to base their self-worth on appearance, which lead them to feel better about their bodies (Strahan et al. 2008). While these interventions have been successful, an entertainment-education type of intervention could be even more successful.

**Entertainment Education**

According to Moyer-Guse (2008) entertainment-education is a popular way to incorporate health messages into everyday media in hopes of positively affecting viewers’ knowledge, attitudes, and even behaviors. Moreover, Moyer-Guse (2008) noted that entertainment-education may be a better strategy to influence attitudes and behaviors as compared with the more traditional, explicit interventions due to narrative messages’ ability to influence in a more subliminal way without activating resistance mechanisms within the viewer.

While many entertainment-education interventions have been done to influence various health behaviors and other prosocial attitudes, little has been done to intervene in the area of body image issues. The present investigation used an entertainment-education intervention for college females at risk for body images issues. The
entertainment education intervention attempted to debunk the aura that surrounds the thin ideal, (that a thin body brings a perfect life) which is perhaps the trigger that makes the media’s thin ideal as potent as it is today.

Scholars have studied the thin ideal at face value for years; they have studied how average women view media models and typically feel badly about themselves when their bodies cannot measure up to that of the models that set the societal standards of beauty. But scholars have yet to touch on the larger picture of this thin ideal: the aura of a perfect life that surrounds it. The media does not just show beautiful women, it shows these beautiful women living “perfect” lives, for example with handsome husbands and in exotic locations. So what would happen when a woman sees a video that debunks this perfect lifestyle? What would happen when a woman sees a video that shows these models depressed rather than happily prancing on a beach? What would happen when women see these models suffering from eating disorders or pressure to alter their bodies via plastic surgery? This investigation examined what happens when women see videos that debunk the thin ideal lifestyle (thin ideal debunking videos, TIDV).

Over the years, popular musicians have used the platform of song and music video to advocate for various issues. Recently, Beyonce came out with a seven-minute music video called “Pretty Hurts” that is a graphic representation of the pain young women experience trying to obtain the “perfect” physique. In the video, Beyonce’s character purges in the bathroom, while another character eats cotton balls behind the set of a beauty pageant. Later in the video, Beyonce is asked what her greatest aspiration in life is, at this point the music video shows her drowning in a pool of water and then her crying out in pain, as she answers the question with her desire to be happy. This is not
the only video that has tackled the thin ideal, however. In the 1990’s, the popular pop group TLC produced a video to their song “Unpretty.” In this video, there is a girl who is self-conscious because her boyfriend wishes she had larger breasts. As she battles with her body dissatisfaction, she thinks breast enhancement will fix her issues, and at the end of the video she goes to the hospital to see the surgery through. When she sees another woman on the operating table, however, she realizes she cannot go through with the surgery. Videos like these show a very different side to the thin ideal. These videos show the pain, the suffering, the disorder, the pressure that goes into obtaining the myth that is perfection.

Could these music videos function as entertainment-education interventions? Could something as simple as one of these music videos, already viewed by millions of viewers around the world have the power to counteract the negative effects of the thin ideal by debunking the assumed perfect lifestyle of these models? Or, might a boomerang effect happen? Perhaps instead of having a prosocial affect, these videos would instead show girls how to obtain the thin ideal through these dangerous mechanisms of purging, starving, or getting surgery. It is critical to know who may be affected by these videos and how. Through studying the entertainment-education mechanisms of transportation and identification along with rich theoretical lenses and an in-lab experiment, this investigation sought to understand how these videos function, who they could help, and who they might hurt.

Viewers of the TIDV witness an aspect of the thin ideal lifestyle that they have never witnessed prior: a life consisting of bulimia, anorexia, and depression. In order to study the potential these videos have to break the thin ideal and attenuate negative effects,
this investigation will first discuss how entertainment-education works via transportation and identification. Then, it will look into a possible moderator of internalization before discussing how change in attitude may happen though a link between self-discrepancy and social comparison theories.

**Transportation**

Before looking into the theoretical mechanisms that may produce change in the viewers, it is important to understand how entertainment-education functions. Moyer-Guse (2008) asserted that entertainment-education messages are effective when viewers are transported into the narrative. Greek and Brock (2000) described transportation as the mechanism through which narratives derive their power. Specifically, Green and Brock (2000, p. 701) define transportation as, “a convergent process, where all mental systems and capacities become focused on events occurring in the narrative.” This means that when watching a video, the viewer is fully focused and immersed in the storyline, so much that they often forget their own current reality. When viewers are transported into a narrative, they often are more adept to accept a persuasive message because they do not consciously realize that they are trying to be persuaded, and thus do not fight the message. In fact, Green and Brock (2000) showed evidence for this persuasive effect in an empirical study validating a transportation scale dealing with reading narratives. With such support, it seems that with the thin ideal lifestyle debunking videos, if a viewer is highly transported, she will be more likely to be affected by the message in the intended prosocial way. However, transportation is not the only key element at play in entertainment-education. One’s identification with the characters is just as important.
Identification Through Empathy

Moyer-Guse (2008) described identification as the emotional and cognitive process through which a viewer takes on the role of the character. Slater and Rouner (2002) further said identification is having sense of similarity with a character in a way that the viewer feels she might have a relationship with this person. Moyer-Guse (2008) noted that empathy is a component in identification. This empathetic dimension of identification is where a person shares feelings with the character. In this process the viewer may become the character in a vicarious way as she feels her emotions. For example, a viewer watching the Beyonce video might experience identification through empathy and take on the role of Beyonce. Here, the individual forgets her current existence and feels the specific emotions Beyonce is experiencing in the video. When this happens, message absorption is likely to increase, which should help to reduce counterarguments to the persuasive message at hand. Thus, if one strongly empathizes with Beyonce in the video, she should take away the message that the media’s standards of beauty are hurting society, and that being this perfect pageant model will not lead to happiness. If a viewer watches the video but does not feel transported, does not feel this sort of identification, she is unlikely to be affected by the message in the desired way, and might instead miss this message and instead just focus on the fact that Beyonce still looks beautiful, and she should still strive to look like her. This investigation is looking at identification through its lens of empathy. Thus, going forward identification will be defined as empathy. Although these levels of empathy and transportation are important factors to discuss, how much a young woman internalizes the thin ideal as a norm and expectation in her every day life is very important as well.
Internalization

Internalization of the thin ideal is a key moderator from past literature that has influenced whether girls are affected by the thin ideal in a positive or negative way. Karazsia et al. (2013, p. 433) described internalization as, “the process of adopting societal ideals of body figures as personal goals and standards, such as the thin ideal for women and the monomorphic ideal for men.” Thus, the more men and women buy into this societal ideal and accept it as a standard for acceptance, the more one has internalized this ideal. Karazsia et al. (2013, p. 436) also said, “it has been suggested that exposure to unrealistically thin models influences body dissatisfaction only among women who have previously internalized the thin ideal. In other words, societal influences only negatively influence the body image of women who have a preexisting desire and drive for a thin body.” Furthermore, Fitzsimmons-Craft et al. (2012) identified internalization as a link to body dissatisfaction, which in turn often predicts disordered eating. This idea of internalization is important to consider when discussing the possible thin ideal debunking videos. Those women who have deeply internalized the thin ideal may likely be more vulnerable to boomerang effects of the thin ideal debunking videos. For women who have highly internalized the thin ideal, they have deeply accepted it as a societal standard, as a norm that they must meet in order to be accepted, beautiful, successful and happy.

It’s possible that these women might see a video like Beyonce’s and rather than seeing her pain, see her strategies of obtaining the ideal body. Or might it be that these highly internalized young women view the videos with heightened empathy levels and transportation and thus experience the prosocial effects.
Self-Discrepancy Theory

Higgin’s (1987) self-discrepancy theory is an important lens through which thin ideal media can be analyzed. According to Higgins, self-discrepancy “is a theory of how different types of discrepancies between self-state representations are related to different kinds of emotional vulnerabilities.” There are three domains of these self-state representations that Higgins refers to: actual self, ideal self, and ought self. Different kinds of discrepancies within these domains result in various positive and negative effects. When looking at the actual self, Higgins (1987, p. 320) described it as, “your representation of the attributes that someone (yourself or another) believe you actually possess.” For example, a celebrated and experienced yoga instructor’s actual self would include attributes such as flexibility, balance, and strength, all qualities of a successful yogi, all qualities this yoga instructor actually possesses. The ideal self is quite different. According to Higgins (1987, p. 320) the ideal is, “your representation of the attributes that someone (yourself or another) would like you, ideally, to possess.” In this realm, an example would be a parents’ ideal desire is for their daughter to be a star athlete, but her actual attributes lend her towards being a successful student. The last domain is the ought self. Higgins (1987, p. 320) described the ought self as, “your representation of attributes that someone (yourself or another) believes you should or ought to possess.” These attributes can be thought of in the light of one’s duty, obligations, or responsibilities. In deciphering the differences between ideal and ought self, Higgins (1987) gave the example of a woman having her own dreams of being a successful professional (ideal self) versus other people’s expectations of her to be a housewife and mother (ought self). Here, one sees the struggle between this woman’s
desire to be a professional and her sense of obligation to fulfill the role other’s expect of her, that of a stay-at-home mom.

Higgins extended these domains further when he develops the different standpoints on the self. Here, self-discrepancy theory differentiates between one’s own personal standpoint on oneself and the standpoint a significant other (parent, sibling, teacher, friend, romantic other) has for oneself. For example, Sarah’s own standpoint on herself versus her friend’s standpoint on herself. In fact, Higgins described six basic types of self-state representations. Due to time and research limitations, however, this investigation chose to only focus on the one standpoint for the thin ideal discussion: the standpoint an individual has on her own actual self versus her own ideal self.

According to Higgins (1987, p. 321), “self-discrepancy theory postulates that we are motivated to reach a condition where our self-concept matches our personally relevant self-guides.” This is important when considering the thin ideal, because if a young woman’s ideal self consists of looking like a model, it is likely that she would suffer the negative consequences of a great discrepancy between her actual self and her idealized self, which also happens to be an unrealistic idealized self. But what are these negative consequences? Higgins (1987) examined many emotional outcomes of discrepancy. For instance, emotions of dissatisfaction, disappointment, and sadness are likely to result in the absence of positive outcomes. If a young woman fails to reach the thin ideal, she will likely feel these dejection-related emotions when the outcomes of her diet and exercise fail to produce the positive outcome of her idealized body. Furthermore, Higgins (1987) said that emotions of fear, threat, and edginess can result in the presence of negative outcomes. For example, if the young woman attempting to reach the thin
ideal is confronted by concerned friends who do not approve of her risky behavior, this vocalized disapproval (negative outcome) is likely to contribute to the agitation-related emotions described above. Higgins described the dangers of great discrepancies between one’s actual self and one’s ideal self:

If a person possesses this discrepancy, the current state of his or her actual attributes, from the person’s own standpoint, does not match the ideal state that he or she hopefully wishes to attain. This discrepancy then represents the general psychological situation of the absence of positive outcomes, and thus the person is predicted to be vulnerable to dejection-related emotions. (1987, p. 322)

Higgins (1987) said even more specifically that this individual is likely to suffer from disappointment and dissatisfaction because their personal hopes are unfulfilled. Feeling disappointment and dissatisfaction can have dangerous consequences when the individual’s ideal self is the thin ideal. Furthermore, Higgins (1987) noted that similar emotions may result from great discrepancies between one’s actual self and one’s ought self.

Self-discrepancy plays an important role in eating disorder literature. Bessenoff (2006, p. 240) noted that this literature, “shows that links have been found between self-discrepancies and emotional vulnerabilities including body dissatisfaction, bulimic symptomology, and anorexic symptomology.” If these discrepancies are so potent, it seems all the more pressing to study interventions that focus on attenuating these alarming discrepancies. The intervention proposed in this paper uses popular music videos that are viewed by millions of young women in the United States. These readily available videos could have the power to pollute the thin ideal in a way that alters a
young woman’s ideal self. When she sees the suffering of the women in the videos, she may realize that what she thought was an ideal lifestyle, is instead far from it. This change in her perceptions of the thin ideal may then reduce her self-discrepancy between her actual self and her ideal self. If this discrepancy is attenuated, the possibility for negative emotional outcomes as well as emotional vulnerabilities to various eating disorder symptomology could be reduced. Lastly, if the ideal is debunked in a way that diminishes a young woman’s self-discrepancy, this could in turn impact her social comparison tendencies that contribute to similar negative body image effects, as do large self-discrepancies.

**Social Comparison Theory**

Social comparison theory has been widely used by scholars when examining the effects of the thin ideal (e.g. Knobloch-Westerwick & Romero, 2011). Festinger’s (1954) social comparison theory suggested that people are drawn to compare themselves to similar others in order to evaluate their own self-worth. One might object that a model is not similar to the average person; however, Goodman (2005) noted that nonetheless, women compare themselves to models:

> It is reasonable that women will use the ultrathin media models for comparison regardless of the marked differences because many women believe thinness is desirable and consider those who are thin remarkably attractive. Festinger noted that in this situation the comparison group will have great power in influencing the individual to move toward conformance. (p. 198)

Social comparison theory explains two basic comparisons that people make: upward and downward comparisons. Chen & Sengupta (2013, p. 742) defined upward comparisons
as those having to do with people who compare themselves with “superior” others. An average woman, for example, comparing her body to a Victoria’s Secret model is making an upward comparison. Upward comparisons are dangerous because they leave the individual feeling deflated and often result in lower state-self esteem and higher body dissatisfaction. However, it is important to note that not all upward comparisons will result in negative effects, for example when young women have inspirational role models, which is discussed later in this section. Downward comparisons, however, usually result in positive effects. According to Chen & Sengupta (2013, p. 742), downward comparisons are those made with “inferior” others. Thus, if one considers herself to be more attractive than her classmate, and compares herself with her “inferior” other, she is likely to feel better about herself.

Aside from these two basic comparisons, it is important to understand the three motivations people have for making comparisons. Knobloch-Westerwick and Romero (2011) took social comparison a step further when they discussed the three utilities for comparison: self-evaluation, self-enhancement, and self-improvement. According to Thomsen (2001, p. 54), “self-evaluation, the most common motive for young women is driven by a desire to compare one’s physical attractiveness against those models or individuals who are considered to be superior in physical attractiveness against those models or individuals who are considered to be superior appearance.” In this way, young women often compare themselves to the media’s beauty standard and often suffer negative effects when they fall short of meeting the unrealistic standards. Moving on to self-improvement and there seems to be possibilities for positive and negative effects. Martin and Gentry (1997, p. 22) described the self-improvement motive as, “an
individual’s attempt to learn how to improve or to be inspired to improve a particular attribute.” This motive can have positive effects if the target of comparison is not seen as a competitor, but rather, as a role model. For example, if a young woman looks up to her professor as an example of what she strives to be, this could be a very positive comparison. Here, her professor is not seen as a competitor, but as a motivator and a team player, helping the young woman better herself to achieve her goals. However, if the target is seen as a competitor, the results are typically negative. For instance, many women look to models as competitors, and thus when they compare themselves to these models in the light of self-improvement, this upward comparison will likely be demoralizing as the young women cannot live up to the standards of these thin ideal models who reign supreme. Finally, the last motivation for comparison is self-enhancement. Martin and Gentry (1997, p. 22) describe this motivation as “an individual’s biased attempt to maintain a positive view of him or herself to protect or enhance self-esteem.” These comparisons are most often downward comparisons that are likely to boost self-esteem.

**Self-Discrepancy and Social Comparison Combined**

With social comparison theory discussed, the investigation moves on to consider the combination of the reduction of self-discrepancy its impact on social comparison effects. As mentioned, body image scholars often described upward social comparisons to thin ideal models as being the culprit for the negative body image effects such as lower state self-esteem and higher body dissatisfaction. This investigation hoped that through raising reducing self-discrepancy and raising self-esteem, that women would perhaps make more positive, self-enhancing social comparisons. For instance, if a young woman
watches a TIDV, and she is transported into the narrative and empathizes with the character who is struggling, she might realize that having the perfect body does not equate to having the perfect life. Moreover, she will likely view herself in a more positive light, happy that she is not suffering as much as the models in the video. In this moment, it is proposed that her ideal self is reduced in a critical way. After seeing these videos, she is less likely to want to be like this model, and she is more likely to be happier with herself (higher self-esteem). Now, the discrepancy between her ideal self and her actual self is reduced. If the ideal-actual self-discrepancy is reduced, it could impact her social comparison tendency. With reduced self-discrepancy, the young woman now is more likely to feel positive emotions, and when she looks to these models, she then is less likely to view them through the typical negative upward comparison lens. In fact, she may now look at these models through a downward lens, which is likely to result in her feeling even better about herself. Thus, through the reduction of self-discrepancies and the altering of social comparison mechanisms that have typically hurt the young women, these negative thin ideal media effects could be attenuated in a positive way. This leads to the first hypothesis set based on transportation and empathy levels.

**H1a:** After a woman views the TIDV, if transportation and empathy levels are high (vs. low), her self-discrepancy between her ideal and actual self will be reduced.

**H1b:** After a woman views the TIDV, if transportation and empathy levels are high (vs. low), her state self-esteem will increase.

**H1c:** After a woman views the TIDV, if transportation and empathy levels are high (vs. low), her body dissatisfaction will be reduced.
However, it is also important to consider a possible boomerang effect. What could potentially explain this boomerang effect is the moderator of internalization. If a young woman has so deeply internalized the thin ideal, she might miss the message of the video entirely and instead still focus on the model’s beauty. This young woman would see these videos would miss the message of hurt and devastation, and instead view the videos in a “how-to” light of achieving the ideal, prompting a dangerous self-improvement comparison. This would be the possible boomerang of the thin ideal debunking videos. This leads to the second hypothesis set.

**H2a:** If thin ideal internalization is very high, after watching the TIDV these women may suffer negative effects: body dissatisfaction will heighten.

**H2b:** If thin ideal internalization is very high, after watching the TIDV these women may suffer negative effects: state self-esteem will be reduced.
Chapter 3: Method

Now that the theoretical foundation has been constructed, it is time to turn to the methods that will be used to test the theories and hypotheses. To test the hypotheses, within-subjects repeated measures design was used in a three-part experiment with a total of 75 undergraduate participants from The Ohio State University. This section begins describing the participants that will be recruited for the study, moves on to describing the proposed measures, proceeds to a detailed explanation of the stimuli that will be used, and ends with the actual experimental procedure.

Experimental Design

The experimental design featured a treatment group that saw ‘thin ideal debunking videos’ (TIDV) and a control group that saw music videos from the same artists that were not related to body ideals. Thus, music video exposure served as a between-subjects factor. Further, several variables (body dissatisfaction, self-esteem, and self-discrepancy) served as repeated measures per a within-subjects factor, as these measures were collected at time one on an online session before the music video exposure, at time two right after music video exposure, and at time three which was a day after music video exposure.

Participants

Participants for this study were recruited through The Ohio State University through e-mail and posts on social media. Because this investigation was strictly
interested in body image media effects on young women, only undergraduate females were eligible. Recruitment information told participants that the study was looking into music video effects, and that it would pay $15 for completing all three parts. A total of 121 participants took the first part of the study, 81 students completed part two, and 75 participants completed the third part. Because only 75 completed all three parts of the study, only these 75 participants were used for data analysis. Of these 75 participants, average age was calculated ($M=19.93, SD=1.14$). Furthermore, 72% defined themselves as being white, 5% as African American, 9% as Asian, 4% as Asian American, 5% as Hispanic, 1% as Ukrainian, and 4% as mixed-race.

**Measures**

Independent and dependent variables, were operationalized via self-report scales that past body image studies have used. Reliabilities were calculated and are included in this section, and all descriptive statistics can be found in Appendix A.

*Pretest: internalization measure.* First, in an online survey, participants took one part of the Sociocultural Attitudes Toward Appearance Questionnaire-3 (see Appendix B), which will set baseline measurements of the participants’ internalization of the thin ideal. Thompson et al. (2004) developed this scale, and according to Vartanian and Dey (2013, p. 497), it, “asses the degree to which people are aware and have endorsed the thin-body ideal.” Example items include, “I compare my body to the bodies of people who are on TV,” and “I’ve felt pressure from TV or magazines to have a perfect body.” Warren et al. (2013, p. 7) tested reliability and found that, “Chronbach’s alpha values and MSAs were excellent for all four groups [European American/White, African American/Black, Asian American, and Latina/Hispanic college women in the USA].” Participants answered on a
100-point Likert scale from (1 = definitely disagree, 100 = definitely agree). The present investigation also found good reliability (alpha=0.83).

**Online pretest: state self-esteem measure.** In order to be able to compare how the videos affect state self-esteem (how one feels about oneself in the present moment), participants completed Heatherton and Polivy’s (1991) state self-esteem scale (see Appendix C) as a pretest and post-test. Items such as “I feel confident about my abilities” were answered on a 100-point sliding scale (1 = not at all, 100 = extremely). Reliability was recalculated after the study (alpha = 0.89).

**Online pretest: body dissatisfaction.** In order to test body dissatisfaction, the appearance-related items in the above-mentioned Heatherton and Polivy (1991) state self-esteem scale were used. The scale includes six items that measure appearance self-esteem, for example, “I feel satisfied with the way my body looks right now,” and “I feel unattractive.” Participants answered these questions on a 100-point sliding Likert scale (1 = not at all, 100 = extremely). The study used appearance self-esteem to measure body dissatisfaction because in attempt to reduce the amount of questions the survey asked the participants about body image. This is important so that the nature of the study was not too obvious to the participants. By adding in a separate body dissatisfaction scale, it would have been more likely that the participants would catch on to what the experiment was trying to test. A high reliability for the test was found (alpha = 0.86).

**Online pretest: self-discrepancy measure.** Here participants completed a self-discrepancy measure that aimed at establishing the difference between their ideal bodies and their actual bodies. To do this, participants saw nine silhouettes of female bodies that range from very thin to obese. The drawings came from the Body Rating Scale for 17-
year-olds (BRS17) (see Appendix D). Sherman et al. (1995) created this scale based on Stunkard et al.’s commonly used 1983 Figure Rating Scale (FRS). Sherman et al. (1995) adapted the FRS to appeal to younger, adolescent females, rather than adult females, which better suited the college-female population being surveyed. First, the participants were instructed to click on the figure that most closely represented what they think they actually look like, later in the study, they saw the same set of figures and click on the figure they ideally would like to look like.

*Online pretest: self-discrepancy via semantic differentials.* In this measure of self-discrepancy participants answered semantic differential items on two scales, the first one read “My actual self is…” and the second one read, “Ideally, I want to be…” Following these phrases, students saw classic semantic differential word pairs taken from Osgood et al. (1957) (See Appendix E). For example, on a 7-point scale participants said to what degree they were (1 = nice, 7 = awful) or (1 = happy, 7 = sad). This scale was meant to help gather more information about participants’ ideas about their actual selves and their ideal selves that could shed a powerful light on the outcomes of the experiment. Reliability was calculated (alpha=0.70).

*In-lab pretest: mood measure.* It was important to identify and control for the moods of the participants before and after the videos. Mood acted as a covariate to explore if participant’s mood contributed to any effects. For instance if a participant loves the control video and feels very happy after watching it, this could have attenuated the effects of the experiment. The 20-item PANAS scale would which has two basic factor loadings: positive affect and negative affect. Watson and Lee (1988) tested the scales for reliability and found both scales to be highly reliable (Positive Affect alpha
Participants answered questions on a 100-point sliding scale (1 = not at all, 100 = very much) that asked them to what extent they felt a variety of different emotions (e.g.: enthusiastic, hostile, jittery, interested, inspired) with the past day (See Appendix F). Reliability was run after the experiment (alpha=0.76).

**In-lab Experiment**

Participants saw one of four music videos. Two of the videos were intervention (thin ideal debunking) videos. The videos used for this experimental condition were Beyoncé’s 2013 “Pretty Hurts” video that was previously detailed as well as TLC’s 1999 video, “Unpretty” video also previously detailed. In Beyoncé’s video, participants heard the song, which includes the refrain, “Pretty hurts, we shine a light on whatever’s worst, perfection is a disease of a nation, pretty hurts, pretty hurts, pretty hurts, we shine a light on whatever’s worst, we try to fix something but you can’t fix what you can’t see, it’s the soul that needs the surgery.” In TLC’s video, participants heard the refrain, “you can buy your hair if it won’t grow, you can fix your nose if he says so, you can buy all the make-up that M.A.C. can make, but if you can’t look inside you, find out who I am too, be in a position to make me feel so unpretty, I’ll make you feel unpretty too. Never insecure until I met you, now I’m being stupid, I used to be so cute to me, just a little bit skinny, why do I do all these things to keep you happy…” For participants in the control conditions, they saw one of two popular videos from Beyoncé and TLC. Both videos are similar to the experimental videos both in length and also in terms of what kind of moods they communicate. The Beyoncé control video is called, “If I Were A Boy,” and it shows Beyoncé’s character struggling in her relationship. The TLC video is called, “Waterfalls,”
and in similar ways to the Beyonce video, shows the characters struggling with their own relationships and infidelity as well.

*Post-Test Measures: Open-Ended Questions.* Directly after watching the videos, participants were asked a simple, open-ended question: “what are your thoughts about the video you just watched?” However, because of time restraints in the study, this was not used in data analysis (see Appendix G).

*Post-Test Measures: Pretest/Post-test Survey Items.* After answering the open-ended questions, the participants were asked to go through the same items that they filled out in the pretest. They completed the self-discrepancy measures, the appearance state self-esteem measure, and the mood measure.

*Post-Test Measures: Transportation.* In order to identify how greatly participants were transported into the narrative, the study used Green and Brock’s (2000) Transportation Scale. Reliability was tested after the study (alpha=0.78), although previous studies have seen higher reliability (alpha = 0.76 (Green and Brock 2011). The scale was originally written for textual narratives, so the study adapted it to fit transportation into a video narrative. For example, items that originally read, “While I was reading the narrative, activity going on in the room around me was on my mind,” were adjusted to read, “While I was watching the video, activity in the room around me was on my mind.” Participants answered such questions on a 100-point sliding scale (1 = disagree very much and 100 = agree very much) (See Appendix H).

*Post-Test Measures: Empathy.* In order to measure how much one identified with the characters in the videos, Shen (2010)’s Scale of State Empathy During Message Processing was used. This scale operationalizes state empathy, which according to Shen
(2010) is the processes through which individuals understand others via three main routes: affective empathy, cognitive empathy, and associative empathy. Shen (2010, p. 506) identified affective empathy as, “the activation and experience of affective reactions to others’ experiences and/or expressions of emotions.” Affective empathy is when an individual feels what another person is feeling at that given moment. Cognitive empathy, on the other Shen (2010) defined as when an individual takes on another person’s point of view or “steps into another’s shoes” in order to more fully understand this other person. The third element is associative empathy, and Shen (2010) defined this as the base for empathy, also calling this type of empathy ‘identification.’ Associative empathy can be better understood by thinking about vicarious experience, or when an individual is influenced by another person’s experience. Shen (2010) notes that it is this kind of empathy that fosters social bounding and relationship development. The scale includes 12 items that tap into these three elements of state empathy. On a 100-point scale (0 = not at all, 100 = completely), participants will read items such as, “The character’s emotions are genuine,” “I can feel the character’s emotions,” and “I can identify with the situation being described in the message” (see Appendix I). Lastly, the scale as a whole showed high reliability (alpha = .93).

Delayed Measure.

A day after the experiment, participants were asked to go online for part three of the study. Here, they first filled out the PANAS scale to determine their current mood. They also answered items that attempted to determine the participant’s media exposure in the day since the experiment. This was a simple questionnaire asking how much time participants had spent with TV, movies, magazines, and music (see Appendix J). This
questionnaire was used to see if any outside exposure to media contributed to their delayed measure results.

After filling out the PANAS scale and identifying their media usage since the videos, the participants then completed the same self-report items they reported after the videos: the self-discrepancy measures, and the state body self-esteem measure.
Chapter 4: Results

Chapter 4 discusses the results of the present investigation. It will begin with an overview of the study’s goals, and it will then state how each hypothesis was analyzed.

This study asked generally if entertainment education music videos showing the suffering both mentally and physically that is often behind the thin ideal could affect female viewers in a way that makes them less susceptible to the thin ideal’s negative effects. The experiment looked into entertainment education mechanisms of transportation and empathy. With the theoretical underpinnings of these in mind, the study proposed that if a viewer was fully engaged in the narrative (high level of transportation vs. low level of transportation), and if she had a high level of empathy with the character that she would be more persuaded by the message of the video. If this were the case, she would take away the message that obtaining the thin ideal and being beautiful does not bring her happiness. The study combined both theoretical constructs of self-discrepancy and social comparison suggesting that watching these videos would help lessen the discrepancy between the viewer’s ideal-self and actual-self. The study also predicted that after viewing these videos, participants’ state self-esteem would increase and body dissatisfaction would decrease. Through raising self-esteem and lowering body dissatisfaction, the study aimed to encourage women to look at the models and make downward social comparisons that are self-enhancing, rather than the typical negative upward comparisons.
To begin the analysis, the originally continuous variables of internalization, transportation, and empathy were recoded into categorical variables that indicated dichotomous high vs. low-level condition of each variable. The variables were recoded into these high vs. low groups using a median split; all participants who scored higher than the median split were considered in the high-level group, and all participants who scored under the median split were categorized into the low-level group.

**Stimuli Analysis**

As a preliminary analysis, the study looked into the different experimental videos to see if participants who saw one differed than those who saw the other. An independent samples t-test was conducted to see if there were significant mean differences between participants who watched the Beyonce video and the TLC video. First, the investigation looked at mean differences for state self-esteem. Results were not significant \( t(36) = 0.76, p = 0.94 \). The same independent samples t-test was conducted looking at mean differences for body dissatisfaction. Again, results were not significant \( t(36) = 0.77, p = 0.45 \).

**H1a: Self-Discrepancy Analysis**

H1a specifically predicted that after a woman views the TIDV, if transportation and empathy levels are high, her self-discrepancy between her ideal and actual self would be reduced. General changes in participants’ levels of self-discrepancy were assessed first. Participants completed the pre-test at least four days before watching the TIDV. Then, participants completed the initial post-test directly after watching the TIDV. The analysis started by computing a new variable that calculated the differences between participants’ initial self-discrepancies and participants’ self-discrepancies after watching
the TIDV. This procedure was done with both self-discrepancy scales. The first scale used the figures based on Stunkard et al.’s Figure Rating Scale (1983) of the nine different body-types. This measure asked participants to note which body type most resembled her actual body, and then which body type most resembled the body she wished she had. The second scale used a semantic differential scale based on Osgood et al. (1957)’s established wording pairs to assess self-discrepancy in a more general way. This scale asked participants to answer on a 7-point scale if she saw herself being, for example, sexy or unattractive, rich or poor, pleasant or unpleasant. To test for interaction effects of transportation and empathy, participants had completed Green and Brock’s Transportation Scale (2000) and Shen (2010)’s Scale of State Empathy During Message Processing scale. The transportation and empathy variables were recoded as high or low level categorical groups based on the above median split description to see interaction in the Analysis of Variance (ANOVA). The investigation also asked participants to complete the Watson and Lee (1988)’s PANAS-20 mood scale to control for participants’ moods.

**H1a: Self-Discrepancy Figure Rating Scale**

To test the first part of the hypothesis that a participant’s self-discrepancy level would be reduced after watching the TIDV based on one’s level of transportation (high vs. low), a 2X2 ANOVA with self-discrepancy at t1 and t2 as within-subjects repeated measures was used. Video exposure condition (thin ideal vs. control) and transportation level (high vs. low) were between-group factors, with mood controlled as a covariate. There was no significant interaction between the within-subjects repeated measures from t1 to t2 of self-discrepancy and the video exposure condition, $F (1, 66) = 0.01, p = 0.91$. 

28
Thus, the video exposure had no impact when comparing the pre and post measures.
Moreover, the interaction between the within-subjects factor of repeated measures from
t1 to t2 of self-discrepancy, the video exposure condition, and the transportation level
was not significant, $F(1, 66) = 0.55, p = 0.46$. Consequently, H1a was not supported:
video condition and transportation level did not interact in a significant way to impact
state self-discrepancy with the figure rating scales.

To test the next part of H1a, that a participant’s self-discrepancy level would be
reduced after watching the TIDV based on one’s level of empathy (high vs. low) a 2X2
ANOVA with self-discrepancy at t1 and t2 as within-subjects repeated measures was
used. Video exposure condition (thin ideal vs. control) and empathy level (high vs. low)
were between-group factors, with mood controlled as a covariate. There was no
significant interaction between the within-subjects repeated measures from t1 to t2 of
self-discrepancy and the video exposure condition, $F(1, 70) = 0.65, p = 0.42$. Thus, the
video exposure had no impact when comparing the pre and post measures. Moreover, the
interaction between the within-subjects factor of repeated measures from t1 to t2 of
self-discrepancy, the video exposure condition, and the transportation level was not
significant, $F(1, 70) = 1.94, p = 0.17$. Consequently, this next aspect of H1a was not
supported: video condition and empathy level did not interact in a significant way to
impact self-discrepancy with the figure rating scales.

**H1a: Self-Discrepancy Semantic Differential**

Next, the investigation used the semantic differential scale for a more general
assessment to measure self-discrepancy. On this scale, for example, participants were
asked on a 7-point scale to what degree they considered themselves to actually be (1 =
nice, 7 = awful) or (1 = happy, 7 = sad). They repeated this scale but were asked how they would ideally like to be. Then the discrepancy variable was calculated by looking at the difference between actual and ideal selves.

To test the first part of the hypothesis that a participant’s self-discrepancy level would be reduced after watching the TIDV based on one’s level of transportation (high vs. low), a 2X2 ANOVA with self-discrepancy at t1 and t2 as within-subjects repeated measures was used. Video exposure condition (thin ideal vs. control) and transportation level (high vs. low) were between-group factors, with mood controlled as a covariate. There was no significant interaction between the within-subjects repeated measures from t1 to t2 of self-discrepancy and the video exposure condition, \( F(1, 65) = 2.38, p = 0.13 \). Thus, the video exposure had no impact when comparing the pre and post measures. Furthermore, the interaction between the within-subjects factor of repeated measures from t1 to t2 of self-discrepancy, the video exposure condition, and the transportation level was not significant, \( F(1, 65) = 0.18, p = 0.67 \). Consequently, H1a was not supported when using the semantic differential scale: video condition and transportation level did not interact in a significant way to impact self-discrepancy.

To test the next part of the H1a that after watching the TIDV, a participant’s self-discrepancy level would be reduced after watching the TIDV based on one’s level of empathy (high vs. low), a 2X2 ANOVA with self-discrepancy at t1 and t2 as within-subjects repeated measures was used. Video exposure condition (thin ideal vs. control) and empathy level (high vs. low) were between-group factors, with mood controlled as a covariate. There was no significant interaction between the within-subjects repeated measures from t1 to t2 of self-discrepancy and the video exposure condition, \( F(1, 69) = \)
1.05 p = 0.31. Consequently, the video exposure had no impact when comparing the pre and post measures. Moreover, the interaction between the within-subjects factor of repeated measures from t1 to t2 of self-discrepancy, the video exposure condition, and the empathy level was not significant, $F(1, 69) = 0.21, p = 0.65$. Thus, H1a was not supported with the semantic differential measure: video condition and empathy level did not interact in a significant way to impact state self-discrepancy.

**H1b: State Self-Esteem**

After not finding any significant results with self-discrepancy, the study looked to see if there were any changes in self-esteem between the pre-test and the post-test. To test for state self-esteem, the participants completed the 20-item Heatherton and Polivy (1991) state self-esteem scale. The self-esteem scores were standardized into Z-scores because the pre-test self-esteem scale was based on a 100-point sliding scale, and the post-test self-esteem scale was based on an 11-point scale.

To test H1b that after watching the TIDV, a participant’s state self-esteem would increase based on one’s level of empathy (high vs. low) a 2X2 ANOVA with state self-esteem at t1 and t2 as within-subjects repeated measures was used. Video exposure condition (thin ideal vs. control) and empathy level (high vs. low) were between-group factors, with mood controlled as a covariate. There was no significant interaction between the within-subjects repeated measures from t1 to t2 of state self-esteem and the video exposure condition, $F(1, 70) = 0.29, p = 0.59$. Thus, the video exposure had no impact when comparing the pre and post measures. Furthermore, the interaction between the within-subjects factor of repeated measures from t1 to t2 of state self-esteem, the video exposure condition, and the empathy level was not significant, $F(1, 70) = 0.86, p =$
0.36. Consequently, this part of H1b was not supported: video condition and empathy level did not interact in a significant way to change state self-esteem.

H1b also included transportation. It predicted that a woman’s state self-esteem would change after watching the TIDV depending on her transportation level (high vs. low). To test this, a 2X2 ANOVA with state self-esteem at t1 and t2 as Within-subjects repeated measures was used. Video exposure condition (thin ideal vs. control) and transportation level (high vs. low) were between-group factors, with mood controlled as a covariate. There was no significant interaction between the Within-subjects repeated measures from t1 to t2 of state self-esteem and the video exposure condition, $F(1, 66) = 0.25, p = 0.62$. Thus, the video exposure had no impact when comparing the pre and post measures. Moreover, the interaction between the Within-subjects factor of repeated measures from t1 to t2 of state self-esteem, the video exposure condition, and the transportation level, $F(1, 66) = 1.95, p = 0.17$. Thus, this next aspect of H1b was not supported.

**H1c: Body Dissatisfaction**

To test the hypothesis that body dissatisfaction would decrease after watching the TIDV based on one’s level of empathy (high vs. low) a 2X2 ANOVA with body dissatisfaction at t1 and t2 as Within-subjects repeated measures was used. Video exposure condition (thin ideal vs. control) and empathy level (high vs. low) were between-group factors, with mood controlled as a covariate. There was no significant interaction between the Within-subjects repeated measures from t1 to t2 of body dissatisfaction and the video exposure condition, $F(1, 70) = 1.39, p = 0.24$. Thus, the video exposure had no impact when comparing the pre and post measures. Furthermore,
the interaction between the within-subjects factor of repeated measures from t1 to t2 of body dissatisfaction, the video exposure condition, and the empathy level was not significant, $F(1, 70) = 1.30, p = 0.26$. Consequently, H1c was not supported: video condition and empathy level did not interact in a significant way to alter body dissatisfaction.

H1c also included measures of transportation. It predicted that a woman’s body dissatisfaction would change after watching the TIDV depending on her transportation level (high vs. low). To test this, a 2X2 ANOVA with body dissatisfaction at t1 and t2 as within-subjects repeated measures was used. Video exposure condition (thin ideal vs. control) and transportation level (high vs. low) were between-group factors, with mood controlled as a covariate. There was no significant interaction between the within-subjects repeated measures from t1 to t2 of body dissatisfaction and the video exposure condition, $F(1, 70) = 1.01, p = 0.16$. Thus, the video exposure had no impact when comparing the pre and post measures. Moreover, the interaction between the within-subjects factor of repeated measures from t1 to t2 of body dissatisfaction, the video exposure condition, and the transportation level was not significant, $F(1, 66) = 1.29, p = 0.26$. Therefore, H1c was not supported.

**Hypothesis 2a: Self-Esteem with Internalization**

H2a looked into the potential boomerang effect: if thin ideal internalization was high (vs. low), after watching the TIDV women may suffer negative effects: body dissatisfaction would increase and self-esteem would decrease. To study the self-esteem aspect, participants completed the 20-item Heatherton and Polivy (1991) self-esteem scale. To measure internalization, the participants completed the Sociocultural Attitudes
Toward Appearance Questionnaire-3 to test levels of internalization in the pre-test. As described previously, internalization was computed into a dichotomous categorical variable (high vs. low) based on the median split. The variables were recoded in this way to be able to see interaction in the ANOVA.

To test H2a that a participant’s self-esteem levels after watching the TIDV would change based on one’s baseline level of internalization (high vs. low), a 2X2 ANOVA with state self-esteem at t1 and t2 as within-subjects repeated measures was used. Video exposure condition (thin ideal vs. control) and internalization level (high vs. low) were between-group factors, with mood controlled as a covariate. There was no significant interaction between the within-subjects repeated measures from t1 to t2 of state self-esteem and the video exposure condition, $F(1, 70) = 0.44, p = 0.51$. Thus, the video exposure had no impact when comparing the pre and post measures. Moreover, the interaction between the within-subjects factor of repeated measures from t1 to t2 of state self-esteem, the video exposure condition, and the internalization level was not significant, $F(1, 70) = 0.01, p = 0.92$. H2a was not supported: video condition and internalization level did not interact in a significant way to impact state self-esteem.

**H2b: Body Dissatisfaction**

The study then looked to see if there were specific changes in body dissatisfaction, which was measured using a 6-item subscale from the 20-item Heatherton and Polivy (1991) self-esteem scale that specifically looks at appearance self-esteem. A 2X2 ANOVA with body dissatisfaction at time one and time two as repeated measures was conducted, using video exposure condition (thin ideal vs. control) and internalization (low vs. high) as between-group factors, while controlling for mood as a covariate. There
was no significant interaction between the within-subjects repeated measures from t1 to t2 of body dissatisfaction and the video exposure condition, $F (1, 70) = 1.80, p = 0.18$, which reflects that the video exposure had no impact when comparing the pre and post measures. Further, the interaction between the within-subjects factor of repeated measures from t1 to t2 of body dissatisfaction, the video exposure condition, and the internalization level was not significant, $F (1, 70) = 0.00, p = 0.97$. Thus, H2b was not supported: video condition and internalization level did not interact in a significant way to impact body dissatisfaction.

**Delayed Measure**

The present investigation was a three-part study that included a delayed measure to see if the experiment produced any lasting effects. However, because there were no significant changes detected between the pre-test and the initial post-test, the delayed measure was not necessary, as there were no significant post-test effects to test a day later in the delayed measure.
Chapter 5: Discussion

The purpose of this study was to find a simple intervention to counteract the negative effects of the media’s thin ideal on female adolescents. The investigation showed participants music videos with messages of the darkness (eating disorders, mental distress, depression) that models often face trying to achieve the thin ideal. The investigation hoped that after seeing these music videos, participants might see the thin ideal in a new, less desirable way. The study predicted that after viewing these videos, participants would feel better about themselves. Overall, the desired effect was that the videos would reduce the adolescents’ discrepancies between their perceptions of their actual selves and their ideal selves in a way that boosts self-esteem and lowers body dissatisfaction. After viewing the videos, researchers hoped that participants would look at the models and make downward social comparisons that are self-enhancing, instead of the typical negative upward social comparisons. This section will look at the findings, the limitations of the study, and the implications to future research in this area.

Findings

H1a

H1a predicted that after a woman viewed the TIDV, if transportation and empathy levels were categorically high (vs. low), her self-discrepancy between her ideal and actual self would be reduced, her body dissatisfaction would be lower, and her state self-esteem would increase. Statistical analysis did not support H1a. There were no differences
found in self-discrepancy within subjects between t1 and t2, nor was there any significant interaction with transportation level (high vs. low) or empathy level (high vs. low).

**H1b**

H1b predicted that after a woman viewed the TIDV, if transportation and empathy levels were categorically high (vs. low), her state self-esteem would increase. Statistical analysis did not support H1b. There were no differences found in state self-esteem within subjects between t1 and t2, nor was there any significant interaction with transportation level (high vs. low) or empathy level (high vs. low).

**H1c**

H1c predicted that after a woman viewed the TIDV, if transportation and empathy levels were categorically high (vs. low), her body dissatisfaction would decrease. Statistical analysis did not support H1c. There were no differences found in body dissatisfaction between t1 and t2, nor was there any significant interaction with transportation level (high vs. low) or empathy level (high vs. low).

**H2a**

H2a predicted that if thin ideal internalization was high (vs. low), after watching the TIDV, state self-esteem would decrease. After careful analysis of internalization levels (high vs. low) and video condition (thin ideal vs. control), H2a was not supported, no significant differences were found within subjects between t1 and t2 on state self-esteem, nor was there any significant interaction with internalization level.

**H2b**

H2b predicted that if thin ideal internalization was high (vs. low), after watching the TIDV, body dissatisfaction would increase. After careful analysis of internalization
levels (high vs. low) and video condition (thin ideal vs. control), H2b was not supported: no significant differences were found within subjects between t1 and t2 state self-esteem or on body dissatisfaction, nor was there any significant interaction with internalization level.

**Implications and Future Research**

This study found that even music videos that include specific messages about the negative consequences of the thin ideal do not help to raise awareness about the issue in a way that actually helps adolescents. Although these artists were trying to communicate a message to their listeners that societal beauty ideals are harmful, and that achieving this beauty will not lead to happiness, viewers missed the message. After viewing the videos, there were no changes in self-discr epancy, body dissatisfaction or self-esteem. This study showed how strongly ingrained the thin ideal is in our culture, because it even when music videos include explicit messages about the damaging effects of society’s beauty ideals, the female viewers were not impacted in any significant way.

While the participants’ self-discrances, state self-esteem and body dissatisfaction levels did not change significantly, the idea of reducing self-discr epancy in order to lower body dissatisfaction and raise self-esteem to encourage positive, self-enhancing social comparisons is still a worthy one to explore. What this study found is that perhaps entertainment education is not a good fit for body image interventions because the thin ideal is so ingrained in the American culture. Thus, in the future, it would be valuable to use this same construct; however, instead of using this entertainment education approach with music videos, use more traditional and explicit
stimuli that directly confront the issue to educate girls about body image and self-esteem issues.

Using more traditional and explicit interventions would be very relevant because in the past few months many large companies and media outlets have begun to address this body image issue. For example, Dove has created many body image PSA commercials and YouTube videos. The Today Show had an entire week-long news segment called “Love Your Selfie,” which was aimed at raising awareness about body image problems. Popular websites such as the Huffington Post have been publishing articles and blogs about body image; and, even popular clothing companies like American Eagle confronted the issue when they launched their lingerie campaign that highlighted their use of women with curvy bodies, and their banning of airbrushing the models. Through all this, the conversation around the negative effects of the media’s thin ideal seems to be gaining great momentum. Going forward, much could be learned much by applying the theoretical lens developed in this study to explicit campaigns like the ones mentioned above. Are Dove’s PSAs leading women to actually feel better about themselves? Did the Today Show’s “Love Your Selfie” week affect viewers in a meaningful way? Are the blogs on websites like The Huffington Post empowering women to rise above the negative effects of the thin ideal? Are American Eagle’s new policies on model casting and air brushing helping women feel better about their own bodies? These are worthwhile questions to explore.

Limitations

There were many limitations that this study faced. First the stimuli will be discussed, next the research design, then data collection issues. Starting with the stimuli:
a major issue was that the two different music videos used, “Pretty Hurts” and “Unpretty,”
though similar in that they both discussed body dissatisfaction, they were different in
terms of how they presented the issue. One told a story about getting plastic surgery to
fix her issues, while the other showed the mental distress and disordered eating.
Furthermore, in “Pretty Hurts,” although the song’s lyrics communicate a message that
our culture’s beauty ideal is destructive and that it's hurting our young women, the video
still show’s Beyonce’s character looking perfect on stage as a beauty contestant. This is a
major limitation, as it seems to negate the message that the song is trying to communicate.
Sure, the video also shows Beyonce’s character suffering many negative mental effects
(depression, disordered eating…), but it still highlights the perfection of her body.
Instead of hearing the song’s true message, the viewers were distracted by Beyonce’s
beauty. It was hoped that the message of the song would still be powerfully
communicated, however this was not the case. This same idea goes for the TLC video,
“Unpretty.” Although the main character in this video is struggling with her own body
image and pressure to have her breasts enlarged, she is nonetheless a beautiful, thin
woman who fit’s our culture’s thin ideal. Finally, it is also worthwhile to consider the
fact that the TLC video was very dated. It was an older video from the 90’s, and perhaps
participants (many of whom were born in the late ‘90s) could not relate to it.

Furthermore, it is important to consider the control videos (TLC’s “Waterfalls,”
and Beyonce’s “If I Were a Boy”). Because any music video will have some sort of
message, it is difficult to use videos in the control condition. The investigation used
control videos that matched the experimental videos in terms of mood. The control
videos also did not fit the traditional thin ideal video mold: bodies in the videos were not
objectified, nor were they the focal point of the videos. However, these music videos still
told a story, and the participants in the control condition interpreted the messages and
were likely affected in some way. Because it is hard to have a strict control video, where
participants do not experience any sort of media effect, in the future, it would be
beneficial to use traditional thin ideal videos in this “control condition.” Using traditional
thin ideal music videos would allow a study to compare and contrast the differences
between participants who see a typical music video that includes blatant body
objectification video, and participants who see the experimental video that includes the
intervention message.

Another limitation was the research design. Pre-test/post-test research design
always poses a threat that participants will catch on to the purpose of the study and will
remember their answers from the first time they took the surveys. In addition, the pre-
test likely primed the participants as to what the study was about before they watched the
music video, and then they were reminded again when they took the post-test survey.
This is likely priming effect is due to the nature of the survey questions in studying body
image. The study had deleted some measures that seemed to be too blatantly studying
body dissatisfaction. For instance, the researchers eliminated the Eating Disorder
Inventory that included items such as, “I think my stomach is too big,” “I think my thighs
are too large,” and “I think that my hips are just the right size,” and instead just used the
appearance-items from the state self-esteem scale. However, it is likely that the questions
were still too blatant in what they were trying to measure. This is harmful to the study
because when participants catch on to what the study is about, they will likely report
more socially desirable answers, especially when the topic is something as personal and
as sensitive as body image is. Most participants wouldn’t want to openly admit that they are self-conscious about their bodies.

Going forward it would be important to try to tap into body image in a more subtle way, if possible. Perhaps, for instance, using the body figures from Sherman et al.’s (1995) Body Rating Scale was too obvious a measure of actual versus ideal self-discrepancy. Thus, in the future relying on the semantic differential scale, which includes many items that are not about body image, might be more effective. Future investigations could also try using implicit measures to study body image in less obvious way.

Data collection issues proposed great limitations. Because the study used undergraduate females outside of the Communication Department to study girls who were not well versed in communication theory and body image research, the study recruited through e-mail and Facebook. This proved to be very challenging even with the advertised $15 payment. Thus, recruitment was slow, and although the researchers had just under a full academic year to recruit and collect data, there was till not enough time to recruit the needed amount of participants. At the end of data collection, there was an issue with how the research assistant ran the lab portion of the experiment that lead the researchers to believe they had over the necessary 100 participants needed to analyze the data, when in actuality, there were only 75. Only having 75 participants was a major factor that likely led to the results being as insignificant as they were. Furthermore, not all participants’ data was entirely valid, leaving differing participant totals varying from 65 to 75 for data analysis in SPSS.
Conclusion

This study tested an entertainment education intervention that hoped to find a simple way (example: watching a music video) to counteract the negative effects of the media’s thin ideal. The study hoped that by showing adolescents that having the perfect body does not mean having the perfect life. The study also hoped to show participants that often the models they see go through extreme mental duress in attempting to achieve the ideal. After hearing these messages, the study had predicted that participants would be impacted in a meaningful way. However, no significant effects were found. Although the theoretical construct that drove this study did not result in the desired effects, the study is still an important step in understanding the thin ideal’s impact on adolescent females. Going forward, it would be beneficial to explore this theoretical concept by applying it to more explicit intervention videos that directly target body image issues.
Appendix A: Descriptive Statistics

Table 1
Descriptive Statistics for Variables in Pre-Test

<table>
<thead>
<tr>
<th></th>
<th>Control Condition</th>
<th>Experimental Condition</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
</tr>
<tr>
<td>Self-Discrepancy Figure Scale</td>
<td>0.23</td>
<td>0.98</td>
</tr>
<tr>
<td>Self-Discrepancy Semantic Differential</td>
<td>0.54</td>
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<tr>
<td>Internalization</td>
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<tr>
<td>Mood</td>
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<td>9.89</td>
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<tr>
<td>State Self-Esteem</td>
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<td>0.86</td>
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<tr>
<td>Body Dissatisfaction</td>
<td>0.32</td>
<td>0.78</td>
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*Note 100-point sliding scales were used, Z-scores are reported for state self-esteem and body dissatisfaction

Table 2
Descriptive Statistics for Variables in Initial Post-Test

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<tr>
<td>Self-Discrepancy Figure Scale</td>
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<tr>
<td>Self-Discrepancy Semantic Differential</td>
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<td>Empathy (Identification measure)</td>
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<td>Transportation</td>
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<tr>
<td>Mood</td>
<td>63.19</td>
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<tr>
<td>State Self-Esteem</td>
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<td>0.82</td>
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<tr>
<td>Body Dissatisfaction</td>
<td>0.23</td>
<td>0.82</td>
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</table>

*Note 100-point sliding scales were used, Z-scores are reported for self-esteem and body dissatisfaction
Table 3  
*Descriptive Statistics for Variables in Delayed Measure*

<table>
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<tr>
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<td><strong>SD</strong></td>
<td><strong>M</strong></td>
<td><strong>SD</strong></td>
</tr>
<tr>
<td>Self-Discrepancy Figure Scale</td>
<td>0.70</td>
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<tr>
<td>Self-Discrepancy Semantic Differential</td>
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<td>Media Exposure</td>
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<td>Mood</td>
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<td>0.85</td>
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<td>1.03</td>
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<tr>
<td>Body Dissatisfaction</td>
<td>0.28</td>
<td>0.80</td>
<td>-0.3</td>
<td>1.10</td>
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</tbody>
</table>

*Note media exposure asked participants how many hours they had spent with various media since the lab session*

*Note 100-point sliding scales were used, Z-scores are reported for self-esteem and body dissatisfaction*
Appendix B: Sociocultural Attitudes Towards Appearance Scale-3 (SATAQ-3)

Thompson et al. (2004)

Please read each of the following items carefully and indicate the number that best reflects your agreement with the statement.

Participants will answer on a 5-point Likert scale (1 = definitely disagree, 2 = mostly disagree, 3 = neither agree nor disagree, 4 = mostly agree, 5 = definitely agree).

1. TV programs are an important source of information about fashion and "being attractive."
2. I've felt pressure from TV or magazines to lose weight.
3. I do not care if my body looks like the body of people who are on TV.
4. I compare my body to the bodies of people who are on TV.
5. TV commercials are an important source of information about fashion and "being attractive."
6. I do not feel pressure from TV or magazines to look pretty.
7. I would like my body to look like the models who appear in magazines.
8. I compare my appearance to the appearance of TV and movie stars.
9. Music videos on TV are not an important source of information about fashion and "being attractive."
10. I've felt pressure from TV and magazines to be thin.
11. I would like my body to look like the people who are in movies.
12. I do not compare my body to the bodies of people who appear in magazines.
13. Magazine articles are not an important source of information about fashion and "being attractive."
14. I've felt pressure from TV or magazines to have a perfect body.
15. I wish I looked like the models in music videos.
16. I compare my appearance to the appearance of people in magazines.
17. Magazine advertisements are an important source of information about fashion and "being attractive."
18. I've felt pressure from TV or magazines to diet.
19. I do not wish to look as athletic as the people in magazines.
20. I compare my body to that of people in "good shape."
21. Pictures in magazines are an important source of information about fashion and "being attractive."
22. I've felt pressure from TV or magazines to exercise.
23. I wish I looked as athletic as sports stars.
24. I compare my body to that of people who are athletic.
25. Movies are an important source of information about fashion and "being attractive."
26. I've felt pressure from TV or magazines to change my appearance.
27. I do not try to look like the people on TV.
28. Movie starts are not an important source of information about fashion and "being attractive."
29. Famous people are an important source of information about fashion and "being attractive."
30. I try to look like sports athletes.
Appendix C: State Self-Esteem

Heatherton and Polivy (1991)

“This is a questionnaire designed to measure what you are thinking at this moment. There is of course, no right answer for any statement. The best answer is what you feel is true of yourself at the moment. Be sure to answer all of the items, even if you are not certain of the best answer. Again, answer these questions as they are true for you RIGHT NOW.”

100-point sliding scale (1 = not at all, 100 = extremely)

1. I feel confident about my abilities.
2. I am worried about whether I am regarded as a success or failure.

3. **I feel satisfied with the way my body looks right now.**
4. I feel frustrated or rattled about my performance
5. I feel that I am having trouble understanding things that I read.

6. **I feel that others respect and admire me.**
7. **I am dissatisfied with my weight.**
8. I feel self-conscious.
9. I feel as smart as others.
10. I feel displeased with myself.

11. **I feel good about myself.**
12. **I am pleased with my appearance right now.**
13. I am worried about what other people think of me.
15. I feel inferior to others at this moment.

16. **I feel unattractive.**
17. I feel concerned about the impression I am making.
18. I feel that I have less scholastic ability right now than others.
19. I feel like I’m not doing well.
20. I am worried about looking foolish.

**Scoring:** Items 2, 4, 5, 7, 8, 10, 13, 15, 16, 17, 18, 19, 20 are reverse-scored. Sum scores from all items and keep scale as a continuous measure of state self esteem. The subcomponents are scored as follows:

Performance Self-esteem items: 1, 4, 5, 9, 14, 18, 19. Social Self-esteem items: 2, 8, 10, 13, 15, 17, 20. Appearance Self-esteem items: 3, 6, 7, 11, 12, 16.
Appendix D: Body Rating Scale for 17-year-olds (BRS17), Sherman et al. (1995)
Appendix E: Semantic Differential for Self-Discrepancy


On a scale from 1 – 7 please rate how each of the following sets of words match your ACTUAL self (actual self being the person you truly are today).

*Will repeat this scale for how they view their IDEAL selves (how they wish they were)*

Good 1 2 3 4 5 6 7 Bad

**Large 1 2 3 4 5 6 7 Small**

**Beautiful 1 2 3 4 5 6 7 Ugly**

Hard 1 2 3 4 5 6 7 Soft

**Strong 1 2 3 4 5 6 7 Weak**

Valuable 1 2 3 4 5 6 7 Worthless

Loud 1 2 3 4 5 6 7 Soft

Pleasant 1 2 3 4 5 6 7 Unpleasant

Happy 1 2 3 4 5 6 7 Sad

**Heavy 1 2 3 4 5 6 7 Light**

Relaxed 1 2 3 4 5 6 7 Tense

Brave 1 2 3 4 5 6 7 Cowardly

Rich 1 2 3 4 5 6 7 Poor

**Thick 1 2 3 4 5 6 7 Thin**

Nice 1 2 3 4 5 6 7 Awful

**Angular 1 2 3 4 5 6 7 Rounded**

Honest 1 2 3 4 5 6 7 Dishonest

Rough 1 2 3 4 5 6 7 Smooth
<table>
<thead>
<tr>
<th>Healthy 1 2 3 4 5 6 7 Sick</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Wide 1 2 3 4 5 6 7 Narrow</strong></td>
</tr>
</tbody>
</table>
Appendix F: PANAS-20 Mood Scale


To what extent have you felt the following emotions TODAY. Please answer on a 5-point scale (1 = very slightly or not at all, 100 = very much)

- Enthusiastic
- Interested
- Determined
- Excited
- Inspired
- Alert
- Active
- Strong
- Proud
- Attractive
- Scared
- Afraid
- Upset
- Distressed
- Jittery
- Nervous
- Ashamed
- Guilty
- Irritable
- Hostile
Appendix G: Open-Ended Question

Please answer the following question fully, being as detailed and honest as possible.

“What are your thoughts on the video you just saw?”
Appendix H: (Adapted) Transportation Scale
Green and Brock (2000)

Please indicate the degree to which you agree with the following statements, where 1 = not at all and 100 = very much.

Panel 1: General items

1. While watching the video, I could easily follow the events in it taking place.
2. While I watching the video, activity going on in the room around me was on my mind. (R)
3. I could picture myself in the scene of the events being shown in the video.
4. I was mentally involved in the narrative while watching it.
5. After finishing the video, I found it easy to put it out of my mind. (R)
6. I wanted to learn how the video ended.
7. The video affected me emotionally.
8. I found myself thinking of ways the narrative could have turned out differently.
9. I found my mind wandering while watching the video. (R)
10. The events in the video are relevant to my everyday life.
11. The events in the video have changed my life.

Note: R= reverse-scored
Appendix I: Scale of State Empathy During Message Processing


Please read the following 12 items and identify how much you agree with each statement on a scale ranging from 1-100 (1 = “not at all,” 100 = “completely”)

1. The character’s emotions are genuine.
2. I experienced the same emotions as the character when watching this message.
3. I was in a similar emotional state as the character when watching this message.
4. I can feel the character’s emotions.
5. I can see the character’s point of view.
6. I recognize the character’s situation.
7. I can understand what the character was going through in the message.
8. The character’s reactions to the situation are understandable.
9. When watching the message, I was fully absorbed.
10. I can relate to what the character was going through in the message.
11. I can identify with the situation described in the message.
12. I can identify with the characters in the message.
Appendix J: Media Exposure Questionnaire

Since you last participated in this study (in the lab experiment) please use the following item increments to estimate the amount of time you have spent with the following media:

How many hours of TV do you watch on a typical day (1 hour increments, up to 10 hrs or more)

How many hours of radio do you listen to on a typical day (up to 10 hrs or more)

How many hours do you spend listening to music (CD/MP3 etc., not radio) on a typical day (up to 10 hrs or more)

How many hours do you spend using the internet on a typical day (up to 10 hrs or more)

How many music videos do you watch in a typical week?

How many magazines do you read in a typical week?
Appendix K: Demographic Questions

1. Age on today’s date in years:
2. Ethnicity:
3. Height:
4. Weight:
Appendix L: Distractor Questions & Manipulation Checks

1. I find music videos to be a source of entertainment.
2. I rather watch music videos than listen to music.
3. I rather listen to music than watch music videos.
4. Beyonce is one of my favorite female vocalists.
5. TLC is one of my favorite female pop music groups.
6. I use music to relax.
7. I use music for motivation.
8. I listen to music while I do school work.
9. I listen to music while I drive.
10. I listen to music while I exercise.
11. I often pay close attention to a song’s lyrics.
12. I often play close attention to a music video’s message.
13. I often go on YouTube to watch music videos.
14. I listen to music every day.
15. Music plays a large role in my life.
Appendix M: Recruitment Message

Calling all female undergraduate students! You are invited to participate in a three-part research study on music videos. You will be paid $15 for completion of the entire study.

Please contact Julie Wojno at Wojno.5@osu.edu if you are interested in scheduling a lab session. Please note that out of the three parts to this study, only part two is in the Journalism Building lab. The first and third parts are simple online surveys you can complete at home.
Appendix N: Informed Consent

The Ohio State University Consent to Participate in Research

Study Title: Enjoyment of Music Videos

Researcher: Dr. Silvia Knobloch-Westerwick

This is a consent form for research participation. It contains important information about this study and what to expect if you decide to participate.

Your participation is voluntary.

Please consider the information carefully. Feel free to ask questions before making your decision whether or not to participate. If you decide to participate, you will be asked to sign this form and will receive a copy of the form.

Purpose: This study is being conducted to explore enjoyment of music videos.

Procedures/Tasks: If you agree to participate, you will first create a code that will act as your name throughout the study (the researchers will direct you on how to formulate this code). This code ensures that your data will be held confidentially. It also enables you to withdraw your data if you so choose up to three weeks after your participation. After the consent form and code is created, you will first perform a pre-test survey. Then, you will schedule a time to come into the lab for the in-lab portion, which involves watching a music video and filling out another survey. Finally, you will fill out one more survey online two days later.

Duration: The first online survey will take about 15-minutes. The in-lab portion will take approximately 30-minutes. The final online survey will again take approximately 15-minutes. You may stop the study at any time but will not be reimbursed for your participation. If you decide to stop participating in the study, there will be no penalty to
you and you will not lose any benefits to which you are otherwise entitled. Your decision will not affect your future relationship with The Ohio State University.

**Risks and Benefits:** This study does not involve any more than minimal risk to the participant. In other words, there are no harms or discomforts beyond what is ordinarily encountered in daily life via the media. All questionnaires involved in the study will be completely anonymous. You will benefit from participation in this experiment by learning more about how studies are conducted in communication research. Your data will also help us to advance knowledge of how people learn health information.

**Confidentiality:** If you choose to fill out the questionnaire, your answers will be completely confidential via the code you create. In fact, you will not be asked to put your name anywhere on the test or questionnaire. Your responses will be combined with those of others and may become part of a scientific article for publication. The only record of your name that will be kept is the fact that you participated in this study, but this will not be connected to the answers you gave. There may be circumstances where this information must be released. For example, personal information regarding your participation in this study may be disclosed if required by state law. Also, your records may be reviewed by The Ohio State University Institutional Review Board or Office of Responsible Research Practices. Also please be aware that while we work to make sure that no one sees your online responses without approval, because we are using the Internet, there is a chance that someone could access your online responses without permission. In some cases, this information could be used to identify you.

**Incentives:** Students recruited from communication classes will receive course credit for your participation. You will receive 1 point for participating in the lab session. All students will receive monetary reimbursement for participating in the study. You will be paid $4 if you take part in Part One. You will be paid another $4 if you complete part two. Finally, you will be paid $7 if you complete part three. All money will be rewarded when the study closes on December 5. You will receive money for each part that you completed. For example, if you only complete the first two parts, you will receive $8. If you complete all three parts, you will receive all $15.

**Participant Rights:** You may refuse to participate in this study without penalty or loss of benefits to which you are otherwise entitled. If you decide to withdraw, you will still be compensated for that part of the study. If you are a student or employee at Ohio State, your decision will not affect your grades or employment status. You are able to withdraw your data up to three weeks after your participation.
If you choose to participate in the study, you may discontinue participation at any time without penalty or loss of benefits. By signing this form, you do not give up any personal legal rights you may have as a participant in this study.

An Institutional Review Board responsible for human subjects research at The Ohio State University reviewed this research project and found it to be acceptable, according to applicable state and federal regulations and University policies designed to protect the rights and welfare of participants in research.

**Contacts and Questions:**
For questions, concerns, or complaints about the study you may contact **Dr. Silvia Knobloch-Westerwick** at knobloch-westerwick.1@osu.edu.

For questions about your rights as a participant in this study or to discuss other study-related concerns or complaints with someone who is not part of the research team, you may contact Ms. Sandra Meadows in the Office of Responsible Research Practices at 1-800-678-6251.

If you feel you have been harmed as a result of study participation you may contact **Dr. Silvia Knobloch-Westerwick** at knobloch-westerwick.1@osu.edu.

**Signing the consent form**

I have read (or someone has read to me) this form and I am aware that I am being asked to participate in a research study. I have had the opportunity to ask questions and have had them answered to my satisfaction. I voluntarily agree to participate in this study.

I am not giving up any legal rights by agreeing with this form.

**I agree to the above form by clicking the red button below to begin the study.**
References


National Eating Disorder Association. Retrieved from:  


