

Body image and self-esteem in teenagers

PhD. Elside SINAJ

ELSIDA.SINAJ@UET.EDU.AL

MsC. Xhesiana MECA

XHESIANAMECA@HOTMAIL.COM

Abstract

The image of the body is the dynamic perception of the body as it looks, feels, and moves. It is formed by perception, emotions, and physical sensations and is not static, but can change in terms of mood and physical ways. In terms of self-esteem, which is a positive and negative orientation towards itself, a general assessment of values or qualities. His study is analyzing the relationship between self-esteem levels in relation to perceptions adolescents have of body image. The study was conducted as a champion of 120 students in Maminas high school. The selection of the champion was in a casual way. The ages of the students ranged from the age 13 to the age 18. The measuring instruments used for this study are 2 questionnaires. The body image avoidance questionnaire [Body Image Avoidance Questionnaire (BIAQ)], consists of 19 questions about image avoidance for the body. The second questionnaire is that of self-esteem (SES, Rosenberg, 1965), which was used to measure the degree of self-esteem. In line with the study's objectives, results showed that there is an important link between the image of the body and the level of self-worth in adolescents and that there are significant gender differences in the image of the body in adolescents. Four were hypotheses raised in this study, whereof these hypotheses, 3 were proven and only one of the hypotheses collapsed. The results achieved were supported by similar field studies.

Key words: *Body image, evaluation, adolescent, study, differences.*

Literature review

Interest in psychology and sociology of image for the body came in Paul Schilder's work in the 1920s. He was the first researcher to look at the body's experience within the psychological and sociological framework. Prior to Schilder's work, body image research was limited to studying deformed perceptions of the body caused by brain damage. Schilder developed this work to examine the broader psychological and sociological framework within which perceptions and experiences of body image developed. In the *Image and Presentation of the Human Body* (1950), he argues that body image is not only a cognitive concept but also a reflection of attitudes and interactions with others. He was interested in the 'elasticity' of body image, reasons for fluctuations in perceived body size, feelings of sensitivity, gravity, and the effects of body image on interactions with others. The appearance of the body that forms in the person's own mind, that is, the way in which the body appears in itself. (Schilder, 1950: 11) Since 1950, researchers have taken 'body image' to understand many different things, including the perception of body attractiveness, body size, perception of body boundaries, and accuracy of perception of bodily sensations (Fisher, 1990). The definition of body image to be taken on the subject is a person's perceptions, thoughts, and feelings about his or her body. This definition includes all elements of body image initially identified by Schilder: body size assessment (perceptions), body assessment, attractiveness (thoughts), and emotions related to body shape and size (feelings); and is adapted from a definition produced by Thomas Puzinsky and Thomas Cash (1990). Body discontent is defined as negative thoughts and feelings that a person has about his or her body. Paul Schilder (1950), defined the image of the body as "the view of our body that we form in our minds, i.e. The way in which the body appears in itself." This definition was later criticized and researchers have argued that body image construction is more multiplied than can be distinguished in this early definition (Pruzinsky & Cash, 2002). Today, a common way to think of body image is to divide it into two components: a perceptual one, which refers to assessing a person's size and appearance, and another attitude related to feelings and attitudes towards one's body (Gardner, 2011). Both of these components are included in Grogan's definition (1999), referring to body image as "a person's perceptions, thoughts, and feelings about his body". A person's image can be positive or negative. Body image can vary depending on contexts and over the course of life, although it seems to be quite stable during adolescents and adult life (Tiggemann, 2004; Wertheim - Paxton, 2012). Body image concerns can

be manifested in many ways, ranging from a mild preference for other body characteristics to pathological body image disorders such as eating disorders or muscle morphology (pathological preoccupation with muscularity, Pope et al., 2005). In addition, body image concerns may be related to the appearance of the general body (p.sh., shape, muscle, weight, or size) or, otherwise, specific characteristics or body parts (p.sh., facial characteristics, hair, gym and strength, Wertheim & Paxton, 2018). A common way to measure a person's body image is to measure his body level, which can be understood as body-related self-esteem. Mendelson and White (2001) have suggested that honoring a person's body includes three areas: feelings about weight, feelings about appearance, and beliefs about how others view one's body and appearance. The idea is that individuals can be placed somewhere in the count between low body assessment (or body dissatisfaction) and high body assessment (or body satisfaction) in the three dimensions of body value.

In studies conducted within this thesis, we used the concept of body evaluation as a measure of adolescent body image. While a person with high body appreciation may be considered to have a positive body image, there is reason to believe that the concept of the body cannot capture the whole essence of a positive body image. Although it is clearly the negative component of body image that is usually the focus of attention in body image research (Tylka, 2011), positive body image research has taken some initial steps. With the growth of this field of research, the concept of body evaluation has been introduced, a term that includes the evaluation, acceptance, respect, and protection of the body (Avalos et al.2005). As discussed in the section about adolescent positive body image, there may be positive body image characteristics that include aspects other than body weight and appearance as defined in the concept of self-esteem. The concept of self-esteem includes a variety of interconnected concepts. According to Rogers and Mondrea (2006), self-worth is "our image for who we are, what we want to be and what we should be" (p.89). "Another way declares that there are three images: how we see ourselves, how others see us, and how we want others to see us. Chelcea (2006) explains that self-confidence is the result of all people's positive and negative assessments of themselves. According to Andre and Lelord (1999), the components of self-esteem are love, the concept itself, and self-confidence. Love itself stems from the quality and sustainability of emotional support offered by parents. It benefits emotional stability and resistance to criticism and rejection. As a result, there may be doubts about the ability to be evaluated by others. Strickland apud Scarneci (2009) defines self-worth as a product of self-confidence (positive assessment of the effectiveness of duty) and self-respect (the individual's sense of value). Self-confidence is the product of accumulated judgments (coming from us or others) to be good or bad, valid or not. It emphasizes an educational result, a possible job, good relations with

friends or partners, or a way of life that is consistent with our values and personal interests. Social comparison has a final goal: to assess ourselves properly.

If the people we compare to are far from a psychological point of view (we do not know them personally, we have different social status or any other ethnic position), success does not affect our self-esteem. When someone close to us has higher performance compared to our achievements in a respective dimension to ourselves (a close friend, relative), we pay more attention and this poses a threat to us. 2001). Erickson's (1968) psychosexual theory says that self-identity is formed by passing a developmental crisis of adolescence and that it contains two boundaries: identity and confusion of the role. When there is a supportive environment that will develop the potential of the teenager, according to his desires and intentions, the identity of the role is formed. If the association (family, friends) does not provide a supportive measure according to adolescent expectations, confusion about the role arises. Two concepts of yourself that accompany self-esteem, are the complex of inferiority and superiority. The inferiority complex is a savage deformity of a self and occurs because of the dissertation. This happens in childhood when the subject becomes aware of his weakness. Sometimes it is formed around a language disorder, physical ugliness, or personal characteristics that are considered indecent, and unpleasant. Attitudes such as depression, exaggeration, and desire to be in the spotlight can lead to symptoms of the inferiority complex (Larousse, 1999). The superiority complex is a group of traits and behaviors based on the person's conviction, more or less true, that there are positive traits before colleagues and friends. It is characterized by: arrogance, tyranny, tendencies of depreciation, vanity, eccentricity, close relations with important people, and manipulation of weak ones (Larousse, 1999). Both complexes are based on a miseducation created by protective parents, who can lead to a fictitious vision of reality in the spoiled child (Adler, 1995). Researchers show that young people rely on friendly references and feelings for aesthetic plans and social and relational plans. Studies also show that self-esteem is associated with young girls with body image more than in boys. One explanation may be for girls to evaluate physically much faster than boys. Girls who drink faster are more likely to consume alcohol, and drugs, start sex life first, or have problems at school in relation to a group of friends. Also, people who know them have higher expectations due to physical maturity and appearance, not psychological, which can be very stressful for them (Silbereisen & Adams, 2009). There may be derogatory thoughts regarding weight (small or large); height (long or short); Pimples in the face or body, large nose, elongated ears, small or very large genders in oil, excessive fatigue in different parts of the body, lack of breast in boys and other characteristics that in their eyes turn into deficiencies. Self-esteem is a part of our personality and to regulate or elevate it we must have a sense of personal value that comes from those vital challenges that demonstrate our success.

Self-esteem has consciousness as the main element. It includes the individual's perceptions of their strengths and weaknesses, abilities, attitudes, and values. Its development begins from birth and is constantly developing under the influence of experience. During different periods of human age, the child realizes one or the other side of himself. The child becomes aware of their practical skills first - motor skills, artistic skills, and performing skills. Children begin to know about their personal traits at a significant later stage in life. The process begins when all moral and social standards for evaluation are gained. This can be explained by the complexity and ambiguity of the results from the manifestation of personal qualities. Children are aware of their particularities and personal traits in the process of communicating with adults and peers. This process of consciousness is the most active in adolescence. Adolescence is an important period, critical in the development of the individual, a period of transition between childhood and adulthood in a particular cultural environment. Self-esteem plays a very important role in development during this period. In the wide range of critical factors that determine self-esteem is physical appearance considered one of the most important factors during adolescence. High self-esteem has been shown by many studies conducted to be a factor that protects from bodily dissatisfaction (e.g., Tiggemann & Eilliamson, 2000) and eating disorders (e.g, Geller, Zaitsoff, & Srikamesaran, 2002). Feeling good about yourself is very important, because it gives you a sense of control over life, helps you feel satisfied in taking moons with others, and gives you confidence and strength over the actions and behaviors performed. Self-esteem can affect how a teenager will create relationships with others. An important pillar in creating self-esteem is the body image we have of ourselves. Body image for ourselves is mainly about how we see ourselves in relation to others, in terms of external physical appearance. For many individuals, especially those in their early teens, the image of the body is closely related to self-esteem. This is because children, turn into teenagers and care more about how others see them. Many teenagers "struggle" with their self-esteem and when they start puberty because their bodies go through many changes. These changes, combined with a desire to be accepted by others, are often associated with comparisons of themselves with people around them or with well-known actors or singers they see in magazines, films, etc. But is impossible to measure oneself against others because the changes that come with the age of maturity are different for all.

Some may have a rapid and earlier physical development, while some may have a later development. During adolescence, the concept of oneself is formed by the reactions and responses they receive from their parents, from the society where they perform, who help them increase self-esteem when offering care to be unconditional and serve, regardless of the behavior they display. Various studies on self-esteem and body image indicate that self-esteem correlates with body

image. Many researchers have directed various factors of concern for body image, p.sh. gender, current body weight, puberty, and age (Kastanki & Gullone, 1998). In all studies involving gender, female teenagers have been found to have more body image concerns than male teenagers. Frost & Mc Kelvie (2005) describe bodily pleasure as having two separate components: body image and pleasure with weight. Body image is about how close or far the current image of persuasion is to the ideal they can have for themselves. Weight satisfaction is about how much their current weight approaches that ideal, someone's body image or bodily pleasure is not always high. There are different theories that describe possible reasons why someone's body image may be low. Heinberg (1996) suggests that there are two classes of theories for corporal image: perceptual and subjective. Perceptual theories are based on a person's perceptual clarity about themselves. In this theory, it is said that overestimation of mass occurs because the perception of body mass does not change with the same ratio as the current weight. Subjective theories are based on the pleasure that an individual has with a specific part of the body. Self-esteem can be defined as a general extension of oneself (Frost & McKelvie, 2005) or as an emotional attitude towards himself (Robin, Tracy & Trzesnieqski, 2001). Research involving both body image and self-esteem is quite limited with all studies that have been conducted, which give evidence of a complex behavior or connection between two variables (Kastanski & Gulone, 1998). Self-esteem and bodily dissatisfaction are strongly corrected, in fact, more than one study has found that the more dissatisfaction with body image increases, the lower the self-esteem, especially in females (Kostanski & Gullone, 1998; Thomson - Altabe, 1991). Frost & McKelvie (2005) also found correlation levels between self-esteem and body image.

Metodologija

The study is conceived as a quantitative analytical study. The purpose of this study was to analyze the relationship of self-esteem levels in relation to perceptions adolescents have of body image and self-esteem.

Hypotheses

Hypothesis 1: There is an important relationship between body image and the level of self-esteem in adolescents.

Hypothesis 2: There are differences between gender for body imaging teenagers.

Hypothesis 3: There are differences between gender and self-worth in adolescents.

Hypothesis 4: There is an important link between body image and age in adolescents. Kampionimi

The population of interest in the study in question includes students in Maminas Schools. More specifically, the population included in the study will consist of pre-adolescent and adolescent students. For the planned population of 418 students, the minimum number of students participating in the study could be 120. The results derived from the statistical analysis become more reliable when the size of the champion used in the study is estimated in advance so that other analyses can be carried out in aid of the study.

The instruments used:

Body image avoidance questionnaire [Body Image Avoidance Questionnaire (BIAQ)]. The BIAQ is designed to measure the image avoidance of an individual (Rosen et al., 1991). The second questionnaire used in this study is Rosenberg Self-Esteem Scale (SES) questionnaire, self-esteem was assessed using Rosenberg’s self-assessment scale (Rosenberg, 1965;). SES is a 10-point scale that measures global self-esteem with statements related to feelings of self-esteem and self-acceptance (Hillebrand & Burkhart, 2006).

Analysis and study results

Correlational analysis between body image factors and self-esteem

From the table below we see that there are statistically important links between them ($p \leq .01$, $p \leq .05$). (Look at table 1)

TAB 1. Korrelacioni Pearson ndërmjet faktorëve të imazhit të trupit dhe vetëvlerësimit

		Self-esteem
Weight problem	Pearson Correlation	-.259**
	Sig. (2-tailed)	.004
	N	120
Coverage of the look with clothing	Pearson Correlation	-.222*
	Sig. (2-tailed)	.015
	N	120



Limiting eating	Pearson Correlation	.058
	Sig. (2-tailed)	.528
	N	120
Avoiding social activity	Pearson Correlation	-.226*
	Sig. (2-tailed)	.013
	N	120
Avoiding Body Image	Pearson Correlation	-.237*
	Sig. (2-tailed)	.006
	N	120

*. Correlation is significant at the 0.05 level (2-tailed).

**. Correlation is significant at the 0.01 level (2-tailed).

There is an important negative link between the weight problem to self-esteem ($r_{(n=120)} = -.259, p \leq .01$) wherewith increased weight concern also decreases self-esteem in adolescents. There is an important negative link between the coverage of the look with self-esteem ($r_{(n=120)} = -.222, p \leq .05$) wherewith increased appearance coverage also decreases self-esteem in adolescents. There is an important negative link between Avoiding social activity with self-esteem ($r_{(n=120)} = -.226, p \leq .05$) wherewith increased avoidance of social activity also decreases self-esteem in adolescents. There is an important negative link between Avoiding body image with self-esteem ($r_{(n=120)} = -.237, p \leq .05$) wherewith increased body image avoidance, self-esteem in adolescents also decreases.

Analysis on gender differences according to T Test

TAB 2. Test of mean differences between the sexes in terms of body image

	Gender	N	Average	Standard Deviation	t	p
Weight problem	Female	82	3.44	0.98	2.339	.021
	Male	38	2.99	0.99		
Coverage of the look with clothing	Female	82	1.84	0.71	3.573	.001
	Male	38	1.34	0.73		
Limiting eating	Female	82	2.61	1.14	1.014	.313
	Male	38	2.37	1.35		
Avoiding social activity	Female	82	1.03	1.22	-.108	.914
	Male	38	1.05	1.11		

Avoiding Body Image	Female	82	2.04	0.56	2.960	.004
	Male	38	1.70	0.64		

The result shows that the weight problem is higher in women with the average (M=3.44, ds=0.98) compared to boys (M=2.99, ds=0.99). Dress coverage is higher in women with an average (M=1.84, ds=0.71) compared to boys (M=1.34, ds=0.73). Body image avoidance is higher in women with an average (M=2.04, ds=0.56) compared to boys (M=1.70, ds=0.64).

Analysis of gender differences at the level of self-esteem

TAB 3. Crosstbulation Gjinia * Level of self-esteem

		Level of self-esteem				Total
		low	medium	high		
Gender	Female	n	3	59	20	82
		%	3.7%	72.0%	24.4%	100.0%
	Male	n	1	28	9	38
		%	2.6%	73.7%	23.7%	100.0%
Total		n	4	87	29	120
%		3.3%	72.5%	24.2%	100.0%	

To see if we have significant differences between gender in terms of adolescents in evaluation, we have used the T-test. Self-esteem is shown in both men and women.

TABLE 4. Test T of differences in average between gender in terms of self-esteem\

	Gjinia	N	Average	Devijimi Standard	t	p
Self-esteem	Femër	82	22.01	4.259	-.049	.961
	Mashkull	38	22.05	4.040		

Correlational analysis between age and self-esteem

To see if there are important links between self-esteem and age in adolescents, we have used Pearson correlation. From the table below we see that there is no statistically important link between them as p is greater than 0.05.

TABLE 5. Pearson correlation between age and self-esteem

		Age	Vetëvlerësimi
Age	Pearson Correlation	1	-.001
	Sig. (2-tailed)		.994
	N	120	120
Self-esteem	Pearson Correlation	-.001	1
	Sig. (2-tailed)	.994	
	N	120	120

To see if there are important links between body image and age in adolescents, we have used Pearson correlation. From the table below we see that there are statistically important links between them ($p \leq .01$).

		Age
Weight problem	Pearson Correlation	.157
	Sig. (2-tailed)	.088
	N	120
Coverage of the look with clothing	Pearson Correlation	.100
	Sig. (2-tailed)	.276
	N	120
Limiting eating	Pearson Correlation	.084
	Sig. (2-tailed)	.359
	N	120
Avoiding social activity	Pearson Correlation	.201*
	Sig. (2-tailed)	.028
	N	120
Avoiding Body Image	Pearson Correlation	.208*
	Sig. (2-tailed)	.022
	N	120

*. *Correlation is significant at the 0.05 level (2-tailed).*

There is an important positive link between Avoiding social activity with age ($r_{(n=120)} = .201, p \leq .05$) whereas the age increases, the avoidance of social activity in adolescents increases. It also has an important positive link of avoiding body image with age ($r_{(n=120)} = .208, p \leq .05$) whereas age increases, avoidance of body image in adolescents increases.

Conclusions

The image of the body is the dynamic perception of the body as it looks, feels, and moves. It is formed by perception, emotions, and physical sensations. It is not static but can change in mood and physical ways. In terms of self-esteem, which is a positive and negative orientation towards itself, a general assessment of values or qualities. Gender differences are well-established in body image research, with females generally experiencing more body image concerns than boys. Although appearance culture tries to focus more on the female body, the social focus on male appearance has intensified. Body image concerns can be manifested in many ways, ranging from a mild preference for other body characteristics, to pathological body image disorders such as eating disorders or muscle morphology. In addition, body image concerns may be related to the appearance of the general body (shape, muscle, weight or size) or, otherwise, specific characteristics or body parts (facial characteristics, hair, gym and strength). A common way to measure a person's body image is to measure his body level, which can be understood as body-related self-esteem. Biological changes that occur during adolescence include body changes related to puberty. These changes consist of dramatic internal and external transformations of the adolescent body, including developmental changes in physical appearance and the development of the ability to conceive children. Physical changes include body growth, discarding stature, hair growth, and acne appearance. Boys experience increased testicles, penises, and facial hairs, as well as a deepening voice, while girls grow breasts and have their first menstruation. One of the most visible biological changes is the extent of height and rapid increase in body weight resulting from an increase in both, muscles and fat. However, girls gain more fat typifies than boys, and on a faster scale. Consequently, girls end the age of maturity with a muscle-fat ratio of about 5 to 4 and boys with a ratio of about 3 to 1. An important pillar in creating self-esteem is the body image we have of ourselves. Body image for ourselves is mainly about how we see ourselves in relation to others, in terms of external physical appearance. For many individuals, especially those in their early teens, the image of the body is closely related to self-esteem. Many teenagers "struggle" with their self-esteem when they start puberty because their bodies go through many changes. These changes, combined with a desire to be accepted by others, are often associated with comparisons of themselves with people around them or with well-known actors or singers they see in magazines, films, etc. But it is impossible to measure oneself against others because the changes that come with the age of maturity are

different for all. Some may have a rapid and earlier physical development, while some may have a later development. During adolescence, the concept of oneself is formed by the reactions and responses they receive from their parents, from the society where they perform, who help them increase self-esteem when they offer unconditional care and serve them, regardless of the behavior they display. Dissatisfaction with the body figure is more important than the current weight in predicting depressive symptoms. The link between depressive symptoms and body image is similar in overweight and non-overweight teenagers, but the association is stronger in overweight teenagers.

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