

2014

High Expectations: The Impact of Perfectionism and Religiosity on Female Body Image

Meredith J. Gross
Taylor University

Follow this and additional works at: <http://pillars.taylor.edu/mahe>



Part of the [Higher Education Commons](#)

Recommended Citation

Gross, Meredith J., "High Expectations: The Impact of Perfectionism and Religiosity on Female Body Image" (2014). *Master of Arts in Higher Education Thesis Collection*. 66.
<http://pillars.taylor.edu/mahe/66>

This Thesis is brought to you for free and open access by Pillars at Taylor University. It has been accepted for inclusion in Master of Arts in Higher Education Thesis Collection by an authorized administrator of Pillars at Taylor University. For more information, please contact aschu@tayloru.edu.

HIGH EXPECTATIONS: THE IMPACT OF PERFECTIONISM
AND RELIGIOSITY ON FEMALE BODY IMAGE

A thesis

Presented to

The School of Social Sciences, Education & Business

Department of Higher Education and Student Development

Taylor University

Upland, Indiana

In Partial Fulfillment

of the Requirements for the Degree

Master of Arts in Higher Education and Student Development

by

Meredith J. Gross

May 2014

© Meredith Gross 2014

**Higher Education and Student Development
Taylor University
Upland, Indiana**

CERTIFICATE OF APPROVAL

MASTER'S THESIS

This is to certify that the Thesis of

Meredith J. Gross

entitled

High Expectations: The Impact of Perfectionism and Religiosity on Female Body Image

has been approved by the Examining Committee for the thesis requirement for the

Master of Arts degree
in Higher Education and Student Development

May 2014

Scott Moeschberger, Ph.D. Date
Thesis Supervisor

Steve Bedi, Ph.D. Date
Member, Thesis Hearing Committee

Scott Gaier, Ph.D. Date
Member, Thesis Hearing Committee

Tim Herrmann, Ph.D. Date
Director, M.A. in Higher Education and Student Development

Abstract

In 2010 the American Psychological Association (APA) developed a task force to research the sexualization of girls. The APA found that eating disorders, low self-esteem, and depression were among the most prevalent mental health issues for women. The APA suggested that the trends of sexualization, mass media's impact on culture, and the growing phenomenon of diets and weight loss supplements and medications helped to create unattainable ideas. These influences were found to have a significant relationship between women and dissatisfaction with their physical form. Because of the faith-based nature of the institution studied and the evidence that high levels of perfectionism have the potential to lead to many of the issues the APA cited, this research was conducted. The study supports other current research. The concept that high levels of perfectionism lead to unrealistic expectations explains low levels of body satisfaction, a focus on grooming techniques, and weight anxiety. The possibility of eating disorders, as common with those facing high levels of overweight preoccupation. The focus on dieting was also suggested by the predictive value found between the order and discrepancy subscales of the Almost Perfect Scale and the overweight preoccupation subscale of the Multidimensional Body-Self Relations Questionnaire. Due to the inability to meet unrealistic expectations, perfectionism can lead to feelings of unworthiness and failure, particularly with regard to the physical form of female students.

Acknowledgements

If someone had asked me two years ago whether or not I believed completing my own original research was possible, I would have given them a very strong response in the negative. Yet, here I am, two years later, having completed that very same research in a field I am passionate about after pursuing the research of a topic that continues to inspire me and with the purpose of better understanding the female experience. This contribution to Higher Education and College Student Development would not be possible without the support and encouragement of many people.

First, I want to thank my family and friends, for seeing me through this process, for believing in me long before and even when I didn't believe in myself, and for reminding me again and again that I would finish...eventually. In particular, I want to thank my parents, John and Julie Gross. Thank you for always reminding me that I could truly be anything I wanted to be. Thank you for trusting my decision to attend graduate school in the middle of cornfields. Mom, thank you for being my first example of a strong woman, sharing the responsibility of raising and providing for our family with dad, and being my best friend. You are my constant example of love and hospitality and my inspiration. Rebecca, thank you for being the greatest big sister anyone could ever ask for and for setting the example in your love for education. Dad, thank you for your ability to show passion and for instilling in me the meaning of honor and integrity, and for always standing up for what you believe. I am able to adventure because of your support.

Katie Rousopoulos for being a champion of my personal development, for paving the way and instilling in me this love for higher education. Thank you for challenging me, for crying with me, for standing in my corner. I will be forever indebted to your example. If I am half the higher education professional you are, I will be grateful!

Thank you to Julie Caldwell for being my biggest cheerleader in this process. I am so thankful that we got over that first meeting and the blessing it is to call you one of my best and dearest friends!

I want to thank the Taylor World Outreach office, in particular Mary Rayburn and Kelsie Rodman, for giving me the opportunity to pursue this work. You both eased the load of graduate school by offering your support and encouragement throughout the process. Mary, thank you for challenging me, for asking questions, and for always believing in your first ever, Social Justice Graduate Assistant. Kelsie, thank you for being the first smile each morning, my constant fan (in so many areas), and helping me to trust the Lord a little more every day.

Thank you to Taylor's MAHE program and to Cohort 6 for believing in me, for giving me the space needed to grow, and being my Upland, Indiana support system. I have no doubt that I have made it through these last two years because of each of you.

Table of Contents

Abstract	iii
Acknowledgements	iv
List of Tables	viii
Chapter 1 Introduction	1
Defining the Problem	1
Definition of Terms	2
Benefits of Research	4
Chapter 2 Literature Review	6
Influence of Religiosity on Body Image	6
Influence of Perfectionism on Body Image	8
Correlation Between Spirituality and Perfectionism	9
Theories of Body Image	11
Conclusion	14
Chapter 3 Methodology	15
Participants	15
Instruments	16
Procedure	18
Chapter 4 Results	20
Regressions	20

Chapter 5 Discussion	27
Research Question and Hypothesis.....	27
Implications for Practice	31
Implications for Future Research.....	32
Limitations	33
Conclusion	34
References.....	35
Appendix A: Almost Perfect Scale-Revised.....	40
Appendix B: Religious Orientation Scale.....	42

List of Tables

Table 1. Regression Analysis for Perfectionism and Religiosity Predicting Appearance Evaluation.	21
Table 2. Regression Analysis for Perfectionism and Religiosity Predicting Appearance Orientation.	22
Table 3. Regression Analysis for Perfectionism and Religiosity Predicting Body Areas Satisfaction.	23
Table 4. Regression Analysis for Perfectionism and Religiosity Predicting Overweight Preoccupation.	24
Table 5. Regression Analysis for Perfectionism and Religiosity Predicting Self-Classified Weight.	25
Table 6. Regression Analysis for Perfectionism and Religiosity Predicting MBSRQ-AS.	26

Chapter 1

Introduction

"The tyranny of the ideal image makes almost all of us feel inferior."

(Kilbourne, 1994, p. 396)

Defining the Problem

There is a pervasive belief that body image concerns among female college students are a normative part of their experience in higher education (Smith-Jackson, Reel, & Thackeray, 2011). The assumption that these concerns are commonplace among young adults speaks volumes to the nature of the issue.

In a 2010 report, the American Psychological Association (APA) found that eating disorders, low self-esteem, and depression were the most prevalent mental health problems among women. Resources and research have been devoted to discovering how women feel about their bodies. The research developed a conclusion: women are dissatisfied with their bodies (Sides-Moore & Tochkov, 2011).

One of the most influential concerns among college-aged women is negative body image (Smith-Jackson et al., 2011). Tiggemann and Lynch (2001) concluded in their study of women across the life span that standards of beauty in contemporary western culture promote the thin ideal exclusively. The APA (2010) suggested that the trends of sexualization; mass media's impact on culture; and the growing phenomenon of diets,

weight loss schemes, and medicines create unattainable ideals which lead to dissatisfaction among females with their physical form.

The high standards of perfectionism (Rice & Dellwo, 2002), the self-criticism of unreachable goals (Crosby, Bates, & Twohig, 2011), and the influence of religiosity, both intrinsic and extrinsic (Ashby & Huffman, 1999), have been studied in relation to their influence upon the body image of women. There is significant evidence that perfectionism and religiosity are strong factors in the lived experiences of women studied (Sheldon, 2010). Although there is research on the preceding topics individually, very little research has been conducted on the relationship between religiosity and perfectionism (Crosby et al., 2011) and together how they influence body image (Boyatzis & Quinlan, 2008). The limited research on their relationship focused on how religiosity and perfectionism affect each other, not how they impact other areas of the lived experiences of women (Ashby & Huffman, 1999). Therefore, how perfectionism and religiosity influence the body image of college women is a question needing further research (Crosby et al., 2011).

Concepts that this research will address include perfectionism, religiosity, body image, and how these three concepts relate. The current research was conducted in order to better understand significant influences on female body image (Boyatzis & Quinlan, 2008).

Definition of Terms

Horney (1950) suggested that the internalization of unrealistic or idealistic goals marks the nature of perfectionism. Pacht (1984) noted that perfectionism drives the need for love and affirmation. According to Sorotzkin (1985), self-criticism and self-esteem

may result from unrealized self-imposed expectations. There are many dimensions of perfectionism. The two major dimensions that the current study examined include adaptive and maladaptive forms of perfectionism (Ashby & Huffman, 1999). Adaptive perfectionism is perfectionism that includes high personal standards, while maladaptive perfectionism looks at performance related critique and external motivations.

Understanding the concept of perfectionism is essential in understanding how perfectionism and religiosity influence female body image. Shafran, Cooper, and Fairburn (2002) found that many of the goals of perfectionism are unrealistic and self-imposed. “Historical experiences are past events that influence the way an individual thinks or feels about her or his body and may be influenced by cultural socialization” (Smith-Jackson et al., 2001, p. 335). There is a self-obsession and overdependence with the pursuit to be without flaw or imperfection. Perfectionism is a conscious pursuit of complete flawlessness even while knowing that these standards will, most often, result in self-criticism and negative consequences. Understanding perfectionism matters because of its influence on the lived experiences of women.

Religiosity is explained in Boyatzis and Quinlan’s (2008) research by the following principles: (a) language and imagery, (b) the practices a person participates in, (c) orientation of religiousness whether intrinsic, extrinsic, or quest, (d) prayer or reading material of a religious nature, and (e) sanctification of one’s body. While some researchers would use the word spirituality to describe many of the above principles, most use the word religiosity (Boyatzis & Quinlan, 2008). Therefore, for the purposes of the present study, religiosity was used in order align with research in the field.

Ashby and Huffman's (1999) description of religiosity includes six constructs: "differentiation, religion as an autonomous force, religion as a directive system of high ethical standards, a unified framework for understanding existence, a striving for a harmonious whole, and an energy-giving force that preserves fundamental values" (p. 178). The most mature form of religiosity as described by Allport (1950) is intrinsic in nature. According to Allport (1966), those with intrinsic religiosity, "regard faith as a supreme value in its own right" (p. 454). This intrinsic religiosity gives meaning and motivation to life.

Body image is the final term essential for understanding the current study. Schilder (1935) suggested that body image is how a person imagines his or her body. Wiederman and Shannon (1998) built upon this understanding including body size and attractiveness in how Western women understand their body image. Most significantly and importantly for college women, one's body image affects the emotive and behavioral attitudes of an individual (Ackard, Kearney-Cooke, & Peterson, 2000).

Benefits of Research

Student affairs professionals should provide educational programs that challenge the script and stereotypes that media and popular culture offer (Dasgupta & Asgari, 2004). Significant strides in understanding body image will be made by better understanding the role that perfectionism and religiosity has on female students. By answering the following major questions, student affairs personnel will be able to design more appropriate programs and offer support to female students. The present study sought to answer the research question: How do religiosity and perfectionism influence female body image?

The answers to the questions raised by the current research will help student affairs professionals to educate and promote healthy attitudes and perspectives among their female students. It is pertinent to consider the influence of perfectionism on body image on college campuses as there is evidence that perfectionism affects many areas of life and student development (Downey & Chang, 2007).

The connection between perfectionism and religiosity has been studied in a very limited capacity (Crosby et al., 2011). Research suggests that continued work must be conducted in order to understand the connection between the two. Due to the high standards present in both constructs and their significant influences on body image individually, understanding how perfectionism and religiosity operate together will create a better understanding of the influences on body image. Therefore the present study sought to answer the question: How do religiosity and perfectionism impact college females' body image?

Chapter 2

Literature Review

Literature on perfectionism, religiosity, and body image creates a strong case for the importance of better understanding their correlation. Eating disorders, depression, personality disorders, migraines, anxiety, and obsessive-compulsive disorders have all been positively linked to perfectionism (Ashby & Rice, 2002). The following literature review develops the concepts of religiosity and perfectionism in the context of how they correlate with body image. Research shows that perfectionism is a significant predictor in eating disturbances among female college students (Downey & Chang, 2007).

This research is specifically valuable among women because of the role that body satisfaction plays in their adult lives (Green & Pritchard, 2003). In fact, as men and women age, the gap between levels of satisfaction in their bodies increases (Feingold & Mazzella, 1998). Body dissatisfaction continues well into adulthood, as research has shown that women score lower on average than men in measures concerned with body image satisfaction (Green & Pritchard, 2003).

Influence of Religiosity on Body Image

Religion and health have a long history of existing in relationship to each other (Koenig, McCullough, & Larson, 2001). However, there is very little evidence in research to explain the correlation between religiosity and eating disorders, food, anorexia, and bulimia (Boyatzis & Quinlan, 2008). This significant gap in the literature is

an example of the importance of studying the relationship between body image and religiosity.

Historically, fasting, the material world, and the perceived closeness to one's personal deity are all ways that the literature points to the influence of religiosity on the body (Bemporad, 1996). The popular acceptance of self-starvation began to decline during the Protestant Reformation (Boyatzis & Quinlan, 2008); although, it was not until the 19th century that self-starvation began to be viewed as a medical disease (Bemporad, 1997).

According to Boyatzis and Quinlan (2008), there are significant gaps in the scientific research on body image/eating disorders and religiosity among women. In a review of critical literature on the issue, they examined published quantitative and qualitative research, excluding dissertations and conference presentations. Their focus on published, peer-reviewed articles led to the review of studies that had used scales for measurement that could be supported and had a long history of reliability.

Boyatzis and Quinlan (2008) described how religion, body image, and eating are linked in three ways. The first finding from their study was the possibility that no relationship exists between religiosity and body image. Boyatzis and Quinlan (2008) found this situation highly unlikely. The historical context of the relationship between religiosity and the body along with the research of Thelander (2002) among Christian college students challenged this claim.

The second finding was that religion or religiosity could be linked to better body image and healthier eating (Smith-Jackson et al., 2011). This is most probable among students who view God through the lens of such adjectives as "loving" and "accepting"

(Boyatzis & Quinlan, 2008). Boyatzis and Quinlan (2008) showed a link between these attitudes and lower levels of disordered eating and most positive views of the body.

The very last scenario was negative in nature and correlated to negative body image and disordered eating. If a woman felt “less worthy and inferior in God’s eyes” (Boyatzis & Quinlan, 2008, p. 186), a negative body image was more likely. The concept of the human body as a “temple” relates to this understanding. Such an approach to one’s relationship with religion and the body could lead to guilt, asceticism, and self-denial (Boyatzis & Quinlan, 2008). They found that because of bias present in the research and the lack of conclusive evidence, all three scenarios had the potential to be justified (Boyatzis & Quinlan, 2008).

Influence of Perfectionism on Body Image

Perfectionism also has an impact on the body image of college women (Sheldon, 2010). Key researchers like Horney (1950), Missildine (1963), and Hollender (1965) all found significant correlation between high levels of perfectionism and negative body image or dissatisfaction. Pacht (1984) and Sorotzkin (1985) both found that those with perfectionist tendencies set unrealistic expectations upon themselves, their bodies, and the world they create: “Any deviation from the perfectionist goal is likely to be accompanied by moralistic self-criticism and lowered self-esteem” (Sorotzkin, 1985, p. 564).

According to Vohs, Joiner, Bardone, Abramson, and Heatherton (1999), perfectionism is “the desire to achieve ambitious—and perhaps faultless—standards” (p. 695). This drive to be perfect often leads to self-harming attitudes and actions including eating disorders (Ashby & Rice, 2002). These unrealistic expectations, which inevitably

will not be met, lead to feelings of unworthiness and failure. Lower self-esteem or negative body image is a result of this outlook (Sheldon, 2010).

In their study of 310 female college students, Downey and Chang (2007) wanted to measure how maladaptive perfectionism, or socially-prescribed perfectionism, and adaptive dimensions of perfectionism, or self-oriented perfectionism, would influence body dissatisfaction among college women. They hypothesized that the relationship between perfectionism and body dissatisfaction would be evident through excessive dieting and bulimic symptoms. Maladaptive perfectionism can manifest itself in a variety of ways including procrastination, anxiety, and discrepancy. Adaptive perfectionism would predict dieting, while maladaptive forms of perfectionism would predict both dieting and bulimic symptoms. The overall assumption for Downey and Chang (2007) was that both maladaptive dimensions of perfectionism were associated with higher levels of body consciousness or dissatisfaction.

To determine how perfectionism influenced body image, Downey and Chang (2007) compared results from the Multidimensional Perfectionism Scale and the Multidimensional Body-Self Relations Questionnaire. Their results found that both adaptive and maladaptive forms of perfectionism had a significant impact on dieting and bulimic symptoms.

Correlation Between Spirituality and Perfectionism

The literature suggested a relationship between perfectionism and religiosity. In an anonymous online survey given to 376 undergraduate college students, Crosby et al. (2011) found a significant correlation between adaptive perfectionism and adaptive religiosity and between maladaptive perfectionism and maladaptive religiosity.

Ashby and Huffman (1999) believed that a correlation existed because religion and spirituality are environmental influences where high standards and expectations are normally prominent. In a study among 242 college undergraduates, they examined both the adaptive and maladaptive forms of perfectionism and religiosity. A key measure in their research was the amount of religious activity. They found that the more religious activity a person participated in and the more personal their religious experiences were, the higher the existence of adaptive dimensions of perfectionism.

This correlation was also studied by Thelander (2002) among 500 Christian college students. High levels of maladaptive perfectionism and religiosity were found to be characterized by disappointment or concern with one's relationship with God and instability.

How the two correlate to influence body image was addressed in Ashby and Huffman's (1999) article on the implications between religious orientation and perfectionism. They found that the higher the level of religiosity, the higher the level of adaptive perfectionism that a person would exhibit. Adaptive perfectionism is a way to describe high personal standards.

By separating the relationship of perfectionism and religiosity into their sub-dimensions, maladaptive and adaptive, the research was able to point to the areas at which they correlate (Crosby et al., 2011). This separation also helped to understand better how the two constructs that are not negative in nature can interact to have negative consequences in the lives of those with high levels of both perfectionism and religiosity.

Theories of Body Image

In order to have a comprehensive view of female body image, understanding the influences of body discontent add value to this work. Research shows that social theories help to understand the effects of religiosity and perfectionism on the body image of college students. These include social comparison theory, cultivation theory, and objectification theory (Sheldon, 2010). Significant influences include sexualization and perfectionism. Other factors that influence body image include family pressures, peer pressure, and spirituality (Sheldon, 2010). While biological influences impact the human form, the ideal image of the human body does not exist due to biology alone. Instead, there are specific cultural and social determinants of how the body should look, work, and act (Frederickson & Roberts, 1997).

There is a distinct difference in the way men and women perceive themselves (MicKinley, 1998). These perceptions are based upon the construction of the ideal female body in the United States (Spitzack, 1990). Women are cultured to look at their bodies as if from the outside, with an outsider's perspective. Appeal to sexual partners, being viewed as competent, and receiving greater financial compensation for their work are ways that women are taught to adopt an outsider's view of their bodies (Gapinski, Brownell, & LaFrance, 2003). The difference is whether this is intrinsically or extrinsically motivated. Objectification is the first influence of negative body image.

Three specific themes are important to understand the conversation about negative body image: body image, objectification theory, and sexualization as understood by the APA (2010). First, body image is how women view themselves and how outside forces, particularly the media and popular culture, often influence this self-view. Body image encompasses a woman's view of her body using concepts such as body size and

attractiveness (Wiederman & Shannon, 1998), and it “is a complex and multifaceted construct, encompassing at least perceptual, affective, and cognitive aspects of the body experience” (Tiggemann & Lynch, 2001, p. 243). Self-image also affects the emotive and behavioral means of an individual (Ackard et al., 2000).

Next, objectification theory, according to Frederickson and Roberts (1997), is the understanding that “girls and women are typically acculturated to internalize an observer’s perspective as a primary view of their physical self” (p. 173). This theory broadens the understanding of how negative body image directly correlates to high-risk sexual behaviors. Objectification theory places women in a particular lens to be highly influenced by outside perspectives upon body image.

Finally, research on the sexualization of women shows a direct correlation between women in the media and society and negative body image. This issue is so significant that the APA (2010) put together a task force to study the sexualization of women beginning in 2007. There are four specific ways that the APA (2010) separated sexualization from healthy sexual activity and development. These four premises occur when:

A person’s value comes only from his or her sexual appeal or behavior, to the exclusion of other characteristics; a person is held to a standard that equates physical attractiveness (narrowly defined) with being sexy; a person is sexually objectified—that is, made into a thing for others’ sexual use, rather than seen as a person with the capacity for independent action and decision making; and/or sexuality is inappropriately imposed upon a person. (p. 1)

Jean Kilbourne (2010), an author and researcher on the influence of media on society and women's self-perceptions of their bodies, stated:

What does advertising tell us about women? It tells us as it always has that what's most important is how we look. So the first thing the advertisers do is surround us with the image of ideal female beauty. Women learn from a very early age that we must spend enormous amounts of time, energy, and above all money striving to achieve this look, and feeling ashamed and guilty when we fail. And failure is inevitable because the ideal is based on absolute flawlessness.

("Killing Us Softly 4 (Full Documentary)," 2010).

Kilbourne (2010) explained that media leads to the sexualization of women. Research supports the claim that media portrayals of women directly correlate with low self-esteem (Sides-Moore & Tochkov, 2011). Media leads to the sexualization of women by creating an unattainable ideal (Kilbourne, 2010). In the last fifty years, the ideal woman has changed shape significantly (McKinley, 1998): "Achieving dominant culture's expectations for her body has become a more and more difficult task for a woman as the weight portrayed as attractive becomes farther from average" (p. 114). From 1978 to 1988, the media produced a drastically different woman for the world to witness. Half of the women in *Playboy* and Miss America pageants were 15% or more under the projected weight for their height.; a trend that has continued. Today women, on average, stand at 5'4" and weigh 140 pounds; however, the average female model is 5'11" and 120 pounds (Sheldon, 2010). The discrepancy between the average female body and what is projected by media significantly impacts college students.

Sheldon (2010) pointed to social comparison theory as a way to understand the impact of media upon body dissatisfaction. Social comparison theory creates an understanding for how men and women are thrust toward negative body image. Social comparison theory is prevalent in a society in which people seek others' views to determine what they think about themselves (Sheldon, 2010). Trends toward objectification lead to women viewing themselves as objects (Kilbourne, 2010). Habits and cultural norms like these make it much easier for a woman to treat her body with disrespect and harmful activity.

Conclusion

Such research is necessary for understanding college students. The final and most important conclusion from the research of Boyatzis and Quinlan (2008) was that the field of religion and body image "has tremendous room for growth" (p. 206). There is room to learn more with future research. They conclude by saying, "Scholarly attention must be paid to these dynamics between women's religiosity and body image and eating behaviors" (p. 206). Finding the impact of spirituality and perfectionism on body image is important for all of higher education, particularly for those institutions with religious affiliations. There is a significant gap between the two constructs, perfectionism and religiosity, and their impact on body image among women, especially regarding how the two together influence body image.

Chapter 3

Methodology

The current study developed with the intent to find the relationship between perfectionism and religiosity and how these two variables impact female body image. The undergraduate students studied attended a private evangelical university in the Midwest. The school had a focus on the liberal arts, academic excellence, and growth in one's religious life. The methodology of the study examined three main questions: (a) How does spirituality/religiosity influence female body image?; (b) How does perfectionism influence female body image?; and (c) How do religiosity and perfectionism together influence body image?

Participants

During all-hall meetings, Residence Life staff distributed 800 surveys to female students living in residence halls and on-campus apartments. After completion, staff collected the finished surveys and returned them to the primary researcher for the study. Of the 800 surveys distributed, 345 surveys were collected and returned. Due to missing data, 21 surveys were not used. 324 surveys were analyzed in the final results of the research. Ninety-five first-year, 94 sophomore, 72 junior, and 39 senior students returned the surveys. Of the 324 total participants, 24 students chose not to include their class year. One hundred and thirty-five participants lived in all-female residence halls and 189 in co-educational residence halls. The female students analyzed fit the traditional age of

college and university students. Students ranged in age from 18 to 25 (61 were 18, 98 were 19, 83 were 20, 42 were 21, 13 were 22, 3 were 23, 1 was 25, and 23 students did not include their age).

Instruments

Religious Orientation Scale. In order to know how the participants viewed their relationship with God, the Religious Orientation Scale (ROS) was used (Crosby et al., 2011). The measurement consists of twenty items that measure intrinsic and extrinsic levels of religiosity. It includes twelve questions to determine one's extrinsic levels of religiosity and eight questions to determine intrinsic religiosity (Ashby & Huffman, 1999).

The scale, developed by Allport and Ross (1967), is a way to measure the answers to questions based on motivations and intentions. In order to create a correlation between the two scales, each question was simply rewritten from the original scale in a manner that was understandable by all ages (Gorsuch & Venable, 1983).

The reasons for using the ROS scale instead of others included (a) easy readability in comparison to similar scales; (b) focus on differences between intrinsic and extrinsic religiosity; and (c) the usefulness of determining levels of intrinsic and extrinsic religiosity to inform the results of the research. These traits created very high reliability among the scale (Gorsuch & Venable, 1983). The religious nature of the institution may have had an impact on the scores of the Religious Orientation Scale (Crosby et al., 2011; Gorsuch & Venable, 1983).

Perfectionism Scale. In order to assess the levels of perfectionism among female students, the Almost Perfect Scale-Revised was used (Slaney, Rice, Mobley, Trippi, &

Ashby, 2001). The APS-R is one of the few of its kind that looks at the differences between the two types of perfectionism (Neff, 2003). This scale assesses the adaptive and maladaptive ways that perfectionism is understood (Crosby et al., 2011). The 23 items on the test are answered on a likert scale (Ashby & Rice, 2002). Personal actions and thoughts toward high standards, order, and discrepancy are evident through this test.

The goal of this measurement is to focus on the attitudes, behaviors, and mindsets that have a positive influence on negative perfectionism (Slaney et al., 2001). These revisions were based upon the initial scale developed in 1992 by Slaney and Johnson along with research from Hewitt and Flett (1991). By adding new subscales to the APS-R, both positive and negative dimensions of perfectionism are now measurable.

There are three subscales to the APS-R (Crosby et al., 2011). These subscales include: (a) standards; (b) order; (c) discrepancy. Examples of questions from these measurements include: (a) I wish I had closer relationships with my friends; (b) When I think of things I have to do, I feel anxious; (c) My standards are so high that I often procrastinate (Ashby & Huffman, 1999).

To observe the validity of this scale, 809 undergraduate students participated in the research it took to develop it. Students were from three different institutions in the mid-Atlantic and Midwest. The schools differed in size, and students were recruited to participate from a variety of classes. Comparable numbers of men and women were used as participants from a variety of ethnic and cultural backgrounds (Slaney et al., 2001). The scale has been used in a variety of research since its conception (Ashby & Huffman, 1999).

Body image satisfaction. The Multidimensional Body-Self Relations

Questionnaire (Cash, 2000) was used to measure the body image satisfaction of the female students who participated in the current research. This measurement provided information on female attitudes toward their body image.

Five of the subscales of the MBSRQ-AS were used in this research. The Appearance Evaluation subscale focus on perceptions of overall appearance. Appearance Orientation focus on the effects of perceptions and beliefs on the behavior of participants. Overweight Preoccupation, Self-Classified Weight, and the Body Areas Satisfaction Scale focus on individual satisfaction or dissatisfaction with specific parts of the body (Cash & Szymanski, 1995). These subscales were used to understand better how students view their bodies and the ideas that accompany these views. The subscales contained seven questions on a five-point disagree-agree answer.

Procedure

Three scales were used for measurement. All instruments were compiled into one packet and distributed to students. The first scale was the MBSRQ-AS, the Multidimensional Body-Self Relations Questionnaire-Appearance Scales instrument. Following this form were the Religious Well-Being scale (RWB), and the Almost Perfect Scale-Revised (APS-R).

In the packet students also received: (a) an Informed consent form; (b) a note of confidentiality and voluntary participation; (c) counseling center information; and (d) instructions for completing the survey and returning it, once completed. After the forms were combined into packets, they were passed out by Residence Life staff to all the

female students in their buildings. Residence Life Personnel Assistants distributed packets during all-hall meetings.

The staff members received instructions for distributing and collecting the surveys during a Residence Life meeting. Before the packets were distributed, the researcher gave detailed instructions about how the instruments should be handled and how student participation should be requested. During this meeting the researcher explained the process, instructions for clarity, and the voluntary nature of the study. Members of Residence Life went over these instructions with students when they distributed the packets. Students were reminded of the voluntary nature of participation for the study. It was made clear that filling out the scales would not influence their experience in the residence halls or their time at the university in measurable ways.

After completing the surveys, students returned them to the Residence Life Personnel Assistants. Students did not include any identification besides class year and age on these forms. Surveys were returned to the researcher upon collection by Personnel Assistants. Answers from the surveys were examined to determine the results. Personnel Assistants were also asked to participate in the survey. In order to understand the results of the research a multiple regression approach was utilized to analyze the data collected.

Chapter 4

Results

This chapter focuses on understanding the results from regression analysis run on the MBSRQ-AS, APS-R, and ROS. For each of these scales for body image, perfectionism, and religiosity, subscales were utilized, which the tables in this section explain. Included in the results is evidence of significance and the predictive value of each scale, as well as the beta weights for all of the independent variables and subscales present.

Regressions

In order to determine the predictive value of perfectionism and religiosity on body image, a linear regression analysis was run on the data collected. This regression analysis was run on each subscale of the MBSRQ-AS. To understand the relationship between perfectionism (standards, order, and discrepancy) and religiosity (intrinsic and extrinsic) upon body image, six linear regressions were run.

In the first linear regression, perfectionism and religiosity were the predictor variables and appearance evaluation was the criterion. Table 1 explains the strength and significance of perfectionism and religiosity upon appearance evaluation. Almost Perfect Scale-Revised (Discrepancy) was found to be the most significant variable with a beta weight of $-.349$. The model had an overall r^2 value of $.183$, meaning that as the perceived gap rose in meeting personal standards, students' feelings of attractiveness decreased.

Table 1

Regression Analysis for Perfectionism and Religiosity Predicting Appearance Evaluation

<i>Model</i>	<i>B</i>	<i>Std. Error</i>	<i>β</i>	<i>t</i>	<i>Sig.</i>
Almost Perfect Scale (Standards)	.095	.052	.100	1.827	.069
Almost Perfect Scale (Order)	-.239	.095	-.137	-2.506	.013
Almost Perfect S Scale (Discrepancy)	-.119	.018	-.349**	-6.466	.000**
Religious Orientation Scale (Extrinsic)	-.021	.046	-.029	-.468	.640
Religious Orientation Scale (Intrinsic)	.123	.060	.127	2.057	.041

The second linear regression examined perfectionism and religiosity as the predictor variables and appearance orientation as the criterion. Table 2 explains the strength and significance of perfectionism and religiosity upon appearance orientation. Almost Perfect Scale-Revised (Order) was found to be the most significant variable with a beta weight of .872. The model had an overall r^2 value of .727, meaning that as a student's desire for organization increased so did the importance she placed in appearance and grooming behaviors.

Table 2

Regression Analysis for Perfectionism and Religiosity Predicting Appearance Orientation

<i>Model</i>	<i>B</i>	<i>Std. Error</i>	β	<i>t</i>	<i>Sig.</i>
Almost Perfect Scale (Standards)	.004	.045	.003	.085	.932
Almost Perfect Scale (Order)	2.286	.083	.872**	27.495	.000**
Almost Perfect Scale (Discrepancy)	-.029	.016	-.057	-1.832	.068
Religious Orientation Scale (Extrinsic)	-.099	.040	-.090	-2.497	.013
Religious Orientation Scale (Intrinsic)	-.007	.052	-.005	-.144	.886

Table 3 explains the strength and significance of perfectionism and religiosity upon the subscale, body areas satisfaction. This was the third linear regression. Perfectionism and religiosity were the predictor variables and body areas satisfaction is the criterion. Almost Perfect Scale-Revised (Discrepancy) was found to be the most significant variable with a beta weight of -.309, followed by the second most significant variable, Almost Perfect Scale-Revised (Order) with a beta weight of -.266. The model had an overall r^2 value of .278, meaning that as the perceived gap in a student meeting her personal standards and desire of organization increased, her overall satisfaction or contentment with her body, size, and appearance decreased.

Table 3

Regression Analysis for Perfectionism and Religiosity Predicting Body Areas Satisfaction

	<i>B</i>	<i>Std. Error</i>	β	<i>t</i>	<i>Sig.</i>
Almost Perfect Scale (Standards)	.127	.055	.120	2.328	.021
Almost Perfect Scale (Order)	-.515	.100	-.266**	-5.148	.000**
Almost Perfect Scale (Discrepancy)	-.118	.019	-.309**	-6.089	.000**
Religious Orientation Scale (Extrinsic)	-.100	.048	-.122	-2.073	.039
Religious Orientation Scale (Intrinsic)	.156	.063	.144	2.480	.014

In the forth linear regression, perfectionism and religiosity were the predictor variables and overweight preoccupation was the criterion. Table 4 explains the strength and significance of perfectionism and religiosity upon overweight preoccupation. Almost Perfect Scale-Revised (Order) was found to be the most significant variable with a beta weight of .536. The second most significant variable was Almost Perfect Scale-Revised (Discrepancy) with a beta weight of .232. The model had an overall r^2 value of .443. As the women's scores increased in these areas of perfectionism, so did their fat anxiety, weight vigilance, and likelihood to diet or restrain their eating.

Table 4

Regression Analysis for Perfectionism and Religiosity Predicting Overweight Preoccupation

<i>Model</i>	<i>B</i>	<i>Std. Error</i>	β	<i>t</i>	<i>Sig.</i>
Almost Perfect Scale (Standards)	-.040	.030	-.059	-1.312	.190
Almost Perfect Scale (Order)	.653	.055	.536**	11.843	.000**
Almost Perfect Scale (Discrepancy)	.56	.011	.232**	5.219	.000**
Religious Orientation Scale (Extrinsic)	.057	.026	.111	2.150	.032
Religious Orientation Scale (Intrinsic)	-.052	.035	-.076	-1.503	.134

Table 5 shows the results of the fifth linear regression measuring the strength and significance of perfectionism and religiosity upon the subscale, self-classified weight. Perfectionism and religiosity were the predictor variables and self-classified weight was the criterion. There were some significant variables found in the Self-Classified Weight model. The model had an overall r^2 value of .072.

Table 6 shows the results of the sixth and final linear regression, measuring the strength and significance of perfectionism and religiosity upon the MBSRQ-AS in its entirety. Perfectionism and religiosity were the predictor variables and the MBSRQ-AS was the criterion. Almost Perfect Scale-Revised (Order) was found to be the most significant variable with a beta weight of .585. The second most significant variable was

Almost Perfect Scale-Revised (Discrepancy) with a beta weight of $-.266$. The model had an overall r^2 value of $.372$.

Table 5

Regression Analysis for Perfectionism and Religiosity Predicting Self Classified Weight

<i>Model</i>	<i>B</i>	<i>Std. Error</i>	<i>β</i>	<i>t</i>	<i>Sig.</i>
Almost Perfect Scale (Standards)	-.018	.013	-.083	-1.422	.156
Almost Perfect Scale (Order)	.050	.023	.125	2.141	.033
Almost Perfect Scale (Discrepancy)	.011	.004	.139	2.415	.016
Religious Orientation Scale (Extrinsic)	.013	.011	.076	1.137	.257
Religious Orientation Scale (Intrinsic)	-.022	.015	-.101	-1.537	.125

The reader will find a strong relationship between the Almost Perfect Scale-Revised (APSR) and the Multidimensional Body-Self Relations Questionnaire-Appearance Subscales (MBSRQ-AS). In particular, the predictor variables of Almost Perfect Scale-Revised (Order subscale) and Almost Perfect Scale-Revised (Discrepancy subscale) had the greatest significance to the movement on the MBSRQ-AS. The final section of the study provides greater detail regarding how these variables relate to each other and the meaning behind them.

Table 6

Regression Analysis for Perfectionism and Religiosity Predicting MBSRQ-AS

	<i>B</i>	<i>Std. Error</i>	β	<i>t</i>	<i>Sig.</i>
Almost Perfect Scale (Standards)	.168	.100	.080	1.671	.096
Almost Perfect Scale (Order)	2.235	.184	.585**	12.176	.000**
Almost Perfect Scale (Discrepancy)	-.199	.035	-.266**	-5.624	.000**
Religious Orientation Scale (Extrinsic)	-.151	.088	-.094	-1.721	.086
Religious Orientation Scale (Intrinsic)	.198	.115	.093	1.720	.087

Chapter 5

Discussion

In order to understand the implications of the present research upon students and higher education practitioners, this section evaluates the results from the preceding research, the hypothesis, information worth exploring, and the use of specific scales. Following the evaluation, are practical next steps for the further understanding of the relationship between perfectionism, religiosity, and body image; further steps for conducting continued research in this area of study; and limitations of the current study.

Research Question and Hypothesis

The research in the current study sought to understand the predictability of perfectionism and religiosity on body image. The hypothesis contained three components. Religiosity did not lower the body satisfaction scores among the average woman at a faith-based college or university. Individuals with high levels of perfectionism were impacted more strongly than those without. High levels of perfectionism and religiosity had a strong impact upon higher levels of negative body image. The research hypothesized that perfectionism and religiosity would be a positive predictor of negative body image.

What is the interaction of perfectionism, religiosity, and body image upon female college students? The simple answer to the interaction between perfectionism, religiosity, and body image upon female college students according to this research was

that there was no connection. According to the literature (Crosby et al., 2011; Rice & Dellwo, 2002), perfectionism (Ashby & Huffman, 1999) and religiosity (Boyatzis & Quinlan, 2008; Crosby et al., 2011) individually have an impact upon body image. However, they did not produce any predictive value upon body image when analyzed together. The hypothesis of the present research, which claimed that perfectionism and religiosity together would have a significant influence on low body satisfaction, was not upheld in the results. Although there were nuances when separated, perfectionism and religiosity together were not found to have a significant predictive value upon the MBSRQ-AS.

What is the impact of perfectionism on body image? According to the data produced from this research, there were numerous areas where the order, standards, and discrepancy subscales of the APS-R had significant predictive value upon the body image scores of the MBRSQ-AS. The significance of predictive value of perfectionism upon body image was not surprising. Due to research that suggested a strong relationship between the two variables, this finding was expected (Downey & Chang, 2007; Pacht, 1984; Sheldon, 2010; Sorotzkin, 1985).

The areas with the most significance and predictive values were between the subscales of the APS-R (order and discrepancy) and the body image subscales. There were two possible explanations to these data scores. As the score on the perfectionism scale, APS-R, increased there was either an increase or decrease in the score from students on the body image, MBRSQ-AS, scale. This was possible because all of the results from the current study that showed predictive value were based on subscales of

the body image scale. Each subscale of the MBSRQ-AS explains different components and elements of body image.

First is the predictive value of the APS-R upon the subscale of appearance evaluation of the MBRSQ-AS. As perfectionism scores increased, scores on the MBRSQ-AS appearance evaluation subscale decreased. Lower scores on the appearance evaluation scale suggested that women had a “general unhappiness with their physical appearance” (Cash, 2000, p. 3). This finding was supported in the research (Hollender, 1965; Horney, 1950; Missildine, 1963).

One of the most significant statistical findings was found in the APS-R subscale order upon appearance orientation. As scores of perfectionism increased so did the investment female students made in their overall appearance (Ashby & Rice, 2002). These students placed significant importance on “how they look, pay attention to their appearance, and engage in extensive grooming behaviors” (Cash, 2000, p. 3).

As the scores for the perfectionism subscales order and discrepancy increased, the MBRSQ-AS subscale of body areas satisfaction decreased. Due to the fact that low scores on the body areas satisfaction subscale suggested that female students were unhappy with their size or appearance of several areas (Cash, 2000), this finding was supported by literature, suggesting a strong correlation between high levels of perfectionism and striving toward the thin ideal and dissatisfaction (Green & Pritchard, 2003).

Overweight preoccupation was significantly predicted by the APSR subscales order and discrepancy. High levels of perfectionism increased the likelihood that students would have increased anxiety about their weight, be more likely to diet and restrict their

eating, and be more vigilant about weight gain or the possibility of such things happening (Cash, 2000; Feingold & Mazzella, 1998).

The research supported the results from the current study. The concept that high levels of perfectionism lead to unrealistic expectations explains low levels of body satisfaction, a focus on grooming techniques, and weight anxiety (Pacht, 1984; Sorotzkin, 1985). The possibility of eating disorders, as common with those facing high levels of overweight preoccupation, is another concern voiced in the research of Ashby and Rice (2002) and Downey and Chang (2007). The focus on dieting (Downey & Chang, 2007) was also suggested by the current study as it was found in the predictive value between the order and discrepancy subscales of the APS-R and the overweight preoccupation subscale of the MBSRQ-AS. Due to the inability to meet unrealistic expectations, perfectionism can lead to feelings of unworthiness and failure, particularly with regard to the physical form of female students (Vohs et al., 1999).

What is the impact of religiosity on body image? According to the data, extrinsic and intrinsic religiosity had very little predictive value upon the body image scores on the MBRSQ-AS. According to the literature, which pointed to significant influence from religiosity and religious affiliations upon body image, both positive and negative, there was an assumption in the hypothesis that religion in this situation would also impact female students (Bemporad, 1996; Boyatzis & Quinlan, 2008; Smith-Jackson et al., 2011).

As common to other studies (Roberts, DePierro, & D'Andrea, 2014) where religious affiliation measurements and their scores provided some form of buffer or counter to the impact of variables, including media influence, this similarity was not

present when measured against perfectionism. In the results of the present research, there were no areas where religiosity had any significant predictive value to body image scores on the MBSRQ-AS.

In light of the lack of demonstrated significance, there is a major concern for practitioners. It is important to understand why perfectionism has so much more significance for predicting body image scores than religiosity. The reason for the lack of significance cannot be understood with the results from the present research.

Implications for Practice

Upon analyzing the data collected as part of the present study, there are some implications for practice that could help professionals working with students in higher education. First, professionals should seek to understand why religiosity is so high among female college students, but the predictive value as discovered in this research is so low.

A second implication for practice among higher education professionals is the need to development programs that help students understand how cognitive beliefs impact self-image. Programming, small group studies, and self-analysis are options for programming activities among female students within their residence halls or through campus-wide initiatives.

The third implication is that students need to understand the effects of perfectionism on female students. Challenging this influence must be an effort that occurs across campuses and in broader communities. The cultural implications of perfectionism among female students should also be examined.

Research points toward critical development occurring among women who engage with counter-stereotypic women (Dasgupta & Asgari, 2004). This is a suggestion

for the kinds of programming efforts that would be beneficial on college and university campuses.

Implications for Future Research

Due to limited research on the relationship between perfectionism and religiosity and their ability to predict the dependent variable—body image—additional research on this topic is needed, specifically, a greater ability to predict to relationship between body image and perfectionism and religiosity. Studying a wider range of students from private, faith-based, liberal arts institutions is recommended. Places that could benefit from such research include private institutions with different backgrounds than the institution studied in the present research and large public institutions.

Another area for continued research is an examination of these constructs and their relationships among men and diverse ethnic and racial populations.

Future research should seek to understand the nuanced experiences of religiosity among female students. In particular, the impact of Christian culture on the high levels of perfectionism sought after by these students. Some potential variables for examination include standards and self-control.

Furthermore, another possible area for future research is a comparison study among females of diverse religious backgrounds. Such research would distinguish whether a particular religious affiliation or tradition has an effect on body image.

Finally, further research could focus on qualitative study. This form of research methodology could provide greater depth and clarity. Continued research on perfectionism, religiosity, and body image will provide student affairs practitioners and higher education a greater understanding of the lived experiences of students.

Limitations

Due to the uniqueness of the institution at which the current study was conducted, there were specific limitations to the ability to generalize based on the results of the study. Primarily, the faith-based admission requirement that all students must meet could have impacted the results because of the potentially significant role of religious faith in students' lives.

A second limitation was the participation and collection rate of the study. Only 324 of the 800 dispersed surveys were returned at the end of a mandatory all-hall meetings. Answers to the questions present on all three surveys required more time than allotted, and therefore the sample did not include as many respondents as it could have.

Another limitation was that students may have felt some form of pressure to complete the surveys. Although clear instructions and communication from the personnel distributing the surveys informed students that their participation was voluntary, the possibility still existed.

The final limitation of the research were the variables that the researcher chose to study and the form in which the study was conducted. Due to the high levels of religiosity on this faith-based campus, the variables studied at this institution in particular may not have provided the most accurate picture of what average female college students' experience. Separating these variables, or finding a way to study the more nuanced experiences of female college students, may have been helpful for the study.

Conclusion

In conclusion, the current study examined the relationship between perfectionism and religiosity and its impact on body image among 18-25 year-old college students at a

Midwest, faith based, liberal arts university. The major finding of the study was that perfectionism had a more significant predictive value on female body image than religiosity. The finding can assist college student personnel in developing programs to address this need. Further research on this topic is needed and recommended.

References

- Ackard, D. M., Kearney-Cooke, A., & Peterson, C. B. (2000). Effect of body image and self-image on women's sexual behaviors. *International Journal of Eating Disorders, 28*, 422-429.
- Allport, G. W. (1935). Attitudes. In C. Murchinson (Ed.), *A handbook of social psychology* (pp.798-844). Worcester, MA: Clark University Press.
- Allport, G. W. (1966). The religious context of prejudice. *Journal for the Scientific Study of Religion, 5*, 447-457.
- American Psychological Association. Task Force on the Sexualization of Girls. (2010). *Report of the APA Task Force on the Sexualization of Girls*. Retrieved from <http://www.apa.org/pi/women/programs/girls/report-full.pdf>
- Ashby, J. S., & Rice, K. G. (2002). Perfectionism, dysfunctional attitudes, and self-esteem: A structural equations analysis. *Journal of Counseling & Development, 80*, 197-203.
- Bemporad, J. R. (1996). Self-starvation through the ages: Reflections on the pre-history of anorexia nervosa. *International Journal of Eating Disorders, 19*, 217-237.
- Bemporad, J. R. (1997). Cultural and historical aspects of eating disorders. *Theoretical Medicine, 18*, 401-420.

- Boyatzis, C. J., & Quinlan, K. B. (2008). Women's body image, disordered eating, and religion: A critical review of the literature. *Research in the Social Scientific Study of Religion, 19*(1), 183-208.
- Cash, T. F. (1994). *User's manual for the Multidimensional Body-Self Relations Questionnaire*. Norfolk, VA: Old Dominion University.
- Cash, T. F. (2000). *The Multidimensional Body-Self Relations Questionnaire*.
- Cash, T. F., & Szymanski, M. L. (1995). The development and validation of the body-image ideals questionnaire. *Journal of Personality Assessment, 64*, 466-477.
- Crosby, J. M., Bates, S. C., & Twohig, M. P. (2011). Examination of the relationship between perfectionism and religiosity as mediated by psychological inflexibility. *Current Psychology, 30*, 117-129.
- Dasgupta, N., & Asgari, S. (2004). Seeing is believing: Exposure to counterstereotypic women leaders and its effect on the malleability of automatic gender stereotyping. *Journal of Experimental Social Psychology, 40*, 642-658.
- Dittmar, H., & Howard, S. (2004). Thin-ideal internalization and social comparison tendency as moderators of media models' impact on women's body-focused anxiety. *Journal of Social and Clinical Psychology, 23*, 768-791.
- Downey, C. A., & Chang, E. C. (2007). Perfectionism and symptoms of eating disturbances in female college students: Considering the role of negative affect and body dissatisfaction. *Eating Behaviors, 8*, 497-503.
- Eisenberg, M., Neumark-Sztainer, D., & Lust, K. (2005). Weight-related issues and high-risk sexual behaviors among college students. *Journal of American College Health, 54*, 95-101.

Feingold, A., & Mazzella, R. (1998). Gender differences in body image are increasing.

Psychological Science, 9, 190-195.

Fredrickson, B. L., & Roberts, T. A. (1997). Objectification theory. *Psychology of*

Women Quarterly, 21, 173-206.

Fredrickson, B. L., Roberts, T. A., Noll, S. M., Quinn, D. M., & Twenge, J. M. (1998).

That swimsuit becomes you: Sex differences in self-objectification, restrained eating, and math performance. *Journal of Personality and Social Psychology, 75*, 269-284.

Gapinski, K. D., Brownell, K. D., & LaFrance, M. (2003). Body objectification and “fat

talk”: Effects on emotion, motivation, and cognitive performance. *Sex Roles, 48*, 377-388.

Gorsuch, R. L., & Venable, G. D. (1983). Development of an “age universal” IE scale.

Journal for the Scientific Study of Religion, 22, 181-187.

Green, S. P., & Pritchard, M. E. (2003). Predictors of body image dissatisfaction in adult

men and women. *Social Behavior and Personality: An International Journal, 31*, 215-222.

Hollender, M. H. (1965). Perfectionism. *Comprehensive Psychology, 6*, 94-103.

Horney, K. (1950). *Neurosis and human growth: The struggle towards self-*

realization. New York, NY: Norton.

Kilbourne, J. (1994). Still killing us softly: Advertising and the obsession with thinness.

In P. Fallon, M. A. Katzman, & S. C. Wooley (Eds.) *Feminist perspectives on eating disorders* (pp. 395-418). New York, NY: Guilford Press.

- Kilbourne, J. (2010). *Killing Us Softly 4* (Full Documentary). *YouTube*. (n.d.).
Retrieved from <http://www.youtube.com/watch?v=cJvfBCcA5mk>
- McKinley, N. M. (1998). Gender differences in undergraduates' body esteem: The mediating effect of objectified body consciousness and actual/ideal weight discrepancy. *Sex Roles, 39*, 113-123.
- Missildine, W. H., & Bernard, A. (1963). *Your inner child of the past*. New York, NY: Simon & Schuster.
- Neff, K. D. (2003). The development and validation of a scale to measure self-compassion. *Self and Identity, 2*, 223-250.
- Pacht, A. R. (1984). Reflections on perfection. *American Psychologist, 39*, 386-390.
- Rice, K. G., & Dellwo, J. P. (2002). Perfectionism and self-development: Implications for college adjustment. *Journal of Counseling & Development, 80*, 188-196.
- Schilder, P. (1935). *The image and appearance of the human body*. Oxford, England: Kegan Paul.
- Shafran, R., Cooper, Z., & Fairburn, C. G. (2002). Clinical perfectionism: A cognitive-behavioral analysis. *Behavior Research and Therapy, 40*, 773-791.
- Sheldon, P. (2010). Pressure to be perfect: Influences on college students' body esteem. *Southern Communication Journal, 75*, 277-298.
- Sides-Moore, L., & Tochkov, K. (2011). The thinner the better? Competitiveness, depression and body image among college student women. *College Student Journal, 45*, 439-448.

- Slaney, R. B., Rice, K. G., Mobley, M., Trippi, J., & Ashby, J. S. (2001). The Revised Almost Perfect Scale. *Measurement and Evaluation in Counseling and Development, 34*, 130-145.
- Smith-Jackson, T., Reel, J. J., & Thackeray, R. (2011). Coping with “bad body image days”: Strategies from first-year young adult college women. *Body Image, 8*, 335-342.
- Snyder, R., & Hasbrouck, L. (1996). Feminist identity, gender traits, and symptoms of disturbed eating among college women. *Psychology of Women Quarterly, 20*, 593-598.
- Sorotzkin, B. (1985). The quest for perfection: Avoiding guilt or avoiding shame. *Psychotherapy, 22*, 564-571.
- Spitzack, C. (1990). *Confessing excess: Women and the politics of body reduction*. New York, NY: State University of New York Press.
- Tiggemann, M., & Lynch, J. E. (2001). Body image across the life span in adult women: the role of self-objectification. *Developmental Psychology, 37*, 243-253.
- Vohs, K. D., Bardone, A. M., Joiner, Jr., T. E., & Abramson, L. Y. (1999). Perfectionism, perceived weight status, and self-esteem interact to predict bulimic symptoms: A model of bulimic symptom development. *Journal of Abnormal Psychology, 108*, 695-700.
- Wiederman, M. W., & Hurst, S. R. (1998). Body size, physical attractiveness, and body image among young adult women: Relationships to sexual experience and sexual esteem. *Journal of Sex Research, 35*, 272-281.

Appendix A

Almost Perfect Scale-Revised

Almost Perfect Scale-Revised Instructions

The following items are designed to measure attitudes people have toward themselves, their performance, and toward others. There are no right or wrong answers.

Please respond to all of the items. Use your first impression and do not spend too much time on individual items in responding.

Respond to each of the items using the scale below to describe your degree of agreement with each item. Fill in the appropriate number circle on the computer answer sheet that is provided.

- 1 - Strongly Disagree
- 2 - Disagree
- 3 - Slightly Disagree
- 4 - Neutral
- 5 - Slightly Agree
- 6 - Agree
- 7 - Strongly Agree

1. I have high standards for my performance at work or at school.
2. I am an orderly person.
3. I often feel frustrated because I can't meet my goals.
4. Neatness is important to me.
5. If you don't expect much out of yourself, you will never succeed.
6. My best just never seems to be good enough for me.
7. I think things should be put away in their place
8. I have high expectations for myself.

9. I rarely live up to my high standards.
10. I like to always be organized and disciplined.
11. Doing my best never seems to be enough.
12. I set very high standards for myself.
13. I am never satisfied with my accomplishments.
14. I expect the best from myself.
15. I often worry about not measuring up to my own expectations.
16. My performance rarely measures up to my standards.
17. I am not satisfied even when I know I have done my best.
18. I try to do my best at everything I do.
19. I am seldom able to meet my own high standards of performance.
20. I am hardly ever satisfied with my performance.
21. I hardly ever feel that what I've done is good enough.
22. I have a strong need to strive for excellence.
23. I often feel disappointment after completing a task because I know I could have done better.

(Slaney, Mobley, Trippi, Ashby, & Johnson, 1996)

Appendix B

Religious Orientation Scale

Measures of Religiosity

Religious Orientation Scale (ROS)

Please indicated the extent to which you agree or disagree with each item below by using the following rating scale following each question:

- 1 - Strongly Disagree
- 2 - Disagree
- 3 - Neutral
- 4 - Agree
- 5 - Strongly Agree

1. A primary reason for my interest in religion is that my church is a congenial social activity.
2. It doesn't matter so much what I believe so long as I lead a moral life.
3. The primary purpose of prayer is to gain relief and protection.
4. The church is most important as a place to formulate good social relationships.
5. What religion offers me most is comfort when sorrows and misfortune strike.
6. I pray chiefly because I have been taught to pray.
7. Although I am a religious person I refuse to let religious considerations influence my everyday affairs.
8. Although I believe in my religion, I feel there are many more important things in my life.
9. Occasionally I find it necessary to compromise my religious beliefs in order to protect my social and economic well-being.

10. One reason for my being a church member is that such membership helps to establish a person in the community.
 11. The purpose of prayer is to secure a happy and peaceful life.
 12. Religion helps to keep my life balanced and steady in exactly the same way as my citizenship, friendships, and other memberships do.
1. It is important for me to spend periods of time in private religious thought and meditation.
 2. If not prevented by unavoidable circumstances, I attend church.
 3. I try hard to carry my religion over into all my other dealings in life.
 4. The prayers I say when I am alone carry as much meaning and personal emotion as those said by me during services.
 5. Quite often I have been keenly aware of the presence of God or the Divine being.
 6. I read literature about my faith (or church).
 7. If I were to join a church group I would prefer to join a Bible study group rather than a social fellowship.
 8. My religious beliefs are really what lie behind my whole approach to life.
 9. Religion is especially important because it answers many questions about the meaning of life.

