



National Youth Affairs Research Scheme (NYARS)

Body Image and Disadvantaged / Vulnerable Youth

Final Report

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NYARS was established in 1985 as a cooperative funding arrangement between federal, state and territory governments to facilitate nationally based research into current social, political and economic factors affecting young people. NYARS operates under the auspices of the Standing Council on School Education and Early Childhood.

Disclaimer

This report has been prepared for the National Youth Affairs Research Scheme and is intended to provide background research and other information as a basis for discussion. The views expressed in the report are those of the authors and are not necessarily those of the Australian Government, State and Territory Governments or the Standing Council on School Education and Early Childhood (SCSEEC).

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Executive Summary

Aim and context

The National Youth Affairs Research Scheme commissioned the Social Policy Research Centre (SPRC) at the University of New South Wales (UNSW) to conduct research on how Indigenous and young people who are homeless experience body image and to explore the type of initiatives that can address negative body image for young people in these target groups.

This report summarises the background and aims of the project as well as the methodology that was employed and the findings of the research. The report summarises the similarities and difference between how the target groups conceptualise and experience body image and makes recommendations for potential future intervention strategies.

Methodology

The research consisted of three components:

1. A review of national and international literature on young people's experiences of body image generally with specific emphasis on Indigenous young people and those who experience homelessness, and a review of key interventions;
2. Interviews and workshops with young people; and
3. Consultations with service providers and academic experts in the field of body image.

Findings

Methodological findings

- Young women tended to be more articulate about body image than young men. However young women needed time to develop a rapport with researchers and each other before the more difficult personal issues could emerge. In this research project, activity based methods were a good support.
- Many young men from Indigenous backgrounds and homeless circumstances found it difficult to talk about body image and did not particularly relate to the phrase. However, in general discussion it was apparent they were concerned with how they presented themselves to the world, and how the world perceived them. Cameras helped engage young men who may not have otherwise participated at all because they did not relate to the idea that males have body image concerns.

Body image conceptions and key concerns

- Participants immediately identified body image concerns with body size (thinness for girls and muscularity for boys). However clothing, hair and personal grooming also played a central role in disadvantaged Australian young people's conceptualisation of body image. Young people from economically disadvantaged backgrounds found the pressure to have certain 'looks' through brands and particular items of clothing excluded

them. A number expressed that school uniforms levelled out these pressures to some extent within school environments. This contrasts with most of the definitions in the mainstream body image literature, which largely ignore clothing and grooming (Krueger 1990; Cash 2004; Featherstone 2010).

- Most participants were aware of idealised images and the pressures these generate for young women. This awareness did not mean young women did not struggle with establishing a healthy body image, but it did mean they have some tools to support them. This awareness was not as apparent for young men.

Indigenous young people

- Almost all Indigenous participants (from both cohorts) were politicised around issues to do with Aboriginality and discrimination and this shaped the way they experienced body image pressures.
- Indigenous young people expressed pride in their Indigenous identities and wanted their Aboriginality recognised by other Aboriginal people and by non-Indigenous people.
- Many reported they were subject to direct or indirect insults about Aboriginal people that were often based in negative stereotypes of Aboriginal people.
- Pride in 'Indigenous bodies' appeared to involve a difficult balancing act between belonging to family and community and distancing oneself from the negative stereotypes that continue to be associated with Aboriginality.
- There was evidence of shared discourses that Indigenous people have bigger bodies and frames. While this offered young women a critical perspective on the 'thin ideal', the ideal still has significant impact on Indigenous young women. Young Indigenous men consistently expressed a desire for greater muscularity.
- Some Indigenous participants were embarrassed by their teeth and noted the poor teeth in their families. These participants expressed a fear of dentists.
- Indigenous participants were conscious of mainstream adherence to culturally narrow perceptions of beauty and were quick to identify with African-American culture and role models from Indigenous Australian communities.
- A number of Indigenous participants suggested they resist health information about obesity because they believe the information relates to non-Indigenous 'white' body norms not to Indigenous bodies.

Young people who are homeless

- The most pressing concerns for young people who are homeless were finding money, food, finding stable accommodation and employment, alcohol and other drugs, and the safety pressures of living independently. Limited access to these resources impacted on their capacity to shape their body image in ways that allowed them to secure these important resources.

- Larger body sizes were considered to provide greater safety for homeless young men, who felt they needed to physically defend themselves.
- Young people who are homeless faced issues with maintaining clean clothes and hygiene
- Many young people in this cohort reported experiencing stigma and the threat of violence as a result of looking 'homeless'.
- Young people who are homeless (and Indigenous young people who are homeless) typically identified with the various youth subcultures - 'emos', 'lads', 'lasses', 'ravers', 'swags' or with suburbs and locality based groups and used these affiliations as a source of safety on the streets.
- Belonging to subcultures required particular clothing in order to be identifiable and placed financial strain on young people and required them to find access to washing facilities to maintain clothes and appearances.

Socio-cultural factors and risk/protective factors

- All participants reported that family interactions shaped the view they had of their bodies and appearance. They were influenced by direct feedback and comment (positive and negative) and by modelled body image behaviours and orientations.
- Negative comment from families had significant and long reaching effects on how young people perceived their physical selves.
- Family relationships were particularly important to Indigenous young people and there is evidence of a need for interventions that target multiple generations within a family not just young people.
- Young people who are homeless were more likely to comment adversely on the influence of their family relationships than Indigenous young people.
- Peer relationships also had significant effect on young people's body image. Direct comment (both positive and negative) was most likely to be exchanged between young women. However, this was less likely between Indigenous young women than between their non-Indigenous counterparts. Young men were less likely to engage in appearance based talk with peers.
- Traditional media remains a source of information about identity and health for many young people, even though many are critical of the content of traditional media.
- Social networking sites were commonly used by young people and were a source of body image pressure. Many young people reported experiencing or witnessing cyberbullying on social network sites and derogatory comments.
- A number of participants felt their popularity was broadcast to peers by the number of social networking 'friends' they had and through frequency of comments received. This view was prevalent among young people with low self-esteem and poor body image. This group were the most vulnerable to cyberbullying about their appearance on social networking sites. Young people with a strong self image were more likely to report blocking people from their home page in response to negative comments.

- The prevalence of comments about cyberbullying on social networking sites suggest there is a strong need for the development of critical literacies around social media for those in disadvantaged communities and for those who are vulnerable to bullying (as identified by targeted youth services and schools).

Strategies for securing broader well-being and health

- A number of Indigenous young people had taught themselves about health and how to adhere to healthier eating and exercise habits rather than learning from their families of origin. Making healthy choices, however, was not easy for participants. Changing eating habits meant that participants stood out in their peer networks and some found this difficult.
- A number of Indigenous young people and young people who are homeless reported smoking cannabis as a strategy they used to lose weight and achieve desired body sizes, even though all the research evidence suggests use of cannabis is not an effective weight loss strategy.
- Many young people talked about avoiding scrutiny and dressing and acting in ways that fitted in as a way of avoiding stigma and threats from other young people.
- The strongest protective factors voiced by participants were those that drew on an integrated view of wellbeing. These young people saw family, strong friends and achievements as centrally important in their lives and buffered them from viewing body image as **the** critical factor that determined their self worth.

Barriers

- Participants from both cohorts identified key barriers to securing positive body image as a lack of basic items (such as nutritious food, clothing and exercise facilities, dental or psychological support services) that contribute to a positive body image and/or to positive mental health.
- Access to facilities that support exercise and care for one's muscular and bone health was also not affordable or accessible for young people on Youth Allowance, or unavailable locally in outer lying suburbs. Many found using public spaces for exercise after school or work left them vulnerable to violence and harassment.
- A considerable number of young people who were homeless in the study reported having mental health issues but only a small proportion of this number were, at the time of data collection, in contact with mental health support services.

Resources, supports and interventions

- No participant in our study had ever been part of any formal intervention related to body image. At best some had received some critical media literacy at school.
- Families were young people's first port of call for health information. The next most popular source of information was the internet. Teachers and teacher's aides (including physical education teachers, school counsellors and Aboriginal Education Officers) were also a trusted source of health information for some participants. A small number of

participants reported obtaining health information from other professionals such as nurses, chemists and personal trainers and from friends and other users of their local exercise facilities. It is vital that young people, parents, teachers and teacher's aides have accurate and up-to-date knowledge about appropriate body image support.

- Participants suggested a number of interventions and supports around body image. They stressed the importance of talking to children about body image from middle childhood when body changes are imminent and targeting young people through schools.
- Some participants suggested the need for stronger publicity campaigns around body image and working with the media and retailers to promote larger sized models and shop mannequins, standardise clothing sizes and increase the availability of fashionable clothing in larger sizes.
- Indigenous participants identified the need for body image programs specifically targeted at young people from Indigenous background.
- Other suggestions included increased support for eating disorders; increased access to free/low-cost exercise facilities and subsidised gym memberships for young people or people living on low incomes; Indigenous-specific exercise facilities; self-defence classes to increase young people's physical strength and self-esteem and increase the safety and accessibility of parks and public spaces.
- It is important that these initiatives are carefully constructed as Indigenous young people are very sensitive to negative or deficit based public health campaigns.

Implications of findings

- That Australian governments, in partnership with community organisations working in the field of body image, develop a social marketing campaign for the whole community (with a diversity of cultural backgrounds) that targets:
 - negative effects of ‘fat talk’ and other negative orientations towards one’s body image among adult members of families and young people from middle childhood. (This could incorporate a range of health messages that depict children watching adults engage in ‘fat talk’ or self depreciation or a parent having a cigarette and a coffee for their own ‘diet dinner’ while children eat a prepared meal).
 - negative effects of fat talk among peers and how young people might effectively respond.
 - community awareness about the body image pressures on young men and that model protective strategies to support young men to deal with pressures in a healthy way.
- That Australian governments, in partnership with community and corporate organisations working in the field of body image and in the field of young people’s use of technology, develop social marketing campaigns that can be rolled out on social networking sites. These campaigns should be designed to support young people to use social media in a way that resists and counters the spectrum of negative messages such as those delivered via ‘pop up’ advertising which is triggered on internet sites by certain keywords, negative body image talk from ‘friends’ and image-based cyberbullying.^[1]
- That Australian governments provide further funding to develop, trial and evaluate body image initiatives based on Australian programs that have been shown to have good outcomes. These initiatives should be designed to trial the benefits of universal and staged delivery through schools and include:
 - a middle years component that involves families and is pedagogically oriented towards critical media literacy skills including those relevant to social networking sites.
 - an early years of secondary school component that targets different (gender, age, culturally specific group) needs. Ideally this could be based on a resource where teachers select teaching materials to suit the make-up of their local community. Initiatives need to be activity based and allow students to develop vocabulary around body image and to encourage them to see it as a universal issue (rather than a feminised issue) that is experienced differently by different groups of people. This component also needs to include critical literacies aimed at improving protective behaviours within social networking (ICT) contexts.

^[1] This work could be conducted with the support of the Young and Well CRC. <http://www.yawcrc.org.au/>

- training for key school personnel on body image pressures and the strategies that best protect young people from internalising negative messages. As student wellbeing is increasingly on the agendas of Federal government and state education authorities, there may well be a range of existing initiatives that provide a forum for personnel training about strategies that support young people to manage body image pressures.

Indigenous young people

- That Australian governments and relevant health authorities commission research on how health information about weight and healthy lifestyles can better articulate positively with the protective factors that buffer young Indigenous people from the negative perceptions of Indigenous people held in the wider community.
- That Australian governments provide further funding to develop, trial and evaluate body image initiatives that target the specific needs of Indigenous young people based on research conducted in recommendation 4. Initiatives should be designed to include training for Aboriginal Education Officers (AEOs) in schools about the specific ways body image pressures impact on young Indigenous people and support these personnel to work effectively with all Indigenous students across school administrative regions. This may involve designing workloads so AEOs can work across several schools so all students have access to AEOs of the same gender to speak to about social-emotional and personal issues such as body image pressures.
- The relevant health authorities commission targeted social marketing campaigns related to the importance of regular dental visits rather than emergency dental care.
- That Australian governments fund a whole of population social marketing campaign that values and raises awareness of the diversity of Indigenous looks and achievements.

Homeless young people

- That Australian governments and community organisations working with young people develop existing youth hubs so they offer 'soft' entry points into integrated services where all their needs can be met. (The notion of 'soft entry point' is one used in public health models of service delivery. The term typically refers to points where the public can access and/or become engaged in services without a commitment to on-going service use or without the use of secondary or tertiary services). Existing and new youth hubs should be developed so they include a broad spectrum of health services including showers and laundry facilities and cooking and exercise facilities, surrounded by wrap around physical and mental health education, medical and dental services.
- That Australian governments in partnership with community organisations who work with young people develop training programs for youth workers in homeless services

that build on body image training packages designed for teachers and include components that address the specific (and diverse) needs of young people who are homeless.

1 Research Methodology

1.1 Research objectives

This project aimed to find out:

- What body image means to Indigenous young people and young people who are homeless;
- How body image affects these young people; and
- What initiatives could assist in promoting positive body image.

The focus on disadvantaged and vulnerable young people aimed to broaden and explore the normative assumptions in research on body image and to support the development of initiatives appropriate for these young people.

1.2 Research questions

The research was guided and informed by the following questions:

- What are the key influences shaping young people's perceptions of their bodies (in the different target groups)?
- Do vulnerable young people think of body image primarily in terms of size, shape and colour of their physical body, or are other elements such as clothing and branding important?
- What elements of embodiment (strength, movement, perception, communication) are especially concerning? And which elements are positive and valued?
- Is body image regarded as a personal concern, or is it tied up with belonging to family and community?
- What affect do individual (such as age, ethnicity, gender and religion), family and community (such as geography and available resources) characteristics and circumstances (such as socio-economic status and housing/living standards) have on the way young people construct their body image?
- How do individual, family and community characteristics and circumstances impact on the strategies and information young people use to assess their bodies and the messages they receive about their bodies?
 - To what extent do young people use body comparison to construct their body image?
 - Who do they compare themselves with?
 - What acts as protective factors against or even within this tendency?
 - To what extent do these young people engage in 'fat' or 'muscularity' talk?
 - To what extent do young people experience or engage in appearance teasing?
- What initiative/s could assist in promoting positive body image?

The research also sought to establish the locations where messages, programs and initiatives would be most useful (such as school, social and religious groups, home, sporting, work, health providers, fashion industry, training locations, media billboards, festivals, or other avenues for media literacy) and the look, style and content of effective body image campaigns.

1.3 Research methods

The project methodology was designed to explore the range of individual, socio-cultural and other factors which influence what body image means to Indigenous young people and young people who are homeless aged 12 to 25 years, as well as how body image affects young people and initiatives that could assist in promoting positive body image.

The research project involved three distinct phases:

- Phase 1: Literature review and fieldwork preparation
- Phase 2: Data collection
- Phase 3: Analysis and report writing.

This section describes each of these phases in more detail.

1.4 Phase 1: Literature review and fieldwork preparation

Literature review

We reviewed Australian and international literature to identify and describe key issues relating to body image for young people. The review also includes the research that has been conducted to date with Indigenous young people and young people at risk of homelessness thus far on the issues associated with body image concerns, describing how the issues are experienced for these groups.

The review included systematic searches of material from electronic databases; published and unpublished material; reports held by government agencies, youth peaks and service organisations and academics; and any other research that is currently being undertaken or has been recently completed.

Finally, the literature review includes a section on promising Australian and international initiatives that promote positive body image for young people (in general) and more specifically for young people in the target groups. The literature review has been used to support the analysis of findings from the fieldwork.

The final literature review is included in Appendix A of this report.

Fieldwork preparation

The fieldwork preparation included the finalisation of the methodology and recruitment strategies.

1.5 Phase 2: Data collection

For this phase of the research, young people in New South Wales were recruited to participate in face to face interviews and group work. Service providers and body image experts were recruited to participate in telephone interviews.

The aim was to recruit:

- 8-10 Indigenous young people in group work (photographic workshops);
- 8-10 Young people who were homeless in group work (photographic workshops);
- 18 individual interviews with young people from both target groups; and
- 10 telephone interviews with service providers and community elders.

Recruitment:

An arms-length recruitment approach was employed. Service providers working in homeless youth support agencies were approached to support recruitment and to hand out flyers to young people.

Participants who were homeless

A sample of young people who are homeless was recruited through Salvation Army and Mission Australia homelessness services in Sydney. As participants recruited through this method were necessarily in touch with formal services, all participants who were homeless met the definition of secondary or tertiary homelessness and none met the criteria for *primary* homelessness (which includes people without conventional accommodation who are 'sleeping rough', living on the streets, in deserted buildings, improvised dwellings or in parks). *Secondary* homelessness includes people who move between various forms of temporary shelter including friends, emergency accommodation, youth refuges, hostels and boarding houses and *tertiary* homeless includes those living in single rooms in private boarding houses without their own bathroom, kitchen or security of tenure (FaHCSIA, 2009: 3).

Indigenous participants

Indigenous participants were sought and permission to conduct this research obtained in a regional community where Chief Investigator Skattebol has established relationships with community elders. This sampling strategy met the National Health and Medical Research Council and Australian Institute of Aboriginal and Torres Strait Islander Studies core principles of ethical research in Indigenous communities. Seven Indigenous young people were recruited out of an Indigenous context (through mainstream supported accommodation services). While we anticipated there would be some cross over between Indigenous and homeless groups, we did not expect to recruit so many Indigenous young people through homeless services.

This approach maximised opportunities for consultation and negotiation of meaning and interpretation with Indigenous peoples on the processes and findings of research that pertains to young people from their community. On-going consultation and collaboration

within a specific community allowed researchers to understand local Indigenous knowledge systems and priorities and provides opportunities to communicate respect for these knowledge systems. On-going involvement and consultation provides opportunities for the research to be of direct benefit to Indigenous communities through a process that builds community capacity through involvement. A copy of this report will be given to the community at the end of the project.

In addition to meeting ethical principles, snowballing referrals from community elders provided access to those in the older age range identified in the Mission Australia survey. It was anticipated that young people in this age range (20–24 years) would be the most difficult to recruit as they often have less contact with universal and targeted services than their younger peers. Individual interviews were conducted where young people preferred this option.

Data collection:

Young people interviews

Young people were offered the option to talk individually or in a small group interview ideally with two to three other young people¹. This allowed young people to control the research dynamics and the extent to which they revealed personal experiences. Punch (2002) says that using the appropriate method for a child or young person is central to any research. She says that some young people may 'lack confidence at communicating directly with unfamiliar adults especially in a one-to-one situation' (2002: 329), which is why it was important for us to be able to offer all young people the option to choose the method that they felt most comfortable with.

The qualitative interview is the most widely used method in research with children and young people, because, as Heath et al., say:

It is generally regarded as a young-person friendly strategy, providing opportunities for young people to talk about their lives on their own terms. Given the frequent marginalisation of young people's voices within society, the interview can be a powerful tool for – quite literally – giving voice to their experiences and concerns (2009: 79).

Given this, this research used semi-structured interviews, lasting between forty-five and ninety minutes. Interviews took place in services, young people's homes or a public space. Similar to Heath et al. (2009), we ensured that all interviews took place in a public space generally chosen by the young person (where possible) to ensure the safety of both young person and researcher.

One-to-one qualitative interviews (and groups when chosen) lasted about one hour and took place in services or teenagers' homes. The interview schedules and tools (Appendix B) were based on those used in workshops and on emerging findings from the workshops.

¹ There was one instance where more than three young people participated in a group interview.

Service Provider Interviews

Telephone interviews were conducted with a small sample of service providers and elders (n=10). These interviews were designed to collect background information on the issue of body image as it pertains to young people in the target groups. Interviews collected background information on the service provider and their education and training background, with specific reference to training and experience in working with young people and body image issues. Service provider and carer interviews focused on understandings of body image issues, resources to address these issues and their views on the effectiveness of current interventions.

Expert Interviews

Telephone interviews were also conducted with a small number of experts who were selected in consultation with the NYARS reference group. Those interviewed were Professors Susan Paxton, Phillipa Hay and Marita McCabe.

Group work: Photographic workshops

Workshops with young people

Two intensive workshops (one focussed on Indigenous young people and another on young people who were homeless) supported young people to develop photographic tools which supported them to discuss experiences, views and critical standpoints about body image. Each of the workshops involved two half-day sessions (described in Appendix C in detail) and ended with a critical intervention aimed at reinforcing positive messages about body image.

The researchers chose to make use of photo elicitation methodologies in the workshops as this method has been shown to elicit rich data in a variety of contexts and has been particularly successful in previous research with groups of people whose perspectives have been underrepresented in research and policy, such as participants who were homeless (Dixon and Hadjialexiou, 2005; Johnsen et al., 2008) and Indigenous Australians (Castleden et al. 2008).

Photo elicitation has a number of benefits, including being 'fun', engaging and interactive (Conolly, 2008; Punch, 2002; Radley et al., 2005; Strack et al., 2004) and enabling participants to position themselves a comfortable distance from the subject matter while sharing information and thoughts on a particular topic (Radley and Taylor, 2003). Many researchers have also argued that the technique is empowering for children and young people (Rudkin and Davis, 2007; Einarsdóttir, 2007; Johnsen et al., 2008; Conolly, 2008; Einarsdóttir, 2007; Barker and Weller, 2003; Punch, 2002) and can be used to overcome communication challenges for participants who might otherwise struggle to articulate their thoughts (Cappello, 2005).

The methodological literature stresses the importance of combining the photographs with interviews or focus groups to ensure that photographs are adequately explained and discussed (Einarsdóttir, 2005). Yates (2010) discusses the importance of reviewing young

people's photographs systematically and carefully, arguing that they are not in and of themselves windows into young people's experience, but they are able to provide rich material on which young people can reflect in interview situations. This method was used to navigate the sensitive ground of body image concerns. It provided opportunities for young people to engage in what may be habituated patterns of 'fat talk' (Wertheim et al. 1977) but also encouraged young people to initiate a counterpoint to these dominant and established patterns of peer communication. Furthermore, in keeping with findings of other researchers, some male participants were disdainful of other men who they perceived to be overly concerned with muscularity, or who they perceived to devote too much time and attention to appearance. The experience of taking photographs supported the young men to share their experiences without encountering negative peer attitudes to talking about body image. It was an important device to allow the researchers to identify themes and patterns that were typical of the young men's experiences.

The researchers maintained high standards of ethical practice and respected the confidentiality and privacy of all research participants. The evaluation methods were approved by the University of New South Wales Human Research Ethics Committee in November 2011. The researchers implemented a number of ethical safeguards, including using arms-length, voluntary recruitment, informed consent, and opportunities to revoke consent at any time. All young people who participated in an interview were given a \$25 Coles Myer voucher to thank them for their time and participation. All young people that participated in the workshop (which were run over two days on the weekend) were given meals and a \$50 Coles Myer voucher to thank them for their participation. Digital audio recordings were transcribed verbatim and anonymised.

1.6 Phase 3: Analysis and report writing

QSR NVivo qualitative analysis software was used for data coding and retrieval. To ensure confidentiality, pseudonyms were used for all participants and data were cleaned and anonymised in keeping with UNSW Human Research Ethics Committee requirements. All members of the research team were involved in coding and analysing the transcripts.

Selected transcripts were read and doubled-coded by all team members to ensure consistency. Emerging broad themes were noted and the finer, sub-themes that pertain to each target group were identified in addition to broader, recurrent themes (Boyatzis, 1998).

1.7 Description of the sample

Forty-three respondents agreed to participate in the study; thirty-six young people, four service providers and three body image experts. Of the young people that participated, twenty participated in a face-to-face interview² and sixteen participated in the group work. The breakdown of young people by target group was evenly split with eighteen young people who were homeless and eighteen Indigenous young people participating in

² Not all interviews were conducted in a one-to-one face-to-face situation. Some interviews were conducted in a small group setting of two to three young people.

interviews and group work. No carers and/or parents participated in this study. The fieldwork took place over the period November 2011 through to March 2012.

Table 1.1 Sample size

	Interviews (only)	Group work (only)	Group work + Interview	Total
Young people who were homeless	10	8	8*	18
Indigenous Young People	10	8	8*	18‡
Service Providers	4	N/A	N/A	4
Expert Interviews	3	N/A	N/A	3
Total	27	16	16*	43

*These figures do not include the workshop + interview column to avoid double counting. These interviews were conducted as part of the workshop.

‡ As some young people who were homeless who participated in workshops and/or interviews also identified as Indigenous, the true number of Indigenous participants was actually higher. Half of the young people who were homeless who took part in the research (n=9) identified as Indigenous and so a total 27 Indigenous young people took part. These additional participants are not included in the Total Indigenous Young People column to avoid double counting.

Summary of Demographics (young people)

Prior to completing an interview or participating in the group work, all young people were asked to complete a short five to ten minute questionnaire to gain insight into the characteristics of the young people participating in the study³. The questionnaire included the following topics:

- Age, gender and cultural background;
- Current occupation e.g. school, employment;
- Contact with parents;
- Personal and family income;
- Housing type and composition; and
- Use of traditional and social media.

A copy of the survey is included in Appendix D.

The mean age for the young people in our study was 18.6 years, with an age range of fourteen to twenty-five years of age. Of these, nearly forty-five percent were aged eighteen to twenty years. The gender split of participants across the entire sample was almost even,

³ Thirty-two of the thirty-six young people that participated completed the survey.

with fifty-three per cent being female. The breakdown of young people by target group was evenly split with eighteen young people who were homeless and eighteen Indigenous young people participating in interviews and group work. Nearly all young people were born in Australia (nearly ninety-seven per cent).

In terms of level of education, more than sixty per cent of young people had completed year 10, the equivalent or higher. No participants had a university qualification. Just over sixty per cent of young people were continuing their study. Given this, it is not surprising that just over eighty per cent of young people were not currently working.

Of those that were in employment, approximately fifteen per cent were working casually or part-time and only three per cent were working full-time. Indigenous young people were more likely to be in some form of employment than young people who were homeless (just over fifteen per cent compared with three per cent). This is consistent with young people's main source of income. One hundred per cent of young people who were homeless reported that their main source of income was Centrelink payments compared with fifty per cent of Indigenous young people.

Young people were also asked about the type of housing that they lived in. Most of the young people reported living in temporary or other housing which included supported accommodation (nearly sixty per cent). Not surprisingly, young people who were homeless were more likely to be in temporary housing (nearly twenty-two per cent compared with just over six per cent). A small number reported that they were in private rental (three per cent) and just over twelve per cent said that they lived in a home with a family member.

Some participants listed past and present injuries and physical health conditions like thyroid problems and histories of eating disorders.

Finally, the young people were asked about the types of social media that they participate in. Young people were clearly using social media, particularly, Facebook (nearly ninety per cent), YouTube (sixty-five per cent) and Twitter (twenty-five per cent).

Participant characteristics

The current study is divided into two population groups – Indigenous young people and young people who are homeless. It is important to note that there is cross over between the two groups. For the purposes of reporting, we have included homeless Indigenous young people's comments in the Indigenous section when their comments related to their experiences of Indigeneity, and in the homeless sections when their comments were about homelessness or the reasons they left home.

Indigenous young people and young people who are homeless have clear demographic differences between them. Yet our findings show there are also some significant similarities in the way they experience body image, especially among those who experienced economic adversity. This was the majority of participants in the Indigenous specific cohort and all of those in the homeless cohort. Furthermore, participants in both groups experienced different forms of stigma. The way each individual managed stigma depended on the

resources they had to think critically about social exclusion and how it works in Australian society.

Many Indigenous participants came from single parent families or from two parent families that were not in stable employment. This means that the views expressed in this report primarily pertain to Indigenous youth from low socio-economic backgrounds and not necessarily to those from more middle class backgrounds. There are a few exceptions, and we have highlighted this whenever it occurs. The Indigenous community was in a coastal region in New South Wales. One of the most important characteristics of the region is that Indigenous students have high levels of educational attainment compared to national and state averages.

The homeless young people typically came from single parent or disrupted family circumstances. Most reported their families of origin were from low socio-economic backgrounds or that their families had experienced a downward turn in economic status. More than 60% of young people in this cohort had not yet completed school or attained equivalent of a Certificate 2.

Place and locality played an important role in participants' identity and group affiliation. Locality could be a place of pride or a place of stigma for young people. One half of the cohort of participants who were homeless was recruited in the inner city and residing in this locality was a source of pride for this group. The other half were recruited in a social housing suburb in the west of Sydney, and because of its public housing associations, was seen as a source of stigma. Some participants in the second homeless cohort had more positive associations with the suburbs where they had grown up.

Young people who are LGBTI are more likely to be homeless. Indeed, a number (n=4) of participants from both cohorts identified as gay or lesbian, or as transgender (cross-dresser). However, sexuality didn't come up as a salient body image issue for most participants who identified as gay in this study⁴.

Most of the young people reported that they had regular access to the internet either through computer or their mobile phone and so use of social media was common.

⁴ The number of participants in this study who identified as LGBTI is too small to make any claims about how LGBTI young people might experience body image. It may well have been that these young people did not feel safe enough to highlight sexuality differences in these cohorts that were defined by shared experiences of homelessness or of Indigeneity but not specifically by sexual differences. Further targeted research is needed.

2 Body Image Concerns for Young People

2.1 Summary of findings

Conceptions and key concerns

- Young people immediately associated body size with the term 'body image'. However, clothing, hair and personal grooming played an equally large role in their concerns about body image. This contrasts with most of the definitions in the mainstream body image literature, which largely ignore clothing and grooming (Krueger 1990; Cash 2004; Featherstone 2010).
- In both cohorts of young people body image concerns were connected to stigma attached to their appearance, identities and circumstances. Indigenous young people constructed their identities in relation to their Aboriginal heritage and felt that Aboriginal body types were underrepresented within mainstream contexts and attracted racist attitudes. Young people who were homeless frequently constructed their identities around belonging to particular youth subcultures which they believed attracted stigma from the general population. Participants in both groups clearly gained a sense of belonging and associated wellbeing from belonging to these groups.
- Young people could articulate the body image pressures of idealised images of women but not of men.

Indigenous young people

- Almost all Indigenous participants (from both cohorts) were politicised around issues to do with Aboriginality and discrimination and this shaped the way they experienced body image pressures.
- There was evidence of shared discourses that Indigenous people have bigger bodies and frames. This offered young people a critical perspective on the 'thin ideal' for young women but the 'thin' ideal still impacts on Indigenous young women when they mix outside of their community.
- Young Indigenous men consistently expressed a desire for greater muscularity.
- There is a need for further research that can explore how medical and health information that can address endemic health issues can be delivered in a way that does not undermine the protective factors in communities that buffer young people from the stigma of having different and larger body shapes.
- Dental care is an issue in Indigenous communities and some young people may benefit from role modelling related to dental care.
- Young Indigenous people were conscious of mainstream adherence to culturally narrow perceptions of beauty and were quick to identify with African-American culture and role models from Indigenous Australian communities.
- Indigenous young people expressed pride in their Indigenous identities and were interested in having these identities recognised by each other and by non-Indigenous

people. However, many reported they were subject to indirect insults about Aboriginal people that were often based in negative stereotypes of Aboriginal people.

- Pride in 'Indigenous bodies' appeared to involve a difficult balancing act between belonging to family and community and distancing oneself from the negative stereotypes that continue to be associated with Aboriginality within the broader Australian and their own communities. Body image for these young people therefore involved continuous management of the processes that shape positive and negative body image at different points in time and for different audiences.

Young people who are homeless

- The most pressing concerns for young people who are homeless were finding money, food and stable accommodation. Without these basic resources, many felt unsafe and were unable to plan towards a secure future. While they didn't see body image as an immediate concern per se, they did perceive that the way they looked impacted on their capacity to secure the basic resources which they needed to improve their situation.
- Many respondents told us they experienced stigma and the threat of violence as a result of looking 'homeless'. They felt subject to judgements from strangers and at risk of violence.
- Young people who were homeless (and Indigenous young people who were homeless) were likely to identify with 'emos', 'lads', 'lasses', 'ravers', 'swags' or with suburbs and locality based groups. These identifications with peers may have been particularly important for young people who were homeless as they were typically adrift from their families and needed a sense of belonging. Furthermore, belonging to a group often afforded safety on the streets.
- Larger body sizes were considered to provide greater safety for young men who were homeless, who felt they needed to physically defend themselves.
- Young people who were homeless also faced issues with maintaining clean clothes and hygiene.

2.2 Gender

Participants from both groups reported that 'body image' is gendered, and is related to the relative importance of conforming to physical and cultural norms; weight and size; shape and muscularity; skin and teeth; body hair; and clothing and fashion, amongst other priorities.

Young people across the study consistently reported that body image became a more important concern in their lives with the onset of puberty. Periods of rapid growth and body change at puberty had been difficult for many participants:

When I was in... Year 8 and I just started to grow my upper chest area... I remember being bullied and then they've gone, 'Oh, so you've got

implants'. I didn't even know what they were until then, because I grew up in the country. (Kat⁵, IHYW⁶, age 18 years)

Many young women felt their concerns about body image and size came with metabolic changes in puberty, and they were inclined to read 'womanly' characteristics (breasts and hips) as 'fat' rather than as features of an adult body. Participants who were late to exhibit stereotypical gender characteristics reported being subject to put downs. Leah (HYW, age 16) who described herself as a former tomboy reported being teased in the past because of her husky voice and taking longer to develop secondary sex characteristics:

I was such a tomboy growing up, so everyone would call me manly. Because I have such a husky voice, everyone would be like, 'Oh, [are] you sure you don't have a set of balls down there?' and... 'You're supposed to be a girl, [but] you don't even have boobs'.

When asked how they saw their bodies, many young women indicated they had negative perceptions of themselves, but also that these perceptions were not necessarily accurate or realistic, and yet their negative perceptions nevertheless persisted.

Overall, gender had significant impact on the body image pressures that were experienced by our participants. Many young men and young women believed that body image was more complex for young women and that there was more pressure for them to conform to cultural ideals of beauty and culturally accepted standards of dress.

The recognition that there are significant body image pressures on young women accompanied awareness that these pressures have a negative effect on self esteem and discourses of resistance that were openly shared among young women. Young men were also clearly under pressure to conform to muscular ideals, but pressures did not accompany the same level of critique.

The pressures of gender were transmitted through peer and popular cultures. Gender and ethnicity intersected in specific ways for participants, and were evident in the way they described the cultural norms and practices that operated in their family and peer communities. Cultural differences in gender expectations impacted on what young people could do to maintain healthy bodies and body images they desire. Anita (HYW, age 16) put this simply when she stated:

Girls in my culture are not meant to play soccer; they're not meant to play football; not play basketball.

⁵ Pseudonyms are used for all participants.

⁶ IYW = Indigenous Young Woman

IYM – Indigenous Young Man

HYW = Homeless Young Woman

HYM= Homeless Young Man

IHYW= Indigenous Homeless Young Woman

IHYM = Indigenous Homeless Young Man

2.3 Indigenous young people

Firstly, it is important to note that not all Indigenous young people we spoke to felt that body image was a pressing concern in their lives. A number told us that educational attainment and getting a good job was much more important to them than body image. Taylor (IYW, age 16) stated this most emphatically:

The way we've brought up is, because mum and all the sisters, they didn't finish school and they've made it a big point that we need to finish school to get somewhere. My mum, we see them struggling all the time for money because they don't have qualifications to do anything anymore, because you need that piece of paper. So that's what's more important. We don't care about body image. We've been brought up to have no shame, be who you are. But for other people it's kind of different, because some people they get adopted out into white families, and then they're all about the body image and all that sort of stuff. So that's why it's not really 110 per cent important to us, like school is and getting a good job and all that sort of stuff.

Taylor and her cousin Rose (age 14) were clear about their priorities, and had these priorities continually reinforced in their family. This helped them deal with some of the pressures to conform to mainstream ideals that they and others described in their school and peer communities.

Whether or not Indigenous participants felt body image was an important concern or not, most participants seemed to be very conscious of how they were perceived by others. This consciousness was complex and often involved clear resistance to mainstream norms. In general, young Indigenous people wanted to be able to move through their own community and the broader community without attracting negative attention. When asked what was considered good looking or desirable in his community, one Indigenous male participant, Fred (IYM, age 15), talked about the importance of blending in and not standing out too much: *'Just nothing very out there. Just... it's got to be set to a certain standard'*.

Pride in Indigenous identity was a feature of almost all Indigenous young people's talk, in the group work and individual interviews. These young people wanted to be seen by each other and by the broader community as Aboriginal or Indigenous. This attachment to their cultural heritage was threaded through most aspects of their talk about body image producing some strong protective factors as well as some complexities for them to deal with. Almost all Indigenous participants (from both cohorts) were politicised around issues to do with Aboriginality and discrimination and this shaped the way they experienced body image pressures.

Many wanted to look Aboriginal and they wanted to resemble family members. Taylor told us that in spite of her struggles with her weight she was happy with the way she looked because:

To tell you the absolute truth I would rather look like this and have the family that I do, rather than look like a blonde haired, blue eyed, skinny girl

and have a crap family. Family is everything to me. If someone does anything to my family I get very, very angry.

While most of our participants were living in their communities of origin, some were not. These were young people studying elsewhere (n=2) and those who were disconnected from their families (n=5). Being recognised by community was very important to Indigenous young Australians and there were certain body markers which supported this to happen when they were away from their community of origin. Layla (IYW, age 24) told us:

Like if you're white like sometimes you can feel like you have to prove yourself. Like me, I'm quite fair. [I have act] to be blacker... I mean to your own people. Sometimes they can be the harshest judges of you.

Many lighter-skinned and more economically affluent participants reported that they are commonly questioned about their Indigenous status as an insidious way of referencing negative stereotypes of Indigenous people. Kyle was from a family where many generations had held professional positions. He stated:

People ask you, 'What's your background?' and you say, 'Ah, I'm Indigenous'. Then, all of a sudden they're like, 'Oh really, you don't seem Indigenous'... 'You can't be; you're not like them'... (Kyle, IYM, age 19)

Indigenous young people reported that uncertainty about how their Aboriginality would be received sometimes made them wary of mixing with new people. Like Kyle, Layla reported similar, even more hurtful, reactions from people and discussed how she handled these interactions:

I've had - weird interactions with other people like you know just random people. It usually happens in clubs and stuff. People ask you where you are from and then you say "Oh I'm Aboriginal..." [I always] wonder how this is going to turn out. It's almost like a weird tension before just because you know they are going to say it. [...] Some people just go "Oh cool", which is the reaction I'm fine with whatever. But I have had people say like "oh but you're too pretty" and stuff like that. So that's like a big like insult (Layla, IYW, age 24)

Some Indigenous participants said that they felt that there was more pressure for them and other Indigenous young people to conform to appearance-based norms and that clothing and personal grooming was particularly value-laden for Indigenous young people. Kyle articulated the dangers of being too casual with his appearance as follows:

You are judged because you are marginalised in the first placed and you get marginalised again for being – for want of a better word – trashy. So you've got to overcome two [biases]... Because you've got that stigma of being Aboriginal – people's perceptions of it... Yeah, I think body image is – well all body image is, is how people think of you and your perception of what is good.

Living with these negative perceptions of Aboriginality made many of these Indigenous young people particularly sensitive to slurs about appearing as if they were from welfare reliant communities. While Kyle called this 'trashy', others referred to it as 'mission breed'. Aaron, (YIM, age 21) talked about being '*a bit ashamed*' of his father's side of the family, who were economically less well off than his own immediate family and not able to afford expensive clothing. He noted that he still has extensive contact with his father's family and would never ostracise them because of their appearance but that he feels a bit ashamed when Aboriginal people aren't as well dressed as others, or '*don't look after themselves well*'. Although it was expressed in a variety of ways, most participants believed that histories of disadvantage and discrimination created specific body image pressures on Indigenous young people.

Indigenous young people were aware that mainstream perceptions of beauty rarely included the bodily colours and features that are commonly found among Indigenous people.

Yeah, I think it's - it's a big issue for all youth, but I suppose it might be amplified for Indigenous kids. I suppose you're seeing - you're so influenced by white society and their perception of beauty and you've got to maybe compare. There's a feel of competition between the two. Like you don't see a lot of - over here you don't see a lot of advertised people that are dark - like Indigenous - and so they don't have that role model sort of thing.
(Kyle, YIM, age 19)

Several participants pointed out that the women depicted in Australian popular media are predominantly white and many Indigenous participants (as well as those from non-Anglo backgrounds) reported that these depictions were often hard for them to relate to, which made it harder to see themselves as beautiful or desirable. Indigenous young people felt that while they had access to role models in the Indigenous press and there had been an increase in depictions of people (particularly women) from cultural backgrounds, depictions of Indigenous people in mainstream media were extremely rare. This left them without representations in the public sphere with whom they can identify and without representations that challenge narrow views of beauty held by non-Indigenous people.

Weight and size

Against this backdrop, the perception that Aboriginal and Torres Strait Islander people have larger body types was widely shared among the participants including some of the key community informants. Participants who did not fit the 'bigger' body size placed themselves as 'exceptions to the body type'. In a way, this notion that *Indigenous body types are bigger* appeared to be a culturally sanctioned discourse. While there were many global and non-gendered statements about Indigenous body types as 'bigger'; participants, in general, saw bigger body types as desirable in men but problematic in women because of mainstream norms.

Many of our participants were struggling against internalising the mainstream norm of a 'thin-ideal' for women (Thompson and Stice 2001). Frequently this struggle was

characterised by a critique of idealised images (which they saw as white body types), the upholding of alternate images of larger 'black' role models, and an admission that they still felt uncomfortable in the way they did not conform to the idealised image when they were around people who did. The following quote, from an Indigenous young woman participant was typical of the talk about body size:

It [body image] is a big issue. If you notice all Aboriginals, they all have a little bit of weight on them because that's just how we are... Then when they [look at] all the body pictures and stuff [in the media], everybody's skinny. So it's just like always a big deal for Indigenous people because it's natural to be big when you're Indigenous. (Rose, IYW, age 14)

Most had positive things to say about larger body shapes and were typically critical about the 'thin ideal'. They identified strongly on positive discourses around larger and more voluptuous body shapes, and described larger buttocks in positive terms as 'Beyoncé booty' (Taylor, IYW, age 16).

Many related to African American culture because their body types are similar to those of Aboriginal women:

I associate myself a lot with African Americans and like them because they are of colour I guess. You know, they celebrate voluptuous[ness] and stuff like that so I'm kind of like, 'Well, that's cool because I've got curves and I can associate to that'. I guess a lot of the girls at school might do that too because they are into that kind of culture. (Layla, IYW, age 24)

This critical stance is perhaps not surprising in the context of the pride they felt in their Indigenous identities and belonging. It is important to note that while these identifications protected them against internalizing idealised body types as the most desirable, they still experienced insecurity when mixing in the broader community. Their critiques of thinness were couched exclusively in terms of different racial body types rather than in terms of health concerns with malnutrition or anorexia or feminist debates. Furthermore, these admissions of being intimidated or aspiring to have a body type they associated with 'white girls' were slow to emerge in groups and relied on participants developing rapport with researchers and possibly with each other.

Unhappiness with their weight and physical size was a source of considerable distress and anxiety for many Indigenous male and female participants and they typically told us this distress came to the fore when they mixed or worked outside of their families and close community:

It was like feeling insecure and self conscious all the time... especially when I used to work, because you can't fit most of the prettier clothes and stuff. (Kinda, IYW, age 22)

Most Indigenous participants believed there were differences between the dominant physical characteristics of Indigenous Australians and the general Australian population (in

terms of body shape, size and skin colour). They saw body image pressures as those that came with mixing in non-Indigenous communities. That is, they saw the 'problem' operating at the juncture between belonging to mainstream society and belonging in an Indigenous community. This pressure from the mainstream was what, they felt, contributed to many Indigenous young people's dissatisfaction with their own bodies.

Finally the other significant finding is that the health information that young people received about weight did not always appear to articulate effectively with the protective mechanisms that enable young Indigenous people to maintain a positive self-image (and cultural image) in the context of broader pressures to conform to a 'thin ideal'. Rose, (IYW, age 14) told us that when she:

Got told by my doctor that I'm obese and I was just like, 'Well, if I weighed the certain amount that you told me to I would look anorexic because of the way I am built'. I would look like a stick. He's like, 'You need to lose weight' and I was like, 'I'm not losing weight'.

While pride in larger bodies may protect against body image pressures, it may also interfere with the take up of important health messages about healthy weights. There is a need for further research that can explore how medical and health information that can address endemic health issues can be delivered in a way that does not undermine the protective factors in communities that buffer young people from stigma.

Shape and muscularity

Body weight and size were overlaid with concern about muscularity for many Indigenous male participants. They discussed the dominance of muscular body types in depictions of men in the mainstream media and also in depictions of men in social media and video games. They predominantly talked about a desire for greater muscularity and bulk. Some male participants said that they envied the bodies of more muscular peers. One participant contended that this envy drove him to increase his level of exercise and encouraged his own fitness:

Basically if I see anyone who looks fit or whatever, basically I want to be like them sort of thing. It sort of makes me want to train more. So definitely at the gym and stuff, there'll be a few people who will be more fitter than me. I'm like, 'Maybe I should lift my game up?' [It's] sort of like a jealous thing but I use it in a positive way. (Mick, IYM, age 15)

In young Indigenous men's conversation about body image there was little evidence of any critical perspectives on idealised muscular images. Similarly, while Indigenous young women were quick to critique idealised images of women as racialised they did not think of muscular ideals of masculinity in the same racialised terms. Young women reported that muscularity was an important aspect of male appearance and one of the characteristics that most often attracted them to male peers, with Tarnesha, (IYW, age 19), for example, reporting that *'if a boy's got a six pack, of course they're straight up damn sexy'*.

Skin and teeth

Dental care was a concern for both young men and women. They discussed the maintenance of good teeth and grooming as important. Participants were generally aware of and articulate about the need for dental care even when it was hard to access and afford.

I think some of us know that we've got bad teeth and to be told you need to do something that you know you can't afford is just like... Because I know in an ideal world I would have got braces ages ago. But I just know that my family would not be able to afford it or to afford it would have to struggle for a while. It's like, 'Well, there is no point'. That will be the case for pretty much most young men in my family. I didn't actually realise it until last year when I went back for a gathering because my uncle passed away. All the – pretty much all the kids my age in my family all have teeth like mine – these little fangs things. (Anthony, IYM, age 21)

Others were aware that they may be entitled to subsidised oral health care but refrained from accessing it because of fear of dentists:

Well I'm quite proactive with my teeth and I know that a lot of the schemes help. But I know a lot of black people who don't actually like going to the doctors or the dentist, especially the dentist (Aaron, IYM, age 21)

Kat (IHYW, age 18) told us she had a *'teeth problem. As you can see, my teeth are wobbly. I got called buck-tooth...'* She explained that *the money is just dreadful*. She had been on an orthodontic waiting list since she was 14. Kat was living in supported accommodation and possibly needed support to follow up with the free dental care (as an Indigenous young woman she would have been entitled to free dental care). Kat was one of the participants in the study who believed she had been bullied because of her physicality over a long period of time. Kat carried the visible effects of repeated bullying in her posture and the way she approached people.

Physical and material interventions such as orthodontic work may not be the only interventions needed to support young people who are the victims of repeated bullying, but certainly, they can help young people feel less marked by the economic shortfalls which leave some young Australians without the dental care that the majority have access to.

Body hair and grooming

Interestingly, more Indigenous young men than young women raised body hair as an issue. While many male participants reported being unconcerned about whether or not they exhibited body hair, it was a source of anxiety and embarrassment for some. These same participants were ambivalent about removing body hair. Aaron, reported that he was extremely embarrassed when he began to exhibit hair on his chest and that this embarrassment had made him reluctant to bare his chest and swimming at the beach as a teenager. He noted that his friends were aware of his anxieties and encouraged him to overcome his embarrassment. Aaron noted that he had waxed his chest hair in the past and

said that body hair removal and eye-brow grooming⁷ were socially acceptable for young men in his community. However, he pointed out that they are seen as more acceptable if they were administered to young men by a young woman partner as this made them appear 'less gay'.

Young women held similarly ambivalent feelings towards male grooming. Kearna (IHYW, age 21 years) commented on her male friend who waxed and groomed, saying in front of him - "*He is ridiculous like that.*" Young women overwhelmingly reported favouring smoother, less hairy male bodies but, in some cases, felt young men who engaged in body hair removal and grooming were probably gay. This poses a particular conundrum for some young men: on the one hand, they are faced with cultural messages in popular media and in their local peer networks that smoother, hairless male bodies are desirable. If they wish to achieve this aesthetic, most young men have little choice but to resort to hair removal. Grooming was clearly seen as a feminine activity that compromises masculinity (and heterosexuality). This suggests there is need for a greater diversity of Indigenous male role models and more discussion about Indigenous masculinity in the public sphere to encourage more diverse ways of seeing Indigenous masculinities.

Clothing and fashion

Clothing and fashion was a significant body image concern to some Indigenous young people. Unsurprisingly given that most participants in the Indigenous component of this research were economically disadvantaged, many described struggling to afford to buy fashionable clothing. Some, such as Rose (IYW, age 14) and Taylor (IYW, age 16) discussed the economic sacrifices they and their parents had made so that they could wear fashionable clothes to fit in with peer norms.

Taylor (IYW, age 16) told us that school uniforms level out some of the pressures young people face to wear the right clothes:

That's why I feel school uniforms are pretty good. I may hate them but I know they're there because we would have a lot more depression and all that sort of stuff in Australia if we let people wear normal clothes to school.

The so-called freedoms of schools where young people could chose their own clothes were difficult for young people from economically disadvantaged backgrounds. Kat (IHYW, age 18) had found the daily struggles of finding something decent to wear very stressful and attributed much of the bullying she attracted to standing out as poor.

Participants identified confidence as an important component of body image. They stated that they were largely uninterested in how they looked or in others' appearances and that people's personalities and interior qualities were ultimately far more important than their physical appearance. As one young woman noted:

⁷ Two Indigenous male participants talked about friends who had groomed their eyebrows to avoid having a 'mono-brow' – eyebrows that meet above the nose, giving the appearance of a single eyebrow.

You know people look more at who you are on the inside. I know that sounds so cliché, but it's true. I am not the prettiest person in the world, but I pick up [men] like that [*clicks fingers*]. It's because of my personality and how I portray myself. (Kearna, IHYW, age 22)

Overall these findings are consistent with the literature (Jones 2004; Grossbard, Lee et al. 2009) that suggests weight and size are of significant concern to young Indigenous people. The findings do suggest, however, that this broad picture is best understood in relation to the community contexts and the degree to which young people socialise (and work and learn) within their Indigenous community. Most young Indigenous people experienced high levels of body image concern when they came into contact with non-Indigenous people. They did comment on weight based teasing and put downs happening within community but felt this was less difficult to manage because of the way community generally valued larger body types. In contrast where this teasing occurred outside of community, or they perceived negative attitudes about their body types were held, they experienced these judgements as more hurtful. Interventions need to address the nuances between pressures from within Indigenous communities and the pressures (real or perceived) from outsider communities. Pride in heritage and community is a critically important protective factor for Indigenous young people and it is important that health interventions build on cultural pride and do not undermine it unintentionally.

2.4 Young people who were homeless

The participants in our study who were homeless talked at length about their negative body image, but they also expressed mixed views about the relative importance of body image to their well being. Many argued that safety and resource issues were far more pressing concerns for them. As one young woman who had been living on the streets on and off for years noted:

When I've been on the streets ... I'm worried about where I'll be sleeping and what I'm going to be eating rather than what I'm dressed in because it's just immaterial to my situation. (Emilie, HYW, 21)

Emilie's perspective that concerns with body image were diminished by immediate survival needs was reinforced by other participants. '*[The big issues are] money, food, somewhere to live*', contended 'Jesse James' (HYM, age 19) a young man living in a supported accommodation service. '*You're always scared that you're going to be homeless or [have] nowhere to go*', noted Shawn (IHYM age 21). Alcohol and other drugs, finding enough food, finding stable accommodation and employment and the pressures of living independently at a young age were cited as the most pressing concerns. '*Staying out of trouble*' and avoiding further contact with the police and the broader criminal justice system was also a concern for some.

Many participants who were homeless wanted to construct a physical image that connected them to particular subcultures. Across the cohort participants were (or had been) identified with 'emos', 'lads', 'lasses', 'ravers', 'swags' '[suburb name] chic' (used pejoratively). They were much more strongly identified with these youth cultures than their Indigenous

counterparts. Participants who described themselves as part of these cultures did not distinguish between the groups in terms of politics or cultural heritage, but in terms of image and dress. They described belonging to these subcultures as an expression of rebellion, as a means of connecting with peers and as a form of protection:

The reason why lads and lasses exist and the reason why they're so young is because they want to fit in somewhere. If they act all nice and placid and that, they're not going to fit in here. They're simply not going to fit in here. Their parents are going to diss them. Everyone will diss them. That's why you have to be mean and hard and ignore people.

These identifications with peers may have been particularly important for young people who were homeless as they were typically adrift from their families.⁸ These youth communities provided a place where they could have a sense of belonging, so their capacity to adhere to the group 'image' and dress code was important to them.

Participants who were homeless also reported that they there was a powerful stigma associated with living away from their families at a young age. Missy Moo (HYW, age 16) felt that the combined stigma of living away from one's family and living in a disadvantaged area was so strong that it would be hard to overcome:

Because of the simple fact you're from [suburb] – which is the worst suburb in Sydney; you don't live with your parents; you're classified as homeless. [People think], '[You're] from [suburb] – a junkie town. And you're homeless!'. You have to act presentable. If you don't act presentable, you're not going to be presentable. Even when you do act and try and dress well, people still judge you from where you are.

Some young people wanted to hide the fact that they used homelessness services:

I tend to like walking out of here [supported accommodation service], pretending that I work here more than I live here. But once you walk out [on to the street], people think, like, 'Man, he just came out of there. What is he doing in that place?'. [Supported accommodation service] is the only refuge that I know of that actually you get judged coming close to here... This does build up a very bad body image for these people that do stay here. Because people think, 'Oh wow, that means he's a junkie' and this and that... (Glenn, HYM, 18)

Most respondents told us they experienced stigma and the threat of violence as a result of their physical appearance. They felt that their appearance was of fundamental importance to their safety and to their capacity to secure housing, education and their other long term goals. Young people who were homeless tried to fashion their image to meet their immediate basic needs. However, the 'looks' that ensured they could access certain

⁸ It is important to note that not every young person living in supported accommodation was estranged from their family.

resources such as education and employment clearly operated in tension with the looks that enabled them safety on the streets.

Weight and size

Most participants in this group were quick to relate to body image as an issue and identified the pressures of conforming to physical norms and cultural standards of dress and appearance including the 'thin' ideal for women and the 'muscular' ideal for men.

Leah was a keen observer of her own and other people's struggles with body image and she talked at length about her struggles with her weight (even though her height meant the 72 kilos she described at her heaviest stage would still have positioned her in a healthy weight range) and her perceptions of herself.

It's bad; girls are bad in that sort of way. We're so insecure about ourselves. Everybody, even if you're skinny, you're insecure about something. Yeah, I think about weight all the time. Like, I'll put on a pair of jeans – I used to weigh 72 kilos and I was really big and I had a muffin top. I used to sit down and have a big belly and I hated it. I was so insecure about it, so I wouldn't leave the house. (Leah, HYW, age 16)

Like young women, young homeless men were subject to weight-related taunts and put-downs. Several male participants, such as Harry, (HYM, age 23), reported being teased for being 'too thin' or 'too small':

For me, for instance, I grew up playing footy and stuff and I was normally the smallest person on the team and they'd always give me crap and it hurt a lot at the time especially.

Young men also experienced appearance-based teasing for being 'too fat', but in general bulk provided safety. Several young men with smaller body sizes chose to associate with boys with bigger frames. Harry (HYM, age 23) noted that his friendship with a physically larger young man kept him safe on the streets because other young people were intimidated by his friend's size. Harry and several other young men told us that they experienced threats to their physical safety when they were sleeping rough but also when living in temporary accommodation. Harry had been seriously assaulted when living in a refuge and noted that smaller young men were often at greater risk of assault than their muscular peers:

Mainly smaller people [are more at risk]. It's just like out in the jungle. If you're a small dude, you've sort of got to be quiet and whatever because you're the first target. If you smoke, it will be over little things like cigarettes, your food and stuff like that – sometimes clothes... In fights in the past that I've been through, for whatever reason, being skinny, it's definitely a disadvantage. Because the [other] dude's going to get it over you easily.

Skin and teeth

Like their Indigenous counterparts, young people who were homeless were particularly sensitive to visible characteristics that marked them as poor, such as dental problems or not wearing clothing considered fashionable:

Before I had my teeth fixed and I was doing [a tertiary qualification] in film and media, I was not in front of the camera. I don't want to be anywhere near in front of the camera, nothing like that. (Isiris, HYW age 25)

Skin quality was also a concern:

I'd say especially for guys too, when guys have pimples or - like I've got bad skin, I've always had bad skin. But when guys look in the magazines they see all these male models with no skin imperfections or even on the TV ads for the Clearasil and that. (David, HYM, age 22)

Many felt they did not have the economic resources to eat well to ensure they maintained a healthy body and look.

Clothing and fashion

Physical characteristics were not the only or even main image consideration held by these young people. Clothing was of central interest to them.

Like, what you wear reflects the outside. It's who you are. (Mark, HYM, age 17)

Some even proposed that the appearance of the underlying body itself was irrelevant:

It all comes down to what you're wearing. Body image is what you wear, not what your body is. (Glenn, HYM, age 18)

One participant described how clothing and fashion fitted into her conception of his hierarchy of needs, explicitly linking 'nice, clean clothes' with positive mental health:

[You need] food, a place to live, clothes – well you don't need clothes to be healthy but to have nice, clean clothes makes you feel better about yourself and it makes your mind healthier. (Hayley, HYW, age 19)

Perhaps the most important finding about clothing was the role it played in street safety for young people who are homeless. As suggested in the introductory comments to this section, young people were concerned with sending out the right messages to other people on the street through their clothing and deportment about where they fitted in. They felt that when they got street codes 'right', they were afforded some kind of protection:

Because people would warn us, watch out, they've got to make their hitch up and it would be like, yes. If I wore Canterbury's or something like that

or anything else, they wouldn't even look at me...It's just like certain styles were how people took you. (Sonic Hedgehog, IHYM, age 23)

Frieza also voiced this view that it was important to dress in a way that did not attract the wrong kind of attention:

There's this style on the streets [that shows you] who will whack a kid. You'd see people wearing cargoes and that, which I notice. About 90 per cent we all wear cargoes or 80 per cent were drug dealers, so I wore cargoes to blend with that... (Frieza, IHYM, age 19)

2.5 Policy implications

Broadly speaking, most young people were aware of negative body image pressures generated in the media and through lifestyle industries **for young women**. Indigenous young people and young people who are homeless are potentially two groups of young people who may miss out on mainstream social marketing campaigns and messages, but this does not appear to be the case. The young women in this study were able to articulate their vulnerability to idealised images and offer critiques of these images. Most were in a process of reflexively managing the internalisation of these contradictory messages. This is a hopeful sign that activism to redress idealised images has penetrated many communities, and that notions of healthy body image are widely present in the community. The issue for policy makers is perhaps less about generating widely shared knowledge about healthy body image and body image pressures, and more about how to generate widely shared knowledge of effective protective strategies – or how to generate shared knowledge of protective strategies that are specific to Indigenous communities and to the needs of young people who are homeless and potentially in quite transient communities.

This basic critical perspective of body image pressures on young women was not as apparent **for young men**. It may be that more research is needed to find out more about the pressures on young men and how widely these pressures are recognised by young men themselves and by those in relationship with young men.

As young people's concerns with body image heighten with puberty, body image interventions might be best delivered at two developmental stages: pre and post puberty. Interventions that target the development stage before the bodily changes of puberty enable young people to prepare for changes and the pressures they may experience about their body image. Body image interventions aim to develop young people's meta-cognitive and critical thinking skills and thereby protect young people from dangerous messages promoted for commercial gain (Paxton, 2002). Critical thinking skills are cumulative and best supported with reference to the things that matter to children and young people. Currently in Australia, body image programs are delivered in a one off and ad hoc format to pockets of the community. It may well be that programs that support critical thinking skills are best delivered in the spiral format that characterises most contemporary curriculum approaches (Bruner, 1960). The initial stage could – as the young participants in this study suggested to us – be delivered before puberty and focussed on preparing pre-adolescents for the somatic changes and subsequent body image pressures of puberty, and then reinforced post puberty when young people are highly vulnerable to body image and peer pressures.

The conceptualisations and main concerns of young people from both cohorts suggest that policy needs to focus on body image in the broadest sense. While initiatives that address weight and size are relevant for these target groups they can not address the issues faced by these young people holistically. Interventions need to be based on holistic messages about the value of achievements and relationships and emphasise that appearance does not equal value.

The differences in the way Indigenous young people experience body image suggest the need for specifically targeted initiatives. These need to be responsive to the politicised way

Indigenous young people understand their physical, cultural and experiential differences to other Australians. Furthermore, the extent to which young people rely on family and community members to filter mainstream information suggests initiatives that have a whole of community element would be appropriate.

The safety and survival pressures faced by young people who are homeless also suggest the need for targeted initiatives that are responsive to the importance of physical safety in their lives.

3 Family, Peer, Community and Media Influences

3.1 Summary of findings

- Family relationships are an important socio-cultural factor in determining young people's experiences of body image. Positive communication and knowledge sharing between family and young people is an important role of family in terms of developing a positive view of themselves. Young people pick up knowledge and orientations towards body image and health from what is said and what is modelled in families.
- Family relationships were particularly important to Indigenous young people and there is evidence of a need for interventions that target multiple generations within a family, not just young people.
- Young people who were homeless were more likely to comment adversely on the influence of their family relationships than Indigenous young people.
- Peer relationships are an important socio-cultural factor in determining young people's experiences of body image. Homeless young women were the most likely to report engaging in appearance talk with peers. It appeared that much of this talk was negative and directed at others who were not involved in the conversation.
- Traditional media remains a source of information about identity and health for many young people, even though many are critical of the content of traditional media. Many participants sought social acceptance about their body and appearance through social media.
- Young people with low self-esteem and poor body image are the most vulnerable to cyberbullying about their appearance. The prevalence of comments about cyberbullying on Facebook suggest there is a strong need for the development of critical literacies around social media for those in disadvantaged communities and for those who are vulnerable to bullying (as identified by targeted youth services and schools).

This section looks at the influences on young people's body image. This section is structured to reflect Bronfenbrenner's ecological model (see Section 1 of the literature review). This is a useful way to organise and understand the different influences on young people's body image. It is important to emphasise we understand that these influences interact in complex, constitutive ways. For example, socio-cultural influences such as gender are reflected through the particular cultures of young people's families, peer relations, community settings and the global media cultures which they use. Here we focus on the narratives that circulate in their family, peer and local community networks. We finish this section with participants' observations about the media. Again, our starting point has been to find out **which** media types were used by the young people in our study and how this influences their views on body image, rather than to seek information about the most dominant and popular media cultures in Australia.

3.2 Family narratives

Indigenous young people

The knowledge about body image and health that was transmitted to young people from their Indigenous families was quite varied. Some families' views seemed to be well informed by current public health messages about body image, about mental health, or about both body image and mental health. However, the knowledge and attitudes of other families were quite divergent from these current understandings. For example, many Indigenous young people told us their families' eating practices were quite unhealthy, consisting mainly of fast food, sweets, meat and carbohydrates. Many Indigenous young people told us their families were accepting and even encouraging of them being over what is considered to be healthy weight levels. The levels of educational attainment in parents and/or grandparents (as well as associated socio-economic status) were the characteristics that distinguished families who shared 'best practice' information about health and body image from those who did not.

Some young people reported very positive family relationships in their discussions of their body and appearance which enabled them to feel positive about themselves. Positive comments were commonly made by young women about their discussions with their mothers. For example Kat, who struggled with how she perceived others saw her, was clear that her mother thought she was beautiful:

My mum's always supported me, always said I'm beautiful (Kat, IHYW, age 18).

We also heard a number of stories of fathers being quite supportive of their daughters and sons. One participant explained:

I don't really compare myself to anyone. I may get annoyed about the clothes that I have, [and think] this is so ugly. But my body I just, I don't really compare it. My friends don't compare them. They're just like I don't care, I'm me. It's my dad, who tells me, explains the body thing to me. (Taylor, IYW, age 16)

Like other participants, Taylor described her father as her source of information about health, and a source for mediating the knowledge she received from 'experts'.

Not all Indigenous participants had experiences of positive and affirming body talk. Some shared painful experiences of being put down when they were growing up. Kinda (IYW, age 22), said her mother always used to call her fat when she was younger. She explained this type of talk was transmitted across generations in her family:

Our Nan's always telling us we're fat. She's prim and proper, that's what Nan is. (Kinda, IYW, age 22)

As a parent herself, Kinda was trying to break this cycle. She was actively trying to incorporate positive talk in her own parenting practices after not having received this as a child herself. For several Indigenous young people, negative comments made by family that

they were fat had a severe and lasting effect on their health. In a couple of instances, participants had developed eating disorders because they were constantly being told that they needed to lose weight by family members. This was the case for Kearna (IHYW, age 21 years), whose father kept calling her 'fat' until eventually she believed him and stopped eating resulting in her being hospitalised for anorexia. Through this difficult experience she relearnt healthy body attitudes and practices and established some satisfaction with the way she looked.

Young people who were homeless

Many of the young people who were homeless said that their family was critical of their diet. Young people were either eating 'too much' or 'too little', although the majority of comments were around eating 'too much'. Cherry (HYW, age 17) talked about constantly analysing her food portions because her parents were always telling her that she was eating 'too much' and how as a result she felt that she was constantly on a diet and no longer enjoyed her food. She said:

You can't enjoy eating food if you're like is this too much? Is this one spoonful too much? How do you even measure that? I stopped enjoying food.

Anita (HYW age 16) also talked about the flip side of this issue and described how from an early age she was encouraged by her family to eat 'junk food' as often as she liked and the impact that this now had on her diet as a teenager, particularly around weight gain. She stated that her mother had told her:

"You're so beautiful. Don't worry about that, like you're not fat, you're not fat." (Anita, HYW, age 16)

A significant number of young people who were homeless also felt that their family constantly made negative comments about their body and appearance which led to them feeling negatively about themselves and often impacted on their eating patterns. For example, Cherry talked about her slight increase in weight and the comments that her mother made. Rather than offer supportive advice, her mother offered a radical and unnecessary solution which was very upsetting for Cherry:

Yeah, it got to a point where I was 60kg, up from about 52kg, and my mum told me that I needed liposuction... I just burst into tears. I went up to her and I was like how could you, I can't believe you would say that. I'm not obese and need liposuction. I've put on a few kilos, yes, but that doesn't mean I need surgery for it. (Cherry, HYW, age 17).

Leah suggested her family commented negatively on her body and its changes whether she was gaining or losing weight:

If I'm too skinny I'm on drugs,... if I'm too fat I'm eating too much and I don't know. I'm overweight. So I can't win either way (Leah, HYW age 16 years).

She later spoke about her loss of self-esteem and confidence as a result of the constant evaluation of her body by her family, particularly her dad. She said that previously she had been a confident person who was not afraid to 'wear shorts' or 'walk around in my swimmers' but now 'only wore long clothes' to cover up her body.

In sum, families are in a unique position to share knowledge with young people about body image pressures and general health. This knowledge either had a positive or negative impact on the young person's experience of body image. For the young people in this study, there were several ways in which this knowledge was passed on; either through direct comments made by family to the young person or indirectly through the actions of the family.

3.3 Peer narratives

Indigenous young people

As described elsewhere, Indigenous young people derived confidence and pride from their Indigenous identity, which was often supported through peer narratives. We noted that Indigenous young people's peer narratives tended not to be occupied with appearance related talk.

Young people who were homeless

Kat, (IYHW, age 18) talked about being judged by both young women and men, and about the gendered dimensions of these judgements. She also talked about receiving mixed messages from her peers about her body and her appearance. However, perhaps because the strength of negative comments and experiences outweighed the positive, her experience was to internalise negative and reject positive comments made by peers and family about her body and appearance. For many young people (particularly young women), it was common for negative comments to override positive comments.

Young people who received positive comments from peers often felt better about themselves. Harry told us that:

My latest girlfriend, she made me feel really good about myself. I was fitter at that time as well but it definitely made me feel proud about myself and wanted to keep it up. Just someone telling you that you look good and whatever. Wouldn't let you say anything bad about yourself. It definitely has a positive impact.

For some young people who were homeless, body image talk was a distraction from other, more significant, concerns. For example, Kearna (IHYW, age 21) suggested that young people who talk about body image with their peers do so because they want positive feedback from their peers – positive reinforcement that they look okay. They are seeking popularity and social acceptance from their peers.

Young women were also more likely to be critical of both themselves and their peers. Many of the young women that we spoke to were critical of their own appearance and appeared to have a higher comparison tendency than their male counterparts. They were much more

likely to point out any flaws that they thought they had and also compare their body and appearance to other peers.

Leah compared herself to her peers in terms of 'prettiness':

I don't even look pretty compared to half the girls out there (Leah, HYW, age 16).

Young women were more likely than young men to judge others who did not adhere to the peer norms that operated in particular contexts.

A number of young women commented that they fashioned their appearance to please their partners. One young woman talked about how she would like to dress more 'girly' however, her partner expected her to dress the same way in which his peer's partners dressed. She felt 'pressurised' to dress this way despite the fact that she would like to dress another way. Young men did not report the same pressures from their partners, and indeed a number said that their girlfriends had helped them feel good about their body image by offering affirmations and critical perspectives on body image pressures.

Young people reported that they and others were quick to use insecurity about body image as a target for teasing and power plays. (Also see discussion on social networking sites).

I mean remember last year me and my best friend, when we were bored we would sit in the shopping mall and just judge people on what they were wearing. It was just something that we did for fun. It's very common that others judge others on how they look (Glen, HYM, 18 years).

Some of the young people described the type of language used during workshops and interviews:

That person's a fat pig, or how many spare tyres have you got because my car's broken down and I need a couple (Isiris, HYW, 25 years).

You bony little prick (Harry, HYM, 23 years).

Grenade describes a really fat, fat chick; really fat, ugly, ugly chick. She doesn't have to be fat, but she's honestly ugly (Nora, HYW, 18 years).

She's like a dirty mutt (Rose, IYW, 14 years).

A couple of young people mentioned strategies to overcome the negative judgements and comments made by peers. These included confronting the young people that spoke about them, ignoring any negative comments made by peers and removing themselves from the situation. Leah explained the positive function of critical talk with other young people who had had similar issues and experiences:

Because we both feel the same. We're both always pinpointed by everyone and we both feel the same. (Leah, HYW, 16 years).

3.4 Community narratives

A few of the young people in this study suggested that how their appearance was received locally shaped how safe they felt in their local community. For example, young people talked about how they were judged by authority figures such as the police based on what they were wearing. One of the girls in the group said that she often went to raves and with that came a certain way of dressing, but that police immediately associated this dress with drugs and she was often subject to body searches.

Another young person talked about having a number of piercings and the types of comments that others in the community would yell out to her when she walked by. The community perceived her in a certain way because of the way in which she dressed. Later in her interview she said that comments like these were one of the main reasons why she decided to change the way that she looked – take out the piercings and conform to local peer norms:

Oh, it's an emo, bloody go cut yourself, you stupid - yeah, classic - go cut yourself, you stupid emo. Go die. Go hang yourself from a tree (Missy Moo, HYW, age 16)

3.5 Media

The impact of traditional and social media on young people's experiences of body image varied. Young people often spoke about aspiring to 'look like' the people on television in terms of their body and appearance. Some young people (particularly girls), compared their body with the people on television which made them become more critical of their own body because it was different to the images being portrayed. For example, Hayley (HYW, age 19) said that the female images depicted on television are always small in size making her feel 'big' despite being a size 10 to 12 herself. Viewing these images made her see her body in a negative light. Another young person said:

Yeah, like I see the ads and how they try and promote things with their bodies and how the men have six packs and the girls have hot toned bodies. I look at that and think geez I wish I was like that, I wish I could have that body, why can't I have it (Leah, HYW, age 16 years).

For other young people, the appearance of people on television was important, particularly the type of clothing that they wore.

Young people commonly talked about watching reality television shows, particularly the ones around food, diet and exercise, for example, '*The Biggest Loser*⁹', and '*MasterChef*' and '*Junior MasterChef*¹⁰'. Young people related to these shows and saw them as a way of

⁹ <http://thebiggestloser.com.au/>

¹⁰ <http://www.masterchef.com.au/home.htm>

gaining knowledge about food, diet and exercise which they could use in their everyday lives. This was particularly important for young people with no other source of support from family, peers and others in the community.

For example, Isiris (HYW, 25 years) talked about how by watching *'The Biggest Loser'* she was able to confirm that her current diet and exercise plan was 'okay'. She had minimal support from family and peers. She said:

[The] Biggest Loser, that show, I think that was a marvellous show because it just confirmed my point of smaller portioning your meal, if you can't run, start walking and then take one step at a time and you will get there in the end.

However, she felt that as a homeless person, some of the diet and exercise plans that the contestants used were beyond her means. Secondly, young people felt that these types of shows portrayed 'regular people' that they could relate to and had similar bodies to their own –no airbrushing like many of the other media sources.

Most of the young people that we spoke to had access to the internet either via computer or their mobile. They used these technologies before print media *'because they're just too expensive'* (Isiris, HYW, age 25). While few bought print media, they read magazines and most were quite critical of media techniques which enhance pictures in magazines.

Social media was the most commonly mentioned media source used by young people and so it is not surprising that it would have a large impact on young people's experiences of body image. Young people used a variety of different social media, however, Facebook was the most commonly mentioned.

Social networking sites were a significant site of peer interactions for many young people in this study. Many related to the activity on their homepages as a source of evidence about their social relationships and their status in their social circle. For example, many young people judged their popularity by the number of friends they had on Facebook. Nora (HYW, age 18) said that the more comments a person receives on the photographs they post, the more attractive they are seen to be by their peers:

Yes, [people put photographs up on Facebook to get] attention and get people to compliment them even though they deny it. The more people compliment, the more people think are more attractive.

While social networking sites were places where our study participants sought bodily and social affirmation, they often had negative experiences with it. Kyle talked about the negative impact of advertising on Facebook. He suggested that if you made comments about body and appearance on your page (or someone else's), immediately advertisements appeared on the side of the page about losing weight and dieting:

If I was going to dinner somewhere and you've eaten so much – [I would post] I've been so fat tonight. Instantly you'd get so many ads just down the right hand side of the page saying, new weight loss so and so, here's a link to this - have this belly in 10 days (Kyle, IYM, 19 years).

Cyberbullying was an issue for young people we spoke to. Many young people received negative comments about their appearance or character on their Facebook pages. Kearna (IHYW, age 21) said:

It'd be like physical insults, they tend to be incredibly harsh if they're going to do it indirectly. So they'll be like very insulting things about their personal attributes.

Leah also spoke about the type of comments that other young people made:

People will be like, you're such a slut, put different photos up, cover yourself up or you're fat, don't show your body off or stuff like that (Leah, HYW 16 years).

Most young people knew they had the option of not accepting or 'blocking' other young people from becoming friends with them, particularly people that the young person did not know very well. In doing so, some young people were able to manage who could access their page and photographs. Anita said:

Yeah, I've blocked so many people off my account - so many, especially guys - so many people (Anita, HYW, age 16).

3.6 Policy implications

There is a need for policy initiatives which impart messages to parents and community members about how they might effectively support their children's self-esteem in the context of body image pressures in the media, fashion and lifestyle industries.

Similarly there is a need for campaigns which support young people to develop alliances around resistance to body image pressures, particularly in the context of social networking sites.

Body image interventions need to be responsive to the mix of protective and risk factors that shape young people's individual experiences and their knowledge about the experiences of their peers. Well structured interventions should be able to use this diversity of influences to strengthen protective messages. In this, care needs to be taken not to undermine the familial and important relationships of individuals who may come from contexts which do not support them with positive body image messages.

Body image interventions which are delivered through schools need to include a focus on social media as well as traditional media.

4 Strategies for Securing Wellbeing and Health

4.1 Summary of findings

- A number of Indigenous young people had taught themselves about health and to adhere to healthier eating and exercise habits than they learnt in their families of origin. Making healthy choices, however, was not easy for participants when others in their social networks were not making the same choices.
- It is of concern that a number of Indigenous and some participants who were homeless reported that smoking cannabis was a strategy they used to lose weight and achieve desired body sizes.
- The habits of mind around food that had been established in young people's families of origin were often hard to break. Cultural and community norms and family attitudes to food play an important role in influencing young people's dietary decision-making.
- Many young people talked about avoiding scrutiny and dressing and acting in ways that fitted in with the communities they were in as a way they avoided the stigma and threats of not fitting in with mainstream or street cultures.
- The strongest protective factors that were voiced by participants against the body image pressures were those that drew on an integrated view of wellbeing. In this we mean, where young people saw that other aspects of their lives, such as family, strong friends and achievements, were important to how they saw themselves and their body and that these factors buffered them from body image pressures.

This section moves away from conceptualisations of body image and young people's main concerns to examine the strategies participants individually use to secure wellbeing and health and to explore their rationalisations about their decisions. This section is structured to reflect the broader structure of this report which has examined body image first in terms of body size and shape and then in terms of how young people regulate their look. The following sections, therefore, deal with strategies young people use to regulate their body shape and size (diet, exercise and body modification) and then turns to strategies young people use to regulate how they are perceived by others (avoiding scrutiny, integration, performativity and safety). We discuss Schadenfreude, a strategy that potentially has more negative than positive consequences but that may well be a common response to a lack of fit with idealised images. Finally, we examine the contextual characteristics of those who appeared to manage body image pressures most effectively.

4.2 Diet

A variety of factors – such as taste, convenience, health benefits, perceived social acceptability; and cost – influenced participant's decision-making around food. There was a wide range of beliefs and behaviours relating to food but cost, health, and convenience were the primary factors that influenced all young people's dietary decision-making.

Indigenous young people

Some Indigenous participants were very aware of links between diet, exercise and physical health outcomes. A focus on health was important to many Indigenous young people. Kitty (IYW age 19) told us:

Like I want to be healthy. Like I know heaps of people who are really skinny, but they're just really unfit and like that's all I want to be now, is just to know that I'm healthy.

It is important to note that some Indigenous young people had taught themselves about health and to adhere to healthier eating and exercise habits than those they learnt in their families of origin. Layla, as noted earlier lived away from her family. She made a considerable effort to eat healthily but did not have the luxury of controlling her diet or choosing to eat more expensive, healthier foods when she visited her family:

I know when I go back home I'm going to have to be off my diet. I know I'm going to have to eat what everyone else is eating just because there is more people in the house... not everyone contributes to the food. So therefore whoever is buying is going to be, like, 'Well, do I buy the nice \$5 bread that's got all these grains or wholemeal bloody goodness or do I buy the \$1.20 white bread that's going to get to feed however many people?' (Layla, IYW 24)

Aaron, (IYM, age 21) also wanted to lead a healthier lifestyle than that of other older members of his family. He talked extensively about the health implications of his relatives' lifestyle and dietary habits (grandmother's health problems, uncle looking older than biological age and having health problems due to heavy alcohol use). Anthony, (IYM, 19) recounted a childhood diet that was predominantly meat, potatoes and fast food. He stated that as a child he had a heavy frame. He had lost a lot of weight when he finished school and like Aaron, was body conscious. He was trying to change his eating habits and incorporate more vegetables into his diet. This was a task that involved learning to cook, follow recipes and struggling with the habits of taste.

Like Aaron, Kyle made significant changes to his dietary behaviour and exercise habits to achieve weight loss. He made gradual changes that achieved healthy weight loss over sustained periods:

A few years back I lost over 30 kilos and that wasn't a body image thing... I just wanted to do it for myself, not for everyone else... I was walking pretty much twice a day for about an hour a day, or two hours a day, just watching what I was eating. I started Weight Watchers and did that for a little bit and I lost it all... (Kyle, IYM, age 19)

All of these young men were looked up to in their peer networks and supported in these changes by the women around them¹¹.

Making healthy choices, however, was not easy for participants. Changing eating habits meant that participants stood out in their peer networks and some found this difficult. Fred (IYM, age 15) told us that there was a stigma in his peer group associated with eating high-fat foods. Conversely, there was a corresponding stigma associated with eating salads and other things that were identified as 'diet food':

Yeah, like if you're at school and someone gets like a really, really fatty food for lunch, they will generally give them a rap about it... [But] it's like you say, if you're like bringing a salad to school or something, they might think you're trying to lose weight and you're insecure about yourself.
(Fred, IYM, age 15)

Some Indigenous young women reported that they reduced their eating and consequently their weight by smoking cannabis and furthermore, that this was a strategy that was said to work in their peer community. Interestingly, this idea goes against the grain of research which has shown that cannabis is an appetite stimulant and associated with binge eating but not with fasting, diet product use or purging amongst American adolescents (Ross and Ivis 1999).

Some participants reported being uninterested and unimpressed with dieting:

I might change the style of my hair and maybe my clothes... [But I won't go on a diet] – I reckon diets are useless. (Rose, IYW, age 14)

The Indigenous young people who changed their diets in order to secure health and wellbeing tended to do this alone or with the support of their immediate families (and they were mainly boys). This is in keeping with the finding that in their Indigenous peer networks these young people engaged in relatively little appearance comparison talk.

Young people who were homeless

Some participants' descriptions of their eating habits suggest that they are engaged in dieting and erratic eating patterns. Like some of the Indigenous participants, some reported having used drugs – most commonly cannabis and tobacco – as a method of weight control.

A number of homeless young women had histories of eating disorders and were still learning about healthy eating:

I've tried those stupid, really petty milkshakes and stuff... I try to do it instead of meals, but I don't want to go back with the tube down my throat. I don't want to risk that, so even when I'm full because of that, I

¹¹ Unfortunately, they were not interviewed together so we do not know how this culture of health change might be discussed among young Indigenous men.

would still have to eat something small just to make myself feel better.
(Missy Moo, HYW, age 16)

Some participants who had engaged in extreme dieting and other body modification behaviours claimed they were not always aware of the extreme nature of their actions at the time:

I don't do it on purpose. That's the thing; I do it subconsciously. Before I moved here my mum actually tried getting me admitted to [hospital] again. Because my eating – I wouldn't eat, I wouldn't drink. I get low blood sugars but because I don't – didn't eat and drink I got very sick. I lost so much weight that it became a bit of a health risk and I didn't even realise I was dieting. (Kat, IHYW, age 18 years)

The habits of mind around food that had been established in young people's families of origin were often hard to break. Cultural and community norms and family attitudes to food play an important role in influencing young people's dietary decision-making. Cherry (HYW, age 17) was from a Middle Eastern Background, and described the power of cultural eating habits in an evocative way:

It's such a big social thing, food, like it always brings people together. If you're at a gathering there'll be food... The women will cook to show how much they care for you. The women in the family will cook pots and pots of food and there's always leftovers, they always make more than they should... [Eating is] a sign of appreciation... But at the same time in those cultures especially you cannot get fat because it is just a total [taboo]... It's such a gossipy culture. Everyone talks to everyone about everything.
(Cherry, HYW, age 17)

Cherry felt that the constant scrutiny from family members was off-putting and deprived her of the pleasure of eating, although she reported that she continued to enjoy cooking for others.

4.3 Exercise

Exercise was a very important part of many participants' lives and some of the young people that we spoke to reported engaging in at least one hour of exercise each day – most commonly walking, running, going to the gym or swimming. In general however, young people discussed the barriers they encountered.

Indigenous young people

Some Indigenous participants reported that the local cultures in which they operated promoted exercise participation. Some reported that exercise was embedded in their family cultures which, in turn, encouraged their own participation:

Mum goes for a walk in the morning with my aunty. [My dad], he does the push ups and sit ups with me when he's here. Sometimes he takes me and

we both go for a run with the dogs and swim and stuff like that. (Mick, IYM, age 15)

Others, such as Fred (IYM, age 15) reported that the promotion of exercise in their schooling cultures meant that young people who were less athletic or less inclined to do exercise were sometimes ridiculed or teased:

Well, at school if you don't do exercise you're generally viewed as a nerd or someone just... that's too overweight or can't do it.

School sport was an arena that many participants had found or continued to find difficult.

Young people who were homeless

Several young women who were in a supported accommodation service told us they went for long walks together every day, but most participants who were homeless told us their exercise was incidental. As Frieza, (IHYM, age 19) pointed out, being able to modify your body and having choice and control over one's diet in particular are a luxury that is not available to many young people who are homeless and living in deprived or precarious economic circumstances. He said that living on the streets was fairly active anyway.

It's pretty hard to go on a diet when you live on the street because everything you eat, you're just working it off anyway as you're moving around. (Frieza, IHYM, age 19).

4.4 Avoiding scrutiny

As previously mentioned, many participants did not see their attempts at changing their body image as motivated by aesthetics but they saw it as a way of maintaining their personal safety and avoiding scrutiny from police and others in positions of authority.

Like young people who were homeless, several Indigenous participants believed that they were targeted by police because of their ethnic background and appearance. Several participants in both groups believed that police targeted young people who do not adhere to middle-class styles. In some cases, participants who were homeless took measures to change their appearance and talked about the importance of 'blending in' to avoid scrutiny:

Even when you're not doing anything dodgy... These days, if you dress like in any way differently you tend to be targeted by cops. Like, I'm a raver [and] if I go out wearing my rave gear, they still assume that I'm going to be carrying drugs because that's part of the culture. It's kind of like you've got to dress inconspicuously otherwise you constantly get seared by cops at our age. (Alix, IHYW, age 19)

Tattoos and other forms of body art were not only about changing their appearance. Many reported that they had meanings which were personal to them, in many cases marking important life events or serving as a reminder of being able to overcome adverse circumstances.

4.5 Performance, passing and safety

Young people were not only concerned about attention they attracted from police, but also from other young people. Some participants in both target groups were quite strategic in the ways in which they modified their dress and behaviour in an effort to manage the messages they conveyed through their physical appearance. We have discussed how young people dressed in certain ways in order to try to be safe, and several young people also told us they altered the way they held themselves, modulated their voice and physical movements in order to fit in with whatever was going on around them. Layla suggested she 'performed' Aboriginality to greater and lesser extents depending on the context:

But like, you can turn it [an Aboriginal appearance] on and off as well. I think that it is registering what you [do] – how you act and stuff... you can hear the way people talk [and their] body language and all that sort of stuff. Like even the way a lot of people walk and stuff. (Layla, IYW, age 24)

Participants who lived in or came from disadvantaged areas talked of the need to wear clothing that was inconspicuous in their local area, not to fit in with local norms and make friends but as a way of maintaining their personal safety. Young people living in refuges and supported accommodation services often had to adapt their appearance and behaviour to remain safe. As Cherry put it:

Drawing attention in [suburb name] can be almost sort of dangerous... Living in [suburb], you sort of can't be really delicate, or the way you were at home. (Cherry, HYW, age 17)

Cherry and others using the supported accommodation service in an outer suburb told us they wore one type of clothing in their local area and changed into more fashionable and expensive clothing when entering more affluent surrounding areas. These efforts of 'passing' as local wherever they were allowed them to move about under the radar and not attract the trouble of being an outsider and also to avoid the stigma of being associated with a social housing suburb when in other areas. She described how it felt in the following way:

I know when I was going to work, I always felt overdressed. Even catching the bus in the mornings and you would get dirty looks from people here. Sort of them were like, 'Well, she thinks she's too good for [suburb]'. Whereas just dressing to go down to the shops, no-one looks at you if you're wearing like trackies or even stuff like... [pyjamas] no-one really cares.

Her preference was to try to fit in wherever she was:

It's sort of like you dress in a certain way to fit in here and then you dress totally different to fit in elsewhere... It's all about fitting in. (Cherry, HYW, age 17)

Not all participants were as strategic as this, but others did report feeling discomfort and scrutiny when they were not dressed according to local norms.

Some participants believed that clothing was even more important for young people who were disadvantaged or living in precarious circumstances than for others:

I find I try more now [that I'm living in supported accommodation] than I did when I was living at my mum's because at my mum's... I wasn't trying to impress no-one, but now you have to make sure you set your [own] standards. (Missy Moo, HYW, age 16)

Missy Moo maintained that standards of dress were particularly important for young women living in precarious circumstances as they are more vulnerable to harassment and abuse:

Just have respect for yourself, cover up a bit. So you live by yourself. If people know you live by yourself, you become more prone to people trying to sleaze on you and such... Don't dress in a bra and undies just for the world to see. I know some people here [at supported accommodation service] that do that. They've gotten harassed so much and they're called sluts and called this and called that.

4.6 Schadenfreude: joy in the misfortunes of others

Some young people drew on some of the more destructive aspects of popular culture to make them feel better about their own situation. They took solace from comparing their own misfortunes to those of others, which potentially reinforces negative stereotypes and negative talk associated with body image. Some said they felt better and more confident about themselves after seeing photographs of celebrities or friends who had put on weight or who they otherwise perceived to have 'let their appearance go':

Like Christine Aguilera at the moment. She's really big. I used to look up to her when she was skinny and be like, 'Frigging hell! I wish I could look like that'. But now, I'm, like, 'Ew!'... Yeah, even being around friends that are overweight, gives me a bit of a boost of self-confidence (Leah, HYW, age 16)

Another participant talked about feeling better about herself after seeing other people's perceived 'flaws':

Like, I was watching that show where there's four brides and one of them wins a honeymoon. I saw one of them with really bad teeth and I thought, 'I'm so glad I got my teeth fixed'. (Isiris, HYW, age 25)

Isiris described her own appearance with pride, but her description also had elements of bravado that perhaps masked underlying elements of shame and stigma:

Yes, about 17 weeks ago I got my teeth in. So when I come back everyone was like wow oh my God, you look so different... Yes, when I went to the last [Foxtel] red carpet, I didn't have my teeth. But then I did my hair up in an Amy Winehouse sort of a thing and I looked so f**king - fake eyelashes and everything, I looked so ... hot. I've always wanted to be a model. Now I've got my teeth I'm getting there. (Isiris, HYW, age 25)

4.7 Integrated views of body image and self esteem

Glenn (HYM, age 18) identified as transgender and incorporated some of the idealised characteristics for women in the way he evaluated his self image. He argued that achieving an idealised size (in his case this was about being thinner) did not automatically bring about better feelings of self-esteem, but that self esteem was also related to other circumstances in one's life. He reported feeling more satisfied and proud of his appearance when he had a larger body size:

I was actually proud of myself when I was bigger. When I was 14, I was like an oompa loompa thing. I actually thought I was sexy.

Glen believed the quality of his relationships with friends had a more significant effect on his self esteem than the size and shape of his body.

I think it's an age thing, yeah. At 14, you know, I didn't have any friends. But now that I have friends. In the last month, I've had fights with numerous people, my body image has gone from, like, moderate to, like, 'nah'. So it does [play a role in influencing body image], like, who you hang out with as well. (Glenn, HYM, age 18)

Other participants emphasised the important influence that earning money made on their self esteem. The achievement of being in work allowed them to clothe and groom themselves as well as others and as Alix described to us this allowed her to feel particularly good about herself:

I had really nice clothes and I was buying my sister nice clothes... Because I paid for my own gym and shit and things were going heaps well and I was always dressed in decent clothes. I just felt kind of – I don't know –normal (Alix, IHYW, age 19)

A number of Indigenous participants had young children. They indicated that motherhood was a valued role for young women in their communities and that having a child had changed how they felt about their bodies. Kitty (IYM age 19) described the different relationship she had with her body after giving birth to her son and the increased pride and acceptance that came with giving birth:

I'm definitely more comfortable with my body since having [son]. Because I accept that my body is this way because I had a child... within my body, and that is one of the most amazing things that a woman can do.

When young people take up roles that are valued in their communities their sense of self worth is more connected to other characteristics and achievements than attaining desired or valued body images. This finding speaks to the importance of holistic approaches to body image which are based in broadening the basis on which young people evaluate their self worth.

4.8 Policy implications

Participants in the study consistently reported wanting to improve their health practices including those that support their capacity to be less affected by body image pressures, but often had a limited repertoire of strategies to help them achieve this goal. For most eating, exercising and shopping were social activities done with family or friends. They found it difficult to uphold their ideas about good food, exercise, and body image practices in the face of other people's unhealthy practices. Some needed more education about budgeting, shopping and cooking. Most needed some strategies that could support them institute healthy practices in social networks where unhealthy practices were the norm.

There is a need for health maintaining information (eating, cooking, shopping) to be delivered to young people at services and facilities that might be considered to be soft entry points. For example, young people talked about gyms as somewhere they wanted to go; gym membership and attendance being something that enhanced their image, in contrast to youth and homelessness services which they saw as remedial. Gyms then are places where health information could be delivered in such a way that young people possessing knowledge gained through these spaces have leverage in their peer communities. Soft entry points need also to be identified at local levels for young people who do not identify with sport and exercise facilities.

5 Barriers to Securing Wellbeing and Health

5.1 Summary of findings

- Most of the barriers to securing a positive body image identified by young people across both cohorts of participants were related to multiple forms of material deprivation, including basic items that contribute to a positive body image or to mental health issues they experienced or that their families experienced.
- Young people reported that healthy food was far less affordable for them than junk food.
- Access to facilities that support exercise and care for ones muscular and bone health were also not affordable or accessible for young people on Youth Allowance, or for those in outer lying suburbs. Many found using public spaces for exercise after school or work left them vulnerable to violence and harassment.
- A considerable number of young people in the study were dealing with mental health issues which made it difficult for them to pursue their physical health and which exacerbated their anxieties about body image and how they were perceived. Only a few participants were at the time of data collection, in contact with mental health support services.

In this section we identify the resources and skills needed to secure bodily health and integrity and the barriers young people encountered in their efforts to secure belonging in peer groups and safe environments.

5.2 Lack of affordable goods and services

Not all young people in the study identified barriers to participating in the activities they felt would benefit their health and body image. However, many felt unable to make the choices they believed would benefit them and many had experienced multiple forms of material deprivation, including basic items that contribute to a positive body image. As the barriers expressed were predominantly economic rather than cultural, comments from the two target groups are combined.

Affordability of food

Many participants nominated cost as the most salient factor in determining their food choices. Participants commonly talked about the difficulties of living on a tight budget. Missy Moo indicated she had little money to support healthy eating and activities:

I try to eat healthy, but on a very low budget, it's very hard to eat healthy because... just fruit and veg – they go off so quick... I bought one onion yesterday – one onion – and it cost me \$1.20. Are you serious? I live with \$300 a fortnight. My rent's \$120; my electricity's \$20; I get savings taken out. I just have no money.

The restrictions of living on Youth Allowance were also emphasised by Isiris (HYW, age 25) who reported going around her local supermarket 'with my little calculator'. Many participants pointed out the affordability of fast food and the expense of healthy food:

It is a lot dearer to eat healthy. That's one of the big aspects – you can go to McDonalds and get a whole large meal for \$7 or you can go and buy a salad which is \$12.

One effect of living on the street or away from family support was that young people felt out of control of their health. Some people like Cherry, (HYW, age 18) reported that she lost a great deal of weight while living on the street. Conversely, others like Nora (HYW, age 18) reported that she ate cheaper, energy dense food causing her to gain weight while she was living in precarious circumstances.

Affordability of clothing

Like food, the affordability of clothing was a major concern for many participants and they commonly talked about the difficulty of buying new clothing and keeping up with social prescribed standards of dress:

It's bad – like we [young people who are homeless] try to look like everybody else but we can't afford to go buy the clothes we want to fit in and stuff. It's bad. (Hayley, HYW, age 19)

Kat (IHYW, age 18) also talked about being teased as a teenager because her mother was struggling financially and was not able to buy fashionable clothing for her:

We didn't have really much money. I had a sister who was one, that needed food, toys... et cetera, and we just – [my mother and I], we'd go in each other's wardrobes. I'd get what I wanted to wear and then she'd go into my wardrobe... [but] I still got teased because it wasn't the new hot pants, or it wasn't short shorts and a singlet... They're like, 'Oh, if you don't wear this, you're not cool'. That's basically what they're saying.

Some participants said that the pressure to conform to socially dictated standards of dress caused many disadvantaged young people to live beyond their means:

Yeah, like you see some people that walk around in like nice clothes – they're dressed well and everything like that, but they have no money. You know deep down inside that they're just trying to show that they want to look like they have money, but deep down inside, they don't. (Leah, HYW, age 16)

Affordability of exercise facilities

The use of exercise facilities and organised sports were also beyond the economic reach of the young people in our study. Many Indigenous participants told us that young people needed more activities and health programs. Kinda (IYW age 22) told us *"That is why they*

drink and they drug, because they're bored." Ally argued that there were "some [Indigenous specific free] programs" she concurred that "no-one knows about them".

The high cost of exercise facilities, particularly the relatively high fees charged by gymnasia and swimming pools in participants' local areas, was an extremely common theme. More than half-a-dozen participants complained about the lack of affordable exercise facilities in their local area.

There were no gyms in the suburb in which one supported accommodation service was located and the additional cost of bus transport to and from the regional suburban hub, where the nearest gym was located, proved a serious deterrent for many:

No, there are no gyms around here. The nearest gyms are in [regional suburban hub]... so you have to take buses and, coming back, a bus... and get a membership too. It's not very affordable, especially if you're living on an independent salary. You need to pay for other things too. (Nora, HYW, age 18)

Missy Moo, another young woman living in the same service, reported having visited the gym in the nearest regional suburban hub with a friend, but being deterred because of the high cost:

This is [local suburb] – everyone's on the dole and they [the gym] want \$87 for a year!... It's even \$15 a day [for a casual visit], so it's not any cheaper. I couldn't believe it. It's way too expensive!

The high cost of body building supplements, while perhaps not a major concern for participants, reinforced for some male participants what they perceived as the unattainability of the muscular male physiques commonly depicted in advertising and popular media. Commenting on an advertisement for a testosterone muscle gain protein, which, even following a price reduction, cost \$130 for a three kilogram tub, Fred, a young Indigenous man, stated that he believed the picture implied that 'this is what you need to pay to be big'.

Embarrassment and shame about their bodies posed a significant barrier to participation for some participants and deterred some from exercising in public or using gyms.

5.3 Threats to safety

Several participants said perceived threats to safety discouraged them from exercising in public places. Leah (HYW, age 16) described how school and work took up much of her time and, as she felt unsafe being outside in her local area after dark, there were few daylight hours in which she felt that she could exercise outdoors:

In the area I'm in, I'm not going to run by myself in the area so I'll need, like, someone with me and no-one's really up to running or exercising.

Young women were not the only participants who reported concerns for their personal safety. One homeless male, Shane (IHYM, age 20), reported that he too was reluctant to exercise outdoors or ride his bicycle in his local area after dark:

Yeah, it's alright [riding our bicycles in this area] but you've got to ride during the day time not at night time. Too many idiots come out at night.

5.4 Mental health problems

The literature suggests that the majority of young people who have experienced homelessness have also experienced some form of maltreatment or neglect (Janus, Archambault et al. 1995; Tyler, Hoyt et al. 2000). A significant number of participants who were homeless reported having experienced abuse, neglect or physical violence that affected their body image. As Tyler, Whitbeck, et al. (2003) note, the 'many stressors [that] exist in the lives of homeless and runaway youth both on the streets and before they leave home... are likely to affect the mental health of these individuals including their ability to express as well as deal with overwhelming emotions (e.g., depression, post-traumatic stress disorder)'. Unsurprisingly, then, many participants reported having mental health problems.

Although when recruiting participants for this study we did not specifically seek young people with extensive trauma experiences, nevertheless, several participants clearly struggled with their mental health and several were in the process of recovering from physical and sexual abuse. While these experiences clearly impact on young people's body image they are beyond the remit of this study. What is important to note is that any cohort of young people may turn up some individuals with complex histories of abuse and these may come up in discussions about body image.

A number of participants also reported that one or more of their parents/ carers had diagnosed mental health problems which, in many cases, impacted on the young people's own mental health and wellbeing. Consistent with literature which highlights the impact of father-daughter interactions on body satisfaction (Madison 2010), Leah (HYW, age 16) attributed her mental health problems and body dissatisfaction to demoralising and negative interactions she had had with her father:

When I lost my virginity, my dad called me a slut and over and over he called me that and made me feel useless and I lost all self-esteem.

It is important to note many young people in the study were dealing with mental health issues which made it difficult for them to pursue their physical health and thus exacerbated their anxieties about body image and how they were perceived. Only a few participants were at the time of data collection, in contact with mental health support services.

5.5 Barriers to economic participation

Participants identified numerous actual and perceived barriers to labour market participation – some of which were visible forms of stigma (such as such as having physical characteristics often associated with people living in poverty) while others were more subtle

and often invisible (such as place/ locality; and living in social housing and supported accommodation).

Indigenous young people

The Indigenous young people we spoke to were either engaged in employment (in the case of young men), in parenting (young women) or in school. Accordingly, they were less likely to identify actual and perceived barriers to employment than participants who were homeless.

Young people who were homeless

Participants who were homeless most commonly experienced stigma associated with their place or location. Some believed that prospective employers judged them on their place of residence:

Yeah, and even if you try so hard, if you wear the whole suit thing and have all these... not degrees but achievements and stuff and awards, you still won't get chosen just for the simple fact you're from [suburb]. It's just a bad area and nobody likes it. Nobody wants to employ anyone from here because everyone thinks that we're all dole bludging junkies. (Missy Moo, HYW, age 16)

Missy Moo's fears were not unwarranted and she reported having experienced direct discrimination based on her place of residence:

I applied for the job at [organisation] and then I was talking to the guy for about 15 minutes and then he was like, 'Oh, yeah, yeah, yeah. We might be able to give you a part-time job'. So he's like, 'Oh, do you live locally?'... and I'm just like, 'Oh, maybe five, ten minutes' and he's like, 'Oh, yeah, yeah, I recently just hired someone and she's a mother, so yeah, I already hired her, so there's no openings anymore'. He basically poured bullshit into my face.

Missy Moo suggested that the employment preferences and opportunities available to working class young men meant that their employment prospects were less likely to be contingent on their background or appearance than were working class women. As she noted, working class men are most likely to seek work in blue collar industries where, in contrast to jobs in retail and the service industry, there is relatively little stigma associated with exhibiting indicators of lower socio-economic status (such as living in relatively disadvantaged areas, or having physical characteristics often associated with people living in poverty):

Sometimes for boys, it's easier, because men don't care, whereas girls are more judgemental [about one another's appearance and socioeconomic background]. A lot of guys here [at supported accommodation service] have been going into construction and hard work jobs like labouring. That's because they [employers in those industries] don't care – they're

already rough as guts anyway. The guys that are already working there, they don't really care where you're from as long as you do the job properly, whereas girls, they just - I don't know...

For those who were confident about educational attainment and eventually securing good jobs, the deprivations of goods and services in the present were less difficult to manage. Some participants described making conscious value-based decisions around their purchases and prioritised quality food over new or expensive clothing:

[New clothing] is more like a wish list for me because I know that I'm choosing something over something else and I know that's something better for me in the end. But it gets to me when I'm like oh look at those people they got new clothes at school. I just know that's because they don't value other things like eating healthy and stuff and I spend money on that so that's my choice and I live with it. It won't be forever. (Layla, IYW, age 25)

5.6 Policy implications

It is important that those who deliver body image interventions are aware of the diverse experiences they are likely to encounter in any group of young people. Some will have experiences of childhood sexual abuse, of mental health problems and their families and peers will differ in terms of how effectively they protect themselves and others from body image pressures.

6 Support, Interventions and Resources

6.1 Summary of findings

- No participant in our study had ever been part of any formal intervention related to body image. At best some had received some critical media literacy at school.
- Families were young people's first port of call for health information and when young people decided to seek information outside the families they turned most often to the internet. School and services were also important sources of information and a number of participants also reported receiving health information from teachers and teacher's aides (including physical education teachers, school counsellors and Aboriginal Education Officers). A small number of participants reported obtaining health information from other professionals such as nurses, chemists and personal trainers and from friends and other users of their local exercise facilities. A couple of young people mentioned relying on the advice of health professionals to hear about body image issues such as weight.
- Peers, family members and school and service support workers, therefore, play an extremely important role in providing initial support to young people who struggle with body image issues and, for this reason, it is vital that young people, parents, teachers and teacher's aides have accurate and up-to-date knowledge about appropriate body image support.
- It is important that these initiatives are constructed carefully as Indigenous young people are very sensitive to a negative or deficit base in public health campaigns.
- Participants suggested a number of interventions and supports around body image. Several Indigenous young people and young people who were homeless stressed the importance of talking to children about body image from an early age and targeting young people through schools.
- Some suggested the need for stronger publicity campaigns around body image and working with the media and retailers to promote larger sized models and shop mannequins, standardise clothing sizes and increase the availability of fashionable clothing in larger sizes.

6.2 Sources of health information

While participants obtained health information (independently from their families) from a variety of sources, the Internet was by far the most commonly reported source of information about diet, exercise and health:

I've done so much research on the Internet about the exercises I could do to lose weight in parts of my body. I'm not – I don't want to lose weight because I know my arms are so skinny compared to the rest of my body. I'm very disproportioned. So I go on the Internet and I look up exercises to lose weight on specific types of your body; so mostly the Internet is my main focus. (Nora, HYW, age 19)

After the Internet, traditional media (including newspapers, magazines and television) were the most commonly reported sources of health information. School and services were also important sources of information and a number of participants also reported receiving health information from teachers and teacher's aides (including physical education teachers, school counsellors and Aboriginal Education Officers). A small number of participants reported obtaining health information from other professionals such as nurses, chemists and personal trainers and from friends and other users of their local exercise facilities. A couple of young people mentioned relying on the advice of health professionals to hear about body image issues such as weight.

6.3 Body image support and interventions

As with health information, participants most commonly reported that they would seek support through the Internet. Participants also commonly reported that they would turn to friends (and, to a lesser extent, family members and teachers and teacher's aides) if they required support around body image but many were reluctant to seek help from people that they did not know.

Peers, family members and school and service support workers, therefore, play an extremely important role in providing initial support to young people who struggle with body image issues and, for this reason, it is vital that young people, parents, teachers and teacher's aides have accurate and up-to-date knowledge about appropriate body image support. Body image is a sensitive topic and some participants, such as Rose, expressed reluctance to discuss the issue with service providers of the opposite sex:

Because the head of my Indigenous department at my school is a guy and I don't really like talking to him... I usually just go to my mum or my friends.
(Rose, IYW, age 14)

Some participants were aware of mental health promotion agencies such as *beyondblue* and were aware of specific services, counsellors or youth workers who they could turn to for support around body image if necessary. However, there was little knowledge amongst Indigenous participants or participants who were homeless about specialist body image support organisations such as the Butterfly Foundation and many reported that they had little knowledge of body image supports that may be available to them.

Some participants expressed a preference for seeking help via instant messenger or Skype rather than face-to-face or via telephone because these mediated forms of communication felt safer or, as Fred, a young Indigenous participant put it, '*it's like hidden behind a wall sort of, [so] you feel more comfortable*'.

Participants suggested a number of interventions and supports around body image. Several Indigenous young people and young people who were homeless stressed the importance of talking to children about body image from an early age and targeting young people through schools.

Some suggested the need for stronger publicity campaigns around body image and working with the media and retailers to promote larger sized models and shop mannequins, standardise clothing sizes and increase the availability of fashionable clothing in larger sizes.

Indigenous participants identified the need for body image programs specifically targeted at young people from Indigenous background. Other suggestions included increased support for eating disorders; increased access to free/low-cost exercise facilities; and subsidised gym memberships for young people or people living on low incomes; Indigenous-specific exercise facilities; self-defence classes to increase young people's physical strength and self-esteem; and increase the safety and accessibility of parks and public spaces. As Anita noted:

I know there's [a park] here and the one down there [but] they're both really dangerous. I would never go there... only for my own safety, so maybe like introduce new parks around or, you know, stuff with equipment in the parks that we could [use to] work out.

Some participants believed that the public health campaigns that are aimed at Indigenous people were often negative or deficit-based. This elicited a variety of responses from Indigenous participants, with some such as Kyle saying that reporting the poor health outcomes for many Indigenous people motivated him to lead a healthier lifestyle by eating more healthily and exercising regularly. In contrast, some participants said that deficit-based messages and health warnings were often poorly received and are sometimes ignored. Describing a recent talk that some local doctors gave to students at her predominantly Indigenous school, Layla reported:

I'm interested in what they were saying but a lot of people took it in a negative way. Like, 'Oh, they're just telling us what's wrong with us'. So, I mean, I guess people can shut off from it... if it... kind of has negative messages...

6.4 Policy implications

All young people should have access to body image interventions through schools and targeted services.

Body interventions need to engage families wherever possible as this is where many young people get their health information.

Body image interventions need to target children (just before puberty) as well as adolescents.

Government and lobby groups should continue to fund and work on social marketing of positive body image messages and with the media and retailers to promote larger sized models and shop mannequins, standardise clothing sizes and increase the availability of fashionable clothing in larger sizes.

Indigenous communities require facilities and services that are specifically designed for the community.

7 Discussion of Findings

The participants in our study shared body image concerns with other groups of young people, as represented in previous studies. They also had particular concerns: some were shared by both groups, some were distinct to the Indigenous young people and some distinct to the young people who were homeless. Much of the body image literature is dominated by discussion of body size, weight and Body Mass Index (McCreary and Sadava 2001; Tiggemann, Martins et al. 2008). While these issues featured prominently in the present study and heavily influenced participants' conceptions of their own bodies, many had personal definitions of body image which encompassed a far broader range of concepts.

Consistent with the existing literature, participants felt stigma associated with a range of characteristics relating to having unusual physical characteristics and physical 'deformities' (Rumsey & Harcourt, 2004); having physical characteristics often associated with people living in poverty (Lister, 2004); race/ ethnicity (Dunn, Forrest et al. 2004); place/ locality (Warr 2005); and living in social housing and supported accommodation (Arthurson 2010).

7.1 Indigenous young people

One striking finding of our study is that, overall, the Indigenous young women and men had critical attitudes towards mainstream cultural norms of 'healthy' and 'beautiful' bodies, and described resourceful, independent strategies in response to them. Although many participants experienced economic hardship and other difficulties, most were nonetheless savvy, insightful and active agents in their own lives. Family was very important to these participants, and so was pride in their Indigeneity, and both of these amounted to resources for these participants that many of the homeless participants did not have.

Notwithstanding this, Indigenous young women demonstrated ambivalent attitudes towards pressures to be thin. They were critical of these pressures, but also described the impact of them on their sense of self-esteem. The interviews, which took place after the workshops and so happened in a context of growing comfort and candour, revealed a shift in the talk from a positive view of larger bodies to acknowledgements of the pressures to be thin. This shift suggests three important points. First, protective discourses that promote positive perspectives on larger bodies exist in Indigenous communities. Second, young Indigenous women are still subject to discourses that idealise 'thin' body types. Third, it may be difficult for them to discuss these pressures with each other because of their shared location in and commitment to discourses that promote positive images of the body types they associate with Indigeneity.

Consistent with the literature, weight and size was important to conversations about the meanings of body image with Indigenous young women. Also consistent with the literature that notes male body dissatisfaction is most commonly related to muscularity, Indigenous young men were dissatisfied with their bodies in terms of bulk and tone.

Indigenous research and biographical literature (Behrendt 1995; Wilson 1997; Foley 2000; Taylor 2003; Perkins 2007) suggest that issues of positive recognition remain of paramount importance to Indigenous Australians. Many Indigenous participants in the present study reported that they had been subject to negative comments couched in appearance terms.

For example, one young woman reported she and her friends had been subject to the line ‘too pretty to be Aboriginal’ which has been commonly reported by Indigenous women (Koori Mail 1993; Fernandes and Begg 1994).

Overt devaluing stereotypes of Aboriginal people created image related sensitivities in some Indigenous participants. The term ‘mission-breed’ was raised in a brainstorm, and all participants concurred that it was a powerful insult. They did not want to dress or to act in a way that meant they could be seen as ‘mission breed’. It was important to them to distance themselves from the stigma attached to communities struggling with poverty, educational attainment and health and that carry many of the long standing negative stereotypes associated with what Cowlshaw (1988) describes as Aboriginalism¹².

Pride in ‘Indigenous bodies’ appeared to involve a difficult balancing act between belonging to family and community and distancing oneself from the negative stereotypes that continue to be associated with Aboriginality within the broader Australian context and their own communities. Body image for these young people therefore involved continuous management of the processes that shape positive and negative body image at different points in time and for different audiences.

7.2 Young people who are homeless

How important is body image to disadvantaged young people? Body image was described as a fairly minor concern by some Indigenous participants, and equally, young people who were homeless described other problems as more pressing. However, detailed discussion revealed that having limited access to resources to shape their body image (resources many other young people can take for granted), impacted on these young people’s capacity to secure resources like stable accommodation, jobs or education and training. Access to the material resources necessary for maintaining standards of appearance is problematic for many young people who are homeless. For example, skin and teeth were important aspects of body image for participants, partly because they are costly to maintain. Both skin and teeth are prominent visual markers of good or poor physical health. Dental and skin problems lead to self-consciousness and caused considerable anxiety for some participants. Some participants were unaware that they might be entitled to subsidised oral health care or insufficiently stable to access it on long waiting lists. This is consistent with literature which has found that financial burden is often cited as a reason for people failing to seek regular dental care or comply with recommended treatment (Australian Health Ministers’ Advisory Council 2001; Chrisopoulos, Beckwith et al. 2011).

The responses of our participants echo Farrugia’s (2010) finding that people who are homeless are less likely to have access to laundry or washroom facilities, are less likely to be able to buy new and fashionable clothing, and may experience suffering and discomfort as a result of being perceived as dirty or having an offensive odour. They told us these conditions had negative effects on their self-esteem, their peer group and social interactions. Many experienced stigma from strangers who judged their appearance and were scornful if they

¹² Aboriginalism is a term coined by Gillian Colishaw to describe the suite of negative discourses which position Aboriginal people as uncivilised, uneducated, lazy and generally less than colonising peoples.

wore clothing that was old or unclean. This was especially complex for these young people as many were learning basic independent living skills as well as dealing with the circumstances that had led to their homelessness.

While body image may not have been at the forefront for many, we saw how the issues played out in their lives and how interventions directed at body image and basic living skills would be useful and meaningful.

The gendered dimensions of body image were clear for young people who were homeless, as they were for Indigenous young people. Consistent with the literature (Jones 2004; Grossbard, Lee et al. 2009, McCabe and Ricciardelli 2001), young women typically reported feeling more pressure to conform to narrow, often unrealistic 'thin' norms. Young men consistently reported wanting to be bigger and many associated larger sizes with safety in contexts with unfamiliar male peers. Young women were more likely to have critical perspectives than young men.

For the homeless young women, in contrast to the Indigenous young women, thinness was an unequivocal ideal, and many did not have culturally sanctioned discourses of resistance to draw on. Consistent with Kinley's (2010) findings, participants described being able to fit into smaller sized clothing as a source of body esteem and, in contrast, described wearing larger sizes as a source of angst and shame. Several participants reported difficulty finding affordable clothing that fitted them and, consistent with Wills et al.'s (2006) study of disadvantaged British adolescents, found it difficult to find fashionable clothes in larger sizes.

Also in keeping with the literature, several young women talked about the prevalence of 'fat talk' (or negative self-statements about one's physical appearance) within a social context (Nichter and Vuckovic 1994; Nichter 2000). Many young women reported that they found it challenging to think of their physical appearance in positive terms. Further, it was difficult for them to make any statements that affirmed their own appearance without being accused of being 'up themselves'. While some young men reported it was difficult to affirm their appearance, most attested to a lack of interest in talking about body image with peers. This has methodological implications for further research as well as for interventions.

The relationship between body image and safety, especially for homeless participants, was an unanticipated but important finding. The way young people talked about clothing was not simply as a product, an aesthetic enhancement or a signifier of group identification. Clothing was regularly discussed as a tool that provided safety by some participants. A key safety strategy among young people who were homeless involved constructing a look that could gain or avoid notice from particular street communities. Maintaining these images was challenging in circumstances where money to buy clothes was tight and they could often not access laundry and washing facilities to maintain their image. Furthermore, successful navigation of local street politics required local knowledge of who was around and what image attracted the right or no kind of attention. Body size played into this for homeless young men who reported that looking and being bigger was important to their street safety.

Finally, a number of homeless participants from culturally diverse backgrounds reported experiencing racism. This occurred when participants had features that clearly identified them as non-white or non-Anglo but also, in some cases, conversely, if they did *not* conform to the stereotypical physical norms of the ethnic group to which they belong.

7.3 Risk and protective factors common to both groups

The nexus of relationships between families, peers, the community and young people are important in understanding young people's experiences of body image. It is not one set of relationships that determine young people's experiences of body image but a combination (Ata et al., 2007; Eisenberg et al., 2003; Kichler and Crowther, 2009; McCabe and Ricciardelli, 2001).

These relationships can also act as both a risk factor and a protective factor for young people and their experiences of body image. Poor relationships can mean that young people are less likely to be able to discuss body image issues with trusted people and therefore may not receive the support that they would like (and need). Alternatively, a young person with good relationships is more likely to discuss any issues that they may have and receive the support that they need.

Participants in this study had mixed experiences of the body image information they received in their families, and this was true of both Indigenous young people and those who were homeless. Family was very important to Indigenous young people regardless of whether they were living with them or in supported accommodation. Grandparents and aunts were also reported as important influences by those with extended family networks.

Many participants reported their families gave direct feedback about weight, eating and exercise. While for some these messages were positive, and less commonly focussed on resisting body image pressures, for most they were negative and emphasised the importance of being thin and focussed on conforming to mainstream norms. The pain of families expressing negative attitudes or concerns about young people's looks was keenly felt by all those in both cohorts who described it. While less than one third of the study participants described a family dynamic that involved the expression of negative attitudes or concerns about young people's looks, these dynamics were described in highly emotive terms, which suggest these interactions have had long standing impact.

Furthermore, in keeping with the literature (Abraczinskas, Fisak, et al., 2011) family members shared body image orientations through their own actions as much as through direct statements they made. Many of the young women reported that family members commented negatively on their own bodies and appearance and this modelled way of relating to one's embodiment was easily internalised. For example, one young woman talked about her aunts and how they constantly described themselves as 'fat'. She found this hard to ignore and it often made her think about her own body in a negative light.

However, young people in this study were not passive in communicative processes and many had taken on board positive health messages from other sources. Many participants were critical of the eating, health and body image practices in their families. Some resisted the dietary habits of older generations and worked to establish their own eating and

exercise practices that were in keeping with current health messages from established authorities. For example, one young woman described her mother as 'not eating' and vomiting in the toilet regularly. She recognised this as a disordered eating pattern and resisted following it. This supports literature which argues that young people may develop their body image orientation with reference to the orientations of other family members but that as young people gain independence they internalise beliefs synthesised from family and non-familial influences (Abraczinskas, Fisak, et al., 2011).

Just as health campaigns have been used to raise awareness about how practices of alcohol consumption affect family members, so too could campaigns be developed to support parents and their teenage children to think more critically about the body image, healthy eating and exercise orientations. These campaigns could aim to encourage parents, grandparents and young people to make health choices about the 'fat' talk and unhealthy practices that can occur in family contexts.

Furthermore, the centrality of family to the way young people establish eating, exercise and self-perception habits points to the need for holistic body image and health initiatives which target whole of community rather than just young people.

Like family relationships, peer relationships are important influences on how young people feel about their bodies and their appearance and can have either a positive or negative effect for young people. Peer relationships become particularly important as young people get older and become more reliant on their peers for support and approval (Ata et al., 2007, Jones et al., 2004). Evaluative talk about appearance was a feature of young people's peer relationships to varying degrees. Across the study, this kind of talk was most prevalent among young non-Indigenous women. They were more likely to feel they would be judged by their peers (both male and female) and more likely to be critical of themselves and others. For many young people, negative judgements and image teasing from peers had taken place over a long period of time and had impacted on their current appearance, confidence and self-esteem. For several participants, image based bullying undermined their sense of pride in who they were and they were caught in a downward spiral of bullying attached to image. These young people expressed symptoms of psychological stress such as fatigue which further undermined their capacity to engage in protective behaviours. One young person said that she no longer wore shoes and wore 'whatever' because it did not seem to matter what she wore, her peers still took every opportunity to bully her about her body and appearance.

When young people felt they had no allies they were at risk of mental health problems. It is important therefore that there are workers in the community who can talk to young people effectively about body image and who can support young people's mental health. Training packages for community workers are important interventions as are campaigns to reduce negative community sentiment about youth cultures.

The relationship between community and body image was not as commonly mentioned as the importance of family and peer relationships for young people. This is consistent with the literature which suggests that family and peer relationships are two of the main indicators of how young people feel about their body and appearance (see Ata et al., 2007; Eisenberg

et al., 2003; McCabe and Ricciardelli, 2001). However, local community may be more significant than is often recognised. The accounts of Indigenous young people and young people who were homeless emphasised the importance of where they lived to their sense of identity, and to how they were perceived by others. Location was important in determining key aspects of body image, such as the extent to which safety was a priority in choice of dress and presentation. Location was also important to young people's choices in strategies for health and well-being, because their choices were determined in large part by the presence or absence of amenities such as gyms and parks.

Social media was a particularly strong source of attitudinal information about body image for study participants. Like the majority of young Australians our participants used the internet or a mobile phone to source information, engage and construct and maintain social networks. In spite of the way technology has transformed young people's relationships with one another, their families and communities, little is understood about young people's online behaviour (Collin, et al 2011). Our participants certainly related to online communities as a space where they could establish a sense of belonging and to foster connections with others (Harris, 2008). However, our participants frequently suggested they experienced intense humiliation when image based teasing (or bullying) occurs on social media networks because of the breadth of the audience witnessing their humiliation. This finding is supported by the literature on cyberbullying (Campbell 2005). Furthermore, participants with low self esteem were the least likely to block 'friends' (that is those with whom they had weak social ties) on social media sites. This is an area where there is an urgent need for interventions that encourage young people to identify what is cyberbullying and to shift the signs of value that are attached to certain social networking behaviours.

The main strategies young people in both groups used to secure wellbeing and health were diet, exercise, avoiding scrutiny, comparing themselves with others (mostly celebrities) who had experienced weight gain or other changes thought to be unattractive, and linking body image with self-esteem and an integrated view of health. For many these efforts were constrained by their lack of resources and by the social norms of their immediate communities. The most powerful strategies that supported their wellbeing were those that allowed them to secure achievements that were either social or economic.

Some of the strategies young people used to maintain their body weight have negative health effects. Consistent with research conducted with American adolescents (Grunbaum, Kann et al. 2006), several participants reported using cigarettes as an appetite suppressant. While many of those who smoked reported that they would like to quit, some reported reluctance because they believed it might induce weight gain which they do not want. Some participants also reported smoking cannabis to lose weight, a surprising finding in that both popular understandings and the research literature connects cannabis to weight gain rather than loss.

For the participants who struggled to maintain a positive sense of their body image, their control over their food and exercise choices were important to their sense of self. Across the study young people had different capacities to make these choices. Those who lived with their parents were often subject to household rules about food or perhaps more commonly to the food habits in their households. Amongst the young people who were homeless,

peers were influential. In some cases, participants reported experiencing pressure from peers to go to fast food outlets or make less healthy food choices. Supported accommodation services provided varying levels of support to residents to make healthy food choices and to learn healthy behaviours. One of the services through which we recruited participants provided its residents with all meals, while, in contrast, residents in another service were responsible for shopping for and preparing their own meals. The second service provided cooking classes for young people (but there was a low take up). Residents of the second service reported that they most commonly ate meals by themselves, but occasionally combined funds and cooked meals with other residents. A number of young people who had control over their food choices through independent living were interested in and worked hard to gain nutritional and cooking knowledge. They expressed pride in their capacity to provide healthy food for themselves and this enhanced their general sense of wellbeing.

While some participants reported regularly engaging in exercise, more reported that they were not engaged in any form of physical activity. Apathy or lack of interest prevented some participants from engaging in physical activity, but others were deterred from further participation by structural barriers, including real and perceived threats to personal safety;; financial costs and lack of affordability of exercise facilities (many of which are discussed in more detail in other sections of this report).

When viewed in conjunction with some participants' feelings of discomfort and unwanted scrutiny when wearing smart clothing in their local suburbs, it seems that disadvantaged young people face considerable challenges to participate in the labour market and in the wider community.

The strongest protective factors that were voiced by participants against the body image pressures were those that drew on an integrated view of wellbeing. In this we mean young people saw that other aspects of their lives, such as family, strong friends and achievements as centrally important. This affected how they saw themselves and their body and buffered them from body image pressures. The data from group work and interviews suggest their relationships with family and friends were extremely important to them, raised their self esteem, and buffered the extent to which their own adherence to idealised images of bodies affected them.

7.4 Conclusion

In conclusion, the participants in this study shared body image concerns with other groups of young people, as represented in previous studies, but also had particular concerns. Indigenous young people expressed specific concerns related to historical injustices and racism. Policies aimed at addressing attitudinal discrimination towards Indigenous people and at endemic health issues are important in redressing these disadvantages.

Both groups expressed concerns broadly related to economic adversity. Government policy should first address material deprivation among these groups where it occurs as body image interventions may have little effect in the context of material deprivation because of the lack of control young people have over their physical selves.

In these senses, body image concerns for Indigenous young people and for young people who are homeless were differently nuanced from those held by mainstream groups. There is a need for further research into the interventions that will support these young people develop a sense of their own body images that are positive and resilient.

Appendix A Literature Review

A1. Introduction

While many young Australians identify body image is a significant concern, recent evidence from Mission Australia's *National Surveys of Young Australians 2010* and *2011* show that concerns are particularly high for Indigenous¹³ young people and young people who identify as homeless. Evidence from the *National Survey of Young Australians 2010* suggests that body image concerns are increasing with 33.1 per cent of the 45,916 young Australians surveyed reporting body image as one of their three main concerns (Mission Australia, 2011b).

Body image (together with school or study problems) was identified as an issue of personal concern for Indigenous and non-Indigenous respondents of all ages. Concern with body image appears to increase with age, with 11–14-year-olds slightly less likely to report body image as an issue of personal concern than 15–19-year-olds, who were in turn less likely to report it as an issue of concern than 20–24-year-olds (30.4%; 35.5% and 41.1% respectively).

Results from the 2010 and 2011 surveys indicate an increase of 8 per cent since 2009 of the proportion of respondents who rank body image as an issue of personal concern and a reversal of the trend between 2007 and 2009 that indicated that young people's concerns with body image had been declining (Mission Australia, 2007, 2009, 2011). The high levels of concern with body image reported by young Australians across the population in themselves warrant further attention and action from the community and government, but, the particularly high levels of concern with body image reported by certain groups, including young people experiencing homeless and Indigenous young people, suggests that these groups should be given particular attention.

Like non-Indigenous young people, body image is a significant issue of personal concern for young Indigenous Australians (with 28.4 % Indigenous Australians across all age ranges and 35.8% of Indigenous 15–19-year-olds reporting body image as a major concern) (Mission Australia, 2011). Body image has also been identified as a major concern for the young people experiencing homelessness in this survey. While alcohol was reported to be the most significant concern for these young people, close to 40 per cent of young people experiencing homelessness reported that body image as an issue of personal concern (Mission Australia, 2007). This concern with body image far outstripped other seemingly critical concerns, for example personal safety (13.7%), family conflict (20.7%) and coping with stress (21%). These findings suggest that the complex relationship between housing security and young people's sense of their own bodies is worth exploring in more detail (Mission Australia, 2011).

Australian policy makers are seeking information that supports them to best address the issue of body image for young Australians. A National Advisory Group on Body Image was

¹³ The authors acknowledge the diversity of Aboriginal and Torres Strait Islander peoples, who have different languages, cultures, histories and perspectives. For ease of reference, this report refers to Aboriginal and Torres Strait Islander peoples collectively as Indigenous people.

established in 2009 to provide advice on how governments might best address the issue of body image. This group identified two key areas for action in relation to body image: i) 'industry and popular culture' and ii) 'individuals and their immediate social environment'. This advisory group emphasised the crucial role of the education sector in supporting positive body image among young people.

Body image has been identified by State and Territory Government Ministers for Education and Youth as an emerging area of common interest which offers the opportunity to work collaboratively towards improved health and wellbeing for Australian young people. At their 15 April 2010 meeting, the Ministerial Council for Education, Early Childhood Development and Youth Affairs (MCEECDYA) acknowledged that body image is a significant concern among young Australians, that promoting positive body image is an important aspect of government efforts to support young people's health and wellbeing and that the education environment provides a key opportunity to foster positive body image. In June 2010, the Australian Government announced body image initiatives that focus on building young people's resilience to negative body image pressures and promoting leadership and positive cultural change in the fashion, media and advertising industries.

To date, the Government has:

- funded The Butterfly Foundation, the leading national charity focused on eating disorders and negative body image, to expand their body image education services to help build young people's resilience to body image pressures;
- commissioned Education Services Australia to develop body image posters and supporting materials for school communities;
- released the Voluntary Industry Code of Conduct on Body Image to promote cultural change in the fashion, media and advertising industries, and
- committed to investing \$3.5 million over four years (2009–2013) for the related issue of tackling eating disorders through the Department of Health and Ageing.

The Office for Youth at the Australian Government Department of Education, Employment and Workplace Relations has commissioned the Social Policy Research Centre at the University of New South Wales to conduct research on how Indigenous and young people who are homeless experience body image. This project will review the literature and use activity based qualitative methodologies to explore what body image means for these two groups of young people, how they experience it and what types of interventions are most likely to support them develop a positive sense of their bodies.

While there is a considerable literature on the effects on body image on mainstream populations, to date, there has been very little research about the body image concerns of Indigenous young people and young people experiencing homelessness.

This literature review sets out an overview of the policy and academic literature relevant to body image generally and as it pertains to Indigenous young people and young people experiencing homelessness. It also provides an overview of the standardised instruments that have been used in quantitative body image research in the past and of literature

relating to visual methodologies such as photo-elicitation and photovoice which will be used in the data-collection stage of this project.

Much of the scholarly literature on body image comes from psychology, and as a result focuses on the intra-personal dimensions of body image. While a critical feminist and sociological body of work argues that widespread body dissatisfaction is the result of changing cultural norms and expectations (Bordo and Heywood, 2004), the psychological literature focuses primarily on individuals.

Our own approach in this literature review has been to consider influences on young people's body image through an ecological framework of human development (Bronfenbrenner, 1979; Rogers et al., 2009), and conceptualise body image in terms of individual, family, immediate community, and broader community levels. The framework considers the socio-cultural influences on human development in terms of different scalar and temporal contexts – the microsystem, mesosystems, exosystems and the macrosystem. The interaction of structures within a layer and interactions of structures between layers is central to this understanding of how social contexts shape human development.

- The microsystem is the layer closest to the child or young person and encompasses the structures, relationships and interactions a child has with his or her immediate surroundings. For many Indigenous participants this involved their families and peer environments. Young people have the greatest capacity to influence those around them at the microsystem level. This level is an important level of body image influence. Many young people will internalise the messages they receive from those they are closest to and most reliant on. Homelessness services (or indeed a series of 'couch surfing' spaces) may operate for a time as a space where a young person's microsystem is active.
- Mesosystems are the organizational or institutional layers that shape or structure the environment within which the individual and interpersonal relations occur. These aspects can be rules, policies, and acceptable etiquettes within formal organizations such as schools or services. Policies that encourage schools to take responsibility for young people's wellbeing as well as their academic attainment create a mesosystem that is able to address issues such as body image pressure. When schools do take responsibility for wellbeing and take up opportunities to run intervention programs they raise the profile of these issues within the microsystems of their constituents. This is powerful in and of itself if the messages are delivered in a way that is respectful of the diversity of parenting practices, beliefs and skills in young people's homes.
- The exosystem refers to the community level influences that do not have a direct influence on the child, but an indirect influence. Legislation that insists digitally manipulated images are clearly identified is such an influence. Industry codes of conduct that endorse the use of a diversity of body shapes in the fashion industry are other initiatives that may take place at this level. Initiatives at this level can change attitudes at the meso and micro level.
- The macrosystem may be considered the outermost layer in the child's environment and is comprised of cultural values, customs, and laws. The effects of larger principles defined by the macrosystem have a cascading influence throughout the interactions of

all other layers. For example, if it is a widely held cultural belief that parents should be solely responsible for their children's non-academic learning, that culture is less likely to provide resources to help parents support young people develop protective behaviours towards body image pressures and less likely to deliver interventions through schools.

Bronfenbrenner's model includes the dimension of time as it relates to a child's environments. This is important because as children mature and become better informed about body image pressures they may react differently to environmental influences and may be more able to determine more how they understand and respond to pressures.

An ecological model for understanding body image pressures is important as it identifies influences at different levels and perhaps most importantly, highlights where interventions should be targeted.

Defining body image

In recent decades body image has become important to public health and social policy because growing numbers of Australians —especially but not only young people—are either expressing concerns with body image, or engaging in unhealthy, potentially harmful, practices understood to result from extreme dissatisfaction with their bodies. There are a number of well-known manifestations of this extreme dissatisfaction, such as disordered eating and excessive exercise, but concerns with body image are likely to have far more wide-ranging effects than these. However, despite its current association with body dissatisfaction, body image is a broad, multi-dimensional concept.

There are various definitions of body image, but most agree that it is the mental picture we have of the size, shape and form of our bodies and our feelings concerning these characteristics and our component body parts – 'a mental image of the body as it appears to others' (Featherstone, 2010: 193) or 'the individuals' internal representations of their outer physical appearance' (Thompson et al., 1999b: 76). Kreuger (1990) theorises that the bodily self is comprised of body sensations, body functioning and body image. As such, body image is one component of the bodily self – the psychological experience of embodiment that is primarily (but not exclusively) related to one's physical appearance (Cash, 2004).

Body image is a multi-dimensional concept that includes perceptual, attitudinal, affective, functional and behavioural dimensions (Abbott and Barber, 2010; Brown et al., 1990; Cash, 2004; Muth and Cash, 1997). Abbott and Barber (2010) describe a 'tripartite' model of body image that includes the affective evaluations people make towards their bodies in determining their body satisfaction; the value that individuals place on different dimensions of their bodies; and the behavioural investment they make to maintain these dimensions. Conversely, Gleeson and Frith (2006) argue that it is more useful to consider 'body imaging' as a process and an activity rather than a product of perception.

The literature on body image is dominated by discussion of body size, weight and Body Mass Index (BMI) and most research has focused on perceived weight and muscularity as an indicator of body image and body satisfaction (McCreary and Sadava, 2001; Tiggemann et al., 2008). However, body image has a variety of other dimensions – including the appearance and texture of various body surfaces, like skin, hair and nails; body motions; and

clothing – and it is important to consider these factors in addition to weight and muscularity.

McCabe and Ricciardelli (2001a) describe four dimensions of body image: body size; body shape; muscle tone; and satisfaction with specific body parts (McCabe and Ricciardelli, 2001a), while Tiggemann et al. (2008) include hair, body hair, height and penis size as other important dimensions that relate specifically to male body image. Other theorists such as Martins et al. (2007) include physical competence, traits and abilities as additional dimensions of body image. Lennon (1992) broadens the definition of appearance and body image even further, arguing that body image is not limited to visual characteristics and also includes auditory characteristics (including dialect and accent) and olfactory characteristics (what people smell like).

Facial attractiveness is another extremely important dimension of body image. There is a considerable literature documenting attempts to define and understand human preferences and beauty ideals across time and place. Research investigating the relative importance of the face and body in judgments of physical attractiveness (Currie and Little, 2009) found that face ratings were relatively more important in judging a person's overall attractiveness. Ideals of beauty differ across time, place and culture. Youthful facial appearance is attractive in Western cultures (Zebrowitz et al., 1993) but studies have consistently shown that facial symmetry is one of the most important determinant of facial attractiveness (Grammer and Thornhill, 1994; Langlois and Roggman, 1990; Rhodes et al., 1998; Rhodes et al., 1999) in both Western and non-Western cultures (Rhodes et al., 2001). Symmetry appears to be particularly important for female appearance and there is some evidence that male faces that have extreme features (such as wide jaws) are considered more sexually attractive (Keating, 1985).

In summary, body image is usually defined in individualistic terms, both in terms of intra-personal or internal conceptualisations, and in terms of relationships between individuals. It is important to consider a wide range of factors beyond weight and muscularity, including the size, shape, composition and morphology of various body parts; the appearance and texture of body surfaces; body motions; clothing; and even auditory and olfactory characteristics. It is also important to remember that ideals of beauty differ across time, place and culture and that socio-cultural factors strongly influence both what is considered beautiful and how young people and adults feel about their bodies. While body image is generally understood in terms of an individual's sense of self, it is also formed by social and cultural influences. In terms of Bronfenbrenner's ecological framework, body image is produced in each of the five environmental systems: the microsystem, mesosystem, exosystem, macrosystem and across time in what Bronfenbrenner terms the chronosystem.

Theoretical conceptualisations of body image

The conceptual literature on body image reveals its relational, social dimensions. The opinions young people hold about their bodies are influenced by a range of factors including the views and discourses about beauty and health that circulate in their families, immediate communities, friendship and peer communities, educational communities and in the various media they use. Mass media, peer groups, and family are the factors which are most

frequently cited as influencing body image and body dissatisfaction (Esnaola et al., 2010; Thompson, J. K. et al., 1999). Evidence suggests that while many young people hold concerns about body image, these concerns are shaped by their gender, sexuality and ethnicity and by their social, economic and cultural contexts (O’Dea, 2008; Wills et al., 2006). While much of the literature emphasises the influences of these factors on individuals, it is also important to emphasise that individuals also influence these broader contexts and messages. Young people are not passive recipients of information; instead, they take an active role in forming cultural norms and representations.

The literature describes body image in terms of both *attitudes* (body satisfaction/ dissatisfaction) and *behaviours* (healthy/ disordered eating, exercise and body modification techniques) (McCabe and Ricciardelli, 2001a). Much of the body image literature is underpinned by social comparison theory, which suggests that humans have a strong drive to compare themselves to others in order to evaluate their own opinions, abilities and appearance (Festinger, 1954; Tajfel, 1981). Objectification theory is also central to contemporary understandings of body image and body. The theory was first applied to females and suggested that girls and women’s primary view of their physical selves is based on the observations of others and that they are socialised to adopt an observer’s perspective on their physical self, which can lead to body shame and restricted eating behaviour (Fredrickson and Roberts, 1997; McKinley and Hyde, 1996). More recently, objectification theory has been applied to other population groups and there is strong evidence that the theory is widely applicable, with Slater and Tiggemann (2010) finding support for its application to adolescents of both sexes and Martins et al. (2007) supporting its application to gay men. For many people, the ideals of beauty that are widely promoted through the media and social networks can have negative influences on their body image and wellbeing (Gaskill and Saunders, 2000). Although people who do not conform to cultural ideals of beauty are actively discriminated against and devalued -for example, people who are obese and overweight (Crandall, 1994; Gortmaker et al., 1993)- having an ‘ideal’ body type does not guarantee a positive body image (Fallon and Rozin, 1985; Thompson, and Psaltis, 1988).

Body image is closely related to self-esteem (Jackson et al., 1988; Rudd and Lennon, 1994). Poor self-esteem is associated with body dissatisfaction; conversely, high self-esteem is associated with high levels of satisfaction. One UK study analysed data from a nationally representative data set to identify the demographic characteristics that are important to body image and found that BMI, age, gender and living within a household containing a father were predictive factors (Fenton et al., 2010). There is a strong literature to support the claim that body dissatisfaction stems from behaviours that lead young people to internalise the thin body ideal, compare their bodies with others and engage in appearance conversations and teasing with peers. These behaviours interact with personality and temperament factors such as poor self-esteem and perfectionism to heighten body image concerns (Richardson and Paxton, 2010). Conversely, research has found that adolescents who report high levels of body satisfaction (positive body image) are more likely to display a

number of characteristics, indicating that high self-esteem and positive family and peer interaction act as a buffer against negative self-image.¹⁴

The relationship between negative body image and mental health problems such as depression and eating disorders is complex, but research indicates that body dissatisfaction is a strong predictor of depression, and may be associated with suicidal ideation or behaviours, especially in girls (Bearman and Stice, 2008; Brausch and Gutierrez, 2009; Dave and Rashad, 2009).

A2. Socio-Cultural Influences on Young People's Body Image

This section describes the socio-cultural influences on body image that are described in the literature as most important for young people. Some are generally understood to be located at the level of the individual (gender, ethnicity), some at the microsystem (family and peer relationships), and others at the exosystem (mass media). Body image exemplifies the importance of each of systems on the individual, as their influence is manifested in young people's embodiment and sense of themselves.

Body image is an intensely social phenomenon, and an equally intensely biological one. The onset of puberty is characterised by rapid physical change including natural increases of body weight (Warren, 1983). Adolescence is also characterised by emotional changes and typically involves social reorientation from family towards peers and romantic interests. The dramatic changes can lead to heightened concern with body image and increased body dissatisfaction (Clay et al., 2005) and can lead some young people to engage in high levels of body comparison and body change behaviours which can, in turn, produce negative self-concept (McVey et al., 2004).

A number of different factors contribute to adolescents' sense of self including academic competence; popularity and social acceptance; romantic appeal; and physical appearance (Harter, 1988, 2001, 2003). Of these factors, Harter suggests that young people's perception of their physical appearance is the factor which contributes most significantly to their overall sense of self. Evidence suggests weight and body type are the most potent influence on adolescents' self-concept (O'Dea, 2010; Pederson et al., 1994) and overweight adolescents are more likely to be socially marginalised than their non-overweight peers (Strauss and Pollack, 2003). Both people with clinical obesity and those with obesity and a co-morbid binge eating disorder have reported that weight and shape played significant roles in shaping their self-esteem (Legenbauer et al., 2011). McCabe and Ricciardelli (2001c) found that Australian adolescents with higher BMI had greater body dissatisfaction and reported engaging in more weight loss strategies than adolescents with lower BMI. Older Australian adolescents were more likely than younger adolescents to undertake strategies to decrease weight (young women) or gain weight or increase muscle mass (young men). Longitudinal research has found that body mass is an important predictor of changes in perceptions of body attractiveness and physical self-worth (Knowles et al., 2009). While

¹⁴ These characteristics and interactions include feeling intelligent, being comfortable talking to a father figure, a perception that one's family is well off and believing that their teachers are interested in them as people.

weight and size, then, may not be the only factors that impact on body image these components of body image dominate both the literature and the popular imagination.

Two opposing narratives dominate popular and clinical discourses relating to body weight. As Cliff and Wright (2010) point out, these two discourses – around obesity and overweight on the one hand, and anorexia and bulimia nervosa on the other – are usually treated quite separately, creating confusing and conflicting messages for young people in particular. In addition to these conflicting messages, young people's body image concerns commonly encompass issues beyond weight and body type and often include differences in physical appearance arising from disability, ethnic diversity, scars and burns among other things (Australian Government, 2009).

The following sections will describe in more detail the socio-cultural factors that influence body satisfaction and dissatisfaction as well as the interactions between body image self-concept and media, consumption, health and physical activity.

Gender

Appearance becomes more important for both male and female adolescents as they get older; however, as Abbott and Barber (2010) note, there are gendered differences in body ideals and different sources of body dissatisfaction for males and females.

Female body image

The increases in body fat associated with puberty mean that females move further away from the ultrathin cultural ideal as they move through adolescence in contrast to males, whose bodies often move closer to the cultural ideal of male bodies as they get older (Thompson and Chad, 2000). Body image is often characterised as a female concern because, as Rodin et al. (1984) note, the pursuit and preoccupation with beauty are central features of the female sex-role stereotype.

Women and girls are more likely to compare their bodies to other people, to have their body noticed and criticised by others, and to be in environments where weight-related topics are regularly discussed (Murray et al., 2007). Females consistently report higher levels of body dissatisfaction (Barker and Galambos, 2003; Cash et al., 2002; Cok, 1990; Davison and McCabe, 2006; Esnaola et al., 2010; Furnham et al., 2002; Knauss et al., 2007; Mellor et al., 2010), concerns about their weight (Grossbard et al., 2009), body shame and objectified body consciousness body surveillance (John and Ebbeck, 2008; Knauss et al., 2008; Slater and Tiggemann, 2010) and lower self-esteem (Brown, 2010) than their male counterparts. There is also evidence that women and girls who do not conform to prescribed beauty ideals are judged and discriminated against more than their male peers (Leavy et al., 2009; Sewell, 2010; Taylor, 2011).

Feminist beliefs may act as a protective factor against body dissatisfaction and disordered eating in women and a meta-analysis found that women who identified as feminists were significantly less likely to hold negative body attitudes and significantly less likely to have disordered eating patterns than other women (Clarke, 2010; Murnen and Smolak, 2009). These effects were found to be strongest for older women.

Longitudinal analysis found that although perceptions of being larger or more developed decreased girls' psychological well-being, such perceptions did not significantly influence changes in boys' psychological well-being over time (Vogt Yuan, 2010). Other longitudinal analysis found that appearance conversations with friends, appearance-based social comparisons, and body mass were the dominant source of body dissatisfaction among adolescent females (Jones, 2004).

Male body image

In contrast to females, male bodies move closer to the cultural ideal of the muscular, 'mesomorphic' body shape as they progress through adolescence and, consequently, body esteem generally increases for adolescent males as they get older (Duncan et al., 2004). Moreover, while social norms and expectations around femininity may be disproportionately associated with women's appearance and physicality, normative masculinity is not so narrowly conceived (Leavy et al., 2009). However, like female body image, male body image is multi-faceted and complex, and body dissatisfaction is thought to be wide-spread. Pope et al. (2000) describe the discussion of body dissatisfaction among boys and men as a 'social taboo' and, indeed, Australian adolescent males have reported reluctance to discuss body image because it was seen as a feminine or gay issue (Hargreaves and Tiggemann, 2006).

While most studies indicate that between 15 and 43 per cent of men are dissatisfied with their bodies (Schooler and Ward, 2006), body dissatisfaction may be higher for some groups of men and there may be different dominant sources of body dissatisfaction amongst different groups of men.¹⁵ In particular, males who reach physical maturity later than their peers express greater body dissatisfaction (Cohane and Pope, 2001; Piexoto Labre, 2002). Although most Australian adolescent males who took part in Hargreaves and Tiggemann's (2006) study maintained that they are satisfied with their appearance, some conceded their physical appearance was more important to them than they liked to admit. Mellor et al. (2010) found that, despite reporting lower levels of body dissatisfaction than women, Australian men in fact placed greater importance on their appearance than women. Tiggemann et al. (2008) explored Australian men's level of satisfaction with six aspects of their bodies (body weight, muscularity, head hair, body hair, height and penis size) and found that they were dissatisfied with all six aspects of their physicality, but where most concern was directed to body weight, penis size and height which was closely connected to men's overall appearance self-esteem.

Many people strongly associate muscularity with masculinity. Men commonly express a desire to gain muscle in their upper bodies (McCabe and Ricciardelli, 2001a). Several studies have contended that male body dissatisfaction is most commonly related to muscularity rather than thinness (Grieve et al., 2005; Grossbard et al., 2009; Jung et al., 2010; Labre, 2005; Pope et al., 2000; Pope et al., 1999). However, a review of literature on body

¹⁵ For example, two recent studies (Davis, 2010; Labre, 2005) have found high levels of internalisation of media standards of male beauty and extremely high levels of body dissatisfaction amongst American college-age men.

dissatisfaction amongst adolescent males shows that teenage boys are about equally divided between wanting to lose weight and wanting to increase weight and to increase the size and mass of their muscles (McCabe and Ricciardelli, 2001a, 2004; Stanford and McCabe, 2002).

The literature is divided about whether concerns to build muscularity or lose body mass has a great negative impact on young men. While concern with weight and muscularity were common (Jones et al, 2008), concern with weight loss had a greater negative impact on boys' body image than did concern with muscularity. Similarly, disordered eating and dietary restraint were found to be associated with body fat dissatisfaction but not with muscularity dissatisfaction in both gay and heterosexual men (Smith et al., 2011). In contrast, a number of studies found that strong commitment to muscularity ideals is associated with body dissatisfaction (Jones, 2004), poor self-esteem and higher levels of depression (McCreary and Sasse, 2000) among adolescent males. Body dissatisfaction in males has also been found to be associated with poor psychological adjustment, eating disorders (Keel et al., 1997; Leon et al., 1995), binge eating behaviours (Harmatz et al., 1985), steroid use and exercise dependence (Furnham and Calnan, 1998; McCabe and Ricciardelli, 2001a; Neumark-Sztainer et al., 1999).

In summary, several risk factors have been found to be associated with body dissatisfaction amongst males, including concern with weight loss; disordered eating, dietary restraint; binge eating; strong commitment to muscularity; steroid use; exercise dependence; reaching physical maturity later than peers; and poor psychological adjustment.

Ethnicity

Like gender, ethnicity plays an important role in influencing body satisfaction and dissatisfaction. Dominant cultural influences vary between communities and different communities look to different public and community figures for comparison. The effect of ethnicity is complex, especially as ethnic identity can change over the life course (Hesse-Biber et al., 2010) and may be mediated by the homogeneity or cultural and ethnic diversity of one's peer group (Abrams and Stormer, 2002).

In a US high school study, Abrams and Stormer (2002) found that African American adolescent females with ethnically heterogeneous peer groups had significantly higher awareness and internalisation of socially sanctioned standards of appearance than those without mixed friendship groups. While this research has not been tested in an Australian context, it emphasises the importance of ecological as well as individual characteristics on the internalisation of norms and standards.

There is a considerable literature on the influence of ethnicity on body satisfaction and dissatisfaction and socially prescribed standards of beauty vary widely between ethnic communities. For example, African American women have been found to prefer a larger body size and be more likely to underestimate of their body weight than other American women (Cox et al., 2010). In Australia, there are similar cultural differences in perspectives about optimal body sizes. Indigenous Australians and people from Middle Eastern and Pacific Islander backgrounds are more likely to believe that larger body sizes are a marker of

health than people from Caucasian or Asian backgrounds.¹⁶ There is evidence to suggest that boys and young men from these cultural groups are more likely than others to desire 'bigness', muscularity and strength (McCreary and Sasse, 2000; McCreary et al., 2005; O'Dea and Caputi, 2001).

These studies are important because they contradict the common perception that being overweight is always related to body dissatisfaction and emphasises that this correlation is dependent on a range of contextual factors. Furthermore, they point to the possibility that there are some factors which protect against body dissatisfaction that operate in disadvantaged and minority communities. Further exploration of these factors, how they operate and the conditions that produces them is vital for effective health campaigns which target these communities.

Sexuality

There is a large literature regarding the role of sexuality in body satisfaction and dissatisfaction. Several studies comparing body image perceptions of lesbians, gay men, and heterosexuals (Brand et al., 1992; Conner et al., 2004; Gettleman and Thompson, 1993; Herzog et al., 1992; Siever, 1994) found that heterosexual women and gay men were more preoccupied with their weight and had greater body image disturbances than the other groups.

Much of the research investigating the interaction between sexuality and body image has focused on heterosexual and homosexual men. Gay men idealise a thinner body shape than do heterosexual men (Brand et al., 1992; Herzog et al., 1991; Siever, 1994) and report wanting to be more muscular than heterosexual men (Kaminski et al., 2005; Yelland and Tiggemann, 2003). The muscular body ideal is particularly prevalent in gay social and cultural settings and Duncan (2010) found that having a muscular body generates both social status and self-esteem amongst gay men.

Homosexuality has been found to be a specific risk factor for eating disorders in men and that, after controlling for differences in depression, self-esteem and comfort with sexual orientation, gay men were more likely to report disordered eating behaviours (Boisvert and Harrell, 2009; Russell, 2002), body dysmorphic disorder (Boroughs et al., 2010), exhibit greater fear of becoming fat (Kaminski et al., 2005; Strong et al., 2000) and report higher levels of body dissatisfaction than heterosexual men, regardless of ethnicity (Heinberg et al., 2009; Udall-Weiner, 2009).

There is a small literature on how lesbians are affected by society's emphasis on physical appearance for women. Although Brown (1987) argues that lesbians who accept their sexual orientation appreciate their bodies, a number of studies reported no differences in body satisfaction between lesbian and heterosexual women (Beren et al., 1996; Streigel-Moore et al., 1990). Like other women, lesbians internalise socialcultural norms and are affected by both eating problems and body image disturbances (Thompson, 1995) and studies have

¹⁶ Some of these differences may be confounded by differences in socio-economic status (SES). See the Socio-economic Status section on page 85 for more details.

found that both lesbian and heterosexual women reported dieting more frequently than either heterosexual or homosexual men (Bergerson and Senn, 1998; Ludwig and Brownell, 1999).

Conflicted gender identity may also play a role in influencing body image satisfaction and dissatisfaction and recent Finnish research found that men (but not women) with conflicted gender identity had higher levels of body dissatisfaction (Algars et al., 2010).¹⁷

There are still gaps in knowledge regarding the influence of sexuality on body satisfaction and dissatisfaction. There is little longitudinal data on this topic and a scarcity of information regarding the role of the Internet in influencing gay men's body image (Filiault and Drummond, 2009b) and the body image of lesbian women and other sexual minorities.

To summarise, identification as homosexual, male-male sexual experience and conflicted gender identity are risk factors for body dissatisfaction amongst males while, in contrast, identification as homosexual, female-female sexual experience and conflicted gender identity may be a mild protective factor for body dissatisfaction amongst females.

Family relationships

Parent-child interactions and interactions with siblings and other family members and carers are important influences on young people's overall wellbeing, but ultimately highly variable. In particular, parents and family members play an important and often gendered role in transmitting or mediating the messages about ideal bodies to adolescents (McCabe and Ricciardelli, 2001b) and negative communication from family members has a significant impact on body dissatisfaction and disordered eating.

Kichler and Crowther (2009) found that negative communication was associated with body dissatisfaction and maladaptive eating attitudes and behaviours. There is evidence that parents indirectly teach adolescents to be dissatisfied with their bodies by modelling body dissatisfaction and dieting behaviours (Haines et al., 2008) and low levels of family expressiveness (Babio et al., 2008) and lack of support from parents (Bearman et al., 2006) have been found to be associated with body dissatisfaction amongst adolescents.

Young men are generally less likely to be influenced by these family discourses than are girls (although there are important qualifications to this finding with Indigenous young men (see Section A3). Australian research has found that feedback from mothers and fathers (and male and female peers) is more significant for young women than young men. Mothers are more likely to influence body image, while fathers exert greater influence on behaviours such as exercise and eating (McCabe and Ricciardelli, 2001b). Similarly, research with French adolescents (Rodgers et al., 2009b) found that teenage girls perceived more maternal comments regarding both their own weight and shape than did teenage boys. Father-child relationships may have more subtle influences on children's body image and qualitative

¹⁷ Men with a conflicted gender identity with male-male sexual experience were more likely to have body dissatisfaction and disordered eating than other men with a conflicted gender identity. Conversely, among women with a conflicted gender identity, female-female sexual experience was related to less body dissatisfaction.

research with young African American women found that the closeness of father-daughter relationships can strongly affect a daughter's body image and self-esteem (Madison, 2010).

The behaviour and opinions of siblings also has a significant effect on body dissatisfaction and disordered eating. Coomber and King (2008) found that mothers and sisters were equally important modelling agents and that sister modelling directly affected bulimic behaviours and dietary restriction in young Australian women.

To summarise, negative communication from family members is a risk factor for maladaptive eating attitudes and disordered eating; although boys are less likely to be influenced by family discourses than are girls.

Peer relationships

Although both male and female Australian teenagers rated opposite-sex peers as the most important influence of their ideal body images (Stanford and McCabe, 2002), the effect of appearance-based messages from peers seems to be stronger for females. Australian female adolescents are more likely to receive, and accord importance to, peer feedback that they should alter their weight than males (McCabe and Ricciardelli, 2001c; Stanford and McCabe, 2002). However, peers still exert a significant influence on adolescent boys and men and many of these findings may also be relevant to males (Grogan and Richards, 2002).

Researchers have become increasingly interested in 'fat talk' in peer groups--negative self-statements about one's physical appearance in a social context (Nichter, 2000; Nichter and Vuckovic, 1994). 'Fat talk' is considered a common social phenomenon amongst adolescent girls and women (Britton et al., 2006) and has been found to be associated with several negative attitudes and behaviours. Jones (2004) found that appearance conversations with friends and appearance-based social comparisons were dominant sources of body dissatisfaction among adolescent girls. Similarly, Rudiger (2010) found that 'fat talk' between university-aged female friends was related to body image cognitive distortions and disturbed eating attitudes yet, interestingly, women who engaged in 'fat talk' with friends reported higher perceived friendship quality for these relationships.

Peer group norms can also have a significant effect on the dietary behaviours of young people (and adults). Wills (2005:97) contends that food and eating practices are an important part of adapting to new social contexts and notes that young people in her study 'often voiced a desire to differentiate from the food ethos present in their family' and often adapted their food and eating practices when with particular groups of peers.

Appearance-related feedback from strangers also has a significant effect on body image and even ambiguous appearance-related feedback from strangers can make people more likely to engage in dieting and disordered eating behaviours (Herbozo and Thompson, 2009). A number of researchers have also found that non-verbal and subtle forms of appearance-related feedback are common in contemporary society and are that these are also associated with body image problems and disordered eating (Tantleff-Dunn and Gokee, 2002; Thompson et al., 1999a; Thompson et al., 1999b).

To summarise, the risk of body dissatisfaction amongst young people is increased by comparison with peers; appearance evaluation by others; 'fat talk' and peer conversations regarding appearance (regardless of whether they are negative, neutral or positive); appearance-related verbal and non-verbal feedback from strangers; and dysfunctional peer group norms (such as unhealthy or disordered eating dominating within a peer group).

Socio-economic status

Community norms play a significant role in mediating mainstream media ideals and in shaping young people's attitudes towards their own bodies. Obesity and unhealthy weights are more prevalent among people from socially and economically disadvantaged backgrounds (Goodman, 2003; Sobal and Stunkard, 1989).

Studies with economically disadvantaged (Wills et al., 2006) and ethnically diverse young people (Abrams and Stormer, 2002; O'Dea, 2010) have found some overweight adolescents are less likely to express body dissatisfaction or perceive themselves as 'too fat' because they are embedded in a culture where larger body sizes are considered healthy and a mark of prosperity. Wills et al. (2006) found that disadvantaged overweight Scottish young people generally accepted their body size and shape and rarely engaged in body changing behaviours or expressed overall body dissatisfaction. Indeed, Wills et al. found that many young and older people in the disadvantaged community they studied viewed higher body weights and larger shapes as a genetic inevitability.

Australian children from low SES backgrounds have been found to be more likely to be overweight, more likely to skip breakfast, to perceive themselves to be 'too thin', to be trying to gain weight and less likely to receive dietary or weight control advice than higher SES backgrounds (O'Dea and Caputi, 2001). O'Dea and Caputi (2001) found that overweight girls of middle/upper SES had lower physical self-esteem than any other groups of Australian children and adolescents and that, although they were more likely to be overweight, boys from low SES backgrounds had the highest physical self-esteem of all groups surveyed.

Research about beliefs and perceived body image norms among African American and Latino American teenagers (Barroso et al., 2010) found that cultural eating explained the greater acceptance and tolerance of overweight in these communities than in other American population groups. Limited income and additional culturally-specific factors, including the popularity of hip-hop fashion and equating thinness to illness (and HIV in particular) contributed to peer and familial normative beliefs.

A qualitative study with well-educated, middle-class parents of girls in Canada (Tamburro, 2010) found that parents were strongly committed to instilling healthy behaviors in their daughters; emphasised the importance of physical activity and nutrition; and used family leisure purposively, with a strong emphasis placed on health. Young people from other backgrounds may not have such supportive environments and Wills et al. (2006) found that disadvantaged Scottish young people were rarely supportive of friends or family who attempted to lose weight and frequently disagreed with others' perceptions of overweight and obesity.

To summarise, living in a socio-economically disadvantaged community and being embedded in a culture where larger body sizes are considered healthy can be a protective factor against body dissatisfaction. However, there are several other body image-related risk factors related to socio-economic disadvantage.

Media use

There is a considerable literature on the role that mass media, fashion and advertising play in developing, promoting and distributing our cultural ideals of beauty. In recent years, there has been much research and popular discourse around the way in which current media represents body image and the impact that this has on young people, and young women in particular (Knauss et al., 2008; Ring, 2000; Villani, 2001). This focus on media portrayals is largely based on evidence that comparing one's body with others poses a significant risk factor for body dissatisfaction (Darlow and Lobel, 2010) and that this risk may be particularly heightened when comparisons are made with the often idealised images that circulate in mainstream media.

Media consumption is influenced by a variety of socio-cultural factors, including age, gender, ethnicity and peer group. The sources, content and volume of media consumed by Australian young people is likely to vary dramatically but little is known about young Australians' current patterns of media consumption and how this influence body satisfaction/ dissatisfaction for the young people in the target groups of this study. The most recent and comprehensive Australian source of information on the media consumption patterns of young Australians (Australian Communications and Media Authority, 2007) reports data from 2007. It is likely that young Australians' media consumption has significantly altered in the subsequent five years as the media landscape has changed considerably in this period. For example, the increased availability and popularity of social media websites and online gaming and rapid the uptake of smartphone technology, hand-held devices and tablet computers have shifted the way young people use media.

However, studies have found that exposure to various forms of media can have a significant effect on body dissatisfaction and distortions, particularly in women. Media exposure impacts on female body image in relation to eating disorder behaviour (Mazzeo et al., 2007), self-objectification (Myers and Crowther, 2007), body dissatisfaction (Bell et al., 2007; Myers and Crowther, 2007; Dalley et al., 2009), and self-esteem (Jung and Lee, 2006). Shoger (2010) found that overall media consumption had a negative effect on body image for both men and women, regardless of content, while Wong (2009) found a strong correlation between media exposure and negative body image for both Caucasian and non-Caucasian women.

These findings have been tested for a variety of media. Television viewing (even for periods as short as 30 minutes) has been found to alter women's perceptions of their bodies (Myers and Biocca, 1992). Exposure to a television situation-comedy depicting thin and highly physically attractive characters was show to have a detrimental effect on female viewer's body satisfaction (Want et al., 2009) and, unsurprisingly, heavy viewers of body-image related television programs were found to be more likely to report body dissatisfaction than others (Belden, 2011). Interestingly, exposure to hip hop videos, which typically feature high

levels of sex and an over-representation of smaller body sizes and 'thin' females (Zhang et al., 2010) had no significant effect on African American women's body image (Zhang et al., 2009). At least in the United States, it appears that media effects on body image are mediated by strong ethnic identity. Viewing thin-ideal videos was related to less body dissatisfaction, less drive for thinness, and lower bulimia action tendencies for African American women with stronger ethnic identity. Conversely, African American women with weaker ethnic identity displayed the reverse results (Zhang et al., 2009).

Photographic images (Dens et al., 2009; Thomsen et al., 2004) and magazine exposure (Lokken et al., 2009) have been found to influence women's body image and perceptions of their own physical abilities. Lokken et al. (2009) found significant correlations between magazine exposure and drive for thinness, and between preference for beauty and fashion magazines and internalisation of socio-cultural standards of appearance. They also found that awareness and internalization of socio-cultural standards of appearance were significant predictors of body dissatisfaction, drive for thinness and bulimic symptoms. Media popular with adolescent boys and men have also been found to impact adversely on their body image and two studies found that male users of video games that emphasise the body has significantly lower body esteem after using these games (Barlett and Harris, 2008).

Tiggemann and Miller (2010) found that the internet represents a powerful socio-cultural influence on young Australian women's lives and that exposure to appearance-related materials on the internet and magazine reading (but not television exposure) were found to be correlated with greater internalisation of thin ideals, and greater appearance comparison, weight dissatisfaction, and drive for thinness.

In general, as discussed in Section 0, body image concerns have historically been associated with young women, but there are increasing pressures on young men. Adolescent girls have been found to be more susceptible to media images and feel more pressure to conform than adolescent boys (McCabe and Ricciardelli, 2001c). Most research on this area has focused on adolescent girls and women. While young men have traditionally been less influenced by media body ideals, there is evidence to suggest this influence is increasing as advertising is starting to use well-built male bodies to promote both video games and men's products (Miller and Summers, 2007; Ring, 2000; Waite, 1998). Researchers and commentators have suggested that these images are increasingly a site of body comparison and a source of body dissatisfaction for teenage boys and men (Lorenzen et al., 2004). In addition to changes to the 'ideal' male body type depicted in media portrayals, there has been an increase in the overall number of male figures used in advertising and media in recent decades and evidence to suggest that objectifying portrayals of men in the media are also increasing (Leit et al., 2001; Pope et al., 2001; Rohlinger, 2002).

Not all people are equally affected by media exposure. The way media messages are internalised or buffered is often closely related to individual personality traits and the discourses that circulate within family and peer networks. Media exposure can be particularly damaging for people with eating disorders and can act as a stimulus to triggers negative body image states in people with these disorders (Legenbauer et al., 2008). Media reports can also unintentionally glamourise or validate eating disorders. An analysis of the construction of female obesity and female anorexia nervosa in popular magazine articles

(Whitehead and Kurz, 2008) found that while both obesity and anorexia were described as medically deviant, dangerous, and largely physical, anorexia was constructed as more feminine, more powerful and more desirable than obesity.

Men who were less invested in their appearance and who had a low social comparison tendency are less likely to be dissatisfied with their bodies or have reduced appearance self-esteem after viewing mesomorphic images than other men (Krawiec, 2009). Similarly, women with low levels of general self-determination have been found to be more likely to feel pressure from the media to be thin, to be dissatisfied with their bodies and to be concerned about the quantity of food than women with high general self-determination (Mask and Blanchard, 2011).

The effect of media exposure may also be mediated or intensified by ethnicity. McCabe et al. (2005) found that although they were exposed to fewer media messages encouraging weight loss, Indigenous adolescents engaged in more body modification strategies than non-Indigenous adolescents. The researchers hypothesise that although Indigenous adolescents reported being exposed to fewer media messages than their non-Indigenous peers, media exposure seemed to have more impact on Indigenous young people.¹⁸ In contrast, Debraganza and Hausenblas (2010) found that while Caucasian women reported higher body dissatisfaction after viewing mass media ideal images, African American women reported no differences in body dissatisfaction after viewing either mass media ideal images or control images. This finding is important as it indicates that ethnic identity may protect against body dissatisfaction for some woman whose appearance differs markedly from mainstream media images ideals.

Recent research with Australian adolescent males (Hargreaves and Tiggemann, 2006) found that they do not believe that the mass media influences their body image. However, experimental research in another study (Krawiec, 2009) found that men who viewed images of mesomorphic male bodies chose heavier dumbbell weights than those who viewed control images. It seems likely that many males are unaware or unwilling to admit the influence that media consumption has on their body image due to the social stigma of males discussing body image (Hargreaves and Tiggemann, 2006).

It is clear that young people are not passive consumers of media images and there is evidence that Australian young people are dissatisfied with the restricted range of body sizes and objectification of women in media imagery (Diedrichs et al., 2011). American adolescent males have expressed similar frustration and anxiety regarding media-promoted male body images (Pompper, 2010).

Media exposure, regardless of content, may be a risk factor for body dissatisfaction amongst adolescents and exposure to certain types of media – including body-image related television programs; television shows depicting physically attractive characters; magazines;

¹⁸ They contend that Indigenous teenagers may be less aware of the media messages they were exposed to and their impact or that they may be more reluctant to report that media exposure has influenced their behaviour.

body-emphasising video games – poses a particular risk to body dissatisfaction. However, a number of factors affect the degree to which media messages are internalised or buffered.

Adolescent girls are generally more susceptible to media images than adolescent boys. Media exposure may also have more impact on Indigenous young people than other Australian young people. Media exposure is a particularly strong risk factor for body dissatisfaction and pathological behaviours amongst people with eating disorders while, in contrast, having lower social comparison tendency and being less invested in one's appearance may protect against media-induced body dissatisfaction amongst males.

Fashion and clothing

The influence of clothing on body images has a number of dimensions. People with larger or unusual body shapes may have fewer clothing choices available to them and may be unable to wear many clothes that are considered fashionable. Smaller size clothing has been found to have a positive effect on body image. Research examining the effect of clothing size on self-esteem and body image found that women felt more positive about their bodies when they were able to fit in a smaller size (Kinley, 2010). This effect has been found to be particularly strong for younger women.

Disadvantaged British adolescents who took part in qualitative interviews cited difficulty in finding 'nice' clothes as significant issue affecting their self-esteem and wellbeing. Young people in this study attributed their inability to access what they deemed 'nice' clothes to the fact that they were predominantly overweight and obese and found it difficult to find fashionable clothes in larger sizes (Wills et al., 2006). This finding is likely to have significant implications for the disadvantaged Australian young people that are the focus of the present study. In addition, and perhaps more significantly for Indigenous Australian young people, and people who are homeless, people from lower SES backgrounds may also be unlikely to be able to afford to buy new clothing or clothes that are considered to be fashionable. Farrugia (2010) found that homeless Australian young people reported discomfort and embarrassment as a result of being unable to buy new clothing or access laundry facilities to wash their clothes.

Being able to buy new clothing may be less of an issue for males as the socio-cultural norms governing male dress are not as stringent as those governing female clothing. Male clothing styles are generally more muted and there is less social pressure for men to wear 'stylish' or fashionable clothing. However, male clothing can be an important social marker and studies of particular social groups, such as gay male athletes (Filiault and Drummond, 2009a) have found that clothes serve as a means by which men gauge one another's personalities, relative wealth and provide a means to display their bodies.

Some disadvantaged and vulnerable young people may be less able to wear 'stylish' or fashionable clothing due to the higher prevalence of overweight and obesity amongst socio-economically disadvantaged people in Australia and consequent difficulties in finding 'stylish' or fashionable clothing. Importantly, low disposable incomes may limit disadvantaged young people's ability to access what they deem 'nice' clothes, which may

have negative implications for their peer group and social interactions, self-esteem and make them at greater risk of body dissatisfaction.

Physical activity

The research shows that there are significant differences in the way different communities evaluate 'what is healthy'. For some, health and notions of what is unhealthy is directed towards views about healthy and unhealthy weights. Taylor (2011) found that adolescents of all sizes and social groups, including teens who were overweight, were critical of people who displayed body fat. However, it is important to note that there are cultural and possibly socio-economic status (SES) differences in perspectives about optimal body sizes, as described in Section 0.

The relationship between physical activity and body image is an area that needs further exploration. Duncan et al. (2004) reported that boys and high socioeconomic status children reported greater levels of physical activity than girls and low socioeconomic status children but found no significant relationships between body image and physical activity. However, Swami, et al. (2009) found that women participating in leanness-promoting sports experience greater body dissatisfaction than women in other sports or non-athletes. Similarly, male rugby union players in the UK expressed varying degrees of body anxiety and used sport, and health-related practices, to conceal body anxiety concerns (Darko, 2009).

Compulsive exercising has been associated with body image concerns. Goodwin et al. (2011) demonstrates that media exposure can influence compulsive exercising amongst young men and women. After controlling for other issues, messages to become more muscular and media pressure to be thin significantly predicted compulsive exercise in boys. Media pressure to be thin was the only significant predictor of compulsive exercise for young women.

A3. Indigenous young people

Defining and contextualising Indigenous Australians

The most commonly used definition of Indigeneity in Australia used by the Australian Bureau of Statistics (ABS, 2010), and the one employed in this research, is that an Aboriginal or Torres Strait Islander person is someone who:

- Is of Australian Aboriginal or Torres Strait Islander descent;
- Identifies as an Aboriginal or Torres Strait Islander person; and
- Is accepted as such by the community in which s/he lives or has lived.

As many Aboriginal academics have noted, the notion of 'Aboriginality' and Indigeneity itself is a construct of colonialism (Baker and Worby, 2007; Langton, 2003; Moreton-Robinson, 2004). Indeed, legal historians have noted that 'Aboriginality' has more than seventy legal classifications and definitions (Royal Commission into Aboriginal Deaths in Custody, 1991).

Indigenous Australians are amongst the most disadvantaged group in Australia and face multidimensional health, social, educational and economic challenges, which result in

significantly reduced life expectancy for many Aboriginal people. In general terms, we know that poor body image is associated with poor perception of self and can lead to excessive dieting, disordered eating and other deleterious effects in young people (Cinelli and O’Dea, 2009). Poor body image is associated with poor long term health outcomes, but as yet we know very little about how body image interacts with other pressures and challenges in the lives of Indigenous young people.

Finally, it is important to note (as others working in this field have done) that many Aboriginal people have an ambivalent relationship to research (Mellor et al., 2004). Many Indigenous communities have been the subjects of research that has disregarded community-based social, cultural and economic priorities and disempowered communities in research processes (Smith, 1999). Research that does not seek to fully understand the perspectives of the participants involved and where Indigenous values are found wanting in relation to a western value framework is harmful to indigenous people and communities. Foley (2000) argues that research conducted with Indigenous Australians can often be described as ‘neo-colonial and paternalistic’ as it providing little benefit to the communities involved.

Smith (1999) suggests that to avoid colonising research it is important for members of Indigenous communities to have a full understanding of the research, the questions, purpose and process, and to be informed as to how the findings will be used to the benefit of the community. This entails identifying the community elders and representatives, and negotiating respectfully with them. Body image research has the potential to touch on complex inter- and intra-familial and intra-community issues and well as cultural ways of viewing the world. It is important, therefore, that the research process is respectful of the community dynamics that underpin young people’s belonging within certain communities and that research processes are understood and guided by community elders.

Indigeneity and body image

Mission Australia’s *National Survey of Young Australians* has, over several years, consistently found that Indigenous young people rank body image as one of their three highest concerns. In the most recent survey, 28.4 per cent of Indigenous respondents reported body image as a major concern compared to 33.1 per cent of all respondents. In previous years, Indigenous respondents were even more likely than their non-Indigenous peers to rank body image as an issue of personal concern. For example, 34.1% compared to 31.1% in 2010 (Mission Australia, 2010, 2011). Almost 46,000 young people were surveyed in 2011 and the surveys are distributed through all Australian secondary schools, the survey is also distributed through some primary schools, university and higher education providers and non-government organisations and the breadth and sources of responses is unclear.

The question relating to young people’s personal concerns presents respondents with a list of 16 options including an ‘Other (please state)’ option. In 2011, respondents were asked to provide rankings for their top 3 items of concern in order of importance. The survey itself does not offer any indication of what young people’s body image concerns might be about, but does indicate high levels of concern. The survey has an accompanying qualitative section in the online survey. Typical responses in the qualitative component refer to media impact

on body image and are critical in nature (Mission Australia, 2010). This qualitative component is not currently analysed by Mission Australia in terms of Indigenous or non-Indigenous status. This survey suggests that there is a need for further research into the issues of concern for young Indigenous Australians in order to find out more about the factors that mitigate against negative self image.

There are several important studies that have addressed body image among young Indigenous Australians (Cinelli and O'Dea, 2009; McCabe et al., 2005; Mellor et al., 2004). These studies have focused on elements of body image related to Body Mass Index and not on other components such as skin colour, hair, clothing outlined in Section 1 of this literature review. Inquiries into Indigenous health have noted that there are differences between the typical body shapes and sizes of Indigenous Australians and those of the general Australian population (House of Representatives Standing Committee on Family and Community Affairs, 2000). A population-level survey of Australian school children (O'Dea, 2008) found relatively high rates of both overweight and underweight adolescents amongst Indigenous students. The small body of research on body image for Indigenous groups has been focused exclusively on body size and weight, and has drawn on an aligned (but still small) body of work that explores the issues among other groups where these higher rates of overweight body types have been found – specifically groups with low socio-economic status (SES), Pacific Islander and Middle Eastern/Arabic backgrounds. To some degree, key Australian studies that have explored body image among Indigenous Australian young people have sought to understand some current patterns behaviour and thought through the recognition of intergenerational experiences of food insecurity and poor health, and the need to maintain cultural identity and socially cohesive practices in the context of colonisation. Like other researchers in this area, we considered this broader literature that pertains to other groups with these key shared experiences an important starting point for understanding the issues facing young Indigenous Australians (McCabe et al., 2005).

In general, this body of work suggests that Indigenous young people (and young people from the other groups mentioned above) may be less concerned and dissatisfied with body weight and shape than non-Indigenous adolescents (Mellor et al., 2004; O'Dea, 2008). Indeed O'Dea (2008) found that Indigenous young women were less likely than their Caucasian or Asian peers to perceive themselves as 'too fat'. However, while this group are less likely to perceive themselves as too fat, they are more likely to engage in body modification strategies than non-Indigenous adolescents (including strategies to lose weight, increase weight and increase muscle mass).

We also need to develop a stronger understanding of the seeming contradiction between the Mission Australia survey results and studies of Indigenous young people and body image. It may be that respondents to the Mission Australia surveys are reporting dissatisfaction with elements of body image not covered in the scope of the work of Cinelli and O'Dea (2009), McCabe et al. (2005) or Mellor et al. (2004) or, alternatively, it may be that the ways that Indigenous young people evaluate their body image are changing.

Consistent with studies of non-Indigenous young people, Indigenous girls were more likely to report body dissatisfaction and to engage in weight-loss strategies than Indigenous boys (McCabe et al., 2005). However, using data from the same study, Mellor et al. (2004) found

these gender differences in body image importance and body satisfaction amongst Indigenous Australian teenagers were not significant. Within this general pattern, it was found that young Indigenous males placed more importance on muscle size and strength than females, and that rural Indigenous young people placed more importance on weight than urban participants. These findings are reinforced by recent comparisons between Indigenous and non-Indigenous Australian young people which found that Indigenous males showed the greatest tendencies to gain weight and were more likely to believe that they should build up their bodies. We need further research to understand the thinking and habits that seem to encourage body building as a desired activity in the context of what is generally fairly low dissatisfaction with weight.

There is a considerable literature in Australia that points to the importance of and complexity that surrounds skin colour for Indigenous Australians (Moreton-Robinson, 2004). Historically, skin colour significantly affected how people were treated and how they perceive themselves and their identity. Under the colonial system, Indigenous Australians were categorised according to their 'blood' quantum and presented as categories such as 'full-blood', 'half-caste', 'quadroon' and 'octoroon'. Legislation which defined the eligibility criteria for benefits and many rights and freedoms was based on these categories in most Australian States until the late 1950s. In practice, this 'blood' quantum was based on nothing more than the observation of skin colour (Gardiner-Garden, 2000; Wood, 1998) and, as a consequence, skin colour had profound impact on Indigenous Australians treatment and life opportunities.¹⁹ While the 'blood' quantum is no longer used to categorise Indigenous Australians and is now widely regarded as racist and divisive (Dodson, 1994; Nura Gili Indigenous Programs Centre, 2011), these distinctions continue to be imposed on Aboriginal people today. Some observers continue to believe that it has bearing on individual's degree of Aboriginality and Indigenous people are often called on to prove their identity to white society (Baker and Worby, 2007; Barrington et al., 2010; D'Cruz, 2011; Dodson, 1994; Drape, 2010; Heiss, 2007b). As Louise Taylor notes, while Aboriginality is an identity readily attributed to many darker skinned children growing up in Australia, this is not necessarily the case for all Indigenous children and in the past many Indigenous children were encouraged by their families to attribute their physical appearance to ethnicities other than Aboriginality (Taylor, 2003). Indigenous people with lighter skin have described being accused of not being 'authentically' Aboriginal and also, conversely, contending with racial slurs because of their Indigeneity (Behrendt, 1995; Foley, 2000; Perkins, 2007; Taylor, 2003; Wilson, 1997). Ronald Wilson describes a sense of 'unbelonging' experienced by many Indigenous Australians, who are neither 'white enough' to be white or 'black enough' to be black (Wilson, 1997).

The significant influences considered in this literature are primarily concerned with parental and family advice and media messages. Indigenous adolescents are more likely to receive parental and family advice encouraging them to gain weight (Cinelli and O'Dea,

¹⁹ For example, as noted in submissions to the *National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from their Families*, skin colour was the most significant criterion in determining which Indigenous children were forcibly removed from their families between 1900 and 1970 (Wilson, 1997, cited in Docker and Gerhard (2000).

2009), and young men are more likely to be influenced by this advice than young women. It has been suggested the the desire for weight gain and increased muscularity reflects a desirable work ethic, avoidance of laziness and the an indication of their ability to care for (and be cared for by) others (Becker, 1995). Furthermore, Becker (1995) and O’Dea (2009) concur there are also traditional differences in diet, family eating patterns, family structure; cultural norms in the meaing of eating behaviours, the role of women in food preparation, feeding and nurturing, cultural beliefs values, practices regarding food, eating, feasting weigth and health that shape the health habits and norms of differenct cultural groups. While the centrality of cultural practices of young peoples broader families is potentially very significant, it is also important to recognise that most Indigenous young people are not fully immersed in traditionally oriented cultures, but straddle at least two cultural fields. Mellor et al (2004) argue it is important to capture the multidimensionality and dynamic interactions between communities and people’s tendencies to move between them. It is therefore important to capture how young people make sense of and negotiate the potentially conflicting messages they receive about body image and positive health.

McCabe et al.’s (2005) study found Indigenous participants were exposed to fewer media messages that encourage weight loss but that these appeared to have a higher impact than for other groups. These researchers argue the need for further studies that examine how Indigenous young people are interpreting media messages and the impact this has on their body image and body change strategies.

The broader literature suggests a complex relationship between media use and the sense made of the messages received by those in non-mainstream groups. Importantly, there is literature to suggest that cultural difference from the mainstream can operate as a buffer from internalising potentially negative messages associated with the idealised images promulgated in the mainstream media (McCabe et al, 2005; Wyn and White, 2009).

There are myriad racialised stereotypes about Indigenous people (see, for example Heiss, 2007a; Korff, 2011) that have been destructive to Indigenous people. Several authors have noted colonial racialised ideologies and practices were often sexualised and focused excessively on the genitals of Indigenous people and other people of colour (Fannon, 1967) and described the sexuality of Indigenous people and other people of colour as both repugnant and fascinating (Young, 1995). The history of sexual contact between and Indigenous and non-Indigenous people in Australia is complex and often violent, and, as Evans (1982) points out, ‘[i]nter-racial sexual relations of frontier and post-frontier existence [fell] mainly into the patterns of outright capture and rape, prostitution and concubinage’. Indigenous women were termed ‘black velvet’ and were often called upon to perform sexual ‘duties’ for white male employers (Huggins, 1998).

In the context of this history, it is not surprising many Indigenous men and women report racialised references to their physical attractiveness. A controversial NSW Aboriginal Land Council ant-racism campaign in the early 1990s featured billboards of an Aboriginal woman with the slogan ‘*They say I am too pretty to be an Aboriginal*’ [sic] (Fernandes and Begg, 1994; Koori Mail, 1993) and Indigenous women commonly report receiving similar comments (Albert, 2005; Barrington et al., 2010: comments section; Debelle, 2001; Jan et al., 2004: 18).

The continued salience of skin colour as an issue and site of discrimination is evident in the recent antidiscrimination court case when nine Indigenous Australians won a case of discrimination against journalist Andrew Bolt when he accused them of choosing 'to identify as black for personal or political gain, to win prizes and places reserved for real, black Aborigines and to borrow "other people's glories"' (Marr, 2011). This court case illustrates some of the shifts in the way skin colour has come to be used as a way of belittling and demeaning Aboriginal people. The slur being 'too white' or 'too black' to be Aboriginal still carries symbolic violence but is used to deny people different rights and recognitions than in previous historical times. This issue remains significant in Indigenous communities and warrants investigation as a significant source of body image concern for young Indigenous Australians.

It may be that research into these issues needs to engage with complex qualitative methods in order to understand how young people's perceptions of their own image, and how that image is received by people around them (both those with whom they have strong ties and those with whom they have weak ties) are mediated by different key influences of body image including those which affect mainstream populations.

A4. Young people who are homeless or at risk of homelessness

Defining homelessness

There is no internationally agreed definition of homelessness and fundamental difficulties in defining homelessness and describing the characteristics of people who might be considered to be homeless (Australian Bureau of Statistics, 2011).

The Productivity Commission (2011) notes that the concepts of 'homelessness' and 'housing' are culturally bound and homelessness can be measured annually or at a specific point in time (Grace et al., 2006, 2008). In contemporary Australia, most policy makers and researchers adopt the 'cultural definition' of homeless developed by Chamberlain and MacKenzie (1992, 2003). The cultural definition identifies shared community standards about the minimum housing that people have the right to expect, summarised as 'a small rental flat with a bedroom, living room, kitchen, bathroom and an element of security of tenure' and excluding culturally recognised exceptions such as seminaries, jails and student halls of residence (Chamberlain and MacKenzie, 2008).

The cultural definition divides homelessness into three broad categories: primary, secondary and tertiary homelessness. Chamberlain and MacKenzie distinguish between i) *absolute homelessness* (primary homelessness), which includes people without conventional accommodation who are 'sleeping rough', living on the streets, in deserted buildings, improvised dwellings or in parks and ii) *relative homeless*, which they further divide into secondary homeless (people moving between various forms of temporary shelter including friends, emergency accommodation, youth refuges, hostels and boarding houses) and tertiary homeless (people living in single rooms in private boarding houses without their own bathroom, kitchen or security of tenure).

It should also be noted that an Australian Housing and Urban Research Institute report on Indigenous homeless people and good practice responses to their needs includes the category of 'spiritually homeless people', which it defines as:

A state arising from either (a) separation from traditional land, (b) separation from family and kinship networks, or (c) a crisis of personal identity wherein one's understanding or knowledge of how one relates to country, family and Aboriginal identity systems is confused. (Memmott and Long, 2003)

MacKenzie and Chamberlain have conducted three national censuses of homeless school students on the same week as the 1996, 2001 and 2006 Census of Population and Housing (Australian Bureau of Statistics, 2011; MacKenzie and Chamberlain, 2008). Schools include young people in their Census return if they have been homeless within the previous three months and were in need of continuing support (MacKenzie and Chamberlain, 2008).

Chamberlain and MacKenzie (1994) found that the young Australian homeless population is characterised by temporal diversity and that none of the three common accounts of the homeless youth population—as mostly people who are homeless for a short time, or mostly people who are long-term or chronically homeless, or made up of people who are both short-term and long-term homeless—is dominant. They estimate that between 30 and 40 per cent of the annual population of young people experiencing homelessness have a short-term problem (less than two weeks); that between 40 and 50 per cent experience long-term homelessness (some months of homelessness); and that between 15 and 25 per cent are chronically homeless (more than one year of homelessness).

Young people experiencing homelessness often face multiple disadvantages such as poverty, poor access to health care, low educational participation and poor employment prospects (Brotherhood of St Laurence, 2008). For young people, homelessness is often linked to family conflict, violence and abuse, social isolation, substance abuse and mental health problems (Department of Education and Early Childhood Development, 2008; Grace et al., 2008; Johnson and Chamberlain, 2008).

Homelessness and body image

To date, only a small amount of research has been conducted investigating body image and body dissatisfaction among people who are homeless or at risk of homelessness.

Farrugia (2010) conducted the only study which specifically related to body image and homelessness. Young homeless respondents to Farrugia's (2010) study reported experiencing suffering and discomfort as a result of being unable access laundry or washroom facilities or buy new clothing and as a result of being perceived as dirty or having an offensive odour. Farrugia also found that young people experiencing homelessness were interested in healthy diet and exercise as means to improve both their health and their appearance.

A qualitative study on food choice, access, and overweight status among children experiencing homelessness in the United States (Richards and Smith, 2007) found that

environmental, parental, and personal factors had the strongest influences on their choice and access to food. Richards and Smith found that the restricted conditions associated with homelessness and shelter environments restricted food choice and access. Lack of cooking facilities and adequate storage and limited food stores near shelters influenced the type and quality of food choices, ultimately affecting hunger, weight status, and the perceived health of children. It is likely that restricted food choice and poor access to cooking and storage facilities also affects Australian children and young people who are homeless (among other factors) as Australian research (Kirkman et al., 2010) also found that homelessness adversely affected children's physical health.²⁰

A5. Interventions

This section draws on evaluation literature as it pertains to body image interventions and the views of key experts who have knowledge of the programs not yet evaluated. There is a small evidence base in Australia on effective preventive interventions for young people addressing body image.

Many body image interventions have been developed to prevent eating disorders. The other type of intervention that is perhaps more strongly focussed are media-related interventions that aim to raise critical awareness about unrealistic manipulated images in the media. These interventions tend to be implemented in a one off sporadic way and results have been mixed.

However, there is broad consensus in the literature and our expert interviews that more needs to be known about effective interventions, especially for disadvantaged and Indigenous young people. Many of the interventions described in the literature are relatively short-term and school-based. However, the research evidence on body image issues indicates that interventions should be sensitive to age, gender, ethnicity and location, and delivered at multiple times throughout young people's lives rather than once.

Body weight, obesity, physical activity and eating disorders are important considerations for prevention interventions (O'Dea, 2010). Levine and Piran (2004) define prevention intervention as:

Policies and programs designed to evade or forestall the development of disordered eating by protecting current states of health and effective functioning (Levine and Piran, 2004: 58).

Prevention interventions are typically categorised as universal, targeted and selective (see Levine and Piran, 2004; McVey et al., 2007; Paxton, 2002; Victorian Government Department of Human Services, 2002b). Generally, universal interventions are offered to everyone; targeted interventions are for those individuals where the problem already impacts on their daily lives or the individual shows early signs of the problem; and selective interventions are for people that are most at risk of developing the problem. Both targeted

²⁰ Kirkman et al. (2010) found that homelessness also had an adverse affect on children's sense of security, mood, behaviour, education, and negatively affects their overall experience of childhood.

and selective interventions aim to reach specific populations of people. Each of these intervention types has its benefits. For example, McVey et al (2007) suggest that universal interventions help both those with existing body image issues and assist with the prevention of new cases developing rather than focusing on a specific population.

There has also been much discussion in the literature about which of these intervention types are most suitable for young people and body image. Paxton (2002) argues that universal, targeted and selective interventions are all important and that there will always be a need for interventions at each of these levels because no single intervention is able to target all levels of influence.

The location of interventions is also key to overall success of an intervention. Paxton's (2002) review described four key locations: school-based interventions; adolescent community-based interventions; university interventions and adult community interventions. However, most of the current literature talks about school-based interventions:

Most of the programs designed to prevent poor body image have been run in schools, for late primary or early adolescent students (Victorian Government Department of Human Services, 2002b: 10).

Schools are 'important settings for obesity prevention, because young people spend a lot of time at school, thus presenting a unique opportunity for influencing positive nutritional and activity behaviours' (Millar et al., 2011: 26). Most children and young people attend school, including disadvantaged young people, so there are obvious advantages to basing universal interventions here. However, both O'Dea (2005) and Paxton (2002) agree that interventions also need to recognise that there are other social and environmental influences such as attitudes that circulate in family, peers, teachers and community cultures and that programs need to be responsive to these influences. Young people's lifestyle and sense of self-esteem, positive self image, and self-worth is shaped by a range of influences including family, coaches and teachers, school environment, community factors, media advertising, sports involvement as well as the availability of resources, cultural stereotypes, social norms prevailing community attitudes to shape and weight.

The most significant review of body image interventions was carried out in 2002 by Susan Paxton. This review summarises the different intervention approaches. However, many of these approaches have not been used or are not commonly used with young people and have not specifically been used with our target groups.

Some interventions are targeted at exercise or diet. A meta-analysis of the impact of exercise on body image (Campbell and Hausenblas, 2009) found that exercise interventions can improve body image, but that the mechanisms and 'dose' for effective changes in body image are unknown. Most Australian interventions, however, do not involve diet or exercise particularly, but focus broadly on self-esteem and media literacy, and most of these have been delivered in schools. In terms of self-esteem, it has been suggested that by improving self-esteem through self-esteem intervention programs, young people can improve their

body image and increase their satisfaction with themselves (O'Dea, 2005). Paxton (2002) says:

If the psychological factors which may underpin the development of body dissatisfaction, such as low mood and self-esteem, are prevented from developing, there will be a subsequent prevention of the development of body image dissatisfaction (Paxton, 2002: 19).

However, most evaluations of these interventions have not conclusively shown that the interventions have a positive impact on body image over time.

One of the best known and most successful self-esteem interventions is the 'Everybody's Different' program (O'Dea, 1995). The aim of this intervention was to 'improve body image by building general self-esteem' in young people aged 11 to 14 years (O'Dea and Abraham, 2000: 45). Young people participated in nine one-hour weekly lessons (within the school setting) and importantly, the program included a component that involved discussions with family (see O'Dea, 1995 for more detail). This is one of the few self-esteem interventions which has been evaluated and found to have positive outcomes. Body satisfaction, physical appearance ratings and current weight loss behaviours all improved through participation in this intervention, particularly for female participants (O'Dea and Abraham, 2000). However, the twelve month follow-up showed that these initial effects were more likely to be maintained by those at risk of developing an eating disorder and that for others this was not maintained in the long-term. It is unclear why these effects were sustained for a longer period of time for some groups, but the program was found to be generally successful in improving participants' body image and self-esteem.

However, the short-lived nature of the effects for some participants supports Paxton's (2002) argument that initial observations can show improvement but these improvements are generally unsustainable without further follow-up and supplementation from other sources. It appears that sustained follow-up is therefore important. O'Dea and Abraham (2000) suggest that future programs aimed at improving body image and eating behaviours should employ cooperative, interactive, and student-centred approaches that develop self-esteem.

Interestingly, when the Everybody's Different program was implemented by Ghaderi et al (2005) with a slightly young target age group (11 year olds) in Sweden and it was found to have a less significant impact than the O'Dea and Abraham (2000) implementation. Ghaderi et al (2005) suggests several possible explanations for this including the content change due to translation from English to Swedish, the control group and intervention group discussing the program in detail, and the different demographic makeup of the control and intervention groups (i.e. the intervention group overall had a lower socio-economic status).

Media literacy and advocacy school-based interventions are also commonly used with young people and have been more successful in producing positive outcomes for young people around body image. O'Dea (2005) argues that programs based in critical media literacies educate people so that they understand the difference between realistic and unrealistic images and then decide for themselves what is acceptable. People can reject notions of

perfection valorised in the media. Paxton (2002) also says that they can raise media awareness, particularly in young women:

Media literacy and activism programs aim to raise awareness in women of the extent to which female images are distorted and to which dangerous dieting messages are promoted for commercial gain (Paxton, 2002: 17).

An example of media literacy intervention which had successful outcomes was the 'Free to be me' program. Neumark-Sztainer et al (2000) conducted an evaluation of this community-based intervention program which focused on media literacy and advocacy skills in Girl Scouts. The aim of this program was to help girls to:

Develop skills for recognizing media advertising strategies in order to understand the potential effect of images portrayed in the media on body image, and to take action toward modifying negative media messages and promoting positive media messages (Neumark-Sztainer et al., 2000).

The intervention included six workshops of ninety minutes each (see Neumark-Sztainer et al., 2000 for more detail about the program). Results of the evaluation of the 'Free to be me' program found that there were changes to the girl scouts media related knowledge and habits. For example, compared with the control group, fewer girls reported reading magazines on fashion and beauty and small improvements were reported in body related knowledge and attitudes. However, the evaluation also recognised that although this type of program stimulates thought, it may not provide any long term benefits for participants and that further evaluation and work needs to be put into developing intervention programs in this area (Neumark-Sztainer et al., 2000).

Another intervention program for young school children (9 to 11 years) was the 'Eating Smart, Eating for Me' program (Smolak and Levine, 2001). This program was also conducted in a school setting and consisted of ten sessions of one hour each. However, this program also included a number of different areas including nutrition and exercise and a media literacy component. Like the 'Free to be me' program, this program did appear to increase young people's knowledge around the topic areas, however, there were no real changes in attitude. One of the main things that arose from this evaluation was the importance of considering the overall goal of the program, so is the program trying to achieve short or long term goals and then whether the type of program being implemented will be able to address these goals (Smolak and Levine, 2001; Smolak et al., 1998).

Two other Australian body image interventions have had good evaluation outcomes: Happy Being Me and Media Smart. The Happy Being Me intervention was a school-based selective intervention for young girls at risk of body image issues conducted over three sessions. The aim of the program was to:

Educate participants about the negative consequences of internalization of the thin ideal, body comparisons, appearance conversations and appearance teasing. It also aims to empower participants to develop strategies they can use to combat these risk factors (Richardson and Paxton, 2010: 115).

The strengths of the program is that it incorporates a self-esteem component that stresses appearance is not the only source of value and supports young women (in its original form) to support young women to change their peer interactions in ways that support positive body image related interactions.

Findings from the evaluation showed that there were positive outcomes both post-program and a further three months after completing the program. Topic knowledge focused on the negative effects of internalization of the thin ideal, body comparison, appearance conversations, body satisfaction, and body dissatisfaction (Richardson and Paxton, 2010: 117). Richardson and Paxton (2010) also found that the young people that participated received the program favourably.

Richardson and Paxton (2010) also recognised that there are several limitations to the program itself. The first is limited knowledge on implementation. The evaluated program was implemented by those knowledgeable in the area of body image and so it is unclear if effectiveness would be maintained if it was delivered by teachers and other school staff with less expertise.

Originally this intervention also only focused on young women and did not include any young men. A subsequent study implemented the program in the UK with a mixed gender sample (Bird, 2012). This implementation had some positive results. However, the program was found to be more effective with young women. It may be that the body image pressures and cultural norms about discussing these pressures are quite different for young men and separate interventions need to be designed. There has been little or no research about whether single gender engagement is more effective than including both genders.

This intervention takes up limited time in the school curriculum which may be considered a strength by education authorities. However, it is not known how effective this program would be if implemented outside of the school environment or by youth workers.

Media Smart is another recent Australian school-based body image intervention. This intervention is a media literacy program for both genders conducted over an 8 week period. This intervention is unique because it is 'one of the largest and longest eating disorder prevention studies that has ever been conducted around the world'.²¹ The evaluation found that those that participated in the program experienced lower disorder risk factors than those that did not receive the program (See Wilksch and Wade, 2009 for more about the evaluation findings). Young people also reported positively back about participating in the intervention.²²

²¹ Details about Media Smart come from their website:

<http://sparky.socsci.flinders.edu.au/researchonline/projects/5> .

²² This intervention is currently available for purchase by schools. For more information see their website:

<http://sparky.socsci.flinders.edu.au/researchonline/projects/5>

In addition to these two intervention models, there have been a number of useful documents published by the Victorian Government Department of Human Services that outline guidelines for developing and implementing body image interventions:

Two additional considerations that have also arisen from the literature are whether the inclusion of parents and single versus co-ed genders impacts on the effectiveness of interventions. One of the few interventions that did try and engage parents was the McVey et al (2007) study. This was an evaluation of a school-based universal intervention program which included parents. However, parent participation was low and it was recognised that more research is needed to determine the most appropriate ways in which to engage parents. O’Dea and Abraham (2000) agree that parents are an important link between school and home environments. However, it also needs to be recognised that this link is not always there for many young people. For example, young people living in supported accommodation or with other relatives or friends may not currently have any contact with their parents. In these instances, parental involvement is not appropriate and so parental involvement needs to be considered based on the individual and their circumstances.

There has also been much discussion around single versus co-ed interventions. Some argue that it is important to include all young people, regardless of gender, so that young people can interact and learn from one another. For example, Susan Paxton (2002: 29) notes that ‘boys contribute in a very powerful way to the social environment of girls and vice versa, so awareness of each group on the pressures on the other, may well be beneficial’. Consistent with this, the Victorian Government Department of Human Services (2002a) suggest, that although body image issues may be more common in female, males also experience body image issues and that it is important that both genders are included to increase the attitudinal change. The study by Wilksch and Wade (2009) did suggest that males benefited as much as females in terms of media literacy. There is also the argument that practically it is easier to include both genders, particularly in school-based interventions rather than single gender. For examples of interventions which have included both male and female young people see Ghaderi et al., 2005; Mathews et al., 2010; O’Dea, 2005; Smolak and Levine, 2001. Certainly this is an issue that should be explored for young people from cultures where the separation of genders is held to be important for cultural or religious reasons.

Generally, there have been a few body image interventions which have been evaluated and found to have successful sustained outcomes for young people. Most of these are school-based and use either a self-esteem or media literacy approach. These evaluations raise questions about whether it is more effective to include parents; to have single or mixed gender interventions; and whether different approaches can be used in locations other than schools. All of these questions need further research.

Further, there are no interventions that specifically target Indigenous young people or young people who are homeless. Despite the wide-spread use of school-based interventions

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- Research Review of Body Image Programs: An Overview of Body Image Dissatisfaction Prevention Interventions (Paxton, 2002); http://www.health.vic.gov.au/healthpromotion/downloads/research_review.pdf
 - Shapes: Body Image Program Planning Guide (Victorian Government Department of Human Services, 2002b); and http://www.health.vic.gov.au/healthpromotion/downloads/shapes_final.pdf
 - Best Bets: Body Image Programs Overview (Victorian Government Department of Human Services, 2002a). http://www.health.vic.gov.au/healthpromotion/downloads/best_bets.pdf

(for example see Ghaderi et al., 2005; McVey et al., 2003; O'Dea, 2005; Smolak and Levine, 2001), these interventions have many drawbacks, particularly for disadvantaged groups of young people. Disadvantaged young people, and young people who are homeless in particular, are more likely to be disengaged from education and may therefore miss out on school-based interventions. In addition, universal interventions are unlikely to adequately address the specific meanings that body image may hold for Indigenous young people and for those that are homeless.

How, then, can young people who are disengaged from school and mainstream services be engaged by interventions that address body image? Alternative sites need to be considered for Indigenous young people and for young people who are homeless. The most promising points of engagement would be through soft entry points that are not associated with the stigma of services associated with disadvantage, via key community members and the internet but interventions can also be delivered through targeted youth services and homelessness services. Research is needed in this area to determine the best engagement strategies for these two groups of young people.

Finally and importantly, an ecological perspective suggests interventions that are not broadly and repeatedly delivered to most of the population are likely to have limited success in countering the momentum and power of idealised images have in our culture. While interventions are at best delivered to small pockets of the population, their messages are easily swallowed up by stronger messages which dominate larger contexts. There may well be a need for *universal* programs (in the sense schools are a universal services) which are delivered to the whole of population rather than universal programs which are designed to be appropriate for the whole of population but not actually widely delivered.

Within these caveats, a number of evaluated interventions have been found to be promising and contain elements that emphasise social interactions within families, between peers, and the various medias. These interventions need to be rolled out more broadly and evaluated in the context of more broad and repeated delivery.

A6. Methodological implications from the literature

Methodological design is an important feature of studies on body image. The methods used in the literature scoped in this review have ranged from large scale surveys to small sustained qualitative projects. These disparate methods offer different types of insights into the issues.

Large-scale surveys that involve validated scales are typical in the psychology literature that has broadly informed our understanding of how body image is experienced by many different groups of people. Scales include the Socio-cultural Attitudes toward Appearance Questionnaire Internalisation Subscale (Heinberg et al., 1995); the Physical Appearance Comparison Scale (Thompson et al., 2004); the Appearance Conversation Scale (Jones et al., 2004); and the Body Image and Body Change Inventory (Ricciardelli and McCabe, 2002). These studies and their instruments lay the foundational understandings for a range of issues that pertain to body image.

There have also been a number of small-scale surveys which have included open-ended questions as a minor qualitative component. These studies or subsets of larger studies have generated much of what we know about how body image is experienced by minority groups. In this work the sample sizes are often less than 50 participants (Becker, 2004 (n=30); McCabe et al., 2005 (n=50); Williams et al., 2006 (n=32); Wills, 2005 (n=31); Wills et al., 2006 (n=36)). These studies are designed to sketch out the issues rather than be statistically representative.

Qualitative methods have been used for in-depth explorations of the different ways that young people might experience body image. Exploratory research has the capacity to add to our knowledge of the relationship between vulnerable people and body image, extends the literature to consider issues other than attitudes towards size and weight and identifies possibilities for intervention and potential areas for further research.

The existing literature points to a range of ways that the term body image is understood. Although we know that many young people identify body image as a personal concern, we know much less about the dimensions and meanings of this term; how disadvantaged or vulnerable young people conceptualise body image; and how the specific meanings given to the concept may differ according to age, sex, ethnicity and other socio-cultural factors.

While most existing research has primarily focused on size, shape, other elements such as skin colour, physical dexterity, clothing and branding may also be important and the existing literature would be well complemented by exploratory research with young people from mainstream and vulnerable groups that do not impose pre-conceived definitions of 'body image'.

There are a number of studies that have used youth-centered methods to engage young people in conceptualising body image issues and position themselves as experts in their own lives (Darbyshire et al., 2005; Dixon and Hadjialexiou, 2005; McHugh and Kowalski, 2011). These types of methodologies allow young people to communicate about their worlds to each other as well as to researchers and ensure that the research experience is meaningful to them. Punch (2002) says that this is important for children and young people who often 'are not used to expressing their views freely or being taken seriously' (Punch, 2002: 325).

Workshops and focus groups are useful as Punch (2002) provides several reasons as to why younger participants might be uncomfortable talking to researcher in one-on-one interviews (such as lack of confidence and lack of familiarity with having their opinions and views heard).

Multi-method approaches have been commonly used both in research with young people generally (Cappello, 2005; Einarsdóttir, 2005; Punch, 2002) and more specifically with young people around body image (Darbyshire et al., 2005). Multi-method approaches have been found to be beneficial in giving a broader understanding of the range of young people's perceptions and experiences around an issue (Darbyshire et al., 2005). For example, Darbyshire et al (2005) used focus groups, mapping activities and 'Photovoice' to examine childhood obesity in Australian young people. They found that using more than one method

allowed them to be able to collect 'different yet complementary information' which might have been missed had they been only using one method (Darbyshire et al., 2005).

Identifying spaces in which young people experiencing homelessness feel comfortable and a sense of belonging has important methodological implications for doing research with this cohort (in addition to implications for policy interventions). Radley et al. (2005) found that homeless participants' 'sense of social worth and acceptability... depended upon how they were seen by others' (Radley et al., 2005: 293), highlighting that the *place* in which research is conducted is potentially of crucial importance.

Photo elicitation

Photo elicitation is one method that has been shown to elicit rich data in a variety of contexts. It is defined by Harper (2002) as 'the simple idea of inserting a photograph into a research interview' (Harper, 2002: 13) and has been widely used in research with disadvantaged and vulnerable young people in a number of different contexts, including child labour and poverty (Backett-Milburn et al., 2003; Mizen, 2005); development issues (Crivello et al., 2009); chronic illness (Epstein et al., 2008; Yates, 2010) and education (Cappello, 2005; Einarsdóttir, 2005). The methodology has also been used successfully with homeless participants (Dixon and Hadjialexiou, 2005; Johnsen et al., 2008) and Indigenous Australians (Castleden et al. (2008).

Photographs can be used in a number of ways. In the different approaches, the person selecting or producing images can be the researcher, the research participant or a combination of both. The question of who will be taking the photographs and how this will be selected and used in interviews is an important element of the research design (Epstein et al., 2008). In many studies, researchers take the photographs and then decide which of this will be selected to show participants (Epstein et al., 2008) while other studies allow participants to take their own photographs around a topic area and then use these for discussion in interviews and focus groups (Cappello, 2005; Conolly, 2008; Johnsen et al., 2008; Punch, 2002; Radley et al., 2005). Johnson et al (2008) call this 'self directed photography' where 'the researched' are taking their own photographs with some guidance from the researchers (Johnsen et al., 2008: 195).

Many studies where young people (as participants) take their own photographs are clustered under the umbrella of 'Photovoice', a term for projects designed to empower young people through:

... a process by which people can identify, represent and enhance their community through a specific photographic technique. It entrusts cameras to the hands of people to enable them to act as recorders, and potential catalysts for change, in their own communities (Wang and Burris, 1997: 369).

Photovoice is based in Paulo Friere's (1973, 1976) approach to critical and emancipatory education and participatory documentary photography and since its development a number of comprehensive manuals have been developed through project work with different populations (see Dahan et al., 2007).

Photo elicitation can be a powerful tool and has a number of benefits, including being 'fun', engaging and interactive (Conolly, 2008; Punch, 2002; Radley et al., 2005; Strack et al., 2004) and enabling participants to position themselves a comfortable distance from the subject matter while sharing information and thoughts on a particular topic (Radley and Taylor, 2003).

Some have suggested that the method itself evokes a different kind of information from interviews and that 'images evoke deeper elements of human consciousness than do words' (Harper, 2002: 13). Photographs can also empower young people by allowing them to depict things that are important to them and guide the research (Rudkin and Davis, 2007; Einarsdóttir, 2007) and overcome communication challenges for participants who might otherwise struggle to articulate their thoughts in words (Cappello, 2005).

Photo elicitation can also empower participants by attempting to address the potential power imbalance between adult researcher and young participants (Johnsen et al., 2008) by giving young people the opportunity to decide what to photograph (Conolly, 2008; Einarsdóttir, 2007; 2009) and because most young people can participate and use a camera regardless of their age and ability (J. Barker and Weller, 2003; Punch, 2002).

The methodological literature stresses the importance of combining the photographs with interviews or focus groups to ensure that photographs are adequately explained and discussed (Einarsdóttir, 2005). Using photographs together with interviews and focus groups increase the researchers' capacity to draw on tangential experience which may have been missed if only one method had been used.

However, when Strack et al (2004) evaluated the efficacy of the 'Photovoice' method with younger participants, they found that there were several challenges including the slow pace at which participants took the photographs; photograph quality; and challenges obtaining signed release forms for photographs involving other people.

Despite the many benefits of using photo elicitation together with interviews and focus groups, the literature discusses a number of disadvantages associated with the method. Punch (2002) says that using this method can have ethical implications for young people that are not likely to experience use of this type of technology in their day to day lives leaving them feeling disappointed that they cannot continue with photography (Punch, 2002: 334). However, we argue, like Walsh et al. (2011) that the use of various information and communication technologies 'is now commonplace for almost all young people in Australia, even those young people facing considerable levels of disadvantage' (Walsh et al., 2011: 1). There can also be issues with returning cameras after the photographs are taken therefore reducing participant numbers and the amount of data (Conolly, 2008; Morrow, 2001).

Photo elicitation has been a very successful methodology with groups of people whose perspectives have been underrepresented in research and policy, such as young people experiencing homelessness and Indigenous Australians.

Johnsen et al. (2008) looked at 17 young people experiencing homelessness aged 20 to 53 years in England and found that 'by putting homeless people behind the camera, the auto-photographic exercise provided important insights into a range of spaces that rarely feature in either academic or policy discussions of homelessness' (Johnsen et al., 2008: 200). Few studies have used photo elicitation with younger homeless people. Dixon and Hadjialexiou (2005) evaluated the methodology with young people who had experienced homelessness and found that many participants expected the study to be focused on photographic skills rather than their own perspectives and experiences of an issue.

There is also scant literature on using photo elicitation with Indigenous people. One example relevant to the present study (Castleden et al., 2008) does not focus specifically on body image, but, nonetheless, discusses some of the key issues for using 'Photovoice' with Indigenous communities. Castleden et al. found that this method allowed flexibility so that researchers could adapt the method to the needs of participants and communities, in turn increasing levels of trust. Allowing participants to take their own photographs and control the flow of discussion was also important for power relations and making participants feel more comfortable.

In summary, the use of photo elicitation together with interviews and focus groups has many benefits, particularly for young people. This method is particularly useful for engaging young people, which is important in this study which is focusing on two disadvantaged groups which may be difficult to engage. There have, however, been few studies which have used these methods with young people experiencing homelessness and Indigenous young people and few (if any) that have used them with these groups about the issue of body image. However, drawing on the general literature which documents the use of this method with young people and on the limited specific literature has assisted in informing the methodology of the present study.

A7. Conclusion

This literature review has identified what is known about body image, how it impacts on young people and disadvantaged young people in particular and also the major gaps in our knowledge in this area.

The body image literature is dominated by discussion of body size, weight and BMI and discussion of male body image most commonly focused on muscularity. While these issues are certainly important, it crucial to consider other issues beyond this narrow range of factors when reflecting on the body image concerns on young Australians, and, in particular, the concerns of Indigenous young people and young people experiencing homelessness.

There is a common perception that being overweight is in itself a source of body dissatisfaction, but the studies cited above indicate that this correlation is dependent on a range of contextual factors. Furthermore, this evidence points to factors which protect against body dissatisfaction that operate in disadvantaged and minority communities. Knowledge is currently scant on the importance of the lived experience of looking or feeling that one's appearance is 'different' to mainstream on body ideals, on the interactions of gender, age and disadvantage on body image, and on the possibilities for constructing

positive meanings of difference and diversity in embodiment. It is not possible to determine from the current literature whether the concerns of vulnerable young people are different from those of other young people, and the interactions of socio-economic disadvantage with body image

Some researchers have included a far broader range of factors when conceptualising body image - including the size, shape, composition and morphology of various body parts; the appearance and texture of body surfaces; body motions; clothing; and even auditory and olfactory characteristics. It is this broad definition that will be employed in the present research project. The literature highlights the fact that ideals of beauty differ across time, place and culture and that socio-cultural factors strongly influence both what is considered beautiful and how young people (and adults) feel about their bodies. Socio-cultural factors such as gender, ethnicity, sexuality, family and peer relationships and socio-economic status powerfully influence young people's lives and this review provides an overview of how these factors, individually and in combination, might increase or mitigate against the risk of body dissatisfaction.

Australian body image interventions that are holistic in scope, that support critical media literacy skills and that stress appearance is not the only sense of self worth have shown promising results. In general however, these interventions are not delivered consistently or widely enough to have a significant impact on the norms of popular cultures. Furthermore, there are few interventions that have targeted Indigenous young people or young people at risk of homelessness specifically. The literature suggests that multidimensional and specific pressures faced by these two groups mean specifically designed interventions would be of benefit. However, it is likely that interventions that adhere to the basic messages of these promising practices would form a solid foundation for interventions which specifically target Indigenous young people and young people experiencing homelessness.

The literature review also provides an overview of the methodological implications from the literature for the current research and finally describes the photo elicitation methodology that is being employed in the data collection component of the project.

Appendix B Interview Topic Guides

THE UNIVERSITY OF NEW SOUTH WALES
Body Image and Young People
Interview Schedule – Young People Interviews

1. General discussion of the main issues for young people today

- o What do you think are the main issues and pressures for young people today?
- o Do you think that body image is a big issue for young people you know?

2. Meaning of body image

- o What does 'body image' mean to you?
- o What kind of words do you use to talk about looks?
- o Who do you talk to about body image?
 - ▢ What sort of conversations do you have about body image?
- o What is considered beautiful or good-looking in your community?
- o Do your friends compare their bodies to other people?
 - ▢ If so, who with? Is this different from you?
- o Is body image different for girls and guys?
 - ▢ What pressures do girls face about their appearance, body size or shape, or ethnicity?
 - ▢ What pressures do guys face about their appearance, body size or shape, or ethnicity?
- o What do you think are the main issues for young people around body image?
- o Do you think body image affects you? Like, do you compare your body with other people?
 - ▢ If yes, who do you compare yourself to? (eg family, friends, actors, models, sports people)
- o What do you think are the main things that influence how young people feel about their bodies?
 - ▢ Ethnicity, media, family, friends... What do you think is the most important?

3. Media and Communications

Let's talk more about media and communications / you haven't mentioned media and communications however; many young people have said that it is important...

- o What media do you use? (includes social, TV, print and radio)
 - ▢ How often and who with?
 - ▢ Do you think the media affects how you see your body?
 - ▢ What do you think would help promote positive body image?
- o Where can you access the internet?
- o Do you have a mobile phone?
 - ▢ Does it have credit?
 - ▢ Does it have access to the internet?

- o Can you think of any images that make you feel good about your body? If yes, where?

4. Lifestyle and health

- o Where do you have most of your meals?
 - ☐ Do you usually eat alone or with other people?
- o Do you give much thought to what you eat and drink?
 - ☐ e.g. whether it's healthy, how it makes you feel afterwards, how much it costs, what other people think of it
- o What do you think the food you eat does to your body?

- o Have you ever been on a diet?
 - ☐ What kind, how long and why?
- o What exercise do you do during the week? (includes school and home)
 - ☐ Why do you exercise?

 - ☐ What do you think exercise does for your body?
- o How much sleep/relaxation do you get?
 - ☐ What does this do for your body?
- o Have you ever tried to change the way you look? If yes, did this have anything to do with images you see in the media? What did you change?

- o Have you ever felt really good about the way you look? When do you feel the strongest or the healthiest? The most confident?
- o Who gives you information about health?
 - ☐ What type of information is this?
- o Do you think there are any barriers to you being healthy at the moment?

5. Support/ Interventions and Resources

- o Do you know of any support you can get if you're having problems with body image?
 - ☐ Have you ever used these?
 - ☐ If yes, how did you find them?
- o Do you think there needs to be more support?
 - ☐ What kind of supports would you like and why?

 - ☐ What do you think is the best information you can get to be as happy and healthy as you can be?

Thank you for your time

THE UNIVERSITY OF NEW SOUTH WALES
Body Image and Young People
Interview Schedule – Body Image Experts

1. Meaning of ‘body image’

- o What do you think the term ‘body image’ means to Indigenous young people?
- o What do you think the term ‘body image’ means to young people disconnected from family and homeless?

2. What do you think young people’s main concerns around body image are?

- o Are there any issues specific to homeless and Indigenous young people?

3. Do you think that body image is experienced differently in terms of age, gender, ethnicity, SES, location etc?

- o If yes, what contributes to these differences?
- o If no, why not?
- o What do you think are the main influences on body image for young people?
- o Are there any influences specific to homeless and Indigenous young people?

4. Can you tell me about the media and body image?

Intervention Discussion

5. Can you tell me about any large scale interventions that are sensitive to the cultural issues that face Indigenous young people?

- o What types of interventions seem to work best? Why?
- o What types of interventions do not seem to work so well? Why?

6. Can you tell me about any large scale interventions that are sensitive to the needs of young people disconnected from family and homeless?

- o What types of interventions seem to work best? Why?
- o What types of interventions do not seem to work so well? Why?

7. Can you tell me about any other recent body image interventions for young people that may be of interest?

8. Media literacy and self-esteem interventions are commonly used for young people and body image...

- o Can you tell me a little about these?
- o How effective do you think these are for Indigenous young people?
- o How effective do you think these are for homeless young people?

9. Many body image interventions for young people are conducted within the school setting...

- o Can you tell me a little about this?
- o How effective do you think these are for Indigenous young people?
- o How effective do you think these are for homeless young people?

10. What kinds of resources/ support/ training are needed to design effective intervention programs for young people around body image?

- o Are these different for interventions with Indigenous young people?
- o Are these different for interventions with homeless young people?

11. What are the issues/ challengers/ barriers when designing intervention programs for young people around body image?

- o Are these different for interventions with Indigenous young people?

- o Are these different for interventions with homeless young people?
- 12. Is it important to engage parents in interventions? Why or why not?**
 - o Is this important for interventions with Indigenous young people?
 - o Is this important for interventions with homeless young people?
- 13. Should interventions be inclusive of both genders? Why or why not?**
 - o Is this important for interventions with Indigenous young people?
 - o Is this important for interventions with homeless young people?
- 14. Can you tell me about any documents that provide guidelines for effective intervention programs around body image?**
- 15. Do you have any questions/ comments?**

Thank you for your time

THE UNIVERSITY OF NEW SOUTH WALES
Body Image and Young People
Interview Schedule – Service Providers

1. Can you tell me about your service:

- o What is target group?
- o What are the aims of your service?
- o How are you funded?
- o How do you work with young people?
- o Does your service have any programs specifically linked to body image?

2. Education and training background:

- o What is your educational background?
- o Have you completed any training around – young people (generally), Aboriginal and Torres Strait Islander young people or body image?

3. Main issues for young people today:

- o What are the main issues for young people today (generally)?
- o What are the main issues for Aboriginal and Torres Strait Islander young people today?
- o Do you think that body image is a big issue for young people?

4. Young people and body image:

- o What do you think the term ‘body image’ means to young people?
- o What are the main concerns for young people around body image?
- o Are there any issues specific to Aboriginal and Torres Strait Islander young people?
- o If yes, what are these and what are the main influences?
- o What media do young people use and what is the influence of these?
- o Do you think that body image is experienced differently in regional and metropolitan contexts? If yes, what do you think contributes to these differences?

5. Supports/ interventions and resources available:

- o What supports / interventions / resources are available to young people in your local community?
- o How do young people find out about these?
- o Are there any programs specifically linked to body image that you know of in the local community?
- o If yes, how do young people find out about these?
- o How effective / ineffective are services for young people?
- o Could anything be done to improve what is available?

Thank you for your time

Appendix C Workshop Plan and Photographic Guidelines

THE UNIVERSITY OF NEW SOUTH WALES

NYARS Body Image

Workshop Plan

This workshop plan has been developed with input from service providers in one of the agencies who work with homeless young people.

SESSION 1

Warm-up

This session will involve warm-up exercises²³, discussion of the research and a practical exercise to explain what they are being asked to do. The first session will aim to ensure that participants understand their rights in the research, 'opt in' consent procedures, photographic guidelines²⁴ that ensure confidentiality and respect for diverse perspectives, the method of data collection and the photo-elicitation exercises. Where young people give permission, sessions will be audio recorded.

Break: Morning Tea

Activity 1: recorded group session

The first activity will involve a brainstorm about what body image means to participants. This is an interactive activity and involves quick thinking without deliberation. An outline of a body will be drawn and participants given textas and asked to put down words about body image inside and outside the body. Inside as positive and outside as negative. Once paper is filled young people will be asked about some of the terms, when and how they are used and what they mean. Participants will be encouraged to think about what the words mean to them, whether they affect them and in what way; what language circulate sin their own communities, the medias they use, and what the key influences of body image are in their own lives and communities. Specific questions will include what they or their community consider a healthy and/or an attractive body. Participants will then be encouraged to think about what images would best represent these key influences. This aims to elicit familiar language and how it is used to support the rest of the workshop.

Break: Lunch

Activity 2: Information session about photography and ethics

The second activity in this session will involve setting ethical guidelines about taking photographs of others and then directing young people to take photographs with low cost digital cameras of the body image messages (and their sources) in their communities. This will be supported by a short ppt presentation where the photographic facilitator discusses

23 For example: ask everyone to describe a photograph that has been influential to him or her. This could be a personal (family) snapshot, a photo they have taken themselves, or a famous image from a magazine, newspaper, etc. Group members can describe the picture, and then say how this image has influenced them. Facilitator to start with an example to illustrate.

²⁴ See p. 7

basic technical information and consent and ethical issues. The group will then break up and some young people will do interviews while others work with photographer.

Activity 3: photography and concurrent individual or small group interviews

In small groups, young people will work with photographer and researchers to develop their ideas about photos to take. This may involve taking pictures that represent (directly or metaphorically) television programs, video game characters, magazines, peers or adults talking²⁵, shops, mirrors, playing fields, gyms, school programs and sports uniforms. Young people will be asked to take approximately 10-12 photographs of things that influence their ideas of body image. While this is occurring, other young people will conduct individual or small group interviews with researchers. At the end of this session all cameras will be collected so photos can be downloaded overnight for next day session.

Day 2

Activity 3 (continued): photography and concurrent individual or small group interviews

Depending on numbers and point of data collection – activity 3 will continue for first time block. In small groups, young people will work with photographer and researchers to develop their ideas about photos to take. This may involve taking pictures that represent (directly or metaphorically) television programs, video game characters, magazines, peers or adults talking²⁶, shops, mirrors, playing fields, gyms, school programs and sports uniforms. Young people will be asked to take approximately 10-12 photographs of things that influence their ideas of body image. While this is occurring, other young people will conduct individual or small group interviews with researchers. At the end of this session all cameras will be collected so photos can be downloaded overnight for next day session.

Break: Morning Tea

Activity 4: Reviewing groups photographs

In the second session, young people will review their own and each other's photographs and discuss how the different sorts of messages about body image affect them. The images will be used to accompany prompts to explore how they construct their own body image, whether the photos capture behaviours common in their communities (eg: whether they compare themselves to others, who they compare themselves to; how they talk to other people about body image for example; whether they engage in or resist 'fat' or 'muscularity' talk) and how social interactions around body image affects them or other young people. They will then be encouraged to develop their ideas about where they primarily get information about body image, the range of sources of information about body image and the factors which mediate the pressures young people feel and that could assist in promoting

²⁵ This activity will be supported by a discussion about ethical and legal issues. Young people will be shown some photos that communicate messages but maintain confidentiality of human subjects. (and businesses etc). It will be explained that if young people want to have these images used in reports that arise from the project, they will need to get consent from any people or businesses that are identifiable in photographs. These processes will be followed-up by the research team so any resources produced meet UNSW HREC standards.

²⁶ This activity will be supported by a discussion about ethical and legal issues. Young people will be shown some photos that communicate messages but maintain confidentiality of human subjects. (and businesses etc). It will be explained that if young people want to have these images used in reports that arise from the project, they will need to get consent from any people or businesses that are identifiable in photographs. These processes will be followed-up by the research team so any resources produced meet UNSW HREC standards.

positive body image (where for example, would they pay the most attention to positive messages about body image and in what format).

They will be given an opportunity to nominate their preferred interview dynamic for this second session (eg: individual interview or friendship/family group).

Break: Lunch

Activity 5: Hell Yeah!

Presentation of media figures for young people to analyse in terms of their salience as role models and what they represent in terms of body image

Brainstorming the key issues:

- What are the key issues about body image that affect young people (who are Indigenous/ homeless)?
- What are the key interventions that would work for these groups?

This session allow for a critical intervention, adapting key strategies from the 'Happy to be Me' program (Richardson and Paxton, 2010) which involves asking young people to reflect on a number of prompts²⁷. These prompts are designed to counteract behaviours identified in the literature as having a negative impact on body image (such as comparing oneself to the 'thin ideal' or whatever ideal has been identified in the workshops), making negative comparisons of oneself to others, engaging in appearance discussions, and perfectionism; Richardson and Paxton, 2010). This component is designed to maximise safety for young people who participate in the fieldwork and addresses ethics requirements for researchers to be responsible for: a) designing research which minimises the risks of harm or discomfort to participants; b) clarifying for participants the potential benefits and risks of the research; and c) maintaining the welfare of the participants in the research context (Australian Government 2007: 13).

All young people that participate in a workshop (which will run over two days on a weekend) will be given a \$50 Coles Myer voucher to thank them for their participation and a copy of photographs they have taken.

²⁷ Examples of prompts from the 'Happy to be Me' program include:

- Models in fashion magazines are made to look glamorous and successful using fashionable clothes, lighting and make-up;
- Many fashion magazine images of female models have been changed using computer techniques;
- The ideal body shape differs between cultures;
- The ideal body shape has changed throughout history; and
- The 'comparison trap' is where people pick out things that they don't like about their appearance and compare those things with other people that they consider better on those things (Richardson and Paxton, 2010).

THE UNIVERSITY OF NEW SOUTH WALES

NYARS Body Image - Topic Guide
Photographic Guidelines

As a participant in this research workshop, you have the following rights and responsibilities:

Rights

- You have the right to express your views and experiences during the group sessions.
- You have the right to be supported by the facilitators.
- You have the right to copies of the photos you take (that are within the photographic guidelines of this project).
- You have the right to choose what happens to the photos you take and whether the researchers can use them in reports or articles that they publish or displayed in public.
- You have the right to change your mind about displaying any of your photographs.
- You will own the copyright of the pictures you take (details next page)

Responsibilities

- We will do our best to start the sessions on time, so we can finish on time. Please do your best to arrive on time.
- Please contact the group facilitator or assistant if you can't make it to the session.
- Be positive to the other people in the workshop and respectful of their ideas and feelings
- You have the responsibility to ask subjects if they will consent to be in a photograph, before taking the photo.

Confidentiality

- All projects should be undertaken in the spirit of confidentiality with the understanding that anything discussed in the workshop is private to the group. It should be noted that in practice it is not realistic to guarantee confidentiality to participants.

- **What do I take pictures of?**
 - We encourage you to take photos of:
 - Objects
 - Rooms
 - Places
 - You can take photos of yourself or other people, but will need to get the other person's permission if you want to take their photo (by filling out the 'Model Release Form' in this pack)
- **DON'T take photos that involve:**
 - Illegal activities
 - Sex
 - Nudity (see box below)

DON'T take naked or semi-naked photos of yourself or other people or photos of people engaged in sexual acts, especially if you or the person you're photographing is under 18!

- ! If the photo, video or text is about someone under the age of 18, it could be considered child pornography
- ! Under Federal and NSW law, if you create this material, send it to someone and/or have it on your camera, phone or computer, you could face up to 15 years in jail! Even worse, you could be put on the Sex Offenders Register
- ! You can be charged even if it is a photo of yourself
- ! You and the photographer can be charged even if you agree to the photo being taken or sent
- ! People really do get charged! In 2007, 32 Victorian teenagers were charged with child pornography offences*
- ! Remember that every text, MMS or email you send might become public. Once you've sent something you can't get it back

* Battersby, Lucy (2008) Sexting: fears as teens charged, *Sydney Morning Herald*. July 10, 2008
<http://www.smh.com.au/articles/2008/07/10/1215282979671.html>

Adapted from thinkuknow.org.au, theline.gov.au and kidshelp.com.au

Things to consider:

Anonymity

Some participants want their identity in the project to remain anonymous. The researchers offers participants a range of options to protect their identities. However, it isn't possible to *guarantee* anonymity as other participants can disclose participant identities.

Informed consent

The researchers view consent as a process rather than a one-off decision or paper exercise and acknowledge that a notion of 'informed' consent is complex. We discuss image use and purpose and offer choices throughout the project.

- **Copyright**

- Copyright of the photos you take is owned exclusively by you, the participant. All workshop participants are asked to sign a consent agreement, which states in simple language the different options for consent around image use. Participants will be given guidance in their choices by the partner organisation, and where appropriate by an external party with relevant expertise, to ensure that due consideration is given to protection issues. Consent is also sought from parents/guardians for participants under the age of 16. Participants have the right to withdraw their usage permissions and their images from the research project at any point.

-

**Do you agree to the above rights and responsibilities as a participant of the
Body Image workshop?**

Yes

No

Name of participant

Date

Signature

If you change your mind at any time, please let one of the facilitators know.

Adapted from PhotovoiceManual and Resource Kit (2007), Photovoice Hamilton, Ontario.

Appendix D Young People Surveys

Body Image and Young People

Background information

Please answer the following background questions to help us with our interview or focus group.

1. Are you: Male
 Female

2. How old are you? year

3. Were you born in Australia? Yes
 No

If not, where were you born?

4. Are you of Aboriginal or Torres Strait Islander descent?
 Yes
 No

5. What is the main language that you speak?
 English
 Another language
.....

6. What level of school/education have you completed?

- Year 8 or below
- Year 9 or equivalent
- Year 10 or equivalent
- Year 11 or equivalent
- Year 12 or equivalent
- TAFE qualification
- University qualification
- Other (please give details)

.....

7. Are you studying at the moment? Yes
 No

If yes, what are you studying?

8. Do you have a job? No
 Yes, casual
 Yes, part-time
 Yes, full-time
 Other (please give details)

.....

9. Are you in contact with your parents?

- Yes
- No

10. Do they give you financial support?

- Yes
- No

11. What is your main source of income?

Centrelink Payments

Wage

Other

.....

12. Do you have a permanent place to live? (If you haven't had a place to stay for 3 or more nights in the last 6 months, please answer 'no')

Yes

No

If no, how long has it been without a permanent place to live?

Less than one week

One week to less than two weeks

Two weeks to less than four

weeks

One month to less than three months

Three months to less than six months

Six months or more

13. What type of housing do you live in?

temporary housing

shared group housing

public rental

private rental

own house

other

.....

14. Do you use any social media? (Please tick all that apply)

Facebook

Twitter

Bebo

Google+

Foursquare

YouTube

MySpace

Other

.....

15. Any other comments?

.....

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This is the end of the background information. Thank you for your time!

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