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How do Women Experience and Maintain Positive Embodiment in a Western Sociocultural Context?

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How do Women Experience and Maintain Positive Embodiment in a Western Sociocultural
Context?

by

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A THESIS

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Abstract

Body image is one major area that has been emphasized in psychological research. In fact, researchers have long recognized the phenomenon of normative discontent (i.e., extensive body and weight-related dissatisfaction) among women in Western culture. As such, research in the area of body image has largely focused on risk factors for pathology. Since early in the 21st century, researchers have been encouraging others to focus on protective factors and positive, embodied experiences. Embodiment has been conceptualized as involving a broader collection of individual and social experiences, compared to body image. This research explored how women experience and maintain positive embodiment in a Western sociocultural context.

Qualitative data was gathered from 10 women and was analyzed through the use of constructivist grounded theory. Results from the preliminary conceptual model suggested that women engage in continuous meaning making and balancing. The results have implications for counselling and for future research.

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CHAPTER ONE

Introduction

Embodiment is a construct that was initially developed in disciplines of philosophy and sociology (Piran & Teall, 2012) and has been conceptualized as the perceptual experience of the body in the world (Allan, 2005). As such, embodiment has been described as the way “the self [is] experienced in, and through, the body” (Young, 1992, p. 92), which reflects the perspective that the mind and body are inseparable (Piran & Teall, 2012). Embodiment is implicated in body image and bodily experiences (Piran & Teall, 2012). According to the developmental theory of embodiment (DTE), embodiment refers to how girls and women inhabit their bodies and includes positive experiences such as positive body image, body attunement, joy, and self care as well as negative experiences such as objectification of the body and self-harm practices (Piran & Sigall, 2011; Piran & Teall, 2012).

In psychology, research has predominantly focused on the construct of body image. Body image has been conceptualized as how people experience their own embodiment, particularly, but not limited to, physical appearance (Cash, 2012). Thus, body image is the perception of the body based on feelings and experiences that are influenced by social, cultural, and individual factors that change throughout life (Cash, 2004). Literature has suggested that women face body image challenges (Cash, 2004). For example, women often experience *normative discontent*, which is the phenomenon of extensive body and weight-related dissatisfaction (Rodin, Silberstein, & Streigel-Moore, 1984). Furthermore, research has shown that negative body image and body dissatisfaction are prevalent in young women regardless of cultural background (Levine & Smolak, 2002). Negative body image can lead to psychosocial problems including maladaptive eating, poor self-esteem, anxiety, and depression (Choate, 2005;

Mussel, Binford, & Fulkerson, 2000).

Women's body image development is understood through a biopsychosocial model (Wertheim & Paxton, 2012). This model includes biological factors (e.g., genetics), individual psychological factors (e.g., personality), and sociocultural factors (Wertheim & Paxton, 2012). Sociocultural factors include cultural norms and other social influences, such as the media, parents, and peers (Choate, 2005; Wertheim & Paxton, 2012).

A feminist approach would suggest that normative discontent is caused by sociocultural factors rather than individual factors (Liimakka, 2011). For example, feminist researchers believe that women internalize sociocultural norms and ideals and try to approximate them (Brown, Weber & Ali, 2008; Jambekar, Quinn & Crocker, 2001; Liimakka, 2011). These norms and ideals for women are largely based on physical attractiveness; women learn through the sociocultural context to equate physical attractiveness to self-worth (Bergner, Remer & Whetsell, 2008; Peterson, Grippo & Tantleff-Dunn, 2008; Piran, 2010). Thus, due to the social constructions of femininity and physical attractiveness, female gender is among the major risk factors for the development of negative body image, body dissatisfaction, and disordered eating (Brown & Jasper, 1993; Jacobi, Hayward, de Zwaan, Kraemer, & Agras, 2004; Piran & Cormier, 2005).

Until recently, researchers have focused heavily on negative body image, body dissatisfaction, and risk factors as precursors to disordered eating and eating disorders (Jacobi et al., 2004). Despite widespread body dissatisfaction and pressures related to the thin ideal in Western culture, some women feel satisfied with their bodies and do not experience negative body image and related problems (Cash & Pruzinsky, 2002). Some scholars have urged

researchers to focus on protective factors (Cash & Pruzinsky, 2002) and positive and fulfilling experiences of embodiment (Cash, 2002).

Personal Relevance

As a female growing up in the North American cultural context, I have not been immune to the pressures to conform to female cultural ideals. Throughout my childhood I experienced varying levels of positive and disrupted embodiment. My fondest memories come from playing outside for hours exploring and experimenting, camping, fishing, and boating with my family during summer holidays, birthday parties and sleepovers with friends, and playing sports. I participated in many sports and grew up engaging in activities that traditionally were reserved for males (e.g., baseball, basketball). In this way, I often felt more like a “tomboy” than a “girly girl.” Yet, I also felt pressure to attain and maintain a slim and feminine body. It was challenging to try to approximate the cultural ideal. Although I have always weighed within a “normal” range (according to my body mass index), there were times through my childhood that I wished to be slimmer or taller.

In addition to these struggles, when I was 17 years old I gained a large amount of understanding about my own embodiment in a very explicit way. I endured a sporting acquired injury, which severely limited the functionality of my body and required an invasive reconstructive surgery. This ultimately limited my participation in sports (and some leisure) activities for fear of developing arthritis and chronic pain in young adulthood. As one may assume, this injury disrupted my embodied experiences and the way I lived my life. I was required to cope with the loss of some of the activities that I enjoyed the most and this resulted in a transition in my own self-conceptualization.

In reflecting back on my self-awareness and embodiment, one additional event comes to

mind. It occurred when I underwent my knee surgery as an adolescent. After that surgery, I recovered in the hospital for several days. The young girl who shared a room with me was hospitalized for the treatment of Anorexia Nervosa. I got to know the young girl and the inner workings of this disorder. I saw how difficult it was for her to choose her daily meals. I wondered where she had gone when she was eating her meals, as it would often take her several hours, with nurses always standing by. I also saw how anxious she became when she accidentally dropped a piece of her food on the floor and frantically begged me, “Please don’t tell the nurses, I didn’t mean to”. I realized that I completely took for granted these daily activities involving food and eating. I had limited knowledge or experience with eating disorders and this was my first intimate experience with someone who had a severe eating disorder. It is an experience and memory that remains vivid to me to this day.

Despite experiencing “normative” thin ideal pressures and deliberating on my own feelings and hardships related to femininity and bodily functionality, I have been able to develop a positive relationship with my body. The above experiences contributed to my passion for this topic and have prompted my interest in the area of resiliency to disrupted embodiment.

The Current Study

The purpose of this study was to explore the nature of positive embodiment and how women maintain it within a Western sociocultural context. I sought to address the recommendations of previous researchers (e.g., Cash, 2002; Cash & Pruzinsky, 2002) by focusing on the embodiment construct, specifically positive embodiment. By focusing on women’s positive embodiment, I hoped to contribute to our understanding of what factors contribute to resiliency to disrupted embodiment and negative body image. To accomplish the

aim of this study, I utilized a constructivist grounded theory methodology (Charmaz, 2014) within a feminist framework (Piran & Teall, 2012).

Key Terms

The definitions of the constructs used in this study include:

1. *Body image*, which is defined as the perception of one's own body, based on feelings and experiences that are influenced by social, cultural, and individual factors (Cash, 2004).
Body image is typically constructed through internalized messages from external cultural and social factors (Mehling et al., 2009).
2. *Embodiment*, which includes thoughts, feelings, and behaviours that are grounded in bodily interactions with the environment (Meier, Schnall, Schwarz, & Bargh, 2012). In other words, embodiment is the perceptual experience of the body in relation to the world (Allan, 2005) or the way in which the self is experienced in and through the body (Young, 1992).
3. *Positive embodiment*, which is defined as positive experiences of embodied involvement, such as self-care, joy, body attunement, positive body image, and physical functionality (Piran, Carter, Thompson, & Pajouhandeh, 2002).
4. *Disrupted embodiment*, which is defined as negative experiences of embodied involvement, such as self-harm, dysfunctional emotional awareness, body/self disconnection, negative body image, and reduced experience of competence and involvement in physical activities (Piran & Teall, 2012).
5. *Maintenance or maintaining*, which is defined as; (a) continuously orienting oneself to positive embodiment once developed, (b) doing things to uphold positive embodiment, and (c) being responsive to the challenges to positive embodiment. Maintenance, therefore, is a form of adaptive functioning in that it is practicing resilience (Dyer & McGuinness,

1996; Masten, 2007) against disrupted embodiment.

6. *Female gender*, which is defined as a socially constructed and defined set of traits, behaviours, and attitudes pertaining to femininity (Kalbfleisch & Cody, 1995). Similarly, *femininity* is defined as traits, behaviours, and attitudes that have been historically associated with female gender as defined by a particular sociocultural context. Essentially, female gender (i.e., femininity and womanhood) is a label for how society or culture defines what is feminine. For example, girls and women are socialized to value relationships and dependence, and to rely on others' opinions for self-esteem (Robb, 2006). Other traits and behaviours, such as autonomy and independence – although valued in a Western sociocultural context – are not associated with femininity to the same degree (Robb, 2006).

Overview of Thesis Chapters

In chapter two, the embodiment and body image constructs are defined, feminist approaches are covered, and research on body image and embodiment is described. In chapter three, I review the methodology that was chosen for this study and how it was applied for data collection and data analysis. I also discuss the trustworthiness of the data according to this method. In chapter four, I describe the preliminary conceptual model as well as the categories and themes that emerged from the interviews and data analysis. Finally, in chapter five I discuss the model and how it relates to previous research. I will then review the limitations and strengths of the study, implications for counselling, and future research recommendations.

CHAPTER TWO

Literature Review

Cultures and subcultures transmit information and societal messages about standards for human appearance and what physical characteristics are socially valued (Cash, 2012). From a sociocultural viewpoint, women experience their bodies in an inequitable social context (Beauboeuf-lafontant, 2005), with unrealistic cultural ideals (Martin, 2010). Cultural ideals are shared largely through mediums such as the media (Martin, 2010). The media contributes to, and perpetuates, thin ideal representations and corresponding attitudes idealizing thinness, beauty, and youth (Haboush, Warren, & Benuto, 2012) as well as unhealthy weight control behaviours (Martin, 2010). For example, Miss America contestants are portrayed as individuals for young girls to aspire to; yet, the average Miss America winner is five feet, seven inches tall and weighs 121 pounds while the average American woman is five feet, four inches tall and weighs 165 pounds (Martin, 2010). In addition to the media, there are other identified social factors that impact an individual's risk or resilience for developing problems such as negative body image and disordered eating (Duncan, 2010). These factors include perceived pressure from family, peers, and media, weight-related teasing, and portrayals of fat phobia from significant others or the media (Slevec & Tiggemann, 2011). Social expectations and discourses explicitly define what characteristics are desirable and more implicitly act as predictors for mental health problems, including what Duncan (2010) terms *body-specific pathologies* (e.g., eating disordered behaviour).

Although there is agreement that sociocultural factors impact women's body image and embodiment, there is widespread confusion in conceptualizing the constructs of body image and embodiment (De Vignemont, 2010). Body image has been defined as, essentially, a visuo-

spatial process, in which people evaluate themselves largely based on social norms and appearance (De Vignemont, 2010). In contrast, embodiment has been defined as the way people experience and perceive the world through their bodies (Tolman, Bowman, & Fahs, 2014). Put simply, it appears that the body image construct is more appearance-related, whereas the embodiment construct is more experience-related. However, the definition of embodiment closely aligns with a construct from the early body image literature known as *body schema* (Fisher, 1990). This construct continues to be used currently (e.g., Assaiante, Barlaam, Cignetti, & Vaugoyeau, 2014) and refers to sensorimotor processes of experiencing and relating to our bodies through touch, vision, proprioception, and cognitive understanding of meaning, affect, and behaviour (De Vignemont, 2010). Thus, there also is some overlap in the embodiment and body image constructs. The embodiment and body image constructs have similarities in that they both have various dimensions and are impacted by interpersonal and intrapersonal factors, including the social context as well as mental and physical processes (Cash, 2012; Piran & Teall, 2012).

This chapter provides a review of the literature on the constructs of embodiment and body image. First, the embodiment construct will be examined in terms of philosophical, anthropological, sociological, and psychological perspectives. This will be followed by a description of embodiment in Western culture, in which the tenets from objectification theory (Fredrickson & Roberts, 1997) and the construct of empowerment are highlighted. Body image will then be defined, given that embodiment and body image have overlapping elements and that both played a role in women's experiences in the current study. The body image construct will be explored in terms of its history and subtle changes in conceptualization over time. Women's body image development and how it is contextualized in the literature is also examined.

Following this, two feminist theories will be presented, including the body becoming theory (Rice, 2014) and the developmental theory of embodiment (Piran & Teall, 2012). Finally, research on body image and embodiment will be discussed followed by a description of the current study, including a rationale for exploring positive embodiment.

Embodiment Construct Defined

Piran and Teall (2012) suggested that embodiment is a factor contributing to body experiences and body image. Embodiment has been referred to as “the experience of living in, perceiving, and experiencing the world from the very specific location of our bodies” (Tolman et al., 2014, p. 760). Research in psychology has predominantly focused on the construct of body image; however, body image is just one element within the broader notion of embodiment (Cash, 2012; Piran & Teall, 2012; Rice, 2014). Embodiment has been conceptualized across different disciplines, including philosophy, anthropology, sociology, and psychology. The following sections will focus on embodiment from each of these, with an emphasis on the philosophical and psychological perspectives.

Philosophical Perspectives of Embodiment

Philosophical perspectives of embodiment include mind/body dualism and mind/body unity. These perspectives are historical in that they originated several decades ago by prominent philosophers. Yet, current feminist theorists and other scholars still recognize these philosophies.

Mind/body dualism. Mind/body dualism refers to the separation of the mind from the body or viewing the two as separate entities (Besley & Peters, 2007). There has been a longstanding emphasis in Western culture, and in psychology specifically, on the mind (or consciousness) as being separate from the body (Glenberg, Witt, & Metcalfe, 2013). As such,

thought and consciousness have been viewed as *disembodied* until recently (Glenberg et al., 2013). Interestingly, Margaret Washburn, the first woman to obtain a doctorate in psychology in 1894, argued for the need to connect mental life and consciousness to bodily movement, yet this was disregarded due to the rise of behaviourism that followed as well as the cognitive revolution in the 1960s (Glenberg et al., 2013).

A dualistic approach fails to take into account how the mind and the psyche are shaped by embodied experiences (Connolly, 2013). The body is seen as inferior, or less valuable, than the mind; it is something that the mind can control (Bartky, 1990; Browett, 2012). Dualism is also apparent in language use; the term *mental health* implies that physical or somatic health issues may be separate. Thus, many individuals who seek clinical treatment experience the body as an object, rather than as a living, subjective reality (Connolly, 2013).

Mind versus body is one of the most powerful dualities existent in Western society (Bordo, 2003; Cheville, 2005). Many feminist scholars have argued that mind/body dualism guides the way gender is construed in Western culture; women are perceived as passive and largely confined to a life centered on the body, utilizing the body as power whereas men are perceived as active and largely confined to life centered on the mind, utilizing the mind as power (Battersby, 1998; Bordo, 2003; McKinley, 2011). However, in Western society, the mind is valued more than the body (McKinley, 2011). Power is a form of dominance; it is the way in which certain actions influence or control other individuals (Foucault, 1982; Sinacore, Ginsberg, & Kassan, 2012). People are not inherently powerful, but rather dominance and power are sustained through constructed elements such as time, space, and embodiment (Bordo, 2003; Foucault, 1976). In modern culture, women often exert power or dominance through body-surveillance and self-correction regarding cultural norms (Bordo, 2003). Thus, the body is not

just biological, but is also mediated by historical and cultural constructions (Bordo, 2003) that are understood within social structures of power (Tolman et al., 2014).

Foucault (1982) suggested that embodiment refers to anatomical, emotional, and psychological experiences, yet these experiences are dominated by sociocultural influences of power. Similarly, Bordo (2003) indicated that “preoccupation with the ‘internal’ management of the body (that is, management of its desires) is produced by instabilities in what could be called the macro-regulation of desire within the system of the social body” (p. 199). Other individuals, especially significant others, have a profound influence on the way in which individuals perceive themselves (Browett, 2012; McKinley, 2011; Mead, 1934; Pelican et al., 2005). Foucault (1973) characterized this influence as *the gaze*, referring to the perceived surveillance and scrutiny of an individual as a result of societal norms and expectations. Individuals learn to compare and evaluate themselves through societal constructions, rather than through their own experiences. The gaze results in conscious judgment against which people measure themselves and can have a particularly detrimental impact on body image and bodily experiences in Western culture (Winslade & Monk, 2007). Although women learn to see their bodies through the gaze of others, or as objects, their experiences of embodiment are much more than this (Blood, 2005). However, the societal and social marketing gaze directs attention to women’s bodies and normalizes objectification and sexuality of women’s bodies, leading women to engage in bodily surveillance and control (Gurrieri, Previte, & Brace-Govan, 2012). Orbach (2009) highlighted this when she said, “Today only a few aspirational and idealized body types, which everyone feels enjoined to work towards, are taking the place of differing forms of embodiment” (p. 14). Standards for women to attain a well-maintained and valuable body emphasize dualism, or the mind controlling the body (Gurrieri et al., 2012). In this way, embodiment – or mind and body

as interlinked and interactive – does not play a large role in marketing and media (Gurrieri, et al., 2012). Rather, contentment regarding body appearance has become imperative; at an individual and social level, an obsession with appearance is the trademark of Western culture in the 21st century (Orbach, 2009).

Mind/body unity. Merleau-Ponty (1945), an advocate for mind/body unity, did not distinguish the body as separate from the mind. Merleau-Ponty suggested the body should “no longer [be] conceived as an object of the world, but as our means of communication with it” (p. 92). Individuals take for granted the incredible functions that the body serves in everyday living. The body is a prerequisite to simply be; it is what connects us to the world (Merleau-Ponty, 1945). In this way, identity formation occurs through bodily experiences (Pelican et al., 2005). When individuals associate their subjective experiences only with the mind, they become disembodied (Connolly, 2013).

Some scholars have argued for a theory of embodied cognition (e.g., Cheville, 2005). Glenberg et al. (2013) described embodied cognition as the idea that “thinking is not something that is divorced from the body; instead, thinking is an activity strongly influenced by the body and the brain interacting with the environment” (p. 573). The actions people engage in change their perceptual systems and their perceptual systems influence the actions taken (Merleau-Ponty, 1945). Thus, the perception-action system is a cycle and is imperative within embodied cognition (Glenberg et al., 2013). As such, embodied cognition recognizes mind/body unity.

Anthropological and Sociological Perspectives of Embodiment

Biological and cultural anthropologists define embodiment as the way in which culture influences a person’s bodily experiences or biological realities, or “how culture gets under the skin” (Anderson-Fye, 2012, p. 16). Researchers from these disciplines examine structural

inequalities including racism and gender inequality and their impact on body image and eating disorders (Anderson-Fye, 2012). Such scholars recognize the need for a framework that “locates the human body at the intersection of culture and cognition” (Cheville, 2005, p. 86).

Similarly, Monaghan (2001) stated that bodies are socially constructed and experienced, as well as objective and subjective. As such, the body, self, and culture are intertwined. Researchers have acknowledged that embodiment theories and studies are inherently sociological and political; social structures permeate bodies with meaning and significance (Tolman et al., 2014). This is apparent even in everyday language; the term *health* is a social and embodied construct (Monaghan, 2001). Much of the focus in the scientific literature is on “sickness, disability, and death, as opposed to vibrant physicality and embodied pleasures” (Monaghan, 2001, p. 331).

Psychological Perspectives of Embodiment

From a social psychology framework, embodiment refers to the notion that thoughts, feelings, and behaviour are grounded in bodily and sensory experiences (Meier et al., 2012). At an individual level, considerable information about bodily experience is processed in an unconscious manner (Connolly, 2013). This has been termed *body schema* and refers to a system of sensory-motor capabilities and perceptual monitoring of the body (De Vignemont, 2010). Body schemas are often unconscious and non-personal, as they represent a holistic interaction with the environment; however, people can become consciously aware of their own body schemas (Gallagher, 2005). This notion of embodiment is also understood in psychology as the idea of *being embodied*, which refers to experiential awareness of bodily feelings and sensations (Tolman et al., 2014). Being embodied can also be characterized as *lived embodiment* because it is our experience as we live and feel it (Merleau-Ponty, 1962; Tolman et al., 2014).

From a positive psychology standpoint embodiment is “the identification and attachment with the body; [embodiment] reflects body awareness (e.g., awareness of hunger and satiety cues) and responsiveness (e.g., eating in response to hunger cues and ceasing to eat in response to satiety cues)” (Tylka, 2012, p. 657). Similar to anthropologists’ and sociologists’ views, some psychological approaches consider embodiment to be socially, culturally, and historically constructed (Csordas, 1994; Fredrickson & Roberts, 1997). In this way, embodiment can also refer to ways in which the social and historical contexts influence, and become intertwined with, our understandings and experiences of the body, also referred to as *embodying the social* (Tolman et al., 2014). Lived embodiment and embodying the social are two distinct but not mutually exclusive conceptualizations of embodiment (Tolman et al., 2014). One construct focuses more on individual experiences of embodiment, while the other focuses on how the historical and social milieu impacts bodily experiences.

Taken together, these ideas reflect the notion of embodiment theory, which refers to an epistemological framework in which knowledge of the self, others, and the world is located in people’s embodied selves (Dale, 2001). This framework is based on the philosophy of mind/body unity and the works of Foucault and Merleau-Ponty, among others (Dale, 2001). From this type of holistic perspective, the body, mind, and spirit are intertwined (Sointu, 2006).

Evidently, the embodiment construct is complex. Each discipline has its own definition or set of ideas about embodiment. A summary of the embodiment construct is provided in Table 1.1.

Table 1.1

Summary of Embodiment Construct

Perspective	Major Contributor(s)	Idea/Definition
Philosophical Perspectives	Besley & Peters (2007)	Mind/Body Dualism: Mind and body as separate entities
	<ul style="list-style-type: none"> - Foucault (1973) - Bartky (1990) 	<ul style="list-style-type: none"> - The Gaze - Mind is seen as superior to body in Western culture
	Merleau-Ponty (1945)	Mind/Body Unity: Mind and body as connected
Anthropological / Sociological Perspectives	Anderson-Fye (2012)	How culture gets under the skin
	Monaghan (2001)	How the body, self, and culture are intertwined
Psychological Perspectives	Meier et al. (2012)	Social psychology: thoughts, feelings, and behaviours are grounded in bodily experiences
	Merleau-Ponty (1962); Tolman et al. (2014)	<i>Being embodied; lived embodiment</i> (individual bodily experiences)
	Toman et al. (2014)	<i>Embodying the social</i> (embodiment as socially, culturally, and historically constructed)
	Tylka (2012)	Positive psychology: Identification and attachment with the body; body awareness and responsiveness
	Dale (2001)	Embodiment Theory: Epistemological framework; knowledge of self, others, and the world is located in our embodied selves.

Embodiment in a Western Context

The emphasis on beauty and thinness as standards for girls and women in Western culture infiltrates all levels of mass media (Cash, 2012). Over the past several decades the cultural ideal has become thinner, yet over the same period of time, women have become larger and heavier (Tiggemann, 2012). Thus, Western cultural socialization also conveys the message that body-altering methods are acceptable means to attain cultural standards through, for example, dieting, exercising, or cosmetic surgery (Cash, 2012). It is estimated that the average woman will spend about \$40 000 on cosmetics, haircuts, manicures, pedicures, tanning, and waxing between the ages of 13 and 29 and will spend approximately \$500 000 throughout their lifetime (Murnen & Seabrook, 2012). From the media and other idealized images of the essence of femininity, young girls and women in Western culture learn that a beautiful appearance is a desirable, if not imperative, aspect of womanhood (Liimakka, 2008). This learning occurs through the attention (or lack of attention) they receive, in which increased attention results in heightened awareness of the appearance of an individual's body and becomes a defining feature of a woman's embodiment (Liimakka, 2008). Positive affirmation of female identity is rarely provided, except with regard to a woman's appearance and sexuality (Larkin, Rice, & Russell, 1996). In this way, objectification and disembodiment tend to replace individuation and synergistic mind/body identity development (Larkin, et al., 1996). Women as a group lack power in relation to their bodies and within their bodies, which leads to *bodily disempowerment*, or bodily alienation and insecurity (Liimakka, 2011).

Objectification Theory

Objectification theory posits that girls and women are socialized to view their own bodies as outside observers would, focusing primarily on their physical selves (Fredrickson & Roberts,

1997). Women are often treated simply as a body, which is mainly valued for its use by others (e.g., being looked at, evaluated, and objectified; Fredrickson & Roberts, 1997). This can lead to verbal and sexual harassment and violence, which oppresses women and further contributes to disembodiment (Larkin, et al., 1996). Sexual objectification refers to the separation of a woman into a collection of sexual parts, essentially disregarding her personality so that she exists as simply those body parts (Calogero, 2012). These experiences occur outside of a woman's control and include common situations such as gazing at women's bodies, sexual comments about women's bodies, and higher exposure to sexualized media imagery or pornography (Calogero, 2012).

Stigmatization related to the beauty ideal and the corresponding marginalization and oppression of women are “experienced and felt in the body” (Larkin et al., 1996, p. 13). This results in *self-objectification* (i.e., viewing one's self in terms of appearance; Fredrickson & Roberts, 1997; Murnen & Seabrook, 2012) and subsequently *body surveillance* (i.e., monitoring of one's appearance; Calogero, 2012; Fredrickson & Roberts, 1997; McKinley, 2011). Women may experience shame, anxiety, and reduced awareness of internal bodily states (Calogero, 2012; Fredrickson & Roberts, 1997). “Shame reinforces the splitting of bodies from minds, while it compels young women to engage in relentless body criticism and improvement in an effort to bolster their shattered self-esteem” (Larkin et al., 1996, p. 19). A young woman's poor self-esteem is embedded in the sociocultural context (Larkin et al., 1996) and leads to mental health risks including depression and eating disorders (Fredrickson & Roberts, 1997). Thus, objectification of women's bodies occurs at:

1. An individual level, through self-objectification, body surveillance, and body shame (Becker, Hill, Greif, Hongmei, & Stewart, 2013).

2. An interpersonal level through messages received from significant others (Pelican et al., 2005).

3. A societal level, through messages received by the media (Bordo, 2003).

Objectification theory has been shown to be a useful framework for women in industrialized nations (e.g., USA and Australia; Moradi & Huang, 2008), yet some research has shown that body objectification tends to decrease as girls approach 18 years of age (Impett, Henson, Breines, Schooler, & Tolman, 2011). The decreases in body objectification corresponded to increased self-esteem and decreased depressive symptoms (Impett et al., 2011). In this way, self-objectification and subsequent mental health risks are not necessarily stable and fixed. One construct that has been identified as positively impacting women's embodiment is empowerment.

Empowerment

Power can be negative in that it constrains or prohibits; it can also be positive in that it enables or empowers (Braidotti, 2002). The negative and positive poles of power have also been termed powerlessness and power, respectively (Peterson et al., 2008). It has been hypothesized that the more power an individual feels, the less negative they feel toward their body (Peterson et al., 2008). Thus, in contrast to body objectification, powerlessness, and disempowerment, *empowerment* consists of a sense of personal competence and the process of gaining control over one's life (Peterson et al., 2008). Women's development of strong and able bodies is a form of physical feminism and *bodily empowerment* (Liimakka, 2011). Bodily empowerment is a social and bodily process that fosters power, liberty, and intentionality for bodily action (Merleau-Ponty, 1945). For example, experiencing the notion of "I can" more than "I cannot" (Young, 1980, p. 146). Bodily empowerment can lead to decreases in self-consciousness and unhealthy

body surveillance, which may be an important factor in positive embodiment (Liimakka, 2011; Piran et al., 2002).

Recent literature has suggested that body image is a factor in an individual's embodied experiences (Cash, 2012; Piran & Teall, 2012). Thus, this review now turns to the body image construct. Body image will be reviewed in terms of its history and broadening in conceptualization over time. In addition, women's body image development will be discussed.

Body Image Construct Defined

Body image has historically been defined as the picture in an individual's mind of their own body size, shape, and form, along with feelings about bodily characteristics and body parts (Slade, 1988). Thus, like the embodiment construct, the body image construct has been based on assumptions about the relationship between mind and body (Blood, 2005). However, scholars conceptualize embodiment as more unconscious and experiential, whereas body image is considered to be more conscious, perceptual, and emotional (Gallagher, 2005). In fact, body image has been largely understood as encompassing a perceptual component and an affective (or attitudinal) component toward the body (Cash & Brown, 1987; Gardner, 1996). For example, body image disturbances such as *body size distortion* and *body dissatisfaction* have been conceptualized as perceptual and affective, respectively (Cash & Brown, 1987; Stice & Shaw, 2002). Body size distortion refers to perceiving one's body size to be larger or smaller than it really is; body dissatisfaction refers to the affective evaluative component of body image, for example feeling dissatisfied with parts of one's body or the body as a whole (Cash & Brown, 1987; Stice & Shaw, 2002). Other body image disturbances that have been discussed in the literature include *overconcern*, which refers to preoccupation with weight and shape (Fairburn, Cooper, & Shafran, 2003), and *overvaluation*, which refers to the evaluation of self-worth

largely in terms of weight and shape (Allen, Bryne, McLean, & Davis, 2008).

Body image was later conceptualized as the perception of one's own body based on feelings and experiences that are influenced by social, cultural, and individual factors that change throughout life (Cash, 2002). This definition accounts more for contextual influences and fluctuations in body image. Yet, there remained a focus on perceptions of the body; the body image construct continued to emphasize appearance (Blood, 2005). For example, McKinley (2006) indicated that women in Western culture internalize the social and cultural ideals and in turn view their own bodies as outside observers would. McKinley also suggested that this often leads to *body consciousness*, which consists of several factors including *body surveillance*, *body shame*, and *appearance control beliefs*. According to McKinley, body surveillance refers to viewing one's own body as an observer would, body shame refers to feeling bad if standards are not met, and appearance control beliefs refer to believing one can change his or her appearance with enough effort.

Body image has increasingly been understood to be multidimensional, including perceptual, cognitive, affective, and behavioural dimensions (Cash, 2002; Cash, 2011; Gardner, 2011). Menzel, Krawczyk, and Thompson (2011) defined these dimensions. They indicated that part of the perceptual dimension of body image reflects an individual's overall subjective evaluation and attitudes related to their body and whether they are satisfied or dissatisfied. The cognitive dimension reflects the beliefs, thoughts, interpretations, and attributions that contribute to or maintain a person's body image. The affective dimension reflects an individual's emotions that are associated with their body and appearance, including anxiety, distress, and shame. Finally, the behavioural dimension reflects physical actions, such as avoidance of situations or objects that induce body image concerns. Similarly, Banfield and

McCabe (2002) found three factors underlying the body image construct, including (a) cognitions and affect regarding body, (b) body importance and dieting behaviour, and (c) perceptual body image. In addition to being multidimensional, body image experiences have been viewed as fluctuating and contextual (Cash, 2011).

Most recently, body image has been described as the psychological experience of how a person experiences embodiment, including, but not limited to, physical appearance (Cash, 2012). Thus, the body image construct now recognizes embodied experiences related to, for example, physical functionality and competencies as well as appearance-related experiences (Cash, 2012). A summary of the body image construct is provided in Table 1.2.

Table 1.2

Summary of Body Image Construct

Time Period	Major Contributor(s)	Idea/Definition
Historically (1980s)	Slade (1988)	The picture in one's mind of his or her own body size, shape, and form, along with feelings about body characteristics and parts
	Cash & Brown (1987)	Perceptual and affective components (<i>body size distortion</i> , and <i>body dissatisfaction</i>)
Later Conceptualizations	Cash (2002)	Perception of one's own body based on feelings and experiences that are influenced by social, cultural, and individual factors that change throughout life.
		<i>Overconcern</i> – preoccupation with weight and shape
	Fairburn et al. (2003)	<i>Overvaluation</i> – evaluation of self-worth largely in terms of weight and shape
	Allen et al. (2008)	Body consciousness – consists of body surveillance, body shame, and appearance control beliefs. <i>Body surveillance</i> : viewing one's body as an observer. <i>Body shame</i> : feeling bad if standards are not met.
	McKinley (2006)	<i>Appearance control beliefs</i> : believing one can change his or her appearance with enough effort.
Most Recent Conceptualizations	Cash (2002, 2011)	Body image is multidimensional and is fluctuating and contextual.
	Cash (2012)	The psychological experience of how one experiences embodiment, especially one's physical appearance, but not limited to that.

Body Image as a Pathology-Focused Field

As (Cash, 2012) indicated, the study of body image has largely been pathology-focused. For example, a significant body of research exists to suggest that specific body image disturbances, including those previously noted as well as overall negative body image can lead to physical and psychosocial problems, including maladaptive eating, poor self-esteem, anxiety, and depression (Choate, 2005; Mussel et al., 2000; Stice & Shaw, 2002). In fact, body image disturbances, such as body dissatisfaction, have been considered a primary factor in the development of eating disorders, including Anorexia Nervosa and Bulimia Nervosa (American Psychiatric Association, 2013; Cash & Brown, 1987; Stice, Marti, & Durant, 2011; Thompson, Heinberg, Altabe, & Tantleff-Dunn, 1999). Given that eating disorders (Marques et al., 2011; Thompson & Smolak, 2001) and negative body image (Liimakka, 2011) disproportionately affect women, it is important to examine how women's body image develops and fluctuates over the lifespan.

Women's Body Image Development

Broadly, women's body image development is contextualized in the literature through a biopsychosocial model (Wertheim & Paxton, 2012). This model includes biological factors (e.g., genetic and physical influences), individual or psychological factors (e.g., personality), and sociocultural factors (e.g., interpersonal processes, cultural and societal norms; Wertheim & Paxton, 2012). For this research study, sociocultural factors were the main focus.

Sociocultural factors include cultural norms, interpersonal and communication processes, and other sociocultural influences such as the media, parents, and peers (Wertheim & Paxton, 2012). Sociocultural factors are understood through the sociocultural theory (Thompson et al., 1999) and the tripartite model of influence (Thompson et al., 1999). Sociocultural theory

proposes that the cultural and societal standard of thinness is a major factor in the development and maintenance of negative body image in Western society (Thompson et al., 1999). The tripartite model of influence refers to the direct impact of peers, media, and family on body image (Budgeon, 2003; Tiggemann, 2012), as well as the indirect and mediational links of internalization of societal appearance standards and appearance comparison processes (Hardit & Hannum, 2012; Thompson et al., 1999; Shroff, & Thompson, 2006). Appearance comparison processes are understood through social comparison theory (Festinger, 1954), which emphasizes the natural human desire to evaluate and compare one's self with others (Thompson et al., 1999). Other interpersonal processes that have been discussed in the body image literature include temperament and attachment styles. For example, anxious interpersonal attachment styles correlate with dysfunctional body image attitudes (Cash, 2012), including higher levels of body dissatisfaction (Hardit & Hannum, 2012). The above influences impact women's body image development over the life course. The next sections will review women's body image development beginning in childhood throughout adulthood.

Childhood and adolescence. Research has shown that negative body image and body dissatisfaction are prevalent in females regardless of cultural background (Levine & Smolak, 2002; Thompson et al., 1999). Literature has suggested that by age six, girls start to express concerns about their own weight or shape (Smolak, 2011). In this research, 40 to 60% of elementary school girls (aged six to 12) expressed concern about their weight or shape (Smolak, 2011). Furthermore, the researchers noted that these concerns were evident in girls from various countries around the world and across North America, Eastern and Western Europe, Asia, and Australia (Smolak, 2011). Research has found lower levels of body surveillance and body shame in preteen girls compared to adolescents or undergraduate women, yet preteen girls reportedly

had higher levels of body surveillance than their same-age male counterparts (McKinley, 2011). During puberty and beyond, female bodies change in ways that are not reinforced by Western cultural ideals of thinness (Thompson et al., 1999). Thus, studies have shown that by adolescence, over one-half of girls have used unhealthy weight control behaviours such as skipping meals, fasting, smoking cigarettes, vomiting, and taking laxatives (Neumark-Sztainer, 2005).

Adulthood. Arnett (2000) identified the period of emerging adulthood (i.e., ages 18 to 25) as a culturally constructed stage of early adult development. Arnett suggested that emerging adulthood be considered a unique stage of development due to historical and societal factors such as the increased expectation to obtain higher education and the increased average age of marriage and childbearing. Emerging adulthood is widely apparent in industrialized nations; in this way, it is not necessarily universal and absolute (Arnett, 2000). In contrast to earlier stages (e.g., adolescence) and later stages (e.g., adulthood), greater variability occurs throughout emerging adulthood. For example, Arnett indicated that it is an unpredictable period of time in an individual's life, for example, in terms of residence and school attendance. Despite this variability, Arnett indicated "a key feature of emerging adulthood is that it is the period of life that offers the most opportunity for identity explorations in the areas of love, work, and worldviews" (p. 473). The age period of emerging adulthood has been extended to include individuals between the ages of 18 and 29 (Tanner, Arnett, & Leis, 2009). Emerging adulthood is now considered to be a unique period of development in terms of cognitive and personality development, mental and physical health, relationships, education, careers, and independence (Tanner et al., 2009).

With regard to body image and mental and physical health, the transition into, and development throughout, emerging adulthood represents a shift in many previously held roles and values, which may have implications for body esteem (Heatherton, Mahamedi, Striepe, Field, & Keel, 1997; McKinley, 2006). For example, research has suggested that women reported increased body satisfaction and declines in eating problems at a 10-year follow-up from initial scores during a first-year college course (Heatherton et al., 1997). In a similar study, McKinley (2006) found decreased body surveillance and shame after college completion at the 10-year follow up. However, women (27 to 36 years of age) in phase two of McKinley's (2006) study experienced increased weight dissatisfaction over time and no changes in dieting over time. Additionally, although decreases were seen in the study completed by Heatherton et al. (1997), they noted that body dissatisfaction and desire to lose weight were still high.

Research has indicated that women struggle with body and eating-related issues throughout their lifetime (Becker, Diedrichs, Janowski, & Werchan, 2013; Prais & Janowsky, 2010; Slevec & Tiggemann, 2011). As women age, they may not experience the same pressure to be thin and beautiful as younger women, yet negative body image and body dissatisfaction continue to afflict women throughout midlife (generally identified as 35-59 years of age; Slevec & Tiggemann, 2011) and into older adulthood as well (i.e., ages 65-80; Prais & Janowsky, 2010). For example, in one study both younger women (aged 25-35) and older women (aged 65-80) reported similar levels of body dissatisfaction, but younger women experienced more societal pressure for thinness and had higher scores on drive for thinness (Prais & Janowsky, 2010). Additionally, research has suggested that women in young and middle adulthood endorsed similar (thin) ideals and exhibited similar levels of body satisfaction (Tiggemann, 2004). Some literature has indicated that women in middle adulthood (aged 40-60) were equally

or more satisfied with their bodies compared to younger and older women (Grogan, 2012). Other research examining older adulthood (aged 65-85) found that as women aged they evaluated their appearance more positively, yet reported investing more time in their appearance (Baker & Gringart, 2009). At the later range of this age group (aged 72-85), women reported being more concerned about physical health rather than physical appearance. Although physical health became more important, women in this later age group reported significantly higher levels of anxiety about becoming overweight than men of the same age group (Baker, & Gringart, 2009).

Not only are thinness and appearance of particular interest to women, but maintaining a youthful appearance is as well (Becker et al., 2013). The results of a study by Becker et al. (2013) indicated that women of all ages were concerned with weight, as measured by *fat talk*, or body image talk regarding a person's shape and size. However, fat talk tended to decrease as women aged. In addition, results indicated that women of all ages were concerned with youth, as measured by *old talk*, or body image talk regarding a person's age. As one might guess, old talk tended to increase with age. Thus, research has suggested that women in all age categories are privy to body concerns. For young women, the most salient element of the thin-young cultural ideal is thinness; for women in midlife, both thinness and youth are of concern; for older women youth becomes the most salient element (Becker et al., 2013). A summary of women's body image development is provided in Table 1.3.

Table 1.3

Summary of Women's Body Image Development: Sociocultural Factors

Theory	Major Contributor(s)	Definition
Sociocultural Theory	Thompson et al. (1999)	The cultural and societal standard of thinness is a major factor in the development and maintenance of negative body image in Western society
Tripartite Model of Influences	Budgeon (2003); Tiggemann (2012)	Refers to the direct impact of peers, media, and family on body image
	Hardit & Hannum (2012); Thompson et al. (1999); Shroff & Thompson (2006)	Also takes into account indirect and mediational links, including internalization of societal appearance standards and appearance comparison processes
Social Comparison Theory	Festinger (1954)	Emphasizes the natural human desire to evaluate and compare one's own self and abilities to those of others.

Feminist Approaches to Body Image and Embodiment

Research on negative body image, and its effects, is longstanding and extensive. Rodin et al. (1984) coined the term *normative discontent* over 30 years ago to describe the phenomenon of extensive body and weight-related dissatisfaction that women face, suggesting it is the norm rather than the exception. Research on normative discontent, body dissatisfaction, and risk factors for eating disturbances and eating disorders intensified as a result of this concept (Tantleff-Dunn, Barnes & Larose, 2011). Many researchers have adopted feminist approaches to studying normative discontent and related bodily processes that women encounter within particular sociocultural contexts (Liimakka, 2011).

A feminist approach to body image suggests that women's normative discontent or body dissatisfaction is a social phenomenon, rather than a function of individual pathology (McKinley, 2011). For example, women learn through the sociocultural context to equate physical attractiveness to self-worth (Bergner et al., 2008; Peterson et al., 2008; Piran, 2010). However, a feminist theory goes beyond sociocultural models and takes into account the lived experiences of women in a patriarchal culture (Murnen, & Seabrook, 2012). Feminist approaches acknowledge that women's socialization contributes to gender role expectations and conformity (Allan, 2005) as well as gendered power relationships (McKinley, 2011). The definition of attractiveness varies by culture (Bergner et al., 2008). Women internalize the social values associated with the cultural ideal and, in turn, tend to view themselves negatively (Brown, Weber & Ali, 2008; Jambekar, Quinn & Crocker, 2001; Liimakka, 2011) and feel insecure and disconnected (Orbach, 2009) if they cannot achieve these ideals. The thin and beautiful ideals and the goal of perfection have been democratized; society portrays these ideals as accessible to anyone irrespective of economic situation (Orbach, 2009). Due to the social constructions and cultural ideals of femininity and physical attractiveness, female gender is among the major risk factors for the development of negative body image, body dissatisfaction, and disordered eating (Brown & Jasper, 1993; Jacobi et al., 2004; Piran & Cormier, 2005). Some feminist scholars view problems such as eating disorders, depression, and anxiety as expressive and embodied protests against the restrictions and discrimination toward women in society (Beauboeuf-lafontant, 2005). Two feminist theories on embodiment are relevant for the current study. The first is body becoming theory, which attends to the social construction of bodies as well as individuals' lived experience in their bodies (Rice, 2014). Likewise, the developmental theory of embodiment describes embodiment as an individual and social phenomenon (Piran & Teall, 2012). The

current study utilized the developmental theory of embodiment as a framework with which to understand the embodiment construct. These theories will be discussed in turn.

Body Becoming Theory

One offshoot of feminist philosophies on the body is body becoming theory (Battersby, 1998; Rice, 2014). Body becoming theory acknowledges the importance of how bodies are portrayed and talked about (i.e., through a social constructionism lens), and also attends to the lived experiences of bodies (Rice, 2014). Body becoming theorists see the body as fluid and evolving through the relations with natural and cultural influences, rather than bounded and stable entities (Rice, 2014). Bodies are emergent and exist as a result of a dynamic interplay between their own agency and social and affective forces acting upon them (Battersby, 1998; Braidotti, 2002; Rice, 2014). As such, body becoming theory acknowledges that bodily experiences develop through the interaction among physicality, accidental and unpredictable events, and the social and cultural context (Braidotti, 2002; Rice, 2014). Women speak, think, and represent femininity in their own subjective terms, which is an active process of becoming (Braidotti, 2002). I came across body becoming theory during the later stages of this research and although it did not directly inform this study I believe it is an important and relevant viewpoint for the current study.

The Developmental Theory of Embodiment

The developmental theory of embodiment (DTE) is another feminist approach and informed the current research study. The DTE examines various social experiences and attempts to explain how those shape women's body experiences. According to the DTE, embodiment refers to how girls and women inhabit their bodies and includes positive and negative experiences (Piran & Sigall, 2011; Piran & Teall, 2012). As such, embodiment is closely tied to

a woman's identity, which is shaped by individual and collective experiences across the lifespan as a result of interactions within the family, community, and culture (Hesse-Biber, Livingstone, Ramirez, Barko, & Johnson 2010; Piran & Teall, 2012).

Positive embodiment (also known as connected embodiment or embodied agency, care, and joy) and disrupted (or negative) embodiment are both multidimensional elements that exist along a continuum of body experiences (Piran & Sigall, 2011). Positive embodiment consists of elements including but not limited to “feeling ‘at one’ with the body; embodied power and agency, body functionality/competence, a ‘subjective’ experience of living in the body with limited external consciousness, the freedom to challenge external standards ... [and] to express individuality through the body” (Piran & Teall, 2012, p. 183). On the other hand, disrupted embodiment consists of elements including but not limited to “body/self disconnection, body as a site of disempowerment, body as a site of low functionality, external consciousness about the body, preoccupation with fitting external standards of appearance ... [and] limiting individuality in order to fit in” (Piran & Teall, 2012, p. 184).

In addition to the positive/disrupted embodiment continuum, the DTE emphasizes three main dimensions, including physical, mental, and social, which each incorporate freedom or corseting as opposing ends of a continuum (Piran & Teall, 2012). Piran and Teall (2012) defined these dimensions.

Physical freedom is related to experiences that enhance a female's sense of her body as a physical site of safety and care (Piran & Teall, 2012). As such, she will experience freedom and competence in movement. This results in comfort with physical desires and age-related changes. Physical corseting is related to a female's sense of her body as a physical site that is unsafe or neglected. As such, she will experience limited freedom and competence in movement. This

results in the restriction of physical desires and a discomfort with age-related changes.

Mental freedom is related to the freedom to explore and determine a unique sense of identity (Piran & Teall, 2012). In this way, females will experience the autonomy to resist being placed into socially created groups (e.g., tomboy or girly girl). As such, they avoid oppressive social discourses and groups that force embodied experiences into restrictive categories. On the other hand, mental corseting is related to the restriction to explore and determine a unique sense of identity. In this way, females will feel restricted and pressured to abide by socially created groups.

Finally, social power relates to experiences that reflect equity and connection to desired communities, whereas social disempowerment relates to experiences that reflect inequity and lack of connection to desired communities (Piran & Teall, 2012). According to Piran and Teall (2012), embodying privilege is associated with positive embodiment, which includes all of the aspects of social location in terms of gender, social class, and ethnocultural group membership. On the other hand, embodying inequity related to social location disrupts a person's body experiences. Some research has validated this. For example, higher body surveillance has been found among individuals of minority, including low-income women and lesbians (McKinley, 2011). In addition, research has shown that African American women have higher body shame (McKinley, 2011) and higher body dissatisfaction (Rice, 2014) in comparison to individuals with lighter skin tones.

The DTE highlights the multidimensional nature of the construct of embodiment. It was created through the use of multiple methods including quantitative, qualitative, and mixed methodologies. The DTE defines the embodiment construct as having more breadth and inner focus, emphasizing mind and body as one, as opposed to the construct of body image, which

reflects the internalization of a third-person perspective (Liimakka, 2011; Piran & Teall, 2012).

A summary of feminist approaches to embodiment is provided in Table 1.4.

Table 1.4

Summary of Feminist Approaches to Embodiment

Theory	Major Contributor(s)	Definition
Body Becoming Theory	Battersby (1998); Braidotti (2002); Rice (2014)	<p>Acknowledges the importance of how bodies are portrayed and talked about, and also attends to the lived experiences of bodies.</p> <p>Acknowledges the role of individual experiences, and the social and cultural context; emphasizes that bodily experiences develop through the interaction among these elements.</p>
Developmental Theory of Embodiment (DTE)	Piran & Teall (2012)	<p>Embodiment refers to how girls and women inhabit their bodies, and includes positive experiences, such as body attunement, joy, and self care, and negative experiences, such as objectification of the body and self-harm practices.</p> <p>The DTE emphasizes three main dimensions, including physical, mental, and social, which each incorporate freedom or corseting as opposing ends of a continuum.</p>

Research on Body Image and Embodiment

Until recently, researchers have focused heavily on body dissatisfaction and risk factors as precursors to disordered eating and eating disorders (e.g., Jacobi et al., 2004). Despite widespread body dissatisfaction and pressures related to the thin ideal in Western culture, some

women feel satisfied with their bodies and do not experience negative body image and related problems (Cash & Pruzinsky, 2002). Cash and Pruzinsky (2002) urged researchers to focus on protective factors in order to better understand resilience related to negative body image and eating disorders.

Resiliency to Negative Body Image

Researchers have responded to Cash and Pruzinsky's (2002) suggestion by examining protective factors. Although research has shown that body dissatisfaction, negative body image, and disordered eating are prevalent in young women regardless of cultural background (Levine & Smolak, 2002; Marques et al., 2011; Thompson et al., 1999), some previous research has suggested that African American women may experience greater protection from negative body image and disordered eating as a result of different cultural influences (Choate, 2005; Lovejoy, 2001). These influences have been identified as:

- Valuing a larger range of body sizes (Choate, 2005);
- Developing alternative, more flexible standards for valuing appearance and character (Lovejoy, 2001);
- Broadening the definition of femininity to include roles, not just appearance (Lovejoy, 2001);
- Having supportive peer and community relationships (Choate, 2005; Lovejoy, 2001);
- Internalizing familial messages of independence (Choate, 2005);
- Developing positive body image through a sense of strength, self-efficacy, and agency (Lovejoy, 2001).

A theoretical model of resiliency to negative body image was developed by Choate (2005) that included (a) family support, (b) gender role satisfaction, (c) positive physical self-concept, (d)

effective coping strategies, and (e) a sense of holistic balance and wellness. This model has been confirmed empirically through the use of quantitative research (e.g., Snapp, Hensley-Choate, & Ryu, 2012), and qualitative research (e.g., Hesse-Biber et al., 2010).

Positive Body Image

Researchers have also responded to Cash and Pruzinsky's (2002) suggestion by investigating and defining positive body image. Investigators have acknowledged that a lack of negative body image does not necessarily indicate experiencing positive body image (Menzel & Levine, 2011; Wood-Barcalow, Tylka, and Augustus-Horvath, 2010). Positive body image has been theorized as having several dimensions (similar to the body image construct), including appreciation of appearance and function, awareness of, and attentiveness to, the body, and positive cognitions for coping with interpersonal challenges to healthy body image (Menzel & Levine, 2011).

Wood-Barcalow et al. (2010) developed a preliminary definition of positive body image (PBI), and identified a model of PBI based on precursors, maintenance factors, and consequences through the use of grounded theory methodology. Fifteen college students (aged 18-21) were interviewed. Nine themes were identified, including appreciation, unconditional acceptance from others, body acceptance and love, spirituality/religion, finding others who are accepting of themselves, taking care of the body via healthy behaviours, filtering information in a body-protective manner, inner positivity influencing outer demeanor, and broadly conceptualizing beauty (Wood-Barcalow et al., 2010). Positive body image was defined as:

An overarching love and respect for the body that allows individuals to: (a) appreciate the unique beauty of their body and the functions that it performs for them; (b) accept and even admire their body, including those aspects that are inconsistent with idealized

images; (c) feel beautiful, comfortable, confident, and happy with their body, which is often reflected as an outer radiance, or a ‘glow’; (d) emphasize their body’s assets rather than dwell on their imperfections; (e) have a mindful connection with their body’s needs; and (f) interpret incoming information in a body-protective manner whereby most positive information is internalized and most negative information is rejected or reframed (Wood-Barcalow et al., 2010, p. 112).

The holistic body image model includes reciprocity, filtering, and fluidity. Reciprocity occurs between the individual and the many sources that impact body image, such as health, developmental factors, community values, and culture. Filtering occurs in a protective manner, for example, accepting positive information and rejecting negative information. Finally, fluidity occurs on two levels. There is fluidity in interactions between and among the sources impacting body image, and there is fluidity of increasing or decreasing levels of body investment and positive or negative body evaluation (Wood-Barcalow et al., 2010).

Frisén and Holmqvist (2010) investigated positive body image in adolescents and identified three main categories through thematic analysis, including satisfaction with one’s own appearance, healthy views on exercise, and positive influence of family and friends. It was concluded that having a wider view of beauty and appreciating unique differences was imperative in developing positive body image for youth (Frisén & Holmqvist, 2010). Evidently, body appreciation plays an influential role in positive body image (Iannantuono & Tylka, 2012).

Body appreciation. Positive body image has been operationalized as body appreciation, which has been defined as unconditional respect and approval of the body (Avalos, Tylka, & Wood-Barcalow, 2005). Body appreciation has been defined by four elements:

1. Favorable evaluations of the body regardless of perceived congruence with the societal

ideal appearance.

2. Body acceptance in spite of weight, body shape, and perceived imperfections.
3. Respect for the body by means of attending to its needs and engaging in healthy behaviours.
4. Protection of the body by rejecting unrealistic images of the thin–ideal prototype portrayed in the media (Avalos et al., 2005).

Impact of body appreciation. Body appreciation has been found to play a mediating role in eating behaviours. For example, it has been suggested that women who appreciate their body also report being more aware and trusting of their body's needs, including awareness of their hunger and satiety cues and then eat in response to these cues (Avalos & Tykla, 2006). This has been termed *intuitive eating*, rather than eating as a result of emotional or situational cues (Avalos & Tykla, 2006; Wood-Barcalow et al., 2010). The acceptance model of intuitive eating (Avalos & Tykla, 2006) suggests that body acceptance by others help women appreciate their body and resist internalizing or adopting a third-person's perspective of their body. This model identifies perceived social support and body acceptance by others as significant influences that result in resisting an observer's perspective of the body. Resisting an observer's perspective in turn mediates body appreciation, which then influences intuitive eating (Augustus-Horvath & Tykla, 2011; Avalos & Tykla, 2006). The intuitive eating model has been confirmed for women between the ages of 18-65 (Augustus-Horvath & Tykla, 2011).

Body appreciation was also found to protect women from the effects of negative media messages about appearance (Halliwell, 2013). Halliwell (2013) indicated that the protective effects of body appreciation occurred even in women who had higher levels of thin ideal internalization. Body appreciation led women to downplay the importance of appearance

relative to functional aspects of their bodies. Furthermore, women placed greater importance on aspects of their identity other than appearance.

Barriers to body appreciation. Iannantuono and Tylka (2012) examined interpersonal and intrapersonal factors and their relation to body appreciation. The results indicated that interpersonal barriers to body appreciation included restrictive or critical eating messages and attachment anxiety. Iannantuono and Tylka indicated that both of these barriers may occur as a result of a caregiver's attitudes and behaviour toward their children. A significant intrapersonal barrier to body appreciation included *maladaptive perfectionism*. Maladaptive perfectionism was defined as the perceived gap between how a person expects to perform and how a person evaluates that performance (i.e., having high expectations, but evaluating oneself poorly). The researchers suggested that maladaptive perfectionism might lead women to focus on flaws and strive to attain unrealistic cultural ideals. Interestingly, *adaptive perfectionism* (i.e., being neat and orderly) facilitated body appreciation in this study.

Body image flexibility. Another construct related to PBI is body image flexibility (Sandoz, Wilson, Merwin, & Kellum, 2013). Body image flexibility was developed to reflect a key element in many counselling treatment models, specifically adaptive (rather than maladaptive) regulation strategies (Hill, Masuda, & Latzman, 2013; Sandoz et al., 2013). For example, rather than engaging in maladaptive strategies (e.g., avoidance and negative self talk), body image flexibility refers to a person's ability to attend to internal experiences openly and fully, which then enables that person to engage in value-consistent behaviour (Sandoz et al., 2013). Body image flexibility is an adaptive regulation strategy and has been found to be associated with general psychological flexibility (Sandoz et al., 2013). It also impacts body dissatisfaction and disordered eating. For example, results from one study indicated that lower

levels of body image flexibility were associated with increased body dissatisfaction and disordered eating (Sandoz et al., 2013). Results from another study found that body image flexibility partially mediated the link between disordered eating cognitions and disordered eating behaviours in undergraduate students; inflexible and avoidant coping styles significantly impacted negative body image (Wendell, Masuda, & Le, 2012). Finally, greater body image flexibility has been found to be associated with lower disordered eating behaviour irrespective of ethnic background, although this finding only held true for individuals with low body mass index (Hill et al., 2013).

Self-compassion and self-esteem. Similar to body image flexibility and adaptive regulation strategies, *self-compassion* has been defined as being open to one's own suffering and acknowledging the impact of such; not avoiding or disconnecting from it, but rather exhibiting the desire to heal one's self with kindness (Wasylikiw, MacKinnon, & MacLellan, 2012). Self-compassion incorporates three components, including: (a) self-kindness, or being kind and understanding to one's self rather than being harsh, judgmental, and critical; (b) common humanity, or a recognition that one's experiences are common to all individuals rather than seeing them as isolated and separate; (c) mindfulness, or a mindful and balanced awareness of one's shortcomings versus over-identification of them (Neff, 2003). Thus, self-compassion involves self-awareness, nonjudgmental understanding, and a flexible mindset (Neff, 2003; Wasylikiw et al., 2012). It often results in enhanced feelings of compassion and concern for others as well (Neff, 2003). Self-compassion has roots in humanistic psychology (Neff, 2003).

Self-esteem is defined as the general overall evaluation of one's self (Wasylikiw et al., 2012). It has been suggested that self-esteem is highly influenced by judgments and evaluations by others and comparisons to others (Neff, 2003). Low self-esteem has been suggested as a

mediating factor contributing to eating disorders (alongside perfectionism and body dissatisfaction), whereas high self-esteem may act as a protective factor (Stice, 2002). Wasyliw et al. (2012) examined the influences of self-compassion and self-esteem on various factors including self-acceptance, eating guilt, body preoccupation, and depressive symptoms. Results indicated that individuals who were high in self-compassion were also increasingly accepting of themselves and experienced less eating guilt, less body preoccupation, and less depressive symptoms. Furthermore, self-compassion had a unique role in women's body concerns, or lack thereof, above and beyond self-esteem.

Summary of Body Image Research

In summary, research examining protective factors or resiliency to negative body image has increased in the last decade. Constructs such as positive body image, body appreciation, body image flexibility, self-compassion, and self-esteem have been researched and discussed. A summary of research on body image is provided in Table 1.5. Despite these efforts, there remains a focus on the construct of body image specifically, while attention to the broader notion of embodiment is lacking.

Table 1.5

Summary of Research on Body Image

Area	Major Contributor(s)	Topic and Findings
Resiliency to Negative Body Image	Choate (2005)	Theoretical model of resiliency to negative body image included (a) family support, (b) gender role satisfaction, (c) positive physical self-concept, (d) effective coping strategies, and (e) a sense of holistic balance and wellness.
Positive Body Image	Wood-Barcalow et al. (2010)	Positive body image includes 9 themes (e.g., appreciating unique beauty, accepting and admiring the body).
	Frisén and Holmqvist (2010)	Positive body image includes 3 categories (e.g., healthy views on exercise, and positive influence of family and friends).
Body Appreciation	Avalos et al. (2005)	Favourable evaluations of the body; body acceptance; respect for the body by attending to its needs; rejecting unrealistic images of ideal.
Body Image Flexibility	Sandoz et al. (2013)	Ability to attend to, and experience, internal experiences and engage in value-consistent behaviour.
Self-compassion	Wasylikiw et al. (2012)	Being open to suffering; exhibiting the desire to heal oneself with kindness
	Neff (2003)	Self-kindness, common humanity, and mindfulness
Self-esteem	Wasylikiw et al. (2012) & Neff (2003)	General and overall evaluation of oneself. Highly influenced by judgments and evaluations by others

Embodiment

In addition to contending that researchers focus more on protective factors (Cash & Pruzinsky, 2002), Cash (2002) argued for a shift away from research on body image pathology and toward research that attempts to understand positive and fulfilling experiences of embodiment. Research that focuses on embodiment will now be reviewed: specifically, research on women's embodiment and sport, mind-body exercises and their effects on bodily experiences, embodiment and self-concepts, social discourses and embodied consumerism, and embodiment as it relates to health or illness. Because of the lack of research on embodiment in psychology, research from various disciplines, including physical education, psychology, sociology, and business will be reviewed.

Embodiment and sport. Considerable research has been done with adolescent and adult athletes with regard to their embodiment, including bodily experiences and conduct (e.g., Young, 1980; Young & White, 1995), negotiation of gender roles and status (Krane, Choi, Baird, Aimar, & Kauer, 2004; Shakib, 2003; Watts, 2011), and body image and well being (Abbott & Barber, 2011; Slater & Tiggemann, 2011; Snyder & Kivlin, 1975). For example, Young (1980) compared men and women regarding differences in everyday body movements (such as sitting) as well as skilled activities (such as athletics). Among many observations, he noted that men move more freely, whereas women's movements are more constricted. For example, women in Young's (1980) study reported a greater fear of injury. Thus, self-consciousness was higher in women than in men. However, in another study, women were just as willing as men to expose themselves to risk or injury (Young & White, 1995).

Young (1980) argued that the modalities for feminine movement include *ambiguous transcendence*, *inhibited intentionality*, and *discontinuous unity* with surroundings. Ambiguous

transcendence was defined as limited openness to the world. For example, Young suggested that women's bodily existence was ambiguous; it should have been free and open, yet in actuality it was highly constricted. Inhibited intentionality was defined as the underuse of the body's capacity. For example, intentionality of bodily movement occurred, but then actions were limited; women believed they could complete something, but then felt that they physically could not. Finally, discontinuous unity was highlighted as a consequence of inhibited intentionality, whereby the disconnect between aim and enactment produced discontinuous unity with the women's surroundings.

Other results have highlighted the ambiguity and contradiction in women's bodily experiences during participation in sports. For example, it has been suggested that participation in sports can make women feel strong, proud, and able (Krane et al., 2004), causing women to feel enabled and empowered (Young & White, 1995). Yet, sports can also make women feel constrained (Young & White, 1995) or marginalized and different from other women who do not participate in sports (Krane et al., 2004). Similar tensions have been reported in younger samples. For example, Shakib (2003) observed that adolescent girls spoke of the need to renegotiate the conflict between femininity and athleticism. In addition, if girls chose to emphasize athleticism, and thus downplay femininity and popularity, peers questioned their sexual orientation. It has been suggested that women who participate in athletics and sports may be reproducing masculine orientations; however, researchers also acknowledge that the vocabularies of female athletes may occur due to the lack of alternatively available discourses (Young & White, 1995), or due to masculine, feminine, heterosexual, or homosexual gender norms (Watts, 2011).

Research has historically suggested that women who engage in organized sports and

athletics reported higher psychological well-being and higher body image than their non-athlete peers (Snyder & Kivlin, 1975). More recently, Abbott and Barber (2011) examined the association between a female's participation in sport and her body image. In this study, body image incorporated body values, behavioural investment, and satisfaction across both aesthetic and functional dimensions of the body. Thus, aspects of body image and embodiment were included. Abbott and Barber compared over 1000 adolescent girls (aged 13-18) who were either participants in team sports, participants who were physically active but not involved in team sports (e.g., girls who went to the gym, walked, or jogged), and participants who were not physically active (e.g., girls who did not report playing team sports or engaging in physical activity). They found that females who participated in organized team sports reported higher functional body image, higher behavioural investment in their body, and greater satisfaction with the functional dimension of the body, compared to both physically active and non-physically active girls. Additionally, results indicated that, contrary to previous research (e.g., Slater & Tiggemann, 2011), girls involved in aesthetic sports (e.g., focused on appearance, such as dance) and non-aesthetic sports (e.g., not focused on appearance) did not differ from each other in their aesthetic values, functional values, or behavioural investment. Thus, it has been suggested that sport participation may help women experience increased aspects of positive embodiment, such as higher levels of mind-body integration, body awareness and body responsiveness, physical empowerment and competence, and positive body image via lower levels of self-objectification (Abbott & Barber, 2011; Menzel & Levine, 2011). However, drawbacks of sport participation have also been acknowledged. For example, aesthetic or weight-focused sports may put individuals at higher risk of body-specific pathologies (Menzel & Levine, 2011; Slater & Tiggeman, 2011).

Despite the potential benefits of participating in organized sports, research has unfortunately found that males are more involved in organized sports than females and females are more involved in non-organized physical fitness activities (e.g., going to the gym, walking, swimming laps; Slater & Tiggemann, 2011). Additionally, girls experienced more teasing from peers while engaging in sport and physical activities and this teasing was positively related to body image concerns (Slater & Tiggemann, 2011).

Mind-body exercises and their effects on bodily experiences. Mind-body exercises (such as yoga) have been identified as one way to potentially enhance embodiment and reduce experiences of self-objectification (Impett, Daubenmier, & Hirschman, 2006). Yoga is considered a mind-body exercise partly because of its emphasis on nonjudgmental awareness of the felt-experience of the body (Impett et al., 2006). Yoga emphasizes body awareness and responsiveness to body sensations (Impett et al., 2006). Impett et al. (2006) examined yoga practice and the effects of such on embodiment and self-objectification. Results indicated that yoga was a powerful tool to decrease self-objectification among women and increase embodiment and well-being. For example, after immersion in yoga, women reported that they cared less about how their bodies appeared to others and more about how their bodies felt to themselves. However, other research indicated that being connected to mind-body tenets of Eastern philosophy, such as participation in yoga and/or Pilates, did not necessarily result in increases in positive embodiment, and some of the young women who participated in these activities were at equal or higher risk of disordered eating behaviours (Neumark-Sztainer, Eisenberg, Wall, & Loth, 2011).

Embodiment and self-concepts. Some research has examined embodiment in terms of meaning making and experiences of self. Beauboeuf-lafontant (2005) wrote an article that

described a self-proclaimed hip-hop feminist Joan Morgan and her retirement from the cultural construction of strong black woman. Specifically, Joan experienced a “disconnection from self and the stoicism she was raised to see as the only acceptable way to be black and female” (p. 107). Applying this concept more generally, when women resist cultural pressures of thinness, beauty, and youth and engage in personal meaning making apart from the societal ideals and norms, they may, in the process, feel disconnected and lose a (previous) sense of self that had been moulded as a result of cultural expectations. Then, after period of time, they “[re]define and manifest what they want their womanhood to mean for themselves” (Beauboeuf-lafontant, 2005, p. 121). This redefinition is a difficult one because of the importance placed on others opinions and the inevitable nature of social comparisons. For example, Rice (2014) found that outsiders responses to individuals’ bodily changes throughout puberty and adolescence continued to impact participants’ identity development and their understanding of what it meant to look and feel like a woman.

Similarly, Jenkins (2008) argued that an individual’s self-concept and identity becomes known because we are embodied individuals, “reciprocally implicated in, and constitutive of, human relationships and the human world” (p. 61). He adopted a unitary model of embodiment, such that selfhood is simultaneously cognitive and emotional, individual and collective, and interconnected and interdependent. Jenkins indicated that “common knowledge and shared symbols – culture – constitute mind and selfhood” (p. 69). Yet, he also acknowledged that agency is central to selfhood. Therefore, the self is individual and interactional; furthermore, self-concepts adapt and change over time (Jenkins, 2008). Additionally, Jenkins argued that selfhood is implicated in the embodiment of varying identities including gender, ethnicity, (dis)ability and so on, and that individuals embody selfhood differentially depending on space

and time.

In her article on embodied identity, Budgeon (2003), like Jenkins (2008), also suggested that in this time and space, bodies are increasingly central to a person's self-concepts. Budgeon also indicated that feminists have critiqued and challenged mind/body dualism and Western metaphysics of mind as valued over the body (Budgeon, 2003). She argued:

“It is the system of binaries which has served to negate the feminine and locate women outside the realm of the subject. As a consequence, the feminine (and the female body) has historically been constituted as that which must be defined, directed, and controlled through the application of disembodied, objective, masculine knowledge.” (Budgeon, 2003, p. 37)

Therefore, women constantly feel that their body can and should be improved (Orbach, 2009).

This issue arose in many of the interviews Budgeon had with young women. Budgeon indicated that embodied agency is partly inhabited due to societal norms and idealized images. However, some women normalized pathological relationships with their bodies. In Budgeon's study, most women defined embodiment, and dilemmas around it, as inherently being about constructing identity and indicated that it was about how the body was lived, not how it looked.

Researchers have argued that embodiment shapes a person's identity and their interactions in the world, which also impacts eating behaviour (Stanghellini, Castellini, Brogna, Faravelli, & Ricca, 2012). Stanghellini et al. (2012) recently developed and validated a self-report questionnaire named IDEA (short for identity and eating disorders) in order to test the hypothesis that eating disorders are affected by disturbances in embodiment. They hypothesized that individuals with eating disorders experience their own body as an object, rather than from a first-person perspective. In a factor analysis, four factors were identified, including: (a) feeling

oneself only through the gaze of the other and defining oneself only through the evaluation of the other; (b) feeling oneself only through objective measures; (c) feeling extraneous from one's own body; (d) and feeling oneself through starvation. It appears that the embodiment construct is gaining momentum in the empirical psychology literature.

Social discourses and embodied consumerism. In another area of research, Kristensen, Askegaard, and Jeppesen, (2013) examined marketing and consumer strategies. They looked at consumer's strategies in relation to perceptions of healthy food and management of food-related health risk. The researchers argued that the embodied sense of self is never personal, but rather reflects macro-social discourses. For example, participants expressed confusion concerning different health messages (e.g., the food pyramid, Atkins diets), such that the more conscientious they had become, the harder it was to find healthy food products. Some health-conscious individuals spent excessive amounts of time researching or examining the nutritional information of food products before buying them. Other health-conscious participants indicated the importance of feeling good for optimal bodily functioning. This involved buying organic foods without necessarily examining the nutritional information. These participants expressed relying on inner feelings and bodily experiences, for example, feeling cleansed and energetic. Interestingly, Kristensen et al. (2013) identified that in either case, participants conformed to a "strict performance of a pre-defined health script" (p. 247). In other words, it is societal discourses that provided the rationale for healthy eating and how to go about it.

Embodiment and health or illness. Other researchers have examined health or illness and how it impacts bodily experiences. Charmaz (1994) used a constructivist grounded theory approach to examine chronic illness. The individuals that Charmaz interviewed either had chronic illnesses that resulted in periodic, progressive, or permanent visible disabilities, or other

disabilities that remained invisible. Charmaz set out to explore how these people thought and felt about their disabilities and in the process sought more information about how they conceptualized time. This became a major category and was called *living one day at a time*. Participants discussed this as a strategy for managing emotions and life, and getting through a troubling period; living one day at a time was a way to focus on the present and relinquish other future goals or obligations (Charmaz, 2014). This is somewhat contrasting with Western norms and values which, for example, encourage individuals to continually strive to achieve in an autonomous, analytic, and linear thinking style (Lehman, Chiu, & Schaller, 2004) and focus more on future endeavours rather than present activities and relations (Carter, 1991). It has been suggested that in Western culture, there is an emphasis on the mind and body as separate, in contrast to the Eastern philosophy of mind and body as one (Sue & Sue, 2013). Likewise, Sointu (2006) discussed embodiment and alternative and complimentary medicine or health practices. Sointu indicated that healing the body, the mind, and the spirit involves increasing the sense of mind and body connectedness as well as authorship and agency through inner reflection. However, this conceptualization (e.g., feelings as located in the body and not just in the mind) lacks recognition in mainstream Western culture (Sointu, 2006).

Summary of Research on Embodiment

Research on embodiment has occurred across several disciplines. A summary is provided in Table 1.6. However, research on embodiment has produced mixed results. There continues to be differing opinions regarding what embodiment is, how it is experienced, and what implications it may have.

Table 1.6

Summary of Research on Embodiment

Area	Major Contributor(s)	Topic and/or Findings
Women's Embodiment and Sport	Young (1980); Young & White (1995)	Bodily experiences and conduct
	Krane et al. (2004); Shakib (2003); Watts (2011)	Negotiation of gender roles and status
	Abbott & Barber (2011); Slater & Tiggemann, (2011)	Body image and well being.
Mind-body Exercises	Impett et al. (2006)	Yoga may help decrease self-objectification among women and increase embodiment and well-being.
	Neumark-Sztainer et al. (2011)	Yoga and Pilates do not necessarily result in increases in positive embodiment
Embodiment and Self-concepts	Beauboeuf-lafontant (2005); Jenkins (2008); Rice (2014)	Individuals create meaning and self-concepts develop via individual agency and social interactions
	Budgeon (2003); Jenkins (2008); Orbach (2009)	Time, space, and other social factors (e.g., gender, ethnicity) impact embodiment
Social Discourses and Consumerism	Kristensen et al. (2013)	Embodied sense of self is never personal, but rather reflects macro-social discourses
Embodiment, Health, and Illness	Charmaz (1994)	Individuals with chronic illnesses conceptualize time in various ways (e.g., <i>living one day at a time</i>)
	Sointu (2006)	Healing the body, the mind, and the spirit involves increasing mind/body connectedness and agency

The Current Study

The current study explored women's embodied experiences in emerging adulthood. In this study, the construct of embodiment was likened to that of an umbrella (Balsden, 2014), in which the construct of body image exists alongside other dimensions of embodiment (see Figure 1). These other dimensions include body attunement or disconnect, physical functionality or lack of physical functionality, joy or despair, and self-care or self-harm (Piran & Teall, 2012). These dimensions reflect the elements implicated in the DTE, which was used as a framework with which to understand the embodiment construct.

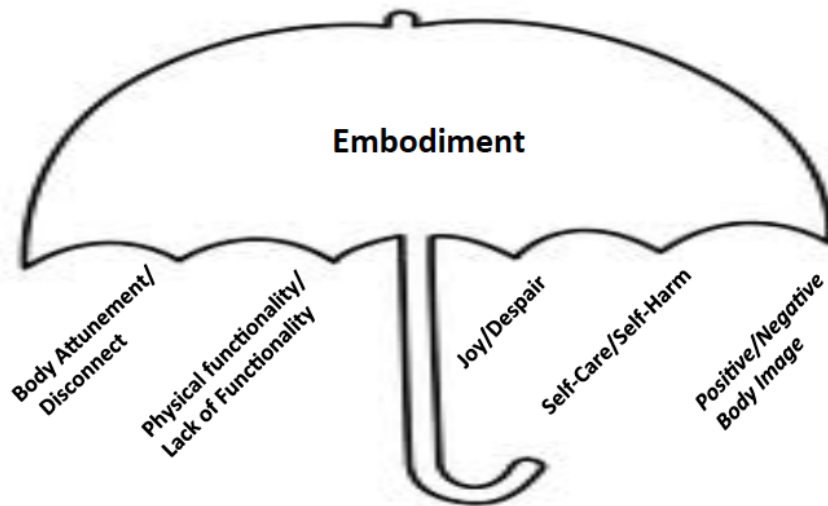


Figure 1. Conceptualizing the Embodiment Construct in the Current Study. Adapted from “The Developmental Theory of Embodiment” by N. Piran & T. Teall, 2012, In G. L. McVey, M. P. Levine, N. Piran, & H. B. Ferguson (Eds.), *Preventing eating-related and weight-related disorders: Collaborative research, advocacy, and policy change* (pp. 169-198). Copyright 2012 by Wilfred Laurier University Press, Ontario, Canada.

Women in emerging adulthood were chosen because women in this stage of adulthood may still experience similar pressures and disruptions as those that adolescents face. As well, some research has suggested that cohorts between 18 to 29 years of age have heightened risk for

mental health problems, including depression (Tanner et al., 2009), body or weight dissatisfaction (Becker et al., 2013; Tiggemann, 2004), and eating disorders (Hudson, Hiripi, Pope Jr., & Kessler, 2007) compared to older cohorts. Therefore, the results of the current study may have direct implications for prevention and intervention programs related to disrupted embodiment and body-specific pathologies experienced by young women.

Rationale for Considering Positive Embodiment

It is clear from the previous research that embodiment is an important construct related to women's bodily functionality and identity. Yet, much of the psychology literature still focuses on the construct of body image specifically. Over the past several years, the developers of the DTE produced a theory in accordance with the paradigm shift that Cash (2002) indicated was necessary. The DTE conceptualizes negative and positive experiences of embodiment in female youth based on empirical analyses (Piran & Teall, 2012). However, other empirical research on embodiment in the psychology literature is lacking. Although scholarship on embodiment has increased in the last decade, it has been more theoretical (Tolman et al., 2014). This study follows the recommendations of previous scholars (Cash, 2002; Cash & Pruzinsky, 2002) and takes a qualitative approach to explore factors that young women identified as important for maintaining positive embodiment.

Chapter Summary

In summary, considerable research has focused on the risk factors that lead to the development of negative body image and body-specific pathologies in women. Research exploring positive influences and positive body image is still in its infancy (Cash & Pruzinsky, 2002; Snapp et al., 2012). Particularly absent in the psychology literature is qualitative research exploring the positive experiences of the body and self as one, or positive embodiment (Piran &

Teall, 2012). The current study addressed the gaps in the literature. It has been noted that gaining further knowledge of positive embodiment and how women maintain it within a Western sociocultural context can lead to valuable information regarding protective and resiliency factors (Choate, 2005). The results of the current study led to broader understandings of embodiment. In addition, the findings may inform therapists and other professionals who employ prevention and intervention programs for young women. Finally, the focus on positive embodiment in this study and in future studies may help to inform social justice efforts for women in various disciplines, particularly in counselling psychology.

CHAPTER THREE

Methodology

This study explored the question: *how do women experience and maintain positive embodiment within a Western sociocultural context?* This chapter describes grounded theory focusing more specifically on constructivist grounded theory, which was the research methodology used in this study. Specific procedures, methods, and techniques used in the current study are also described.

Grounded Theory

Essentially, grounded theory (GT) is a method to systematically construct theories that are grounded within qualitative data (Charmaz, 2006; Ghezeliye & Emami, 2009). “Grounded theory provides explicit strategies and techniques for data collection and analysis and aims to produce an inductively driven theory of social or psychological processes *grounded* in the material from which it was derived” (Tweed & Charmaz, 2012, p. 132, original italics). In this way, specific observations yield general interpretations in the form of patterns and categories in the data (Charmaz, 2014). GT also relies on abductive reasoning, in that possible or likely explanations or interpretations of the data are considered and then researchers re-examine the data or gather more data to determine the fit of the theoretical explanation and the data (Charmaz, 2014).

Traditional Grounded Theory Methodology

Sociologists Barney G. Glaser and Anselm L. Strauss first developed GT in the mid 1960s (Tweed & Charmaz, 2012). GT initially gained popularity in nursing research and later in psychological research, albeit nearly two decades later (Tweed & Charmaz, 2012). GT provided a new and rigorous inductive approach to understanding and conceptualizing various phenomena

according to individuals' views and experiences (Tweed & Charmaz, 2012). This was in contrast to the deductive, positivist, and quantitative methods that had gained momentum and were favoured over qualitative (mainly ethnographic) approaches in the 19th century (Charmaz, 2014). The scientific method formed the basis for the longstanding use of quantitative methods, which were focused on systematic observations, operational definitions, logically deduced hypotheses, confirmed evidence, and replicable experiments (Charmaz, 2014).

Grounded theory has progressed in various directions since its inception (Charmaz, 2014). The original version of GT (traditional or classical GT; Glaser & Strauss, 1967) has been classified as taking a realist perspective (i.e., there exists an objective, external, and real reality; Ghezeli, & Emami, 2009), although Glaser may disagree. B. G. Glaser argued that distinguishing positions or identifying versions of GT is meaningless and simply jargonizes the method (personal communication, August 7, 2014). He argued that "GT is simply a method ... a set of techniques; grounded theory is exactly what is going on" (B. G. Glaser, personal communication, August 7, 2014). It is clear from these statements how critics perceive the classical version to be objectivist and realist in nature.

Glaser and Strauss (1967) defined several GT techniques that are widely used irrespective of which version of GT researchers adhere to. For example, Glaser and Strauss advocated for: (a) simultaneous involvement in data collection and analysis; (b) constructing analytic codes and categories from data rather than preconceived hypotheses; (c) using the constant comparison method to advance theory development through each step of data collection and analysis; (d) memo-writing to elaborate and define categories; (e) theoretical sampling; and (f) conducting the literature review after analysis. Many of these basic principles were a direct result of Glaser's influence and his background in positivism and empiricism; whereas Strauss's

influence on GT was more pragmatic (Charmaz, 2014). Strauss went on to create another (reformulated) version of GT with Juliet Corbin, published in 1990. This version was produced to take a more relativist or subjectivist position (Ghezeliye, & Emami, 2009); however, Charmaz (2000) argued that both of the early versions endorsed realism and positivism. Strauss and Corbin's version has also been criticized for applying technical procedures, rather than emphasizing emergent categories and comparative methods (Charmaz, 2014). In the 1990s many scholars moved toward constructivist paradigms of grounded theory, including Strauss and Corbin, although they do not explicitly state taking a constructivist stance. For example, Strauss and Corbin assume a relativist position by acknowledging the importance of recognizing multiple truths and recognizing bias (Mills, Bonner, & Francis, 2006). They also argue that theory is an act of constructing and is embedded in history (Mills et al., 2006). Charmaz (2006, 2014), on the other hand, directly and explicitly indicates her ontological and epistemological positions and locates GT in a constructivist paradigm.

Constructivist Grounded Theory Methodology

Constructivist grounded theorists acknowledge how researchers' and their participants' social locations and perspectives help shape the data and analysis (Ghezeliye, & Emami, 2009; Tweed & Charmaz, 2012). The researcher is a filter through which data is collected, analyzed, and interpreted (Charmaz, 2014; Lichtman, 2013). The constructivist paradigm adopts a relativist ontological position and a subjectivist epistemological belief, in which it is assumed that multiple realities exist, because understandings of reality are constructed through individuals' perceptions and social interactions (Mills et al., 2006). In contrast to classical GT, which emphasizes an objective reality that can be discovered, constructivist GT emphasizes the notion of knowledge creation through the interaction between the researcher and the participants

(Ghezeliye, & Emami, 2009). In this way, knowledge is subjectively co-constructed, rather than objectively revealed (Charmaz, 2014). According to constructivist GT, theories are interpretations of data from given perspectives (Mills et al., 2006), resulting in representations of social experiences (partially from the researchers perspective), rather than the direct reproduction of reality (Andrews, 2012). Classical grounded theorists critique other qualitative approaches, including constructivist grounded theory, stating that theorists often force their data into preconceived notions (Glaser, 1992). However, the belief that the product of the constructivist GT analysis is co-constructed between the researcher and participants makes it defensible against this criticism (Mills et al., 2006). Constructivist grounded theorists would suggest that the outcome of the GT analysis is both emergent and constructed, but not preconceived (Charmaz, 2014).

Charmaz termed her method *constructivist* GT in order to specify her position that knowledge is formed through the interaction between the researcher and participants. Charmaz believes that “subjectivity is inseparable from social existence” (Charmaz, 2014, p.14). Thus, she contends that her use of the term constructivism is consistent with current definitions of *social constructionism* (Charmaz, 2014). Social constructionism refers to the belief that reality is historically, socially, and culturally constructed (Charmaz, 2006; Mischler, 1979; Piran, 2010; Raskin, 2002; Young & Collin, 2004). Furthermore, from this viewpoint, language is imperative in communicating meaning within cultures (Blood, 2005). Because Charmaz (2014) considered the terms constructivism and social constructionism as reflective of the same underlying notions, the term constructivism will be used for the remainder of this paper, as this study adopted Charmaz’s (2006, 2014) constructivist grounded theory approach.

Rationale for Constructivist GT Methodology

Of particular interest in the current study was how some women experience and maintain positive embodiment despite the appearance and weight-related pressures that exist within society. There are six reasons for choosing a constructivist GT methodology to answer the research question of how women maintain positive embodiment.

First, constructivist GT can be employed where existing theories or areas of research are limited and it is sensitive to fluctuating contexts (Henwood & Pidgeon, 2003). Second, GT is based on the assumption that people develop meanings to events through social interactions (Biggerstaff, 2012). As such, GT seeks to explore and explain social processes (Biggerstaff, 2012). In this way, GT enables researchers to study individuals' experiences in various social settings and how a particular phenomenon arises, is maintained, or varies (Tweed & Charmaz, 2012). GT also has the potential to identify how social structures, situations, and relationships influence behaviour, interactions, and interpretations (Tweed & Charmaz, 2012). Third, the developmental theory of embodiment (DTE), which informed this study, aligns well with a constructivist theoretical framework. For example, the DTE acknowledges women's embodied experiences within the social context and as a result of oppressive social systems (Piran & Teall, 2012). Constructivism also emphasizes individualized meaning making through social processes (Young & Collin, 2004). Fifth, the constructivist viewpoint and the embodiment construct coincide well. For example, constructivism asserts that language is a central means by which knowledge and meaning making is construed (Raskin, 2002). Language is also tied to embodiment and embodied cognition (Glenberg, et al., 2013). For example, neuroscience research has shown that, in addition to other cognitive systems, action systems in the brain also play a large role in perception and language; (Glenberg, et al., 2013). Sixth, it has been noted

that, at this time, most GT methods result in conceptual analyses of particular experiences, rather than formal theories (Charmaz, 2008; Charmaz, 2014; Lichtman, 2013), making this methodology conducive for a Master's thesis project. All of these factors made constructivist GT a valuable approach for this study.

Procedures in the Current Study

Pilot study

A pilot study was conducted with three university women in a counselling psychology graduate class in May 2013. Each woman verbally indicated that she had a positive view of her body and positive experiences in her body, and all of the women were 24 years of age. The pilot study helped to produce a set of guiding interview questions, which were modified to reflect the current research question (see Appendix A for the interview guide). The pilot study also aided me in gaining introductory skills in constructivist grounded theory data analysis (Charmaz, 2006, 2014). See Appendix B for a poster representation of the pilot study.

Participant Recruitment

Recruitment for the current study was conducted using a snowball sampling method (Goodman, 1961). A recruitment email (see Appendix C) was sent to members of the University of Calgary Werklund School of Education via an email list, members of the women's center on campus, and to individuals within my personal network. Recipients of this email were encouraged to forward it to individuals who may be interested and eligible to participate.

Making contact and participant selection. Once women contacted me to participate in the study, I asked the women about their interest in the study. Specifically, I asked the women if they met the inclusion and exclusion criteria. Inclusion and exclusion criteria were as follows:

- Participants were required to be female and between 18-29 years of age. Individuals in

emerging adulthood are better able to decipher their own beliefs and values (Arnett, 2000) and integrate inner experiences with the sociopolitical context (Arnett, 2004). In this way, women in emerging adulthood are able to self-reflect and, thus, are likely aware of what has helped them to be resilient to the societal pressures of thinness (Mizevich, 2012), making it an ideal age group to explore positive embodiment.

- Participants were required to self-identify that they currently experienced positive embodiment based on the definition provided in the email recruitment.
- Participants must not have had a history of an eating disorder or treatment related to disordered eating. The purpose of this study was to explore the processes involved in maintaining positive embodiment rather than how women overcame disordered eating or an eating disorder. For this reason, women who had a history of treatment related to disordered eating were exempt from participation.

Ten women met the three criteria and shared their experiences during an individual face-to-face interview with me. The interviews took place in a private room in the Education Tower at the University of Calgary, or another quiet and safe place of the interviewee's choice (e.g., a quiet room at a public library) and lasted between 40 and 75 minutes.

Data Collection

Data was collected over a period of eight months, between March and October 2014. Once informed consent (see Appendix D) was reviewed and signed, participants filled out demographic information including age, ethnicity, social class, height, weight, and highest level of education attained (see Appendix E).

Interview format, structure, and process. The aim of the study was to explore the ways in which young women maintain positive embodiment. As a result, it was important to adopt an

approach that allowed for an open and exploratory stance in which individual, social, and cultural factors were given the chance to surface (Strauss & Corbin, 1990; Thannhauser, 2012; Wimpenny & Gass, 2000). Thus, a semi-structured, intensive, in-depth interview approach was used (e.g., Charmaz, 1994, 2003, 2006). With this approach, the interviewees and I discussed how they experienced positive embodiment and how they maintained positive embodiment, which enabled me to construct themes and categories to develop a conceptual analysis of maintaining positive embodiment. Corresponding to GT, interview questions were framed in an open-ended manner (see Appendix A), allowing experiences and topics that were most salient to each respondent to become part of the discussion (e.g., Hesse-Biber et al., 2010). I transcribed all of the interviews verbatim. The transcribing generally occurred over several days and I was careful to establish complete accuracy in the transcriptions, including utterances and non-verbal language such as laughing or silences.

Grounded Theory Methods and Data Analysis

There are a number of fundamental procedures that each grounded theory study must address. These include the use of questioning, theoretical sampling, the constant comparison method, memoing and the role of the researcher, and theoretical sensitivity.

Use of questioning. Most commonly, GT studies use transcripts of interview data, typically gathered in a semi-structured format (Charmaz, 2014; Tweed & Charmaz, 2012). Interviews must balance non-directive techniques (e.g., asking few questions and hearing a participant's story fully), with more directive techniques (e.g., asking several, more focused, questions to search for analytic properties and processes and their implications; Charmaz, 2014). One way to achieve this balance is to ask broad open-ended questions initially and then add more focused questions in later interviews (Charmaz, 2014).

In the current study, an interview guide was created based on a pilot study, and included broad open-ended questions and potential follow up probes. During the latter stages of data collection, specifically throughout theoretical sampling (described below), the interview questions included more focused open-ended questions based on analysis that had previously been completed. Keeping questions open-ended, using the interviewees terms, following the interviewee's lead, and following up on taken-for-granted meanings in language reduces the risk of imposing pre-conceived concepts on the data (Charmaz, 2014). Therefore, although an interview guide was developed, it was not always followed exactly, and the language was shifted depending on the language used by participants.

Theoretical sampling. Theoretical sampling refers to the sampling of new cases to refine and elaborate the emerging GT; it occurs after tentative categories have been developed (Charmaz, 2008, 2014) and it is unrelated to purposive sampling or representative sampling occurring at the beginning of data collection (Tweed & Charmaz, 2012). Theoretical sampling involves both inductive and deductive elements. It often involves the use of questions by the researcher to him or her self and questions by the researcher to the participants (Charmaz, 2014). Theoretical sampling questions the researcher may ask him or her self include, "Whose voices are not represented by my tentative category?" Alternatively, "Who do I need to speak to next to develop this category?" Typically theoretical sampling occurs until saturation is reached, where no new insights or development occurs (Charmaz, 2008). In the current study, theoretical sampling occurred once several categories had been constructed. During theoretical sampling, the interview questions became more focused and related to the categories that had been developed.

Constant comparison method. GT is interactive and comparative; data analysis begins

almost immediately, or concurrently with, data collection (Charmaz, 2008; Tweed & Charmaz, 2012). The constant comparison method is a procedure used within grounded theory (Charmaz, 2012). This method generates analytic codes, concepts, and categories by using a succession of comparisons within and among the data (e.g., interviews) to find similarities, differences, and nuances between all of the elements of analysis (Boeije, 2002; Charmaz, 2006; Hutchinson & Wilson, 2001). This method helps the researcher to determine conceptual and theoretical categories (Boeije, 2002; Charmaz, 2008).

In the current study, the main data collection technique was interviewing. However, I also took note of other observations and interactions occurring throughout data collection, which is important because researchers construct data through all of these means (Charmaz, 2014). From the transcriptions, the data was coded and organized into categories through the use of grounded theory's constant comparison method (Charmaz, 2006). During initial coding, I took lines or segments of data and created codes that reflected the actions discussed within segments of the interview. Line-by-line coding allowed me to stay close to the data, while simultaneously taking an analytic stance toward the research (Charmaz, 2008). Charmaz (2008) indicated that line-by-line coding helps researchers to gain distance from their own and the participants' interpretations and assumptions about the material. Active codes help researchers account for their biases and starting points (Tweed & Charmaz, 2012). Gerunds (the noun form of a verb), preserves action by stating what individuals are doing (Tweed & Charmaz, 2012). This helps to make implicit meaning, actions, and processes more tangible and provides modifiable concepts for sorting data (Tweed & Charmaz, 2012). Thus, line-by-line coding with gerunds brings researchers close to the data (Charmaz, 2014; Tweed & Charmaz, 2012), but also helps the researcher refrain from categorizing too soon (Charmaz, 2006).

Next, I engaged in focused coding, in which the codes became more directed and conceptual. During focused coding, I used the most significant or the most frequent initial codes to synthesize the data within each interview and then compared focused codes across interviews (Charmaz, 2006, 2008). I also re-examined previous coding and the raw data to ensure accuracy and understanding and to check her preconceptions (Charmaz, 2008). In this way, focused coding allowed for preliminary category and theme development. Focused coding also prompted me to clarify the relationship between emerging categories (Charmaz, 2006). Categories consisted of in vivo codes (e.g., taken directly from the data) as well as theoretical concepts (Charmaz, 2008).

Finally, theoretical coding took place, in which I linked the categories, which facilitated the development of a conceptual analysis of how women experience and maintain positive embodiment (Charmaz, 2006, 2014). When data patterns and categories began to overlap (i.e., saturation was reached), a conceptual model was developed (Charmaz, 2006, 2008). The levels of coding can be seen as a pyramid, where the raw data and the basic descriptive codes are ascribed to the data from the bottom or foundation; focused codes and categories (conceptualizing the basic codes beneath) form the middle; and a core category forms the top of the pyramid (encompassing all those codes and categories within; Tweed & Charmaz, 2012).

Memoing and the role of the researcher. *Memoing*, or memo-writing, captures the researcher's thoughts, hunches, interpretations, and decision-making throughout the analysis; it acts as an audit trail (Charmaz, 2006). In the current study, memoing occurred at the beginning of data collection and proceeded throughout the research process and through to draft writing (Tweed & Charmaz, 2012). Charmaz (2008) stated that the formation of categories inevitably reflects the researcher's worldviews, theoretical inclinations, and interests. Thus, *reflexivity* is an

important component and the results of this study are presented with acknowledgment of this element. Reflexivity in GT research refers to the researcher observing him or her self in a focused way and then reporting on how decisions and conclusions were made (Charmaz, 2014; Hutchinson & Wilson, 2001). These decisions are documented through memoing, including personal notes, notes about the method and procedures, theoretical notes, and observational notes (Hutchinson & Wilson, 2001). Reflexivity and self-awareness is particularly important when conducting research from feminist perspectives (Hutchinson & Wilson, 2001).

As categories were conceptualized, I wrote memo's regarding: (a) the properties of the category; (b) the conditions in which it arises, is maintained, or changed; (c) its consequences; and (d) how it related to other categories (Charmaz, 2008). I also provided empirical evidence (i.e., quotes) from the raw data to support the definitions of the category (Charmaz, 2008). Finally, another element to consider in memo writing is to acknowledge assumptions and to identify gaps in the analysis (Charmaz, 2008, 2014). Memo-writing relies on comparisons, in other words, the constant comparison method (Glaser & Strauss, 1967; Charmaz, 2006). During memoing, thinking was inductive and deductive; I conceptualized patterns and created codes and categories whilst also assessing how the concepts fit together (Hutchinson & Wilson, 2001). The emerging theory is modifiable based on the audit trail or memoing that occurred alongside the analysis, outlining ideas and reasons for decision making (Glaser, 1978; Hutchinson & Wilson, 2001).

Theoretical sensitivity. Theoretical sensitivity refers to the researchers awareness of subtleties in the data (Elliot & Higgins, 2012); it is “the ability to understand and define phenomena in abstract terms and to demonstrate abstract relationships between studied phenomena” (Charmaz, 2014, p. 161). One way of gaining theoretical sensitivity is by

completing a preliminary review of the pertinent literature (Elliot & Higgins, 2012) followed by thorough coding of the data using gerunds, in which the researcher is able to discern meanings from the data and define the properties of the categories (Charmaz, 2014). Furthermore, openness to the unexpected expands theoretical possibilities and sensitivity (Charmaz, 2014). In the current study I strived for theoretical sensitivity by following the above guidelines.

Ethical Considerations

The University of Calgary Conjoint Faculties Research Ethics Board approved this study. This study was deemed not to exceed minimal risk. The interviews were intended to explore and elicit responses focused on positive embodiment and body image. The benefits of the study far outweighed the risks. One benefit that was identified was that participants might have found it interesting or exciting to talk about their experiences in an area where they exemplified resilience to cultural pressures by maintaining positive embodiment. Participants might have also felt empowered knowing that their participation in this study could help to identify practical strategies that professionals could use to create an environment that would foster resilience in girls and women.

Participants were provided with twenty dollars to help reimburse the cost of travel and/or parking and as an appreciation of taking the time to participate. Participants did not know they would receive twenty dollars until they arrived at the interview site and read the informed consent form. This method of compensation was chosen because I wanted to be confident that women were participating in the study to share their experiences with positive embodiment, rather than to simply receive money for their participation.

Various steps were taken to ensure the ethical and confidential storage of data. First, the women were referred to by their chosen pseudonyms in the interview and in their demographic

forms. Additionally, the consent forms were kept separate from their demographic forms. Second, all recorded interviews, transcripts, and associated data analysis documents (e.g., memo's, initial, focused, and theoretical coding) were stored electronically on my personal password-secured computer. Backup files were saved to my Dropbox account, a secure password-protected desktop application that was only accessed via my personal computer, but could have been accessed on another server with the sign in name and password.

Evaluating Grounded Theory

To date, there is much debate on how to evaluate qualitative research studies (Corbin & Strauss, 2008). Charmaz (2014) identified four comprehensive criteria for evaluating GT studies, including credibility, originality, resonance, and usefulness. It is important to note that researchers' epistemological positions shape their emphases on various criteria related to the quality of a GT study (Tweed & Charmaz, 2012). The four criteria put forth by Charmaz (2014) do require self-evaluation throughout the research process, which requires sophistication and acknowledgement of one's own biases (Corbin & Strauss, 2008). Additionally, Charmaz (2014) does not directly define each criterion, but provides questions to assess the degree to which the criteria are being fulfilled (see Table 2.1). Charmaz (2014) indicated that a combination of originality and credibility increases resonance, usefulness, and the value of the studies contribution.

Table 2.1

Four Criteria for Evaluating Grounded Theory

Criteria	Questions
Credibility	<ol style="list-style-type: none"> 1. Has your research achieved intimate familiarity with the topic? 2. Are the data sufficient to merit your claims, considering range, depth, and number of observations in the data? 3. Do the categories cover a wide range of empirical observations? 4. Has your research provided enough evidence for your claims to allow the reader to form an independent assessment and agree with your claims?
Originality	<ol style="list-style-type: none"> 1. Do your categories offer new insights? 2. Does your analysis provide a new conceptual interpretation of the data? 3. How does your grounded theory challenge, extend, or refine current ideas and concepts?
Resonance	<ol style="list-style-type: none"> 1. Do the categories portray the fullness of the studied experience? 2. Have you revealed taken-for-granted meanings? 3. Does your grounded theory make sense to your participant's or people who share their circumstances?
Usefulness	<ol style="list-style-type: none"> 1. Does your analysis offer interpretations that people can use in their everyday worlds? 2. Can the analysis spark further research in other substantive areas? 3. How does your work contribute to knowledge? How does it contribute to making a better world?

Note. By K. Charmaz, 2014, *Constructing grounded theory* (2nd ed.). p. 337-338. Copyright 2014 by Thousand Oaks, CA: Sage

Strategies for Evaluation

Charmaz's (2014) criteria are helpful for the researcher to ask questions in order to evaluate the emerging GT. Nevertheless, other direct strategies and techniques may be beneficial in evaluating qualitative research. Creswell (2007) developed eight validation strategies for qualitative studies and suggested researchers use at least two. The following four strategies were taken from Creswell's list and were used in the current study.

Thick description. Rich, thick description of participants through demographics allows readers to decipher the transferability of findings (Charmaz, 2014; Creswell, 2007). Taking an element of an interview and asking theoretical questions also expands thick description; this can help make implicit meanings more explicit (Charmaz, 2008). I asked for participant wording and definitions, and asked follow-up questions during interviews whenever possible, in order to make taken-for-granted meanings more explicit. Additionally, participant demographics have been described in the results as thoroughly as possible based on the data collected.

Supervisor checks. Qualitative research (Hutchinson & Wilson, 2001), and constructivist grounded theory in particular (Glaser, 1992), has been criticized for being too subjective or preconceived. Throughout the analysis, I discussed the process of categorization as well as my reflections and memo writing with my project supervisor. Incorporating this additional supervisor check helped to minimize the potential issue of the results simply reproducing my own preconceptions and therefore increased the credibility of the category development.

Member checks. By way of a resonance check, the preliminary conceptual model was emailed to each interviewee (see Appendix F), in order to obtain participants' views on the findings. The women were given the opportunity to comment and make adjustments or additions

to the categorization. Comments and adjustments were to be communicated within two weeks and any proposed adjustments were to be incorporated into the model (e.g., Creswell, Hanson, Plan-Clark, & Morales, 2007; Mizevich, 2012; Yakushko, 2010).

External audits. Some of the data was examined by external auditors who had no connection to the study (Creswell, 2007). I attended a grounded theory jamboree, led by Dr. Paul Wishart at the University of Calgary. This was a three-day workshop with three other participants, two of whom were other Masters and PhD graduate students and one whom was completing a post-doctoral internship. Ethics approval was granted for me to bring anonymized data to the jamboree. Memo's that included my thoughts, descriptions, and conceptualization of the data and included raw data in the form of quotes with accompanying pseudonyms were brought and shared with the participants and the facilitator. Feedback and suggestions were provided throughout a discussion. For instance, the members of the jamboree agreed that the empirical evidence (i.e., quotes) and the memoing were supported by the categories. Some feedback was provided in terms of an area that was lacking in my categorization at the time, including the struggle or work that women appeared to be experiencing or engaging in. This feedback was incorporated into the memoing and I then went back to previous interview transcripts to complete more analysis. After finding further supporting evidence for this idea, *doing work* became a core process in my results. Thus, the external audit was used as a check on credibility, originality, and usefulness.

Chapter Summary

A constructivist grounded theory (GT) methodology was used to address the research question of how women experience and maintain positive embodiment in a Western sociocultural context. Constructivist GT is a set of techniques used to describe social or

psychological processes that are grounded in data (Tweed & Charmaz, 2012). Constructivist GT assumes multiple realities exist, and realities are constructed by individuals' perceptions and social interactions (Mills et al., 2006). As such, constructivist grounded theorists acknowledge how researchers' and their participants' social locations and perspectives help shape the data and analysis (Ghezeliye, & Emami, 2009; Tweed & Charmaz, 2012). In this way, constructivist GT is emergent (i.e., grounded in data) and constructed (i.e., between researcher and participants; Charmaz, 2014). A constructivist grounded theory research paradigm was fitting for the aim of the current study. This methodology guided the development of interview questions and influenced my interpretation of results.

CHAPTER FOUR

Results

The purpose of this chapter is to report the results of data analysis and the generation of a preliminary conceptual model. The objective of this study was to describe the processes by which women in Western culture experience and maintain positive embodiment despite cultural pressures and associated problems. Because a substantial or formal grounded theory is generally developed over several years, I acknowledge that the current analysis represents preliminary theorizing and conceptualization of the processes involved in maintaining positive embodiment. For that reason, the current results represent a preliminary conceptual model, rather than a formalized theory.

Participants

Fourteen women contacted me to participate in the study upon receiving the email recruitment. The women were placed on a list from first to last that contacted me. I responded to all of the women with an initial email. Two women did not meet the inclusion criteria, as they were older than 29 years of age. The other twelve women met the inclusion criteria. In grounded theory, data collection and analysis occurs concurrently (Charmaz, 2006). Thus, I booked interviews several weeks apart for the first three participants. The remaining nine women were informed that the data collection would continue for several months and were asked if they would agree to be contacted by me at a later date to discuss setting up an interview. All of the women agreed. I contacted the remaining women in the listed order to set up interviews. Generally, one or two interviews were booked at a time and I scheduled them several weeks apart to allow for concurrent data analysis. One woman was away travelling for an extended period of time when I contacted her and one woman did not respond to the email. In these cases,

the next woman on the list was contacted and asked for an interview. The two core conceptual categories had emerged by interview six. Saturation of these categories became apparent after interview eight. I completed two additional interviews to confirm saturation for a total of 10 participants.

The women varied in age from 21 to 28 years of age. All of the women had attained a minimum of a high school diploma. One woman indicated her ethnic origin as half Jamaican, half Canadian, while the rest of the women indicated their ethnic origin as Caucasian or Eastern European descent. Two women indicated their social class was low, while the remaining women indicated their social class was middle range. A summary of demographic information for each woman is listed in Table 3.1.

Table 3.1

Participant Demographics

Pseudonym/ Name	Gender	Age	Height	Weight	BMI	Education	Social Class	Ethnic Origin
Jennifer	F	24	5'3"	130	23.0	College Diploma	Middle	Caucasian
Ann	F	27	5'4"	130	22.3	High School Diploma	Middle	Caucasian/ E. European
Lola	F	23	5'4"	145	24.9	High School Diploma	Low	Caucasian
Lyla	F	27	5'2"	135	24.7	High School Diploma	Middle	Caucasian
Mandy	F	24	5'8"	130	19.8	Bachelors Degree	Middle	Caucasian
Pamela	F	26	5'7"	125	19.6	Bachelors Degree	Middle	Eastern European
Brianna	F	27	5'2"	130	23.8	Bachelors Degree	Low	Caucasian
Renee	F	25	5'6"	130	21.0	High School Diploma	Middle	½ Jamaican ½ Caucasian
Brittany	F	21	5'5"	135	22.5	High School Diploma	Middle	Caucasian
Lily	F	28	5'5"	195	32.4	College Diploma	Middle	Caucasian

Note. Body mass index (BMI) was calculated by me. Nine of the women's BMIs fell within normal weight range (i.e., BMI 18.5-24.9). One woman's BMI fell within the obese weight range (i.e., BMI of 30 or greater). Two participants provided their real names and consented to being directly quoted. Middle class was defined as employment in an average paying job with some financial security. Low class was defined as employment in a lower paying job and lacking financial stability. Ethnic origin was defined as shared social background and/or culture and traditions that are distinct, maintained between generations, and lead to a sense of identity.

Data Analysis Procedures Revisited

Data was collected over eight months. Initially, three interviews were completed over the course of six weeks. The interviews were guided by the pre-established semi-structured interview questions; however, participants were encouraged to direct the conversation as well. I often asked follow-up probes and clarifying questions. Women were also asked to provide personal examples of some of the processes that they were discussing. The interview questions were not always asked in the same order and some items were omitted if they were considered unnecessary. I used broad interview questions such as, “What does embodiment mean to you?” This enabled I to gain a greater understanding of participants’ experiences of embodiment and whether those experiences fit with the emerging categories. In addition, if deemed applicable, some focused questions were asked referring directly to the developing categories. For example, the women were asked how they would define a particular word or process. In other cases, women were asked if a previous theme, such as feeling comfortable in their own skin - which was taken directly from the wording of participants - resonated with them, and if so, how it resonated. This enabled me to elaborate on, and refine, the categories that were emerging.

Later data collection was shaped by earlier data collection and analysis. Based on the similarities and differences across the interviews, I constructed two preliminary core conceptual categories, labelled as core concepts, as well as subcategories and themes within. I engaged in several different versions of diagramming to understand the processes that were occurring in the data and construct the patterns and connection between the categories. Memoing was completed continuously throughout data collection and analysis. An example of a memo during the later stages of data analysis is provided in Appendix G. Once it appeared that no new data was emerging to identify new categories, two more participants were interviewed and data was

analyzed to assess for saturation. When the data coincided with the core variables, it was deemed that saturation had been reached and data collection culminated.

The Conceptual Analysis

The results of this study are presented as a preliminary conceptual analysis. A model was developed to illustrate the core concepts and the interrelated categories. Participant quotes are used to exemplify the categories and their properties. Similar to how Charmaz (2014) presents her data, the quotes in the current study were edited to enhance clarity and readability. However, the central meaning of the quotes was not altered, rather utterances or words such as “like” were removed. The participants’ chosen pseudonyms, or real names, are provided for the direct quotes. When discussing the model, participants are referred to as a group, because the model is intended to characterize the participants as a whole.

Data analysis resulted in an interdependent and recursive relationship between the acts of *meaning making* and *balancing*, two core concepts, as represented in Figure 2.

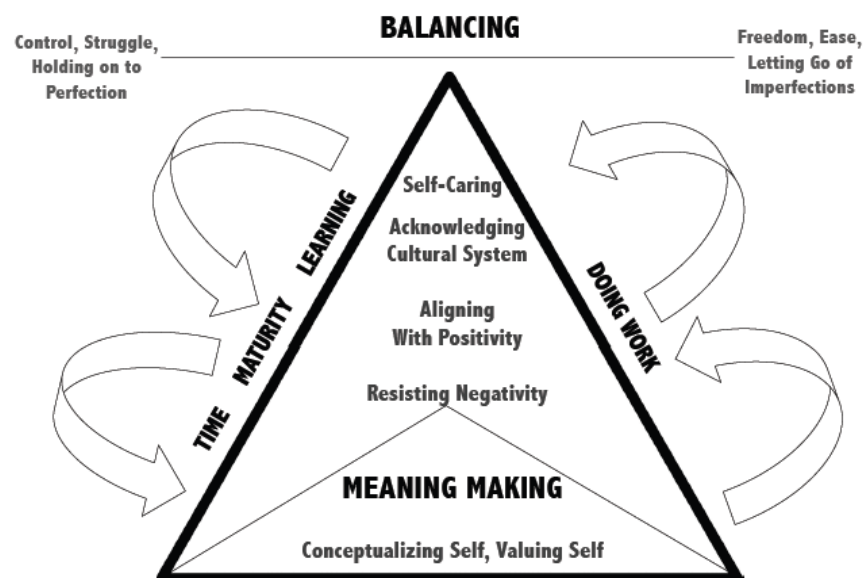


Figure 2. The Meaning Making – Balancing Relationship

Meaning making refers to understanding or conceptualizing one's self and valuing one's self; it emerged as a primary component of women's embodiment. Balancing refers to choices and actions that women took in order to embody positivity. As the model depicts, meaning making was a foundational process of balancing. Yet, balancing also contributed to further meaning making. It became clear from the women's accounts that both meaning making and balancing involved *doing work, time, maturity, and learning*. These are highlighted on the outside of the pyramid in the figure, alongside the arrows, which portrays the processual nature of these variables. Doing work was understood as women's engagement in intentional acts requiring some amount of effort. Some women experienced doing work as *practice*, in which, over time, work became less effortful and more habitual. Other women experienced doing work as involving more continuous and higher levels of effort. Thus, the term *work* was used to reflect these lower or higher level efforts of personal meaning making and balancing, which both involved intrapersonal and interpersonal elements. Also, doing work occurred as a process between meaning making and balancing; it took work to engage in balancing once meaning making had occurred and it also took work to integrate balancing with meaning making. Time, maturity, and learning emerged as core, albeit less vivid, processes. These processes were often spoken about as occurring together. Further, several of the core processes of doing work, time, maturity, and learning occurred simultaneously with the core concepts of meaning making and balancing. Thus, although this chapter presents the core concepts and core processes as separate, they often co-occurred. The core concepts, categories, and subcategories are outlined in Table 3.2, and are elaborated on in the following sections. Then the core processes are discussed.

Table 3.2

A Conceptual Analysis of Meaning Making – Balancing Relationship in Women’s Embodiment

Core Concepts	Categories	Subcategories / Themes
Meaning Making	Conceptualizing Self	Acknowledging a unique self
		Acknowledging self-in-relation
	Valuing Self	Expressing body appreciation, respect, and love (embracing perceived imperfections)
		Expressing body/self acceptance
Balancing	Self-Caring	Seeing the body as a site of physical ability; commending oneself on what she <i>can</i> do.
		Expressing life meaning and purpose
		Merging of mental, physical, and emotional components of caring for oneself.
	Acknowledging Cultural System	Inner awareness and self-reflection
		Exhibiting control and agency
	Aligning with Positivity	Recognizing, and discussing cultural ideals and pressures for women
	Resisting Negativity	Engaging in intrapersonal positivity
		Seeking interpersonal and extrapersonal Positivity
		Suspending intrapersonal negativity
		Resisting interpersonal negativity and disengaging from extrapersonal negativity

Core Concepts

Meaning Making

The young women in this study alluded to engaging in continuous personal meaning making. Two categories were apparent within the core concept of meaning making, specifically conceptualizing self and valuing self.

Conceptualizing self. Conceptualizing self can be defined as expressing understanding of one's self. This understanding or conceptualization is two-fold, involving (a) acknowledging a unique self and (b) acknowledging self-in-relation to others. These themes often coincided, but sometimes occurred as separate subcategories throughout the interviews.

Acknowledging a unique self. Acknowledging a unique self involves distinguishing the self from others. Often, this involved disregarding external pressures or influences and focusing solely on the self. Women often identified this as being "selfish" despite the fact that they live in an individualistic cultural context. Acknowledging a unique self also involved finding or reflecting on personal values and priorities in order to commit to them.

Thus, recognition of a unique self occurred over time through learning and through mental and physical (or behavioural) work. Acknowledging a unique self resulted in affective and behavioural expressions of positive embodiment such as feeling empowered and being in control. The women spoke of their unique selves proudly; they seemed to be taking complete ownership of their bodies and selves. Acknowledging a unique self was often explicitly expressed. For example, Jennifer said, "I am not the same as anybody else. It is my body, and I am very unique, and as long as I am happy, I don't really care about what anyone else thinks." Similarly, Ann said:

This is me. I am going to be a size six forever. I am never going to be a two. And nor

do I really want to be anymore. You know? It's not ... I am not struggling to be something I am not. As long as I am maintaining, and I feel good, and I am confident.

Lyla discussed her sense of self and associated feelings by stating:

It is a powerful feeling ... now I have such more of a sense of self and self-esteem and realizing who I am. Because I think a lot of the times when you are constantly comparing yourself to other people you don't really know who you are. You are still trying to figure it out. So being able to figure out who you are and what is important to you in life. And realizing that not everyone is going to be the same or have the same thoughts, feelings, and goals in life.

Finally, Brianna acknowledged a unique self when she said:

I definitely know my own body weight [and] body image. [It] is where I want it to be and where I know is attainable. It is less about comparing myself to other people and more being comfortable.

Acknowledging self-in-relation. Acknowledging the self-in-relation can be defined as linking the self to others or recognizing the self in the context of others. This often involved women expressing that most people would also experience something in the same way. As such, women acknowledged a common humanity; in other words, they recognized that their experiences were common to other women. Similar to acknowledging a unique self, women developed an understanding of self-in-relation over time and through learning. Placing themselves in the context of external influences and interpersonal interactions contributed to this meaning making. This often involved discussing femininity and womanhood in individual terms, but also in terms of socialization. Acknowledging the self-in-relation resulted in better conceptualization of each woman's unique self and a sense of connection and belonging with

others. Acknowledging the self-in-relation was often expressed implicitly by referring to other people, like when Lola said, “I think [it’s] good for most people to be accountable to something whatever it might be.” Based on the language she chose to describe her experiences, Jennifer placed herself in the context of others:

So in the winter everybody hunkers down and they get warm, and you gain a little extra but that’s okay. And in the summer, you are more outside and you’re more enjoying the outside, while constantly doing physical activity.

In addition, Mandy noted the self-in-relation theme throughout her interview; she said:

I find that in a lot of our conversations we sort of both come out on the other side together. She said she likes to talk about those things and do activities with me because it makes her feel more capable and strong. And that is really positive for me and I really enjoy it.

In addition to conceptualizing self, women in the current study also expressed valuing themselves. It appeared that once women had a grasp on who they were as unique and related individuals, they were better able to engage in, or express, body and self love, respect, appreciation, and acceptance.

Valuing self. Valuing self can be defined as experiencing one’s body and self as worthy of appreciation, respect, and love. Women discussed valuing self as: (a) expressing body appreciation, respect, and love through embracing perceived imperfections; (b) expressing body and self acceptance; (c) seeing the body as a site of physical ability and commending oneself and the body on the work it has done; and (d) expressing life meaning and purpose. Valuing self resulted in self-acceptance, self-esteem, and positive embodiment, including positive feelings, attitudes, and behaviour toward oneself and others.

Expressing body appreciation, respect, and love (embracing perceived imperfections).

All of the women discussed respecting, appreciating, and/or loving themselves. Some women identified a need to love themselves before they could love others, as Jennifer and Renee said, respectively: “If you don’t love yourself, how do you expect anybody else to accept you?” and “At the end of the day, you have to look out for number one, because if you don’t look out for number one, then how can you care for anyone else?” Other women identified that respecting and loving themselves was a learning process, and they usually expressed that this learning occurred over time and as requiring some effort, as Lily said:

As I came to a point in my early to mid twenties when I was really starting to take good care of myself, and not just my physical self but my soul and my mental health, and just really starting to respect all of me, that was sort of when I came into that all, and didn’t worry so much about the number on the scale or the number on the jeans.

Expressing body/self acceptance. Many women emphasized body acceptance and feeling comfortable in their skin. Several women described positive embodiment as “feeling comfortable in my own skin.” This often coincided with body/self acceptance, or resulted from it. Many women also discussed the processes of time, learning, maturity, and doing work alongside body/self-acceptance. For example, Jennifer said:

I have just learned to be more accepting of myself and more understanding of myself.

Because I am the way I am. I don’t want to be a negative person; I want to be happy.

And that’s all I care about is my happiness and the people who are around me that I love to be happy as well.

In addition, Renee indicated:

Well I think that [positive embodiment] had a lot to do with me maturing and getting older ... I [used to] read magazines and that kind of stuff. It was very cultural. I didn't have a very good body image I would say. But as I have gotten older I have, I suppose I have come more into an acceptance of myself and I think that connection. I have realized that I am in control of my own body by the things that I do day-to-day like taking caring of myself. And that is what gives me more positive embodiment.

Brittany also reflected:

I think it is acceptance too. I think I have always been what some people would say as nerdy and I care about the little things ... It is more acceptance; I am learning that it doesn't matter. Truthfully I can try as hard as I possibly can to change and be the 'cool kid' but at the end of the day it is not rewarding and I don't care anymore. And I feel happy.

Seeing the body as a site of physical ability; commending oneself on what the body can do. Many women also commended themselves and their bodies on what they are capable of. The women appeared thrilled and excited when discussing their strengths and abilities. This was apparent by the tone and volume of their voice and their non-verbal body language, such as sitting up taller in their chairs and smiling. For example, Lola enthusiastically said, "Just to see how much, how hard you worked, and how much your body actually did for you, is ... that is what I am always amazed by." Pamela indicated that, "Outside of career-type goals, there are definitely little personal goals I set for myself and every time I achieve something like that it is definitely a boost." Mandy discussed her strengths and abilities when she said:

My body changed, not just physically, or in terms of my body image, but physically I felt stronger. I could do those stairs, I could carry a conversation with people at a fast pace

and walk and do things at the same time, and it just it felt so good that I could do those things.

Expressing life meaning and purpose. A number of women in this study alluded to their beliefs about the meaning and purpose of life. This was usually brought up when discussing the value they placed on their self and strategies they used to feel comfortable in their own skin. For example, Lily said, “For me, it is part of who I envision myself to be, it is part of my long term embodiment of my life, is to be a mother.” Renee expressed life meaning and purpose in the following way:

I think that being on this earth is a blessing, and having a body is a blessing, and having a functioning body is a blessing. I know if I did not take care of my body in the way that I do, I don’t think that I would be happy with my body, with myself.

Balancing

Balancing occurred as it’s own core concept as well as a process within meaning making. For example, when asked about what things bring her joy, happiness, and positive embodiment, Renee said, “some of these things are going to be regular things and some things are going to be personal ‘me’ things.” This exemplifies the tension or middle ground that occurs in the previous category of meaning making. For example, many women engaged in balancing collective experiences and unique personal experiences. In this way, balancing occurred when women talked about how to differentiate themselves from the collective humanity, while still recognizing their individual selves in relation.

Women discussed mindfully engaging in thinking and behaving that reflected balance and moderation. In this way, balancing involved self-imposed control over thoughts, emotions, and behaviours. Although attitudes and behaviours were sometimes culturally imposed or

influenced by the cultural milieu, women often strived for self-focus, agency, and choice.

Balancing was something that women discussed as developing once meaning making had occurred. However, balancing also contributed to further meaning making as well. Below is the memo that I wrote after the sixth interview, which is when I recognized that balancing was a core concept in my data:

I have this picture in my mind portraying one of the central concepts that is emerging from my data analysis: the idea of balancing. This visualization is also meant to depict one of the central processes of *doing work*. It also represents the influences of time, maturity, and learning on young women's embodiment. Let me paint a picture for you...

I see a teeter-totter. Imagine a small cartoon character jumping onto the middle of the teeter-totter, as many of us did as children if we did not have a partner to ride with. Right away, this character begins slipping toward to the side of the teeter-totter that is down on the ground and proceeds to rapidly scurry toward the side that is up. Upon closing in on the side that is up, this side inevitably crashes down. Then, the character proceeds to complete the same actions as before, working ever so hard to reach the side that is up, and only momentarily getting to relax and take in the scenery near the top before beginning the cycle again. Then, after learning about the workings of this structure and the processes and movements involved, the character realizes that to stay off the ground, she must move slower and more methodically, focusing on her self and her own movements. Upon reaching the middle, she widens her stance and begins balancing. The opposing sides of the teeter-totter are both elevated and although never completely still and unwavering, the character has found a way to balance the teeter-totter. Balancing becomes easier now that she has the strategies in place. It requires work, but not as much

as before. She feels liberated because she is no longer struggling to attain an unrealistic ideal: the top of the teeter-totter. She feels more strong, capable, and empowered. She also realizes that there will be up's and down's, but she will be able to return to her happy place, the fulcrum of the teeter-totter.

Balancing as a core concept can be defined as the process of engaging in constant work regarding elements of self-caring, acknowledging the cultural system, aligning with positivity, and resisting negativity.

Self-caring. Self-caring can be defined as doing things that contribute to one's overall health and happiness. Women discussed self-caring as connecting physical, mental, emotional, and interpersonal life elements. In this way, they had high levels of inner awareness and a capacity for self-reflection, as well as exhibiting personal agency and control in their actions. The women described self-caring as resulting in positive feelings, positive interactions in the world, positive embodiment, feeling comfortable in their own skin, and the ability to recognize the reciprocal influences between themselves and others.

Merging of mental, physical, and emotional components of caring for oneself. All women spoke of physical, mental, and emotional self-caring and connected these caring experiences either explicitly or implicitly. For example, Lily said, "it is really more about being health conscious and life conscious, and that whole embodiment, I mean you need to have the balance."

Physical components included physical exercise (e.g., working out at home or at a gym, engaging in yoga or spin classes), eating well, reducing the intake of toxins in the body, getting adequate sleep, and not pressuring the body physically. The mental components included things such as thinking, meditation, deciphering life goals, mental happiness, stress reduction, not

feeling pressured mentally, and giving one's self a break or explanation for prior behaviour. The emotional components included enjoyment, happiness, feeling good, feeling stress-relief, feeling proud, feeling accomplished, feeling productive, and feeling safe. Ann made clear the merging of physical and mental components when she said:

I do a lot of yoga, that's very important both physically and mentally. I think they go hand in hand ... If I am not taking care of my body, I am not taking care of my mind; if I am not taking care of my mind, then I am probably not taking care of my body. So, to be able to go to yoga and get both, even if I am just looking for one, that's super important.

Similarly, Lily explicitly discussed this merging as well:

In the last couple of years, I have become very aware of how mental health and mental well-being really has an influence on total embodiment. The last year my partner and I have been really unhappy in our living situation. And that has changed our physical selves ... because our physical well-being has changed, so has our mental.

Other women alluded to the merging of various components more implicitly, like when Pamela discussed positive embodiment:

The positive side would be, [when] I feel like I have been meeting my fitness goals, or I have been, you know, eating fairly healthy, or I have been doing well presenting myself to others, or I am viewing myself in a positive light.

Several women, including Lily, Mandy, Pamela, and Brittany, discussed interpersonal self-caring as well, in terms of fostering friendships and relationships in a balanced and positive way. In addition, these women often explicitly spoke of these actions as a form of self-caring.

Inner awareness and self-reflection. Inner awareness and self-reflection included being attuned to one's own needs, listening to the body, knowing what increases positive feelings and

what does not, and acknowledging what is personally relevant or important. This often resulted in engaging in “me time” (e.g., not restricting one’s desires, engaging in guilt-free pleasures such as listening to music, painting nails, drinking wine). Women also discussed knowing their own needs, desires, tools, and strategies for coping with disrupted embodiment (e.g., reaching out to significant others, re-examining life goals, creating schedules and routines, accountability to self or others). For some women, inner awareness was about remaining present in the moment, as Ann said, “I make a really conscious effort to pay attention to how I am feeling when I leave [a workout class] ... and I pay attention to that feeling, and then try and remember it.” For Lyla, self-reflection was a key aspect:

Sometimes there have been in situations where I have felt myself kind of getting down on myself about the way I look, or the way I feel, or that I can’t do certain things that some other person is doing in their life. And it is very ... self-reflection I would call it; to look back and look at where I am at in my life, and why I think that I am happy and I feel good about what I am doing.

Brianna discussed inner awareness and body attunement:

I listen to my body a lot too. When my body says no to something (you need rest, you need sleep, or you need alone time or quiet time) I will take it. I will be a little bit selfish and I will take that.

Lily also reflected:

For me, if I kind of reflect back on major chunks of my history, where I have been the happiest is where I have felt the most balanced. But balance doesn’t necessarily mean equal bits of everything ... I think the older you get and the more elements you bring into your life, focus shifts and balance looks different for everybody and over time.

Exhibiting control and agency. Exhibiting control and personal agency was reflected by acknowledging choice, taking control of one's body, making decisions and following through, doing things to feel better, and owning aspects of one's self-concept. It resulted in feeling in control, energetic, powerful, strong, empowered, capable, productive, or accomplished. It also resulted in having a stronger sense of self-concept and agency. For example, Lyla said, "Once you start actually recognizing energy ... if you are able to pin it down yourself and take control of it, then it's a really good feeling to have more control over your own body." Brittany also spoke about agency and control when she stated: "You do have the ability to influence everyday life and the future. If you actually want this to happen, you are the only person who is going to change it, so decide now and act on it." Finally, Mandy expressed taking control, while combining several elements of self-caring:

Exercise is part of my self-care because I know how good it makes me feel. It is not about what I look like so much anymore, it is about how I feel; how I feel about myself and I feel powerful, capable, and relaxed ... and it helps me sleep, and there are all those good health benefits too. It is almost empowering to me.

Acknowledging the cultural context. Acknowledging the cultural context can be defined as recognizing, thinking about, and discussing cultural ideals and cultural pressures for women. These discussions highlighted media portrayals, the beauty industry, cross-cultural differences, gender stigmatization, mixed media messages, and perceptions and messages from others. This recognition and awareness resulted in women being critical of the information they receive and being better able to resist internalizing cultural ideals. For example, Lola said:

I am a science student, so I don't trust everything I read on the Internet. I think everything is always critical. 'Don't eat that, don't drink that'; 'You should drink a glass

of wine a day' but then its like 'You shouldn't either cause then you are an alcoholic' ...
You can't win either way.

Brianna disclosed:

I think [being a woman in this culture] means so much. I think it is a lot of pressure. I think we put it on ourselves and men put it on us. So I think women of all ages struggle. And I think it is difficult. And I especially think mothers, new mothers, probably struggle a lot. It is a scary thing to know what is going to happen to your body after you have a kid. Some people will say 'Yeah it was fine' and some will say 'Yeah still struggling after; difficult to bounce back; and my body is never going to be the same' ... I have trouble with that I think.

Brittany referred to the media and its impact when she said:

I think a lot of [people's self-concept] would be what we are surrounded by, the social media and media in general, like movies, TV, shows, radio. It has corrupted some people and it has inspired others, depending on what you focus on.

Aligning with positivity. Aligning with positivity can be defined as striving to think and feel positively and to behave in positive ways. In this way, aligning with positivity was often a conscious process of affiliating with positive things and people. It arose for many women from re-evaluating and shifting perspective or considering future goals, aspirations, and realities. The women also described aligning with positivity as arising from having loving, supportive, and/or compassionate people in their lives (e.g., boyfriends, family, boss). Aligning with positivity resulted in feeling productive, feeling stronger, increased inward positive attitudes and feelings, positive interactions in the world, disseminating positive information to others, and a more positive and valued self-concept.

Engaging in intrapersonal positivity. Intrapersonal positivity can be defined as positivity from within an individual. It consisted of self-talk, self-affirmations, and self-kindness. When women recalled experiencing disrupted or negative embodiment, they discussed resorting to intrapersonal positivity. For example, when asked what she does when she feels her positive embodiment has been challenged in some way, Lyla said, “I think the biggest thing would be re-evaluating whenever you have those moments. And it is not just about physical (how you look), but looking at different [aspects of your life].” Mandy indicated, “I will tell myself ‘okay so I don’t feel so good today, but tomorrow is another day.’” Ann recalled, “That’s when I think I gave my self a little bit more of a chance; saying ‘okay you can do this, you are going to get through this,’ its like, ‘no, I got this.’” Jennifer reflected, “I think there is just a voice inside my head; I kind of give myself advice (laughs). I will like just be like: ‘alright (snaps with her finger) come on lets go’ and in my head be like ‘stop’ [the negativity].”

Seeking interpersonal and extrapersonal positivity. Interpersonal positivity can be defined as positivity in interactions with others. This included surrounding oneself with positive individuals, disseminating positive information to others, and seeking and accepting acknowledgment and compliments from others. Extrapersonal positivity can be defined as positivity from things outside of the woman or her direct interactions with others. It is more indirect and involves aligning with, or surrounding oneself with, positive messages from the broader cultural context, such as media and magazines. Jennifer discussed interpersonal positivity when she said:

[My friends] make me ... sometimes they challenge me, sometimes they build me up, and sometimes they ... mostly it’s just people who give me positivity. You know, I enjoy my

time around them and they have compassion, and that's the biggest thing. They have understanding; they are not judgmental whatsoever.

Ann also put a large emphasis on interpersonal positivity:

I started hanging out with the yoga crowd and now ... we are all kind of the same. We are all super busy, career driven. But every week, we make time ... so I think that has helped for sure ... just friends and surrounding yourself with like-minded people.

Mandy discussed interpersonal and extrapersonal positivity by indicating:

I surround myself with positive images is probably a big one ... I also make sure that I surround myself with the right kind of people; people who build me up, not tear me down. Sort of have the same worldview that I do.

Resisting negativity. Resisting negativity can be defined as mindfully and purposefully withholding judgment, negativity, and self-critical cognitions, emotions, and behaviour. It also involves disengaging with people and messages that have a negative impact. It results in positive embodiment via self-acceptance, positive interpersonal relationships and interactions in the world, and feeling strong and powerful.

Suspending intrapersonal negativity. Suspending self-judgment and resisting the internal critic were the hallmarks of suspending intrapersonal negativity. This was achieved through self-reflection, acknowledging socialization, beliefs, and behaviours, and exhibiting self-kindness. For example, Jennifer said, "I try not to be negative anymore, because it doesn't do anything for you. All it does is make you ... nobody wants to be around you." When asked about when she feels best, Ann said, "When there is no judgment. It is completely you and yourself. You don't worry about what anybody else is doing at any point. It is just totally about yourself." Finally, another quote that reflected this subcategory was when Mandy indicated, "I have to be really

mindful when I am getting into [a negative] head space. But I find that if I shift gears to something that I really like about myself, or that I am good at, or that I am strong, I find that that makes a really big difference.”

Resisting interpersonal negativity and disengaging from extrapersonal negativity.

Women avoided interpersonal negativity by resisting negative people. They did this by mentally disengaging with others or physically removing themselves from others who had a negative impact on them. This was apparent when Jennifer spoke about relationships as impacting her positive embodiment. She said, “they can be themselves around me and I can be myself around them. And I just feel like there is no negativity; there is just positive exchange.” Similarly Lily spoke about her childhood stating, “There was never negativity; I think maybe it was the absence of negativity that helped reinforce the positivity.” Lyla also discussed resisting interpersonal negativity:

You feel powerful in the way that, just because these things are happening around me doesn’t mean I have to partake in it. So other people’s energies and attitudes and everything: It is so easy to let them affect you that way. If someone is in a really down mood, it kind of puts you in a down mood. But it is such a good feeling to be able to say, ‘you know what? I realize this person is [angry], but I am not going to let myself get that way’.

Disengaging from negative media messages decreased extrapersonal negativity. This included conscious decisions to stop engaging with negative influences such as magazines and social media. Renee highlighted this when she said:

I stopped looking at magazines because I would compare myself. And then I would be negative towards myself and I realized that way later on. So stop doing those things that

feed the negative and try and find those positive things and just practice them. And eventually after you have practiced something for long enough it becomes habit.

Brittany also shared her disengagement from negative media messages:

I don't have Facebook, Twitter, Instagram, anything, because when I did have it, I was just consumed by it. I felt so judged or I was judging other people and I was spending way too much time worrying about it. You realize that stuff is draining. It is emotionally challenging to hear it, read it, and see it ... Now I am like 'Okay I am going to live my life the way I want to.' How I feel in the morning - that is what I will base my day off of.

Core Processes

In addition to the two core concepts, there were several core processes that emerged in the interviews as well. The most pertinent process that occurred throughout all of the interviews was doing work. The other processes included time, maturity, and learning. Because time, maturity, and learning were often discussed as coinciding together, they were grouped together for the purposes of this discussion.

Doing Work

The process of doing work was apparent in both meaning making and balancing. Doing work involved conscious and unconscious cognitive and behavioural efforts. These efforts were apparent in the way women spoke of their own understanding of themselves (i.e., conceptualizing self), how they came to respect and value themselves (i.e., valuing self), and how they engaged in balancing. For example, Brianna said "I am starting to feel and accept maybe my body, the image I have of my body, and feeling comfortable in my own skin. And I feel that is something I still have to work at."

Doing work was not always explicitly stated, but was often implicitly communicated. It became clear to me that the women were always doing work. Furthermore, the women often normalized this process by speaking about it in terms of practice, or talking about things such as momentum and routine (or changing routine). Doing work had clearly become second-nature and a normal daily process for these women. Many women showcased doing work. For example, Lola said:

There are things that I am still working on ... I think I am working on mental happiness a lot. Along with physical, because working out and being happy with how I look makes me feel better mentally too.

Renee indicated:

Feeling comfortable in my own skin is something that has to be worked at day-to-day. I don't think that anyone has it or they don't. I think it is something that is attainable by everyone by working on it. And it is something you constantly have to practice, I should say, not work but practice. If you practice something, you are essentially working at it on a more constant basis ... It becomes so much more second nature than when you are working at something, which is what maintenance is.

Brittany stated:

And it is a conscious effort. It is about wanting to learn, wanting to improve, but also in your actions. If I wake up in the morning and don't feel good, I will shower, get ready, do my hair, eat a healthy breakfast, and I feel so much better.

Lily also discussed the effort required:

I think you have to make a concerted effort because it is easy to get into routine and just go with the flow. But then you take a step back and look and ask yourself 'how's that

working out for me?' ... If it is not, what needs to shift? Maybe part of the balance needs to.

Other women alluded to doing work implicitly, like when Pamela said:

As far as physical impact to my embodiment - an injury or something like that - I don't let anything fully stop me. If my momentum comes to a halt, it is hard to get moving forward again. So if I take an injury and can't necessarily exercise the same way, I'll do an extra flight of stairs at work, or something like that. Even if it is just little things, just to keep some momentum, so that when you start feeling better you can bounce back.

Time, Maturity, and Learning

The processes of time, maturity, and learning were also evident when the women spoke of personal meaning making and balancing. For example, meaning making in the present moment involved past and future conceptualizations of the self. As such, many women spoke of their past selves in comparison to their present selves. Past selves were spoken of mostly in terms of a past event, such as a significant break up with a boyfriend or dissolution of a friend-group. These events caused the women to re-examine their own self-concepts and interpret themselves in light of the change in relationship status. For example, Ann said:

My whole world fell apart, so I left with no return ticket. I went and did yoga for a week and I think that is kind of when I gave myself a little bit more faith, or believed in myself a little bit more.

Renee suggested:

I started to do the things I wanted to do and realized for sure that [the relationship] wasn't going to work out; that is when the break up happened. So I started taking a focus more

on myself, but it was that relationship that sort of made me realize that I have to focus on myself.

Women also referred to their future selves when engaging in present meaning making. They identified values, goals, and priorities for the future. For example, both Lily and Lyla placed a strong emphasis on motherhood and building a family. In addition, Pamela shared:

Because I know about [the possibility that I have fibromyalgia] now, if I can make the lifestyle changes that help support it in this point in time, it will definitely decrease the severity as I age... I have to be more careful now than before. So I am more conscious of my body.

Mandy also discussed self-awareness and her goals for her future:

That awareness of, I need to be active in order to prevent, you know, future issues with my hips; [like my mom has] ... That is always now in the back of my mind, as I need to make this a priority not just for now and the way that I feel about my body now, but so that in the future [so that] I can still go for a walk and spend time with my kids.

When women spoke about how they experience positive embodiment and what kind of things contribute to having a connected and embodied sense of self, many spoke of time with regard to maturing and learning. For example, Lola indicated that, “it took [her] a long time to be like ‘that’s okay ... that is okay to be like that.’” Renee shared:

Well I think that it has a lot to do with me maturing and getting older. When you are younger the things that concern you, or the type of lifestyle [is different]. As I have gotten older I have come more into an acceptance of myself ... I have realized that I am in control of my own body by the things that I do day-to-day like taking caring of myself and that is what gives me more positive embodiment.

Brianna indicated:

But being comfortable in your own skin ... I think takes a while to come. And maybe you stop comparing, or stop caring how you are in relation to others. I think, 'okay well I am at a healthy body weight, I like myself like this, I feel good, I think I look good' and I think that comes with maturity. I wouldn't maybe say the same in my teens or early twenties.

Finally, Lily reflected:

It wasn't until my twenties that I really realized that, you know, body *image* as opposed to necessarily embodiment are two very different things. And body image can have a huge influence from a lot of external factors, but for me feeling good in my skin ... the only person that could control that was me.

Chapter Summary

In all 10 interviews, meaning making and balancing emerged as two core concepts. Along with these concepts were the core processes of doing work, time, maturity, and learning. Many of the women indicated that meaning making and balancing led to feeling comfortable in their own skin. This was discussed as feeling a level of comfort and calmness in exhibiting their natural selves in general and specific interactions in the world. In addition, these women indicated that feeling comfortable in their own skin meant being okay, satisfied, pleased, or happy with their own body (irrespective of size or appearance). In addition, self-awareness contributed to, and resulted from, the meaning making and balancing that women engaged in. Self-awareness involved recognizing how one feels in her own body, understanding how her body works, getting in touch with how she is feeling on the inside, connecting the physical,

mental, emotional, and interpersonal aspects of her self as well as focusing on self-concept, health, strength, and feeling powerful rather than on appearance or outward image.

CHAPTER FIVE

Discussion

The objective of this study was to construct a preliminary theoretical model to explain the process of maintaining positive embodiment in young women. The preliminary model provides insight into women's embodied experiences in Western culture, the resilience they demonstrate while they negotiate unattainable cultural ideals, and their resulting positive self-conceptualizations. This model provides a framework for understanding how women in emerging adulthood navigate their own being within a Western cultural context.

There were two core concepts in this preliminary conceptual model: *meaning making* and *balancing*. Meaning making reflects how women experience positive embodiment, via conceptualizing of self and valuing self. Balancing highlights how women maintain positive embodiment. Both of these core concepts operate in an ongoing and alternating fashion. As such, they are not discrete or mutually exclusive concepts. The core processes that emerged and connected these concepts included doing work, time, maturity, and learning.

This chapter addresses the implications, limitations and strengths of this research, as well as future research areas. First, the current findings are discussed in terms of embodiment literature, body image literature, and psychology literature in general. Then, a secondary literature review focused on the core concepts and processes and their contribution to constructivist and feminist frameworks is described. Implications for counselling are then reviewed. This is followed by the limitations and strengths of this study and future research recommendations.

Embodiment Literature

Women in this study experienced fluctuations in their embodiment. For example, when

discussing positive experiences and feelings, women often discussed their physical, mental, emotional, and interpersonal aspects of self as an integrated whole, consistent with mind/body unity (Pelican et al., 2005). However, at other times, women subtly spoke about their bodies as a separate entity. In this way, the Western influence of mind/body dualism was present, although this did not always lead to disrupted or negative embodiment (Connolly, 2013). Evidently, the embodiment construct is difficult to conceptualize both theoretically and pragmatically. Other scholars acknowledge the complexity and the difficulty conceptualizing personal experiences within a coherent theory of embodiment (e.g., Braidotti, 2002; Glenberg et al., 2013).

Consistent with previous research on women's embodiment, the women in the current study experienced their own embodiment as fundamental to their self-concepts (Budgeon, 2003; Hesse-Biber et al., 2010). Similar to previous research, women in this study identified that subjectivity and the body are linked and involved in a continual process of negotiating and renegotiating self-concepts (Budgeon, 2003; Davis, 1995). Not only did women discuss their experiences as shifting over time, but some women exemplified these shifts in meaning making over the course of a single interview. For example, some of the women shifted from talking explicitly about their bodies, sometimes in an appearance related manner, to more general interactions in the world and with others. In this way, their language increasingly reflected mind/body unity while conceptualizing self.

Developmental Theory of Embodiment

The DTE suggests that women experience embodiment on a continuum from positive to disrupted (Piran & Teall, 2012). Similarly, women in the current study identified experiencing fluctuations ranging from disrupted to positive embodiment. Disrupted embodiment included “having a bad day”, which often involved feeling tired, lethargic, irritated or moody, or

experiencing low body esteem (e.g., “feeling fat”). Positive embodiment was sometimes referred to as feeling unified, whole, collected, and happy. Yet, contrary to the DTE, positive embodiment was also described by the women in this study as feeling comfortable in their own skin, feeling or being balanced, and feeling satisfied, calm, or simply okay about themselves. In this way, women saw the middle of the continuum as a positive place and often strived for this in order to be happy and content.

Similar to the DTE, women in the current study also experienced embodiment in social, mental, and physical domains (Piran & Teall, 2012). For example, in discussing self-caring, women consistently referenced physical, mental, emotional, and interpersonal aspects of care. They also commonly merged these aspects, recognizing the mind and body as one and acknowledging themselves in relation to others. Interestingly, many women expressed the need to put themselves first or focus inward more often. In contrast to the DTE terms, I labelled the mental and physical domains as *intrapersonal* and the social domains as *interpersonal* and *extrapersonal* in this study.

The various domains of the DTE exist on a continuum from freedom to constriction (Piran & Teall, 2012). Thus, the physical, mental, and social domains may be thought of as dynamic and oscillating. Similarly, meaning making and balancing in the current study were identified as core concepts and were fluctuating as well. Other variables that are examined in the DTE include aspects of identity that involve social locations, including gender, social class, and ethnicity (Piran & Teall, 2012). The current study also examined social locations and their impact on embodied experiences. The specific process variables recognized in the current results (including doing work, time, maturity, and learning) are not apparent in the DTE.

Embodiment Model

Menzel and Levine (2011) suggested there is considerable overlap between embodiment and body image, and they merged together ideas from the literature. They identified three important dimensions:

1. Appreciation of appearance and function. This refers to favourable opinions and positive affect, involving descriptors such as happiness, respect, and pride. It also includes body appreciation and flexibility.
2. Awareness of, and attentiveness to, the body. This refers to how connected or attuned individuals are to bodily experiences (including emotions) as well as how responsive they are to bodily needs.
3. Adaptive cognitions. This refers to the ability of an individual to resist or downplay the infiltration of the cultural ideal and resulting challenges to healthy embodiment and body image.

The women in the current study discussed each of these facets. For example, women identified learning to appreciate, respect, and value themselves, their bodies, and their appearance. Through meaning making, women discussed embodiment as being key to who they are and how they relate to the world (Menzel & Levine, 2011). Women also discussed being aware and attuned to their own needs and engaging in self-caring appropriately. The women described their self-worth largely based on what their bodies could do for them and how that contributes to self-expression and self-concepts, rather than their self-worth being based solely on their appearance (Menzel & Levine, 2011). Finally, women identified what Menzel and Levine labelled adaptive cognitions, in that they acknowledged their cultural context and engaged in thinking and behaviour that allowed them to align with positivity and

resist negativity. Women in the current study experienced positive embodiment similarly to how Menzel and Levine (2007) defined embodiment, namely as:

An integrated set of connections in which a person experiences her or his body as comfortable, trustworthy, and deserving of respect and care because the person experiences her or his body as a key aspect of – and expresses through her or his physicality – competence, interpersonal relatedness, power, self-expression, and well-being (as cited in Menzel & Levine, 2011, p. 170).

Body Image Literature

Although some researchers have identified the multidimensionality of body image, including perceptual, cognitive, affective, and behavioural components (Cash, 2012), the underlying notion of body image is that of the *image*, or perceived appearance, of one's body. As such it has been suggested that the body image construct is narrowly defined (Blood, 2005). Interestingly, Cash (2012) defined body image as “how people experience their own embodiment, especially, but not exclusively, their physical appearance” (p. 334). Yet, in this publication, the construct of embodiment was not explored further and emphasis was placed on physical appearance for the remainder chapter. It appears that body image researchers (e.g., Cash, 2012; Menzel & Levine, 2011) are trying to expand the notion of body image to include other embodied experiences.

However, historically and currently, body image discourse encourages the mind and body split (Blood, 2005). The study of body image has always been a pathology-focused field (Cash, 2012). It has seemingly simplified bodily experiences by dichotomizing them. For example, in order to avoid body image problems, women are encouraged to have a particular (positive) relationship with their body, in the form of liking, accepting, and nurturing their bodies (Blood,

2005). This language implies that a woman's body is separate from the rest of her self and that she is unable to experience both positive and negative embodiment. Based on the knowledge I gained from the women I interviewed, body appreciation, respect, and love was a way to connect the body and self, which is why these themes fell under the category *valuing self*. The women discussed accepting themselves through the process of learning about, and understanding, themselves. These themes are consistent with the literature on body appreciation, which has indicated that several factors impact an individual's positive body image, including favourable evaluations of the body, body acceptance, respect for the body, and protection of the body (Avalos et al., 2005). At the same time, the women also acknowledged their continuously fluctuating embodiment. They discussed experiencing both positive and negative embodiment. In this way, they debunked the myth that both the body image and embodiment constructs exist as static dichotomies of either positive or negative.

The findings from the current study emphasize the need to broaden the definition of the body image construct. Appearance was an important facet to women's overall embodiment. For example, most women indicated that feeling good about their appearance resulted in increasingly positive embodiment, which is consistent with previous research (Tylka, 2012). However, many other factors impacted their embodiment. For example, all of the women discussed relationships with supportive others as influencing their embodiment. Many women also discussed achievements and productivity as a factor in their positive embodiment. These achievements ranged from taking care of their home or pets to getting recognition at work. As such, the current findings located women's body image as one element within their overall embodiment, as other scholars (Cash, 2012; Menzel & Levine, 2011; Piran & Teall, 2012) have recently suggested.

Psychology Literature

The results of the current study will be discussed in relation to the psychology literature in various ways. First, they coincide with literature from developmental psychology, specifically, the developmental stages of emerging adulthood and adulthood. Second, the results coincide with literature on constructivist and feminist frameworks within psychology.

Emerging Adulthood Literature

Emerging adulthood is a unique period in terms of many life domains (Tanner et al., 2009). The main domains that were apparent in the current study were those of cognition, personality development, family relationships, friendships, and intimate relationships. For example, during emerging adulthood, brain processes involving reasoning, problem-solving, and integrating emotion and cognition become fully developed, making self-awareness more feasible (Tanner et al., 2009). Similar to the findings in the current study, emerging adulthood is also a critical period for the integration of information about an individual's inner-self within the sociocultural context (Tanner et al., 2009). In this way, a person's sense of self is conceptualized through the harmonizing of multiple roles and relationships (Tanner et al., 2009). Consistent with previous research, women in the current study engaged in continuous meaning making, resulting in conceptualizing themselves as unique and similar to others.

Emerging adulthood brings with it distinct challenges related to becoming more autonomous and independent. Yet, family, friends, and intimate relationships provide significant sources of support for individuals in emerging adulthood (Tanner et al., 2009). Coinciding with the literature on emerging adulthood (Tanner et al., 2009), and the tripartite model of influence (Thompson et al., 1999), all of the women in the current study identified family members,

friends, and/or intimate partners as important sources of support and as impacting their positive embodiment.

Family influences can be direct or indirect (i.e., through modelling) and can impact female's body image and eating behaviours (Abraczinskas, Fisak Jr., & Barnes, 2012). Women in the current study described developing and maintaining positive embodiment with the help of supportive family members. One woman identified "unconditional love" from her mother as a major factor in her current embodiment and several other women identified their mothers as having a positive impact on their embodiment. Numerous women also discussed their fathers. Siblings were spoken of less, but were mentioned periodically.

The development of intimate friendships and relationships are an important task of emerging adulthood (Tanner et al., 2009). When it came to friendships, many women discussed aligning themselves with positive, like-minded others. Social learning theory suggests that an individual's behaviour is guided by the learning that occurs by watching others' behaviours and the consequences of behaviours (Bandura, 1977). Social learning theory has mainly been applied to body image problems (e.g., Sheldon, 2010). For example, findings have suggested that in a sample of college women, pressure from family and friends were more salient factors of low body esteem than perfectionism, amount of time watching TV, or reading magazines (Sheldon, 2010). Perhaps social learning theory is also applicable with individuals who experience positive embodiment and positive body image. For example, a woman may learn positive behaviours and engage in those positive behaviours by aligning with, and watching, others who experience positive embodiment.

Similarly, research has shown that peer and friendship groups can have positive effects in eating attitudes and behaviour (Paxton, 1996; Piran, 1996), social support, body image, and self-

efficacy (Steese, Dollette, Phillips, Hossfeld, Matthews, & Taormina, 2005), particularly for small, self-selected peer groups (Thompson, Russell-Mayhew, & Saraceni, 2012). Coinciding with this research, women in the current study chose to engage with peer groups who provided them with positivity, which then increased their positive embodiment. Many women also discussed providing positivity to their friends and disseminating positive information, which was expressed as a source of joy and happiness.

When it came to intimate partners, the majority of women (nine of the ten) disclosed that their boyfriends (or in one case, husband), played a key role in making them feel comfortable and supported. This is in line with previous research, which has found that romantic partner support is inversely correlated with body image dissatisfaction in women (Weller & Dziegielewski, 2004). In fact, some research has shown that both women and men reported lower body dissatisfaction when relationship trust and support was higher (Juarez & Pritchard, 2012).

Adulthood Literature

Sinnott's (2009) postformal thought theory provides one way to conceptualize adult cognitive development. Sinnott indicated that postformal thought theory "is a way to describe how we learn to balance mind, heart, and soul and our relation with others over our lifetimes" (p. 105). Postformal thought theory builds on Piaget's concrete stage (age seven to 11 years) and formal stage (age 11 to 15 years). It contributes more information about the self beyond Piaget's reasoning, because it involves complex, abstract, and logical thinking (Sinnott, 2009). This theory also takes a constructivist approach, in that it allows individuals to understand that meaning and reality is co-constructed. Sinnott likened adult development and postformal

cognitive operations to that of a transformative dance. She discussed this as involving three relational elements, including:

1. To have some balance within the self to move smoothly through the steps of the dance.
2. To interact skillfully with other dancers.
3. To remain connected with the overall purpose of the dance, and not to lose a meaningful pattern.

Postformal thought theory involves connectedness on various levels, including connecting different selves (intrapersonal), connecting to others (interpersonal), and connecting with transcendence (purpose and meaning). These are paralleled in the current research as the intrapersonal, interpersonal, and extrapersonal components within the balancing and the meaning making categories.

Constructivist and Feminist Frameworks

Like the works of Bordo (2003), Blood (2005), Orbach (2009), Piran and Teall (2012), and Rice (2014), this research study contributes to the feminist literature in that it examines women's lived experiences of embodiment. The results correspond and contribute to a constructivist view of the body and subjectivity. A second literature review (Charmaz, 2014; Hutchinson & Wilson, 2001) was done with regard to the core concepts and processes and is presented in the following sections.

Meaning making. The current study found that women engage in continuous meaning making, which resulted from, and contributed to, their self-concepts. This finding is in line with a constructivist approach, which implies that a person, their body, and the world are not fixed entities that can be objectively known, but are changing and fluid relationships (Blood, 2005). Embodiment is constitutive of a person's sense of self (Orbach, 2009). Just as Seligman (2010)

conceptualized self, women in the current study identified personal meaning making and self-concepts as encompassing cognitive, behavioural, and social elements. For example, women identified being attuned to their bodies and behaving in certain ways based on their beliefs and values. In this way, the women expressed a level of understanding about their own lived embodiment (Tolman et al., 2014). They also recognized themselves as interpersonal beings, in which their self-concepts were established in relation to others and within the cultural context. By acknowledging that their experiences fell within a particular cultural context, the women also discussed embodying the social (Tolman et al., 2014). The women's experiences of embodiment exemplified what Butler (1998) suggested:

The cultural framing of the body precedes and enables its lived experience. The idealizations at work are not merely personal notions of what bodies are or ought to be; rather, they are cultural elaborations of norms by which bodies become identifiable, recognizable, and intelligible ... One cannot have the direct and lived experience of the body except through the cultural frames by which it becomes intelligible. (p. 4)

A famous study was conducted in the 1990s, in which the lead researcher introduced television to media-naïve Fijian adolescents (Becker, 2004). It was the first study of its kind that measured results on body image and self-concept before and after the introduction of Western television programming. While studying Fijian embodiment, Becker (2013) noted that while Fijian identity begins with a relationship to the body, the body includes community; the responsibility of the body is part of the collective domain. In contrast, Western culture emphasizes the individualized nature and discreteness of the body to which one's identity is firmly tied; personal authorship of the body takes precedence (Becker, 2013). Becker (2013) indicated:

The differentiated nature of personal experience in the West, along with the firm conviction that the individual is the personal author and agent of bodily experience, not only permits the personal cultivation of bodies in this (Western) cultural milieu, but also allows for extreme objectification of bodies and fosters the body/self alienation when the myth of personal control is disrupted by illness. (p. 130)

Indeed, individuals with body-specific pathologies often experience disembodiment (i.e., a disconnection with their own body; Stanghellini et al., 2012) and sometimes express hatred toward their bodies (Brausch & Muehlenkamp, 2014). Riva (2014) suggested that body-specific pathologies might be the outcome of impairment in the ability to update negative body representations stored in memory, with real time sensorimotor and proprioceptive data. As Riva points out, body representations play a crucial role in structuring cognition and self-concept.

Seligman's (2010) and Jenkin's (2008) notions of self also implied that lived embodiment and embodying the social are in constant feedback with one another in the creation and maintenance of self. It was clear in the current study that women's conceptualizations of embodiment were continually shifting, rather than stable and set (Csordas, 1994; Jenkins, 2008; Merleau-Ponty, 1945; Seligman, 2010). The intersectionality of self-concepts is important to consider (Sinacore et al., 2012). There is no singular self-concept or subjectivity for all women. Rather, women experience, negotiate, and construct several self-concepts that are always in flux (Watts, 2011).

The women in the current study identified having a good grasp on their own self-concepts, what they valued about themselves, and also how to balance (and therefore embody the notion of feeling comfortable in their own skin, which was often used synonymously with positive embodiment). In this way, there were threads of authenticity throughout the interviews.

Authenticity has been defined as “being in touch with the body and emotions, and being able to act on them” (Maté, 2014, May). Women in this study discussed listening to their bodies and engaging in self-caring activities that suited their own unique needs. In addition, many women discussed some disregard for what other people thought, which seemed to contribute to the ability to take an inner focus. Authenticity was also expressed by acting in accordance with personal values and beliefs. These young women had spent a great deal of time learning about themselves and deciphering their own morals, values, beliefs, and goals and indicated that their behaviour was consistent with these. This is also consistent with literature on body image flexibility, or attending to internal experiences and acting in accordance with values (Sandoz et al., 2013).

Balancing. In the current study, balancing was the way that women negotiated living happily and healthily. For example, balancing was discussed as offering women the freedom to indulge in simple pleasures, yet not “over-do it.” It was the idea that many women spoke of, namely, “everything in moderation.” Women had learned that by indulging too much, or all the time, the more work they would need to do to get to a balanced or happy place again. It appeared that women came to accept the culture and society they lived in and compromised with societal expectations. They claimed that balance was happiness for them. As a result of balancing, women felt comfortable in their own skin. Balancing may be seen as a form of self-compassion. The self-compassion literature has indicated that self-kindness, nonjudgmental understanding, and a flexible mindset increase self-acceptance (Wasyliw et al., 2012). Many of the women in this study discussed each of these factors; thus, they appeared to be exercising some level of self-compassion.

Upon completing a second literature review looking for ideas of balancing, it became apparent that the concept is highlighted in some literature, but rather implicitly. For example, Neumark-Sztainer (2005) alluded to the concept of balancing when she explained that when trying to get youth to make healthier food choices, the aim is not to have these efforts result in the youth developing an obsession with counting calories. In another example, Neumark-Sztainer also indicated that, in trying to prevent eating disorders, professionals and parents should not ignore the dangers of being overweight. She discussed five dimensions of weight-related problems and indicated that they range from healthy to problematic. These include weight control practices, physical activity, body image, eating behaviours, and weight status (Neumark-Sztainer, 2005). For many of the dimensions, healthy levels may reflect balancing in the middle, notwithstanding the contextual and fluctuating nature of embodiment (Cash, 2012). For example, Neumark-Sztainer (2005) indicated that body acceptance reflects healthy levels on the body image dimension. Women in the current study identified feeling comfortable in their own skin as an indication of health, happiness, and joy. It wasn't about feeling satisfied at all times, but rather acknowledging that there are ups and downs. Often, women were able to balance the two, resulting in a level of comfort, calm, and acceptance.

In another example of the balancing notion being discussed in the literature, Watts (2011) explored female athletes' negotiations of femininity and masculinity. She found that women negotiated gender in various ways, sometimes challenging them and at other times performing traditional gender binary conceptualizations. Some women reported particular bodily movements and presentation for functional reasons. For others, bodily movements and presentation was to take on, or to avoid, masculine framings of their sport or position. Many women engaged in strategies to "redeem their femininity from the masculinizing effects

associated with participating in sport” (Watts, 2011, p. 163). In reading this study, it was clear that these female athletes strived to strike a balance in their displays of femininity and masculinity.

Finally, some researchers have indicated that being attuned to bodily sensations and body functionality, perhaps through mind-body exercises such as yoga, can enhance positive embodiment and reduce self-objectification (Impett et al., 2006; Piran & Teall, 2012). On the other hand, Seligman (2010) indicated that *hyperembodiment*, or shifts in awareness to focus sustained attention on basic physical acts, can actually be detrimental and self-objectifying. Seligman said that this focused attention on the body can fragment the flow of self-experience and separate an individual from their subjective experience. Here again, there appears to be a necessity to balance.

Summary of core concepts. Meaning making and balancing were the two core concepts that emerged and both corresponded to previous research. Meaning making is in line with a constructivist approach and previous research on conceptualizing self. Balancing was a method of maintaining positive embodiment and has been implicitly highlighted in some previous literature.

Doing Work. Women described their embodied experiences in ways that reflected continually doing work. The process of doing work occurred for meaning making and balancing. Doing work sometimes became “practice” for women, in that it became more second nature and evidently required less effort over time. In this way, doing work was normalized.

Feminist researchers have suggested that women engage in self-regulating practices based on their beliefs and understandings about dominant social norms of femininity (Bordo, 2003). These self-regulating practices can be thought of as doing work; they are forms of

disciplining the body (Blood, 2005), and they become second nature (Orbach, 2005) and normalized. Bordo (2003) indicated that normalizing is in fact a method of acculturating. For example, women engage in work because they are trying to fit in and correct any incongruence in their behaviour and appearance compared to societal standards. Similarly, from a cognitive-behavioural perspective, normalizing (along with avoiding strategies and seeking social support or feedback) is seen as a way of coping with cultural pressures (Cash, 2012). Bordo (2003) indicated that this normalization is central to the mechanisms of power and that self-regulatory behaviour is oppressive. In Blood's (2005) research, many women described their bodies as falling short of the societal norms in some way or another. On the other hand, normalization and doing work can be liberating for women, as it can lead to feeling in control (Bordo, 2003).

There is more emphasis today on appreciating unique or inner beauty (e.g., the Dove campaign for Real Beauty; I Appreciate You campaign on Facebook) and the need to challenge societal standards and have fun in one's body (Orbach, 2009). The women in the current study appeared to also be acknowledging the shift, which was apparent not only in their language, but also by their views and beliefs. Consistent with Blood's (2005) research, women in the current study alluded to societal norms and the need to measure up, but did not always emphasize these influences. Instead, they acknowledged cultural messages and pressures while actively seeking intrapersonal, interpersonal, and extrapersonal positivity, rather than dwelling on their perceived personal failures. Women sought "being comfortable in their own skin" irrespective of what others thought. This reflects a recent societal shift in emphasizing real, unique, and inner beauty. However, these women still discussed engaging in continuous work. Some women identified that work becomes practice (i.e., second nature), similar to Orbach's (2009) statement that "the preoccupation [with beauty] has become second nature, almost 'natural' and invisible" (p. 4).

Thus, despite the emphasis on appreciating unique and inner beauty, women's bodies are still experienced as objects to be worked on (Orbach, 2009). Furthermore, work on the body is never ending, as the cultural ideals of what constitutes femininity (Orbach, 2009) and health (Welsh, 2013) are continually changing.

Becker (2013) argued that the authorship of the body in Western culture exemplifies the principle of work on the self. Western society values autonomy, individuality, liberty, and choice (Blood, 2005). The individual is seen as responsible and is held accountable for his or her body (Orbach, 2009). Self-caring is a value; the body is a personal project (Orbach, 2009). For example, Western culture aggrandizes self and idealizes personal agency, which is often expressed through working on cultivating one's own body for the ultimate benefit of one's own personal self and space (Becker, 1994). In this way, individuals in Western culture are always aiming for self-improvement (Becker, 1994; Blood, 2005).

Blood (2005) found that *body work* was essential to achieving and maintaining an attractive body. Body work included disciplinary practices included food restriction, exercise, self-surveillance, and the exercise of will power. The women in the current study appeared to engage in many of these practices, with the exception of restricting food. Instead, the women talked about eating in a healthy and balanced way. As such, it appeared that women engaged in doing work for the positive results, including appearance, but also feeling comfortable in one's own skin, feeling accomplished and productive, and feeling positive around others.

Less than five percent of the population possesses the body shape of the cultural ideal, yet society portrays body-beautiful and perfection as something that is attainable by everyone, irrespective of genetics (Tiggemann, 2012) or economic status (Orbach, 2009). The Western ethos of work on the body is a result of exposure to media images that associate thinness with

success and marketing that promotes the reshaping of the body (Becker, 2004). Media and marketing have influenced individuals' perceived connection between diligence and work on the body, appearance and weight, and social and material success. In other words, the harder an individual works, the more beautiful and thin they can be, which will result in higher economic and social achievements. Interestingly, each woman's advice in the current study was centered on change at the individual level (see Appendix H for excerpts of the advice women provided). Some women made note of the larger cultural context, but mainly provided advice about focusing inward. This may be reflective of the cultural milieu that communicates to individuals that they are responsible for their bodies and selves and must work toward self-improvement (Blood, 2005; Orbach, 2009), which is in contrast to feminist views suggesting that bodies, meaning making, and identity are cultural and political (Blood, 2005; Bordo, 2003).

Time and maturing. Giuseppe (2014) found that, over time and through maturation of underlying neural networks, third-person and first-person bodily representations become more integrated. This resulted in experiencing an embodied self that included not only the personal body, but also the objectified body and ideas about the ideal societal body. Similarly, Allan (2005) indicated that women experienced their body as an object to be acted on and also experienced their body subjectively, living in it throughout and after medical procedures. Consistent with these areas of research, women in the current study expressed experiencing their body both objectively and subjectively. Furthermore, they identified experiencing their body more subjectively over time. For example, many women indicated that when they were younger (e.g., adolescence or for some early twenties) they cared more about what others thought and would attempt to follow societal norms more stringently. However, over time and with maturity, they learned to be increasingly accepting, self-aware, and "selfish" with their time.

Giuseppe (2014) indicated our bodily experiences evolve over time, which involves perspective shifts. For example, he suggested that at first our bodies are experienced egocentrically, through spatial motor actions and in the here and now. Over time, a shift occurs in which individuals begin considering future actions and their implications more than present moment experiences. In this way, perspectives shift from individual to social. As more emphasis is placed on the social meanings and appearances of the body, there are more potential pathways to self-objectification, body dissatisfaction, body shame, and body-related pathologies (Riva, 2014). Women in the current study identified these transitions, yet they also described another shift to focusing back on the self. This shift generally occurred in their early 20s, in which they stopped worrying about what other people thought and focused more on how they felt within themselves. Thus, time and maturation impacted women's development and how they experienced their own embodiment. As Blood (2005) indicated:

Over time, women realize that they are not saturated with dislike of their bodies. There are times when they feel good about themselves and how they look, and times when they are not self-conscious about their bodies. When they begin to notice the contradictory and shifting feelings they have about their bodies, women do not as readily assume that when they feel negatively about their body, this is 'seeing the body as it really is.' They come to understand that those feelings will shift and change over time. (p. 131)

Learning. The final core process that emerged was learning. Women described patterns of continuously learning about themselves, others, and their relationships. Blood (2005) indicated that women learn to develop strategies for dealing with their feelings, as opposed to eating, dieting, starving, and so on. Similarly, women in the current study discussed

understanding themselves over time and learned various strategies to balance and embody the notion of feeling comfortable in their own skin.

Tylka (2012) identified the concept of a bad body image day. Many of the women in the current study also discussed having “bad days”, which were related to their appearance and how they felt within their bodies. Many women had learned, however, that one bad day did not define them. They had learned strategies for self-caring and they implemented these strategies. These strategies varied between women. For example, some women described engaging in a full day of negativity and allowing themselves to experience the feelings prior to engaging in activities to feel better. Other women indicated that they would immediately engage in an activity to feel better and not allow long periods of negativity. Regardless of their strategies, these women knew their own needs and how to carry on.

Summary of core processes. Women in the current study experienced positive embodiment through four core processes, including doing work, time, maturity, and learning. Interestingly, all four were expressed as both individual and social processes. For example, it became clear that women saw doing work (although it was often spoken about implicitly) as an individual effort as well as an effort common among others. Researchers (e.g., Becker, 2013) have also identified doing work as a Western value and norm. Learning was an individual (cognitive) process, yet many women said they learned through conceptualizing their self in relation to others as well. Finally, maturing and the passage of time were both individual and social, as both processes transitioned and changed through personal and interpersonal experiences.

Implications for Counselling Psychology

Embodiment is an important concept that has been somewhat neglected by researchers in

counselling psychology (Cash, 2002). This study provides knowledge about the way women experience and maintain positive embodiment, an arguably important shift from the substantial emphasis on negative body image and risk factors for body-specific pathologies. Orbach (2009) argued that it is due to increased body work and desire for self-improvement that higher rates of body-specific pathologies and body shame are seen in psychologists offices. Knowledge and understanding of positive embodiment and how it is maintained is essential at this time in order to broaden notions of embodiment and body image, expand knowledge and techniques implicated in counselling and programming, and increase equality for women by considering women's embodiment as a social justice issue.

Broadening Notions of Embodiment and Body Image

An internal and integrated sense of embodiment results from actions such as resisting or rejecting an observer's perspective, including media ideals that emphasize external appearances (Hahn, Wiseman, Hendrickson, Phillips, & Hayden, 2012). Experiencing mind/body connection orients women to body function (versus external appearance) and often results in decreased levels of body surveillance (Augustus-Horvath & Tylka, 2011; Hahn et al., 2012). Other factors associated with a sense of positive embodiment have been identified and include body acceptance from others, acceptance of one's own body, and body appreciation (Avalos & Tylka, 2006). However, many women continue to monitor body appearance (Hahn et al., 2012). This may be due external influences such as societal pressures, or internal influences such as decreased bodily functionality (Hahn et al., 2012).

Working to enhance positive embodiment in which one is aware, responsive, and attuned to internal needs, may result in increased body esteem and positive identity development for women (Augustus-Horvath & Tylka, 2011). Monaghan (2001) argued that "the importance of

embodiment is now widely recognized ... [despite] a relative neglect of 'healthy bodies' as a lived experience" (p. 350). Monaghan went on to argue that positive embodiment must be explicitly recognized in social scientific research. It is essential that research on women's body experiences explore a broader range of experiences and influences, including embodiment or embodied behaviour, rather than the narrower dimensions of body image. The findings from the current study help to highlight women's embodied experiences and behaviour and broaden notions of embodiment and body image.

Glenberg et al. (2013) stated, "Whether or not embodiment survives as a viable theoretical framework ... it has set a salutary course that we hope will continue, namely, it provides new perspectives, new theories, and new methods that may help to unify psychology" (p. 582). As such, the embodiment construct is important within counselling psychology. I would also argue that it is important for society as a whole. The body image construct has been interpreted and used in everyday language; many people understand what body image is and use body image discourse. However, the embodiment construct is far less understood; people rarely know or use the term unless they have been exposed to Eastern philosophies of healing, mind/body exercises, or academia. Understanding the embodiment construct and using the term in everyday language may lead to further understanding about fluctuating self concepts and increased ability to acknowledge, and perhaps label, experiences of mind/body connection. In this way, embodiment discourse can begin to replace - or at least coincide with - body image discourse. Giving people access to such discourses may broaden the scope of individuals' experiences and how people relate to their bodies.

Furthering of Knowledge and Techniques for Counselling and Programming

Knowledge and understanding of positive embodiment and how it is maintained can inform clinicians and therapists working with young women. The counselling profession focuses on prevention and emphasizes holistic approaches for positive well-being, character strengths, and developmental growth (Gelso, & Fretz, 2001); thus, it is well suited for utilizing information and research regarding resiliency (Choate, 2005). By understanding how women experience and maintain positive embodiment and body image, “counsellors can work to enhance these factors in prevention and counselling intervention with all girls and women” (Choate, 2005, p. 320).

Prevention. *Prevention* of body-specific pathologies, such as eating disorders, has been defined as “policies and programs designed to evade or forestall the development of disordered eating by protecting current states of health and effective functioning” (Levine & Piran, 2004, p. 58). Based on the findings of this research, as well as other embodiment research and literature (e.g., Menzel & Levine, 2011; Piran et al., 2002; Tiggemann, Coutts, & Clark, 2014), embodiment is an important construct to consider in prevention programs. Incorporating embodiment into these programs would highlight the significance of embodied experiences, including personal meaning making, lived experiences of positive body image, mind/body connection, and responsiveness to bodily cues and self-caring (Menzel & Levine, 2011). It may also lead to overall improvements in health and well-being (Monaghan, 2001).

From a public health perspective, ecological approaches to prevention are important (Piran & Mafrici, 2012). Ecological approaches target different aspects of the social and cultural context for change, with the goal of enhancing protective factors and preventing body image problems (Piran & Mafrici, 2012). From an ecological view on health promotion, one must target the micro-level system (e.g., family and peers), higher-level community based organizations (e.g., schools), and the macro-level system (e.g., formal laws, regulations, rules,

and social ideologies; Piran & Mafrici, 2012). Importantly, social class, gender, ethnicity, age, and other social factors all shape experiences at all levels (Piran & Mafrici, 2012). The embodiment construct should be implicated in prevention efforts at the micro- and macro-levels. Extending knowledge about embodiment to individuals, families, schools, and communities, may serve to enhance ecological prevention approaches.

Intervention. From a constructivist approach, and as was evident from the current findings, there are no universal patterns and clinicians must attend to how their clients view their own experiences (Blood, 2005). There may be similar themes in women's experiences, but cultural variables such as ethnicity, gender, class, and religion give rise to different meanings and understandings of the body (Blood, 2005). When the meanings of behaviours and personal ideals and goals are explored, the presenting problem is often seen as more complex, resulting not only from individual problems, but also sociocultural issues (Blood, 2005).

Individual interventions. In working with women with body-specific pathologies, "the aim is to help women to move away from viewing their body as an object that can be moulded and shaped and to move towards experiencing their bodies as lived in" (Blood, 2005, p. 125). Liimakka (2011) demonstrated "how experiences of overcoming the mind/body dichotomy and connecting the body with the surrounding world disrupted the young women's habitual experience of an alienated body" (p. 441). Experiencing oneself from a first-person perspective (focusing on bodily functionality, competencies, and proprioception), as opposed to a third-person perspective (focusing on appearance), provides a sense of agency and a sense of control (Giuseppe, 2014) and may enhance positive embodiment (Tylka, 2012). Some scholars have indicated that when looking in the mirror, people see themselves from a third-person perspective (Giuseppe, 2014). Thus, clients could be encouraged to focus on aspects other than appearance

and to develop broader definitions of beauty, rather than allowing society to determine what is beautiful (Tylka, 2012).

Emphasizing embodiment and the ability to identify internal feelings and needs, rather than body image and self-objectification, can lead to positive physical and psychosocial benefits for young women (Impett et al., 2011). One positive outcome may be an increase in self-caring. Encouraging self-caring and balance in terms of eating and exercising is important (Neumark-Sztainer, 2005). For example, engaging in intuitive eating (i.e., eating when hungry and stopping when full; Avalos & Tykla, 2006) and exercising in moderation (Neumark-Sztainer, 2005) assists in a balanced approach. Individuals are more likely to engage in healthy and balanced eating if they understand, as well as respect and appreciate, their body (Tylka, 2012).

Media literacy - or developing a critical awareness of media and advertising and how fashion trends change over time - may result in women questioning or rejecting beauty ideals (Blood, 2005; Impett et al., 2011; McKinley, 2006; Neumark-Sztainer, 2005; Tiggemann, 2012; Tylka, 2012). Many of the young women in the current study spoke about being critical of the media portrayals of the cultural ideal and also about being selective about which types of media to consume. Counsellors, teachers, community members, family members, and peers can help teach and encourage media literacy (Neumark-Sztainer, 2005; Tylka, 2012).

Finally, feminist therapy seeks to help women get involved in media literacy, to see unrealistic body ideals through a cultural lens, and to challenge cultural ideals through efforts such as social activism (Brown, 2010). Worell (2001) identified four major principles in a feminist empowerment model that is used to guide feminist therapies and interventions:

1. The person is political. Major sources of health problems for women come from societal and cultural factors as opposed to intrapersonal disorders.

2. Personal and social self-concepts are interdependent. Intersecting self-concepts, including influences related to gender, race, ethnicity, class, sexual orientation, and age, impact women's experiences.
3. Women should work toward establishing egalitarian relationships.
4. Communal perspectives are valued. Women should be valued for a variety of characteristics and skills.

Summary. The aim of individual interventions is to help girls and women to experience mind/body unity. In this way, perspectives shifts from a third person (and objectified) perspective, to a first person perspective of experiencing the body as lived in (Rice, 2014). Encouraging self-caring and balance is important (Neumark-Sztainer, 2005). To engage in this, women can be encouraged to learn about and respect their own body (Tylka, 2012). Also, media literacy will empower women to question current societal ideals. Finally, feminist empowerment models, emphasizing personal, social, and cultural self-concepts may be useful.

Societal interventions. Exposing women to less dominant (e.g., feminist) discourses may allow them to engage in meaning making in a broader context without always attending to the dominant discourses of femininity, emphasizing slender and youthful bodies through self-improvement (Blood, 2005). Some evidence exists to support the idea that adopting feminist attitudes helps women to critique and resist societal body ideals (Murnen & Seabrook, 2012). Research has shown that individuals thrive when surrounded by positive peer networks that focus on inner strengths, body functionality, and social support rather than appearance and body criticism (Tylka, 2012). Parents and professionals could build such opportunities in the home environment, the school systems, and communities (Tylka, 2012).

From a feminist perspective, intervention involves the individual within the societal context. In this way, feminist models focus on cultural pathology rather than individual pathology (Murnen & Seabrook, 2012). Tiggemann (2012) identified several societal interventions, including the necessity to portray broader beauty representations and banning airbrushing and digital modification in the media. Neumark-Sztainer (2005) also stressed the importance of advocating for change in the media. In addition to media-level interventions, schools should enforce a zero-tolerance policy on bullying and weight-related teasing and fitness centers should refrain from displaying posters showing thin ideals (Tiggemann, 2012). Finally, family-level interventions are key. Neumark-Sztainer (2005) made many well-founded points about the importance of parents when it comes to children's attitudes and behaviour around weight and eating. Two important societal and familial shifts involve parents refraining from commenting on children's weight (Tiggeman, 2012) as well as teaching and encouraging boys and men to take on caretaking, nurturing, and empathic roles could help in changing gendered societal roles that support the current societal ideals (Murnen & Seabrook, 2012).

Fair and Equal Treatment of Women: Embodiment as a Social Justice Issue

Finally, the current study identified a growing need for fair and equal treatment of women in society. As McKinley (2011) indicated, "We need to think of women's body problems as a social justice issue for women. Working to achieve cultural body standards deprives women of time, energy, and economic resources" (p. 52). Similarly, it has been noted that one of the most persistent and dangerous societal expectations of Western cultures comes from the thin body ideal promoted for women (Murnen & Seabrook, 2012). It is dangerous because while thinness symbolizes control and success, it is unrealistic and women waste a great deal of energy, time, and money on their appearance (Murnen & Seabrook, 2012). Bordo (2003)

suggested that the normalizing disciplines of diet, makeup, and other body work and appearance improvement makes women less socially oriented and more focused on self-modification, only to feel personally insufficient. However, sadly, body work is still a requirement of young women today (Murnen & Seabrook, 2012).

The cultural ideals of women's bodies reflect biases of race and ethnicity, class, age, sexual orientation, and ability (Anderson-Fye, 2012; McKinley, 2011; Tiggemann, 2012). Rice (2014) indicated that growing evidence suggests that looks and appearance may influence individuals' social status in similar ways as their gender, ability, and ethnic categorizations. Ideal beauty is often described in terms of features more typical of Caucasian women (Murnen & Seabrook, 2012). As such, ethnic minority women are subjected to standards influenced by both sexism and racism, where part of the sexist oppression comes from body and appearance ideals (Murnen & Seabrook, 2012). The thin, white, young, beautiful, heterosexual, and able-bodied ideal is incredibly difficult to challenge; women feel empowered and worthy if they can approximate it, and alternatively feel shame and inadequacy when they do not (Blood, 2005; McKinley, 2011).

These cultural ideals are perpetuated not only by media and other influential individuals (Martin, 2010; Murnen & Seabrook, 2012), but also by governments, which indirectly teach individuals to work on having the right character, values, and physicality to prove their worthiness as good citizens (Rice, 2014). Furthermore, women face more discrimination than men; if overweight, women are not only seen as unhealthy, but are also seen as incompetent (Welsh, 2013). Using bodies as a gauge for a person's value in society "deepens the injustice, since it buys unearned privileges for some while creating unfair liabilities for others" (Rice, 2014, p. 158).

Interestingly, Western feminists have expressed concern about the role of women's bodies in limiting their freedom since the first wave of the feminist movement in the late 19th and early 20th century; feminists have long wondered why women's bodies require improvement (Murnen & Seabrook, 2012; Russell-Mayhew, 2007). This issue continued to be commented on by feminists throughout the 20th century (Bartky, 1990; Wolf, 1991) and into the 21st century (Bordo, 2003; Murnen & Seabrook, 2012; Neumark-Sztainer, 2005; Orbach, 2009; Rice, 2014; Toombs, 2013). Neumark-Sztainer (2005) argued that weight-ism, or discrimination based on weight, is one of the last socially tolerated forms of stigmatization in our society, perhaps due to the pervasive view that individuals are in control of their own body and its shape and size. Weight-ism applies to underweight, average, and overweight girls and boys (Neumark-Sztainer, 2005). Recently, the obsession with weight has shifted to an obsession with health (Welsh, 2013). Society imposes a *good-health imperative*, which continues to emphasize body weight and shape as important factors in health (Welsh, 2013). The good-health imperative also implicitly suggests that individuals are responsible for their own health, leaving many women with feelings of failure when they cannot attain society's notion of healthy (Welsh, 2013).

As such, women are at a particularly detrimental disadvantage in society. Viewing embodiment, weight, obesity, and body-specific pathologies as social justice issues offers a new lens to consider behaviour from a systemic perspective (Russell-Mayhew, 2007; Russell-Mayhew, Stewart, & MacKenzie, 2008). From this viewpoint, it is due to the political and economic context of the Western world that women are in a constant battle with their own body and their relationship with food (Russell-Mayhew, 2007). However, in reality, Western culture places the responsibility on individuals, which is problematic. Body image and embodiment are

not simply individual problems; system-wide change is needed to address societal ideals and the resulting body work that occurs for women in Western culture (Russell-Mayhew, 2007).

Limitations

There were several limitations of this study. First, although it has been noted that the semi-structured interview format for data collection provides novice researchers with a structured format (Charmaz, 2006), it also potentially neglects the wide range of information that may be obtained otherwise (Tweed & Charmaz, 2012). In addition, having just one interview may have resulted in limited information, compared to having more than one interview with each woman. Women may have felt more comfortable disclosing, or may have had more time for self-reflection upon a second or third meeting.

Second, the subjectivity of the researcher, along with the influence of the theoretical framework and research paradigm is inherent in qualitative research (Charmaz, 2014). Notwithstanding me being open to the data and striving to create categories that were grounded in the data, my own biases and assumptions were difficult to eliminate completely. Member checking, memo writing, discussions with my supervisor, and attending the grounded theory jamboree helped to build credibility in the results.

Third, the women in the current study were homogenous. Only one woman identified as an ethnic minority (Renee identified as half Jamaican, half Caucasian), while the rest identified as Caucasian. All of the women had a minimum of high school diploma and half of the women had a college diploma or bachelors degree, so the sample was highly educated. However, none of the women indicated high social class. Two women indicated low social class, while the rest indicated middle social class. All of the women except one were within the normal weight range, based on BMI. All of the women identified as female gender and from my knowledge all

of the women were heterosexual. Additionally, from my knowledge, none of the women in the current study were mothers. Some women brought up motherhood and discussed it in differing ways. For example, Brianna discussed the trouble she experiences when thinking about becoming a mother and the physical toll it can take on her body; whereas Lily and Lyla both discussed wanting to be a mother or to have a family irrespective of the impact on their bodies. Lily also indicated that she believes motherhood would profoundly impact a women's embodiment. The demographics of the sample may be a limitation to the study in terms of the applicability of results to ethnic minority populations, younger or older women, women of high social class, women who identity as gender neutral or transgender, women who are homosexual, and perhaps women who are mothers.

Fourth, although data collection finished when themes began to overlap, it could be that further interviews would have brought up additional themes. Thus saturation (although strived for) may not have been reached. Premature closure of the research can result in the possibility of the theory to be incomplete (Hutchinson & Wilson, 2001). I acknowledge that the results are a preliminary conceptual model of maintaining positive embodiment, not a formal theory.

Strengths

First and foremost, I strongly believe that this type of research is pertinent for psychology at this time. Academics, scholars, and clinicians in the field of psychology have focused on the scientific model, emphasizing pathology and disease for far too long. For over a decade, researchers have specifically argued for more of an emphasis on understanding positive embodiment (Cash, 2002, Monaghan, 2001). Yet, the research in this area has been limited, with a few notable exceptions (e.g., Avalos et al., 2005; Choate, 2005; Frisén & Holmqvist, 2010; Hesse-Biber et al., 2010; Iannantuono & Tylka, 2012; Piran & Teall, 2012; Sandoz et al., 2013;

Snapp, et al., 2012; Wood-Barcalow et al., 2010). The current study acknowledged the request for more research on positive embodiment (Cash, 2002). The results are consistent with the current postmodern era in that they emphasize constructivism, meaning making, and multiple, intersecting, and continually evolving conceptualizations of the self (Sinacore et al., 2012).

Second, in feminist research it is important to consider the potential power imbalance between the researcher and the participants. Feminist researchers question the notion of objectivity and believe it is important for the participants to be active contributors to the data collection (Murnen & Seabrook, 2012). The current study was well suited for the interviewees to take an active role in reflecting on, and describing, their embodiment experiences. Being that I am also a female within the emerging adulthood age range, I believe this was a strength of the current study in allowing my participants to feel supported and empowered while giving voice to their experiences. Together, we collaboratively co-created the data.

Third, my active involvement with the data, rather than passively reading (previously transcribed) material, is considered a strength of constructivist grounded theory transcription and coding (Charmaz, 2008). By transcribing and coding the interviews myself, I was able to get close to my data (Charmaz, 2014) and really notice details that I otherwise may not have during the interview itself.

Finally, on a broader level, Seligman (2010) indicated that research looking at the cultural, psychological, and bodily dimensions of selfhood “can illustrate how cultural systems of meaning and practice shape and reshape self experience, and offer insight into the role of culture in personal resiliency” (p. 316). The current study highlights the continual and cyclical nature of meaning making and balancing in women’s experiences of positive embodiment. This has implications for me personally and for my therapeutic interactions as well. I believe that this

research has given me a strong foundation for understanding my own embodiment and varying self-concepts, which is important in feminist research (Russell-Mayhew, 2007). I think that this will help to inform my therapeutic counselling style and the interactions that I have with clients. I also believe it has the potential to inform other counsellors of women's embodiment in this cultural context.

Future Research

Focusing research efforts on embodiment must occur for two reasons. First, a focus on embodiment research will broaden knowledge of factors implicated in positive embodiment, and perhaps will shift the emphasis in many disciplines away from pathology and toward health and well-being. Second, research on embodiment may inform prevention and treatment programs aimed at improving body-specific pathologies (Piran & Mafrici, 2012; Tylka, 2012). As such, there are several avenues for such future research.

First, more in-depth qualitative research needs to be conducted, especially in cultures that tie appearance to self-worth (Tylka, 2012). Examples of topic areas include further research on how women and men experience positive embodiment, how they maintain positive embodiment, and if embodiment is a productive way to promote positive body image (Menzel & Levine, 2011). Research may also focus on how positive embodiment is cultivated and maintained among individuals who face ongoing weight discrimination and teasing (Tylka, 2012). In terms of informing prevention and treatment, research should examine what stage of prevention or intervention would be most beneficial for introducing strategies for increasing positive embodiment and positive body image (Tylka, 2012).

Second, process-orientated research would provide an increased understanding of embodiment and the pathways between actions, cognitions, and emotions (Meier et al., 2012).

Perhaps conducting qualitative research during process-oriented group therapy sessions could provide such understandings. Similar to the current study, feminist researchers should continue to engage research participants in a productive and mutually empowering interaction (Murnen & Seabrook, 2012).

Third, researchers need to address greater social issues (McKinley, 2011). Social identity variables, such as gender, age, ethnicity, sexual orientation, and stage of identity development impact an individual's embodiment (Tylka, 2012). More research is needed on diverse and non-privileged or marginalized groups of women, including women of ethnic minorities, lesbian and bisexual women, women of low social economic status, women with disabilities, and older women (McKinley, 2011; Murnen & Seabrook, 2012). Studying social identity variables could result in a better understanding of the link between micro-level and macro-level influences (Piran & Mafri, 2012).

Finally, more research utilizing a feminist framework is needed. A feminist framework goes beyond sociocultural models and takes into account the gender differences and the lived experiences of women in a patriarchal culture (Murnen & Seabrook, 2012; Piran & Teall, 2012; Rice, 2014). If future research continues to place importance on this topic, it may continue to direct social justice efforts in counselling psychology and in society as a whole.

Conclusion

The goal of this research study was to explore how women in emerging adulthood experience and maintain positive embodiment. This was accomplished by conducting a constructivist grounded theory study, utilizing face-to-face interview data. The preliminary conceptual model presented in this paper provides a paradigm for understanding the interconnection between meaning making and balancing in women's embodiment. Specifically,

the model suggests that young women engaged in continual meaning making, which provided the foundation for balancing. Balancing also fed back into meaning making. Furthermore, the model provides an understanding of core process variables that facilitated meaning making and balancing, including doing work, time, maturity, and learning.

This preliminary conceptual model contributes to existing literature and provides directions for future research. One contribution of this study is the core concept of balancing. Many previous theoretical or conceptual models identify embodiment or body image experiences on a continuum from negative to positive, yet the middle of this continuum is ignored. This study found that balancing somewhere in the middle was how women experienced positivity. Feeling comfortable in one's own skin as a result of balancing was experienced as positive embodiment. Furthermore, each woman's middle of the balance beam was different and occurred as a result of individualized meaning making.

Another contribution of this study is the process variables of doing work, time, maturity, and learning, which are not apparent in other embodiment theories. The fact that women normalized the process of doing work, and described it as practice (or did not recognize it as work at all), speaks to women's experiences in Western culture.

The invitations to explore broader conceptualizations of body image and to focus research efforts on positive, rather than negative, embodiment were undertaken in this research study. The results may inform professionals in the field of psychology about their own embodiment and how to guide prevention and intervention efforts regarding body-specific pathologies. The results of this study may also guide future research on embodiment, whether from a Western sociocultural perspective or otherwise. I believe that continued interest in

embodiment will provide positive results in broadening knowledge and perspectives and treating not only our clients, but also ourselves, with the care that we each deserve.

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Appendix A

Interview Questions

Main Research Question:

How do Women in Western Culture Experience and Maintain Positive Embodiment?

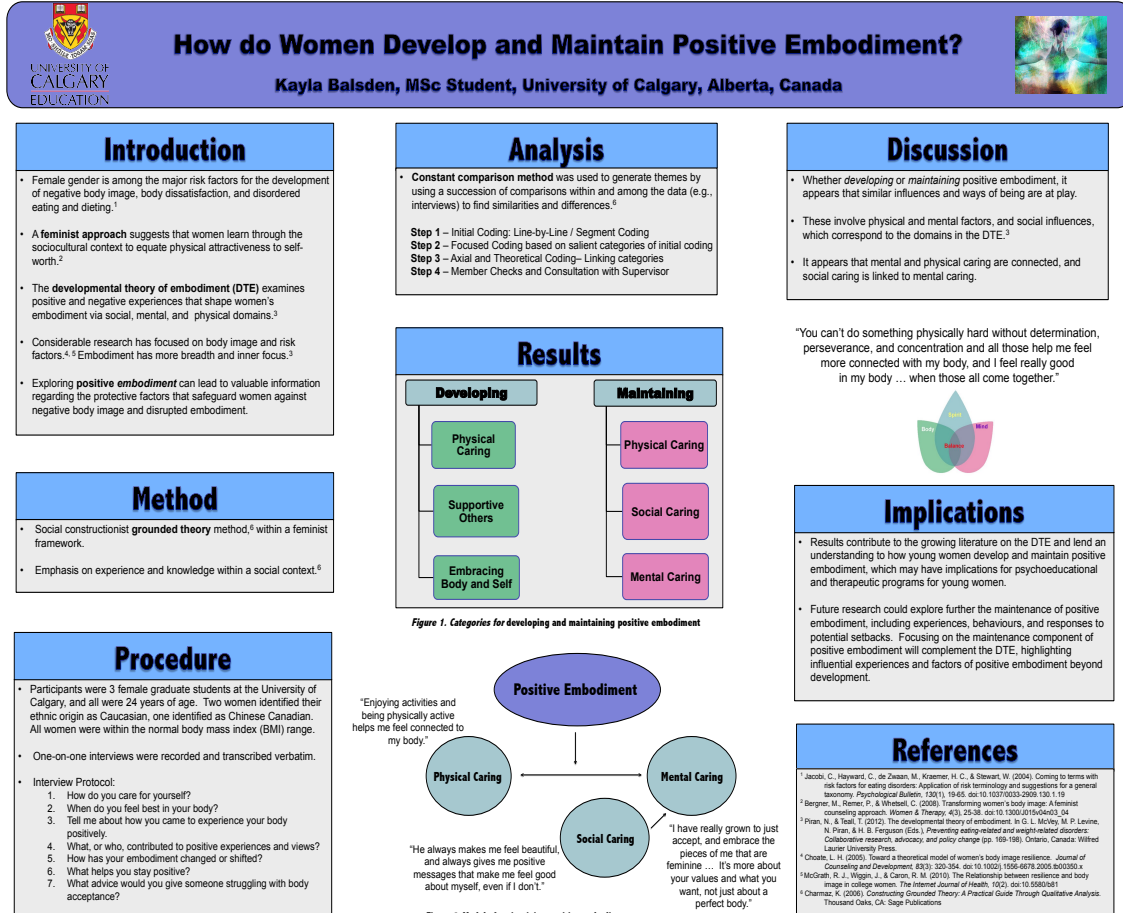
Today I'd like to talk with you about positive embodiment, which is defined as the positive experiences that you have, based on the relationship between your body and the world. For example, caring for yourself and your body, feeling joy and happiness, being attuned with your body, positive body image (or the view you have of your body), and what you think about the functionality of your body. So, *embodiment is about the way you experience yourself in, and through, your body*. And I would like to talk about your positive experiences with that.

1. Given the definition that I provided and your previous knowledge, what does embodiment mean to you?
2. What role or influence does your body play in your life?
 - What does your body provide you?
 - What does it mean to you to live in a woman's body?
3. How do you care for yourself?
4. When do you feel best in your body? What do you associate with that feeling?
 - What is normally happening?
5. Tell me about how you maintain positive embodiment.
 - How do you orient yourself to positive embodiment?
 - What, or who, contributes to this positive view and experience of your body?
 - What do you do to uphold positive embodiment?
6. How do you respond if you feel that your positive embodiment has been challenged in some way?
 - What do you do? Can you give me an example of a time or a situation when you responded to challenges?
7. What else helps you stay positive?
 - Is there any particular experience that stands out for you related to the positive embodiment that you experience?
8. What advice would you give to someone who is struggling with body acceptance, or disrupted embodiment?

(Adapted from Charmaz, 2003; Piran & Teall, 2012; Wood-Barcalow et al., 2010)

Appendix B

Pilot Study Poster



Appendix C

Recruitment Email



Recruitment for Embodiment Research Study

The following information has been sent on behalf of Kayla Balsden for her MSc thesis research. The Faculty of Education has no specific interest in this study. This study is not sponsored by the Faculty of Education and is not related to the researcher's practicum requirement.

Hello,

My name is Kayla Balsden, and I am a master's student in the Faculty of Education and Counselling Psychology at the University of Calgary. I am working on this project for my thesis under the supervision of Dr. Shelly Russell-Mayhew.

My study aims to explore the concept of embodiment, which is defined as the perceptual experience of the body in relation to the world (Allan, 2005), or the way in which the self is experienced in, and through, the body (Piran & Teall, 2012). Specifically, I am interested in women's experiences with positive embodiment, which is defined as positive experiences of embodied involvement, such as self-care, joy, body attunement, positive body image, and physical functionality (Piran, Carter, Thompson, & Pajouhandeh, 2002).

I am seeking participation from women of diverse backgrounds between the ages of 18 to 29 who identify as having positive embodiment, and who have never received a diagnosis of an eating disorder or received treatment for eating disorders or severe eating patterns.

If positive embodiment rings true for you – based on the above definition, I would like to speak with you about how you experience positive embodiment and how you maintain positive embodiment.

If you choose to participate, you will be asked to share your experiences related to positive embodiment in a face-to-face interview with myself, lasting approximately 60-90 minutes of your time. Participation in this study is completely voluntary and you may choose to withdraw at anytime. Should you chose to withdraw before the interview is complete, you will be asked if data up until that point may be retained for analysis, and your decision will be honored.

You are in no way obligated to respond to this email, or contact the researcher for participation.

If you are interested in participating in this study or you have any questions, please **contact Kayla via e-mail** (kabalsde@ucalgary.ca). In addition, if you know anyone who may be eligible and interested in participating, please consider forwarding this email on. However, you have no obligation to do so.

Thank you for your consideration.

Sincerely,

Kayla Balsden, MSc Counselling Psychology Student, University of Calgary, kabalsde@ucalgary.ca

Appendix D

Informed Consent Form



Consent Form

Name of Researcher, Faculty, Department, Telephone & Email:

Kayla Balsden, Werklund School of Education, Educational Psychology, (403) 630-8826, kabalsde@ucalgary.ca

Supervisor:

Shelly Russell-Mayhew, Werklund School of Education, Educational Psychology

Title of Project:

How Do Women in Western Culture Experience and Maintain Positive Embodiment?

Sponsor:

None

This consent form, a copy of which has been given to you, is only part of the process of informed consent. If you want more details about something mentioned here, or information not included here, you should feel free to ask. Please take the time to read this carefully and to understand any accompanying information.

The University of Calgary Conjoint Faculties Research Ethics Board has approved this research study.

Purpose of the Study

To explore how women maintain positive embodiment in a Western sociocultural context.

What Will I Be Asked To Do?

Should you agree to participate, you will be asked to share your experiences with positive embodiment in an individual face-to-face interview. During the interview, we will discuss body image and embodiment, and I will ask you about your experiences that might have helped maintain positive views and experiences in, and through, your body. I will also ask you about any further thoughts and views on this topic and will make sure I understood your experiences well. I will use an audio recorder to record all interviews to ensure accuracy of data analysis. I will conduct the interview at a private room at the University of Calgary, or another quiet and private place of your choosing. I will be emailing you initial results so that you can confirm or adjust the information to ensure accuracy. Your participation in the interview portion of the study will require approximately 60 – 90 minutes of your time, and is completely voluntary - you may withdraw from the study at any time before or during the interview process. You may also decline to answer any of interview questions. If you choose to withdraw, you may verbally indicate this to the researcher. Should you choose to withdraw before the interview is complete, then you will be asked if data up to that point may be retained for data analysis and your decision will be honoured.

What Type of Personal Information Will Be Collected?

Should you agree to participate, you will be asked to provide demographic information including: gender, age, social class, height, weight, and ethnic origin. You will also be asked to indicate whether or not you have ever received treatment for disordered eating or an eating disorder. This information, along with the audio-recorded interview, will be kept separate from your name and will be identified only by a pseudonym of your choice. Only the primary researcher and her supervisor will have access to the audio-recordings and demographic information.

There are several options for you to consider if you decide to take part in this research. You can choose all, some, or none of them. Please review each of these options and choose Yes or No:

I grant permission to be audio taped:	Yes: ____ No: ____
I wish to remain completely anonymous:	Yes: ____ No: ____
I wish to remain anonymous, but you may refer to me by a pseudonym:	Yes: ____ No: ____
The pseudonym I choose for myself is: _____	
You may quote me and use my pseudonym:	Yes: ____ No: ____
I grant permission for my anonymous interview transcript to be brought to a workshop that will aide the researcher in analyzing the data and creating a theory.	
This means that other researchers within the workshop may have access to the data.	Yes: ____ No: ____

Are there Risks or Benefits if I Participate?

There are no foreseeable risks, harms, or inconveniences to you as the participant. The interview questions may ask about personal experiences related to your maintenance of embodiment. The focus will be on positive aspects of embodiment, however, negative aspects or disrupted embodiment may be discussed as well, with a focus on how you respond to challenges. If the interview topics cause negative thoughts or emotional problems, you are encouraged to let the researcher know, and a counselling appointment may be set up through the University of Calgary Wellness Centre.

*The University of Calgary Counselling Center is located in the Wellness Centre
(Room 370, MacEwan Student Centre)
Open Monday to Friday from 9:00-4:30
Ph: 403 210-9355 (210-WELL)*

*The Calgary Counselling Centre is located downtown Calgary
#200, 940 6th Ave, SW, Calgary
Ph: 403 265-4980*

You may find it interesting or exciting to talk about your experiences in an area where you have developed resilience to cultural pressures by maintaining positive embodiment. Your participation in this study may also help to identify practical strategies that women could use to maintain a positive view and experience in and through their bodies, that professionals could use to create an environment that would foster resilience in girls and women. You will receive \$20.00 cash upon arriving at the interview site.

What Happens to the Information I Provide?

Participation is completely voluntary, anonymous and confidential. You are free to discontinue participation at any time during the study. If you choose to withdraw from the study, you will be asked if the information provided up to that point can be kept for analysis, and your decision will be honoured. The researcher will email

or mail initial results for adjustments or corrections, and if you would like to respond you will be asked to do so within two weeks of receiving the email or mail. Suggestions for adjustments will be incorporated into the results.

No one except the researcher and her supervisor will be allowed to hear any of the answers on the interview tape. There are no names on the questionnaire. Group information will be summarized for any presentation or publication of results. Participants will consent to the use of direct quotes with pseudonym identifiers. The demographic questionnaires are kept in a locked cabinet only accessible by the researcher and her supervisor. The anonymous data will be stored for five years on a computer disk, at which time, it will be permanently erased. The data you provide will be used towards completion of Master's thesis.

Signatures

Your signature on this form indicates that 1) you understand to your satisfaction the information provided to you about your participation in this research project, and 2) you agree to participate in the research project.

In no way does this waive your legal rights nor release the investigators, sponsors, or involved institutions from their legal and professional responsibilities. You are free to withdraw from this research project at any time. You should feel free to ask for clarification or new information throughout your participation.

Participant's Name: (please print) _____

Participant's Signature: _____ Date: _____

Researcher's Name: (please print) _____

Researcher's Signature: _____ Date: _____

Questions/Concerns

If you have any further questions or want clarification regarding this research and/or your participation, please contact:

*Ms. Kayla Balsden
Werklund School of Education, Department of Educational Psychology
(403) 630-8826, kbalsde@ucalgary.ca
and Dr. Shelly Russell-Mayhew, Werklund School of Education, Department of Educational Psychology
(403) 220-8375, mkrussel@ucalgary.ca*

If you have any concerns about the way you have been treated as a participant, please contact an Ethic Resource Officer, Research Services Office, University of Calgary at (403) 210-9863; email cfreb@ucalgary.ca. A copy of this consent form has been given to you to keep for your records and reference. The investigator has kept a copy of the consent form.

Appendix E

Demographic Information Form

Pseudonym: _____

Gender: _____

Age: _____

Height (in feet and inches): _____

Weight (in pounds): _____

Highest Level of Education Attained: _____

Social Class (please indicate with checkmark in the box):

☐

Low class: Employment in a lower-paying job; lacking financial stability

☐

Middle class: Employment in an average paying job; some financial stability

☐

High class: Wealthy via employment in a high paying job or born into wealth; highest financial stability.

Ethnic Origin (please indicate 1-2 main ethnic origins): _____

Ethnic origin implies one or more of:

- shared origins or social background;
- shared culture and traditions that are distinctive, maintained between generations, and lead to a sense of identity and group;

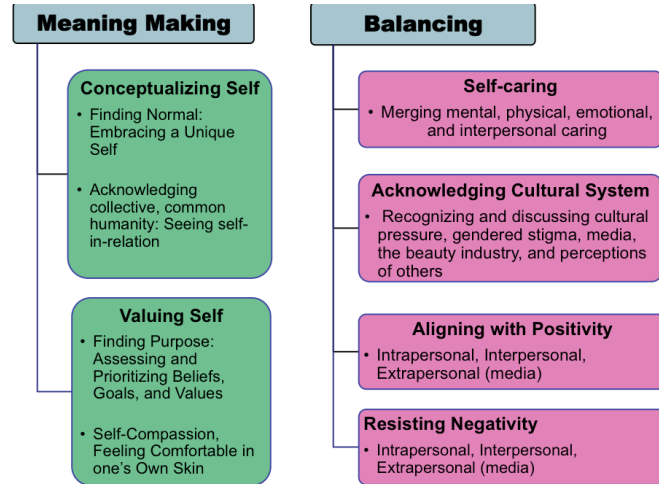
Have you ever been in treatment for an eating disorder or disordered eating?

Yes _____ No _____

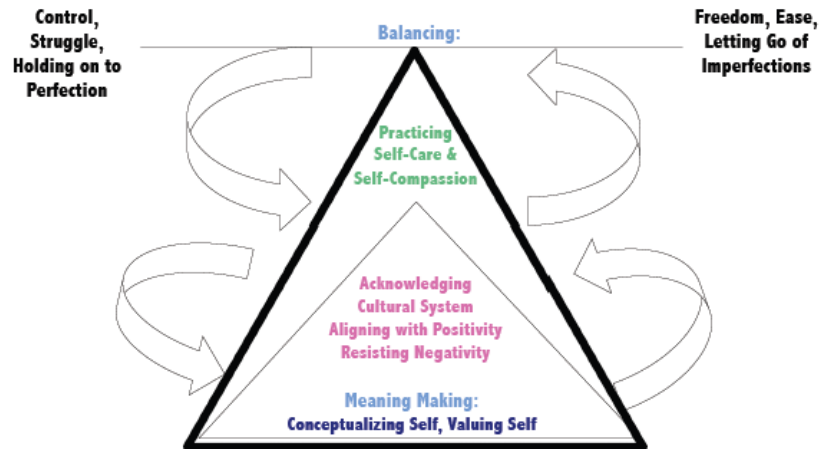
Appendix F

Email Sent to Participants: Preliminary Results

Two Conceptual Core Categories:



Preliminary Model of Maintaining Positive Embodiment:



Women described their embodied experiences in ways that reflected continuous meaning making and balancing. Both of these core categories were fluid, relying on one another to inform attitudes and behaviour. Both meaning making and balancing involved processes of time, maturity, learning, and doing work. For example, women spoke of learning about themselves, and learning how to balance over time, and with maturity. Doing work occurred for meaning making and balancing, which eventually became *'practice'* for some women, in that it became more second-nature and evidently did not require as much effort. In this way, doing work was normalized. In contrast to when they were younger, women identified having a better grasp on who they were, and what they valued about themselves. They also discussed being better able to balance, and therefore embody the notion of feeling comfortable in one's own skin, which was an important theme identified in the experience of positive embodiment.

Appendix G

Sample Memo

Balancing (August 3)

- Balancing is portrayed by many of the women as: mindfully engaging in thinking and behaving that reflects balance and moderation (partly through learning / knowing what is *good for her self*). Examples of this include engaging (or indulging) in things in moderation (not over-indulging).
- There is a component of inner reflection and knowledge, as well as choice in actions: Women discussed knowing what is good for themselves (through learning, socialization, time, maturity), and they highlighted their own agency in making decisions about how to care for themselves. Thus, balancing involves self-caring.
- It is also about taking a balanced approach to emotions: not suppressing emotions, but not over-identifying with them either. For example, allowing oneself to have *bad days* (where she thinks she is overweight, or feels unsocial, lethargic, irritated), and acknowledging that “tomorrow is a new day” (Mandy)
- So balancing is mental, physical, and emotional. Perhaps there is an element of authenticity – defined as being in touch with the body and emotions, and being able to act on them (Maté, 2014, May).
- Brené Brown (2010) identified authenticity as a “daily practice of letting go of who we think we’re supposed to be, and embracing who we are” (p. 50). This coincides with Renee’s conceptualization of daily practice as a way of balancing. Renee’s definition of practicing balance is about working at it on a constant basis, leading it to become habitual or “second nature”, and so that less effort had to be put in. Interestingly, every woman alluded to authenticity as Brown (2010) defined it, when they gave their advice to someone struggling with body or self acceptance; they spoke about: “loving yourself” (Jennifer), “care for yourself and be with yourself” (Ann), “try something new” (Lola), “don’t try and be something that you are not, try and be you” (Lyla), “encourage people to think about things that they love about themselves” (Mandy), “be true to you, don’t let other people tell you who you should be” (Pamela), “being real and being truthful” (Brianna), “look deep within yourself, and find those things that bring you joy, and that bring you happiness, and that feed positivity and bread positivity” (Renee).
- Brené Brown (2010) also defined authenticity more specifically as: (a) setting boundaries, and allowing ourselves to be imperfect; (b) exercising compassion and knowing that we all have strengths and struggles; (c) and nurturing connection and belonging with others. Jennifer spoke to many of these points when she said: “I find that like embodiment too, its allowing people to see you, too ... You have to be comfortable around the people that you love ...you have to feel comfortable in your own skin, to allow them to feel comfortable with your skin”. Many other women spoke about nurturing connections with others as well (e.g., Mandy, Pamela).

- Balancing also contains elements of interpersonal and cultural influences. For example, seeking the companionship of positive others, seeking and receiving compliments, watching positive media sources more so than sources that make one feel negative, and acknowledging cultural pressures, but also being critical of them. As much as one might seek to continually be positive, it just isn't realistic. Balancing somewhere in the middle (it might be different places on the continuum for different people), is where women indicated feeling happy, strong, connected, comfortable, and/or empowered. This is the connection to meaning making.
- There is acknowledgment of balancing explicitly, for example through the phrase "everything in moderation" (Jennifer), or indulging, but not overindulging (e.g., Mandy). It is also implicit, for example, through statements such as "...not completely deprive yourself of something that you enjoy" (Renee), and "taking Me-time" (Lyla) every now and again.

Brown, B. (2010). *The gifts of imperfection: Let go of who you think you're supposed to be and embrace who you are*: Your guide to wholehearted living. Minnesota, US: Hazelden

Maté, G. (2014, May). *Illness and health in a toxic society*. Keynote address presented at the Canadian Counselling and Psychotherapy Association Conference, Victoria, BC.

Appendix H

Advice to Others

The women were asked about what advice they might give to someone struggling with body acceptance or disrupted embodiment. The following quotes showcase advice centered on change at the individual level, albeit sometimes alluding to the larger sociocultural context.

Jennifer: [My advice would] probably [be] the same thing that I tell myself, ‘Get out of the mirror’ and ... ‘How do you feel? How do you feel right now? What can you do to change it? What makes you feel good? Is it people? Is it doing something?’ And focus on that, and not on what you look like, that’s the worst thing. You have to love yourself, 100%. If you don’t love yourself, how do you expect anybody else to accept you? So you have to be, not in love with yourself, but to *have* love for yourself, and you have to be okay with yourself, just being like okay and balanced.

Ann: [My advice is] I think that you really ... taking time to take care for yourself and be with yourself. And I don’t think that enough people get intimate with themselves ... it is okay to just do what you want to do because you want to do it and there is no other reason ... because at the end of the day, [you are] all you have got. [So be] ... selfish ... in a way that actually serves yourself.

Lola: [My advice is to] try something new. It doesn’t have to be physical, [just] something that makes you feel happy, or something that you like. Because if it is something that you like, you are going to keep doing it. And if you keep doing it, that also makes you happy, or gives you a sense of accomplishment. [Also] I guess it would be different for everybody ... but I think it is good for most people to be accountable to something, [such as] signing up for a class.

Lyla: [My advice is that] no one can make you feel, or no one can control how you feel about yourself. Like people might say or do things, or your environment/situation, your home life might not be good, whatever it might be ... and it is a hard thing to understand that you can control that, but try and take control of who you are and, and really be who you are. Don’t try and be someone that you are not, or someone that is around you, like a friend or something you see in a magazine. Don’t try and be that, try and be you. And figure out who you are, and look at the things that make you happy, and the things that make you feel good. Cause those are the important things, because that will shape who you are ... Focus on yourself and build on those things too.

Mandy: [My advice is to] un-follow all of those people on Facebook that make you feel bad about yourself. That is my number one, because it is just too easy to get caught in that thought-track, you know you put on the jeans, they are a little tight and so you open up your computer and what do you see and then ruminate on for an hour? Be mindful of what you are taking in and what you are consuming, in a message. Is that the message you want for yourself? I like to encourage [people] to think about things that they love about themselves. And you know, that is not always necessarily something physical.

Pamela: I think it is hard to give one piece of advice. But I think the one is, as corny as it sounds, be true to you, don’t let other people tell you who you should be. And so, and what your gut really is, not necessarily what you think you should be, or what you what is easy to be, be what you want to be. And don’t let anything stop you ... If something goes wrong, don’t beat yourself up about it. Just, you know,

try again. And if you have to try again 50 times, that's okay. I think there is definitely lots of times where I have looked in the mirror and been upset with something about myself physically, or if I failed at a test, or if my essay didn't get the grade I thought I deserved, or if I didn't get recognition of something at work. You know? All those moments suck. But they don't mean I don't try again. You know? So always, just keep going... [There is a quote] I think resonates with me on a lot of different levels. And that is 'be the change that you want to see in the world' because I think that it is like, well I want to be healthy because I think it is more important for society to start working towards that. I want to be a positive influence on others, because I think that is important, and I want to you know love anybody no matter what their belief system, what their background, what they look like, what they you know, where they were born. Those things shouldn't matter. And so because I don't want them to matter to others, well I shouldn't let them matter to me.

Brianna: [Giving advice is] tough because sometimes it doesn't matter what you tell to people. It is, in the end they have to accept themselves. My strategy with [others] is to kind of show... you know, being real and being truthful, [as well as complimenting] strengths ... refocusing their attention, like how much you weigh, or how many pounds, or how much you ate, or that your pants are a little bit tight ... those aren't the important things. And I think just continuing to tell somebody maybe, like enough times, until they finally believe it themselves. Like never giving up.

Renee: My advice would be essentially just look deep within yourself, and find those things that bring you joy, and that bring you happiness, and that feed positivity and breed positivity. Whatever those things may be. And do them, and practice them. And eventually I think that, even though maybe not at the beginning, I think that eventually it will come through. I think that someone would find themselves more happy with themselves, being more positive with themselves. I mean it is kind of like that saying 'misery loves company', you know, if you continue to be miserable you are only feeding the misery. If you choose to be positive, and do positive things, and things that you enjoy and make you happy, it only feeds more of those [positive] feelings. So if you can find those things that, that bring you those positive feelings, and that positive energy within yourself, and those positive thoughts, and just practice them as often as you can.

Brittany: I think to start is just being aware. Like take five minutes out of every day to just think about, or write down if you want, what was great in my day and what would I change. And the things you would change shouldn't be 'there was traffic', that is just not realistic, but it should be 'how I reacted when someone gave me constructive criticism'... And then deciding, like if you were to create you know a world, or your own life, what would you have in it? Make that happen. If that is what is going to make you content, and happy at the end of the day, then fit it in. And be nice to yourself, because it is hard to be happy when someone is hard on you all the time.

Lily: I don't think you can isolate it down to one thing. I think if you are lucky to have been raised in a house like I was where you are raised to believe in your own self-worth, you have a huge advantage. But not all of us had that, or were able to maintain it into adulthood necessarily. I think positive embodiment or positive body worth just like happiness is a choice. I think as human beings, and as adult human beings, we wake up everyday and we have a choice, whether or not we want to be happy and fulfilled in our lives. They are not easy choices. Sometimes they are very big life-altering scary choices. But every individual, barring some major world issues, has choice to pursue happiness. So within that, I think someone who is able to positively embody their spirit and their physical self and their

psychological self knows to pursue that. So to someone struggling with body image, I would say that the most important thing to do is to start putting yourself first, and to do things that are good for *you* ... If you are good to yourself, you will change your body talk, you will change your self talk, you will change the energy that you bring to the world, and when that changes you'll change who comes into your world too, and who stays.

