

Assessment of Negative Self-Image and Fear of Negative Evaluation Among Adolescents and Young Adults

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Concern with real or imagined defect in physical appearance can become a major preoccupation during adolescence and young adult years. This is because, changes of puberty, rapid physical growth, and resulting sexual maturation that characterizes this age can trigger feelings of self-consciousness and awkwardness about body-image perceptions. In addition, the “perfect” body-image as dictated in the social culture could become a measure of self-worth, and this is capable of triggering negative self-image and social anxiety among adolescents. This study seeks to assess the incidence of negative self-image (preoccupation with real or imagined defect in physical appearance) and social anxiety characterized by fear of negative evaluation, among adolescents and young adults. Samples of 329 participants in the age range of 16-25 were drawn from the first and second years students of Federal University Wukari and University of Lagos, Nigeria. Participants completed a socio-demographic data sheet as well as NSII (Negative Self-Image Inventory) and revalidated version of FNE (Fear of Negative Evaluation). Findings revealed that there is a correlation between negative self-image and fear of negative evaluation; males manifested higher symptoms of negative self-image than females; young adults aged 21-25 presented higher negative self-image than those aged 16-20, adolescents and young adults from Lagos metropolis experience higher manifestation of fear of negative evaluation than those from Wukari axis. This study therefore adds to knowledge in this area.

Keywords: assessment, negative self-image, fear of negative evaluation, adolescents

Introduction

Observations show that the ideal female constructed by mass media in contemporary times is young, tall, thin, and white, with at least moderately large breasts. This iconic image is framed by themes that are social norms and elements of a “thinness schema”, such as (1) Women are naturally invested in their beauty assets; and (2) The slender beauty ideal is not an enjoyable fantasy based on digital technology but rather is normal, healthy, and achievable through personal dedication. The male body ideal is more variable. Also tall and lean, it typically has one or two added features: well groomed and expensively, fashionably dressed; and/or exceptional (“chiseled” or “ripped”) muscularity. Since the 1980s, there has been a trend toward magazines and movies featuring a muscular, action-ready male body in a state of objectified undress. This development has been accompanied by increased media attention to exercise and weightlifting as paths to sexual (not romantic) prowess, and by glorification of “bulked up” dominating, hypermasculine action figures in the form of heavily

marketed toys for younger boys and video game characters for older males (Cash, 2008). Thus the social pressure to achieve the “ideal” body image could trigger negative self-image and fear of negative evaluation among many. Generally, a person with negative self-image views self as socially inept, unappealing, or inferior to others and this could result in emotional and interpersonal difficulties. On the other hand, fear of negative evaluation could trigger avoidance-seeking behaviour and social anxiety thus intensifies poor self-esteem (Cash, 2008; DePreester & Knockaert, 2005; Veale & Neziroglu, 2010).

The theory that adolescence and sometimes early adulthood is a period of disturbance of the child’s self-image is among the most widely accepted idea in behavioural sciences. The age was originally described as the age of “storm and stress” (Hall, 1904). This age was also perceived by Erikson (1968) as a time of identity crisis, in which the child grapples for a stable sense of self. To the psychoanalytic perspective, the burgeoning sexual desires of puberty spark a resurgence of oedipal conflict (Bios, 1962; Freud, 1958). Also, the physiological changes of puberty and early adulthood and the increase in sexual desire challenge the child’s view of the self in fundamental way, with radical interferences on the self-image (Simons & Rosenberg, 1973; Gorgan, 2008). There is also an increased value placed on peer acceptance and approval, and a heightened attention to external influences and social messages about cultural norms. Such changes of puberty, rapid physical growth and resulting sexual maturation that characterizes adolescent and young adult age can trigger feelings of self-consciousness and awkwardness about self-image perceptions.

Negative self-image is thus defined in this study as preoccupation with real or imagined defect in physical appearance, with resultant emotional and social difficulties. Many are unaware that negative self-image could trigger a psychopathological condition known as BDD (Body Dysmorphic Disorder). The Diagnostic and Statistical Manual of Mental Disorders defined BDD as a preoccupation with an imagined or minor defect in appearance which causes clinically significant distress or impairment in social, occupational, or other important areas of functioning (APA (American Psychiatric Association), 2000). The disorder generally is diagnosed in those who are extremely critical of their physique or self-image even though there may be no noticeable disfigurement or defect, or a minor defect which is not recognized by most people (APA, 2000). Some people wish that they could change or improve some aspect of their physical appearance; but people suffering from BDD are generally of normal or even highly attractive appearance, believe that they are so unspeakably hideous that they are unable to interact with others or function normally for fear of ridicule and humiliation about their appearance. They tend to be very secretive and reluctant to seek help because they fear that others would think them vain or because they feel too embarrassed. It has also been suggested that fewer men seek help for the disorder than women (Philips, 1996).

Ironically, BDD is often misunderstood as vanity-driven obsession, whereas it is quite the opposite, because people with BDD believe themselves to be irrevocably ugly or defective. BDD combines obsessive and compulsive aspects, linking it, among psychologists, to the obsessive-compulsive spectrum disorders. People with BDD may compulsively look at themselves in the mirror or avoid mirrors, typically think about their appearance for at least one hour a day (and usually more), and in severe cases may drop all social contact and responsibilities as they become a recluse (Cash, 2011). Chronically, low self-esteem is characteristic of those with BDD, because the assessment of one’s value is so closely linked with the perception of the appearance. BDD is diagnosed equally in men and women, and causes chronic social anxiety for its sufferers (Philips, 1996). According to the DSM IV, to be diagnosed with BDD, a person must fulfill the following criteria: preoccupation with an imagined defect in appearance. If a slight physical anomaly is present, the person’s

concern is markedly excessive. The preoccupation causes clinically significant distress or impairment in social, occupational, or other important areas of functioning. The preoccupation is not better accounted for by another mental disorder (e.g., dissatisfaction with body shape and size in Anorexia Nervosa) (APA, 2000; Cash, 2008; DePreester & Knockaert, 2005; Veale & Neziroglu, 2010).

Common symptoms of body dysmorphic disorder include: Obsessive thoughts about perceived appearance defect, obsessive and compulsive behaviors related to perceived appearance defect, delusional thoughts and beliefs related to perceived appearance defect, social and family withdrawal, social phobia, loneliness and self-imposed social isolation, suicidal ideation, anxiety and chronic low self-esteem. Others include: feeling self-conscious in social environments (thinking that others notice and mock their perceived defect), strong feelings of shame, decreased academic performance (problems maintaining grades, problems with school/college attendance), problems initiating and maintaining relationships (both intimate relationships and friendships), repetitive behaviour such as constantly applying make-up and often applying it quite heavily, seeing slightly varying image of self upon each instance of observation in mirror/reflective surface (Philips, 2005).

Some compulsive symptoms of negative self-image identified by Philip (2005) include: compulsive mirror checking behaviour, an inability to look at one's own reflection or photographs of oneself, attempting to camouflage imagined defect: for example, using cosmetic camouflage, wearing baggy clothing, maintaining specific body posture or wearing hats, excessive grooming behaviours-skin-picking, combing hair, plucking eyebrows, shaving, compulsive skin-touching, especially to measure or feel the perceived defect, becoming hostile toward people for no known reason, especially those of the opposite sex, reassurance-seeking from loved ones, excessive dieting and exercise.

Review of Literature

Given the overwhelming prevalence of thin and lean female images and strong and lean male images common to all westernized societies, body image concerns have become widespread among adolescents and young adults. Research showed that: 50%-88% of adolescent girls feel negatively about their body shape or size (Field, Cheung, Wolf, Herzog, Goatmaker, & Colditz, 1999); Only 33% of girls say they are at the "right weight for their body", while 58% want to lose weight. Just 9% want to gain weight (Rand, Resnick, & Siedman, 1997); Females are much more likely than males to think their current size is too large (66% vs. 21%) (Rand et al., 1997); Over one third of males think their current size is too small, while only 10% of women consider their size too small (Rand et al., 1997). Rand et al. (1997) further reported that 30% of older adolescents surveyed consider their current size acceptable to them, 85% of females and 95% of males considered their current size socially acceptable for others. A report by the American Association of University Women indicated that for girls, "the way I look" is the most important indicator of self-worth, while for boys, self-worth is based on abilities, rather than looks. Going through puberty can amplify body image concerns. Puberty for boys brings characteristics typically admired by society—height, speed, broadness, and strength. Puberty for girls brings with it characteristics often perceived as less laudable, as girls generally get rounder and have increased body fat. These changes can serve to further enhance dissatisfaction among girls (O'Dea JA, Abraham, 1999). Going through puberty later or earlier than peers can have an impact on body image as well as psychological health. Generally, early development for girls and late development for boys present the greatest challenges to healthy body image (Siegel, Yancey, Aneshensel, & Schuler, 1999).

Radovanovic and Glavak (2003) in their study determined which aspects of self-concept and social perception could predict fear of negative evaluation as an aspect of social anxiety among participants. They studied 225 high school students (105 males and 120 females) from Zagreb. Fear of negative evaluation scale and Rosenberg self-esteem scale were administered. Participants evaluated themselves and their classmates regarding five aspects of adolescent self-concept: school achievement, peer acceptance, self-competence, intelligence, and general physical appearance. Results showed that adolescents' self-evaluations of their intelligence were the highest, followed by self-evaluations of peer acceptance. They expected the highest peer evaluations of intelligence, and the lowest peer evaluations of their physical appearance. Peer evaluations of physical appearance were the lowest. There was a tendency of overestimation—adolescents' self-evaluations of peer acceptance, intelligence, and physical appearance were higher than peer evaluations. Stepwise regression analysis was conducted which resulted in two significant predictors (result on Rosenberg self-esteem scale and peer evaluation of adolescent's self-competence) and two suppressor variables (self-evaluations of peer acceptance and intelligence). These variables accounted for 22% of the total variance of criteria variable (result on fear of negative evaluation scale). The result on fear of negative evaluation scale will be higher with a lower result on Rosenberg self-esteem scale and lower peer evaluation of adolescent's self-competence.

Gilbert and Meyer (2005) replicated the cross-sectional relationship between restrictive eating attitudes and a fear of being negatively evaluated by others and tested whether negative evaluation fears longitudinally predict changes in eating attitudes over a seven-month period. During the first week of an academic year, and again during Week 33, 143 female students completed FNE (the Fear of Negative Evaluation Scale), RSE (the Rosenberg Self-Esteem Scale), HADS (the Hospital Anxiety and Depression Scale), and EDI (the three eating scales of the Eating Disorders Inventory). The exclusive link between heightened negative evaluation fears and restrictive eating attitudes was replicated cross-sectionally. However, the longitudinal model predicting the development of restriction was nonsignificant. In contrast, alongside depression, negative evaluation fears predicted an increase in bulimic attitudes, whereas self-esteem predicted an increase in body dissatisfaction. The findings support a model whereby individuals with heightened fears of negative evaluation may use restrictive pathology to raise their status among peers. If this mechanism of dealing with negative evaluation fears is not sufficient in the long term, individuals may develop bulimic symptoms to deal with their negative evaluation fears.

Thus in a bid to add to existing knowledge in this area, the research presents the following objectives, questions, and hypotheses.

Objectives of the Study

This study aims to:

- (1) determine the correlation between negative self-image and fear of negative evaluation;
- (2) determine the influence of gender on manifestations of negative self-image and fear of negative evaluation among adolescents and young adults;
- (3) determine the influence of age on manifestations of negative self-image and fear of negative evaluation among adolescents and young adults;
- (4) identify the role of area of geographical location on the manifestations of negative self-image and fear of negative evaluation among adolescents and young adults.

Research Questions

The study raises the following questions:

- (1) Will negative self-image correlate significantly with fear of negative evaluation?
- (2) Will gender influence manifestation of negative self-image and fear of negative evaluation among adolescents and young adults?
- (3) Will age influence manifestations of negative self-image and fear of negative evaluation among adolescents and young adults?
- (4) Will geographic location influence manifestations of negative self-image and fear of negative evaluation among adolescents and young adults?

Research Hypotheses

- (1) There will be significant correlation between negative self-image and fear of negative evaluation.
- (2) The level of negative self-image and fear of negative evaluation will be significantly higher in females than in males.
- (3) Older participants (21-25 years) will present significantly higher level of negative self-image and fear of negative evaluation than the younger ones (16-20 years).
- (4) Adolescents and young adults from Wukari district will have significantly lower level of negative self-image and fear of negative evaluation than those from Lagos metropolis.

Method

Study Location

Participants for this study were drawn from first and second year students of Federal University Wukari, Taraba State Nigeria and University of Lagos, Lagos, Nigeria. Taraba state is located in the North East Nigeria and predominantly of Jukun tribe. It is a semi-rural community made up of Christians, Muslims, and Traditionalist. It is less cosmopolitan to Lagos state. Lagos state on the other hand is located at South-West Nigeria. It is a cosmopolitan community made up of diverse tribes in Nigeria. It is regarded as the economic hub of Nigeria.

Participants

Participants were the first and second year students drawn from Federal University Wukari and University of Lagos. They comprised 329 participants in the age range of 16-25 years. In terms of gender, 170 (51.67%) were males while 159 (48.33%) were females. In terms of age, 169 (51.37%) were between 16-20 years while 160 (48.63%) were aged 21-25. In terms of study location, 174 (52.89%) were drawn from Lagos metropolis, while 155 (47.11%) were drawn from Wukari axis.

Instruments

Two psychological instruments were employed, namely: Negative Self-Image Inventory (NSII) and Fear of Negative Evaluation (FNE).

NSII is a 40-item instrument developed by Agbu (2011) to measure symptoms and manifestations of negative self-image. These include dissatisfaction with real or imagined defects in physical appearance as well as the associated behavioural, emotional, social, and interpersonal factors that sustain a negative perception of self. It has a norm score of 90.58, split-half reliability of 0.78 and test-retest reliability coefficient of 0.82.

FNE is a 30-item scale with a true-false response format developed by Watson and Friend (1969) to measure fear of negative evaluation due to general anxiety, fear of losing social approval and ineffective social behaviour. It has a KR-20 (Kuder-Richardson 20) reliability coefficient 0.94, and one month interval test-retest coefficient = 0.78.

Data Analysis

Data were analyzed using mean, standard deviation and *t*-test statistics.

Result

In order to determine the concurrent validity of the measures: FNE and NSII, Person product moment correlation statistics was used to correlate the scores. The result is presented in Table 1.

Table 1

Correlation Matrix of the Two Measures (NSII & FNE)

Measures	FNE	NSII
FNE		0.42*
NSII	0.42*	

Notes: *Significance; *df* = 328; Probability level = 0.05; Obtained *r* = 0.424, Critical *r* = 0.196; FNE = Fear of Negative Evaluation; NSII = Negative Self-Image Inventory.

Result in Table 1 showed that FNE and NSII are statistically significant. The finding confirms hypothesis 1 that states that: There will be significant correlation between NSII and FNE.

In order to ascertain the influence of gender on the manifestations of negative self-image and fear of negative evaluation among adolescents and young adults, the mean, standard deviation and *t*-test were computed and presented in Table 2.

We set out to confirm the second hypotheses that state that the level of negative self-image and fear of negative evaluation will be significantly higher in females than in males. Result in Table 2 shows that females obtained higher mean scores in FNE than males but the observed difference is not statistically significant. In the area of negative self-image, it was however observed that males obtained higher mean score than females while the *t*-test was significant. Therefore, hypothesis 2 is rejected.

In order to identify the influence of age on manifestations of negative self-image and fear of negative evaluation among adolescents and young adults, the mean, *SD* and *t*-test of their score were computed and presented in Table 3.

Table 2

Mean, SD, and T-test Score of Male and Female Respondents on NSII and FNE

	Gender	<i>N</i>	Mean	<i>SD</i>	<i>t</i>
FNE	Male	170	22.17	2.67	-0.23
	Female	159	22.40	3.10	
NSII	Male	170	128.09	33.29	3.57*
	Female	159	124.52	33.54	

Notes: *Significance; Probability level: 0.05; *df* = 328; Critical *t* = 1.66.

Table 3

Mean, SD and T-test Score of Influence of Age on Manifestations of FNE and NSII Among Participants

	Age	N	Mean	SD	t
FNE	16-20	169	22.0578	2.81547	-0.48
	21-25	160	22.5409	2.95267	
NSII	16-20	169	126.9017	33.46339	1.86*
	21-25	160	125.0377	31.43587	

Notes: * Significance; Probability level: 0.05; $df = 328$; Critical $t = 1.66$.

Result in Table 3 showed that participants aged 21-25 manifested slightly higher levels of FNE than those aged 16-20. However, the t -test statistics showed that the observed differences are not statistically significant. It was also observed that participants aged 16-20 obtained higher mean score of NSII than those in the age range of 21-25. The t -test result presented at the last column of Table 3 showed that the observed differences are statistically significant (at probability level: 0.05; $df = 327$; Critical $t = 1.66$). Therefore, hypothesis 3 that states that older participants (21-25 years) will present significantly higher level of negative self-image and fear of negative evaluation than the younger ones (16-20 years) is rejected.

In order to ascertain the influence of geographical location on the manifestations of negative self-image and fear of negative evaluation among participants, their mean, SD and t -test scores are computed and presented in Table 4.

Table 4

Mean, SD and T-test Score of Influence of Geographical Location on Manifestations of FNE and NSII Among Participants

	Location	N	Mean	SD	t
FNE	Lagos	174	23.16	2.79	6.19*
	Wukari	155	21.30	2.66	
NSII	Lagos	174	125.79	31.74	0.13
	Wukari	155	125.32	34.45	

Notes: * Significance; Probability level: 0.05; $df = 328$; Critical $t = 1.66$.

Result in Table 4 showed that adolescents and young adults from Lagos state manifested higher level of FNE than those from Wukari axis. The t -test score was also significant. It was also observed that participants from Lagos manifested slightly higher level of NSII than those drawn from Wukari but the t -test score was not significant. This is an indication that the observed differences are not statistically significant. Therefore, hypothesis 4 that states that adolescents and young adults from Wukari area will have significantly lower level of negative self-image and fear of negative evaluation than those from Lagos metropolis is accepted.

Discussion

This study seeks to assess the symptoms and manifestations of negative self-image and fear of negative evaluation among adolescents and young adults. It hypothesized that there will be significant correlation between negative self-image and fear of negative evaluation; that the level of negative self-image and fear of negative evaluation will be significantly higher in adolescent females than in males; that older participants (21-25 years) will present significantly higher level of negative self-image and fear of negative evaluation than the younger ones (16-20 years); that adolescents and young adults from Wukari area will have significantly

lower level of negative self-image and fear of negative evaluation than those from Lagos metropolis. This section presents discussions on the findings.

Result presented in Table 1 showed negative self-image correlated significantly with fear of negative evaluation with significant score of 0.42, critical $r = 0.196$ at 0.05 significant level. This is an indication that dissatisfactions with real or imagined defect in physical appearance could trigger social anxiety as well discomfort associated negative evaluations by peers and significant others. In their findings, Phillips (1991), Hollander, Neville, and Frenkel (1992), and Phillips, Dwight, and McElroy (1998) assert that individuals with negative self-image frequently report high levels of social anxiety and shame because of a fear of negative evaluation of their appearance by others. Cash (2008) added that people with BDD often exhibit some fear of negative evaluation or have a phobic avoidance of certain situations or activities that are anxiety—provoking. Research has also established that fear of negative evaluation drives social processing biases and social anxiety, and similar mechanisms have been hypothesized to be at play in shaping coping strategies in disfiguring conditions (Cash, 2008). Subtle safety-seeking behaviors, such as presenting the body so as to hide the affected area, and contextual avoidance, such as never going swimming or avoiding certain attire, were seen to be related to the cognitive factors described above. Thus, many skin conditions typically vary in their intensity over time, as does the occurrence of triggers such as social events, and for these reasons adjustment is “ongoing” and may also be influenced by everyday hassles (Cash, 2008).

In Table 2, it was observed that males manifested higher manifestations of negative self-image than females. It is important to note that fixations with appearance naturally thought to be the burden of the feminine gender appear to be gradually tilting towards the males. Result from this finding shows clearly that body image is important to young men as well as young women. This could be fuelled the dictates of the mass media as well as evaluations from significant others. In contemporary times, the male body appears to be tall and lean, typically has one or two added features: well groomed and expensively, fashionably dressed; and/or exceptional (“chiseled” or “ripped”) muscularity. In *The Adonis Complex*, Harrison Pope reports that on average, boys of all ages crave to be more muscular than their current body size. Other work has also shown that many adolescent boys are dissatisfied with their muscle size, strength, shoulders, biceps, and chests, and generally desire more muscle in these areas while maintaining a generally lean physique (McCabe & Ricciardelli, 2001).

Result in Table 3 showed that young adults in the age range of 21-25 manifested significantly higher score on negative self-image than adolescents aged 16-20. Work that has looked at body image concerns in younger and older adults has produced some interesting findings. The idealized slender body shape is generally associated with youth. Women in particular are expected to try to maintain a youthful appearance, since youthfulness for women is valued in many societies. Cepanec and Payne (2000) argue that there is significant social pressure on women to maintain a youthful look, a pressure, and for men, the pressure to maintain a trim and muscular look could trigger unnecessary dieting and over-exercise particularly weightlifting to remain youthful.

In Table 4, we found out that adolescents and young adults from Lagos metropolis manifested higher level of fear of negative evaluation than those from Wukari area. Lagos, just like almost all huge mega cities is fuelled by high level of competitiveness of which looking good could sometime define success and physical acceptance, unlike that obtainable in Wukari which could be define as a semi-urban area. This could heighten apprehension associated with physical social evaluation and thus fear of negative evaluation.

Conclusion

In order to add to existing knowledge in the area of body image dissatisfaction, this study presented findings from adolescents and young adults. It was observed that males appeared more fixated with appearance concerns than women, which is an anomaly. But going with currently developmental experiences of the digital age, men are not alienated from the visual cues and dictates of the mass media. Since the 1980s, there has been a trend toward magazines and movies featuring a muscular, action-ready male body in a state of objectified undress. This development has been accompanied by increased media attention to exercise and weightlifting as paths to sexual (not romantic) prowess, and by glorification of the “bulked up” male (Cash, 2008). Findings further revealed that age and geographic location influences manifestations of negative self-image and fear of negative evaluation among adolescents and young adults, while negative self-image correlated significantly with fear of negative evaluation. Findings from this study are by no means conclusive as it represents just a fraction of adolescent and young adult population. However, studies such as this show that dissatisfaction with real or imagined defects in physical appearance is not only a Western reality, but also our local reality, especially in the digital age characterized by availability and exchange of ideas, culture and mode of life.

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