

## **Does self-esteem moderate the relationship between media body model, objectified body consciousness and body image? A study of Nigerian Igbo female adolescents.**

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**Abstract:** This study examined the influence of media body model and objectified body Consciousness on body image and whether self-esteem moderates the relationships. One hundred and twenty female adolescents aged between 14 and 17 years ( $M = 15.58$  years,  $SD = 1.07$  years) participated in the study. Media body model was varied into thin and fat media models. The Objectified Body Consciousness (OBC) Scale, Body Image Acceptance and Action Questionnaire and the Rosenberg Self-Esteem Scale were the study materials used to measure objectified body consciousness, body image and self-esteem respectively. Moderated regression statistic (MRS) revealed that MBM and body surveillance and body shame dimensions of OBC significantly and negatively predicted body image. Control belief however positively predicted body image. Self-esteem significantly moderated the relationship between body surveillance and body image and between control belief and body image. The findings suggest that MBM, OBC and BI are of concern to female adolescent and there is a great need for education and awareness on the effects of the media on female adolescents with emphasis on controlled media exposure. Counselors and therapists should also develop intervention programs aimed at boosting the self-esteem of female adolescents.

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### **I. INTRODUCTION**

Adolescent are becoming increasingly sensitive to their body image by comparing their bodies with the images of models in advertising, and other media outlets such as Facebook and Instagram. Body image (BI) refers to the perceptions, thoughts, and feelings of individuals with respect to their bodies (Grogan, 2016). It reflects what individuals imagine based on the experience about their own physical appearances, including their weight, height, body shape, assumptions, generalizations and memories and has been variously viewed as the perceptions, attitudes, emotions and personality reactions of the individual in relation to his or her own body. Adolescent girls have been found to be more concerned with their body image with body dissatisfaction among girls increasing during early adolescence and at later age compared to adolescent boys who showed lower levels of body dissatisfaction (Bearman, Presnell, Martinez, & Stice, 2006). Body image concerns can actually be impairing, preoccupying and distressing for teenagers, taking up a great deal of their mental energy and detracting them from their quality of life. This is because body image has been linked to self-worth, gender role identity and general mental health (Usmiani & Daniluk, 1997) with poor body image leading to body dissatisfaction that can sometimes have a strong impact on female adolescents and drive them towards unhealthy behaviors such as disordered eating patterns that can compromise emotional well-being, low self-esteem and depressive symptoms (Coker & Abraham, 2014).

In recent times, the media has consistently remained a conveyor of socio-cultural values regarding ideal body shape and size for “ideal” man and woman: Thin and slender for women, broad and muscular for men (McCabe, Butler & Watt, 2007). Magazines and newspapers are forms of media that often time tend to depict models and ultra thin athletes and researchers argue that the mass media is probably the single most powerful and influential transmitter of the idealized body image for females throughout society (Willinge, Touyz & Charles, 2006). The quest for thinness is on the increase and has become the commonly acceptable trend which every young woman aspires to attain in order to be accepted in our ever-growing social sphere and society. Study has revealed that nearly one third of children age 5 to 6 choose an ideal body size that is thinner than their current perceived size and by age 6, they are already aware of dieting and may have tried it (Lowes & Tiggemann 2003) and research has demonstrated that teenage girls in particular and overweight young people

are also more likely to feel negative about their bodies or have an unhealthy body image (Smolak & Levine, 2001).

One study of teen girls found that Facebook users were significantly more likely than non-Facebook users to have internalized a drive for thinness and to engage in body surveillance (Tiggemann & Slater, 2013), although the direction of causality has remained inconclusive. Social media sites such as Facebook, Twitter, Tumblr, Instagram and Pinterest that allow for the rapid creation and sharing of user-generated messages, as well as instantaneous communication with other users on a plethora of hand-held devices (Sundar & Limperos, 2013) have filled the online environment with pictures of peers and opportunities for social comparisons. Negative comparisons can particularly be obvious when young women compare their online pictures with peers, not knowing their peers have digitally altered the photographs (Tiggemann, Slater, & Smyth, 2014).

Effect of media on body image can be seen when negative assertion comments about a female shape on Facebook influenced the removal of such pictures and uploading another picture which the individual and her friends consider a better shape to be shown to the social media community (Frison & Eggermont, 2016). Studies have thus concluded that girls prefer using slim shaped images of either themselves or their role models as Facebook profile pictures than fat shaped pictures, and that fat females will embark on exercises and dieting to reduce their shape when they are told by their social media friends that they are getting fatter than they would like. The consequences of exposure to commercials that use thin models is that it led to higher levels of overall dissatisfaction with body image that especially affects female adolescents negatively (Hargreaves & Tiggemann, 2004).

One problem of exposure to media body models and media pressure is found in body image internalization. Female adolescents who have internalized the “ideal physical appearance” and hold a negative view of their physical appearance tend to invest their self-worth into size of their body and attempt to conform to exacting cultural standards of beauty.

For example, such adolescents with higher social comparison tendencies have been found to rate manipulated Instagram photos more positively than the original photos and were negatively affected by exposure to the manipulated photos (Kleemans, Daalmans, Carbaat, & Anschutz, 2018). As the influence of media increases, the pressure to adhere to or internalize these ideals becomes greater. That is why the quest for becoming thin as the dream of every woman, is at the increase even though the mass media only tends to encourage girls to form unrealistically thin body ideals of which its attainment is in most cases illusive (Field, Camargo, Taylor, Berkey, Robelis, & Colditz, 2001). The failure to attain the cultural ideal body that emphasizes thinness can be challenging to female adolescents. For example, owing to the fact that being thin is important for attractiveness, and attractiveness is important for how women view themselves, many women may work hard to achieve the thin ideal and feel bad about themselves when they cannot achieve it. The internalized ideal body involves the level at which an individual endorses the ideal image and aspires to achieve it. Some women can be exposed to images of thin women and not internalize such standards of appearance because they know they are unrealistic. In contrast, some women's internalized ideal is very similar to the socially represented ideal, which makes them particularly vulnerable to the powerful effects of the media (Sands & Wardle, 2003). Not surprisingly, researchers have found that women who have an internalized ideal body that closely resembles the socially represented ideal body are at a particularly high risk to develop body image disturbance (Sands & Wardle, 2003) and engage in body objectification.

Objectified body consciousness (OBC) encompasses the lowering of a person to the status of an object. Body objectification for example makes individuals especially women to begin to divert their attention inwards and monitor their own body as a reaction or anticipation of other peoples judgments (Cory & Burns, 2007). According to McKinley (2011), objectified body consciousness represents a prioritized self-awareness directed from self-objectification as an object to be gazed upon and scrutinized. Objectification occurs through widespread cultural representation of women as sexually appraisable body parts and through interpersonal interactions that focus on a woman's body and sexual desirability. A woman's experience of her body can greatly influence her affective state; meaning that women whose bodies do not match the proscribed cultural ideal are more likely to experience shame and other negative emotions. For example, it has been established that among other factors, female adolescents would want to objectify certain parts of their body such as the breast, stomach, the face and their buttocks and it is concluded that female adolescents are conscious of some parts of their body as they maintain that these parts are their objects of attraction and seduction to/of friends (Stice & Whitenton, 2002).

Body surveillance is the term used by McKinley and Hyde (1996) to refer to the ways in which a woman watches her body, constantly evaluating herself in terms of how her body looks rather than how it feels. A woman's relationship with her body becomes depersonalized as she comes to believe that her only purpose is to exist as an object to be looked at by men. This concept that a woman learns to construct her value and identity as an object of male gaze, is thus the chief principle of OBC. Women who are focused on their own bodies are more attentive to the appearance of other women's bodies and how they compare to their own. This body

comparison may act as a feedback loop to their own body, perpetuating heightened body surveillance and objectification of other women's bodies (Tylka & Sabik, 2010).

Another component of OBC is body shame that reflects the extent to which adolescents' internalization and strive for "perfect attractive body" can increase body shame. Although cultural standards provide a template against which a woman may judge her body attaining the cultural standards of thinness for the feminine body is largely impossible for most women and the difficulty in achieving the ideal body standard can lead a woman to feel intense shame about her body leading to high body dissatisfaction. Control belief represents an underlying assumption or belief that the women have the capacity to control her appearance given enough effort. Furthermore, they come to believe that they have the responsibility to do so, meaning that failure to meet the ideal is due to a lack of effort, motivation, etc., and are thus accountable for these failures.

Several studies have demonstrated that objectified body consciousness is positively and significantly correlated with behaviors such as watching of weight, dieting, and physical make-up in order to appear attractive to the opposite sex by girls (Sinclair, 2009) and is significantly associated with body image dissatisfaction among even outpatient breast cancer survivors. This suggests that women who view their breast as an object of attraction and had been diagnosed of breast cancer will feel and express sadness over their body image and would seek breast transplant as a solution to restore their breast and enhance their body image. Similar findings have been reported across cultures and domains (Fardously, Diedrichs, Vartarian & Halliwell, 2015), such as among caregivers and college women (Daye, Webb & Jafari, 2014), Ghana students (Amissah, Nyarko, Ciyasi-Ciyamerah & Anto-Winne, 2015), Romanians (Nanu, Taut & Baban, 2014) and Nigerian adolescents (Amazue, 2014).

Body image is also believed to be highly linked to self-esteem. Self-esteem reflects an individual's judgement concerning worth and accepting or rejecting of self that shows in one's attitude (Apichai, Sirisatayawong, Chupradit, & Khamchai, 2019). Having high self-esteem is associated with feeling good about one's self, being able to cope effectively with challenges and negative feedback, and live in a social world in which they believe that people value and respect them. Self-esteem is achieved by setting attainable goals and successfully accomplishing the goals, resulting in an increase in self-confidence, assertiveness, and feeling valued. Thus, self-esteem affects the enjoyment of life and is necessary for mental well-being and a positive self-concept.

Research indicates that low self-esteem is associated with body dissatisfaction in middle-school girls (Mitchell, Petrie, Greenleaf & Martin, 2012). Self-esteem also mediates the impact of stress on body satisfaction among Australian adolescents (Murray, Rieger, & Byrne, 2013) and has been found to be the number one predictor of poor body image (Ata, Ludden & Lally, 2007). This means that adolescents with high self-esteem may not worry much about their shape/weight as they are always proud of their body image, while those who are low on self-esteem are more likely to adopt measures such as dieting and physical exercises that will affect their body weight due to what their colleagues/peers say about their shape. This study thus examined the influence of media body model and objectified body consciousness (OBC) on body image of Nigerian adolescents and whether self-esteem moderates the relationships.

## II. METHOD

### Participants

One hundred and twenty (120) Female Senior Secondary School Three (SS3) students of the Government Girls Secondary School, Obollo-Afor, Udenu Local Government Area, Enugu state of Nigeria took part in the study. A simple random selection technique was adopted in selecting and assigning the participants into the treatment conditions Their ages ranged from 14-17 years ( $M=15.58$ ,  $SD=1.07$ ).

### Instruments

Four research instruments were used in this study. They include: The Body Image Acceptance and Action Questionnaire, Media Body Model Inventory, Objectified Body Consciousness Scale, and the Rosenberg Self-Esteem Scale.

#### *Body Image Acceptance and Action Questionnaire (BI-AAQ)*

The Body Image and Action Questionnaire (BI-AAQ: Sandoz & Wilson, 2006) was used to measure an individual's level of satisfaction, acceptance and/or worry over his/her body weight and size/shape. It is a 29-item self-report inventory that measure body image in two dimensions such as weight (12 items), and shape/size (17 items) of the body. Shape/size deals with being thin or fat while weight deals with being heavy or light. The BI-AAQ is rated on a seven point Likert scale response format ranging from "Never true (score 1) to "Always true" scored (7). An individual's possible total score ranges from 29-203 (weight=12-84, shape/size=17-117) and scores ranging from 105 and above is an indication of acceptance and satisfaction with one's body image while scores ranging from 29-104 indicates non-satisfaction with one's body image. Sandoz and Wilson (2006)

reported an internal consistency Cronbach's alpha of .93 and a construct validity coefficient of .89. Examples of items in the BI-AAQ are: "I get on with my life even when I feel bad about my body", "I cannot stand feeling fat", "There are things I do to distract myself from thinking about my body shape or size". The BI-AAQ was pilot tested among adolescents for the current study ( $n = 80$ ). A Cronbach's alpha of .90 was obtained and the principal component analysis of the BI-AAQ showed that it measures body image in two domains (weight and shape/size) with a mean construct validity index of .68.

#### *Objectified Body Consciousness Scale (OBCS).*

Objectified Body Consciousness Scale (OBCS: Mckinley & Hyde, 1996) is a 24-item scale that assesses an individual's concern about his/her physical appearance as compared with/to others. It is a self-report inventory rated on a 4-point Likert response options ranging from "strongly disagree" (scored 1) to "strongly agree" (scored 4). The OBCS measures body consciousness in three domains which are body surveillance (BS), Body shame (BSH) and control belief (CB). Higher scores (50 and above) indicates greater concern about one's physical outlook. Mckinley and Hyde (1996) reported a test-retest reliability alpha of .75 and a convergent validity index of .66 when compared with the socio-cultural attitudes towards appearance questionnaire. Examples of items in the OBCS are: "I rarely think about how I look", "I rarely worry about how I look to other people", "When I'm not the size I think I should be", "I feel ashamed". The OBCS was validated for use in the current study using ( $n = 80$ ). Cronbach's alpha of .89 and construct validity CFA of .74 was obtained.

#### *Rosenberg self-esteem scale (RSES).*

The Rosenberg Self-Esteem Scale (RSES: Rosenberg, 1965) is a 10-item self-report inventory developed to assess an individual's level of approval, acceptance and satisfaction of/with his/her self-worth and values. The scale is rated on a 4-point Likert response format ranging from "strongly agree" (scored 1) to "strongly disagree" (scored 4). Higher scores indicate higher self-esteem. Rosenberg (1965) reported a test-retest reliability coefficient of .74 and an internal consistency alpha of .80. Examples of items in the RSES are; "On the whole, I am satisfied with myself", "I am able to do things as well as most other people".

#### **Procedure**

The study adopted a between group experimental study design, and simple random sampling technique was used in sampling the participants. Forty (40) participants were each randomly assigned into three groups as follows: (Group 1: Experimental group 1 or thin media model shape group; Group 2: Experimental group 2 or fat media model shape group; and, Group 3: Control group). Media body model was manipulated by varying the pictures/shapes generated from the media and shown to the participants on a screen. Participants in experimental group 1 were shown the following thin model:



*This is a standard media (Facebook, Twitter, Instagram, etc) model profile picture shape.*  
 Participants in experimental group 2 were shown a fat model:



*This is a non-standard media (Facebook, Twitter, Instagram, etc) model profile picture shape.*  
 Participants in Group 3 (control group) were shown a blank screen.

After the administration of the stimulus materials to the two experimental groups, participants were asked to rest for three minutes before the next stage of the study. As a distraction task they were told to form and write two words each with the alphabets A, C, E, and G (Ezeh & Mefoh, 2015). After three minutes participants in all conditions were presented with the OBCS, BI-AAQ, and RSES to measure levels of body consciousness, body image acceptance and self-esteem respectively. At the end of the study, the participants were fully debriefed on the true purpose of the study and they were also reinforced for being part of it.

### III. RESULTS

**Table 1:** Correlation table showing the relationship among the study variables.

Factors	$\bar{X}$	SD	1	2	3	4	5	6
B1	123.35	55.71	-					
MBM	-	-	-.43**	-				
BS	19.84	7.40	-.80*	-.18*	-			
BSH	20.25	7.16	-.83***	-.08	.83***	-		
CB	22.35	7.76	.74***	-.15	-.71***	-.73**	-	
SE	23.96	8.79	.79**	-.13	-.78***	-.78***	.83**	-

**Note:** BI = Body Image; MBM = Media body model; BS = Body surveillance; BSH = Body shame; CB = Control belief; SE = Self-esteem; \* =  $p < .05$ ; \*\* =  $p < .01$ ; \*\*\* =  $p < .001$ .

The result on table 1 showed that body image had a significant negative relationship with media body model ( $r = -.43, p < .05$ ), body surveillance ( $r = -.80, p < .001$ ), and body shame ( $r = -.83, p < .001$ ) but positively related to control belief ( $r = .74, p < .001$ ) and self-esteem ( $r = .79, p < .001$ ). Media body model was negatively and significantly related with body surveillance ( $r = -.18, p < .05$ ) while body surveillance significantly and positively correlated with body shame ( $r = .83, p < .001$ ) but negatively correlated with control belief ( $r = -.71, p < .001$ ) and self-esteem ( $r = -.78, p < .001$ ). Again, control belief significantly and positively correlated with self-esteem ( $r = .83, p < .001$ ). Hierarchical moderated regression table is shown in Table 2.

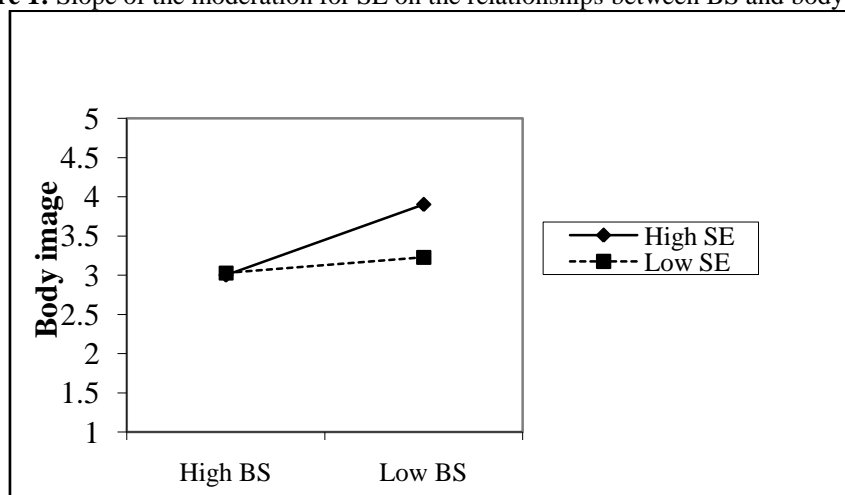
**Table 2:** Hierarchical moderated regression table showing the influence of media body model, objectified body consciousness, body image and the moderating role of self-esteem.

Variables	B	SE	$\beta$	R	R <sup>2</sup>	R <sup>2</sup> $\Delta$
<b>Step 1</b>				<b>.227</b>	<b>.081</b>	<b>.081</b>
MBM	-5.84	1.25	-.227**			
<b>Step 2</b>				<b>.806</b>	<b>.049</b>	<b>.648</b>
BS	-6.12	.42	-.819**			
<b>Step 3</b>				<b>.856</b>	<b>.733</b>	<b>.084</b>
BSH	-4.11	.68	-.528***			
<b>Step 4</b>				<b>.866</b>	<b>.750</b>	<b>.017</b>
CB	1.54	.55	.214**			
<b>Step 5</b>				<b>.874</b>	<b>.764</b>	<b>0.14</b>
SE	1.635	.62	.256**			
<b>Step 6</b>				<b>.892</b>	<b>.796</b>	<b>.032</b>
SE*MBM	-.296	.41	-.30			
SE*BS	-.154	.08	-.154*			
SE*BSH	-.076	.09	-.08			
SE*CB	-.254	.06	-.25**			

**Note:** MBM = Media body model; BS = Body surveillance; BSH = Body shame; CB = Control belief; SE = Self-esteem; \* = P<.05; \*\* = P<.01, \*\*\* = P<.001.

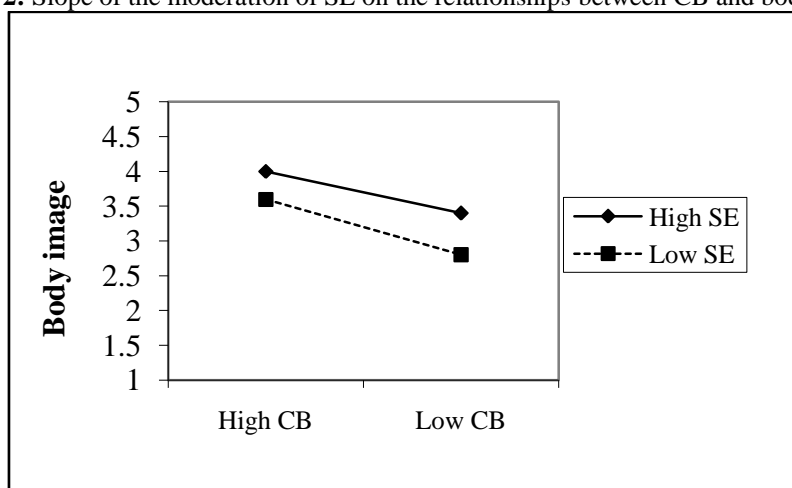
The hierarchical multiple regression table showed that at stage 1, MBM contributed significantly to the regression model,  $F(1,118) = 9.09, p < .05$  with 8% variation in body image. MBM negatively predicted body image ( $\beta = -.227, p < .01$ ). The negative coefficient indicates that the higher the internalization of MBM the more dissatisfied with body image. BS when entered in stage 2 and contributed significantly to the regression model,  $F(1,118) = 216.25, p < .001$ . BS accounted for 65% to the variation in body image and negatively predicted body image ( $\beta = .82, P < .01$ ) indicating that the more an individual engages in BS the more negative the body image. The introduction of BSH in stage 3 made a significant contribution to the regression model,  $F(1,118) = 36.47, P < .001$ , and accounted for 8% of the total change in body image. BSH negatively predicted body image ( $\beta = -.53, P < .001$ ) showing that an increase in BSH lead to a higher dissatisfaction with body image. At stage 4, CB was entered and this contributed significantly to the regression model,  $F(1,118) = 7.76, p < .01$ , accounting for 2% of the total variation in body image. CB positively predicted body image ( $\beta = -.21, P < .01$ ) indicating that the higher the belief that with enough effort one can have enough control on her appearance the more satisfied with body image. Again, when SE was entered in stage 5, it significantly contributed to the regression model,  $F(1,118) = 6.85, p < .01$ , and it accounted for about 2% of the total change in body image. The table showed that self-esteem positively predicted body image ( $\beta = .26, P < .01$ ). Finally, the moderation interaction terms were entered in step 6 and it was found that SE significantly moderated the relationships between BS and body image ( $\beta = -.15, P < .05$ ) and CB and body image ( $\beta = -.25, P < .01$ ). The moderation slopes are shown in Figures 1 and 2.

**Figure 1:** Slope of the moderation for SE on the relationships between BS and body image.



Note: High SE = High self-esteem; Low SE = Low self-esteem; High BS = High body surveillance; Low BS = Low body surveillance.

Figure 2: Slope of the moderation of SE on the relationships between CB and body image.



Note: High SE = High self-esteem; Low SE = Low self-esteem; High CB = High control belief; Low CB = Low control belief.

The relationship between BS and body image depends on the levels of SE. For example, at high body surveillance, there is greater dissatisfaction with body image for those with high and low self-esteem although it is slightly larger for those with high self-esteem. However at low body surveillance those with high self-esteem tend to be satisfied with their body image compared to those with low self-esteem. From the self-esteem moderation on control belief and body image, for those with both high and low self-esteem having a high control belief leads to higher body satisfaction but the moderation was larger for high self-esteem. For those with low SE, low control belief leads to body image dissatisfaction than high control belief.

#### IV. DISCUSSION

This study investigated whether self-esteem moderates the relationship between media body model (MBM), objectified body consciousness (OBC) and body image (BI). Results revealed that MBM and body surveillance (BS), body shame (BSH) dimensions of OBC negatively predicted BI while control belief (CB) dimension positively predicted body image. The result shows that as the internalization of MBM gets towards being thinner the higher the individual's body dissatisfaction. Being exposed to highly attractive models in the social media and the need to strive for body perfection in line with the models can be overwhelming to adolescents and in recent times, adolescents have increasingly been under intense pressure of social media with many feeling like social media defines their self-worth.

The media has consistently transmitted the idea that it is possible to achieve a 'perfect ideal of beauty' that emphasizes thinness for women. But in most cases, meeting up with these patterns of physical beauty has proved to be an illusion resulting in body image dissatisfaction especially when these patterns cannot be achieved (Lawler & Nixon, 2011; Uchôa, Uchôa, Daniele, Lustosa, Garrido, Deana, Aranha, & Alves, 2019). Studies have demonstrated that regardless of age or body mass index (BMI), girls who made strong efforts to look like women in the media were more likely to be concerned about their weight (Field, Camargo, Taylor, Berkey, Roberts & Colditz, 2001) showing that the media does have a strong influence on the development of girls' weight worries. It is thus more pronounced among adolescents with thin ideal internalization who constantly compare this ideal with their own bodies. Such women and adolescents have, for example, been reported to spend more time and money on improving their appearance and were more at risk of developing health related problems because they felt dissatisfied with their body image (Grabe, Ward & Hyde, 2008). Media ideal physical appearance is of great concern because by already being susceptible to body dissatisfaction adolescents tend to become even more sensitive and more vulnerable, to the messages and effects of the media on the development of how they perceive themselves, other girls, and how much importance they place on their appearance (Osad'an & Hanna, 2015). Findings suggest that the media is surely a high risk factor for the development of negative body image especially among female adolescents.

Body surveillance dimension of OBC has also been found to have a significant influence on body image mostly among female adolescents. Body surveillance refers to the ways in which a female watches her body by constantly evaluating herself in terms of how her body looks rather than how it feels. Usually, an adolescent who engages in high body surveillance objectifies her body and compares her body with culturally ideal body that is assumed to be preferred by men. This paves way for the development of BI dissatisfaction since the attainment of this societal ideal standard is always impossible. It then seems as though only females

who are not satisfied with their body image implement body surveillance behaviors and Tylka and Sabic (2010) have, for example, demonstrated that girls who are satisfied with their body image often do not spend time inspecting their body, care less about their body shape and are always feeling very confident of their body outlook.

Body shame has also been found to negatively predict body image and this study is in line with the findings of Daye et al (2014) that people who are ashamed of their body shape or size are always low and never satisfied with their body image. This finding implies that among adolescents, those who are low on feelings of body shame and guilt will be proud of their bodies and develop a more satisfying body image than those who are high on body shame which can also lead them to engage in unhealthy behaviours to make them look like others including dieting (over eating for those who feel that they are thin and skipping meals for those who feel that they are fat), clothing (putting on tight or loose dresses to cover some body features), physical exercises (to reduce weight by fat girls) and using certain cosmetic products like bleaching cream (by those who want to tone up their skin). This finding is consistent with McKinley and Hyde's (1996) internalization of cultural standards and body shame hypothesis which notes that discrepancy in judgement can lead to body shame and body image dissatisfaction.

The result of the study also revealed that control belief positively predicted body image. This suggests that adolescents who tend to highly think they can control their appearance accept and approve their body image than those who think their appearance is out of their control. Previous studies (Nanu et al, 2014; and Amisah et al, 2015) have reported that adolescents who are satisfied with their body image also have high belief in their ability to control their thought about their body shape and size. Thus, female adolescents who strongly believe that they can achieve any body size/shape they want, will confidently engage in healthy activities they think will be effective in achieving such shapes and will also be proud with their current body image. However, having a strong believe that they have the ability and responsibility to regulate their body shape can create a problem. Having a strong believe that any desired body size/shape can be achieved could lead to a false belief and which can magnify shame and other negative feelings especially in the event of failure to measure up to the societal ideal body shape (Blashill, 2011; Yoo & Kim, 2012).

Also, the result showed that self-esteem positively predicted body image. Research has shown that adolescents and mostly females who are high on self-esteem are always satisfied with their body image and do not border themselves much about what people say about their body shape/size. (Abamara & Agu, 2014; Asagba et al, 2016). Self-esteem moderated the relationship between BS and BI and also between CB and BI. This result is consistent with the findings of Lipowska and Lipowski (2015), and Aumend (2007) that adolescents' level of self-esteem in interaction with their level of body surveillance and control belief significantly predicts their level of acceptance and/or rejection of their body image such as their shape and size. This finding suggests that adolescent females' level of self-esteem plays significant roles in how often or not she watches her body to know how attractive she looks to her peers and the opposite sex and how satisfied she is with her body. From the findings, those with high self-esteem but low in body surveillance tend to be satisfied with their body image compared to those with low self-esteem. Since having high self-esteem is associated with feeling good about one's self, able to cope effectively with challenges and negative feedback, with the believe that people value and respect them, adolescents with high self-esteem will be satisfied with their body image even without engaging in body surveillance.

### **Implications and limitations of the study**

The findings have some implications. There is a great need for education and awareness on the effects of the media on female adolescents with emphasis on controlled media exposure. Counselors and therapists who deal with female adolescents should encourage them to be proud of themselves and boost the self-esteem as this will enable them communicate, interact and feel free in the company of their peers and also encourage body positivity. They should be at hand to help adolescents who suffer from body dissatisfaction. They should also be trained and encouraged to take measures that will ensure that their physical outlook (fat or thin) does not limit their potential abilities in their academic and social activities. Youth programs that educate young females on how to keep fit physically and mental should be encouraged by both the government and non-governmental organizations. This will go a long way in controlling maladaptive behaviours among young females and increasing self-esteem and body dissatisfaction. This study has some limitations. The researchers did not collect information on media usage as it is possible there may be differential effect of media usage on body image satisfaction. Also, the sample in this study was drawn from female Igbo adolescents. Generalizing the findings should be done with caution.



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