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Body image importance and body dissatisfaction among Indigenous Australian adolescents

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Abstract

Despite their elevated risk of health problems and a propensity to be more overweight or underweight relative to the other members of the Australian population, there has been no previous investigation of body image concerns among Indigenous Australians. In this study we investigated the level of body image importance and body image dissatisfaction among 19 rural Indigenous adolescents (7 males, 12 females) and 28 urban Indigenous adolescents (15 males and 13 females). Our hypotheses that there would be gender differences in body image importance and body image satisfaction were not supported. However, males placed more importance on muscle size and strength than females, and rural participants placed more importance on weight than urban participants. Comparison to existing data obtained from Caucasian adolescents suggested that Indigenous youth may be less concerned and dissatisfied with body weight and shape. These results are discussed in relation to findings from studies of non-Indigenous adolescents, and Indigenous health issues. The limitations of the current study and the need for further studies are also discussed.

**Key Words:** Indigenous Australians; Adolescents; Body image importance; Body image satisfaction
In developed countries such as Australia, a thin body ideal is strongly promoted for females (Stice, 1994). Adolescent girls and young adult women particularly are thought to experience a strong sociocultural pressure to be thin, resulting in a high degree of body weight or shape dissatisfaction (McCarthy, 1990; Stice, 1994; Wertheim, Paxton, Schutz & Muir, 1997). For males, the muscular mesomorph ideal is also very clear (McCabe & Ricciardelli, 2001). This muscular ideal is intimately tied to cultural views of masculinity and the male sex-role, which prescribe that men be powerful, strong and efficacious (Mishkind, Rodin, Silberstein, & Striegel-Moore, 1986). Consistent with these findings, other research (Moore, 1990; Nowak, Spear, & Crawford, 1996) has suggested that boys are concerned more with their chest, shoulders and arms, and that girls are concerned more with their hips, thighs and legs.

While body dissatisfaction was considered in the past to be largely restricted to Western societies, more recent findings challenge this assumption. For example, studies of minority ethnic groups have produced evidence of “acculturation” effects on eating and weight-related factors (Ball & Kenardy, 2002; Brevis, McGarvey, Jones & Swinburn, 1998). Lee and Lee (2000) have argued that as non-Western women become more acculturated to Western society, they become more susceptible to socio-cultural influences from the media and peers that promote the thin female ideal. Exposure to these influences is associated with increased concerns about body image, and an increase in eating disordered behavior or other behaviors to change the shape of the body. Similarly, Thompson, Corwin and Sargent (1997) found that about equal proportions of White and Black children in the United States reported weight concerns. About half of the sample of Black and White girls in this study wanted to be thinner. Thirty-two percent of Black boys compared to 28 percent of White boys also wanted to be thinner.
Little research has been conducted to examine the nature of body image attitudes and related behaviours among Indigenous people. One study of obesity among Indigenous Canadian children (Hanley et al., 2000) included measures of body image. Among girls, but not boys, an inverse relationship was found between being overweight and the heaviness of the healthy body image selected by the participants. In another study of Native American children, Stevens et al. (1999) found that 38% of children had tried to lose weight, most commonly through exercising. Girls were more likely than boys to be dissatisfied with their body size, with 48% desiring a slimmer body, and 22% wanting a larger body. This is in contrast to findings among Caucasian girls, where girls want to lose weight, and the desire for a larger body is generally not relevant (Thompson et al., 1997).

In Australia, although it is known that non-Indigenous children and adolescents have a high degree of concern about their body image (McCabe & Ricciardelli, 2003a; 2003b), little is known about this issue amongst the Indigenous Australian population. This population (410,000 people or 2.2 percent of the population, (Australian Bureau of Statistics (ABS), 2002), is the most disadvantaged group in Australian society (Hunter, 2000). In fact, Hunter suggested that Indigenous Australians are far more disadvantaged than both non-Indigenous Australians and other Indigenous populations in similar situations in other countries (e.g., Canada, USA, and New Zealand). This is particularly the case with regard to both physical and mental health, areas in which the Indigenous population has significant unmet needs (Hunter, 2000).

One aspect of physical health that is of concern among Indigenous people is their level of obesity. Indigenous people across the lifespan are more likely to be classified as obese as non-Indigenous people. For example, Indigenous children between the ages of 7 and 15 years are more likely to be categorised as overweight, and less likely to be classified as being of acceptable weight, compared to Australian reference data (House of Representatives Standing Committee on Family and Community Affairs, 2000). Although the figures vary by location,
overall 22% of girls and 24% of indigenous boys are overweight, compared to 15% of girls and 15% of boys in the Australian reference data. However, Indigenous people are also more likely than non-Indigenous people to be underweight. For example, 28% of both Indigenous boys and girls are underweight, compared to 15% of boys and 15% of girls in the Australian reference data.

Despite the higher risk of overweight and underweight among Indigenous people, the ideal body size among them has not been investigated. Little is known about how Indigenous people think about their own body size/shape in relation to their own (or Western) ideals. This important area was explored in the present study. On the basis of previous work with non-Indigenous people, we hypothesised that:

(1) Females would attach more importance to, and be more dissatisfied with those areas of the body associated with the ideal female body (hips, thighs and legs) than boys;

(2) Males would attach more importance to, and be more dissatisfied with those areas of the body associated with the ideal male body (chest, shoulders and arms) than girls;

(3) Females would attach more importance to, and be more dissatisfied with their weight and shape than males; and

(4) Males would attach more importance to, and be more dissatisfied with the muscles than girls.

It is important to note that there is great diversity among Indigenous communities in Australia. Some communities live a substantially traditional lifestyle in remote areas (for example, central Australia, and the Kimberley region in the far north of Western Australia), while others are located in large cities and have adopted many of the customs and practices of
the mainstream society. In between the traditional cultures and those adopting European
culture, are communities that live in more rural areas, sometimes on reserves or as fringe-town
dwellers. However, as Dudgeon and Oxenham (1989) argued, such a simplistic depiction of
Indigenous communities is inappropriate, as it fails to capture the multi-dimensionality and
dynamic interaction between communities, and indeed of people’s tendency to move between
them. In this study, we decided to survey Indigenous adolescents in two locations, one urban,
and one rural. In this way, we hoped to engage participants who are more acculturated, and
those who are less acculturated to the mainstream society to explore the possibility that there
may be acculturation effects associated with body image attitudes and concerns within the
Indigenous population.

Method

Participants

Fifty-four Indigenous adolescents aged 12 to 16 years participated in this study. There
were 25 girls and 22 boys in the sample, and seven who did not record their gender. Twenty-
eight respondents (13 girls, mean age = 14.00, SD = 1.35, and 15 boys, mean age = 14.27, SD =
1.10) were drawn from suburbs of Melbourne, Australia (a city with a population of about three
million people), and 19 respondents (12 girls, mean age = 13.83, SD = 1.59, and 7 boys, mean
age = 13.43, SD = 1.13) were drawn from a relatively isolated township of 1800 people, a
significant proportion of whom are Indigenous, some 500 kilometres northwest of Melbourne.

Materials

All respondents completed two subscales of the Body Image and Body Change inventory
(Ricciardelli & McCabe, 2002). The two subscales assessed body image dissatisfaction and
body image importance.
The Body Importance Scale is made up of ten items. The first three items assess level of importance placed on weight, shape and muscles. Seven further items assess the importance placed on the chest, the abdominal region, shoulders, arms, hips, thighs, and legs. Scores relating to importance placed on body areas of concern to boys (chest, shoulders and arms) and body areas of concern to girls (hips, legs and thighs) can be obtained by summing responses to these items. Body image importance for the abdominal region is assessed separately. The Body Image Dissatisfaction Scale assesses the level of dissatisfaction that is associated with each aspect of the body, or each of the body parts described above. Scores are derived in a similar manner as for body image importance. Higher scores on the respective scales indicate higher body image importance and higher body image dissatisfaction. The above scales have been shown to have high levels of internal consistency with adolescent males and females (Cronbach’s $\alpha > .92$) and have demonstrated concurrent and discriminant validity (Ricciardelli & McCabe, 2002).

The usual response format for each of these scales is based on a five-point Likert scale, ranging from extremely important to not at all important, or extremely satisfied to extremely dissatisfied. On the advice of our Indigenous research assistants, in order to reduce the difficulty of the scale items for the Indigenous participants, the response range was reduced to three points. Thus, for example, on the Body Image Importance scale, participants were asked to describe body shape as extremely important, not at all important, or in between these extremes. Further, for the dissatisfaction scale, smiling, neutral, or unsmiling faces were used to depict satisfaction, neither satisfaction nor dissatisfaction, or dissatisfaction. After explanation of the response format, participants were asked to circle the image which best represented how they felt about the item in question. For example:
How satisfied are you with your weight?

In the current study, the Cronbach’s $\alpha$ for the total importance scale was .87, and for the total dissatisfaction scale it was .89. For the subsets of items associated with males’ body image (chest, shoulders and arms) these figures were .82 and .72 respectively, while for the subset of items associated with females’ body image (hips, legs and thighs) they were .80 and .77 respectively.

Procedure

Ethics clearance was obtained from Deakin University Human Research Ethics Committee, and the Education Department School Support Branch. Clearance to conduct the study was also sought and gained from Aboriginal Co-operatives and Indigenous community elders in the regions in which data were collected.

We are cognisant that there is, justifiably, an extreme scepticism among Indigenous people about research involving Aborigines. Many Indigenous communities have been the subjects of research that has disempowered them by undermining and devaluing their decision-making mechanisms and disregarding community-based social, cultural and economic priorities (Gower & Mack, 2002; Mack & Gower, 2001). Many feel that such research is simply another means of exploitation of Aborigines by white researchers, and that there have been no benefits flowing back into the community from previous research. For example, from Foley’s (2000) account of the way research has been conducted with Indigenous Australians, it could be described as “neo-colonial and paternalistic” providing little benefit to the communities involved and having the potential to do them serious harm. This phenomenon has been referred to as “academic colonization” by Nobles (1991) and affirmed in the Indigenous context by
Dudgeon and Oxenham (1989) and Yavu-Kama (1988). In other words, research is seen as another form of dispossession where knowledge is the commodity at stake and custodianship of it is often lost to non-Indigenous individuals and institutions that are not accessible to the Indigenous population. Therefore, it is necessary for members of the community to have a full understanding of the research questions, purpose and process, and to be informed as to how the findings will be used to the benefit of the community. This entails identifying the community elders and representatives, and sometimes (by Western standards) prolonged negotiations with them. In the case of this study, the benefits were considered to be the educational material that could be derived from the findings. Consistent with the guidelines of the National Health and Medical Research Council and the Australian Psychological Society, Indigenous female research assistants who were members of the local community were trained and employed to collect the data.

Plain Language Statements detailing the purpose of the study were provided to both participants and their parents, and informed consent was obtained from both the parents and the participants by the research assistants. The research assistants then individually administered the questionnaires to the participants in their school or in their home, providing assistance with the contents as required.

Results

The data obtained from the participants are summarised in Table 1 (Body Image Importance) and Table 2 (Body Dissatisfaction). Data were screened for missing values and in seven cases it was found that the respondents had failed to record their gender, so these data were not included in the analyses.
**Body Image Importance**

Multivariate analyses on the first three body image importance items, weight, shape and muscle size/ strength demonstrated significant multivariate effects for gender, \( F(3, 41) = 2.79, p < .05 \) and location \( F(3,41)=3.37, p < .05 \). With regard to gender, an examination of univariate F-tests for each dependent variable indicated that there were significant differences for the importance of muscle size and strength, \( F(1, 43) = 7.50, p < .01 \), with males (\( M = 2.32 \)) indicating a greater importance than females (\( M = 1.80 \)) on this issue. In terms of location, an examination of univariate F-tests for each dependent variable indicated that there were significant differences for the importance of weight, \( F(1, 43) = 2.22, p < .05 \), with rural participants (\( M = 2.16 \)) placing a greater importance on weight than the urban participants (\( M = 1.75 \)).

Multivariate analyses combining areas of concern specific to both males and females also revealed no significant outcome for gender \( F(3, 41) = 1.53, p > .05 \), location \( F(3, 41) = .74, p > .05 \) or interaction effects \( F(3, 41) = 0.37, p > .05 \). Further multivariate analyses, with the dependent variables being importance of body areas of concern specific to males (chest, shoulders and arms) and abdominal region, revealed no significant difference between urban and rural males \( F(2,19) = .62, p > .05 \). Similarly, multivariate tests of the importance of body areas of primary concern to females (hips, thighs, and legs) and abdominal region revealed no significant difference between the urban and rural females \( F(2,22) =.06, p> .05 \).

**Body Dissatisfaction**

Multivariate analyses on the first three body dissatisfaction items (weight, shape, muscle/strength) demonstrated no significant effect for gender, \( F(3,41)=1.09, p > 0.05 \) location, \( F(3,41)=1.68, p > 0.05 \), or an interaction effect., \( F(3,41)=2.34, p > 0.05 \).

Multivariate analyses combining items relating to body areas of specific concern to both males and females, including abdominal region, also revealed no significant difference for
gender F(3, 41) = .38, p > .05, location F(3, 41) = .95, p > .05 or interaction effects F(3, 41) = 0.75, p > .05. Further multivariate analyses investigating specific areas of dissatisfaction for females and males were conducted separately to investigate differences due to locality. Results revealed no significant differences, F(2,19) = 0.82, p > 0.05 for boys, F(2,22) = 0.46, p > 0.05 for girls.

Comparisons to non-Indigenous data sets

Tables 3 and 4 summarise the percentage of participants who attached importance to the various body aspects and expressed dissatisfaction with their body. The tables also include comparative data of 646 non-Indigenous urban adolescents derived from Ricciardelli and McCabe’s (2001) study, with the five point response formats collapsed to a three point format (e.g., important and very important were merged, and dissatisfied and very dissatisfied were merged). As can be seen in the tables, there appeared to be some trends towards differences between the groups. In comparison to the Caucasian group, smaller proportions of Indigenous females and urban Indigenous males, and a greater proportion of rural Indigenous males appeared to place importance on weight; smaller proportions of our Indigenous respondents saw shape as important; a greater proportion of rural Indigenous males placed importance on muscle size; a smaller proportion of Indigenous females were concerned with those areas usually of concern to girls, and fewer Indigenous girls in particular, placed importance on the abdominal region.

With regard to body image dissatisfaction, Indigenous females seemed to be less dissatisfied with their weight and shape than their Caucasian counterparts, a greater proportion of Indigenous males were dissatisfied with their muscle size and strength; rural Indigenous participants were generally more dissatisfied with regard to their chest, shoulders and arms; urban Indigenous males were more dissatisfied with their hips, thighs and legs; and rural
Indigenous males and urban females were less dissatisfied with regard to their abdominal region.

Discussion

This study investigated the nature of body image importance and concern among Indigenous Australian adolescents. The value of this study is that it investigated body image importance and body dissatisfaction, as well as exploring various components of these constructs. By drawing our Indigenous sample from urban and regional settings, we were also able to explore differences in body image related to the degree of ongoing contact with the non-Indigenous mainstream culture.

Analysis of our data provided no support for the hypotheses, with none of the previously reported gender differences in body image importance and body image dissatisfaction being found. This suggests that the gendered body image stereotypes depicted and promulgated through media (e.g., Spitzer et al., 1999; Thompson & Heinberg, 1999; Tiggemann, 2002) and other influences such as parents and peers (Ricciardelli & McCabe, in press; Wertheim et al., 1997) may not be perceived or internalised by Indigenous youth. It may even be that the peer and parental pressures identified for Caucasian populations do not exist. However, in our study, both urban and rural male groups placed a higher importance on muscle size and strength than the female groups, suggesting that this gender stereotype identified in previous studies (Mishkind et al. 1986) may be pervasive across the cultural groups.

In terms of location, the only difference found between the groups was with regard to the importance of weight. There was a significant difference overall between the urban and rural samples, with the rural sample attaching more importance to weight than their urban counterparts. However, the major contributing factor to this difference was that rural boys
appeared to place great significance on weight. Our scale did not tap the direction of this importance – whether it is important to be heavier or lighter. There may be a reason why rural populations generally attach importance to being heavier than do urban populations, or vice versa. Interestingly though, no effects were found in relation to levels of satisfaction with regard to any of the body parts in the survey.

The comparison of our data set to the Caucasian data set suggests that further research with urban and rural participants from both Caucasian background and Indigenous backgrounds could be very informative. For example, it appears that overall that Indigenous adolescents, male and female, may place less importance on their body weight and shape than non-Indigenous adolescents, and a smaller proportion seem to be dissatisfied with their weight. Indigenous girls also appear to be less dissatisfied with their shape. This may be an important factor contributing to the findings of the House of Representatives Standing Committee on Family and Community Affairs (2000) that nearly half of the Indigenous population is either overweight or underweight relative to the general community reference data.

Unfortunately, our samples were not large, especially the rural male group, which only consisted of seven participants. Thus, future studies should include larger samples. It would also be useful to include matched non-Indigenous comparison groups in future studies, and to include measures of BMI to determine if there are BMI differences in the samples that relate to the importance, and more particularly, satisfaction reported by the participants.

Our Indigenous research assistants also made a number of observations about Indigenous youth. They suggested that many Indigenous youth do not know their own culture and feel defeated. They believe they do not fit into their own communities and they do not belong to the Anglo-Saxon community. Future studies should also include groups from more remote locations, where one may expect to find less interaction with the mainstream society, including the media, and so less acculturation. This may allow a greater analysis of the impact of culture
on the variables of interest. However, our preliminary inquiries suggest that it may not be culturally appropriate to ask Indigenous adolescents from more traditional communities the same questions about body image importance and body dissatisfaction that are included on the questionnaires used in this study. They explained that these topics are not discussed openly in such communities and they are considered highly private and personal.

In summary, our findings suggest the need for further well-planned studies of body image among Indigenous youth. We know Indigenous people are more likely to be overweight or underweight in comparison to Australian normative data (House of Representatives Standing Committee on Family and Community Affairs, 2002). Our findings suggest that aspects of body satisfaction and body importance among Indigenous adolescents may be different from those of non-Indigenous adolescents. In particular, Indigenous adolescents may be less aware of their appropriate body weight range, or at least less concerned about achieving this.

Acknowledging the limitation of a lack of objective body weight data in this study, these findings have potential implications in terms of negative health consequences of under and overweight (e.g., Brown, Mishra, Kenardy, & Dobson, 2000; World Health Organization, 1998). To maintain a healthy weight, individuals firstly need to be aware of what an appropriate weight range is, and then they need to be sufficiently concerned to take action to achieve this. Future studies should investigate in more detail the body image of Indigenous adolescents and the extent to which Indigenous adolescents from different communities are striving for a body image ideal that is likely to further exacerbate the significant health problems already experienced by this group within the Australian population.
References


Table 1

*Mean Scores and Standard Deviations on Body Image Importance Scale*

<table>
<thead>
<tr>
<th>Group</th>
<th>Gender</th>
<th>N</th>
<th>Body Image Importance Item 1 (Weight)</th>
<th>Body Image Importance Item 2 (Shape)</th>
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<th>Body Image Importance for boys’ Items 6, 8 and 10 (Chest, Shoulders, Arms)</th>
<th>Body Image Importance for girls’ Items 4, 5 and 9 (Hips, Thighs, Legs)</th>
<th>Body Image Importance Item 7 (Abdominal region)</th>
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Table 2

Mean Scores and Standard Deviations on Body Image Dissatisfaction Scale

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Table 3

*Percentage of Respondents Indicating importance of Body areas Compared to Ricciardelli and McCabe’s (2001a) Caucasian Sample*

<table>
<thead>
<tr>
<th>Group</th>
<th>Gender</th>
<th>N</th>
<th>Body Image Importance Item 1 (Weight)</th>
<th>Body Image Importance Item 2 (Shape)</th>
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<td>10.7</td>
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<td>8.3</td>
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<td>16.7</td>
<td>33.3</td>
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<td>37.6</td>
<td>26.0</td>
<td>18.4</td>
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<td>46.9</td>
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</tbody>
</table>

1Indigenous participants responded on a three-point scale, with 1 indicating extremely important, 3 not at all important, and 2 “in between”. The comparison non-indigenous group responded on a five point scale with 1 indicating extremely important and 2 representing important etc.. For this comparison, the “extremely important” and “important” categories were merged.
Table 4

Percentage of respondents indicating dissatisfaction with body areas compared with Ricciardelli and McCabe’s (2001a) Caucasian sample

<table>
<thead>
<tr>
<th>Group</th>
<th>Gender</th>
<th>N</th>
<th>Body Dissatisfaction Item 1 (Weight)</th>
<th>Body Dissatisfaction Item 2 (Shape)</th>
<th>Body Dissatisfaction Item 3 (Muscle size)</th>
<th>Body Dissatisfaction for boys’ Items 6, 8, 10 (Chest, Shoulders, Arms)</th>
<th>Body Dissatisfaction for girls’ Items 4, 5, 9 (Hips, Thighs, Legs)</th>
<th>Body Dissatisfaction Item 7 (Abdominal region)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Urban Indigenous</td>
<td>Male</td>
<td>15</td>
<td>6.7%</td>
<td>6.7%</td>
<td>13.3%</td>
<td>6.7%</td>
<td>33.3%</td>
<td>6.7%</td>
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<tr>
<td></td>
<td>Female</td>
<td>13</td>
<td>7.7%</td>
<td>7.7%</td>
<td>7.7%</td>
<td>7.7%</td>
<td>7.7%</td>
<td>30.8%</td>
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<tr>
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<td>7.1%</td>
<td>10.7%</td>
<td>7.1%</td>
<td>3.6%</td>
<td>28.5%</td>
</tr>
<tr>
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<td>8.3%</td>
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<td>25.0%</td>
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<td>8.3%</td>
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<tr>
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<td>10.5%</td>
<td>5.3%</td>
<td>26.3%</td>
<td>31.6%</td>
<td>5.3%</td>
<td>10.5%</td>
</tr>
<tr>
<td>Caucasian</td>
<td>Male</td>
<td>363</td>
<td>11.6%</td>
<td>9.6%</td>
<td>9.4%</td>
<td>1.1%</td>
<td>1.7%</td>
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<tr>
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<td>24.7%</td>
<td>15.9%</td>
<td>2.8%</td>
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<td>32.9%</td>
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<tr>
<td>Group</td>
<td>Total</td>
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<td>18.3%</td>
<td>16.3%</td>
<td>12.2%</td>
<td>1.9%</td>
<td>6.8%</td>
<td>21.7%</td>
</tr>
</tbody>
</table>

Indigenous participants responded on a three-scale, represented by happy, neutral and sad faces, with “happy face” responses indicating satisfaction, “sad face” responses representing dissatisfaction, and the “neutral face” responses representing neither of these. The comparison non-Indigenous group responded on a five point scale with 1 indicating extremely satisfied, 2 representing satisfied etc. For this comparison, the “extremely satisfied” and “satisfied” categories were merged.