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BODY IMAGE AND ITS INFLUENCE ON PHYSICAL ACTIVITY PARTICIPATION  
AMONG WOMEN AGES 45 TO 64

BY

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DISSERTATION

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## **ABSTRACT**

The current study was designed to investigate the role of body image on physical activity levels for women. Self-determination theory, social comparison theory, and constraints theory were utilized as the frameworks of this study. Eighteen in-depth, semi-structured interviews with White women ages 45 to 64 who were already exercising were conducted. Results showed that body image could serve as a motivation, a constraint, or both for physically active women. Social comparison with peers was the most important factor influencing body image. Women identified their physical activity levels, types of activities, and motivators and constraints impacting physically active leisure. Moreover, the self-definition of physical activity was discussed.

**Keywords:** Body image, Physical activity, Motivations, Middle-aged women, Self-determination.

*To Jadwiga and Marek, my Parents*

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## TABLE OF CONTENTS

<b>CHAPTER I</b>	
<b>INTRODUCTION.....</b>	<b>1</b>
1.1 Factors Affecting Physical Activity Participation of Women .....	3
1.2 Goals and Objectives of the Study .....	5
1.3 Limitations of the Study.....	6
<b>CHAPTER II</b>	
<b>PHYSICAL ACTIVITY AMONG WOMEN.....</b>	<b>8</b>
2.1 Current Levels of Physical Activity among Women .....	9
2.2 Physical Health Benefits of Physical Activity for Women.....	12
2.3 Mental Health Benefits of Physical Activity for Women .....	17
<b>CHAPTER III</b>	
<b>MOTIVATIONS AND CONSTRAINTS FOR LEISURE.....</b>	<b>23</b>
3.1 From Needs to Motivations .....	23
3.2 Self-Determination Theory .....	27
3.3 Women’s Motivations for Leisure .....	31
3.4 Women’s Motivations for Physical Activity .....	32
3.5 Categories of Constraints .....	33
3.6 Constraints on Women’s Leisure.....	36
3.7 Constraints on Women’s Physical Activity Participation.....	40
<b>CHAPTER IV</b>	
<b>BODY IMAGE .....</b>	<b>44</b>
4.1 Body Image and Body Image Disturbance – Definitions and Factors.....	45
4.2 Body Image and Physical Activity .....	49
4.3 Self-Determination Theory and Body Image.....	52
4.4 Social Comparison Theory .....	54
4.5 Body Image as a Motivation .....	57
4.6 Body Image as a Constraint .....	59
4.7 Summary .....	61
<b>CHAPTER V</b>	
<b>METHODOLOGY .....</b>	<b>62</b>
5.1 Feminist Scholarship on Women’s Leisure .....	63
5.2 Interpretive Paradigm.....	65
5.2.1 Three dimensions of interpretivism .....	67
5.2.2 Researcher’s bias – my personal story.....	71
5.3 Data Collection .....	73
5.4 Data Analysis .....	78
<b>CHAPTER VI</b>	
<b>PARTICIPANTS PROFILES.....</b>	<b>80</b>
6.1 Similarities and Differences among Participants.....	90
6.2 Definition of Physical Activity .....	91
6.3 Summary .....	93

<b>CHAPTER VII</b>	
<b>MOTIVATIONS AND CONSTRAINTS FOR PARTICIPANTS .....</b>	<b>94</b>
7.1 Motivations for Physical Activity among Interviewees.....	94
7.2 Constraints on Physical Activity among Interviewees .....	107
7.3 Summary .....	111
<b>CHAPTER VIII</b>	
<b>BODY IMAGE FOR PARTICIPANTS.....</b>	<b>113</b>
8.1 “Are You Satisfied with Your Current Weight?” .....	113
8.2 Past versus Present.....	118
8.3 Body Image and its Influence on Physical Activity .....	120
8.4 Factors Affecting Women’s Body Image .....	126
8.5 Summary .....	138
<b>CHAPTER IX</b>	
<b>CONCLUSIONS AND DISCUSSION .....</b>	<b>139</b>
9.1 Summary of Findings and Discussion .....	139
9.2 Theoretical Implications of the Study.....	146
9.3 Practical Implications of the Study .....	148
9.4 Suggestions for Future Research .....	149
9.5 Limitations of this Study.....	150
9.6 Final Thoughts .....	151
<b>REFERENCES.....</b>	<b>154</b>
<b>Appendix A: Recruitment flyer .....</b>	<b>186</b>
<b>Appendix B: Informed Consent form .....</b>	<b>187</b>
<b>Appendix C: Interview Guide.....</b>	<b>188</b>

# CHAPTER I

## INTRODUCTION

The last 40 years has brought many changes to Western societies, especially for women. The actions of the feminist movement and the Civil Rights Act of 1964 allowed women to enter the workforce on equal terms with men. These changes have led to great developments regarding new job opportunities for women and enhanced financial independence. This increase in purchasing power has also given women access to new leisure opportunities. However, social expectations of women's roles in family and society have been slower to change (Bialeschki & Henderson, 1986; Eagly & Karau, 2002). Women are often expected to be superwomen – to be great mothers (or grandmothers), have successful careers and also to look good (Cash, Ancis, & Strachan, 1997; Novack & Novack, 1996; Stormer & Thompson, 1996). These expectations are popularized by the media, especially magazines that focus mainly on appearance and body shape (Buxton, 1998; Johnston & Swanson, 2003). Since the late 1960s, new standards for thinness have been promoted, mainly in Western societies, and those standards are almost impossible to achieve (Silverstein, Perdue, Peterson, & Kelly, 1986; Thompson & Heinberg, 1999). The great pressure for a perfect body may serve as a reason for body image concerns among women, or even as a cause of Body Image Disturbance (BID), which is a dissatisfaction in the perception of one's body that affects the behavior of an individual (Stormer & Thompson). The pressure from society for a perfect body may also serve as one of the main factors affecting women's behavior. Thus, there is a need to explore the connections between body image and its influence on leisure time activities, particularly women's involvement in physical activity.

The way that body image affects leisure choices for women may greatly depend on individual psychological differences. For some women body image may be a constraint that

prevents participation (Liechty, Freeman, & Zabriskie, 2006) or limits their enjoyment of a particular activity (Frederick & Shaw, 1995). However, for other women body image may serve as a motivator to engage in physical activity (Markland & Ingledew, 2007). Thus, the main objective of this study is to examine the influence of body image on participation in physically active leisure for women. Self-determination theory (Ryan & Deci, 2000b) will be used to guide this study. Self-determination theory represents a framework for the study of individual's motivations and personality. Specifically, it focuses on social and contextual conditions that may facilitate or preclude the process of self-motivation (Ryan & Deci). According to self-determination theory there are different types of extrinsic motivations that vary in their level of autonomy (Vallerand, 1997). There also exist different types of constraints (Crawford & Godbey, 1987). Thus, the current study explores the various roles of body image from women's perspectives. An interpretive paradigm will be utilized to achieve this goal, as I believe that an individual's body image is a result of social interactions and it is unique for each woman. Moreover, in this research I will focus on women ages 45 to 64. Although the topic of body image has become popular in the past 20 years, women of this age group remain understudied (Loland, 2000). Also, according to American Society for Aesthetic Plastic Surgery, people age 35 to 50 had the most procedures (45%). People age 51 to 64 were the second largest age group to undergo plastic surgery (26%). Women had almost 92% of procedures (in any age group), and breast augmentation and liposuction were the most popular (ASAPS, 2008). Slevec and Tiggemann (2010) argued that women age 45 to 64 may choose to undergo plastic surgery to meet the unrealistic societal standards of beauty. Thus, it is important to investigate body image issues among women in this age group.

## **1.1 Factors Affecting Physical Activity Participation of Women**

To understand the effect of body image on physical activity of women, there is a need to explore the range of factors affecting physically active leisure. The benefits of regular physical activity are numerous and well documented. Participation in physical activity may improve cardiovascular and coronary health, prevent osteoporosis, reduce frailty, prevent and reduce obesity, and reduce the risk of breast cancer (Hogan, 2005; Manson et al., 2002; Schneider, Bassett, Thompson, Pronk, & Bielak, 2006; Stewart et al., 2005). Moreover, physical activity is reported to positively affect mental health by improving levels of life satisfaction, reduce depressive symptoms and improve self-efficacy (Albert et al., 1995; Motl et al., 2005; Weuve et al., 2004). However, despite people being aware of these benefits, the actual levels of physical activity remain low (Peeke, 2002; Sylvia-Bobiak & Caldwell, 2006). There are several factors that may play a role in people's choices of active leisure. It is reported that women in general are less active than men (CDC, 2006; Dowda, Ainsworth, Addy, Saunders, & Riner, 2003; Lee, 2005). Moreover, physical activity levels tend to decrease with age (Lee). Also, race, social class, marital status, and education level may affect physical activity levels (Crespo, 2000; Marshall et al., 2007). However, it is important to explore a broader set of factors that might affect leisure choices, and physical activity participation in particular. The choices of an individual may be affected by both positive factors such as positive attitudes and motivators (Iwasaki & Havitz, 2004; Losier, Bourque, & Vallerand, 1993), as well as negative factors such as constraints (Hubbard & Mannell, 2001; Shaw, 1994).

People engage in activities to achieve an inner motive or goal (Gleitman, 1986). There exist many psychological needs that an individual strives to satisfy through his or her leisure choices. However, motivation is not a homogenous category, and there is a need to differentiate between intrinsic motivation, extrinsic motivation, and amotivation (Alexandris, Tsorbatzoudis, & Grouios, 2002). Further, Ryan and Deci (2000a, 2000b) divided extrinsic

motivation into four categories that vary in the level of autonomy perceived by an individual – external regulation, introjected regulation, regulation through identification, and integrated regulation. I believe that women classify body image into different categories of extrinsic motivation, depending on their level of perceived autonomy. According to self-determination theory, autonomy refers to “being the perceived origin or source of one's own behavior” (p. 8) (Deci & Ryan, 2004). The level of autonomy depends on individual experiences and perspectives. When autonomous, one perceives his or her behavior as an expression of the self. Even if actions are influenced by others, the individual concurs with those influences, and feels both initiative and value with regard to these actions (Deci & Ryan).

Research reports that women express different motivations for physical activity participation than men (Eccles & Harold, 1991). The most commonly reported motivations by women include health, weight-related motives, stress reduction, enjoyment, and social support (Ebben & Brudzynski, 2008; Huberty et al., 2008; Wilson, Mack, & Grattan, 2008). In the sport literature body image is often reported to be a motive for physical activity (Markland & Ingledew, 2007; Sherwood & Jeffery, 2000). However, in the leisure studies literature body image as a motivator remains limited. An exception was a study by Laverie (1998) that examined the motives for engaging in aerobics, and found the desire to improve body shape was one of the main motives for the majority of participants.

However, women's leisure choices in general, and physical participation in particular, are also determined by constraints. In the leisure literature there are three categories of constraints: structural constraints, interpersonal constraints, and intrapersonal constraints (Crawford & Godbey, 1987). Structural constraints are the factors that intervene between preferences and participation. Interpersonal constraints are the result of social interactions and may affect both preferences and participation. Intrapersonal constraints are connected to psychological states and affect preferences rather than participation (Crawford & Godbey).

Women often encounter specific constraints that are socially constructed. Some of the most commonly reported constraints for women include lack of time, lack of money, problems with transportation, family obligations, and lack of entitlement (Bialeschki, 1994; Harrington & Dawson, 1995; Henderson, 1998; Kay, 1996; Shank, 1986). When discussing physical activity participation, there are several additional constraints mentioned, such as fear of violence, weather, and lack of exercise partners, among others (Booth, Owen, Bauman, Clavisi, & Leslie, 2000; Purath, 2006; Rhodes, Plotnikoff, & Spence, 2004; Tucker & Gilliland, 2007). Further, the majority of studies on body image in the leisure field classify body image as a constraint (Frederick & Shaw, 1995; James, 2000; Liechty et al., 2006). Body image may prevent a woman from participating in physically active leisure or may negatively affect her level of enjoyment. Moreover, body image may be classified as an intrapersonal constraint if it affects preferences, as a result of individual complexes and low self-esteem, or may be classified as an interpersonal constraint if it is a result of social comparisons. As body image is reported to influence women's physical activity participation both positively and negatively, it is important to further investigate its role in connection to leisure time physical activity.

## **1.2 Goals and Objectives of the Study**

This study sought to explore the influence of body image on choices of leisure time physical activity among women aged 45 to 64. Specifically, I wanted to understand the roles of body image as a possible motivator and/or constraint for physically active leisure. Based on self-determination theory I wanted to explore what levels of autonomy were perceived by women who treated body image as a motive for exercising. If women categorized body image as a constraint, I wanted to explore what type of constraint it was for these women.

Specifically, the research questions included:

1. Was body image a constraint and/or a motivator, or was it a non-issue for individual participant?
2. If body image was classified as a constraint – was it an interpersonal constraint connected to social comparison, and/or was it an intrapersonal constraint connected to self-esteem issues?
3. If body image was classified as a motive – what category of motivation did it belong to, based on the taxonomy of human motivation by Ryan and Deci (2000a)?

Also, I wanted to contribute to the existing gap in the leisure research regarding body image among older women, as currently the main focus is on the younger population, primarily college students and adolescents (Morrison, Kalin, & Morrison, 2004; Thompson, Coovert, & Stomer, 1999; Thomsen, Bower, & Barnes, 2004).

### **1.3 Limitations of the Study**

To facilitate the understanding of body image's influence on physical activity levels, this study targeted women between the ages of 45 and 64. Given the purpose of the study, the participants were limited to only those who already exercised. Also, the study was limited to White women only. Women of different races and ethnicities may have different body image issues. Poran (2002) suggested that there are significant differences between White, Black and Latina women's conceptions of beauty, relationships with their bodies, and women's relationships with the cultural standards of beauty and shape. Hall (1998) suggested that African American females had greater level of acceptance and a broader range of body sizes than did White women. Women of different races/cultures may not only have different ideal body types but also may have different perceptions of physical activity. Ransdell and Wells (1998) stated that the promotion of the prospect of losing weight may positively influence the levels of physical activity for White women, but not for Mexican – American women.

According to King et al. (2000), self-consciousness about physical appearance was the second main reason for not exercising among Latina women; however, as Kumanyika, Wilson, and Davenport (1993) suggested, African American women were not affected by society's pressure in that even if they were overweight, they often had a positive body image. Berg, Cromwell, and Arnett (2002) reported that Anglo American women focused mainly on individual motives and benefits of physical activity, whereas Mexican American women focused on social support from family. Also, the appropriateness of physical activity for different cultures might influence the results of the study. For instance, Carter-Nolan, Adams-Campbell, and Williams (1996) and Airhihenbuwa, Kumanyika, Agurs, and Lowe (1995) suggested that African-American women may be concerned about their hair and this might influence their participation.

## **CHAPTER II**

### **PHYSICAL ACTIVITY AMONG WOMEN**

The benefits of regular physical activity are well documented (Johnson, Hodges, & Keller, 2006; Macera, Hootman, & Sniezek, 2003; Warburton, Nicol, & Bredin, 2006).

According to Centers for Disease Control and Prevention (CDC), physical activity may have a positive influence on both physical and mental health (CDC, 1996). Regular physical activity may prevent cardiovascular and coronary diseases (Manson et al., 2002; Pang, Eng, Dawson, McKay, & Harris, 2005; Stewart et al., 2005), decrease frailty (Fried et al., 2001; Hamerman, 1999), increase muscle strength (O'Neill, Thayer, Taylor, Dzialoszynski, & Noble, 2000; Westhoff, Stemmerik, & Boshuizen, 2000), prevent osteoporosis (Bloomfield, 2005; Borer, 2005; Liu-Ambrose et al., 2005), lower obesity rates (Littman, Kristal, & White, 2005; Schneider et al., 2006), improve life-satisfaction (Albert et al., 1995; Weuve et al., 2004), and affect emotional well-being (Arent, Landers, & Etnier, 2000; Motl et al., 2005).

Despite these numerous benefits, physical activity levels in the United States are low and decrease with age (Caspersen, Pereira, & Curran, 2000; Orsini, Bellocco, Bottai, Pagano, & Wolk, 2007), even though knowledge of specific health benefits is apparent (Crombie et al., 2004). Moreover, physical activity levels are lower among women than men, regardless of the age group (CDC, 2006; Dowda et al., 2003; Gordon-Larsen, McMurray, & Popkin, 1999; Lee, 2005; Sylvia-Bobiak & Caldwell, 2006). Factors such as ethnicity and race, marital status, and education level also affect the prevalence of physical activity (Crespo, 2000; Crespo, Smit, Andersen, Carter-Pokras, & Aisworth, 2000; Kamphuis et al., 2008). Thus, there is a need to examine factors influencing physical activity levels specifically for women, as they may experience some unique factors affecting their active leisure.

I begin this chapter with an overview of current literature on physical activity participation among women, with the main focus on middle-aged and older women. Then, I will describe physical health benefits of physical activity such as prevention of obesity and reduction of risk of cardiovascular diseases. In the last part of this chapter I will discuss the connections between physical activity and mental health benefits.

## **2.1 Current Levels of Physical Activity among Women**

Current levels of physical activity are reported to be lower for women than for men, regardless of the age group (Dowda et al., 2003; Sylvia-Bobiak & Caldwell, 2006). The data presented by National Center for Health Statistics is especially worrisome for women over 55 years of age. Only 40% of women in this age group reported engagement in any levels of physical activity (in comparison to over 55% of men of the same age) (Peeke, 2002). According to the Surgeon General Report, about 25% of adults report no physical activity in their leisure time and only 22% of adults engage in vigorous physical activities. Unfortunately, these trends begin early and remain throughout the life span. In a study by Gordon-Larsen et al. (1999) using a nationally representative sample, 40% of female adolescents failed to meet the U.S. Surgeon General minimum guidelines for physical activity, while only 25% of adolescent male participants failed to meet those guidelines. Similar results were obtained by Caspersen et al. (2000), where female respondents reported significantly lower levels of physical activity participation than male respondents, particularly vigorous physical activity. These findings were true for all age groups, with the most significant differences among middle-age women and men. In a study by Lee (2005), older women (age 60 to 75) were significantly less active than men of the same age group. Those results took into consideration the total amount, type, and duration of exercise. Kaplan, Newsom, McFarland, and Lu (2001) in their study on older Canadians reported that only 53% of participants engaged in physical activity, and men age 65

and above were more active than women in that age group. However, Abel, Graf, and Niemann (2001) found no significant differences by gender in physical activity levels. Even though an indicator of sport and exercise showed higher PA levels for men, the indicator of habitual PA (such as walking and biking) was higher for women.

Some studies have focused specifically on women. For example, in a study by Ainsworth (2000), 43% of US adult women were classified as inactive. Moreover, 40% of those who were active were not engaging in levels of PA sufficient to gain health benefits (Ainsworth). Further, Orsini et al. (2007) found that among middle-aged and older Swedish women physical activity levels declined with age. However, the results of some studies contradict the common finding that physical activity levels decrease with age. In a study by Curtis, White and McPherson (2000), middle-aged (35-55) women showed the greatest increase in physical activity participation compared to women of both younger and older age groups over the seven years between interviews.

Physical activity levels have also been reported to be influenced by factors other than gender and age. Historically, race, marital status, education level, and number of children have been validated as affecting engagement in physically active leisure (Cassetta, Boden-Albala, Sciacca, & Giardina, 2007). The relation between race, social class, and physical activity levels was a main focus in a study by Marshall et al. (2007). According to their results, non-Hispanic Black and Hispanic men and women had lower levels of physical activity than non-Hispanic White men and women. Also Crespo (2000) examined the prevalence of leisure time physical activity levels (LTPA) among men and women of three different racial groups: non-Hispanic Whites, non-Hispanic Blacks and Mexican Americans. Regardless of race, women of all age groups showed significantly lower levels of physical activity than did men. However, the prevalence of physical activity was lower among non-Hispanic Black and Mexican American women than among non-Hispanic White women.

Education level also appears to influence physical activity. Chinn, White, Howel, Harland, and Drinkwater (2006) reported people with higher levels of education to be more likely to participate in physical activity and to have more positive attitudes toward physical activity than people with lower levels of education. The results of a study by Marshall et al. (2007) showed similar patterns (i.e. people with lower education level had higher rates of inactivity), however there was little or no difference within the same strata of education between different racial groups. Education moderated the relationship between race and physical activity, particularly for women (Marshall et al.).

Marital status can be another important predictor of physical activity, though the results of studies are not consistent. According to Pettee et al. (2006), older adults who were married were significantly more likely to participate in physical activity than were their single counterparts. However, Burke, Beilin, Dunbar, and Kevan (2004) showed that the transition from being single to either married or cohabiting resulted in an increase in body mass index and a decrease in physical activity levels among both men and women. Similar results were obtained by Lee et al. (2005), where change of marital status from being single (or widowed) to married (or re-married) resulted in lower levels of physical activity. According to Janzen and O'Brien Cousins (1995), single women were generally more active, having more time and higher incomes than married women. Ransdell and Wells (1998) argued that this might be true for predominantly White samples only.

When discussing physical activity it is important to acknowledge that leisure-time physical activity levels may be lower than those reported. According to Warburton et al. (2006), physical activity can be defined as all leisure and non-leisure body movements resulting in an increased energy output from the resting condition. Caspersen, Powell, and Christenson (1985) defined physical activity as “an umbrella concept” that includes exercise, household tasks, occupational tasks, work related tasks, and leisure time activity. Taking such

definitions into consideration, there is a need to clearly differentiate between leisure-time physical activity and those levels of physical activity that may include occupational and household physical activity. In a study by Brownson et al. (2000) on women age 40 and older of different racial/ethnic groups, higher levels of physical activity were reported when occupational physical activity, rather than leisure-time physical activity, was used for analysis. Higher levels of physical activity were also reported by Ainsworth, Irwin, Addy, Whitt, and Stolarczyk (1999) when occupational physical activity and household chores were taken into account compared to results focusing solely on leisure-time PA (Ainsworth et al.) Thus, it was important to establish how participants of this study defined physical activity, as their exercise level was one of the inclusion criteria.

## **2.2 Physical Health Benefits of Physical Activity for Women**

Physical activity is reported to positively affect several aspects of physical health. The most commonly reported benefits for women are connected to the improvement of cardiovascular health, prevention of osteoporosis, and reduction of the risk of breast cancer. The prevention of these diseases may serve as an important motivator for engaging in physical activity for some women. However, if women are already experiencing some symptoms of these diseases, it may constrain their physical activity levels.

### *Improving coronary and cardiovascular health*

Physical activity has been linked to risk and symptom reduction in coronary and cardiovascular diseases. Manson et al. (2002) examined the influence of walking and vigorous exercise on the prevention of coronary and cardiovascular events in a large, ethnically diverse cohort of postmenopausal women. Results indicated that women who walked briskly for three or more hours per week reduced their risk of heart disease by 35% compared to women who walked less frequently. According to Klieman, Hyde, and Berra (2006), regular aerobic

physical activity might significantly increase functional capacity for older adults. Also, physical activity played a role in both primary and secondary prevention of coronary heart disease (CHD) by reducing hypertension, insulin resistance, cholesterol, obesity or glucose intolerance. Pang et al. (2005) examined the influence of an exercise program designed for adults aged 50 and over with chronic stroke. The program lasted for 19 weeks with three one-hour sessions per week. The results indicated that the exercise program significantly improved functional abilities and cardio respiratory fitness. Sugawara et al. (2006) reported that both moderate and vigorous physical activity had positive effects on central arterial stiffness in postmenopausal women. Stewart et al. (2005) examined the differences between combined aerobic and resistance training and the usual physical activity care recommended for individuals with milder forms of hypertension. Adults between 55 and 75 years of age participated in this study. Results showed that there was no difference in the improvement of systolic blood pressure between exercisers and the control group. However, there was a significant improvement in diastolic blood pressure connected with improvements in body composition among exercisers. Mora, Lee, Buring, and Ridker (2006) examined 27,158 healthy American women (mean age 57.4 years). Higher body mass index (BMI) had a stronger negative influence on cardiovascular health than did the lack of physical activity. However, within the groups of the same BMI, higher levels of physical activity were associated with better cardiovascular health (Mora et al.).

#### *Improving quality of life for people with arthritis*

Based on 2003-2005 data from the National Health Interview Survey (NHIS), about 46.4 million adults in the United States suffered from arthritis, and 61% are women, (CDC, 2006). Arthritis is characterized by pain, aching, stiffness, and swelling in and around joints. The most common type, osteoarthritis, is more common in women (Theis, Helmick, & Hootman, 2007). Physical activity is commonly used in the management of patients diagnosed

with arthritis (Cairns & McVeigh, 2009). Layne et al. (2009) investigated the effects of a 12-week community-based strength training program for women age 55 and older. The results of this study showed an improvement in lower body strength and physical functioning for women with arthritis. Moreover, these effects were significantly greater for women who participated in strength training group compared to women from the control group who were asked to continue their usual activities. A similar study was conducted by Hakkinen, Hannonen, Nyman, Lyyski, and Haakinen (2003). The effects of a 21-week strength and endurance program was compared among women with longstanding arthritis (mean age 49), women with early arthritis (mean age 41), and healthy women (mean age 42). The results showed that both early and longstanding arthritis patients could safely improve their maximal strength, walking speed, and aerobic capacity using a strength and endurance training protocol. Moffet, Noreau, Parent, and Drolet (2000) investigated the effects of an eight-week dance-based exercise program for women diagnosed with Class III Rheumatoid Arthritis (persons able to perform usual self-care activities but limited in both vocational and leisure-time activities). Women age 44 to 64 who participated in the exercise program showed an improvement in walking, and were able to increase the intensity of training. Moreover, none of the participants of this study showed any aggravation of joint condition or disease status (Moffet et al.).

### *Preventing osteoporosis*

Physical inactivity is also a risk factor for osteoporosis, a condition that may greatly affect women's lives. World Health Organization (WHO) described osteoporosis as “a progressive systemic disease characterized by low bone density and micro-architectural deterioration of the bone tissue, with a consequent increase in bone fragility and susceptibility to fracture” (WHO Study Group, 1994). In 2002 it was estimated that over 10 million people in the U.S. have osteoporosis (Robitaille et al., 2008). According to Bloomfield (2005), approximately 80% of those who are diagnosed with osteoporosis are women. The threat of

developing this disorder is greatest for White females (Terrio & Auld, 2002). The results of a study by Duchman and Berg (2006) showed that genetics play a key role in determining bone density. However, physical activity levels, especially weight-bearing types of activities, may significantly reduce the risk of osteoporosis (Duchman & Berg). Physical activity as a way to prevent osteoporosis is based on evidence that it could regulate bone maintenance and stimulate bone formation including the accumulation of mineral, in addition to strengthening muscles, improving balance, and thus reducing the overall risk of falls and fractures (Borer, 2005). Moreover, as age-related loss in bone mass is shown to start in middle age (35 or 40 years of age), it is recommended to maintain regular physical activity through the lifespan (Bloomfield; Chan, Anderson, & Lau, 2003). According to Kemmler et al. (2005), participation in a high-intensity exercise program successfully compensated for the negative changes related to menopause for women age 52 to 58. Liu-Ambrose et al. (2005) compared the effects of resistance training, agility training and stretching on reduction of back pain for women with osteoporosis. All three types of exercise programs had positive effects on reducing pain, and resistance training and agility training demonstrated significant influence (57% and 48% respectively) on the reduction in the risk of falling.

### *Reducing obesity*

According to Department of Health and Human Services, obesity rates in United States are alarming. It is reported that over 66% of American adults age 20 years and over are overweight or obese (NCHS, 2006). Obesity is related to all-cause mortality among older and middle-aged adults. Specifically, there are links between obesity and diabetes, hypertension, osteoarthritis, coronary diseases, and congestive hearth failure (Zamboni et al., 2005). Physical activity is imperative in the prevention and reduction of overweight and/or obesity. Recommended levels of physical activity for adults are 150 minutes of moderate-intensity activities a week, or 75 minutes of vigorous-intensity activities a week, or an equivalent

combination of both (CDC, 2008). However, to encourage older people to exercise, CDC stresses the possibility of dividing the recommended daily amounts into several shorter segments of physical activity, and advocates the inclusion of daily living activities (such as walking with a dog) to the recommended time (CDC, 2006).

A study by Littman et al. (2005) was developed to evaluate how the impact of physical activity after age of 45 was related to weight change during a 10 year-period. Almost 8,000 women and over 7,000 men, age 53-57 at the base line participated in the study. Both high-intensity and moderate-intensity activities were associated with less weight gain. The results were independent of diet, smoking and prior weight changes. Schneider et al. (2006) examined the outcome of “10,000 Steps per Day” goal program on 56 obese and overweight older adults. Participants wore pedometers to measure daily levels of activity (walking). Those individuals who achieved the daily goal of 10,000 steps showed significant improvement in body weight, reduction of fat mass, and reduction in hips and waist circumference. Anspaugh, Hunter, and Dignan (1996) showed that women who exercised had lower body weights and BMIs than women who did not engage in physical activity. Moreover, active women had higher perceptions of their overall health and energy levels than their inactive counterparts.

#### *Preventing breast cancer*

Breast cancer is the most frequently diagnosed cancer among women in the United States (American Cancer Society, 2005). Increased mortality rates from breast cancer are associated, among others, with higher body mass index (BMI) and physical inactivity (McCullough et al., 2005). Dallal et al. (2007) examined the association between physical activity levels throughout the life span and the prevalence of breast cancer for over 110,000 females aged 20 to 79. The results showed that long-term strenuous physical activity was inversely associated with the risk of developing breast cancer. According to Friedenreich and Orenstein (2002), women who remain physically active through their life span have 30 to 40%

lower risk of developing breast cancer than their inactive counterparts. Similar results were obtained by Thune, Brenn, Lund, and Gaard (1997). In their longitudinal study, increased levels of both leisure time physical activity and work-related physical activity resulted in lower breast cancer prevalence for women age 20 to 54. Also Kruk (2007) showed that both recreational physical activity and household related physical activity revealed significant reductions in the risk of developing breast cancer. Moreover, according to Friedenreich (2001), physical activity reduced the risk of developing breast cancer to a greater extent for postmenopausal women than for premenopausal women, by lowering their levels of sex hormones. Moreover, PA reduced obesity, which is one of the risk factors for developing breast cancer for postmenopausal women (Friedenreich).

Physical activity cannot only reduce the risk of developing breast cancer but also positively influence the lives of women who were already diagnosed with breast cancer. According to Holmes, Chen, Feskanich, Kroenke, and Colditz (2005), both vigorous physical activity and walking improved the quality of life of breast cancer survivors. Moreover, it reduced the risk of dying from breast cancer, especially among women who developed stage III breast cancer.

### **2.3 Mental Health Benefits of Physical Activity for Women**

In recent years there has been an increased interest in examining the relationship between levels of physical activity and mental health. One aspect that has been examined is psychological well-being (Brown, 1992; McAuley & Rudolph, 1995; Norris, Carroll, & Cochrane, 1992; Paluska & Schwenk, 2000; Ruuskanen & Ruopilla, 1995; Spirduso & Cronin, 2001). According to Netz, Wu, Becker, and Tenenbaum (2005), well-being is a multifaceted phenomenon that can be divided into four components: life-satisfaction and overall well-being (as a global perception), bodily well-being (pain and perception of physical symptoms),

emotional well-being (e.g., stress, tension, depression, anger, confusion, energy, or optimism), and self-perceptions (including self-efficacy, self-esteem, and body image). Research has focused on positive effects of physical activity related to life satisfaction (Wolin, Glynn, Colditz, Lee, & Kawachi, 2007), emotional well-being (Bromberger, Harlow, Avis, Kravitz, & Cordal, 2004; Kritz-Silverstein, Barrett-Connor, & Corbeau, 2001; Slaven & Lee, 1997; Thirlaway & Benton, 1992), and improvement of self-perceptions (Elavsky et al., 2005; Estabrooks & Carron, 2000; McAuley, Elavsky, Jerome, Konopack, & Marquez, 2005).

#### *Improving life satisfaction and overall well-being*

Overall life satisfaction has been defined as the global judgment of a person's life (Diener, 1984). There are many factors that can affect an individual's life satisfaction (e.g., gender, socioeconomic status, social involvement, level of self-esteem or race) (Strine, Chapman, Balluz, Moriarty, & Mokdad, 2008). Wolin et al. (2007) suggested that maintenance of long term physical activity patterns positively influences life satisfaction and quality of life for middle aged and older women. Kallings, Leijon, Hellenius, and Stahle (2008) showed that increases in physical activity levels lead to significant improvement in well-being and quality of life regardless of age and gender.

Stathi, Fox, and McKenna (2002) claimed that physical activity positively affects the overall well-being of older adults through several dimensions, such as developmental, physical, mental, and social well-being. According to Eime, Harvey, Brown, and Payne (2010) socialization during physical activity participation may also positively affect overall well-being of women. Thus, they investigated the relationship between quality of life and the type of physical activity setting (participation in a sport club, participation in gymnasium-based programs, and walking alone or in a group of up to three participants). The results showed that Australian women who participated in club sports (tennis or netball) had higher scores on quality of life indicators than women who exercised only in the gym or women who walked

(Eime et al.). In a study by Villaverde-Gutierrez et al. (2006) women aged 55-72 years who participated in an experimental group exercise program showed an improvement in overall quality of life scores.

Another factor that may lead to a decrease in life satisfaction is menopause. About 80% of menopausal American women reported experiencing negative symptoms (such as hot flashes, irritability, or emotional instability) that compromised their quality of life and life satisfaction (NAMS, 2000). In a study by Elavsky and McAuley (2005) on mid-life menopausal women, physical activity levels were positively associated with life satisfaction. Also Villaverde-Gutierrez et al. (2006) reported a significant improvement in quality of life scores for menopausal women who participated in 12-month exercise program.

#### *Improving emotional well-being*

As emotional well-being is one of the components of life satisfaction, there is a growing body of literature focusing on mood and depression. A meta-analytic review of articles linking exercise with mood improvement was conducted by Arent et al. (2000). Results showed that physically active older individuals have greater increases in global mood compared to their inactive counterparts. Thirlaway and Benton (1992) suggested that engaging in higher levels of physical activity, defined as any type of moderate activity, had a positive effect on mood regardless of sex and age. According to Slaven and Lee (1997), exercise, and aerobic exercise in particular, significantly improved mood for middle-aged women regardless of their menopausal status (pre, peri or postmenopausal). Also Kritz-Silverstein et al. (2001) reported the improvement of mood as a result of exercise for adults aged 50 to 89. A study by Motl et al. (2005) focused on long-term outcomes of physical activity in reducing depressive symptoms. Older adults between 60 and 75 years of age, who were not clinically depressed, were assigned to either a walking group or a toning group. After six months of exercising participants experienced significant decrease in depressive symptoms. This reduction was

maintained even 60 months after termination of the study. Interestingly, physical self-esteem predicted change in depressive symptoms. In this study, physical self-esteem was defined as sport competence, physical condition, and attractive body. Negative physical self-esteem was most strongly related with depressive symptoms at baseline than at 6, 12, and 60 months after the initiation of the intervention (Motl et al.). Such results might be explained by the fact that physical self-esteem is more likely to mediate any antidepressant effects of physical activity than global self-esteem (Fox, 2000). Also, walking has been shown to influence depressive symptoms. One study of Japanese middle-aged and older adults (40 to 79 years of age) who were using pedometers to determine their levels of daily walking showed that increased levels of moderate physical activity may significantly improve depressive symptoms in older adults. However, there was no improvement in middle-aged adults (Fukukawa et al., 2004).

Emotional well-being is especially important for women who, in general, are reported to be more prone to depression than men are (Mirowsky, 1996). According to Harlow, Cohen, Otto, Spiegelman, and Cramer (1999), over 22% of middle-age women reported significant depressive symptoms. The prevalence of depression was higher for widowed, separated, or divorced women, as well as for women with no children. According to Hagey and Warren (2008), the incidence of depression and other psychiatric disorders increases with age. Also, a lengthy menopausal period is associated with higher risk of depression.

However, it should be noted that the results of some studies show no significant relationship between physical activity and depression. According to Cooper-Patrick, Ford, Mead, Chang, and Klag (1997), exercise did not affect the self-reported depression and psychiatric distress for middle-aged adults. Bhui and Fletcher (2000) showed that exercising might have a protective effect on men, but not on women when discussing the risks of depression.

### *Increasing self-efficacy*

Self-efficacy expectations can be defined as beliefs in one's capabilities to successfully carry out behavioral repertoires (McAuley & Blissmer, 2000). In a study by McAuley et al. (2005), 174 participants between 60 and 75 years of age were assigned to either an aerobic activity program or a stretching and toning program. For those individuals who had low levels of self-efficacy in the beginning of the 6-months program, self-efficacy significantly improved over time in both groups. Similarly, Estabrooks and Carron (2000) investigated the influence of four-months of exercise participation on self-efficacy of older adults. Results showed positive outcomes of scheduling exercises into weekly routine after as soon as eight weeks of classes. Also, Elavsky et al. (2005) suggested that physical activity had a positive influence on overall well-being through the increase of self-esteem and self-efficacy. In a study by Yeung and Hemsley (1997), participation in physical activity caused a significant improvement in physical self-efficacy for adult women and men. McAuley, Jerome, Elavsky, Marquez, and Ramsey (2003) examined the role of self-efficacy in long-term exercise behavior of older adults. The results showed significant improvement of self-efficacy scores at 6 and 18 months after the program. Moreover, high levels of self-efficacy predicted long-term maintenance of physical activity. Also, high self-efficacy was strongly related to perceiving exercise as a pleasant and affective experience (McAuley et al., 2003). In a study of obese adults aged 60 and over, participation in exercising interventions resulted in a significant improvement of self-efficacy scores (Focht, Rejeski, Ambrosius, Katula, & Messier, 2005). Similar results were obtained by McAuley, Mihalko, and Bane (1997), where participation in physical activity interventions resulted in higher self-efficacy scores for adults aged 45 to 64. Moreover, improvement in self-efficacy was a strong predictor of self-esteem improvement, especially in perceived attractiveness of the body.

Physical activity may have a positive effect on numerous aspects of both physical and mental health. Research suggests that physical activity reduces risk of cardiovascular diseases, positively affects osteoporosis and frailty, reduces obesity, improves life satisfaction, and reduces depression. However, regardless that people are aware of these benefits, physical activity levels remain low, especially among middle-age and older women. Thus, there is a need to explore broader sets of factors that influence physical activity participation for these groups.

## **CHAPTER III**

### **MOTIVATIONS AND CONSTRAINTS FOR LEISURE**

To better understand the preferences and behaviors of an individual, it is important to conduct research on both positive and negative factors influencing leisure choices (Jackson, 2000). Our choices may be determined by several factors, such as motivations (Ashton-Shaeffer & Constant, 2005; Awaritefe, 2004; Iwasaki & Mannell, 1999; Martinez Lopez, 2003), perceived benefits (Dergance et al., 2003; Jones et al., 2007; Loomis, 2006; Philipp, 1997), availability of the particular activity (Fleury & Lee, 2006; Giles-Corti & Donovan, 2002; Kemperman & Timmermans, 2008; Rodriquez, Vinck, & van der Zee, 2001), or constraints (Bedini & Gladwell, 2006; Henderson & Ainsworth, 2000; Little, 2002; Walker, Jackson, & Deng, 2008). Both motivations for leisure and leisure constraints have been popular topics in leisure research in the past 20 years. It has been noted that women often encounter a specific set of motivations and constraints, and that women may be affected by gender-specific family roles (Bialeschki, 1994; Horna, 1989; Miller & Brown, 2005; Thomsson, 1999), economic situations (Harrington & Dawson, 1995), and/or safety issues (Coble, Selin, & Erickson, 2003; Major, 2008), among others.

I begin this chapter by describing the main theories connected to motivations and constraints on leisure, focusing particularly on self-determination theory and constraints negotiation theory. I will also describe the evolution of research on women's leisure and the motivations and constraints for women's leisure choices.

#### **3.1 From Needs to Motivations**

The early research on motivations focused on identifying a list of motivations for specific types of leisure activities (Henderson, 1981; Knopf, Peterson, & Leatherberry, 1983;

Knopp, Ballam, & Merriam, 1979; Wellman, Dawson, & Roggenbuck, 1982). This type of research remains important for leisure site managers to help understand their customers' needs and provide adequate services (Petrick, Backman, Bixler, & Norman, 2001; Recours, Souville, Griffet, 2004). However, it is argued that leisure motivation should not be perceived simply as a list of reasons to help determine participation in an activity. Rather, motivations should be analyzed as one of the dimensions of leisure choice and behavior (Iso-Ahola, 1979a).

According to Gleitman (1986), most human actions are determined by the existence of an inner motive or goal we intend to achieve through the activity of our choice. Henderson (1981) defined motivation as an explanation of behavior, as people believed that their actions would lead to a desired reward or goal. Ryan and Deci (2000a) simply stated, "To be motivated means *to be moved* to do something" (p. 54). The existence of rewards that come from individual's needs is particularly important when making choices about free time, as sense of freedom and presence of internal rewards are the key elements that define an activity as leisure (Iso-Ahola, 1999).

Neulinger (1974) suggested that leisure is influenced by three main factors: perceived freedom, intrinsic motivations, and goals. Iso-Ahola tested the effects of those factors on perceptions of leisure among undergraduate students (both male and female). The results showed that the presence of all three variables was significant for an activity to be perceived as leisure. However, the subjective perception of leisure is placed on a continuum, where perceived freedom is more important than intrinsic motivations or final goal (Iso-Ahola, 1979b). Interestingly, intrinsic motivation, operationalized in terms of feelings of competence and self-determination, influenced females' perception of leisure more than it influenced males' perception. A possible explanation was that females might have a higher need to satisfy such feelings of competence outside work (Iso-Ahola). Lawler (1973) formulated the expectancy-value model which suggests the individual's pursuit of particular outcomes served

as a motivation for engaging in specific leisure activities. Moreover, an individual learned which specific leisure activity afforded the best way of satisfying one's needs, and then the individual tended to choose that activity most often. The results of a study by Kyle, Absher, Hemmitt, and Cavin (2006) confirmed the significance of a relation between motivations and enduring involvement.

People are motivated by many basic psychological needs they want to satisfy through leisure activities. Crandall (1980) suggested that needs, if fulfilled through an activity, would lead to a greater satisfaction from a particular leisure experience. Mills (1985) connected categories of needs/ motivations with Maslow's theory of needs hierarchy (1943). According to Maslow, there exists a certain hierarchy of needs. At the bottom of the pyramid are physiological needs. Once they are satisfied, a human being looks for satisfying safety, love and affection, and esteem. At the top of this pyramid is a need of self-actualization (e.g., creativeness). Leisure activities were seen to be connected with esteem (or rather self-esteem), motivational needs, and safety needs for certain types of activities (Mills). Hirschman (1984) focused on determining masculine and feminine types of needs. She based this typology on the notion of "absorbing experiences" such as viewing a movie or reading a novel. According to the definition, absorbing experiences were usually passive and were classified as feminine. Needs such as Fun/Pleasure, Escape Reality, Deep Involvement were included in the feminine category, whereas Physical Stamina, Perfecting Performance and Competitiveness were anticipated as masculine.

As there are many needs and goals people want to achieve through engaging in an activity, educational psychologists divided motivations into two main categories. Extrinsic motivations are often described as external rewards for achievement, while intrinsic motivation is defined as the pleasure and/or satisfaction coming from the performance of an activity (Deci, 1975). The notion of intrinsic motivation was used as early as 1918 (Woodworth, 1918). The

phenomenon of intrinsic motivation was initially employed to study animal behavior (Harlow, 1950; White, 1959). It was noticed that similar spontaneous behaviors such as being active, readiness to learn and explore, and playfulness, even in the absence of specific rewards, can be seen in human beings (Ryan & Deci, 2000a), especially children (Harter, 1978). Such behaviors resulted in an experience of enjoyment and interest, and the feeling of competence and self-determination (Cameron & Pierce, 1994). The notion of intrinsic motivation is especially important in the leisure research area (Russell, 2002). Intrinsic motivation can be enhanced by feelings of competence, a sense of autonomy, and positive feedback about the performance (Deci, 1971; Harackiewicz, 1979). However, the intrinsic motivation can be reduced by the existence of external rewards, negative performance feedback, and the existence of deadlines, threats, directives, and competition pressure (Amabile, DeJong, & Lepper, 1976; Koestner, Ryan, Bernieri, & Holt, 1984; Lepper, Greene, & Nisbett, 1973).

Even though intrinsic motivation is important to determine a truly leisure experience, it is not the only type of self-determined motivation (Deci & Ryan, 1985). Extrinsic motivation can have a positive effect on participation in many activities, including leisure activities (Ryan & Connell, 1989). In a study by Mannell, Zuzanek, and Larson (1988) participants engaging in activities for extrinsic reasons perceived those activities as the most intrinsically rewarding. This effect may be achieved by engaging in activities that result in challenging individual's skills and therefore producing a sense of achievement (Mannell et al.). Also, the results of studies by Harackiewicz (1979), Ryan (1982), and Ryan, Mims, and Koestner (1983) showed that under certain circumstances extrinsic rewards may enhance intrinsic motivations. Cameron, Banko, and Pierce (2001) argued that extrinsic rewards might have different effects on intrinsic motivation under different moderating conditions. Interestingly, if there was a low initial interest in a task, the existence of external rewards had a positive effect on motivation. This finding indicates that rewards can be used to enhance time and performance that initially

hold little enjoyment (Cameron et al.). For the activities where the initial level of interest was high, verbal rewards had a positive effect on motivation, and unexpected rewards had no effect on motivation (Cameron et al.). However, Eisenberger and Shanock (2003) argued that rewards have positive effect on intrinsic motivations only for novel performance, whereas rewards for conventional performance decrease intrinsic motivation and creativity.

### **3.2 Self-Determination Theory**

Ryan and Deci (2000a) argued that some activities people engage in are not interesting and/or enjoyable. However, some are still motivated to engage in such activities for many reasons. According to self-determination theory, people are naturally motivated to internalize the regulation of uninteresting activities if those activities are being perceived as important (Deci, Eghari, Patrick, & Leone, 1994). Thus, extrinsic motivation should not be treated as opposite of intrinsic motivation. Rather, motivation should be perceived as an intrinsic-extrinsic continuum (Mullan, Markland, & Ingledew, 1997), where high levels of self-determination are related to intrinsic motivation, and low levels of self-determination indicate extrinsic motivation (Deci & Ryan, 1985). As a result, an activity can have the elements of both types of motivation (Iso-Ahola, 1999). One of the studies focusing on this issue was conducted by Shaw and Dawson (2001). They argued that family leisure is mostly perceived by parents as “purposeful” (i.e., leading to an achievement of specific short- and long-term goals), rather than intrinsically motivated. Despite the fact that often family leisure lacked the elements of enjoyment and free choice, the activities parents engaged in with children brought them high levels of satisfaction (Shaw & Dawson).

According to self-determination theory, there exist different types of extrinsic motivations that vary in their levels of relative autonomy (Vallerand, 1997). These different types of extrinsic motivation can involve personal endorsement and feelings of choice (Ryan &

Deci, 2000b). The typology of extrinsic motivation depends on the type of internalization of a particular motivation (Deci et al., 1994). There exist two different processes of internalization – introjection and integration (Ryan, 1993). Introjection is the type of internalization where the value is being recognized as important, but the individual does not identify with it and does not accept it as her/his own. Moreover, there is no need for the presence of external source of motivation, as the motivation has already been internalized (Pelletier et al., 1995). The behaviors are reinforced through internal pressures such as anxiety or guilt (Vallerand, Fortier, & Guay, 1997). The other type of internalization is integration. If an individual comes to judge the behavior as important, she/he comes to value it and performs it out of individual choice. Even though the activity is still performed for extrinsic motivations, it becomes self-determined and internally regulated (Vallerand et al., 1992).

Based on the level of autonomy within extrinsic motivation and the type of internalization, Ryan and Deci (2000a) classified extrinsic motivations into four categories presented in Figure 1 “Taxonomy of human motivation”.

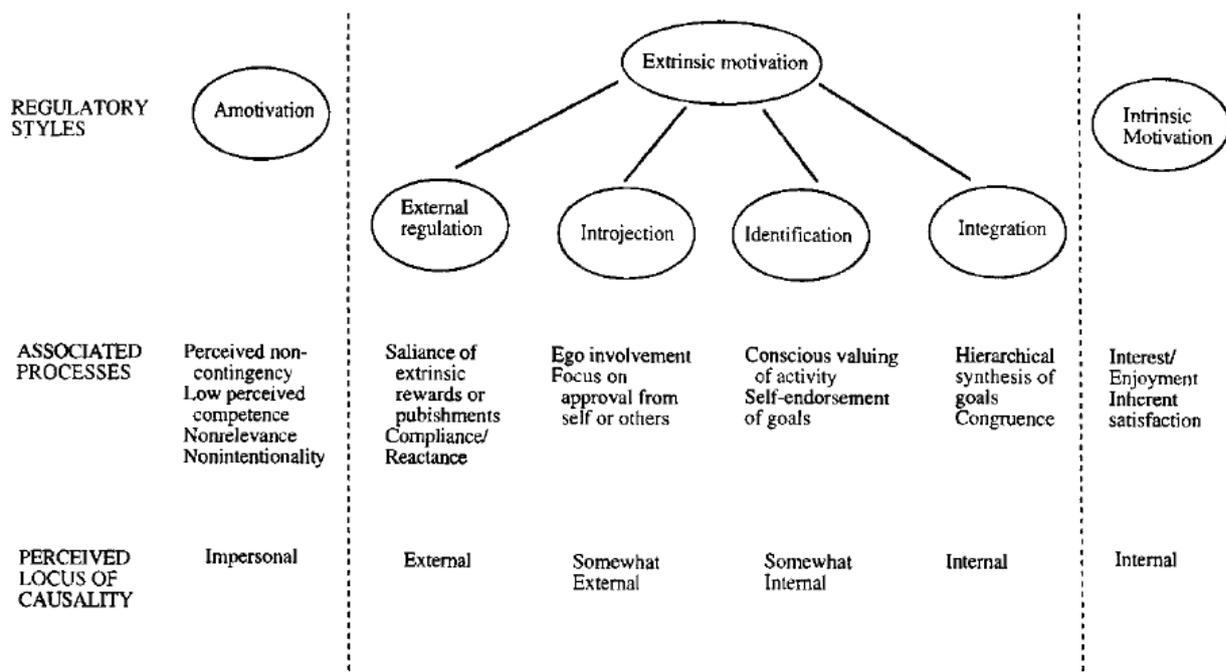


FIG. 1. A taxonomy of human motivation.

Source: Ryan, R.M., & Deci, E.L. (2000). Intrinsic and extrinsic motivations: Classic definitions and new directions. *Contemporary Educational Psychology*, 25, p.61.

External regulation is the least autonomous form of extrinsic motivation. The actions are performed to either satisfy the external demand or to obtain an external reward. The behavior is controlled or alienated (Ryan & Deci, 2000a; Wang, Chatzisarantis, Spray, & Biddle, 2002). Introjected regulation describes the situation where there is great pressure, such as guilt or anxiety, to perform an action. Activities performed to enhance or maintain self-esteem are perceived to be introjectedly regulated (Ryan & Deci). Regulation through identification is a type of extrinsic motivation, where there is a strong identification with the importance of the action. This identification is usually based on the utility of a behavior (Eccles & Wigfield, 2002). The regulation is accepted by an individual as her/his own, as the action is perceived to help achieve a specific goal (Ryan & Deci). Integrated regulation is characterized by high levels of autonomy, where the regulations had been fully internalized and the action became self-determined (Ryan & Deci).

Self-determination theory has been widely applied to study motivations for physical activity (Cresswell & Eklund, 2005; Gagne, Ryan, & Bargmann, 2003; Standage, Duda, & Ntoumanis, 2005; Wang et al., 2002; Wilson, Rodgers, Blanchard, & Gessell, 2003; Wilson, Rodgers, & Fraser, 2002). Gagne et al. investigated the influence of parent and coach autonomy support on the motivations of gymnasts. The results showed that parent involvement had a negative effect on motivation, as it was perceived as pressuring. However, the coach involvement had no negative effects on motivation and had a positive effect on self-esteem. In a study by Wang et al., high motivation toward physical activity among boys and girls aged 11 to 14 was characterized by high task and high ego orientation, and high perceived competence. Dacey, Baltzell, and Zaichkowsky (2008) used self-determination theory to study motivations for physical activity among adults aged 50 to 79. According to the results, self-determined extrinsic motivations were positively associated with more physical activity behavior. In the leisure studies field, Alexandris et al. (2002) used self-determination theory and constraints negotiation theory to explore the connections between constraints and intrinsic motivations, extrinsic motivations, and amotivation for participation in recreational sports. In a study of adults who reported participation in physical activity, only intrapersonal constraints negatively influenced people's motivations. Intrapersonal constraints predicted amotivation, accounting for 38% of its variance. Also, intrapersonal constraints predicted intrinsic motivation, accounting for 15% of its variance. There was no significant relationship between the other types of constraints and amotivation, or between any types of constraints and extrinsic motivations. The results of their study showed that when examining physical activity, there is a need to explore not only positive factors (motivations), but relate them to negative factors (constraints) as well.

### **3.3 Women's Motivations for Leisure**

Women and men are often affected by different factors when choosing their leisure activities (Bernstein, 1999). Walker, Hinch, and Weighill (2005) explored the similarities and differences between genders related to motivations for casino gambling. Five motivations were explored: taking the risk, learning, escaping everyday problems, communing, and emotional self-classification. Males and females differed significantly in terms of motivations for gambling. Males considered risk taking and learning to be most important, whereas emotional self-classification was the most important motive for females. The results did not support the hypothesis that escaping from everyday problems was important for females as well. In a study by Lee, Graefe, and Li (2007) about motivations for canoeists, results shown that while men placed importance on visiting new sites, women considered social contact, relaxation and experiencing nature as their main motivations. Schroeder, Fulton, Currie, and Goeman (2006) investigated the differences among men and women who participated in recreational fishing. Men rated the factors related to using skills and knowledge and catching trophy fish higher than did women, whereas women rated factors related to catching fish for food higher than did men. There were no gender differences in social motives and the factor related to appreciating nature.

Some researchers focused solely on women's motivations. Chiang and Jogaratnman (2006) identified women's motivations for traveling alone for leisure purposes. Experience, escape, relaxation, social interactions, and self-esteem were identified as important motivators for women. Interestingly, relaxation was the least important among these five reasons. Allen and Shaw (2009) examined the motivators for women who served as coaches in sport organizations. Autonomy and competence development were identified as the most important reasons to coach sport teams. Dilley and Scraton (2010) focused on climbing as a serious leisure activity for women. The results of this study showed that developing a strong, muscular

body, achieving fulfillment, and developing social connections with climbing partners served as important motivators for this type of leisure activity.

### **3.4. Women's Motivations for Physical Activity**

The differences between motivations for men and women are particularly visible when discussing the predictors of physical activity participation (Sallis, Prochaska, & Taylor, 2000). In a study by Biddle and Bailey (1985), women rated tension release and social factors as top reasons for participation in a fitness class, whereas men participated to improve health and overall fitness. Frederick and Ryan (1993) examined how participation motivation for adults varied by sex of participant and type of activity. The results showed that interest, enjoyment, and competence were important motivators for individual sports, whereas fitness activities were associated with body-related motivation. When exploring gender differences, body-related motives such as improvement of physical appearance were important for women, but there was no difference between sexes in the significance of competence, interest, and enjoyment. Summers, Machin, and Sargent (1983) investigated motivations for marathon running for males and females aged 14 to 61. The results showed that maintaining and improving fitness and weight loss were the most commonly reported motivations for beginning running, especially for women. Feeling of achievement was identified as the second most important reason for running. However, participants of the study reported different set of motivators for participating in a marathon. Goal achievement and test of personal worth were the most important reasons, regardless of gender of the participant.

There are several categories of motivations for physical activity among women identified in the literature – health benefits, recuperation/relaxation, enjoyment and fun, and social support, among others. Cash, Novy, and Grant (1994) investigated reasons for exercise among women who were already physically active. Appearance and weight management,

fitness and health management, stress management, and socializing were identified as the most important reasons to exercise. According to Nies, Vollman, and Cook (1998), weight reduction, reduction of stress, and personal enjoyment were the most important motivators for European American women to engage in physical activity. Also, social support in the form of encouragement and positive reinforcement was an important motivator. Trujillo, Brougham, and Walsh (2004) reported health benefits to be the most important reasons for women to engage in physical activities regardless of age. Also, in a study by Segar, Eccles, Peck, and Richardson (2007), middle-aged women reported health benefits to be a primary reason for exercising. However, 40% of participants perceived physical health outcomes to be the most important reason for engaging in PA. Only 26% of participants reported the goal of improving mental health and mood as the primary reason for exercising. The results of a study by Wiley, Shaw, and Havitz (2000) showed that women placed more importance on enjoyment than they placed on competition and individual achievement when participating in sports. Social support may serve as another important motivator. Eyler et al. (2002) found social support to be particularly important for females while engaging in physical activity. Similar results were obtained by Walker, Pullen, Hertzog, Boecker, and Hageman (2006). High levels of social support, both from peers and family members, had a significant positive influence on healthy lifestyle behaviors (such as exercising and healthy eating) for rural middle-aged women.

### **3.5 Categories of Constraints**

Constraints are “factors that are assumed by researchers and perceived or experienced by individuals to limit the formation of leisure preferences and to inhibit or prohibit participation and enjoyment in leisure” (Jackson, 1997, p. 461). “Constraints are factors that may prevent, reduce or modify participation, or may adversely affect the quality of enjoyment of leisure activities” (Shaw, 1999, p. 274).

Research on factors that prevent or constrain leisure has evolved during the past 25 years (White, 2008). The initial phase of this line of research focused on the barriers to participation in activities, with the assumption that the existence of barriers led to non-participation (White). Most of the research focused on identifying a specific list of barriers toward participation (Jackson, 1988). In the next phase researchers tried to develop some conceptual classifications of constraints. Francken and van Raaij (1981) identified a category of internal constraints that included interests, abilities, and knowledge, and external constraints, such as lack of money, lack of time, or lack of facilities. Boothby, Tungatt, and Townsend (1981) divided constraints into personal constraints and social constraints. According to Jackson that classification corresponded to the internal/external classification. A study by Crawford and Godbey (1987) may be perceived as one of the most important contributions to changing perceptions on leisure constraints. The authors suggested that constraints may affect not only participation (or non-participation), but also the preferences of an individual. They divided leisure constraint into three categories – intrapersonal, interpersonal and structural. Intrapersonal constraints, such as stress, depression, attitudes, or socialization into specific activities, are connected to psychological states and affect leisure preferences. Interpersonal constraints are the result of social interaction with family, friends, and others. This type of constraints may affect both preferences and participation. Structural constraints are the factors that intervene between preferences and participation. Lack of money, lack of time, or lack of opportunities belong to the category of structural constraints (Crawford & Godbey).

However, some researchers suggested that the presence of constraints may not necessarily prevent or reduce participation in leisure activities (Scott, 1991; Shaw, Bonen, & McCabe, 1991). Based on those results, the concept of constraints negotiation was introduced by Jackson, Crawford, and Godbey (1993) to explain how leisure constraints can be navigated or overcome. According to this framework, participation in leisure may occur even in the

presence of constraints, as people may negotiate these constraints. Moreover, the negotiation process depends on the strength of motivations, and the interactions between constraints and motivations for an activity (Jackson, Crawford, & Godbey). In 2001 Hubbard and Mannell tested four different models of relations between constraints, negotiation, motivations, and participation – Independence Model, Negotiation-Buffer Model, Constraint-Effects-Mitigation Model, and Perceived-Constraint-Reduction Model. According to the results, only the Constraint-Effects-Mitigation Model received strong support. However, it is important to note that motivation had the greatest effect on participation indirectly, when positively affecting negotiation resources and strategies. Moreover, only intrinsic motivations (enjoyment and health) were tested in this study (Hubbard & Mannell).

Both the constraints theory and constraints-negotiation theory have been used in leisure research to explain participation in physical activity (Son, Mowen, & Kerstetter, 2008) as well as other types of leisure (White, 2008). Jackson and Rucks (1995) identified strategies of constraint negotiation among 425 junior high school and high school students. Three categories of leisure activities were utilized in this study: competitive sports activities, non-competitive physical health and exercise activities, and a general class of other activities. Students were asked to identify constraints that affected their participation in these leisure activities. The participants were then asked to identify strategies they used to overcome constraints to leisure. These strategies included: cognitive strategies (e.g. accept inadequacies, ignore problems, try harder), and behavioral strategies (e.g. modify time, acquire skills, change interpersonal relations). The results showed that both categories of strategies were used to adapt to or alleviate constraints, however the use of behavioral strategies was more popular (Jackson & Rucks). In a study by Little (2002), women discussed constraints to participation in adventure recreation, as well as strategies to negotiate continuing participation. Prioritization,

compromise, and broadening the perspective on the category of creative adventure were identified as the most popular negotiation strategies (Little).

### **3.6 Constraints on Women's Leisure**

In the literature from the leisure studies area there has been a development of research on constraints that affect women only. These constraints are related to women's socioeconomic status and their roles of mothers and caregivers in the society. Most commonly identified constraints include lack of time/double shift, employment status and monetary constraints related to it, and ethic of care.

#### *Lack of time / Double shift*

Lack of time is reported to be one of the main structural barriers to leisure activities, regardless of gender, age or ethnicity. Even though time may be an important constraint for everybody, some researchers concluded that there exist significant differences in time for leisure between men and women. Women in Western societies are expected to fulfill the roles of mothers and wives while pursuing successful careers. In many cases it means that women experience a so called “double shift” – after a day of work they are supposed to come back home and take care of the household (Henderson, 1998). This double shift often means that women have less time for leisure than men and also that their time is fragmented (Kay, 1996).

In a study by Firestone and Shelton (1994), employed men spent more time at work while employed women spent more time on household tasks. As a result, there was no difference between these two groups in the amount of leisure time. However, unemployed women had less leisure time than unemployed men. Shaw (1985) also compared males and females. According to her results, women experienced significantly less time for leisure on weekends than males. The difference between genders for weekdays were small, but it was women who reported to have more obligations. In a study by Dattilo, Dattilo, Samdahl, and

Kleiber (1994), women, mostly African-American of low income, reported lack of time caused by household obligation as a major constraint for leisure.

*Employment status / Money constraints / Transportation*

There are several constraints connected to women's employment status. For example, Harrington and Dawson (1995) compared constraints for leisure reported by women divided into three groups based on their employment status – full-time workers, part-time workers, and unemployed women who described themselves as homemakers. The study showed significant differences between the types of constraints reported by each group. While full-time workers perceived lack of time and fatigue as the most important factors influencing their leisure, homemakers focused more on intrapersonal factors such as lack of skills, low self-image, and fear. Harrington and Dawson reported part-time workers to “have it best.” This group of women had more time and were less tired after work than full-time workers. At the same time, being employed gave women the sense of independence, competence and assertiveness, something unemployed women lacked.

The employment status of women may have a significant effect on women's leisure choices, not only because of the time factor, but also because monetary constraints may play a role in female's lives. Women are reported to earn less money than man working in the same position. Also, lack of money can translate into lack of transportation as a constraint. A study by Riddick (1985) focused on leisure constraints for older individuals (age of 65 and above). According to the analysis, only females perceived transportation constraints to negatively affect their leisure and life satisfaction. However, the results of Jackson and Henderson (1995) study showed that lack of transportation was reported as a constraint by both males and females, and there was no significant difference between genders.

### *Ethic of care / Lack of sense of entitlement*

Family obligations, ethic of care and lack of sense of entitlement to leisure are all connected to women being mothers and wives (Henderson & Allen, 1991). Bialeschki (1994) found that women with dependent children not only had less time for leisure, but for many of them the meaning of leisure changed once they became mothers. Instead of focusing on their own free time, women enjoyed activities in which their children and spouses were involved. However, some of the interviewees still expressed the need of “time for yourself” (p. 63). Another theme that emerged from this study was that once the children started to be independent, women went back not only to their professional careers, but also to the leisure activities they enjoyed before they became mothers. Moreover, many women reported the constraints connected to being a mother. Lack of time, lack of appropriate child care and lack of entitlement to leisure significantly reduced women’s leisure. The main reason for such attitudes and behaviors was seen in patriarchal ideology that imposed societal expectations on mothers’ roles. Bialeschki reported the “ethic of care” has a double role. Some women reported reduced satisfaction from leisure as they were doing it for somebody else (children), while others interpreted ethic of care as self-care that they were entitled to.

Similar results were obtained by Miller and Brown (2005). For the majority of participants ethic of care was a significant constraint on engaging in leisure (and physically active leisure in particular), as finding time for themselves was often perceived as “being selfish” and reducing the time for family leisure. However, those participants who were already physically active perceived engaging in exercise as a positive factor serving the entire family. By improving their individual health, women believed to not only improve the overall health of the entire family by providing better parenting skills, but also served as a role model.

Horna (1989) examined the influence of becoming/being a parent on leisure time of married couples. She found that the arrival of the first child influenced types of leisure

activities for both spouses. Leisure time became more sedentary, majority of activities took place at home, and social contacts were reduced to contacts with family and friends with children of approximately the same age as those of respondents. However, some of the activities were reported to change their meanings for individuals. For example, more fathers than mothers viewed their games with children as leisure, where more mothers than fathers perceived such activities as semi-leisure, as most mothers experienced more of the obligatory aspects of the parental role during this time. The analysis of time-budget diaries showed that women spent more time with children than men did (Horna).

Using time-budget diaries Shaw (1992) found that mothers were more likely than fathers to combine a household task with family leisure activity. Also, mothers spent significantly more time with children than fathers, even when they were employed full-time. Shank (1986) interviewed 12 women who pursued professional careers and had children under the age of 13. Half of those women were married and half were single mothers. Regardless of marital status all women found it difficult to have a dual career and find time for leisure. All but one participant perceived leisure to be an important factor of psychological well-being. Also, all participants expressed feeling guilty for having any leisure if it did not involve their children. Henderson and Bialeschki (1991) conducted 21 interviews with women of different age (from 25 to 50 years old), different marital status and different roles in life (mothers, single mothers, women with no children). Surprisingly, all women expressed a sense of entitlement to leisure. However, regardless of marital status, interviewees perceived being mother as a restriction on leisure. Single mothers felt the least right to have leisure because of time constraints.

Witt and Goodale (1981) examined the barriers to recreation with family stages, where gender was treated as one of the variables. Results of this study showed that both parents reported several barriers to be the strongest when the youngest child was leaving home. Not

having somebody to do things with and lack of knowledge about leisure opportunities prevented both parents from participation in leisure. Time constraint, caused by “too many family obligations,” was less important for males when the child left home than for females, who still reported time as a major leisure constraint. Moreover, stress as a factor affecting leisure in a negative way increased through the whole family life, even when the youngest child left home. Stress was more important for females than for males.

Some may argue that women who are over 50 years old are not affected by family to a great extent, as children may have already left home. However, one needs to notice that our society is changing and women often decide to pursue a career first, before having a family. Thus, women are having children at a more advanced age. Thus, being 50 years old does not necessarily mean that children are not at home. For example, Thomsson (1999) interviewed 50 Swedish women, age 20 to 60 years old, about their attitudes toward exercise. None of the participants were engaging in regular physical activity. Family orientation was the main constraint. Middle-aged women were not only taking care of their children and husbands, but also of their parents or parents-in-law, and those who were older were taking care of grandchildren. According to Brown, Lee, Mishra, and Bauman (2000) women who are mothers of young children have lower levels of physical activity participation than women of similar ages who do not have any children. Brown, Brown, Miller, and Hansen (2001) conducted research on mothers with young children. The majority of participants expressed a desire to engage more in physically active leisure, however, a set of constraints connected to their role of mothers prevented them from doing so.

### **3.7 Constraints on Women’s Physical Activity Participation**

There is a growing body of literature that focuses specifically on correlates of women’s physical activity participation. For example, Eyler et al. (2002) divided them into intrapersonal

factors (sociodemographics, biological and health factors, and psychological factors) and environmental factors (social environment and physical environment and policy). Similar classification was introduced by King et al. (2000). In this study factors associated with physical activity participation were divided into sociodemographics, health related factors, psychosocial variables, program based variables, and environmental factors. According to Wilcox, Castro, King, Housemann, and Browson (2000), determinants of leisure time physical activity could be divided into sociodemographics, health related variables, psychosocial and environmental factors, as well as physician advice to exercise. Regardless of the classification, the results of these studies showed that each variable can have a positive or negative influence on physical activity levels.

In a study of female adults aged 18 to 69, lack of energy was a significant factor influencing physical activity participation (Purath, 2006). Lack of energy was reported to be the fourth most important perceived barrier for physical activity among White women in a study by King et al. (2000). Also Trost, Owen, Bauman, Sallis, and Brown (2002) classified fatigue as an important constraint to physical activity, especially among older adults. Similar results were obtained by Rhodes et al. (2004). In a study by Eyler, Brownson, Bacak, and Housemann (2003), feeling unhealthy and feeling too tired were reported as the two most important constraints for walking. Also Courneya and Hellsten (1998) reported lack of energy as the second most important constraint to physical activity, regardless of the personality type of participants.

According to Burdette, Wadden, and Whitaker (2006), certain characteristics of neighborhoods such as perceived lack of safety may influence physical activity levels by leading people to spend more time indoors. According to Center for Disease Control and Prevention, a significant portion of physical activities takes place in public spaces, but the perception of lack of safety in those spaces prevents people, women in particular, from

participation (CDC, 1999). In a study by Booth et al. (2000) perceived neighborhood safety was an important issue for older adults, regardless of their level of participation in physical activity. Also King et al. (2000) reported lack of safe place to exercise as an important barrier in a study on middle-aged and older-aged women.

According to Tucker and Gilliland (2007), seasonal differences and variations in weather may significantly influence physical activity behaviors. In a study of physical activity participation of women 50 years or older, weather conditions observed before the exercise class, such as heat, wind chill, snowfall, or overcast skies were associated with lower participation in the exercise class (Tu, Stump, Damush, & Clark, 2004). Bad weather was also mentioned as one of the most important constraints for physical activity among middle- and older-aged American women in a study by King et al. (2000). In a study by Currie and Develin (2002) of middle-aged Australian women, poor weather, together with lack of time and poor quality paths were the most important factors preventing women from physical activity participation. Also in a study by Wilcox et al., (2000) on women aged 40 years and older, weather was reported as an important barrier for physical activity participation for both rural and urban women.

Women are not supposed to participate in certain (unfeminine) activities or they are perceived as tomboys (girls) or sexually unattractive (women). As Jackson and Henderson (1995) argued: “gender does not just refer to whether one is biologically male or female, but encompasses the social expectations and cultural definitions associated with one’s biological sex” (p. 33). Shaw (1994) suggested that there are not only constraints for women’s leisure, but leisure can be constraining to women in their lives as well. The representations of women shown in media may affect females’ position in society, as women are very rarely shown in the positions of power. Those representations might result in stereotypical images and indicate that women are not supposed to participate in certain sport activities.

Women encounter a specific set of factors that may affect their leisure participation. These factors, both positive and negative, may be especially important when discussing physical activity participation. In the leisure area there has been extensive research on numerous motivators and constraints related to women and their roles in society. However, the research on the role of body image as a both positive and negative factor remains limited. Thus, there is a need to explore the influence of body image on women's leisure participation.

## CHAPTER IV

### BODY IMAGE

High levels of body dissatisfaction and disordered eating generally are attributed to sociocultural factors (Gershon, Gowen, Compian, & Hayward, 2004; McCabe & Ricciardelli, 2003; Trottier, Polivy, & Herman, 2007; Tsai, Curbow, & Heinberg, 2003). Societal standards nowadays emphasize the need for thinness. The images of women presented in the media have come progressively thinner in the past few decades (Botta, 1999; Groesz, Levine, & Murnen, 2002; Wiseman, Gray, Mosimann, & Ahrens, 1992). Thompson et al. (1999) argued that the exposure and internalization of idealized media images may affect an individual's body image.

Even though the leisure research focusing on physical activity (PA) has greatly expanded during the past 20 years (Green, Smith, & Roberts, 2005; Henderson & Ainsworth, 2002; Laverie, 1998; Readeke & Burton, 1997), the research on connections between body image and physical activity levels remains limited. Moreover, the majority of this research that has been conducted is on young females / college students (Frederick & Shaw, 1995; James, 2000; Liechty et al., 2006), while little has been published on male body image, body image of women of color, or body image of middle-age and older women. Traditionally, body image has been presented as a constraint for women (Frederick & Shaw; James; Liechty et al.). However, some authors described the motivational role of body image while engaging in physical activity (Gillison, Standage, & Skevington, 2006; Laverie).

In the first part of this chapter I will discuss the concept of body image and describe factors affecting body image. I will also describe the consequences of body image disturbance. Then, I will explore the connection between body image and physical activity. Also, I will discuss self-determination theory and social comparison theory as they relate specifically to

body image. In the last part of this chapter I will discuss the role of body image as a constraint or motivator for leisure, and physically active leisure in particular.

#### **4.1 Body Image and Body Image Disturbance – Definitions and Factors**

Body image is an integral part of body esteem and overall self-worth concepts (Davis, 1997), and it refers to an individual's personal view of her/his own body (Rodin, 1992). Body image is a multidimensional construct that can be defined in terms of four dimensions: perceptual, cognitive, affective, and behavioral (Lox, Ginis, & Petruzello, 2006). The perceptual dimension refers to an individual's perception of her/his own body. Because it is a perception, it may or may not reflect reality (Depcik & Williams, 2004). The cognitive dimension reflects how an individual thinks and evaluates the body in terms of appearance and function. The affective dimension reflects feelings about the body (e.g., pride or anxiety), while the behavioral dimension represents the actions reflected by positive or negative perceptions (choice of an outfit, engagement in specific activities) (Lox et al.). Cash (1994) suggested another set of dimensions. He postulated that body image evaluation refers to the level of satisfaction with one's body as well as thoughts and beliefs about appearance. Body image affect refers to emotional experiences caused by self-evaluations, and finally, cognitive-behavioral investment refers to behaviors involving the management of individual's appearance (Cash).

The difference between subjective perception of the body and the objective size of the body has been referred to as body image disturbance (BID) (Davis, 1997). BID may be defined as a disturbance in the way a person thinks, feels, or perceives her/his body. BID also describes how the discrepancy between real body shape and the perception of one's body influences the behavior of an individual (Stormer & Thompson, 1996). There are several factors influencing

both body image and body image disturbance. The most commonly studied are body size and composition, gender, age, and race/ethnicity.

### *Body size and composition*

There are several objective measures to evaluate an individual's body and its size. The most popular measurements are Body Mass Index (BMI), body fat percentage, waist-to-hip circumference ratio, and frame size (Masheb & Grilo, 2003; Morrison et al., 2004; Tiggemann & Lynch, 2001; Trottier et al., 2007). There also exist several subjective measurements of the difference between the actual and ideal body size. The most popular assessment methods belong to the visuospatial category. There are several examples of visuospatial methods. The most common are manipulation of photographs, video images, mirror images, or sets of drawings that represent the same body shape in different sizes. The participants are usually asked to decide which drawing or photograph represents their actual body and their ideal body (Collins, 1991; Counts & Adams, 1985; Furnham & Alibhai, 1983; Rodin, 1992; Sands, 2000; Singh, 1993; Tiggemann, 1996). There are also several questionnaires that assess subjective perception of the body. The most popular are the Body Esteem Scale (Franzoi & Shields, 1984), Body Shape Questionnaire (Cooper, Taylor, Cooper, & Fairburn, 1987), Body Dissatisfaction, and Drive for Thinness – two subscales from the Eating Disorders Inventory-2 (Garner, 1991).

According to Davis (1997), the main factor in the formulation of subjective attitudes toward one's body is the degree to which it conforms to the cultural ideals of beauty and sexual attractiveness (p. 146). Thus, media and images that media sells may have a great influence on body image. The impact of media on the perception of body image has been explored in the body image literature (Bell, Lawton, & Dittmar, 2007; Botta, 1999). Tiggemann and Slater (2004) examined ideals in music television channels as a cause of BID. Results of this study showed that women who watched music videos felt relatively fatter, less confident, and more

dissatisfied with their bodies. Similar results were obtained by Thomsen et al. (2004).

Adolescent female volleyball players reported lower levels of body satisfaction after being exposed to the photographic images of female athletes that focused on the aesthetic beauty of a woman rather than her athletic prowess. According to Cusumano and Thompson (1997), awareness and internalization of social norms of appearance developed based on magazine images significantly influenced BID.

### *Gender*

In general women are less satisfied with their bodies (Wagner-Oehlhof, Musher-Eizenman, Neufeld, & Hauser, 2009). Even though both men and women may be dissatisfied with their bodies, women were found to be more dissatisfied than men (Dolan, Birtchnell, & Lacey, 1987). In a study by Demarest and Allen (2000) on male and female college students of different races, body image dissatisfaction was greater among women than among men regardless of race. The results of a study by Muth and Cash (1997) showed that women were more likely to have a negative body image than were men. Moreover, women reported higher levels of investment in their looks (dieting, exercising, seeking cosmetic surgeries). Furnham, Badmin, and Sneade (2002) examined body image of adolescents (age 12 and 13). Both genders reported high levels of dissatisfaction with their bodies. However, girls had higher scores on behaviors and attitudes associated with body management (mainly eating disorders). Moreover, body dissatisfaction was related to lower levels of self-esteem among girls, but not among boys (Furnham et al.). Smith, Thompson, Raczynski, and Hilner (1999) examined young adults (age 18 to age 30), and found that women were more dissatisfied with their body size than were men. Also, women showed higher levels of investment in appearance than men did. However, some studies showed contradictory results. Sorbara and Geliebter (2002) showed that men overestimate their body size in comparison with women (who are more accurate). In terms of dissatisfaction, there was no difference between genders verified.

## *Age*

Compared to men, women of any age are socialized to dislike their bodies (Oberg & Tornstam, 1999). The pursuit of and preoccupation with beauty are central features of the female gender stereotype (Loland, 2000). Even children of a very young age, particularly females, may show concern for weight issues (O’Dea, 1999; O’Dea & Caputi, 2001; Wardle & Beales, 1986). The majority of studies dealing with body image issues have focused on adolescent girls and female college students (Doll, Ball, & Willows, 2004; Harris, 1995a; Lokken, Ferraro, Kirchner, & Bowling, 2003; Ricciardelli & McCabe, 2001; Tiggemann, 2001). Thus, information regarding the impact of age on body image remains limited (Tiggemann & Lynch, 2001). Allaz, Bernstein, Rouget, Archinard, and Morabia (1998) examined body image dissatisfaction among women aged 30 to 74 years. The majority of women expressed a desire to lose weight even when their BMI was rated as normal. Many women attempted dieting, even among those 65 years of age and older. Interestingly, weight dissatisfaction was greater among women with higher education. However, Garner (1997) suggested that dissatisfaction with their body for women tended to increase until the age of 30 and then remained at the same level. Further, Stevens and Tiggemann (1998) suggested that for women aged 30 to 59, body dissatisfaction levels remain stable. The participants of this study were shown a set of nine drawings of the body, ranging from very heavy to very thin. Women were asked to choose the type of body they thought they represented, and then to choose the body type that would be most attractive to opposite sex. Interestingly, women aged 30 to 59 chose a slightly heavier type of body as the one attractive to men (Stevens & Tiggemann). Similar results, in regards to both stable dissatisfaction levels and increase in ideal figure ratings, were obtained by Tiggemann and Lynch. However, Lewis and Cachelin (2001), when comparing middle-aged women (aged 50 to 65) and older women (age 66 and above), discovered that even though both groups had similar levels of dissatisfaction with their bodies,

the women from younger group had a significantly greater drive for thinness and were more likely to diet.

### *Race/ethnicity*

According to Sorbara and Geliebter (2002), race influences body dissatisfaction. Caucasians were more likely to overestimate their body size than were both African Americans and Hispanics. Caucasian participants were also less satisfied with their current appearance and more likely to be binge eaters than the other two races. Altabe (1998) showed that among college students (150 males and 185 females), Caucasian and Hispanic-Americans were more concerned about their body image than were African-Americans and Asian-Americans. Harris (1995b) examined the emphasis on thinness among Black and White women. The results showed that White women strongly internalized the ideal of thinness, while Black women were significantly more resistant to it. Similar results were obtained by Miller et al. (2000). African Americans reported higher scores for body satisfaction than their Caucasian and Latino counterparts. Molloy and Herzberger (1998) showed that among female college students African-American women reported higher levels of self-esteem and a more positive body image than their Caucasian counterparts. Moreover, exposure to the dominant culture did not significantly affect African-American women's self-esteem.

## **4.2 Body Image and Physical Activity**

The evidence shows that regular physical activity is a common way to control weight (Sabiston, Sedgwick, Crocker, Kowalski, & Mack, 2007). However, some researchers report that physical activity participation related mainly to body image concerns is short-term and/or infrequent (Sabiston et al.). One of the possible explanations is that willingness to improve physical appearance is classified as an extrinsic type of motivation (Furnham & Calnan, 1998), and thus may be related to psychosocial distress (Furnham et al., 2002). Body Image

Disturbance is reported to lead to unhealthy ways of getting slim – such as eating disorders and excessive exercising practices (American Psychiatric Association, 2000). In a study by Masheb and Grilo (2003), body dissatisfaction was related to changes in self-esteem in patients with binge eating disorder. The results of a study by Tsai et al. (2003) showed that in a comparison between Taiwanese and Taiwanese-American women, Taiwanese women had greater body dissatisfaction and higher disordered eating attitudes and behaviors. This could be explained with traditional expectations factor. McCabe and Ricciardelli (2003) connected Body Image Disturbance and health risk behaviors. In the case of high-school adolescents, girls demonstrated higher levels of body dissatisfaction than did boys and were also more likely to adopt strategies to decrease weight. The main strategy was to use food supplements, which predicted disordered eating and the use of steroids. In addition to extreme behaviors, excessive exercising was a popular method for young girls to loose weight.

Mond, Hay, Rodgers, and Owen (2006) defined exercising as excessive if its postponement caused feeling of intense guilt, or when the only motivation for exercising was to influence weight or shape of the body. Excessive exercising is reported to be a compensatory behavior used by patients with eating disorders and by young women with body image disturbance (LePage, Crowther, Harrington, & Engler, 2008). In a study by McCabe, Ricciardelli, and James (2007), adult women who attended fitness centers on regular basis reported body image dissatisfaction and media pressure to have a strong influence on their behavior and physical activity levels. According to Mond, Hay, Rodgers, Owen, and Beumont (2004), excessive exercising was associated with reduced quality of life for females aged 18 to 45 years. Results by Hubbard, Gray, and Parker (1998) showed that women aged 18 to 25 years who engaged in exercise to “work off” the food they consumed reported lower self-esteem, higher body dissatisfaction and greater symptoms of eating disorders than did women who engaged in exercise for other reasons. However, according to Hausenblas and Fallon

(2006), exercisers reported better body image than nonexercisers, and participants of exercise intervention had a significant improvement in body image.

In the leisure field, the majority of the studies on the relationship between body image and physical activity tend to focus on young women (Depcik & Williams, 2004; Frederick & Shaw, 1995; James, 2000; Laverie, 1998; Liechty et al., 2006; Raedeke & Burton, 1997). Thus, there is a need for examining the connection between body image and physical activity for different age groups. Some of the understudied populations are women of middle age and older (Loland, 2000). Contemporary ideal body image may influence older women even more than it is shown to influence younger females (James; Frederick & Shaw), as the Western society perceives the bodies of older women in a negative way (Deeks & McCabe, 2001). The results of the study by Oberg and Tornstam (1999) showed that the importance of physical appearance did not change with women's age. Similar results were obtained by Bedford and Johnson (2006). According to Schuler et al. (2004), older adult women (age 50 to 98) expressed a desire for a thinner body regardless of age and current physical activity levels.

The ideal body in contemporary Western societies is thin, but active and strong (Kilbourne, 1994). Fat and flabby muscles are unattractive. Through various magazines and advertisements women are told to engage in "body work" to maintain youth. This body work consists of diet and exercise, and if it is not enough, plastic surgeries (Bordo, 1995). In a study by Bessenoff and Del Priore (2007) on the media images in magazines for women the results indicated that the age of models in the magazines was significantly lower than the age of readers of those magazines. Moreover, the models in women's magazines were generally thinner than the average female reader (Bessenoff & Del Priore). According to Bedford and Johnson (2006), women of all ages feel the societal pressure to be thin.

A human's body changes with age. This change may have a significant influence on body image, especially for women. The results of a 1997 Body Image Survey confirmed that

body weight increases with age, on average five to ten pounds per decade till the age of 60 years (Garner, 1997). Even without gaining weight, the amount of fat increases with age, as there is a loss in muscle mass (Prentice & Jebb, 2001). Even if a woman was physically active, she will observe these changes in her body. At the same time, leisure-time physical activity levels are reported to decrease with age, due to several factors, including time constraints (Hochschild, 1989; Shaw, 1994). Also, osteoporosis may affect women's willingness to exercise, especially in terms of strength training. Fear of falling and harming the body (especially hips) may be a reason for ceasing physical activity, regardless of doctors' recommendations (Rafferty, Reeves, McGee, & Pivarnik, 2002). And this all may lead to even greater dissatisfaction with body image. According to Davis (1990), body image had a significant influence on behaviors related to dieting and exercising among women who were already physically active.

#### **4.3 Self-Determination Theory and Body Image**

According to self-determination theory (SDT), not all the activities an individual engages in are enjoyable and intrinsically motivated. However, if an activity is perceived as useful for functioning in a society and goes along with the required societal norms, the individuals will internalize those activities (Biddle, 1997). The results of a study by Mullan and Markland (1997) showed that the motivation for regular exercise may shift from less to more self-determined. According to self-determination theory, extrinsic motivation can vary in its degree of relative autonomy (Ryan & Deci, 2000a). Thus, it is important to recognize that body image can work both as a constraint and a motivator for physically active leisure, depending on the level of individual's identification with societal norms and pressures. Research on exercise has shown that more autonomous forms of behavioral regulation are associated with higher levels of participation in physical activity (Mullan & Markland; Wilson et al., 2003; Wilson et

al. 2002). Williams, Grow, Freedman, Ryan, and Deci (1996) showed that participants' autonomous motivation was an important predictor for both engaging in weight-loss program and maintenance of weight-loss even at the 23-month follow-up. In a study by Teixeira et al. (2006) on middle-aged women who volunteered to participate in a university-based weight-loss program, almost 62% of women reported the societal pressure on losing weight as the main initial reason to exercise. However, after the program there was a significant increase in the levels of intrinsic motivations (particularly the feelings of enjoyment and interest) reported. Ferrand, Perrin, and Nasarre (2008) reported that females (aged 35 to 78) with type 2 diabetes who engaged in regular physical activity described an increase in confidence levels and an improvement in body image. At the same time, participants reported positive changes in their perceived competence and stated that the positive change in body shape lead to positive changes in experiencing physical activity (Ferrand et al.).

However, Markland (1999) found that exercising for weight management and externally imposed health pressures undermined self-determination. Also, in a study by Markland and Ingledew (2007), higher discrepancies between the ideal and actual body size predicted less autonomy and lead to decreases in physical activity levels. It is important to note that these studies were conducted on adolescents (mainly college students) who are reported to be more concerned with their body shape and more likely to internalize the extreme ideals portrayed by the media (Berg, 1999; Smolak & Levine, 2001). Thus, there is a need to explore the effect of body image on exercise behavior among women of middle and older age. According to Pelletier and Dion (2007), the level of assimilation or integration of sociocultural norms and pressures may depend on the levels of general self-determination. If women feel that they are active agents in their life, they experience less pressure to be thin (Pelletier & Dion). Moreover, personality of an individual may greatly affect self-determination for physical activity. According to Ingledew, Markland, and Sheppard (2004), neurotic individuals

were more likely to internalize pressures, while extraverted individuals were more likely to identify with regulations and find pleasure in exercising because the participation in physical activity could satisfy their need for competence.

#### **4.4 Social Comparison Theory**

Social Comparison Theory was first formulated by Leon Festinger in 1954. According to this theory, there exists in the human organism a drive to evaluate one's opinions and abilities. People learn about their abilities by making comparisons and evaluating themselves by comparing to those who are similar. A person does not tend to evaluate his/her opinions or his/her abilities by comparison with others who are too divergent from himself/herself (Festinger, 1954).

Such comparisons may lead to self-evaluations and be an important motivator for certain behaviors. Self evaluation is caused by uncertainty about one's abilities and about social groups' opinions. This evaluation is supposed to help to reduce this uncertainty. Festinger (1954) postulated that the most desirable comparison for a human being is a comparison with individuals who are perceived as similar to us. This part of the theory is called *similarity hypothesis*. Comparison with similar individuals gives us more useful and more valuable information. However, sometimes it is impossible to find similar ones and people must often judge themselves against those who are dissimilar. In such case, there can be two opposite results: *upward social comparison* which occurs when we compare ourselves with people who we deem to be socially better than us in some way and *downward social comparison*, when a person compares her/his abilities with a person of lower levels of those abilities.

Social comparison theory is commonly used in the areas of social psychology, educational psychology, theology, and marketing, among others. Bonifield and Cole (2008)

explored the connections between social comparisons and purchase intentions. Marsh, Trautwein, Ludtke, and Koller (2008) investigated the impact of social comparisons on academic self-concept and achievement. McLeland and Sutton (2008) used social comparison theory to examine how the attitudes of conservative American Protestants vary depending on reporting personal or perceived group attitudes. There are several studies that used social comparison theory in relation to body image (Dittmar & Howard, 2004; Engeln-Maddox, 2005; Lew, Mann, Myers, Taylor, & Bower, 2007; Morrison et al., 2004). Want, Vickers, and Amos (2008) explored the influence of the TV show “Friends” on appearance satisfaction among female college students. Based on social comparisons, the exposure to a television show presenting highly physically attractive characters resulted in a decrease of appearance satisfaction levels. According to Krayer, Ingledew, and Iphofen (2008), the social comparison process may be used for the purpose of identity development for adolescents. The results of this study showed that the main targets of social comparisons for adolescents are the media images and peers. Participants expressed an awareness of society’s pressure for thinness, though they were able to resist this pressure by constructing positive comparisons with peers or by distancing themselves from the target or attribute (“models and stars are different” p. 899). In a study by Lew et al. women who reported high levels of body image disturbance were selected for the study. All the women in the study were exposed to thin-ideal media messages. The intervention group was encouraged to think about the positive experiences and were provided with sentence stems, such as “I might be better than the models at..... because....”, to guide their writing. Participants from the control group were asked to describe models without any sentence stems provided. The results showed that by encouraging them to think positively about themselves, women from the intervention group scored higher on the non-appearance dimensions of body satisfaction.

However, there is less focus in the literature on the connection between social comparison and physical activity participation. Frederick, Havitz, and Shaw (1994) utilized social comparison theory to analyze both motivations for and constraints on participation in physical activity in social settings. They proposed that the need for self-evaluation of an individual, gathered through comparisons with other individuals, comes from lack of ability to objectively evaluate one's abilities and opinions. One of the hypothesis suggested in the study was that motivation to attend exercise classes would increase if an individual would perceive other members of the group as similar. Then, and only then, a valid self-evaluation could occur. If other members of the group were dissimilar, the feelings of inferiority or superiority could occur. In the case of inferiority, there may be an intrinsic motivation for self-improvement, whether in physical appearance or physical abilities. In the case of superiority, continuation for participation will be motivated through self-enhancement (Frederick et al.). Wasilenko, Kulik, and Wanic (2007) examined the relation between body satisfaction and social comparison with peers. The results showed that even a short exposure to slimmer, fit peers lead to a decrease in body satisfaction levels regardless of the BMI level of the participant. Morrison et al. (2004) used sociocultural theory and social comparison theory as the frameworks for examining variations in body image evaluation and body image investment. There was strong support for social comparison theory. Results indicated that engaging in universalistic social comparison was inversely related to body image evaluation and was positively related to dieting to lose weight and use of pathogenic weight control practices. Trottier et al. (2007) examined the influence of social comparison with peers on body image for female college students. The results showed that the exposure to a thinner peer had a significant negative impact on self-perception for those women who were classified as restrained eaters (chronic dieters). Interestingly, women who were classified as unrestrained

eaters were not affected by the exposure to a thinner peer. However, the self-perception of their body was more positive after being exposed to the overweight peer.

It is suggested in the literature that social comparison may negatively affect physical activity participation. According to Annesi, (2000), many individuals tend to stop exercising within the first six months of the exercise program based on negative results of social comparison. In a study that compared adherers and nonadherers, one of the reasons for dropping out of the program was a negative body image and social comparison that resulted in negative feelings about oneself (Huberty et al., 2008).

#### **4.5 Body Image as a Motivation**

In most of the leisure research studies, body image is presented as a constraint toward physical activity (Frederick & Shaw, 1995; James, 2000; Liechty et al., 2006). If studied as a motivator, body image is usually perceived only as an extrinsic motivator, and as such does not have a significant influence on engaging in physical activity. However, based on self-determination theory, concerns with body shape represent intrapersonal factors that may work as a motivator for engaging in physical activity (Markland & Ingledew, 2007). Raedeke and Burton (1997) examined leisure time physical activity participation from the personal investment theory perspective. This theory assumes that the way in which a person invests his/her time and energy is mainly determined by the meaning of the situation, which depends on perceived incentives, perceived options, and sense-of-self variables (e.g. perceived competence). According to personal investment theory, positive social comparison (such as doing well in relation to others) is an achievement-related incentive (Raedeke & Burton). Thus, in the area of sport psychology, body image is often treated as a motivator for exercising (Markland & Ingledew). In a study by Segar et al. (2007), 33% of the respondents identified body- and weight-related concerns to be a primary motive for being physically active. In a

study by Jewson, Spittle, and Casey (2008) on overweight women ages 25 to 71 years, weight loss was a primary reason to exercise for physically active women and the second most important perceived reason for inactive participants. Frederick and Ryan (1993) concluded that the motives for adult participation in physical activity vary from young people's motivations. According to this study, enjoyment and fun as motivators for physical activity were emerging less often among adults. Moreover, body image was reported as one of the main motivators for both women's and men's participation in sports. However, body-related concerns were more important for women and were mostly associated with fitness activities rather than individual sports (Frederick & Ryan). Nies et al. (1998) reported weight reduction was the primary objective of physical activity in their study on women ages 35 to 50. They reported losing weight as a way of self improvement that encouraged them to begin and continue an exercise program. Moreover, body image was reported as an individual motivator for exercising. However, a few women indicated that poor body image in a setting where they could compare themselves with other, better looking women limited their engagement in exercise. Sherwood and Jeffery (2000) recommend promoting weight management goals as a way to motivate more people to engage in exercising.

In the field of leisure studies, Laverie (1998) examined the motives for ongoing participation in aerobics class. Besides physical, psychological, and social benefits of regular exercise class, Laverie identified social comparisons and appearance as main motives for engaging in aerobics. Positive influence of body image was also suggested by Currie (2004). In this study, middle-aged mothers participated in a low-impact exercise class provided for them to reduce stress levels connected with taking care of children and family. Even though most women did not have body image and shape in mind when engaging in the program, most of them expressed positive feelings caused by the improvement of body shape. However, the influence of body-related motivations on physical activity participation for midlife women

remains relatively unexplored (Segar, Spruijt-Metz, & Nolen-Hoeksema, 2006). As it is argued that that the importance of motivations connected to body image and weight control decreases with age (Trujillo et al. 2004), there is a need to further explore the connections between body image and physical activity participation from the leisure studies perspective.

#### **4.6 Body Image as a Constraint**

In the leisure studies area body image is often reported to be a constraint for physically active leisure (Frederick & Shaw, 1995; James, 2000). One may argue that contemporary society imposes the standards of beauty on both genders. However, the effects on women appear to be greater. Raymore, Godbey and Crawford (1994) examined the relationship between gender, socioeconomic status and self-esteem. Those participants who had lower self-esteem reported greater amount of interpersonal and intrapersonal constraints than did participants with higher self-esteem. In terms of gender, females reported lower levels of self-esteem and more intrapersonal constraints than did males.

Body image may be studied in relation to physical activity. Frederick and Shaw (1995) examined body image as a constraint on participation in aerobics classes among female undergraduate students. Women were divided into three categories, based on students' level of participation in aerobics classes. Those categories included current participants, former participants, and non-participants. The study consisted of two parts. First, women were asked to complete the surveys. Then, semi-structured interviews were conducted among volunteers from the first part of the study. Frederick and Shaw found that body image did not serve as a constraint on participation in the aerobics classes for any of the groups. However, body image concerns decreased enjoyment. Two aspects seemed particularly important – aerobics clothing and social comparison of physical appearance.

James (2000) investigated the experiences of high school girls in the swimming pool setting. The main element that influenced body image was the presence of an audience. Girls perceived the reactions from their peers very personally (if somebody was laughing they thought it was about them, their look and body). James developed a typology of female swimming pool users. “Achievers” were not affected by body-related constraints, and they continued their participation. “Rationalizers” had reduced enjoyment from swimming, however the intrinsic satisfaction from achieving their goals was more important than negative feelings inducted by the negative perceptions of their bodies. “Compromisers” developed several mechanisms to negotiate body image constraints. For example, they wore a T-shirts over their swimming suits to hide their bodies. Also, some girls decided to change the swimming pool - their peers were not longer there, so they did not feel the pressure of being constantly judged. Based on this study, it appears that body image as a constraint has a greater effect if it is connected with an audience.

Liechty et al. (2006) investigated body image as a concern for college-aged females and their middle-aged mothers. A negative body image was reported by almost 90% of the sample investigated. There were different types of constraints reported – body image prevented some women from participation, while for others it was a factor reducing their enjoyment from physical activity. In both cases body image was related to the presence of an audience. Many women indicated that they would feel better in female-only environments (weight rooms or classes). Interestingly, the results of this study were similar both for middle-age women and their daughters. Moreover, mothers' attitudes toward their bodies affected daughters' attitudes. Henderson, Stalkener, and Taylor (1988) identified 10 factors that constrained women’s leisure participation. Body image (defined as lack of physical skills, lack of self-confidence, and not being fit enough to participate in recreation activities) greatly affected women’s participation.

#### **4.7 Summary**

As discussed in the previous chapters, there are many factors that influence women's engagement in physically active leisure. Socioeconomic factors such as gender, race, age, or marital status are reported to influence physical activity levels. Perceived physical and mental health benefits may affect women's decisions about engagement in physical activity. Also sociological and psychological factors, such as motivations and constraints, play a significant role in women's decision regarding leisure activities, specifically leisure time physical activity. Body image is reported in leisure studies research to belong to both the motivation and constraint categories. However, the connections between body image and physical activity levels for middle-age and older women have yet to be explored. Therefore, this study sought to understand women's perceptions of the influence body image can have on their physical activity participation.

## **CHAPTER V**

### **METHODOLOGY**

Body image has become a popular topic of research in the past 20 years. The two most popular aspects of research have been (1) to investigate society's influence on individual body image and (2) to connect body image with health issues such as obesity or unhealthy behaviors. A commonly used method for assessing body image is sets of drawings or photographs that represent different sizes of the same body shape (Collins, 1991; Counts & Adams, 1985, Rodin, 1992; Sands, 2000). In studies that have used this method, participants (mostly women) were asked to identify their actual body shape and their ideal body shape. The discrepancy between the two chosen drawings/photographs represents the intensity of body image disturbance (BID) (Collins; McElhone, Kearney, Giachetti, Zunft, & Martinez, 1999; Rolland, Farnill, & Griffiths, 1997). Another popular method to investigate body image issues is the use of questionnaires, such as The Body-Esteem Scale by Franzoi and Shields (1984) or the Rosenberg Self-Esteem Scale (Gray-Little, Williams, & Hancock, 1997). However, body image varies among individuals, as there are different reasons for body image issues, different levels of societal influence, and different outcomes that influence one's behavior. Thus, in order to gain a greater understanding of body image issues, the use of qualitative methods is appropriate.

The qualitative inquiry utilized in this study aimed to explore women's individual perceptions of body image and its effect on physical activity participation. I employed in-depth qualitative interviews and identified common themes that reflected women's personal perception of body image's role in their life. In the first section of this chapter I will describe feminist research on women's leisure. Then, I will describe the major assumptions of interpretive paradigm. Last, I will relate this paradigm to the current study.

## 5.1 Feminist Scholarship on Women's Leisure

Historically, there has existed a five-phase typology of research on women and leisure (Henderson, 1994). Phase one is identified as “Invisible Scholarship.” According to Henderson, before the early 1980s women were invisible in leisure research. Although some studies reported differences by gender in their analysis, there was a lack of explanation of the meaning of those differences (Henderson). In the second phase of gender research, women were studied as “the others” – a group simply differing from men (Jackson & Henderson, 1995). Women's actions were judged based on typical male standards (Henderson). With time, the feminist perspective developed. Researchers started to notice that women have different conditions than men in their lives, especially as it relates to work and leisure (Henderson & Rannells, 1988). The third phase of research on women's leisure is characterized as “dichotomous differences scholarship.” The main focus of studies in this phase tried to determine the differences between males and females and to explain the influence of those differences on motivations, constraints and satisfaction from leisure (Henderson). The fourth phase is called “feminist scholarships.” Instead of conducting research on the differences between sex and/or gender, women's leisure only was examined. The main purpose was to understand the importance of factors influencing women's lives and their free time. This phase had a major influence on leisure constraints research (Henderson). The fifth phase, “gender scholarship” is differentiated from the fourth phase by stressing how gender as a category is constructed. Instead of treating women as a homogenous group, it noted that culture, race, age and education (among other factors) may have a significant impact on women's behavior and leisure choices (Henderson).

In this study I will conduct research on body image from a feminist perspective.

According to Henderson (1990):

Feminist research also focuses on the implications research has for women. That is, research from a feminist perspective goes beyond description

explanations (although these are necessary too), and provides a means for addressing what can be done to correct the invisibility of women and promote social change for women. The change may be micro or macro, revolutionary or evolutionary, but the research recommendations should suggest a means for moving toward the creation of a non-oppressive society for both women and men (p.232).

Understanding women's perspectives may lead to understanding the need for change and the type of change needed, as related to body image issues. For example, Collins (2002) described the connections between aerobics classes, body image, and feminism. Participants of this study expressed mixed feelings. Most women felt empowered by the perception of having control over their bodies. However, participants also felt objectified by the type of outfit worn by some women, as well as by the pressure to look perfect. According to Collins, even though it is hard to separate society's pressure to look perfect from an individual's desire for a thin body, conducting research on body image from feminist perspective may contribute to the development of strategies for women to cope with this issue.

According to DeVault (1996), feminists have been attracted to interpretive paradigm and the use of qualitative methods mainly because it offers possibilities of interaction with participants. McDonald and McIntyre (2002) advocated using feminist interpretive practice in women's healthcare. For example, an interpretive paradigm is commonly used in qualitative health research (especially nursing), as it provides the subjectivity of experience within the commonly understood contexts of health and illness. According to Meleis (1996) it is important for applied health scholars to develop knowledge that is relevant to culture and respects social realities of individuals living within the situation. As both the concept of body image and issues connected to physical activity are closely related to health, the utilization of qualitative inquiries in applied health disciplines other than nursing can be an effective way of conducting research (Thorne, Reimer Kirkham, & O'Flynn-Magee, 2004). Moreover, preoccupation with weight has become one of the most common health worries for women, as

it influences self-esteem, social relationships, and physiology (McDonald & McIntyre). Thus, it is important to conduct research that explores how women construct their lives, and how women's lives get constructed by societal norms. This goal may be achieved by utilizing an interpretive paradigm.

## **5.2 Interpretive Paradigm**

In the context of research, a paradigm describes a system of ideas used by a community of scientists to create knowledge (Fossey, Harvey, McDermott, & Davidson, 2002). One of the popular paradigms in social sciences is interpretivism. Interpretive approaches share a common emphasis on the analysis of construction of meaning (Mottier, 2005). The interpretive paradigm is based on the human need to understand self and others (Gadamer, 1975), thus it is concerned with discovering the meaning of reality as perceived by an individual or a group. Also, it assumes that reality is socially constructed (Guo & Sheffield, 2008). According to Hansen (2004), reality is constructed in the mind of an individual, rather than being an external entity. Thus, there exist multiple, equally valid realities in contrast to a positivistic single objective external reality. To be able to understand that reality, the researcher needs to become involved with the participants, as the meaning of reality is hidden and may be discovered only through deep reflection (Schwandt, 2000). This reflection may be stimulated by a dialogue between a participant and the researcher. As a result, the reality is an outcome co-created by both an individual and the researcher (Ponterotto, 2005). According to Lincoln and Guba (1985) the multiple, complex, constructed, and ultimately subjective realities can be studied only holistically. Moreover, the knower and known are inseparable as the result of the interaction between the inquirer and the participant (Lincoln & Guba). Another important aspect of interpretive inquiry is the notion of situated freedom (Leonard, 1999), which means that an individual is free to make choices, but that freedom is not absolute. The individual is

restricted by specific conditions of his/her own life. Still, one has to make some choices and act based on the decisions made. In interpretivism, the researcher focuses on describing the meanings of being a part of the world for an individual, on how those meanings influence individual's choices, and on analyzing the social, cultural, and political forces that shape an individual's experiences (Lopez & Willis, 2004).

In summary, there are several main assumptions guiding interpretive research. First, instrumental-technical research methods may not be appropriate when human needs and interactions are the subject of research. Second, numerous human actions and interactions cannot be either predicted or controlled. Moreover, knowledge is dependent on social realities. Also, learners learn from reflecting on their life experiences. The researcher may facilitate this process, but the presence of a researcher is not necessary for the process to occur (Humble & Morgaine, 2002).

In this study I chose to utilize interpretive paradigm because I wanted to understand how each participant perceived her body image and how this perception affected physical activity participation. I believe that body image is constructed in each woman's mind based on social interactions, such as social comparisons (both upward and downward). I wanted to understand the meaning of body image as it affects woman's worlds. Moreover, I wanted to explore what forces shaped participants' experiences as connected to body image and physical activity. My concern was about "how" and "why" body image may or may not affect physical activity participation. I believed that each woman is an actor who constructs and shapes her own reality. That is why I believe body image serves a different role in each woman's choices. Because there is no value-free research in social sciences, I acknowledge that my own bias, emotions, and beliefs will be involved in conducting this study.

### **5.2.1 Three dimensions of interpretivism**

Each type of research is guided by a paradigm (or by multiple paradigms) and each paradigm has three dimensions – ontology, epistemology, and methodology (Paul & Marfo, 2001). The ontology of a paradigm deals with the nature of reality, or “what is there” or “what is known.” Also, it asks if the things we know can be sorted into categories and – if yes – into what categories. Epistemology of a paradigm deals with a question, “what is the relationship between the knower or would-be knower and what can be known” or “what is the relationship between the researcher and knowledge” (Guba, 1990). Methodology of a paradigm deals with the set of methods used to discover a certain reality or realities (Lincoln & Guba, 1985).

#### *Ontology in interpretivism*

Researchers who are guided by interpretivist paradigm in their research believe that one universal truth or one reality does not exist. Rather, each individual constructs a reality specific in its nature. However, some elements of those realities may be shared among many individuals or even across cultures (Guba & Lincoln, 1994). Reality is not objective and the constructions are not “true” but rather more or less informed. Thus, the researcher can interpret those constructions in many ways, and none of those interpretations represent the ultimate truth or falsity (Lincoln & Guba, 2000). Moreover, in interpretivism the researcher and reality are inseparable (Searle, 1999). This lack of separation results from having a stream of experiences that shapes an individual’s view of the world.

#### *Epistemology in interpretivism*

Positivists believe that reality, which is independent from the researcher, provides the foundation for human knowledge, whereas interpretivists believe that knowledge is derived from everyday concepts and meanings. The researcher’s role is to enter the social world through observation, interaction, and dialogue with a participant, and then to grasp socially constructed meanings. The knowledge is created and co-created through the interpretation of

people's subjective beliefs, feelings, stories, and experiences (Searle, 1999). In other words, the researcher is trying to make sense of the world by building knowledge through social construction. Interestingly, the knowledge produced by conducting the research should produce ambiguity and uncertainty, as these are the potential sources of insights and new ideas and they invite attention to the complexity of human actions (Eisner, 1997).

Schwandt (1999) argued that interpretivists are engaged into "making something of that" (p.452). Thus, understanding the created reality is more important than simply gathering the knowledge about that reality. It is important to note that knowledge created by interpretivists is never neutral (Bochner, 1997; Denzin, 1992), as it is connected to individuals' feelings, beliefs, and understandings of the world. According to Eisner (1997), the researcher's perception is selective, based on what the researcher already knows (and knows how to find). Moreover, as the researcher is co-constructing the reality, the perceptions of the researcher are as important as the perceptions of a participant (Guba, 1990).

Longino (1990) identified five ways in which the perceptions and values of the researcher can influence the results of the inquiry. First, the values of the researcher have an influence on the type of research he/she will conduct. Thus, the published results reflect the researcher's interests and values. Second, the values of the researcher may affect the practical implications of the conducted research. Third, contextual values may determine the choice of questions asked, and thus the answers obtained from a participant. Fourth, values can be expressed in assumptions facilitating the study. Lastly, as the reality is created by interpreting data obtained from participants, the researcher may employ value-laden terms in the selection and analysis of that data (Longino).

As bringing personal values and beliefs into interpretive inquiry is inevitable, there is a need for "reflexivity" in research (Blumer, 1969; Dupuis, 1999; Schwandt, 1997). Myerhoff and Ruby (1982) defined reflexivity as:

The capacity of any system of signification to turn back upon itself, to make itself its own object by referring to itself: subject and object fuse. Reflexive knowledge, then contains not only messages, but also information as to how it came into being, the process by which it was obtained (p.2).

Dupuis suggested some strategies of conducting reflexive research. First, the researcher has to recognize himself/herself as a full person. The differentiation between the researcher self and the human self simply does not exist. To achieve this goal, the researcher must intentionally and continuously conduct self-introspection. Second, the researcher must realize that connecting with the world involves the use of empathy. The experiences and emotions of the researcher may greatly affect the analysis of the data. Thus, the researcher must reflect on the emotional issues raised during the entire process of conducting research. Third, as the researcher is a co-creator of the reality, there is a need for active interviews that develop a trusting relationship between the researcher and the participant, that allow the participants to freely express any criticism towards the researcher's analysis (Lather, 1986). Finally, reflexive research demands writing about the conducted research in a very individual way. The specific circumstances of data collection, researcher's personal bias, making research-design decisions – all of those must be outlined for the reader.

I perceive myself (the researcher) as being fully involved in this study. I recognize that I already have some perceptions and beliefs as they relate to body image issues and its influence on physical activity. Also, I am aware that my selection of interview questions is strongly influenced by my own beliefs and understanding of reality. Thus, I conducted this research using constant self-introspection. I kept a reflective journal and reviewed my own values to gain reflexive knowledge that offered deeper understanding of participants' experiences. Moreover, as I believe body image may be a sensitive issue for some participants to discuss, I wanted to develop an emotional connection with the participants by discussing my own body image issues during the interview.

### *Methodology in interpretivism*

The methodological dimension of an interpretive paradigm deals with the methods for discovering and creating knowledge. The researcher should make an effort to understand the participant's perceptions in his/her own terms, to cooperate with participants, and to locate the study in a broader analytical and theoretical framework (Metz, 2000). According to Silverman (1993), the primary issue of interpretive research is to generate data which give authentic insight into the experiences of a person. To achieve this goal, interpretivists employ methods from qualitative research (Denzin & Lincoln, 2000). According to them:

Qualitative research is multimethod in focus, involving an interpretive, naturalistic approach to its subject matter. This means that qualitative researchers study things in their natural settings, attempting to make sense of, or interpret, phenomena in terms of the meanings people bring to them. Qualitative research involves the studied use and collection of a variety of empirical materials- case studies, personal experience, introspective, life story, interview, observational, historical, interactional, and visual texts – that describe routine and problematic moments and meanings in individuals' lives. (p. 2)

A very popular method of conducting qualitative research is the use of interviews, as conversation interviews “capitalize on the dynamic interplay between the researcher and respondents” (Dupuis, 1999, p. 57). According to Collins (1990), interviews are the best way to understand realities constructed by participants, as the setting allows the researcher to develop empathy and to share experiences. Thus, the researcher has an opportunity to co-construct the reality with the participant. Similarly, Miller and Glassner (1997) advocated using non-positivistic interviews to build on interactive components and to achieve deep, mutual understanding of reality. Thus, I used active interviews where my dialogue with each participant allowed for the mutual understanding of body image issues. Even though the interviews were guided by a set of questions, I achieved a dialogue where both the participant and I were able to share our experiences. On the other hand, however, I am aware of the differences between me and the participants in terms of perceptions of body image and

differences in choices affected by body image. The main difference were age and perhaps other socioeconomic factors that made me an outsider.

### **5.2.2 Researcher's bias – my personal story**

Until high school, I was a very skinny girl. At that time of my life I was also extremely active. I was a runner on my school team and trained five times per week. I was a scout hiking in the mountains every weekend, and I was always outside playing with my girlfriends. The only things that bothered me at that time in my life were my boyish figure with no curves and the school nurse calling my parents approximately once a month to check if “maybe I suffer from anorexia.” Then I went to high school. As it was the best school in my hometown, it was also extremely demanding and my preparation for classes was time consuming. Thus, I quit the athletic team to have more time for studying physics. I stopped playing outside – my girlfriends started dating and I had no one to spend my free time with (I was not dating because my boyish figure had turned me into a shy person, which affected my behavior around boys).

I was a late bloomer, hitting puberty at the age of sixteen, with (still) no curves. Having no one to socialize with I started to spend entire days reading books and snacking. In two years I got those curves that I'd always wanted, plus several pounds in other areas of my body. However, nobody would call me obese or even curvy. I managed to keep that figure for two years, until the age of 20. It was the only time of my life when I felt comfortable with my body. However, soon the irregular meals combined with parties on weekends with my college friends started to impact my body. The biggest weight gain I experienced was at the age of 24 when I came to the United States. Living in the dorm with only one kitchen (inconveniently located in the basement), I started to eat out every day. Soon I learned that my body reacted to American food in the worst way possible; in half a year I gained 30 pounds, hitting 175 pounds. Interestingly, I did not fully realize how much my body had changed at the time. When I went

to Poland for Christmas, my parents wanted to buy me new clothes as my Christmas gift. I went to my favorite clothing store and I started to cry. Nothing fit.

After the Christmas break I decided to fight my obesity. As I love to cook and eat, diet was not an option in my mind. Even though I modified my eating habits, the main goal was to exercise as much as possible. In 10 months I lost 34 pounds. However, once I gave up that strict exercising regime, I gained 5 pounds back. Since then I have kept that weight for three years. While I still do not feel good with myself, I am not horrified anymore.

Interestingly, my mother became interested in my weight loss strategies. I found it curious, as she has been slim all her life. However, two years ago my mother started to experience menopausal symptoms. At Christmas 2007 I noticed the changes in her body – a tummy, arms that were not firm anymore, and a curvy bottom she never had (and she always wanted). We started to discuss this topic, and it became clear to me that both of us have body image issues. However, they affect us in totally different ways. While I am willing to exercise and I am not bothered by men who stare at my not-so-perfect legs at the swimming pool, my mom refuses to take off her clothes at the beach, and the only time she touches her stationary bike is when she is cleaning the dust off of it.

That is my story. This is why I want to do research on body image, both in the current study and in the future. For me and for my mother, body image is a personal issue, an every day issue. It affects most of our choices – what clothes to wear, what to eat, what to do in our leisure time. However, the unhappiness about body shape and weight affects us in totally different ways. That made me ask the question WHY. Why does the unhappiness with my body make me go swim even when I am sick? Why does my mom's unhappiness with her body not result in any actions besides buying "the miracle equipment" she saw in infomercials? Is it because of the age? Is it my being in the U.S., in a college town, surrounded by 20 year-olds? Is it the fact that my mom lives in Poland, working in a highly feminine environment of

50 year old pre-school teachers, most of them twice her size? I wanted to understand. I also wanted to learn if other women choose to do nothing (like my mom), are motivated by their body image issues to exercise (like me), or exercise for other reasons even though they do not feel comfortable at the gym because of body image issues (like some of my girlfriends). I wanted to talk to women and discover other possible scenarios I have not yet considered. I wanted to exchange my thoughts with other women in an active dialog about an issue that has been very personal and sensitive to me throughout my life.

I understand that some researchers may say that I am biased and that I had certain expectations about the possible results of my study. That is why I wrote this personal story, as the first step of conducting reflexive research that deals with my emotions, and that requires exchanging stories between the researcher and those we research. It also required making sure that I am reporting the co-created reality, not only the reality that is already inside my head. Or my body.

### **5.3 Data Collection**

In the current study I focused on non-Hispanic White women between the ages of 45 and 64 who were already physically active. The criterion of race was employed based on the evidence that body image may affect physical activity participation among women of different races in various ways (Harris, 1995b; Miller et al., 2000). The criterion of age was employed to address gaps in the literature on body image which focuses mainly on adolescent and college-age women (Hurd, 2000). Moreover, according to the statistics presented by the American Society for Aesthetic Plastic Surgery, this age group is the second largest age group to undergo plastic surgery procedures to improve their body shape (mainly breast augmentation and liposuction) (ASAPS, 2009). It might be concluded that women this age were sensitive to body image issues. The criterion of exercising (at least once a week) was based on the assumption

that body image may be a motivator and/or a constraint, or may not have any influence on exercise levels. Thus, I needed women who were already involved with exercise. I recognized that the last criterion would affect my findings. Women who were already exercising either did not perceive body image to be a constraint, or were able to negotiate this constraint.

Invitations to participate in the study were initially extended to members of the Truly Fit gym in Urbana, Lifelines Recreation Center in Champaign, and Curves gym in Urbana. Truly Fit in Urbana is a commercial gym with a wide range of cardiovascular equipment and free weights equipment. Apart from the all access gym, the facility offers a wide range of classes – from yoga and cardio classes to body combat classes. Personal training and equipment orientation is available for the members. Moreover, the facility has locker rooms with showers and a dry sauna. The facility is open from 5am to 9pm on weekdays, and from 8am to 6pm on weekends. Lifelines Recreation Center in Champaign is a facility that offers a variety of activities for the entire family. The center offers an open-access gym, physical therapy, well-being programs for seniors, and a variety of programs for adults and children. This center is open 6am to 8pm on weekdays, 10am to 6pm on Saturdays, and 1pm to 4pm on Sundays. Curves gym in Urbana is a commercial gym offering specially designed weight-loss programs for women. The recommended participation level is three times a week for 30 minutes each session. Moreover, Curves offers several benefits for members, such as on-line access to support community or variety of tools to help women track their progress. On weekdays, the location in Urbana is open from 8am to 1pm, and from 3pm to 7:30 pm. On Saturdays, the gym is opened from 8:30am to 12pm. This location is closed on Sundays.

Purposive and theoretical sampling methods was used to select the conversational partners. Recruitment fliers (see Appendix A) were distributed in all three locations. Volunteers were asked to contact the investigator either by e-mail or by phone. Women who contacted the researcher and expressed a willingness to participate in the study were then asked

a set of short questions to determine if they fulfilled the research criteria (age between 45 and 64, non-Hispanic White race and regular exercisers – at least once a week). Also, they were asked to provide contact information, such as phone number and/or e-mail address. The exact number of interviews depended on acquiring the “theoretical saturation” (Schwandt, 2001).

However, I encountered several problems with the recruitment of participants for this study. The Lifelines Recreation Center was changing its location at the time of data collection and thus no classes were offered at that time. Therefore, it was difficult to recruit any participants at that location. Also, even though the fliers were distributed at Curves twice, no women exercising at that location volunteered to participate in the current study. Only seven women who exercised at Truly Fit gym in Urbana volunteered to be interviewed. However, one of them was 68 years old, and thus was excluded from participation. All six interviews were conducted in February and March of 2009. As the saturation of the data was not achieved after conducting six interviews, I decided to recruit subjects through “E-Week”, a weekly on-line bulletin at the University of Illinois at Urbana-Champaign. An advertisement, identical in its content to fliers distributed at the gyms, was posted once through the on-line bulletin. Additionally, women were offered \$15 for their participation in this study. Over 90 women sent an e-mail volunteering to participate in the study. The first 10 women who responded to the E-week advertisement were contacted via e-mail to first determine if they fit the research criteria, and then to set up an interview. After conducting these 10 interviews I decided to contact the next three volunteers. They also fulfilled research criteria. After that, the saturation of data was achieved. The rest of women who volunteered to participate in the study got a standardized e-mail where I thanked them for volunteering and notified them about acquisition of the data saturation. All of the interviews with women who responded to the E-week advertisement were collected in May of 2009.

Overall, I conducted 19 in-depth, semi-structured interviews. At the beginning of each interview, participants were presented with the informed consent form (see Appendix B) explaining the purpose of the study, right to withdraw, and confidentiality procedures employed in the study. Then the participants were asked to sign the consent form.

The interviews were guided by the set of questions (see Appendix C) designed to discuss women's levels of participation in physical activity and the factors influencing these levels. The main focus was on expressed motives for physical activity, constraints to exercising, and the role of body image as a possible factor. Moreover, women were asked about possible social comparisons.

However, even though the list of questions was provided, the protocol served as a guide only (Dupuis, 1999). The interview strategy was designed to open up a dialogue, which might facilitate discussing body image as a personal issue. The interviews lasted between 12 and 70 minutes, depending on the talkativeness (connected to the personality type) of each participant. It is important to acknowledge that there were no instances of women refusing to answer any of the questions provided in the study guide. The interviews were tape recorded with the approval of the participants. There were no instances where recording was not preferred. To protect the identity of participants, they were assigned pseudonyms. The interviews were transcribed by the investigator before they are analyzed. Only 18 interviews were utilized in this study, as after careful analysis I decided that one woman did not fulfill the exercise criterion.

<b>RESEARCH QUESTION</b>	<b>CORRESPONDING INTERVIEW QUESTIONS</b>
<p>Was the body image a constraint and/or a motivator, or was it a non-issue for individual participant?</p>	<ul style="list-style-type: none"> <li>• Why do you exercise?</li> <li>• Is body image, losing weight or maintaining weight an important motivator for you?</li> <li>• (if yes ) – How important is body image compared to other reasons for exercising?</li> <li>• Do you believe your motivations changed over time?</li> <li>• Has body image ever been an important motivator for you?</li> <li>• Are you satisfied with your weight?</li> <li>• Do you believe you are more satisfied with your weight now than you were in the past?</li> <li>• Do you believe you exercise enough?</li> <li>• (if no) Why are you not exercising as much as you would like to?</li> <li>• Is your body image preventing you from exercising?</li> </ul>
<p>If body image was classified as a constraint – was it an interpersonal constraint connected to social comparison, and/or was it an intrapersonal constraint connected to self-esteem issues?</p>	<ul style="list-style-type: none"> <li>• Are there any particular activities you would not participate in because of your body?</li> <li>• Are there any outfits you would not wear when exercising?</li> <li>• Are there any settings that make you feel uncomfortable when exercising?</li> <li>• Do you think other people are judging your body when you are exercising?</li> <li>• Do you compare yourself to other women?</li> <li>• Who do you compare yourself to specifically (peers, celebrities, friends)?</li> <li>• Are there any factors that affect your body image (comments from peers, family, messages from media)?</li> <li>• Are aging and menopause affecting your body image in a negative way?</li> </ul>
<p>If body image was classified as a motive- what category of motivation did it belong to, based on the taxonomy of human motivation?</p>	<ul style="list-style-type: none"> <li>• Why do you want to lose weight/improve your body shape/tone?</li> <li>• Were you told by your doctor to lose weight?</li> <li>• Did you encounter negative comments from others about your body? Did these comments matter?</li> <li>• Did you encounter positive comments from others about your body? Did these comments matter?</li> <li>• How does your body affect your mood and self-esteem?</li> </ul>

#### **5.4. Data Analysis**

When analyzing data, I intended to be a “positioned subject” (Rosaldo, 1989). Such strategy requires the researcher to consciously and constantly think about what and where she/he is as a researcher, and what and how she/he does things. Such reflexivity is perceived as a strength for evaluating qualitative work, as it allows conscious deliberation (Baxter & Eyles, 1997). The data analysis process began simultaneously with the data collection (Merriam, 1988). The initial step was to explore each individual interview in-depth. The main strategy employed in this phase was to identify patterns of experience by analyzing each line of data (Aronson, 1994). The next step was to identify all data that related to the already classified patterns and then to combine related patterns into sub-themes (Constas, 1992). According to Leininger (1985), themes could be identified by “bringing together components or fragments of ideas and experiences which often are meaningless when viewed alone” (p. 60). In this phase, view points from which the analysis began were established following Patterson’s et al. (1998) hermeneutic approach. According to hermeneutics, human experience is co-constituted by several factors, such as settings, unique identity of an individual, and situational influences. The interview narrative provides a basis for a direct interpretation of complex social interaction. Thus, the analysis required reading and listening to each interview several times to gain an understanding of it as a whole. This understanding was helpful while analyzing the sub-themes and modifying the understanding of the entity based on the understanding of its parts. The next step was to utilize the part-whole strategy when developing “nomothetic” (across individuals) understanding of the data (Patterson et al.). Major themes that go beyond individual experiences were developed and the constant comparison method was utilized to compare women’s experiences and perceptions. In addition, axial coding was employed to explore the connections between major themes and sub-themes (Strauss & Corbin, 1990).

Finally, all the transcripts were read one last time to ensure accountability for all perspectives of the phenomena.

To maximize trustworthiness of the study, all transcripts were mailed to participants for verification. All women confirmed they got the transcripts, and four of them suggested minor changes to their transcripts, as they elaborated on some of the previously discussed issues. Based on their feedback, appropriate changes were made to the transcripts. The findings were validated through member checking and external audit. Although I looked for feedback from participants, I recognize that the process of analyzing and categorizing the transcript data was affected by my own perception of body image issues. To uncover my own bias as much as possible, I utilized the reflective journal and I tried to expand my personal recognitions by constantly challenging my understanding of the data with the feedback from the participants. As for goal of this analysis, I was not looking for all-embracing conclusions. Rather, I hoped the findings would engage both me and the audience to explore the issue of body image and its effect on physical activity participation more deeply.

## CHAPTER VI

### PARTICIPANTS PROFILES

In this chapter I will present the profiles of women who were interviewed for the study. Even though all participants were chosen based on the criteria of race (White), age (45 to 64), and exercising level (at least once a week), there were some individual differences that I would like to present. For each individual, I will describe their socio-demographic status, such as age, marital status and education level, among others. Also, I would like to describe the women's current physical activity levels, type of activities they participate in, as well as personal history of physical activity. Moreover, I will discuss their personal definition of physical activity, as interpreted by each interviewee.

#### *Elaine*

Elaine is an active 54-year-old. She is married, with one daughter who is currently attending college in another state. Elaine has a Masters degree and is dedicated to her job, often working overtime. However, as she stated, she is lucky to have flexible work hours that allow her to exercise whenever she wants. Elaine loves to run; she does it three to four times per week, with each workout lasting about 45 minutes. In addition to running, she plays tennis and golfs with other women or with her husband, and occasionally she does some weightlifting exercises after running if time permits. Elaine defines herself as a very active person:

I always as much as possible try to take stairs, walk over campus (...) I always, whenever I have an opportunity to exercise, when I go to a mall or grocery store, I try to take the further away parking spot (...) I like to be active.

When asked about the history of her physical activity levels, Elaine recalled being physically active since college. However, she went through ups and downs in her life, especially when she started her current career about 10 years ago. She ran a half-marathon at some point and would like to run a full one in the future. Elaine believed her activity levels

were influenced mostly by two factors: her competitive personality and her family. When it came to being competitive, she enjoyed playing tennis with other women, especially if they had similar skills level:

There are women who are probably my age but they are much better and I would not feel comfortable playing with them because I would be, it wouldn't be fun for them to play with somebody who is much lower. Likewise, I wouldn't like to play with the beginner either who can't get the ball over the net. So I do like to have people who are at the similar level. And in sport that is a little bit more a competitive sport.

Elaine grew up in a physically active family -both of her parents have always been very active. For Elaine the fact that her mother is now 89 years old and still is extremely healthy has served as a big influence and motivator. She wishes to be an equally good role model for her own daughter when it comes to physical activity.

#### *Veronica*

Veronica is 58 years old, she has a Ph.D. degree, and she is married. She has two stepchildren and two birth children. She also has five grandchildren who visit about five times per year. Veronica has been doing low-impact water aerobics for several years, about two to four times per week, each session lasting about 50 minutes. She really enjoys this class, even though she has to get up very early (5a.m.) to participate. The low-impact factor is especially important because of a knee injury that occurred in the past. Veronica also likes to walk with friends or with her husband. She used to hike a lot, but currently, she does not have chance "to do it that much." She has always enjoyed being outdoors. Veronica exercises from two to eight hours per week.

Veronica has been active all her life. In college and right after graduation she was running "whenever I had a chance – and it felt good and I liked that." She also used to bicycle regularly. Veronica believes she was "unintentionally active" when she had young children; but even at that stage of life, she also looked for more structured forms of exercising (such as exercising at home with a VHS tape).

### *Jessica*

Jessica is a 61-year-old married woman. She has an associate degree and she has retired after working for 31 years. She has four children: two children from her previous marriage and two children from her husband's previous marriage. She has six grandchildren that she occasionally takes care of, but not on a regular basis. Her physical activity consists mainly of walking with her husband, almost every day (if weather permits) for an hour. Up until two years ago, Jessica had a membership at Truly Gym and she used to exercise there almost every day, and hopes to exercise there again. However, her husband's health does not allow him to exercise at the gym, and Jessica does not want to go there alone. She admitted she does not enjoy the thought of exercising, but her health problems (being a borderline diabetic) require her to stay active. Also, her daughters are “exercise nuts who keep begging her to do it [to exercise].” Jessica admitted she had stopped exercising after high school, but due to health problems, she started to exercise again.

### *Anna*

Anna is a 57-year-old widow with no children. She has been active all her life, participating in sports such as tennis, swimming, softball and cross country skiing. However, after her husband passed away 10 years ago, she decided to go back to school to earn a Masters degree. Due to the time constraints, she stopped being active. About 8 months before the interview, she graduated from school and started an aquatic exercise program that met 5 times per week for 50 minutes each session. Anna admitted she returned to more active lifestyle due to health problems such as high blood pressure. However, now that she is physically active again, she is addicted to it:

Before school, when I used to exercise, I did lap swimming, and it became addictive, if I didn't swim I was going crazy, so I was swimming 7 days a week, but... now I am getting that way after 5 times a week and I am thinking that I should do something on Saturday, and on Sunday I am just laying around, and yes, there are 5 million other things to do around the house, and I should really be exercising, so, I am on the border on getting obsessed about exercising.

Anna also believed that being physically active results in other “healthy lifestyle” behaviors, such as eating healthy food and being more conscious about overall health and habits.

*Sandra*

Sandra is a 51-year-old married woman with no children. She has a Masters degree. She joined a gym only two months before the interview took place. Unlike most of other interviewees, she is focusing on a weightlifting program with the help of a personal trainer. She exercises every day, alternating weightlifting and using an elliptical machine as a form of cardiovascular exercise. Sandra also walks or bikes to work. In addition, she walks her dogs every day. When it comes to her personal history of physical activity, Sandra reported being active since college. At that time she started to run and bike, but after couple of years she had to give up running because of the problems with knee. Since then, she has been walking and bicycling. Four years ago, Sandra started weightlifting on her own at home. She decided to join the gym because of age issues and weight gain, and also wanted to “get more serious about the weightlifting to boost the metabolism.”

*Cheryl*

Cheryl is 47 years old, divorced and has two children, a 21-year-old college student, and a 16-year-old still living with Cheryl. When asked about her physical activities, Cheryl mentioned mostly walking and gardening. Cheryl considered gardening as a big part of her routine, as she gardens 3 times a week, usually 2 to 3 hours each time:

I've just moved to a place where I am living with a large yard in July. So except for the winter months, it was a pretty neglected yard, so there is a terrific amount of work to do. I'm not just trimming things.

Additionally, she walks between 30 and 60 minutes every other day. Cheryl started walking about 10 years ago when she decided to start a doctoral program: She discovered that walking helped her relief stress and sleep better. Cheryl recalled being a very active child. However, after high school, her physical activity levels declined, mostly because of the time she had to

spend studying. She believed she was active when her children were young, but she has never considered playing with them as exercise or being physically active: "I was not very active in that term." When Cheryl started to be active again, she tried several different types of activities, but did not enjoy most of them:

I had tried aerobics and the gym is really boring for me basically, I feel really, not very graceful, I was never much of a dancer so aerobics is not as pleasant, and I don't like swimming, and yoga has mats and I am not really flexible.

She believed walking to be comfortable, enjoyable, and also "easily available," as it does not require any equipment except from good shoes.

### *Angela*

Angela is 52 and quite active. She is single and has two adult children who do not live at home anymore. Angela enjoys biking. She bikes to work almost every day, if weather permits; she does not ride on snow or ice. She stated that she has "more miles on my bike than I have on my car." She is a member of a bicycling club in Champaign-Urbana, and belongs to an intermediate level group where she is the only woman. In the wintertime she rides at least twice a week, for the rest of the year she rides every day. The ride to work is about 15 minutes long, but in the evening can last anywhere between 1.5 to 2.5 hours. On the weekends, the rides are even longer, with an approximate distance of 50 to 60 miles per day. Angela joined the bicycling group in 2002. Before joining, she participated in swimming, which she still did on a regular basis (2 to 3 times per week). In addition, she exercises 1 to 2 times per week, either weightlifting at the gym or at home using a "core workout" DVD to keep strong core muscles for her biking performance. She has been physically active her entire life, as her parents encouraged a physically active lifestyle.

### *Debra*

Debra is 53 years old. She took some college courses but does not have a college degree. She is married, with no children. Debra's physical activity consists mostly of walking,

anywhere between 30 to 90 minutes per day. She used to run competitively for 5 years (1978 to 1983) but started to experience serious physical problems with her hips. Since then, she has walked every day, both inside on a treadmill, as well as outside with her dog. Debra described herself as an active person:

I am not a couch potato, if I watch TV I have to be doing something so I walk on a treadmill. Just to get rid of that extra energy. (...) I have an exercise bike too, I use that sometimes

Her entire family has always been active. Her father is still active despite his age and some physical problems he has been experiencing. This serves as an important motivator for Debra to stay physically active herself.

### *Carrie*

Carrie is 52-year-old married woman with two children. Her older child just graduated from college and the younger child lives at home. Carrie has a double Masters degree, in higher education and recreation. Physical activity has always been an important part of her life. She was raised in an athletic family, so she has never stopped being physically active. She used to run long distances until she got older and started to experience some health problems (arthritis in both knees). Currently, Carrie walks every day between 30 and 45 minutes. She also strength conditions about twice a week for 45 minutes. Sometimes, especially when the weather is nice, she aquajogs Carrie walks the half-marathon in the fall and in the spring, and she considers walking to be a very important part of her life.

### *Emily*

Emily is a 57-year-old woman with a Masters degree. She exercises at Truly Fit 4 to 5 times a week for half an hour. Her main activity is cardiovascular exercise on an elliptical machine, but sometimes she uses a stationary bicycle instead. She plans to add some weightlifting to her routine soon. When vacationing, Emily likes to hike. Otherwise, she walks, but not on a regular basis. Thus, exercising at Truly Fit is the primary activity she included in

her physical activity category. Emily has been a member of this gym for more than 5 years. She chose this particular gym because it is close to her house, and she did not enjoy exercising outside. Interestingly, Emily considered walking outside as “leisure walking,” not as physical activity:

I like the reward of the machine that says „you have walked this far, you have taken this many steps and you have burned this many calories,” whether it is accurate or not, I know it is not, but it makes me feel like I have accomplished something. (...) Even if I take the same amount of steps, walking downtown or in the country, it does not feel like I have done the same level of exercise for some reason.

### *Isabella*

Isabella, who is 60 years old and single, has two children and three grandchildren. She has a high school degree. Isabella exercises at Truly Fit three times per week, between 60 and 90 minutes each session. Isabella prefers cardiovascular exercising machines: she walks on a treadmill, uses elliptical machines, and occasionally uses stationary bicycles. Weightlifting is also a part of her routine. Isabella described herself as an active person. Before joining the gym she walked on a regular basis, and she also mentioned taking care of a house with a big yard as a part of her active lifestyle. Also, until a couple of years ago, she took care of her grandchildren, which she also considered physical activity. This is the first time she has a gym membership, so she usually exercises with her sister, Margaret.

### *Margaret*

Margaret is 64 years old, also single, and has children but no grandchildren. Margaret is Isabella’s older sister. She also has a high school degree. She exercises with her sister at Truly Fit. Most of the time Margaret and Isabella exercise together, thus Margaret also uses cardiovascular exercising machines and adds some weightlifting to her routine. Margaret described herself as a couch-potato. Before joining the gym she used to exercise occasionally at home, using different video tapes. She recalled “being active on and off” throughout her

life—there were periods of time in her life when she exercised every day, but there were also periods of time when she did not have enough motivation to be active at all.

### *Ginger*

Ginger is 50 years old, married, and she has a 17-year-old son who still lives at home. She has a Bachelor degree. Ginger is currently training for a half-marathon, so she runs about 20 miles every week. She runs together with a group of intermediate and advanced runners. Ginger enjoys being an active person. She likes various activities such as cross-country skiing, downhill skiing, rollerblading, and swimming and diving. Ginger believes that there are many opportunities in the Champaign-Urbana area to be active if a person wants to stay active. She has had a membership at Truly Fit for about 20 years. At the gym she does a mixture of cardiovascular exercises and weightlifting exercises. She started to exercise when she was still in college. Since then she has trained for several athletic events, as she discovered a sense of accomplishment in being athletic. Ginger also believes that exercising lets her keep some control over her busy life.

### *Dorothy*

Dorothy is a 63-year-old married woman with no children. She has a Masters degree and she retired from her full time job. Dorothy exercises at Truly Fit gym, approximately every other day, usually for between 60 and 75 minutes. Her routine consists of a mixture of cardiovascular and strength exercises: first she walks or jogs on a treadmill, then she uses 12 weight-training machines. When the weather is nice, Dorothy also walks outside and rides a bicycle. She reported to be more or less active her entire life, but she has maintained her current routine since 2006 when she retired. Before then, she went to the gym approximately twice a week, but her routine consisted mostly of walking on the treadmill, without any strength-related exercises.

### *Sophia*

Sophia is a 60-year-old academic professional. She is married and she has one grown daughter who does not live with her anymore. Sophia reported being inactive and obese until two years ago. The only time before that when she was physically active was 6 years ago, when she decided to lose weight. She was going to aerobics classes 6 times per week for one and a half years. However, as Sophia did not change her diet, the program did not bring any results so she stopped participating. Currently, Sophia is exercising on a regular basis, even though she does not enjoy it. She started exercising in 2007, when she was diagnosed with diabetes. Now she walks every day, at least 3 miles per day, with 5.5 to 6 miles on most days. She usually walks outside, after work. In the winter she uses a treadmill at home. However, the treadmill had caused some major problems with her hips, so at the time of this interview Sophia was undergoing physical therapy in addition to her walking routine. Also, since January 2009 she has been exercising at a gym. She selected her gym „because they have the reputation of a rehab”. She goes there 3 to 4 times a week, for about 60-75 minutes each time. At the gym she usually bikes (between 35 and 50 minutes) and then she uses 4 to 5 different weight machines. In addition, Sophia decided to walk during her lunch break – she selected restaurants within a 10 minute walking distance from her workplace, to get an additional 20 minutes of physical activity every day.

### *Kristen*

Kristen is 55 years old. She has three adult children who do not live at home. She has a Bachelor degree and is still working. Kristen considers herself to be an active person. She has been physically active her entire life. She and her husband joined Truly Fit gym 27 years ago; however, after a couple of years Kristen stopped exercising because of her obligations as a mother of small children. However, 15 years ago she rejoined the gym and has exercised there regularly ever since. Currently, she goes to Truly Fit about 4 to 5 times a week, usually in the

evening, for about 45-50 minutes. Her routine consists mainly of cardiovascular exercise. She walks on a treadmill (with an incline) for 20 minutes, then she does another 20 minutes on a stair master or elliptical machine. After that, she spends 5 to 10 minutes doing some strength exercises with weights. Kristen believes physical activity has been very important to her since a young age. She was not raised to be competitive; she preferred activities that were performed individually, such as swimming. Despite that, all of her three children were athletes until the end of college. Nowadays she considers physical activity as a priority in her life.

### *Lisa*

Lisa is a 46-year-old single woman and has no children. She has a Ph.D. degree and works at the university. Lisa is quite active – she participates in a high-impact aerobics class three times per week. In addition, she attends Tae Bo classes on Saturday mornings. Lisa started her participation in aerobics and Tae Bo 6 years ago. When asked about her own definition of physical activity, Lisa included walking to work occasionally (a 30 minutes walk from her apartment). She also mentioned gardening as a type of physical activity, even though she did not have a garden herself. However, she did not consider any household chores to be physical activity:

The cleaning – maybe it is a part of physical activity, but not for me. I am a hyper person. I really am like that, you know, the energy that somebody would consider as a lot when cleaning, for me it's a normal energy expenditure every day, I am really active as a type of a person. So personally I need a little bit more than that, more than it takes to clean, more of a challenge I think. If I really have been sweating and I burned a lot of calories, that's physical activity for me.

### *Brenda*

Brenda is a 46 -year-old married woman. She has one 8-year-old son. She has a Masters degree and works at the university. When asked about the types of physical activities she does, Brenda immediately mentioned running, mountain bicycling, and weightlifting with a personal trainer. In addition, she occasionally plays ice hockey. On average, Brenda exercises 6 to 8 hours a week. She recalled always being active, and participating in sports all her life.

However, it was after graduate school when her physical activity started to be more concentrated and has gradually increased since then. She did line ice-skating and running until the last stages of her pregnancy. She has maintained her current level of physical activity for the past 8 years. Brenda usually runs outdoors at trails in her hometown, Mahomet IL. She also goes to a gym in Mahomet. That gym is operated by two middle-aged women, so it is very popular among many middle-aged mothers.

### **6.1 Similarities and Differences among Participants**

The women shared some similarities and differences. Most of the women had post-graduate degree (Masters or a Ph.D. degree). The majority of participants were still working, only Jessica and Dorothy reported to be retired. While I did not seek the information on the household income, I got the impression that most women had a secure financial situation, thus they could afford participating in physical activities of their choice.

When discussing physical activity levels, the interviewees mentioned a wide range of activities they engaged in. Walking was identified as the most popular type of activity among the participants of this study. Women also preferred to use cardiovascular machines such as elliptical and stationary bike, both in the gym and at home. Even though about half of participants mentioned weightlifting as a part of their routine, only a few women had an actual weightlifting plan designed to target their personal needs. Running, water exercise, and aerobics classes were reported by only a few women. Interestingly, several women identified running as the activity of their choice, performed at some point of their lives. However, the majority of women who used to run on a regular basis had to switch to less strenuous types of physical activity due to running-related health problems (e.g., knee injury).

The average daily amount of time spent exercising and the intensity of types of exercises also significantly varied between individuals. Some women were physically active

for only 30 to 40 minutes daily (on average), while others reported exercising for more than 50 minutes daily. Also, women who exercised more tended to engage in a wider range of activities. For example, Brenda, who exercised for about 60 minutes every day, mentioned several types of activities (running, mountain bicycling, playing hockey, and weightlifting) that are classified as vigorous in the sports literature. In comparison, Isabella and Margaret reported engaging in about 30 minutes of light cardiovascular exercise (walking, elliptical machines) per day.

It is important to notice that women who were more active and chose more vigorous types of activities were also younger than the rest of participants of this study (45 to 52 years old). They also had been physically active all their lives, and being active was an important part of their identity. Interestingly, the majority of participants described themselves as *active* regardless of the time spent exercising. Thus, I decided to explore their personal meaning of the term “physical activity.”

## **6.2 Definition of Physical Activity**

When participants were asked to describe their levels of physical activity, they were not provided with any definitions beforehand. It was important to determine what kind of activities the participants of this study perceived as “physical activity.” I got a range of answers. Most interviewees believed that only intentional physical activity should be included in the definition. According to Brenda, things such as “running up the stairs or my preference for stairs in public places to elevators” should not count, as they were only incidental physical activity. According to Brenda, only concentrated, “effort-full” and intentional program should be counted toward physical activity levels. Similarly, Dorothy believed that physical activity was equivalent to working out:

I wouldn't define cleaning or going down the stairs at my house as physical activity. I mean, I know it's good for you, but I would not call it that way

[physical activity]. When I worked, I had an office job so sure, it was just going here and there, to the restroom, to copy something, but it's not physical activity. Physical activity is to work out, to exerting myself.

Sandra expressed a similar opinion on the subject and did not perceive household related chores to count as physical activity:

You know, women's magazines are trying to convince you that, you know, vacuuming for 45 minutes is the same like jogging for 45 minutes. And I am thinking 'no, I don't get that!'

Also Ginger did not include any work related or household activities into her personal definition of physical activity. However, some women, for example Lisa, believed that gardening should be included in physical activity definition, as some activities related to gardening can be strenuous. However, Lisa did not perceive household chores to be equally important.

Some women reported work-related activities as a part of their routine. For example, Kristen believed she was physically active at work as she worked with children and there was “a lot” of physical activity involved. Interestingly, she did not include any household chores into her definition, as she believed “physical activity should be more focused.” Also Emily included some work related activities (such as walking around campus and lifting heavy objects) into her personal definition of physical activity. Interestingly, she did not include any household chores or gardening, even though she considered some of these tasks to be physically demanding.

However, some women perceived any kind of movement as physical activity. When asked to define physical activity, Margaret stated that anything “that makes you move” should be considered exercising, including work-related activities and household chores, such as mowing the lawn. Jessica believed that taking care of the household and children has kept her active for most of her adult life. Also Veronica considered household chores and gardening as physical activity, as in her perception these types of activities could be “very strenuous.”

However, when initially asked about her physical activity levels, Veronica did not mention any of these activities, adding them only when asked about a specific definition.

### **6.3. Summary**

Even though there was a pre-set criterion for participating in the current study, interviewees varied significantly in their reported levels of physical activity. Moreover, they showed some differences in their preference of types of activities. Most of these individual differences were based on personality type. Also, personal history of physical activity, such as being raised in an active versus inactive family played a significant role in women's current levels of physical activity. In the majority of cases their current levels also seemed to affect their perception of physical activity in its definition.

## **CHAPTER VII**

### **MOTIVATIONS AND CONSTRAINTS FOR PARTICIPANTS**

The current study sought to explore the influence of body image on leisure time physical activity for women. Body image may serve as a motivation, a constraint, or as a non-issue for individual participant. To gain a deeper understanding of the role of body image, it is important to investigate other motivations and constraints that affect women's physical activity choices. Thus, in the first part of this chapter I will discuss the most popular motivations for physical activity as reported by participants of this study. The motivations reported by women reflected these identified in the literature from leisure studies and sports psychology areas. Then I will describe the most popular constraints experienced by the same group of women. Some of the constraint reflected those identified in the sports psychology literature. However, not many constraints from the leisure studies area were evident in the study.

#### **7.1 Motivations for Physical Activity among Interviewees**

The women discussed several factors that motivated them to participate in physical activity. Most of the reasons given were reflected in the leisure literature. The most popular motivations included physical and mental health, socialization with other people, enjoyment, desire to lose or maintain weight and self-efficacy. Moreover, the women also discussed other factors, such as being a role model for children and grandchildren, having quality time with their partners/spouses, or having “time for myself” as important motivations for staying active. Further, some women discussed the shift from their initial motivators for starting to exercise to developing different reasons as time passed.

### *Physical health*

In the literature, physical health is often mentioned as the most important motivator for exercising. The findings of this study reflect these from literature, as most women mentioned physical health as a first or second motivator for physical activity, when asked about reasons to exercise. Most women were concerned about their health status because of the health problems that affected them or their families. One of the most important health issues reported by interviewees was osteoporosis. For example, Kristen was aware that osteoporosis ran in her family and thus, she focused on preventing this disease. Even though she has been exercising on a regular basis for many years, she still suffered from osteopenia and tried to do more weightlifting to help with her bone density. Veronica also mentioned strong joints and not losing bone mass as important motivators. She had already experienced some problems, so for her to keep her body active was crucial, as it affected her other activities. For Carrie, arthritis was an important issue. This disease was not only a motivator for exercising, but also a factor affecting the choices of activities:

I do the strengthening and conditioning because I know that I want to be able to get out of the chair, and that's what my friend who set up a program, it's a program that's for older women, so I am not doing the same lifting that I was doing when I was in my teens and 20s and 30s, I am doing a program that is more functional.

Some participants identified health concerns other than these related to bone health. For Anna high blood pressure was a reason to go back to exercising after 10 years. Even though she did not initially like the thought of going back to exercising, her health status was important enough to make Anna participate in aquatic exercise class. Interestingly, even though several participants were in their 60s and thus could be classified as older adults, only one of them mentioned frailty as a motivator for exercising. Margaret was concerned with losing strength, especially in her arms. She recalled some problems with starting a lawn mower, thus she was motivated to do several weightlifting exercises for her arms. Sophia was

the only interviewee who reported physical health status related to type-2 diabetes as the only motivator for exercising. It was the first thing she said when the interview started:

First of all I should tell you I may be the perturbation in your data, because I had a major life change about 2 years ago. I was diagnosed with type 2 diabetes in April 2007. I weighted 283 pounds at that time. And that got my attention.

Later in the interview she admitted she “loathed” any kind of physical activity, and if it was not for improving her diabetic symptoms, she still would not exercise. Diabetes was also a concern for Brenda. However, in her case it was her father who died from this disease. She described it as a “painful and hideous death,” and was motivated to prevent a similar thing happening to her. Thus, Brenda expressed a desire to exercise even more than she already did. Elaine and Angela were the only respondents who mentioned physical health in general terms only, without referring to a specific health issue. For Elaine, feeling better physically was the main motivator for making exercising a priority in her life, because she “really, really believed in a relationship between health and exercise.”

However, some women reported that physical health had little or no motivational effect on their physical activity levels. According to Cheryl:

My family is generally pretty healthy, although my great-grandma had some heart issues, but she was almost a 100 when she died, so... I probably will be living for a long time. (...) So the physical health is not a big motivator, no.

### *Mental health*

Similarly to physical health, the importance of mental health as a motivator was also evident. In the current study many women reported that physical activity helped them to cope with some mental health issues. Stress relief was the most commonly discussed issue. For example, Elaine reported to be less efficient at work because of being stressed if she did not exercise on a regular basis. Exercise was a way to “clear her head before getting back to work.” For Veronica physical activity, especially water aerobics, had similar outcome. She believed it helped her focus and get better perspective on life in general. Veronica had to stop

participating in water aerobics for several years and she found she needed it to feel better mentally and emotionally:

I can really feel stuck, if I am not doing something. There was a time when I was working at this one place. And I couldn't get into the pool because I had to be gone at the times when the class was, because I was commuting. And I missed it a lot. And I find that it helps me focus and it helps me to get a better perspective on stuff. So yeah, I missed it.

Anna confessed that she believed exercising was a great way to cope with stress, and for that reason she regretted not being active for nine years of her life:

I think that the body functions way better after exercising and eating right, and when you feel better [physically], you feel better about yourself. It's like a chain reaction. All of this makes you just feel better. You are not that tired anymore. (...) I want to do it, I was always active, all my life, it helps in stressful situations, I'm sorry for the 9 nine years I did not do that, but I am up, and back into doing these things.

Carrie was another participant who identified physical activity as a way to relief stress. She worked full time and perceived her job to occasionally become stressful. Thus, she used her lunch breaks to go for a walk and calm down.

For two participants, Cheryl and Brenda, physical activity served as a remedy for sleep-related issues. Cheryl started to experience some problems with sleep when she decided to pursue a doctoral degree. She started to walk every day hoping that physical activity would have a positive influence on her sleep pattern:

I started walking because when becoming a student again I found that I was sitting around a lot and not sleeping terribly well, so I decided that would help me... It doesn't seem to be that stressful, but being a student was more stressful than I expected. So I guess I started to exercise mostly to fight stress.

Brenda also treated physical activity as a way to deal with sleeping disorders that ran in her family. She believed exercising was a crucial factor that helped to stabilize her sleep patterns. Brenda recalled that on the days when she did not exercise, the troubles with falling asleep were greater than on the days when she was physically active.

Other participants reported some other mental health issues they tried to cope with by being physically active. For Emily, physical activity had several mental health-related outcomes:

Currently I do it for stress relief. I find that I sleep better, if I had my exercise. I think more clearly, and also that I feel better.

For Debra physical activity served as an outlet to get rid of the extra energy that she had. Debra claimed to “get moody” if she didn't exercise every day. Sandra perceived physical activity as a way to be more satisfied with life and a way to prevent depression. This particular outcome was important for her, as her mother was suffering from depression at the time when the interview was conducted. Sandra wanted to make sure she did everything to not suffer from depression later in her own life. Interestingly, Sandra was the only respondent who mentioned depression as a motivator, even though the literature identifies emotional well-being as one of the most important mental health motivators.

Jessica expressed a very unique attitude toward mental health issues as a motivator for physical activity. She was able to identify some positive outcomes of physical activity as related to mental health (namely improvement of sleep pattern and well-being). However, as she did not enjoy exercising, she did not want to admit to herself that physical activity had a positive effect on her mental health:

I think I probably slept better when I had more activity (...) I probably do feel better. I just don't want to admit it, I mean I hate to exercise, I hate the thought of it.

### *Self-efficacy*

Self-efficacy was also mentioned as a reason to exercise. Women in this study discussed self-efficacy both as capability to perform everyday tasks, and improvement of self-esteem. For Ginger participation in physical activity resulted in increasing her confidence levels. She confessed that when she started to exercise in college, she did not feel confident in

her abilities. However, with time, when she started to train for specific things (such as running a race), she discovered a sense of accomplishment connected to her physical abilities:

I have always perceived myself as uncoordinated and not really athletic, so I started to realize that I could do anything. And then I am actually good at some things, I was astonished. So that was really freeing for me to do things, enjoy them and not be made fun of because I can't play basketball. People think of you in a certain way, so now, when some people think I am athletic I am really pleasantly surprised.

Brenda had a son, and one of the playtime activities with him was to use the boy as a weight for arm curls. Brenda was extremely proud to be able to still play with her son like that, even though at the time of the interview the boy weighed 65 pounds. She also reported that carrying all the groceries at once or lifting the luggage without asking any man for help gave her a sense of accomplishment. For both women, such sense of accomplishment was important for their self-esteem. They expressed a willingness to continue exercising to maintain such sense of pride in their abilities.

Some women focused on self-efficacy defined as an ability to perform certain tasks. For Cheryl it was quite important to be able to get to the top of three levels of stairs without losing her breath. Anytime she noticed a decrease in self-efficacy, it motivated her to exercise more to maintain the capability of performing everyday activities. Such perception of self-efficacy was also related to aging issues. For Carrie it was extremely important to stay fit and active for as long as she could. She had a young child at home, and she wanted to be able to “do stuff together.” Moreover, having older females who were active until very old age in her family was affecting Carrie, as she wanted to be the same kind of role model for her own children:

I have had a good role models, where I watched, like my grandmother and all my aunts, how active they stayed as they gotten into their 70s and 80s and some of them into their 90s. And I know it's because they have been active, so it's kind of the full body thing. (...) I think part of it is I have a young child, so I want to be active for as long as I can, and then when I get grandchildren with the other one I want to be able to do lots of activities and not have things like arthritis or the health issues that you can have as you get older.

Emily reported a similar issue. She noticed that with age she is less capable of “doing things” so she was considering adding stretching and weightlifting to her routine. She was motivated by seeing older people who were not able to take care of themselves. She wanted to avoid such a situation in her own future.

### *Menopause*

Some women consider being physically active as a way to cope with several effects of menopause. According to Carrie:

I am menopausal, I know that my sleep is affected, my hormones are affecting me mentally, I have that brain fuzz sometimes, I am watching my aunts, I know that you are going to put on some weight and a lot of times women put on weight and they keep putting it on. So it's important for me that if I put this weight on, but I know if I will stay active that I will go back to where I was. And it's more health related than looks.

Also Kelly saw some changes in her body during and after menopause, and that motivated her to intensify her active lifestyle. She was worried that because of menopause it was harder to lose a few pounds whenever she felt she needed it. Also, the hormonal changes affected the “distribution of fat on her body” so these changes made her stay as active as possible.

Similarly, Ginger stated:

I've already gained weight because of it. I am taking all the medications for it, I am having hot flashes, it's really awful. There is no other way to describe it, I just had no idea it was going to feel like this. And that's one of the reasons I do exercise. It's to try to get some control over it. If I don't exercise I will actually go nuts inside. You really have to have a physical release. And it's got to be hard exercise too.

For Emily it was very important to stay active. Her sister was diagnosed with ovarian cancer, so Emily decided to check her own health. She had been diagnosed with endometriosis and went through a hysterectomy. She recalled physical activity to be very helpful when coping with these health issues. Emily believed that exercising reduced negative menopausal symptoms such as mood swings and hot flashes. Angela approached menopause with a sense of humor. When asked if this is a motivator for her to be physically active, she said:

Oh yeah. Definitely. But you know what? These hot flashes? When you exercise, you can beat them. You can get hotter than them [laughs]. But yes, it helps. I think that if more women my age exercised, they would cope with menopause better. I think, with stress, it helps a lot.

Kristen was the only interviewee who seemed to be uncertain about the effect of physical activity on her menopausal symptoms:

I think it probably helped, because I didn't really know I was going through menopause. So I think the exercise just helped. I hear my friends going through all these other things and I don't know if it was the exercise but I think it didn't hurt. I haven't really noticed any changes in my body because of the menopause because I was doing my routine for so many years that it prevented my body from changing much. I've always heard people gaining weight in their mid section, but it's been like couple of years already and I haven't noticed that. Yet.

However, some women did not perceive menopause as one of the motivators for being physically active. For example, Dorothy stated that “menopause did not affect her that much.”

According to Isabella, physical activity was helpful with dealing with menopause only on certain days. Sometimes “the depression overrides that desire to exercise or be active.”

### *Enjoyment*

Even though enjoyment is reported in the leisure literature as a main motivator for leisure activity (Neulinger, 1974), in the case of being physically active it seemed to be important for only a few women. Carrie was one of the few women who reported enjoyment as an incentive to exercise. Most of the time she perceived walking as a time for herself and was looking forward to have more occasions to enjoy it. However, for Ginger enjoyment was the main reason to exercise. She stated that being active makes her feel good about herself, even if sometimes running is “not that enjoyable.” Also, she liked to find activities that she enjoyed, because it was the only way she would keep participating in them. Lisa, because of the enjoyment she felt during her Tae Bo and aerobics classes, did not even think of that time as exercising:

I like this exercise because I like dancing, and as I said, every time you have a new dancing routine that ties into the exercise class, and the teacher is amazing.

I just enjoy it very much. (...) You know the Slumdog Millionaire, kind of disco dancing, so it's a lot of fun in it. And it's a nice way to exercise, so why not.

Interestingly, for some women enjoyment only influenced the amount of physical activity performed, not the general decision about starting or continuing to exercise. For Cheryl, enjoyment was not an initial motivator for physical activity. However, she reported she “actually started to enjoy” walking because she lived in an area with lots of hills. However, after moving to the Champaign-Urbana area “walking is not as pleasurable as it was in the other place,” and that resulted in lower levels of physical activity for Cheryl. Also Elaine reported decrease in enjoyment from physical activity. She used to run outside, and she really liked it. However, because of the time constraint she had to start running on a treadmill and she believed that “being on a treadmill, it's not fun.” Also, Elaine stated that enjoyment was an important motivator to participate in competitive activities, such as tennis and golf. The enjoyment was connected to the presence of other people (girlfriends, husband).

#### *Socialization during exercising*

Being social is often reported as an important motivator for physical activity in the literature (Frederick & Ryan, 1993). Some of the interviewed women perceived being social during physical activity to be an important motivator. However, there were different aspects of socialization that served as motivators for exercising. For Anna, exercising was a way to meet new friends, which was really important for her after losing a husband. Also, it served as a challenging factor:

I did not know anybody when I went there, but I made a lot of friends, and yes, there are men and women in the class. It makes it more challenging with men in the class, because the guys want to be more physical and some of the ladies are quite old and they can't do as much, so it's a good mix. If you want to be more strenuous in the exercise, they let you do that. So, it's good.

For Veronica, water aerobics was a time to chat with her friend attending the same class.

Working full time negatively affected Veronica's ability to meet with her friends. Thus, the fact that her friend was attending the same exercise class was yet another incentive to participate.

Jessica reported her husband joining her for walks as the only thing that motivated her to be active sometimes:

The only real part about walking with my husband is that when we are walking, we are at least talking and listening to each other. Which is better than being at home with the TV on. So, you know, that part is good, but I just hate “oh, now we got to go walk”. It's just doing it, getting there.

For Ginger, running with other women who belonged to a running club was very important, as she considered these women to be an inspiration for her. Lisa considered being social as the most important reason to become physically active:

It was because of my friends, to begin with. I had a friend who was trying several different fun classes, Pilates and tae bo, so we went and tried several with her, just for the fun of it. We also like dancing very much, so... And she attracted other people, so we became like a group, 4 girls.

Isabella found both exercising with her sister Margaret and “being around other people” as an important motivator for going to the gym. She believed exercising around other people who were conscious about their health served as an encouragement for her.

However, many of the interviewees expressed mixed feelings about exercising with someone. Elaine preferred to run on her own, but golf and tennis were about spending time with friends and her husband:

It depends on the activity. For the treadmill and running I much prefer to be on my own because I have a very set schedule and I don't want for anybody to slow me down, and I don't want to be busy with people. And I like going over to ARC, because I like the solitude, because I am also on a job where I am talking to people all the time. So I like being over there and not have anybody that I have to talk to. Now, golf, there is no way I would play golf by myself. I wouldn't do it, honestly. My husband can play golf by himself. There is no way I would do that. So social part is very important. And tennis, well that I couldn't do by myself. I guess I could go and play with some stranger, but I wouldn't do that either. So for the competitive sports, recreational sports, social is huge. For what I consider to be real exercise – I want to be by myself.

Similar point of view was expressed by Veronica, who usually enjoyed walking with a friend or with her husband. However, from time to time she preferred to exercise alone:

I do enjoy exercising with other people, but I also like to do it alone. When I need to think, sometimes I just want to do it by myself. But it is also, it is a great way to just be able to chat with my friends who are really busy.

For Brenda, having an exercise partner depended solely on the type of activity performed. She preferred to run and bike on her own, as she liked to monitor her own pace and she did not want to have to adjust to other people. That was the reason she stopped exercising with her husband:

My husband exercises too, he actually was the one who got me into running. Before that I did a little bit of running, but with him, that was something we used to do together. But he is so much faster than I am so I started to rollerblading instead to keep up with him, but then I was so much faster on the roller-blades, so I started to do inline speed skating.

However, going to a gym ran by two friends of the same age as Brenda was a social thing, especially with “a lot of middle age moms hanging out there.” For Carrie, walking was usually “the time for her own peacefulness” when she did not have to think or talk about work. However, sometimes she preferred to be joined by her coworkers and resolve some work-related issues while walking, instead of spending time in a meeting.

Sandra was one of the few interviewees who preferred to exercise on her own. She enjoyed exercising because it was a time she could focus on her health, and the exercise program was developed especially for her by a personal trainer. Sandra was under the impression that most of the people in the gym who do some type of cardiovascular training or strength training were at the gym to exercise, as she described “everybody is in their own zone, which is sort of nice.” Dorothy was another interviewee who did not care for having an exercise partner:

I socialize with other people, but I don't exercise with anybody. And even when my husband and I go together, we do some of the same machines, but it's more about exercising in the same time rather than exercising together. I just do it for myself.

Similarly, Kristen stated that she was “not a talker during exercising.” Thus, even if she went to the gym with her husband, she did not exercise with him. Also, she did not even considered

exercising with a friend, saying she “always liked to do something for herself, individually.” For Cheryl, it was important to have an exercise partner when she was walking in the evenings. However, it was solely because of the safety reasons and did not serve as motivator. She stated, “I don't need anybody to walk with me to enjoy it.....It's more a solitary thing, I think.”

### *Social support*

According to Eyler et al. (2002), social support from family and friends may positively affect physical activity participation rates. In this study, all women declared to have strong social support from family members. Anna reported frequent discussions with her sister to be very motivational. Anna was the one who encouraged her sister to start being physically active and now they both pushed each other to do more. For Isabella, it was important that she and Margaret were pushing each other:

Of course with my sister and I going together, that's kind of a bonus there too, because we have each other too to follow up on. I mean I don't think so far we have gone by ourselves, like if the other one did not want to go, and it's not that we couldn't or wouldn't, it's just that it haven't happened yet. And I am the one to push her a little bit to go, I think we do that to each other, so it's mutual.

Carrie perceived her entire family to be extremely supportive. She walked the half-marathon every half a year, and both her husband and children were pushing her to walk more. Carrie reported that sometimes she needed some encouragement from her family members:

It is sometimes the family that will make me go walk. Because they know that's important to me. So they are very supportive of that, they've always been, or we've done it together.

For Brenda, the social support from her husband was both important and motivational. It related to not only her exercise habits, but also to her muscular body type:

Another thing that's really helpful is that my husband responds very favorably to my muscularity, he finds it really attractive and that's very helpful to me. I absolutely have my husband's support. When I was a little fluffier, he is attracted to athletic women, that's generally his type, athletic blonde women. When I had a little bit more fat he was attracted, obviously, we wouldn't have been married if he had not been, but after pregnancy, when I was a little heavier, I could tell, there was a sort of reduced interest (not commitment) and now the muscularity is, how should I put it, inspiring to him. He thinks his wife is hot, which is nice.

She also reported having a strong support from a younger sister, as both of them used to be overweight while in high school.

Some participants also perceived to have strong social support from their friends. Anna was really happy about the positive comments she got from her church friends. They noticed some weight loss and were also impressed with Anna's lifestyle and dedication to exercising:

Some of the ladies in the class, as well as some of my other friends from church, we always talk about what we are doing, and they are asking me “so, are you still getting up at 6”, they say things like “good work.” (...) I get some teasing “how can you get up at 6 in the morning”, well, it’s actually 5 in the morning, teasing in a good way.

Brenda reported to enjoy exercising at the gym where she was surrounded by friends of her age who also were mothers. Also, she found the strong relationship with the owners of the gym to be motivating. Carrie was another interviewee who perceived to have a strong social support from her friends. Moreover, she found it important to be surrounded by people who shared the same outlook on life:

A good majority of my friends are either doing their own thing or we are doing it together. Or I’ve got some who know that I walk and they want to do that, you know people that I meet that are new, like, I have a new friend, our daughters play together and she wants to do something so she is like “oh, will you walk with me.” So I think they gravitate toward you because of what you do or you gravitate towards them so you have that commonality.

Sophia perceived her friends to be supportive. However, she mentioned an important distinction between herself and her friends who exercise – they enjoyed being active and she did not. Thus, she rarely spoke about exercising with them. Cheryl did not perceive social support from friends to be important. Even though some people from her social circles were physically active as well, exercising was not an important topic in their conversations:

I am aware that my friends do different things, some do yoga, some swim, so I am aware that they do some kinds of physical activity, but we don’t usually get together and do physical things, or we don’t spend a lot of time talking about what our activities are.

Interestingly, Kristen reported to not have any social support from friends, because most of her friends were not into exercising. However, it did not seem to be an important issue for Kristen. Also, to have social support from friends seemed to be an unimportant issue for Sandra. However, Sandra considered herself to be in a better shape than most of her friends. It seemed that she believed the term “support” to be synonymous with “encouragement”, thus, she would not expect this encouragement from friends who in Sandra's perception were less fit than she was:

Other friends... I don't really care if they are supporting me. Most of my friends should be going to the gym. And my husband will say the same, that they need to go. And I started in a better shape than they are right now. We have only one friend who is thinner than me, in a healthy way, but the others don't. And my husband is a little bit more critical than I am, so when I make some reference to any of them, he will express some kind of a negative opinion. Like “oh yeah, she is huge”. And I don't think I would necessarily called any of my friends huge, but I know they could benefit from exercising, especially having some health issues with high blood pressure or being pre-diabetic.

The majority of women also mentioned body image to serve as an important motivator for physical activity engagement and continuous participation. However, because it is the main subject of the current study, body image as a motivator will be analyzed in the next chapter.

## **7.2. Constraints on Physical Activity among Interviewees**

It is important to acknowledge that women who participated in this study were already physically active. Thus, constraints they reported did not stop them from exercising, but only affected the amount of physical activity they performed. In some cases, the constraints affected the enjoyment of the physical activity. Interviewees reported the same set of constraints as identified in the leisure literature. Time and weather were the most important constraints reported by women in this study.

## *Time*

For Sophia, time was a critical factor. Her mother had been diagnosed with dementia and had to be hospitalized. The transition to a nursing home was extremely difficult for a 93 year old woman, thus Sophia, as a primary caregiver wanted to do her best to make moving to the nursing home as easy as possible. This resulted in both limited time for exercising, and a negative impact on Sophia's emotional state, sometimes preventing Sophia from exercising:

I go there twice a day, I stop in the morning on my way to work and then I stop in the evening on my way home. So sometimes I am able to stop at the gym from there and do my exercise, and sometimes I am just so emotionally a wreck and I just go home. But we are moving her to the Alzheimer unit and I am hoping that once we get her there, things will settle down a little bit, and I will be able to get back on my normal schedule, because now I have been able to go only once or twice a week since beginning of April.

Also for Anna time was an important factor preventing her from exercising more. She reported long work hours conflicting with the exercise class schedule to cause her to miss some aquatic exercise classes. Similarly to Anna, Cheryl perceived her job to be very time consuming. Because of it she could not exercise more, even though she expressed a strong desire to do so. Demanding job has also been influencing Elaine's exercising habits. She ran a half-marathon in the past and would like to run a full one, but she does not have enough time for training:

Never did the full marathon which I would love to do, but the time is a problem for me, over the last 10 years, when I got to my current career, which is fund-raising basically, my exercise level went down a lot because of the demands of my job. I have a job where I work long hours, and nights and weekends.

Lack of time affected not only the pursuit of long-time goals, but also the regular workouts. Having unexpected meetings, sometimes prevented Elaine from sticking to her usual routine. She seemed to be unhappy about not being able to have the physical-activity-me-time because of the demands of her job, even though in general Elaine enjoyed her work.

However, some participants did not perceive time as an important constraint. For example, Isabella strongly believed that with the right attitude and deciding on exercising being a priority, anybody could find time to exercise:

Time is not really an issue, it's the initiative on my own, the inside drive to get done, to do it. Of course, I work all day, 5 days a week, so in the evening you give yourself an excuse, like, I'm tired, my mind is tired, I don't want to do anything else. But it's just an excuse.

Her sister Margaret shared that opinion. She also believed that if one made exercising a priority, they would always find time to do it.

### *Weather*

Most of the participants mentioned weather as an important constraint for their physical activity routines. Weather was affecting exercise habits for Isabella. She recalled to have some kind of exercise pattern, where in the colder months she would stop exercising in general, to come back to being active in warmer months. She was concerned with getting sick in colder temperatures and she avoided getting out of her apartment. Sophia mentioned weather affecting her walking. She enjoyed summer more, as with the longer days she would have time to go walking after a long day in the office. In the winter it was not an option for her to walk outside when it was already dark. Carrie expressed the same concern. In the winter she was not able to walk early in the morning, and she usually worked long hours so walking in the evening was not an option either. However, she believed to not be affected by bad weather in itself:

But the weather in itself, not really, because where I work, I am at CRCE, so I can go, or I can go to the ARC, and generally, unless it's pouring down rain, if I have meetings I will walk to them, so I will get them in.

As walking was Cheryl's main activity, weather had a great effect on her physical activity levels. However, because exercising was important for Cheryl, she managed to develop some strategies to cope with the negative effects of the weather:

In the winter, it's harder. (...) When it's raining, or it's really, really hot and humid, or in the winter when there is a lot of snow and ice, I think these are the

things that really affect my ability to walk. I just stop then. In the summer, I try to walk a little bit earlier, when it's not that hot.

Some women were not concerned about the weather conditions. Most of them, like Anna, exercised indoors, thus they were not affected by the weather conditions. For Brenda, weather had a little impact on her exercising. However, she was able to negotiate this constraint by exercising in the gym instead:

I tend to not run outside if there is like dangerous thunderstorms or tornadoes in the area. And I don't ride my bike in the snow. In such cases I go to the gym, it's a great gym. It's full of middle-age women, it's fun, it's incredibly well equipped.

Elaine expressed the same attitude. She desired to make exercising a priority, thus she always tried to find a way to be active. She made some adjustments to her routine – in the summer she would golf and play tennis more often, while in the winter she would focus mostly on solitary exercising at the gym and played tennis indoors:

It all probably balances out. Well, I obviously don't play golf in the winter time. But then I think I go and work out more during the winter time. So it's compensation. And the weather does not affect that. I play tennis indoors in the winter time, but in the summer I play outdoors. But it's about the same amount of time.

#### *Other constraints*

Only a few women reported other constraints that affected their physical activity participation. Carrie was the only respondent who was affected by personal safety. Her main physical activity consisted of walking, and she usually did it in the country, where she lived. However, during the winter time it was too dark in the early mornings to walk, and there were no street lights. Thus, personal safety limited Carrie's physical activity in the winter:

Out in the country there are no sidewalks, there are no street lights, and it feels like to me you could fall and get hurt easier.

Brenda did not perceive personal safety as a constraint that would prevent her from exercising. However, she recognized the importance of it:

I am aware of the safety of my body, possible injuries, and I am aware I can't recover as quickly as I used to. Last thing I want is an injury, I hate having

my wings clipped. Not being able to exercise, not being able to work, I don't like it.

For others, like Anna, safety was not a concern. She used to be a life guard and she considered herself to be a proficient swimmer, thus she felt safe to participate in aquatic exercise classes. When discussing crime issues, only Cheryl perceived it as an important factor limiting her physical activity participation. Cheryl reported she would prefer to be accompanied by a friend when it got darker, even though in general she did not feel the need to have an exercise partner.

The majority of participants did not mention any interpersonal or intrapersonal constraints, other than body image, as factors affecting their physical activity participation. Elaine was the only interviewee who mentioned age in itself as an interpersonal constraint affecting her choice of physical activity. Elaine expressed some desire to try the climbing wall. However, she was hesitant to this idea because she had never seen a person her age doing such type of activity. She confessed to feel more comfortable around people of the same age:

I like to be around my peer group. Not totally, but I tend to not to do sports if I am the only person that's in her 50s and everybody else is my daughter's age. Then I wouldn't. With my friends, a bunch of women my age I would probably try things like volleyball, but I wouldn't play with just college students.

### **7.3. Summary**

The participants of the current study reported several factors affecting their physical activity participation. They were able to identify several motivators for both engaging in, as well as for continuing physical activity participation. Most commonly reported motivators related to these identified as important in the literature from both leisure area as well as sport psychology area.

Interestingly, social support played an important role in women's physical activity choices. All of the participants believed to have strong family support for being physically

active. Moreover, all participants perceived it as important. However, the role of social support from friends differed among individuals.

Moreover, women identified only several constraints affecting their physical activity levels. This outcome was predicted, as one of the criteria for participation in the study was being already active. Thus, even if the participants experienced some constraints, they were able to negotiate them. Also, it is important to notice that almost all constraints, as experienced by participants of this study, were structural. Besides constraints connected to body image, only aging was identified as an interpersonal constraint by one woman.

## CHAPTER VIII

### BODY IMAGE FOR PARTICIPANTS

Body image is often reported as an important motivator for physical activity in the sports psychology literature (e.g. Markland & Ingledew, 2007; Segar et al., 2007). However, in the leisure field, body image is most often classified as a constraint for physically active women (e.g. James, 2000; Liechty et al., 2006). In this chapter I will focus on the various aspects of body image as a factor influencing women's choices for physical activity. First, I will describe several components that women reported to affect their body image, such as personal history, social comparison with peers and media, and the aging process. Then, I will classify body image as a motivator, as a constraint, or as a non-issue, based on the personal stories the women shared with me. I will also focus on the motivational role of body image for physical activity and I will attempt to classify it according to the categories presented in taxonomy of human motivation (Ryan & Deci, 2000a).

To be able to achieve these goals, I asked the women about their perceptions of their current body shape in the interviews. Participants discussed several issues affecting body image, such as changes in their bodies caused by menopause and the aging process and the perception of aging in Western societies. Social comparison, both upward and downward, was discussed to understand broader range of factors that might affect women's satisfaction with their bodies and the role body image might play in leisure time physical activity choices.

#### **8.1 “Are You Satisfied with Your Current Weight?”**

First, I needed to determine if body image was an important issue for the interviewees. Thus, I asked if the women were satisfied with their current weight. There was a range of

different answers that could be divided into three categories: “Satisfied with my current shape,” “somehow satisfied with my current shape,” and “not satisfied with my current shape”.

*Satisfied with my current shape*

Approximately one third of the women reported that they were satisfied with their current weight and/or shape. Margaret was one of them. At the beginning of our interview, Margaret stated that she was not interested in losing any weight. She felt satisfied with her looks, and at the age of 64 she did not feel any internal or external pressure for weight loss or improving the shape of her body. Carrie was also satisfied with her weight. Even though she noticed a slight weight gain connected to the aging process and menopause, she accepted it as a natural thing:

I feel pretty good about myself, you know, I am strong (...) I just realized that as you age, that’s going to happen. And unless my body gets to the point where it could be a health issue, this is the shape I have. If anything, I could probably lose a couple of pounds, not 20 or anything... but I know if I will stay active that I will go back to where I was. And it’s more health related than looks.

Kristen also felt really good about her current body shape. She admitted that losing weight had been an important motivator for her in the past, but right now, as she achieved her desired weight, exercising was a way to maintain it and “keep the body tight.” However, she also expressed an anxiety about the possibility of gaining weight:

Yes, body image is a motivator still, I mean, I was never obese, I’ve always been in shape, but just the prospect of getting heavier, I just never wanted to be heavy.

Debra expressed a similar anxiety as Kristen. Even though she was at her desired weight range at the time of the interview, and claimed to be satisfied with current looks, she also was worried about the prospects of accumulating extra pounds. She admitted that this anxiety was a result of the problems she had with her weight when she was younger:

I just try to keep my physical appearance good. It’s very important. (...) I wasn’t always very skinny, no, when I was, probably, before 1970 I was about 60 pounds heavier. So even though I am really satisfied with my weight right now, I wouldn’t like to gain weight.

Elaine was currently satisfied with her body. After going back to exercising she was able to lose some weight and that made her feel better with herself. Elaine called herself fit and her current concern was to keep strong and toned body. She expressed a desire to wear sleeveless shirts, so she was particularly focused on weight training that would keep her arms in shape. Interestingly, when discussing satisfaction with current body size, Elaine several times referred to the period of time before she started to exercise again. At that time she was ten pounds heavier and that had caused a serious dissatisfaction with her appearance:

There was a period couple of years ago that I didn't feel that way. One and a half years ago I probably weighted 10-12 lbs more than now and I just didn't feel good, things were tight, and I had really nice clothes that didn't fit me anymore. (...) I am glad that I am fit. I would not feel comfortable caring an extra 20-30 pounds. I mean, I was caring an extra 10 pounds and it didn't make me feel good. I just want to put my clothes on, I don't want to feel bad about myself.

Lisa was also satisfied with her weight. Even though she recognized that there always would be some issues to work on, such as toning her arms or legs, in general she felt fit and strong. Lisa was also proud and happy about the positive comments she has been obtaining from her peers, exercise classes instructors, and female students, usually younger than her.

#### *Somewhat satisfied with my current shape*

Among the participants of this study there were women who, for several reasons, could not clearly describe their attitudes toward their bodies. For example, Brenda reported to be “extremely satisfied” with her current shape. She believed she was “in shape” and toned, she was happy about her muscular and strong body. Her husband's positive response to Brenda's current body shape served as a reinforcement of her goals as well as affirmation of the positive thoughts she had about her own body. However, Brenda also reported experiencing some occasional dissatisfaction with her body. She admitted that at times, when she felt more stressed or tired, she experienced something she and her friends at the gym called a BDD day – Body Dismorphic Disorder day. On such days she perceived her body as “less attractive than

usual” and felt greater pressure than usually to lower her body fat percentage, even though it was already low:

Thinking of my body image I wish I could lose a little bit of this middle age fat, but when I check my body fat level my trainer tells me it is as low as it could be without heading towards unhealthy. It's like 16% or something. So I probably shouldn't be thinking about losing fat, but I do. And for that reason I do have a thought that I wish I were thinner. But I am healthy, and I am in good shape and I shouldn't be thinking that. Probably. Medically. I don't know.

Dorothy made some contradictory statements as well when discussing her body satisfaction. At first she reported body image to be one of the major motivators to exercise. She was “always trying to lose weight,” both for health and appearance reasons. However, later in the interview she expressed relatively high levels of satisfaction with her current shape: “I feel like I am in a good shape.” It is important to acknowledge that this satisfaction was connected to her age:

I am relatively satisfied with my body. I guess that I constantly feel that I need to lose weight. It's like a battle. All the time. I have to watch what I eat. No, I'm not happy, I'm hoping, I am always hoping to look a little bit better, to drop a size in clothes. But I am fairly satisfied, as for a woman my age....

Anna also was ambiguous when describing her attitude toward her own body. First, she expressed a desire to lose some more weight, especially in her abdominal area. She believed that after gaining some weight she stopped being “that attractive.” However, when she got some positive comments from friends who noticed that she had lost some weight, she was happy about it. The fact that she had recently lost some weight made her feel better about herself and more confident:

Yeah, now that I am losing weight, and the clothes that I have fit better, I just bought an outfit, I have to give a talk at the graduation tomorrow, so I bought this outfit and it's a size less, so I felt really good about that, so that's exciting. That really makes me feel good.

When asked, Angela stated to be satisfied with her weight. However, she also acknowledged some changes to her body, such as accumulating fat in the abdominal area. That made her somewhat self conscious and affected her behaviors, for example she would not wear a bikini. Emily also contradicted herself several times when discussing satisfaction with the body size.

She believed she should lose some weight. Emily was also aware that her BMI placed her at the “high end of the average” charts. However, she believed she “carried her weight well,” as people were always underestimating her true weight and she herself perceived her body to be proportionate:

It feels right. My clothes look good, and when I am walking I don't feel I am carrying a lot of weight. I pretty much accept myself. (...) Right now I am heavier than I have been and I would like to be, I am aware of that, and I know what it is that I need to do to change that, which is to stop eating so much. So I am continuing exercise and I know that this will encourage me to change my other habits as well.

#### *Not satisfied with my current shape*

Some women clearly described a lack of satisfaction with their current weight. For example, Ginger was disappointed with the fact that she gained some weight in the past few years. However, this dissatisfaction did not influence any of her behaviors. Veronica expressed similar attitude. She was not currently satisfied, she expressed a desire to lose weight, but her current shape did not affect her exercise habits.

However, some women reported that lack of satisfaction with their current shape influenced their lives and exercising habits to a great extent. Isabella was aware of the changes in her body caused by the process of aging. These changes caused some anxiety, as appearance was still important for Isabella. Even though she did not feel overweight, she was able to name several body parts she was dissatisfied with because of the weight issues. Looking good was also an important issue for Cheryl. She noticed that recently she gained some weight and she was motivated by it to increase her exercise levels. Jessica was even more concerned, as she believed herself to be 40 to 50 pounds overweight. The extra weight affected both her concern with physical health as well as dissatisfaction with her appearance:

I don't like to go shopping because I am wearing bigger sizes, I hate the way my body is right now. And I don't like it, because in high school, I was really really REALLY thin.

Sandra was another interviewee who expressed dissatisfaction with her body, even though she considered herself to be in a relatively good shape. She gained some weight gradually over the last 10 years, so she was scared that this process might continue. She started exercising to prevent the continuous weight gain.

Cause my issue is like most of women's issue. Lower body. But my weight or shape was never an issue until I had to stop jogging. (...) I am sort of thin, but I also have gained weight over the last 10 years, so it's a gradual incline, and I don't want to gradually get to 200 pounds, you know?

Sandra would like to lose some weight to go back to the shape she was before having a hysterectomy. Sophia also expressed dissatisfaction with her body size. Sophia described herself as slightly obese, even after losing 100 pounds since 2007. She expressed her desire to lose more weight. However, both the dissatisfaction as well as the desire to lose weight were solely related to Sophia's health status:

The weight issue, it was related only to health. I did not feel the need to look better, I have no vanity, I really don't, that would never motivate me to do something.

## **8.2 Past versus Present**

Several interviewees, while describing their attitudes toward their bodies, compared their current body shape to their looks in the past. Some women indicated they used to be happier with their bodies in the past. For example, Elaine was more critical of her body now, as she noticed some negative changes in her body caused by aging and menopause. Her main concern was about the look of her “flabby arms,” as well as age-related losses in muscle mass. This statement was somehow contradictory to Elaine's claim of being satisfied with her body. Sandra also was happier in the past, because she was pretty much consistent with her weight for the entire adult life, until she had hysterectomy. However, Sandra recently started to notice some positive changes in her body due to the strength training:

I think I used to be a little bit happier in the past, before that procedure. I think I am probably a little bit stronger thanks to some of the weightlifting I

had done. But overall I think I was a little bit happier when I did not feel this sort of gut that seems to be appearing now.

Emily described an interesting phenomenon. Even though she was not entirely satisfied with her current shape, she believed the current levels of satisfaction to be greater nowadays than in the past. She seemed somewhat surprised when she realized how critical of herself she used to be:

I guess over the years I've always thought that I was overweight. And now, when I see the photographs of myself, for the most time I have been pretty average. (...) For a long time, when I was younger, I was bothered by these [Body Mass Index] charts, they never seemed to fit me, I could not imagine myself being at 140, I think I would be really really skinny, but I still did not like to be high on these charts.

However, there were some interviewees who felt more satisfied with their current weight and shape than they had been ever before. For example, Debra used to be obese when she was younger. After losing 60 pounds she became satisfied with her current shape. Also Brenda was significantly more satisfied with her body than when she was a teenager and young adult. She found it to be “a relief, like one more thing I don't have to worry about,” as the pressure of society affected a lot of her past behaviors. Brenda considered the aging process to work as a catalyst for her attitude toward her own body. Carrie expressed a similar attitude. According to her, younger people encountered higher levels of pressure on appearance. Thus, she perceived being older as a relief. Also Cheryl, even though she was not satisfied with her current shape, believed she was more accepting of her body today than she has been in the past. She became more concerned about the health and endurance issues rather than appearance:

I am probably more accepting with age, I think that for me again it's about how I feel and not about how much I weight. I don't weigh myself all the time, I just have a sense of, if I cannot make it three sets of stairs without feeling winded then, you know, I know I am not taking good care of myself. But I am more comfortable with my body, I think, than I was when I was younger, the menopause served me pretty well. Even though because of it, it is a lot easier to gain weight.

For Jessica, the aging process also served as a catalyst for her issues with weight. She was more critical toward her body when she was younger, even though she was thin as a teenager.

With age she became more accepting of her body. This transition happened due to social comparisons with peers:

I was probably more critical about myself when I was younger. Because more people in their 60s are probably heavier so I accepted my weight a little bit more, but even though, I still don't like it.

Anna was the only respondent who could not indicate when she was more satisfied with her body. Until Anna was 30 years old, she was very satisfied with her looks. Then she gradually gained some weight and believed she “wasn't that attractive anymore.” Currently Anna was rather dissatisfied with her body size. However, she still claimed that negative comments about her body would affect her more in the past. Anna believed that younger people, in general, were looking for a partner, thus they cared more about their appearance. As she stated: “I guess I don't feel that way anymore, I had my fun.” Lisa's opinion on this issue was also unique, as she did not see any difference in her attitude between past and present. She felt satisfied with her body through her whole life. According to Sophia, body image never played an important role in her life. Even though she reported to not be satisfied with her current shape, it was solely due to health reasons and was not related to appearance. Angela's attitude was similar – she was never concerned with her body:

I think because I am like a tomboy, I think it has something to do with it too. I am sure I had to be aware of it when I was younger, but it was not an important issue for me. When I was growing up, it was more like hippies and stuff, so people were more relaxed. Body image was definitely not a priority. (...) I think my body changed only in the past 10 years. But that's how it is. I don't expect to be 90 and have a body of a 18 year old. That would be unrealistic.

### **8.3 Body Image and its Influence on Physical Activity**

Body image seemed to have a significant influence on women's participation in physical activity. The majority of participants reported body image to be an important motivator, both for initial engagement in physical activity, as well as a factor positively affecting continuation. Body image was often connected to weight and overall appearance.

Improvement of body image affected women's mood and overall quality of life. Women often reported to exercise either to lose weight or to maintain their current weight. Most women who identified body image as a motivator for engaging in physical activity perceived it as a motivation coming from within, thus having high levels of perceived autonomy. For some women body image was a constraint. However, it did not prevent them from exercising, but only forced them to implement several negotiation strategies. Most of the women who reported that body image affected their physical activity mentioned types of outfits they would not wear and settings where they would not exercise. Some women recognized the constraining role of body image for others, even if it was not a constraint for them personally. Interestingly, in some cases body image served both as a motivator and a constraint for the same participant. Only a few women reported body image to be a non-issue, as they found other motivators (such as physical and mental health) to be more important.

#### *Body image as motivation*

Many women mentioned body image as one of the main reasons to exercise. For Dorothy it seemed to be an important motivator, equally important to her physical health:

I know it is good for me, physically, and I am always trying to lose weight, or to maintain my weight, right. So, I guess appearance. But I know it is good for me.

Ginger reported exercising as a way to maintain her weight. She loved to eat a lot and was worried that without being active she would gain several pounds. She told me that body image and losing weight was a primary motivator for starting to exercise when she was still in college. For Sandra, feeling that “her pants got a little tight” was a primary motivation for going back to exercising, even though overall she perceived herself to be “not too far from a good weight.” Angela was also motivated by her body image. She perceived an attractive body to be one of the outcomes of exercising that led to a increase in the quality of life:

It makes you feel good. It's just good for mental and physical health, and physical appearance too, because everything you do when you exercise, your endorphins

are so good they last. The chemical reaction you get is incredible. You look better, you feel better, and I think your outlook on life is better too.

Losing weight was a primary motivator for physical activity for Brenda as well. She reported an obsession with losing weight and having “Twiggy-like” body as her initial reason to start exercising in a more structured way after graduate school. Even though right now she considered herself to be extremely fit, body image was still important for Brenda. She said she was really proud of how her body looked right now and this sense of pride made her even more motivated to keep that “ideal shape.”

I started lifting weights and what happened is that my body started to be extraordinarily fit looking, and that keeps me motivated. I like being 46 years old and still looking good. You know, flat tummy. It's just good for everything. It's good for the sense of myself, which no one has consistently high self-esteem, but not having to feel bad about my body the way I did when I was a teenager is a relief. It's like one more thing I don't have to worry about.

Debra reported being obese in her past, so for her body image was a reason to start exercising. Keeping a good physical appearance was still extremely important for her. For Isabella, body image definitely served as a motivator to exercising:

Yes. I like to stay trim and I think I look... not too bad. I mean, I am not overweight, but you have your little bulges and your little sags that you acquire over the years unfortunately. So, appearance is important to me.

Because of not having enough time to exercise, Elaine gained some weight and was not happy about it. A year ago she decided it was time to put herself first, so she went back to engaging in regular physical activity.

I gained weight, but a year ago I decided I finally need to put myself before my job, which I hadn't been doing, so anyway, I got back into it, and now I do it regularly. (...) I have really committed to regular exercise, I got to make it a priority, cause I feel so much better physically, and just feel better about myself and everything.

Losing some weight and toning her body was one of the most important reasons for Elaine to start exercising. She expressed some negative opinions about the way she looked before going

back to regular physical activity. She confessed that the positive changes in her body caused some positive changes in her perception of self and overall mood:

The other reason, I will be honest with you, since I started to exercise again my clothes fit better and I feel better, and you know I don't mind shopping anymore, I can find things that look good on me, and there was a period couple of years ago that I didn't feel that way. One and a half years ago I probably weighted 10-12 lbs more than now and I just didn't feel good, things were tight, and I had really nice clothes that didn't fit me anymore.

However, several interviewees noticed a switch in their motivations. Even though body image may have been one of the most important reasons initially, currently other motivations were more important. According to Kristen, exercise was a way to "keep her body tight", but with age it started to be more about preventing osteoporosis than about looks. For Cheryl, keeping a constant weight was equally as important as fighting stress. Interestingly, it also seemed to affect her levels of physical activity:

I find, especially this spring, I've noticed that I've gained a lot of weight again so I'll probably start walking more, I may even start bicycling or doing some other things like that.

Moreover, Cheryl believed that the desire to lose some weight may be as important for other people as it was for her:

Sure I believe weight is a motivation, yeah. It definitely is for me. I think that when I feel I am gaining a lot of weight I think about doing more exercise.

Emily expressed a similar switch in motivation. She said her initial reason to start exercising was solely for the weight loss, but with time the main focus started to be on stress relief. Interestingly, even though she believed her mental health to be a more important reason for exercising, she still treated physical activity as a way of maintaining weight.

Jessica was the only woman who stated that body image was important for health reasons as well as appearance. Being overweight, she had problems performing every-day activities, such as tying shoes or getting up from a stool. However, she also reported disliking

shopping because of the need to buy clothes in bigger sizes. Both of these issues motivated her to exercise.

### *Body image as constraint*

As participation in regular physical activity was one of the criteria of this study, none of the participants reported body image as preventing them from exercising. However, some women identified constraining role of body image as related to the types of outfits worn while exercising. Sandra described some types of outfits she would not wear because of her body type:

I am really aware of my bottom, so I would not wear tight shorts or leggings. I usually wear just a T-shirt and some longer short, sometimes I will wear the tank top, I am fine showing my arms and stuff.

Anna admitted she would not go swimming because she would not wear a swimsuit. However, she claimed feeling uncomfortable in such a revealing outfit was internal, as she experienced similar anxiety when shopping for regular clothes. Angela also admitted she would not wear a bikini. She made jokes about it: “I wouldn't wear a bikini, I have that much respect for others. I don't want to offend anyone.” Angela also believed that women her age should not wear short shorts (“Daisy Duke style.”) For Elaine, issues with her body constrained the type of outfit she would wear in the gym:

Oh, I would not wear short, little spandex thing. I wear longer shorts and sleeveless t-shirt. But I don't feel comfortable in short shorts, and definitely not a spandex thing.

Carrie expressed similar concerns in regards to her exercising outfit. She preferred to wear longer shorts (“mid tight versus upper tight”) at the gym. Carrie believed that feeling more comfortable in such outfit was related to both her age and her weight, even though she initially reported to be satisfied with her current weight. Jessica's exercise outfit was also affected by her body image. She openly admitted she would wear more revealing clothes if she was slimmer:

I thought “oh, if I was their size I would wear that too.” I had the baggy long slacks and just the t-shirt, I was not willing to wear the tight or the short, like a swimsuit thing, but if I looked like them, I would.

Some women identified the exercise setting as a possible constraint to physical activity. Interestingly, they discussed it in relation to other women, not to themselves. Elaine mentioned the constraining effects of the aging body that her friends encountered. According to Elaine, some women in their late 40s and 50s would not go to the university gym because they did not feel comfortable around younger people, especially female students:

I mean, I know there are people, mostly my age, who don't like to go to the university gym because of young people there, they much prefer going to a gym where there are their peers. And I can see that. (...) I've heard people say that they just don't go to some places, that it's just a meat market, everybody is in super shape.

Ginger also recognized the constraining effect of a gym setting for some women. Even though she felt comfortable in her gym, she was aware that some women might prefer going to “women only” type of gym. Ginger believed some women may feel uncomfortable in a gym where men “may look at you.”

Also Brenda recognized body image to be a possible constraint for physical activity for other women. According to her, some women might feel “so terrible they did not even wanted to start exercising.” Body image affected Brenda as well, influencing the type of activities she would not engage in:

All my life I felt self-conscious about the girly sports, like gymnastics, ballet and modern dance, I felt like I couldn't do that because I was too lumpy and too masculine and not graceful. I probably would be able to do it, but I probably still would have that twinge of self-consciousness, I am just not like that. I don't feel dainty. And sometimes that's not a good feeling.

### *Body image as a non-issue*

Only a few of participants perceived body image issues to not affect their physical activity levels. For example, Sophia, who reported physical health as her only motivator, perceived her body image only in relation to health issues:

Even the weight issue, it was related only to health. I did not feel the need to look better, I have no vanity, I really don't, that would never motivate me to do something.

Also for Anna looking better meant looking healthier. Even though she felt some societal pressure on appearance, it did not affect her personally. She stated that she “just wanted to look healthy and awake.” Carrie expressed a similar attitude, identifying body image as an important indicator of her health status. Margaret stated that she was not interested in losing any weight. She wanted to firm up her body and regain strength in her arms, to be able to perform tasks that required the use of force, such as starting the lawn mower.

#### **8.4. Factors Affecting Women's Body Image**

As the levels of satisfaction varied significantly among the interviewees, it seemed important to recognize factors influencing their body image. Only some of the respondents were able to determine elements which affected their opinions of themselves. Engaging in comparisons with other women, both with peers and role models presented by media, was probably the most important factor affecting the women's body image. There were several issues mentioned in relation to social comparisons. Both upward and downward comparisons occurred for some participants. The women reported comparing their bodies mainly with peers, however comparisons with images presented in the media were also important, even though most women who engaged in such comparisons recognized the “fakeness” of images provided by media. Also, the women indicated comparisons with peers to have two dimensions: comparison of looks and comparison of abilities. The other most commonly discussed factors were aging and menopause, the negative perception of aging in Western society, society pressure on appearance and femininity, and feedback from others.

### *Social comparison with peers*

Sophia candidly compared herself to other women in her exercise class. She chose a gym that had a reputation of being a rehabilitation center solely because she believed it would not be full of “women size 6 in spandex.”

I joined Metler Center and I went (this was when I was still really heavy, I was probably 250-260 pounds) and I did feel really awkward that I was the fattest person there. And just hated it, and come home and feel worse afterward than before going there. And it was because of the setting, because of the other women being there. (...) I would always walk in, look around and try to find somebody who was in a worse shape than I was. So it was like “oh, this is not so bad, you are not THE WORST person here.”

Anna acknowledged that she engaged in social comparison with other women. For Anna her peers were the most reliable source of comparisons. These comparisons were related to several aspects of appearance such as weight, but also included outfits and haircuts:

Sometimes I am looking around to see what people my age are doing, or clothing, the same way, that also relates to how you fit into that clothing...you know, you look at other people, and you get uncomfortable, because of how you feel about yourself...

Elaine also admitted she engaged in social comparison with both her friends and other women. Most of her comparisons were based on skills and abilities. However, some comparisons were also about looks. Interestingly, these comparisons were not affecting Elaine's perception of her own body:

I feel like I am average. There are people who are probably more fit than me. My really good friend that I play golf with, is extremely fit, but I don't feel uncomfortable at all around her, I believe a lot in genetics. She is who she is, I am who I am. And there are women who I play tennis with who are very, very overweight. But they are good tennis players. They can place the ball. And some of the women that I play the golf with who are very overweight are much better than me.

Elaine believed that the comparisons she made were not affecting her primarily because of the “being average” factor, as in her everyday life she was surrounded by women of all shapes. Moreover, she believed that with age she became more accepting toward herself and her body.

Brenda openly admitted that she engaged in social comparisons. Sometimes these comparisons were in the form of an open and honest discussion with women who perceived themselves to be different from the “ideal” popularized by media. For example, Brenda told me about one particular friend of hers who was also unusually muscular for a woman. They both sometimes made jokes about their unique body types:

My peers and I still have the same issues and the same discussions we had 20 years ago I haven't thought of them as the same, because they are more overt right now. There is a friend of mine who goes to the same gym, who also has very large calf muscles. And she has just dropped 30lbs with the help of her personal trainer. But we were joking about cowboy boots that are any higher than this [points just above her ankle] will not go over these calves.

Interestingly, Brenda believed these jokes to be deprecating, yet prideful. However, she expressed some negative feelings about engaging in such comparisons:

So my tendency to feel competitive towards women does have to do with the attention of certain men. Always has. It's not to any kind of level that interferes with my consciousness at all, but I do recognize that when I do compare myself to other women, it actually has absolutely nothing to do with intelligence, ability, success, for the most part. It has mostly to do with looks, yes. And it kind of sucks.

Brenda also believed that such process of comparing the looks with women who shared some similarities was natural for human beings. Interestingly, Cheryl recalled engaging in social comparisons during periods of time when she felt the worse about her appearance:

I think that's probably one of the indicators that I'm getting too heavy, when I start doing that. I don't, most of the time. And then when I notice myself thinking “she is fatter than I am” or “I'm not as fat as she is”, then I realize I need to bring attention to how much I weigh or how I feel.

Cheryl admitted that engaging in social comparisons made her feel a little bit better about herself, as she engaged in downward social comparisons (i.e., with women she perceived to look worse than she did). However, she also recognized that such downward comparisons were a sign of feeling dissatisfied by her own appearance and served as an incentive to “do something about herself.” For Ginger, social comparison also served as an incentive to exercise more. She engaged in upward social comparisons with women from the running club. She

compared both abilities (“they are running 50 miles per week”), and appearance (“they don't have any body fat”). Jessica also reported engaging in social comparisons with peers, both downward and upward. She compared herself to some friends who, like her, gradually gained weight over the years. However, Jessica also reported that she compared herself with a friend who was slimmer. Interestingly, Jessica found some comfort in the fact that even though her friend's body was better than hers, she perceived her friend to look older than her:

I have several friends that were very thin and now are heavy, but then I have a lifelong friend, we know each other since we were 5, she is thinner now than when she was in high school. And I sort of envy that, but I can also tell, in her face, she looks older than I do. And part of that is her life, but part of it, I think is that you cannot be too skinny. But I envy her that she can eat a ¼ of the meal and be done and move it away. And I don't do that.

Sandra seemed to be a little judgmental toward other women. Several times during the interview she made references to her friends' looks and body sizes. She told a story about an overweight friend who was not exercising regularly, even though Sandra tried to encourage her on several occasions. This sort of comparison was also encouraged by her husband, who sometimes made negative comments about their mutual friends' weight.

However, Sandra engaged in some upward comparison with a woman in her gym. She perceived the woman to be of similar age, which seemed to be an important factor for Sandra. For example, Sandra described in detail the type of outfits the other woman was wearing - “clothes that show a lot of skin, tiny little tank tops, and long pants that are fairly tight.” Sandra confessed to be too self-conscious of her body size to wear similar outfits in public. It is important to notice that in general Sandra considered herself to be in a better shape than most women she knew. Sandra was also trying to notice if men in the gym were observing that woman as much as Sandra did. Even though it was not clearly stated, it seemed Sandra's comments indicated that men's attention toward a woman were important indicators of woman's attractiveness. However, Sandra did not engage in unrealistic comparisons with

younger females. Interestingly, she indicated to compare her abilities, endurance mainly, to a man and woman who exercised in the same gym:

There is a woman there who comes in by herself, and like me, keeps to herself. And she has a great body for someone I am thinking is at least my age, and possibly older. She goes to the free weights section for instance, that's scares me a little with all this heavy equipment. And I do watch her, I am sort of fascinated by her. (...) And there is a guy there who, I don't know how much time he spends there because he is always so incredibly red faced by the time I get there, and the gym opens at 5, so in 45 minutes he has run a million miles on a treadmill and he is still going very strongly when I leave.

Some women claimed to not compare themselves with other people. For example, Angela believed she did not compare her looks to other women's:

I probably should, but I don't. I like being me. It could be selfish, I don't know, but I would never like to be somebody else. I think a lot of people want to be somebody else and that's why they struggle a lot, but no, not me.

Interestingly, Carrie denied engaging in social comparisons with people in her gym, as they were mostly younger than her. However, later in the interview she admitted that she noticed the differences in her physiology compared to her friend. Also, she stated that comparing her abilities to these of younger people in the gym made her feel good about her performance.

#### *Social comparison with media images*

It was interesting to discuss the issue of social comparison with media ideals with Brenda. She was a feminist and a cultural theorist, and media pressure on looks was one of her greatest concerns, both in her personal and professional life. Brenda expressed a deep concern about the issues of power for women. She believed that women could be empowered only if they were sexualized, as being attractive was the only way to gain men's attention and respect.

There are still some ways in which the culture creeps into my self-perception. I believe I am bothered with the messages media send us. I think it has partially something to do with my relationship to male culture and patriarchy. Some theories of the visual culture that we deal with, there are ideas that it is really not possible to be an intellectual agent in culture and be “a female body” at the same time. You sort of have to separate out the two, because a female body is so limited by it's biological identity.

Brenda admitted to engage in social comparisons with media images. She believed to have internalized some of the ideals more than she was actually aware of. A part of this internalization was a consequence of perceived strong society pressure on looks when Brenda was younger (comparison with Twiggy or Farah Fawcett when in college). However, she also imposed certain parameters on these comparisons, realizing that media were presenting unrealistic ideals of beauty. Ginger expressed a similar attitude, comparing herself with media images she found to be inappropriate to reality. However, she believed that, unlike social comparison with peers, these comparisons did not affect her body image. Jessica, on the other hand, did not find media images to be unreal, and she admitted she engaged in upward social comparisons. She stated, "I also look at women on TV, I envy most of them, I would give almost anything to look like them." Conversely, Sandra did not engage in comparisons with media images, as she recognized these images to be untrue. Sandra said, "I can pretty much separate myself from the media and the advertisement and all that stuff, because I think a lot of these images are really unhealthy. And unreal. And touched up." Carrie also did not engage in social comparisons with media ideals. However, she recognized the importance of messages sent by media. Thus, Carrie often discussed these ideals with her teenage daughters to make sure they had a "healthy body image." Also Angela, even though she recognized the influence of media messages on women's body image, did not report personally engaging in social comparisons with media images.

### *Aging and menopause*

Aging and menopause were often mentioned as important factors influencing women's perception of their bodies. It was especially true among women who felt less satisfied with their bodies now than in the past. When asked about their thoughts on the aging process, some women were able to instantly name the changes in their bodies that occurred due to aging and

menopause. The most common concerns were related to the shape and firmness of breasts and accumulation of fat tissue in the abdominal area.

Anna was able to name several changes in her body caused by the aging process. She perceived all these changes to be negative and related to perception of her own body:

My breasts are sagging, and my belly is getting bigger. (...) I get flaps under my arms, and my thighs are in worse shape (...) And I get the bags under my eyes, doing exercises for this. And the hair... So you know, it's getting older.

Also Isabella named several areas of her body that changed with age, such as buttocks, breasts, and abdominal area. She also noticed that her body “was kind of shrinking, and everything got loose.” Isabella was concerned with these changes and she admitted that the aging process was “hard for her” as she did not feel her age.

Some women were concerned with only one or two areas of their bodies. For example, Emily, even though she was somehow satisfied with her body, noticed her “pretty large chest” was sagging. Because of this particular issue Emily started to consider adding weightlifting to her routine. Elaine, even though she felt satisfied with her overall shape she expressed some concerns with the firmness of her muscles and reported to “get flabbier” with age. Sandra was not concerned with her breasts or legs, as she did not notice any major changes in these areas. Her main concern was related to her abdominal area:

I gained some weight over the last couple of years, most of it after the hysterectomy, so I am carrying a little bit of the extra weight in my mid section, and I think it is a pretty disgusting idea, so that has been my only disappointment I guess. (...) The belly is there, I am aware of it more than I used to be.

Carrie also noticed major changes in her mid section. However, Carrie believed such changes to be a natural consequence of being a mother, and even though she reported to be bothered by her abdominal area being bigger and stretched, Carrie consciously decided to accept the change in her body as a natural consequence of aging. Angela expressed the same attitude. She told a story of her friend being significantly bothered by gaining weight in the mid-section and compared her friend's reaction to the aging process with her own:

And I see changes in my body. My belly. No matter how much exercise you do, like a friend of mine, she is a little bit older than me and she will go like “I don't believe I didn't have that little belch here” and I am like “you just need to embrace it, it is OK”. It's not a big deal, especially that we both have kids.

Some women however were not affected by the aging process. Debra believed that “you are only as old as you feel” and when asked about changes to her body caused by aging, she reported only some problems with joints. Jessica perceived menopause and aging as an excuse, as some of the women she knew went through this transition without experiencing any major changes in their bodies, as they were able to prevent these changes by exercising.

### *Negative perception of aging*

Several participants believed aging to be perceived negatively in the Western society. According to Emily, older women are not as well perceived as older men. As she stated “older men are the respected elders, where women are becoming just the little old ladies.” Similar concern was expressed by Elaine:

I think that it's changing, but there is no comparison between men and women. Men, I've heard funny sayings that men, when they get older they are considered to be charming, and women are just considered to be older. So there is a huge difference.

Angela also believed that Western cultures perceive aging in negative ways. She thought that media representations of middle-age and older women were influenced by this negativity, thus women her age were presented in age-specific roles:

If you look on TV, women my age, they probably are not in those sexy roles. They are more in the mom, the grandma, and stuff like that.

According to Carrie, magazines for women are too focused on appearance, publishing numerous articles about success stories of losing weight and new diets in every issue. She perceived such a trend to be “a sad message” for women. Jessica believed some women to be concerned with their careers because of the negativity related to aging:

A lot of women believe that if they get older they won't get a job, I don't know why, but... I think it's our whole society. I think it starts to turn around but, you know, all the models are in their 20s and really thin. (...) I think our whole nation

thinks that after you are 50, you are going downhill, unless you have all the plastic surgeries and all that stuff.

However, some participants recognized a slow change in the perception of aging in society. Even though Brenda expressed her concerns about aging being perceived negatively in the Western culture, she also recognized a slow change in attitudes toward aging women, especially as presented by media:

I recognize that as baby boom generation grows older, Hollywood, and the culture in general that sexualizes female body is allowing older and older female bodies to be sexualized. In a way that is supportive to their sense of attractiveness and self-esteem within the culture.

Noticing this change in attitudes, Brenda was actually happy about some of the terms describing middle age women that recently occurred in the society:

I am glad that there are such a things like a term MILF, for example. When I first heard that, I was actually pleased that it existed, believe or not, because it suggested that older women could still be considered attractive in patriarchy (...)  
At this age, I am still allowed to be a woman.

(MILF – a Mother I would Like to F\*\*\*)

Elaine, even though she believed aging to be perceived negatively, noticed a little change in these perceptions and hoped these changes would become even more prominent. She believed that currently older women have more role models who “are aging beautifully,” both in terms of staying attractive and strong physically and mentally. Elaine stated that she “loved being in her 50s, loved people who were still really vibrant and were looking forward to the future.” She believed that the “positive aging” image was becoming more popular in media.

#### *Societal pressure on appearance and femininity*

The negative perception of aging was, according to some participants, strongly related to the pressure that society put on women's appearance and femininity. Anna felt she would not be concerned with her appearance if there was not so much pressure on appearance. She expressed a desire to lose weight, but for her the appearance was not that important personally,

but rather she wanted to do it for better health. However, performing a job where she is “on display” contributed to some discomfort:

Whether I like it or not, people do judge you on what you look like when you make a presentation, and whether it’s true or not in my case, I just don’t want to get to that point, so I just want to look healthy and awake, and I think by exercising and losing weight I feel much better about myself.

Brenda, as much as she did not like admitting it, believed that she, as well as other women, internalized a thought that men would not like her if she did not look attractive to them.

Because of this internalized pressure for attractiveness, the possibility of gaining weight was perceived by her as a double threat – she would feel bad about herself, and she would lose her power and position in the society:

I want men to like me. It's really not unusual, but I also recognize that the culture tells me that they won't like me unless I look good to them. And the culture also tells me how to look good to them. So, if I am tired or if I am stressed, I can feel self conscious and bad about myself because of, I don't know, having some fat pouches. And I recognize where it comes from.

Brenda's professor position allows her to have everyday close contact with female students.

She believed that nowadays girls encountered significantly less pressure from society. She believed her students were more relaxed and accepting toward their bodies than when she and her peers were when in college. The perceived pressure on looks negatively affected Brenda's life, even though it might have not affected her exercise habits. She told a story about giving a lecture that was videotaped. Because of the low temperature in the room, Brenda had to wear some bulky clothes and she believed she did not look attractive:

I gave a very good talk. It was one of the best talks I've ever given. But I was tired and it was cold in the room, so I was wearing this bulky jacket, and the angle of the camera and the lightening was bad, and I thought I looked so ugly. I actually had them take it down. I said “I don't want this on-line, I didn't give permission for this, you gotta take it down” and it was entirely because I came across as sort of this shrill, unattractive, tired, old woman, so I couldn't even have one of the best talks of my career out there, because I looked ugly.

Ginger discussed images of older women as presented in the media. She believed these images to be unrealistic and creating a strong pressure for women to stay beautiful and young-looking. She noticed that men did not encounter such pressure, and found this double standard irritating:

Especially when all these tabloids report middle aged women to get a little bit of belly fat. Of course they do!

However, Cheryl believed that in her profession she did not encounter as much society pressure on looks as some other women might have:

I think it [looks] is important for some people and in some professions. I don't get as much here on campus that weight is a big deal. I think there are other professions where it is much more of a concern. So I don't feel that sort of pressure, as much.

Similarly, Sandra felt that Western societies put a lot of pressure on looks. However, she did not feel as influenced as some other women, primarily because she felt she was in a relatively good shape.

#### *Feedback from others*

Some women noted that comments from others, both positive and negative, affected their attitudes toward their bodies. For example, Brenda was affected by the negative comments of her own father that she encountered when she was younger:

He was a very patriarchal guy who had daughters and made it very clear that he thought the oldest one was good looking, the middle one – me – was not, and the youngest one was cute. He was really reproducing a patriarchal attitude toward women's bodies within the family and I absolutely inherited that.

Brenda also recalled her sister teasing her because of being overweight as a teenager. For Brenda, such negative comments from family members were important and greatly affected her own self-esteem, resulting in some present issues, such as the inability to recognize her own accomplishments. Brenda also recalled experiencing negative comments from other women, and she refused to contribute to spreading negativity toward women's bodies:

Men can treat you like a sexual object. I make sure I never do it to other women. I had some experience with other women doing that to me. But I make sure I don't do it to other women. I will not contribute to that.

Angela was another interviewee who described herself as sensitive to other people's comments. Angela believed that even though she perceived herself as fairly satisfied with her current shape, hearing a negative comment made her unhappy. Moreover, as Angela realized how much of an influence this factor had on her own body image issues, it made her more sensitive toward other people. Similarly to Brenda, she avoided making negative comments about other women's bodies. Also, she “made sure she made a comment if she noticed somebody lost some weight.”

Interestingly, the negative comments in a woman's past might affect her even if the comments were not addressed directly to her, or if they were not made about her personally. Sandra expressed some anxiety with the prospect of continuing to gain weight. This was connected to her husband's attitude and comments he made about other women's shape. She stated, “If I gained weight I would care. And I think my husband would not be able to be quiet anymore. I still want to be attractive for him.”

However, some women, even when encountering negative comments about their looks, were not affected. Anna encountered a negative comment about her body size from a friend, yet she claimed it did not contribute to her body image issues:

A friend of mine commented once on me gaining some weight. But I didn't react to it, like “Oh you jerk, I will never talk to you again.” I was surprised she said that, cause she was really fat, but I wasn't like “oh, now I need to lose weight like crazy cause she said I was fat.” That was the only time I got a negative comment. But it didn't cause me to exercise.

However, Anna also believed that negative comment from a family member or a spouse could have an influence on her attitude toward her body, as she believed family's opinions to matter more than friends' opinions.

It was interesting to discuss this topic with Cheryl. She did not feel negative comments were important, and she did not encounter any negative comments from her friends and family. However, she recalled her mother had “terrible weight issues,” thus the topic of gaining or

losing weight had not been openly discussed in her family. Cheryl believed it might have significantly affected her perception of the importance of this factor.

## **8.5 Summary**

Women who participated in this study expressed different levels of satisfaction with their current shape. However, regardless of the satisfaction level, body image seemed to play an important role for women's decisions on physical activity participation. For the majority of interviewees, body image was one of the most important motivators, both for the decision to start exercising and the continuation of participation. Some women discussed the constraining role of body image as affecting the types of exercise outfits and exercise settings. Moreover, a few interviewees identified body image to be a constraint for other women, even when they were not negatively affected by it personally. Body image served as a non-issue for only two participants of this study.

The majority of interviewees were able to identify factors that affected their body image. Most of them engaged in social comparisons with peers. Moreover, some women compared themselves with ideals popularized by media. The process of aging, negative perception of aging in the society, society pressure on appearance and femininity, as well as feedback from others also influenced women's body image.

## CHAPTER IX

### CONCLUSIONS AND DISCUSSION

The main goal of this study was to investigate the role of body image on the choices of leisure time physical activity among women. To achieve this goal, I conducted 18 in-depth, semi-structured interviews with White women, age 45 to 64, who exercised for at least one hour per week. The criterion of race was based on the finding from literature indicating that women of different races and ethnicities might experience different body image issues (Poran, 2002). The criterion of age was set to broaden the understanding of body image issues for middle aged women, as the current literature focuses mainly on younger females (Liechty et al., 2006). The criterion of exercising was based on the assumption that for women who were already exercising, body image might serve as a motivator, a constraint, both motivator and constraint, or as a non-issue.

#### 9.1 Summary of Findings and Discussion

##### *Answering research questions*

To achieve the goal of this study, three research questions were asked. The first question was “*Was body image a constraint and/or a motivator, or was it a non-issue for individual participant?*” The results of this study clearly indicate that for the majority of women body image served as motivator for physical activity. It is important to notice that, when asked “how important is body image compared to other reasons for exercising,” several women identified body image to be their primary or secondary motivator after physical health. Moreover, it was commonly reported to be the main initial motivator for engaging in physical activity. For some women body image served as a constraint. Interestingly, the constraining role of body image was sometimes identified by women who reported it as a motivator. Thus,

body image can serve as both a motivator and a constraint for an individual. It is important to acknowledge that none of the participants reported body image affected their amount of physical activity. As exercising was one of the criteria of this study, there was no direct effect of body image on the decision to withdraw from exercise. For two interviewees, body image served as a non-issue when discussing physical activity. Even though these two women expressed some concerns with their body size and tone, these concerns were solely related to health issues.

The second question was *“If body image was classified as a constraint – was it an interpersonal constraint connected to social comparison, and/or was it an intrapersonal constraint connected to self-esteem issues?”* For some participants, body image served both as an interpersonal and intrapersonal constraint. As an interpersonal constraint, body image limited the type of activities chosen by the participants. It also affected the type of outfits worn in public spaces. As an intrapersonal constraint, body image reduced the enjoyment gained from other leisure activities, such as shopping for clothes.

The third question was *“If body image was classified as a motive – what category of motivation did it belong to, based on the taxonomy of human motivation by Ryan and Deci (2000a)?”* The participants of this study reported various levels of autonomy as it related to their body image. Thus, the findings of this study contradict the common assumption that body image as a motivator might only be regulated externally. Instead, some interviewees reported a strong sense of identification and integration with the goal of losing/maintaining weight by exercising. The majority of women who reported the motivational role of body image did not identify any external pressure for losing weight. These women expressed either a strong internal desire to lose or maintain current weight, or identified themselves with having a goal of maintaining a healthy and attractive body image.

### *Defining physical activity*

Although all the women met the exercise criterion to be included in the study, they differed significantly in their reported amounts of physical activity. The time spent weekly exercising, the choice of activities, and their intensity levels varied. Younger women tended to spend more time exercising and chose more vigorous types of activities (running, weightlifting, competitive sports participation), while older participants preferred walking and using elliptical machines with a moderate level of effort. Some participants reported as much as eight hours of exercise per week, while others reported only two hours of weekly physical activity.

Interestingly, in most cases women's definitions of physical activity did not depend on the amount or type of physical activity they reported. It is important to acknowledge that women were not provided with any specific definition of physical activity. In the literature there is a difference between physical activity defined in general terms as any bodily movement that results in energy expenditure (Caspersen et al., 1985), and leisure-time physical activity that excludes occupational and household physical activity. This difference in defining physical activity is particularly important when conducting research on racially/ethnically diverse populations. For example, Sternfeld, Ainsworth, and Quesenberry (1999) reported that minority women perceived occupational and household activities as exercising. In the current study women were asked to define physical activity themselves. The majority of participants defined physical activity solely as a structured form of exercising (e.g., participation in aerobics classes, going to the gym) and/or walking. Only a few women perceived household chores or gardening to be forms of physical activity. Instead, the majority of women included such activities to be a part of "an active lifestyle." This result contradicts the common assumption presented in the literature on physical activity, where gardening is categorized as leisure-time physical activity (Ashe, Miller, Eng, & Noreau, 2009). One of the possible explanations for such difference in defining physical activity may be the women's socio-

economic status. These interviewees were White, middle-to-upper class women. The majority of them had a post-graduate degree, and higher levels of education are associated with higher participation rates in structured physical activity (King et al., 2000). There is a need to conduct more research on the self-definition of physical activity among women of various races/ethnicities, class, and ages. Moreover, exercising at least one time per week was a criterion for participation in this study. Thus, women could be described as “conscious exercisers,” who were motivated to participate in more structured forms of physical activity. The self-definition of physical activity may be different for women who are not exercising, even if they fulfill the race and age criteria used in this study.

#### *Motivations, social support and constraints for physical activity*

There was a broad range of motivators for physical activity reported. Physical health, mental health, and body image were most commonly mentioned as reasons for exercising. Other motivators included: self-efficacy, socialization, menopause, and enjoyment. These motivators in general support the existing literature (Parry & Shaw, 1999; Segar et al., 2007). However, it is important to recognize that enjoyment seemed to be important for only a few women, and was not recognized as a mandatory element for physical activity to be considered a leisure time activity. This finding contradicts the traditional definition of leisure activities presented in the literature (Neulinger, 1974), however it supports more recent views on extrinsic type of rewards enhancing participation in activities that initially were not perceived as enjoyable (Cameron et al., 2001). This seems to be especially important when discussing physical activity that for many is not intrinsically motivated. Moreover, the findings of this study contradict the leisure literature and support the sport psychology literature on the motivational role of body image (James, 2000; Jewson et al., 2008).

Social support from both family and friends/peers is identified in the literature as an important factor that increases levels of physical activity for women (Eyler et al., 2002; Nies et

al., 1998). In the current study, the women often mentioned social support to be a facilitator for their engagement in physical activity. However, only social support from family was important to the majority of participants. Only a few women perceived social support from friends as a factor that influenced their levels of physical activity. This finding contradicts the majority of the literature and requires further research.

In general, primarily structural constraints influenced physical activity levels for some women. Time and weather were most commonly reported to affect the women's physical activity participation. Other constraints included fatigue, personal safety, and crime issues. However, regarding crime issues, only one participant perceived this constraint to be important. This finding could have been influenced by their suburban-type environment, as women who live in the urban areas (such as Chicago) might find crime to negatively influence their physical activity rates. None of the participants perceived monetary constraints to be important, regardless of their income level. However, this appeared to be related to participants' socio-economic status (middle to upper class). Except for body image, aging was the only intrapersonal constraint mentioned during the interviews.

Interestingly, family orientation was not identified as a constraint for physically active leisure. Even though it is reported in the literature that middle-aged women are often taking care of their spouses, children, or grandchildren (Thomsson, 1999), the women in the current study were active regardless of their marital status or the presence of a child at home. This might be different for women who are not exercising. Moreover, as the society is changing and women often have children in later age, this factor needs to be further investigated for middle-aged women. Also, the race/ethnicity of participants may affect the role of marital status and family orientation. For example, Latina women are reported to have the highest care-giving duties (Sternfeld et al., 1999).

### *Body image and self-determination theory*

The individual's behavior can be motivated by internal and external reasons (Ryan & Deci, 2000a). At the most autonomous end of the spectrum, behaviors are regulated by intrinsic motivations, where actions are performed because of enjoyment, interest, or both. The results of this study showed that women participate in physical activity for several reasons. However, enjoyment as a motivator was identified by only some of them. At the same time, body image was identified as a motivator by the majority of participants. The desire to lose weight is identified as an extrinsic type of motivator in the leisure studies literature.

According to self-determination theory, extrinsic motivation can be divided into four categories; from least to most self-determined these types are external regulation, introjection, identification, and integration (Ryan & Deci, 2000a). When analyzed from a self-determination perspective, in the sports psychology literature body image has been categorized as introjectedly regulated, as it has been associated with the feeling of guilt and anxiety. However, the results of the current study indicate that women's behavior regarding physical activity motivated by body image could vary in the autonomy levels as perceived by individuals. Sometimes it was difficult to include an individual into one particular category. Body image issues depend on various factors and the overall satisfaction and feelings expressed by women changed. Thus, these categorizations were fluid.

Most of the participants who reported body image as a motivator for physical activity expressed feelings and opinions that indicated high levels of perceived autonomy. Most women perceived body image to be meaningful to them. They did not report any external pressure for losing weight. These women wanted to feel good about their bodies, regardless of the opinions expressed by others. Sometimes women felt a desire to improve their appearance even though they already felt good about their size and shape. Most of the interviewees believed in strong connection between appearance, healthy weight range, and the high quality of life. Looking

good and feeling good about their bodies was significant for the majority of women, thus could be categorized as integrated.

At times women expressed lower levels of autonomy. It was important for them to lose weight/tone their bodies. However, they also expressed consciously valuing a healthy weight range, mostly in connection to their health status. According to Chan, Lonsdale, Ho, Yung, and Chan (2009) stressing the importance of a factor indicates lower levels of autonomy, yet the behavior is regulated autonomously. Thus, there is identification with the goal. The participants of this study occasionally stressed appearance being important to them. They wanted to be perceived in a certain (positive) way by others, thus they needed to maintain a healthy weight range. However, they also claimed that the desire to look good came from within and did not depend on other people's comments or other external factors.

Only two women, Jessica and Anna, expressed some feelings and opinions that indicated a controlled behavioral regulation. For them body image could be classified to the introjection category. Even though these two women mentioned body image to be a motivator for physical activity participation, they also mentioned strong anxiety coming from their current appearance. Jessica was mostly concerned with her weight affecting her health status. Jessica was afraid she may have some serious health problems if she did not lose some weight. She expressed such an anxiety even though there was no external pressure (such as doctor's orders) to lose weight yet. Anna expressed the same concerns related to her health status. She also expressed some anxiety coming from the possibility of being judged based on her weight. None of the participants expressed any opinions that could indicate external regulation.

### *Summary of findings*

This study resulted in several important findings. First, the motivational role of body image has been stressed. This finding seems important, as traditionally the leisure literature has classified body image as a constraint. Further, body image has been investigated using the

taxonomy of human motivation (Ryan & Deci, 2000a). The results indicate that body image may be classified into more autonomous categories of extrinsic motivation for middle-aged women. Thus, body image could be used as an incentive for women to engage in and/or increase their physical activity levels. Focusing on the motivational role of this factor could result in developing more physical activity interventions (designed to lose weight and improve body tone) that could increase physical activity rates in the Western society.

Moreover, the results of this study include unique definitions of physical activity. The difference between physical activity and leisure time physical activity has been present in the literature. However, most of the leisure definitions of physical activity include gardening. The results of this particular study indicate that including gardening into physical activity may depend on exercise levels for participants and/or higher socio-economic status.

Another original contribution of this study could be seen in findings on social support from friends and its influence on physical activity rates. The findings of the current study seem to contradict the existing literature. Thus, even though social support has been used as a factor for physical activity in the literature, there is a need to further investigate its meaning for various populations, such as women of various socio-economic status, or women of different age.

## **9.2 Theoretical Implications of the Study**

In the current study, several theories from the leisure field as well as the physical activity and aging field were utilized. The main implication is connected to self-determination theory as presented by Ryan and Deci (2000a). Traditionally, body image has been classified solely as an extrinsic motivation with limited autonomy (Ryan & Deci). However, the results of this study indicate that women's perception of motivators in general, and body image as a motivator in particular, is highly individual. Thus, some women internalized the societal

pressure for a “perfect body” and were motivated to begin their physical activity participation, continue it, or even increase or express the desire to increase the amount of their weekly exercise participation. This contradicts the common assumption presented in the leisure literature that body image works mainly as a constraint for physical activity participation (James, 2000). This study contributes to the existing leisure literature as it expands the general knowledge on motivations for physical activity for middle-aged women. The original contribution of this study was to analyze the role of body image as a motivational factor for physical activity using self-determination theory. Even though research on motivational role of certain factors has been popular for decades, Ryan and Deci’s theory has not been widely used as a framework within the leisure discipline.

As some women described the constraining effects of body image, it was important to analyze the implications of body image according to constraint theory and constraint negotiation theory. In both cases, body image played a minor role in the women's physical activity choices. Only a few women reported that body image prevented them or other women from participating in certain types of activities, mainly the ones that required flexibility and gracefulness (such as aerobics and yoga). However, in most cases the desire to lose weight served as a motivator that negotiated the negative implications of body image and allowed the women to choose different type of activities or develop some strategies (such as alternative types of outfits) that would allow for continuing participation.

As for Festinger's (1954) social comparison theory, the findings of this study confirmed the influence of both upward and downward social comparisons on physical activity participation. However, it is important to acknowledge the greater influence of comparisons with peers as opposed to media images. Only a few women were affected by the media, recognizing the “fakeness” of images presented. Most of the participants admitted to engaging in social comparisons with peers, yet only a few claimed to be affected by the outcomes of

such comparisons. Only one respondent acknowledged engaging in a downward social comparison.

There appeared to be a connection between the social comparison theory, and the motivational and constraining roles of body image. For some women body image played both the role of a motivator and a constraint. A few women expressed feelings of pride coming from their current shape. This pride was often connected to downward social comparisons with peers. Upward social comparisons also served as motivations, as some women were “inspired” by better looking peers. However, the women also expressed some anxiety at being seen in public in certain types of outfits. This anxiety was independent from their actual levels of satisfaction with their bodies. Thus, the presence of an audience, especially younger, better looking women (downward social comparisons) constrained participants’ behavior.

### **9.3. Practical Implications of the Study**

Some of the findings of this study might be utilized by practitioners from the leisure services industry. As many participants identified body image as an important motivator for physical activity, special programs focusing on weight loss for women could be developed. Even though some researchers (e.g., Sabiston et al., 2007) suggest body image to have a negative impact on continuous physical activity participation, the results of this study indicate a switch in motivations to more autonomous reasons. Thus, women who engaged in physical activity solely for externally regulated weight loss either internalized body image as a more autonomous goal, or found alternative motivators to continue exercising. This implication is particularly important for Western societies where the obesity rates are growing and physical activity rates are decreasing.

There is also a need to develop and advertise programs offered solely to women age 45 to 64. Most of the participants of the study reported physical health problems, such as

osteoporosis, as motivators for exercising. Women expressed a desire to “do some weight lifting.” However, only two interviewees were participating in a structured strength program that could have a significant effect on their bone density. Thus, designing a class focusing on exercises influencing bone and joints health could be beneficial for this age group.

Some women mentioned the presence of men as a possible constraint for other women. Thus, offering classes or spaces in the gym designed specifically for women might be a good strategy to attract those women who are sensitive to the presence of men in the gym. Another suggestion for practitioners would be to do more research specifically on women's preferences for activities. Many of the participants of this study were only walking and could potentially benefit from a more varied exercise program. Moreover, some of them reported lack of interest in classes typically offered in gyms, such as aerobics or yoga. A few participants reported participating in water aerobics classes. However, these classes were offered either early in the morning or in the late afternoon, thus this schedule constrained women's participation in them. Offering water aerobics classes at more convenient times might facilitate women's higher level of participation.

#### **9.4 Suggestions for Future Research**

As body image and its connections to physical activity participation remain unexplored, there is a broad range of topics for future research. First, there is a need to conduct research without an exercise criterion. The fact that women participating in this study were already exercising greatly affected findings related to the “body image as a constraint” category. Another suggestion for future studies would be to conduct similar research on women of color, as they are reported to have different standards of beauty and attractiveness (Poran, 2002). Moreover, there is a need for research on body image issues for different age groups, as the main focus remains on female adolescents and female college students (James, 2000). As the

Western societies have been experiencing major changes in the past 40 years, men are experiencing greater pressure on their appearance as well. Thus, another suggestion would be to research men's body image as a motivator and/or constraint for physical activity participation.

Research that focuses on the influence of body image on leisure behavior in general and physical activity in particular could be conducted based on some theories from the fields of psychology and sociology (e.g. personal investment theory or looking glass self theory), because they would provide useful frameworks to better understand this issue.

### **9.5. Limitations of this Study**

As the data analysis was conducted utilizing hermeneutic approach (Patterson et al., 1998) and interpretive paradigm, one of the limitations could be seen in my role as the researcher who is greatly motivated by body image to participate in physical activity. I have presented my interpretations of the stories told by women and thus the findings include my personal biases.

The major limitations of this study were connected to the participation criteria. By including women who were already exercising, the importance of body image as a constraint may have been diminished. Further, the study was limited to only White women.

Another, quite unexpected limitation occurred based on problems with recruitment of participants. The majority of participants in this study were recruited through E-Week. Thus, the education level in this small segment of exercising women was high. This might have affected the results of the study, as women with higher levels of education are reported to be more dissatisfied with their bodies.

## 9.6. Final Thoughts

Even though I consider conducting this study to be a rewarding experience, it made me realize how challenging it is to study body image. There exist numerous factors such as gender, age, race, sexual orientation, personal experiences, or mothers' attitudes among others, that may affect an individual's body image. Moreover, body image may change depending on the presence of audience, a friend's comment, or mood on a particular day. Thus, it was not surprising to me that women in this study sometimes expressed contradictory feelings about their bodies. I have noticed similar changes in my own perceptions of my body. I have also noticed them in my mother's constantly changing attitudes (one day being happy with her appearance to being concerned with the changes in her body shape on the next day).

Before conducting this study I wondered if body image could affect women's behavior, especially their exercise habits. The results confirm my thoughts about the variety of effects body image may have on individuals. Some women in this study claimed they were not affected by their body image, some women wanted to exercise more even though they were active (and in shape) already. I wonder what other behaviors and attitudes could be changed by body image. During the interviews some women discussed their dieting habits. One of them expressed a willingness to implement a diet consisting solely of liquids (vegetable and fruit juices). Some women mentioned plastic surgeries as a way to achieve a better body shape. Even though none of the participants wanted to undergo any procedure themselves, women told me stories about their middle-aged friends and/or family members who had some procedures done (namely breast augmentation and liposuction). Such results confirm that body image may influence women's feelings, attitudes, and behavior. Sometimes the effect of body image may be greater than a woman realizes or wants to admit. I noticed this during several interviews – the more we discussed body image, the more women realized the influence of body image issues on their lives.

I was nicely surprised to see how women opened up to me and were willing to discuss such a personal issue like body image. Before conducting the study I was concerned about the age difference between myself and the participants, and how that age difference would constraint women's willingness to discuss sensitive topics such as body image or the effects of menopause. Fortunately, in the majority of cases by mentioning my own body image concerns I was able to create a friendly atmosphere. That resulted in some women telling me personal stories about their marriages, relationships with friends, or even sex lives being affected by body image. However, I also noticed that the willingness to answer some questions depended on the personality of an individual. Thus, I wonder if personality could affect body image, for example if introverted women would experience higher levels of body dissatisfaction. In the future, I plan to conduct a study in cooperation with a faculty member from the psychology department to explore whether personality type and body image issues correlate.

There are some other factors I would like to investigate in relation to body image issues. For example, both myself and my Polish friends are under the impression that the pressure for a perfect body is greater in Poland. Clothes that here, in the United States, are marked as medium, in Poland are marked as extra large. One of the participants of this study who was born and raised in Romania discussed the pressure for brand-name clothes and full make-up being required on a daily basis in her home country. Thus, in the future I would like to compare American women to European women from several countries to further investigate body image and its influence on women's behavior, physical activity participation in particular.

I also plan to conduct research on body image for women and men of various races and ethnicities. In the current study I chose to focus on White women only. According to the literature, women of different races may desire different ideal body types (Poran, 2002). However, as a young scholar who is just starting to explore the body image issue, I wanted to understand what the "ideal body" means to a specific population before investigating its

influence on leisure behavior. Being White myself, I felt most familiar with the messages presented by media that target White women.

Moreover, I would like to further investigate the effects of media messages affecting women's (and men's) body image. Nowadays both genders are bombarded with the messages that they should have a perfect body. There are many advertisements for yet another miracle product or pill that will help us achieve model-like look. Moreover, even though many people realize that most images presented by media are alternated, people's body image may still be affected. On a diet.com website there is an interesting video clip called "The Photoshop Effect." It presents how an average person's pictures can be modified to resemble those of celebrities presented in magazines. Alexis Beck, a clinical nutritionist who was interviewed for this video said:

I don't think women and girls know the extend to which photos are retouched, I don't. And even if they do know, I am not sure it penetrates. (...) How does it feel to try to achieve the impossible. OUT OF CONTROL. So much of what we deal with in eating disorders [or exercise disorders] has to do with control to begin with. And so, if you cannot achieve what you are looking at, don't you feel out of control?

I know I do. Thus, I believe it is important to continue exploring the role body image plays in our lives.

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## Appendix A: Recruitment Flyer

### STUDY PARTICIPANTS NEEDED

We would like to invite you to participate in a research study being conducted by the Department of Recreation, Sport and Tourism, University of Illinois at Urbana-Champaign.

The purpose of this study is to examine the influence of body image on participation in physically active leisure for women.

**We are seeking non-Hispanic White women between the ages of 45 and 64 who exercise at least once a week to participate in an hour long interview.**

Your participation in this project is completely voluntary. The information collected will be held in strict confidence, and will not be provided to any outside entity. The researchers will not link your name to the information you provide during the interview.

If you are interested in participation, please contact:

Maya Skowron  
217 390 3004 (cell)  
[skowron2@illinois.edu](mailto:skowron2@illinois.edu)

## Appendix B: Informed Consent Form

We would like to invite you to participate in a research study being conducted by the Department of Recreation, Sport and Tourism, University of Illinois at Urbana-Champaign. The purpose of this study is to examine the influence of body image on participation in physically active leisure among women between the ages of 51 and 64. There is strong evidence that despite numerous health benefits from participation in physical activity, women are less active than men, especially women aged 50 and older. There are several factors that affect women's leisure choices. The results of this study will be used to enhance our understanding of the effect body image may have on women's physical activity participation. We would be truly grateful if you would help us in our research by participating in an interview. You will be asked questions concerning your body image and how it influences your participation in physical activity. The interview should take around 45-60 minutes to complete. The interview will be audio-recorded with your permission.

Your participation in this project is completely voluntary. There is no penalty for choosing not to participate nor there is any risk involved in the study. No pressure whatsoever will be put on you to disclose any information you are not comfortable sharing with us. You may refuse to answer any questions you do not want to answer. The only people who have access to the information are the researchers at the University of Illinois. The researchers will keep your information confidential and only aggregate reports of the results will be published or shared with others. Moreover, your name will not be used or associated with any reports of the research.

If you would like to receive a printed copy of the results of this study, please send us an e-mail at [skowron2@illinois.edu](mailto:skowron2@illinois.edu). We will make sure you receive the results once data collection and analysis have been completed.

We sincerely thank you for help with this study. Should you have any questions or comments, please contact the researchers of the Department of Recreation, Sport and Tourism, Ms. Maya Skowron, by e-mail at [skowron2@illinois.edu](mailto:skowron2@illinois.edu) or at (217) 390-3004, or Ms. Kimberly Shinew at [shinew@illinois.edu](mailto:shinew@illinois.edu) or at (217) 333- 4410. If you have any further questions regarding your rights as a project participant, you may contact UIUC Institutional Review Board at (217) 333-2670 (collect) or by e-mail at [irb@illinois.edu](mailto:irb@illinois.edu).

\_\_\_\_\_ **I have read and understood the information on this form.**

\_\_\_\_\_ **I have had the information on this form explained to me.**

**I agree to have my interview audio-recorded for transcription purposes**     **Yes**     **No**

\_\_\_\_\_  
**Participant's signature**

\_\_\_\_\_  
**Date**

## **Appendix C: Interview Guide**

### **1. Demographics:**

- Age
- Education level
- Marital status
- Children/grandchildren at home

### **2. Physical activity**

- How would you define physical activity?
- When did you start to exercise on regular basis?
- How often and where do you exercise?
- What do you do when exercising?
- Do you exercise alone?

### **3. Motivations**

- Why do you exercise, what are your reasons?
- Is body image, losing weight or maintaining weight an important motivator for you?
- Is health an important motivator?
- Are there any health problems that you are particularly worried about?
- Do you think your emotional well being is improving when you exercise?
- Do you exercise because you want to or because you think you should? A.k.a. – do you think you do it because others judge you or because you perceive it as important?
- What do you think is more important: the enjoyment from exercising or achieving your goal – compete with someone?
- Do you believe your motivations changed over time? Were the reasons to start exercising the same as the reason to exercise now?

### **4. Social support**

- Do you believe your family is supporting you?
- Do you believe your friends are supporting you?
- Do you have someone to exercise with?

- When exercising (in the gym, with a group), do you socialize with these people?
- How important it is for you that you have contact with other people when exercising?

## **5. Constraints**

- Do you think you exercise enough? Would you like to exercise more?
- How often would you like to exercise?
- Why you are not exercising as much as you would like to?
- Is lack of time a problem?
- What about money constraints or transportation?
- Are you worried about your safety?
- How is the weather influencing your physical activity?
- Do you believe there are some activities you are not supposed to engage in because you are a woman?

## **6. Body image**

- Are you satisfied with your weight?
- (even when satisfied): do you think the issue of weight is important in the society? If you gained weight right now, would you care?
- Do you think you are happier about your body now than you were when you were younger?
- Do you diet?
- (if not satisfied): why are you not satisfied, what are the factors that make you not satisfied – comments from peers, family, messages from media?
- Do you believe that society perceives women your age in negative way?
- What do you think is an ideal body?
- Do you see major changes in your body because of the aging process/ menopause?

## **7. Social comparison**

- Do you compare yourself with other women? With whom? Celebrities, peers, other women who exercise?
- What is the outcome of such comparison
- Is there a particular setting that makes you less comfortable when exercising?
- Do you think about the outfit?