

# When feeling attractive matters too much to women: A process underpinning the relation between psychological need satisfaction and unhealthy weight control behaviors

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Running Head: WHEN ATTRACTIVENESS MATTERS TOO MUCH TO  
WOMEN

When Feeling Attractive Matters too Much to Women: A Process Underpinning the  
Relation between Psychological Need Satisfaction and Unhealthy Weight Control  
Behaviors

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When Feeling Attractive Matters too Much to Women: A Process Underpinning the  
Relation between Psychological Need Satisfaction and Unhealthy Weight Control  
Behaviors

Abstract

This study examined a process model linking psychological need satisfaction to unhealthy weight control behaviors. Female University students ( $N = 220$ ;  $M$  age = 20.47;  $SD = 5.07$ ) completed questionnaires measuring need satisfaction, appearance-contingent self-worth, weight-related appearance anxiety and unhealthy weight control behaviors. Structural equation modeling revealed that need satisfaction indirectly related to engagement in unhealthy weight control behaviors through appearance-contingent self-worth and weight-related appearance anxiety. The results indicate that appearance-contingent self-worth might help to explain how low levels of psychological need satisfaction are related to maladaptive weight-related outcomes in young women.

*Key words:* appearance-contingent self-worth, appearance anxiety, disordered eating, self-determination theory

1     When Feeling Attractive Matters too Much to Women: A Process Underpinning the Relation  
2             Between Psychological Need Satisfaction and Unhealthy Weight Control Behaviors

3  
4             Appearance and looks have become central foci in an increasingly image-oriented  
5 society, especially among young females. Having the right “look” (characterized by a lean,  
6 slender physique) is highly desirable and is an indicator of social status (Coie, Dodge, &  
7 Coppotelli, 1983). However, standards of ‘ideal appearance’ are becoming increasingly  
8 unrealistic and difficult to attain. As a consequence, many young women are dissatisfied with  
9 their appearance even if they are normal- or under-weight (Cash & Henry, 1995). In turn,  
10 body appearance concerns have negative repercussions for individual health and psycho-  
11 social functioning as such concerns have been associated with excessive dieting (Stice,  
12 Mazotti, Krebs, & Martin, 1998), other disordered eating behaviors (Thompson, Covert,  
13 Richards, Johnson, & Cattarin, 1995), lower self-esteem (Furnham, Badmin, & Sneade,  
14 2002), and depression (Tiggemann, 1997). The purpose of this study is to examine a process  
15 model that tests direct and indirect relationships between psychological variables and  
16 unhealthy weight control behaviors in a sample of young adult females. In this section we  
17 review current work on proximal predictors of such behaviors and subsequently argue how  
18 basic needs theory (Deci & Ryan, 2000) can be utilized to investigate distal underlying  
19 psychological mechanisms that foster versus undermine personal growth and development  
20 and can lead to appearance contingencies and insecurities as well as unhealthy weight control  
21 behaviors.

22             Excessive dieting and unhealthy weight control behaviors are fairly common practices  
23 among college-aged females. One study identified that 82% of females reported using at least  
24 one dieting behavior daily (e.g., eating low calorie diets or skipping meals), with 19%  
25 indicating that they used more extreme weight control practices at least once a month, such as

1 laxatives and vomiting to lose weight (Mintz & Betz, 1988). More recently, a US survey  
2 indicated that up to 10% of college females reported vomiting, taking laxatives or taking diet  
3 pills within the previous month as a means of losing weight (Wharton, Adams, & Hampl,  
4 2008).

### 5 **Appearance-Contingent Self-Worth**

6 Given the negative repercussions and connotations of perceived lack of attractiveness in  
7 women, it is perhaps not surprising that many young women engage in unhealthy weight  
8 control behaviors. These women come to base their sense of self-worth on how well they  
9 think they live up to externally-defined beauty standards and ideals (Sanchez & Crocker,  
10 2005). Such self-worth is contingent and needs to be continually validated by other people.  
11 Thus, the individual feels worthwhile only when she is admired or respected by others with  
12 regard to her physical attractiveness (Crocker, 2002). While such positive regard can increase  
13 levels of positive emotions momentarily (Pyszczynski, Greenberg, Solomon, Arndt, &  
14 Schimel, 2004), contingent areas of the self are prone to fluctuations. This is because any  
15 rejections and failures in the domain of contingency is damaging to self-worth (Crocker,  
16 Karpinski, Quinn, & Chase, 2003) and may lead to chronic anxiety specific to that domain.  
17 Thus, we suggest (and test in this study) that someone whose self-worth is to a large extent  
18 contingent on meeting cultural appearance ideals is likely to be chronically anxious about her  
19 appearance being negatively evaluated. This person will be more likely to engage in  
20 unhealthy weight control behaviors that might help her approximate externally-defined beauty  
21 ideals and standards.

22 Previous research supports the aforementioned arguments. For example, in a sample of  
23 college students, Crocker, Karpinski et al. (2003) found that, after controlling for the effects  
24 of disordered eating in the first semester and a range of potential confounders (such as  
25 demographic and personality variables), appearance-contingent self-worth significantly

1 predicted disordered eating in the second semester. Further, in a longitudinal study also  
2 spanning one college semester, Sanchez and Crocker (2005) showed that students striving to  
3 resemble ideal appearance standards reported greater external contingencies of self-worth.  
4 The latter was in turn related to higher levels of disordered eating symptomatology and lower  
5 levels of self-esteem. Similarly, Grossbard, Lee, Neighbors and Larimer (2009) found that for  
6 female college students external contingencies was a good predictor ( $\beta = .45$ ) of weight  
7 concerns, after controlling for Body Mass Index (BMI).

8         The aforementioned studies suggest that contingent self-worth may act as a risk factor  
9 in the development of body appearance concerns and unhealthy eating behaviors. However,  
10 both Sanchez and Crocker (2005) and Grossbard et al. (2009) examined *general* external  
11 contingencies rather than those within specific domains. We take the position that the role of  
12 contingencies that are specific to appearance should be more closely associated with body  
13 appearance concerns and unhealthy weight control behaviors than general external  
14 contingencies. Our position echoes that of Strahan et al. (2008) who similarly argued that  
15 research examining the impact of socio-cultural norms for appearance on body image-related  
16 outcomes should focus on appearance-related contingencies. This argument is conceptually  
17 grounded in that success and failure in personally valued domains are more likely to influence  
18 self-worth than outcomes in domains that are less pertinent to the individual (Kernis, 2003).

### 19         **Weight-Related Appearance Anxiety**

20         Body dissatisfaction is considered one of the major risk factors in the development of  
21 eating pathology (Stice & Shaw, 2002) and as such this variable has received a large amount  
22 of research attention. However, Stice (2002) argued for the examination of less established  
23 risk factors. One such risk factor could be appearance anxiety. Limited evidence suggests that  
24 weight-related appearance anxiety (e.g., anxiety about hips, waist or about generally  
25 appearing overweight) explains unique variance in eating disturbance beyond the effect of

1 established risk factors such as body dissatisfaction (Reed et al., 1991). In examining the  
2 relationship between dispositional (or trait) levels of weight-related appearance anxiety and  
3 eating disturbance, Reed et al. also found support for the ability of this affective construct to  
4 distinguish between individuals with high versus low levels of eating disturbance. In our  
5 process model, weight-related appearance anxiety is proposed as a direct predictor of  
6 unhealthy weight-control behaviors.

7         Contingent self-worth and weight-related appearance anxiety are proximal predictors of  
8 unhealthy weight control behaviors. However, it is not clear why certain individuals are likely  
9 to base their self-worth on appearance contingencies and feel more anxious about their body  
10 appearance. Thus, it is important to examine distal but underlying psychological mechanisms  
11 that foster versus undermine personal growth and development and can lead to appearance  
12 contingencies, feelings of insecurity about appearance and unhealthy weight control  
13 behaviors. To this end, the purpose of the present study is to extend current literature by  
14 utilizing basic needs theory, one of the mini-theories of self-determination theory (SDT; Deci  
15 & Ryan, 2000), to provide an account of such deeper psychological factors.

### 16         **Basic Psychological Need Satisfaction**

17         According to basic needs theory, people strive to fulfill three basic psychological needs,  
18 those for competence, autonomy (self-determination) and relatedness. These needs are global,  
19 complimentary, innate and essential for optimal human functioning, so that none can be  
20 thwarted without significant negative consequences (Deci & Ryan, 2000). When these needs  
21 are satisfied, individuals experience a wide range of positive outcomes (e.g., more adaptive  
22 motivation, increased well-being) in different life domains (Vallerand, 1997). For example, in  
23 the health domain need satisfaction has been associated with exercise behavior (Edmunds,  
24 Ntoumanis & Duda, 2008), glycemic control in diabetic patients (Williams, McGregor,  
25 Zeldman, Freedman, & Deci, 2004) and oral health behaviors such as brushing and flossing

1 (e.g., Halvari & Halvari, 2006). More recently, SDT has also been used as a theoretical  
2 framework to understand engagement in health risk behaviors, such as the use of alcohol,  
3 tobacco and marijuana (Neighbors, Lewis, Fossos, & Grossbard, 2007; Williams et al., 2000).  
4 Deci and Ryan (2000) suggested that lack of psychological need satisfaction in one's life can  
5 lead to psychological ill-being and the development of compensatory rigid or self-defeating  
6 behaviors. One such behavior is the struggle for body control which is often manifested in  
7 body appearance concerns and unhealthy weight control behaviors.

8       Empirical research supports the link between psychological needs and struggle for body  
9 control. Women's global levels of autonomy appear to protect against body image pressures  
10 (Pelletier & Dion, 2007) and have been negatively associated with bulimic behaviors  
11 (Pelletier, Dion, & Lévesque, 2004). Further, autonomy need satisfaction negatively predicted  
12 body appearance concerns (i.e., body dissatisfaction and drive for thinness) in a sample of  
13 (mainly female) aerobics instructors (Thøgersen-Ntoumani & Ntoumanis, 2007). Lastly,  
14 Thøgersen-Ntoumani et al. (2010) found an indirect link between composite psychological  
15 need satisfaction (indexed by all three needs) and unhealthy weight control behaviors via  
16 body image concerns. Although such evidence is cross-sectional, it suggests the possibility  
17 that perceptions of ownership over one's life may be important in protecting against the  
18 development of body appearance concerns and unhealthy weight control behaviors.

19       It is likely that psychological need satisfaction might be indirectly and negatively  
20 associated with body image concerns and unhealthy weight control behaviors through  
21 appearance-contingent self-worth. According to SDT, basic need satisfaction facilitates the  
22 development of non-contingent self-esteem, also referred to as genuine or true self-esteem  
23 (Deci & Ryan, 1995; Reis, Sheldon, Gable, Roscoe, & Ryan, 2000; Ryan & Deci, 2004).  
24 However, when individuals feel lack of competence, relatedness and autonomy in their lives,  
25 they are more likely to compensate by developing need substitutes (Deci & Ryan, 2000), for



1 example, by gaining approval or a sense of self-worth from pursuing image-related goals.  
2 Thus, low psychological need satisfaction may lead to the development of contingent self-  
3 worth. Kernis, Paradise, Whitaker, Wheatman, and Goldman (2000) have offered indirect  
4 evidence for this hypothesis by showing that unstable self-esteem is related to less self-  
5 determined personal strivings in university students compared to stable self-esteem.

6 While previous research adopting an SDT framework in examining the role of need  
7 satisfaction to body-image related outcomes has largely examined the role of each of the  
8 individual needs in predicting such outcomes, Deci and Ryan (2000) suggest that the three  
9 needs are complimentary. As such, Hagger, Chatzisarantis and Harris (2006a) provided  
10 evidence to demonstrate the existence of a higher-order factor of psychological need  
11 satisfaction. This highlights the potential use of a composite measure of need satisfaction, an  
12 approach which has been previously been adopted in this area of work to study dietary  
13 behaviors (Hagger, Chatzisarantis, & Harris, 2006b; Harris & Hagger, 2007). We also  
14 employed the same approach in this study as we were interested in overall psychological need  
15 satisfaction and not the satisfaction of individual needs.

## 16 **Aim and Hypotheses**

17 Taken together, the evidence presented above provide suggestions for an, as yet  
18 unidentified, indirect process involving appearance-contingent self-worth in the relationship  
19 between psychological need satisfaction and maladaptive weight-related outcomes. Therefore,  
20 the main aim of the present study was to test a process model that examines the inter-  
21 relationships between psychological need satisfaction, appearance-contingent self-worth, and  
22 weight-related outcomes (i.e., weight-related appearance anxiety and unhealthy weight  
23 control behaviors). Based on theoretical propositions put forward by SDT and research by  
24 Crocker, Karpinski et al. (2003), we proposed a process model (see Figure 1). We  
25 hypothesized that psychological need satisfaction would negatively predict appearance-

1 contingent self-worth (Hypothesis 1), which in turn would be positively related to both  
2 weight-related appearance anxiety (H2) and unhealthy weight control behaviors (H3). Further,  
3 we also expected that weight-related appearance anxiety would positively predict unhealthy  
4 weight control behaviors (H4). Further, we predicted significant indirect effects from need  
5 satisfaction to weight-related appearance anxiety (H5) and unhealthy weight control behaviors  
6 (H6) via appearance-contingent self-worth. We controlled for the influence of BMI because  
7 this variable is known to be associated with body appearance concerns and weight control  
8 behaviors (e.g., Tiggemann & Lynch, 2001).

9

10

## Method

### 11 Participants

12 Two hundred and twenty British female University students took part in the present  
13 study. Their mean age was 20.47 ( $SD = 5.07$ ; ranging from 18 to 64 years), and on average,  
14 they had a BMI of 21.92 ( $SD = 2.68$ ; ranging from 15.37 to 34.25), calculated based on self-  
15 reported height and weight. Further, 92.3% described themselves as White British, 2.7% as  
16 south-east Asian, 2.3% as mixed, 1% as White Other, 0.9% as Black and 0.8% as “Other”.

### 17 Measures

18 **Psychological need satisfaction.** The Basic Need Satisfaction in Life scale (Gagné,  
19 2003) was used to measure satisfaction of the needs for autonomy (7 items), competence (8  
20 items) and relatedness (6 items). The scale comprises 21 items measured on a scale ranging  
21 from 1 (*not true at all*) to 7 (*definitely true*). Example items include: “I feel like I am free to  
22 decide how to live my life” (autonomy), “Most days I feel a sense of accomplishment from  
23 what I do” (competence), and “I really like the people I interact with” (relatedness). High  
24 scores are indicative of high levels of need satisfaction. Gagné has reported adequate  
25 Cronbach alpha reliability coefficients ( $\alpha > .70$ ) for all three subscales. The Basic Need

1 Satisfaction in Life scale has been shown to have good predictive validity by predicting  
2 important outcomes such as general self-esteem, engagement, anxiety, and prosocial behavior  
3 (e.g., Deci, Ryan, Gagné, Leone, Usunov, & Kornazheva, 2001; Gagné, 2003). In the present  
4 study, the alpha coefficient for a composite measure comprising all three psychological needs  
5 was .84.

6 **Appearance-contingent self-worth.** The five-item appearance contingent self-worth  
7 subscale from the contingencies of self-worth questionnaire (Crocker, Luhtanen, Cooper, &  
8 Bouvrette, 2003) was used. The response scale ranges from 1 (*strongly disagree*) to 7  
9 (*strongly agree*), and the participants are asked to indicate the degree to which they agree with  
10 statements such as “My sense of self-worth suffers whenever I think I don’t look good”.  
11 Higher scores indicate greater levels of appearance-contingent self-worth. Crocker, Luhtanen  
12 et al. showed via using confirmatory factor analyses that the 7-factor model proposed by the  
13 questionnaire fitted the data well and significantly better than several plausible alternative  
14 models. All factors had high internal consistencies and test-retest reliabilities. In the same  
15 study, the appearance subscale predicted partying, socializing, shopping, and grooming during  
16 the first semester at college as well as increases in exercising from the first to second  
17 semester. In the present study, the alpha coefficient for this subscale was .72.

18 **Weight-related appearance anxiety.** The trait version of the Physical Appearance  
19 State and Trait Anxiety Scale (PASTAS; Reed et al., 1991) was used to measure appearance  
20 anxiety. In the development of the PASTAS, Reed et al. identified a weight (W) and a non-  
21 weight (NW) component. The W component (8 items) was used in this study. The participants  
22 are asked to respond to the question stem “In general I feel anxious, tense or nervous  
23 about...”, followed by the items “the extent to which I look overweight”, “my thighs”, “my  
24 buttocks”, “my hips”, “my stomach (abdomen)”, “my legs”, “my waist” and “my muscle  
25 tone”. The response scale ranges from 0 (*not at all*) to 4 (*exceptionally so*) with higher scores

1 indicating higher levels of weight-related appearance anxiety. Empirical evidence supports the  
2 psychometric properties of the scale (e.g., Reed et al., 1991; Tiggemann & McGill, 2004). For  
3 example, Reed et al. showed excellent internal consistencies and test-retest reliabilities, as  
4 well as a clear factorial structure. Further, the W component (but not the NW) correlated  
5 highly with measures of body dissatisfaction, appearance evaluation, and eating disturbance.  
6 In the present study, the alpha coefficient for the trait version of the W component was .91.

7 **Unhealthy weight control behaviors.** Based on previous research by Neumark-  
8 Sztainer et al. (2002) and Neumark-Sztainer et al. (2006), the participants in our study were  
9 asked how often they had engaged in any of the following behaviors *in order to lose weight* in  
10 the last year: “taking laxatives or water pills”, “taken diet pills”, “skipped meals”, “fasted (not  
11 eaten) for a day or more”, and “made yourself throw up”. The participants were asked to rate  
12 the extent to which they had engaged in each behavior using a scale ranging from 1 (*never*) to  
13 5 (*always*). Neumark-Sztainer and her colleagues used a yes/no response format. All five  
14 behaviors were significantly intercorrelated at the  $p < .01$  level ( $r$ 's ranged from .35 to .73;  
15 *Mdn*  $r = .55$ ). Although not as extreme as the rest, skipping meals and fasting are widely  
16 considered as unhealthy weight control behaviors (e.g., American Psychological Association,  
17 2010; Grigg, Bowman, & Redman, 1996; Mellin, Neumark-Sztainer, Patterson, &  
18 Sockalosky, 2004). In fact, longitudinal data by Neumark-Sztainer et al. (2006) show that  
19 dieting in adolescence predicts outcomes related to obesity and eating disorders 5 years later.  
20 Neumark-Sztainer, Hannan, Story and Perry (2004) provided evidence for the validity of all  
21 behaviors by showing that females using unhealthful weight-control behaviors had  
22 significantly lower intakes of fruit, vegetables, grains, calcium; iron, vitamins A, C, and B-6,  
23 foliate; and zinc than girls using only healthful weight-control behaviors. Preliminary analysis  
24 showed that the distribution for most behaviors was highly skewed (see Table 1). For this  
25 reason and to retain parsimony in the hypothesized model given the number of behaviors

1 measured, we decided to include in the model one dichotomous outcome variable that  
2 indicated whether the participants had engaged (i.e. had a frequency score of 2 or above;  $n =$   
3 103) or not (i.e. had a frequency score of 1;  $n = 117$ ) in any of the five behaviors (for a similar  
4 approach, see Thøgersen-Ntoumani et al., 2010).

## 5 **Procedure**

6 Following approval by a University Ethics Committee, consent forms and questionnaire  
7 packs were distributed to undergraduate female students who then completed these under  
8 research assistant supervision in lecture theatres and returned them anonymously in sealed  
9 envelopes. Males were told that the study was about “women’s opinions about attractiveness”.

## 10 **Analysis**

11 We used structural equation modeling (SEM) analysis to test the hypothesized model. We  
12 used the EQS software (version 6.1; Bentler, 2003) to carry out the analysis. According to Hu  
13 and Bentler (1999), a value close to .08 for SRMR, combined with a value close to .95 for the  
14 Comparative Fit Index (CFI) and a value close to .06 for the Root Mean Square Error of  
15 Approximation (RMSEA), are indicative of good model fit. We employed the robust  
16 maximum likelihood estimation method because for models containing categorical variables  
17 (such as the dichotomous variable in our study), EQS uses the analytical approach, developed  
18 by Lee, Poon, and Bentler (1995), to provide appropriate standard errors and fit indexes.

19 The hypothesized model (see Figure 1) proposed a process by which psychological  
20 need satisfaction indirectly related to weight-related appearance anxiety and unhealthy weight  
21 control behaviors (controlling for BMI) via appearance contingent self-worth. BMI and  
22 unhealthy weight control behaviors were observed variables in the model. The remaining  
23 constructs were tested as latent factors. We did not model all individual items from all scales  
24 in order to increase the stability of parameter estimates and keep an acceptable ratio of sample  
25 size to estimated parameters in studies involving relatively low sample sizes (Bandalos &

1 Finney, 2001). Need satisfaction was modeled as a latent factor indexed by the composite  
2 scores of autonomy, competence and relatedness need satisfaction scores, respectively (for a  
3 similar approach, see Deci et al., 2001; Gagné, 2003). Appearance-contingent self-worth was  
4 indexed by its five indicators items, and weight-related appearance anxiety was indexed by  
5 four indicators. These indicators represented unweighted average scores which were created  
6 by pairing up items with the strongest loadings with items with weaker loadings from the  
7 same scale (Little, Cunningham, Shahar, & Widaman, 2002).

8

9

## Results

### 10 Preliminary Analysis

11 Descriptive statistics, internal reliability coefficients and bivariate correlations among  
12 psychological need satisfaction, appearance-contingent self-worth and weight-related  
13 appearance anxiety are presented in Table 2. The mean values for psychological need  
14 satisfaction and appearance-contingent self-worth were fairly high while the mean score for  
15 appearance-related anxiety was small. The mean BMI was within the normal weight range.  
16 Most correlations were significant and in the expected direction.

17

### 18 Testing the Hypothesized Model

19 We first tested a measurement model that included the latent factors of psychological  
20 need satisfaction, appearance contingent self-worth, and weight-related appearance anxiety  
21 with their respective indicators (Anderson & Gerbing, 1988). The hypothesized measurement  
22 model did not fit the data well: Satorra-Bentler  $\chi^2(51) = 139.54, p < .01$ , robust CFI = .89,  
23 robust RMSEA = .09 (95% CI = .07 - .11), SRMR = .09. Modification indexes suggested that  
24 we remove one item from the appearance-contingent self-worth scale (i.e., “When I think I  
25 look attractive, I feel good about myself”). This is considered a justifiable process in

1 measurement evaluation as it preserves the general structure of the hypothesized factor model,  
2 but only with the best available indicators (Hoffmann, 1995). Further, Crocker et al. (2003)  
3 found this item to have substantially lower loading than all other items on the scale.  
4 Modification indexes also suggested that the residuals of two parcel indicators for weight-  
5 related appearance anxiety should be allowed to correlate. Such correlations imply that there  
6 is shared variance among items (e.g., due to methodological reasons, such as similarity in the  
7 wording; Gerbing & Anderson, 1984) that cannot be accounted for by the underlying factor.  
8 In such cases, modeling the covariance removes this method artifact and decreases Type I  
9 error (poor goodness of fit; Lennox & Dennis, 1994). We implemented these changes after  
10 which the revised measurement model fit the data very well: Satorra-Bentler  $\chi^2(40) = 63.67, p$   
11  $< .05$ , robust CFI = .97, robust RMSEA = .05 (95% CI = .03 - .08), SRMR = .06. We then  
12 tested the structural model (see Figure 2) which showed a good fit to the data: Satorra-Bentler  
13  $\chi^2(59) = 98.92, p < .01$ , robust CFI = .96, robust RMSEA = .06 (95% CI = .04 - .07), SRMR  
14 = .06. Figure 2 shows that psychological need satisfaction negatively predicted appearance-  
15 contingent self-worth (H1), which in turn predicted weight-related appearance anxiety (H2),  
16 controlling for the significant effect of BMI. Unhealthy weight control behaviors were  
17 positively predicted by weight-related appearance anxiety (H4). Not aligned with our  
18 hypotheses, the path between appearance-contingent self-worth and unhealthy weight control  
19 behaviors (H3) was not significant.

20       Given that appearance contingent self-worth did not predict unhealthy weight control  
21 behaviors, we could not test for mediation in the relationship between need satisfaction and  
22 these behaviors via contingent self-worth (incidentally, we also tested a model with a direct  
23 effect of needs on these behaviors, but the path coefficient was not significant;  $\beta = -.07$ ).  
24 However, we tested for mediation in the relationship between need satisfaction and weight-  
25 related appearance anxiety via contingent self-worth. We did that by comparing the total

1 effects of need satisfaction on appearance anxiety (in a model that included a direct path from  
2 need satisfaction on anxiety) against the indirect effect on need satisfaction on appearance  
3 anxiety. The total effect was  $\beta = -.32$  ( $p < .01$ ) of which about half was indirect ( $\beta = -.15$ ;  
4  $p < .05$ ), supporting H5. In partial support of H6, there were also significant indirect effects  
5 from need satisfaction on unhealthy weight control behaviors via appearance contingent self-  
6 worth and weight-related anxiety ( $\beta = -.11$ ;  $p < .05$ ). Indirect effects were also found from  
7 BMI on unhealthy weight control behaviors via weight-related appearance anxiety ( $\beta = .11$ ;  $p$   
8  $< .05$ ) and from appearance contingent self-worth on unhealthy weight control behaviors via  
9 also weight-related appearance anxiety ( $\beta = .20$ ;  $p < .01$ ).

10 We also tested two models as alternative to our modified model in Figure 2. In the first  
11 model, unhealthy weight control behaviors were antecedents of need satisfaction. The  
12 rationale behind this model was that engaging in such behaviors will undermine the  
13 individuals' psychological functioning. The path coefficient between these behaviors and  
14 need satisfaction was not significant ( $\beta = -.07$ ) and the fit of the model was not as good as the  
15 one of the revised model: Satorra-Bentler  $\chi^2(60) = 120.26$ ,  $p < .01$ , robust CFI = .93, robust  
16 RMSEA = .07 (95% CI = .05 - .09), SRMR = .11. In the second alternative model weight-  
17 related appearance anxiety was an antecedent of need satisfaction which in turn predicted  
18 unhealthy weight control behaviors. The rationale behind this model was that feelings of  
19 anxiety about one's appearance will impact on one's psychological functioning which in turn  
20 will affect their behaviors. The path coefficient between anxiety and psychological needs was  
21 significant ( $\beta = -.34$ ;  $p < .01$ ), but the path from need satisfaction to unhealthy weight control  
22 behaviors was not ( $\beta = .01$ ). Further, the fit of this second alternative model was not as good  
23 as that of the revised model: Satorra-Bentler  $\chi^2(60) = 121.59$ ,  $p < .01$ , robust CFI = .93, robust  
24 RMSEA = .07 (95% CI = .05 - .09), SRMR = .08.

25

## Discussion



1           The present study sought to make a unique contribution to the literature by  
2 investigating underlying psychological mechanisms that are associated with appearance  
3 contingencies, feelings of insecurity about appearance and unhealthy weight control  
4 behaviors. Specifically, this study examined a process by which low basic psychological need  
5 satisfaction, as defined by SDT (Deci & Ryan, 2000), may relate to unhealthy weight control  
6 behaviors in young women. SDT argues that the thwarting of the needs for autonomy,  
7 competence and relatedness in one's life can give rise to a struggle for body control as a need  
8 substitute mechanism (Deci & Ryan, 2000). The struggle for body control is likely to manifest  
9 itself in high levels of body image concerns and unhealthy weight control behaviors (Pelletier  
10 et al., 2004; Thøgersen-Ntoumani & Ntoumanis, 2007).

11           The results of our SEM analysis suggest that the relationship between psychological  
12 need satisfaction and weight-related appearance anxiety may be indirect via appearance-  
13 contingent self-worth. This finding makes conceptual sense. SDT research suggests that basic  
14 need satisfaction facilitates the development of non-contingent (true), as opposed to  
15 contingent self-worth (Deci & Ryan, 1995; Reis et al., 2000; Ryan & Deci, 2004). Our results  
16 show that need satisfaction is negatively related to appearance-contingent self-worth among  
17 young women, supporting H1. In turn, those who are highly dependent upon their appearance  
18 to feel good about themselves are more likely to feel anxious with regard to weight-related  
19 aspects of their appearance, supporting H2. This finding corroborates results of previous  
20 studies illustrating that external contingencies, including those specifically related to  
21 appearance, predict weight concerns (Crocker, Karpinski et al., 2003; Grossbard et al., 2009;  
22 Sanchez & Crocker, 2005). The link in our model between contingent self-worth and  
23 appearance related anxiety was significant, after controlling for BMI. This finding supports  
24 previous research showing that external contingencies are positively associated with body

1 appearance concerns among females irrespective of their body shape or size (Grossbard et al.,  
2 2009).

3         Contrary to H3, in the SEM appearance-contingent self-worth was not a direct predictor  
4 of unhealthy weight control behaviors. This null finding could be because the relationship  
5 between these constructs is indirect via weight-related appearance anxiety. This indirect effect  
6 was significant in our study. The direct link between weight-related appearance anxiety and  
7 unhealthy weight control behaviors was of moderate size ( $\beta=.40$ ), supporting H4. Taken  
8 together, these findings suggest that appearance-contingent self-worth may foster unhealthy  
9 weight control behaviors by making young women feel more anxious about weight-related  
10 aspects of their appearance. Future qualitative work is needed to delineate the potential micro-  
11 mediational processes involved in this process (e.g., rumination, ego-involving comparisons,  
12 etc.).

13         Our SEM analysis also suggests that psychological need satisfaction is indirectly and  
14 negatively associated with weight-related appearance anxiety, supporting H5. We also found  
15 psychological need satisfaction not to be significantly related to unhealthy weight control  
16 behaviors. This lack of a direct relationship could reflect distal mediation. This in fact seems  
17 to have been the case in our study given that psychological need satisfaction predicted  
18 unhealthy weight control behaviors indirectly via a sequence involving both appearance  
19 contingent self-worth (see H6) and weight-related appearance anxiety. Previous research  
20 guided by SDT has shown that women's global autonomy levels and global need satisfaction  
21 are negatively related to concerns about body image and disordered eating such as bulimic  
22 behaviors (Pelletier & Dion, 2007; Pelletier, Dion, & Lévesque, 2004; Thøgersen-Ntoumani  
23 & Ntoumanis, 2007; Thøgersen-Ntoumani et al., 2010). The results of the present study add  
24 further credence to the suggestion that the satisfaction of the psychological needs for  
25 autonomy, competence and relatedness may shield individuals from appearance-related

1 contingencies and anxieties as well as associated unhealthy weight control behaviors. When  
2 such needs are thwarted, individuals are likely to perceive lack of ownership over their  
3 behavior, feelings of incompetence and isolation in their lives (Pelletier et al., 2004;  
4 Thøgersen-Ntoumani & Ntoumanis, 2007). Some women may compensate for such feelings  
5 by engaging in unhealthy eating behaviors in an attempt to a) re-establish feelings of  
6 ownership over one aspect of their life, b) increase feelings of effectance (competence), and c)  
7 feel related to others by gaining social approval from reaching socially prescribed ideals of  
8 physique.

9         Unhealthy weight control behaviors, when successful, can provide a temporary boost to  
10 well-being. However, the increase in well-being is often short-lived (Crocker, 2002) and  
11 fluctuates as a result of success and failure (e.g., negative appearance-related remarks by other  
12 people) in the domain of contingency (Crocker & Park, 2004). This fluctuation in itself has  
13 been shown to lead to increases in depressive symptoms in the academic domain (Crocker,  
14 Karpinski et al., 2003). Further, according to SDT, the attainment of extrinsic aspirations  
15 (such as image and appearance goals) does not lead to increases in eudemonic well-being, in  
16 contrast to the attainment of intrinsic aspirations (e.g., health, personal growth; Sheldon &  
17 Kasser, 1998). In the present study, we did not measure goal aspirations but it would be  
18 interesting if future studies examined the relationship between image-related life goals,  
19 appearance-contingent self-worth and psychological well-being.

20         In addition to our hypothesized model which was based on basic needs theory (Deci &  
21 Ryan, 2000), we tested two alternative models in which need satisfaction did not serve as an  
22 antecedent variable. The first model suggested that low need satisfaction is an outcome of  
23 unhealthy weight control behaviors. In the second alternative model, appearance anxiety was  
24 an antecedent of need satisfaction which in turn predicted unhealthy weight control behaviors.  
25 Neither of the two alternative models fitted as well as the model in Figure 2. Although our

1 data are cross-sectional, the findings imply that psychological need satisfaction might serve an  
2 important antecedent function in the development of weight-related appearance anxiety and  
3 unhealthy weight control behaviors. However, it is possible that, over time, individuals with  
4 higher levels of appearance anxiety and those who engage in unhealthy weight control  
5 behaviors will develop a sense of self which is largely dependent on the degree to which they  
6 are successful in attaining current beauty ideals; this contingent sense of self-worth in turn  
7 might further undermine levels of psychological need satisfaction. Clearly, longitudinal  
8 designs are needed to examine these hypotheses.

### 9 **Limitations and Future Research Directions**

10         Limitations of this study should be taken into consideration when interpreting its  
11 findings. As with all survey research, the design does not allow us to establish causal effects,  
12 although it is difficult to envisage how experimental work in this area could be ethically  
13 viable. It should also be noted that lack of psychological need satisfaction is not an ideal  
14 indicator of need thwarting (cf., Bartholomew, Ntoumanis, Ryan & Thøgersen-Ntoumani,  
15 2010) which, according to Deci and Ryan (2000), is associated with the struggle for body  
16 control. A measure of psychological need thwarting is needed to account for more variance in  
17 the predicted outcomes. Another limitation of our study is that the sample consisted of an  
18 ethnically homogenous group of women attending a university, and thus the generalizability  
19 of our findings to other groups of young adult women is unknown. Previous research has  
20 indicated ethnic differences in body image disturbance scores (Altabe, 1998). Thus, it is  
21 possible that the strength of the antecedent effects (or even the type of antecedents) on body  
22 and weight-related variables might differ among ethnic groups. Further, our study included  
23 predominantly normal weight females. In a more diverse sample of underweight, normal  
24 weight and overweight females, both the number and the frequency of unhealthy weight  
25 control behaviors might increase in comparison to those from our data (which primarily

1 reflect mild and not extreme behaviors). It would be also interesting to test our model with  
2 young males who are also becoming more frequently engaged in unhealthy eating behaviors  
3 (e.g., Haines, Neumark-Sztainer, Eisenberg, & Hannan, 2006). Further, appearance contingent  
4 self-worth and body-related appearance anxiety in males are more likely to relate to muscular  
5 appearance and less to thinness. Despite these potential gender differences, we still expect  
6 psychological need satisfaction to play an antecedent role in such processes. Including a more  
7 diverse sample could also facilitate group comparisons in terms of the invariance of the  
8 intercepts and structural coefficients in our model.

9         In conclusion, our findings provide preliminary support for the assertion that a) overall  
10 basic psychological need satisfaction may serve a protective function in the development of  
11 appearance-contingent self-worth, and b) appearance-contingent self-worth may help to  
12 explain why low levels of psychological need satisfaction are related to weight-related  
13 appearance anxiety and unhealthy weight control behaviors in young women. Future research  
14 should expand our proposed model by examining psychological environments (e.g., parental,  
15 spousal, educational) that foster intrinsic goal striving and overall psychological need  
16 satisfaction, and thus promote true (non-contingent) self-worth. To date, although there have  
17 been intervention studies fostering such autonomy-supportive environments to promote  
18 healthy eating and support weight loss efforts of overweight and obese individuals (e.g., Silva  
19 et al., 2008), there have been no interventions examining the effects of autonomy support on  
20 reducing dysfunctional weight control behaviors. According to SDT, such autonomy  
21 supportive- environments (see Reeve & Jung, 2006) should encourage volition and personal  
22 choice, allow individuals to experience successful mastery attempts, and promote secure  
23 interpersonal attachments.

24

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Table 1

*Frequency Counts of Engagement in Each Unhealthy Weight Control Behavior in the Past Year*

	Never	A little	Sometimes	A lot	Always
Laxatives and/or water pills	210	3	1	5	0
Diet pills	211	3	3	3	0
Skipping meals	118	51	37	9	4
Fasting	194	12	7	3	3
Vomiting	200	9	3	5	2

*Note.* Total  $n = 220$  (some rows do not add up to 220 due to missing responses)

Table 2

*Descriptive Statistics, Cronbach Alpha Coefficients, and Bivariate Correlations*

Scales (scale range)	<i>M</i>	<i>SD</i>	Data	$\alpha$	2	3	4	5
			Range					
1. Psychological need satisfaction (1-7)	5.31	.59	3.32-6.46	.84	-.28**	-.26**	-.08	-.01
2. Appearance-contingent self-worth (1-7)	5.14	.96	2.00-7.00	.70		.31**	.26**	-.15*
3. Weight-related appearance anxiety (0-4)	1.33	.93	0.00-3.88	.91			.34**	.21**
4. Unhealthy weight control behaviors (1=no, 2=yes)	-	-	-	-				-.06
5. BMI	21.91	2.68	15.37-34.25	-				

*Note:* \*  $p < .05$ , \*\*  $p < .01$

The statistics for the appearance contingent self-worth scale are based on a four-item composite (see CFA results).

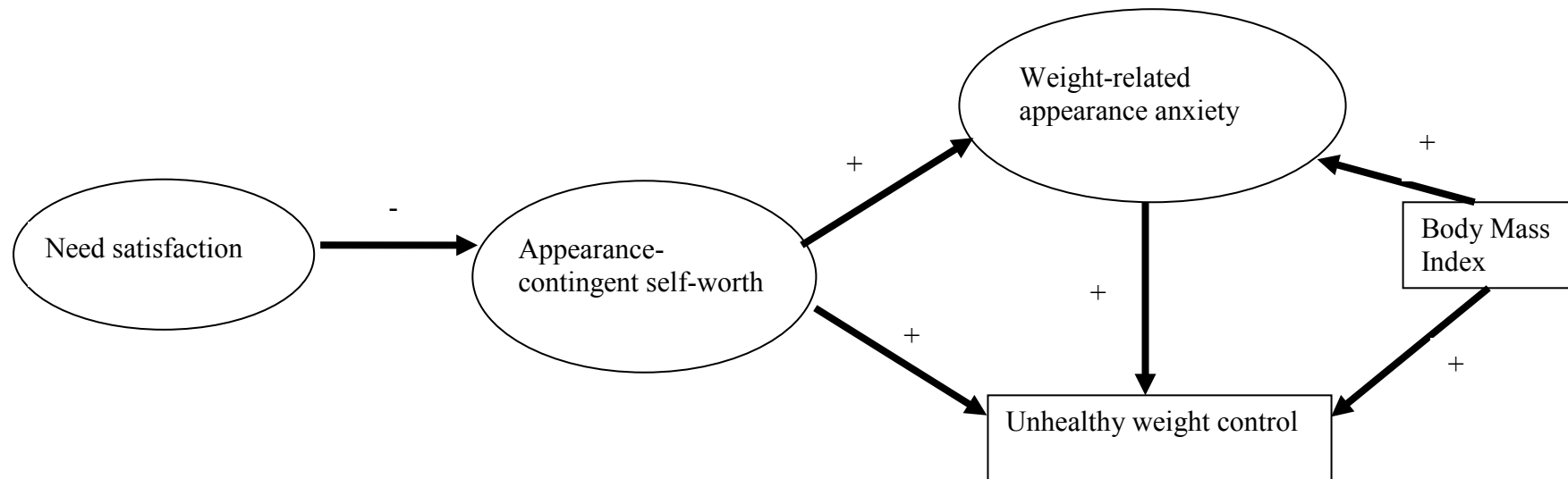
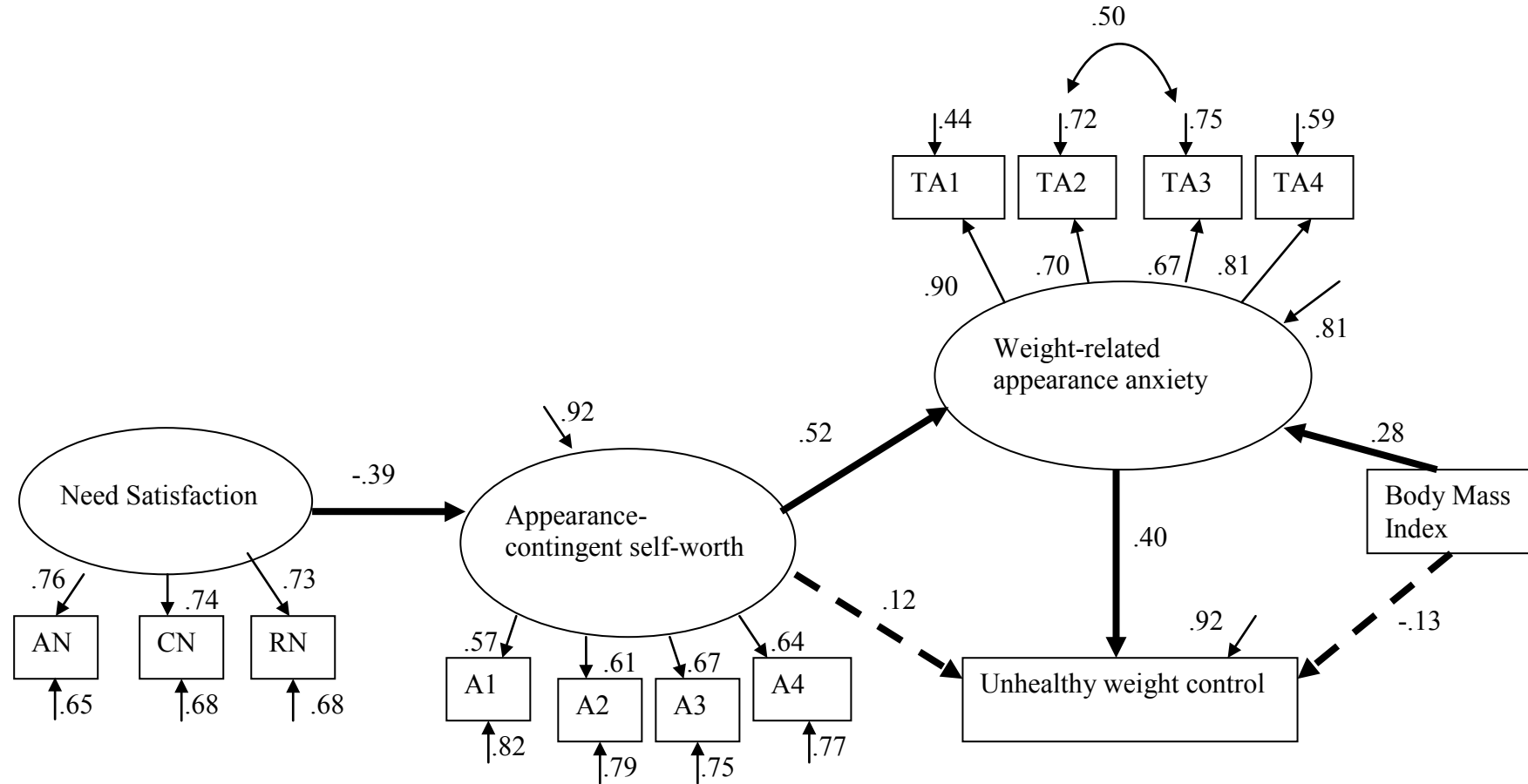


Figure 1. Modeling The Hypothesized Process by which Psychological Need Satisfaction is Related to Unhealthy Weight Control Behaviors



*Note:* The two dotted lines indicate non-significant (at  $p > .05$ ) parameters. Ovals indicate latent factors and rectangles represent observed variables.  $R^2$  values equal 1-residual squared (e.g., for weight-related appearance anxiety it is  $1-.81^2 = .34$ )

*Figure 2.* Modeling the Process by which Psychological Need Satisfaction is Related to Unhealthy Weight Control Behaviors