DETERRENCE AND AVOIDANCE OF RISKY APPEARANCE MANAGEMENT BEHAVIORS

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Introduction

Individuals manage their appearance through decisions concerning apparel and accessory selection, cosmetic and grooming procedures, and modification of body form and size (Krahn, 1990). Some appearance management behaviors (AMB) are routine and engaging in them causes no harm to health. Other AMB such as eating disorders, self-esteem, and risky AMB such as eating disorders (Lennon & Rudd, 1994; Rudd & Lennon, 2000; Trautmann, Worthy, & Li, 2017). Lee and Johnson (2009) explored variables that may influence engagement in risky AMB. Research on risky AMB has been inadequate to address why some individuals move from consideration of engaging in risky AMB to actually engaging in them. There is a need to investigate underlying conditions causing risky AMB and current engagement in risky AMB. As it is useful to investigate viewpoints concerning what factors trigger engagement in risky AMB. In theory and research, it causes some individuals to move from consideration of engaging in risky AMB to actually engaging in them. They were also asked to identify any compensating behaviors for not engaging in risky AMB or to answer the research question concerning compensating behaviors. Participant responses were separated into groups based on whether they indicated they had or had not engaged in risky AMB. Only responses from those participants that did not engage in risky AMB were analyzed (n = 58).

Methodology

A convenience sample of 52 college women from a university located in the Midwest United States completed a questionnaire that contained a measure of AMB and open-ended questions. Open-ended questions asked participants to describe the motivation that would stimulate consideration of engaging in risky AMB and actually engaging in them. They were also asked to identify any compensating behaviors for not engaging in risky AMB. To answer the research question concerning compensating behaviors, participant responses were separated into two groups based on whether they indicated they had or had not engaged in risky AMB. Only responses from those participants that did not engage in risky AMB were analyzed (n = 58).

To analyze the open-ended questions, a thematic analysis was used. Using a nine-by-one approach, data were read carefully to identify meaningful units of text and then grouped together into a category and given a provisional definition (Van Manen, 1990). Two individuals coded the data. The initial calculation of reliability was .88. After lengthy discussions between the coders concerning breadth of content contained in the initial themes, the data were recoded to reconcile inconsistencies in initial interpretations of the data until agreement was reached and adjustments were made to categories.

Findings

Variables that were internal to an individual (e.g., self-esteem, depression, stress, dissatisfaction with self and life, self-dissatisfaction, and loss of control) and external to a person (external factors) were identified as possible inducements to engaging in risky AMB. Participant responses noted that they did some compensating AMB. They were asked to identify any compensating behaviors for not engaging in risky AMB or to answer the research question concerning compensating behaviors. Participant responses were separated into groups based on whether they indicated they had or had not engaged in risky AMB. Only responses from those participants that did not engage in risky AMB were analyzed (n = 58).

Discussion and conclusions

The experience of a critical event or personal life-changing event was viewed by many as a key determinant of risky AMB. Experiencing a critical event could result in reduced self-esteem. Lennon and Rudd (1994) have documented that individuals low in self-esteem are willing to consider painful appearance management procedures (e.g., liposuction, lip injection). Thus, if the experience of the critical life event causes a temporary reduction in self-esteem and the lowered self-esteem reduces internal barriers to risky behaviors and is sufficient to stimulate them.

Limitations and future research

The predominance of one ethnic group (i.e., Caucasian) in this research limits its external validity. Therefore, recommendations for future research include studying AMB among college students. The predominance of non-College women studying in the AMB research area (e.g., trauma, eating disorders, self-esteem, and risky AMB such as eating disorders) suggests that these variables are related to body image and appearance management strategies. Critical life events (e.g., loss of job, divorce) have appeared in AMB literature (e.g., Martin, Leary, & Rejeski, 2000). Young adults are at increased risk for appearance management concerns specifically tied to appearance change (e.g., loss of facial hair, wrinkling of skin). Unlike young women who may be concerned with specific issues like body size or weight, middle age women may be concerned with these issues as well as expectations to maintain a youthful overall appearance. These changes may motivate women to engage in risky AMB (e.g., botox, plastic surgery).

Critical life events can result in low self-esteem and trigger stress, depression, dissatisfaction with life and a feeling of loss of control. This may cause an individual to engage in risky appearance behaviors.