THE INFLUENCE OF BODY SATISFACTION, WEIGHT SATISFACTION, AND BMI ON SEXUAL BEHAVIORS AMONG FEMALE COLLEGE STUDENTS

Jewel Marie Flitcraft

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	Devon J. Hensel, PhD, Chair
	Lynn M. Pike, Ph.D.
Master's Thesis Committee	
	Vaughn I. Rickert, PsyD, HSPP

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Introduction

Obesity is both a health and personal issue in the United States for many, particularly for college aged women. Between 1991 and 1998, the percentage of obese 18-29 year olds increased from 7.1% to 12.1% (Mokdad et al., 1999). Obesity is "a label that identifies a range of weight that has been shown to increase the likelihood of certain diseases and other health problems" (CDC, 2011). This range of weight is determined by using weight and height to calculate a number called the "body mass index" (BMI) (CDC, 2011). Considerable research has documented that obesity negatively impacts college aged women's physical health, increasing the likelihood of a stroke, liver and gallbladder disease, and hypertension (high blood pressure) (CDC, 2011). Obesity also creates complications for reproductive health such as amenorrhea and infertility, complications during pregnancy, gestational diabetes, and delivery complications (Linné, 2004). In addition, obesity can also negatively impact a range of college aged women's mental and emotional health outcomes, including depression, thoughts of suicide and binge eating (Weiss & Molitor, 2013), as well as body appearance and body weight dissatisfaction.

An equally salient, yet under-investigated, topic is the association between obesity and sexuality, particularly during the emerging adult life stage, which is typically defined as lasting from late adolescence to the mid-twenties (Arnett, 2000; Gillen, Lefkowtiz, & Shearer, 2006). During this time more people are moving away from home, having less adult supervision, and meeting new people (Arnett, 2000; Gillen, Lefkowtiz, & Shearer, 2006). By this time, individuals typically transition from shorter, more recreationally focused relationships in adolescence to forming longer-term, more committed,

emotionally and physically intimate relationships. Emerging research has documented that some emerging adults also pursue alternative relationship forms such as hook-ups or "friends with benefits," (Vannier & O'Sullivan, 2012). Many of these relationships include the acquisition of sexual behavior experience: by the age of 20, the majority of emerging adult women have experience with solo masturbation, oral-genital, vaginal and anal sex, with between one-third and one-half reporting experience with these activities in the past month (Herbenick et al., 2010). Little is understood, however, about how obesity may impact the behavioral content of these emerging adult relationship's, specifically the extent to which feeling self-conscious or negative about one's body (Gillen, Lefkowtiz, & Shearer, 2006; Vannier & O'Sullivan, 2012) as compared to normal weight peers may influence an obese woman's sexual decision making.

Social stigma related to obesity may influence a young woman's feeling self-conscious. According to Erving Goffman, stigma plays a role in people's lives every day, and those feelings of stigma effect how they feel about themselves (Goffman, 1963). For the purpose of this study, stigma is defined as a characteristic that is regulated by society and that can be socially and psychologically harmful to an individual. Pertaining to sexuality, emerging adult women who had a more positive evaluation of appearance and the body were associated with less risky sexual behavior (Gillen, Lefkowtiz, & Shearer, 2006). In addition, multiple studies demonstrated that women who have higher BMIs have been seen as less likely to be in a steady dating relationship, have received oral sex from a male, and have performed oral sex on a male (Wiederman & Hurst,1998; Wingood, DiClemente, Harrington, & Davies 2002; Eisenberg, Neumark-Sztainer, & Lust 2005; Akers et al., 2009; Ratcliff, Jenkins, & Reiter-Putrill, 2011).

To date, however, literature has not examined how BMI, current weight status, body appearance and weight satisfaction influence sexual behaviors of female college students. Our study will examine each of these variables and the influence they have on the frequency of sexual behaviors female college students partake in. We will first examine previous literature, second, we will establish the measures and methods of our study, then examine the results found in our research, and finally discuss the results and implications for future research.

Literature Review

Obesity and Stigma

The thought that people are treated positively or negatively because of their BMI, and that this stigma may influence their body or weight satisfaction, is clearly defined in Erving Goffman's core concept of stigma. Stigmatized traits or "deeply discrediting" characteristics make people appear to have "abominations of the body," which could include: physical deformities, illness, make them unacceptable in the eye of others, reduce their life chances, and isolate them (Goffman, 1963). Various studies confirm that the stigma a person perceives based on their BMI has a direct influence on how satisfied they will be with their body. Carr and Friedman (2005) found that people who viewed their self in a negative light, and did not receive positive appraisal from society developed a negative self-appraisal (Carr & Friedman, 2005). Stigma is associated with obese and overweight individuals becoming increasingly vulnerable to weight bias in employment, medical, and educational settings, as well as interpersonal relationships (Puhl & Heuer, 2009). Past research has revealed that emerging adults have rated obese people as warmer and friendlier; however, they were also rated as less happy, less selfconfident, more self-indulgent, less self-disciplined, lazier, and less attractive (Tiggeman & Rothblum, 1988). This is important because potential romantic partners may feel similar to the way respondents felt about obese people.

It has been theorized that the discrimination may occur because negative attitudes towards overweight and obese individuals such as laziness, sexual inexperience and less self-confidence are accepted and even encouraged (Wang & Wadden, 2004). One study found that most people believe weight is something that can be controlled and that those

who lack responsibility and motivation to change their group membership are not in control of their lives (Wang & Wadden, 2004). These findings revealed that it was more common that someone would describe an obese or overweight person with a negative stereotype than a positive one.

Negative stigma may also occur daily for an obese person. Using a sample of adults, Carr and Friedman (2005) found that very obese people received frequent daily discrimination and reported receiving discrimination from their workplace and the health care system. Negative reactions to obese people contribute to the stigma obese people internalize and effect their daily lives. A recent study demonstrated that college students ranked drawings of overweight peers more positive then elementary school age children in 1961; however, college men ranked obese people lower than college women did (Latner, Stunkard, & Wilson, 2005). This exercise revealed that, while college students in the 2000's may be more accepting of obese people, their feelings of acceptance may vary by gender. The discussion of discrimination and stigma gives insight into why emerging adults may have a low weight satisfaction or body appearance satisfaction.

Stigma and Body Satisfaction

Goffman's theory of stigmatization is used as a guiding framework in multiple studies of body appearance and weight satisfaction. Research suggests that women's body appearance or image can be negatively affected by stigma related to their body weight. Numerous studies have illustrated this finding that heavy women are generally stigmatized and have a poor weight satisfaction (Wiederman & Hurst,1998; Gillen, Lefkowtiz, & Shearer, 2006). Many females perceive themselves as overweight, less

physically attractive, and dissatisfied with their bodies as compared to male peers (Kostanski,1998; Jones,2004; Davison & McCabe, 2006; Vogt Yuan 2009).

Perceived body image dissatisfaction (PBID) has been linked to the stigma that obese and overweight people receive. Some researchers claim that some peoples' PBID may peak during adolescence: however, more recent research has found that PBID may continue to increase as they try to fit in with peers, which may impact them while transitioning to an emerging adult. One study using college students has shown that BMI is positively associated with lower body satisfaction for males and females (Sira & White, 2010). The lower satisfaction people have about their own body could be a result of the social stigma that exists towards obesity. The negative attitude towards body appearance that adolescent females have as a result of their BMI has led to higher levels of depression and anxiety, feelings of hopelessness, and having a low self-esteem or self-worth (Kostanski,1998; Falkner et al., 2001; Wild,2004; Davison & McCabe 2006; Vogt Yuan 2009).

There are not only negative emotional outcomes, but also social outcomes that can arise due to a person's body appearance and weight dissatisfaction. Falkner discovered that obese adolescents were "less likely to have hung out with friends in the last week, more likely to have reported a suicide attempt in the last year, more likely to be held back a grade, did not get along with other students, and were expected not to finish college" (Falkner et al., 2001). These social outcomes can have an influence on their future and when they become an emerging adult. One example is that many female adolescents who were obese in Falkner's (Falkner et al., 2001) study expected not to finish college (Falkner et al., 2001). These social and emotional outcomes that

adolescents experience may carry over into emerging adulthood and influence their potential sexual experiences.

Body and Weight Satisfaction and Sexual Experiences

The influence of the PBID during the transition to emerging adulthood may influence romantic and sexual relationships as emerging adults pursue more couplefocused activities (Kostanski, 1998; Arnett, 2000; Davison & McCabe 2006). A person's BMI and body satisfaction have a direct influence on a person's sexual experiences. Two studies documented an influence of BMI and timing of first sexual intercourse such that female adolescents who were clinically obese or overweight and/ or perceived themselves as overweight were less likely to have had their first sexual experience before their normal weight peers (Akers et al., 2009; Cheng & Landale 2011). However, Akers et al., (2009) also found that some of these females who perceived themselves as overweight reported having had sex before the age of 13 and not using a condom during intercourse. Previous research found that some female adolescents who were dissatisfied with their body image were likely to fear abandonment and perceive that they had limited control in their sexual relationships (Wingood, DiClemente, Harrington, & Davies 2002). These studies suggest the importance of understanding how similar experiences may influence sexual behavior in emerging adulthood. It has also been found that those "women who had a greater degree of perceived body image dissatisfaction during physical intimacy with a partner had less heterosexual experience, were less sexually assertive with partners, and reported more avoidance of sexual activity with a partner" (Wiederman, 2000). Our study extends this research by examining that lower body satisfaction may result in participating more frequently in sexual behaviors.

One study found that women who have a high BMI have been found to have had a casual sexual partner and also multiple same sex partners (Eisenberg, Neumark-Sztainer, & Lust, 2005). However, a study of college students who ranked drawings of overweight peers on obesity stigma and sexual relationships, found that women like obese people more than men but never ranked them higher than second to last as a potential sexual partner (Chen & Brown 2005). This low ranking given by men could result in a lesser number of potential sexual partners for obese women. These studies show a conflict between whether BMI increases or decreases the number of potential sexual partners.

The current study seeks to extend the literature connecting BMI, body appearance and weight satisfaction, and sexual behaviors to a sample of emerging adults. We examine the relationship between categories of BMI, body appearance and weight satisfaction and the individual sexual behaviors female college students participate in. With the rapid increase of obese and overweight emerging adults in the United States, and the increase in partaking in sexual behaviors it is important to look further into each sexual behavior.

Methods

Participants and Procedures

Data for this study was collected as part of a larger online survey (initiated in 2012; ongoing at the time of analyses) examining the health attitudes and health behaviors of 18 to 25 years old college students in the United States. Potential participants were recruited through social networking sites, such as Facebook, as well as through study information cards and classroom information sessions at two large Midwestern universities. In the case of social networking recruitment, potential participants could link to the study website from various locations. All recruitment materials provided a link to the study website and provided a brief description of the study and its incentives. Interested individuals who visited the site were able to read a more detailed description and decide whether they wanted to participate.

After completing the survey, participants were asked to post the link to their Facebook profile page. Those who participated answered an anonymous 20 minute online questionnaire and were offered the opportunity to receive a \$10 electronic gift card. All study protocols were reviewed and approved by the Institutional Review Board of Indiana University.

At the time of analysis, 179 participants had completed the survey. Of these, five were over the age range targeted for the current paper, and two had unusable data for body mass index calculation. Males were also removed from the sample, leaving 134 female participants. Sample demographics are provided in Table 1.

Measures

Demographics

Study participants were asked six different demographic questions; *Age* (18-25), *Race/Ethnicity* (White, Black, American Indian/Alaskan Native, Asian, Hispanic), *Year in College* (Freshman, Sophomore, Junior, Senior, Graduate Student), *Employment* (Yes, Full time (35+ hours per week), Yes, Part Time, No, Looking for Work, and No, Not looking for Work.), *College Attended* (Indiana University, Purdue University, IUPUI, Another College in Indiana, Another College that is not in Indiana), *Relationship Status* (No, not currently dating anyone, Yes, currently dating more than one person, Yes, for less than 3 months with the same person, Yes, between 3-6 months, with the same person, Yes, between 1-5 years, with the same person, Yes, for longer than 5 years, with the same person).

Independent Variables

Four independent variables were used. *Body mass index* (BMI) was calculated in two steps; first, individual BMIs were calculated from an individual's self-report of height and weight; second, using this BMI, participants were grouped according to clinical definitions into *underweight* (BMI < 18.5), *normal* (BMI 18.5-24.9), *overweight* (BMI 25.0-29.9) and *obese* (BMI > 30.0)" (CDC, 2011). Other measures included *current weight attitude* (6-point Likert type item; very underweight to very overweight), *current weight satisfaction* (5-point Likert type item; very satisfied to very unsatisfied), and *current body appearance satisfaction* (5-point Likert type item; very satisfied to very unsatisfied).

Dependent Variables

Next, we assessed the frequency of twelve individual sexual behaviors (all Likert type items, done in the past 30 days to never done at all), including: *masturbated alone, masturbated with another person* (*two people who masturbate in front of one another*), had vaginal sex, had anal sex, received oral sex, gave oral sex, sexted (sent sexual text messages), sexted pictures. Condom use was measured by asking: of the last 10 times that you had vaginal sexual intercourse, how many of those times did you use a condom (e.g. every time-10 out of 10 times, between 5 and 9 out of 10 times, between 1 and 4 out of 10 times, never- 0 out of 10 times).

Hypotheses

Five hypotheses arise from examining past literature.

- Lower satisfaction of current weight will be associated with less frequent masturbation with another person, and less participation in receiving oral sex.
- 2. Lower satisfaction of current weight will be associated with more frequent giving of oral sex and masturbation alone.
- 3. Current weight as reported as "about the right weight" will be associated with more frequent participating in vaginal sex, sexting pictures, receiving oral sex, and having anal sex.
- 4. Current weight described as "slightly overweight" will be associated with more frequent giving oral sex, sexting messages and pictures, and participating in vaginal sex.
- 5. Those identified with higher BMI will be associated with more frequent sext messages and masturbating alone and less frequent vaginal sex, giving and received oral sex, and sexting pictures.
- 6. Lower reported satisfaction with body appearance will be associated with more frequent participation in vaginal sex and giving oral sex.

Data Analysis

All data analysis was completed using SPSS, version 20. Frequencies were created for each independent and dependent variable. Table 1 contains the participant demographics, including the number of participants for each variable including the percentage within that variable. Chi square tests evaluated the relationships between independent and dependent variables. Table 2 provides the bivariate relationships between current weight status, and body appearance and current weight satisfaction in relation to BMI, and between BMI and participant sexual behavior.

Table 3 illustrates the bivariate relationships between current weight description, satisfaction with current body appearance, and satisfaction with current weight, and sexual behavior frequency.

Results

Participant Demographics and Sexual Behaviors

Table 1 describes the participant demographics and health attitudes. Of the 134 participants, the average age was 20 years old (SD=1.48). 41% of participants were not currently dating anyone but most sexual intercourse (41%) occurred with a boyfriend. Of the sample, 64% were normal weight and 28% were identified overweight or obese. The majority of participants in this study were likely to have participated in a particular sexual activity in the last 30 days. In examining the sexual behaviors of participants, 45% of the sample masturbated alone in the last 30 days; however, 31% had never masturbated alone. 57% of participants had participated in vaginal intercourse in the last 30 days. 80% of participants had never had anal sex. The percentage of participants who received oral sex was 47%. 52% of the sample had given oral sex in the past 30 days.

Bivariate Relationships

Table 2 illustrates relationships between current weight status, and body appearance and current weight satisfaction with BMI and between BMI and participant sexual behaviors. Table 3 illustrates the association between sexual behaviors, and participants" weight description and body and weight satisfaction.

BMI and Body Satisfaction

A significant relationship was found between participants' identified BMI and how they described their current weight status (X^2 [df] = 90.186 [9]; p<.000). About 86% of those with a normal BMI rated themselves as about the right weight. About 48% of individuals with a normal BMI said that they were slightly overweight.

Moreover, a significant relationship was found between a woman's BMI and her weight satisfaction (X^2 [df] = 47.558 [12]; p<.000). 65% of women with a normal BMI were somewhat dissatisfied with their current weight. Finally, a significant relationship was found between participants' BMI and body appearance satisfaction (X^2 [df] = 46.149 [12]; p<.000). 62% of those who were identified as having a normal BMI reported some degree of dissatisfaction with their current body appearance. About 62% of individuals who had an overweight BMI were very dissatisfied with their current body appearance.

BMI and Sexual Behaviors

There was no association between BMI and masturbating alone, even though 45% of participants had masturbated alone in the last 30 days. There was no association between BMI and having sexted pictures. Over 59% of participants had never sexted a picture to someone. There was no association between BMI and vaginal sex, even though over half of the sample (57%) had participated in vaginal sex in the past 30 days. No association was found between BMI and giving oral sex, even though 52% of the sample had given oral sex in the last 30 days.

Weight Description and Sexual Behaviors

There was not a significant relationship between description of current weight and masturbating with another person. 53% of those who masturbated with another person in the last 90 days felt that they were slightly overweight. No significant relationship was detected between receiving oral sex and description of current weight, but 22% of the sample who had never received oral sex described themselves as very overweight. There was not a significant relationship between satisfaction with current weight status and receiving oral sex. 48% who were somewhat dissatisfied with their current weight had received oral sex in the last 30 days.

There was a significant relationship between how satisfied they were with their current body appearance and having masturbated with another person (X^2 [df] = 19.42 [8]; p<.013). 52% of those who were somewhat dissatisfied with their body appearance had masturbated with another person in the last 30 days. There was a significant relationship between a participant's satisfaction with their body appearance and whether or not they have had vaginal sex (X^2 [df] = 22.010 [8]; p<.005). 45% of those who were somewhat dissatisfied with their body appearance had participated in vaginal sex in the past 30 days.

A significant relationship was also found between participants' satisfaction with their current body appearance and receiving oral sex (X^2 [df] = 20.488 [8]; p<.009). 46% of participants who were somewhat dissatisfied with their body appearance had received oral sex in the last 30 days. In addition, a significant relationship was found between body appearance and participation in giving oral sex (X^2 [df] = 15.696 [8]; p<.047). 42% of participants who were somewhat dissatisfied had participated in giving oral sex.

Supplementary Analyses

In order to better understand how specific categories of BMI may influence the association between weight description, weight satisfaction and body appearance and sexual behaviors, we conducted supplementary analyses, repeating all models shown in Table 3 stratified by BMI categories (Underweight, Normal, Overweight, and Obese). Only the significant relationships are discussed here. A significant relationship was found between normal BMI participants' body appearance satisfaction and having vaginal sex $(X^2 \text{ [df]} = 19.336 \text{ [8]}; p<.013)$. 44% of those who were normal weight and were somewhat dissatisfied with their body appearance had engaged in vaginal intercourse in the last 30 days.

A significant relationship was found between normal BMI participants' satisfaction with their current body appearance and whether they had participated in anal sex (X^2 [df] = 16.183 [8]; p<.040). 39% of those who were somewhat dissatisfied with their body appearance and were clinically normal weight had participated in anal sex in the last 90 days.

When controlling for BMI and the association between condom use during the last ten vaginal sexual encounters and the description of their current weight, a significant relationship was found (X^2 [df] = 8.00[3]; p<.046). About 40% of participants who considered themselves as slightly overweight did not used a condom the last ten times they had sex, whereas <30% who described their weight as "about right" reported not using a condom.

Discussion

Our data suggests that BMI has a significant relationship with how college-aged women describe their body appearance, current weight, and weight satisfaction. Several studies found that heavy women have a poor weight satisfaction (Wiederman & Hurst,1998; Gillen, Lefkowtiz, & Shearer, 2006). Our findings support this previous research, suggesting that over half of four college-aged females are somewhat or very dissatisfied with their current weight, and that over half of the individuals who were very dissatisfied with their weight were identified as overweight or obese. Existing research found that females with a higher BMI may be more apt to have a lower body satisfaction (Sira & White, 2010). Our research found that some women who described themselves as slightly overweight were actually at a normal BMI according to the CDC (CDC, 2011).

Previous research is sparse in relation to BMI and body appearance satisfaction. Aforementioned literature displayed that negative stigma may influence body appearance satisfaction for adolescents and women (Carr & Friedman, 2005; Akers et al., 2009; Cheng & Landale, 2011). Our study aligns with these findings, illustrating that many participants were somewhat dissatisfied with their body appearance.

There were several hypotheses in regards to current weight satisfaction and risky sexual behaviors. We first predicted that lower satisfaction of current weight would be associated with less frequent masturbation with another person and less participation in receiving oral sex. Even though no significant relationships were found these findings are important in relation to previous literature. These findings fill the gaps that exist in the research of lower weight satisfaction and receiving oral sex. Also, masturbation with

another person and weight status has not been previously examined, our findings open the door for future research to be completed.

Our second hypothesis suggested that lower satisfaction with current weight would be associated with more frequent giving of oral sex and masturbating alone. No significant relationships were found; however, masturbating alone in relation to current weight provides us with information that was not previously researched. These findings also contributed to the small amount of literature of giving oral sex by females and weight satisfaction.

Our third hypothesis suggested that current weight as described as "about the right weight" would be associated with more frequent participation in vaginal sex, sexting pictures, receiving oral sex and having anal sex. Even though no significant relationships were found statistically for these sexual behaviors, our findings did display a high frequency of participation in each activity for women who answered being about the right weight. This allows for future analysis between the relationship of current weight satisfaction and reporting being "about the right weight" which is not frequently examined in the research of weight satisfaction.

Our fourth hypothesis stated that current weight as described as slightly overweight would be associated with frequently giving oral sex, sexted messages and pictures, and participation in vaginal sex. Again, no significant relationships were found, however our findings did exhibit frequency in these behaviors by women who said they were slightly overweight. This is an important contribution to previous literature that at different times demonstrated that women who reported being slightly overweight were found to participate in sexual behaviors less frequently than normal weight peers.

Our fifth hypothesis suggested that higher BMI would be associated with more frequent sext messages and masturbating alone. No significant relationship was found between high BMI and either variable. Next, higher BMI will be associated with less frequent vaginal sex, giving and receiving oral sex, and sexting pictures. No significant relationships were found for any of these variables, but each sexual behavior was less frequent among those who were overweight and as compared to those who ere of normal BMI. These findings contribute to future research between technology and sexual behaviors. Previous literature lacks the influence of sending sext messages or pictures in relation to BMI, and our study provides a starting point for further research to be completed.

Our sixth hypothesis suggested that less satisfaction with body appearance will be associated with frequent participation in vaginal sex and giving oral sex. Our hypothesis was confirmed when vaginal sex was found to have a significant relationship with current body appearance satisfaction. Our study found that 45% of the sample who were somewhat dissatisfied with their body appearance had participated in vaginal sex in the last 30 days. This is the opposite of previous literature that found emerging adult women who had a more positive evaluation of body appearance were associated with less sexual behavior (Gillen, Lefkowtiz, & Shearer, 2006).

Previous studies used high BMI as a variable for measuring performance of oral sex or received oral sex and found that women with a high BMI were less likely to give oral sex (Wiederman,1998; Wingood, DiClemente, Harrington, & Davies 2002; Eisenberg, Neumark-Sztainer, & Lust, 2005; Akers et al., 2009; Ratcliff, Jenkins, & Reiter-Putrill, 2011). Our study found a significant relationship between body appearance

satisfaction and both giving and receiving oral sex. The finding of giving oral sex as a significant relationship with lower body appearance confirms our hypothesis. This finding is one that has a small amount of previous research. It was interesting that more of the sample had participated in giving or receiving oral sex, rather than having vaginal sex. Our findings show that a woman's dissatisfaction with her body was not limiting her from participating in sexual activities.

There were several significant findings that were not hypothesized when the study began that were important to note. We found a significant relationship between current body appearance satisfaction and masturbating with another person. Masturbation alone and with another person are not variables that have been examined in previous literature. Many assumptions can be drawn as to why dissatisfaction with their body appearance could influence these women to masturbate with another person. Previous research found that women who had a high degree of body image dissatisfaction during physical intimacy were less sexually assertive with partners and reported more avoidance of sexual activity with a partner (Wiederman, 2000). These findings may be an indication as to why women would masturbate with another person. If they were less sexually assertive than their partner, than their partner could have suggested masturbating together, or she may have suggested it in order to avoid sexual activity or contact such as vaginal, anal or oral sex.

Limitations and Strengths

Several limitations should be acknowledged. First, we employed an internet based, convenience sample of college students assessed at only one point in time. We are therefore unable to assess other factors outside the scope of this study, such as perceptions of past sexual events, which may influence perception of weight, their BMI or their frequency of sexual behaviors.

Additionally, we did not assess female participants' (or male participants' current partner's) contraceptive use, which may impact choices about specific sexual behaviors, her body or weight perception and her actual weight. For example, lack of contraception may decrease participation in specific forms of sex in light of worry about pregnancy. We also did not assess whether or not participants were currently on medication, such as antidepressants, which may influence desire to participate in sex or may influence how a woman regards her body or weight.

Conclusion

There are previous studies-although none since 2009-that look into the relationships between these three variables in relation to college students or college females. This lack of recent research is a problem because more college students are becoming obese and participating in sexual behaviors more frequently. This study has important implications for sexual health educators as well as medical professionals. Our study displays that female college students who are dissatisfied with their bodies will not always use a condom and may participate in sexual behaviors no matter what their BMI is. Knowing this information, sexual health educators and medical professionals are able to begin the discussion of using condoms and birth control to prevent STIs from sexual behaviors.

We need to better understand and identify the relationships between emerging adults' feelings and emotions in regards to participating in sexual behaviors, especially among those who are overweight or obese. Asking more specific questions will allow future researchers to determine if there is a significant relationship between stigma, BMI, and sexual behaviors. Example questions could be:

What emotions do you feel when you are about to have vaginal sex? Do you feel your weight affects your sexual choices? Has anyone ever spoke negatively towards you about your BMI? Do you feel your weight is stigmatized by society?

These questions will help develop intervention and prevention programs that promote sexual health and assist in reducing social stigma.

APPENDIX

Table 1. Participant Demographics

Age	
20 (mean, SD-1.48)	
	N (%)
Race/Ethnicity	
White	116 (86%)
Black	7 (5%)
American Indian /Alaskan Native	1 (0.7%)
Asian	5 (4%)
Hispanic	4 (3%)
Year in College	
Freshman	34 (25%)
Sophomore	29 (22%)
Junior	37 (28%)
Senior	30 (22%)
Graduate Student	3 (2%)
Employment	
Yes, Full time (35+ hours per week)	8 (6%)
Yes, Part-time	62 (46%)
No, Looking for Work	31 (23%)
No, Not looking for work	31 (23%)
ВМІ	
Underweight	10 (8%)
Normal	86 (64%)
Overweight	30 (22%)
Obese	8 (6%)
Relationship Status	
No, not currently dating anyone	55 (41%)
Yes, currently dating more than one person	5 (4%)
Yes, for less than 3 months, with the same person	13 (10%)
Yes, between 3-6 months, with the same person	4 (3%)

Yes, between 6 months- 1 year, with the same person

Yes, between 1-5 years, with the same person

Yes, for longer than 5 years, with the same person

7 (5%)

45 (34%)

5 (4%)

Current Weight Status	
Slightly Underweight	5 (4%)
About the Right Weight	70 (52%)
Slightly Overweight	50 (37%)
Very Overweight	9 (7%)
Satisfaction with Current Weight	
Very Satisfied	8 (6%)
Somewhat Satisfied	32 (24%)
Neither Satisfied nor Dissatisfied	13 (10%)
Somewhat Dissatisfied	54 (40%)
Very Dissatisfied	27 (20%)
Satisfaction with Current Body Appearance	
Very Satisfied	6 (5%)
Somewhat Satisfied	41 (31%)
Neither Satisfied nor Dissatisfied	13 (10%)
Somewhat Dissatisfied	58 (43%)
Very Dissatisfied	16 (12%)
Masturbated Alone	
Done in the Past 30 Days (Past Month)	52 (45%)
Done in the Past 90 Days or More	27 (24%)
Never Done This	36 (31%)
Masturbated with Another Person	
Done in the Past 30 Days (Past Month)	31 (27%)
Done in the Past 90 Days or More	19 (17%)
Never Done This	65 (57%)
Had Vaginal Sex	
Done in the Past 30 Days (Past Month)	65 (57%)
Done in the Past 90 Days or More	22 (19%)
Never Done This	28 (24%)
Had Anal Sex	
	3 (30%)
Done in the Past 30 Days (Past Month)	3 (3%)
Done in the Past 90 Days or More	20 (17%)

Never Done This

93 (80%)

Received Oral Sex	
Done in the Past 30 Days (Past Month)	54 (47%)
Done in the Past 90 Days or More	38 (33%)
Never Done This	23 (20%)
Gave Oral Sex	
Done in the Past 30 Days (Past Month)	60 (52%)
Done in the Past 90 Days or More	31 (27%)
Never Done This	24 (21%)
Sexted (Sent Sexual Text Messages)	
Done in the Past 30 Days (Past Month)	26 (23%)
Done in the Past 90 Days or More	39 (34%)
Never Done This	49 (43%)
Sexted Pictures	
Done in the Past 30 Days (Past Month)	7 (6%)
Done in the Past 90 Days or More	40 (35%)
Never Done This	68 (59%)
Condom Use (The Last 10 Times that You had Vaginal Sexual Intercourse)	
I have not done this at least 10 times in the Past	31 (27%)
Every time (10 out of 10 times)	27 (24%)

Between 5 and 9 out of 10 times

Between 1 and 4 out of 10 times Never (0 out of 10 times) 17 (15%)

13 (11%)

26 (23%)

Table 2. Relationships between BMI and Participant Weight and Body Attitudes and Sexual Behavior.

				BMI		
Comment William States	X2 (df)	<i>p</i>	TI- 1	NI 1	0	01
Current Weight Status Slightly Underweight	90.186 (9)	0.000***	Underweight 60%	Normal 40%	Overweight 0%	Obese 0%
About the Right Weight			10%	86%	4%	0%
Slightly Overweight			0%	48%	44%	8%
Very Overweight			0%	0%	56%	6% 44%
very Overweight			070	070	3070	44 70
Satisfaction with Current Weight	47.558 (12)	0.000***	Underweight	Normal	Overweight	Obese
Very Satisfied			13%	88%	0%	0%
Somewhat Satisfied			16%	84%	0%	0%
Neither Satisfied nor Dissatisfied			23%	54%	23%	0%
Somewhat Dissatisfied			2%	65%	30%	4%
Very Dissatisfied			0%	37%	41%	22%
Satisfaction with Current Body Appearance	46.149 (12)	0.000***	Underweight	Normal	Overweight	Obese
Very Satisfied			0%	100%	0%	0%
Somewhat Satisfied			22%	71%	5%	2%
Neither Satisfied nor Dissatisfied			0%	85%	15%	0%
Somewhat Dissatisfied			2%	62%	28%	9%
Very Dissatisfied			0%	25%	63%	13%
Masturbated Alone	12.339 (6)	0.55	Underweight	Normal	Overweight	Obese
Done in the Past 30 Days (Past Month)			2%	67%	19%	12%
Done in the Past 90 Days or More			19%	52%	30%	0%
Never Done This			6%	67%	22%	6%
Masturbated with Another Person	9.498 (6)	0.147	Underweight	Normal	Overweight	Obese
Done in the Past 30 Days (Past Month)			7%	81%	10%	3%
Done in the Past 90 Days or More			5%	42%	42%	11%
Never Done This			8%	62%	23%	8%
Had Vaginal Sex	8.252 (6)	0.22	Underweight	Normal	Overweight	Obese
Done in the Past 30 Days (Past Month)	0.232 (0)	0.22	9%	71%	17%	3%
Done in the Past 90 Days or More			5%	64%	23%	9%
Never Done This			3% 4%	50%	32%	9% 14%
Tievel Dolle Tills			7/0	JU /0	34/0	17/0
Had Anal Sex	3.920 (6)	0.687	Underweight	Normal	Overweight	Obese
Done in the Past 30 Days (Past Month)			0%	33%	67%	0%
Done in the Past 90 Days or More			5%	65%	25%	5%
Never Done This			7%	66%	20%	8%

^{*.05, **.01, ***.001}

				<u>BMI</u>		
	X2 (df)	p				
Received Oral Sex	9.376 (6)	0.153	Underweight	Normal	Overweight	Obese
Done in the Past 30 Days (Past Month)			9%	72%	15%	4%
Done in the Past 90 Days or More			5%	66%	21%	8%
Never Done This			4%	44%	39%	13%
Gave Oral Sex	11.272 (6)	0.08	Underweight	Normal	Overweight	Obese
Done in the Past 30 Days (Past Month)			7%	77%	13%	3%
Done in the Past 90 Days or More			10%	52%	26%	13%
Never Done This			4%	50%	38%	8%
Sexted (Sent Sexual Text Messages)	6.456 (6)	0.374	Underweight	Normal	Overweight	Obese
Done in the Past 30 Days (Past Month)			12%	73%	15%	0%
Done in the Past 90 Days or More			8%	87%	18%	8%
Never Done This			4%	57%	29%	10%
Sexted Pictures	3.525 (6)	0.741	Underweight	Normal	Overweight	Obese
Done in the Past 30 Days (Past Month)			14%	43%	43%	0%
Done in the Past 90 Days or More			8%	68%	18%	8%
Never Done This			6%	65%	22%	7%
Condom Use (The Last 10 Times that You had Vaginal Sexual Intercourse)	12.255 (12)	0.425	Underweight	Normal	Overweight	Obese
I Have Not Done this at Least 10 Times in the Past			10%	45%	36%	10%
Every time (10 out of 10 times)			0%	70%	22%	7%
Between 5 and 9 out of 10 times			12%	77%	6%	6%
Between 1 and 4 out of 10 times			8%	70%	23%	0%
Never (0 out of 10 times)			8%	73%	15%	4%

Table 3: Relationship Between Body Attitudes and Sexual Behavior

Current Weight Description

	X2 (df)	p	GP: 1.4	4.7	GP 141	***
Masturbated Alone	5.677 (6)	0.460	Slightly Underweight	About Right	Slightly Overweight	Very Overweight
Done in the Past 30 Days (Past Month)	. ,		0%	48%	44%	8%
Done in the Past 90 Days or More			7%	59%	30%	4%
Never Done This			6%	53%	33%	8%
Masturbated with Another Person	8.748 (6)	0.188	Slightly Underweight	About Right	Slightly Overweight	Very Overweight
Done in the Past 30 Days (Past Month)			3%	61%	36%	0.0%
Done in the Past 90 Days or More			0%	32%	53%	16%
Never Done This			5%	54%	34%	8%
	5 (01		G1: 1.41	41 4	CIL 141	T 7
Had Vaginal Sex	5.681 (6)	0.460	Slightly Underweight	About Right	Slightly Overweight	Very Overweight
Done in the Past 30 Days (Past Month)			5%	55%	37%	3%
Done in the Past 90 Days or More			0%	59%	32%	9%
Never Done This			4%	43%	39%	14%
Had Anal Sex	1.906 (6)	0.928	Slightly Underweight	About Right	Slightly Overweight	Very Overweight
Done in the Past 30 Days (Past Month)			0%	67%	33%	0%
Done in the Past 90 Days or More			0%	50%	45%	5%
Never Done This			4%	53%	36%	8%
	11.451		Slightly	About	Slightly	Very
Received Oral Sex	(6)	0.750	Underweight	Right	Overweight	Overweight
Done in the Past 30 Days (Past Month)			4%	57%	37%	2%
Done in the Past 90 Days or More			3%	58%	34%	5%
Never Done This			4%	35%	39%	22%
Gave Oral Sex	12.195a (6)	0.580	Slightly Underweight	About Right	Slightly Overweight	Very Overweight
Done in the Past 30 Days (Past Month)			2%	62%	37%	0%
Done in the Past 90 Days or More			7%	45%	36%	13%
Never Done This			4%	42%	38%	17%
Sexted (Sent Sexual Text Messages)	6.244 (6)	0.396	Slightly Underweight	About Right	Slightly Overweight	Very Overweight
Done in the Past 30 Days (Past Month)			8%	62%	27%	4%
Done in the Past 90 Days or More			3%	59%	33%	5%
Never Done This			2%	43%	45%	10%

^{*.05, **.01, ***.001}

Sexted Pictures Done in the Past 30 Days (Past Month)	1.808 (6)	0.936	Slightly Underweight 0%	About Right 42%	Slightly Overweight 43%	Very Overweight 14%
Done in the Past 90 Days or More			3%	53%	40%	5%
Never Done This			4%	54%	34%	7%
Condom Use (The Last 10 Times that You had Vaginal Sexual Intercourse) I Have Not Done this at Least 10 Times	18.939 (12)	0.9	Slightly Underweight	About Right	Slightly Overweight	Very Overweight
in the Past Every time (10 out of 10 times)			0%	63%	37%	0%
Between 5 and 9 out of 10 times			0%	77%	12%	12%
Between 1 and 4 out of 10 times			8%	46%	46%	0%
Never (0 out of 10 times)			12%	39%	42%	8%

Satisfaction with Current Body Appearance

	X2 (df)	p					
Masturbated Alone Done in the Past 30 Days (Past Month)	6.839 (8)	0.554	Very Satisfied 6%	Somewhat Satisfied 27%	Neither Satisfied nor Dissatisfied 8%	Somewhat Dissatisfied 44%	Very Dissatisfied 15%
Done in the Past 90 Days or More			4%	44%	11%	37%	4%
Never Done This			0%	28%	11%	47%	14%
Masturbated with Another Person Done in the Past 30 Days (Past Month) Done in the Past 90 Days	19.42 (8)*	0.013	Very Satisfied 10%	Somewhat Satisfied 36%	Neither Satisfied nor Dissatisfied 3% 21%	Somewhat Dissatisfied 52% 32%	Very Dissatisfied 0%
or More			3%	32%	9%	43%	12%
Never Done This			3%	32%	9%	43%	1 2%
Had Vaginal Sex Done in the Past 30 Days (Past Month)	22.010 (8)***	0.005	Very Satisfied 5%	Somewhat Satisfied 39%	Neither Satisfied nor Dissatisfied 2%	Somewhat Dissatisfied 45%	Very Dissatisfied 11%
Done in the Past 90 Days or More			5%	23%	32%	23%	18%
Never Done This			4%	21%	11%	54%	11%
Had Anal Sex Done in the Past 30 Days (Past Month)	10.970 (8)	0.203	Very Satisfied 0%	Somewhat Satisfied 67%	Neither Satisfied nor Dissatisfied 0%	Somewhat Dissatisfied 33%	Very Dissatisfied 0%
Done in the Past 90 Days or More			10%	10%	15%	40%	25%
Never Done This			3%	33%	9%	45%	10%
Received Oral Sex Done in the Past 30 Days (Past Month)	20.488 (8)***	0.009	Very Satisfied 6%	Somewhat Satisfied 39%	Neither Satisfied nor Dissatisfied 4%	Somewhat Dissatisfied 46%	Very Dissatisfied 6%
Done in the Past 90 Days or More			5%	24%	18%	29%	24%
Never Done This			0%	22%	4%	65%	9%
Gave Oral Sex Done in the Past 30 Days (Past Month)	15.696 (8) *	0.047	Very Satisfied 5%	Somewhat Satisfied 40%	Neither Satisfied nor Dissatisfied 5%	Somewhat Dissatisfied 42%	Very Dissatisfied 8%
Done in the Past 90 Days or More			3%	19%	19%	36%	23%
Never Done This			4%	21%	4%	63%	8%

Sexted (Sent Sexual Text Messages) Done in the Past 30 Days (Past Month)	7.459 (8)	0.488	Very Satisfied 8%	Somewhat Satisfied 39%	Neither Satisfied nor Dissatisfied 8%	Somewhat Dissatisfied 42%	Very Dissatisfied 4%
Done in the Past 90 Days or More			5%	28%	10%	39%	18%
Never Done This			0%	29%	8%	51%	12%
Sexted Pictures Done in the Past 30 Days (Past Month)	6.384a (8)	0.604	Very Satisfied 14%	Somewhat Satisfied 14%	Neither Satisfied nor Dissatisfied 0%	Somewhat Dissatisfied 57%	Very Dissatisfied 14%
Done in the Past 90 Days or More Never Done This			3% 4%	30% 32%	13% 7%	38% 47%	18% 9%
Condom Use (The Last 10 Times that You had Vaginal Sexual Intercourse)	22.512 (16)	0.127	Very Satisfied	Somewhat Satisfied	Neither Satisfied nor Dissatisfied	Somewhat Dissatisfied	Very Dissatisfied
I have not done this at least 10 times in the past Every time (10 out of 10 times)			3% 7%	32% 37%	7% 26%	48% 19%	10%
Between 5 and 9 out of 10 times			0%	47%	0%	41%	12%
Between 1 and 4 out of 10 times			8%	15%	0%	69%	8%
Never (0 out of 10 times)			4%	23%	8%	54%	12%

Satisfaction with Current Weight

Masturbated Alone Done in the Past 30	6.811 (8)	0.557	Very Satisfied 8%	Somewhat Satisfied 17%	Neither Satisfied nor Dissatisfied 8%	Somewhat Dissatisfied 44%	Very Dissatisfied 23%
Days (Past Month) Done in the Past 90 Days or More			4%	22%	19%	44%	11%
Never Done This			3%	31%	8%	36%	22%
Masturbated with Another Person Done in the Past 30 Days (Past Month) Done in the Past 90	8.571 (8)	0.380	Very Satisfied 3%	Somewhat Satisfied 26% 21%	Neither Satisfied nor Dissatisfied 10% 11%	Somewhat Dissatisfied 52% 32%	Very Dissatisfied 10% 37%
Days or More Never Done This			9%	20%	11%	40%	20%
Had Vaginal Sex Done in the Past 30 Days (Past Month) Done in the Past 90	4.156 (8)	0.843	Very Satisfied 6% 5%	Somewhat Satisfied 25% 23%	Neither Satisfied nor Dissatisfied 8% 18%	Somewhat Dissatisfied 45% 36%	Very Dissatisfied 17%
Days or More Never Done This			7%	18%	11%	36%	29%
Never Bone Tins							
Had Anal Sex Done in the Past 30 Days (Past Month)	5.842 (8)	0.665	Very Satisfied 0%	Somewhat Satisfied 33%	Neither Satisfied nor Dissatisfied 33%	Somewhat Dissatisfied 33%	Very Dissatisfied 0%
Done in the Past 90 Days or More			0%	25%	10%	35%	30%
Never Done This			8%	23%	9%	43%	18%
Received Oral Sex Done in the Past 30 Days (Past Month) Done in the Past 90 Days or More	4.918 (8)	0.766	Very Satisfied 7% 5%	Somewhat Satisfied 22% 24%	Neither Satisfied nor Dissatisfied 9% 13%	Somewhat Dissatisfied 48% 34%	Very Dissatisfied 13% 24%
Never Done This			4%	22%	9%	35%	30%
Gave Oral Sex Done in the Past 30 Days (Past Month) Done in the Past 90	7.249 (8)	0.510	Very Satisfied 7%	Somewhat Satisfied 23%	Neither Satisfied nor Dissatisfied 10%	Somewhat Dissatisfied 48%	Very Dissatisfied 12%
Days or More							
Never Done This			8%	21%	13%	33%	25%
Sexted (Sent Sexual Text Messages) Done in the Past 30 Days (Past Month)	6.939 (8)	0.543	Very Satisfied 8%	Somewhat Satisfied 31%	Neither Satisfied nor Dissatisfied 8%	Somewhat Dissatisfied 46%	Very Dissatisfied 8%
Done in the Past 90 Days or More			8%	21%	10%	33%	28%
Never Done This			2%	22%	8%	47%	20%

	5.863		Very	Somewhat	Neither Satisfied	Somewhat	Very
Sexted Pictures	(8)	0.663	Satisfied	Satisfied	nor Dissatisfied	Dissatisfied	Dissatisfied
Done in the Past 30			0%	14%	14%	57%	14%
Days (Past Month)							
Done in the Past 90			10%	20%	5%	38%	28%
Days or More					100	40	
Never Done This			4%	27%	10%	43%	16%
Condom Use (The Last							
10 Times that You had							
Vaginal Sexual	22.067		Very	Somewhat	Neither Satisfied	Somewhat	Very
Intercourse)	(16)	0.141	Satisfied	Satisfied	nor Dissatisfied	Dissatisfied	Dissatisfied
I Have Not Done this at		7%	26%	13%	32%	23%	
		7 70	2070	10,0			
Least 10 Times in the		7 70	2070	10 / 0			
Least 10 Times in the Past		770	2070	10,0	32/3		
Past Every time (10 out of 10		770	19%	15%	15%	41%	11%
Past Every time (10 out of 10 times)		770	19%	15%	15%		
Past Every time (10 out of 10 times) Between 5 and 9 out of		770				41% 24%	11% 29%
Past Every time (10 out of 10 times) Between 5 and 9 out of 10 times		, , ,	19% 0%	15% 35%	15% 12%	24%	29%
Past Every time (10 out of 10 times) Between 5 and 9 out of 10 times Between 1 and 4 out of		778	19%	15%	15%		
Past Every time (10 out of 10 times) Between 5 and 9 out of 10 times Between 1 and 4 out of 10 times		778	19% 0% 0%	15% 35% 15%	15% 12% 0%	24% 69%	29% 15%
Past Every time (10 out of 10 times) Between 5 and 9 out of 10 times Between 1 and 4 out of		7,0	19% 0%	15% 35%	15% 12%	24%	29%

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CURRICULUM VITAE

Jewel Marie Flitcraft

Education:

May 2010	B.S. Communication	Marian University, Indianapolis, IN
May 2010	A.S. Sociology	Marian University, Indianapolis, IN
August 2013	M.A. Sociology	Indiana University Indianapolis, IN

Professional Experience:

July 2012-Present AIT Laboratories, Indianapolis, IN

Client Service Representative

April 2011- July 2012 Kelly Services-NCAA Eligibility Center.

Indianapolis, IN <u>Data Entry</u>

November 2010-May 2011 Farmer's Insurance, Greenwood, IN

<u>Telemarketer</u>

Current Research
Graduate Thesis

The Influence of Body Satisfaction, Weight Satisfaction, and BMI on Sexual Behaviors Among Female College Students

Teaching Activities:

August 2011-December 2012-Indiana University Purdue University Indianapolis <u>Teaching Assistant- Sociology Department- Undergraduate Statistics</u>

Awards and Honors:

Spring 2007 – Spring 2010 - Member of the Marian University Speech Team

2010- Member of State Championship Team

2010- 2ND place in Prose and Persuasion at Indiana State Tournament

2010-10th place team Presidents 1 Division at National Forensics Tournament