What is and what is not positive body image? Conceptual foundations and construct definition

Tracy L. Tylka [a,*], Nichole L. Wood-Barcalow [b]

[a] Department of Psychology, The Ohio State University, Columbus and Marion Campuses, Columbus, OH, United States
[b] The Center for Balanced Living, Columbus, OH, United States

ARTICLE INFO

ABSTRACT

A decade ago, research on positive body image as a unique construct was relatively nonexistent, and now this area is flourishing. How and why did positive body image scholarship emerge? What is known about this contemporary construct? This article situates and contextualizes positive body image within Cash's scholarship, eating disorder prevention efforts, feminist influences, strength-based disciplines within psychology, and Buddhism. Extracting insights from quantitative and qualitative research, this article demonstrates that positive body image **is** (a) distinct from negative body image; (b) multifaceted (including body appreciation, body acceptance/love, conceptualizing beauty broadly, adaptive investment in appearance, inner positivity, interpreting information in a body-protective manner); (c) holistic; (d) stable *and* malleable; (e) protective; (f) linked to self-perceived body acceptance by others; and (g) shaped by social identities. Complementing what positive body image **is**, this article further details what positive body image **is not** to provide a more nuanced understanding of this construct.

© 2015 Elsevier Ltd. All rights reserved.

Introduction

Research on positive, adaptive, or healthy body image is essential to the future of the field (Smolak & Cash, 2011, p. 472).

Body image research has a rich history, spanning nearly a century and revealing many insights into its correlates, predictors, consequences, and treatments (Cash, 2004). Upon closer examination, however, much of this history is dominated by a focus on pathology that aimed to understand negative body image in the absence of considering positive body image (Smolak & Cash, 2011; Tylka, 2011, 2012). Focusing on alleviating symptoms of negative body image without considering how to promote positive body image has limited our field by proscribing a comprehensive understanding of body image (Smolak & Cash, 2011), which could inadvertently result in clinicians being poorly equipped to promote health and well-being and, ironically, prevent and treat body image disturbance. If body image therapies reduce symptoms of negative body image, but do not enhance aspects of positive body image, they may promote a neutral body image at best (e.g., "I don't hate my body anymore. I merely tolerate it."). Helping clients adopt a

positive body image may help them appreciate, respect, celebrate, and honor their bodies, which may make treatment gains more effective and lasting.

But what is positive body image? How did it emerge? What are its characteristics and expressions? What helps generate positive body image and maintain it? Without exploring this construct, we do not know the vital answers to these significant questions. Fortunately, two events helped propel the study of positive body image forward. First, the original edition of *Body Image: A Handbook of Theory, Research, and Clinical Practice* called for researchers to (a) conceptualize embodiment as complex and varied by moving beyond the study of appearance to body functionality, and (b) study the development and experience of a positive body image by exploring its resilience and protective factors (Cash & Pruzinsky, 2002). On a personal note, this handbook inspired us to begin developing measures of positive body image to investigate its distinctiveness via quantitative and qualitative designs. Alas, where could we publish our work, since many body- and eating-related journal outlets were focused on pathology? This dilemma was resolved with the inception of *Body Image: An International Journal of Research* in 2004, spearheaded by Editor-in-Chief Thomas Cash. In its Aims and Scope, the journal has encouraged submissions on positive body image by calling for research on (a) factors that influence positive body image development, (b) adaptive body image processes and their clinically relevant consequences on psychological functioning and quality of life, and (c) interventions to

* Corresponding author at: Department of Psychology, Ohio State University, 225 Psychology Building, Columbus, OH 43210, United States. Tel.: +1 740 725 6384; fax: +1 614 292 5817.
E-mail address: tylka.2@osu.edu (T.L. Tylka).

promote positive body image. Scholars interested in positive body image could now be assured that a journal would appreciate their rigorous and seminal contributions to the study of positive embodiment, thus making *Body Image: An International Journal of Research* the second event that helped propel positive body image research forward.

As Cash (2004) reflected in his editorial article introducing *Body Image: An International Journal of Research*, the field of body image is "evolving in intriguing directions" (p. 2). Given the influence of the two abovementioned events, positive body image now happens to be one of these directions. Cash and Smolak (2011), in the second edition of the handbook *Body Image: A Handbook of Science, Practice, and Prevention*, devoted an entire chapter toward synthesizing the "handful of published studies on positive body image" using positive psychology as its conceptual foundation (Tylka, 2011, p. 56). Four years later, we are happy to report that there are several hundred studies on positive body image, making it an understatement to say that positive body image research is gaining momentum. These seminal works have provided clarity on the characteristics and correlates of positive body image (i.e., what positive body image **is** and what it **is not**), which we review in this article. Prior to this review, however, we recognize the disciplines and leaders who set the stage for positive body image inquiry.

The Rise of Positive Body Image Inquiry: Foundations and Leaders

Given the long history of equating body image research with negative body image, how did the study of positive body image both emerge and flourish? Which disciplines, and who within these disciplines, prompted the exploration of positive body image? We emphasize that the confluence of several disciplines, and leaders within disciplines, positioned the study of positive body image to be imperative and ripe for discovery.

Influences within the Body Image Field

Thomas Cash. As noted previously, Thomas Cash is the innovator and common denominator of the two events that propelled positive body image research forward: the emphasis of positive body image as a future direction for research within the first edition of *Body Image: A Handbook of Theory, Research, and Clinical Practice* (Cash & Pruzinsky, 2002) and the inclusion of positive body image inquiry within the Aims and Scope of *Body Image: An International Journal of Research*. In addition to these foundational contributions, it is also important to acknowledge Cash's (and his collaborators') additional contributions to understanding and assessing positive body image. For example, Cash and his colleagues conducted the first study documenting positive body image as a unique construct (Williams, Cash, & Santos, 2004). Below, we acknowledge Cash's seminal contributions of body image quality of life, positive rational acceptance coping, and clinical interventions to positive body image scholarship.

Cash and Fleming (2002) investigated the positive and negative impacts of body image on college women's quality of life. Without exception, college women reported more positive than negative consequences of their body image for the 19 life domains studied (e.g., feelings of personal adequacy, interactions with friends, acceptability as a sexual partner, happiness in everyday life, grooming activities, ability to control weight) in this initial validation study. This finding was monumental, as it countered prevailing notions that most women dislike their bodies and body image adversely impacts their well-being. In a second study, Cash, Jakatdar, and Williams (2004) further investigated body image

quality of life among college women and men. For both women and men, body image quality of life was inversely associated with body dissatisfaction, negative body image emotions in various situational contexts, and self-evaluative salience (a dysfunctional over-valuation of appearance that is inextricably connected to self-worth) and positively associated with self-esteem, optimism, and social support. More favorable body image quality of life was reported by men (compared to women), by African American women (compared to White women), and by women with a lower (compared to higher) body mass index (BMI).

Cash, Santos, and Williams (2005) coined and studied positive rational acceptance, which entails engaging in adaptive mental and behavioral activities, such as positive self-care and rational self-talk, that reflect the acceptance of body image-related threats. Examples of threats to body image include being teased about weight, seeing advertisements containing dieting messages and/or models who conform to media appearance ideals, being told to go on a diet, conversing with someone who begins to engage in body talk, being weighed at the doctor's office, and realizing an article of clothing has become tighter in the waistband. During body image-related threats, individuals high in positive rational acceptance may remind themselves of their good qualities and tell themselves that the situation will pass or may not be that important. Indeed, positive rational acceptance was related to positive psychological functioning, although more so for college women than men (Cash et al., 2005).

In the second edition of his *Body Image Workbook*, Cash (2008) articulated an 8-step, cognitive-behavioral program that contains interventions for readers to develop a more mindful, accepting, and satisfying relationship with their bodies. Among the interventions, self-care and maintaining a positive body image are emphasized. For example in Step 8: Positive Body-Self Relations, Cash designed specific activities to enhance appreciation of the body's health, fitness, and sensate experiences, which emphasize the importance of body functionality to body image.

Prevention. Researchers of eating disorder prevention efforts, such as Michael Levine, Lori Irving, Niva Piran, Linda Smolak, Catherine Steiner-Adair, Susan Paxton, and Catherine Cook-Cottone, also helped develop positive body image scholarship and clinical practice. One strategy to prevent the onset of an eating disorder is to foster positive body image as a way to circumvent the development of a negative body image (Smolak, 1999), and these scholars have traditionally conceptualized positive body image to include self-worth and appreciation for the functionality and diverse appearances of the body (Menzel & Levine, 2011; Paxton, 1999; Piran, Levine, & Steiner-Adair, 1999; Smolak, 1999). Prevention researchers have devised ways to build positive body image. For example, many programs contain efforts to increase media literacy, which build skills to protect body image against unrealistic media appearance ideals (Cook-Cottone, Kane, Keddie, & Haugli, 2013; Steiner-Adair & Sjostrom, 2006; Wilksch & Wade, 2009). Some programs help participants develop an appreciation for their bodies via nurturing body awareness and responsiveness via yoga (Cook-Cottone et al., 2013; Scime & Cook-Cottone, 2008). Cognitive dissonance-based prevention programs include behavioral activities whereby participants speak or write positively about their bodies, including their bodies' physical, emotional, intellectual, and social qualities (Becker & Stice, 2011; Stice & Presnell, 2007).

Feminist influences. Feminist scholars in the body image field have also contributed to positive body image theory, research, and practice. They argue that it is acceptable and preferable for bodies to differ from societal ideals and champion for a culture that resists engaging in body hate or shame-based dialog and action. They uncover and challenge the various media motives to use bodies and appearances to sell products.

Proponents of Health at Every Size® such as Linda Bacon, Sigrún Daníelsdóttir, Deb Burgard, and Rachel Calogero help individuals understand that it is empowering to resist internalizing media appearance ideals and messages, and instead, appreciate and love the body, including its differences from these ideals. These proponents challenge weight stigma, which presents roadblocks to health, and promote all individuals' accessibility to physical health and psychological well-being. They disseminate these messages through research in academic journals (e.g., Bacon, Stern, Van Loan, & Keim, 2005), children's literature (e.g., Daníelsdóttir, 2014), and literature geared toward general readership (e.g., Bacon & Aphramor, 2014).

Niva Piran and her colleagues have conducted research on girls and women for over 20 years, which culminated in the recognition of positive experiences of *connected embodiment* (i.e., the experience of engaging the body with the world), such as embodied agency, self-care, joy, and functionality (Piran, Carter, Thompson, & Pajouhandeh, 2002; Piran & Teall, 2012), and its three core dimensions: physical freedom, mental freedom, and social power (Piran, 2001, see Piran, 2015, in this issue). Furthermore, Mimi Nichter, Carolyn Becker, and Reneé Engeln have studied and/or developed programs to help girls and women develop skills to resist the pressure to engage in body-based dialog, or fat talk, which provides a forum for women to bond with one another by talking badly about their bodies (Becker & Stice, 2011; Nichter, 2001; Salk & Engeln-Maddox, 2011).

Feminist scholars also have considered an intersectional perspective, or the influence of multiple social identities, on body image. Marika Tiggemann, Linda Smolak, Viren Swami, and Ruth Striegel Weissman have explored how social identities (e.g., age, developmental level, race/ethnicity, socioeconomic status, feminist identity) may be protective for positive body image, negative body image, and eating disorders (Smolak, 1999; Striegel-Moore & Cachelin, 1999; Swami, Airs, Chouhan, Leon, & Towell, 2009; Tiggemann, 2001; Tiggemann & Stevens, 1999).

Strength-Based Disciplines within Psychology

Strength-based disciplines within the broader field of psychology are foundational to the study of positive body image (Tylka, 2011, 2012). These disciplines (i.e., humanistic psychology, counseling psychology, and positive psychology) emphasize that human strengths, psychological well-being, and physical health are important to consider within theory, research, and practice.

Humanistic psychology. Largely shaped by Carl Rogers and Abraham Maslow, humanistic psychology has emphasized the need for unconditional acceptance to promote well-being (Rogers, 1961). Applied to the study of body image, unconditional acceptance entails individuals perceiving that their bodies are accepted and loved "as is" by significant others and not treated in a negative way by society at large (Avalos & Tylka, 2006). Humanistic psychology has also proposed the motives of self-actualization and transcendence (Maslow, 1943), which involve moving beyond appearance and the physical form of the body to its spiritual significance and meaning (Jacobson, Hall, & Anderson, 2013).

Counseling psychology. Since its inception in the early 1900s, counseling psychology has recognized the importance of considering strengths alongside weaknesses, appreciated cultural and body-related diversity, and worked to prevent illness by promoting health (Gelso & Fretz, 2001). We, the authors, are counseling psychologists who are interested in body image, and we used the strength-based fundamentals within our discipline to notice the lack of positive body image theory and research and to see value in contributing to this work. Together, we developed an assessment of positive body image, the Body Appreciation Scale (BAS; Avalos, Tylka, & Wood-Barcalow, 2005) to assess (a) favorable opinions of the body regardless of actual physical appearance, (b) acceptance of the body despite incongruences with media appearance ideals, (c) respect toward the body by tending to its needs and engaging in healthy behaviors, and (d) protection of the body by rejecting unrealistic appearance ideals. Recently, we updated the BAS (i.e., BAS-2; Tylka & Wood-Barcalow, 2015). We use the BAS and BAS-2 to conduct quantitative research on positive body image (e.g., Avalos et al., 2005; Homan & Tylka, 2014; Tylka & Wood-Barcalow, 2015).

Positive psychology. Positive psychology is a more recent strength-based discipline that shares many similarities with humanistic and counseling psychology. Although research on positive psychological constructs was occurring prior to its introduction as a discipline, its emergence reinvigorated and expanded the study of human strengths in various areas of scholarship and clinical relevance. Its proponents, including Martin Seligman, Shane Lopez, Sonja Lyubomirsky, and Barbara Fredrickson, argue that removing negative or maladaptive characteristics in the absence of teaching positive and adaptive characteristics creates "languishing," or intermediate mental health characterized by a lack of pathology but the absence of vitality (Fredrickson & Losada, 2005; Seligman & Csikszentmihalyi, 2000). Indeed, positive characteristics may not simply represent the absence of negative characteristics—for instance, fostering positive affect is more beneficial therapeutically than simply lowering negative affect (Fredrickson & Losada, 2005). Thus, it is imperative for our field to study positive body image and how to promote it, because working to understand and reduce negative body image alone will be insufficient.

Eastern Influences Outside of Psychology: Buddhism

Buddhism, which conceptualizes psychological distress as rooted in the rigid and inflexible desire to avoid or control adverse internal experiences (e.g., thoughts, emotions, perceptions, and sensations), has also contributed to positive body image theory, research, and practice. Buddhism emphasizes the value in being mindful of internal experiences, accepting these internal experiences without trying to change them, choosing a meaningful and valued direction, and proceeding in this direction (Hayes, Strosahl, & Wilson, 1999). Approaching distress in this way promotes psychological flexibility (Hayes et al., 1999) and self-compassion (Neff, 2003). When this flexible mindset is activated in the context of positive body image, threats to body image are understood to be time-limited and not true in an absolute sense, and the choice is made to proceed in a direction that values the body instead of engaging in body-related rumination or criticism (Pearson, Heffner, & Follette, 2010; Webb, Butler-Ajibade, & Robinson, 2014). Self-compassion encourages not only mindfulness of internal experiences, but also kindness to oneself during times of distress, and understanding that distressing internal experiences are shared by all (Neff, 2003). Self-compassion may promote body compassion by buffering the distress prompted by body image-related threats.

Summary

The aforementioned disciplines and leaders provided a fertile grounding for the development of positive body image theory, research, and practice. Their contributions include (a) the operationalization of core constructs, (b) the development of interventions to promote a mindful and appreciative connection to the body, (c) the integration of a body acceptance-based philosophy, and (d) moving body image beyond appearance to encapsulate other body-related dimensions, such as body functionality. These contributions underscore that positive body image is a unique

construct worthy of investigation. Next, we use these investigations to define and describe this construct.

Positive Body Image: What It Is, and What It Is Not

We conducted a mixed methods study with both qualitative and quantitative research components to gain insight into the construct of positive body image (Wood-Barcalow, Tylka, & Augustus-Horvath, 2010). We first utilized the Multidimensional Body-Self Relations Questionnaire (Brown, Cash, & Mikulka, 1990; Cash, 2000) and a general question, "I feel that I have a positive body image," to identify college women who espouse a positive body image. We then conducted in-depth individual interviews with these women to explore fully what it means to endorse a positive body image. To further substantiate information, we interviewed body image researchers and clinical experts to discern their definition and description of this construct which was then interwoven with the women's reports. As we looked across the themes that emerged, we rather boldly decided to propose the following definition of positive body image:

> An overarching love and respect for the body that allows individuals to (a) appreciate the unique beauty of their body and the functions that it performs for them; (b) accept and even admire their body, including those aspects that are inconsistent with idealized images; (c) feel beautiful, comfortable, confident, and happy with their body, which is often reflected as an outer radiance, or a "glow;" (d) emphasize their body's assets rather than dwell on their imperfections; and (f) interpret incoming information in a body-protective manner whereby most positive information is internalized and most negative information is rejected or reframed. (Wood-Barcalow et al., 2010, p. 112)

While the above provides a "working definition" for scholars and clinicians, a significant limitation is that it was derived from 15 traditional college-aged women and five body image experts from the United States without an understanding of its generalizability to males, people from non-Western areas, older women, etc. Although many aspects of this definition have been observed independently in adolescent girls and boys from Sweden (Frisén & Holmqvist, 2010; Holmqvist & Frisén, 2012), African American girls from the United States (Pope, Corona, & Belgrave, 2014), and Aboriginal girls from Canada (McHugh, Coppola, & Sabiston, 2014), as well as numerous quantitative studies, additional research is paramount to more fully understand this construct—its commonalities across samples and its nuances within specific samples. In short, a fundamental path has been emblazoned, and yet the field is still ripe for discoveries. Assuming that this definition is representative of positive body image, at least for select groups, we now describe positive body image by what it *is*, as well as what it *is not*.

Distinct from Negative Body Image

Positive body image *is* its own construct; in other words, it *is* distinct from negative body image. Positive body image *is not* on the same continuum as negative body image, nor should it be represented as low levels of negative body image. Perhaps one reason why research on positive body image research began as a slow start was due to it being conceptualized as one endpoint along a body image continuum, with negative body image anchored at the opposite endpoint (Tylka, 2011, 2012). As a result of this conceptualization, positive body image did not need to be defined or studied separately, because findings from negative body image measures would reveal the entire picture—if negative body image was low, positive body image would be high and vice versa. However, several independent research teams around the world demonstrated that

this conceptualization is inaccurate and incomplete. Five examples are provided below.

First, Williams et al. (2004) conducted a cluster analysis on U.S. college women based on their body image evaluation, their body image emotional experiences, and the impact of body image on their quality of life. Cluster analysis identifies groups of individuals who are similar to each other but different from individuals in other groups. Three distinct multidimensionally defined groups emerged: a positive body image group (54%), a negative body image group (24%), and a "normative body image discontent" group (23%). While the normative body image discontent group and the negative body image group had similar levels of body dissatisfaction, the negative body image group reported greater body image dysfunction (i.e., higher body image emotional distress and more adverse impact of body image on quality of life). Importantly, the positive body image group demonstrated a unique pattern of superior well-being in comparison to the other groups: they were relatively content with their appearance, seldom expressed body image emotional distress, and felt that their body image favorably influenced their quality of life.

Second, positive body image, assessed via the BAS, was uniquely associated with U.S. college women's well-being (self-esteem, optimism, and proactive coping) after extracting shared variance with negative body image (Avalos et al., 2005). Similar findings were noted using the BAS-2 as the measure of positive body image: after extracting shared variance with body dissatisfaction, body appreciation accounted for unique variance in U.S. college women's well-being (self-esteem and proactive coping), intuitive eating (i.e., eating according to hunger and satiety cues), and eating disorder symptomatology, and U.S. college men's well-being and intuitive eating (Tylka & Wood-Barcalow, 2015). Positive body image, assessed via the BAS, was related incrementally to Australian women's greater use of sun protection (e.g., SPF products), performing skin cancer screening, and lower engagement in weight-loss behaviors after extracting shared variance with body dissatisfaction (Andrew, Tiggemann, & Clark, 2014). Therefore, positive body image has unique associations with well-being, self-care, and eating behavior that are not accounted for solely by negative body image.

Third, body image flexibility also has been found to be distinct from negative body image. Recognized as an aspect of positive body image derived from Buddhism, body image flexibility entails a willingness to accept and experience perceptions, sensations, feelings, thoughts, and beliefs about one's body in an intentional way without attempting to change their intensity, frequency, or form, while pursuing effective action in other life domains (Webb et al., 2014). For instance, a woman who experiences external criticism directed toward her body would demonstrate body image flexibility by being mindfully aware of the negative emotions that arise, purposefully evoke self-kindness, recognize that most people would have a similar emotional reaction in this situation, and then engage in self-care (e.g., journal about the experience, go for a walk, treat herself to a massage, or call a friend). Body image flexibility (assessed as low experiential body image avoidance) was uniquely associated with U.S. college women and men's disordered eating after extracting shared variance with body dissatisfaction (Sandoz, Wilson, Merwin, & Kellum, 2013).

Fourth, Tiggemann and McCourt (2013) examined relationships between positive body image (assessed by the BAS), body dissatisfaction, and Australian women's age. The strength of the inverse correlation between positive body image and body dissatisfaction decreased as women's age increased. Moreover, positive body image was positively related to age, whereas body dissatisfaction was unrelated to age. Tiggemann and McCourt concluded that positive body image and body dissatisfaction are not mirror images of one another, as it becomes increasingly possible for women to

simultaneously experience some level of body dissatisfaction but also to appreciate and respect the body in other ways, especially with age.

Fifth, there is a conceptual distinction between body dissatisfaction and positive body image. Many African American adolescent girls identified self-perceived flaws with their bodies and features they would like to change (suggesting some degree of body dissatisfaction), and at the same time they demonstrated positive feelings about their bodies (Pope et al., 2014). Indeed, for older-adolescent African American girls, there was only 19% conceptual overlap (r^2) between body appreciation and body dissatisfaction, and 27% conceptual overlap between body image flexibility and body dissatisfaction (Webb et al., 2014). While the conceptual overlap between body appreciation and body dissatisfaction appears to be larger for a predominantly Caucasian sample of college women (i.e., 53%) and men (41%), there is still evidence of construct differentiation within these estimates (Tylka & Wood-Barcalow, 2015).

Multifaceted

Positive body image **is** a multidimensional construct that involves much more than body satisfaction or appearance evaluation. Positive body image **is not** a unidimensional construct that can be comprehensively assessed via a measure of body satisfaction or gauged by the extent individuals favorably view their appearance. Three examples illustrate the multifaceted nature of positive body image.

First, we investigated whether positive body image would predict unique variance in women's well-being and eating behaviors above and beyond individuals' self-reported appearance evaluation. In two studies using the BAS (Avalos et al., 2005) and the BAS-2 (Tylka & Wood-Barcalow, 2015), we uncovered that positive body image was uniquely associated with each measure of well-being and eating behaviors after extracting shared variance with appearance evaluation. We concluded that positive body image is a more complex construct than appearance evaluation alone.

Second, evidence suggests that facets of positive body image, such as body appreciation, body image flexibility, functional body orientation (focusing on how the body feels and functions more so than appearance), and functional body satisfaction (satisfaction with what the body can do and experience) do not overlap completely with one another. Among African American adolescent girls, the conceptual overlap (r^2) between body appreciation and body image flexibility was 49%, demonstrating some differentiation between these constructs (Webb et al., 2014). Also, functional body satisfaction and functional body orientation, which overlapped 15% with one another, overlapped only 27% and 30% with body appreciation, respectively, in a sample of U.S. college women (Homan & Tylka, 2014).

Third, qualitative research has revealed that positive body image contains many facets, although we do not have measures on all these facets yet to study them via quantitative inquiry. Specifically, research teams interviewed college women (seven African American, seven White, and one biracial) with a positive body image from the U.S. (Wood-Barcalow et al., 2010), adolescent girls and boys with a positive body image from Sweden (Frisén & Holmqvist, 2010; Holmqvist & Frisén, 2012), African American adolescent girls and their maternal caregivers from the U.S. (note that these girls were not chosen based on having a positive or negative body image; Pope et al., 2014), and Aboriginal adolescent girls who espoused body pride from Canada (McHugh et al., 2014). Several common facets emerged across the themes generated from each study, which support the assertion that positive body image is multifaceted. These facets include:

Body appreciation. Body appreciation, defined here more narrowly than in Avalos et al. (2005), **is** appreciating the features, functionality, and health of the body. Body appreciation **is not** solely appreciating one's appearance or the extent that one's body aligns with cultural appearance ideals. Rather, it involves praising the body for what it is able to do, what it represents, and its unique features. College women from the U.S. reported that they now appreciate features of their body that they previously disliked or ignored (Wood-Barcalow et al., 2010). They further acknowledged that focusing on and being grateful for their bodies' functionality aided their positive body image. Swedish adolescent boys and girls viewed their bodies as important aspects of themselves that they need to appreciate and take well care of, for example, by exercising to maintain or even improve what their bodies were able to do (Frisén & Holmqvist, 2010). Swedish and African American adolescents with positive body image appreciated diverse appearances and shapes, which allowed them to appreciate their own unique appearances (Holmqvist & Frisén, 2012; Pope et al., 2014). Native Canadian adolescent girls stated that honoring their Aboriginal heritage, via engaging in Native customs (e.g., powwow dance) and participating in social change to challenge negative stereotypes of Aboriginal people, helped foster their positive body image by being proud of their Native appearance-related features and proud of their bodies for allowing themselves to partake in the customs of their culture (McHugh et al., 2014).

Body acceptance and love. Body acceptance and love **is** expressing love for and comfort with the body, even if not completely satisfied with all aspects of the body. Body acceptance and love **is not** narcissism or vanity. If the focus is on "aligning with sociocultural ideals" (e.g., looking like models in the media), "being more attractive than others" (e.g., appearance-related comparison and competition), and/or "doing whatever it takes" to achieve and maintain an appearance inconsistent with one's physical features, the result may represent narcissism and vanity. In contrast, loving the body for what it can do and its connection to others (e.g., ethnic heritage) and accepting one's unique physical features is representative of positive body image.

College women from the U.S. with positive body image emphasized that they chose to focus on their body assets rather than their perceived body flaws, and they admired how their bodies are unique rather than attempted to conform to unrealistic societal appearance ideals (Wood-Barcalow et al., 2010). Two-thirds of the adolescent sample from Sweden mentioned one or more body areas that they were not satisfied with; however, they were not troubled by these areas and instead accepted these features (Frisén & Holmqvist, 2010). African American adolescent girls emphasized their body assets, and about a third of the sample reported global body acceptance—or liking everything about their bodies (Pope et al., 2014). Adolescent Aboriginal girls from Canada articulated that body acceptance is necessary for body pride and emphasized that they liked how they looked and did not want to change their appearance even if others wanted them to make changes—they were comfortable in their bodies (McHugh et al., 2014).

Broadly conceptualizing beauty. Broadly conceptualizing beauty **is** the perception that a wide range of appearances can be beautiful, whether these appearances are unchangeable (e.g., weight, height) or modifiable (e.g., personal style). Those who hold a broad conceptualization of beauty may draw from inner characteristics, such as confidence and personality, when determining beauty in themselves and others. For example, they may remark, "confidence enhances beauty," and "one aspect of her beauty is her generosity." They also find beauty in their own features that may not align with sociocultural appearance ideals. Thus, broadly conceptualizing beauty **is not** limited to finding beauty in others; it is also generalized to the self. Furthermore, broadly conceptualizing beauty **is not** the same as sexual attractiveness—a person may see beauty in someone and may or may not be sexually attracted to him or her.

Broadly conceptualizing beauty has been a theme throughout the qualitative/mixed methods literature on positive body image. Adolescent girls and boys from Sweden emphasized that being attractive or beautiful does not imply having looks that are consistent with societal definitions of beauty, and they emphasized that people should "try to be themselves" rather than strive to attain external ideals (Holmqvist & Frisén, 2012, p. 391). College women from the U.S. indicated that they appreciated different "looks" and emphasized that beauty should not be compared between individuals, as people can be beautiful in an indefinite number of ways (Wood-Barcalow et al., 2010). African American adolescent girls tended to have a flexible definition of beauty and beauty ideals, placing more emphasis on creating a style "which works" to make a personal statement and project a unique presence (Parker et al., 1995). Adolescent Aboriginal girls from Canada conceptualized positive body image as experienced on the "inside" yet expressed outwardly in their choice of style, grooming, and behaviors—these girls were clear that positive body image did not result from looking a certain way (McHugh et al., 2014).

Adaptive appearance investment. Adaptive appearance investment *is* regularly engaging in appearance-related self-care, such as grooming behaviors that project an individual's sense of style and personality—it *is* enhancing one's natural features via benign methods. Adaptive appearance investment *is not* engaging in potentially destructive appearance-altering methods to fit external standards of beauty, basing self-worth on appearance, or being preoccupied with appearance fixing behaviors. As Cook-Cottone (2015, in this issue) argues, individuals with positive body image neither judge nor ignore their bodies. Instead, they engage in self-care that involves adaptive appearance investment.

Mixed methods research has uncovered that those with positive body image are invested in their appearance, and they view this investment an adaptive representation of themselves to the world. In our study, U.S. college women with positive body image revealed that they maintain and enhance their appearance via self-care, such as getting manicures and engaging in healthy eating and exercise (Wood-Barcalow et al., 2010). Although they acknowledged the appearance-related benefits of these behaviors, they also viewed these behaviors as acts of kindness toward their bodies. They did not invest their self-worth in their appearance, which helped some women cope with changes in their appearance brought on by illnesses (e.g., cancer, lupus). African American girls emphasized that they valued being "well-kept" and "having it going on," which they described as being well-groomed and projecting their sense of style, personality, and confidence within their appearance (Parker et al., 1995, p. 108). According to the authors, "this indexed making what they had work for them: long nails, pretty eyes, big lips, nice thighs, a big butt—whatever" (p. 108).

Cash, Melnyk, and Hrabosky (2004) divided appearance investment into self-evaluative salience (i.e., a dysfunctional connection of appearance to self-worth) and motivational salience (i.e., a benign and potentially adaptive engagement in efforts to feel attractive). Women with positive body image have lower levels of self-evaluative salience but similar levels of motivational salience, compared to women with negative body image or normative body discontent (Williams et al., 2004). Motivational salience has been found to be protective when individuals undergo appearance-related changes, such as changes brought on by breast cancer (Carver et al., 1998). Whether motivational salience is the best representation of adaptive appearance investment as reflected in positive body image, however, has yet to be investigated.

Inner positivity. Inner positivity *is* the connection between positive body image, positive feelings (e.g., body confidence, optimism, happiness), and adaptive behaviors (e.g., self-care, helping others). Inner positivity can also manifest as smiling, asserting oneself, holding the "head up high," and emanating a "special glow or "outer

radiance" (Tylka, 2011, p. 59). Inner positivity *is not* vain or narcissistic attitudes toward one's appearance, nor is it expressed in vain or narcissistic acts.

Indeed, college women from the U.S. described positive body image as being happy on the inside, which then reflects on the outside as a confident glow or "sparkle in the eye" (Wood-Barcalow et al., 2010, p. 111). These women reported that inner positivity directed engagement toward self-care behaviors such as participating in pleasurable exercise on a regular basis, adaptive stress relief (e.g., yoga), preventative care (e.g., doctor visits), flexible (i.e., intuitive) and nutritious eating, and pampering their bodies (e.g., massage). Adolescent girls and boys from Sweden believed that individuals' dispositions can alter their perceived attractiveness (Holmqvist & Frisén, 2012). Moreover, their inner positivity was tied to their physical activity, as many were involved in sports for years and had achieved "meaningful continuity in their exercise"—that is, they exercised for enjoyment and challenge rather than to control the size and shape of their bodies (Frisén & Holmqvist, 2010, p. 210). Aboriginal adolescent girls from Canada reported that body pride was experienced internally (e.g., being comfortable in and loving the body) and expressed externally (e.g., via confidence, self-respect, and participation in cultural practices such as powwow dance) and that exercise and eating healthy foods both stemmed from and maintained their positive body image (McHugh et al., 2014).

Filtering information in a body-protective manner. Filtering information in a body protective manner *is* accepting information that is consistent with positive body image while rejecting messages that could endanger it. Individuals who regularly engage in this filtering process have been referred to as having "a protective filter" (Wood-Barcalow et al., 2010, p. 109). Filtering information in a body protective manner *is not* foolproof, as individuals with positive body image can be susceptible to body image-related threats at particularly vulnerable times (e.g., when tired, stressed, when the threat comes from someone particularly meaningful to the individual, etc.).

College women from the U.S. who had a protective filter were aware of the unrealistic and fabricated nature of media images, rejected and challenged these images, as well as interpreted and internalized messages that were compassionate toward their bodies (Wood-Barcalow et al., 2010). However, these women sometimes absorbed negative information, such as weight-related criticism from significant others. In this manner, protective filtering may be tied to body image flexibility, as these women were aware of their negative affect resulting from this criticism but were able to accept their feelings and, in time, move toward behaviors reflecting self-care instead of body shame. Swedish adolescents with a positive body image reported not being particularly bothered by negative appearance-related comments (Frisén & Holmqvist, 2010), were aware of unnatural and unrealistic appearance ideals and the media's use of these ideals for profit, and actively criticized these ideals (Holmqvist & Frisén, 2012). Many African American girls also were aware of and denounced media appearance standards, although roughly a similar number reported attitudes and behaviors consistent with internalizing such ideals (Pope et al., 2014). Aboriginal adolescent girls from Canada spoke about the need to overcome body-related pressures from influential others and the media in order to maintain their body pride (McHugh et al., 2014).

Holistic

Positive body image *is* holistic in that the multiple facets of positive body image reviewed in the previous section are best interpreted together rather than independently of each other. Additionally, internal experiences (e.g., inner positivity, protective

filtering) are intertwined with external behaviors, interpersonal relationships, community, media, and culture (Wood-Barcalow et al., 2010). Body-related thoughts, affect, perceptions, and behaviors also are interconnected. Thus, positive body image **is not** segregated to one dimension of a person (e.g., perceptions, affective evaluation) or even within the person, as it is often assessed within research. Cook-Cottone (2015, in this issue) refers to the holistic nature of positive body image as *attunement*, which is a reciprocal process of mutual influence and co-regulation within and between the internal systems (i.e., thoughts, affect, physiology) and external systems (i.e., family, community, culture).

In our interviews with U.S. college women, we labeled this process *reciprocity* (Wood-Barcalow et al., 2010). Similar to attunement, reciprocity is the mutual interdependence of the individual and the environment. We found that various sources, both internal (e.g., illness) and external (e.g., medical treatment, body acceptance from others, spirituality, media literacy) influenced women with positive body image. For example, one woman revealed that she appreciated her once renounced hair upon receiving a cancer diagnosis and the recognition that she may lose her locks due to chemotherapy. Appreciation for her hair explicated her ability to respond to a body image-related threat (i.e., anticipated changes in appearance resulting from cancer treatment) with adaptive coping. Support from her friends further was instrumental in this woman accepting the appearance-related changes brought on by the illness and its treatment: "My friends helped me calm down and remember that no matter what I look like, I'm still going to be me" (Wood-Barcalow et al., 2010, p. 110). The women we interviewed were not only the recipients of these sources, but the women also changed, shaped, and altered their behaviors and environments in growth-enhancing ways. For instance, they chose to seek out others who had a positive body image, avoid body-related talk, and searched for partners and friends who accepted their bodies in order to maintain their positive body image. They engaged in self-care practices (e.g., yoga, stress management) and avoided practices that could potentially harm their health and/or well-being (e.g., reading appearance-related magazines), in order to protect their physical health (to prevent future illness and/or reduce the negative effects of their current illnesses) and psychological well-being. They served as mentors and role models to others, especially younger females, about the importance of having a positive body image and self-care (e.g., regular enjoyable exercise, eating nutritiously).

Reciprocity has also been noted in other qualitative studies. For instance, adolescents from Canada discussed how their Aboriginal identity provided outlets for them to show their body pride, such as powwow dance, and by engaging in these outlets, they further built their body pride and cultural pride (McHugh et al., 2014). Participating in athletics helped adolescent girls and boys from Sweden focus on and appreciate the functionality of their bodies, and their positive views about their bodies facilitated their engagement in sports for reasons related to self-care, enjoyment, and challenge (Frisén & Holmqvist, 2010). Indeed, Tiggemann, Coutts, and Clark (2014) found that women who belly dance, an embodying activity promoted on the basis of fun and fitness and geared for individuals of all shapes and sizes, reported higher body appreciation than college women who have never engaged in belly dance.

Research needs to investigate reciprocity within a quantitative, and preferably longitudinal, paradigm. Efforts could be directed toward exploring "upward spirals," or combinations of adaptive variables that trigger self-perpetuating cycles and trajectories of positive psychological growth (Garland et al., 2010). Upward spirals have been studied in the field of positive affect, such as Fredrickson's (2001) broaden-and-build theory, whereby positive emotions broaden cognitions, positive coping, and interpersonal trust (i.e., expanding people's mindsets), which then build behavioral flexibility and personal resources such as

mindfulness, resilience, social closeness, and physical health. Indeed, Fitzsimmons and Bardone-Cone (2011) studied a "downward spiral," whereby initial weight concern predicted subsequent weight concern through body surveillance. Researchers exploring positive body image could use this reciprocal-influence design (Burns et al., 2008) to study, for instance, whether initial levels of body appreciation predict subsequent body appreciation through physical activity (e.g., yoga participation, belly dance), intuitive eating interventions, and self-compassion interventions.

Stable and Malleable

Although seemingly incompatible, positive body image **is** both stable and malleable, including both trait and state qualities. Because we only have measures of trait positive body image, it is easy to assume that fluctuations in positive body image are neither evidenced nor impactful. Yet, mounting evidence suggests that positive body image **is not** solely a stable trait.

A study emphasizing positive body image's state and trait qualities was conducted by Albertson, Neff, and Dill-Shackleford (2014). These authors designed and delivered a 3-week self-compassion meditation training to adult women with existing body image concerns. Women completed body image measures, including the BAS (Avalos et al., 2005), at baseline, post-intervention, and three months after completing the intervention. Women who received the self-compassion meditation training reported significantly greater gains in body appreciation at post-intervention compared to a waitlist control group, and maintained these gains at the 3-month follow-up. Thus, positive body image can be increased via interventions and maintained over time, demonstrating both positive body image's malleability and stability.

Furthermore, Halliwell, Jarman, McNamara, Risdon, and Jankowski (2015) examined the impact of a 1-hour cognitive dissonance-based intervention on body appreciation (as assessed by the BAS-2) in secondary school girls from the United Kingdom. Participants in the intervention group who voiced opposition to the thin-ideal body type through various activities reported increased body appreciation from pre- to post-intervention, whereas the control group experienced no change in body appreciation. These findings highlight the malleability of positive body image (i.e., evidenced by the intervention group) as well as its stability (i.e., evidenced by the control group).

Additional support for trait components of positive body image include the BAS (Avalos et al., 2005) and BAS-2 (Tylka & Wood-Barcalow, 2015) demonstrating trait stability over a 3-week period, with a correlation of .90 noted across administrations for both U.S. college women (BAS and BAS-2) and U.S. college men (BAS-2), and scores did not increase or decrease between administrations. Qualitative evidence for the long- and short-term malleability of positive body image has also been offered. In terms of its long-term malleability, 12 of the 15 U.S. college women with positive body image from Wood-Barcalow et al.'s (2010) study revealed that they endorsed a negative body image during adolescence. Transitioning to a positive body image was facilitated by a reciprocal process involving their cognitions, affect, perceptions, and behaviors. For instance, they reported shifting their thinking (e.g., choosing to conceptualize their weight gain during adolescence as part of gaining a womanly shape), having others' support and body acceptance, associating with friends who were not focused on body and weight issues, modeling women who were proud of their body, and embracing an inclusive definition of beauty. The short-term malleability of positive body image was also noted within women's responses when they were unable to filter out negative external influences (e.g., pressures to lose weight), prompting their positive body evaluation to decrease and their body investment to increase, which they referred to as "bad body image days." Yet, these women

noted that these shifts were temporary and that they were able to rebound from body image-related threats to their baseline positive functioning.

Longitudinal research is needed to investigate positive body image over years to provide a clearer picture of its stability and transience. It is worthwhile to investigate what characteristics promote resilience, or the ability to bounce back to positive body image, during and after perceived threats to body image. Trait positive body image may be similar to the trait of happiness: although a large portion of happiness is heritable (i.e., some people are naturally happier than others), happiness can be enhanced for those with lower inherited happiness via the regular practice of intentional activities, such as random acts of kindness (Lyubomirsky, Sheldon, & Schkade, 2005). Similarly, trait positive body image could be easier to achieve and maintain for some individuals (those with high heritable trait positive body image), whereas it may be more effortful for others. If so, it would be useful to understand the effortful, intentional activities (e.g., practicing positive body image affirmations, surrounding the self with others who have a positive body image) that boost positive body image for these individuals. Furthermore, experimental research needs to examine fluctuations in state positive body image. Modifications to the BAS (Avalos et al., 2005) and BAS-2 (Tylka & Wood-Barcalow, 2015) could be incorporated to assess state body appreciation. For example, the first item on both the BAS and BAS-2, "I respect my body," could be modified to, "In this moment, I feel respect for my body." Experimental designs could expose participants to potential threats to body image, such as exposure to media appearance ideals (Buote, Wilson, Strahan, Gazzola, & Papps, 2011), and potential enhancements to body image, such as self-compassion or positive rational acceptance interventions (Albertson et al., 2014), to determine which variables have the ability to impact state body appreciation levels.

Protective

Preliminary evidence supports that positive body image **is** likely to be protective of physical health and psychological well-being. We qualify this statement because most of the research that has been done on positive body image has been correlational or qualitative in design rather than longitudinal or experimental. Clearly, additional research investigating positive body image as a protective factor is warranted. Yet, in the research to date, it is clear that positive body image is associated with numerous well-being, self-care, and adaptive physical health indices in a positive direction as well as distress and disturbance in an inverse direction (Andrew et al., 2014; Augustus-Horvath & Tylka, 2011; Avalos & Tylka, 2006; Gillen, 2015; Tylka, 2015).

Positive body image **is not** linked to disengagement in healthy activity, eating, and self-care. It has been asserted that if individuals have a holistically favorable perspective of their bodies, they may not be motivated to engage in healthy behaviors (Heinberg, Thompson, & Matzon, 2001). As an example, some individuals have speculated that because African American female samples have, on average, higher positive body image and higher BMIs than White female samples, positive body image may contribute to obesity by inhibiting motivation for weight control (for a review, see Flynn & Fitzgibbon, 1998). To date, there is no empirical research to substantiate the speculation that positive body image leads to disengagement in adaptive self-care behaviors.

Much of the evidence supporting positive body image as protective has been already reviewed (e.g., Frisén & Holmqvist, 2010; Wood-Barcalow et al., 2010); thus, we highlight additional findings in this section. Body appreciation has been found to be positively related to intuitive eating among U.S. adult women (Augustus-Horvath & Tylka, 2011; Avalos & Tylka, 2006), U.S. college men

(Tylka & Kroon Van Diest, 2013), Australian adolescent girls (Andrew, Tiggemann, & Clark, 2015), and U.S. female college athletes (Hahn Oh, Wiseman, Hendrickson, Phillips, & Hayden, 2012). Body appreciation was associated positively with self-compassion among U.S. and Canadian college women (Homan & Tylka, 2015; Wasylkiw, MacKinnon, & MacLellan, 2012), as well as life satisfaction and positive affect among U.S. college women and men (Tylka & Kroon Van Diest, 2013). Additionally, body appreciation has been linked in a positive direction to sexual satisfaction among U.S. adult women (Satinsky, Reece, Dennis, Sanders, & Bardzell, 2012), use of skin protection and skin cancer screening behaviors among Australian adult women (Andrew et al., 2014) and U.S. college women and men (Gillen, 2015), as well as sleep, meditation practice, and conducting breast self-exams among U.S. college women (Tylka, 2015). Body appreciation also was linked positively to participation in rigorous and regular exercise among U.S. college women when exercise motives were not mainly for appearance and weight loss (Homan & Tylka, 2014). Furthermore, body appreciation is inversely related to maladaptive perfectionism among U.S. college women (Iannantuono & Tylka, 2012), diet- and weight-related talk among Canadian women (Wasylkiw & Butler, 2014), unhealthy dieting behaviors among U.S. college women and men (Gillen, 2015; Tylka & Kroon Van Diest, 2013), and depressive symptoms among U.S. college women and men (Gillen, 2015).

One study has directly examined body appreciation as a protective factor. Halliwell (2013) integrated body appreciation within an experiment investigating U.K. college women's vulnerability to media exposure. Women *high* in body appreciation did not place increased importance on their appearance discrepancies (i.e., differences between how they would like to look and how they actually look) after viewing thin female models, as their appearance discrepancies were similar in size to a control group who did not view thin models. In contrast, women *low* in body appreciation placed increased importance on their appearance discrepancies after viewing thin female models compared to the control group. Halliwell further observed that the protective effect of high body appreciation extended to women who had internalized the thin ideal.[1] Among women who endorsed the thin ideal, those who also had *high* body appreciation downplayed the importance of their appearance discrepancies after viewing thin female models, whereas those who had *low* body appreciation reported larger appearance discrepancies and placed more importance on these discrepancies after viewing thin female models.

Two additional studies illustrated that body image flexibility may also be a protective factor. Among U.S. college women and men (Sandoz et al., 2013) and Portuguese community adult women and men (Ferreira, Pinto-Gouveia, & Duarte, 2011), body image flexibility (assessed as low experiential body image avoidance) was related in a positive direction to general psychological flexibility and in an inverse direction to disordered eating and body dissatisfaction. Even more compelling is that both studies found that body image flexibility buffered the relationship between body dissatisfaction and disordered eating. Therefore, body dissatisfaction was less likely to be associated with disordered eating when body image flexibility was high. This finding suggests that the ability to note and accept negative body-related experiences (e.g., feelings, thoughts, perceptions, and beliefs) while proceeding in a valued and adaptive direction can possibly prevent those who are dissatisfied with their bodies from engaging in disordered eating behaviors.

---

[1] Halliwell (2013) reported a correlation of −.36 between body appreciation and thin-ideal internalization. Although they are negatively related, it is not a strong correlation. Thus, these constructs are differentiable. It is theoretically possible, then, that some women appreciate their bodies yet prefer to be thin simultaneously.

Although we do not conceptualize average or low BMI as a marker for physical health (see Tylka et al., 2014), it is important to note that body appreciation and body image flexibility were inversely related to BMI in a number of studies (e.g., Lobera & Ríos, 2011; Satinsky et al., 2012; Tylka & Kroon Van Diest, 2013; Tylka & Wood-Barcalow, 2015; Webb et al., 2014). Therefore, promoting body acceptance and other facets of positive body image are not likely to result in weight gain and "giving up" on achieving or maintaining a healthy lifestyle. On the contrary, promoting positive body image may increase participation in health-related behaviors (Andrew et al., 2014; Frisén & Holmqvist, 2010; Homan & Tylka, 2014; Wood-Barcalow et al., 2010).

Linked to Self-Perceived Body Acceptance by Others

Positive body image **is** linked to perceiving that one's body is accepted by others, including family, friends, romantic partners, a higher power, and society. If individuals perceive that their bodies are acceptable, they may be less preoccupied with changing their outer appearance and pay more attention to how their bodies feel and function. Often, positive body image **is** implicitly and indirectly transmitted via (a) subtle acceptance-based messages from family members and friends about style or appearance (e.g., "That haircut really suits you"), (b) infrequent appearance-related talk, and (c) general messages about beauty and love for the body (e.g., "We all need to love and appreciate our bodies," "Everyone has a unique beauty.").

Positive body image **is not** aided by frequent body-related "compliments" from others. In fact, one study found that the frequency of appearance-based compliments women received, such as "You are pretty," "You have a nice body," "You have pretty eyes," was associated with higher dysfunctional appearance investment (i.e., body surveillance) and body dissatisfaction (Calogero, Herbozo, & Thompson, 2009). Does this finding suggest that others should never offer appearance-based compliments? Given sociocultural pressures for attractiveness, never receiving an appearance-based compliment could also prompt body image distress. We acknowledge that receiving and filtering body-related compliments from others is likely a complex process that has the propensity to be either detrimental or enhancing due to a host of interacting variables (e.g., frequency of compliments, personality of the recipient, perceived impact of the compliment, whether or not the compliment is attached to a caveat or clause that reinforces societal appearance standards). For example, "You've lost weight; you look great!" intertwines weight loss with enhanced appearance, and thus has the potential to reinforce thin-ideal internalization.

Qualitative studies have revealed that individuals with positive body image perceive acceptance of their bodies by significant others. Among Swedish adolescents with a positive body image, the appearance-related conversations adolescents had with mothers, fathers, and siblings centered on external and interchangeable aspects such as clothing choices and hairstyle rather than about body weight or size (Frisén & Holmqvist, 2010). College women from the U.S. perceived that unconditional acceptance from family, friends, and partners was central in the formation and maintenance of their positive body image, and provided examples such as others reminding them that beauty is more than appearance (Wood-Barcalow et al., 2010).

Quantitative studies show a strong connection between perceptions of body acceptance by others and positive body image among U.S. adult women (Augustus-Horvath & Tylka, 2011), female college athletes (Hahn Oh et al., 2012), and undergraduate men and women (Avalos & Tylka, 2006; Kroon Van Diest & Tylka, 2010). Augustus-Horvath and Tylka (2011) found that perceived body acceptance by others accounted for, or mediated, the inverse relationship between women's body mass index and

body appreciation. That is, lower body appreciation is not necessarily related to having higher weights with respect to societal ideals and/or norms but rather related to the perception that others do not accept their bodies. The various forms of weight stigma that individuals encounter likely lower their perceptions of body acceptance by others, which then may serve as substantial roadblocks and barriers to body appreciation (Augustus-Horvath & Tylka, 2011; Tylka et al., 2014). Therefore, it is important that social activists, researchers, and clinicians work toward social change to eradicate both direct and subtle messages of body disparagement or shaming. Clearly, efforts need to be undertaken to inform parents, peers, schools, and the public (a) that positive body image is more likely to be fostered by body acceptance than via messages to alter appearance and (b) how to differentiate between messages that promote body acceptance and those that reflect detrimental appearance-related compliments (Calogero et al., 2009).

In addition to body acceptance from family, friends, and partners, several U.S. college women with positive body image reported unconditional body acceptance from a higher power or God (Wood-Barcalow et al., 2010). They believed that religion and spirituality assisted in their formation and preservation of a positive body image due to their belief that a higher power created their bodies as unique and special, and in return, the women wanted to respect their higher power by caring for their bodies. Similarly, Aboriginal adolescent girls from Canada described how spirituality influenced their body pride, helping them feel more connected with their bodies, themselves, and nature (McHugh et al., 2014). African American adolescent girls who expressed a belief in God were accepting of their bodies, including their perceived flaws, believed that their bodies were "gifts from God," and viewed their bodies as permanent aspects of who they are spiritually. As such, the adolescent females felt they needed to love and care for their "gift" (Pope et al., 2014, p. 311).

Quantitative studies explored the connection between positive body image and spirituality. Homan and Cavanaugh (2013) discovered that a secure attachment with God was associated with higher levels of body appreciation, a functional (rather than appearance-based) body orientation, and intuitive eating in a sample of U.S. college women. Body sanctification, or the ability to conceptualize the body as holy, worthy of respect, and integral to one's being, focuses on people's experiences of their body (Jacobson et al., 2013). For instance, those high in body sanctification may agree with statements such as "My body is a gift from God" and "God lives through my body" and perceive the body as spiritual, miraculous, divine, and spirit-filled (Mahoney et al., 2005). Among students from a U.S. liberal arts college, body sanctification was associated with (a) higher appearance and weight satisfaction and (b) lower body surveillance and depersonalization, even after controlling for general religious commitment (Jacobson et al., 2013).

As with other key features of positive body image, research is needed to investigate whether body sanctification and spirituality can protect against body image-related threats and thereby reduce the likelihood of pursuing potentially maladaptive appearance-fixing behaviors, such as cosmetic surgery. Researchers could assess body sanctification and spirituality within children and explore their responses to body image-related threats as they age.

Shaped by Social Identities

Given that positive body image emerged from and within disciplines that recognize individual differences and celebrate diversity, researchers have considered how positive body image may be impacted by various social identities (e.g., culture, race, gender, age, size, ability, sexual orientation, religion/spirituality, and socioeconomic status). Tiggemann (2015, in this issue) thoroughly reviews the literature on positive body image and social identities, and

we direct interested readers to her article. The point we wish to make here is that positive body image **is** best conceptualized and understood by the intersection of various social identities—an intersection which inevitably alters the expression and importance of positive body image for each individual. Yet, most research on positive body image decontextualizes, or does not recognize, participants' various social identities. Positive body image **is not** universal—meaning that there is no unitary positive body image construct that applies to all groups within all social identities. We illustrate this point with research thus far on culture, age, gender, and BMI.

Culture. Many studies on cultural variations in positive body image using the BAS (Avalos et al., 2005) have been conducted by Swami and colleagues (Ng, Barron, & Swami, 2015; see Tiggemann, 2015, in this issue, for a review). This research has revealed that there are likely differences in the concept and experience of positive body image across cultures. Feeling good about one's body, accepting one's body and its unique qualities, and taking a positive attitude toward one's body may be aspects of positive body image that are similar across cultures. However, aspects related to autonomy over, and investment in, the body (e.g., self-care via respecting the body, engaging in healthy behaviors to take care of the body, rejecting media appearance ideals) may differ across cultures (Ng et al., 2015; Swami & Jaafar, 2012). According to Ng et al. (2015), culture-specific experiences may lead to variations in embodiment and how individuals relate to their bodies, which in turn can result in various conceptualizations of positive body image. Furthermore, some terms used to describe positive body image, such as "body respect," may have different meanings across individualistic and collectivistic cultures in particular. Ng et al. (2015) asserted that it is important to investigate the cultural expression of positive body image within a given culture before conclusions are surmised from an assessment normed in a different culture.

Age. Evidence suggests that older women report appreciating their bodies more readily than younger women (Tiggemann & McCourt, 2013). As women age, they may be more likely to understand how their body functions, rather than focusing mostly on its appearance. Interestingly, Tiggemann and McCourt (2013) noted that, for their sample of Australian women, body appreciation increased across age while body dissatisfaction remained stable. This disconnection between body dissatisfaction and body appreciation suggests that as women age, they may be more likely to experience body appreciation even when they are dissatisfied with aspects of their bodies. In their sample of U.S. adult women, Augustus-Horvath and Tylka (2011) found that early adult (ages 26–39) experienced a stronger connection between body appreciation and having a functional body orientation than the emerging (ages 18–25) and middle (ages 40–65) adults, perhaps due to such factors as recognizing and appreciating their bodies' functionality during pregnancy and childbirth.

Gender. Similar themes and characteristics related to positive body image were noted among Swedish adolescent females and males (Frisén & Holmqvist, 2010). Furthermore, research has shown that U.S. women and men have a similar concept and experience of positive body image, as assessed by the BAS (Tylka, 2013) and the BAS-2 (Tylka & Wood-Barcalow, 2015). Indeed, body appreciation was connected to physical health-related behaviors and well-being equally for U.S. college women and men (Gillen, 2015). However, some differences emerged in women and men's levels of body appreciation. Whereas an online sample of community men reported similar levels of body appreciation as community women, college men reported higher levels of body appreciation than college women (Tylka & Wood-Barcalow, 2015).

Body mass index. Researchers have documented an inverse relationship between body appreciation and BMI for many cultural and ethnic groups, including samples of predominantly White U.S. women and men, African American U.S. women, Malaysian women, Brazilian women and men, Indonesian women and men, Chinese women from Hong Kong, and Spanish adolescents (Lobera & Ríos, 2011; Ng et al., 2015; Satinsky et al., 2012; Swami & Chamorro-Premuzic, 2008; Swami & Jaafar, 2012; Tylka & Kroon Van Diest, 2013; Tylka & Wood-Barcalow, 2015; Webb et al., 2014). This inverse link could reflect the external and internalized weight biases within many cultures (Tylka et al., 2014). Of particular note, body appreciation was unrelated to BMI among women from Zimbabwe, perhaps due to cultural acceptance of diverse body sizes and shapes within this nation (Swami, Mada, & Tovée, 2012).

Summary. Positive body image will be constructed differently for each individual, given his or her unique constellation of social identities. Research is needed to determine how positive body image is shaped by unexplored social identities, such as gender identity. For example, body functionality may be associated more with a masculine view of the body, whereas the self-care dimensions of positive body image may be considered feminine. Gender identity, then, could interact with gender, with masculine men unwilling to engage in certain forms of self-care, and feminine women downplaying the overall importance of their body's functionality. Because one or more social identities can alter the experience of positive body image, it is important that this is acknowledged and reflected in research and clinical practice. We therefore encourage researchers and clinicians to use an intersectional approach, whereby they explore how social identities interact to shape individuals' experiences of positive body image (Cole & Sabik, 2009). This conceptualization inevitably makes positive body image research and practice complex, yet we need to rise to this challenge when attempting to understand the dynamic nature of positive body image.

Conclusion

Acknowledging the importance of positive body image inquiry arose, in part, within the body image field, as illustrated by contributions by Cash and colleagues, eating disorder prevention efforts, and feminist discourse and activism related to embodiment. Moreover, strength-based disciplines within psychology, such as positive psychology and counseling psychology, provided the backdrop and rationale for why positive body image scholarship is imperative—to balance research and clinical efforts for a more complete understanding of body image. Outside psychology, Buddhism's offerings of experiential awareness and self-compassion further aided the development of novel methods to promote a mindful, appreciative, and benevolent connection to the body.

Our current understanding of positive body image demonstrates that it **is**: a distinct construct from negative body image, multifaceted (with the facets including body appreciation, body acceptance and love, adaptive appearance investment, broadly conceptualizing beauty, inner positivity that radiates outward and manifests as adaptive behavior, and filtering information in a body-protective manner), holistic (in which internal experiences such as inner positivity and protective filtering are interwoven with external behaviors, interpersonal relationships, community, media, and culture to create attunement), stable but adjustable via intervention, likely protective, linked to unconditional body acceptance by others, and molded by individuals' multiple social identities. We also elucidate that positive body image **is not**: being highly satisfied with all aspects of appearance, limited to appearance at the exclusion of other body dimensions (e.g., body functionality), expressed as narcissism or vanity, foolproof in its ability to protect against all body image-related threats, linked to disengagement from self-care, or aided by frequent appearance-related compliments from others.

The study of positive body image is rather young, yet it is flourishing. We are confident that this area of scholarship will continue along this "positive" trajectory, as much remains to be discovered. New insights will continue to add to and shape the nuances of our understanding of positive body image as a construct. We are excited to participate in and witness the unfolding of this line of inquiry.

References

Albertson, E. R., Neff, K. D., & Dill-Shackleford, K. E. (2014). Self-compassion and body dissatisfaction in women: A randomized controlled trial of a brief meditation intervention. *Mindfulness*, http://dx.doi.org/10.1007/s12671-014-0277-3

Andrew, R., Tiggemann, M., & Clark, L. (2014). Positive body image and young women's health: Implications for sun protection, cancer screening, weight loss and alcohol consumption behaviours. *Journal of Health Psychology*, http://dx.doi.org/10.1177/1359105314520814

Andrew, R., Tiggemann, M., & Clark, L. (2015). Predictors of intuitive eating in adolescent girls? *Journal of Adolescent Health*, 56, 209–214. http://dx.doi.org/10.1016/j.jadohealth.2014.09.005

Augustus-Horvath, C. L., & Tylka, T. L. (2011). The acceptance model of intuitive eating: A comparison of women in emerging adulthood, early adulthood, and middle adulthood. *Journal of Counseling Psychology*, 58, 110–125. http://dx.doi.org/10.1037/a0022129

Avalos, L. C., & Tylka, T. L. (2006). Exploring a model of intuitive eating with college women. *Journal of Counseling Psychology*, 53, 486–497. http://dx.doi.org/10.1037/0022-1067.53.4.486

Avalos, L. C., Tylka, T. L., & Wood-Barcalow, N. (2005). The Body Appreciation Scale: Development and psychometric evaluation. *Body Image*, 2, 285–297. http://dx.doi.org/10.1016/j.bodyim.2005.06.002

Bacon, L., & Aphramor, L. (2014). *Body respect: What conventional health books get wrong, leave out, and just plain fail to understand about weight*. Dallas, TX: BenBella Books.

Bacon, L., Stern, J. S., Van Loan, M. D., & Keim, N. L. (2005). Size acceptance and intuitive eating improve health for obese, female chronic dieters. *Journal of the American Dietetic Association*, 105, 929–936. http://dx.doi.org/10.1016/j.jada.2005.03.011

Becker, C. B., & Stice, E. (2011). *Succeed body image programme manual*. New York: Oxford University Press.

Brown, T. A., Cash, T. F., & Mikulka, P. J. (1990). Attitudinal body image assessment: Factor analysis of the Body-Self Relations Questionnaire. *Journal of Personality Assessment*, 54, 213–230. http://dx.doi.org/10.1207/s15327752jpa5501&2_13

Buote, V. M., Wilson, A. E., Strahan, E. J., Gazzola, S. B., & Papps, F. (2011). Setting the bar: Divergent sociocultural norms for women's and men's ideal appearance in real-world contexts. *Body Image*, 8, 322–334. http://dx.doi.org/10.1016/j.bodyim.2011.06.002

Burns, A. B., Brown, J. S., Sachs-Ericsson, N., Plant, E. A., Curtis, J. T., Fredrickson, B. L., & Joiner, T. E. (2008). Upward spirals of positive emotion and coping: Replication, extension, and initial exploration of neurochemical substrates. *Personality and Individual Differences*, 44, 360–370. http://dx.doi.org/10.1016/j.paid.2007.08.015

Calogero, R. M., Herbozo, S., & Thompson, J. K. (2009). Complimentary weightism: The potential costs of appearance-related commentary for women's self-objectification. *Psychology of Women Quarterly*, 33, 120–132. http://dx.doi.org/10.1111/j.1471-6402.2008.01479.x

Carver, C. S., Pozo-Kaderman, C., Price, A. A., Noriega, V., Harris, S. D., Derhagopian, R. P., . . . & Moffat, F. L. (1998). Concern about aspects of body image and adjustment to early stage breast cancer. *Psychosomatic Medicine*, 60, 168–174. http://dx.doi.org/10.1097/00006842-199803000-00010

Cash, T. F. (2000). *Users' manual for the Multidimensional Body Self-Relations Questionnaire*. Available from the author at www.body-images.com

Cash, T. F. (2004). Body image: Past, present, and future. *Body Image*, 1, 1–5. http://dx.doi.org/10.1016/S1740-1445(03)00011-1

Cash, T. F. (2008). *The body image workbook* (2nd ed.). Oakland, CA: New Harbinger.

Cash, T. F., & Fleming, E. C. (2002). The impact of body image experiences: Development of the Body Image Quality of Life Inventory. *International Journal of Eating Disorders*, 31, 455–460. http://dx.doi.org/10.1002/eat.10033

Cash, T. F., Jakatdar, T. A., & Williams, E. F. (2004). The Body Image Quality of Life Inventory: Further validation with college men and women. *Body Image*, 1, 279–287. http://dx.doi.org/10.1016/S1740-1455(03)00023-8

Cash, T. F., Melnyk, S. E., & Hrabosky, J. I. (2004). The assessment of body image investment: An extensive revision of the Appearance Schemas Inventory. *International Journal of Eating Disorders*, 35, 305–316. http://dx.doi.org/10.1002/eat.10264

Cash, T. F., & Pruzinsky, T. (2002). Future challenges for body image theory, research, and clinical practice. In T. F. Cash & T. Pruzinsky (Eds.), *Body image: A handbook of theory, research, and clinical practice* (pp. 509–516). New York: Guilford.

Cash, T. L., Santos, M. T., & Williams, E. F. (2005). Coping with body-image threats and challenges: Validation of the Body Image Coping Strategies Inventory. *Journal of Psychosomatic Research*, 58, 190–199. http://dx.doi.org/10.1016/j.jpsychores.2004.07.008

Cash, T. F. & Smolak, L. (Eds.). (2011). *Body image: A handbook of science, practice, and prevention*. New York: Guilford.

Cole, E. R., & Sabik, N. J. (2009). A fractured mirror: Intersectional approaches to diverse women's perceptions of beauty and bodies. In M. T. Berger & K. Guidroz (Eds.), *The intersectional approach: Transforming the academy through race, class, and gender* (2nd ed., pp. 173–192). Chapel Hill: University of North Carolina Press.

Cook-Cottone, C. P. (2015). Incorporating positive body image into the treatment of eating disorders: A model for attunement and mindful self-care. *Body Image*, 14, 158–167. http://dx.doi.org/10.1016/j.bodyim.2015.03.004

Cook-Cottone, C., Kane, L. S., Keddie, E., & Haugli, S. (2013). *Girls growing in wellness and balance: Yoga and life skills to empower*. Stoddard, WI: Schoolhouse Educational Services.

Daníelsdóttir, S. (2014). *Your body is awesome: Body respect for children*. Philadelphia, PA: Singing Dragon.

Ferreira, C., Pinto-Gouveia, J., & Duarte, C. (2011). The validation of the Body Image Acceptance and Action Questionnaire: Exploring the moderator effect of acceptance on disordered eating. *International Journal of Psychology and Psychological Therapy*, 11, 327–345.

Fitzsimmons, E. G., & Bardone-Cone, A. M. (2011). Downward spirals of body surveillance and weight/shape concern among African American and Caucasian college women. *Body Image*, 8, 216–223. http://dx.doi.org/10.1016/j.bodyim.2011.04.003

Flynn, K. J., & Fitzgibbon, M. (1998). Body images and obesity risk among Black females: A review of the literature. *Annals of Behavioral Medicine*, 20, 13–24. http://dx.doi.org/10.1007/bf02893804

Fredrickson, B. L. (2001). The role of positive emotions in positive psychology: The broaden-and-build theory of positive emotions. *American Psychologist*, 56, 218–226. http://dx.doi.org/10.1037/0003-066x.56.3.218

Fredrickson, B. L., & Losada, M. F. (2005). Positive affect and the complex dynamics of human flourishing. *American Psychologist*, 60, 678–686. http://dx.doi.org/10.1037/0003-066X.60.7.678

Frisén, A., & Holmqvist, K. (2010). What characterizes early adolescents with a positive body image? A qualitative investigation of Swedish girls and boys. *Body Image*, 7, 205–212. http://dx.doi.org/10.1016/j.bodyim.2010.04.001

Garland, E. L., Fredrickson, B., Kring, A. M., Johnson, D. P., Meyer, P. S., & Penn, D. L. (2010). Upward spirals of positive emotions counter downward spirals of negativity: Insights from the broaden-and-build theory and affective neuroscience on the treatment of emotional dysfunctions and deficits in psychopathology. *Clinical Psychology Review*, 30, 849–864. http://dx.doi.org/10.1016/j.cpr.2010.03.002

Gelso, C., & Fretz, B. (2001). *Counseling psychology* (2nd ed). Fort Worth, TX: Harcourt.

Gillen, M. M. (2015). Associations between positive body image and indicators of men's and women's mental and physical health. *Body Image*, 13, 67–74. http://dx.doi.org/10.1016/j.bodyim.2015.01.002

Hahn Oh, K., Wiseman, M. C., Hendrickson, J., Phillips, J. C., & Hayden, E. W. (2012). Testing the acceptance model of intuitive eating with college women athletes. *Psychology of Women Quarterly*, 36, 88–98. http://dx.doi.org/10.1177/0361684311433282

Halliwell, E. (2013). The impact of thin idealized media images on body satisfaction: Does body appreciation protect women from negative effects? *Body Image*, 10, 509–514. http://dx.doi.org/10.1016/j.bodyim.2013.07.004

Halliwell, E., Jarman, H., McNamara, A., Risdon, H., & Jankowski, G. (2015). Dissemination of evidence-based body image interventions: A pilot study into the effectiveness of using undergraduate students as interventionists in secondary schools. *Body Image*, 14, 1–4. http://dx.doi.org/10.1016/j.bodyim.2015.02.002

Hayes, S. C., Strosahl, K. D., & Wilson, K. G. (1999). *Acceptance and commitment therapy: An experiential approach to behavior change*. New York, NY: Guilford Press.

Heinberg, L. J., Thompson, J. K., & Matzon, J. L. (2001). Body image dissatisfaction as a motivator for healthy lifestyle change: Is some distress beneficial? In R. H. Striegel-Moore & L. Smolak (Eds.), *Eating disorders: Innovative directions in research and practice* (pp. 215–232). Washington, DC: American Psychological Association.

Holmqvist, K., & Frisén, A. (2012). "I bet they aren't that perfect in reality": Appearance ideals viewed from the perspective of adolescents with a positive body image. *Body Image*, 9, 388–395. http://dx.doi.org/10.1016/j.bodyim.2012.03.007

Homan, K. J., & Cavanaugh, B. N. (2013). Perceived relationship with God fosters positive body image in college women. *Journal of Health Psychology*, 18, 1529–1539. http://dx.doi.org/10.1177/1359105312465911

Homan, K. J., & Tylka, T. L. (2014). Appearance-based exercise motivation moderates the relationship between exercise frequency and positive body image. *Body Image*, 11, 101–108. http://dx.doi.org/10.1016/j.bodyim.2014.01.003

Homan, K. J., & Tylka, T. L. (2015). *Self-compassion moderates body comparison and appearance self-worth's relationships to body appreciation*. Manuscript submitted for publication.

Iannantuono, A. C., & Tylka, T. L. (2012). Interpersonal and intrapersonal links to body appreciation in college women: An exploratory model. *Body Image*, 9, 227–235. http://dx.doi.org/10.1016/j.bodyim.2012.01.004

Jacobson, H. L., Hall, E. L., & Anderson, T. L. (2013). Theology and the body: Sanctification and bodily experiences. *Psychology of Religion and Spirituality*, 5, 41–50. http://dx.doi.org/10.1037/a0028042

Kroon Van Diest, A. M., & Tylka, T. L. (2010). The caregiver eating messages scale: Development and psychometric investigation. *Body Image*, 7, 317–326. http://dx.doi.org/10.1016/j.bodyim.2010.06.002

Lobera, I. J., & Ríos, P. B. (2011). Spanish version of the Body Appreciation Scale for adolescents. *Spanish Journal of Psychology*, 14, 411–420. http://dx.doi.org/10.5209/rev_SJOP.2011.v14.n1.37

Lyubomirsky, S., Sheldon, K. M., & Schkade, D. (2005). Pursuing happiness: The architecture of sustainable change. *Review of General Psychology*, 9, 111–131. http://dx.doi.org/10.1037/1089-2680.9.2.111

Mahoney, A., Carels, R. A., Pargament, K. I., Wachholtz, A., Leeper, L. E., Kaplar, M., & Frutchey, R. (2005). The sanctification of the body and behavioral health patterns of college students. *International Journal for the Psychology of Religion*, 15, 221–238. http://dx.doi.org/10.1207/s15327582ijpr1503_3

Maslow, A. H. (1943). A theory of human motivation. *Psychological Review, 50*, 370–396.

McHugh, T. L., Coppola, A. M., & Sabiston, C. M. (2014). "I'm thankful for being Native and my body is part of that": The body pride experiences of young Aboriginal women in Canada. *Body Image*, 11, 318–327. http://dx.doi.org/10.1016/j.bodyim.2014.05.004

Menzel, J. E., & Levine, M. P. (2011). Embodying experiences and the promotion of positive body image: The example of competitive athletics. In R. M. Calogero, S. Tantleff-Dunn & J. K. Thompson (Eds.), *Self-objectification in women: Causes, consequences, and counteractions* (pp. 163–186). Washington, DC: American Psychological Association.

Neff, K. D. (2003). Self-compassion: An alternative conceptualization of a healthy attitude toward oneself. *Self and Identity*, 2, 85–101. http://dx.doi.org/10.1080/15298860309032

Ng, S.-K., Barron, D., & Swami, V. (2015). Factor structure and psychometric properties of the Body Appreciation Scale among adults in Hong Kong. *Body Image*, 13, 1–8. http://dx.doi.org/10.1016/j.bodyim.2014.10.009

Nichter, M. (2001). *Fat talk: What girls and their parents say about dieting*. Cambridge, MA: Harvard University Press.

Parker, S., Nichter, M., Nichter, M., Vuckovic, N., Sims, C., & Ritenbaugh, C. (1995). Body image and weight concerns among African American and White adolescent females: Differences that make a difference. *Human Organization, 54*, 103–114.

Paxton, S. J. (1999). Peer relations, body image, and disordered eating in adolescent girls: Implications for prevention. In N. Piran, M. P. Levine & C. Steiner-Adair (Eds.), *Preventing eating disorders: A handbook of interventions and special challenges* (pp. 134–147). Philadelphia, PA: Brunner/Mazel.

Pearson, A. N., Heffner, M., & Follette, V. M. (2010). *Acceptance and commitment therapy for body image dissatisfaction*. Oakland, CA: New Harbinger Publications.

Piran, N. (2001). Re-inhabiting the body from the inside out: Girls transform their school environment. In D. L. Tolman & M. Brydon-Millers (Eds.), *From subjects to subjectives: A handbook of interpretive and participatory methods* (pp. 218–238). New York: New York University Press.

Piran, N. (2015). New possibilities in the prevention of eating disorders: The introduction of positive body image measures. *Body Image*, 14, 146–157. http://dx.doi.org/10.1016/j.bodyim.2015.03.008

Piran, N., Carter, W., Thompson, S., & Pajouhandeh, P. (2002). Powerful girls: A contradiction in terms? Young women speak about the experience of growing up in a girl's body. In S. Abbey (Ed.), *Ways of knowing in and through the body: Diverse perspectives on embodiment* (pp. 206–210). Welland, ON: Soleil Publishing.

Piran, N., Levine, M. P. & Steiner-Adair, C. (Eds.). (1999). *Preventing eating disorders: A handbook of interventions and special challenges*. Philadelphia, PA: Brunner/Mazel.

Piran, N., & Teall, T. (2012). The developmental theory of embodiment. In G. McVey, M. P. Levine, N. Piran & H. B. Ferguson (Eds.), *Preventing eating-related and weight-related disorders* (pp. 169–197). Ontario, Canada: Wilfrid Laurier University Press.

Pope, M., Corona, R., & Belgrave, F. Z. (2014). Nobody's perfect: A qualitative examination of African American maternal caregivers' and their adolescent girls' perceptions of body image. *Body Image*, 11, 307–317. http://dx.doi.org/10.1016/j.bodyim.2014.04.005

Rogers, C. R. (1961). *On becoming a person*. Boston, MA: Houghton Mifflin.

Salk, R. H., & Engeln-Maddox, R. (2011). "If you're fat, then I'm humongous!" Frequency, content, and impact of fat talk among college women. *Psychology of Women Quarterly*, 35, 18–28. http://dx.doi.org/10.1177/0361684310384107

Sandoz, E. K., Wilson, K. G., Merwin, R. M., & Kellum, K. K. (2013). Assessment of body image flexibility: The Body Image-Acceptance and Action Questionnaire. *Journal of Contextual and Behavioral Science*, 2, 39–48. http://dx.doi.org/10.1016/j.jcbs.2013.03.002

Satinsky, S., Reece, M., Dennis, B., Sanders, S., & Bardzell, S. (2012). An assessment of body appreciation and its relationship to sexual function in women. *Body Image*, 9, 137–144. http://dx.doi.org/10.1016/j.bodyim.2011.09.007

Scime, M., & Cook-Cottone, C. (2008). Primary prevention of eating disorders: A constructivist integration of mind and body strategies. *International Journal of Eating Disorders*, 41, 134–142. http://dx.doi.org/10.1002/eat.20480

Seligman, M. E. P., & Csikszentmihalyi, M. (2000). Positive psychology: An introduction. *American Psychologist*, 55, 5–14. http://dx.doi.org/10.1037/0003-066X.55.1.5

Smolak, L. (1999). Elementary school curricula for the primary prevention of eating problems. In N. Piran, M. P. Levine & C. Steiner-Adair (Eds.), *Preventing eating disorders: A handbook of interventions and special challenges* (pp. 85–104). Philadelphia, PA: Brunner/Mazel.

Smolak, L., & Cash, T. F. (2011). Future challenges for body image science, practice, and prevention. In T. F. Cash & L. Smolak (Eds.), *Body image: A handbook of science, practice, and prevention* (2nd ed., pp. 471–478). New York: Guilford Press.

Steiner-Adair, C., & Sjostrom, L. (2006). *Full of ourselves: A wellness program to advance girl power, health, and leadership*. New York, NY: Teachers College Press.

Stice, E., & Presnell, K. (2007). *The Body Project: Promoting body acceptance and preventing eating disorders: Facilitator's guide*. New York, NY: Oxford University Press.

Striegel-Moore, R. H., & Cachelin, F. M. (1999). Body image concerns and disordered eating in adolescent girls: Risk and protective factors. In R. H. Striegel-Moore & F. M. Cachelin (Eds.), *Beyond appearance: A new look at adolescent girls* (pp. 85–108). Washington, DC: American Psychological Association.

Swami, V., Airs, N., Chouhan, B., Leon, M. A. P., & Towell, T. (2009). Are there ethnic differences in positive body image among female British undergraduates? *European Psychologist*, 14, 288–296. http://dx.doi.org/10.1027/1016-9040.14.4.288

Swami, V., & Chamorro-Premuzic, T. (2008). Factor structure of the Body Appreciation Scale among Malaysian women. *Body Image*, 5, 409–413. http://dx.doi.org/10.1016/j.bodyim.2008.04.005

Swami, V., & Jaafar, J. L. (2012). Factor structure of the Body Appreciation Scale among Indonesian women and men: Further evidence of a two-factor solution in a non-Western population. *Body Image*, 9, 539–542. http://dx.doi.org/10.1016/j.bodyim.2012.06.002

Swami, V., Mada, R., & Tovée, M. J. (2012). Weight discrepancy and body appreciation of Zimbabwean women in Zimbabwe and Britain. *Body Image*, 9, 559–562. http://dx.doi.org/10.1016/j.bodyim.2012.05.006

Tiggemann, M. (2001). The impact of adolescent girls' life concerns and leisure activities on body dissatisfaction, disordered eating, and self-esteem. *Journal of Genetic Psychology: Research and Theory on Human Development*, 162, 133–142. http://dx.doi.org/10.1080/00221320109597955

Tiggemann, M. (2015). Considerations of positive body image across various social identities and special populations. *Body Image*, 14, 168–176. http://dx.doi.org/10.1016/j.bodyim.2015.03.002

Tiggemann, M., Coutts, E., & Clark, L. (2014). Belly dance as an embodying activity? A test of the embodiment model of positive body image. *Sex Roles*, 71, 197–207. http://dx.doi.org/10.1007/s11199-014-0408-2

Tiggemann, M., & McCourt, A. (2013). Body appreciation in adult women: Relationships with age and body satisfaction. *Body Image*, 10, 624–627. http://dx.doi.org/10.1016/j.bodyim.2013.07.003

Tiggemann, M., & Stevens, C. (1999). Weight concern across the life-span: Relationship to self-esteem and feminist identity. *International Journal of Eating Disorders*, 26, 103–106. http://dx.doi.org/10.1002/(SICI)1098-108X(199907)26:1<103::AID-EAT14>3.3.CO;2-S

Tylka, T. L. (2011). Positive psychology perspectives on body image. In T. F. Cash & L. Smolak (Eds.), *Body image: A handbook of science, practice, and prevention* (2nd ed., pp. 56–64). New York: Guilford Press.

Tylka, T. L. (2012). Positive psychology perspective on body image. In T. F. Cash (Ed.), *Encyclopedia of body image and human appearance* (Vol. 2) (pp. 657–663). San Diego, CA: Academic Press.

Tylka, T. L. (2013). Evidence for the Body Appreciation Scale's measurement equivalence/invariance between U.S. college women and men. *Body Image*, 10, 415–418. http://dx.doi.org/10.1016/j.bodyim.2013.02.006

Tylka, T. L. (2015). *Positive body image's relationships to physical health indices among college women and men*. Manuscript in preparation.

Tylka, T. L., Annunziato, R. A., Burgard, D., Daníelsdóttir, S., Shuman, E., Davis, C., & Calogero, R. M. (2014). The weight-inclusive vs. weight-normative approach to health: Evaluating the evidence for prioritizing well-being over weight loss. *Journal of Obesity*, 2014, 1–18. http://dx.doi.org/10.1155/2014/983495

Tylka, T. L., & Kroon Van Diest, A. M. (2013). The Intuitive Eating Scale-2: Item refinement and psychometric evaluation with college women and men. *Journal of Counseling Psychology*, 60, 137–153. http://dx.doi.org/10.1037/a0030893

Tylka, T. L., & Wood-Barcalow, N. L. (2015). The Body Appreciation Scale-2: Item refinement and psychometric evaluation. *Body Image*, 12, 53–67. http://dx.doi.org/10.1016/j.bodyim.2014.09.006

Wasylkiw, L., & Butler, N. A. (2014). Body talk among undergraduate women: Why conversations about exercise and weight loss differentially predict body appreciation. *Journal of Health Psychology*, 19, 1013–1024. http://dx.doi.org/10.1177/1359105313483155

Wasylkiw, L., MacKinnon, A. L., & MacLellan, A. M. (2012). Exploring the link between self-compassion and body image in university women. *Body Image*, 9, 236–245. http://dx.doi.org/10.1016/j.bodyim.2012.01.007

Webb, J. B., Butler-Ajibade, P., & Robinson, S. A. (2014). Considering an affect regulation framework for examining the association between body dissatisfaction and positive body image in Black older adolescent females: Does body mass index matter? *Body Image*, 11, 426–437. http://dx.doi.org/10.1016/j.bodyim.2014.07.002

Wilksch, S. M., & Wade, T. D. (2009). School-based eating disorder prevention. In S. J. Paxton & P. J. Hay (Eds.), *Treatment approaches for body dissatisfaction and eating disorders: Evidence and practice* (pp. 7–22). Melbourne, Australia: IP Communications.

Williams, E. F., Cash, T. F., & Santos, M. T. (2004, November). *Positive and negative body image: Precursors, correlates, and consequences*. Paper presented at the 38th Annual Meeting of the Association for Advancement of Behavior Therapy, New Orleans, LA.

Wood-Barcalow, N. L., Tylka, T. L., & Augustus-Horvath, C. L. (2010). "But I like my body": Positive body image characteristics and a holistic model for young-adult women. *Body Image*, 7, 106–116. http://dx.doi.org/10.1016/j.bodyim.2010.01.001