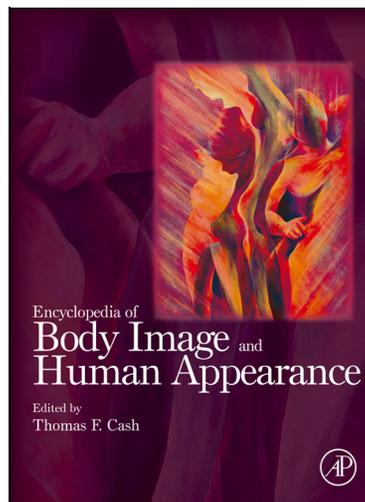


Provided for non-commercial research and educational use.  
Not for reproduction, distribution or commercial use.

This article was originally published in *Encyclopedia of Body Image and Human Appearance*, published by Elsevier, and the attached copy is provided by Elsevier for the author's benefit and for the benefit of the author's institution, for non-commercial research and educational use including without limitation use in instruction at your institution, sending it to specific colleagues who you know, and providing a copy to your institution's administrator.



All other uses, reproduction and distribution, including without limitation commercial reprints, selling or licensing copies or access, or posting on open internet sites, your personal or institution's website or repository, are prohibited. For exceptions, permission may be sought for such use through Elsevier's permissions site at:

<http://www.elsevier.com/locate/permissionusematerial>

Wiederman MW. Body Image and Sexual Functioning. In: Thomas F. Cash, editor. *Encyclopedia of Body Image and Human Appearance*, Vol 1. San Diego: Academic Press; 2012. pp. 148–152.

© 2012 Elsevier Inc. All rights reserved.

## Body Image and Sexual Functioning

MW Wiederman, Columbia College, Columbia, SC, USA

© 2012 Elsevier Inc. All rights reserved.

### Glossary

**erogenous zones** Those areas of the body considered important for sexual arousal or pleasure.

**risky sex** Generally refers to sexual activity or type of experience that increases the likelihood of contracting a sexually transmitted infection.

**spectatoring** Mentally separating oneself from immediate bodily experience due to self-consciousness over one's performance or appearance.

### Introduction

Possible links between body image and sexual functioning seem obvious. After all, it is through our bodies that we both experience sexual sensation and provide sexual stimulation to partners. It becomes more complex, however, when we consider that body image and sexual functioning are terms we use to represent constructed concepts. We cannot directly observe body image or sexual functioning; instead, these concepts are inferred from particular behaviors and physiological reactions. Before tackling possible links between body image and sexual functioning, we have to consider what these particular concepts mean.

First, when it comes to sexual functioning, one important distinction may lie between body image as a term for the global assessment of one's own physical attractiveness (or desirability as a sexual partner) and how one feels about one's own genitals or erogenous zones (those body parts that are typically sexualized and considered particularly important for sexual arousal). So, feeling unattractive generally may be relevant to sexual functioning, yet feelings about specific body parts such as breasts (for women) and genitals also may be relevant to sexual functioning in their own ways.

Just as the term body image might mean different things, so may the term sexual functioning. It might include how one's body responds physically to sexual stimulation, or the degree of sexual pleasure or satisfaction one experiences, or even the amount and types of sexual experience one has had. Conceivably, sexual functioning in the present may be influenced by the amount and types of sexual experiences one has had in the past. So, in understanding connections between body image and sexual functioning, it may be important to start with consideration of basic sexual experience.

Initial research on potential relationships between body image and sexuality was focused on global physical attractiveness as correlated with sexual experience, such as age at first sexual activity with a partner, total number of sexual partners, and current sexual relationship status. Early researchers generally found small correlations between people's physical attractiveness and sexual experience; attractive people tended to report greater sexual experience involving partners. This relationship made sense, because sexual activity with partners requires being attractive to potential partners. Those initial studies relied not only on self-reports of sexual experience, but also on self-reports of attractiveness. This may be a

problem, because other research had demonstrated only very weak relationships (when there were relationships at all) between self-rated attractiveness and how peers rated those same individuals. It was possible that having had relatively greater sexual experience with partners led to subsequent perceptions of oneself as relatively more attractive, not the other way around.

To investigate the relative importance of self-rated attractiveness, which might be considered global body image, compared to attractiveness as judged by others, Hurst and Wiederman conducted a study involving nearly 200 female college students. While the women completed self-report surveys, they were unknowingly rated on their physical attractiveness by a male and a female peer who were there to administer the survey. This male and female pair of research assistants rated the attractiveness of each research participant independently (without consulting each other). Their ratings were moderately correlated so they were combined into an overall peer rating for each research participant. The women were also weighed and their height measured before leaving so that we knew their actual body size.

In general, the results revealed that the women's body size and peer-rated attractiveness were much better predictors of sexual experience with partners than was the women's self-rated attractiveness. We concluded that, when it came to basic sexual experiences with a partner, attractiveness to potential partners seemed to be more important than how young adult women evaluated and felt about their own bodies. However, it was possible that less attractive women held different sexual values or goals, thereby resulting in less sexual experience. Fortunately, we included measures of sexual attitudes, which turned out to be unrelated to the size or rated attractiveness of the women. At least in this particular sample of college women, actual (or peer-related) physical attractiveness was the most important variable (of those we measured) as a correlate of sexual experience with partners.

To date, there has not been analogous research on males in which their body images, body sizes, and observer-rated attractiveness have been considered simultaneously. Such research may be more complicated for male respondents than for females. Whereas females who are dissatisfied with their overall body appearance almost invariably wish to be thinner, forms of male body image dissatisfaction appear to be more variable. Some men wish to be thinner (as high levels of fat may be considered unattractive for both women and men), whereas

others wish to be larger in the sense of increased muscularity or a larger body frame (as ideals of masculinity include muscularity and height).

In summary, several studies have revealed small relationships between physical attractiveness and the extent of sexual experience. There are some indications that perceptions of attractiveness by peers may be more important than self-perceptions of attractiveness, but the research on this topic has been limited primarily to college students, and particularly females, in the United States. Perhaps links between attractiveness and sexual experience with partners are most likely among young adults, who are undergoing the process of mate selection. Of course, in cultures where people infrequently engage in sexual activity with partners prior to marriage, attractiveness may be a less predictive variable in explaining variation in sexual experience across individuals. Similarly, research is lacking with regard to relationships between physical attractiveness and sexual experience among various subgroups that differ based on ethnicity, religion, and sexual orientation.

Thus far, we have considered research on potential links among body image, attractiveness, and quantity of sexual experience. Once people are involved in ongoing sexual relationships, we're left with the question: What about body image and sexual functioning within a particular sexual experience?

### **Body Image and Sexual Functioning with a Partner**

Once involved with a sexual partner, a person's sexual functioning includes the ability to get physically aroused, experience orgasm, and find the experience pleasurable and satisfying. How might body image relate to these experiences? First, body image concerns may lead an individual to avoid particular sexual activities or settings, thereby resulting in less experience and less frequent positive sexual functioning. Second, problems with body image may cast a negative shadow over sexual experiences, such that the individual comes to associate sexual activity with embarrassment, shame, or other negative emotions. Third, body image concerns may be distracting during sexual interactions, thereby interfering with enjoyment of the experience. Sex researchers and therapists refer to the process of distraction as 'spectatoring'.

Spectatoring was first considered as a problem that might inhibit a male's ability to obtain an erection. For a man who had experienced difficulty obtaining or maintaining erections in the past, a sexual interaction with a partner may trigger current concerns about his erection. Such concerns might prompt the man to monitor the quality of his erection and worry about it, thereby distracting his attention from his partner and his own experience of pleasure. Of course, this distraction and anxiety could be expected to further impair his erection, and a negative vicious cycle is set in motion.

Because the perceived 'success' of a male-female sexual interaction usually depends on an erect penis, spectatoring for men may revolve around monitoring erection quality. What about women? Gender roles commonly cast men as the sexual initiators and performers, and women as the sexually attractive stimulus stirring men's arousal. For women, then, being a desirable sexual partner may have less to do with their performance or their degree of physical arousal, and more to do with

being an attractive ('sexy') visual stimulus for their partners' sexual arousal and satisfaction. So, spectatoring for a woman may often involve monitoring how her body might appear to her sexual partner, and her perceptions of how her partner may be responding to her appearance. Indeed, Meana and Nunnink examined the self-reported frequency of performance-based spectatoring versus appearance-based spectatoring among a large sample of college students. Compared to men, women reported higher levels of both types of distraction during sexual activity. The men as a whole indicated greater likelihood of performance-based spectatoring than appearance-based spectatoring.

When it comes to assessing the extent to which an individual feels self-conscious about his or her physical appearance during physical intimacy with a partner, at least three different self-report measures have been published. Higher scores on each indicate what might be termed 'body image self-consciousness', or focusing one's attention on how one's body appears to one's partner. Of course, such spectatoring is expected to reduce focus on the person's own sexual arousal and pleasure.

Since 2000, several published studies have focused on body image concerns as related to sexual functioning with partners. Despite different samples and different measures, the results have been consistent: women and men who report greater body image self-consciousness during physical intimacy with a partner also report more problems with sexual functioning. The forms of self-reported sexual problems investigated in these studies have included decreased arousal, less frequent orgasms, greater aversion to sex, less desire for sex, and increased anxiety during sex.

One way to examine possible links between body image and sexual functioning is to study changes in sexual functioning after relatively sudden changes in body image, such as those resulting from cosmetic surgery. Stofman and colleagues took such an approach by surveying women, each of whom had undergone cosmetic surgery to improve the appearance of their breasts, midsection (torso and upper legs), or face. The three samples were relatively small (19-26 women in each group), but even though virtually all respondents indicated an improvement in their overall body image as a result of their surgery, there were some substantial differences among the three groups when it came to sexual functioning. Compared to the women who underwent facial surgery, substantially more women who had undergone procedures to improve the appearance of their breasts or midsections reported increases in sexual satisfaction, frequency of sexual activity and orgasms, as well as willingness to engage in new sexual practices with a partner. Unfortunately, the data were based on self-reported perceptions of changes from before surgery to the present time, so it is unknown how well they corresponded to actual changes in sexual functioning from pre- to postsurgery. One possibility is that the women who underwent surgery to improve the appearance of their bodies believed that their sex lives must have improved as a result, and perhaps these beliefs affected their memories of sexual activity prior to the surgery.

The research on links between body image and sexual functioning with a partner all have been based on self-report surveys. These studies typically asked respondents to report on past sexual episodes in general. While valuable, such research leaves open the possibility that respondents with

body image concerns are simply more prone to remember or describe past sexual experiences as problematic. Fortunately, in 2009, Seal, Bradford, and Meston published the results of their laboratory study of 85 college women who completed measures of body image concerns and viewed erotic videos while their genital responses were monitored by the researchers. Women with the greatest body image concerns, particularly concerns related to their own sexual attractiveness, demonstrated the least self-reported and physiological sexual arousal.

In summary, based on several lines of research, there have been some consistent findings regarding body image self-consciousness and sexual functioning. First, compared to men, this form of spectating appears to be more common among women. Perhaps this explains why virtually all of the relevant research has focused on women. Second, among women, greater body image self-consciousness during sexual activity is related to a greater likelihood of sexual problems and sexual dissatisfaction. Finally, this specific body image self-consciousness during sexual activity appears to mediate (at least partially explain) relationships between more general body image and sexual functioning. In other words, because global body image is correlated with body image self-consciousness during sexual activity, and body image self-consciousness during sexual activity is correlated with sexual functioning, measures of global body image tend to be correlated with sexual functioning. However, when researchers have statistically accounted for body image self-consciousness during sexual activity, correlations between global body image and sexual functioning have decreased substantially or disappeared altogether. So, body image concerns specific to sexual interactions with partners are most likely to be linked to sexual problems for those women with such body image concerns.

### **Body Image Based on Breasts and Genitals**

Compared to general body image and attractiveness, less research has focused on body image related specifically to genitals and to women's breasts. Still, because of the obvious relevance of genitals and women's breasts for sexual activities with partners, it is important to consider potential links between these specific aspects of body image and sexual functioning.

To date, only a few studies have queried respondents about perceptions of their own genitals as to satisfaction and sexual attractiveness. One large Internet survey of more than 52 000 male and female respondents focused on such genital perceptions, as did one survey of more than 1000 men who have sex with men. In both the larger, primarily heterosexual sample and the smaller, primarily homosexual sample, a little more than one-half of the men reported that their penises were of average size. However, most of the remaining men in the heterosexual sample perceived their penises as below average in size, whereas most of the remaining men in the homosexual sample perceived their penises to be above average in size. In both samples, men who perceived their penises as relatively larger were most likely to be satisfied with their penis size. Interestingly, in the sample that included female respondents, 85% of the women indicated being satisfied with the size of their male partners' penises.

Whereas it appears that males who are dissatisfied with the size of their penises almost universally desire a larger one, there is less consistency among women who are dissatisfied with their breasts. In the larger survey noted above, only 30% of the women were satisfied with their own breasts, whereas 56% of men were satisfied with their female partners' breasts. Younger and thinner women were most likely to desire larger breasts than they had, whereas older and heavier women were most likely to indicate dissatisfaction with the droopiness or sagging of their breasts. Not surprisingly, women with greater breast dissatisfaction were least likely to undress in front of their romantic partners and most likely to try to conceal their breasts during sexual activity with partners.

To date, two studies on genital body image have involved college student respondents, and both revealed that men indicated more positive self-evaluations of their genitals than did women (although genital body image was generally positive for both men and women). In both studies, respondents with more extensive sexual experience tended to indicate more positive genital body image. In one study, the percentages of respondents agreeing or disagreeing with individual survey items were revealing. For women, the only aspects of genital body image with which at least 20% of the college student respondents indicated dissatisfaction were 'amount of pubic hair' and 'odor of genitals', whereas for men only 'length of nonerect penis' and 'appearance of nonerect penis' demonstrated a similar frequency of dissatisfaction.

A related aspect of genital body image for women involves perceptions and feelings regarding menstruation. In the few studies that have addressed this aspect of body image, college women varied in their reactions to their own menstruation, from seeing it as a natural process that should not affect how they felt about themselves and their sexuality to seeing it as something over which to feel shame, and therefore something to hide, including from sexual partners. Perhaps as expected, menstrual shame was related to overall negative body image, as well as avoidance of physical intimacy during menstrual periods.

In summary, most research on the relationship between body image and sexual functioning has conceptualized body image as global attractiveness, and we have seen that there have been consistent relationships between that form of body image and sexual functioning, at least for women studied in the United States. Much less research has been conducted on genital body image, especially as it may relate to sexual experience and sexual functioning. One important question is whether body image is related to relatively risky sexual behavior or experiences.

### **Body Image and Sexual Risk Taking**

Like any construct, we need to first consider what researchers mean by 'sexual risk taking'. The term could conjure all kinds of images, from having sex with complete strangers to having sex while swinging from chandeliers. Typically, however, researchers have used the terms 'sexual risk taking' or 'risky sex' to refer to sexual practices that put the individual at increased risk for unwanted health outcomes, such as sexually transmitted infections (STIs) and unwanted pregnancy. Thus far, there has been only a small set of studies focused on possible relationships

between body image and sexual risk taking. Interestingly, this research has been focused on two distinct groups: teens/young adults, particularly females, and men who have sex with men.

In those few studies focused on teens and young adults, 'sexual risk taking' has been measured primarily as condom use, either during the most recent sexual intercourse experience or over the recent past (e.g., past 30 days). Of course, there are potential problems with defining risky sex in this manner. For example, perhaps the most recent episode of sexual activity was not typical, and whether a condom was or was not used does not match what usually occurs for that individual. Also, many American youth use condoms primarily to prevent pregnancy, and may not be as concerned about STIs. So, if some other method of contraception is used (e.g., contraceptive pills), then young people who are having sex within an ongoing relationship may not use condoms. Foregoing condoms just because another form of contraception is being used may not be wise, but should it be considered 'sexual risk taking' when the youth involved do not consider it risky? In some studies, however, 'risky sex' has been measured as a combination of the number of different sexual partners, frequency of condom use, and how often drugs or alcohol is consumed prior to sexual activity.

Although there have been only a few studies on body image and risky sex among young women, the conclusions based on the results have been consistent: young women with greater body dissatisfaction tend to report having engaged in relatively riskier sexual practices. The explanation has been that young women who feel unattractive also feel less able to assert themselves with male partners. This explanation assumes that young males are more prone to risky sexual behavior than are young females, and that if the females are not able to insist on more responsible sexual activities, the couple will end up engaging in relatively riskier behavior. The results from at least one study seem to support this assumption. Gillen, Lefkowitz, and Shearer surveyed a large sample of college students in the United States, aged 17–19 years. For the males, self-rated attractiveness was associated with a history of greater sexual risk taking, whereas the females demonstrated the opposite relationship. One explanation is that the more attractive person in a sexual couple has more power to enact that type of sexual interaction he or she desires, and males and females tend to differ in what they prefer.

When considering male–female differences in the relationship between body image and sexual risk taking, gender roles may be an important factor. To the extent that male gender roles include riskier sexual activity and female gender roles include sexual restraint and responsibility, perhaps those individuals who feel most confident about their own attractiveness extend that confidence to acting on their gender roles. Interestingly, Gillen, Lefkowitz, and Shearer also measured the extent to which their respondents believed in the traditional double standard with regard to sex; that is, the belief that males are more sexual than females, that males should be more sexually experienced than females, and so forth. They found that respondents who were the most invested in their own appearance tended to be most likely to believe in the traditional double standard. Unfortunately, these researchers did not examine the relationship between belief in the double standard and engaging in relatively risky sexual behavior.

Additional support for the assumption that young women who feel unattractive also feel less able to assert their desires

with male partners comes from a study based on a large sample of African American teen females in the United States who were surveyed during visits to health clinics. Similar to other such studies, teens who reported the greatest body dissatisfaction also reported the least consistent use of condoms. However, in this study the teen girls were also asked to rate their degree of agreement with several statements pertaining to the use of condoms with partners. Those young women who indicated greater body dissatisfaction were also more likely to see themselves as having limited options for romantic or sexual partners, more likely to fear abandonment from a sexual partner over negotiating condom use, and more likely to believe that they had little control in sexual episodes with partners. Similar research with slightly older young women revealed that those who indicated greater body image self-consciousness also reported feeling less able to communicate assertively with sexual partners, or to be an active agent within sexual encounters.

The other group that has been studied with regard to possible relationships between body image and sexual risk taking is men who have sex with men. Because labels such as 'heterosexual' or 'gay' may not correspond precisely to sexual behavior, and it's the behavior that is potentially risky, researchers often focus on behavior (as in men who have sex with men) as opposed to comparison of groups based on self-identity. In the few studies that have been conducted with these men, sexual risk taking has been conceptualized as participating in unprotected anal intercourse (no condoms, while acting as either inserter or receiver) and body image has been cast as overall body size. So, the focus of research has been limited, yet the findings have been consistent. Compared to underweight and average-weight men, overweight and obese men reported having had fewer experiences of anal sex, yet a higher proportion of such episodes that were unprotected.

Regardless of whether it is women or men who are having sex with men, those who are considered least attractive tend to be most prone to engaging in relatively risky sexual behavior. One explanation is that, when a person feels like the less attractive partner in a couple, he or she has less leverage or power within the couple, and therefore is vulnerable to allowing the more desirable partner to instigate risky sexual behavior. Another explanation is that less attractive individuals have fewer sexual experiences, and thus less practice at negotiating safer sexual behavior with a partner. A related factor might be the degree of excitement that occurs when one is faced with pending sexual activity with a partner one perceives to be more desirable. Such excitement or arousal may facilitate more impulsive decision making within the sexual situation. Additional research is needed to help clarify these possibilities. Similarly, there are numerous issues that remain unexamined when considering possible connections between body image and sexual functioning.

### Questions in Need of Answers

Compared to earlier times, in the twenty-first century there has been considerably more research on body image as related to sexual functioning. Still, many questions remain unanswered. For example, the bulk of research has been based on US college students, most of whom were female and Caucasian. The extent to which apparent relationships between body image and sexual functioning also apply to non-college student women and

men, of various ages, sexual orientations, ethnicities, and nationalities remains uncertain. Certainly, such individuals are liable to represent greater diversity with regard to current and past relationship and sexual experiences, and the possibility that such experiences affect the relationship between body image and sexual functioning seems likely. Similarly, individuals who vary in nationality or ethnicity are likely to be exposed to differing cultural messages regarding links among appearance, body image, and sexuality, and they may have internalized those messages to greater or lesser degrees.

In addition to being focused on a narrow slice of the world's population, the existing research has been relatively static in that it has tended to focus on snapshots of body image and sexual functioning at one point in time. Less is known regarding how changes in body image or actual body dimensions or abilities are related to changes in sexual functioning. For example, what about potential effects of exercise and/or weight loss? What about potential differences between individuals who have always had body image concerns and those whose concerns stem from relatively recent bodily changes (for better or for worse)? Similarly, links between body image and sexual functioning among individuals with particular forms of physical disability remain underinvestigated. In this article, body image and sexual functioning have been treated as distinct concepts that may have important connections to each other. However, what about individuals for whom a physical disability adversely affects their sexual functioning and their perceived desirability as a sexual partner? For such individuals, body image and sexual functioning may be causally connected through their particular form of physical disability.

From a developmental perspective, how do various experiences affect the relationship between body image and sexual functioning? The number of such potential developmental experiences is large, but obvious ones include teasing by peers or family, sexual abuse, and pregnancy, during both adolescence and adulthood. Even the peers or role models one compares one's own body to may be an important influence on the relationship between body image and sexual functioning. The potential interactions among variables, developmental and otherwise, may be complex and large in number, but ultimate understanding of the connection between body image and sexual functioning will require such difficult study.

One potentially important arena that has received very little research focus is the context of interactions between romantic and sexual partners. For example, how does positive or negative feedback about one's body and attractiveness relate to sexual functioning and negotiation of safer sex, both with that partner and with subsequent partners? Does it matter whether such feedback is verbal or nonverbal, or provided during sexual activity or outside of it? Some research has been conducted on women's perceptions of how their husbands view them as those perceptions relate to sexual and marital satisfaction. However, because it remains unknown how accurate the women's perceptions are, it may be that women with negative body images assume that their husbands are dissatisfied with their appearance. The actual nature of feedback between romantic or sexual partners (including spouses), how such feedback is processed by the receiver (whether female or male), and the subsequent effects on the sexual aspects of the relationship remain unknown. Certainly, studying communication within intimate relationships is a complex undertaking, but perhaps it

is within such communication that the greatest links between body image and sexual functioning lie.

Before leaving the topic of what we still do not know, it is important to consider the topic of intervention. What can be done to help individuals improve their body image in ways that positively affect their sexual functioning and satisfaction, including the ability to negotiate safer and more comfortable sexual activities? Given all the unanswered questions in the previous paragraphs, it may seem too early to raise such questions. However, it is likely that individuals with problematic body image–sexual functioning connections are less concerned with understanding the topic than knowing what can be done to improve their relationships and experience of sexual activity. Ultimately, the value in understanding the potential links between body image and sexual functioning lies in using that knowledge to improve people's lives. Do we need a greater call to action for continuing to consider this important topic?

*See also:* Body Image among Gay, Lesbian, and Bisexual Individuals; Body Image and Gender Roles; Breast Size; Exercise: Effects on Body Image; Genitalia; Internalization of Thin-Ideal and Muscular-Ideal; Muscularity and Body Image; Objectification Theory, Self-Objectification, and Body Image; Physical Attractiveness: Dating, Mating, and Social Interaction; Physical Disability and Body Image in Adults; Pregnancy: Physical and Body Image Changes; Psychological Trauma and Body Image; Race, Ethnicity, and Human Appearance; Social Comparison Theory and Body Image; Sociocultural Perspectives on Body Image.

### Further Reading

- Cash, T. F., Maikkula, C. L., and Yamamiya, Y. (2004). "Baring the body in the bedroom": Body image, sexual self-schemas, and sexual functioning among college women and men. *Electronic Journal of Human Sexuality* **7**.
- Filiault, S. M. (2007). Measuring up in the bedroom: Muscle, thinness, and men's sexual lives. *International Journal of Men's Health* **6**, 127–142.
- Frederick, D. A., Peplau, A., and Lever, J. (2008). The Barbie mystique: Satisfaction with breast size and shape across the lifespan. *International Journal of Sexual Health* **20**, 200–211.
- Lever, J., Frederick, D. A., and Peplau, L. A. (2006). Does size matter? Men's and women's views on penis size across the lifespan. *Psychology of Men & Masculinity* **7**, 129–143.
- Meana, M., and Nunnink, S. E. (2006). Gender differences in the content of cognitive distractions during sex. *Journal of Sex Research* **43**, 59–67.
- Morrison, T. G., Bearden, A., Ellis, S. R., and Harriman, R. (2005). Correlates of genital perceptions among Canadian post-secondary students. *Electronic Journal of Human Sexuality* **8**.
- Seal, B. N., Bradford, A., and Meston, C. M. (2009). The association between body esteem and sexual desire among college women. *Archives of Sexual Behavior* **38**, 866–872.
- Stuart, R. B., and Jacobson, B. (1994). *Weight, Sex, and Marriage: A Delicate Balance*. New York: Guilford Press.
- Wiederman, M. W. (2000). Women's body image self-consciousness during physical intimacy with a partner. *Journal of Sex Research* **37**, 60–68.
- Wiederman, M. W. (2011). Body image and sexual functioning. In: Cash, T. F., and Smolak, L. (eds.) *Body Image: A Handbook of Science, Practice, and Prevention*, pp. 271–278. New York: Guilford Press.
- Wiederman, M. W., and Hurst, S. R. (1998). Body size, physical attractiveness, and body image among young adult women: Relationships to sexual experience and sexual esteem. *Journal of Sex Research* **35**, 272–281.
- Yamamiya, Y., Cash, T. F., and Thompson, J. K. (2006). Sexual experiences among college women: The differential effects of general versus contextual body images on sexuality. *Sex Roles* **55**, 421–427.