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# The Pursuit of Success: Can Status Aspirations Negatively Affect Body Satisfaction?


April R. SMITH  
*Florida State University*

Norman P. LI  
*Singapore Management University, [normanli@smu.edu.sg](mailto:normanli@smu.edu.sg)*

Thomas E. JOINER  
*Florida State University*

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## **THE PURSUIT OF SUCCESS: CAN STATUS ASPIRATIONS NEGATIVELY AFFECT BODY SATISFACTION?**

APRIL R. SMITH  
*Florida State University*

NORMAN LI  
*Singapore Management University*

THOMAS E. JOINER  
*Florida State University*

The aim of the current study was to investigate whether weight and success interact to produce body dissatisfaction and disordered eating behaviors. To accomplish this aim, participants viewed pictures and read descriptions of women who varied in weight and career success. Participants who were high on status aspiration reported greater body dissatisfaction and ineffectiveness after being exposed to thin, successful women than did the participants who were low on status aspiration. Status aspiring participants, however, did not report greater drive for thinness, maturity fears, or bulimic symptoms. It is hoped that these findings will shed light on ways career women can pursue success without jeopardizing their health.

Eating disorders are commonly assumed to primarily afflict adolescent girls. However, research has shown that eating pathology is

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Address correspondence to April Smith, M.S., Department of Psychology, Florida State University, 1107 W. Call Street, Tallahassee, FL 32306-1270. E-mail: [asmith@psy.fsu.edu](mailto:asmith@psy.fsu.edu).

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still a significant problem for college-aged women (e.g., Drownowski, Yee, & Krahn, 1988; Striegel-Moore, Silberstein, Grunberg, & Rodin, 1990). Furthermore, unlike most psychological disorders (e.g., schizophrenia, anxiety disorders, and mood disorders), an older age of onset (generally defined as after age 18) indicates a more pernicious and potentially fatal course for eating disorders (e.g., Le Grange & Lock, 2005; Ratnasuriya, Eisler, Szmakler, & Russell, 1991). Although several theories have been proposed in an attempt to explain why adolescence is a particularly high-risk time frame for the development of eating disorders, the etiological and maintenance factors for eating disorders in adult women have been less extensively studied. The aim of the current study is to explore whether intrasexual competition for career success may contribute to body dissatisfaction and worse eating attitudes among status aspiring college-aged women.

## INTRASEXUAL RESOURCE COMPETITION

The deliberate restriction of eating—to the point of harming one's health—seems to be anything but adaptive. Yet the prevalence of eating disorders suggests that they are more than random pathologies. Searching for ultimate explanations, Abed (1998) posited a "sexual competition hypothesis" whereby eating disorders may result from female intrasexual competition for both mates and status. Specifically, the theory holds that since the ancestral past, women have tended to obtain necessary resources for offspring by securing long-term mates who have access to such resources and are willing to share them. Because thinness was a reliable indicator of youth and fertility, and thus, of female reproductive value (e.g., Brown & Konner, 1987; Singh, 1994a, 1994b), women may be motivated to compete with one another on thinness to attract high quality, resourceful mates. However, in modern, industrialized societies, this competitive mechanism may no longer be producing adaptive behaviors. Indeed, despite the fact that there is an optimal level of thinness that men prefer, women prefer to be significantly thinner than what men find optimally attractive (e.g., Fallon & Rozin, 1985; Rozin & Fallon, 1988). Moreover, the desire for thinness often leads to serious declines in health and reproductive capacity (APA, 2004).

Insights into why these mechanisms appear to be miscalibrated—and thus, why eating disorders are so prevalent—can be found by a consideration of numerous key contextual conditions that have arisen in modern societies and are thus evolutionarily novel. First, the advent and widespread use of birth control has separated sex from reproductive consequences, thereby allowing women to have fewer children and to have children later in life (Abed, 1998). As a consequence, it is no longer the case that the most fertile nullipara are primarily competing among themselves. Instead, there is now a much wider age range of women who appear fertile and thus can compete for high quality mates. Second, the tools with which women can directly alter their physical features, including body mass, have been significantly upgraded. A \$160-billion-a-year global cosmetics industry and surgery market (Pots of Promise, 2003) attests to the resources being channeled to such activities. Third, women have had to begin competing for mates increasingly through their own individual efforts (Abed, 1998). Throughout history, women had the help of their kin group in increasing their mate value through practices such as dowries (Dickemann, 1979) and female claustration (Weisfeld, 1990). However, as kinship ties have increasingly broken down in modern society, women have had to take the task of increasing their mate value largely into their own hands (Abed, 1998). Fourth, media (e.g., television, magazines, Internet) creates the illusion that viewers are in direct competition with the world's most physically attractive (and most surgically enhanced) individuals. Indeed, many people cannot psychologically differentiate between images on the screen and actual individuals in their own social circles (Kanazawa, 2004) and respond to same-sex images as if they were actual competitors (Gutierrez, Kenrick, & Partch, 1999).

Together, these evolutionarily novel factors have greatly increased the level of real, as well as perceived, intrasexual competition. That is, mechanisms that underlie intrasexual competition among women may be overstimulated by novel inputs in modern environments. Such bombardment may induce women to compete intensely on thinness to the point where they may not only become undesirable to potential mates but they may also be damaging their own health. While these factors have increased the intensity of competition on thinness, yet another important factor has affected the scope of female intrasexual competition in modern societies: the entering of

women in large numbers into the workforce. This major movement has created an entirely new context through which women can more directly compete for resources. In fact, it is estimated that there will soon be more women than men in the workforce (Cauchon, 2009). This is especially relevant in the current tough economic times as women are more likely than men to get jobs in the limited sectors of the economy that are growing, such as health care (Cauchon, 2009).

If the pursuit of thinness and career achievement are both competitive processes that ultimately allow women to secure important resources, then the two processes should be closely related. Specifically, women who are prone to engaging in one process should be more likely to engage in the other. Indeed, research suggests that to women, success is associated with thinness, especially among status aspiring females. For example, Tiggemann (2001) found that high school girls who considered intelligence and professional success to be important preferred thinner ideal body figures than girls who did not assign as much import to achievement. The status aspiring girls associated intelligence and professional success with a more slender figure. In another study, female participants rated thin, attractive targets as more successful in life than larger, but still attractive, targets (Chin, 2002). Additionally, Jarry, Polivy, Herman, Arrowood, and Pliner (2006) had participants read several vignettes that depicted a thin or heavy person as either professionally successful or unsuccessful. Both dieting and nondieting participants associated professional success with slenderness and professional failure with being overweight.

Thus, various lines of research seem to suggest that thinness and career success are interrelated, and these findings are consistent with the possibility that both thinness and career success may be avenues through which women compete for mates and resources. As such, an intrasexual competition perspective on eating disorders suggests that a wider class of contextual stimuli may be able to trigger body dissatisfaction and a desire for thinness than previously considered. Specifically, female body dissatisfaction and desires to compete on thinness should be triggered not only by encountering thin females, but also by encountering successful, career-oriented women.

In fact, studies have shown that people make self-assessments based not only on individuals with whom they have actual, direct

contact, but also on images they are exposed to via media. Such research has demonstrated that after exposure to thin targets, participants endorse a host of body-image and eating related problems. For example, Halliwell and Dittmar (2004) found that after viewing pictures of thin models, women who internalized a thin ideal reported much greater body-focused anxiety than women who viewed pictures of average-sized models or no models at all. In another study, women high on drive for thinness (defined as excessive concerns with dieting and weight preoccupation) reported higher negative affect after viewing pictures of thin models that persisted as long as two hours after the manipulation (Hausenblas, Janelle, & Gardner, 2004). Furthermore, exposure to selected thin body parts, like a stomach or thighs, has been found to increase female participants' negative mood and body dissatisfaction (Tiggemann & McGill, 2004).

## THE CURRENT STUDY

Although previous research has examined the effects of exposure to thin models and actresses on participants' self-esteem, body satisfaction, and/or eating attitudes (e.g., Bissell & Zhou, 2004; Harrison, 1997; Stice, Schupak-Neuberg, Shaw, & Stein, 1994; Tiggemann & Pickering, 1996), to our knowledge no research has investigated the effect of exposure to successful career women on participants' body satisfaction and worse eating attitudes. Therefore, guided by an intrasexual resource competition perspective, we investigated the possibility that exposure to women who vary not only in terms of body weight, but also career success, may lead to greater body shape dissatisfaction and eating attitudes. Because status aspiring women may be especially attuned to cues of intrasexual competition, we expected such exposure to most strongly impact the body shape dissatisfaction and eating attitudes among women with high status aspiration. Specifically, we hypothesized that there would be a three-way interaction between status aspiration, target weight, and target success such that participants who are highly status aspiring would report more disordered eating attitudes and greater state body dissatisfaction than participants who are low on status aspiration after being exposed to targets who are thin and successful.

## METHOD

### MATERIALS AND PROCEDURE

#### Pre-Manipulation Measure

*The Achievement Motivation Scale* (AMS; Cassidy & Lynn, 1989). The AMS consists of seven subscales: Work Ethic, Pursuit of Excellence, Status Aspiration, Competitiveness, Acquisitiveness for Money, Mastery, and Dominance. The Status Aspiration subscale was administered to measure individual differences on this construct. Participants were asked to report the degree to which they think or behave in a specific manner using a five-point Likert scale (1 = never, 5 = always). Sample items from the Status Aspiration scale include, "I would like an important job where people look up to me," "I like to be admired for my achievements." The reliability of this subscale in the current sample was acceptable,  $\alpha = .77$ .

#### Post-Manipulation Measures

*Body Image State Scale* (BISS; Cash, Fleming, Alindogan, Steadman, & Whitehead, 2002). The BISS was given in order to measure participants' state body satisfaction. The BISS consists of six items that were written to assess participants' momentary feelings about their physical appearance. Participants were asked to respond to these items using a nine-point Likert scale (1 = Extremely Dissatisfied, 9 = Extremely Satisfied); thus lower scores indicate more state body dissatisfaction. The BISS has good internal consistency, as Cronbach's alpha for this scale in the current sample was .84.

*Eating Disorders Inventory* (EDI; Garner, Olmsted, & Polivy, 1983). The EDI is a self-report measure of eating-related attitudes and behaviors. The EDI is the most frequently used standardized self-report instrument for assessing the cognitive, behavioral, and affective symptoms of eating disorders. It consists of the following eight subscales: Body Dissatisfaction, Drive for Thinness, Bulimia, Perfectionism, Interpersonal Distrust, Maturity Fears, Interoceptive Awareness, and Ineffectiveness. We believed our manipulation would have the greatest effect on the Drive for Thinness, Bulimia, Maturity Fears, and Ineffectiveness subscales because these subscales contain items pertaining to state-like thoughts and feelings, and therefore are likely to be more malleable. Examples of such items include: "I think about dieting," "I feel ineffective as a person," and

"I feel that I can achieve my standards." Thus, only these four subscales were used in our analyses. The participants were asked to rate each statement using the following scale: never, rarely, sometimes, frequently, usually, always. These ratings were scored such that never received a score of 1 and always received a score of 6; this ensured that a higher score was indicative of more problematic eating attitudes and behaviors. The alpha coefficients for the subscales of interest in the current sample were as follows: Drive for Thinness (.91), Bulimia (.85), Maturity Fears (.75), Ineffectiveness (.81).

### Participants and Procedures

Seventy-seven undergraduate women who enrolled in an introductory psychology course at a large, southeastern state university participated in the study for course credit. All participants in the current study signed a consent form agreeing to participate. Participants were informed that they would be viewing profiles of 10 women, and completing questionnaires about their personal views, feelings, and attitudes on the computer, and they were assured that their responses would be kept confidential. After completing the experiment, participants were debriefed and any questions or concerns they had were addressed by the experimenters. All procedures were approved by the university's Institutional Review Board.

The racial/ethnic composition of this sample was generally representative of the university student body and was as follows: 64.9% Caucasian ( $n = 50$ ), 18.2% African American ( $n = 14$ ), 11.7% Hispanic ( $n = 9$ ), and 3.9% Asian American ( $n = 3$ ). In addition, one participant did not report her ethnicity. The participants' ages ranged from 17 to 28 ( $M = 18.52$ ,  $SD = 1.47$ ).

Participants were given a cover story, which involved telling them that they would be participating in two short, but unrelated experiments on the computer. They were told that the first experiment pertained to person perception. They were informed that for this experiment they would be shown 10 pictures and profiles of women from various American universities, which they would be asked to rate on several criteria. They were told that the second experiment pertained to eating attitudes and would consist of completing questionnaires on the computer.

After sitting down at the computer, participants first completed the pre-manipulation questionnaire. Participants were then ran-



domly assigned to one of four conditions: thin, successful targets; thin, unsuccessful targets; heavy, successful targets; heavy, unsuccessful targets. Next, 10 female targets corresponding to the experimental condition to which the participant was assigned were displayed sequentially. After the participant viewed the target photo and read the target's profile, the participant was prompted to "Please rate this person's weight status." Underneath this prompt was a 9-point scale, where a score of 1 corresponded to very thin and a score of 9 corresponded to very overweight. Next, the participant was prompted to "Please rate this person on career success" on the nine-point scale provided. Finally, the participant was asked to "Please rate this person on physical attractiveness." After the participant entered a value for physical attractiveness, the next stimulus appeared.

Target weight status was conveyed through full body, digital photos of 10 thin and 10 heavy females. The photos were pre-rated by 63 undergraduates, who were not included in the current sample, on a 9-point scale (1 = very thin, 9 = very overweight) as follows: thin photos ( $M = 2.14$ ,  $SD = 0.27$ ), heavy profiles ( $M = 7.00$ ,  $SD = 0.26$ ). The means were significantly different ( $t = -94.03$ ,  $p < .001$ ). As expected, in the current sample of 77 participants, target photos were also rated as significantly thinner in the thin condition ( $M = 3.02$ ,  $SD = .71$ ) than in the heavy condition ( $M = 6.32$ ,  $SD = .57$ ), ( $t = -22.53$ ,  $p < .001$ ).

These same target photos were also pre-rated for attractiveness by 63 undergraduates, who were not included in the current sample, on a 9-point scale (1 = extremely unattractive, 9 = extremely attractive) as follows: thin photos ( $M = 5.75$ ,  $SD = 0.68$ ), heavy photos ( $M = 5.05$ ,  $SD = 0.87$ ). These means were not significantly different ( $t = 1.721$ ,  $p = .119$ ). However, in the current sample of 77 participants the thin target photos were rated as significantly more attractive than heavy photos: thin photos ( $M = 5.97$ ,  $SD = .89$ ), heavy photos ( $M = 5.32$ ,  $SD = .87$ ), ( $t = 3.27$ ,  $p = .002$ ), and thus the attractiveness of the target photos was controlled for in all analyses.

To manipulate target career success, each target photo was paired with a one-paragraph profile, described as being written by the target in the photo, which conveyed career success through her academic achievement, employment, and career accomplishments and aspirations. The profiles were written with similar career areas for the high- and low-career success conditions but with differing levels of involvement and responsibility.

The 10 unsuccessful profiles were pre-rated by 33 undergraduates, who were not included in the current sample, for career success on a 9-point scale (1 = extremely unsuccessful, 9 = extremely successful) as follows: ( $M = 4.41$ ,  $SD = 0.41$ ). The 10 successful profiles were pre-rated by a different set of 33 undergraduates, who also were not included in the current sample, as follows: ( $M = 7.32$ ,  $SD = 0.40$ ). The means were significantly different ( $t = 71.55$ ,  $p < .001$ ). As expected in the current sample of 77 participants, target profiles differed significantly on career success: successful ( $M = 6.81$ ,  $SD = 1.46$ ), unsuccessful ( $M = 3.94$ ,  $SD = .57$ ), ( $t = -11.44$ ,  $p < .001$ ).

After finishing the experiment, participants completed the post-manipulation measures, which they believed were for the second experiment on eating attitudes. Upon completion, participants were debriefed about the true nature of the study.

## RESULTS

Linear regression analyses were conducted for each of the dependent variables related to eating attitudes (EDI-Bulimia, EDI-Drive for Thinness, EDI-Maturity Fears, and EDI-Ineffectiveness) and body satisfaction (BISS) in order to examine potential three-way interactions between status aspiration (as measured by the AMS), target weight, and target success.

In prediction of EDI-Ineffectiveness, the following predictors were entered: Step 1—entry of composite ratings of target attractiveness to control for the differences in attractiveness between thin and heavy targets; Step 2—simultaneous entry of the three centered main effects (status aspiration, target weight, target success) to assess the simple effects of the predictor variables; Step 3—simultaneous entry of all centered two-way interactions (target weight X target success; target weight X status aspiration, target success X status aspiration; Step 4—entry of the centered three-way interaction (target weight X target success X status aspiration).

The critical test of the main hypothesis is the three-way interaction. Target weight, target success, and status aspiration interacted to predict EDI Ineffectiveness symptoms,  $B = -1.55$ ,  $t = -2.472$ ,  $p = .02$ ,  $f^2 = .23$  (see Table 1). To determine the nature of this interaction, we probed the three-way interaction by using high and low combinations of career success (using values that were one standard deviation above or below the mean). A significant two-way interaction

**TABLE 1. Three-Way Interaction Between Achievement Motivation, Weight, and Career Success on EDI-Ineffectiveness**

Step	Variable	Statistics at Entry			
		SE	$\beta$	<i>t</i>	<i>p</i>
1	Target Attractiveness	.08	.03	.27	.79
2	Target Attractiveness	.09	-.03	-.22	.83
	Target Success	1.60	-.20	-1.61	.11
	Target Weight	1.50	.09	.73	.47
	AMS Status Aspiration	.77	.08	.67	.51
3	Target Attractiveness	.09	-.03	-.24	.81
	Target Success	2.12	-.11	-.65	.52
	Target Weight	2.07	.15	.91	.37
	AMS Status Aspiration	1.23	.10	.55	.58
	Target Weight X Target Success	2.96	-.13	-.67	.51
	Target Weight X Status Aspiration	1.51	-.30	-1.89	.06
	Target Success X Status Aspiration	1.50	.24	1.45	.15
4	Target Attractiveness	.09	.04	.297	.77
	Target Success	2.10	-.11	-.67	.50
	Target Weight	2.00	.17	1.08	.28
	AMS Status Aspiration	1.32	-.12	-.57	.57
	Target Weight X Target Success	2.86	-.12	-.64	.52
	Target Weight X Status Aspiration	2.12	.100	.46	.65
	Target Success X Status Aspiration	1.97	.60	2.78	.01
	Target Success X Target Weight X Status Aspiration	2.98	-.58	-2.47	.02

between target weight and status aspiration was found within the high career success conditions,  $B = -1.35$ ,  $t = -3.13$ ,  $p < .01$ . There was no significant interaction for the low career success condition. Thus, within the high career success conditions, the significant two-way interaction was probed within the thin and heavy target conditions. In the thin target condition the effect of status aspiration on participants' EDI Ineffectiveness score was significant,  $B = .99$ ,  $t = 3.22$ ,  $p < .01$ . There was no significant effect of status aspiration in the heavy target condition. Thus, high AMS participants reported significantly more Ineffectiveness than low AMS participants in the thin, high career success condition (see Figure 1).

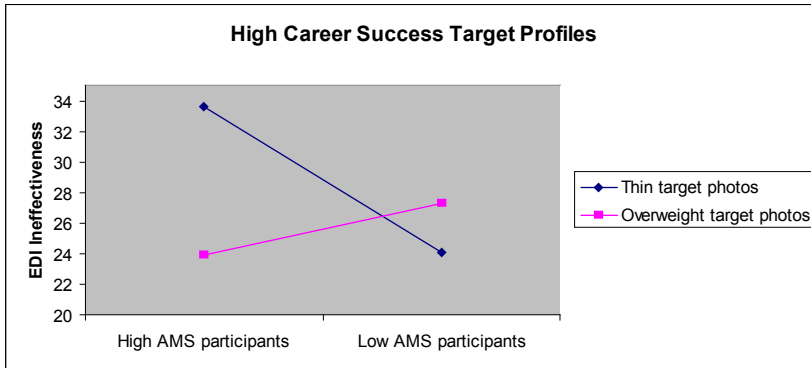


FIGURE 1. Three-Way Interaction Between Target Weight, Target Success, and Participants' Status Aspiration to Predict EDI Ineffectiveness Scores

In prediction of the other EDI subscales (Bulimia, Drive for Thinness, and Maturity Fears), the same predictors were entered as in the regression above. However, none of these analyses yielded a significant three-way interaction.

In prediction of state body satisfaction (as measured by the BISS), again the same predictors were entered. The three-way interaction between target weight, target success, and status aspiration to predict state body satisfaction was significant,  $B = 2.09$ ,  $t = 2.22$ ,  $p = .03$ ,  $f^2 = .16$  (see Table 2). A significant two-way interaction between target weight and status aspiration was found within the high career success conditions,  $B = 1.65$ ,  $t = 2.54$ ,  $p = .01$ . There was no significant interaction within the low career success conditions. We next examined the main effect of status aspiration among participants in the thin and heavy target conditions, and found a significant effect within the thin target condition,  $B = -1.13$ ,  $t = -2.43$ ,  $p = .01$ . Moreover, the correlation between status aspiration and the BISS within the thin, successful condition was significant ( $r = -.46$ ,  $p < .05$ ). Thus, high AMS participants reported more state body dissatisfaction (as indicated by their lower scores) than low AMS participants in the thin, successful condition.

## DISCUSSION

The purpose of the present study was to explore whether intrasexual competition for career success may contribute to body dissatisfac-

**TABLE 2. Three-Way Interaction Between Achievement Motivation, Weight, and Career Success on the BISS**

Step	Variable	Statistics at entry			
		SE	$\beta$	<i>t</i>	<i>p</i>
1	Target Attractiveness	.12	-.09	-.81	.42
2	Target Attractiveness	.13	-.14	-1.11	.27
	Target Success	2.20	-.10	-.82	.42
	Target Weight	2.34	-.07	-.60	.55
	AMS Status Aspiration	1.13	-.13	-1.07	.29
3	Target Attractiveness	.13	-.14	-1.11	.27
	Target Success	3.10	.01	.04	.97
	Target Weight	3.24	.01	.08	.94
	AMS Status Aspiration	1.84	-.25	-1.31	.19
	Target Weight X Target Success	4.43	-.16	-.78	.44
	Target Weight X Status Aspiration	2.25	.21	1.34	.19
	Target Success X Status Aspiration	2.24	-.03	-.19	.85
4	Target Attractiveness	.13	-.20	-1.60	.12
	Target Success	3.02	-.01	-.09	.93
	Target Weight	3.15	.01	.08	.94
	AMS Status Aspiration	2.00	-.05	-.24	.81
	Target Weight X Target Success	4.31	-.17	-.85	.40
	Target Weight X Status Aspiration	3.19	-.15	-.68	.50
	Target Success X Status Aspiration	2.97	-.37	-1.65	.10
	Target Success X Target Weight X Status Aspiration	4.49	.53	2.22	.03

tion and worse eating attitudes among status aspiring college-aged women. Specifically, we sought to determine if exposure to potential competitors who varied on career success and weight status would differentially activate intrasexual competition motives.

Our hypothesis that participants' level of status aspiration would interact with target weight and target success to predict greater body dissatisfaction and more disordered eating attitudes was partially supported. Specifically, participants' status aspiration interacted with target weight and target success to predict greater body dissatisfaction and ineffectiveness. Participants who were high on status aspiration reported significantly worse body satisfaction after being exposed to thin, successful targets than participants who were

low on status aspiration. Moreover, compared to participants low on status aspiration, participants high on status aspiration reported more ineffectiveness after being exposed to the thin, successful targets. However, status aspiring participants did not report greater drive for thinness, maturity fears, or bulimic symptoms. The cross-sectional nature of the current study may explain the lack of significance for these symptoms. It may be that status aspiring women would resort to inappropriate compensatory mechanisms and/or dietary restriction in order to reduce feelings of ineffectiveness and body dissatisfaction in the face of prolonged competition.

These findings are important for several reasons. Given that the fertility rate continues to decline in Western countries, women will be able to remain thinner longer, and thus may desire to increase their mate value through means aside from thinness, like career success. Although this would appear to be an adaptive strategy, failure to increase one's mate value by being successful may lead some women to feel more ineffective and more dissatisfied with their bodies. In combination with high perfectionism, feelings of ineffectiveness and body dissatisfaction can be especially pernicious and have in fact been found to predict the development of bulimic symptoms (Bardone-Cone, Abramson, Vohs, Heatherton, & Joiner, 2006) and to contribute to the maintenance and exacerbation of bulimic symptoms in adult women (Holm-Denoma et al., 2005). Moreover, it is likely that women with status aspirations will find themselves in situations where there will be other status aspiring women. Thus, there appears to a paradoxical nature to success; although aspiring for status may help women become more successful, it may also make them more vulnerable to the development of an eating disorder.

The current study possesses several strengths. First, this is one of a handful of studies to directly test the sexual competition hypothesis of eating disorders (cf. Li, Smith, Griskevicius, Cason, & Bryan, 2010). The results from this study further support the idea that intrasexual competition for status, independent of intrasexual competition for mates, could contribute to the development of an eating disorder. Moreover, this study systematically manipulated target weight and target success, which allowed for a more thorough examination of the interaction between these factors in the prediction of body dissatisfaction and disordered eating attitudes. Additionally, we found significant, moderately sized effects, even after controlling for target attractiveness.

Several limitations of the study are also important to note. First, the sample consisted of nonclinical, college-aged women, so we cannot be sure that the observed results can be generalized to clinical samples. However, our sample was well suited for investigating adult onset (i.e., after the age of 18) disordered eating as all our participants were over the age of 18. Another limitation of the current study is that data were acquired through self-report and, as such, must be interpreted with caution. Furthermore, although we attempted to make the targets' ethnicity reflective of the general student body (i.e., 20% of the targets were African American and 10% were Hispanic), the majority of the target photos (70%) were Caucasian; thus, non-Caucasian participants may not have found the manipulation to be as salient. Future research should explore how utilizing ethnically diverse targets affects the salience of the manipulation for minority participants. Also, the present study consisted of four conditions in which target photos were either thin or heavy and target profiles were either successful or unsuccessful; however, future studies investigating the effects of weight status and career success on eating attitudes and body satisfaction may wish to employ neutral weight and career success conditions. Finally, in order to understand if increased body dissatisfaction and ineffectiveness lead to the development of disordered eating in status aspiring women future longitudinal studies should be conducted.

The results of this study have potentially important clinical and occupational implications. For instance, it may be important to assess for status aspiration in patients with eating disorders, as this orientation may predict a worse course for the disorder and/or indicate different types of interventions. For example, one intervention for status oriented women with eating disorders may be to teach them multiple strategies they can employ to increase their mate value and/or status. Thus, if they found that they were unable to execute one strategy (e.g., being successful in a career), they would be able to attempt another (e.g., mastering a particular skill, becoming a good parent). Being able to use multiple strategies to improve mate value and/or status may decrease the likelihood that they will rely on any one (e.g., weight loss). Dialectical Behavior Therapy techniques of radical acceptance and mindfulness may also be helpful for women struggling with these issues. For instance, mindfulness strategies could be used to help status oriented women become and remain aware of the choices open to them, and radical acceptance

could be employed when they have to let go of one strategy to embrace another.

Female intrasexual competition for mates and status is likely to continue to increase in industrialized societies. Although modern women now have more strategies they can employ to increase their mate value, it appears that being unable to successfully employ them may activate a default strategy of weight loss. Thus, a potentially important part of prevention and treatment programs for eating disorders may be to help women develop multiple avenues and opportunities to increase their mate value and status.

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