

Increasingly
becoming more
health conscious



**ASSIGN
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Society today is increasingly becoming more health conscious with the ever growing obesity rates and widespread awareness of the health implications resulting from being overweight. In 2010 it was stated that 26% of the UK were classified as obese and 62. 8% of people over the age of 16 were overweight (HSCIC, 2012a)(Department of health, 2012). Updated figures are forecasted to be higher than this and are being released in February 2013. The media is thought to play a significant role in these rising statistics. On average, an individual who watches television for two hours per day will see over 20, 000 advertisements related to food in a single year, the majority of which promote unhealthy food products (National Centre for eating disorders, 2009).

Less commonly brought to the forefront of media attention but still a significantly serious and predominant issue is the growing rate of reported

anorexia cases, especially in young females. It was announced by the Health and Social Care Information Centre that hospital admission for eating disorders have risen by a staggering 16% in England from 2011 to 2012 (HSCIC, 2012b).

Anorexia nervosa is a phenomenon vastly increasing in western culture; societal pressures to be thin have fashioned a preoccupation with body appearance among young women. “ A thin body is seen as a sign of success, beauty and popularity” (Paterson, 2007). This ‘ fat phobia’ is seen to differ amongst varying global cultures. For example, in Fiji where food is less lavish, fat has been equated with a higher societal status (Robertson 1992).

In a curious contradiction, as a whole, the average woman’s weight has been increasing at a level almost directly linear to the decline in weights seen in models and celebrity icons (Berg et al, 2002). It is clear that perceptions of the perfect body image have changed over the centuries, from pre-historical sources ‘ goddess’ figures were “ Full-breasted and round bellied” (Berg et al, 2002) whereas, Over the last 20 years, models are recorded to have become progressively lighter as part of the new ‘ norm’ (Berg et al, 2002).

Media in business is, “ communication channels through which news, entertainment, education, data or promotional messages are disseminated” (Business Dictionary, 2012). It has been suggested that the media plays a role in the adverse nature of how women perceive themselves today. Do media messages play a part in fuelling eating disorders today? Has the increasing drive to combat obesity through health and fitness promotions encouraged the influential younger society to turn to the other extreme of

anorexia? Are other aspects of society stimulating this increase such as males' perception of an 'attractive female form'?

Project

"The media is a powerful influence and we know how vulnerable some people at risk of eating disorders can be to its visual images in particular" (Ringwood, S - Cited by BBC 2010). Keeping this quote in mind the research project that I am going to be evaluating is entitled:

'How much of an influence do the media have on young females' perception on body image?'

The investigation will look to discover whether there is a direct link and relationship between current media messages, promotions and the current status of increasing levels of anorexia within the widest category of increment, young females. In conjunction with this, the project aims to consider an indirect aspect of possible increases in anorexia whereby males' changing perceptions of the perfect female form through media pressures could be a motive for females in striving for body perfection.

It is a worthy topic of study as media presence is a strong, emerging aspect within Western culture particularly with the ever developing social media platforms. Psychiatrists hypothesise that behind an eating disorder are three fundamental reasoning's; biological, physiological and social factors (BBC News, 2010). This project will focus mainly on the social factors in determining the extent of contribution.

Health is of great interest to me as well as media activity. Combining both my societal interest and business interest has led me to this topic. I will attempt to further my knowledge and hopefully find answers to the burning questions regarding media and the health industry.

Key Theoretical Areas

Similar areas of analysis have been explored in varying dimensions as a way of determining whether media does affect perceptions on body image. From research into the background of this I haven't been able to unearth any definitive conclusions. Former research seems to be fairly dated so I will adopt a more modern approach to investigation with diverse test strategies. With advancements in media society I may be able to prove what other theorists have yet to decipher.

A central journal that has been published and also cited in many of the articles I have analysed was written by Jane Ogden and Kate Munday and is entitled "The Effect of the media on body satisfaction: the role of gender and size". I have been able to use this journal effectively to ensure that there is a genuine interest in my chosen area of research. This study examined the effects of exposure to thin and fat media images on body satisfaction in both males and females. It is becoming dated, written in 1996 and takes specific interest in gender effects (Ogden and Munday, 1996). My research specifying young females will produce a different perspective and more in-depth analysis on one specific group with focus on the thin ideal.

Another key secondary theoretical area is the eating disorder charity Beat. The use of this company's resources has been developed further within the

strategic analysis. The information attained from this source has proved to be invaluable in gaining the information required to proceed with my investigation and in ensuring that there is a gap in the market. There are people who strive for definitive answers to the questions asked in this research topic.

I will draw upon a number of recent statistics and media messages in order to gain an accurate understanding of figures and determinants. I will keep up to date with media activity regarding health, in particular anorexia issues. Useful articles already identified are; a 2010 article by the BBC stating that psychiatrists believe that 'media is fuelling eating disorders' (BBC 2010) and from the Daily Mail, 'Anorexic patients falsely see themselves as fat but do not misjudge others' (Daily Mail, 2012)

From the use of new media reports in conjunction with my primary research I hope to use my gap in the market of whether males differing opinions of the female body form have an effect on females and blend that with my female research to develop a greater understanding to hopefully produce conclusive answers to what extent the role of the media has in fuelling eating disorders.

Aims and Objectives

The aim of this project is ultimately to analyse the research question of what role that the media and advertisements have within society today in encouraging the 'perfect' body image.

The intention is to investigate and raise awareness as to whether there is a direct link and relationship between the media and the increased health

worries surrounding anorexia nervosa, including the effect of fitness and anti-obesity promotions.

As well as this, I propose to attempt to identify whether the media is solely to blame for current developments, highlighting whether there is a strong influence between males perceptions of the perfect female form and the change in females discernment.

Finally, my last objective is to provide conclusions based upon the data received to bring together my project and provide answers to my theoretical hypothesis.

Methodology

The aims and objectives set previously will be accomplished using systematic methodology approaches specific to the proposed areas of investigation.

The projected research design will incorporate a cross sectional style as a direct consequence of time restrictions, meaning the study will be based on a specific phenomenon within a specific time period. This cross sectional approach will originate in the form of qualitative research (Saunders et al, 2012).

From exploration of the research options I believe that qualitative data will be the most beneficial route in which to gain the depth of knowledge necessary in order to formulate an overview of perceptions and allow sufficient answers to be formulated. My judgement is reinforced by Saunders et al (2012) who state that qualitative data is associated with the

phenomenological approach to research and focuses on a deep investigation into perceptions.

As Einstein once claimed, “ Not everything that counts can be counted, and not everything that can be counted counts” (Quote Investigator, 2010) and although qualitative methods have been critiqued as being less formal a structure than quantitative methods, the benefit of qualitative is that it gives greater freedom to explore different avenues (Saunders et al, 2012).

The principle techniques that I will adopt are focus groups, interviews and ethnography. Saunders et al (2012) suggest that between 4 and 12 participants should be used within a focus group. Due to the complex nature and sensitivity of my subject I will facilitate the focus group by conducting groups with a maximum of 7 partakers. I aim to hold six focus groups in total which will take perspectives from people aged between 17 and 23 and medical professionals. These focus groups will be broken down into: three female focus groups, two male focus groups and one medical professional focus group. As the focus group ‘ moderator’ I will facilitate the discussions by ensuring that debates are kept within set topic boundaries, interest in the topics are generated and finally that I remain unbiased in terms of leading opinions toward a certain outcome (Saunders et al, 2012).

I will correspondingly conduct semi structured, face-to-face interviews. This method will allow people to have the freedom to express beliefs with that personal element whilst also providing me with the knowledge required (Saunders et al, 2012). As the interviews will vary in terms of interview purpose each one will be formulated specifically to the individual. Currently I

have four firm interviewees and am in discussions over gaining more of these to assist in my project.

The reason that I have chosen qualitative methods over quantitative methods is that I feel the use of quantitative means in the form of surveys will not be reliable enough due to limited sources being accessible as the topic is quite complex and intimate. Even though quantitative data is known for being highly reliable it could still be lacking in validity. Qualitative research allows a richer exploration of perceptions and beliefs which is what I hope to gain when undertaking my research (Saunders et al, 2012).

I aim to have a total research population of at least 45 correspondents and once all relevant data has been collected, I will implement the deductive approach of using existing theory and second hand resources along with my primary research in order to formalise conclusions. This framework approach will then enable me to use categorisation, unitising of data and the meta matrix approach to formalise my data, dividing, grouping and organising my data to draw up analytical decisions and test my hypothesis (Saunders et al, 2012).

Project Scope

This project is going to be focused on mainly students within Cardiff and Plymouth in order to gain an overview of research in Wales and England.

Geographically, to acquire definitive answers, a UK, European or even global scale would indisputably be of added benefit however, given the time restraints of this particular project this is not feasible.

Participants who are contributing to the research for this project are aged between 17 and 23 years and will be primarily College and University Students. I have chosen this age category due to initial research being undertaken and findings' stating that anorexia is prevalent within young females (Healthy Place, 2008). Studying this category I believe that I can gain an accurate understanding of opinions and perspectives within this predominant age range. My thought process behind starting my research with participants aged 17 rather than any younger is that I hope it will provide me with the level of maturity and media knowledge necessary in order to complete this research effectively.

I will direct my research at both females and males within this age bracket to acknowledge females perceptions on body image as well as how males in this influential age category may be becoming more prominent in determining and influencing the ' perfect' female form.

Problems and Limitations

No matter to what extent I vigilantly plan this research, there are a few research problems and limitations that I can foresee before commencement of this project of which I have limited control. Unforeseen issues can also arise during my project and I have factored in allowance for these when considering my time plan.

A major aspect is sample strategy as a whole which includes timescale and sample size. There's a limited amount of time given to analyse respondents and this could narrow the extent of my findings. If an extended time period was available, for example a year, I would be able to analyse changes in

opinions according to developments in the media. Sample size is another limitation outlined in relation to my respondents. Again due to time restraints I have had to limit my research to focus on individuals with whom I have immediate access, hence my decision to focus on those located in Plymouth and Cardiff. A positive owed to this initial start of research is that it does provide an avenue for further research and development when time permits in the future (Saunders et al, 2012).

Finally, a potential pitfall in which I can identify in terms of collecting my research is that the opinions and views identified from the focus groups could be influenced by other respondents due to possible pressures to conform. To overcome this I will analyse each person's reactions beforehand and put them in a focus group with people of similar characteristics.

Research Ethics

In terms of conducting my research, ethical principles should always be at the forefront of operations. The way I embark upon my interviews and focus groups must adhere to the UoP code of ethics which are a " statement of principles and procedures for the design and conduct of research" (Saunders et al, 2012).

Key principles include; the integrity of the research, which comprises the need to be truthful and accurate when explaining the research criteria. I will produce a document consent form to reiterate what I am doing and why as a reassurance for the participants. Protection from harm is crucial, as my research topic is sensitive the risk of emotional and uncomfortable situations are more likely to occur. This leads onto the third principal of privacy and

confidentiality, the respondent under ethical laws has the right to withdraw, remain anonymous and shouldn't feel pressurised to answer questions set before them. This could also be of benefit to me as anonymity could lead to increased reliability. These values are essential to implement as they will avoid any miscommunications and malpractice as well as promote beneficence (Saunders et al, 2012).

A final ethical issue is that there may be a possible data limitation due to people's privacy rights by law. In the health sector in particular, patient confidentiality is of utmost importance so this could pose a possible issue when conducting my research through the UK Eating Disorder Charity, Beat and when interviewing medical professionals.

Time Plan

Project management is a crucial element that must be adopted in the process of completing this project. Setting time awareness objectives will help in focusing the mind on what is left to complete and ensures that no aspect is overlooked. Unforeseen issues can arise causing setbacks in the timing of the project. Allowing sufficient time before the deadline permits any hindrances to be compensated for. Setting 'To Do' lists not only in this project but in all projects being undertaken this year allows a fair balance between all assignments.

For this project, key dates set out are:

2 Nov – Submit Synopsis form

3 Dec – Submit Research Plan and Strategic Analysis Report

7 Jan - Start Final Project

22 April - Final Project Submission

“ A Gantt chart is a chart that provides a simple visual representation of the tasks or activities that make up a project, each being plotted against a time line” (Saunders et al, 2012: 671). My research specific Gantt chart analysis:

During this project, a Gantt chart will be beneficial in aiding time management in a specific graphical manor however, knowledge has proven that no matter how thoroughly a researcher organises their time; in reality the objectives set always take longer than originally predicted (Saunders et al, 2012).