

Very young children's body image: Bodies and minds under construction

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In recent years research has recognised that notions of body image, body image ideals and body dissatisfaction develop much earlier than was once thought. Forty-seven children (25 male; 22 female) aged between 5 and 6 years were interviewed on three occasions over 12 months regarding their perceptions of body image. The interviews revealed strong negative perceptions of fatness. However, being overweight or even obese was not always correlated with being unhealthy. Conversely, the desire towards cultural ideals of thinness, while apparent, was not as clear.

Body image, early childhood, health, obesity, symbolic interactionism

RATIONALE

Understanding the aetiology of body image perception in children is vital in developing a rationale of why body image dissatisfaction has become a normative component of existence for both males and females in Western society (Tiggemann, 2001; Drummond, 2002). Illnesses such as depression and eating disorders have been directly associated with body image dissatisfaction (Kostanski and Gullone, 1998; Grogan, 1999). Further, behaviours such as unhealthy exercise regimes, so-called 'yoyo' dieting and even financial hardship have all been associated with body image disturbance (Kostanski and Gullone, 1998).

Describing the impact of body image dissatisfaction on individuals in terms of an illness or harmful behaviour merely presents a pathological perspective of body image disturbance. Poor body image perception is closely allied to low self-esteem (O'Dea, 2004a). The effects of low self-esteem on a person's engagement with life can be significant. A person may choose not to engage in activities, or let opportunities pass them by. In a sense, how they feel about their body may prevent them from taking up the challenge of life. Contemporary body image research therefore argues that a healthy body image is related to people's successful and fulfilling engagement with life and with and through the body (Cash and Pruzinsky, 2002).

The purpose of this research is to develop a better understanding of when and how notions of body image are first created and internalised. The past two decades have seen a concentration of body image research with respondents of ever decreasing age (Smolak, 2004). Anecdotes of children as young as 7 years of age participating in restrictive eating practices inhabit the literature (Kostanski and Gullone, 1999). Reporting on a quantitative study of 5 to 7 year-old boys and girls, Tiggemann (2001) concluded that body image dissatisfaction could be identified in children as young as 6 years of age. Tiggemann (2001, p.3) notes that, "6 and 7 year old girls rated their ideal as significantly thinner in a way that five year old girls did not". The results of this study suggest that significant developments in girls' perception of body image may occur between 5 and 6 years

of age. Further, Smolak (2004, pp.19-20) asserts "We know little about the development of body image, particularly during the pre-school and early elementary school years".

CONTRIBUTION OF THIS STUDY TO THE LITERATURE

This research will allow for a more comprehensive understanding of how body image perceptions are created and evolve in children. Historically, research on body image has been linked to adolescents. However, children as young as seven years of age have reported being unhappy with their bodies (Dohnt and Tiggemann, 2005). One in four children aged between 7 and 10 years old has dieted to lose weight with restrictive dietary behaviours noted in children as young as nine years of age. These statistics represent a compelling reason to understand more about how children younger than 7 years of age develop their perceptions of their own body and the bodies of other people.

There are very few studies that have attempted research in the field of body image with children younger than 7 years of age. Those studies that have been performed suggest children between 5 and 6 years of age have some notion of societal body image norms. The studies that do exist tend to be quantitative in design presenting statistical data with little or no validation of method or paradigm. This raises issues of the limitations and appropriateness of quantitative methodologies when they are conducted on children. There is a critical need to expand the focus of investigations of body image and explore these ideas through the looking glass of the children's own experiences. Hence, we need to undertake qualitative forms of research with children that will ultimately, develop this understanding while informing curriculum development and health promotion with an aim of minimising the body image issues for children.

THEORETICAL CONCEPTUAL FRAMEWORK

The study utilises two complementary theoretical frameworks, phenomenology and symbolic interactionism. Studies that utilise phenomenology are principally concerned with developing an understanding of behaviour from the point of view of the actor (Bogdan and Taylor, 1975; Patton, 2002). The term phenomenology has developed a diverse range of subtle variations to its definition and therefore the manner in which it is applied (Patton, 2002). However, central to all phenomenological studies is the basic tenet that phenomenology refers to how humans make sense of and experience the phenomenon that is under scrutiny. Furthermore, in order to study the phenomenon it is necessary to talk to people who directly experience that phenomenon.

Individuals do not simply interpret and respond to the world as if they were on the outside looking in (Gubrium and Holstein, 2003). Rather, they are participants in the world, actively taking part in the construction of their own unique understandings of their world (Gubrium and Holstein, 2003; Patton, 2002). While it is understood that individuals present their own unique perspectives, it is the intention of this study to use the phenomenological approach in its traditional sense, in order to seek, and to understand the commonality of these experiences (Patton, 2002). In this paradigm the analyst sets aside any belief that there is a single objective reality and focus "on the ways that members of the life subjectively constitute the objects and events they take to be real" (Gubrium and Holstein, 2003).

The second framework is described in the seminal work of Meltzer, Petras and Reynolds (1975) as the Chicago variation of symbolic interactionism. Symbolic interactionism is both a theoretical framework and an approach from which to study human behaviour from the perspective of the actor and is therefore congruent with phenomenology studies (Meltzer et al., 1975; Patton, 2002; Bogdan and Biklen, 1982). The Chicago variation is distinctive in that it advocates against a positivist view and the notion that there may exist universal principles of human conduct (Meltzer et al., 1975; Denzin and Lincoln, 2003). In preference the Chicago variation is focused on seeking

understanding from the perceptions of the actor. In this way an attempt is made to understand society (Meltzer et al., 1975).

PARTICIPANTS

The cohort recruited for this study comprised 47 children (25 male, 22 female) between the ages of 5 and 6 years. Children were recruited from seven schools chosen at random in the Adelaide suburban area. Schools were approached with an information kit detailing the intention of the study, the broad questioning approach and consent and information forms approved by The University of South Australia Human Research Ethics Committee. Schools that indicated an interest in the study contacted the lead researcher for an interview with the school principal. The proposed study indicated an equal distribution between males and females (25 male, 25 female). However, recruitment was difficult due to community concern about the vulnerability of certain groups.

At the time recruitment occurred in South Australia sex abuse scandals involving young vulnerable children were almost daily occurrences reported in the popular press. Schools, both independent and public, were under intense public scrutiny and what has been termed by some a 'moral hysteria' concerning the protection of young children. In this environment recruitment was arduous, discouraging and at times personally confronting.

INSTRUMENTATION

The instrument used in this study was developed by Tiggemann and Pennington (1990) for use with 10 year-old male and female students. This instrument has been used successfully as the primary instrument in three studies. These researchers used the instrument in their study of 10 year-old children's body image. Moreover, it was used in Lowes and Tiggemann's (2003) study of 5 to 7 year-old children and in the pilot study of this investigation conducted by Birbeck and Drummond (2003) with 5 to 7 year-old girls. Permission to use this instrument with modification was obtained from Professor Tiggemann.

The tool consists of nine images of both male and female bodies. The only variant in these images is the body type, which ranges from ectomorphy, Image 1, to endomorphy at Image 9. All images were the same height. Two modifications to the tool were deemed necessary. First, the pictures were enlarged so there is only one image per A4 page. Second, the original images have a number at the bottom of each image. These numbers were removed to appear on the reverse side of the page to the image.

The first modification, that of transferring the images from a continuum to nine individual images each on its own A4 page was made in response to criticisms of the work conducted by Poudevigne et al (2002). This modification was made so that the sequence of the pictures was not so readily apparent. Poudevigne et al., (2002) argued that the continuum of images used in their study might have contributed to a bias in the images selected by the children. The rationale for this criticism was that if a particular child was uncertain which image to select, the structure of the tool suggested that the middle range of images was the safest choice. The outer edges of the continuum defined the extreme parameters and as such seemed to require some sort of explanation. The second reason for this modification to its own individual sheet was that the instrument was transformed from a passive instrument, requiring the respondent simply to indicate, to a concrete, manipulative instrument. In terms of engaging children of this age group concrete manipulative tools were considered developmentally appropriate (Eggen and Kauchak, 1997).

The theoretical framework 'symbolic interactionism' informed the second modification of removing the identifying numbers from the front of the images where they were visible, to the back, and were hence unobtrusive. A key tenet of symbolic interactionism is, according to Meltzer

et al. (1975), that human beings acted towards symbols on the basis of the meanings that the symbols had for them.

In the context of the instrument used in this study there are two symbols. The first symbol is the image of the body. Identifying the meaning of the body image to the respondent is the purpose of the study and justifies symbolic interactionism as a theoretical framework. The second symbol is the number at the base of the image. Numbers are symbols and do have cultural meaning. The clearest example is the number '1' which is often associated as the 'winner' or the 'best' and is something people are culturally imbued to aspire. It is entirely possible that the symbolic meaning of the numbers at the bottom of images might resonate with the respondent influencing the selection. Moving the number to the reverse of the image thereby reduces the possibility of the respondent making a choice that is based on the number of the image rather than the image itself.

INTERVIEWS

This research study is concerned with developing an understanding of how children of this age group develop their notions of body image as it relates to themselves, as well as how they view the bodies of others. For this reason the initial interview design can be thought of as having a range of connected components. The first component was the pre-interview and context establishment phase followed by two strands of questions, namely, a) about the 'self', and b) concerning perceptions of 'others'. A third direction was added to the interview protocol following respondent comments during the first round of interviews. An outline of the procedures employed together with the purpose and justification of their use follows.

Pre-interview

1. Explain the research and request their help.
2. Inform the child they can leave at any time with no ramifications (this must be repeated several times throughout the interview)
3. Explicitly explain to the children they are allowed to say 'I don't know' to questions if they are not sure.
4. Establish that the children know they are viewing images of other, same aged children.
5. Establish that the children are aware that each image is different in some way.

Question direction 1: Body image and self

1. Which of these images looks the most like you?
2. If I was Harry Potter and I could change you into any one of these images, which one would you like me to change you in to? Remember you might have to stay that way for a long time so it needs to be one that you really like.
3. Why?
4. Harry Potter sometimes makes mistakes. What if by accident he turned you into this image. How would you feel?
5. Why?

Purpose and justification

Smolak (2004) asserted that children younger than 8 years of age could not reliably choose their own body size. For this reason there is no attempt to measure the differential or to equate importance to the differential between the child's choice of actual body size and ideal body size.

The information rich data comes through the exploration of the ‘why?’ question. Cross-referencing the ‘why’ response with the directionality of the real or ideal selection presents a method of triangulating the child’s responses.

The construction of the questions is necessary for a number of reasons. First, there is a safety issue. There is a possibility that by simply asking the child what size they would like to be might create a sense of body dissatisfaction where previously none existed. Phrasing the question in the context of Harry Potter allows the issue to be explored without imposing a value or an implication on the selection. Second, the question provides a context for the notion of different body types and for changing a body type. In terms of best practice for interviewing children, providing a context for the questions in which the child is familiar allows the child to understand more fully the question and a framework in which to respond.

Finally, the question context allows the researcher to cast around the images for the thoughts and feelings of the child with respect to the ‘other’ images not chosen. The research about children in interview environments tells us that repeating a question to a young child increases the likelihood of less correct answers being communicated. The notion being that as the researcher has restated the question the child reasons that their previous answer is not correct and so provides an alternate explanation. In this manner the Harry Potter context allows for the question to be repeated without the connotation of the previous answer being incorrect. Significantly, while there is no correct response in phenomenological research very young children may misconstrue the meaning of the interview process and thus believe it to be a question and answer protocol (Spencer and Flin, 1993; Scott, 2000).

Instances where the respondent indicated an actual image and an ideal image that were the same would signal the end to this section of the interview with a polite thank you. Crucial to the design and intent of the study is the tenet ‘first do no harm’ (O’Dea, 2004b). Further questioning the child in these instances increases the possibility of the child re-considering their choice. Not only would such a questioning strategy seem to invalidate the initial response and the subsequent response due to the interviewer passively suggesting the choice may need reconsidering, but more importantly, may actually create the notion in the child’s mind that their body is not good enough and that a better body size may exist. The development of body image dissatisfaction in an individual where none existed before may well constitute a form of emotional harm.

Question direction 2: Body Image and “others”

6. Out of all of these images which three would you invite to your birthday party?
7. Why?

Purpose and justification

The images provide a blank slate on which the children are asked to reveal their perceptions about the bodies of other people. The idea of ‘birthday party’ used in this question provides a context of an event that is important to children. Posing the question indirectly in this manner avoids the connotations that are created with more direct questions such as: Which three do you think are the nicest? The connotation inherent in this question is that perhaps some body sizes are, in fact, better than other body sizes. If the child has no internal conceptions about body types such a question may indeed create them. Further, in terms of accurate data this approach may increase the likelihood that the child may guess the selection. The literature on children’s questioning techniques argues that children are aware of these types of connotations. The birthday party question posed in this way does not carry with it this type of connotation.

Selecting three images from a selection of nine images requires the respondent to choose in one of two ways. In the first instance the respondent can choose randomly. Secondly the respondent may choose by imposing some form of internalised criteria on the images. In either instance asking 'why' should reveal which approach the respondent has chosen. As identified previously children focus on what they see as central to their decision-making and this is not always congruent with adults' perception of centrality. For this reason the 'why' becomes critical in determining the specific aspect of the image the child has focused on in order to make their decisions.

Question direction 3: Health and related concepts

It is the nature of qualitative research to evolve as the study progresses (Patton, 2002; Browning and Amos Hatch, 1995). As Patton (2002, p.14) asserts "approaching fieldwork without being constrained by predetermined categories of analysis contributes to the depth, openness and detail of qualitative inquiry". In a true phenomenological manner (Patton, 2002) it is appropriate, and the intention, of this research design, to incorporate into the framework of the study any issues that emerge from the interviews.

Analysis of the first round of interviews revealed that few children raised the topic of health and what was healthy. However, the interviews of those children that did raise these issues adopted an additional unexpected dimension to the two planned perspectives. The study adopted this additional direction for the final two interviews.

8. Which images do you think would be healthy or unhealthy?
9. Why?
10. How does one become healthy or unhealthy?

THEMES

Gender Differences: Girls

As an initial selection the girls' ideal size is generally smaller than the size they perceive as real. This outcome supports studies by Lowes and Tiggemann (2003) and Poudevigne et al. (2002) that girls of this age are starting to make decisions about desiring thinner body sizes.

Susan (5 years 0 months) thought her real size was Image 2 and wanted to become an even smaller Image 1, because as she claimed "they might have yellow hair, blue eyes and brown skin".

Skye (5 years 4 months) who perceived herself to be size 4 and would like to be Image 1 also agrees because "she is cute and because she is tiny. I think she would have blue eyes and blond hair". When asked whether she would like to be Image 2 or 3, given that they were both smaller than her original Image 4 response, she replied that she would be "very unhappy, I want to be this one".

However, casting about the images and listening to the children's explanations in relation to why they wanted to be smaller revealed that more was occurring than simply desiring a smaller body image. In many, perhaps most, interviews the girls indicated that they were receptive to being changed into any one of a whole range of images. Significantly, and in contrast to a good deal of literature, girls whose ideal was very small often did not mind being a different size. These included images that were in fact larger than their perceived real representative body images. However, the range of acceptable images differed. For the purposes of discussion this range is referred to as the 'threshold' figure. It appears as if the acceptable threshold image is within a range of two either side of their own representative image. Any suggestion of being transformed

into an image above this threshold was provided with a response of indignation and often rejected wholeheartedly. Further, the development of character traits associated with the images above their threshold included notions linked with being bad, nasty and mean spirited. Paradoxically while girls did not tend to mind which image they might become below their threshold they maintained this continuum of character traits. However, at this end the smaller images tended to be associated with niceness, friendliness and kindness.

An important external element that emerged as being a significant issue in the desire for thinness among girls was that of the family. In a number of instances the children recognised, or were aware of, their mother's attempt to lose weight through dieting, exercise or a combination of both thereby providing a potent example of symbolic interactionism at work in terms of girls' body based regimes. On other occasions siblings were strong influential players in the development of girls' of anti fat notions as well as potential body image dissatisfactions as the following discourse demonstrates.

The following interview discourse over the course of three interviews with Jenna highlights the plight of many younger children particularly with older siblings. At the time of the first interview Jenna was aged 5 years 4 months. Here is what she had to say over the 12 month period.

Upon choosing a lower number figure, Jenna was asked:

I: Why do you want to be this one?

J: Because it is skinny.

I: Why do you think you would like to be skinny?

J: Because my brother always calls me fat.

I: What do you think of that?

J: I don't like it.

At the second interview Jenna was aged 6 years 0 months and chose an even smaller image. In fact the smallest, Image 1. She claimed:

J: My brother always teases me, they always say I am fat

I: and how does that make you feel?

J: Bad.

I: Do they say it in a bad way?

J: Yes.

I: Do you think you are fat?

J: No. When I get really angry with them I scream at them. It is not funny because I don't think I am fat. Sometimes I cry.

At the third interview Jenna was aged 6 years 4 months. She once again chose her ideal body figure as being the smallest. Upon reflection she commented:

J: Because it is skinny.

I: Do you think you are skinny?

J: No I think I look like this one (Image 5)

I: Would you say that was fat skinny or just right?

J: Just right.

I: Why would you like that one?

J: So my brother will not tease me anymore.

I: What do your brothers do?

J: They tease me and say 'you're fat!'

I: Why do you think they do that?

J: I don't know, they are just mean.

I: So what would happen if you were image 1?

J: They would stop teasing me.

I: Do you think they might tease you about being very skinny?

J: No they wouldn't do that.

Gender Differences: Boys

Similar to the girls, boys too developed a threshold figure. However, the threshold figure was used in an entirely different manner. Boys tended to choose ideal images that were very close to their threshold image. For the boys the ideal image was often larger than their perceived real image. Larger bodies are seen as more capable or more useful than smaller bodies, which is consistent with the literature (Drummond, 2003, Drummond, 2001). James (6 years 1 month) for example thought that his real size was Image 1 and yet he wanted to be Image 3. In response to this choice he claimed, "I want to be this one because it is bigger". Further he identified that "I would be able to kick higher and kick my fins properly". This type of claim is also congruent with research on boys suggesting that boys place importance on size as well as function. This is a product of the way in which masculinity is socially constructed in contemporary Western culture (Drummond, 2003; Drummond, 2001).

The analysis of the boys' body image was at times ambiguous. Some boys chose as an ideal an image lower on the scale, an image that appeared to the researcher as being distinctly smaller than their real size. On occasion they would refer to this image as 'larger'. The confusion was resolved when one boy tried to measure the height of the images. For these boys taller represented larger. As all the images are the same height it would appear that these boys have difficulty in dealing with dimensions. The thinner images look taller because they appear more elongated. Adults more accustomed to dealing with this optical illusion learn to discriminate height from width. Young children with their limited exposure to dimension illusions of this nature have not yet learned this form of discrimination.

The dislike of the larger images crosses gender lines but unlike the girls the boys fear physical abuse. The following comments are typical from many of the boys and depict the physical nature of their fears. When asked if they have actually experienced physical bullying almost all said that they had not. On the occasions when they had experienced such abuse, the children tended to indicate the smaller and middle sized images as the transgressor. The desire for a larger image was in many instances a direct result of this fear. Where the boys perceived the thinner figure as 'bigger' or 'taller' they were interested in running and athletic pursuits. When the selected image was larger or thicker they were more likely to talk in terms of defending themselves. Noteworthy is the fact that both of these involve some form of physicality and masculinity (Drummond, 1996). Therefore while wanting to be like one of the bigger images they spoke about them in an indifferent manner. For example, James (6 years 9 months) stated with respect to the largest three images that they "are nasty kids".

I: How do you know they are nasty?

J: Because they look nasty.

I: Can you show me where they are nasty?

J: It's the muscles in their arms. They would hurt me.

I: How would they do that?

J: By hitting me.

On another level some of the boys identified their dislike of children who appeared to be overweight. When asked as to whom they would invite to their own birthday party Dobie (5 years 10 months) considered the last four images and exclaimed, "they would not be able to come because I do not like fat people" he then cited that "if you (they) are fat and you (they) have a fat tummy they would bash into you with their tummy". These are important claims and are representative of the boys involved in this research. It is important to bear in mind as researchers we cannot take these comments at face value and hence the significance of inductive analysis and situating them with a framework such as symbolic interactionism. This creates a meaning to otherwise superficial discourse.

Health

The children's perception of the images regarded as being healthy varied widely but can be categorised as belonging to broadly three constructions. For some children the thinnest images, Images 1 and 2, represent the healthiest bodies. Typically comments such as "they look good, they are on diets, and they are skinny", support their choice.

Another group identified images in the mid-range as being healthiest because, as Justin claims "the little ones have not eaten enough healthy food and the big ones have eaten too much fat food, probably hamburgers and nuggets." The children's understanding of health includes their own creative understandings with respect to what they have been taught.

The three thin ones have not eaten enough lollies to keep you just right. If all you eat is dairy you are always going to get skinnier but if you eat just some lollies you'll be just right. It is really, really important to be the right shape.

In this discourse, concerned with the child's understanding of healthy food, the word 'dairy' is associated with food of minimal fat. The child understands the group in the middle is the healthiest yet if a child only eats food with no or little fat then logically, how can that person be anything but small? This understanding suggests that learning in this area has little contextual basis. The comment demonstrates knowledge of unhealthy food by recognising that lollies are a food that can make you fat. Synthesising these two understandings children ultimately arrive at the conclusion that just a small amount of so-called 'bad' food would make them a little bit bigger.

The third construction of healthy images is that Images 8 and 9 are considered the healthiest. The rationale provided by these children is always that these are the children who have been eating the greatest amount of good food. The following comment made by one of the children exemplifies the misconstrued meanings associated with food and health. When discussing the largest image the participant stated, "He is the healthiest because he is the fattest and has been eating all his food."

These types of understandings could have serious implications for children's health. However, it is understandable that children do create such misinterpreted meanings given that they are often directed to eat everything on their plate, from a very early age. It is commonly stated that in doing so a child grows up to be big, strong and healthy. While not within the scope of this paper, these notions require further exploration.

Media

The literature search surrounding the topic of body image conducted prior to the study suggested that the media would emerge as a strong theme. However, the children rarely mentioned mainstream media pro-actively. Following prompting occasionally children would mention possibly one or two television characters but never with an emphasis of body image or a conscious site of learning. More often children mentioned stories they read at school as a context for their own stories. However, again it was difficult to make concrete connections. Despite this difficulty one child did reveal a powerful construction surrounding the media insofar as that “if you eat lots of bad food you will get fat and die”. This was contextualised with additional information claiming:

I heard on TV they were making this brand new garden all I know is the girl said ‘do you want to die’, and he was a big guy and he said no. They said if he didn’t want to die he has to be healthy, so if you get fat you can die.

When asked, “do you think you might die straight away or do you have a chance to get healthy again?” the child simply stated, “you die when you get really fat”.

These comments raise issues with respect to how children are coerced into making sense of health messages that are not designed or intended for their level of conception. The issue of ‘obesity’ is a common subject for discussion on news and current affairs programs. This is especially true of childhood obesity. Children do hear snippets of news bulletins and current affairs programs and need to make sense of them in the most appropriate way possible. In order to understand by themselves they are only have their previous experiences to draw upon. Regarding issues where they have little experience it is understandable that literal interpretations are created.

IMPLICATIONS

This research raises many issues relevant to education worthy of discussion. Within the context of this paper three are raised, with the first being that of bullying. Clearly there is a demonstrable need for the implementation of a raft of bullying strategies targeted at specific issues. First, the boys noticeably fear being bullied physically and violently by larger boys. These feelings were commonly expressed throughout the participant group irrespective of whether the particular child had ever been the target of, or even witnessed, a bullying event. The need to be educated that bullying should not be a part of everyday school life is crucial and that individuals should not feel intimidated by bodies that are simply bigger than theirs. There is certainly an emotional aspect attached to such a notion where these boys in particular are concerned. Conversely, for those boys who are bigger, particularly with respect to fatness rather than muscularity passive harassment in the form of being excluded from some sporting and social events are very real occurrences. As the participants in this research indicated some children would not be invited to their birthday party based on the size of their body. Nor would they be likely to become friends.

There needs to be an awareness by educational institutions engaged in health promotion that messages released to the media about issues such as childhood obesity are heard and interpreted by children. The result may indeed be a misinterpretation and ultimately a misconstrued meaning associated with the message. There is a need for schools to be pro-active in this area by introducing concepts such as critical literacy to the children very early so they may develop the required skills to question the simplicity and the accuracy of health messages. Further, critical literacy is a useful tool in questioning societal stereotypes that appear to have been absorbed by these children.

Finally, health education for many of these children appears to have lacked specific forms of contextualisation needed for understanding the meaning of the term ‘health’. That is, these

children have learned about health food. They have also learnt which foods are regarded as healthy and which foods are less healthy. However, few of these children understand the concept of health. The manner in which health education is taught might well benefit from a more contextualised perspective reflecting every day life situations. Further, the notion of 'health', even for children as young as the ones in this research, may well benefit from adopting a more holistic perspective and incorporate a range of health perspectives other than merely a person's physical health.

While we are dealing with very young children we cannot underestimate the symbolic meanings associated with the things around us that impact heavily on the way in which a very young child develops. With the obesity discourse so prevalent and obvious in the everyday lives of children, maybe we need to provide some assistance in allowing for appropriate interpretation to take place. Without this, we are possibly creating a situation where the lives of these children in terms of body image construction is negatively impacted as they mature into adolescents and beyond. This has severe implications for long-term health with respect to mental and emotional health, taking part in physical activity, and participation in life.

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