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A COMPARATIVE STUDY OF SELF-ESTEEM:
COLLEGE-AGED WOMEN VS. WOMEN AT MIDLIFE

A project based upon an independent investigation, submitted in partial fulfillment of the requirement for the degree of Bachelor of Arts in Social Work.

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ABSTRACT

A woman's self-esteem, defined as "a realistic respect for or favorable impression of oneself," can have a profound impact on her overall life choices and outlook. Low self-esteem is associated with numerous consequences such as eating disorders, alcohol abuse, sexual promiscuity, and social withdrawal. This study investigated the self-esteem level of college-aged women as compared to that of women at midlife and also identified the external factors that impacted this perception of self-esteem. It was hypothesized that the intense focus on women's rights and political activism of the 1960's and 1970's would have promoted greater self-esteem in young women of that era, as compared to the largely apathetic culture of present-day young women. A qualitative and quantitative study was distributed to 29 college-aged women and 22 middle-aged women who were asked to reflect on their current self-esteem levels. The women at midlife were also asked to discuss their perceived self-esteem when they were college-aged. In general, college-aged women reported inconsistent levels of self-esteem, many reporting that it depended on numerous external factors such as relationships, academic success, family situations, appearance, and the media. Almost universally, the women at midlife reported that many of these same factors also influenced their self-esteem, but that they have become much more self-confident with maturity and age. However, few women at midlife reported feeling more self-esteem during their college years due to the political activity of the times. School and medical social workers need to be aware of the emotional and physical consequences associated with low or unstable self-esteem in college-aged women in counseling and health agencies.

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- 3.) Changing role expectations for women
 - i.) Women still unequal to men in working sphere
- 4.) Cultural effects on women's self-esteem
 - i.) More opportunities increased women's self esteem
 - ii.) More time demands helped women feel more useful and productive
 - iii.) Many women able to balance new roles and lifestyles

D. Hypothesis

- a.) Women who came of age in the 1960's or 1970's will have more self-esteem than contemporary young women, due to the political intensity of that era
- b.) Current young women will have mostly low self-esteem
- c.) Women at midlife will have had more self-esteem during their college years than present-day young women
- d.) Women will gain more self-esteem as they age
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- a. Participants: Students at Providence College, professional women in social work settings, and non-working women
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Introduction

College is a time of transition, growth, and opportunity for young adults, yet for many women it also marks a period of decidedly low self-esteem. For this study, self-esteem is defined as “a realistic respect for or favorable impression of oneself,” (Dickerson, 2004). The factors that contribute to this lack of self-confidence are varied and powerful, considering they are strong enough to generate feelings of negative self-worth during a time that could be exciting and uplifting. Dickerson (2004, p. 338) found that college aged women today face extraordinary pressure to accomplish many things, including finding a partner, choosing a career, achieving financial independence, creating a social life, and needing to stay thin and attractive. In trying to sort out all of these priorities, Dickerson (2004, p. 338) argues that women cannot possibly balance everything and end up feeling like failures for not being good enough. This sense of not measuring up contributes to a pervasive lack of self-esteem in young women which negatively impacts their life choices and satisfaction. The goal in this thesis is to discover the reasons why this disconnect exists between women’s accomplishments and their low self-esteem levels and how to take steps to address this social phenomenon.

One major aspect of this self-esteem crisis seems to be linked to poor body image in females. This study will explore why college-aged women feel this discontent with themselves physically and emotionally, especially because physical self-esteem or satisfaction with one’s body may actually defend college women from feeling dissatisfied with themselves (Cook-Cottone & Phelps, 2003, p. 81). Self-esteem, as related to body image, has a vast impact on women’s total well-being, due in part to the fact that “self-concept is an inclusive and holistic gauge of satisfaction with the body, which includes

feelings about physical presence and health”(Bracken, 1992, as cited in Cook-Cottone & Phelps, 2003, p. 82).

In perusing the research, a question came to mind. Was this self-esteem and body image problem a product of the contemporary culture’s competing values and pressures on young women today or has this been an issue that has existed throughout time for females? McQuaide (1998, p. 22) notes the importance of a positive self image in women at midlife because a woman who is satisfied at midlife can be a positive role model to young women who feel trapped by stereotypes within her culture. Contemporary young women grew up in a very different culture and historical time than their mothers, aunts, or godmothers, and it would be interesting to see how women of past generations feel about themselves as compared to young women of today.

This lack of self-esteem in young adult females is important to social work practice, especially for direct service providers in clinical settings who work with this population. The loss of a positive self-concept in females is a common occurrence in today’s society and has widespread implications for service professionals. According to Hancock (1989), women’s identity, which is a vital part of the self, develops through childhood and then gets cut off starting at adolescence, due solely to the fact that one is female; this indicates that losing one’s self-esteem is a “normal” part of development for women. This assertion is appalling and frightening for the future of young women in America.

Further, self-esteem not only contributes to better mental health, it also affects young women’s decisions and actions. Prior research discovered that a loss of self esteem in young adult females can lead to either a loss of voice in one’s own opinions or an

increased tendency to act out. This rebellion can take many forms, including alcohol abuse, sexual promiscuousness, or criminal behavior (Gilligan & Brown, 1992, p. 5). These behaviors in young women represent some of the issues that social workers will address with their college aged female clients, and it is vital to know the source of some of these actions.

In addition, the issue of low self-esteem and the subsequent problems associated with it in young adult women is a rising trend in American culture. Feelings of low self-esteem for women who are coming of age can be devastating to their psychological growth and self-worth. Social work practitioners need to be aware of the effects of negative self-image on young women so that they can adequately develop intervention techniques that will address and help correct this problem. New treatments need to be made available for young women suffering from low self-esteem so that they can overcome this loss and define their own positive identities.

It is also important for social workers to understand the impact of historical context on one's overall self image and perception. In comparing and contrasting the self-esteem of today's young women with that of women at midlife, it will become apparent how culture and current events affect a young woman's burgeoning identity, and whether or not self-esteem is encouraged more today than in the past. This research will support taking a holistic view towards a client which will aid social workers in their interactions and assessments of young women clients.

In working with young women, social workers should understand the sources of their clients' issues. Because low self-esteem has a far reaching impact on young women's lives, it is crucial to know why this loss occurs. This issue of a negative self-

concept in females is very relevant to today's society and exploring its causes and effects more in-depth will provide useful knowledge to social workers so that they become better able to effectively help their young female clients.

Literature Review

Main Points

The current literature on self-esteem points to numerous contributing factors to the low self-esteem of young, college aged women. To start, contemporary American culture promotes the under development of positive self regard for women. Society's focus on physical attractiveness and body image is widely reviewed in previous literature. Grabe, Ward, and Hyde (2008, p. 460) reported that 50% of girls and undergraduate women stated being dissatisfied with their bodies. This unhappiness has serious consequences because it is linked to physical and mental health issues, such as Bulimia and poor self-esteem. Clark and Tiggemann (2008) also found that a negative body image is associated with a low self-concept for women, can be harmful to social functioning, and can lead to eating disorders (p. 1124). It is agreed that body dissatisfaction is one of the strongest predictors of subsequent eating disorders, low self-esteem, depression, and obesity (Grabe et al., 2008; Clark & Tiggeman, 2008).

Eating disorders, in particular, are both a consequence and contributor to poor self-esteem in women. Common eating disorders include Anorexia Nervosa, starvation of self, and Bulimia, bingeing and purging. These behaviors are aimed at eliminating body dissatisfaction when in reality, they ravage the body physically and mentally (Grabe et al., 2008). Eating disorders are a severe way to feel better about one's body and evidence shows that "body image disturbance prospectively predicts eating pathology" (Grabe et

al., 2008). Women who negatively evaluate their bodies are more at risk to engage in patterns of restrictive dieting and other eating disorders (Trampe, Stapel, & Siero, 2007, p. 106).

An even more drastic response to dealing with low self-esteem as a result of body dissatisfaction is the development of Body Dysmorphic Disorder (BDD). Grant and Phillips (2004) define a person with BDD as being “preoccupied with their appearance, thinking they look abnormal, ugly or deformed, when in fact they look normal.” Like Anorexia Nervosa, women who suffer from BDD are terrified of gaining weight, even if they are normal weight or underweight. This disorder encourages restricting food intake and excessive exercise, yet no remedy ever proves satisfactory to the sufferer who continues to feel overweight (Grant & Phillips, 2004). This disorder represents a severe illness for women who are intensely unhappy with their body size and experiencing an extremely low level of self-esteem.

One of the main forces in American culture that encourages women to view their physical selves as inadequate is the media. Images of unrealistically thin and attractive women are portrayed ubiquitously in Western culture. Cook-Cottone and Phelps (2003) argue that as women have gained more social status in politics and professions, the female ideal has become thinner and more impossible to achieve, thus creating feelings of discontent in young females. Through television, advertisements, and magazines, young women are bombarded with a physical standard that is largely unattainable (Trampe et al., 2007). For example, women on television are thinner today than they were in the past and these representations are aimed at young girls as a standard of beauty.

This thin ideal is overemphasized in the media and is consistently rewarded and encouraged through female characters. Other mediums, such as *Playboy* and the Miss America Pageant, also reinforce a young, lean, and attractive model as the perfect woman (Grabe et al., 2008). It was found that exposure to these images “instigates social comparison processes that typically have negative effects on self-evaluation” (Trampe et al., 2007, p. 106). Monder (2007) notes that books like *Our Bodies Ourselves* were landmarks in the active 1970’s that inspired women to be proud of themselves and their bodies, regardless of size and shape. Today’s women lack this type of motivation and are deluged with one thin body ideal.

Mental health in women is also found to be negatively affected by low self-esteem. Dickerson (2004) found that contemporary women face enormous pressure to adhere to certain life opportunities. More than ever, women have more options available to them, yet many experience these choices as expectations that place conflicting demands on their lives. Women are now taught that they can “have it all:” a great career, a satisfying personal life, and financial stability. However, women who are not able to achieve this ideal are left feeling unsuccessful and worthless. The consequences of these feelings are self-doubts and a sense of failure when a woman is not able to juggle everything (Dickerson, 2004, p. 338).

Women who experience low self-esteem see it as “reflective of a personal deficit” which leads to more self-doubt and makes women feel caught in a cycle of negativity (Dickerson, 2004, p. 340). Hancock (1989) also describes the almost universal experience for females growing up in the United States that involves “a loss of voice” and “a confidence gap” from childhood into adulthood. During this process, females undergo a

loss of identity that is vital to their understanding of themselves. Hancock (1989) acknowledges that, for seemingly no reason, females tend to experience and exhibit a poor self-concept through their actions and behaviors, as they age.

One of the behaviors that is an outcome of low self-esteem is sexual promiscuity and permissiveness. In prior research, it was found that “women are more likely to experience regrets of action” in terms of sexual decisions (Eshbaugh & Gute, 2008, p. 77). In order to feel wanted and better about themselves, some women engage in sexually dangerous actions, such as “hooking up,” to fill a personal void. “Hooking up” is defined as “a sexual encounter, usually lasting only one night, between two people who are strangers or brief acquaintances” and is a risky behavior (Paul, McManus & Hayes, 2000 as cited in Eshbaugh & Gute, 2008, p. 78). “Hooking up” can lead to contraction of a sexually transmitted disease (STD), for instance, Chlamydia. It is reported that in the United States, 6.3% of women between the ages of 15 to 24 have Chlamydia (Hardwick, McKay, & Ashem, 2007, p. 63). These STDs are painful and some, for example HIV, are incurable and chronic. The rise and prevalence of STDs is a serious problem and a result of low self-esteem in women who engage in this behavior in a misguided attempt to enhance their self-worth (Eshbaugh & Gute, 2008).

Low self-esteem contributes to hookups which have replaced long-term relationships on many college campuses. “Hooking up” serves to further lower a young female’s self-confidence, especially because women are “more likely to ruminate about a hookup and feel greater shame and self-doubt following the experience” whereas males are more apt to feel satisfied (Eshbaugh & Gute, 2008, p. 78). Hookups are significantly related to sexual regret among women: Eshbaugh and Gute (2008) found that 36% of

sexually active women had intercourse with someone once and only once, while 29% of sexually active women had intercourse with someone they only knew for 24 hours or less. These statistics denote a serious “hooking up” problem among women and represent the fact that many young females are choosing to participate in this hazardous behavior.

Another result of low self-esteem that women may turn to is alcohol abuse. The use of substances to “numb” one’s emotional stress can be related to sexual promiscuity and can aid these sexual actions. Lewis, Phillippi, and Neighbors (2007, p. 398) state that “prevalence rates for alcohol are highest among those in emerging adulthood, especially college students.” For young women, alcohol can be used as a way to escape the pressures and demands of everyday life.

One of the biggest drinking motives is to reduce or control negative emotions; in other words, drinking is used as a coping mechanism. However, the research also suggests that college students who have high self-esteem, particularly based on morals, engage in less drinking behaviors (Lewis et al., 2007, p. 400). This finding shows a direct link between self-esteem and alcohol use.

As compared to young women growing up in the 1960’s and 1970’s, females today have more opportunities and equality than generations past. However, the rights and gains that women have made over the past few decades did not translate into increased self-esteem for future women. It can be argued that current young women grew up in a time that was largely apathetic to women’s rights, in contrast to the activism of 30 or 40 years ago. Zucker and Stewart (2007) contend that people are influenced by the era in which they grow up and interpret it depending on what life span stage they are engaged in when events occur. Specifically, children during the women’s movement “absorbed

the ethos of the era subconsciously while individuals in the early adulthood stage have conscious ties to the event and are likely to report it as a very meaningful social phenomenon” (Zucker & Stewart, 2007, p. 137).

It is further discussed that women who were college-aged in the 1970’s grew up in the context of the changes and advances occurring for women and, therefore, developed basic expectations for gender that were rooted in equality in the workplace and at home (Zucker & Stewart, 2007, 138). McQuaide (1998) acknowledges the powerful effect of this idea on women who are presently at midlife and who came of age in the women’s rights era. These women tend to have a fairly positive self image at midlife as a result of their actions and behaviors as young adults.

Another difference between women at the end of the twentieth century and contemporary women pertains to body image. Monder (2007) discusses the rise of cosmetic surgeries in recent years as a way for women to stay young and adhere to the western standard of beauty. This trend was practically non-existent for the mainstream in the 1970’s, yet there has been an enormous increase in elective surgeries over the past three decades. The quest for perceived bodily perfection has taken on an increased importance for current young women which creates a superficial pressure on females and leads to a poor self-image when one does not measure up (Monder, 2007).

In contrast to the stifling and repressive 1950’s, the 1960’s were a revolt against classic gender roles and stereotypes. A publication like *The Feminine Mystique*, by Betty Friedan (1963), gave suburban women a voice and was a precursor to feminism (Carlson & Dionne, 1997). Women were becoming more educated and dissatisfied with their limited social positions and became a viable force for change in the last half of the

twentieth century. Certainly, the advent of the Vietnam War also provided a cause against which women fought and sparked a spirit of activism in the young adult population. Men and women alike rallied and protested with a general feeling that their actions could be fruitful and recognized, which spilled over into other avenues, such as feminism (Carlson & Dionne, 1997).

However, Dickerson (2004, p. 339) argues that “though many young women are told that they now have equal rights and opportunities, it is still difficult for women to translate their ways of knowing in all of those areas that have more traditionally belonged to men.” This sense of not measuring up can greatly contribute to a shortage of self-esteem in today’s young women. In addition, contemporary college-aged women lack the passion and drive to advocate for women’s rights that typified young women in the 1960’s and 1970’s. This apathy can make women feel “stuck” and isolated with their own plight, rather than part of a larger cause (Monder, 2007). Feelings of low self-esteem can result and plague a young woman’s life experience.

Opposing Points

Although there are many external reasons that may contribute to low self-esteem in college aged women, these factors are not directly related to the development of poor self-regard in all young females. In western society, the estimates for children who are unhappy with their body shape or size are as low as 28% (Ricciardelli & McCabe, 2001, as cited in Clark & Tiggemann, 2008, p. 1124). This percentage is indicative of how most body image issues do not arise in childhood. In addition, about 50% of undergraduate women reported feeling dissatisfied with their bodies and while this is not a small

percentage, it does mean that half of all young females are satisfied with their physical selves (Grabe, Hyde, & Ward, 2008, p. 460).

Also, eating disorders can develop as a result of low self-esteem, but they are not a common coping strategy for most women. Eating disorders can be caused by a number of factors, and it is noted that the sociocultural influences that produce eating issues in one individual and not in another are still not understood (Trampe, Siero, & Stapel, 2007, p. 106). The numbers for women struggling with eating disorders are not very high, either. In the United States, about one in 100 women suffer from Anorexia Nervosa while two to three women out of 100 are diagnosed with Bulimia Nervosa (“Eating Disorder Statistics,” 2006). These statistics do not suggest that the majority of young women are forced to turn to eating disorders as a result of low self-esteem. In reality, many women in college feel positively about their academic achievements, social experiences, and competence and are less likely to be dissatisfied with their bodies and, consequently, resort to eating disorders such as Anorexia Nervosa or Bulimia Nervosa (Cook-Cottone & Phelps, 2003, p. 82).

Another extreme example of a body image disorder is Body Dysmorphic Disorder (BDD), which is not a typical response to low self-esteem for the majority of women. In previous studies, it was reported that about 25% to 39% of young women with Anorexia Nervosa were also diagnosed with BDD; however, most women suffering from an eating disorder did not meet the criteria for BDD (Grant & Phillips, 2004, p. 125). Additionally, BDD has been more typically linked with Obsessive-Compulsive Disorder rather than eating disorders, because of the mirror checking or repetitive behaviors that tend to occur in one diagnosed with BDD (Grant & Phillips, 2004, p. 123). The link between BDD and

self-esteem has not been adequately researched and, therefore, does not have a strong connection.

It is often assumed that the media portrays an impossible-to-attain thin-ideal for a woman that negatively impacts the self-esteem development in young, adult women. Nevertheless, it can be stated that the media, including television, advertisements, and magazines, simply represents an ideal and not a standard of beauty. Trampe, Siero, and Stapel (2007) confirm the ideas of previous researchers who found that images of physically attractive women have a greater effect on some women than others which means that a number of women have no adverse reaction to the thin-ideal in the media (p. 106). In fact, “not every woman feels bad about herself after confrontation with an attractive target” but rather, it is a smaller, specific group of women who have an increased propensity to negatively self-evaluate (Trampe et al., 2007, p. 115).

In addition, past researchers who studied the effects of the media on women’s self-esteem, through correlational and longitudinal studies, have not been able to provide “unequivocal findings regarding the role of the media in women’s body image concerns” (Grabe et al., 2008, p. 461). Even though some women may be negatively affected by the ideals depicted in publications such as *Playboy* or the Miss America Pageant, a large number of young women continue to aspire to these images and exhibit no self-esteem crisis (Grabe et al., 2008). The fact that scores of women want to be viewed as sexually attractive and attempt to achieve the western standard of physical beauty proves that many young females do not have low self-perceptions.

The consequences that can be associated with low self-esteem in women cannot be solely attributed to one cause. For example, mental health issues are not exclusively

due to a self-esteem problem. Many young women grow up into healthy, self-assured young adults. Hancock (1989) notes that “a confident young woman is sometimes called a young woman’s authentic self” which means that a number of young females do not struggle with self-esteem. Even in this world of conflicting expectations and pressures for young women, healthy development, both physically and mentally, is possible. Dickerson (2004) admits that “women do appear to have many more opportunities available to them as an effect of the feminist movement” and numerous women are able to balance all of these new experiences (p. 338).

Self-doubt is not present for all young women. Contemporary women are now able to do much more than just get married and have children. Women can become financially stable, have a fulfilling career, create a vibrant social life, and choose where they want to live (Dickerson, 2004, p. 338). Women have many more choices than were previously available, and a positive self-image can develop from successfully juggling multiple tasks and increased opportunities.

Sexual promiscuity, another problem that can emerge from low self-esteem, is not wholly caused by a woman’s feelings about herself but can be a result of several factors. For example, a college-aged woman can freely choose to engage in “hooking up,” which is a casual sexual encounter, simply because she enjoys it. In an era of sexual permissiveness, particularly on college campuses, women are allowed to take pleasure in sexual activities and not feel ashamed of their sexual desires (Eshbaugh & Gute, 2008, p. 78). There is a general cultural trend toward shorter-term relationships rather than long-term relationships, and this societal norm allows women to experiment and explore their sexuality (Eshbaugh & Gute, 2008). Although some women do experience regret as a

result of their “hooking up” choices, researchers have found that oral sex hook-ups do not hold the same magnitude of regret as intercourse (Eshbaugh & Gute, 2008, p. 86).

Therefore, countless young women can engage in sexual behavior without feeling a sense of guilt or low self-esteem as a consequence.

It is true that there are risks associated with sexual permissiveness, including STDs and unwanted pregnancy. Nonetheless, women have more contraception and safe sex choices than in the past and can take control of their sexual practices. The use of condoms, oral contraceptives, a diaphragm, or numerous other forms of birth control can allow a young woman to make her own sexual choices in a safe manner (“Planned Parenthood,” 2008). Some researchers have found that women are taking responsibility for their sexual health, as well, since it is noted that 18.1% of females ask to be tested for Chlamydia on a doctor’s visit (Hardwick, McKay, & Ashem, 2007, p. 72). Having more control and options in one’s sexual life can inspire confidence and secure self-esteem in young women.

Alcohol abuse is another common result of low self-esteem. Research suggests that “college students who base their self-esteem more heavily on principles and moral beliefs are more likely to abstain from alcohol use and harmful drinking” (Luhtanen & Crocker, 2005, as cited in Lewis, Neighbors, & Phillippi, 2007, p. 398). These findings mean that there are well-adjusted college students who choose not to drink to feel better about themselves; rather, they rely on personal values and morals as the foundation for their self-esteem. Alcohol abuse can have copious other causes, as well. The most common motivations for consuming alcohol include drinking to make social occasions

more enjoyable or drinking to enhance a positive mood (Lewis et al., 2007, p. 398). These factors do not necessarily relate to self-esteem.

Even though college students may drink alcohol, this does not mean that all students abuse this substance. Also, while it is true that “alcohol prevalence rates are highest among those in emerging adulthood,” this statistic indicates both males and females (Lewis et al., 2007, p. 398). Therefore, consuming alcohol can be a problem for both sexes and is not a unique issue for young women and their self-esteem.

It can be argued that women who grew up in the active times of the 1960’s and 1970’s cultivated higher self-esteem as compared to contemporary young women who grew up in apathetic times. However, women of today certainly have more opportunities and equality than past generations. All of these rights could actually increase the self-esteem of young women because it is now believed that women can do almost as much as men in politics, occupations, and social arenas. It is true that women who came of age in the 1960’s and 1970’s have a different life perspective than contemporary young women. This is partly due to the fact that “events experienced in late adolescence and early adulthood are reflected in conscious identity, opportunities, and life choices” (Zucker & Stewart, 2007, p. 137). Women who grew up during the Vietnam War and the Feminist Movement experienced much more activism in their lives. This, in turn, helped to shape their world outlook and make them feel empowered. Still, it is clear that feminism did not “hold the same meanings for all women and has not affected them in the same ways” (Zucker & Stewart, 2007, p. 137). Even in this past era of civic protest and participation, women were not allowed to serve in the war and remained inferior to men in most public spheres.

Not all women in the 1960's and 1970's were feminists or activists, and these females did not gain self-esteem from campaign movements that opposed the war or supported women's rights. In fact, many of today's women feel a negative connotation with the term "feminism." Some females associate this term with a radical woman who detests men and exhibits reverse discrimination (Carlson & Dionne, 1997). Many women of this era, who are now at midlife, feel badly about themselves and struggle with self-esteem, despite the times in which they grew up. Women who are currently at midlife lived through the historical shift to a feminist self-view in adulthood, gained reproductive control, and worked outside of the home. Yet, many of these women continue to experience low self-esteem from physical changes, children leaving home, and facing their own mortality; they are not exempt from self-esteem crises simply because they grew up in a time that promoted women's rights (McQuaide, 1998, p. 21).

Although body images issues have increased over the years, women at the end of the twentieth century also sought to improve their physical appearance through artificial means as a way to feel better about themselves. Even as early as the 1890's, women wanted to change the shape of their noses because a too-small nose was associated with low social status (Monder, 2007, p. 384). Generally, women in the 1960's and 1970's may have accepted their bodies more readily, but elective surgeries still existed. Also, not all cosmetic surgeries are connected to issues of self-esteem. Some procedures are "important and healing; some are motivated by a wish to look better...some are motivated by a desire to please a lover, spouse, or even a physician" (Monder, 2007, p. 385). Women choose elective surgeries for various reasons that are not all related to self-esteem.

It may be true that young, college-aged women lack the passion and drive to advocate for women's rights that existed in women in the 1960's and 1970's, but this apathy does not necessarily translate into poor self-esteem. The increased opportunities for contemporary women can sometimes promote positive self-esteem, even more so than in the activist era toward the end of the twentieth century. Low self-esteem is not an absolute guarantee for any young female of today, especially not in a time that supports equal rights and opportunities for all (Dickerson, 2004).

Nonetheless, much of the previous research has revealed a persistent struggle with self-esteem for college-aged females. The problem in this study is the lack of self-esteem that plagues countless young women across America. The purpose of this study is to identify the causes of low self-esteem in college-aged, upper middle class women. It is clear from the prior research that young women in the 1960's and 1970's had significantly higher levels of self-esteem than do present-day college-aged females. There will be a comparison in self-esteem levels between contemporary young women and women who came of age during the 1960's and 1970's. In addition, the self-esteem level of women who are currently at midlife will be examined. Why do contemporary young women lack a solid self-esteem base and, subsequently feel more negative towards themselves, as compared to women who grew up in the 1960's and 1970's?

Methodology

Participants

This study sought to confirm and expand on previous literature which found that young women in the 1960's and 1970's had considerably higher levels of self-esteem than do contemporary college-aged females. The research question involved understanding the lack of self-esteem in contemporary college-aged women as compared

to women who came of age in the 1960's and 1970's. College-aged women were defined as any female currently between the ages of 17 and 23 while women at midlife was defined as any female currently aged 35 to 65.

This study included 51 participants, 29 of which were college-aged women and 22 of which were middle-aged women. The college-aged women were all enrolled college students in Rhode Island, with the majority of subjects being social work majors. The greater part of the college-aged sample were Caucasian and upper middle class women. The middle-aged women were a more diverse group and included numerous professions and geographic areas. Many were involved in the human service field as teachers, social workers, occupational therapists, and psychologists. Women in both groups were generally highly educated.

Data Gathering

A comparative, quantitative, and qualitative study was performed through the distribution of surveys to both groups of women. This survey incorporated twelve Likert scale questions based on a five point system with one as "strongly disagree" and five as "strongly agree." These questions addressed the females' perceptions of their self-esteem (see Appendix A). Questions one, two, three, four, six, eleven, and twelve were utilized from the Rosenberg Self-Esteem Scale (SES) (1965). In addition, there were three open-ended, qualitative questions that were aimed at comparing the self-esteem levels of college-aged women and women at midlife, as well as identifying how women currently at midlife felt about themselves when they were college-aged women. The open-ended questions also sought to identify the various factors that contributed to both groups of women's overall self-esteem levels. A consent form was provided to all participants and

signed prior to administration of the survey (see Appendix C). After each survey was completed, it was immediately placed face-down in a folder, separate from the consent forms, so that anonymity and confidentiality was maintained.

There were two versions of the survey, one for the college-aged women and one for the women at midlife, which were identical on the Likert scale questions and differed slightly in the wording for the three, open-ended questions. A combination of convenience and snowball sampling was used in selecting the sample. The survey was distributed around Providence College in classes, residence halls, and social areas, such as Raymond Café, to the college-aged women. The surveys were also given to Providence College female professors, employees at a regional Rhode Island community action agency, and staff members at a southern Massachusetts psychiatric hospital, who met the age criteria for women at midlife.

Data Analysis

A one-way ANOVA test was performed to show descriptive statistics and means of the quantitative data. Means graphs were generated to give a visual representation of how both age groupings compared on each question. The qualitative data was analyzed by picking out common themes among the surveys. Quotes were also extracted to provide a richer picture of the data.

Results

The questions investigated in this study were: What is the comparison in self-esteem levels between contemporary young women and women who came of age during the 1960's and 1970's; What is the self-esteem level of women who are currently at

midlife and; Why do contemporary young women lack self-esteem as compared to women who grew up in the 1960's and 1970's?

In regards to the first and second question, college-aged women tended to self-report moderate to good levels of self-esteem, but women at midlife generally reported higher levels of self-esteem on most questions. College-aged women scored higher than women at midlife on having a positive attitude toward themselves and being satisfied with their physical appearance, but only the difference between perception of physical appearance was significant ($F(4,276) = 5.858, p < .05$). Table 1 illustrates the significance between the two groups. Even though there are 29 college-aged women

Table 1 – Physical Appearance ANOVA

		Sum of Squares	df	Mean Square	F	Sig.
Physical Appearance	Between Groups	4.276	1	4.276	5.858	.019
	Within Groups	35.763	49	.730		
	Total	40.039	50			

as compared to 22 middle-aged women in the sample, this is not a large enough difference to create a major problem in analyzing the data.

Conversely, college-aged women scored lower than middle-aged women on every other question, but the only two that were significant were about feeling no good at all and engaging in casual sexual encounters. College-aged women were much more likely to report sometimes feeling no good at all as opposed to middle-aged women. In addition, casual sexual encounters were more common among the younger women. Table 2 displays these statistics. Even though women at midlife tended to have slightly

Table 2 – Feeling No Good at All and Sexual Encounters ANOVA

		Sum of Squares	df	Mean Square	F	Sig.
No Good (r)	Between Groups	6.617	1	6.617	5.371	.025
	Within Groups	60.364	49	1.232		
	Total	66.980	50			
Sexual Encounters (r)	Between Groups	12.825	1	12.825	16.320	.000
	Within Groups	38.508	49	.786		

higher current levels of self-esteem, both groups of women reported relatively secure self-confidence.

However, the qualitative data revealed a more complete picture of each group of women's overall self-esteem level. The common themes that emerged from the data that impacted low self-esteem in both age groupings included pressure from the media, body issues, romantic relationship concerns, and peer relationships and comparison. One respondent stated, "It's hard to feel good about myself with school, work, and life interfering." In addition, women who came of age during the 1960's and 1970's also described feeling very unsure of themselves when they were college-aged. Women currently at midlife reported many of the same external factors as negatively influencing their self-esteem when they were college-aged women. One midlife participant described in college feeling, "painfully self-conscious and convinced of general inferiority compared to others." On the whole, women who are currently college-aged and women who came of age during the 1960's and 1970's reported having varying and inconsistent levels of self-esteem in their early 20's. A college-aged woman wrote "I don't feel like I have high or low self-esteem. Depending on the day, I may feel really good or bad about myself."

A typical response from a college-aged woman about the external factors that influence her self-esteem sounded much like the following: "Boyfriends/boys I date or hook up with, my parents, my friends and roommates, my bank account (or lack thereof)

all influence my self-esteem.” Another young woman detailed the peer pressure she feels by stating “basically other girls, what they look like, if they look confident, affects my self-esteem.” Middle-aged women cited many of the same issues that shape self-esteem as the college-aged women, but they did not usually list as many external factors as the younger group. One popular midlife example involved the “idealization of the thin ‘Twiggy’ model in the 1960’s and the pressure of so many beautiful, young women around [her] in college.”

The overall self-esteem level of women currently at midlife was consistently high from the qualitative responses. Many women reported having a relationship, career, and self-satisfaction that is much higher than it was in college. One respondent stated, “Generally I have a healthy amount of self-esteem now, which I attribute to years of experience and broadening of my perspective in life.” Another woman said, “I have much, much more self-esteem; I have learned that the world is not so black, that grey is a wonderful color.” Mostly, the women at midlife reported feeling much less pressure from peers or the media to fit into a certain mold than they felt as younger women.

Almost universally, college-aged women stated that they thought they would gain more self-esteem as they aged. Most discussed feeling more comfortable with themselves physically and socially as key factors in gaining self-esteem. Only a few reported worrying about physical deterioration and a subsequent lowering of self-esteem. One woman said “I will have more self-esteem because I will have more experience and knowledge.” Another young woman stated, “I will have more; my mom always said that you eventually stop caring about what other people think.”

Conclusion

Based on prior research and the stated hypothesis, the main problem examined in this study was the perceived lack of self-esteem in college-aged women in contrast with women who grew up in a different era, specifically the 1960's and 1970's. However, much of the findings in this study contradicted earlier literature. In terms of analyzing why contemporary young women seem to lack self-esteem as compared to women who grew up in the 1960's and 1970's, this did not prove to be true from this data. In fact, while both groups of women reported fairly good self-esteem in the quantitative questions, the qualitative responses revealed overall conflicting feelings of self-esteem throughout the college years. This inconsistent self-esteem stemmed mostly from relationship, peer, and social issues in both age groups. The college-aged women typically listed more external factors that influenced their self-esteem, which may indicate the greater load of responsibilities that contemporary women are expected to handle.

Also, college-aged women were significantly more likely to participate in casual sexual activities, including hook-ups and one night stands, which can indicate a coping mechanism for dealing with low self-esteem. However, this survey did not address the incidence of casual sexual encounters in the women at midlife when they were college-aged. Almost all of the midlife women respondents were currently married which most likely accounts for the low occurrence of casual sexual encounters in this grouping. Therefore, casual sexual encounters may have occurred within this age group during their college years, as well.

One interesting result of the findings was the question about satisfaction with physical appearance on which college women scored significantly higher than women at midlife. Although women in college tended to negatively compare themselves frequently with their peers, most responded positively about physical appearance on the quantitative part of the questionnaire. In contrast, many women at midlife reported declining satisfaction with their physical appearance over time. However, because college-aged women generally reported lower overall self-esteem levels, this finding suggests that physical appearance is not highly correlated with general self-esteem. Nonetheless, many college-aged women still wrote about feeling less attractive than their peers as a factor that does in fact influence their self-esteem.

The qualitative data also indicated that women at midlife did not seem to have higher levels of self-esteem when they were in college than contemporary young women. Few respondents mentioned the political activity of the era as a positive boost to their self-confidence. However, this apparent struggle with self-esteem while in college may be due to the fact that these women have had the time and perspective to reflect on their college years with brutal honesty. Time may have provided clarity on their previous feelings towards themselves, especially as compared to the present era in which most of these women feel secure and confident. College-aged women have not yet had the time or ability to contrast their current self-esteem with the future. It may be concluded that while a plethora of external factors affect a woman's self-esteem, political activity is not a top influence. Rather, personal issues seem to affect a woman more, such as relationships and friends.

The survey associated with this study supplied a rich picture of each woman's general self-esteem. The combination of quantitative and qualitative data allowed for an analysis of numbers as well as an interpretation of each woman's unique words and life experiences. The women were very honest on this survey and many wrote about their feelings in a very detailed, open, and candid manner.

Still, the study had its limitations. Some of the wording on the survey for the women at midlife was confusing and may have hindered certain respondents. The question about describing one's self-esteem as a college-aged woman could be interpreted as only intended for women currently in college; however, this was not the meaning of the question as it was meant to read "please describe your self-esteem when you were a college-aged woman." Also, the three open-ended questions seemed to hinder the process by deterring some potential respondents from taking the time to participate.

The small sample size of the study limits the generalizability of the data, as well. It was difficult to recruit the women at midlife and though the survey was distributed in many places, there was typically a less than 50% response rate. In addition, this study could be more conclusive as a longitudinal study rather than a cross-sectional report. Being able to follow a few specific college-aged women into midlife could be extremely informative in terms of how their self-esteem changes over the life span. With more time and resources, a longitudinal approach may possibly be very revealing about women's changing self-esteem with age.

This study provides some different findings from prior research about contemporary women and self-esteem and can still provide useful information for social work practice. The piece about college women and casual sexual encounters is

concerning for social work practitioners dealing with young adults in a counseling or health setting. School and medical social workers need to be aware of the high occurrence of sexual activity among college women, with particular attention paid to the risk of STDs or unwanted pregnancies. Greater education about safe sexual practices and prevention should be available on all college campuses.

It is clear from this data that further research is necessary to support or refute the findings. A larger sample size would contribute to better reliability and more substantial results. Rather than comparing the self-esteem of women at various ages, it may be more beneficial to focus on improving the overall self-esteem of all women. Most women reported generally high but inconsistent self-esteem, particularly younger women. It is important to continue to identify external factors that contribute to a woman's self-esteem in order to learn how to stabilize and increase women's self-concept.

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Appendix A Questionnaire

AGE _____

Please circle the choice that best describes your thinking.

1.) I take a positive attitude toward myself.

1-----2-----3-----4-----5
Strongly Disagree Neutral Agree Strongly
Disagree Agree

2.) I feel that I have a number of good qualities.

1-----2-----3-----4-----5
Strongly Disagree Neutral Agree Strongly
Disagree Agree

3.) At times I think I am no good at all.

1-----2-----3-----4-----5
Strongly Disagree Neutral Agree Strongly
Disagree Agree

4.) All in all, I am inclined to feel that I am a failure.

1-----2-----3-----4-----5
Strongly Disagree Neutral Agree Strongly
Disagree Agree

5.) I feel that I am able to balance all of my responsibilities.

1-----2-----3-----4-----5
Strongly Disagree Neutral Agree Strongly
Disagree Agree

6.) Overall, I am satisfied with my physical appearance.

1-----2-----3-----4-----5
Strongly Disagree Neutral Agree Strongly
Disagree Agree

7.) When I am upset, I turn to drugs or alcohol for comfort.

1-----2-----3-----4-----5
Strongly Disagree Neutral Agree Strongly

Disagree

Agree

8.) The media makes me feel like I don't measure up to society's ideal standards.

1-----2-----3-----4-----5
 Strongly Disagree Neutral Agree Strongly
 Disagree Agree

9.) I starve myself or overeat when I feel bad.

1-----2-----3-----4-----5
 Strongly Disagree Neutral Agree Strongly
 Disagree Agree

10.) I engage in casual sexual encounters.

1-----2-----3-----4-----5
 Strongly Disagree Neutral Agree Strongly
 Disagree Agree

11.) I feel that I am a person of worth, at least on an equal plane with others.

1-----2-----3-----4-----5
 Strongly Disagree Neutral Agree Strongly
 Disagree Agree

12.) On the whole, I am satisfied with myself.

1-----2-----3-----4-----5
 Strongly Disagree Neutral Agree Strongly
 Disagree Agree

Please write out answers to the following questions.

1) Please describe your self-esteem now.

2) What external factors (if any) influence your feelings about yourself as a college-age woman?

3) Do you expect to have more or less self-esteem as you move toward middle-age? Please explain.

Thank you for your participation.

Appendix B
Questionnaire

AGE: _____

MARITAL STATUS (please check one): _____ Married _____ Single _____ Divorced
_____ Widowed _____ Domestic Partnership

OCCUPATION: _____

Please circle the choice that best describes your thinking.

1.) I take a positive attitude toward myself.

1-----2-----3-----4-----5
Strongly Disagree Neutral Agree Strongly
Disagree Disagree Agree Agree

2.) I feel that I have a number of good qualities.

1-----2-----3-----4-----5
Strongly Disagree Neutral Agree Strongly
Disagree Disagree Agree Agree

3.) At times I think I am no good at all.

1-----2-----3-----4-----5
Strongly Disagree Neutral Agree Strongly
Disagree Disagree Agree Agree

4.) All in all, I am inclined to feel that I am a failure.

1-----2-----3-----4-----5
Strongly Disagree Neutral Agree Strongly
Disagree Disagree Agree Agree

5.) I feel that I am able to balance all of my responsibilities.

1-----2-----3-----4-----5
Strongly Disagree Neutral Agree Strongly
Disagree Disagree Agree Agree

6.) Overall, I am satisfied with my physical appearance.

1-----2-----3-----4-----5
Strongly Disagree Neutral Agree Strongly
Disagree Disagree Agree Agree

7.) When I am upset, I turn to drugs or alcohol for comfort.

1-----2-----3-----4-----5
 Strongly Disagree Neutral Agree Strongly
 Disagree Agree

8.) The media makes me feel like I don't measure up to society's ideal standards.

1-----2-----3-----4-----5
 Strongly Disagree Neutral Agree Strongly
 Disagree Agree

9.) I starve myself or overeat when I feel bad.

1-----2-----3-----4-----5
 Strongly Disagree Neutral Agree Strongly
 Disagree Agree

10.) I engage in casual sexual encounters.

1-----2-----3-----4-----5
 Strongly Disagree Neutral Agree Strongly
 Disagree Agree

11.) I feel that I am a person of worth, at least on an equal plane with others.

1-----2-----3-----4-----5
 Strongly Disagree Neutral Agree Strongly
 Disagree Agree

12.) On the whole, I am satisfied with myself.

1-----2-----3-----4-----5
 Strongly Disagree Neutral Agree Strongly
 Disagree Agree

Please write-out answers to the following questions.

1.) Describe your self-esteem as a college-aged woman.

Appendix C

Dear Potential Participant:

I am a senior social work student at Providence College, inviting you to participate in a study about self-esteem in women on college campuses and at midlife. Data gathered in this study will be reported in a professional thesis paper for my SWK 489 Theory/Practice Capstone course.

At the present time, college students, working and non-working women are being recruited for this study. Participation will involve filling out an anonymous survey. This survey will be completely confidential.

Confidentiality is imperative in this study. The surveys will be stored separately from this consent form. All data linked to an individual will be destroyed following this study. Participation in this study is voluntary and you may withdraw from answering any questions or participating in this study at any time. It is important to know that your participation is greatly appreciated.

YOUR SIGNATURE INDICATES THAT YOU HAVE READ AND UNDERSTOOD THE INFORMATION ABOVE AND THAT YOU HAVE HAD THE OPPORTUNITY TO ASK ANY QUESTIONS ABOUT THE STUDY, YOUR PARTICIPATION, AND YOUR RIGHTS AND THAT YOU AGREE TO PARTICIPATE IN THIS STUDY.

Thank you for your cooperation and participation in this study.

Audrey Fritton '09
afritton@providence.edu

(Signature)

(Date)

