Consequences of Self-Objectification and Body Discrepancies

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Introduction

- Disordered eating continues to be a significant health concern for college women. Recent research shows it is on the rise among men.
- Media depictions of female attractiveness and interpersonal encounters that sexually objectify the female body adversely affect women’s perceptions of their own bodies by creating an unrealistic body ideal (Calogero et al., 2010). This unrealistic ideal contributes to the development of a discrepancy between what one’s body is actually like relative to the ideal, which increases risk for body shame.
- Objectification theory (Fredrickson & Roberts, 1997) states that valuing one’s body for appearance rather than performance is associated with a range of negative psychological and physical outcomes (Bスキル, 1997).
- Self-objectification is the process of chronically monitoring oneself in terms of how others would evaluate appearance, and to see oneself as an object (e.g., self-objectify) (Fredrickson & Roberts, 1997). Self-objectification is associated with increased body shame and disordered eating behaviors in women.
- With growing emphasis on male physique in the media, men may experience similar negative outcomes as women, such as self-objectification, body image discrepancies, body shame, and disordered eating but research has not really examined these associations.
- The purpose of this study was to examine whether self-objectification, body discrepancies, and body shame are associated with disordered eating for both males and females.

Hypotheses

- Hypothesis #1: Males and females will report significantly different mean scores on measures of disordered eating, self-objectification, and body shame, as well as show notable body discrepancies.
- Hypothesis #2: Body shame and body discrepancies will be positively associated with disordered eating behavior, above and beyond the effects of self-objectification for both males and females.

Method

Participants
- An online survey was distributed to 87 male and 249 female students. (N = 336). Ages ranged from 18-66. Participants self-identified 95.2% White/Caucasian, 2.4% both Asian American and Native American, 1% Hispanic/Latino, 0.6% African American and 0.3% both Indian and Hmong.

Procedure
- Participants were invited through email and the SONA system from the University of Wisconsin-Eau Claire, as well as through a Facebook event to complete a 20-minute survey. The 82-item online questionnaire inquired about participant gender, age, body image, disordered eating, and perceptions of attractiveness of themselves and the opposite sex. Participants were also asked to respond to questions using accompanied male and female target visual stimuli as reference.

Results

Figure 1. Predictors of Disordered Eating in Females

Figure 2. Predictors of Disordered Eating in Males

Hypothesis #1 was supported across all variables.
- Body image discrepancies were found such that male participants desire to have less body fatness (M = -0.52, SD = 0.62) and a higher muscle mass (M = 2.01, SD = 1.22). Female participants desired less body fatness (M = -1.29, SD = 1.01) and larger breast size (M = 0.36, SD = 0.81).
- Significant gender differences were found on the surveillance scale, F (1, 332) = 17.00, p < .001, indicating females engaged in habitual body monitoring to a greater degree than males.
- Females reported significantly more body shame compared to males, F (1, 332) = 20.57, p = <.001.
- Disordered eating mean scores did significantly differ between males and females, F (1, 332) = 32.67, p < .001.

Hypothesis #2 was supported.
- A hierarchical linear regression controlling for age was conducted separately for males and females. Age was entered in step 1, surveillance was entered in step 2, and the body shame and body discrepancy scores were entered in step 3. The full model was significant for males, F (5, 86) = 12.76, p < .01, as well as for females, F (4, 248) = 62.04, p < .01 (see Figures 1 & 2).

Discussion & Implications

- Significant gender differences were found such that females engage in habitual body monitoring more so than males. They also experienced higher levels of body shame and disordered eating than males. However, males also reported concerning levels of surveillance, body shame, and disordered eating.
- The results from this study support the objectification theory’s prediction valuing one’s body for appearance rather than performance is associated with experiencing negative body discrepancies, body shame, and disordered eating.
- Limitations to this study include the homogenous sample, and use of self-report measures.
- Previous research suggests that females experience negative mental health consequences behaviors as a result of self-objectification; this study expands the theory by offering evidence it is also valid for males.

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