Self-Objectification Among Physically Active Women

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Objectification Theory (Fredrickson & Roberts, 1997) was used to examine (a) the mediation effects of body shame and flow on the relationship between self-objectification and disordered eating, (b) age differences in self-objectification, body shame, flow, and disordered eating, (c) the prediction of physical activity from self-objectification, flow, body shame, and disordered eating, and (d) the relationships between self-objectification, flow, and physical activity. Participants were 394 women ages 18–64. Results revealed that (a) body shame mediated the relationship between self-objectification and disordered eating, (b) younger women reported higher levels of self-objectification, body shame, dieting, and several flow characteristics, (c) older women scored higher on the loss of self-consciousness subscale of the flow measure, and (d) self-objectification was a significant predictor of physical activity.

KEY WORDS: self-objectification; body image; disordered eating.

What impact does living in a culture that treats the female body as an object for consumption have on girls and women? Research has suggested that girls and women are negatively impacted by the constant onslaught of cultural messages that imply that the female body is a public domain for all to evaluate and “consume” (Bordo, 1993; Cusumano & Thompson, 1997). One consequence of living in a society that objectifies the female body is that girls and women are socialized to self-objectify (i.e., to internalize an observer’s view of one’s own body) (Fredrickson & Roberts, 1997). That is, girls and women learn to view their own bodies as objects.

Several researchers have examined the psychological and behavioral impact that self-objectification can have on women (e.g., Fredrickson & Roberts, 1997; Gapinski, Brownell, & LaFrance, 2003; McKinley & Hyde, 1996; Roberts & Gettman, 2004). Fredrickson and Roberts (1997) proposed Objectification Theory as a feminist sociocultural model to conceptualize experiences unique to girls and women and related mental health issues that result from self-objectification. Self-objectification is hypothesized to have several psychological consequences in the lives of women, including (a) increased body shame, (b) increased appearance anxiety, (c) decreased experiences of flow states (i.e., being totally absorbed in an activity), and (d) decreased sensitivity to internal bodily cues. Subsequently, these psychological consequences can put women at risk for experiencing certain mental health dysfunction such as disordered eating, which was the focus of the present study. The overall aim of the present study was to examine disordered eating symptomology among two age groups of physically active women using the self-objectification, body shame, dieting, flow, and disordered eating components of the Objectification Theory framework.

To date, several aspects of Objectification Theory have been well tested. The hypothesized relationships between self-objectification, body shame, and disordered eating, for example, have been supported by the results of several studies (e.g., Fredrickson, Roberts, Noll, Quinn, & Twenge, 1998; McKinley, 1999; McKinley & Hyde, 1996; Noll & Fredrickson, 1998; Tiggemann & Slater, 2001).
Specifically, findings have indicated that women who report higher levels of self-objectification also report increased body shame, as well as more disordered eating symptomology. Results have demonstrated both a direct (Muehlenkamp & Saris-Baglama, 2002; Noll & Fredrickson, 1998) and a mediated (Noll & Fredrickson, 1998; Slater & Tiggemann, 2002) relationship between self-objectification and disordered eating. Body shame, in particular, has been found to mediate this relationship (Noll & Fredrickson, 1998; Slater & Tiggemann, 2002). Given that these components of Objectification Theory have been supported in previous research, they were utilized in the present study.

Based on previous research, I also included the flow component of the model, which has yet to be well studied or understood within the Objectification Theory framework. Flow is often described as the feeling of being “in the zone” and is an intrinsically motivating experience. Csikszentmihaly (1990) and others (Jackson & Csikszentmihaly, 1999) have outlined 9 characteristics of flow experiences, including (a) a balance between the perceived challenge of the situation and the skill possessed to meet that challenge, (b) a merging of action and awareness, (c) having clear goals, (d) receiving unambiguous feedback, (e) concentration on task at hand, (f) a sense of control, (g) a loss of self-consciousness, (h) transformation of time, and (i) an autotelic (i.e., intrinsically motivating) experience (see Csikszentmihaly, 1990, or Jackson & Csikszentmihaly, 1999, for more information on the characteristics of flow). One of the key elements of flow, and the one most relevant to the present study, is the loss of self-consciousness or self-awareness that results from being totally absorbed in the activity at hand. Fredrickson and Roberts (1997) suggested that self-objectification increases one’s awareness of the self and how others perceive the self, thus creating a heightened self-consciousness and reducing flow experiences. In one of the few studies that has included flow in the Objectification Theory model, Tiggemann and Slater (2001) found a significant negative relationship between self-surveillance, a construct similar to self-objectification, and flow among former dancers. Former dancers who experienced higher levels of self-objectification were less likely to report flow experiences. Thus, there is initial evidence to support flow as an important construct in the Objectification Theory model. The study of flow experiences seems particularly relevant for sport and exercise research. Numerous researchers have found that athletes and exercisers report experiencing flow while engaged in their sport or physical activity (Jackson & Csikszentmihalyi, 1999). The flow component was therefore included in the Objectification Theory model in the present study in order to expand on previous research.

A unique component of Fredrickson and Roberts’ (1997) conceptual framework is that it also offers implications across the lifespan of women. They suggested that during midlife women have the chance to move out of the “objectification limelight” and reclaim an inner connection with their bodies. During midlife women may encounter situations or environments in which they feel less pressure to conform to societal ideals of beauty, and thus have the opportunity to distance themselves from objectification and subsequently experience fewer of the negative psychological consequences of self-objectification (Fredrickson & Roberts, 1997). Some research support for this hypothesis exists as Tiggemann and Lynch (2001) and McKinley (1999) have found that younger women report higher levels of self-objectification and self-surveillance than do older women. Related research has also provided some support for the contention that middle-aged women report fewer body image-related concerns than do college age women, which may suggest less self-objectification (Cash, Winstead, & Janda, 1986; Pliner, Chaiken, & Flett, 1990). However, other research has failed to demonstrate the negative relationship between body concerns and age (Altabe & Thompson, 1993; Ben-Tovim & Walker, 1994; Davis & Cowles, 1991; Garner, 1997; Rozin & Fallon, 1988; Tiggemann & Lynch, 2001).

Similar to the unclear relationship between age and body concerns, there are inconsistent findings with regard to age differences in disordered eating symptomology. Some research has indicated that disordered eating symptomology does not differ between younger and older women (Rand & Kulda, 1991; Rozin & Fallon, 1988), yet Tiggemann and Lynch (2001) found that older women reported less disordered eating than did younger women. In fact, Tiggemann and Lynch (2001) found that self-objectification mediated the relationship between age and disordered eating. Thus, as Objectification Theory posits and initial research has suggested, it may be that the key factor that influences body concerns and disordered eating is the extent to which women self-objectify rather than age per se. Age differences were therefore examined in the present study to explore this possibility.