



Self-objectification, body shame, and disordered eating: Testing a core mediational model of objectification theory among White, Black, and Hispanic women



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ABSTRACT

Objectification theory asserts that self-objectification, which manifests as self-surveillance, leads to increased body shame and subsequent eating pathology. Although evidence supports the core mediational model, the majority of this work utilizes primarily White samples, limiting generalizability to other ethnic groups. The current study examined whether the core tenets of objectification theory generalize to Black and Hispanic women. Participants were 880 college women from the United States (71.7% White, 15.1% Hispanic, 13.2% Black) who completed self-report measures of self-surveillance, body shame, and disordered eating. Multivariate analysis of variance tests indicated lower levels of self-surveillance and disordered eating among Black women. Moreover, body shame mediated the relationship between self-surveillance and disordered eating for White and Hispanic women, but not for Black women. These analyses support growing evidence for the role of body shame as a mediator between body surveillance and eating pathology, but only for women in certain ethnic groups.

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1. Introduction

Although cultural myths about eating disorders assert that these concerns occur among upper class White girls (National Institute of Mental Health, 2014), research indicates that women from diverse racial and cultural backgrounds are susceptible to these distressing and debilitating disorders (Grabe & Hyde, 2006; Roberts, Cash, Feingold, & Johnson, 2006). Indeed, data suggest that disordered eating among Hispanic and White women may occur at comparable rates, while levels of disordered eating among Black women may be only marginally lower (Grabe & Hyde, 2006; Shaw, Ramirez, Trost, Randall, & Stice, 2004). As the majority of research examining eating disorder etiological processes has utilized primarily White samples (e.g., Calogero, 2009; Tylka & Hill, 2004), investigators

have sought to examine the generalizability of validated etiological models among women from diverse ethnic backgrounds. Although findings are varied, this work suggests possible ethnic differences in proposed risk factors including thin-ideal internalization, body dissatisfaction, and social comparison (Alegria et al., 2007; Fitzsimmons & Bardone-Cone, 2011; Schaefer, Thibodaux, Krenik, Arnold, & Thompson, 2015; Wildes, Emery, & Simons, 2001). Given evidence that disordered eating and associated risk factors may vary across ethnicity, continued investigation of proposed etiological processes among women from diverse ethnic backgrounds may shed light on potential shared or distinct etiological mechanisms.

Objectification theory (Fredrickson & Roberts, 1997) is a contemporary framework that offers a sociocultural perspective on the development and maintenance of mental health risks in women. The theory proposes that women in Western societies are commonly sexually objectified across interpersonal situations (Macmillan, Nierobisz, & Welsh, 2000; Swim, Hyers, Cohen, & Ferguson, 2001) and media-based encounters (Aubrey & Frisby, 2011; Reichert & Carpenter, 2004). Exam-

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ples of sexually-objectifying situations include leering, sexually suggestive comments, sexual assault, and exposure to hypersexualized media images of women. Over time, women who encounter recurrent sexual objectification come to view themselves as objects rather than subjects, prioritizing their external appearance over their internal experience, a perspective known as self-objectification. The adoption of this external vantage point on the self is theorized to manifest behaviorally in the habitual monitoring of one's appearance, known as self-surveillance.² This continual monitoring of one's appearance is then theorized to lead to increased body shame when women perceive their bodies as discrepant with feminine beauty ideals (Calogero, Boroughs, & Thompson, 2007; Moradi & Huang, 2008). Objectification theory posits that disordered eating, as well as depression and sexual dysfunction, may emerge as women seek to minimize body shame by managing how their bodies appear to others (Fredrickson & Roberts, 1997).

Existing experimental and correlational research largely supports the proposed associations between self-objectification and its behavioral manifestation self-surveillance, body shame, and disordered eating (Calogero, Tantleff-Dunn, & Thompson, 2011; Moradi & Huang, 2008; Tiggemann, 2013). In particular, there is considerable support for the core mediational model proposed by objectification theory, wherein body shame mediates the association between self-objectification and eating pathology (Calogero, 2009; Calogero, Davis, & Thompson, 2005; Dakanalis et al., 2015; Fredrickson, Roberts, Noll, Quinn, & Twenge, 1998; Tiggemann & Williams, 2012; Tylka & Hill, 2004). Yet, the generalizability of this research to diverse groups of women is limited, as the predominant focus has been on White women (Moradi & Huang, 2008). Fredrickson and Roberts (1997) argue that despite women's shared vulnerability to sexual objectification by virtue of possessing a mature female body, ethnicity may influence one's experiences of sexual objectification and the impact of those experiences on one's own self-concept or behavior. For example, experiences of sexual objectification among Black women may be shaped in part by particular racist ideologies and stereotypes that do not apply to White women, and therefore may produce different responses in terms of self-objectification, body shame, and disordered eating (Watson, Robinson, Dispenza, & Nazari, 2012). Indeed, although existing research supports the salience of objectification processes (e.g., self-objectification, self-surveillance, body shame) in women of diverse backgrounds, there is also suggestion that ethnicity may influence these processes and their impact (Breitkopf, Littleton, & Berenson, 2007; Fitzsimmons & Bardone-Cone, 2011; Hebl, King, & Lin, 2004).

A growing body of work has examined self-objectification experiences among Hispanic women, with findings yielding somewhat inconsistent results. Some studies suggest higher levels of objectification processes among Hispanic women compared to women from other ethnic backgrounds (Hebl et al., 2004), while other studies suggest comparable (Boie, Lopez, & Sass, 2013) or even lower levels of objectification processes among Hispanic women (Breitkopf et al., 2007). For example, within an experimental paradigm in which men and women were either exposed to an objectifying experience (i.e., wearing a swimsuit) or a

non-objectifying experience (i.e., wearing a sweater), Hispanic participants reported higher levels of self-objectification and body shame compared to White, Black, and Asian American participants, regardless of the experimental condition (Hebl et al., 2004). Conversely, among a sample of low-income women, Hispanic and Black women reported similarly reduced levels of self-surveillance compared to White women, and no ethnic group differences were observed for body shame (Breitkopf et al., 2007). Finally, among a sample of college women, Hispanic and White respondents were found to report comparable levels of self-surveillance and body shame (Boie et al., 2013). Despite possible differences in levels of self-surveillance and body shame, researchers examining the proposed pathways between self-surveillance, body shame, and disordered eating, provide consistent support for objectification theory's core mediational model among Hispanic women (Boie et al., 2013; Montes de Oca 2006; Velez, Campos, & Moradi, 2015).

Research examining objectification theory among Black women presents a similarly complex picture. Although a number of cross-sectional studies suggest lower levels of self-surveillance (e.g., Breitkopf et al., 2007; Moradi & Huang, 2008) and body shame (e.g., Higgins, Lin, Alvarez, & Bardone-Cone, 2015) among Black women compared with White women, some studies suggest equivalent levels of self-surveillance (e.g., Fitzsimmons & Bardone-Cone, 2011; Watson, Matheny, Gagné, Brack, & Ancis, 2013) and body shame (e.g., Breitkopf et al., 2007) among these groups. Studies examining the pathways proposed by objectification theory have demonstrated support for the hypothesized connection between body surveillance and body shame (e.g., Buchanan, Fischer, Tokar, & Yoder, 2008; Watson et al., 2012) and between body shame and disordered eating symptoms (e.g., Higgins et al., 2015), though some research suggests that the connection between self-surveillance and disordered eating may not be supported in Black women (e.g., Fitzsimmons & Bardone-Cone, 2011).

In sum, research consistently supports a core mediational model whereby the relationship between self-objectification and disordered eating is mediated by body shame within predominantly White samples (e.g., Calogero et al., 2005; Tylka & Hill, 2004). Although an admirable body of work has been conducted to examine objectification among women of diverse ethnic backgrounds, results have been somewhat equivocal, and no study to date has utilized multigroup modeling to examine the core objectification model among White, Black, and Hispanic women within the same analysis. Multigroup analyses represent an important contribution to the existing literature in that this approach allows for direct comparisons of model pathways between ethnic groups. Therefore, the goal of the current study was to (a) examine differences in levels of self-surveillance, body shame, and disordered eating among White, Hispanic, and Black women; (b) compare the strength of model pathways among each group; and (c) test body shame as a mediator of the relationship between self-surveillance and disordered eating within each ethnic group. In light of existing work, body shame was hypothesized to operate as a mediator for White and Hispanic women, but not for Black women.

2. Method

2.1. Participants

Participants were 880 female college students from a university in the southern United States who self-identified as White ($n = 631$, 71.7%), Hispanic ($n = 133$, 15.1%), or Black ($n = 116$, 13.2%). Mean participant body mass index (BMI; kg/m^2) in the overall sample was 24.27 ($SD = 5.56$). Participants ranged from 19 to 55 years old, with a mean age of 21.19 years ($SD = 4.57$).

² Although the terms self-objectification and self-surveillance (i.e., body surveillance) are sometimes used interchangeably in the literature and are theorized to represent the same underlying psychological processes, researchers have noted their potential distinctiveness (Calogero, 2011). In order to maintain clarity and precision in our discussion of the extant literature, we utilize the term self-objectification when referring to studies utilizing the Self-Objectification Questionnaire (Noll & Fredrickson, 1998) and the term self-surveillance when referring to studies utilizing the Surveillance subscale of the Objectified Body Consciousness Scale (McKinley & Hyde, 1996).

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