

SELF OBJECTIFICATION, DISSATISFIED BODY IMAGE AND EATING BEHAVIOURS IN ADULTS

Komal Rafique¹ & Dr. Luqman Khan²

^{1&1}Department of Psychology, Riphah International University, Faisalabad Campus, Faisalabad
(Pakistan)

Komalkanwal734@gmail.com¹; Luqman.Khan@riphahfsd.edu.pk²

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ABSTRACT

The current study was intended to evaluate association in objectification of self, dissatisfied concerned body image, and eating behaviors in adults. Individuals who participated in the study were adults. In order to investigate the connection between self-objectification, dissatisfied body image, and eating behaviors in adults, a correlational study approach is utilized. The hypotheses that will be tested in this study are as follows: 1) There would be a notable relationship between self-objectification, dissatisfied body image and eating behaviors among adults; 2) There will be a significant gender difference in terms of self-objectification, body image, and disordered eating behaviors among adults. A total of two hundred persons were included in the sample that was collected for the research project. Out of the total population of 200, 98 individuals are male and 101 individuals are female, with a proportion of 49 and 50.5 respectively. For the purpose of the data collecting procedure, the Body Shape Questionnaire-16B (BSQ-16B), the Self-Objectification Scale, and the Eating Attitude Test 26 (EAT-26) were utilized. The data was then sorted using the SPSS sequence view. The t-test and the Pearson correlational analysis were the methods that were utilized in order to assess the hypotheses. The results of this research indicate that there is a substantial positive association in self-objectification, dissatisfaction with one's body image, and eating practices in adults. In addition, the findings suggest that there is no statistically significant difference in the responses of men and women with relation to levels of self-objectification, dissatisfaction with body image, and eating patterns.

Keywords: Self objectification scale, dissatisfied body image, eating behaviors, body shape, adults, gender differences

INTRODUCTION

Many people continue to struggle with self-objectification, which is a serious problem that affects them. Some of these adults experience the effects of this problem through the onset of eating disorders. The present circumstance can be linked, in large part, to the widespread objectification of the media and the subtle societal messaging that comes from a variety of sources. For the purpose of fostering a greater understanding of the difficulties that they face, it is of the utmost importance to reinterpret cultural norms and educate folks about these particular issues.

There is a strong connection in objectified body, body dissatisfaction, and disordered eating patterns

in adults. Studies have shown that self-objectification can cause issues with body image and the development of disordered eating behaviors in adulthood (Jongenelis & Pettigrew, 2020). Body dissatisfaction has a crucial role in connecting the development of identity and the manifestation of eating disorder symptoms in adulthood, underscoring its importance in understanding and tackling disordered eating behaviors (Gallardo et al., 2022).

Grabe et al. (2007) conducted research on the association between self-objectification and eating patterns among female college students. They identified a substantial positive link between self-

objectification and disordered eating behaviors such as purging, binge eating, and restrictive eating. This correlation was determined to be significant. Further investigation into this connection was carried out by Calogero et al. (2005) who investigated the ways in which self-objectification can predict body shame and dietary restraint.

Forbes et al., (2005) conducted a study in which they found a correlation between middle-aged women who internalize the ideal of a slim body and increasing levels of unhappiness with their bodies. A study done by Jackson et al., (2024) found that there was no correlation between the quality of one's diet and maladaptive eating patterns or unhealthy body image. A body-food choice congruence (B-FCC), which is a healthful eating habit, was found to have a positive link with diet quality, according to the findings of the researchers. B-FCC played a significant influence in the association in positive and negative body image and the quality of one's diet, which is a significant finding.

Veldhuis et al., (2020) sought to study the connections among body image, self-objectification, self-worth, and different selfie practices in a sample containing 179 young women. Structural equation modeling revealed that a connectivity of positive relationship in body admiration or the act of carefully choosing and posting selfies. Additionally, it was shown that self-objectification is linked to increased involvement among complete the selfie-related performances that were examined.

Grace et al., (2023) found that an individual's impressions of their own physique can greatly influence their communal actions, excellence of life, and general mental wellness. Females are more likely to experience the bulk of adverse psychological effects associated with a low confident body image. The current study questioned the correlation in self-objectification, body image, and the extent to which women invest time and financial resources in their physical appearance

Objectives of the study

1. Investigating the prevalence of self-objectification among adults and its relationship with feelings of body image dissatisfaction.

2. Examining gender differences in the impact of body image dissatisfaction, self-objectification, and disordered eating.
3. Understanding how self-objectification influences the development and persistence of body image dissatisfaction in adults.
4. Assessing the connection between body image dissatisfaction and engagement in unhealthy eating behaviors.

Hypothesis

1. A notable correlation is expected to exist between self-objectification, dissatisfied body image and disordered eating behaviors in adults.
2. Significant gender differences in self-objectification, body image, and disordered eating behaviors among adults are expected to be observed

METHOD

The research was aim to explore correlation in objectification of self, dissatisfied body concern and eating attitudes among adults. It is a correlational study which aims to explore bivariate relationships between given variables and their variance among different genders. The statistical package for the social sciences, version 21 (SPSS-21), was used to analyze the data.

Participants

In the present study sample size was of 200 adult people with the age ranging from 18 to 35 and the participants were grouped in two groups which were 18 to 26 (n=110) and from age 27 to 35 were (n= 90) in which women were (n=101) and men (n= 99), with different genders, socioeconomic status and educational level were taken from the District Faisalabad. Sample was collected by using convenient sampling technique.

Inclusion

- Both men and women with age group of 18 to 35 from district Faisalabad
- People with the any socioeconomic status, educational level, family type and with different height and weight ratio are included

Exclusion

- Pregnant women was not included.
- Individual suffering with any kind of major physical illness like cancer, hepatitis etc were not included.
- People with the age group of less than 18 and more than 35 were excluded
- People with any kind of Physical disability were excluded from the population.
- Widowed and divorced adults were excluded.

Research Instruments

Demographic Information Sheet

The study also investigates the influence of different demographic variables consisting of age, gender, education, height, weight, family type (nuclear or joint), number of family members and siblings, birth order and socioeconomic status.

Self-Objectification Questionnaire

This scale quantifies the degree to which an individual regards themselves as mere objects. The measure consisted of a total of 10 items, where participants were asked to rate ten bodily features in order of their importance on a scale from 0 to 9. The scores can vary from -25 to +25, where positive values indicate self-objectification (Fredrickson et al., 1998). According to Barbara L. Fredrickson, the internal consistency (α) is 0.829, as previously stated and advised.

Eating Attitudes Test-26

An evaluation of disordered eating attitudes was carried out with the use of the Eating Attitude Test 26 (EAT-26), which was created by Garner and colleagues in 1982. This instrument is composed of three subscales: the Dieting subscale, which consists of thirteen items; the Bulimia and Food Preoccupation subscale, which contains six items; and the Oral control subscale, which consists of seven items. In accordance with the scoring manual, the following criteria are used to assign points to items numbered 1 to 25: never = 0, rarely = 0, sometimes = 0, often = 1, usually = 2, and always = 3. When it comes to item number 26, however, the scoring is done in the opposite

direction: never = 3, rarely = 2, sometimes = 1, often = 0, usually = 0, and always = 0. According to Garner and Garfinkel (1979), the scale has a Cronbach's alpha coefficient of .896, which indicates that it has a good degree of internal consistency.

Body Shape Questionnaire

Self-administered and designed to assess concerns over body form, the Body form Questionnaire-16B (BSQ-16B) is a questionnaire that can be used to measure these concerns. A significant number of clinical and research settings make extensive use of it for the purpose of assessing abnormalities in body image, particularly those that are associated with concerns regarding weight and shape. The questionnaire has a Cronbach's alpha coefficient of .892, which indicates that it has a high degree of internal consistency.

Procedure

In the current study, a sample of 200 individuals aged between 18 and 35 was selected. An informed consent was prepared to ensure that participants were voluntarily agreeing to take part in the research. After obtaining formal approval from the authors of the scales used, the scales along with the informed consent forms were distributed to the respondents. Once the participants completed all the scales and provided the required information, the questionnaires were collected from them. Subsequently, the collected data was organized sequentially using SPSS.

Statistical Analysis

The data collected in the study was analyzed using SPSS software. Frequency distribution was utilized to measure the occurrence of demographic variables. Reliability analysis was performed to evaluate the reliability of the scales. Bivariate correlational analysis was employed to identify correlations between variables. Descriptive analysis was also utilized to calculate the average responses for the variables. Additionally, an independent t-test was carried out to compare differences in variance across different genders.

Table 1

Demographic Characteristics of the Sample (Frequencies & Percentage) (N=200)

Characteristics		F	%
Age	18-26	110	55.0
	27-35	90	45.0
Gender	Male	99	49.0
	Female	101	50.5
Birth Order	First	48	24
	Middle	110	55
	Last	42	21
Educational Level	Matric	05	2.5
	Intermediate	37	18.5
	Masters	128	64.5
	Mphil or above	30	15.0
Family Structure	Joint	65	68.0
	Nuclear	135	32.0
Socioeconomic status	Lower	3	1.5
	Middle	187	93.5
	Upper	10	5.0

Table 1 of demographics statistics showed that sample comprised of 200 adults with the age range of 18 to 35 grouped as 18-26 have 110 respondents whereas age range of 27-35 consists of 90 participants. In the study of 200 population 99 are male and 101 are female with percentage of 49 and 50.5. Birth order of the participants fluctuates as 48 participants were first born, 110 were the middle one and the 42 participants were the last born. 5 participants were matric pass, 37 participants were

at intermediate level, 128 participants were graduated whereas 30 participants were postgraduates. 135 participants belonged to nuclear family type whereas 65 respondents were from joint family system. Results showed that participants were taken from different socioeconomic statuses so 5 participants were from lower class, 187 participants were from middle class and the 10 respondents belongs to upper class.

Table 2

Cronbach's Alpha of the Body Shape Questionnaire (BSQ), Self-Objectification Scale (SOS) and EAT-26(N=200)

Research Measures	A	Items
BSQ	0.895	16
SOS	0.829	10
EAT-26	0.896	26

Table 2 shows Cronbach's alpha values of questionnaires employed in current research. Cronbach's alpha reliability of Body Shape Questionnaire (BSQ) is 0.895 that is indicating

high reliability. Likewise Self objectification scale (SOS) showed ($\alpha = 0.829$) and EAT-26 showed ($\alpha = 0.896$) reliability. The values showed that employed questionnaire have high reliabilities.

Table 3

Descriptive Statistics of the Body Shape Questionnaire (BSQ), Self-Objectification Scale (SOS) and EAT-26(N=200)

Variables	M	SD
BSQ	45.88	21.04806
SOS	44.720	20.97693
EAT-26	23.9397	17.97238

Note: M= Mean and SD= Standard Deviation

Table 3 showing the psychometrics properties of the Body Shape Questionnaire (BSQ), Self-Objectification Scale (SOS) and EAT-26.

Mean and standard deviation of the Body Shape Questionnaire (BSQ), Self-Objectification Scale (SOS) and EAT-26 are shown respectively.

Table 4

Inter correlation between study variables: Body Image (BSQ) Self-Objectification Scale (SOS) and EAT-26(N=200)

Measures	1	2	3
BSQ	1	.584	.780
SOS	.584	1	.594
EAT	.780	.594	1

Note: Correlation is significant at the 0.01 level (2-tailed).

Table 4 is showing the high correlations between three of given variables. It is showing positive correlation among self-objectification,

dissatisfied body image and eating behaviors in adults.

Table 5

Gender Differences through independent t-test in Body Shape Questionnaire (BSQ,) Self-Objectification Scale (SOS) and eating behaviors (EAT)

	Men		Women		T	p	LL	UL
	M	SD	M	SD				
BSQ	46.6224	20.6585	45.267	21.576	.452	.695	-4.55	7.26
SOS	46.1429	21.352	43.376	20.7238	.928	.716	-3.16	8.64
EAT	23.235	16.48	24.57	19.46	-.521	.168	-6.39	3.72

Note: M= Mean, SD= Standard Deviation, T= t-test value, P= Significant value, LL= Lower limit, UL= Upper limit

An independent samples t-test was conducted to assess whether significant gender differences exist in self-objectification, body image, and behaviors among adults. The group statistics table reveals a slight difference in mean values for males (M=46.6224, 46.1429, 23.2350) compared to females (M=45.267, 43.376, 24.57). The Levene's

test of equality of variance suggests that the significance value is greater than 0.05, indicating equal variance of gender-based responses. The provided p-values in the table demonstrate that the two-tailed significance values are 0.695, 0.716, and 0.168 for the three variables, respectively, which are all higher than 0.05. Thus, we reject the hypothesis and conclude that body shape image,

self-objectification, and disordered eating are similar among both genders.

Discussion

As the principal speculation expresses that there would be eminent connection between self-externalization and confused eating ways of behaving in grown-ups so by applying the Pearson correlational examination we came to realize that there is really a critical relationship between self-objectification and cluttered eating. Gathered information investigation showing a positive connection between these two factors. Individuals who scored high at self-generalization scale likewise answered higher at eating scales with the things of disarranged eating as well as the other way around. There are number of studies present as writing that upholds the given outcomes.

It has been discovered by (Tiggemann & Kuring, 2004) that abnormal eating and poor mood in women are both predicted by self-objectification and the compulsive self-surveillance that goes along with it. The theoretical model's mediational links received substantial support from path analysis. With one significant exception—the part played by self-objectification—men's relationship patterns were comparable.

The study aimed to test an integrated model of objectification theory, incorporating various constructs like sexual objectification, self-objectification, body shame, and lack of interoceptive awareness, to predict disordered eating among 460 college women. Previous research had examined specific constructs of the theory, but a comprehensive model was lacking. The researchers conducted structural equation modeling analyses, which revealed that the integrated model provided a strong fit to the data, confirming most of the claims proposed by Fredrickson & Roberts, (1997) in their objectification theory. Specifically, the model demonstrated how psychological factors like self-objectification and body shame, combined with societal factors like sexual objectification, contribute to the development of disordered eating behaviors. Additionally, the lack of interoceptive awareness, or the ability to recognize internal cues related to emotions, hunger, and satiety, played a role in this process

The study by Peat & Muehlenkamp, (2011) employed meta-analytic techniques to examine the relationship between self-objectification and disordered eating. The findings of this first meta-analysis investigating the link between these two constructs provided support for one of the core propositions of objectification theory. Specifically, the results indicated a significant positive association between self-objectification and disordered eating attitudes and behaviors. While the meta-analysis findings suggest that targeting self-objectification could be a valuable approach in interventions for eating disorders, the authors acknowledged the need for further research to establish temporal and causal relationships between these variables. Moreover, the study highlighted several gaps in the existing literature, such as the underrepresentation of men, ethnic minorities, and sexual minorities in the samples included. These limitations have implications for guiding future research to better understand the role of self-objectification in disordered eating across diverse populations

Through the use of Pearson correlational analysis, we were able to confirm the current study's hypothesis that a significant correlation exists between adults' body image concerns and disordered eating behaviors. A favorable correlation between the two variables was found in the data. When asked about eating disorders, those who scored higher on the self-objectification measure also scored higher on the eating scales, and the inverse was also true. The presented findings are backed by a number of studies in the literature.

Muscat & Long, (2008) examined the correlation between self-criticism about weight and body type and disordered eating symptoms in female athletes (N = 157) and in non-athletes (N = 63). The discoveries showed that subsequent to adapting to misery, there was a higher commonness of disarranged eating among competitors and game members who recalled basic comments instead of the people who didn't, and the individuals who recollected more serious basic remarks. Sports members and competitors didn't differ concerning confused eating, in spite of the way that a more elevated level of sports movement was connected to a higher recurrence of reviewed basic comments. According to objectification theory, those who remembered critical remarks had stronger negative

feelings (such as guilt and anxiety) than favorable ones. However, this difference did not hold true for athletes compared to non-athletes.

Liao et al., (2010) observed significant associations between BMI, eating habits, self-esteem issues, depression, and social anxiety. Among female students, preoccupation with one's physical appearance was the strongest predictor of disordered eating habits, while among male students, social anxiety was most strongly linked to preoccupation with one's muscular size and shape. In order to test the hypothesis, the current study also looked at adults and their self-objectification, body image dissatisfaction, and eating habits. However, when running a t-test, we found no significant differences between the sexes in terms of these variables. There were no significant differences in gender among adults when it came to body image problems and self-objectification. Calogero., (2012) in his article concluded that concentrating on girls and women does not negate the sexualization and self-objectification that boys and men go through. "Research indicates that men who view themselves as objects are more likely to experience disordered eating and feelings of shame about their bodies. Therefore, it's advised to be careful when applying objectification theory directly to men's experiences." To put it briefly, other psychological factors probably have a greater bearing on how men relate to their bodies. In hypersexualized societies, men's experiences with or lack thereof of sexual objectification is a major factor in their body image perception. It is critical to study how men and women's self-body relations develop in relation to the prevalence or absence of sexual objectification and self-objectification

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