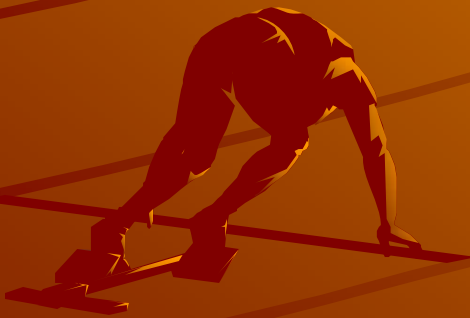


The Effect of Media Exposure, Self-Objectification and Body Dissatisfaction on Eating Disturbances



Kristi L. Loose
Hamline University

Introduction

Eating Disorders affect an estimated 5 million Americans every year, the majority of whom are college age women. Although the percentages of women who meet the criteria for clinical eating disorders are relatively small (.5% for anorexia and 1-3% for bulimia), there remains an overwhelming amount of young, adult women who are dissatisfied with their bodies (Cashel, Cunningham, Landeros, Cokley, & Muhammad, 2003).


Introduction Continued

- Additional variables that interact with body dissatisfaction to influence its relation to eating disturbances.
 - Self-objectification Theory – Women who have high self-objectification are more likely to experience a heightened degree of body dissatisfaction.
 - Media Exposure - Any woman who makes a comparison between her own body and the thin-ideal body type will likely experience body dissatisfaction.



Hypothesis

Women who are exposed to high amounts of media and have a high level of self-objectification through the adoption of the thin-ideal internalization will experience heightened body dissatisfaction and an increase in eating disturbances.



Method

✦ Participants

- 80 undergraduate women offered extra credit in exchange for their participation
- Evaluations were collected anonymously.
- Participants were treated in accordance with ethical guidelines established by the American Psychological Association.

Method Continued

◆ Design

- Correlational design that looked at the relationships among four subject variables: media exposure, self-objectification, body dissatisfaction, and eating disturbances



Method Continued

✦ Administered three questionnaires to assess level of:

self-objectification

media exposure

body dissatisfaction

EAT-26 was then given to determine women's eating disorder symptomatology.



The Self-Objectification Questionnaire

- ✦ 10 items used to assess the level of self-objectification through thin-ideal internalization
- ✦ Participants were asked to rank the body attributes from that which has the greatest impact on physical self-concept (rank this a "9") to that which has the least impact on physical self-concept (rank this a "0").
- ✦ Examples:
 - What rank do you assign to health?
 - What rank do you assign to weight?
 - What rank do you assign to physical attractiveness?
 - What rank do you assign to measurements (e.g., chest, waist, hips)?

Media Exposure

- ✦ Responses from two questions that have been used in previous research to provide an integrated assessment of involvement with written media:

- ✦ How frequently do you read magazines?

- ✦ How often do you try to do the things suggested in the magazines?



Body Dissatisfaction Scale

- ✦ 9 items related to feelings about one's body
- ✦ Participants were asked whether or not they would agree with the following statements:
 - I think that my stomach is too big.
 - I think that my thighs are too large.
 - I feel satisfied with the shape of my body.

EAT - 26

- ✦ Most widely used standardized measure of symptoms and concerns characteristic of eating disorders

- ✦ Sample questions:

- ✦ Am terrified of being overweight.

- ✦ Avoid eating when I am hungry.

- ✦ Find myself preoccupied with food.

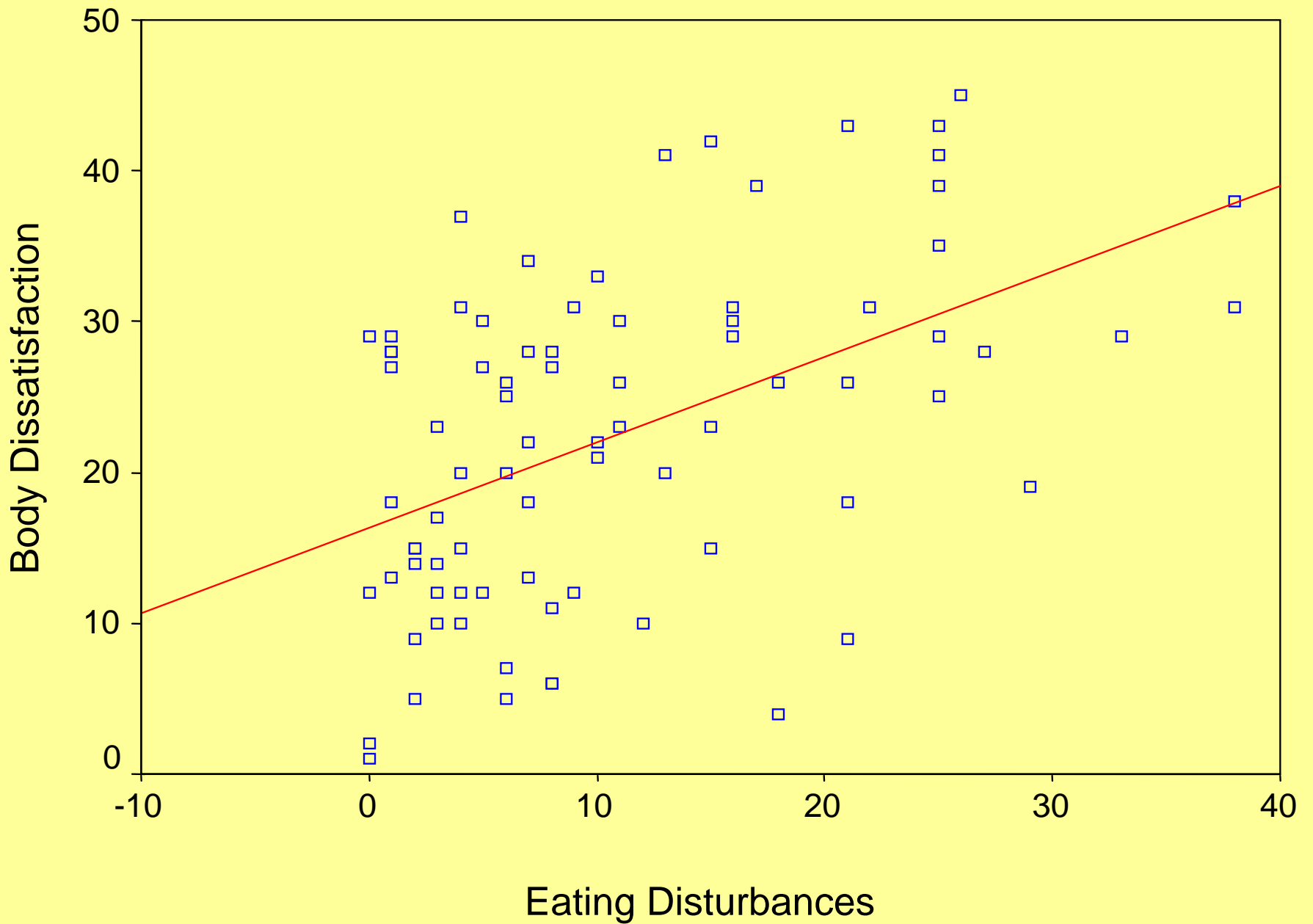
- ✦ Cut my food into small pieces.



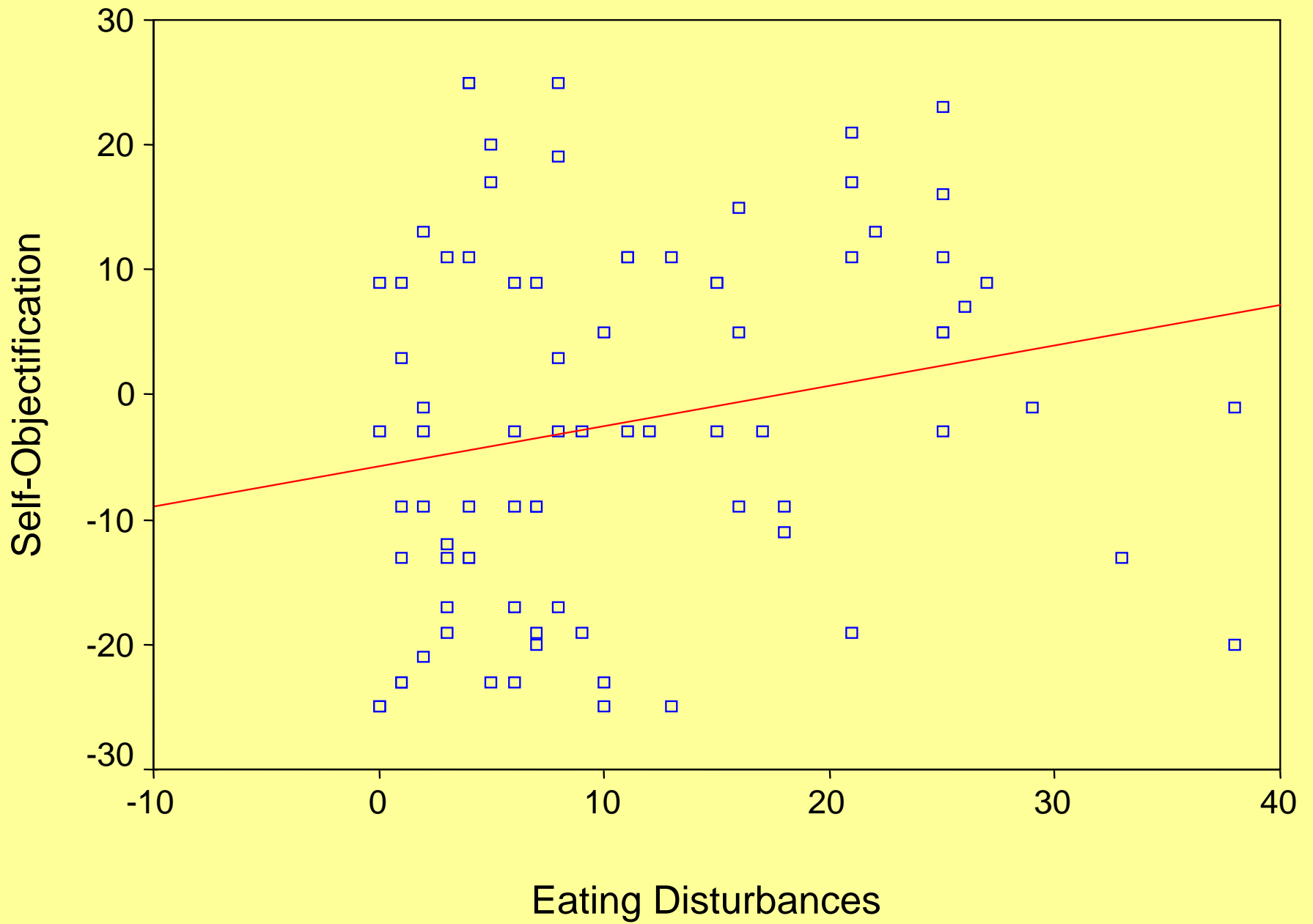
Results

- ✦ A one-tailed correlational analysis was conducted to evaluate the relationships among the four variables: self-objectification, body dissatisfaction, media exposure, and eating disturbances.

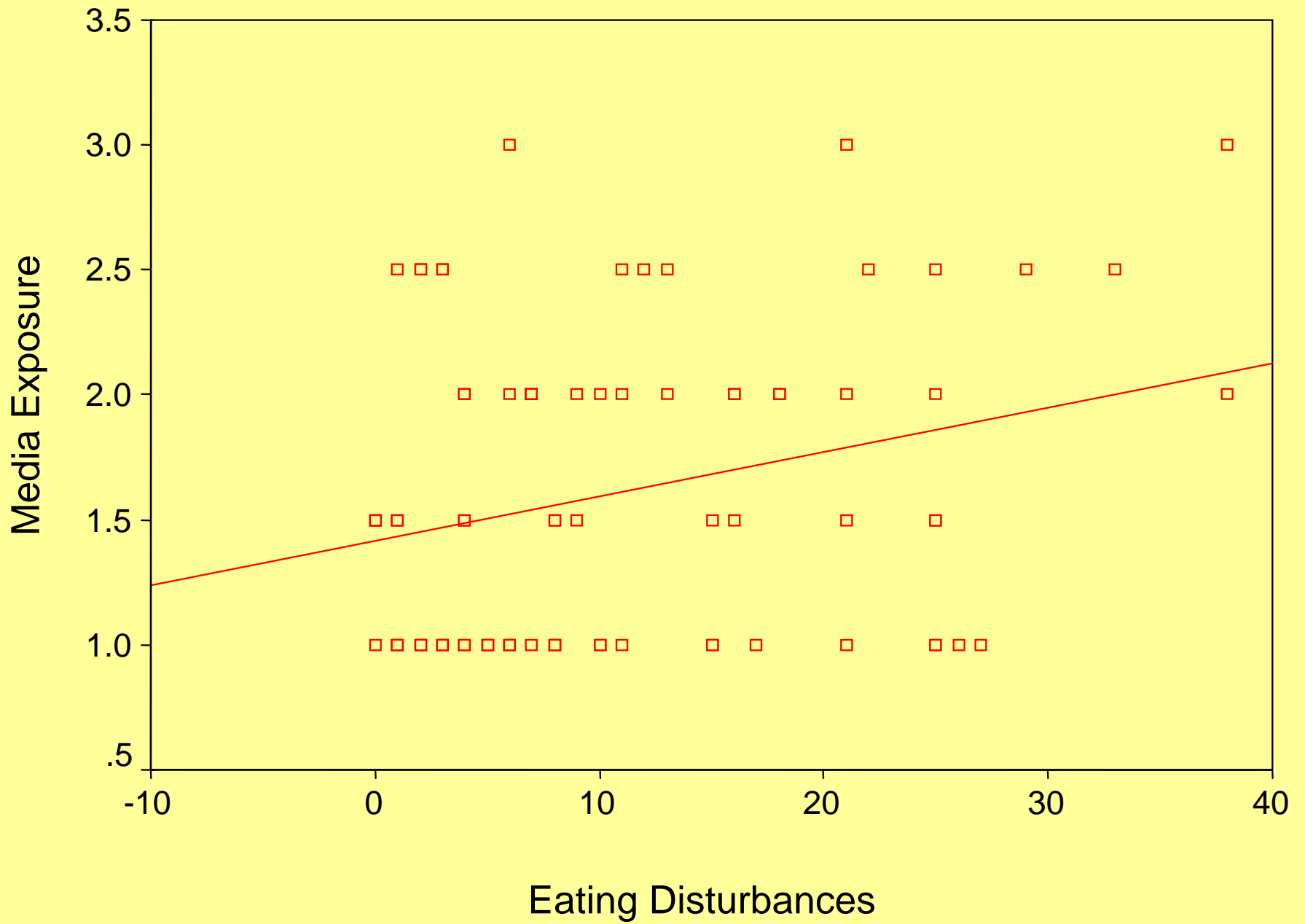




$r(79) = .49, p = .001$



$r(79) = .21, p = .001$



$r(79) = .27, p = .001$

Model 1

Eating Disturbances

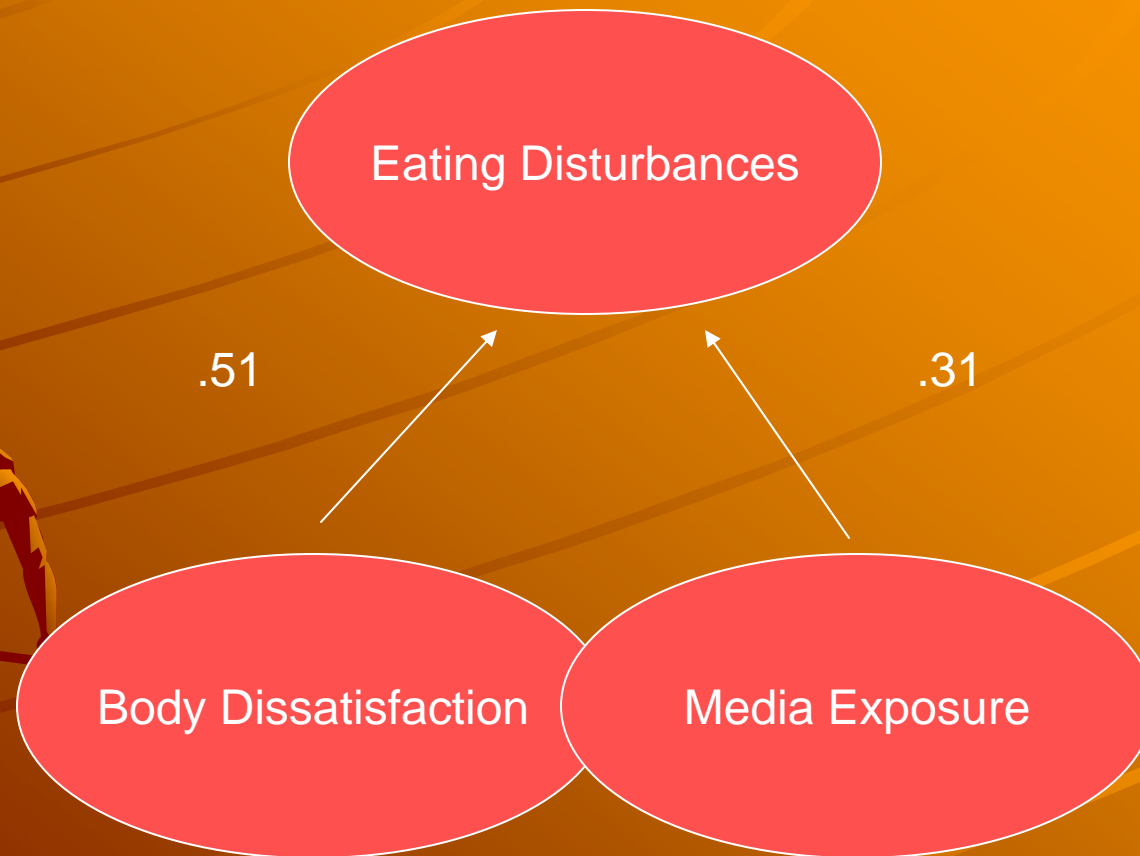
.48

Body Dissatisfaction

$R^2 = .24$, $F(1,80) = 24.83$, $p = .001$



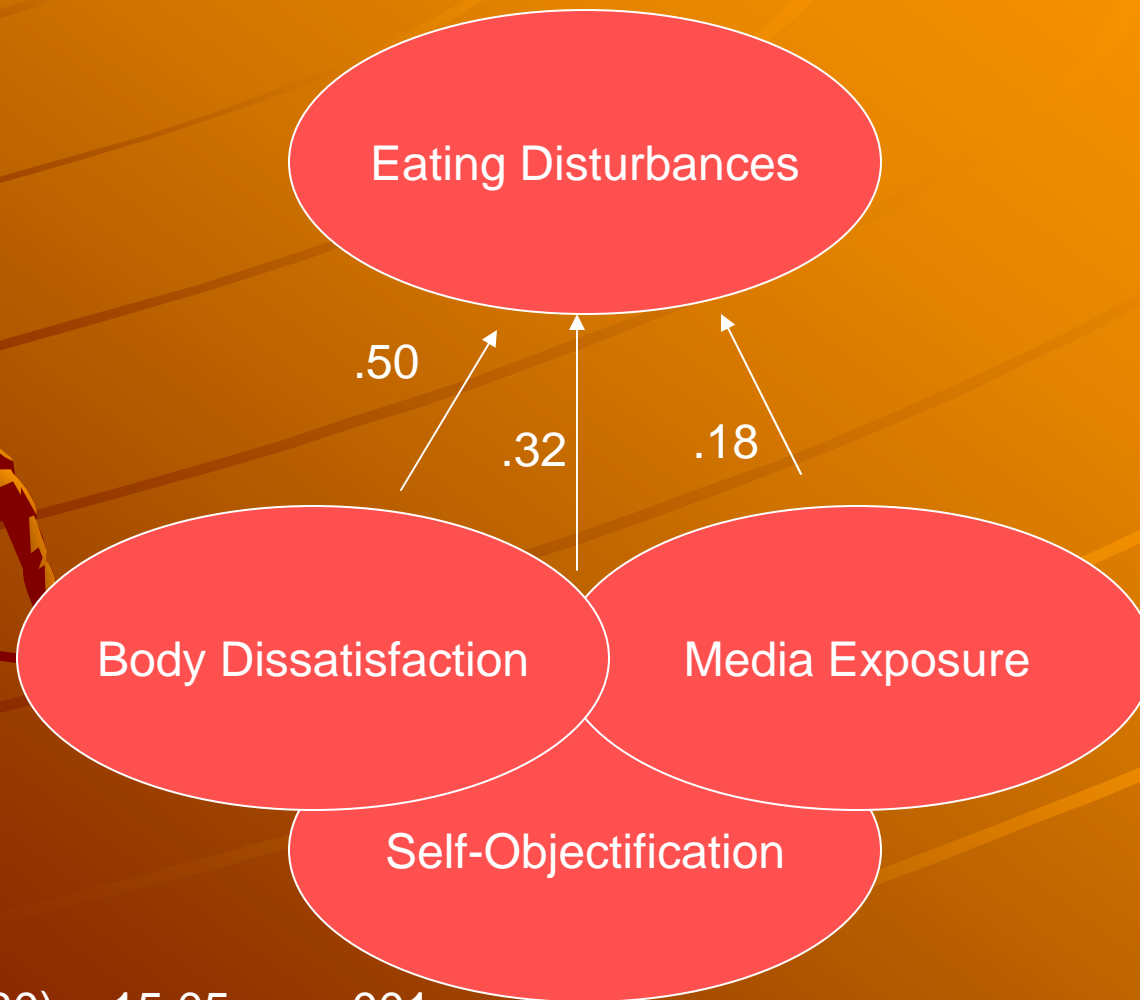
Model 2



$R^2 = .24$, $F(2,80) = 19.76$, $p = .001$

R^2 change = .10 $F(1,78) = 11.42$, $p = .001$

Model 3



$R^2 = .37$ $F(3,80) = 15.05$ $p = .001$

R^2 change = .03 $F(1,77) = 4.07$, $p = .001$

Discussion

- ✦ Results support hypothesis.
- ✦ Significant relationships were found between body dissatisfaction and eating disturbances, between self-objectification and eating disturbances, and also between media exposure and eating disturbances.
- ✦ When the three variables were combined, they were found to be significant predictors of eating disturbances in college age women.

Discussion Continued

- ✦ Why is it then that women who have a high amount of media exposure, a high level of self-objectification, and experience a heightened degree of body dissatisfaction are more likely to suffer from eating disturbances?
 - Media images portray the female form as very thin.
 - Frequent exposure to this media-portrayed thin-ideal causes women to internalize the thin-ideal stereotype and experience a heightened level of self-objectification.

Discussion Continued

- ✦ High level of self-objectification leads to a high level of body dissatisfaction.
- ✦ All of these variables have influence on one another and the combination of the three serves as a high predictor of eating disturbances.



Strengths and Limitations

✦ Strengths

- Short completion time of the study
- Clearly defined categories
- Willingness/Availability of participants



Strengths and Limitations

✦ Limitations

- Can the results be generalized to other populations?
- Participants came from a very limited age group and were all psychology students.
- Use of scales and questionnaires
- Experimental design

Implications for Future Research

- ◆ Women of different ages.
- ◆ Larger sample size
- ◆ Examine different forms of media
- ◆ Variables involved in onset and maintenance?

Acknowledgments

◆ Professors Dorothee Dietrich and Matt Olson, Advisors, Hamline University

◆ Hamline University Psychology Department for their participation

References

- Anderson, D.R., Huston, A.D., Schmitt, K.L., Linebarger, D.L., & Wright, J.C. (2001). Early childhood television viewing and adolescent behavior: The recontact study. *Monographs of the Society for Research in Child Development, 66*, (Serial No. 264).
- Cashel, M.L., Cunningham, D., Landeros, C., Cokley, K.O., & Muhammad, G. (2003). Socio-cultural attitudes and symptoms of bulimia: Evaluating the SATAQ with diverse college groups. *Journal of Counseling Psychology, 50*(3), 287-296.
- Garner, D.M., & Garfinkel, P.E. (1979). The Eating Attitudes Test: An index of symptoms of anorexia nervosa. *Psychological Medicine, 9*, 1-7.
- Garner, D.M., Olmsted, M.P., & Polivy, J. (1983). The development and validation of a multidimensional eating disorder inventory for anorexia nervosa and bulimia. *International Journal of Eating Disorders, 2*, 15-34.

McKinley, N.M., & Hyde, J.S. (1996). The Objectified Body Consciousness Scale: Development and validation. *Psychology of Women Quarterly, 20*, 181-216.

Noll, S.M., & Fredrickson, B.L. (1998). A mediational model linking self-objectification, body shame, and disordered eating. *Psychology of Women Quarterly, 22*, 623-636.

Tylka, T. (2004). The relation between body dissatisfaction and eating disorder symptomatology: An analysis of moderating variables. *Journal of Counseling Psychology, 51*(2), 178-191.

