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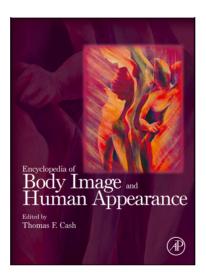
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Calogero RM. Objectification Theory, Self-Objectification, and Body Image.
In: Thomas F. Cash, editor. *Encyclopedia of Body Image and Human Appearance*,
Vol 2. San Diego: Academic Press; 2012. pp. 574–580.

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Objectification Theory, Self-Objectification, and Body Image

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Glossarv

self-objectification A self-perspective that involves taking a primary view of the self as an object; viewing oneself from a third-person perspective as opposed to a first-person perspective.

self-surveillance Form of self-consciousness characterized by habitual monitoring of body's outward appearance.

sexual objectification When a person is reduced to and/or treated solely as a body or a collection of body parts for sexual use; when sexual parts and/or functions are separated out from the rest of the person.

sexualization The appropriation of a person's sexuality by another; sexual objectification is one type of sexualization

Objectification Theory

To objectify is to make into and treat something that is not an object as an object, which can be used, manipulated, controlled, and known through its physical properties. Philosopher Martha Nussbaum specified seven qualities that represent common attitudes and treatment toward objects and things that when applied to a person constitutes objectification (Table 1). Importantly, each of these qualities is inherent in the sexual objectification of girls and women. Objectification theory, originally proposed by Barbara Fredrickson and Tomi-Ann Roberts, is essentially a synthesis and systematic formalization of the many disparate lines of scholarship on the sexual objectification of women. Objectification theory attempts to explain the extreme and pervasive tendency to equate women with their bodies and why this can have such negative consequences for women's body image and beyond.

Sexual Objectification

Objectification theory takes as a starting point that cultural practices of sexually objectifying women are pervasive in Westernized societies and create multiple opportunities for the female body to be on public display. A large body of research has documented that women are targeted for sexually objectifying treatment in their day-to-day lives more often than are men. Sexual objectification refers to the fragmentation of a woman into a collection of sexual parts and/or sexual functions, essentially stripping her of a unique personality and subjectivity so that she exists as merely a body. It is important to note that these experiences of sexual objectification occur outside of women's personal control.

Objectification theory articulates the range of ways in which sexual objectification can manifest in day-to-day life. Common situations that would constitute sexual objectification include gazing or leering at women's bodies, sexual comments about women's bodies, whistling or honking the car horn at female passersby, taking photographs of women's bodies and body parts with a cell phone, exposure to sexualized media imagery or pornography, sexual harassment, sexual violence, and rape. Sexual objectification plays out most obviously in two arenas: (1) actual interpersonal encounters and (2) media encounters.

Interpersonal encounters of sexual objectification can include interactions with familiar others (e.g., family, friends, colleagues, employers, and acquaintances) or with strangers. Based on samples of American youth, elementary and middle school-age girls are more frequently targets and suffer more negative effects of sexual harassment than do boys. In adult samples, women report significantly more explicit sexual objectification from men than men do from women, such as hearing sexually degrading jokes about women, being sexually harassed, being called sexual names, having body parts leered at or ogled, and being the victim of unwanted sexual advances.

Media encounters of sexual objectification occur in every form: prime-time television programs, sports programs, television commercials, cartoons and animation, Internet, music videos, music lyrics, video games, magazines and newspapers, cell phone applications, and billboards. In general, media portrayals are considered sexually objectifying when the visual media spotlight women's bodies and body parts, especially when depicting them as the target of a nonreciprocated male gaze. It is not merely sexual gazing but actual violence against women that is also eroticized and rendered normative in these portrayals. Images of scantily clad and partially nude women commonly appear in contorted positions, bent over or positioned on all fours, physically bound, or physically threatened and/or restrained by men (or groups of men).

Feminist theorists have argued that sexually objectifying experiences encountered by girls and women accumulate over time, eventually leading them to internalize the sexual

| Table 1 Nussbaum's definition of obj | jectification |
|---|---------------|
|---|---------------|

| 1. Instrumentality | Treatment of another as a tool for one's own purposes |
|-------------------------------|---|
| 2. Denial of autonomy | Treatment of another as lacking self-determination |
| 3. Inertness | Treatment of another as lacking agency and activity |
| 4. Fungibility | Treatment of another as interchangeable with others |
| Violability | Treatment of another as permissible to break/break into |
| 6. Ownership | Treatment of another as something that is owned |
| 7. Denial of subjectivity | Treatment of another as something whose feelings and |
| | experience do not need to be considered |

Note: See Nussbaum, M. C. (1995). Objectification. Philosophy and Public Affairs 24, 249-291.

objectification and turn it on themselves. That is, women come to view and treat themselves as objects to be evaluated on the basis of their appearance – or to self-objectify. In particular, it is the subtle practice of sexualized gazing that women encounter as they move in and out of a variety of social contexts that coaxes girls and women into adopting this evaluative gaze as their own self-perspective. In this way, Fredrickson and Roberts argue that girls and women in Westernized societies come to see themselves through a 'veil of sexism'. The sexualization of girls and women, and the more specific incidents of sexual objectification, is part and parcel of broader sexist ideologies that perpetuate the culture-wide gender status quo. Given that this particular cultural backdrop is in place whereby women's bodies are always looked at and potentially objectified, objectification theory does not seek to delineate the causes of the objectification of women. Rather, it seeks to elucidate the range of intra-individual psychological consequences for girls and women that result from viewing oneself primarily as a body, and the potential mechanisms by which this chain of events might occur. The following sections outline these proposed consequences.

Self-Objectification

Fredrickson and Roberts identified self-objectification as the first psychological consequence to emerge among girls and women as a result of living in a sexually objectifying cultural milieu. Self-objectification is defined as the adoption of a third-person perspective on the self as opposed to a first-person perspective such that girls and women come to place greater value on how they look to others rather than on how they feel or what they can do. An objectified body is a malleable, measureable, and controllable body. By viewing and treating themselves as sexual objects, it is argued that girls and women act as their own first surveyors in anticipation of being evaluated by others. Thus, the body becomes the site of reparative action and vigilant monitoring to manage the sexual objectification. When girls and women view themselves through this self-objectified lens, they take a peculiar stance on their own bodies that is fundamentally disruptive to the self-body relationship.

Most women will experience some degree of state self-objectification in situations where attention has been called to their bodies, such as receiving catcalls, catching someone staring at their breasts, or where their gender becomes a salient feature of the immediate social context. For some women, however, this objectified lens becomes engaged virtually all of the time, whether they find themselves in public or private settings. This more pervasive and

chronic view of the self as an object is referred to as trait selfobjectification.

Whether engaged as a state or a trait, taking this external vantage point on the self is accompanied by a form of self-consciousness characterized by vigilant monitoring of the body's outward appearance. This chronic body monitoring is referred to as self-surveillance (also referred to as body surveillance) and represents the behavioral manifestation of self-objectification. Researchers have demonstrated that self-objectification, and its corollary self-surveillance, is a conceptually and empirically distinguishable construct. In these types of studies, self-objectification is set to predict self-surveillance, which, in turn, leads to other negative outcomes predicted by objectification theory. In other studies, however, these constructs have been used interchangeably.

In the objectification theory framework, self-objectification is the primary psychological mechanism that accounts for the link between women's experiences of sexual objectification at the cultural level and their bodily and subjective well-being at the individual level (see Figure 1). It is important to point out that self-objectification is not an indication of narcissism or vanity or body dissatisfaction but more accurately reflects a psychological strategy that allows women to anticipate, and thus exert some control over, how they will be viewed and treated by others. Although this self-perspective is unlikely to be consciously chosen, it does reflect a certain degree of agency in the highly oppressive context of sexual objectification.

Subjective and Mental Health Consequences

Self-objectification is proposed to lead directly to several psychological or experiential consequences that are known to occur at a disproportionately higher rate among girls and women: (a) body shame, (b) appearance and safety anxiety, (c) reduced concentration or 'flow' experiences on mental and physical tasks, and (d) diminished awareness of internal bodily states (e.g., satiety, hunger, fatigue, and emotions). In turn, this collection of subjective experiences is proposed to accumulate and lead directly to a subset of mental health risks that also occur at a disproportionately higher rate among girls and women: unipolar depression, sexual dysfunctions, and eating disorders. That is, by generating recurrent shame and anxiety, disrupting attention that could be directed toward pleasurable and rewarding activities, and reducing sensitivity to internal bodily cues, self-objectification indirectly contributes to greater depression, sexual dysfunction, and eating disorders in girls and

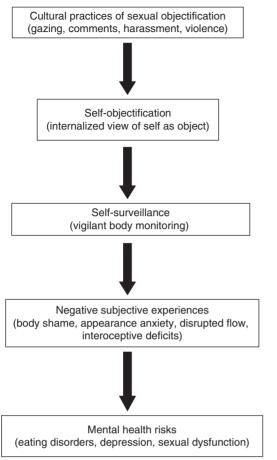


Figure 1 A model of objectification theory as proposed by Fredrickson and Roberts (1997).

women. Empirical support for these proposed consequences of self-objectification is delineated next.

Empirical Support for the Objectification Theory Framework

Evidence from correlational, experimental, and longitudinal studies of women across North America, Australia, and the United Kingdom has provided support for several of the main tenets of objectification theory. First, self-objectification and self-surveillance have been significantly associated with four subjective experiences identified within the objectification framework: higher body shame, higher appearance anxiety, less capacity for flow experiences and full absorption in tasks, and less connection with internal bodily sensations. To date, there has been no published research examining the role of safety anxiety in the context of objectification theory. Second, self-objectification and self-surveillance have been significantly associated with the three mental health risks identified within the objectification framework: more depressed mood, more disrupted sexual functioning, and more disordered eating. Third, some of these subjective experiences have been shown to mediate the link between self-objectification and these mental health risks.

Objectification Theory and Depressed Mood

Researchers have documented that women are about twice as likely to be depressed as men, and this gender difference in prevalence is evident across different ethnic groups. From the perspective of objectification theory, having a female body in a hypersexualized culture that chronically sexually objectifies the female body has consequences for women's emotional experiences. That is, the habitual body monitoring which results from recurrent sexual objectification may induce body shame and appearance anxiety, which represent psychological states that are difficult to alleviate. In conjunction with these negative subjective experiences, self-objectification also reduces opportunities for experiencing pleasure. In this context of objectification, then, girls and women become occupied with and ruminate about issues related to personal appearance, personal safety, and interpersonal relationships. Feelings of helplessness associated with worry and lack of control in these critical areas may contribute to feelings of depression among women. Objectification theory also underscores the point that sexual harassment and victimization are part of the spectrum of sexual objectification, which women experience at a much higher rate than men. In this way, more extreme forms of sexual objectification may directly account for the higher rates of depression among women.

Compared to the literature on objectification theory and eating disorders, much less research has concentrated on testing the predictions related to depression. The small body of research that does exist has confirmed that self-objectification and self-surveillance are directly related to depressed mood and that these links are partially explained by body shame, appearance anxiety, and reduced flow - although these mediational findings have not been consistent across studies. Little to no evidence exists in support of interoceptive deficits as a possible mediator of these relationships. Similar to the research on disordered eating described above, the bulk of these tests on depressed mood have been based on predominantly White, presumably heterosexual female undergraduate students in North America and Australia. Although much more research is needed with alternative samples, the evidence that is available does suggest that objectification theory can explain depressive symptoms in both preadolescent girls and lesbian women.

Objectification Theory and Sexual Dysfunctions

As with eating disorders and depression, women experience more sexual dissatisfaction and sexual dysfunction than do men. The subjective experiences associated with sexual and self-objectification, such as body shame, appearance anxiety, and inattention to internal body states, arguably interfere with achieving orgasm. Moreover, self-surveillance during sexual intercourse necessarily disrupts women's attention and flow in the moment, which is required for orgasm. Further, more dehumanizing forms of objectification can reduce the enjoyment of sex, such as experiences of assault, abuse, and harassment. A dearth of research exists that investigates the direct and indirect associations between self-objectification, self-surveillance, and sexual dysfunction. However, the bit of evidence that does exist supports some of the proposed relationships - that shame and anxiety associated with self-objectification partially predict disrupted sexual functioning in women. In particular,

self-objectification has been linked to less sexual satisfaction, lower sexual self-esteem, and lower perceived sexual competence.

Objectification Theory and Disordered Eating

Women comprise about 90% of those who suffer from eating disorders. Building on prior feminist scholarship, objectification theory moves beyond the internalization of the thin ideal to describe eating disorders as a response to women's feelings of powerlessness to control the systematic objectification of their bodies. The bulk of the research on objectification theory has concentrated on testing the predictions related to disordered eating. A large body of evidence has demonstrated that self-objectification and self-surveillance directly predict more disordered eating attitudes and behaviors, and that these links can be partially or fully explained by body shame and appearance anxiety. The most consistent support has been found for body shame, which is not very surprising as recurrent opportunities for women to experience body shame in both public and private contexts are powerful motivators to engage in disordered eating. In contrast, mixed or no support has been shown for the role of interoceptive awareness or flow experience in the context of self-objectification and disordered eating.

Little information is available as to how these patterns might differ as a function of ethnicity, sexual orientation, or cultural background. The research that does exist offers inconsistent findings with respect to the vulnerability of various subpopulations of women. Some research has suggested that White women may be most at risk, whereas African American women may be least at risk for disordered eating via self-objectification. Other research has suggested that Latina and Asian women may be most at risk compared to other ethnic groups. As for sexual orientation, some research has indicated a good fit of the objectification model within a lesbian sample, whereas other research has indicated a poor fit. Considering that a key assumption of objectification theory is that women self-objectify in response to both attracting and managing the male gaze, these mixed reports make it difficult to determine whether or not objectification theory is useful for explaining disordered eating among lesbian women. Further research among these various subpopulations of women is imperative to fully flesh out the utility and generalizability of objectification theory.

Objectification Theory and Other Consequences

A considerable body of evidence currently exists to suggest that when girls and women take a third-person perspective on their own bodies (whether situationally activated or chronically invoked), and thus self-objectify, they are more likely to experience a wide range of intrapersonal and interpersonal difficulties, far beyond those originally proposed by objectification theory. The following is a list (not exhaustive) of other consequences empirically associated with self-objectification and/or self-surveillance: more psychological and behavioral support for cosmetic surgery, less intrinsic motivation, poor math performance, diminished cognitive capacity, diminished physical performance, feelings of humiliation and disgust, lower global self-esteem, less interest in physical sex, greater self-harming behavior, higher prevalence of smoking, more dysfunctional exercise attitudes and behavior, greater fear and perceived risk of rape, and greater hostility toward other

women. These additional consequences associated with self-objectification speak to the foundational nature of the self-body relationship to body-related attitudes, behaviors, and functions, at least among girls and women.

Measurement of Self-Objectification

Individual Differences

Two self-report scales have been commonly used to measure trait self-objectification. The Self-Objectification Questionnaire (SOQ) was developed by Noll and colleagues to assess the degree to which respondents view themselves more from a third-person perspective than a first-person perspective. Specifically, the SOQ measures the extent to which individuals consider five observable physical attributes (i.e., weight, sex appeal, physical attractiveness, firm/sculpted muscles, and measurements) to be more important than five nonobservable physical attributes (i.e., physical coordination, health, strength, energy level, and physical fitness level). Respondents are instructed to rank all 10 attributes in the order of their impact on the physical self-concept from 'least impact on my physical self-concept' (rank = 0) to 'greatest impact on my physical selfconcept' (rank = 9). To obtain a scale score, the sum of the five ranks given to the nonobservable attributes is subtracted from the sum of the five ranks given to the observable attributes. This difference score represents the relative emphasis given to these two dimensions: more positive scores indicate a greater emphasis on physical appearance (how the body looks), whereas more negative scores indicate a greater emphasis on physical competence (how the body feels or what it can do).

The Surveillance subscale of the Objectified Body Consciousness Scale (OBCS) was developed separately and independently of the SOQ by McKinley and Hyde to measure the degree to which women engage in chronic self-policing of their physical appearance. Self-surveillance has become conceptualized as the manifestation of self-objectification because it captures the habitual body monitoring that accompanies the adoption of an observer's standpoint on one's own body. The OBCS also measures body shame and appearance control beliefs as additional components of women's objectified relationships with their bodies. The Surveillance subscale includes eight items that assess the degree to which women engage in habitual body monitoring (example item: "I often worry about whether the clothes I am wearing make me look good.") using a 7-point response format (1 = strongly disagree; 7 = strongly agree). Respondents may also circle N/A if an item does not apply to them. Scale scores are not calculated if more than 25% of a subscale's scores are missing. Lindberg and colleagues also created a modified version of the OBCS to make it accessible to preadolescent and adolescent youth (OBC-Youth Scale). The youth version of the OBCS represents the same three underlying components as the adult version, with some of the items rewritten in simpler language.

Despite some weaknesses and limitations to these measurement tools, evidence has accumulated for the SOQ and the Surveillance subscale as useful and valid indicators of self-objectification and self-surveillance in a variety of samples: American girls and women, Australian girls and women, British women, Canadian women, Swiss adolescent girls, Nepali mothers and daughters, heterosexual and

lesbian women, women of color, women with eating disorders, pregnant women, menopausal women, deaf women, low-income women, aerobics instructors and aerobics participants, former ballet dancers, yoga participants, exotic dancers, sorority group members, and heterosexual and gay men. This coverage of studies is not meant to be exhaustive, but it does provide an overview of the range of samples in which self-objectification and self-surveillance have been measured and discussed.

Situational Activation

A variety of methods have been employed to activate state self-objectification, a temporary condition in which individuals are viewing themselves as objects in response to specific environmental cues. In order to induce a state of self-objectification, researchers have typically created situations in which women are exposed to imagined or actual sexual objectification, after or during which they complete a battery of questionnaires that measure the proposed psychological outcomes.

The swimsuit–sweater paradigm is the classic experimental induction of state self-objectification. Participants are instructed to try on a bathing suit or a sweater in front of a full-length mirror in a dressing room and then complete a number of tasks while dressed in either one of these garments. Using this paradigm, women who wore the bathing suit while seated in front of a mirror felt much more like a body than did women who wore the sweater or men who wore either garment in the same setting. Women wearing a swimsuit also reported the highest level of body shame, demonstrated the greatest eating restraint, and performed the worst on a math test, compared to the other groups tested. Using the same paradigm, researchers have demonstrated decrements in women's general cognitive performance as well as prolonged body focus after the experimental manipulation was over.

A variety of other ways for activating state self-objectification have been employed that attempt to simulate the multiple unstructured physical and social contexts that women regularly encounter. For example, women may be exposed to sexualized depictions of women in the media, sexually objectifying word cues that represent the verbiage commonly encountered in print media, the mere anticipation of a male gaze, an actual male gaze, or a generally more appearance-intensive environment (such as mirrors, scales, fashion magazine covers, and appearance compliments). Across all of these studies, the inductions activated state self-objectification by emphasizing (with varying degrees of subtlety) women's bodies and appearance, which produced a variety of negative consequences for women such as negative body image, anxiety, and poorer math performance.

To confirm that a state of self-objectification has been induced, researchers commonly administer the Twenty Statements Test, which asks women to make up to 20 different statements about themselves and their identity that complete the sentence "I am______." Responses to these statements are coded by independent judges into different categories to determine the percentage of appearance-based attributes indicated relative to attributes unrelated to appearance. If respondents are in a state of self-objectification, then they should provide more appearance-based responses relative to other responses, compared to respondents in control conditions (where state self-objectification is not induced). A proper

debriefing to assess the respondents' knowledge and experience during the study is also important.

Sexualization of Girls and Women

Although not the intended focus of objectification theory, scholars have attempted to further articulate the causal underpinnings of the objectification of women. The American Psychological Association's (APA) task force report on the sexualization of girls, compiled and written by Eileen Zurbriggen and colleagues, showcased the breadth and impact of the sexualization of girls and women in Westernized cultures, particularly American culture. Sexualization occurs when (1) a person's value comes only from his or her sexual appeal or behavior, to the exclusion of other characteristics; (2) a person is held to a standard that equates physical attractiveness (narrowly defined) with being sexy; (3) a person is sexually objectified; or (4) sexuality is inappropriately imposed upon a person. This last condition is especially relevant to children who are imbued with adult sexuality. From this standpoint, specific acts and experiences of sexual objectification are subsumed under the broader practice of sexualization that permeates the dominant culture in Westernized societies. Like sexual objectification, sexualization is described as occurring along a continuum from less to more extreme practices, for example, from sexualized evaluations to sexual exploitation in the form of trafficking or abuse.

The APA task force report confirmed that girls exposed to sexualizing and objectifying media or sexualized interpersonal encounters are more likely to experience body dissatisfaction, depression, lower self-esteem, and negative interpersonal relationships with male and female peers. In addition, there is some evidence to support the idea that viewing sexualized portrayals of girls could lead viewers to associate even nonsexualized children with sex. This report highlighted the paucity of research on the sexualization of girls, and the imperative to direct resources toward closing this gap in our understanding of the developmental trajectory of girls under conditions of sexualization.

In more direct tests of objectification theory, both correlational and experimental studies have demonstrated that interpersonal encounters of sexual objectification (e.g., sexualized gazing, sexual commentary, and sexual harassment) predict higher levels of self-objectification and self-surveillance. In addition, several of the experimental studies described above that induced state self-objectification arguably did so by exposing women to a sexually objectifying experience, which in turn prompted women to focus more on their bodies. Thus, there is empirical research to support the assumed link between sexual objectification and self-objectification.

Intersectionality in Objectification Theory

Objectification theory is largely based on the experiences of White, North American and Australian, and heterosexual women, and tested with samples composed predominantly of White, heterosexual, college-educated women – greatly limiting our understanding of the experience of self-objectification among women of color, lesbian women, women over the age of 25 or under the age of 18, and other marginalized groups of women. Bonnie Moradi has made a critical call for incorporating intersectionality more explicitly into the study of

self-objectification, which scholars of objectification theory are urged to heed. By virtue of sharing the biological reality of a female body, it is assumed that girls and women of all orientations and backgrounds will experience a shared set of psychological experiences from living within a sexually objectifying cultural milieu. Yet, sufficient evidence is lacking for both the similarities and differences in self-objectification across diverse groups of women. An intersectional approach would allow for greater consideration of the role of intersecting social identifications in how self-objectification impacts body image and other appearance-related outcomes. Several of these social identifications are considered separately below.

Gender

Objectification theory was developed to understand and explain the experiences of girls and women. In general, it appears that girls and women come to take more fragmented, compartmentalized views of their bodies, whereas boys come to take more functional, holistic views of their bodies. Research has demonstrated that adolescent girls (aged 11-13) report significantly more third-person perspective-taking on their bodies than adolescent boys do. Some scholars have applied objectification theory to men without fully considering the perspective of the male gaze that is embedded within the framework to explain how self-objectification is set to occur. Research with gay men supports this point in that gay men report markedly higher self-objectification than do heterosexual men. Consistent with objectification theory, gay men's higher self-objectification scores represent a striving to maintain a satisfying and pleasing appearance to men. Heterosexual men, generally speaking, do not feel sexually objectified by other men. When men feel sexually objectified by women, they do not seem to respond as negatively.

This focus on girls and women does not deny that boys and men experience sexual and self-objectification. Indeed, those men who do self-objectify also report more body shame and disordered eating. However, caution is warranted in the immediate and direct application of current objectification theory to men's experiences. In short, there are other psychological variables that are likely to be more relevant to men's body-self relations. However, the nature of men's experiences of sexual objectification – or the lack thereof – represents an equally important way in which men experience their own bodies within hypersexualized cultural contexts. Research is sorely needed to determine how variability in the presence or the absence of sexual objectification, and the attendant self-objectification, may lead men and women to develop particular self-body relationships.

Sexual Orientation

Most of the research on objectification theory has investigated samples of heterosexual women or assumed heterosexuality. Scholars have enumerated several reasons why lesbian women may be less likely to internalize the objectifying gaze and thus be protected from sexual and self-objectification: (a) they are not trying to attract men; (b) lesbian communities place less emphasis on appearance; and (c) lesbians may be better positioned on the margins to challenge culture-wide practices of sexually objectifying women. However, research has demonstrated no difference between heterosexual and lesbian women

in the extent to which they experience sexual objectification (i.e., being gazed at, harassed) or in self-objectification. These findings suggest that the shared experience of living in a female body within a heterosexist and sexually objectifying culture milieu trumps the potential protection given by a lesbian sexual orientation. However, these scholars also found that heterosexual women engaged in significantly higher levels of self-surveillance than did lesbian women, which suggests that knowing appearance is important and acting on that knowledge may be an important phenomenological difference in self-objectification between heterosexual and lesbian women. Regardless of sexual orientation, though, researchers have found that higher self-surveillance is linked to more negative outcomes in women, such as body shame, disordered eating, and depressive symptoms.

In other research, the original model of objectification theory explained disordered eating among heterosexual women very well, but not as well for lesbian women. Instead, a different and more complex model has emerged for lesbian women that links sexual objectification directly to body shame, interoceptive awareness, and disordered eating. In sum, the evidence to date for the degree and consequences of self-objectification among lesbian women is mixed, and more systematic research is sorely needed.

Age

Research that has investigated older samples of women suggests that age may be a protective factor against self-objectification and the associated consequences. For example, some researchers have found that self-objectification, self-surveillance, body shame, appearance anxiety, and disordered eating all decrease with age. Research suggests that women in their 20s and 30s reported the highest levels of self-objectification, women in their 40s and 50s reported medium levels of self-objectification, and women in their 60s, 70s, and 80s reported the lowest levels of self-objectification. One explanation for this decreased trend is that as women age, their reproductive potential decreases and they are less often the targets of sexual objectification. Thus, it seems that as women become less visible and available for public consumption, they are less likely to experience this particular set of negative consequences.

At the other end of the age spectrum, preadolescent and adolescent girls report similar levels of self-objectification to college women – and both self-objectification and self-surveillance are positively associated with body shame and disordered eating in these age-groups. These patterns have been observed in girls as young as 11 years old. We know virtually nothing about self-objectification and its consequences in girls younger than 11. More research is needed with girls and women across the entire age spectrum to fully understand the influence of the sexualization of girls and women and self-objectification across the life span.

Women of Color

Most of the research on objectification theory has investigated samples of White women. There appear to be both similarities and differences in self-objectification between White women and women of color. Some research has shown that women of color (Hispanic, Asian, and African American) report levels of self-objectification similar to that of White women, but that

African American women report significantly less state self-objectification than do White women, for example, when wearing a swimsuit. Across all groups of women, however, the same pattern of relations between self-objectification, body shame, and disordered eating has been observed. Investigating the applicability and utility of objectification theory for understanding the experiences of women of color across cultures should be a high priority in the next decade of objectification research.

Conclusion

This article summarizes objectification theory, highlighting the unique impact of self-objectification on women's self-body relations. Despite several limitations to generalizability, research on objectification theory that self-objectification and self-surveillance do indeed serve as critical explanatory factors for understanding women's body image in contemporary Westernized societies. Self-objectification keeps appearance at the forefront of women's minds. The consequences associated with this self-perspective are serious and numerous. Thus, the sexually objectifying gaze serves as a particularly potent way to limit women's social roles and behaviors by coaxing them into habitual self-monitoring of their physical appearance. Limitations to generalizability notwithstanding, objectification theory can explain how the sexualized way in which women's bodies are evaluated within Westernized cultural contexts has both personal and political implications for women's lives.

See also: Beauty over the Centuries – Female; Bodybuilding; Body Image and "Fat Talk"; Body Image and Gender Roles; Body Image and Sexual Functioning; Body Image Behaviors: Checking, Fixing, and Avoiding: Body Image Development -Adolescent Girls; Body Image Development - Adult Women; Body Image Development - Girl Children; Body Image: Familial Influences: Body Image in Social Contexts: Body Image: Peer Influences: Breast Size: Children's Media Influences: Clothing and Adornment: Social Psychology Perspectives; Cosmetics Use: Psychological Perspectives; Dieting (Chronic); Dolls and Action Figures; Feminist Perspectives on Body Image and Physical Appearance: Internalization of Thin-Ideal and Muscular-Ideal; Media Influences on Female Body Image; Muscularity and Body Image; Occupational and Economic Consequences of Physical Attractiveness: Appearance Changes Across Adulthood - Women; Physical Appearance Changes in Childhood and Adolescence - Girls; Physical Attractiveness Stereotyping; Positive Psychology Perspectives on Body Image; Preventing Body Image Problems: Ecological and Activism Approaches; Preventing Body Image Problems: Public Policy Approaches; Preventing Image Problems: School-Based Self-Discrepancy Theory and Body Image; Social Comparison Theory and Body Image; Sociocultural Perspectives on Body Image: Tanning: Natural and Artificial: Teasing. Appearance-Related.

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http://www.bodypositive.com - Body Positive.

http://www.thedailyfemme.com - The Daily Femme.

http://www.genderads.com - Gender Ads.

http://www.nomas.org — National Organization for Men Against Sexism.

http://www.now.org — National Organization for Women: Media Hall of Shame — Objectification of women.