

3-30-2007

The influences of identities and social connectedness on self-objectification

Melissa Grey

Follow this and additional works at: <http://commons.emich.edu/theses>



Part of the [Clinical Psychology Commons](#)

Recommended Citation

Grey, Melissa, "The influences of identities and social connectedness on self-objectification" (2007). *Master's Theses and Doctoral Dissertations*. 141.

<http://commons.emich.edu/theses/141>

This Open Access Dissertation is brought to you for free and open access by the Master's Theses, and Doctoral Dissertations, and Graduate Capstone Projects at DigitalCommons@EMU. It has been accepted for inclusion in Master's Theses and Doctoral Dissertations by an authorized administrator of DigitalCommons@EMU. For more information, please contact lib-ir@emich.edu.

The influences of identities and social connectedness on self-objectification

Melissa Grey

Thesis

Submitted to the Department of Psychology

Eastern Michigan University

In partial fulfillment of the requirements

for the degree of

DOCTORATE OF PHILOSOPHY

In Clinical Psychology

Thesis Committee:

Silvia von Kluge, PhD, Chair

Stephen Jefferson, PhD

Amy M. Young, PhD

Nina Nabors, PhD

March 30, 2007

Ypsilanti, Michigan

Abstract

According to objectification theory, girls and women are socialized to adopt an external observer's view of the self. Self-objectification occurs when there is an emphasis on physical appearance and a de-emphasis and devaluation of internal and physical competence features, all of which have been related to negative psychological consequences. Trait self-objectification is chronic preoccupation with physical appearance that occurs with little or no environmental appearance cues. While self-objectification has been demonstrated in diverse samples, research suggests self-objectification is particularly prominent for women. This study investigated the relationships between different feminist and sexual identities and trait self-objectification. A sample of 187 undergraduate women was administered a survey to measure affiliation with sexual and feminist identities, self-objectification, and well-being. While support for the protective influence of identification as a feminist, lesbian, and bisexual against self-objectification was not found, two measures of feminist identity development were found to be protective against self-objectification, and some support for the role of connection with the feminist community was found. Results are discussed in the context of objectification theory and constraints of this study.

TABLE OF CONTENTS

Abstract	ii
Chapter 1. Introduction and Background	1
Chapter 2. Review of Related Literature	2
Objectification Theory	2
Lesbian and Bisexual Identity	7
Feminist Identity	10
Social and Community Support	14
Limitations in the Literatures	16
Hypotheses	19
Chapter 3. Method	21
Participants	21
Materials	21
Procedures	24
Human Subjects	25
Statistical Analyses	21
Chapter 4. Results	27
Sample Description	27
Description of Relationships Among Variables	28
Tests of Hypotheses	29
Exploratory Analyses	33
Chapter 5. Discussion.....	33
Limitations	39

Future Directions	40
References	44
Appendices.....	51
Appendix A. Demographic Questionnaire	52
Appendix B. Feminist Identity Development Scale	54
Appendix C. The Connection With the Lesbian Community scale	57
Appendix D. The Connection With the Feminist Community Scale	58
Appendix E. Sociocultural Attitudes Towards Appearance Questionnaire	59
Appendix F. The Self-Objectification Questionnaire	61
Appendix G. The Body Shame subscale of the Objectified Body-Conscious Scale	63
Appendix H. The Center for Epidemiological Studies Depression Scale	64

LIST OF TABLES

<u>Table</u>	<u>page</u>
Table 1. Sample characteristics	65
Table 2. Descriptive statistics of measures of interest	66
Table 3. Correlation matrix of variables of interest for respondents who provided valid self-objectification profiles.....	67

Chapter 1. Introduction and Background

According to objectification theory, girls and women are socialized to adopt an external observer's view of the self. Self-objectification occurs when there is an emphasis on physical appearance, de-emphasis and devaluation of internal and physical competence features, which has been related to negative psychological consequences such as depression and body shame. Trait self-objectification is chronic preoccupation with physical appearance that occurs with little or no environmental cues to appearance. While self-objectification has been demonstrated in diverse samples, research suggests self-objectification is particularly powerful for women.

Women regularly encounter objectifying images and messages. Women's identities and connections to others may affect the way in which objectifying materials are identified and filtered and whether they are internalized. Although it may be that mainstream cultural images of objectification can overwhelm women's ability to filter these messages or women's ability to maintain awareness of and resist self-objectification, connectedness to feminist or lesbian communities may function as a powerful buffer or as an additive agent in such a filter.

The purpose of this study is to examine the relationships between sexual and feminist identities, support from individual's respective communities, and objectification. As suggested by previous authors, lesbian and bisexual identities may provide different vantage points than heterosexual women's from which individuals experience objectifying material and situations, affecting how or to what extent they internalize objectification. Similarly, feminist identity may include a framework or filter that provides tools to recognize and resist self-objectification different from those of women who do not identify as feminist. One

aspect that all of these invisible identities share is potential connection to community(ies) often outside of mainstream media and culture that may provide support in resisting and coping with living in objectifying contexts. In addition to the devaluation of women in the process of objectification, objectification has been associated with negative psychological outcomes such as maladaptive eating behaviors, depression, and shame. This study aims to help in understanding how sexual and feminist identities in addition to support from lesbian and feminist communities may reduce internalizing mainstream appearance ideals, self-objectification, and, consequently, negative psychological outcomes.

Chapter 2. Review of Related Literature

Objectification Theory

Objectification theory (Frederickson & Roberts, 1997) offers a framework for conceptualizing some of the psychological effects of being a girl or woman in a society that objectifies the female body or that treats woman as body-object rather than body as part of person. According to Frederickson and Roberts, over time women are socialized to adopt an external observer's perspective of the self (i.e. to self-objectify), a sign of effective gender socialization. Viewing the self as an observer can be adaptive. For example, in situations in which a person is being evaluated according to her or his physical characteristics, it may be adaptive to presume an observer's view of the self in order to anticipate and influence others' perceptions. Objectification theory, though, asserts that the adoption of an observer's perspective, of viewing one's self as an object valued for use by others, has damaging psychological consequences, such as anxiety and shame.

A distinction should be made between state and trait self-objectification. State self-objectification is elicited through situations that emphasize an observer's perspective,

whereas trait self-objectification is an individual difference variable measuring chronic preoccupation with appearance (Miner-Rubino, Twenge, & Frederickson, 2002).

Frederickson and Roberts (1997) theorized that the greater women's internalization of social messages of objectification, the more likely women are to self-objectify. That is, women who have extensively internalized objectifying social messages may self-objectify with little or no elicitation through objectifying circumstances. Miner-Rubino and colleagues found trait self-objectification in women positively related to mental health constructs including body shame, depression, emotional instability, and the personality trait of neuroticism. Negative relationships were found between trait self-objectification and personality traits of agreeableness and intellect or openness to experience.

Psychological problems associated with self-objectification have been demonstrated in various studies. In samples of women, self-objectification has been associated with body shame and disordered eating symptoms (Calegero, Davis, & Thompson, 2005; Greenleaf, 2005; Greenleaf & McGreer, 2006; Harrison & Frederickson, 2003; Muehlenkamp & Saris-Baglana, 2002; Noll & Frederickson, 1998; Slater & Tiggeman, 2002; Tiggeman & Kuring, 2004; Tiggeman & Lynch, 2001), negative attitudes toward menstruation (Roberts, 2004), decreased appeal of sex (Roberts & Gettman, 2004), and depressive symptoms (Harrison & Frederickson; Miner-Rubino, Twenge, & Frederickson, 2002; Muehlenkamp & Saris-Baglana; Tiggeman & Kuring, 2004). One study also demonstrated the role of self-objectification in the relationship between depression and self-harm. Specifically, the relationship between self-objectification and depression was fully mediated by facets of negative body regard, including shame, while depression predicted bodily self-harm. That is, facets of negative body regard accounted for the variation in the relationship between self-

objectification and depression, and depression was a positive predictor of bodily self-harm (Muehlenkamp, Swanson, & Brausch, 2005).

Self-objectification has been evinced through a number of methodologies. Manipulation of awareness of one's body through type of apparel has demonstrated that when attention is drawn to young women's bodies, they tend to self-objectify. For example, in one study (Frederickson, Roberts, Noll, Quinn, & Twenge, 1998), college students wore either a swimsuit or sweater as part of what was believed to be a market survey of clothing. Participants were left alone in a room while wearing apparel and completing questionnaires. Women, but not men, who wore a swimsuit demonstrated increased self-objectification, body shame, more negative emotions, and decreased math scores compared to those who wore a sweater. In a sample of undergraduate women, Gapinski, Brownell, and LaFrance (2003) found that induced self-objectification was also associated with decreased attentiveness and increased anxiety. Quinn, Kallen, Twenge, and Frederickson (2006) also found that compared to those in the sweater condition, women in the swimsuit condition performed more poorly on a Stroop task, or a task of focused attention and basic executive functioning. Women in the swimsuit condition responded more slowly to the color-naming task regardless of the type of words used (i.e. body words, color words, or neutral words). Another study showed that even after redressing, changing out of the swimsuit or sweater, women in the swimsuit condition continued to have body related thoughts, accounted for by experience of body shame (Quinn, Kallen, & Cathey, 2006).

Researchers have suggested that self-objectification may adversely affect many groups. Although women, particularly young, White women, were adversely affected by induced self-objectification (i.e. wearing a swimsuit), men and ethnic minorities also

demonstrated negative effects of self-objectification such as increased body shame, decreased math scores, and state self-esteem; however, the effects of self-objectification were stronger for White women than any other group (Hebl, King, & Lin, 2004).

Research has shown that more subtle efforts may be sufficient to induce self-objectification. The anticipation of objectifying material, even without direct contact with objectifying material (e.g. magazines, verbal body commentary, gaze, wearing a revealing bathing suit) may elicit self-objectification and its negative consequences (Frederickson & Roberts, 1997). Male gaze was hypothesized to be one avenue of objectifying women and socializing girls and women to self-objectify (Frederickson & Roberts). Indeed, Calogero (2004) found that anticipation of male gaze, and not the actual experience of it, induced greater self-objectification, body shame, and social physique anxiety than anticipation of female gaze and no gaze. This was found when no gaze was encountered, but for anticipation only. However, the amount of offered food consumed by participants, a measure of dietary restraint, did not differ among anticipatory gaze conditions. Moreover, Roberts and Gettman (2004) found a word priming task sufficient to induce self-objectification in women. Women, but not men, who made grammatically correct sentences from words associated with objectification or an appearance orientation (e.g. slender) demonstrated greater self-objectification, appearance anxiety, shame, disgust, and decreased appeal for the physical aspects of sex than women who formed sentences from a group of words related to body competence words (e.g. vitality). Roberts and Gettman suggested that subtle exposure to objectifying material was sufficient to elicit negative psychological consequences, and a lifetime of subtle and overt exposure may have more severe consequences.

Self-objectification assumes internalization of social ideals or attitudes of physical appearance. Morry and Staska (2001) suggested that internalization of gendered body ideals mediates the relationship between self-objectification and disordered eating. Beauty magazines for women and fitness magazines for men were associated with internalization of physical body ideals for their respective gender. For women, the relationship between reading beauty magazines, eating problems, and self-objectification was mediated by internalization of societal ideals (Morry & Staska). Women who read beauty magazines were at greater risk for self-objectification and eating problems when they also had greatly internalized mainstream appearance ideals. Aubrey (2006) investigated the effects of exposure to objectifying media on college students' self-objectification over a one-year period. Exposure to objectifying magazines and television shows at baseline predicted an increase in trait self-objectification one year later. These studies provide evidence for the influence of objectifying social messages on self-objectification.

Different belief structures and past experiences may impact the way objectifying material and images are experienced. Different women may experience self-objectification in different circumstances (Harrison & Frederickson, 2003) and women with values and ideals outside of mainstream culture might frame objectifying material as such in attempts to decrease self-objectification and its consequences (Rubin, Nermoff, & Russo, 2003). The exploration of important identities, specifically lesbian, bisexual, and feminist identities, may reveal how different experiences and belief structures impact individual experience with self-objectification and, more specifically, which experiences may buffer women from self-objectification.

Lesbian and Bisexual Identity

Although empirical investigations of lesbian and bisexual-identified women's interactions with mainstream body and appearance messages are limited, recent research suggests that sexual identity may influence how women perceive and are influenced by mainstream images and material. For example, self-identified femme lesbians in focus groups described how they were often treated as heterosexual female objects in heterosexual contexts and how they maneuvered through these contexts in resistance and felt more comfortable, secure, and less defensive in lesbian communities (Levitt, Gerrish, & Hiestand, 2003). In interviews, Melia (1995) reported that lesbians described playing heterosexuality like a game. While these women often felt pressure to pass as heterosexual, "there is a sense that dressing as a heterosexual woman can, in fact, be more of 'a game' than an acquiescence to the compulsory heterosexual image" (p. 551). One interviewee stated that she wore a dress for a wedding, but proudly refrained from shaving her armpits to avoid conformity and affirm personal identity. Melia suggested that lesbian women often found ways to actively resist compulsory heterosexual practices. While the interviewees described situations in which they used the strategy of passing in more constrained circumstances, some also described using an overt, stereotypical butch image to affirm their lesbian identity. It appears that these women's lesbian identification and lack of internalization of compulsory heterosexuality had made the heterosexual norms, including those of appearance, external and less personally relevant to their own ideals of appearance and resistance.

Brown (1989) suggested that despite diverse experiences among lesbians, gay men, and bisexual men and women (LGB), there are common elements in the lives and reality of

LGB people¹. Brown described *biculturalism* as the experience of lesbians and gay men living within both heterosexual and lesbian and gay realities or communities. It may be that living both lesbian and heterosexual experiences affords a different way of understanding the world and the self. This bicultural perspective allows for both an understanding of established rules of mainstream culture and the envisioning of new ways culture can operate. Marginality is a second common element identified by Brown. She suggested that experiencing the world from a different and alienated view allows LGB individuals to perceive the norms and experiences of mainstream culture in a way that those embedded within that culture cannot. Finally, Brown suggested that because there is a lack of norms established for how to be LGB, a common element is creativity, or the continued invention of the self and norms. Being lesbian or bisexual in itself may provide a different worldview and the potential for continual creating and re-creating of experiences, norms, and rules.

Few studies have investigated women's sexual identity and self-objectification. Kozee and Tylka (2006) tested models of the relations between self-objectification and awareness of internal bodily states, body shame, and depression on a sample of heterosexual and lesbian women. The model that fit the heterosexual women's data was not a good fit for the lesbian sample. For heterosexual women, the effect of self-objectification on body shame, decreased awareness of internal bodily states, and disordered eating symptoms was indirect via the mediators of body surveillance and body shame, while self-objectification was directly related to these for lesbian women. Body surveillance for lesbian women, but awareness of internal bodily states for heterosexual women directly related to disordered eating symptoms. Although exploratory, Kozee's and Tylka's findings suggest that

¹ Although bisexual men and women were not included in her analysis, bisexual experiences may share the common elements by way of aspects of shared community among LGB people and their marginalized status.

experiences of self-objectification in relation to eating problems may be different.

Noffsinger-Frazier (2004) also found that a lesbian identity protected women from self-objectification and the internalization of social appearance ideals as well as eating disorder symptoms. These findings suggest that a lesbian identity may protect women from internalizing mainstream appearance ideals as well as an observer's perspective of the self.

Bisexual-identified women's experiences of self-objectification have been understudied. Only one study has investigated bisexual women's experience of self-objectification. That study found that bisexual-identified women who were exotic dancers reported greater self-objectification than heterosexual dancers and college students (Downs, James, & Cowan, 2006). This finding was incidental to the authors' study aims and sheds little light on bisexual-identified women's experiences of self-objectification. That these women were exotic dancers prevents generalization to bisexual women who are not exotic dancers. Further research is needed to understand how the complexity of women's sexual identities may act to increase or decrease their self-objectification.

Several studies have investigated the relationship between women's sexual identity and body image. Lesbian women have demonstrated the least amount of concern for appearance, despite a greater average body weight, compared to gay men and heterosexual women (Schneider, O'Leary, & Jenkins, 1993). Lesbians were also the least dissatisfied with their bodies and less likely to demonstrate eating disorder symptoms compared to gay men and heterosexual women (Siever, 1994). However, evidence for sexual identity as a mediator or correlate of problem eating and body image has been mixed (Guille & Chrisler, 1999). A meta-analysis of studies on sexual identity differences in body satisfaction suggested lesbian and heterosexual women did not differ (Morrison, Morrison, & Sager, 2004). However, body

mass may have distorted this initial finding. In studies in which heterosexual and lesbian women's body mass did not significantly differ, a significant effect size was found such that lesbians reported greater body satisfaction than heterosexual women. By contrast, in a separate analysis of studies in which group body mass differed significantly, such that heterosexual women reported lower body mass on average than lesbian women, there were no differences between heterosexual and lesbian body satisfaction (Morrison et al., 2004).

Guille and Chrisler (1999) suggested that feminism might be an additional identity affecting possible relations between sexual identity and body satisfaction, such that feminist lesbians may demonstrate less dissatisfaction than lesbians who do not identify as feminist. Using similar logic, Szymanski (2004) found that feminist lesbians and bisexual women demonstrated less internalized heterosexism than lesbians who did not identify as feminist. Feminist ideals and beliefs may represent an alternative lens through which to filter cultural messages about womanhood (Rubin et al., 2004). Such a filter may affect how or to what degree a woman internalizes mainstream cultural attitudes. Sexual identity represents an area within objectification theory that is limited by its lack of research.

Feminist Identity

According to Downing and Roush's (1985) model of Feminist Identity Development, women's feminist identity is conceptualized as stagewise development. Downing and Roush point out that movement through stages may stagnate, and women may return to previous stages, cycling rather than evolving to permanent achievement. In the first stage, Passive Acceptance, a woman maintains a worldview consistent with traditional gender roles and may deny societal gender bias. Revelation is the next stage in which a woman's worldview has been challenged by a series of crises. A woman in this stage is purported to be open to

questioning gender roles and the self. Thinking about gender may be dualistic, and men may be perceived in negative terms and women in positive terms. In the third stage of Embeddedness-Emanation, a woman is characterized by connection with carefully selected women and she begins to strengthen her new identity. In this stage a woman may begin to interact with men again and develop more relativistic, less dualistic thinking about men. In the fourth stage of Synthesis, a woman develops a positive, authentic self-concept as a feminist, evaluates men individually, interacts with flexibility, and acknowledges both oppression-related and other causes of events. Finally, the Active Commitment stage is reflected in a woman's consolidated identity, characterized by a commitment to social change. Women in this stage consider men to be equal to but different from women.

Research on factors that influence feminist self-identification may help elucidate the context of feminist identity. Women's studies courses have been found as predictive of feminist identification (Brush, Gold, & White, 1978; Liss, Crawford, & Popp, 2004). Bargad and Hyde (1991) found women's studies courses positively affected feminist identification. Feminist identity was measured using Downing and Roush's (1985) model of feminist identity development before and after women's studies courses, and the women in women's studies courses progressed significantly more through feminist identity stages than those in a control group. Although these women may be unique from the control group in that they had an initial interest in women's studies courses, significant development through the feminist stages suggests women's studies courses may be an important avenue for developing emerging feminist identities. Exposure to feminism appears to be an important predictor of self-identification. Exposure may occur through feminist literature, women's studies courses, interpersonal relationships with feminists, membership in a women's group or organization,

common fate or the extent to which an individual shares outcomes with her group (Reid & Purcell, 2004), and by having feminists in a person's family of origin (Zucker, 2004).

Some negative predictors of feminist self-identification have been found, such as the amount of television viewed (Zucker, 2004) and negative evaluations of feminists (Reid & Purcell, 2004; Zucker). These studies suggest that negative images of feminists reduce the likelihood of identification as feminist, but they also point to the potential indirect effect of media. The amount of television consumed may be a proxy measure for the degree to which one is embedded in dominant culture. Consuming a relatively large amount of mainstream media such as television may indicate that taking a position within mainstream culture is in opposition to that of identifying as feminist. Alternatively, mainstream images of feminists on television may represent more specific instances of negative evaluations of feminists.

Recent literature and research has emerged about young women's notions of gender equality and the endorsement of feminist beliefs without feminist identification. "I'm not a feminist, but" has become one way to describe women who endorse egalitarianism but refrain from identifying as feminist (Zucker, 2004). Zucker noted that an important difference between those who identify as feminist and those who endorse feminist beliefs but avoid the feminist label is that the former tend to be more socially active. There is conflicting evidence for the prevalence of disavowing feminist identity while endorsing basic feminist tenets, although women's frequent ambivalence and confusion about what is feminism appears to be a consensus (Aronson, 2003; Burn, Aboud, & Moyles, 2000; Zucker).

Feminist identification has been researched as a protective factor in a few studies. Noffsinger-Frazier (2004) found that women high on the feminist identity phase Synthesis reported lower levels of eating disorder symptomology. While feminist identification as

measured by the Feminist Identity Development Scale (FIDS) did not predict scores on measures of body image, traditional attitudes about gender role expectancies predicted greater appearance orientation, internalization of mainstream appearance ideals, and body dysphoria to a lesser extent (Cash, Ancis, & Strachan, 1997). Snyder and Hasbrouck (1996) found Active Commitment to feminism related to low scores of body dissatisfaction and drive for thinness. Sabik and Tylka (2006) studied feminist identity in relation to eating disorder symptomology. Synthesis and Active Commitment phases of feminist identity moderated the relationship between perceived sexist events and eating disorder symptoms, such that for women who endorsed these feminist affirmative phases of identity, sexist events did not contribute to eating disorder symptoms. Feminist identity may act as a kind of buffer by reducing the impact of sexist experiences on one's well-being.

Personal ideals of physical appearance may be influenced by less visible identities, such as gender belief systems. Feminist beliefs may affect how women perceive and are affected by typically self-objectifying material. In a focus group study with self-identified feminist women, the relationship between feminist identity and self-objectification was explored (Rubin, Nermoff, & Russo, 2004). Participants expressed a number of strategies for resisting mainstream social standards of appearance (i.e., thin, white, heterosexual beauty standard) and objectifying experiences and images. Although participants recognized and maintained awareness of objectification and were able to express the ways in which they coped with and reframed cultural messages, they expressed conflict between their feminist beliefs and feelings about their own bodies and beauty ideals. Rubin and colleagues (2004) note that this may be a mere exposure effect or aesthetic conditioning: the messages from

mainstream culture may be too many to be completely reframed or discarded, despite awareness of the conflicts between the women's personal and larger society's ideals.

Social and Community Support

Support from one's identified community may be an important resource for women who identify as lesbian, bisexual, or feminist. Bowleg, Craig, and Burkholder (2004) found that social support and availability of LGBT resources were positive predictors of active coping in Black lesbians. In a sample of LGB community youth, Hershberger and D'Augelli (1995) found that family support was significantly associated with self-acceptance and a mediator of the relationship between being victimized and mental health. In a study of women professors, Klonis, Endo, Crosby, and Worell (1997) found 61% of respondents indicated feminism helped them join with others to address issues of discrimination, suggesting feminism may be a source of social support. In a sample of Canadian lesbian women, the strongest predictor of clinical depression was lack of social support (Ayala & Coleman, 2000). While this may be a common phenomenon for women in general, it is worthwhile to note the importance of social support in lesbians' lives.

Identity support has been described as feeling valued and accepted as a person, and specifically as feeling accepted and valued as a lesbian-identified woman by important persons in a social network (Beals & Peplau, 2005). A sample of 42 lesbians provided repeated self-assessments of well-being, identity support, and identity devaluation, or feeling devalued by others, over a two-week period. Identity support was found as a negative predictor of depression and a positive predictor of life satisfaction, self-esteem, and a composite of wellbeing, even after controlling for three other forms of social support. Identity devaluation was a negative predictor of life satisfaction, self-esteem, and a

composite of wellbeing. Moreover, daily identity support was positively related to wellbeing at a two-month follow-up. Beals and Peplau suggest that receiving acceptance, support, and understanding of a woman's lesbian identity from individuals who are important in lesbians' social networks may be beneficial to, and an important component of, lesbians' well-being.

Although only moderate relationships between feminist identity and body image have been found (e.g., Cash, Ancis, & Strachman, 1997), feminist and lesbian support may be important and affecting influences. Guille and Chrisler (1999) found that lesbians who scored high in the Revelation phase of feminist identity also scored high on negative eating attitudes; low scores on feminist identity among this group were related with compulsive eating. Thus, Guille and Chrisler (1999) suggest that lesbians with feminist support have greater coping resources. This is supported by Adams' and Leavy's (1986) finding that lesbians who are active in feminist organizations tend to have more coping resources, including social, emotional, and political support.

Downing and Roush's (1985) model of feminist identity development implicitly emphasizes connection to other women or groups of like-minded women as likely or perhaps necessary components of developing a positive identity as a feminist. For example, consciousness-raising groups and involvement in the women's movement may precipitate the revelation stage (Downing & Roush, 1985). Although many women may encounter great difficulty in separating from the dominant society because of prominent personal social roles such as motherhood, Downing and Roush emphasize the importance of interpersonal connectedness. For example, women in the Embeddedness–Emanation phase may develop close personal connections with women, and lesbians in particular may transition to this phase more easily if they have a female-oriented group of peers (Downing & Roush). Both

staying in traditional externally defined roles and moving into personally empowering space have been hypothesized as associated with a particular social context. Social connection is also implied in the Active Commitment phase. That is, a commitment to societal change is unlikely to be expressed in isolation of others with similar interests. It is suggested that crises and creative action are more likely to occur in a challenging, supportive, or some social context; that feminist and perhaps sexual identity development are not solitary existential decisions but are experiences embedded in social interactions.

Women regularly encounter objectifying images and messages. The internalization of an objectifying observer's view has been related to numerous negative outcomes, including depression and body shame (Calegero, 2004; Frederickson et al., 1998; Harrison & Fredersickson, 2003; Miner-Rubino et al., 2002; Muehlenkamp & Saris-Baglama, 2002; Roberts & Gettman, 2004; Tiggemen & Kuring, 2004). Women's identities and connections to others may affect the way in which objectifying materials are identified and filtered, and whether they are internalized. Although it may be that mainstream cultural images of objectification can overwhelm women's ability to filter these messages (Rubin, Nermoff, & Russo, 2004) or ability to maintain awareness of and resist self-objectification, connectedness to feminist or lesbian communities may function as a powerful and additive agent in such a filter.

Limitations in the Literatures

Research on objectification contains several limitations. Many of the studies have used samples that primarily consist of young, White, college women (e.g. Frederickson et al., 1998). In a study of adolescent girls, girls of different racial groups tended to respond to varying kinds of objectifying material differently (Harrison & Frederickson, 2003). The

generalizability of much of the objectification research is not established. Furthermore, much of the research is correlational. The experimental manipulations that utilize different types of apparel (e.g. Frederickson et al., 1998) have aided understanding of self-objectification; however, the apparel cannot reasonably be exactly the same for men and women. That is, men's and women's bathing suits are often strikingly dissimilar. In a study that used men's speedos instead of trunks, there was an effect for type of apparel on self-objectification for men as well as women, although the effect was strongest for women (Hebl et al., 2004).

Research on lesbian and bisexual identity, body satisfaction, and objectification also has limitations. First, there have been only a few studies addressing lesbian and bisexual identity in association with objectification, and the research that studied bisexual identity has restricted generalizability to women exotic dancers. The literature on body satisfaction among lesbian women is larger but has been mixed (Guille & Chrisler, 1999). That is, research has supported both that there are no group differences between lesbian and heterosexual women (Guille & Chrisler) and that lesbians have a greater body satisfaction (Schneider et al., 1993). Although body mass may contribute to these disparate findings (Morrison et al., 2004), it is unclear whether other variables influence the relationship between sexual identity and body satisfaction. Secondly, there is a dearth of research on bisexual women's body satisfaction. The nuances of possible relationships between sexual identity and body satisfaction have yet to be explored. Finally, although the concept of body satisfaction shares a similar component with self-objectification, that is, attending to certain aspects of the physical self, body satisfaction remains different from self-objectification in that satisfaction also includes a positive or negative evaluation. Thus the generalizability of body satisfaction literature to objectification theory is not pure.

Research on feminist identity within the objectification literature is sparse. Noffsinger-Frazier (2004) found relationships between the feminist identity phase Synthesis with eating disorder symptomology, supporting its protective impact. Women who scored high on Synthesis tended to exhibit fewer eating disorder symptoms. Only one additional study has addressed feminist identity and objectification. The study explored body consciousness with self-identified feminists in focus groups (Rubin et al., 2003). This study illuminated some interesting and important questions. One limitation of this study is that feminist identity was not explored or discussed. For example, it is unclear how participants defined feminism, whether participants engaged in activism, or how long they had identified as feminist. Activism has been found to be a predictor of feminist identification (Zucker, 2004), and feminist perspectives can vary widely (e.g. Henley, Meng, O'Brien, McCarthy, & Sockloskie, 1998). Finally, how long a woman had identified as a feminist may relate to her progression through such models of feminist identification as Downing and Roush's. Although self-identification as feminist was appropriate for the focus group study (Rubin et al.), these facets of women's identity may be influential. It seemed to shed light on these women's feminist identity and context in that the authors noted that this was the first opportunity for most of the participants to discuss objectifying experiences, daily struggles, and coping and resistance strategies to objectifying experiences (Rubin et al.). This comment may be an indicator of several things, such as isolation from other feminists or recent exposure to this kind of understanding of objectification; however, this information cannot be systematically analyzed and such speculations can only appropriately serve to generate further formal inquiry for future studies.

The purpose of this study is to examine the relationships between sexual and feminist identities, support from women's respective communities, and objectification. Lesbian and bisexual identities may provide different vantage points than those of heterosexual women (Brown, 1989), from which individuals experience objectifying material and situations, affecting how or to what extent they internalize objectification. Similarly, feminist identity may include a framework or filter different from that of women who do not identify as feminist, which provides tools to recognize objectifying images or circumstances and resist self-objectification (Rubin et al., 2004). One aspect that all of these invisible identities share is potential connection to a community often outside of mainstream media and culture that may provide support in resisting and coping with living in objectifying contexts. In addition to the devaluation of women in the process of objectification, objectification has been associated with negative psychological outcomes such as depression and shame (Calegero, 2004; Frederickson et al., 1998; Harrison & Frederickson, 2003; Miner-Rubino et al., 2002; Muehlenkamp & Saris-Baglana, 2002; Roberts & Gettman, 2004; Tiggemen & Kuring, 2004). This study aims to help in understanding how sexual and feminist identities, in addition to support from lesbian and feminist communities, may reduce internalizing mainstream appearance ideals and self-objectification and, consequently, reduce negative psychological outcomes.

Hypotheses:

- 1) As with previous findings (Calegero, 2004; Frederickson et al., 1998; Harrison & Frederickson, 2003; Miner-Rubino et al., 2002; Muehlenkamp & Saris-Baglana, 2002; Roberts & Gettman, 2004; Tiggemen & Kuring, 2004), self-objectification is expected to

predict body shame and depression when all women in this sample are examined together.

- 2) Women who identify as feminist are expected to exhibit less self-objectification than other women. From the Feminist Identity Development model, higher scores on the subscales of Synthesis and Active Commitment and lower scores on Passive Acceptance are expected to relate to lower self-objectification. Women who identify as lesbian or bisexual are also expected to exhibit less self-objectification. For continuous measures of lesbian and bisexual identity, the more strongly women identified as lesbian or bisexual, the lower their expected self-objectification.
- 3) The relative lack of internalization of societal physical appearance ideals is expected to mediate the relationship between identification as lesbian, bisexual, and feminist and self-objectification. Specifically, lower internalization of societal physical appearance ideals in feminist, lesbians, and bisexual women is expected to be associated with decreased self-objectification.
- 4) For the subgroup of women who identify as lesbian or bisexual, connection with the lesbian community is expected to moderate the relationship between sexual identity and internalization of societal appearance ideals, such that greater connection is expected to predict less internalization of societal appearance ideals.
- 5) For the subgroup of women who identify as feminist, connection with feminist community is expected to moderate the relationship between feminist identification and internalization of societal appearance ideals, such that greater connectedness is expected to predict less internalization of societal appearance ideals.

Chapter 3. Method

Participants

Participants were recruited predominantly from undergraduate psychology courses. Target sampling for lesbian and bisexual women students consisted of flyers posted on a university campus and announcements made through the LGBT center's email announcements. The sample consisted of 187 undergraduate women. The majority of participants were either in their Junior year, 30% ($n=60$), or Senior year, 34% ($n=64$). Fifty-three percent ($n=100$) self-identified as feminist and 82% ($n=153$) as heterosexual. See Table 1 for sample characteristics. Because data collection of lesbian and bisexual identified women students was slow, with 34 participants so identified participating over a period of one year, fewer than expected lesbian and bisexual identified participants' data were obtained.

Materials

Demographics. Participants were asked to self-report age, ethnicity, academic major, sexual identity, and feminist identity. Age, height, weight, and academic major were open-ended items, while race/ethnicity, and sexual and feminist self-identification were dichotomous or multiple-choice options. (See Appendix A for a complete list of demographic items).

Feminist Identity Development. The Feminist Identity Development Scale (FIDS; Bargad & Hyde, 1991; See Appendix B) was used to assess feminist identity development and was derived from Downing and Roush (1985). The FIDS is a 39-item self-report questionnaire. Bargad and Hyde (1991) reported alpha coefficient estimates of internal consistency ranging from .65 to .85. Five subscales compose the FIDS, corresponding to Downing and Roush's (1991) model: Passive Acceptance, Revelation, Embeddedness-Emanation, Synthesis, and

Active Commitment. For the present study, alphas for this sample ranged from .56 for the Revelation subscale to .85 for the Active Commitment subscale.

Connection With the Lesbian and Bisexual Communities. The Connection With the Lesbian Community scale (CLC; Szymanski & Chung, 2001) is a 13-item subscale of the lesbian Internalized Heterosexism Scale with a 7-point Likert-type response scale. This subscale describes a continuum from isolation to social embeddedness as one manifestation of internalized heterosexism. CLC items were derived from theoretical papers and the authors. Internal consistency reliability was supported, with an alpha of .87 for the CLC, and its construct validity was supported via its inverse correlation with self-esteem and positive relationship with loneliness (Szymanski & Chung, 2001). The language of the CLC was altered to include bisexual communities so that each item referred to the participants' respective sexual identity communities. In the present study, an alpha of .87 was also found. See Appendix C for CLC scale items.

Connection With the Feminist Community. This scale was adapted from the CLC subscale (Szymanski & Chung, 2001; Please see above) and modified to reflect connection with/isolation from feminist persons, resources, and history. The language of the CLC was altered to specifically reflect feminist rather than lesbian community. Four original items were created and added to the scale to emphasize feminist interpersonal support and personal connection. For the present study, an alpha of .77 was found for this sample. See Appendix D for Connection With the Feminist Community scale items.

Internalization of socio-cultural appearance ideals. The Socio-cultural Attitudes Towards Appearance Questionnaire (SATAQ; Heinberg, Thompson, & Stormer, 1995) was used to assess the degree that participants have internalized and are aware of mainstream attitudes

towards appearance. The SATAQ is a self-report 14-item questionnaire that uses a Likert-type response scale ranging from 1 (completely disagree) to 5 (completely agree). Heinberg et al. (1995) reported internal consistency reliability estimates: $\alpha = .88$ for the internalization subscale and $\alpha = .71$ for the awareness subscale. In the current study, $\alpha = .9$ for the Internalization subscale and $\alpha = .68$ for the Awareness subscale, suggesting support for the measure's internal consistency reliability. See Appendix E for SATAQ scale items.

Trait self-objectification. The Self-Objectification Questionnaire (SOQ; Noll & Frederickson, 1998) measures the extent to which participants are concerned with physical, appearance-based features (e.g. weight) compared to unobservable body competence-based features (e.g. strength). Participants rank order 10 attributes according to importance to one's self-concept from the least (rank = 0) to the most (rank = 9) important. Difference scores are computed by subtracting the sum of the competence attributes from the sum of the appearance-based attributes. Scores range from -25 to 25, with higher scores reflecting more appearance emphasis and interpreted as higher self-objectification. For this study, 160 participants accurately² completed the SOQ with a mean of -1.25 (SD=13.87). Scores ranged from -25 to 25. See Appendix F for SOQ items.

Body shame. The Body Shame (BS) subscale of the Objectified Body-Conscious Scale (OBCS; McKinley & Hyde, 1996) was used to assess body shame. The self-report subscale has eight items and uses a 7-point Likert-type response scale, ranging from "strongly disagree" to "strongly agree." Participants may also indicate NA if an item is not applicable to them. McKinley and Hyde (1996) reported internal consistency reliability as measured by

² Participants' responses were evaluated as accurate when they rank-ordered the items using numbers zero through nine. Participants' responses were considered inaccurate if they did not follow these instructions and used numbers more than once or other uninterpretable symbols.

alpha coefficients ranging from .70 to .84 for the BS scale, and acceptable temporal stability.

In the present study, $\alpha = .83$. See Appendix G for BS items.

Depression. The Center for Epidemiological Studies Depression Scale (CES-D; Radloff, 1977) was used to measure depressive symptoms. The CES-D is a 20-item self-report measure that uses a 6-point Likert-type scale ranging from “always” to “never.” The CES-D has demonstrated validity in non-clinical samples (Shaver & Brennan, 1991). Internal consistency reliability estimates have ranged from $\alpha = .76$ to .90 (Radloff, 1977; Shaver & Brennan, 1991), and was .88 for the present study. See Appendix H for CES-D items.

Procedure

Undergraduate women were recruited for voluntary participation from undergraduate psychology courses and the LGBT center on a Midwest university campus. Participants were administered the packet of questionnaires by appointment in sessions with 1 to 8 participants. A skip pattern guided participants to answer sexual identity, CLC, and CFC items only if they identify as lesbian or bisexual, or feminist, respectively. Informed consent was obtained, and participants were informed that they will not be penalized for refusal or withdrawal from participation. Participants recruited from undergraduate psychology courses received extra credit for participation. Only one WGS instructor in one course offered extra credit, so recruitment from these courses was lower than anticipated. Participants who identified as lesbian or bisexual and who responded to flyers or the LGBT center email announcement were offered a \$5 Meijer gift certificate as compensation for participation.

Human Subjects

All of the materials and procedures used in this study were approved by a university Department of Psychology Human Subjects Review Committee prior to recruitment of

participants and advertisement of the study. The informed consent form outlined participation requirements. Informed consent was obtained prior to survey completion. Confidentiality of all participants was ensured. Participants who were eligible for extra credit were required to provide their names and student ID numbers so that a list of participants could be provided to their instructors. All names and student numbers were separated from and stored separately from the survey data at the time surveys were submitted to the research staff, so as to de-identify the data.

Statistical Analyses

SPSS software was used to create all scales and to analyze their psychometric properties. All measures were constructed by calculating totals in SPSS. Because 89.5% ($n=144$) of the sample identified as either White/Euro-American or Black/African-American, and the remaining 10.5% of the sample identified as having membership in one of six other groups, two dichotomous race variables were constructed. One variable included Black women as one level and White women as another, with women of other racial groups excluded. A second dichotomous race variable was created in which all Women of Color were grouped together at one level and White women at another. For all analyses, the Black/White variable was used first and the Women of Color/White variable second so that all analyses that included race were conducted twice. When different findings were found, these were noted. Self-reported weight and height were used to construct the BMI variable. All participants who indicated that they did not identify as heterosexual only identified as either or both lesbian or bisexual. These respondents are henceforth referred to according to their self-identification as lesbian and bisexual. Because some women identified as both

lesbian and bisexual, when the continuous measure of sexual identity was utilized, an average was taken across reported strength of lesbian and bisexual identities.

SPSS software was also used for hypothesis testing. The mediational role of internalization of SATAQ was investigated separately for sexual and feminist identification. One analysis was conducted for the mediational role of internalization of SATQ in the relationship between sexual identity (i.e. lesbian and bisexual compared to heterosexual) and self-objectification. Another set of analyses examined the mediational role of internalization of SATAQ between feminist identity and self-objectification. Women's self-identification as feminist and scores on FIDS subscales for each of the five phases of feminist identity development were used as predictor variables in these analyses.

The analyses to test for the hypothesized role of connection with communities utilized the subgroups of feminist, lesbian, and bisexual women in two sets of analyses. To test for the moderation of connection with the feminist community, the subgroup of self-identified feminist women were selected and five subscales of the FIDS were utilized as measures of strength of association with each particular phase, and these subscales were used to test for main effects and in the creation of the interaction term with the connection to the feminist community variable. To test connection with the lesbian and bisexual communities as a moderator, lesbian- and bisexual-identified women were selected. The strength of identification as lesbian or bisexual was tested as a main effect and used in the creation of the interaction term with connection to the lesbian and bisexual communities.

Tests of mediation and moderation were performed using the guidelines set forth by Frazier, Tix, and Barron (2004). Hierarchical regression was used for all tests of mediation and moderation. Frazier et al. outlined the following four steps and criteria for testing

mediation: 1) demonstrate a significant relationship between the predictor and outcome variables, 2) demonstrate a significant relationship between the predictor and mediator, 3) demonstrate a significant relationship between the mediator and outcome variables, and 4) show that the strength of the association between the predictor and outcome variables significantly decreases when the mediator is entered into the model.

Frazier et al.'s (2004) recommendations for testing moderator effects were also utilized. These include three steps for testing moderation: 1) to reduce multicollinearity between main effect and interaction terms, center scores for continuous predictor and moderator variables, 2) to create product terms by multiplying the centered predictor and moderator variables, 3) to prevent confounding the interaction effects with the main effects of the individual predictor and moderator, enter the predictor and moderator from which the interaction term is created separately with step-wise regression. Each test of moderation included three steps in the following analyses. In the first step, demographic variables significantly related to the outcome variable to control for the variable's effects. If no variables significantly related to the outcome variable, this step was not included. The predictor and proposed moderator were entered at step two and the interaction term at step three. Evidence of moderation was detected by evidence of statistically significant beta weight (β) and a change in R^2 at step three.

Chapter 4. Results

Sample Description

Data were obtained from 187 participants. Twenty-seven (14%) participants incorrectly completed the self-objectification questionnaire (SOQ) and so were not used in analyses that utilized this variable. The remaining sample consisted of 160 women, of whom

20.6% ($n=33$) identified as lesbian or bisexual and 79.4% ($n=127$) heterosexual, while 47.5% ($n=76$) were non-feminist and 52.5% ($n=84$) were feminist-identified women. The sample size for lesbian and bisexual women in particular was lower than desirable for these groups. See sample characteristics in Table 1.

Description of and Relationships Among Variables

Descriptive and psychometric statistics of measures of interest are presented in Table 2. Good internal consistency reliability was found for most measures. However, the alpha for the FIDS subscales of Revelation ($\alpha = .56$) and Synthesis ($\alpha = .59$) were low.

Bivariate correlations among demographics with the variables of interest are presented in Table 2. Significant relationships among variables of interest are summarized here. These analyses indicated that Black women, but not all Women of Color, tended to score higher on the FIDS subscale of Passive Acceptance and tended to self-identify less often as feminist than White women. Women of Color also reported less depressive symptoms than White women. Age was positively correlated with the FIDS subscale of Synthesis only. Each of the FIDS subscales correlated in the expected direction with self-identification as feminist, with Passive Acceptance the only to be negatively correlated with self-identification. Correlations also showed that lesbian and bisexual women, relative to heterosexual identified women, tended to score higher on the Awareness subscale of the Sociocultural Attitudes Towards Appearance Questionnaire (SATAQ), to score lower on the FIDS subscale Passive Acceptance, and to self-identify as feminist more often.

Correlations among SATAQ, SOQ, body shame, and depression symptoms revealed significant relationships. As expected, SATAQ Awareness and Internalization subscales and the Total score were significantly and positively related to SOQ, indicating that greater

awareness and internalization of these attitudes was related to greater trait self-objectification. Similarly, body shame was also positively related to self-objectification and SATAQ. Depression (CES-D) symptoms were positively related to the Internalization subscale of the SATAQ and body shame, demonstrating that greater body shame and SATAQ scores were associated with more frequent depressive symptoms. See Table 3 for a complete listing of correlations.

Tests of Hypotheses

To investigate the influence of demographic variables on variables of interest, age, BMI, and race variables were tested as predictors of SOQ and SATAQ scales. Race was a significant predictor of Internalization of the SATAQ such that Black women ($R^2 = .13$, $\beta = -.35$, $p < .001$) and Women of Color ($R^2 = .12$, $\beta = -.34$, $p < .001$) indicated lower levels of mainstream appearance ideals than White women, but race was not a significant predictor of SOQ. None of the other demographic variables significantly predicted SATAQ or SOQ. Thus, race was included as a control variable when predicting Internalization of SATAQ.

Hypothesis 1: Self-objectification is expected to predict body shame and depression for all women in this sample.

Using linear regression, the SOQ score was used as a predictor of body shame and CES-Depression symptoms. SOQ was a significant predictor of body shame ($R^2 = .1$, $\beta = .33$, $p < .001$) but not of CES-D symptoms.

Hypothesis 2a: Women who identify as feminist are expected to exhibit less self-objectification than other women.

To test whether women who identified as feminist exhibited less self-objectification than other women, identities were used as predictors of SOQ in a linear regression. Using the

dummy variable of “Do you identify as a feminist?” no significant relationship was found between feminist identity and SOQ. In separate analyses, the continuous FIDS scores were used to predict SOQ. Two subscales of the FIDS significantly predicted SOQ. As predicted, Passive Acceptance ($\beta = .18, p = .026$) significantly related to SOQ such that higher scores on Passive Acceptance predicted higher self-objectification. The opposite pattern was found for Synthesis ($\beta = -.18, p = .022$), such that greater endorsement of the Synthesis subscale predicted lower self-objectification. The subscales of Revelation, Embeddedness-Emanation, and Active Commitment were unrelated to SOQ.

Hypothesis 2b. Women who identify as lesbian or bisexual are expected to exhibit less self-objectification.

To test whether women who identified as lesbian or bisexual exhibited less self-objectification than heterosexual women, identities were used as predictors of SOQ in a linear regression. Using the dummy identification variable “Do you identify as heterosexual only?” sexual identity did not significantly predict SOQ. The continuous measures of lesbian and bisexual identities were entered as predictors of SOQ in the same regression analysis. The continuous measure of bisexual identity was not related to SOQ. Although lesbian identity was significantly correlated in the expected direction ($r = -.428, p = .049$), it was not a predictor ($\beta = -.428, p = .098$).

Hypothesis 3. Internalization of societal physical appearance ideals is expected to mediate the relationship between identification as lesbian, bisexual, and feminist and self-objectification.

Frazier et al. (2004) outlined four steps to test for mediation. The first step in testing a mediational relationship is determining whether there is a significant relationship between

the predictor and the outcome variables. The relationship between the dummy variable for sexual identity and self-objectification was nonsignificant ($r = .05, p = .53$). Because sexual identity was nonsignificantly related to self-objectification, one of the criteria for mediation, the regression analyses predicting self objectification with sexual identity and internalization of sociocultural appearance ideals was not analyzed.

Self-identification as a feminist was not significantly related to self-objectification ($r = -.13, p = .10$). Only the feminist identity development stages of Passive Acceptance ($r = .18, p < .05$) and Synthesis ($r = -.18, p < .05$) were significantly related to self-objectification and thus met the first criterion for testing mediation. The second step in a mediational analysis is to show that the predictor is related to the mediator. Passive Acceptance ($r = .14, p = .58$) and Synthesis ($r = -.06, p = .46$) were nonsignificantly related to the proposed mediator internalization of appearance ideals. Thus, mediational analyses were not conducted.

Hypothesis 4. Connection with the lesbian/bisexual community is expected to moderate the relationship between sexual identity and internalization of societal appearance ideals.

Participants who self-identified as lesbian or bisexual were selected for this analysis. The individual predictors and the interaction between the strength of lesbian and bisexual identity and Connection With the Lesbian and Bisexual Community were nonsignificant. At step three, with the interaction term entered, R^2 change was also nonsignificant. No support was found for the effect or moderating role of Connection With the Lesbian and Bisexual Community.

Hypothesis 5. Connection with feminist community is expected to moderate the relationship between feminist identification and internalization of societal appearance ideals.

Participants who self-identified as feminist were selected for this analysis. Feminist-identified participants' scores on the FIDS subscales and Connection With the Feminist Community scale were used as predictors and the interaction between identity and Connection With the Feminist Community as moderator. Five analyses, corresponding to the five FIDS subscales, were conducted. When race was controlled for by using the Black/White variable, none of the effects for or interactions between the FIDS subscales and Connection With the Feminist Community was significant. At step three, with the interaction term entered, R^2 change was also nonsignificant for all analyses. When race was controlled for by using the Women of Color/White women variable, there were significant findings for two feminist identity statuses. When controlling for the effect of race (Women of Color/White women), Passive Acceptance showed a significant main effect on internalization of appearance ideals (Beta = 2.51, $p = .025$), but the interaction was nonsignificant. Main effects and interactions were found only when predicting Active Commitment. Although Active Commitment and Connection With the Feminist Community were not significant predictors, the interaction of these variables was significant (Beta = -.241, $p = .039$). R^2 change was also significant at the third step. Although Connection With the Feminist Community was positively related to internalization of appearance ideals for feminists low in Active Commitment, those high in Active Commitment showed the opposite pattern (see Figure 1.). For feminists high in Active Commitment, Connection With the Feminist Community was related to significantly lower internalization of appearance ideals.

Exploratory Analyses

To explore the potential effects of sexual identities and feminist identities together, the interactions between dummy and continuous variables of each were tested on the internalization of SATAQ. Like the previous hypothesized moderation models, a three-step hierarchical regression model was used for each moderation analysis. None of the interaction terms was significant and R^2 change was nonsignificant for the step in which the interaction terms were entered.

Chapter 5. Discussion

The purpose of this study was to examine the influence of sexual and feminist identities on self-objectification in undergraduate women. Consistent with previous research, self-objectification predicted body shame (e.g. Calegero et al., 2005; Harrison & Frederickson, 2003; Noll & Frederickson, 1998) but not depression. Women's lesbian and bisexual identities were not supported as protective against self-objectification, nor was there support for the protective influence of women's connection with their lesbian and bisexual communities. Although feminist self-identification was not a protector against self-objectification, being high on the Synthesis phase of feminist identity development and low on the Passive Acceptance phase was protective against self-objectification. Finally, connection with the feminist community moderated the relationship between the active commitment phase of feminist identity development and internalization of social appearance ideals.

The feminist identity developmental phase of Passive Acceptance (Downing & Roush, 1985) was a significant positive predictor of self-objectification. This is consistent with the available comparable study that also found Passive Acceptance was significantly

positively associated with self-objectification (Noffsinger-Frazier, 2004). The phase of Passive Acceptance describes women who have internalized patriarchal gender values and roles and who may or may not be aware of patriarchy and oppression. It is not surprising that women high in Passive Acceptance demonstrated higher self-objectification than those low in Passive Acceptance. Objectification is theorized to be a process of western patriarchal gender socialization (Frederickson & Roberts, 1997), and Passive Acceptance, as a pre- or anti-feminist stance, is the manifestation of a woman's view embedded in this socialization. Women who are high in Passive Acceptance have internalized gender norms and values consistent with the patriarchy's. Passive Acceptance appears to include the acceptance of patriarchal views and values of the female body and self and constitutes a risk factor for self-objectification.

The feminist identity phase of Synthesis was a negative predictor of and protective against self-objectification. This parallels Noffsinger-Frazier's (2004) finding that Synthesis was a negative predictor of eating disorder symptomology. Downing and Roush (1985) state that women in this stage "increasingly value positive aspects of being female and are able to integrate these qualities with their unique personal attributes into a positive and realistic self concept" (p. 702). Thus, this subscale represents an advanced phase of feminist identity, specifically focusing on women's perception of men in relation to feminism and sexism. This advanced phase and complex view of men, women, and sexism is reflected in items such as "While I am concerned that women be treated fairly in life, I do not see men as the enemy," "Although many men are sexist, I have found that some men are supportive of women and feminism," and "I evaluate men as individuals, not as member of a group of oppressors." Women who scored high on this subscale may have affiliated with men whom they perceive

to be egalitarian or to have a feminist consciousness, suggesting that women may have found a way to integrate their feminist beliefs by associating with men who share and support these beliefs. Because such integration might come with maturity, it is possible that the relationship between the synthesis subscale and objectification is simply driven by age; that is, older women may be less likely to objectify than younger women. Given that data was available to answer these questions, post hoc correlations among age, self-objectification, and the Synthesis scale were conducted. Although age was unrelated to self-objectification, it was positively correlated with Synthesis. These findings provide support for this interpretation of the Synthesis scale; that is, older women may have this more nuanced view of individual men and perhaps encounter more feminist-minded or women-affirmative men. However, these results do not support the notion that Synthesis is related to objectification simply because of the respondents' age.

That the other advanced phases of feminist identity development, Embeddedness-Emanation and Active Commitment, did not protect against self-objectification while Synthesis did may suggest that women's opposite sex context and beliefs about men and women are an important component in the protection against self-objectification. The Embeddedness-Emanation phase describes women who have attempted to withdraw from hetero-patriarchal social networks to surround themselves with women-affirmative women (e.g. "I share most of my social time with a few close women friends who share my feminist values"). Women high in the Active Commitment phase focus on work to challenge the patriarchy (e.g. "On some level, my motivation for almost every activity I engage in is my desire for an egalitarian world"). High scores on Synthesis may describe women who live in interpersonal contexts with less objectification, surrounded by men who value women as

persons, while the role of men in the social contexts of women high in Active Commitment and Embeddedness-Emanation is not indicated. If women who were high on Synthesis experience less objectification while those high on Embeddedness-Emanation and Active Commitment only are in interpersonal contexts with greater exposure to objectifying experiences, women of the latter group may self-objectify more as a consequence of their environment despite their beliefs. As Rubin et al. (2004) suggested, a great deal of objectifying experiences might overwhelm feminist deconstruction and deflection of the effects of these experiences.

Although two phases of feminist identity development predicted self-objectification, women's self-identification as feminist was not protective against self-objectification. That the Synthesis phase protected against self-objectification may relate to women's experiences with and view of men. Synthesis may have measured the degree to which they perceived men in their lives as objectifying versus feminist. As a group, women who self-identify as feminist may not have this nuanced view and may vary more in the degree to which they perceive that men objectify them. Lack of endorsement for the Passive Acceptance items may indicate support of beliefs associated with the feminist movement (e.g., equality). Although describing one's self as feminist was not protective, refraining from passively accepting patriarchal norms and objectifying opposite sex relations seems to be important in warding off self-objectification.

The disavowal of feminist identity offers one way to contextualize the pattern of findings regarding feminist identity. Zucker (2004) explained that approaches to feminist identity, such as the developmental one employed in this study, "fail to address the phenomenon of nonfeminist liberal egalitarianism, in which women espouse feminist beliefs

regarding the equality of women and men, while simultaneously rejecting feminist identity” (p. 424). The lack of findings in this study regarding feminist self-identification may be due to this disparity between belief and identification. Thus, identification and explicit affiliation with feminism may not be protective against self-objectification, but the beliefs of equality underlying it may be. The contemporary trend of “I’m not a feminist, but” may explain why feminist beliefs but not self-identification protected women against self-objectification.

For the feminist-identified subsample, connection with the feminist community moderated the relationship between active commitment and internalization of appearance ideals. The impact of this connection was most striking for those high in active commitment. While connection to the feminist community was positively related to internalization of appearance ideals for feminists low in Active Commitment, those high in Active Commitment showed the opposite pattern. For feminists high in Active Commitment, connection with the feminist Community was related to significantly lower internalization of appearance ideals. It appears that for those low in commitment, connection to the community does not protect against internalization of mainstream appearance ideals. Connection to the feminist community may be beneficial only for those self-identified feminist women with a strong commitment to gender equality.

Race may protect against the internalization of mainstream appearance ideals. Compared to White women in this study, Women of Color reported lower levels of internalization of societal appearance standards, which was predictive of self-objectification. In a recent study, Cachelin, Phinney, Schug, and Striegel-Moore (2006) found that an Anglo orientation was predictive of meeting criteria for an eating disorder in a sample of Mexican-American women, and a stronger Mexican ethnic identity protected against the most severe

eating disorder symptom of purging. It may be that Women of Color in this study internalized these standards less because they identify or are embedded less in Anglo or mainstream White culture than in African-, Latin-, Asian-, Native-American, or other cultures.

While Women of Color may internalize these mainstream objectifying standards less than White women, it may be that they are not immune from objectification; rather, the criteria of the ideal woman is different. Objectification theory researchers might consider the possibility that the experience of objectification may be relative to social group membership such as race. For example, objectification of Black women may focus on the importance of external physical attributes such as hair texture and skin color, while Asian American women may focus on race-specific features, such as their eyes (Grabe & Hyde, 2006) in addition to physical aspects, such as weight and size, already measured by the self-objectification questionnaire. Media images such as the animal-like representation of Black women and the exoticization of Arab American women also need to be considered when defining and describing the impact of objectification on Women of Color. The intersection of racism and sexism Women of Color experience may not be represented in current measures of self-objectification. It is unclear whether measures tap into detrimental appearance standards as experienced by Women of Color or whether Women of Color are protected against unhealthy standards more so than White women.

The social construction of what is a woman is at the center of objectification theory. Equating woman with body, devoid of personhood, is objectification. The nature of self-objectification, including the way others objectify groups of women, what attributes become important, what attributes are devalued, and what view of the self is internalized may also be

considered a construction. The thin, White beauty ideal may not elicit self-objectification in Women of Color as it does in White women. Although women of marginalized groups may not internalize racist hetero-patriarchal norms, “other” standards of appearance, other constructions of what is a woman, may elicit self-objectification. Sexism, and the use of women’s bodies to perpetuate systems of privilege, has the potential to cross any social group. Alignment with or against such constructions and ideals, acceptance or resistance, may be an essential component to understanding how diverse women might challenge this perpetuation of sexism by re-constructing the self-concept outside of it.

Limitations

There are various limitations to this study that should be noted. First, this study was limited by low power due to a small sample size for lesbian and bisexual women in particular. Despite attempts to recruit lesbian- and bisexual-identified women, recruitment of this sample was slow and difficult. Several factors may have influenced the low rate of participation. Although some lesbian- and bisexual-identified participants were recruited with the heterosexual sample through extra course credit offerings, the recruitment of additional lesbian and bisexual women required women to respond to fliers or other announcements and therefore to come out as lesbian or bisexual in order to participate. This may have deterred some women who are not already out in all areas of their university life or those who may have been skeptical of the intentions of an unknown researcher. The compensation of a \$5 Meijer gift card may have been a weak incentive for women to contact the investigator. Finally, it is possible that the advertising and announcements were ineffective in drawing attention to the study, rendering traditional recruitment methods and convenience sampling

ineffective in obtaining a sufficient number of women from marginalized sexual identity communities.

The participants in this study were from one university, so the sample does not likely represent the population of women in the U.S. Like many studies on objectification, this study drew from university women students and so may not approximate non-university women on a number of dimensions including age, social class, relationship status, and daily social environment. That these participants were also from one university further limits generalizability.

The measure of feminist identity development also exhibited limitations. The reliability of two of the FIDS subscales, Revelation and Synthesis, was modest. The differential findings for women who self-identify and the FIDS also indicates that this measure did not fully capture women's experiences of feminist identity.

The measure used for sexual identity may also be considered a limit of the current study. Although asking participants to indicate sexual orientation or identity by marking an appropriate category is the prevailing method of assessing this in the eating disorders and body satisfaction literature, it is limited and lacks recognition of the complexity of sexual orientation and identity. This study also utilized a continuous scale for participants to indicate how much they identified with a particular identity. Because the focus of this study was identity, this may have been sufficient.

Future Directions

Because of the limitations of this study for sexual identity in particular and the lack of research investigating the hypothesized relationships, further research is suggested to

understand the influences of identities and identity-related community support on self-objectification.

Feminist consciousness, as a critical lens on patriarchal views of women's bodies, ought to be the focus of further study. The current study found support for the protective influence of feminist beliefs but not self-identification as feminist. Feminism may be defined, experienced, and measured in multiple ways. Research on the particular mechanisms of the role of feminism in protecting women and potentially girls against self-objectification is needed to distinguish the active protective mechanisms of feminism. To discern the influence of self-identification from feminist beliefs, it is recommended that future research utilize an alternative or additional measure of feminist identity as well as self-identification as feminist. The Cardinal Beliefs of Feminism scale (Zucker, 2004) may be a desirable alternative or adjunct to other feminist identity measures in future research. This scale utilizes three basic feminist beliefs and has been shown to discriminate among non-feminists, those women who self-identify as feminist, and those who espouse feminist beliefs but who do not self-identify. Future research utilizing this measure could facilitate understanding how these three categories of women might influence self-objectification and what the active ingredient is in the protective mechanism of feminist identity.

It is also important for future research to better understand objectification in women with diverse sexual identities. Although support was not found for the influence of sexual identity on self-objectification in this study, methodological limitations preclude interpreting this lack of finding as conclusive. Because there has also been some preliminary evidence of differences between lesbian and heterosexual women in the process of objectification and its consequences (Kozee & Tylka, 2006), future research should investigate the mechanisms of

self-objectification processes with women of all sexual identities. It is important to understand lesbian and bisexual women's experiences not only to accurately understand their experience of self-objectification and its mental health effects but also to be able to accurately position the processes of self-objectification in the contexts of multiple oppressive systems and social identities.

In future research, alternative measures and recruitment strategies are suggested for studying sexual identity and self-objectification. To more precisely assess sexual orientation and identity, it is suggested that future research in this area utilize a three-dimensional measure that includes behavior, attraction, and identification. This approach has been used in other areas of mental health research to better investigate areas of research plagued by mixed and inconclusive results regarding sexual orientation (e.g. McCabe, Hughes, Bostwick, & Boyd, 2005). This simple modification to the measurement of sexual orientation and identity can help elucidate potential relationships with recognition of the complexity and diversity inherent in these constructs. Recruitment strategies for lesbian and bisexual women should be tailored for hidden or hard-to-reach populations. Respondent-driven sampling (Heckathorn, 1997) and snowball sampling are techniques that may increase participation rates through use of social networks. These sampling procedures may be more effective in reaching not only a greater number of lesbian and bisexual identified women but also women who may not typically respond to public advertisements. These sampling techniques could be more effective in gaining a sample size of sexually diverse women in objectification research.

There are similar compelling reasons to investigate objectification experiences of Women of Color. The experiences of Women of Color also should be thoroughly understood. This includes consideration of what constitutes objectification including ethnic, racial,

political, and other cultural orientations that might constitute risk or protective factors.

Objectification research without this knowledge is otherwise seriously and systematically restricted in a way that recreates feminism's white-centered and white-dominated herstory.

As a theory grounded in feminism, objectification theory and ongoing research using it constitute an opportunity to examine the ways in which systems of oppression impact individuals' daily lives. Research can enrich this growing literature base by studying at least the generalizability of self-objectification research to diverse women. The explicit role of the social construction of gender by the patriarchy in objectification theory invites analysis of how diverse identities in contexts of multiple systems of advantage and marginalization might interact with the body and sense of self.

References

- Adams, R. L., & Leavy, E. M. (1986). Feminism as a correlate of self-esteem, self-acceptance, and social support among lesbians. *Psychology of Women Quarterly, 10*, 321-326.
- Aronson, P. (2003). Feminists or “Postfeminists”? Young women’s attitudes toward feminism and gender relations. *Gender & Society, 6*, 903-922.
- Aubrey, J. S. (2006). Effects of sexually objectifying media on self-objectification and body surveillance in undergraduates: Results of a 2-year panel study. *Journal of Communication, 56*, 366-386.
- Ayala, J., & Coleman, H. (2000). Predictors of depression among lesbian women. *Journal of lesbian Studies, 4*, 71-86.
- Bargad, A., & Hyde, J. S. (1991). Women’s studies: A study of feminist identity development in women. *Psychology of Women Quarterly, 15*, 181-201.
- Beals, K. P., Peplau, L. A. (2005). Identity support, identity devaluation, and well-being among lesbians. *Psychology of Women Quarterly, 29*, 140-148.
- Bowleg, L., Craig, M. L., & Burckholder, G. (2004). Rising and surviving: A conceptual model of active coping among Black lesbians. *Cultural Diversity & Ethnic Minority Psychology Special Issue: lesbian, Gay, and bisexual Racial and Ethnic Minority Individuals: Empirical Explorations, 10*, 229-240
- Brown, L. S. (1989). New voices, new visions: Toward a lesbian/gay paradigm for psychology. *Psychology of Women Quarterly, 13*, 445-458.
- Brush, L. R., Gold, A. R., & White, M. G. (1978). The paradox of intention and effect: A women’s studies course. *Signs, 3*, 870-883.

- Burn, S. M., Aboud, R., & Moyles, C. (2000). The relationship between gender social identity and support for feminism. *Sex Roles, 42*, 1081-1089.
- Cachelin, F. M., Phinney, J. S., Schug, R. A., & Striegel-Moore, R. H. (2006). Acculturation and eating disorders in a Mexican-American community sample. *Psychology of Women Quarterly, 30*, 340-347.
- Calogero, R. M. (2004). A test of objectification theory: The effect of the male gaze on appearance concerns in college women. *Psychology of Women Quarterly, 28*, 16-21.
- Calogero, R. M., Davis, W. N., & Thompson, J. K. (2005). The role of self-objectification in the experience of women with eating disorders. *Sex Roles, 52*, 43-50.
- Cash, T. F., Ancis, J. R., & Strachan, M. D. (1997). Gender attitudes, feminist identity, and body images among college women. *Sex Roles, 36*, 433-447.
- Downing, N. E., & Roush, K. L. (1985). From passive acceptance to active commitment: A model of feminist identity development for women. *The Counseling Psychologist, 13*, 695-709.
- Downs, D. M., James, S., Cowan, G. (2006). Body objectification, self-esteem, and relationship satisfaction: A comparison of exotic dancers and college women. *Sex Roles, 54*, 745-752.
- Frazier, P. A., Tix, A. P., & Barron, K. E. (2004). Testing moderator and mediator effects in counseling psychology research. *Journal of Counseling Psychology, 51*, 115-134.
- Frederickson, B. L., & Roberts, T. A. (1997). Objectification theory: Toward understanding women's lived experiences and mental health risks. *Psychology of Women Quarterly, 21*, 173-206.

- Frederickson, B. L., Roberts, T. A., Noll, S. M., Quinn, D. M., & Twenge, J. M. (1998). That swimsuit becomes you: Sex differences in self-objectification, restrained eating, and math performance. *Journal of Personality and Social Psychology, 75*, 269-284.
- Gapinski, K. D., Brownell, K. D., & LaFrance, M. (2003). Body objectification and "Fat Talk": Effects on emotion, motivation, and cognitive performance. *Sex Roles, 48*, 377-388.
- Greenleaf, C. (2005). Self-objectification among physically active women. *Sex Roles, 52*, 51-62.
- Greenleaf, C., & McGreer, R. (2006). Disordered eating attitudes and self-objectification among physically active and sedentary female college students. *The Journal of Psychology, 140*, 187-198.
- Guille, C., & Chrisler, J. C. (1999). Does feminism serve a protective function against eating disorders? *Journal of Lesbian Studies, 3*, 141-148.
- Harrison, K., & Frederickson, B. L. (June, 2003). Women's sports media, self-objectification, and mental health in Black and White adolescent females. *Journal of Communications, 216-232*.
- Hebl, M. R., King, E. B., & Lin, J. (2004). The swimsuit that becomes us all: Ethnicity, gender, and vulnerability to self-objectification. *Personality and Social Psychology Bulletin, 30*, 1322-1331.
- Heckathorn, D. D. (1997). Respondent-driven sampling: A new approach to the study of hidden populations. *Social Problems, 44*, 179-199.
- Heinberg, L. J., Thompson, J. K., & Stormer, S. (1995). Development and validation of the

sociocultural attitudes towards appearance questionnaire. *International Journal of Eating Disorders*, 17, 81-89.

Henley, N. M., Meng, K., O'Brien, D., McCarthy, W. J., & Sockloskie, R.J. (1998). Developing a scale to measure the diversity of feminist attitudes. *Psychology of Women Quarterly*, 22, 317-348.

Hershberger, S. L., & D'Augelli, A. R. (1995). The impact of victimization on the mental health and suicidality on lesbian, gay, and bisexual youths. *Developmental Psychology Special Issue: Sexual orientation and human development*, 31, 65-74.

Klonis, S., Endo, J., Crosby, F., & Worell, J. (1997). Feminism as a life raft. *Psychology of Women Quarterly*, 21, 333-345.

Kozee, H. B., & Tylka, T. L. (2006). A test of objectification theory with lesbian women. *Psychology of Women Quarterly*, 30, 348-357.

Levitt, H. M., Gerrish, E. A., & Hiestand, K. R. (2003). The misunderstood gender: A model of modern femme identity. *Sex Roles*, 48, 99-114

Liss, M., Crawford, M., & Popp, D. (2004). Predictors and correlates of collective action. *Sex Roles*, 50, 771-779.

McCabe, S. E., Hughes, T. L., Bostwick, W., & Boyd, C. J. (2005). Assessment of difference in dimensions of sexual orientation: Implications for substance use research in a college-age population. *Journal of Studies on Alcohol*, 66, 620-629.

McKinley, N. M., & Hyde, J. S. (1996). The objectified body consciousness scale: Development and validation. *Psychology of Women Quarterly*, 20, 181-215.

Melia, J. (1995). An honest human body: Sexuality and the continuum of resistance. *Women's Studies International Forum*, 18, 547-557

- Miner-Rubino, K., Twenge, J. M., & Frederickson, B. L. (2002). Trait self-objectification in women: Affective and personality correlates. *Journal of Research in Personality, 36*, 147-172.
- Morrison, M. A. Morrison, T. G. & Sager, (2003). Does body satisfaction differ between gay men and lesbian women and heterosexual men and women? A meta-analytic review. *Body Image, 1*, 127-138.
- Morry, M. M., & Staska, S. L. (2001). Magazine exposure: Internalization, self-objectification, and body satisfaction in male and female university students. *Canadian Journal of Behavioural Science, 33*, 269-279.
- Muehlenkamp, J. J., Swanson, J. D., & Brausch, A. M. (2005). Self-objectification, risk-taking, and self-harm in college women. *Psychology of Women Quarterly, 29*, 24-32.
- Muehlenkamp, J. J., & Saris-Baglama, R. N. (2002). Self-objectification and its psychological outcomes for college women. *Psychology of Women Quarterly, 26*, 371-379.
- Noffsinger-Frazier, N. A. (2004). Objectification theory and disordered eating: The impact of feminist identification, internalization of sociocultural standards of appearance, and sexual orientation. *Unpublished Dissertation*.
- Noll, S. M., & Frederickson, B. L. (1998). A mediational model linking self-objectification, body shame, and disordered eating. *Psychology of Women Quarterly, 22*, 623-636.
- Quinn, D. M., Kallen, R. W., & Cathey, C. (2006). Body on my mind: The lingering effect of state self-objectification. *Sex Roles, 55*, 869-874.
- Quinn, D. M., Twenge, J. M., Frederickson, B. L. (2006). The disruptive effect of self-objectification on performance. *Psychology of Women Quarterly, 30*, 59-64.

- Radloff, L. S. (1977). The CES-D scale: A self-report depression scale for research in the general population. *Applied Psychological Measurement, 1*, 385-401.
- Reid, A., & Purcell, N. (2004). Pathways to feminist identification. *Sex Roles, 50*, 759-769.
- Roberts, T. A. (2004). Female trouble: The menstrual self-evaluation scale and women's self-objectification. *Psychology of Women Quarterly, 28*, 22-26.
- Roberts, T. A. & Gettman, J. Y. (2004). Mere exposure: Gender differences in the negative effects of priming a state of self-objectification. *Sex Roles, 51*, 17-27.
- Rubin, L. R., Nermoff, C. J., & Russo, N. F. (2003). Exploring feminist women's body consciousness. *Psychology of Women Quarterly, 28*, 27-37.
- Rubin, L. R., Nermoff, C. J., & Russo, M. F. (2004). Exploring feminist women's body consciousness. *Psychology of Women Quarterly, 28*, 27-37.
- Sabik, N. J., & Tylka, T. L. (2006). Do feminist identity styles moderate the relation between perceived sexist events and disordered eating? *Psychology of Women Quarterly, 30*, 77-84.
- Schneider, J. A., O'Leary, A., & Jenkins, S. R. (1993). Gender, sexual orientation, and disordered eating. *Psychology and Health, 10*, 113-128.
- Shaver, P., & Brennan, K. (1991). Measures of depression and loneliness. In J. Robinson, P. Shaver, & L. Wrightsman (Eds.), *Measures of personality and social psychological attitudes* (Vol 1, pp. 195-281). San Diego, CA: Academic Press.
- Siever, M. (1994). Sexual orientation and gender as factors in socioculturally acquired vulnerability to body dissatisfaction and eating disorders. *Journal of Consulting and Clinical Psychology, 62*, 252-260.

- Slater, A., & Tiggeman, M. (2002). A test of self-objectification theory in adolescent girls. *Sex Roles, 46*, 343-349.
- Snyder, R., & Hasbrouck, L. (1996). Feminist identity, gender traits, and symptoms of disturbed eating among college women. *Psychology of Women Quarterly, 20*, 593-598.
- Szymanski, D. M. (2004). Relations among dimensions of feminism and internalized heterosexism in lesbians and bisexual women. *Sex Roles, 51*, 145-159.
- Szymanski, D. M., & Chung, B. Y. (2001). The lesbian Internalized Homophobia Scale: A rational/theoretical approach. *Journal of Homosexuality, 41*, 37-52.
- Tiggeman, M., & Kuring, J. K. (2004). The role of body objectification in disordered eating and depressed mood. *British Journal of Clinical Psychology, 43*, 299-311.
- Tiggeman, M., & Lynch, J. E. (2001). Body image across the life span in adult women: The role of self-objectification. *Developmental Psychology, 37*, 243-253.
- Zucker, A. N. (2004). Disavowing social identities: What it means when women say, "I'm not a feminist, but..." *Psychology of Women Quarterly, 28*, 423-435.

APPENDICES

Appendix A

Demographic Questionnaire

1. What is your Age? _____
2. What is your Academic Major? _____
3. What year are you as a student?
 - Freshman
 - Sophomore
 - Junior
 - Senior
 - Other: Please describe _____
4. How tall are you? (in feet and inches) _____
5. How much do you weigh? (in pounds) _____
6. Do you identify as a Feminist?
 - Yes
 - No
7. Please mark the box or boxes that describe your race or ethnicity best.
 - African-American or Black
 - Asian or Pacific Islander
 - Chicana, Latina, or Hispanic
 - Native American
 - Middle Eastern
 - Multi-racial/Multi-ethnic
 - White or European-American
 - Other: Please indicate _____
8. Please mark the box or boxes that describe your sexual identity best.
 - heterosexual
 - lesbian
 - gay
 - bisexual
 - other: please describe _____

Appendix B

Feminist Identity Development Scale (FIDS) (Bargad & Hyde, 1991)

Passive Acceptance

1. I don't think there is any need for an Equal Rights Amendment; women are doing well.
2. I think that most women will feel most fulfilled by being a wife and a mother.
3. One thing I especially like about being a woman is that men will offer me their seat on a crowded bus or open doors for me because I am a woman.
4. I've never really worried or thought about what it means to be a woman in this society.
5. If I were married to a man and my husband was offered a job in another state it would be my obligation to move in support of his career.
6. I do not want to have equal status with men.
7. Think that men and women had it better in the 1950s when married women were housewives and their husbands supported them.
8. I don't see much point in questioning the general expectation that men should be masculine and women should be feminine.
9. I am not sure what is meant by the phrase "women are oppressed under patriarchy."
10. I think it's lucky that women aren't expected to do some of the more dangerous jobs that men are expected to do, like construction work or race car driving.
11. Generally, I think that men are more interesting than women.
12. I think that rape is sometimes the woman's fault.

Revelation

1. I used to think that there isn't a lot of sex discrimination, but now that I know how much there really is.

2. It only recently occurred to me that I think it's unfair that men have the privileges they have in this society simply because they are men.
3. When you think about most of the problems in the world – the threat of nuclear war, pollution, discrimination – it seems to me that most of them are caused by men.
4. It makes me really upset to think about how women have been treated so unfairly in this society for so long.
5. Recently, I read something or had an experience that sparked a greater understanding of sexism.
6. When I see the way most men treat women, it makes me so angry.
7. I am angry that I've let men take advantage of me.

Embeddedness-Emanation

1. I just feel like I need to be around women who share my point of view right now.
2. Being a part of a women's community is important to me.
3. My social life is mainly with women these days, but there are a few men I wouldn't mind having a nonsexual friendship with.
4. I share most of my social time with a few close women friends who share my feminist values.
5. Especially now, I feel that the other women around me give me strength.
6. If I were to paint a picture or write a poem, it would probably be about women or women's issues.
7. Particularly now, I feel most comfortable with women who share my feminist point of view.

Synthesis

1. Some of the men I know are more feminist than some of the women I know.
2. While I am concerned that women be treated fairly in life, I do not see men as the enemy.
3. I feel that some men are sensitive to women's issues.
4. Although many men are sexist, I have found that some men are supportive of women and feminism.
5. I evaluate men as individuals, not as member of a group of oppressors.

Active Commitment

1. I want to work to improve women's status.
2. On some level, my motivation for almost every activity I engage in is my desire for an egalitarian world.
3. I have a lifelong commitment to working for social, economic, and political equality for women.
4. It is very satisfying to me to be able to use my talents and skills in my work in the women's movement.
5. I care very deeply about men and women having equal opportunities in all respects.
6. I feel that I am a very powerful and effective spokesperson for the women's issues I am concerned with right now.
7. I am very committed to a cause that I believe contributes to a more fair and just world for all people.
8. I am willing to make certain sacrifices to effect change in this society in order to create a nonsexist, peaceful place where all people have equal opportunities.

Appendix C

The Connection With the Lesbian Community scale (CLC; Szymanski & Chung, 2001)

1. When interacting with members of the lesbian/bisexual community, I often feel different and alone, like I don't fit in.
2. Attending lesbian/bisexual events and organizations is important to me. (R)
3. I feel isolated and separate from other lesbians/bisexuals.
4. Most of my friends are lesbians/bisexuals. (R)
5. Social situations with other lesbians/bisexuals make me feel uncomfortable.
6. Being a part of the lesbian/bisexual community is important to me. (R)
7. Having lesbian/bisexual friends is important to me. (R)
8. I feel comfortable joining a lesbian/bisexual social group, sports team, or organization. (R)
9. I am familiar with lesbian/bisexual community resources (i.e. book stores, support groups, bars, etc.) (R)
10. I am aware of the history concerning the development of lesbian/bisexual communities and/or the lesbian/gay rights movement. (R)
11. I am familiar with lesbian/bisexual books and/or magazines. (R)
12. I am familiar with lesbian/bisexual movies and/or music. (R)
13. I am familiar with lesbian/bisexual music festivals and conferences. (R)

Appendix D

The Connection With the Feminist Community Scale (adapted from Syzmanski & Chung, 2001)

1. When interacting with feminists, I often feel different and alone, like I don't fit in.
2. Attending feminist events and organizations is important to me.
3. I feel isolated and separate from other feminists.
4. Most of my friends are feminists.
5. Social situations with other feminists make me feel uncomfortable.
6. Being a part of the feminist community is important to me.
7. Having feminist friends is important to me.
8. I feel comfortable joining a feminist social group or organization.
9. I am familiar with feminist community resources (i.e. book stores, support groups, etc.)
10. I am aware of the history concerning the development of feminist communities and/or the feminist/women's rights movement.
11. I am familiar with feminist books and/or magazines.
12. I am familiar with feminist movies or music.
13. I am familiar with feminist music festivals and conferences.
- *14. If/When I encounter discrimination, I have feminist friends who support me.
- *15. I have feminist friends that I can contact whenever I need them.
- *16. I know feminists who would participate in activism with me.
- *17. Most of my friends don't understand what feminism means to me.

*Indicates items that were created.

Appendix E

Sociocultural Attitudes Towards Appearance Questionnaire (SATAQ; Heinberg, Thompson,
& Stormer, 1995)

Response scale:

1 _____ 2 _____ 3 _____ 4 _____ 5

Completely _____ Neither agree

Completely

Disagree _____ nor disagree _____ Agree

1. Women who appear in TV shows and movies project the type of appearance that I see as my goal.

2. I believe that clothes look better on thin models.

3. Music videos that show thin women make me wish that I were thin.

*4. I do not wish to look like the models in the magazines.

5. I tend to compare my body to people in the magazines.

*6. In our society, fat people are not regarded as unattractive.

7. Photographs of thin women make me wish that I were thin.

8. Attractiveness is very important if you want to get ahead in our culture.

9. It's important for people to work hard on their figures/physiques if they want to succeed in today's culture.

*10. Most people do not believe that the thinner you are the better you look.

11. People think that the thinner you are, the better you look in clothes.

*12. In today's society, it's not important to always look attractive.

13. I wish I looked like a swimsuit model.

14. I often read magazines like *Cosmopolitan*, *Vogue*, and *Glamour* and compare my appearance to the models.

Awareness Scale, 6, 8-12

Internalization Scale, 1-5, 7, 13, 14

* Reversed Scored

Appendix F

The Self-Objectification Questionnaire (SOQ; Noll & Frederickson, 1998)

Instructions:

We are interested in how people think about their bodies. The questions below identify 10 different body attributes. We would like you to rank order these body attributes from that which has the greatest impact on your physical self-concept (rank this a “9”), to that which has the least impact on you physical self-concept (rank this a “0”).

Note: It does not matter how you describe yourself in terms of each attribute. For example, fitness level can have a great impact on your self-concept regardless of whether you consider yourself to be physically fit, not physically fit, or any level in between. Please first consider all attributes simultaneously, and record your rank ordering by writing the ranks in the rightmost column.

IMPORTANT: Do Not Assign The Same Rank To More Than One Attribute!

9 = greatest impact

8 = next greatest

:

1 = next to least impact

0 = least impact

When considering your physical self-concept...

1. what rank do you assign to *physical coordination*? _____
2. what rank do you assign to *health*? _____
3. what rank do you assign to *weight*? _____
4. what rank do you assign to *strength*? _____

5. what rank do you assign to *sex appeal*? _____
6. what rank do you assign to *physical attractiveness*? _____
7. what rank do you assign to *energy level (e.g., stamina)*? _____
8. what rank do you assign to *firm/sculpted muscles*? _____
9. what rank do you assign to *physical fitness level*? _____
10. what rank do you assign to *measurements (e.g., chest, waist, hips)*? _____

Appendix G

The Body Shame subscale of the Objectified Body-Conscious Scale (OBCS; McKinley & Hyde, 1996)

1. When I can't control my weight, I feel like something must be wrong with me.
2. I feel ashamed of myself when I haven't made the best effort to look my best.
3. I feel like I must be a bad person when I don't look as good as I could.
4. I would be ashamed for people to know what I really weigh.
5. I never worry that something is wrong with me when I am not as exercising as much as I should.*
6. When I'm not exercising enough, I question whether I am a good enough person.
7. Even when I can't control my weight, I think I am an okay person.*
8. When I'm not the size I think I should be, I feel ashamed.

Appendix H

The Center for Epidemiological Studies Depression Scale (CES-D; Radloff, 1977)

In the past week ...

1. I was bothered by things that usually don't bother me.
2. I did not feel like eating; my appetite was poor.
3. I felt that I could not shake off the blues even with help from my family or friends.
4. *I felt that I was just as good as other people.*
5. I had trouble keeping my mind on what I was doing.
6. I felt depressed.
7. I felt that everything I did was an effort.
8. *I felt hopeful about the future.*
9. I thought my life had been a failure.
10. I felt fearful.
11. My sleep was restless.
12. *I was happy.*
13. I talked less than usual.
14. I felt lonely.
15. *People were friendly.*
16. *I enjoyed life.*
17. I had crying spells.
18. I felt sad.
19. I felt that people dislike me.
20. I could not "get going."

Table 1

Sample characteristics.

Total sample		Sample with valid SOQ scores		
Characteristic	Percentage (n)	Mean (SD)	Percentage (n)	Mean (SD)
Age		23.33 (6.54)		23.35 (6.47)
Body Mass Index		23.49 (5.5)		23.58 (5.5)
Student Status				
Freshperson	12.8% (24)		11.8% (19)	
Sophomore	14.4% (27)		13.7% (22)	
Junior	32.1% (60)		33.5% (54)	
Senior	34.2% (64)		34.2% (55)	
Other	6.4% (12)		6.8% (11)	
Race or Ethnicity				
White or Euro-American	67.4% (126)		70.2% (113)	
Black or African-American	21.4% (40)		19.3% (31)	
Latina, Chicana, or Hispanic	3.2% (6)		3.7% (6)	
Multi-racial or Multi-ethnic	3.2% (6)		3.1% (5)	
Asian or Pacific Islander	2.1% (4)		1.9% (3)	
Middle Eastern	1.1% (2)		.6% (1)	
Native American	.5% (1)		.6% (1)	
Other	1.1% (2)		.6% (1)	
Sexual Identity				
Heterosexual	81.8% (153)		80.1% (129)	
Lesbian	7% (13)		8.1% (13)	
Bisexual	10.2% (19)		10.6% (17)	
Other	1.1% (2)		1.2% (2)	
Feminist Identity				
Yes	53.5% (100)		57.8% (93)	
No	45.5% (85)		41.6% (67)	

*Note: Percentages may not total to 100% due to rounding.

Table 2

Descriptive statistics of measures of interest.

Measure (n)	n	Mean	SD	Min	Max	Possible Min	Possible Max	Alpha
Self-Objectification Questionnaire (SOQ)	160	-1.25	13.87	-25	25	-25	25	-
Body Shame Sociocultural Attitudes Toward Appearance Questionnaire (SATAQ)	187	26.75	10.50	9	53	8	56	.83
SATAQ Awareness subscale	187	43.81	10.10	20	70	14	70	.86
SATAQ Internalization subscale	187	21.76	4.02	8	30	6	30	.68
Feminist Identity Development Scale (FIDS): Passive Acceptance subscale	187	22.05	8.04	7	40	8	40	.90
FIDS Revelation subscale	187	2.07	.61	1	3.83	1	5	.82
FIDS Embeddedness/Eman ation subscale	187	3.41	.55	1.71	4.57	1	5	.56
FIDS Synthesis subscale	187	3.03	.72	1	5	1	5	.77
FIDS Active Commitment subscale	187	3.88	.52	2.6	5	1	5	.59
CES-Depression Connection With Feminist Community	187	3.51	.60	1.63	5	1	5	.85
Connection With Lesbian/Bisexual Community	187	85.21	16.02	39	120	20	120	.88
	92	75.95	12.75	48	107	17	119	.77
	35	61.4	15.25	24	89	13	91	.87

Table 3

Correlation matrix of variables of interest for respondents who provided valid self-objectification profiles.

Variable	1	2	3	4	5	6	7	8	9
1 SOQ Total	-								
2 SATAQ Aware	.18*	-							
3 SATAQ Intern.	.41***	.28***	-						
4 SATAQ Total	.4***	.64***	.92***	-					
5 Passive Accept.	.18*	-.14	.14	.06	-				
6 Revel.	.13	.19**	.07	.13	-.06	-			
7 Embed.	.01	.11	.05	.08	-.3***	.32***	-		
8 Synthesis	-.18*	.05	-.06	-.02	-.19**	-.11	.06	-	
9 Active Commit.	-.14	.05	-.1	-.06	.46***	.29***	.45***	.06	-
10 Body Shame	.33***	.34***	.67***	.67***	.16*	.06	-.02	-.06	-.16*
11 CES-D	-.11	-.02	-.2**	-.17	-.08	-.05	-.13	.06	.05
12 CFC	-.19	.13	.07	.11	.36***	.16	.33**	.01	.53***
13 CLBC	-.2	.27	-.13	.01	-.31	.2	.38*	.1	.38*
14 Age	-.1	.15	-.13	-.04	-.07	-.04	.09	.16*	.08
15 Race (Black/White)	-.04	-.05	.38***	.33***	.17*	.15	.02	-.11	.1
16 Race (All)	-.11	-.03	.34***	.27***	.11	.06	.05	-.02	.11
17 Feminist ID	-.13	.004	-.06	-.04	.42***	.19*	.32***	.24**	.41***
18 Sexual ID	.05	-.19*	.12	.03	.3***	-.14	-.18*	-.11	-.15

Table 3 continued.

Variable	9	10	11	12	13	14	15	16	17
9 Active Commit.	-								
10 Body Shame	-.16*	-							
11 CES-D	.05	-.28***	-						
12 CFC	.53***	-.11	.29**	-					
13 CLBC	.38*	-.1	-.03	.18	-				
14 Age	.08	-.01	.00	.01	.31	-			
15 Race (Black/White)	.1	-.24**	.05	.08	.21	.08	-		
16 Race (All)	.11	-.2**	-.18*	.16	.19	.08	-	-	
17 Feminist ID	.41***	-.18*	.01	-.02	.39*	.01	-.29**	-.22**	-
18 Sexual ID	-.15	.04	.03	-.14	-	-.07	.06	-.24**	-.05

Note: * $p < .05$, ** $p < .01$, *** $p < .001$

1=Self-Objectification Questionnaire Total score, 2=Socio-cultural Attitudes Towards

Appearance Questionnaire (SATAQ)Awareness subscale, 3=SATAQ Internalization

subscale, 4=SATAQ Total score, 5=Feminist Identity Development Scale (FIDS) Passive

Acceptance, 6=FIDS Revelation, 7=FIDS Embeddedness-Emanation, 8=FIDS Synthesis,

9=FIDS Active Commitment, 11=CES-Depression scale, 12=Connection With the Feminist

Community, 13=Connection With the Lesbian/Bisexual Community, 15=Race (0=White,

1=Black), 16 = Race (0=White, 1=Women of Color),17=Feminist self-identification (0=no

1=yes), 18=Sexual Identity (0=Lesbian or Bisexual 1=Heterosexual only).

Figure Caption

Figure 1. Connection With the Feminist Community moderated the relationship between Active Commitment and internalization of appearance ideals.

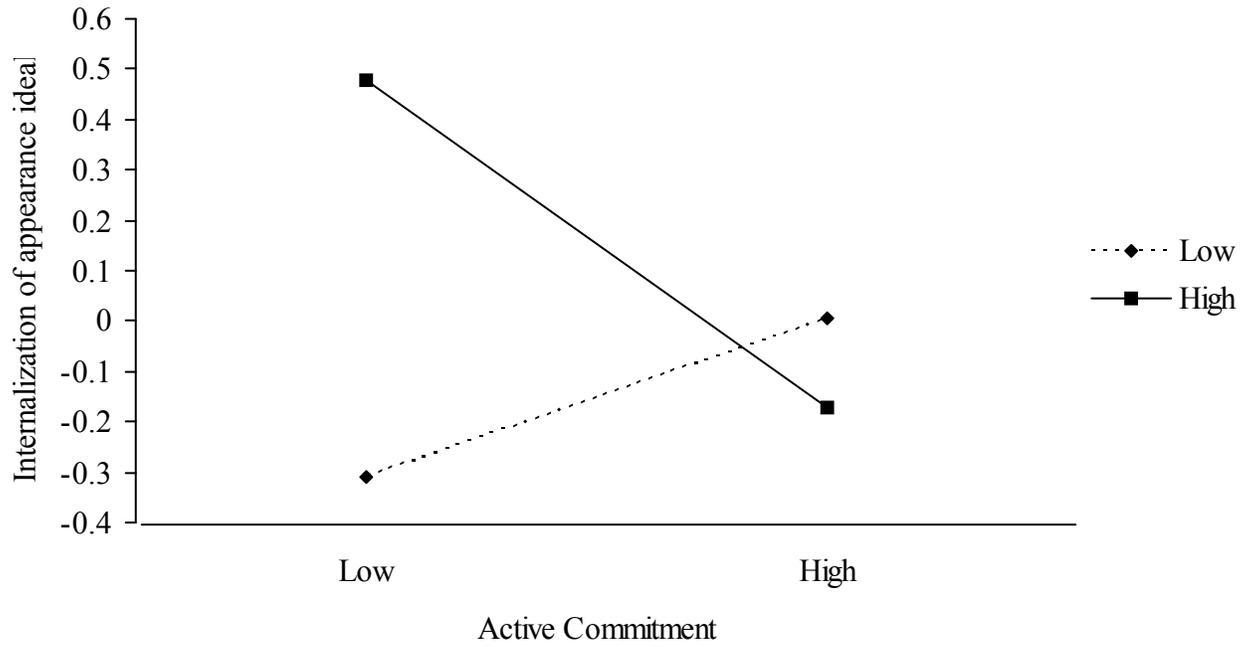


Figure 1. Connection With the Feminist Community moderated the relationship between Active Commitment and internalization of appearance ideals.