SEXUAL OBJECTIFICATION AND ITS CONSEQUENCES ON BODY IMAGE AND SOCIAL INTERACTION

A Thesis

by

ANALESA N. CLARKE

Submitted to the Office of Graduate Studies of Texas A&M University in partial fulfillment of the requirements for the degree of

MASTER OF SCIENCE

August 2006

Major Subject: Psychology

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Approved by:

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Committee Members, Brandon J. Schmeichel
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ABSTRACT

Sexual Objectification and Its Consequences on Body Image and Social Interaction.

(August 2006)

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The current study examined the psychological consequences of trait and state self objectification. This study had three main objectives: to examine the relation between trait self objectification and various eating pathologies; to examine the degree of state self objectification (induced by three different conditions) and the impact of condition on affect and sense of self; and finally, to examine the effect of condition on interactions with the opposite sex. The pilot study was used to select thin, thin sexually objectifying and average/plus size non-sexually objectifying images. Using a quasi-experimental research design with an elaborate cover story, the main study exposed one hundred seventy women to one of three conditions (thin non sexually objectifying, thin sexually objectifying or plus size non-sexually objectifying images) and measured negative affect and body image. Following viewing images, participants interacted with a male confederate for five minutes and their reported comfort level and flirting with the confederate were assessed. Results indicated that trait self objectification was associated with disordered eating symptomatology. However, the manipulation check revealed that the experimental condition did not produce varying degrees of sexual objectification. Nonetheless, results indicate an effect of condition on body dissatisfaction, in which

individuals who viewed thin images reported more body dissatisfaction than participants in the above average/plus size group. In regards to the social interaction, individuals in the non-sexually objectified group reported more flirting than individuals in the sexually objectified group. Implications for clinical work and future research are discussed.

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INTRODUCTION

Sociocultural factors have long been implicated in body image dissatisfaction, body image disturbance and eating disorder development (Fingeret & Gleaves, 2004; Striegel-Moore, Silberstein, & Rodin, 1986; Tiggemann & Pickering, 1996; Thompson, 1990). The media, for instance, has been implicated as a driving force in the perpetuation of the thin ideal, with print media, such as magazines, receiving particular focus (see Levine & Smolack, 1998; Thompson & Heinberg, 1999 for comprehensive reviews). Accordingly, women find themselves being confronted, often on a daily basis, with images of female beauty in the form of an exceedingly thin ideal through television, magazines and other media.

Exposure to the thin ideal is however only one of the several experiences faced by women that contribute to the prevalence of body image disturbance and disordered eating. Sexual objectification (i.e., individuals are perceived and treated as sexual objects) is an additional factor contributing to body image disturbance and disordered eating (Archer, Ititani, Kimes & Barrios 1983; Sommers-Flanagan, Sommers-Flanagan, & Davis, 1993; Copeland, 1989; Swim, Hyers, Cohen, & Ferguson, 2001). Until recently, research examining the effects of sexually-objectifying exposure on eating disorder development and body image disturbance was non-existent. This study seeks to investigate how sexually objectified images influence eating disorder symptoms, body image disturbance, affect and sense of self among women.

This thesis follows the style of the International Journal of Eating Disorders.

Sexual Objectification and Self Objectification

Sexual objectification occurs when a person is viewed, evaluated, reduced to or treated by others as a mere body (Fredrickson & Roberts, 1997). Essentially, sexual objectification involves regarding a person as an object for sexual purposes (Bartky, 1990; Fredrickson & Roberts, 1997) and may occur in several forms. Some of the most commonly recognized forms include those often perpetrated by men in their relations with women, such as visual inspections of the body, whistles or cat calls, sexual comments about body parts, and socially inappropriate sexual comments or advances. In visual media, common forms include still photos of women wearing revealing clothing and positioned in sexual manners. One should note that all types and amounts of exposure to sexual objectification may be potentially harmful to a woman's sense of self (Fredrickson & Roberts, 1997; Kaschak, 1992).

Objectification theory (Fredrickson & Roberts, 1997) posits that the most profound effect of daily exposure to sexual objectification is that it may lead to a state of consciousness where women adopt or internalize the perspectives of observers who objectify their bodies and thus begin viewing themselves primarily as objects. In other words, self-objectification is a pervasive trait-like tendency to adopt a third person view of the self. As such, self-objectification actually involves a propensity to perceive and describe one's body through observable (e.g., what do I look like?) rather than intrinsic characteristics (e.g., what am I capable of? Spitzack, 1990). For women who tend to engage in trait self-objectification, a far greater value is placed on observable characteristics such as one's physical attractiveness, sex appeal, weight and the like at

the expense of non-observable traits such as physical health, emotional, intellectual and moral capacity, muscle strength, physical coordination and stamina (Noll & Fredrickson, 1998).

According to Fredrickson & Roberts (1997), the degree of self-objectification tend to vary in different social contexts, particularly in circumstances where women are made conscious and aware that their bodies are being or will potentially be observed, evaluated or objectified. In such situations, women anticipate that they will be viewed as objects and become preoccupied with their appearance (Fredrickson & Roberts, 1997). Self objectification can therefore be characterized as trait and state-like. Thus, it is plausible that a woman low on self -objectification may temporarily define herself in observable terms following an externally-imposed state of self-objectification. Research has experimentally manipulated a state of self-objectification by employing numerous treatments and mediums. These situations include wearing a swimsuit (Fredrickson, Roberts, Noll, Quinn, & Twenge, 1998), imagining one's self on a beach or in a dressing room (Tiggemann, 2001), anticipating a male gaze (Calogero, 2004), viewing images of the thin ideal (see Groesz, Levine & Murnen, 2002 for a meta-analytic review) and being exposed to sexual objectifying treatment (Roberts & Gettman, 2004).

Both trait and state self-objectification have been noted as creating potentially harmful effects on women's physiological perceptions of self and psychological well-being (Fredrickson & Noll, 1997; Fredrickson et. al, 1998; Roberts & Gettman, 2004). Because trait self-objectification involves regular self-monitoring and anticipation of an outsider's perspective, trait self-objectification requires a great deal of effort and

cognitive resources. Fredrickson and Roberts (1997) posited that both trait and state self-objectification may lead to reduced peak motivational states and a reduced awareness of internal bodily states (Fredrickson & Roberts, 1997). Additionally, high levels of state and trait self objectification may increase the opportunity for a variety of negative emotions such as shame and anxiety, and may contribute to numerous mental health risks such as disordered eating (Fredrickson et. al, 1998; Mckinley 1998; 1999; Tiggerman & Kujring, 2004), sexual dysfunction, and unipolar depression (Miner-Rubio, Twenge & Fredrickson, 2002; Muehlenkamp & Saris-Baglama, 2002) in female populations. A few studies have also associated self-objectification with anxiety. Appearance anxiety has been empirically documented as a consequence of state (Monro & Huon, 2005; Roberts & Gettman, 2004) and trait self-objectification (Tiggerman & Kuring, 2004).

Research has also linked self-objectification to negative body image. Empirical studies have extensively documented that state and trait self-objectification were factors which triggered body shame and restrictive eating; and that body shame partially mediated the relationship between self-objectification and restrictive eating among college women (Fredrickson et al 1998; McKinely, 1998; Noll & Fredrickson, 1998; Tiggerman & Slater, 2001) and adolescent girls (Slater & Tiggeman, 2002). However, few studies have specifically linked self-objectification to negative body image. In one such study, women who were exposed to sexually-objectifying images later overestimated their current body size and reported greater body dissatisfaction than women who viewed neutral or no images (Lavine, Sweeney, & Wagner, 1999).

Collectively, these findings suggest that self objectification can lead to negative body regard. As a whole, however, the body of research in existence today demonstrates that self-objectification is primed by one's exposure to sexual objectification is limited.

Current Study

Consistent with past research, this study sought to examine the negative consequences of self-objectification by inducing state self-objectification via viewing images that represented the thin ideal. In addition, this study sought to enhance past research by also examining sexual objectification. This was accomplished by comparing conditions wherein participants viewed images that represented the thin ideal and were sexually objectifying (e.g., women dressed or positioned provocatively) or viewed images of either thin or above average/plus size women that were not sexually objectifying. The objective of this study was to determine the degree of state self objectification induced by 3 different conditions (thin ideal, thin ideal -sexually objectified, and above average images) and the impact of the different conditions on mood, affect and sense of self.

Social Interaction with the Opposite Sex

Whereas it is generally understood that negative psychological consequences arise from self-objectification, it is also plausible that self-objectification may influence one's perception of and feelings towards interactions with the opposite sex. Preliminary research has examined the responses of different individuals to anticipatory social interaction (Calogero, 2004), but no studies to date, however, have examined actual social contact. Therefore, this study seeks to conduct an exploratory examination of the

effects of a woman's level of state and trait self-objectification on interactions with the opposite sex.

Hypotheses

This study is based on the following hypotheses: 1.It is predicted that trait self objectification measured at baseline will be positively related to state and trait body image dissatisfaction and disordered eating measured at baseline. That is, individuals who report higher levels of trait self objectification will report more state and trait body image dissatisfaction and more disordered eating symptoms. 2. It is predicted that experimental condition will predict negative affect, appearance anxiety, state body image dissatisfaction and state self-objectification. Specifically, it is predicted that women in the thin ideal and sexually objectified condition will report the highest level of negative affect, appearance anxiety, state body image dissatisfaction, and state selfobjectification than women I the average/plus size condition. 3. It is also predicted that the participants in the thin non sexually objectified and the thin sexually objectified condition will report higher levels of negative affect, appearance anxiety, state body image dissatisfaction, and state self-objectification relative to the above average/plus size non sexually objectified condition. 4. With regards to the social interaction with a male, it is hypothesized that individuals in the sexually objectified condition (sexual objectified + thin ideal) will report more discomfort during the interaction with a male than individuals in the thin ideal condition and neutral condition reporting the least discomfort.

PILOT STUDY

Prior to conducting the experiment, it was essential to conduct a pilot study to ensure that the images used were appropriate for each condition. Because sexual objectification is more subtle than images containing the thin ideal it is important that the images used for this study were viewed as sexually objectifying. Until these images were empirically validated in a sample comparable to the one used in the main study, conclusions made concerning condition effect would be inappropriate. Additionally, prior to exposing participants to a conversation it was important to verify that the conversation used in the main study would seem plausible and would not typically cause discomfort.

Method

Participants

Fifty six female undergraduate students from a large Southwestern University participated in a study titled "Rating Model's used in Advertising". The mean age of the participants was 18.46 (SD = 2.52). Participants varied on ethnic background (63% Caucasian, 5 % Black, 12% Hispanic, 3%Asian, 3% Mixed and 1% other) and marital status (84% single, and 12% married/cohabitating). There were 2 women who did not report their age, ethnicity and, marital status and were excluded from all analyses related to these variables.

Materials

184 images of Caucasian female models of varying sizes and sexual objectification levels were selected. To be selected, models were required 1) not be

"supermodels" (i.e., not extremely well-known icons in the fashion industry), and 2) to display at least ¾ of the total body. Images were chosen from popular women's magazines (e.g. Cosmopolitan, Marie Clare, Vogue, Vanity Fair etc.) advertisement campaigns found on the internet.

Measures

To assess for sexual objectification level, participants were asked the question, "To what degree do you think that the woman in the image is portrayed as a sexual object?" on a 4-point likert scale -- 1(not at all) to 4 (very). To assess for each model's race, the participants answered "What do you think best describes the woman's race?" in a multiple choice format with the following response options: Euro-American/Caucasian; Hispanic/Latina; Asian/Pacific Islander; Black/African American; Unsure; and Other. To assess for model thinness, participants rated each image by responding to the following statement: "I would describe this woman's size as______" on a 5 point likert scale: very thin (<4), thin (4-6), average (6-8), slightly larger than average (8-12), much larger than average (>12). Participants also completed a demographics questionnaire that identified their ethnicity, weight, height, and age. *Procedure*

Upon arrival participants signed a consent form and completed the demographic questionnaire. Participants were told that they would be viewing models from various advertising campaigns. Participants viewed each image on PowerPoint slides, one at a time, for about 30 seconds and rated each woman on her race, body size, and sex appeal. Additionally, participants were presented with a conversation (see appendix) on a

projection screen. After reading the conversation aloud, participants were asked to give their opinion of the conversation and whether they felt the conversation appeared natural, reasonable and non flirtatious.

Results

Image ratings were initially analyzed for participant agreement on race. Images rated as Caucasian by 80% or more by participants were further evaluated for body size and sexual appeal; Images that had an inter-rater reliability of less than 80% were excluded from further analysis. Next, ratings were analyzed for agreement on body size and sexual appeal. Images rated as size 0-4 and as having sexual appeal by 80% or more of participants were considered for the thin- sexually objectified condition. Images rated as size 0-4 and as not having sexual appeal were considered for the thin- non sexually objectified condition. Images rated as size 8 and above and as having no sexual appeal, with and inter-rater reliability of 80% and higher were considered for the above average/plus size -non sexually objectified condition. Images rated as size 8 and above and as having sexual appeal were considered for the above average/plus size-sexually objectified condition. Less than 20 images met full criteria for each condition. Of the images that met criteria, 12 images with the highest inter-rater reliabilities were chosen for the thin-non sexually objectified, thin- sexually objectified and the above average/plus size-non sexually objectified condition. However, only 8 images met criteria for the above average/plus size sexually objectified condition. There is a concern that 8 images would not be sufficient to produce an experimental effect therefore the

above average/plus size-sexually objectified condition was eliminated from the main study.

MAIN STUDY

Method

Participants

One-hundred and seventy female undergraduate students (recruited from undergraduate psychology classes participated in this study. Participants received 2 hours research credit in exchange for participation. The mean age of the participants was 19.54 (SD = 2.18) with a range from 18 to 24. Participants varied on ethnic background (79% Caucasian, 2 % Black, 12% Hispanic, 3%Asian, 3% Mixed and 1% other) and marital status (98% single, 1% married/cohabitating and 1% divorced). There were 9 women who did not report their age and 1 woman who did not report her marital status and ethnicity and were therefore excluded from all analyses related to these variables.

Materials

There were three different types of media images used in this study as experimental stimuli: thin non-sexually objectifying images, thin sexually objectifying images, and average to plus size non-sexually objectified images (selected from Pilot Study).

Measures

Demographic Questionnaire. A demographic questionnaire asked each participant her age, self-identified ethnicity, year at school, height, weight and relationship status.

State Affective Measure. The Positive and Negative Affect Schedule (PANAS; Watson, et al., 1988) is a 20 item measure of positive and negative affect. Items are organized into 2 subscales: a ten item Positive affect (PA) and a ten item Negative Affect subscale (NA). Participants indicate the degree to which they are currently feeling a variety of emotions on a 5-point Likert scale ('very slightly/not at all' to 'extremely'). PA is related to social activity and satisfaction and to the frequency of positive events (Clark & Watson, 1988) where high scores on the PA scale indicate a state of high energy, concentration and pleasurable engagement, whereas low scores indicate sadness and lethargy. In contrast, NA is related to self-reported stress and (poor) coping (Wills, 1986). A low score on the NA scale indicates a state calmness and serenity. Internal consistency in a sample of 660 college students was .89 on the PA subscale and .85 on the NA subscale (Watson et al., 1988). The correlation between the PA and NA subscale was -.15 which supports the discriminant validity of the two subscales (Watson et al., 1988).

Appearance Anxiety. The Appearance Anxiety Scale (Dion et al, 1990) was used to assess the extent to which participants experience anxiety concerning their physical appearance. Participants respond to thirty items on a 0 ("never") to 4 ("almost always") scale. Scores may range from 0 to 120, with higher scores indicating greater appearance anxiety. The scale has been demonstrated to have satisfactory internal consistency (Cronbach's alpha=.86) and test-retest reliability (r= .89).

State Body Image. The Body Image States Scale (BISS; Cash, 2002) consists of six items written to tap the following domains of current body experience: (1)

dissatisfaction—satisfaction with one's overall physical appearance; (2) dissatisfaction—satisfaction with one's body size and shape; (3) dissatisfaction—satisfaction with one's weight; (4) feelings of physical attractiveness— unattractiveness; (5) current feelings about one's looks relative to how one usually feels; and (6) evaluation of one's appearance relative to how the average person looks. Responses to each item are based on 9-point, bipolar, Likert-type scales, semantically anchored at each point. The scale is presented in a negative-to-positive direction for half of the items and a positive-to-negative direction for the other half. Scores on each dimension range from 1-9, with higher scores indicating more favorable body image states. In a female college sample the internal consistency alpha coefficient was .77 and 2-3 week test-retest reliability was .69 (Cash, Fleming, Alindogan, Steadman, & Whitehead, 2002).

state Self Objectification (Manipulation Check). A manipulation check was necessary to test the effectiveness of the study's method of priming a state self objectification. It was expected that the self objectification prime would cause participants to feel self-conscious about their bodies' shape, size and appearance. This was tested by asking participants to complete the modified version of the Twenty Statements Test (TST; Bugental & Zelen, 1950; Cousins, 1989) which asked participants to make different statements about their self and their identity by completing the statement "I am_____". The coding scheme developed and validated by Fredrickson et al. (1998) was used. Two independent coders classified responses to the TST into one of five groupings- body shape and size (e.g. I am overweight, tall), other physical appearance (e.g. I am pale, I am blonde), physical competence (e.g. I am strong, I am

energetic), trait and abilities, not body related (e.g. I am friendly, I am intelligent) and states or emotions (e.g. I am tired, I am content). For the purpose of this study the number of statements in the "body shape and size" and "other physical appearance" category served as a measure for a state of self objectification.

Trait Self Objectification. The Self Objectification Questionnaire (SOQ; Noll & Frederickson, 1998) was used to determine participant's concerns with their physical appearance. In this 10-item measure, participants were asked to rank order 10 body attributes from greatest (9) to least (0) impact on their physical self-concept, regardless of how satisfied they were with which each attribute. Difference scores were computed by subtracting the sum of the five competence attributes (e.g. health, strength) from the sum of the appearance attributes (e.g. weight). Scores range from 25 to -25; higher scores indicate greater self objectification. Previous research has demonstrated high test-retest reliability (*r*=.92; Fredrickson, 1999, as cited in Minwe-Rubino et al.,2002)

Disordered Eating. The Eating Disorder Inventory-3 (EDI-3; Garner, 2004). is a self-report measure of eating behavior and thought patterns, consisting of 91 items. It contains twelve scales: Drive for Thinness, Bulimia, Body Dissatisfaction, Low Self-Esteem, Personal Alienation, Interpersonal Alienation, Interpersonal Insecurity, Interoceptive Deficits, Emotional Dysregulation, Perfectionism, Asceticism and Maturity Fears. Participants answer whether each item is characteristic of them either Always, Usually, Often, Sometimes, Rarely, or Never. The focus of the current study was on the Body Dissatisfaction, Drive for Thinness, and Bulimia subscales. Studies

have shown the subscales to have adequate reliability coefficients of .84 and .93 for Bulimia and Body Dissatisfaction respectively (Perez, Voelz, Pettit, & Joiner, 2002).

Social Anxiety. The Social Interaction Anxiety Scale and the Social Phobia Scale (SIAS and SPS, respectively; Mattick & Clarke, 1998) consists of 20-item companion self-report scales that assess fears of social interaction in dyads and groups (SIAS) and fears of scrutiny during routine (performance) activities (SPS). Items are rated on 0–4 Likert-type scales with higher scores indicative of greater severity. Both scales have been shown to be internally consistent (α s=.88–.94) and stable over time (retest coefficients over intervals up to 13 weeks in individuals with social anxiety disorder>.90; Mattick & Clarke, 1998). Support for the convergent and discriminant validity of these two measures has also been demonstrated (Brown et al., 1997; Heimberg, Mueller, Holt, & Hope, 1992).

Procedure

Participants signed-up for a study titled, "mood and body image". A cover story was used to disguise the true nature of the study and reduce demand characteristics. Upon arrival to the experiment, participants completed informed consent and were told that they were participating in a study examining the psychometric properties of various questionnaires designed to measure mood and the way people feel about their body. To accomplish this goal, participants would fill out various questionnaires of mood and body image (time 1), then wait 20 minutes, and take the measures again (time 2). For this, they would earn .5 hours of credit. However, while they waited to complete the measures a second time, participants would participate in an additional un-related study

to receive an additional .5 hour of research credit. Finally, after completing one hour worth of research they could receive an additional research hour by participating in an un-related study by another investigator that dealt with puzzles. Interested participants completed measures for the body image study (labeled Study 1), participate in another study (labeled Study 2), returned to Study 1 and completed the measures again and finally participated in Study 3. In actuality, Study 1 (Time 1) gathered pre-experimental data (baseline) Study 2 served as the experimental manipulation, Study 1 (Time 2) gathered post-experiment data and Study 3 collected data for the social interaction hypothesis.

Following the description of the procedures, participants completed Time 1 measures, which included a demographic sheet, trait measures of self objectification, eating disordered behavior, body image, and social anxiety(SOQ, EDI-3, SIAS), and state measures of affect and body image dissatisfaction (PANAS, BISS).

When finished, participants went to Study 2 and were informed that the study was examining advertising and product desirability. Participants completed a second consent form, a demographic questionnaire, and a questionnaire designed to support the cover story (e.g., How much money do you spend a month on clothes? How important is brand in your purchasing selections?). Participants were randomly assigned to one of the three experimental conditions where they viewed either thin models, sexually objectified thin models, or average/plus-size models. Participants believed that they were rating the purchasing desirability of the advertised items, clothes.

Instructions were written to engage participants in viewing the images. Each participant had her own private computer in a private room, where the media images were presented on a PowerPoint program, pre-timed to show images at 30 seconds a slide. Directions were provided on the first page of the PowerPoint slide. Participants received the following instructions: "You have been selected to rate the effectiveness of advertisements on purchasing desirability. You will be shown images of 8-12 of advertisements. You are to look at each advertisement and think about whether you would purchase the product. You will rate the advertisement/product on 4 dimensions: 1. the design of the product, 2. how well the model sells the product, 3. how much you would like to purchase the product, 4. if the product is clothing, whether the outfit would look good on you."

After viewing and rating all of images, participants received .5 hour of research credit (for Study 2). They then returned to Study 1 (time 2), where they completed state measures of affect, appearance anxiety, and body image for a second time (PANAS, AAS, & BISS). After completing all measures, participants were thanked for their participation and asked if they were interested in receiving an additional research credit by participating in Study 3.

Interested participants (N=162) were escorted to another room where the male confederate was already seated. Participants completed a second consent form, and were told that the study was interested in examining the effect of time on puzzle completion. They were instructed "You will have five minutes to work on the puzzle. You are not expected to finish the puzzle, just complete as much as you can". The female

experimenter then left the room and the male confederate engaged in a conversation (determined in the pilot study) with the female participant. The participant was led to believe the male confederate was another participant. After five minutes, the female experimenter re-entered the room and asked the participant and male confederate to complete a questionnaire packet that included filler questionnaires and a questionnaire regarding her participation in the study. The male confederate was instructed to complete the questionnaire slowly to allow the participant to complete the packet first. After completing the packet, the participant was escorted out of the room to be debriefed about the true nature of the study. Individuals who expressed that they were aware that their interaction partner was a confederate were noted and their responses were excluded from analyses related to the social interaction.

Data Analysis

Analyses were conducted using Statistical Package for the Social Sciences (SPSS for Windows Version 12.0, 2005). All statistical tests will be considered significant at .05 (Type I error, a). An a priori power analysis (Cohen, 1992) estimated that 52-53 participants per experimental condition would detect a medium effect size at power = .80 and alpha .05. Prior to analyses, data were examined for accuracy of entry and to ensure their appropriateness for statistical analysis. Assumptions tested include the normality of sampling distributions, homogeneity of variance and, linearity of the relationship between covariates and dependent variables, and tests for univariate and multivariate outliers. Results of evaluation of assumptions of normality, homogeneity of variance, and reliability of covariates were satisfactory. Based on an examination of kurtosis and

skewness there does not seem to be much deviation from normality. Non significant results of the Levene's Test on all dependent measures indicate that there appears to be homogeneity of variance.

Descriptive statistics and an analysis of variance were conducted to assess whether groups differed on BMI, age and trait self objectification. Additionally, descriptive statistics were conducted for all measures. Correlation matrices were conducted with baseline measures, post measures and all variables. To assess whether participants differed by condition on the dependent variables at baseline, a multivariate analysis of variance was conducted with condition as the independent variable, and appearance anxiety, body dissatisfaction and negative affect measured at baseline as dependent variables. To assess for the effects of condition on the dependent variables post manipulation, a multivariate analysis of variance was conducted with condition as the independent variable, and appearance anxiety, body dissatisfaction and negative affect measured post manipulation as dependent variables. Post hoc multiple comparison tests, adjusting for multiple contrasts, were conducted to determine which conditions report more disordered symptomatology. To assess whether participants in the sexually objectified groups report more discomfort with male interaction than the thin ideal and neutral conditions, a chi square was conducted using level of discomfort during interaction and condition as the variables. Finally, a chi square was conducted with condition and participant flirting during the interaction as the variables to assess whether participants in the sexually objectified conditions would report flirting with the confederate more than individuals in the non-sexually objectifying groups. These

analyses were chosen because the variables of interest are categorical. Data from participants who expressed that they were aware that their interaction partner was a confederate were not included in this analysis.

Results

Descriptives

The means and standard deviations for all baseline and post measures are shown on Table 1.Participants did not differ significantly on BMI F(2, 155) = 1.68, p > .05, age, F(2,160) = .09, p > .05) or trait self objectification, F(2, 168) = 1.31, p > .05, (thin non-sexually objectifying (M = 5.16, SD = 12.26), thin sexually objectifying (M = 1.03, SD = 14.95 and above average/plus size non-sexually objectifying (M = 3.25, SD = 13.49). The mean BMI and age of the sample and scores on the NA, BISS and AAS, measured at baseline and post manipulation, are presented by condition on Table 2.

Table 1. Descriptive Statistics- Means and Standard Deviations for all Measures

Measure	N	M	SD
EDI – Bulimia	170	5.37	5.90
EDI- Body Diss	170	18.29	9.56
EDI- Drive	170	10.54	7.57
SIAS	169	24.79	12.47
SOQ	169	3.15	13.64
BISS – Baseline	170	5.04	.87
BISS – Post	166	5.22	1.06
AAS – Baseline	169	69.63	18.92
AAS-Post	166	69.07	18.50
NA – Baseline	170	25.08	12.21
NA – Post	166	26.34	14.13
PA – Baseline	170	27.81	6.29
PA- Post	166	29.16	7.01
TST	166	1.93	1.70

Note: EDI= Eating Disorder Inventory; EDI- Bulimia = Bulimia Subscale of the Eating Disorder Inventory-3; EDI- Body Diss. = Body Dissatisfaction subscale of the Eating Disorder Inventory-3; EDI- Drive = Drive for Thinness subscale of the Eating Disorder Inventory -3; SIAS = Social Interaction Anxiety Scale; SOQ = Self Objectification Questionnaire;; BISS = Body Image State Scales;; AAS = Appearance Anxiety Scale; NA = Negative Affect Scale of the Positive and Negative Affective Scales;

Table 2. Descriptive Statistics- Means and Standard Deviations for Baseline and Post Manipulation Scores by Condition

Variable	Thin sexually	Thin non-sexually	Above average/plus non-sexually
	<i>Obj.</i> $(n=56)$	<i>Obj.</i> $(n=54)$	<i>Obj</i> $(n = 54)$
BMI	23.37 (4.28)	23.63 (3.58)	22.24(4.47)
Mean Age	19.55 (1.22)	19.62 (3.43)	9.44 (1.16)
BISS baseline	5.06 (.87)	4.96 (.83)	5.10 (.91)
BISS post	5.05 (.93)	5.08 (.83)	5.54 (1.30)
AAS baseline	68.77 (17.40)	71.35 (17.72)	68.75 (21.61)
AAS post	65.35(16.90)	67.35(16.90)	65.54 (20.73)
NA baseline	26.44 (11.90)	24.11 (11.89)	24.70 (12.98)
NA post	27.96 (14.17)	25.24 (13.54)	25.76 (14.13)
PA baseline	27.37(6.32)	28.03(6.55)	28.03(6.07)
PA post	28.72(6.80)	29.44(7.54)	29.35(6.77)
TST	1.77 (1.52)	1.98 (1.55)	2.06 (2.02)

Note: BISS = Body Image State Scales; AAS = Appearance Anxiety Scale; NA = Negative Affect Scale of the Positive and Negative Affective Scales; PA = Positive Affect Scale of the Positive and Negative Affective Scales; TST = Twenty Statements Test

Hypothesis 1

A correlation matrix of baseline measures was conducted to assess whether trait self-objectification (SOQ scores) was significantly related to disordered eating (EDI-Bulimia, Drive for thinness and Body Dissatisfaction subscales) measures at baseline.

This correlation matrix is displayed on Table 3. There was a significant correlation

between the SOQ scores and all three EDI subscale scores, bulimia (r = .29, p < .001), body dissatisfaction (r = .17, p < .05) and drive for thinness (r = .17, p < .05); where the higher the trait self objectification score, the more bulimic behaviors, body dissatisfaction and drive for thinness endorsed. There was no significant association between trait self-objectification and state body image measured at baseline(r = -.09, p = .25).

Table 3. Intercorrelations Between Variables Measured Baseline Manipulation

Variable	1.	2.	3.	4.	5.	6.	7.	8.
1. EDI- Bulimia	1.00							
2. EDI- Body Diss.	.50**	1.00						
3. EDI- Drive	.63**	.68**	1.00					
4. SIAS	.38**	.28**	.22**	1.00				
5. SOQ	.29**	.15*	.17*	.13	1.00			
6. BISS	46**	61**	47**	34**	09	1.00		
7. AAS	.53**	.80**	.68**	.43**	.18*	67	1.00	
8. NA	.02	07	.01	03	.02	.03	05	1.00

Note: * p < .05; ** p < .01

Manipulation Check

We had participants complete the Twenty Statements Test (TST) to evaluate the effectiveness of the picture manipulation. It was expected that viewing thin non-sexually objectifying and thin sexually objectifying images would cause participants to feel self conscious about their bodies' shape, size or appearance and list such thoughts

on the TST. A univariate analysis of variance indicated that the type of condition did not predict state self-objectification F(2,165) = .42, p = .66, thin non-sexually objectifying (M = 1.98, SD = 1.54), thin sexually objectifying (M = 1.77, SD = 1.52) and above average/plus size non-sexually objectifying (M = 2.06, SD = 2.02).

Hypothesis 2 and 3

To assess if groups differed on the dependent

To assess if groups differed on the dependent variables prior to the manipulation, a one-way multivariate analysis of variance (MANOVA) was conducted on body dissatisfaction (BISS), appearance anxiety (AAS), and negative affect (NA) measured at baseline with condition as the independent variable. The results of this analysis are reported in terms of Pillai's Trace converted to an exact multivariate F statistic. The MANOVA revealed no significant results for condition, F (4, 328) = .32, p = .96. In the context of the multivariate F, the univariate Fs also revealed no between-groups differences at baseline in terms of body dissatisfaction , F (2,169) = .378, p = .69, appearance anxiety, F (2,169) = .35, p = .70, or negative affect, F (2,169) = .55, p = .58.

To assess if groups differed by condition on the dependent variables following the manipulation, another one-way multivariate analysis of variance (MANOVA) was conducted on body dissatisfaction (BISS), appearance anxiety (AAS), and negative affect (NA) measured at time 2. The results of this analysis are also reported in terms of Pillai's Trace converted to an exact multivariate F statistic. The overall MANOVA was not significant F (8, 320) = 1.61, p = .12. However, the univariate Fs revealed a significant main effect for condition on body dissatisfaction, F (2,165) = 3.73, p <.05, η_p^2 = .04. Based on the partial eta squared (η_p^2 = .04), 4 percent of the variance in body

dissatisfaction scores post manipulation can be explained by the effect of condition. Post-hoc multiple comparison tests adjusting for multiple contrasts revealed that following the manipulation, participants in the thin sexually objectified and the thin non-sexually objectified groups reported lower body satisfaction than participants in the above average/plus size non sexually objectified group. However, there were no significant differences in change in body dissatisfaction between the thin non-sexually objectified and thin sexually objectified groups. The means are displayed on Table 2. Univariate Fs did not indicate significant main effects of condition on appearance anxiety, F(2,165) = .22, p = .80, $\eta_p^2 = .003$, and negative affect, F(2,165) = .51, p = .60, $\eta_p^2 = .006$. Correlations for post manipulation measures (NA, AAS, BISS, and TST) are displayed on Table 4. Correlations for all baseline and post manipulation measures are displayed on Table 5.

Table 4. Intercorrelations Between Variables Measured Post Manipulation

Variables	1.	2.	3.	4.	
1. BISS	1.00				
2. AAS	58**	1.00			
2. AAD	50	1.00			
3. NA	.17*	09	1.00		
4. TST	15	.24**	18**	1.00	

Note: *p < .05; **p < .01

Table 5. Correlation Matrix for Baseline and Post Manipulation Measures

	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12
1. EDI- Bulimia	1.00											
2. EDI- Body	.50**	1.00										
Diss. 3. EDI- Drive	.63**	.68**	1.00									
4. SIAS	.38**	.29*	.22**	1.00								
5. SOQ	.29**	.16*	.17*	.13	1.00							
6. BISS – Time 1	- .46**	-61**	- .47**	- .34**	09	1.00						
7. BISS – Time 2	- .36**	- .57**	.44**	- .28**	.01	.69**	1.00					
8. AAS Time 1	.53**	.80**	.68**	.43**	.18*	- .67**	- .58**	1.00				
9. AAS – Time 2	.52**	.75**	.63**	.45**	.19*	- .64**	- .58**	.92**	1.00			
10. NA – Time 1	.02	07	.01	03	.02	.03	.11	05	03	1.00		
11. NA – Time 2	001	26	01	10	.11	.08	.17*	07	.76**	.76**	1.00	
12. TST	.19*	.13	.20**	.16*	.06	13	15	.18*	.24**	07	 18*	1.00

Note: * p < .05; ** p < .01

Hypothesis 4

To test if participants differed in comfort level when interacting with a male confederate, a chi square analysis was conducted using type of condition and comfort level as variables. Results indicate that there were no significant differences between conditions on comfort level (λ^2 =.57; p = .75). The observed and expected counts are displayed in Table 6. To test if participants differed in whether or not they flirted with the confederate, a chi square analysis was conducted using condition and whether or not

the participant flirted as variable. Results indicate a non-significant trend between conditions on participant flirting (λ^2 =3.44; p = .18) where both of the non-sexually objectifying groups had more individuals endorse flirting with the confederate than individuals in the sexually objectifying group.

Table 6. Condition by Comfort Level During Social Interaction Crosstabulation

			Comfort Level Social Interaction	Total	
			uncomfortable	comfortable	
Condition	Thin sexually	Count	3	53	55
	objectified	Expected Count	3.5	51.5	55.0
	Thin non-	Count	3	52	55
	sexually objectified	Expected Count	3.5	51.5	55.0
	Above	Count	4	42	46
	average/plus size non- sexually	Expected Count	2.9	43.1	46.0
	objectified				
Total		Count Expected Count	10 10	146 146.0	156 156.0

DISCUSSION & CONCLUSIONS

The current study examined the psychological consequences of trait and state self objectification. This study had three main objectives: to examine the relation between trait self objectification and various eating pathology; to examine the degree of state self objectification (induced by three different conditions) and the impact of condition on affect and sense of self; and finally to examine the effect of condition on interactions with the opposite sex.

In regards to the primary hypothesis which predicted a positive relation between trait self objectification and state body dissatisfaction and disordered eating, results were supportive. In this sample, individuals with higher trait self objectification levels expressed more bulimic symptoms, drive for thinness and greater body dissatisfaction. These results imply that individuals who tend to place greater value on physical appearance may be susceptible to having more disordered eating symptomatology. These findings have preventative and treatment implications. First, these findings are consistent with eating disorder literature that demonstrate that individuals with eating disorders place a strong emphasis on their physical appearance (e.g. Goldfein, Walsh, & Midlarsky, 2000; Wilfley, Schwartz, Spurrell, & Fairburn, 2000). Second, these finding support the utility of treatments that include exposure to combat fears that individuals with eating disorders may have regarding an imperfect appearance (Delinsky & Wilson, 2006; Key, George, Beattie, Stammers, Lacey, & Waller, 2002; Tuschen-Caffier, Pook, & Frank, 2001). However, the applicability of these findings to an eating disorder population is limited as the percentage of individuals who would meet criteria for an

eating disorder in the current sample is unknown. However, findings supporting the relation between trait self objectification and body image dissatisfaction and disordered eating symptomatology, two risk factors for eating disorders, suggest that trait self objectification may be an important factor to target in preventing eating disorders. By targeting one's evaluation of themselves and encouraging a more well-rounded value assignment of individual characteristics, in addition to other factors related to disordered eating, we may be able to reduce the severity or prevalence of disordered eating. Future research developing and evaluating the efficacy of prevention programs should include trait self objectification as a variable of predicting outcome.

In regards to the manipulation, it was expected that the type of condition would predict state self objectification; however, the manipulation check was not supportive. In this sample, individuals' state self objectification did not differ significantly based on condition. Individuals in the thin and thin sexually objectified condition reported similar levels of state self objectification as individuals who viewed above average/plus sized images. This suggests that the experimental manipulation used in this study was not successful in inducing varying levels state of self objectification and therefore, level of state self objectification can not be used as possible explanations for all other post variable findings. There are possible explanations for these results. First, it is possible that individuals may need to be exposed to the condition for a longer period of time to produce an inducing effect. Individuals viewed 12 images and viewed each image for 30 seconds, therefore it is assumed that they were exposed to each condition for six minutes. However, the individuals were told that their task was to rate each image and

therefore may have only looked at the image long enough to rate it. For some individuals this may have been substantially less than 30 seconds per image. Future studies should attempt to increase the duration of exposure by increasing the number of images in the manipulation. Additionally, it is possible that the instructions given to participants may have interfered with the attention they gave to each image. Prior to being exposed to the manipulation, individuals were given detailed instructions to rate images on a variety of factors. It is possible that the instructions given, diverted participants' attention from viewing the image broadly, but rather, focusing only on specific factors detailed in the instructions (e.g. purchasing desirability of the clothing in the image). Future studies should create instructions that oblige participants to view the images broadly.

In regards to the second hypothesis, it was expected that the type of condition would predict negative affect, appearance anxiety, and state body image dissatisfaction post manipulation. Specifically, women in the thin ideal and sexually objectified condition were predicted to report higher levels of negative affect, appearance anxiety, and state body image dissatisfaction than the large condition following the manipulation. Findings were mixed. Results indicate that individuals in the thin sexually objectified and thin non-sexually objectified groups reported higher levels of body dissatisfaction than those in the above average/plus size non-sexually objectified group. However there were no significant differences between individuals in the thin non-sexually objectified and thin sexually objectified groups. There were no differences between condition groups on their change in negative affect and appearance anxiety. These results suggest that type of media image exposure specifically affects women's body dissatisfaction but

not their mood and anxiety. One potential reason why this might occur is that with repeated exposure to these media images, women may become desensitized and thus, the images may not affect their mood.

The current study did not find results indicating that the thin sexually objectified and thin non-sexually objectified groups differed on body image dissatisfaction. Future research should attempt to expand on these findings by addressing the limitations of the manipulation used in this study as it is possible that there are additive effects of the thin ideal and the sexually objectifying component of the image. Additionally, future research should include additional conditions (i.e., images depicting above average/plus size sexually objectified women) to determine what component of the image produces the greatest effect, the sexual objectification, the body size in the image, or a combination.

With regard to the fourth hypothesis, which examined the effect of condition on comfort level with interacting with person of the opposite sex, it was expected that individuals who viewed the sexually objectified condition would report more discomfort during the interaction with an individual of the opposite sex. Results did not support this hypothesis. Individuals did not differ by condition in comfort levels during the interaction with a male. In fact most participants in the sample expressed feeling comfortable during the social interaction. There are a variety of factors that may have influenced these results. First, given there were no significant results regarding the manipulation it would be expected that there would also be no significant differences between groups on comfort level. Additionally, participant's comfort level may have

been influenced by their familiarity with the male confederate. The confederate was a psychology major at the university and therefore some participants may have had contact with him prior to the study. Future studies should assess for familiarity with the male confederate and include this factor in their analyses. However, results addressing the effect of condition on participant flirting suggest a non significant trend that women who viewed non- sexually objectifying images flirted more than individuals who viewed sexually objectified images. It is possible that given a larger sample size, these findings may have been significant. Future studies should replicate these findings by using a larger sample size and expand on the study by using additional dependent variables. It is possible that the confederate's perception of the interaction (i.e. participant aggressiveness, participant physical proximity to the confederate etc.) may provide a more global picture of findings.

Three additional limitations of the present study deserve mention. First, our measures were exclusively based on self-report; consequently, this study relies solely on self-perceptions and there is currently no measure to assess the accuracy of these responses. Second, our sample consisted of female Caucasian undergraduate students from the Southwest, limiting the generalizability of this study to general population. Third, possible confounding variables such as trait body image or social comparison were not included in the study. Obtaining information on such variables might have enhanced the explanatory power of our findings. Our findings provide further evidence for the influence of media exposure on one's body image. Further research is needed to confirm this.

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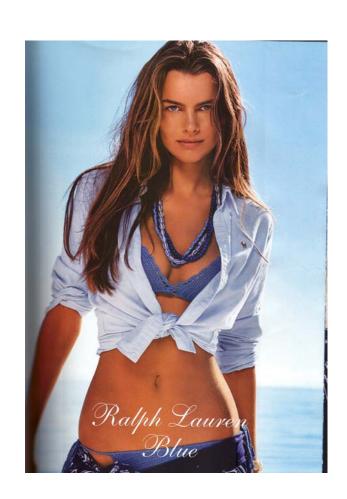
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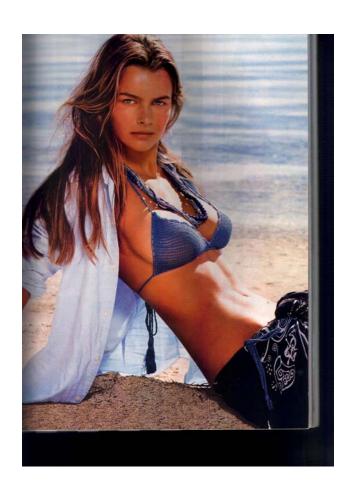
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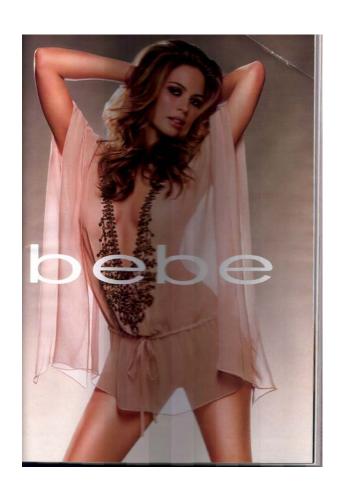
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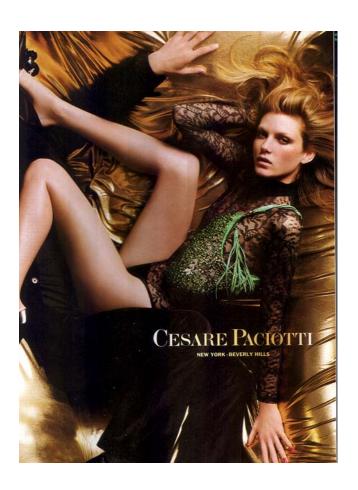
APPENDIX A









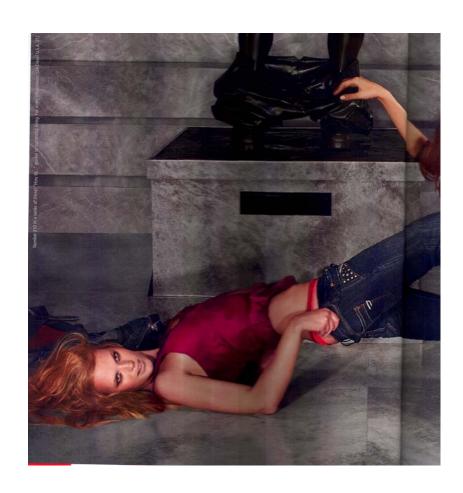


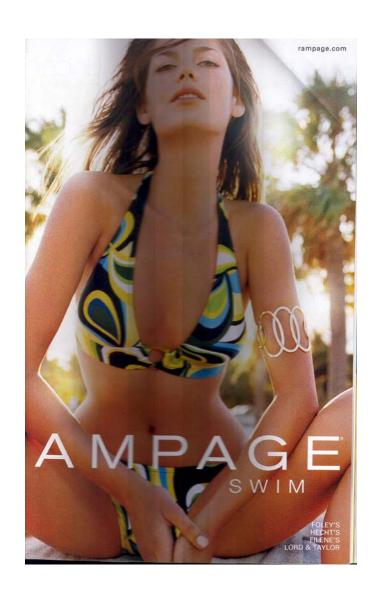


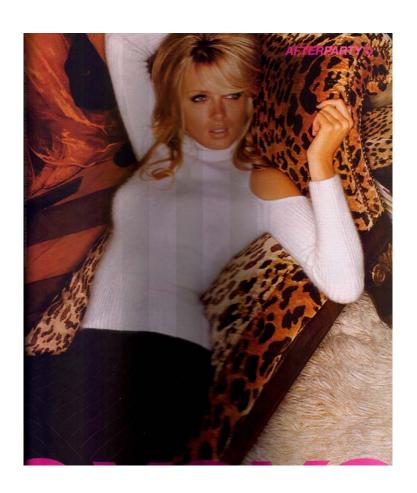


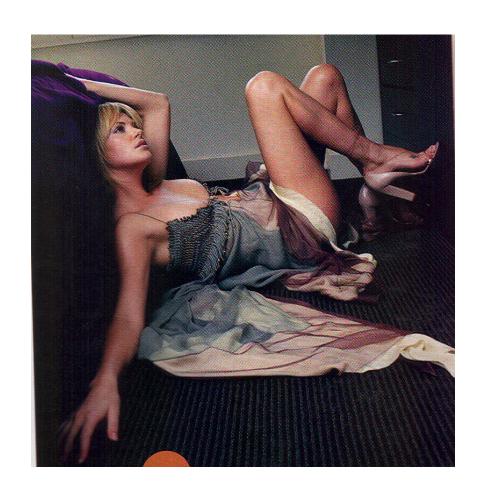












APPENDIX B





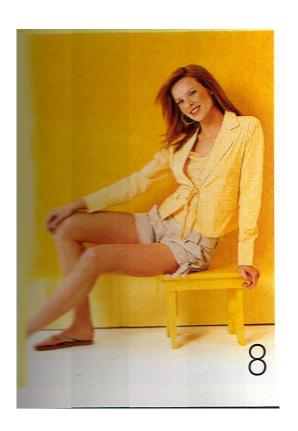






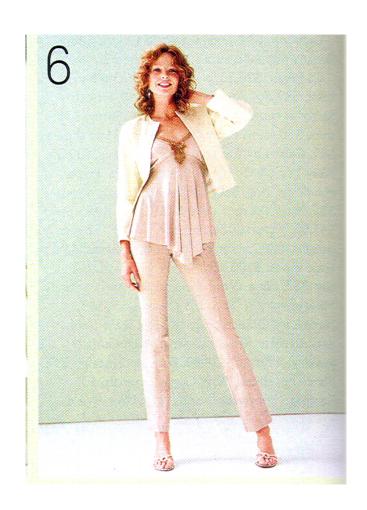


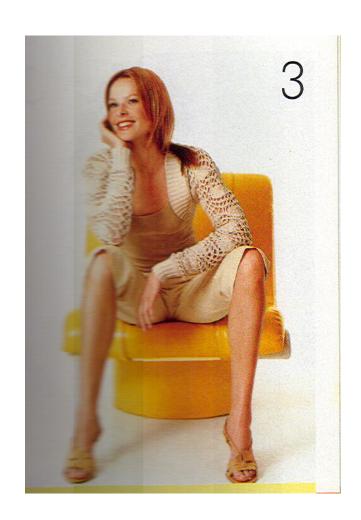




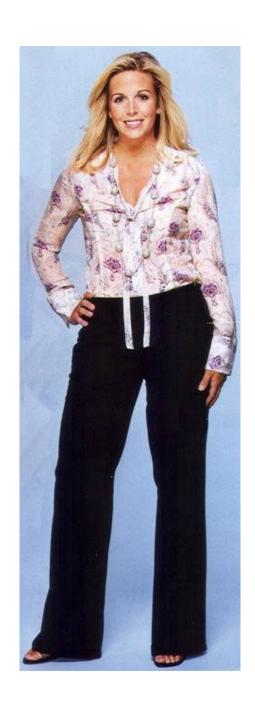




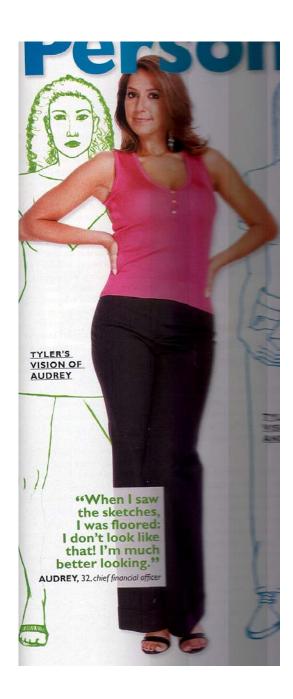




APPENDIX C



























VITA

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Manuscripts & Publications

Perez, M., Hernandez, A., Joiner, T., & Clarke, A. (In Press) Analysis of Bulimic Symptomatology Across Age and Geographic Locations. Eating Behaviors.

Clarke, A., & Perez, M. (In preparation) Interpersonal Functioning, Emotional Suppression, and Disordered Eating. Manuscript to be submitted.

Warren, C., Gleaves, D., & Clarke, A. (In preparation) Social Comparison, Ethnicity, and Media Exposure to Thin-Ideal Models: An Experimental Study. Manuscript to be submitted.

Presentations

Clarke, A., & Perez, M. (2006, June) Preliminary findings on the Internalization if Sexual Objectification and it's Consequences in Body Image and Social Interaction. Poster presented at the annual Academy of Eating Disorders International Conference. Barcelona, Spain

Hopwood, C.J., Clarke, A. & Perez M. (2006, May) Interpersonal Problems and Eating Disorder Constructs. Poster presented at the annual Society for Interpersonal Theory and Research (SITAR), Philadelphia, PA.

Clarke, A., & Perez, M. (2005, October) Interpersonal Functioning, Emotional Suppression, and Disordered Eating. Poster presented to the Psychology Department, Texas A&M University, College Station, TX.

Warren, C.S., Gleaves, D. H., Grimes, C., Clarke, A., Kennedy, L., & Kramer, A. (2005, August) Race, Attractiveness, and Thinness: The Moderating Effect of Ethnicity. Poster presented at the annual American Psychological Association Annual Conference, Washington DC.

Tartakovsky, M., Clarke, A., & Perez, M. (2005, May). The role of acculturative stress in disordered eating: Is it really a unique construct? Poster presented at the annual Academy of Eating Disorders International Conference. Montreal, Quebec, Canada

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