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Disrupting the Cycle of Self-Objectification

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DISRUPTING THE CYCLE OF SELF-OBJECTIFICATION

A thesis

Presented to

The School of Social Sciences, Education & Business

Department of Higher Education and Student Development

Taylor University

Upland, Indiana

In Partial Fulfillment

Of the Requirements for the Degree

Master of Arts in Higher Education and Student Development

by

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February 2015

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**Higher Education and Student Development
Taylor University
Upland, Indiana**

CERTIFICATE OF APPROVAL

MASTER'S THESIS

This is to certify that the Thesis of

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Entitled

Disrupting the Cycle of Self-Objectification

has been approved by the Examining Committee for the thesis requirement for the

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Abstract

From a young age, women face exposure to fat talk. Though many women tend to assume this normative way of communicating about the body as a helpful means of coping with body shame and dissatisfaction, past literature has created a strong case against this assumption. Fat talk plays a subtle role in the self-objectification process and poses a significant threat to the positive identity development of young women.

Development of a feminist identity has demonstrated a capacity to positively disrupt the propensity for women to self-objectify. The current study explored the relationship between feminist identity development, fat talk, and self-objectification. The researcher administered a survey to women living in all-female residence halls at a small, faith-based Midwestern institution. The study found no relationship between feminist identity development, fat talk, and self-objectification, though there emerged a strong relationship between measures of fat talk and self-objectification. Interestingly, despite no positive or negative affect on measures of fat talk and self-objectification, the majority of participants agreed most strongly with items measuring later stages of feminist identity development.

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“Listen to your life. See it for the fathomless mystery it is. In the boredom and pain of it, no less than in the excitement and gladness: touch, taste, smell your way to the holy and hidden heart of it, because in the last analysis all moments are key moments, and life itself is grace.”-Frederick Buechner

I am so incredibly grateful for all of the people in my life, both past and present, who have helped me to understand more of what it means to truly live as though I believe that all of life is grace, including the opportunity to explore further a conversation that I care about deeply—how to truly and thoughtfully advocate for women’s identity development.

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Chapter 1

Introduction

The college years offer an incredible opportunity for rich growth and development for students, but this opportunity does not remain devoid of opposition. Young women entering college face distinct challenges to the potential development their educational experience can facilitate. Women, in particular, understand and find their identity by relating to others (Evans, Forney, Guido, Patton, & Renn, 2010). Young women's relationships offer formative voices with the power to influence not only self-image but also life choices (Josselson, 1991).

For many women, they become empowered toward healthy identity formation through the avenue of relationship. However, for many other women, the power and influence of relationships yields negative, costly effects to the identity formation process that takes place during the college years. One of the most pervasive negative voices relationships can impose on young women praises societal standards of physical beauty and encourages overall body consciousness—the effects of which prove long-lasting and detrimental to the psychological and physical health of young women.

Body concerns begin at an alarmingly early point in women's lives. Nichter (2000) captured this teen's recollection of just how early these concerns presented:

I remember this so clearly...in third grade we had to fill out these forms...like how tall you were, what color your eyes were...and your weight. And I remember in third grade thinking, 'I'm so fat.' Seriously. That's really young, but I remember just being *so* ashamed of my weight. (p. 49)

Concerns about the body often manifest themselves during adolescence, a developmental period during which individuals feel concern about both appearance and peer acceptance, in the form of verbal expressions of dissatisfaction. Dissatisfied conversation about one's body, or "fat talk," plays a critical role in the social scene of adolescent girls in particular (Nichter, 2000). While adolescent girls use a wide range of methods to attempt achievement of body goals, the content and frequency of engagement in fat talk indicates "they are attempting to reproduce the cultural ideal of beauty through fat talk" (p. 67).

Adolescent girls do not become exposed simply to conversations regarding body dissatisfaction with their peers; similar conversations occur in the home (Nichter, 2000). The healthiness of a young girl's body image remains contingent upon her mother's body concerns and the mother-daughter relationship (Attie & Brooks-Gunn, 1989). In both explicit and implicit ways, mothers communicate messages of cultural ideals and about gender and femininity to their daughters, and these messages can often feel confusing and contradictory (Orbach, 1987). Many adolescent girls become exposed to their mother's overly critical discourse regarding her body concerns at a time when girls feel hyperaware of their perceptions and others' perceptions of their bodies (Nichter, 2000). Unfortunately, a daughter's observation of her mother's body concerns provides the young girl with a dangerous message that body dissatisfaction does not end with entrance

to adulthood. Conversation surrounding body dissatisfaction appears strikingly common not only within adolescent girls' peer groups but also within their homes.

Gender Development

These experiences teach women about what femininity means, and women entering their college years consciously and unconsciously carry with them many assumptions learned throughout childhood and adolescence. In the gender schema, Bem (1983) described the role of observations of sex-differentiated practices in one's social environment and one's own cognitive processing in contributing to gender development. Gender-schematic processing refers to the process by which one interprets and organizes observed societal messages of what it means to be male versus female. Bem (1983) asserted self-concept as constructed throughout interaction with and internalization of gender in this way. Evans et al. (2010) argued, "Understanding how individuals develop gender schemas and how these schemas operate to influence identity, decisions, and behaviors may elucidate college students' gender identities and gender-related decisions" (p. 83). The gender schema by Bem (1983) contextualized the importance of considering the effects of the frequent exposure to often overwhelmingly negative messages females receive throughout childhood and adolescence in light of how the experiences and messages translate into emerging adulthood.

Fat Talk and Self-Objectification

While expressions of body dissatisfaction seem commonly included in casual conversations among women, fat talk should not be taken lightly. Fat talk plays an instrumental role in the objectification process (Arroyo & Harwood, 2012). While it seems perfectly reasonable to point a finger at the media's role in objectifying women,

women ritualistically self-objectify when they engage in fat talk. Unfortunately, fat talk does not play an important part of just young girls' social spheres. It appears prevalent among emerging adult women as well (Ousley, Cordero & White, 2008). Fat talk proves destructive to all and particularly harmful to those who have struggled with disordered eating in the past and/or present. Though engagement in fat talk does not always indicate disordered eating, it can communicate to those suffering with the tendency toward the habit that most peers have similar concerns regarding eating habits and body image.

The consequences of objectification prove damaging. Consequences of objectification include feelings of shame and anxiety, lack of awareness of internal bodily states, and deterrence from experiencing "peak motivational states" (Fredrickson & Roberts, 1997, p. 183). Calogero (2004) argued, "If we take the consequences of self-objectification seriously, we must take collective action toward identifying, challenging, and changing sexually objectifying messages and behaviors" (p. 20). The clearly negative effects of fat talk and its implications on women's inclination to self-objectify necessitate debunking the myth that fat talk can serve as a means of coping with body dissatisfaction (Ousely, Cordero & White, 2008).

Feminist Identity Development

Research on feminist attitudes highlighted its potential role in disrupting self-objectification (Murnen & Smolak, 2009). As a result, the development of a feminist identity can empower young women to critically consider societal messages instead of falling prey to blind acceptance of messages that promote the objectification of women (2009). Additionally, women with feminist values report more positive psychological

well-being than women with traditional values (Yakushko, 2007). Feminist values also relate to a greater sense of autonomy, personal growth and purpose in life.

A number of researchers considered how understanding of gender roles impacts body dissatisfaction, likelihood to self-objectify, and so on (Calogero & Jost, 2011; Fuller-Tyszkiewicz, Reynard, Skouteris, & McCabe, 2012; Oswald, Franzoi, & Frost, 2012; Murnen & Smolak, 2009). Others considered body dissatisfaction and processes of self-objectification in light of fat talk (Calogero, 2004; Calogero, Herbozo, & Thompson, 2009; Gapinski, Brownell, & LaFrance, 2003; Lindner, Tantleff-Dunn, & Jentsch, 2012; Moradi & Huang, 2008; Tiggemann & Boundy, 2008). However, the relationship between understanding of gender roles and frequency of engagement in fat talk and self-objectification processes remains, to this point, unaddressed by research.

In light of the implications of fat talk and self-objectification processes on female gender development and overall identity formation among college women, an understanding of how to deconstruct the societal messages and pressures placed on college women today appears necessary. In order to do so, the present study explored the following research questions:

- What is the relationship between feminist identity development and frequency of engagement in fat talk?
- What is the relationship between feminist identity development and self-objectification?

Chapter 2

Literature Review

In order to advocate for young women's identity formation during their college years, considering the great potential and great risk that relationships may pose during their college experience proves necessary. The literature created a strong case for the risk that excessive discussion of the body poses for young women. This strong scholarly proof necessitates a discussion of the ramifications of 'fat talk' and self-objectification, and a consideration of what can be done to protect and guide women toward establishing a strong and healthy sense of self.

Nichter (2000) allegedly introduced the term *fat talk* as means of defining ritualistic social banter exchanged between women in regards to dissatisfaction with their bodies. Fat talk can include conversation about women's own bodies as well as their female peers' bodies. Examples of the content expressed in this type of conversation include comments detailing how one ought to eat and exercise; expressed fears of becoming overweight; assessment of one's weight, shape or diet, supplements, meal replacements, and exercising strategies; how one's eating and exercise behaviors relate to others; and the appearance of their peers (Nichter, 2000; Ousley et al., 2008).

While fat talk may seem positive, the majority of fat talk remains negative (Arroyo & Harwood, 2012; Nichter, 2000). Women engaging in fat talk typically focus on the disparity between perceptions of their body and their personal expectations as well

as societal expectations (Arroyo & Harwood, 2012). In this way, the content of fat talk often expresses self-objectification in which women criticize and derogate themselves. Despite the overwhelming reality that fat talk contains such negative content, research by Nichter (2000) provided support for the notion that fat talk serves a means by which women gain acceptance from female peers. This social exchange proves complex to say the least, demanding an understanding of both its causes and implications.

What Precedes Fat Talk?

American women most likely report exposure to and perceived pressure to join in fat talk (Martz, Petroff, Curtin, & Bazzini, 2009; Payne, Martz, Tompkins, Petroff, & Farrow, 2011). In a cross-cultural study, fat talk emerged as much more common than positive body talk for both American and English students (Payne et al., 2011).

American students reported feeling greater pressure to engage in self-accepting body talk, and American students also reported greater exposure to positive body talk than English students. In a study comparing American and Korean women, Korean women appeared more negatively influenced by exposure to fat talk on Facebook (Lee, Taniguchi, Modica & Park, 2013). Korean women reported lower psychological well-being after viewing thin-promoting messages. Though negative effects on American women's body satisfaction and psychological well-being remained observable, the researchers found the effects of fat talk had an even greater negative impact on Korean women.

Fat talk seems often rule bound and guided by social norms (O'Dougherty, Schmitz, Hearst, Covelli, & Kurzer, 2011) and a more feminine than masculine custom among university students. Women appear generally expected to verbalize only positive and supportive evaluations of others. However, women also report that they often do not

truly receive and internalize compliments. Through qualitative study of a group of college-aged women, O'Dougherty et al. (2011) learned many young women consider others' bodies in noncritical ways while viewing their own bodies in critical ways. However, research also showed the content of fat talk most often discusses other peers' appearances (Ousley et al., 2008). Though not surprising, the researchers discovered young women had no difficulty expressing perceived problems with their bodies. Both low body satisfaction and low self-esteem significantly predict more fat talk (Eisenberg, Berge, Fulkerson & Neumark-Sztainer, 2011). Widespread and frequent fat talk communicates "that it is normal for women who are not actually overweight both to feel and to talk about feeling fat with others" (Engeln-Maddox, Salk, & Miller, 2012, p. 644). The work of many researchers suggested the power of internalization of the thin ideal in connection with negative body talk in both intrapersonal and interpersonal contexts (Dittmar & Howard, 2004; Hausenblas, Janelle & Ellis-Gardner, 2004; Monro & Huon, 2005; Mumen & Don, 2012; Prichard & Tiggemann, 2012; Tiggemann, Polivy, & Hargreaves, 2009; Vartanian, 2009; Watts & Cranney, 2010).

Effects of the thin ideal. Internalization of the thin ideal operates as a powerful component in the discussion of what might contribute to and exacerbate the effects of fat talk. In various ways, culture overwhelmingly communicates that success for women remains contingent upon achieving the ideal body (Mumen & Don, 2012)—a most often unhealthy thin ideal body (Dittmar & Howard, 2004). Through evaluating females' automatic responses to body-related words, Watts and Cranney (2010) found females had an immediate affective response. Interestingly, the affective response—negative attitudes towards fatness and positive attitudes towards thinness—proved consistent among

women regardless of individual difference in thin ideal internalization. This automatic evaluative process likely contributes to women's propensity to engage in fat talk.

With thin-ideal internalization connected to the likelihood to engage in fat talk, one must consider who most likely will internalize societal standards. Vartanian (2009) identified self-concept clarity as a powerful predictor of internalization. Women with lower self-concept clarity most likely internalize societal standards of attractiveness (i.e. the thin ideal). A muddled sense of identity leaves many women vulnerable to the effects of thin ideal internalization. Processes including "a general tendency to conform, public self-consciousness, and body weight contingency of self-worth" mediate the effects of self-concept clarity (p. 118).

Though fat talk negatively impacts body dissatisfaction, research demonstrated body dissatisfaction also precedes women's engagement in fat talk. Murnen and Don (2012) addressed which women appear most vulnerable to cultural messages about the ideal body. The researchers stressed that men and women who hold themselves to stereotypical gender roles prove most vulnerable and that women seem in the most precarious of positions "due to their subordinate societal position" (p. 128). Hausenblas et al., (2004) added that women with a high drive for thinness prove more negatively impacted by continued cultural messages.

The work of Dalley, Toffanin and Pollet (2012) shed light on what most strongly drives females' body-related attitudes. Fear of an imperfect fat-self more strongly mediated the impact of perfectionistic concerns on dietary behavior than hope of a perfect thin self. College women appeared more driven by fear of becoming fat than by hope of attaining the thin ideal. The greater the perfectionistic concerns and strivings, the more

vulnerable the woman to adopting behaviors as means of avoiding becoming fat. This factor proves important consider as it relates to women engaging in fat talk.

The media has a significant impact on women's internalization of the thin ideal. Women who viewed music videos featuring thin women and sexually objectifying content reported higher levels of state self-objectification and less satisfaction with their physical attractiveness (Prichard & Tiggemann, 2012). Monro and Huon (2005) also found that exposure to idealized images led to increased body shame and appearance anxiety with this effect even greater among women with the strongest tendency to self-objectify. In a study aimed to assess how women process thin ideal messages in magazines, Tiggemann et al. (2009) reported that women viewing thin ideal images experienced greater body dissatisfaction and increased negative mood. When women received instruction to compare themselves to the images, their reported mood became even more negative. To the opposite effect, when instructed to imagine themselves as the woman in the image, participants reported more positive moods. While the researchers' manipulation may have affected the mood, both sets of instructions proved to negatively impact body dissatisfaction. A relationship emerged between number of magazines consumed in a month and fantasy processing of thin ideal images, representing one of many ways thin ideal internalization becomes facilitated over time among women.

The negative effects of exposure to thin ideal images seem mediated by thin ideal internalization and social comparison with models portrayed in media (Dittmar & Howard, 2004). Internalization operates as a more specific predictor of body-focused anxiety for women than social comparison. Unfortunately, internalization also acts as a barrier against the positive effects of exposure to average-size models in the media.

When social comparison and internalization combine, the effects of exposure to thin ideal images prove detrimental to those exposed to the images.

Fat talk and interpersonal contexts. Though research demonstrates the media plays a powerful role in perpetuating fat talk, the influence of peers on an individual's body-related cognitions and behaviors proves equally significant (Munoz & Ferguson, 2012). This kind of talk also seems common in the family setting (Eisenberg et al., 2011). More than one-third of female young adults report hearing hurtful body talk comments from family members. Sadly, women who reported experiencing hurtful body talk during adolescence proved more likely to experience hurtful comments from significant others later in life. These types of experience with fat talk related to decreased body satisfaction and higher levels of depression.

Cash, Theriault and Milkewicz-Annis (2004) discussed how body image concerns affect interpersonal contexts. Body dissatisfaction, dysfunctional investment in appearance, and situational body image dysphoria all related to higher levels of social-evaluative anxiety and fear of intimacy in romantic relationships. The researchers warned, "Having a negative body image with excessive investment in one's appearance for self-definition, in turn, may further exacerbate one's insecurity and anxiety in relationships" (p. 99). Oswald et al. (2012) reported that women who have experienced hostile sexism more likely feel negatively about their physical bodies. These body image concerns translate into interpersonal contexts.

Tucker, Martz, Curtin and Bazzini (2007) considered the ways in which conformity, impression management and social comparison play a role in women's engagement with fat talk. The researchers explained that "fat talk can be conceptualized

as the extension of body image into the realm of interpersonal relations, particularly if women feel social pressure to express body discontent” (p. 157). They found support for their hypothesis in the fact that women more likely than not to follow the lead of the body presentation style of the confederate. When the confederate spoke about her body positively, the other woman more likely also rated her own body positively. The same proved true when the confederate spoke neutrally and negatively about her body.

Undergraduates with eating problems more likely engage in fat talk than those without eating problems (Ousley et al., 2008). These findings suggested students with eating problems appear “more attuned to and preoccupied with eating and body image than are individuals without eating problems of clinical severity” (p. 81). Regardless of whether or not students engage in disordered eating, fat talk occurs frequently on college campuses. Unfortunately, this practice allows students with eating problems to assume the majority of students feel concerned with their appearance, eating, and exercise habits.

The Disturbing Consequences of Fat Talk

Many of the consequences of fat talk seem to behave in cyclical ways. Research suggested that dissatisfaction precedes fat talk and that fat talk leads to body dissatisfaction. Fat talk affects women whether through direct participation or passive observation. Similar to media exposure, fat talk also promotes body dissatisfaction (Calogero et al., 2009; Cash et al., 2004; Ousley et al., 2008; Murnen & Don, 2012; Payne et al., 2011; Prichard & Tiggemann, 2012; Engeln-Maddox et al., 2012; Stice, Maxfield, & Wells, 2002; Tiggemann et al., 2009), even among women with healthy weight (2012). Sadly, participating in fat talk comments predicts higher levels of depression and greater perceptions of pressure to attain the thin ideal (Eisenberg et al.,

2011). Hearing fat talk comments predicted greater perceptions of pressure to attain the thin ideal (2011) and feelings of guilt (Engeln-Maddox et al., 2012). The causal relationship between hearing fat talk and experiencing feelings of guilt serves as a reminder of the relationship between body image disturbance and shame. Engeln-Maddox et al. (2012) also found that those who hear fat talk more likely engage in fat talk themselves, which only perpetuates the subtle destruction.

The cyclical role of self-objectification. Fat talk plays a subtle yet powerful role in the objectification process (Eisenberg et al., 2011). Objectification theory argues that “women are typically acculturated to internalize an observer’s perspective as a primary view of their physical selves” (Fredrickson & Roberts, 1997, p. 173). Objectification theory provides a helpful framework for understanding fat talk at the individual and group level.

Self-objectification, as a state and as a trait, compromises both cognitive and motivational functioning among women. High state self-objectification correlates with increased anxiety, other negative emotions, and body shame (Gapinski et al., 2003; Tiggemann & Boundy, 2008). Trait self-objectification connected to decreased intrinsic motivation and sense of self-efficacy. Trait self-objectification also correlated with poorer cognitive functioning and less motivation among women in a fat talk situation. Among those high in state-self-objectification, body shame appeared most negatively impacted when women received appearance compliments.

Self-objectification yields devastating effects outside of social contexts as well. Calogero (2004) demonstrated the power of women’s propensity to self-objectify by instructing participants to anticipate either a male or female gaze. Women instructed to

anticipate a male gaze reported greater body shame and social physique anxiety than those anticipating a female gaze. Calogero (2004) warned these findings “are unsettling if we imagine that number of seemingly innocuous social contexts women enter in and out of on a daily basis that include the potentially objectifying male gaze” (p. 19).

Gender ideology powerfully influences women’s likelihood to self-objectify. Benevolent sexism refers to “a set of interrelated attitudes toward women that are sexist in terms of viewing women stereotypically and in restricted roles but that are subjectively positive in feeling tone and also tend to elicit behaviors typically categorized as prosocial” (Glick & Fiske, 1996, p. 491). Exposure to benevolent sexist ideological assertions encourages women to assume stereotypical gender roles, specifically engaging in appearance-management behaviors in order to gain men’s approval (Calogero & Jost, 2011). Calogero and Jost (2011) suggested their findings “reveal the depth of the system-justifying effects of benevolent sexism” (p. 223). Most likely to respond to benevolent sexist content in ways that aligned with gender stereotypes, women with a high need for cognitive closure also appeared among those who engaged in the most self-surveillance and reported the greatest levels of body shame.

Colegero, Herbozo, and Thompson (2009) considered the effect of body-related comments on self-objectification. The more negatively women felt about body-related criticisms and the more positively women felt about body-related compliments, the greater the negative impact on body surveillance and body dissatisfaction. These effects proved most pronounced among women who report higher levels of self-objectification and when women received body-related compliments. Body surveillance partially mediated the relationship between body-related criticisms and compliments and body

dissatisfaction. Because of this relationship, body-related criticisms and compliments may play a significant role in fueling ritualistic self-objectification among women.

Fuller-Tyskiewicz et al. (2012) discovered two distinct groups—women who prioritized appearance-related commentary and women who prioritized self-perceived level of attractiveness—when they asked participants what triggered appearance self-consciousness. The looks-prioritizing group reported feeling most self-conscious when they felt they looked below average while the comment-prioritizing group reported feeling most self-conscious when they received negative body-related comments.

Processes of self-objectification and social comparison seem more similar than distinct (Lindner et al., 2012). Researchers have statistically connected the processes of self-objectification, objectification of others, and social comparison. Even more, the role of social comparison also likely propels the objectification of self and others. These findings prove individually and collectively alarming, given the triggers that promote and exacerbate the effects of self-objectification occur on a daily basis.

What Protects Women from the Effects of Fat Talk?

The devaluing effects of fat talk and its reinforcement of self-objectification in everyday life necessitate the consideration of how to instruct women to protect themselves against fat talk's painful consequences. Murnen and Smolak (2009) strongly suggested that empowered women prove less inclined to self-disparage. Feminist values also correlate with greater overall psychological well-being when compared with traditional values (Yakushko, 2007). Women with feminist values report a greater sense of autonomy, personal growth, and purpose in life (2007). Researchers have indicated a relationship between feminist attitudes and better body satisfaction (Murnen & Smolak,

2009). Feminist identity also relates to lower drive for thinness. Though feminist identity did not predict high body satisfaction rates, there exists a strong positive relationship between feminist identity and internalization of the media.

Murnen and Smolak (2009) proposed, “It is likely that feminism helps women critically evaluate and perhaps avoid harmful cultural messages. . . . Feminist women might be better able to recognize cultural pressures linked to thinness and resist them” (p. 193). Feminist identity may serve to protect women from the process of self-objectification. Murnen and Smolak (2009) promoted this assertion for three reasons: feminist identity encourages critical thought, collective action, and not allowing one’s life to become thoughtlessly directed by the surrounding societal culture.

More than anything, researchers stressed the importance of empowering female emerging adults for means other than their bodies (Macdonald Clarke, Murnen & Smolak, 2010). Other findings suggested that access to a strong friendship network may protect women from the overwhelmingly negative effects of fat talk (Fuller-Tyskiewicz et al., 2012). However, Murnen and Smolak (2009) argued that feminist orientation provides the strongest of researched protective measures. Research findings ultimately suggested that time spent with non-fat-talking peers could serve to reduce the amount of fat talk and consequently undermine its holistic negative influence on women’s lives (Engeln-Maddox et al., 2012).

Summary

The wealth of research on fat talk unveils the frequency of its occurrence among college-aged women. Even more unsettling, fat talk appears largely driven by feelings of social pressure. Among the influences, media plays a critical and often negative role in

the perpetuation of fat talk, as do every day interpersonal contexts. Unfortunately, the content remains most often highly negative. Despite many women believing that fat talk might serve positive purposes—i.e. coping with body shame—research demonstrated no such positive effects. Fat talk occasionally demonstrates neutral effects, but often its effects prove harmful. Lastly, essential to recognize, role fat talk plays a significant role in the objectification process.

The aforementioned literature pointed to the need for an understanding of how to change the culturally reinforced behavior of fat talk. Research on the impact of gender ideology demonstrated the most promise in accomplishing this weighty task. The current research pursued clarity of the connections among gender ideology, fat talk, and self-objectification. The present study sought to offer clarity to higher education practitioners in their work with college women, empowering them to critically consider their sense of self, independent from and not determined solely by societal standards.

Chapter 3

Methodology

The present study aimed to further explore the findings of previous researchers who noted the role of feminist identity as a protective barrier against body image issues, by evaluating the impact of feminist identity on fat talk, a behavior closely connected to body image issues. Using an explanatory correlational design, the current quantitative study evaluated the relationships among feminist identity development, self-objectification, and frequency of engagement in fat talk (Creswell, 2008).

Participants

The researcher emailed the survey to 493 female students. All participants live in all-female residence halls at a small, faith-based, liberal arts institution in the Midwest. The majority of students at the residential institution identify as traditional college students (ages 18-22).

Procedure

The researcher collaborated with the residence life department at the university to administer the survey. The researcher asked females living in all-female residence halls to participate in a voluntary, confidential online survey administered through email. The researcher also required all respondents to give consent before continuing the survey. The 64-item survey included the Fat Talk Scale, Feminist Identity Composite, Self-Objectification Questionnaire, and the Body Surveillance and Body Shame scales of the

Objectified Body Consciousness Scale. The researcher only collected demographic items collected about hall of residence and class status. The survey remained open for three weeks.

Measures

The negative body talk scale. The Negative Body Talk Scale (Engeln-Maddox et al., 2012) measures the frequency with which women make negative comments about their bodies during social interactions. Items measure both the frequency with which women use negative language in reference to their own bodies and the frequency with which women compare their bodies with the bodies of other women. The scale demonstrated strong convergent, discriminant and incremental validity. Additionally, the NBT scale demonstrated internal consistency ($\alpha = .97$) as well as test-retest reliability ($r = .74, p < .001$).

The feminist identity composite. The Feminist Identity Composite (Fischer et al., 2000) assesses feminist identity development in women as informed by Downing and Roush (1985). The researchers “conceptualized a development process of how women may acquire and maintain a positive feminist identity” (Fischer et al, 2000, p. 15). The instrument assesses women’s feminist identity development through the use of the five stages of feminist identity development by Downing and Roush (1985): passive acceptance, revelation, embeddedness-emanation, synthesis and active commitment. Passive acceptance refers to the “acceptance of traditional gender roles, the belief that traditional gender roles are advantageous and the belief that men are superior to women” (Fischer et al., 2000, p. 15). Revelation entails one or a number of crises that prompt a questioning of the beliefs held in the passive acceptance stage. This stage also consists of

“feelings of anger towards men and dualistic thinking” (p. 16). Embeddedness-emanation involves “feelings of connectedness with other women, cautious in interaction with men, and development of more relativistic perspective” (p. 16). Synthesis refers to the development of a positive feminist identity and the newly developed ability to “transcend gender roles and evaluate men on an individual basis” (p. 16). Active commitment entails “deep commitment to social change and the belief that men are equal to, but not the same as, women” (p. 16). The FIC (2000) demonstrated good internal consistency ($\alpha \geq .71$ for each of the subscales) as well as convergent, discriminant and factorial validity.

The self-objectification questionnaire. The Self-Objectification Questionnaire (Noll & Frederickson, 1998) measures the degree to which individuals consider their bodies in objectified terms compared to non-objectified terms—or how their bodies appear versus what their bodies can do. Noll and Frederickson (1998) stated, “Objectification theory suggests the consequences of self-objectification occur solely as a result of being concerned with physical appearance, regardless of individuals’ level of satisfaction with their physical appearance” (p. 629). Respondents receive twelve body attributes to consider, half competence-based and half appearance-based. Respondents rank the order of importance regarding what level of impact they have on self-concept. The Self-Objectification Questionnaire demonstrated good construct validity.

The objectified body consciousness scale. The Body Surveillance and Body Shame subscales of the Objectified Body Consciousness Scale (McKinley & Hyde, 1996) measure components of self-objectification. The researchers define body surveillance as follows:

Constant self-surveillance, seeing themselves as others see them, is necessary to ensure that women comply with cultural body standards and avoid negative judgments. Women's relationship to their bodies becomes that of object and external onlooker . . . they exist as objects to themselves. (p. 183)

The researchers define body shame as what occurs the following seems true:

Cultural standards for the feminine body are virtually impossible to realize fully, women who internalize them, connecting achievement of those standards with their identity, may feel shame when they do not measure up. This shame is not simply negative feelings about the body, but about the self. (p. 183)

Both subscales demonstrated moderate to high internal consistence ($\alpha = .89; .75$ respectively). The Body Surveillance and Body Shame subscales also demonstrated excellent test-retest reliability and convergent, discriminant, and construct validity.

Chapter 4

Results

Demographics

Of the 493 female students contacted, 113 students completed the survey (23% response rate). However, 16 participants completed less than 75% of the survey, and, consequently, the researcher eliminated those partial responses from the sample. The researcher used the remaining 97 participants' responses for the analysis. The sample included 27 freshman (27.8%), 37 sophomores (38.1%), 29 juniors (29.9%), and 4 seniors (4.1%) (Table 1). All participants in the study live in all-female residence halls.

Table 1

Education Level Frequency Distribution

<u>Education Level</u>	<u>Frequency</u>	<u>Percent</u>	<u>Cumulative Percent</u>
Freshman	27	27.8	27.8
Sophomore	37	38.1	66.0
Junior	29	29.9	95.9
Senior	4	4.1	100.0
	97		

Descriptive Statistics

Table 2 reports mean and standard deviation for each of the variables in the study. The Feminist Identity Composite includes five subscales with means determined by a set

of items to which participants responded from 1 (disagreement) to 5 (agreement). The Negative Body Talk Scale includes two subscales with means determined by a set of items to which participants responded from 1 (disagreement) to 7 (agreement). Trait Self-Objectification measures the degree to which participants value appearance-based attributes over competence-based attributes related to the body. Scores range from -25 to 25 with a higher score indicating higher trait self-objectification. The researcher included two subscales from the Objectified Body Consciousness Scale—Body Shame and Body Surveillance—determining each subscale’s mean by a set of items to which participants responded from 1 (disagreement) to 7 (agreement).

Table 2

Descriptive Statistics for FIC, NBTS, Trait Self-Objectification, and OBCS Subscales

<u>Variable</u>	<u>Min</u>	<u>Max</u>	<u>M</u>	<u>SD</u>
Feminist Identity Composite				
Passive Acceptance	1.29	4.86	3.04	0.75
Revelation	1.00	4.50	2.57	0.78
Embeddedness-Emanation	1.00	5.00	3.02	0.92
Synthesis	3.00	5.00	4.01	0.46
Active Commitment	1.29	5.00	3.11	0.68
Negative Body Talk Scale				
Body Concerns	1.00	6.29	2.87	1.23
Body Comparisons	1.00	6.33	2.81	1.14
NBTS Total	1.00	6.15	2.84	1.10
Trait Self-Objectification	-25.00	25.00	1.15	13.78
Objectified Body Consciousness Scale				
Body Shame	1.00	6.88	4.06	1.34
Body Surveillance	2.13	7.00	5.11	1.09

Bivariate Analysis

In order to explore the research questions—What is the relationship between feminist identity development and frequency of engagement in fat talk? What is the relationship between feminist identity development and self-objectification?—the researcher conducted bivariate correlations (Table 3).

The results proved inconsistent with predicted findings. There emerged no significant relationships between any of the five stages of feminist identity and the two subscales of the Negative Body Talk Scale, Body Concerns and Body Comparison, which measured frequency of engagement in fat talk, nor did a significant relationship emerge between any of the five stages of feminist identity and the overall scale. Additionally, the researcher found no significant relationships between any of the five stages of feminist identity and trait self-objectification or the two subscales of the Objectified Body Consciousness Scale.

The researcher found significant relationships only between subscales of the same scale ($r = -0.56-0.64, p < 0.01$) and between the measures of frequency of engagement in fat talk and measures of self-objectification ($r = 0.34-0.94, p < 0.01$).

Table 3

Intercorrelations for Major Variables

	<u>1a</u>	<u>1b</u>	<u>1c</u>	<u>1d</u>	<u>1e</u>	<u>2a</u>	<u>2b</u>	<u>2c</u>	<u>3</u>	<u>4a</u>	<u>4b</u>
<i>Feminist Identity Composite</i>											
Passive Acceptance											
Revelation	-0.39*										
Embeddedness- Emanation	-0.42*	0.48*									
Synthesis	-0.45*	0.25	0.35*								
Active Commitment	-0.56*	0.57*	0.64*	0.56*							
<i>Negative Body Talk Scale</i>											
Body Concerns	0.11	0.07	0.01	0.11	0.15						
Body Comparison	0.11	0.04	0.10	0.02	0.11	0.70*					
NBTS Total	0.12	0.06	0.05	0.08	0.14	0.94*	0.90*				
<i>Trait Self-Objectification</i>	0.07	0.11	-0.05	-0.13	-0.05	0.34*	0.34*	0.37*			
<i>Objectified Body Consciousness Scale</i>											
Body Shame	0.16	0.17	0.00	-0.10	-0.02	0.35*	0.35*	0.38*	0.36*		
Body Surveillance	0.05	0.08	0.00	0.00	0.03	0.37*	0.40*	0.41*	0.45*	0.54*	

Note. $n = 97$ *.Correlation is significant at the 0.01 level

Feminist Identity Development

In order to gain understanding of participants' stage of feminist identity, the researcher determined the current stage of development for each participant (Saunders &

Kashubeck-West, 2006) by identifying for each participant the subscale with the highest mean. The researcher did not assign a current stage of feminist identity to participants with the exact same mean in two or more subscales. Instead, the researcher identified these participants in the group labeled “Unable to Determine Stage.” Table 4 reports frequency of current stage of development according to the Feminist Identity Composite.

According to this method of determining current stage of feminist identity development, 13 (13.4%) participants appeared in the Passive Acceptance stage, one (1%) in the Revelation stage, 11 (11.3%) in the Embeddedness-Emanation stage, 64 (66%) in the Synthesis stage, two (2.1%) in the Active Commitment stage, and six (6.2%) categorized as “Unable to Determine Stage”.

Table 4

FIC Stage Frequency Distribution

FIC Stage	Frequency	Percent	Cumulative Percent
Passive Acceptance	13	13.4	13.4
Revelation	1	1.0	14.4
Embeddedness-Emanation	11	11.3	25.8
Synthesis	64	66.0	91.8
Active Commitment	2	2.1	93.8
Unable to Determine Stage	6	6.2	100.0
	97		

When the majority of participants reported highest means in the Synthesis stage, the researcher re-categorized these participants according to their second highest mean for exploratory purposes. This practice also found support in previous researchers’ skepticism of the relevance of the Synthesis subscale (Saunders & Kashubeck-West, 2006). The researcher determined the re-categorization by first excluding means for the Synthesis subscale for all participants. The researcher then re-categorized each

participant according to the subscale with the highest mean. Again, the researcher categorized those with two or more subscales with the exact same mean as “Unable to Determine Stage.” Table 5 reports frequency of current stage of development according to the re-categorization.

According to the re-categorization, 36 (37.1%) appeared in the Passive Acceptance stage, four (4.1%) \ in the Revelation stage, 26 (26.8%) in the Embeddedness-Emanation stage, 22 (22.7%) in the Active Commitment stage, and nine (9.3%) categorized as “Unable to Determine Stage.”

Table 5

FIC Stage Re-categorization Frequency Distribution

	Frequency	Percent	Cumulative Percent
Passive Acceptance	36	37.1	37.1
Revelation	4	4.1	41.2
Embeddedness-Emanation	26	26.8	68.0
Active Commitment	22	22.7	90.7
Unable to Determine Stage	9	9.3	100.0
	97		

Note. Stage re-categorized after excluding the Synthesis subscale.

Univariate Analysis

After determining participants’ current stage of feminist identity development for the second time excluding the Synthesis subscale, the researcher ran ANOVAS with the remaining four FIC subscales and subscales of the Negative Body Talk Scale, Trait Self-Objectification, and subscales of the Objectified Body Consciousness Scale to determine if a difference of means existed according to stage of feminist identity development.

There emerged no significant differences between any of the subscales and the Feminist Identity Composite stages. Table 6 reports a summary of the findings.

Table 6

One-Way ANOVA for Effects of FIC on NBTS, Trait Self-Objectification, and OBCS

FIC Stage	Subscale	df	F	p
	NBTS Body Concerns	1	.977	.326
	NBTS Body Comparison	1	.183	.669
	NBTS Total	1	.643	.425
	Trait SO	1	.659	.419
	OBCS Body Shame	1	.177	.675
	OBCS Body Surveillance	1	.101	.751

Conclusion

In contrast to the hypothesis, the analysis did not indicate a relationship between feminist identity development and frequency of engagement in fat talk. The analysis also did not indicate a relationship between feminist identity development and self-objectification.

Chapter 5

Discussion

Fat Talk and Self-Objectification

The devastating effects of fat talk and self-objectification in general necessitate an understanding of what might keep women from self-objectifying. Interestingly, means for frequency of fat talk emerged lower than anticipated. On one hand, this finding appears positive. However, fat talk remains a subtle component of everyday conversation among women (Ousley et al., 2008; Salk & Engeln-Maddox, 2011). Young women possibly live unaware of the frequency with which they use fat talk, and as a result, the means for the Negative Body Talk Scale emerged more modest than expected. As another likely possibility, women in the sample more likely used self-objectifying thoughts than fat talk.

Despite the lack of relationship between fat talk, self-objectification and the Feminist Identity Composite, fat talk strongly related to self-objectification as measured by both the SOQ and the OBCS. This finding proved consistent with other studies that found fat talk plays an instrumental role with self-objectification (Arroyo & Harwood, 2012; Eisenberg et al., 2011). The finding also supported the work of Ousley et al. (2008), which negated fat talk as a means of coping with self-objectification. Both measures of self-objectification strongly related to each other. This finding supported the

connection between body shame and the process of self-objectification (Gapinski et al., 2003; Tiggemann & Boundy, 2008).

Feminist Identity Development

None of the Feminist Identity Composite subscales correlated with measures of fat talk or self-objectification. Consistent with other studies, scores for the synthesis subscale emerged very high (Erchull et al., 2009; Liss & Erchull, 2010; Szymanski, 2004; Zucker, 2004). Interestingly, literature indicated high synthesis scores regardless of feminist or non-feminist self-identification and age. Moradi, Subich, and Phillips (2002) and Liss and Erchull (2010) presented the synthesis subscale as unhelpful in identifying between self-identified feminists and non-feminists.

Synthesis had the lowest reliability of all subscales of the Feminist Identity Composite (Moradi, et al., 2002). After modifications of the instrument, the items measuring the subscale no longer captured the essence of the synthesis stage of feminist identity development conceptualized by Downing and Roush (1985). Erchull et al. (2009) noted,

All of the synthesis items on the FIC were drawn from the FIS and represent the idea that a woman feels as though she is strong, independent, proud and competent and that she has integrated her sense of self as a woman with her sense of self as a person. These ideologies could well be endorsed by many women, regardless of whether they identify as feminists or whether they have experienced prior stages (p. 834).

Though findings related to the synthesis subscale remain difficult to understand, women in this sample connected with the ideas captured by this subscale.

Erchull et al. (2009) argued that enough evidence does not exist to challenge the assertion of feminist identity development as a linear developmental model in light of the finding that non-adjacent stages had stronger correlations than adjacent stages. Still, as demonstrated by the present study, the finding that a large percentage of the sample had high scores in more than one subscale of the Feminist Identity Composite made it impossible to determine a single stage of current development for participants.

Also worth noting, Downing and Roush (1985) created the developmental model during the peak of second wave feminism. Researchers argued the model may not prove relevant in the same way for young women today and that the Synthesis stage, though originally identified as the penultimate stage, may prove a much earlier stage in the feminist identity development model (Erchull et al., 2009; Liss & Erchull, 2010; Marine & Lewis, 2014).

Limitations

The most significant limitation of the current study related to the use of the Feminist Identity Composite. Though generally very strong, the instrument may have proved less than appropriate given the sample population: students at a small, faith-based Midwestern institution. In addition, mounting evidence highlights the FIC as no longer relevant for measuring feminist identity development among young women today. Lastly, determining a single stage of feminist identity development for each participant proved difficult, creating further challenges in deciphering and interpreting results.

Unfortunately, little literature exists on the relationship between feminist identity and measures of religiosity and spirituality. Understand this relationship would prove helpful in order to better understand the findings of the current study as well as determine

the most appropriate measure of feminist identity. Further, the researcher did not ask study participants to self-identify as feminist or non-feminist. Understanding how the FIC data relates to self-identification would have provided helpful context as well.

The difficulty of measuring feminist identity development complicated making assertions in either direction regarding how the development of a feminist identity effects self-objectification or frequency of engagement in fat talk. The majority of participants identified as underclassmen, with very few participants from the senior class. Because a developmental model informs the Feminist Identity Composite, the lack of equal representation across all educational levels needs noting. Lastly, the sample remained relatively small, with all participants from the same predominantly White institution.

Implications for Practice

Consistent with other studies, the mean for the Synthesis subscale of the Feminist Identity Composite emerged the highest overall of the five subscales (Erchull et al., 2009; Liss & Erchull, 2010; Szymanski, 2004; Zucker, 2004). Despite women reporting high levels of agreement with the items that measure this subscale (e.g. “I enjoy the pride and self-assurance that comes from being a strong female”; “I am proud to be a competent woman”), this finding did not relate to lower means for measures of self-objectification. This result ought to cause practitioners to reconsider whether or not they adequately empower women for means other than their bodies. This finding can serve as a reminder to practitioners that agreement with statements about feeling a sense of strength and competence does not necessarily indicate women as less likely to self-objectify.

Given the strong relationship between fat talk and self-objectification, practitioners must not dismiss this type of social banter by assuming it does no harm.

Many women remain unaware of the frequency with which they engage in fat talk, and plenty of compelling evidence indicates its negative effects. Self-objectification poses a significant threat to identity development, and peers perpetuate self-objectification when they engage in fat talk. Practitioners have the opportunity to facilitate the development of awareness about the use of fat talk as well as its numerous negative implications.

Practitioners should consider addressing fat talk and self-objectifications in ways that can yield behavioral change, offering women a more positive, empowering alternative.

Further Research

Given the literature that identified how feminist ideas can provide a positive lens through which to deconstruct messages and images that objectify women (MacDonald Clarke et al., 2010; Murnen & Smolak, 2009; Yakushko, 2007), a more adequate measure of feminist identity development could greatly benefit further consideration of what effects the development of a feminist identity may have. Existing literature suggested that the development of a feminist identity looks much different now and demonstrated that this identity development carries positive implications for women's ways of thinking about and behaving toward oneself. To develop a more accurate understanding demands a return to a qualitative approach to explore further how young women today develop a strong feminist identity, as well as how the development of a feminist identity affects other aspects of identity development. A revised developmental model must precede the creation of a new instrument.

The weak reliability of the Synthesis subscale renders further exploration necessary as to why women in this generation seem to score particularly high on this subscale of the FIC. Even more necessary, future studies should explore why the

subscale had little to no effect on measures of self-objectification and frequency of engagement in fat talk.

There remains a need to study feminist identity as it relates to religiosity and spirituality. Little literature has addressed the aforementioned constructs and the ways in which they relate to one another, despite the assumptions and anecdotal evidence that would suggest a connection between particular religious beliefs and hesitancy toward or rejection of feminist ideologies.

Lastly, higher education desperately needs further research of other means of counteracting the messages and influences that promote self-objectification. Though essential to parse out feminist identity development in order to understand whether or not it may positively impact the propensity to self-objectify, exploring and testing other means of disrupting the cycle of self-objectification proves just as critical.

Conclusion

There emerged no observed relationship between the Feminist Identity Composite and measures of self-objectification and frequency of engagement in fat talk, though measures of self-objectification and fat talk strongly correlated. Unexpectedly, means for the Synthesis subscale emerged quite high but had no significant connection to measures of fat talk and self-objectification. Given the implications of fat talk and more broadly, self-objectification, there remains much more to understand about how disrupt the cycle of self-objectification. Higher education practitioners must not take lightly the everyday ritual of fat talk and must consider what alternatives to offer female students in order to advocate for their identity development and holistic well-being.

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Appendix A

Negative Body Talk Scale

Engeln-Maddox, R., Salk, R. H., & Miller, S. A. (2012). Assessing women's negative commentary on their own bodies a psychometric investigation of the Negative Body Talk Scale. *Psychology of Women Quarterly*, 36, 162–178.
doi:10.1177/0361684312441593

When talking with your friends, how often do you say things like . . .

Remember, we're not interested in how often you have thoughts like this. Instead, we're interested in how often you say things like this out loud when you're with your friends. Even if you wouldn't use these exact words, we're interested in whether you say similar things (that mean the same thing) when you're with your friends. When talking with your friends, how often do you say things like . . .

1. I wish my body looked like hers.
2. I need to go on a diet.
3. I feel fat.
4. She has a perfect stomach.
5. This outfit makes me look fat.
6. Why can't my body look like hers?
7. She has a perfect body.
8. I need to start watching what I eat.
9. She's in such good shape.
10. I wish I was thinner.
11. I wish my abs looked like hers.
12. I think I'm getting fat.
13. You never have to worry about gaining weight.

Appendix B

The Feminist Identity Composite

Fischer, A. R., Tokar, D. M., Mergl, M. M., Good, G. E., Hill, M. S., & Blum, S. A. (2000). Assessing women's feminist identity development: Studies of convergent, discriminant, and structural validity. *Psychology of Women Quarterly, 24*, 15-29.

The statements listed below describe attitudes you may have toward yourself as a woman. There are no right or wrong answers. Please express your feelings by indicating how much you agree or disagree with each statement.

1-Strongly Disagree 2-Disagree 3-Neutral or Undecided 4-Agree 5-Strongly Agree

1. I like being a traditional female.
2. My female friends are like me in that we are all angry at men and the ways we have been treated as women.
3. I am very interested in women artists.
4. I am very interested in women's studies.
5. I never realized until recently that I have experienced oppression and discrimination as a woman in this society.
6. I feel like I've been duped into believing society's perceptions of me as a woman.
7. I feel angry when I think about the way I am treated by men and boys.
8. Men receive many advantages in society and because of this are against equality for women.
9. Gradually, I am beginning to see just how sexist society really is.
10. Regretfully, I can see ways in which I have perpetuated sexist attitudes in the past.
11. I am very interested in women musicians.
12. I am very interested in women writers.
13. I enjoy the pride and self-assurance that comes from being a strong female.
14. I choose my "causes" carefully to work for greater equality for all people.
15. I owe it not only to women but to all people to work for greater opportunity and equality for all.
16. In my interactions with men, I am always looking for ways I may be discriminated against because I am female.
17. As I have grown in my beliefs I have realized that it is more important to value women as individuals than as members of a larger group of women.
18. I am proud to be a competent woman.
19. I feel like I have blended my female attributes with my unique personal qualities.
20. I have incorporated what is female and feminine into my own unique personality.

21. 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.
22. I care very deeply about men and women having equal opportunities in all respects.
23. 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.
24. I think that men and women had it better in the 1950s when married women were housewives and their husbands supported them.
25. It is very satisfying to me to be able to use my talents and skills in my work in the women's movement.
26. 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.
27. 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.
28. On some level, my motivation for almost every activity I engage in is my desire for an egalitarian world.
29. I don't see much point in questioning the general expectation that men should be masculine and women should be feminine.
30. I feel that I am a very powerful and effective spokesperson for the women's issues I am concerned with right now.
31. I think that most women will feel most fulfilled by being a wife and a mother.
32. I want to work to improve women's status.
33. I am very committed to a cause that I believe contributes to a more fair and just world for all people.

Appendix C

The Self-Objectification Questionnaire

Noll, S. M., & Fredrickson, B. L. (1998). A mediational model linking self-objectification, body shame, and disordered eating. *Psychology of Women Quarterly*, 22, 623–636. doi:10.1111/j.1471-6402.1998.tb00181.x

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 your 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 physical 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!
When considering your physical self-concept . . .

9 = greatest impact

8 = next greatest impact

1 = next to least impact

0 = least impact

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)? _____

In administering the measure, the title is not included. Scores are obtained by separately summing the ranks for appearance-based items (3, 5, 6, 8 and 10) and competence-based items (1, 2, 4, 7 and 9), and then subtracting the sum of competence ranks from the sum of appearance ranks. Scores may range from -25 to 25, with higher scores indicating a greater emphasis on appearance, interpreted as higher trait self-objectification.

Appendix D

Objectified Body Consciousness Scale-Body Shame Subscale

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

For each item, please circle the answer that best characterizes your attitudes or behaviors.

1-Strongly Disagree 2-Moderately Disagree 3-Slightly Disagree 4-Neutral 5-Slightly Agree 6-Moderately Agree 7-Strongly Agree

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 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 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'm an okay person.
8. When I'm not the size I think I should be, I feel ashamed.

Appendix E

Objectified Body Consciousness Scale-Body Surveillance Subscale

For each item, please circle the answer that best characterizes your attitudes or behaviors.

1-Strongly Disagree 2-Moderately Disagree 3-Slightly Disagree 4-Neutral 5-Slightly Agree 6-Moderately Agree 7-Strongly Agree

1. I rarely think about how I look.
2. I think it is more important that my clothes are comfortable than whether they look good on me.
3. I think more about how my body feels than how my body looks.
4. I rarely compare how I look with how other people look.
5. During the day, I think about how I look many times.
6. I often worry about whether the clothes I am wearing make me look good.
7. I rarely worry about how I look to other people.
8. I am more concerned with what my body can do than how it look.

Appendix F

Informed Consent

TAYLOR UNIVERSITY INFORMED CONSENT

Feminist Identity Development and “Fat Talk”

You are invited to participate in a research study of patterns of self-objectification, namely “fat talk”. You were selected as a possible subject because you are a resident in an all-female residence hall. We ask that you read this form and ask any questions you may have before agreeing to be in the study.

The study is being conducted by Hayley Meredith, a graduate student in the Masters in Higher Education and Student Development.

STUDY PURPOSE

The purpose of this study is to better understand how an individual’s gender role attitudes are related to patterns of self-objectification, namely “fat talk”.

NUMBER OF PEOPLE TAKING PART IN THE STUDY

If you agree to participate, you will be one of approximately one hundred subjects who will be participating in this research.

PROCEDURES FOR THE STUDY

If you agree to be in the study, you will do the following things:

Complete a survey sent out through email. The survey will take approximately twenty-five minutes. The study will conclude after the survey has been live for approximately two weeks.

RISKS OF TAKING PART IN THE STUDY

The risks of completing the survey are being uncomfortable answering the questions.

While completing the survey, you can tell the researcher that you feel uncomfortable or do not care to answer a particular question.

Participants that experience emotional distress in response to participation in the study are asked to pursue counseling services through the Taylor University counseling center.

BENEFITS OF TAKING PART IN THE STUDY

The benefits to participation that are reasonable to expect are the opportunity to contribute to identifying ways of thinking that may serve to counteract the effects and reduce the occurrence of fat talk, and ultimately help provide understanding of how processes of self-objectification can be thwarted.

ALTERNATIVES TO TAKING PART IN THE STUDY

Instead of being in the study, you have these options: You may choose not to participate.

CONFIDENTIALITY

Efforts will be made to keep your personal information confidential. We cannot guarantee absolute confidentiality. Your personal information may be disclosed if required by law. Your identity will be held in confidence in reports in which the study may be published and databases in which results may be stored.

Organizations that may inspect and/or copy your research records for quality assurance and data analysis include groups such as the study investigator and his/her research associates, the Taylor University Institutional Review Board or its designees, the study sponsor, Scott Moeschberger, and (as allowed by law) state or federal agencies, specifically the Office for Human Research Protections (OHRP) etc., who may need to access your research records.

PAYMENT

You will not receive payment for taking part in this study.

COMPENSATION FOR INJURY

In the event of physical injury resulting from your participation in this research, necessary medical treatment will be provided to you and billed as part of your medical expenses. Costs not covered by your health care insurer will be your responsibility. Also, it is your responsibility to determine the extent of your health care coverage. There is no program in place for other monetary compensation for such injuries. If you are participating in research which is not conducted at a medical facility, you will be responsible for seeking medical care and for the expenses associated with any care received.

CONTACTS FOR QUESTIONS OR PROBLEMS

For questions about the study or a research-related injury, contact the researcher Hayley Meredith at (814) 659-5732.

Inquiries regarding the nature of the research, your rights as a subject, or any other aspect of the research as it relates to your participation as a subject can be directed to Taylor University's Institutional Review Board at IRB@taylor.edu or the Chair of the IRB, Susan Gavin at (765) 998-5188 or ssgavin@taylor.edu.

VOLUNTARY NATURE OF STUDY

Taking part in this study is voluntary. You may choose not to take part or may leave the study at any time. Leaving the study will not result in any penalty or loss of benefits to which you are entitled. Your decision whether or not to participate in this study will not affect your current or future relations with Taylor University.

SUBJECT'S CONSENT

In consideration of all of the above, by clicking "yes" I give my consent to participate in this research study.

By clicking "yes", I attest I am at least 18 years of age.

I will be given a copy of this informed consent document to keep for my records. I agree to take part in this study.

I give my consent to participate in this research study and attest that I am at least 18 years of age.

A. Yes

B. No

*If no is selected, participants will be directed to a disqualification page for the Survey Monkey survey

