

SEXUAL OBJECTIFICATION AND GENDER ROLE CONFLICT AS PREDICTORS  
OF DRIVE FOR MUSCULARITY: A TEST AND EXTENSION  
OF OBJECTIFICATION THEORY

A DISSERTATION IN

Counseling Psychology

Presented to the Faculty of the University  
of Missouri-Kansas City in partial fulfillment of  
the requirements for the degree

DOCTOR OF PHILOSOPHY

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Kansas City, Missouri  
2015

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ABSTRACT

Objectification theory (Fredrickson & Roberts, 1997) is increasingly used to explain the body image-related experiences of men, as research indicates that men are at heightened risk for body image concerns because of sociocultural messages regarding appearance of the male body. However, objectification theory researchers have previously discussed the experiences of men without modifying the theory to consider factors unique to why men are also at risk for sexual objectification and the internalization process that ensues. Gender role conflict is introduced in the present study to better explain the objectification experiences of men. Results of a path analysis were that gender role conflict and sexual objectification experiences were predictive of drive for muscularity through a series of direct and indirect relationships including internalization of cultural standards of appearance, self-objectification, body surveillance, and body shame. However, results also suggested that the internalization process that men experience in the context of sexual objectification is

different than the process experience by women. It also appeared that the sexual objectification men experience promotes a drive for muscularity, which provides men with a sense of masculine agency.

## APPROVAL PAGE

The faculty listed below, appointed by the Dean of the School of Education have examined a dissertation titled “Sexual Objectification and Gender Role Conflict as Predictors of Drive for Muscularity: A Test and Extension of Objectification Theory,” presented by Christopher M. Davids, candidate for the Doctor of Philosophy, and certify that in their opinion it is worthy of acceptance.

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## CONTENTS

ABSTRACT .....	iii
ILLUSTRATIONS .....	ix
TABLES .....	x
ABBREVIATIONS .....	xi
ACKNOWLEDGMENTS .....	xiii
Chapter	
1. INTRODUCTION AND REVIEW OF THE LITERATURE.....	1
Objectification Theory .....	2
Self-Objectification and Body Image Considerations for Women.....	4
Objectification Theory and Application to Men’s Body Experiences.....	8
Objectification Theory and the Moderating Role of Sexual Orientation.....	9
Objectification Theory and Men as a Group.....	12
Modifying Objectification for Men .....	17
Gender Role Conflict Theory.....	18
Masculinity, Objectification, and Body Image Concerns with Men .....	21
The Present Study .....	27
2. METHODOLOGY .....	30
Participants.....	30
Procedure .....	31
Instrumentation .....	32
Gender Role Conflict Scale .....	32
Interpersonal Sexual Objectification Scale.....	34

Male Assessment of Self-Objectification .....	35
Sociocultural Attitudes Towards Appearance Questionnaire-Internalization .	37
Objectified Body Consciousness Scale-Body Shame.....	38
Objectified Body Consciousness Scale-Body Surveillance.....	37
Drive for Muscularity .....	39
Demographic Questionnaire .....	39
3. DATA ANALYSIS.....	41
Missing Data .....	41
Data Screening .....	42
Factor Structures .....	42
Gender Role Conflict Scale .....	44
Interpersonal Sexual Objectification Scale.....	44
Male Assessment of Self-Objectification .....	44
Sociocultural Attitudes Towards Appearance Questionnaire-Internalization .	45
Objectified Body Consciousness Scale-Body Shame.....	45
Objectified Body Consciousness Scale-Body Surveillance.....	45
Drive for Muscularity .....	47
Preliminary Analyses .....	48
Path Analytic Model .....	49
Model Modification .....	49
Test of Indirect Effects.....	52
4. DISCUSSION .....	54
Predictors of Internalization of Cultural Standards of Appearance .....	54

Predictors of Self-Objectification .....	55
Predictors of Body Surveillance .....	57
Predictors of Body Shame .....	60
Predictors of Drive for Muscularity .....	63
Clinical Considerations .....	68
Strengths, Limitations, and Future Directions .....	70
 Appendix	
A. Gender Role Conflict Scale .....	84
B. Permission for Use of Gender Role Conflict Scale .....	87
C. Interpersonal Sexual Objectification Scale .....	88
D. Male Assessment of Self-Objectification .....	91
E. Sociocultural Attitudes Towards Appearance Questionnaire-Internalization Subscale .....	93
F. Objectified Bodies Consciousness Scale .....	94
G. Drive for Muscularity Scale .....	96
H. Demographic Questionnaire .....	97
REFERENCE LIST .....	99
VITA .....	105

## ILLUSTRATIONS

Figure	Page
1. Conceptual Model of Proposed Direct and Indirect Relationships.....	81
2. Final Model of Direct and Indirect Effects.....	82
3. Example Diagram of Test of Indirect Effect.....	83

## TABLES

Table	Page
1. Means, Standard Deviations, Correlations, Covariances, Variances, Minimum Scores, Maximum Scores, and 95% Mean Confidence Intervals of all Variables .....	74
2. Structural Characteristics of Instruments.....	75
3. Objectified Body Consciousness Scale-Body Surveillance Item Stems and Coefficients .....	76
4. Objectified Body Consciousness Scale-Body Shame Item Stems and Coefficients .....	77
5. Multivariate Factors Test Between Subject Effects for Heterosexual vs. Non-Heterosexual .....	78
6. Parameter Estimates and Standard Errors for the Final Model.....	79
7. Bootstrap Analysis of Magnitude and Significance of Indirect Effects of Final Model .....	80

## ABBREVIATIONS

ANOVA	Analysis of Variance
BMI	Body Mass Index
CBWFR	Conflict Between Work and Family Relations
CFI	Comparative Fit Index
CI	Confidence Interval
DMS	Drive for Muscularity Scale
DV	Dependent Variable
EM	Expectation Maximization
FtM	Female to Male
GRCS	Gender Role Conflict Scale
ISOS	Interpersonal Sexual Objectification Scale
ISOS-BE	Interpersonal Sexual Objectification Scale-Body Evaluation
ISOS-BG	Interpersonal Sexual Objectification Scale-Body Gaze
ISOS-UESA	Interpersonal Sexual Objectification Scale-Unwanted Explicit Sexual Advances
IV	Independent Variable
MANCOVA	Multivariate Analysis of Covariance
MASO	Male Assessment of Self-Objectification
MAR	Missing at Random
MCAR	Missing Completely at Random
MTurk	Mechanical Turk
OBCS-Body Shame	Objectified Body Consciousness Scale-Body Shame

OBCS- Body Surveillance	Objectified Body Consciousness Scale-Body Surveillance
RABBM	Restricted Affectionate Behavior Between Men
RE	Restricted Emotionality
RMSEA	Root Mean Square Error of Approximation
SATAQ-I	Sociocultural Attitudes Towards Appearance Questionnaire- Internalization
SES	Socioeconomic Status
SPC	Success/Power/Competition
SRMR	Standardized Root Mean Square
SSIRB	Social Sciences Institutional Review Board

## ACKNOWLEDGMENTS

As a developing counseling psychologist, I have discovered that my conceptual understanding of human behavior is rooted in a belief that interpersonal relationships are integral to well-being. In this way, my ability to successfully complete this project was facilitated by the support of many people in my life.

I would like to thank Dr. Laurel Watson for her commitment to mentoring me as her first doctoral advisee, pushing me to develop a dissertation of rigor and conceptual sophistication, taking time to provide meaningful feedback of my work, and for affirming me as a person first, and then as a professional. I also appreciate the members of my dissertation committee for their guidance throughout this process, including Dr. Johanna Nilsson, Dr. Nancy Murdock, Dr. Kimberly Langrehr, and Dr. Jacob Marszalek. In addition, I would like to thank Dr. Melinda Green of Cornell College for her mentorship—if it had not been for this, I would not be where I am today.

Thank you to my doctoral cohort for providing support throughout our training, and I especially value the friendship and support of Morgan “Colleague” Grotewiel, my partner in crime in the program. I also wish to express gratitude to Tracey Dashjian, Denisse Tiznado, and Sofie Champassak, with whom I was able to celebrate life while managing the ups and downs of graduate school. I also gained greatly from the support of lifelong friends, including Bailee Beauman and Meghan Roche. Finally, I am grateful for the support of my parents, Jennifer Caracciolo and Kenneth Davids, who instilled the values I carry and made it possible for me to have the privilege of higher education attainment.

Finally, thank you to the University of Missouri-Kansas City Chancellor’s Fellow program for providing funding that allowed me to focus my time on this project.

## CHAPTER 1

### INTRODUCTION AND REVIEW OF THE LITERATURE

The application of objectification theory with men is on the rise, with evidence suggesting that male body image concerns are increasingly prevalent (e.g., Michaels, Parent, & Moradi, 2013; Parent & Moradi, 2011; Schwartz, Grammas, Sutherland, Siffert, & Bush-King, 2010). The most recent Psychology Today body image poll (Garner, 1997) concluded that 43% of the men in the sample of 548 men reported dissatisfaction with their overall appearance. Additional researchers have discussed the social pressure men experience to obtain a muscular appearance (Cafri & Thompson, 2004; Leit, Harrison, & Gray, 2001), which could be caused by an increasing amount of media representations of the muscular male body (Lanzieri & Cook 2013). However, objectification theory was originally written to explain how common psychological concerns experienced among women are rooted in gendered oppression that is imposed by men and patriarchal social structures (Fredrickson & Roberts, 1997); thus, tenets of objectification theory need to be extended and modified to include men's unique social experiences.

Several studies have successfully extended individual components of objectification theory to samples of men, which suggests that the mechanisms of the objectification process (i.e., self-objectification, internalization of cultural messages, and the experience of body shame and body surveillance) appear to operate for both men and women, despite having conceptually dissimilar etiologies. In this study, objectification theory is extended to men by exploring the unique variables that are related to their experiences of sexual objectification. It is proposed that gender role conflict, a form of psychological distress caused by traditional gender role socialization (O'Neil, Good, & Holmes, 1995), is a missing link that explains the

unique process that makes men susceptible to negative consequences of sexual objectification.

### **Objectification Theory**

Objectification occurs when an individual is treated as a thing, denied her or his humanity, and treated as though she or he is an object without feelings (Nussbaum, 1995). Because women's value has traditionally been associated with their physical appearance, women are routinely reduced to their body parts and sexual functioning (i.e., sexual objectification). Objectification theory (Fredrickson & Roberts, 1997) was developed on the premise that the female body is constantly at risk of being evaluated and objectified by men. Borrowing from feminist theorists Berger (1972) and Mulvey (1975), the authors characterize the behaviors of men that evaluate the appearance of women as the *male gaze*, and they describe three circumstances in which objectification occurs. The first is social encounters whereby women are in the physical presence of men and evaluated; an example of this would be a woman walking down the street who is ogled by a man who passes. Second, objectification also occurs in visual media when men evaluate women's appearance. In this scenario, although the individual who views this media is not being directly objectified, she still receives the message that the value of the female body is for the pleasure of men. The third circumstance occurs through visual media that affords men the opportunity to visually inspect the body, or specific body parts, of a woman; an example of this would be the cover of a magazine depicting a woman in a bikini swimsuit. In this review, the word "objectification" is used to describe external events in which one is sexually objectified.

Given that women are routinely and persistently sexually objectified, they may begin to internalize an observer's perspective and view their bodies as sexual objects. This internalized observer's perspective is called self-objectification; whereas "sexual objectification" is an external process whereby one is objectified according to his or her body and/or sexual functioning, the phrase "self-objectification" is used to specifically describe the internalization of sexually objectifying experiences which results in the belief that one's worth is based on his or her physical appearance. In addition, self-objectification occurs in two contexts: trait and state self-objectification. Trait self-objectification implies one's general degree of self-objectification and is less variable over time whereas state self-objectification which is generally more susceptible to immediate change based on objectifying circumstances. Self-objectification is related to several negative psychological processes. The first is anxiety (specifically, appearance anxiety and safety anxiety), and is described as a negative emotion that is caused by anticipated threat or danger to the self. Appearance anxiety manifests through heightened body monitoring, body checking behaviors, and attempts to conceal body parts of concern. Safety anxiety is expressed in several ways, including increased scanning and vigilance of the environment, and increased sympathetic nervous system activity (Fredrickson & Roberts, 1997).

Another harmful psychological process is a decreased peak motivational state, commonly referred to as flow (i.e., an optimal state of interest and challenge in a given activity that is experienced as personally satisfying; Csikszentmihalyi, 1990). In other words, the psychological resources required to attend to one's body (in the process of self-objectification) may detract away from various experiences, rendering them less personally satisfying. The third process is a diminished awareness of internal bodily states, which is

described as a decreased awareness of physiological cues within one's body. Last is an increase in body shame, which is a negative affective state that occurs when an individual feels as though his or her body does not meet sociocultural norms of appearance. Because of these internalized processes, it is theorized that women are at heightened risk to experience several forms of psychological distress, including depression, sexual dysfunction, and eating disorders. Given the strength of the relationship between body image concerns and eating disorders (Stice & Shaw, 2002), body image concerns are frequently included in studies of objectification (Moradi & Huang, 2008), and this is the scope of the present study.

### **Self-Objectification and Body Image Considerations for Women**

Although objectification theory was written to explain various psychological concerns experienced among women, a considerable amount of research has focused on disordered eating and body image concerns. In a landmark study testing objectification theory, Fredrickson, Roberts, Noll, Quinn and Twenge (1998) tested whether self-objectification was related to body shame. The sample consisted of college-aged women who were primarily European American. The researchers randomly assigned participants to one of two conditions in which they visually evaluated themselves in front of a mirror: the experimental condition involved wearing a swimsuit (the objectifying condition) and the control condition involved wearing a sweater (the non-objectifying condition). The participants then completed a measure of body shame while still wearing either the swimsuit or sweater; those in the objectifying condition reported a greater amount of body shame compared to participants who were in the non-objectifying condition, suggesting a causal relationship between self-objectification and body shame. Furthermore, the effect of the objectifying condition on participants with a high level of trait self-objectification (measured

prior to the experimental manipulation) was drastically greater than those who reported a low-level of trait self-objectification, suggesting that trait self-objectification makes one more susceptible to body shame.

In a similar experimental study, Quinn, Kallen, and Cathey (2006) replicated the findings of Fredrickson and colleagues (1998) by measuring levels of body shame following an experimental manipulation (rather than during the manipulation, as was done by Fredrickson et al.); the participants visually inspected themselves in a mirror wearing a swimsuit or a sweater they were provided by a study investigator and then changed back into their own clothing before completing the measure of body shame. In this college-aged sample with an unknown demographic composition, the authors discovered that women in the objectifying condition expressed a larger amount of body shame compared to those in the non-objectifying condition. This finding implies that the effects of objectifying experiences linger beyond the actual experience of objectification.

The findings of both Fredrickson and colleagues (1998) and Quinn and colleagues (2006) demonstrate the causal relationship between self-objectification and body shame; however, the findings did not portray the experiences of racially diverse women. Replicating the procedure of Fredrickson and colleagues (1998), Hebl, King, and Lin (2004) manipulated self-objectification with an ethnically diverse sample of undergraduate students (i.e., European American, African American, Asian, and Hispanic) to determine whether self-objectification affected varying ethnic groups equally. Results were that women in varying ethnic groups were susceptible to the internalization of objectifying conditions, which demonstrates the omnipresent risk of sexual objectification across racial groups. Whereas

the three aforementioned studies manipulated state self-objectification, correlational studies have examined trait self-objectification and body image-related variables.

Hill and Fischer (2008) conducted a cross-sectional study to explore the relationships among sexual objectification experiences, self-objectification, and body surveillance (i.e., monitoring one's physical appearance), with a predominantly European American sample of women who were recruited online. Experiences of sexual objectification positively predicted trait self-objectification. Furthermore, both experiences of sexual objectification and self-objectification were found to be significant predictors of body surveillance. These results support Fredrickson and Robert's (1997) assertions that experiences of sexual objectification may become internalized and lead women to self-objectify. A similar pattern of results was observed among predominantly White college students and community members, revealing that self-objectification predicted body surveillance, which in turn predicted body shame (Szymanski & Henning, 2007). Consistently, with a sample of Australian college-aged females of unknown racial background, Tiggemann and King (2004) found a relationship between self-objectification and body surveillance, as well as body surveillance and body shame. Taken together, the relationship between trait self-objectification, body surveillance, and body shame has been well-established in the literature. It is expected that a similar patterns of relationship will be found with the men in the present study. Specifically, it is expected that sexual objectification experiences will predict self-objectification, self-objectification will predict body surveillance, and body surveillance will partially mediate the relationship between self-objectification and body shame. However, to better explain these relationships, internalization of cultural standards of appearance has become adopted as an important variable when testing objectification theory.

Although not discussed by Fredrickson and Roberts (1997), Moradi, Dirks, and Matteson (2005) introduced internalization of cultural standards of appearance to account for additional variance in eating disorder symptomatology. Because of the ubiquitous nature of societal messages that link one's worth to appearance, the authors posited that internalization of cultural standards of appearance was an important and necessary link between experiences of objectification and the mechanisms of internalization that are proposed in objectification theory (i.e., self-objectification, body surveillance, and body shame). Results were that internalization of cultural standards of appearance positively predicted body surveillance, body shame, and disordered eating behavior. In addition, internalization of cultural standards of appearance mediated the relationship between experiences of sexual objectification and the aforementioned variables. Following this study, several studies have included internalization of cultural standards of appearance as an important mediating variable within objectification theory (e.g., Watson, Ancis, White, & Nazari, 2013; Wiseman & Moradi, 2010). Given the importance of this construct in the context of objectification theory, internalization of cultural standards of appearance will be included as a variable in the present study. In addition, it is expected that internalization of cultural standards of appearance will mediate the relationship between sexual objectification experiences and self-objectification.

Fredrickson and Roberts (1997) provided a comprehensive framework that explains the role of sexually objectifying experiences in the development and maintenance of body image concerns among women in Western society. Validity for this model has been demonstrated in both experimental and correlational studies, and establishes the relevance of examining self-objectification, internalization of cultural standards of appearance, body

surveillance, and body shame. Undeniably, the available research demonstrates the relevance of objectification theory with women, which bodes the question of whether the theory can also explain the appearance-related experiences of other groups. Although the initial conception of objectification theory was meant to explain the lived experiences of women, researchers have expanded varying components of objectification theory to men. In the following section, research that explores the objectification of men is reviewed.

### **Objectification Theory and Application to Men's Body Experiences**

Researchers suggest that advertising that targets men has become more objectifying over time (Leit et al., 2001; Rohlinger, 2002). Leit (2001) wrote that centerfold photos depicting men are more muscular than in the past. A separate study concluded that men in contemporary advertising are presented in increasingly objectifying ways (Rohlinger, 2002). Other researchers have suggested that male subculture places emphasis on body appearance (Silberstein, Mishkind, Striegel-Moore, Timko, & Rodin, 1989), although the degree of exposure to objectification related information is heightened for gay compared to heterosexual men. However, opinions are mixed on whether to study objectification theory with men because studies have demonstrated that men experience less distress on objectification-related variables compared to women (Morrison, Morrison, & Sager, 2004). This difference has been demonstrated when examining self-objectification, body surveillance, and body shame (McKinley, 1998). Research on objectification theory and body image with men appears to have stemmed from literature that initially focused on the experiences of gay men. Hence, a discussion of objectification theory with gay men will be presented, followed by discussing research that has compared both groups, or did not consider differences based on sexual identity.

**Objectification theory and the moderating role of sexual orientation.** Multiple studies have examined the role of sexual minority status as a moderating variable in the experience of self-objectification (e.g., Engeln-Maddox, Miller, & Doyle, 2011; Kozak, Frankenhauser, & Roberts, 2009; Martins, Tiggemann, & Kirkbride, 2007). Additional research indicates that gay and bisexual men experience increased body dissatisfaction compared to heterosexual men (Davids & Green, 2011). Given that the male body has received increased attention in the media over time (Rohlinger, 2002), Martins and colleagues (2007) considered the role of self-objectification as related to body image experiences of gay and heterosexual men in a two-part study. Study 1 was a correlational study that included roughly equivalent numbers of gay and heterosexual men (ethnicity was not reported). The authors reported that gay men experienced more self-objectification, body surveillance, body shame, drive for thinness, and body dissatisfaction (upper and lower body) than heterosexual men. Martins and colleagues (2007) noted that there was not a difference on drive for muscularity between gay and heterosexual men, suggesting that muscularity was an important consideration for both groups. Finally, the authors reported that, among the gay men in the sample, body shame significantly mediated the relationship between state self-objectification and lower body dissatisfaction (Martins et al., 2007).

In study 2, Martins and colleagues (2007) adapted the paradigm used by Fredrickson and colleagues (1998) and examined the consequences of state self-objectification in a sample of gay and heterosexual men; again, the racial composition was unknown. Regardless of sexual orientation, participants in the sexually objectifying condition (a condition wearing a Speedo swimsuit) expressed a greater amount of self-objectification and body surveillance than those in a sweater condition. However, Martins and colleagues

(2007) found that self-objectification resulted in heightened dietary restraint, body dissatisfaction, and body shame for gay men, but not heterosexual men. Again, the authors found that body shame mediated the relationship between self-objectification and body dissatisfaction. Finally, the authors suggested that lower body dissatisfaction may be more relevant to gay men than upper body dissatisfaction. Taken together, this study suggested that, although self-objectification may affect all men, it has stronger effects and consequences for gay men than for heterosexual men. Additionally, it appears that sexual objectification experiences affect self-objectification and body surveillance for men, and that self-objectification experiences affect body shame.

Kozak and colleagues (2009) explored the moderating role of sexual orientation in the relationship between self-objectification and objectification of others, among a sample of predominantly European American college students. The results were that gay men in the sample self-objectified to a greater degree compared to the heterosexual participants, which the authors believed was the cause of a focus on outward-appearance. Furthermore, the authors stated that gay men who self-objectified were more likely to also objectify other men. Engeln-Maddox and colleagues (2011) conducted four separate path analyses (gay, lesbian, and heterosexual male and female groups) to understand the relationships among objectifying experiences, body surveillance, body shame, and disordered eating behavior, while controlling for body mass index (BMI) and age. For the gay men in the sample, sexual objectification had no predictive value, but body shame mediated the relationship between body surveillance and eating behavior. For heterosexual men, sexual objectification significantly predicted body shame, which predicted eating behavior. While body surveillance was not a significant predictor of eating behavior for either gay or heterosexual

men, body shame was a significant predictor. This is notable given that several studies failed to find a relationship between body shame and theoretically similar variables (i.e., Daniel & Bridges, 2010, 2012; Martins et al., 2007; Michaels et al., 2013). Although Engeln-Maddox and colleagues (2011) tested objectification theory among multiple groups, a study published one year prior comprehensively tested objectification theory in a sample of only sexual minority men.

Wiseman and Moradi (2010) extended tenets of objectification theory to sexual minority men by examining their appearance-related and disordered eating concerns. Importantly, the authors included culturally relevant variables related to the experiences of sexual minority men and proposed a modified model of objectification theory for sexual minority men. First, the authors included a measure of childhood gender nonconformity in order to represent negative experiences respondents may have had in the past due to not meeting childhood gender norms (e.g., not being athletic or not being tough) because it was believed this variable may have a relationship with body surveillance. Wiseman and Moradi (2010) also measured internalized homophobia as a variable because of previous research suggesting that it relates to body dissatisfaction among gay men (Kimmel & Mahalik, 2005). Finally, the authors created the Sexual Objectification Experiences scale (Wiseman & Moradi, 2010) to more accurately measure experiences of sexual objectification relevant to sexual minority men that were not represented on other objectification measures. All three of these changes were intentional modifications to better capture the sexual objectification process with sexual minority men, which the authors posited would be different from the experiences of other groups, but important for sexual minority men.

The researchers conducted a path analysis on data from a sample comprised of mostly Caucasian males from the United States. A relationship between sexual objectification and eating disorder symptomatology was mediated by internalization of cultural standards of attractiveness and body surveillance. Body shame mediated the relationship between internalized homophobia and eating disorder symptoms. Childhood gender nonconformity positively predicted internalization of cultural standards of attractiveness, body surveillance, and body shame. Wiseman and Moradi's (2010) model was a comprehensive examination of how multiple mechanisms of objectification are relevant in the experiences of sexual minority men and made a significant contribution to the literature in demonstrating the need to modify objectification theory for different populations.

As has been demonstrated, body image concerns and objectification theory are important to consider with sexual minority men. This has been demonstrated through considering multiple variables involved in the objectification process, including self-objectification, body shame, and body surveillance. Literature also suggests that self-objectification, body shame, and body surveillance are increasingly important to consider with men of all sexual identities (Silberstein et al., 1989); however, modifications may be necessary in the way body image concerns are conceptualized with men as a whole to include areas that are of greater relevance to men and body appearance. As will be demonstrated, these modifications will inform the design of the present study.

**Objectification theory and men as a group.** The stimuli that provoke self-objectification and the associated consequences may be qualitatively different for men and women, which may explain inconsistency in the application of objectification theory to men as a group. For example, Fredrickson and colleagues (1998) found that an experimentally

manipulated self-objectifying condition (i.e., viewing oneself in the mirror either wearing a swimsuit or a sweater) caused body shame with a sample of women but not men. Quinn and colleagues (2006) had a similar conclusion when examining levels of body shame with men, but also found that even men in an objectifying condition reported a feeling of being defined by physical appearance. Yet among men, there has been one study that suggested there is no relationship between self-objectification and body dissatisfaction (Strelan & Hargreaves, 2005). Several researchers have suggested that the inconsistent findings related to self-objectification's link to body image concerns among men is due to measurement issues (i.e., failing to use measures that adequately gauge forms of body image concerns that are specific to men, such as muscularity-focused image concerns compared to a drive for thinness; Michaels et al., 2013; Parent & Moradi, 2011); conversely, it may be that these inconsistencies reflect that the construct is irrelevant in the examination of body image concerns with men. Although it is important to consider the ways in which the sociocultural context differs for men (such as considering aspects of masculinity and muscularity), the literature demonstrates that multiple mechanisms in the objectification process are relevant in explaining the appearance-related concerns of men (Michaels et al., 2013; Parent & Moradi, 2011; Schwartz et al., 2010).

Parent and Moradi (2011) tested elements of objectification theory among a sample of predominantly European American college-aged men. Extending the work of Olivardia, Pope, Borowiecki, and Cohane (2004) to understand the relationship between muscularity and body image concern, Parent and Moradi (2011) examined steroid use intention, with mediating variables relevant to men, such as drive for muscularity and the anticipated outcomes of steroid use (such as having more confidence in one's fitness level or

attractiveness). In addition, familiar mechanisms of objectification theory were included, such as internalization of cultural standards of appearance, body surveillance, and body shame. Using path analysis, the authors found that internalization of cultural standards of appearance was directly related to body surveillance, body shame, drive for muscularity, and indirectly related to anticipated outcomes of steroid use, as well as intentions for use of steroids. Although body surveillance predicted body shame, neither body surveillance nor body shame were significant predictors of drive for muscularity. The authors posited that body surveillance and body shame may not be as relevant toward explaining drive for muscularity, as both variables may be more relevant to explaining thinness-related constructs, which may be more relevant to women; conversely, Martins and colleagues (2007) found that body surveillance and body shame are relevant to men's experience of body image for both thinness and muscularity-related constructs.

Theoretically, one would expect both body shame and body surveillance to predict drive for muscularity and not vice-versa; as indicated in objectification theory, an internalization process occurs prior to the expression of an external response. In this case, body surveillance and body shame represent an internalization process and drive for masculinity is the resulting external behavior meant to modify body appearance through developing muscle mass. It is expected in the present study that self-objectification will mediate the relationship between internalization of cultural standards of appearance and body surveillance, and that body shame will mediate the relationship between body surveillance and drive for muscularity. Parent and Moradi (2011) also found significant positive correlations between body shame and drive for muscularity, and between body surveillance and drive for muscularity; because body shame and body surveillance are conceptualized as

the result of self-objectification, it is anticipated in the present study that self-objectification will also relate to drive for muscularity. Despite the fact that only some, but not all, mechanisms of the self-objectification process were demonstrated as relevant to the body image experiences of men by Parent and Moradi (2011), other studies provide further support for the application of these objectification-related variables in the study of men.

Michaels and colleagues (2013) examined how muscularity-idealizing images affected self-objectification among a sample of predominantly European American, heterosexual, college-aged men. The variables included in this study were body dissatisfaction, drive for muscularity, body surveillance, body shame, social physique anxiety, and sexual identity. Prior to completing the study measures, respondents were randomly assigned to complete an experimental condition in which they viewed images of men being objectified, or a set of neutral images. Contrary to what was expected, results were that exposure to objectifying images did not have an impact on participants' level of body dissatisfaction. The authors suggested that the strength of the experimental treatment may have been too weak (i.e., the images used may have not depicted objectification explicitly enough) to cause heightened body consciousness; this would explain the discrepancy with other studies that had a stronger treatment, such as Martins and colleagues (2007) who placed participants in Speedo bathing suits.

Despite the fact that many expected differences were not found by Michaels and colleagues (2013), significant correlations were demonstrated between many theoretically expected variables, including body dissatisfaction with both body shame and physique anxiety for gay and heterosexual men, as well as body dissatisfaction and drive for muscularity with heterosexual (but not gay) men (Michaels et al., 2013). Body surveillance

was also positively correlated with body shame for both gay and heterosexual men.

Furthermore, drive for muscularity was positively correlated with body shame and physique anxiety among gay and heterosexual men, but only correlated with body surveillance for gay men in the sample. Finally, body dissatisfaction was not correlated with body surveillance for either gay or heterosexual men. Although it may be that exposure to muscularity-related images did not yield the hypothesized results of Michaels and colleagues (2013), several expected relationships, as posited in objectification theory, were demonstrated in these data.

When examining body image concerns with men, the literature has consistently found that it is important to consider whether BMI needs to be controlled, as researchers have found that higher body weight is associated with a greater level of body dissatisfaction (Davids & Green, 2011; Garner, 1997). Additional studies have found that BMI correlates with variables related to bodyimage concerns with men. For example, in a predominantly heterosexual sample, Daniel and Bridges (2010) found that BMI was significantly associated with body shame and drive for muscularity. In a sample of sexual minority men, Wiseman and Moradi (2010) found that BMI was significantly correlated with internalization of cultural standards of appearance, body surveillance, and body shame. Because of this, BMI will be examined in the present study to determine whether it should be statistically controlled in the conducted analyses.

Although there is some inconsistency with findings when examining objectification with men, the literature demonstrates that tenets of objectification theory can be applied toward understanding men's experiences of body concern. However, as the literature currently stands, the underpinnings of objectification as outlined by Fredrickson and Roberts (1997) are inadequate to explain the sociocultural experiences of men and therefore require

consideration. In the following section, the need to adjust objectification theory to better apply the theory to men is argued; in doing so, the literature discussing masculine ideology is considered.

### **Modifying Objectification Theory for Men**

Although research has examined body image and objectification experiences of men, it is important to consider the ways in which sociocultural experiences that are uniquely male may contribute to these concerns. Fredrickson and Roberts (1997) stated that objectification is meant to explain an “array of psychological experiences that appear to be uniquely female” (p. 175), which implies that objectification requires careful consideration when applied to men. These theorists wrote that objectification reduces women’s worth based on their physical appearance because of the power exercised by men in society; said differently, objectification is an oppressive practice that maintains patriarchal power structures in society.

Given that men *are* the majority group, sexual objectification as a mechanism of male oppression is conceptually erroneous to explain the etiology of sexual objectification of men. Still, a review of the literature shows that multiple variables within in the objectification theory model (i.e., self-objectification, internalization of cultural standards of appearance, body surveillance, and body shame) have explained men’s experiences with body image concerns. Men experience pressure to conform to socialized gender roles, which is understood to cause negative outcomes in the realms of cognition, emotion, and behavior (O’Neil et al., 1995); hence, it is plausible that increased pressure to conform to these traditional norms of masculinity may cause men to reduce their worth to their physical appearance. Because muscularity is understood to be an extension of masculinity and representative of patriarchal power structures (Parent & Moradi, 2011), it may be that men

attempt to have a sense of agency over their masculine identity through exerting control over their muscle development. Pressure to conform to traditional norms of masculinity is referred to as gender role conflict (O'Neil, 1981); the research base demonstrates that this specific sociocultural factor strongly affects men, as described below.

**Gender role conflict theory.** Gender role conflict theory was developed as a means to explain the ways in which sexism and gender role socialization negatively affect both men and women (O'Neil et al., 1995). As a result of gender role socialization, a number of affective, behavioral, and cognitive dysfunctions may occur. In a review of gender role conflict, O'Neil and colleagues (1995) outlined several areas in which tenets of the theory can have an impact on men's experience of gender role. First, men can experience gender role conflict when they behave in ways that are inconsistent with traditional masculine norms, such as when a man stays home to raise children. The intensity of gender role conflict one experiences is heightened when a man attempts but fails to subscribe to a male gender norm. Furthermore, men who feel a discrepancy between their perceived self and ideal self may experience this conflict; an example of this would be a man who perceives himself to exert little control over his staff but believes that he should exert a large amount of control. Or, in the case of this study, men who believe that they should possess a certain body type in order to meet masculine appearance norms, but feel that they fall short of these norms, may experience body image concerns. Finally, devaluation and restriction of self and others is a risk of gender role conflict; for example, a man who believes he has little worth because he cannot provide adequately for his family (O'Neil et al., 1995). Researchers who measure gender role conflict most often use of the Gender Role Conflict Scale, which is separated into four areas: (a) success, power, competition; (b) restrictive emotionality; (c)

restrictive affectionate behavior between men; and (d) conflict between work and family; definitions for these domains will be detailed in the instrumentation section of this study.

Upon closer examination, several of the aforementioned risks are relevant to both gender role conflict theory and objectification theory. Both theories are based on an inherent discrepancy between one's perceived-self and ideal-self, which are based on societal messages of worth. In objectification theory, these messages are appearance-based; in gender role conflict theory, these messages are based on traditionally masculine norms. Both theories describe gender socialization processes which result in personal devaluation, restriction, or violation of self and others in an attempt to resolve the difference between one's perceived-self and ideal-self. In gender role conflict, this discrepancy may be resolved through expressing hyper-masculine traits in order to compensate for perceived inadequacies. In objectification theory, one may resolve this discrepancy by reducing his or her worth to a sexual object and engaging in self-objectification. Finally, respective to each theory, the outcome of either gender role conflict or self-objectification is an increase in psychological distress (Fredrickson & Roberts, 1997; O'Neil, 1981); however, to date, no study has comprehensively examined the empirical relationship between these two theories.

Research has suggested that gender role conflict is related to a number of psychological concerns and several of these variables are also relevant to objectification theory. This being said, the following studies pertain only to gender role conflict and are not related to objectification theory or body dissatisfaction. For example, studies suggested that men of varying ethnicities with heightened gender role conflict experience low self-esteem (Sharpe & Heppner, 1991; Shek & McEwen, 2012). Additionally, O'Neil (2008) cited multiple dissertations that indicated that there is a link between increased anxiety and

increased gender role conflict; however, these findings are discrepant with other published research that demonstrates no relationship. Finally, it has been suggested that increased gender role conflict is associated with an increase in depression for both gay and heterosexual men (Good & Mintz, 1990; Szymanski & Ikizler, 2013). Although results regarding anxiety are mixed, these overall findings demonstrate a relationship between gender role conflict and both self-esteem and depression. This conclusion is significant because research on objectification theory also considers self-esteem, anxiety, and depression as consequences of being objectified (Moradi & Huang, 2008).

Given the systemic pressure to comply with gender norms, it is conceivable that masculine ideology contributes to the sexual objectification of men. Reflective of this, it would be expected that sexual objectification experiences and gender role conflict will have a positive relationship in the present study. Gender role conflict is one of the most accepted ways in which masculinity is operationalized, which justifies the inclusion of the construct in the present study. In fact, Whorley and Addis (2006) noted that gender role conflict was measured in two-thirds of the articles that were included in a content review of papers pertaining to masculinity, which emphasizes the relevance of including gender role conflict in the present study. Furthermore, gender role conflict has been used with a wide range of men, including men of different life-stages, ethnicities, nationalities, and socioeconomic statuses (O'Neil et al., 1995), meaning that it is anticipated that it will likely be valid for use in a diverse sample for this study. The literature base demonstrates the relevance of gender role conflict in the experiences of men of many different backgrounds, and several research studies that have examined masculinity, sexual objectification, and bodyimage concerns with

men will provide additional justification for the marriage of gender role conflict theory and objectification theory.

**Masculinity, objectification, and body image concerns with men.** Fredrickson and Roberts (1997) stated that “bodies exist within social and cultural contexts, and hence are also constructed through sociocultural practices and discourses” (p. 174). To properly modify objectification theory to address the experiences of men, the context within which the male body is constructed must be understood. A relatively new body of research advocates for the inclusion of masculinity in the investigation of body image and objectification experiences. The social construction of masculinity is associated with a strong and muscular appearance; thus, cultural standards related to masculinity may create pressure for men to have a muscular body and may be associated with a number of body image concerns (Cafri & Thompson, 2004; Leit et al., 2001). Furthermore, muscularity is an essential component of how men view their bodies (Cafri & Thompson, 2004). Indeed, muscularity has been linked with personal agency, power, and strength, all of which are associated with masculine gender norms (Michaels et al., 2013). One way in which these expectations of appearance are communicated is through the media.

The role of media images as a systemic cause of body image concerns for men has been considered in previous research studies. One such study examined the predictive value of internalization of media ideals and several objectification-related variables on drive for muscularity (Daniel & Bridges, 2010). The study included 244 males who were college students from the southern part of the United States; ethnicity was not reported. Based on a path analysis, internalization of media ideals was a significant predictor of drive for muscularity; however, self-objectification, body surveillance, and body shame were not

significant predictors of drive for muscularity, when controlling for BMI. The authors suggested that the results may have been caused by a measurement issue resulting from the use of the Self-Objectification Questionnaire (Fredrickson et al., 1998) with this sample of men; the scale is composed of questions that assess a drive for thinness rather than muscularity (Daniel & Bridges, 2010). However, the link between internalization of media ideals and drive for muscularity still demonstrates the effects of living in a sociocultural context that places emphasis on muscular appearance for men. Daniel and Bridges (2010) did not examine the relationship between sexual objectification and internalization of cultural standards of appearance; however, participants could not have internalized these standards without previous exposure to them.

In a content analysis of magazines that target men, Lanzieri and Cook (2013) confirmed that magazines that target men include a greater number of representations of the ideal, muscular male body when compared to magazines that are meant for an audience of men and women. The authors also concluded that magazines intended for gay men depicted men with a lower body fat percentage than magazines meant for a general male audience, and magazines meant for an audience of men and women. Said differently, magazines meant for both gay and heterosexual men conveyed that the idealized body type for men is muscular; however, for gay men, it was also conveyed as being lean. These results are interesting in light of findings by Duggan and McCreary (2004) who found a correlation between consumption of fitness and muscle magazines and body dissatisfaction for both gay and heterosexual men. However, as previously reviewed, Michaels and colleagues (2013) did not find a relationship between exposure to muscularity-idealizing images and self-objectification. Tiggemann, Martins, and Kirkbride (2007) conducted a study that compared

the body image concerns of gay and heterosexual men with a sample of 254 Australian men, without reporting mean age or ethnic composition of the participants. Instead of using a questionnaire to measure body image concern, the investigators used two scales of nine figure silhouettes depicting the male body; one set depicted body fat and the other depicted muscle. Through analyzing discrepancies in perceived self and ideal self, the authors concluded that both groups desired a thinner body figure, as well as a more muscular body figure. Taken together, the evidence suggests that societal messages regarding body appearance are related to body image concerns among men. Furthermore, additional studies have more explicitly examined the role of masculine ideology in the context of body image through measuring gender role conflict.

One study examined the moderating role of entitlement in the relationship between gender role conflict and body image concern, with a sample of 236 college-aged males who were majority European American (Schwartz & Tylka, 2008). In separate models, three of four aspects of gender role conflict (success/power/competition, conflict between work and family, and restricted affection between men) were predictive of body esteem through the moderating role of entitlement. Specifically, high levels of entitlement resulted in higher levels of body esteem in each model. Furthermore, a separate analysis revealed that entitlement mediated the relationship between two aspects of gender role conflict (restricted emotionality and conflict between work and family) with body esteem. Although Schwartz and Tylka (2008) did not measure muscle-related body concern, the authors emphasized the negative effects that come from traditional gender role socialization on men's body image concern. These societal messages that cause gender role conflict pertain to a variety of

traditional masculine gender norms and are not solely related to body image-related experiences.

Still, these messages all reduce men's worth. Hence, it is expected in the present study that gender role conflict may not directly relate to appearance-related variables such as body surveillance and body shame, but would be related through the process of internalization as posited in objectification theory (i.e., as mediated by internalization of cultural standards of appearance and self-objectification) given that previous literature highlights the important role of internalization mechanisms in the context of sexual objectification (Moradi et al., 2005). It is also expected that gender role conflict would relate with drive for muscularity because of the link between masculinity and muscularity. In a separate study that measured body image concerns and gender role conflict of 156 men across the life-span, it was found that age moderated the relationship between gender role conflict and muscle and body dissatisfaction (Murray & Lewis, 2012). Specifically, it was found that younger individuals expressed a greater degree of body image concern; this suggests age may affect the pattern of results in the present study and may need to be controlled.

McCreary, Saucier, and Courtenay (2005) conducted the only known published study to examine both gender role conflict and drive for muscularity. In study 1, the authors included 157 men and examined the relationship between gender-typed personality traits and drive for muscularity. The results were that most of the male-specific gender role types (i.e., male sex-specific behaviors, male-typed behaviors, and unmitigated agency) were positive predictors of drive for muscularity in a regression analysis. These results again demonstrate the relationship between masculinity and body image concern. In study 2, McCreary and

colleagues (2005) collected data from 527 college-aged men with unknown ethnicity. The purpose of the study was to explore the relationship between gender role conflict and drive for muscularity. Two aspects of gender role conflict (success/power/competition and conflict between family and work) were positive predictors of drive for muscularity in the sample. Overall, both studies indicated that endorsement of traditional masculinity increases drive for muscularity for men; however, McCreary and colleagues did not draw a link with objectification theory.

Only one known study has included gender role conflict, desire for low body fat, and self-objectification (Schwartz et al., 2010). However, the relationships between the variables were not directly tested; instead, each was used as criterion variables in separate regression analyses. The sample included 202 college-aged students of a diverse ethnic background; this is a particular strength of this study given that most previous studies of body image and objectification with men have been predominantly European American. Surprisingly, the majority of correlations between drive for muscularity and self-objectification with other variables in the study were non-significant. The exceptions were significant correlations between drive for muscularity and self-objectification, self-objectification and a desire for low body fat, and drive for muscularity and a desire for low body fat. The correlation between drive for muscularity and self-objectification is contradictory to the findings of Daniel and Bridges (2010) who did not find a relationship between drive for muscularity and self-objectification; this discrepancy justifies the need to further assess the relationship, as will be done in the present study. Given that both samples were equivalent on many variables (i.e., mean age, sampling method, and sample size), it may be that the results were caused by differences in ethnic composition of the samples (Schwartz and colleagues [2010]

has a highly diverse sample whereas Daniel and Bridges [2010] does not), type 1 error committed by Daniel and Bridges (although the study appeared to be adequately powered), or the possibility that the effect size of the relationship between self-objectification and drive for muscularity is small and difficult to detect.

In the work of Schwartz and colleagues (2010), gender role conflict did not significantly predict muscularity or desire for low body fat in each respective model. However, success/power/competition (one component of gender role conflict) negatively related to self-objectification. Interpreting the results of the study, Schwartz and colleagues suggested that the inverse relationship between success/power/competition and self-objectification may represent the developmental stage of the participants in the study as college students in an academic setting; specifically, they posited that focusing efforts on achievement may result in a diminished preoccupation with external appearance; however, this may also be evidence to suggest that objectification theory does not clearly apply to men's experience which supports the need for the present study to further clarify these relationships.

Objectification theory has been strongly supported as relevant to explain the appearance-related experiences of women, and an emerging set of literature has justified the use of objectification theory to also explore the appearance-related experiences of men. Although it is evident that men face increased pressure to conform to muscularity-based norms of appearance, research studies are sometimes inconsistent in findings regarding the relationship between objectification-related variables and other theoretically related constructs, which indicates a need to accurately and comprehensively gauge the body-image related experiences of men. The introduction of gender role conflict as a predictor of the

objectification process may be key toward understanding men's experiences of traditional masculine norms; in turn, the pressure to conform to these norms may manifest as a heightened desire to control one's muscular appearance because muscularity is discussed as an expression of masculinity. The model that will be presented is reflective of both empirical findings and theory; in instances in which there is empirical inconsistency in findings, theory was used to guide the predictions in the present study.

### **The Present Study**

The primary purpose of the present study is to extend the current research on objectification theory with men by making an etiological modification to include gender role conflict as a component of the sexual objectification internalization process among a diverse sample of men. The results of this study may advance the field of counseling psychology in several ways. The findings have the potential to acknowledge that the objectification experiences of men may operate differently, and are situated in a different sociocultural context, than women's. The findings of this study will also advance the understanding of how men experience body image concerns in the study of the psychology of men and masculinity, which is a blossoming field within psychology. Furthermore clinical interventions can be modified to most effectively support men who experience psychological distress, which may be maintained by sexual objectification experiences or body image concerns; as is posited in this study, it may be that exploring gender role conflict will be relevant to the treatment of body image concerns with men.

It is expected that sexual objectification experiences and gender role conflict will correlate with each other and will both relate to the proposed variables in this study, in order to demonstrate that gender role conflict contributes to the internalization process of sexual

objectification for men as it relates to drive for muscularity. Variables that correlate with BMI will have this effect statistically controlled in the proposed model below. Multiple positive direct relationships are expected between variables, including gender role conflict and internalization of cultural standards of appearance (path A), gender role conflict and self-objectification (path B), gender role conflict and drive for muscularity (path C), internalization of cultural standards of appearance and drive for muscularity (path D), internalization of cultural standards of appearance and body shame (path E), internalization of cultural standards of appearance and body surveillance (path F), self-objectification and drive for muscularity (path J), self-objectification and body shame (path G), body surveillance and drive for muscularity (path L), sexual objectification experiences and internalization of cultural standards of appearance (path N), sexual objectification experiences and self-objectification (path O), sexual objectification experiences and body surveillance (path P), and sexual objectification experiences and body shame (Q).

Additionally, nine hypotheses of indirect relationships include:

1. Internalization of cultural standards of appearance is expected to partially mediate the relationship between gender role conflict and self-objectification (Hypothesis 1; path A x H).
2. Self-objectification will partially mediate the relationship between internalization of cultural standards of appearance and body surveillance (Hypothesis 2; path H x I).
3. Body surveillance will partially mediate the relationship between self-objectification and body shame (Hypothesis 3; path I x K).
4. Body shame will partially mediate the relationship between body surveillance and drive for muscularity (Hypothesis 4; path K x M).

5. Internalization of cultural standards of appearance will partially mediate the relationship between sexual objectification experiences and body surveillance (Hypothesis 5; path N x F).
6. Internalization of cultural standards of appearance will partially mediate the relationship between sexual objectification experiences and body shame (Hypothesis 6; path N x E).
7. Internalization of cultural standards of appearance will partially mediate the relationship between sexual objectification experiences and self-objectification (Hypothesis 7; path N x H).
8. Self-objectification will partially mediate the relationship between sexual objectification experiences and body surveillance (Hypothesis 8; path O x I).
9. Body surveillance will partially mediate the relationship between sexual objectification experiences and body shame (Hypothesis 9; path P x K).

Finally, because extant literature frequently has considered the effect of sexual orientation on sexual objectification variables and body image with men, Research Question 10 asks whether sexual orientation will have a significant effect on the proposed model in this study.

## CHAPTER 2

### METHODOLOGY

#### **Participants**

Data from 525 men who reported living in the United States were analyzed in the present study. Of these individuals, 99.6% self-identified as male and 0.4% identified as female-to-male (FtM) transgender. The majority of respondents indicated that they were heterosexual (90.3%), with additional respondents self-identifying as gay (4.8%), bisexual (3.2%), questioning (0.8%), queer (0.4%), pan/omnisexual (0.4%), and other (0.2%). Nearly three-quarters (72.5%) of respondents identified as European-American/Caucasian, 8.6% identified as Asian/Asian-American, 7.6% identified as Hispanic/Latino, 7.3% identified as African American, 2.1% identified as Bi/Multiracial, 1.1% identified as Native American, 0.6% identified as Other, and 0.2% identified as Pacific Islander. Although the US Census collects information on ethnicity differently, a general sense can be gleaned regarding how representative these data are to the US population. Using data from 2009 (data were not cross tabulated to consider whether or not the respondent is Hispanic), 81.4% of men identified as White, 12.7% of men identified as Black/African American, and 4.5% of men identified as Asian. Of men who reported race, roughly 16% also identified as Hispanic (U.S. Census Bureau, 2012). Whereas Asian/Asian American and African American respondents were slightly overrepresented, Hispanic and European-American/Caucasian respondents may have been underrepresented in the present study.

Regarding education level attained, 36.9% of respondents had a bachelor's degree, 29.1% had some college/no degree, 9.6% had a high school diploma, 8.6% had an associate's degree, 5.5% had a master's degree, 2.3% completed vocational or trade school, 2.1% had

some high school/no diploma, 1.7% had a professional degree, and 1.5% had a doctorate degree. BMI ranged from 10.19 to 78.91 ( $M = 26.90$ ,  $SD = 6.41$ ). Due to experimenter error, age was not collected for the sample. In examining characteristics of the users of Mechanical Turk (MTurk) who were sampled in the present study, Buhrmester, Kwang, and Gosling (2011) reported the average age of MTurk users was 32.8 years old; however, it is important to note that this statistic included men and women from an international sample whereas the present study online study included men from the United States.

### **Procedure**

Participants in this study were men who live in the United States and participate on the Internet crowdsourcing platform called MTurk, which is hosted by Amazon.com; crowdsourcing involves enlisting individuals to complete tasks via Internet recruitment and MTurk is a service that connects those who have tasks to complete (such as this study) with individuals who wish to complete tasks online. Upon receiving approval from the dissertation committee and the University of Missouri-Kansas City Social Sciences Institutional Review Board (SSIRB), the study was made available to potential participants by posting a request to participate on the database of available tasks that are seen by MTurk users. The post was limited so that it was only accessible by individuals who listed their residence as being within the United States.

Potential participants who chose to view the listing of the study on MTurk were taken to a separate page within MTurk that provided a description of the study. The description also indicated that participants who completed the survey would be compensated \$0.60, which was granted through the internal payment system hosted by MTurk. The decision to use this compensation amount was based on a study of MTurk users demonstrating that

longer surveys gain a greater number of responses when the compensation amount is greater; specifically, the authors found that responses on a 30-minute survey tripled when the compensation rate was changed from \$0.02 to \$0.50 (Buhrmester et al., 2011). Potential participants who chose to accept the task were provided a web link that opened SurveyMonkey.com in a new window where the study measures were hosted. The Survey Monkey webpage was modified to not collect IP addresses to protect participant anonymity. Once the Survey Monkey page loaded, an information script that outlined participant rights was displayed. Consent was assumed if the participants continued to the second page of the survey, where participants were screened to ensure that they identified as male and lived in the United States to continue in the study. On the third page, data collection began with study measures that were counterbalanced. Because participants were paid for their responses, participants were informed at the onset that only fully completed responses would be compensated; it was deemed that the payment amount was low enough to not constitute a meaningful penalty for those who chose to not complete the full survey and therefore did not receive compensation. Once participants completed the survey, a debriefing message appeared on the screen that provided participants with a generic code (as opposed to a code that was unique to each participant) that they copied from Survey Monkey back to the MTurk page in order to verify their completion of the survey. The participants pasted the code in order to anonymously indicate that they completed the task in order to receive monetary credit for participation.

### **Instrumentation**

**Gender role conflict.** The Gender Role Conflict scale (GRCS; O’Neil, Helms, Gable, David, & Wrightsman, 1986) is a 37-item scale that measures reactions toward

traditional norms of masculinity. Participants indicate their level of agreement on each item using a scale ranging from *Strongly Disagree* (1) to *Strongly Agree* (6). The scale contains four separate subscales; items corresponding to each subscale are summed, and the composite score is the sum of all subscale scores; higher scores reflect greater gender role conflict. The first subscale is success/power/competition (SPC) and contains 13 items. This subscale measures the expectation that men are dominant, successful, and superior to others. Example items include “Making money is part of my idea of being a successful man” and “I often feel that I need to be in charge of those around me.” Responses on this subscale demonstrated good internal consistency ( $\alpha = .85$ ) and a four week test-retest coefficient of .84 (O’Neil et al., 1986). The second subscale is restricted emotionality (RE) and contains 10 items; this subscale measures one’s difficulty in expressing feelings. Example items include “I have difficulty expressing my tender feelings” and “I have difficulty telling others I care about them.” Responses on this subscale demonstrated good internal consistency ( $\alpha = .82$ ) and a four week test-retest coefficient of .76 (O’Neil et al., 1986). The third subscale is restrictive affectionate behavior between men (RABBM) and contains eight items; this subscale measures the ways in which men limit their emotional expression toward others. Example items include “Hugging other men is difficult for me” and “Expressing my emotions to other men is risky.” Responses on this subscale demonstrated good internal consistency ( $\alpha = .83$ ) and a four week test-retest coefficient of .86 (O’Neil et al., 1986). The final subscale is conflict between work and family relations (CBWFR) and contains six items; this subscale measures the difficulties that result because of pressure to balance responsibilities of work and family while excelling in both. Example items include “Finding time to relax is difficult for me” and “My career, job, or school affects the quality of my

leisure family life.” Responses on this subscale demonstrated adequate internal consistency ( $\alpha = .75$ ) and a four week test-retest coefficient of .72 (O’Neil et al., 1986).

Researchers are able to use subscales separately or as a total score representative of gender role conflict (O’Neil, 2008); studies that have used a composite score of the GRCS have reported good reliability estimates with diverse samples of men (O’Neil, 2008). Furthermore, O’Neil (2008) reported that multiple unpublished confirmatory factor analyses demonstrated the validity of the four-factor structure used in the GRCS, but hierarchical effects have not been demonstrated in the peer-reviewed literature; this is interesting given that reliability coefficients for the total score have been reported and are considered to be good on average (i.e., .89 averaged across eight studies reviewed by Good et al., [1995]). In the present study, it will be important to examine whether the GRCS is valid as a unidimensional structure. The composite score will be used in the present study. Concurrent validity has been demonstrated with several measures of masculinity, such as the Masculine Gender Role Stress Scale and the Conformity to Masculine Norm Inventory. Divergent validity has been demonstrated with sex role egalitarianism (O’Neil, 2008). For this and all subsequent measures, exploratory factor analyses (EFA’s) and reliability coefficients are reported in Chapter 3.

**Sexual objectification experiences.** The Interpersonal Sexual Objectification Scale (ISOS; Kozee, Tylka, Augustus-Horvath, & Denchik, 2007) is a 15-item scale that measures sexual objectification. For each item, participants are asked to indicate the frequency of the occurrence on a 5-point scale ranging from *Never* (1) to *Always* (5); higher scores indicate a greater frequency of objectification experiences. Although Kozee and colleagues indicated that there were two subscales for this inventory (i.e., body evaluation and unwanted explicit

sexual advances), a validation study with a sample of college-aged men yielded a three-factor solution (i.e, body evaluation, unwanted explicit sexual advances, and body gaze; Davidson, Gervais, Canivez, & Cole, 2013). The body evaluation (ISOS-BE) subscale consists of eight items with examples including “How often have you noticed someone staring at your chest when you are talking to them?” and “How often have you heard a rude, sexual remark made about your body?” The unwanted explicit sexual advances (ISOS-UESA) subscale consists of four items with examples including “How often have you heard someone make sexual comments or innuendos when noticing your body?” and “How often has someone grabbed or pinched one of your private body areas against your will?” The body gaze (ISOS-BG) subscale consists of three items with examples including “How often have you felt like or known that someone was evaluating your physical appearance?” and “How often have you felt that someone was staring at your body?” For the present study, the word “breasts” was changed to “body” and “women” was changed to “men.” The ISOS can also be used as a composite score which will be done in the present study (Davidson et al., 2013; Kozee et al., 2007). Concurrent validity for this construct has been demonstrated between this measure and the Objectified Body Consciousness Scale-Body Shame with heterosexual men but not gay men (Engeln-Maddox et al., 2011). Davidson and colleagues (2013) reported that the ISOS is valid for use with men after completing a CFA using a male sample. For the total score, Davidson et al. (2013) provided evidence of excellent reliability ( $\alpha = .91$ ) with a sample of men and test-retest stability has been demonstrated with a sample of women ( $r = .90$ ; Kozee et al., 2007).

**Male self-objectification.** The Male Assessment of Self-Objectification (MASO; Daniel, Bridges, & Martens, 2013) is a 20-item measure of self-objectification experiences.

This scale was meant to replace the commonly used Self-Objectification Questionnaire (SOQ) developed by Fredrickson and colleagues (1998) when sampling men. Specifically, Daniel and colleagues (2013) believe that differences in body ideals across genders render the SOQ less effective and sought to develop a more relevant scale. Participants are asked to describe how personally important each item is on a 7-point rating type scale ranging from *Not Important* (0) to *Very Important* (7). The scale consists of two subscales; to score this inventory, all items are averaged and higher scores reflect higher frequency of objectification experiences. The first scale is appearance-based body attributes, which are meant to represent importance placed on physical appearance of the body, such as the size of varying body parts, body weight, and physical features. For this subscale, Daniel and colleagues (2013) provided evidence of good reliability ( $\alpha = .89$ ). The second subscale is competency-based body attributes, which are meant to represent importance placed on how well one celebrates the body for its physical function, such as one's flexibility, level of energy, or balance. For this subscale, Daniel and colleagues (2013) reported evidence of good reliability ( $\alpha = .88$ ). Subscale scores are the average of respective items. The total score is derived by subtracting the mean score on the competency-based items from the scores on the appearance-based items. Therefore, positive scores represent greater focus on appearance-based attributes of the body, and negative scores represent a greater focus on competence-based attributes. The factor correlation between the appearance-based body attributes subscale and the competency-based body attributes subscale was  $r = .49, p < .05$ . Concurrent validity was demonstrated between the MASO and the Drive for Muscularity Scale, the Objectified Body Consciousness Scale (both body surveillance and body shame), and the Self-Objectification Questionnaire (Daniel et al., 2013) with samples of men. Two week

test-retest stability for the composite score of this instrument has been established ( $r = .79$ ; Daniel et al., 2013).

**Internalized sociocultural standards of appearance.** The Sociocultural Attitudes Towards Appearance Questionnaire-Internalization (SATAQ-I; Heinberg et al., 1995) is an eight-item scale intended to measure the internalization of societal appearance expectations and is a subscale of the Sociocultural Attitudes Towards Appearance Questionnaire. In the present study, a modified version for males is used (Morry & Staska, 2001). Items are rated on a 5-point scale ranging from *Completely Disagree* (1) to *Completely Agree* (5), and higher scores represent higher internalization of sociocultural attitudes of appearance. The total score for this instrument is achieved by summing all items on the scale and higher scores indicate higher levels of internalization. Example items include “I tend to compare my body to people in magazines and on TV” and “I wish I looked like a bodybuilder.” Although the original scale was created for use with women, Morry and Staska (2001) modified the wording of some scale items to be more relevant to men (e.g., “I wish I looked like a bodybuilder” instead of “I wish I looked like a swimsuit model”). Morry and Staska (2001) reported an adequate reliability coefficient with a sample of men ( $\alpha = .78$ ) using the modified scale, and Daniel and Bridges (2010) reported evidence of good reliability ( $\alpha = .87$ ). In samples of men, the scale has demonstrated concurrent validity with the Objectified Body Consciousness Scale (both body surveillance and body shame), the Self-Objectification Questionnaire, and the Drive for Muscularity Scale (Daniel & Bridges, 2010).

**Body surveillance.** The Body Surveillance subscale of The Objectified Body Consciousness Scale-Body Surveillance (OBCS-Body Surveillance; McKinley & Hyde, 1996) is an 8-item measure examining body surveillance. Respondents rate their level of

agreement to each item on a 7-point scale that ranges from *Strongly Disagree* (1) to *Strongly Agree* (7). There is also a not applicable option. Applicable items are averaged to achieve a total score and higher scores represent elevated body surveillance. Examples of items included on this inventory include, “During the day, I think about how I look many times” and “I am more concerned with what my body can do than how it looks.” Initial use of this scale with men yielded an adequate reliability coefficient when used in a sample of college men ( $\alpha = .73$ ; McKinley, 1998). Responses on this scale have demonstrated good internal consistency with sexual minority men ( $\alpha = .90$ ; Wiseman & Moradi, 2010) and college-aged heterosexual men ( $\alpha = .84$ ; Daniel et al., 2013). Concurrent validity for the body surveillance subscale has been demonstrated with the Drive for Muscularity Scale (Daniel & Bridges, 2010, 2012; Wiseman & Moradi, 2010), the SATAQ-I (Daniel & Bridges, 2010; Parent & Moradi, 2011; Wiseman & Moradi, 2010), and the MASO (Daniel et al., 2013).

**Body shame.** The Body Shame subscale of The Objectified Body Consciousness Scale (OBCS-Body Shame; McKinley & Hyde, 1996) is an 8-item measure examining body shame. Respondents rate their level of agreement to each item on a 7-point scale that ranges from *Strongly Disagree* (1) to *Strongly Agree* (7), and also includes a “N/A” option. Applicable items are averaged to achieve a total score and higher scores represent elevated body shame. Examples of items on the scale include “I feel ashamed of myself when I haven't made the effort to look my best” and “When I'm not exercising enough, I question whether I am a good enough person.” In samples of men, concurrent validity for the body shame subscale has been demonstrated with the Drive for Muscularity Scale (Parent & Moradi, 2011), the SATAQ-I (Daniel & Bridges, 2010; Parent & Moradi, 2011; Wiseman & Moradi, 2010), and the MASO (Daniel et al., 2013). Initial use of this scale with men

yielded adequate reliability coefficients when used in a sample of college men ( $\alpha = .79$ ; McKinley, 1998). Similar or better reliability coefficients have been reported using this scale with sexual minority men ( $\alpha = .89$ ; Wiseman & Moradi, 2010) and heterosexual men ( $\alpha = .78$ ; Daniel et al., 2013).

**Drive for muscularity.** The Drive for Muscularity Scale (DMS; McCreary & Sasse, 2000) is a 15-item measure of muscularity concerns. Respondents rate each item on a 6-point scale ranging from *Always* (1) to *Never* (6). The measure consists of two subscales; to score, appropriate items are reverse scored, and items are summed for each subscale. The total score is achieved by summing the total of each subscale and higher scores represent greater muscularity concern. The first scale is called drive for muscularity attitudes and examples include, “I wish I were more muscular” and “I think I would feel stronger if I gained a little more muscle mass.” The second subscale is called drive for muscularity behaviors and includes “I use protein or energy supplements” and “I try to consume as many calories as I can in a day.” Upon initial development, responses on the DMS demonstrated a reliability coefficient of .84 (McCreary & Sasse, 2000) and subsequent researchers have reported evidence of strong reliability (e.g.,  $\alpha = .90$ , Daniel et al., 2013) and a test-retest reliability coefficient ( $r = .93$ ; the authors did not report over what time period) for the composite score (Cafri & Thompson, 2004). In samples of men, concurrent validity of the DMS has been demonstrated with the MASO (Daniel et al., 2013), the SATAQ-I (Daniel & Bridges, 2010; Parent & Moradi, 2011), the OBCS-Body Surveillance (Daniel & Bridges, 2010, 2012) and the OBCS-Body Shame (Michaels et al., 2013; Parent & Moradi, 2011).

**Demographic questionnaire.** The demographic questionnaire assessed self-reported ethnicity, gender, sexual orientation, socioeconomic status (SES), education level,

relationship status, weight, height, and amount of exercise. Because of an experimenter error, age was not collected. Weight and height information were used to compute the BMI of participants. Gender was used to confirm that participants meet the inclusion criteria of the study. BMI was examined to see if it should be statistically controlled, as previous research has found the variable as a correlate of body dissatisfaction (Davids & Green, 2011). Sexual identity was collected to explore if it has an effect on the variables in the proposed model.

## CHAPTER 3

### DATA ANALYSIS

#### **Missing Data**

Upon completion of data collection, 675 individuals accessed the survey in total; however, 78 of these respondents were removed from the data file because they did not initiate completion of the survey. Additionally, nine respondents were removed for identifying as female and two were removed because they indicated that they lived outside of the United States. Beyond this, 46 respondents were removed because of missing excessive amounts of data (i.e., more than 20%) or failing to properly answer one or more validity questions that were embedded in the survey instrument. Therefore, a total of 540 individuals were included in the data analysis moving forward.

Following, missing data was addressed for OBCS-Body Shame and OBCS-Body Surveillance; these scales are unique from other scales used in this study because they allow for a “not applicable” (i.e., “N/A”) option and require unique scoring. McKinley and Hide (1996) suggested that researchers take an average of all applicable items to achieve a total score; therefore, if someone selected “N/A,” it did not alter the participant’s mean score for this scale. For these subscales, mean-substitution was used to address cases that had true missing data on this scale because there were only a select few times when this occurred. For the remaining cases in the data set, expectation maximization (EM) imputation was used to address data missing at the item level; using this procedure, an algorithm uses an iterative process to determine the most probable estimates for missing data. Little’s Test was conducted considering all scale items (i.e., including all individual items for the GRCS, ISOS, SATAQ, MASO and DMS), results were significant,  $\chi^2(9626) = 10676.32, p < .001$ .

Therefore, it could not be assumed that data were missing completely at random (MCAR). However, EM imputation is still appropriate with data that is missing at random (MAR) and can be computed without the expectation of MCAR (Allison, 2002). It was assumed that data were MAR because no clear pattern emerged, suggesting that certain values were not missing based on a specific reason, such as ethnicity or sexual orientation. However, no validated test of MAR is available to objectively conclude that data are MAR, rather than not at random. Because of this, the missing values that were computed through EM imputation were retained and used for subsequent analyses.

### **Data Screening**

The recommendations of Kline (2011) were primarily used to guide the data screening process. Z-scores were computed to determine univariate outliers that were greater or less than three standard deviations from the mean for all variables; because each instrument was treated as a total score (with the exception of the MASO which is treated as a difference score), univariate outliers were examined for total scores only and not subscales. The ISOS had five respondents with z-scores above 3.0 and these cases were removed from the analysis file, reducing the number of participants to 535. An additional five cases were removed because of z-scores that were greater than 3 standard deviations from the mean for the MASO difference score, leaving 530 cases for analysis. Collinearity was considered through observing Pearson's correlations between all variables; the highest correlation was .56 and indicated that there was no collinearity between variables. Multivariate outliers were observed using the Mahalanobis test and cases with a value above 20 were dropped from the study (Field, 2009); this resulted in the exclusion of five cases, meaning 525 remained for analysis. Linearity was observed through the use of scatter plots between DMS and all

independent variables (IVs). A histogram verified normality of residuals, as the standardized residuals were normally distributed. Under the recommendations of Tabachnick and Fidell (2007), homoscedasticity was checked using a scatter plot to be sure that residual variance was equal across all dependent variables. Additionally, the Durbin-Watson test was conducted and observed to show no autocorrelation between variables. To test whether all variables were normally distributed, histograms were visually inspected. Furthermore, skewness values were expected to be in the range of  $[-3, 3]$  and kurtosis values were expected in the range of  $[-10, 10]$ ; both were well within these limits. The final sample included 525 cases; see Table 1 to view descriptive statistics for all variables, as well as the covariances and correlations between all variables.

### **Factor Structures**

Prior to screening data for the assumptions of multivariate statistics, the factor structure of each instrument was examined through observing both a principal axis factoring EFA with varimax rotations, followed by calculating Cronbach's alpha for each factor. Varimax extraction attempts to minimize the dispersion of loadings within a factor, which capitalizes on yielding a smaller number of factors. Because previous studies have suggested that all of the instruments used in this study can be treated as a single factor (with the exception of MASO which is a difference score between two factors), varimax extraction was used in the present study. Each EFA was conducted with the following four criteria: (a) eigenvalues greater than 1, (b) scree tests, (c) factors explaining at least 5% of the variance, and (d) interpretability of the factors (Tabachnick & Fidell, 2007). Factor loadings needed to be at least .32, and the maximum acceptable cross-loading was .32 (Tabachnick & Fidell, 2007). Each factor needed at least four items, with at least four factor loadings greater than

.40 (Guadagnoli & Velicer, 1988; Velicer, Peacock, & Jackson, 1982). Structural characteristics of all instruments are outlined in Table 2.

**GRCS.** An EFA was conducted on the 37 items of this scale. The Kaiser-Meyer-Olkin measure verified the sampling adequacy for the analysis,  $KMO = .89$ , and was considered good (Field, 2009). Bartlett's test of sphericity,  $\chi^2(666) = 12,096.48, p < .001$ , suggested that the correlations between items were sufficiently large for EFA. The original EFA produced a one-factor solution with all 37 items loading adequately (i.e., above .32) on a single factor and explained 55.5% of the variance in the model. Cronbach's alpha for this total score was .95.

**ISOS.** For the EFA conducted on the 15 items of this scale, 64.5% of the variance was explained; the Kaiser-Meyer-Olkin measure verified the sampling adequacy for the analysis,  $KMO = .94$ , and was considered good (Field, 2009). Bartlett's test of sphericity,  $\chi^2(105) = 6,212.99, p < .001$ , suggested that the correlations between items were sufficiently large for EFA. However, an examination of eigenvalues demonstrated that a one factor solution was the most statistically stable and consistent with the scoring procedure for the instrument; this new solution explained 50.3% of the variance with all items retained. Cronbach's alpha for this scale was .94.

**MASO.** For the EFA that was conducted on the 18 items of this scale, the Kaiser-Meyer-Olkin measure verified the sampling adequacy for the analysis,  $KMO = .91$ , and was considered good (Field, 2009). Bartlett's test of sphericity,  $\chi^2(153) = 5,058.97, p < .001$ , suggested that the correlations between items were sufficiently large for EFA. A three-factor solution was produced which explained 53.5% of the variance. Examining this more closely, factor one consisted of all of the items on the competency subscale; factors two and

three were all of the items that the authors indicated belong on the appearance subscale. Because this instrument is scored as a difference score between both subscales, having two separate subscales that pertain to appearance would render scoring the scale difficult. Therefore, a second EFA was computed that held the number of possible factors to two. This two-factor solution explained 49.3% of the variance and all items loaded on the expected factors. Cronbach's alpha for the competence subscale was .90 and was .89 for the appearance subscale.

**SATAQ-I.** For the eight items of this scale, the Kaiser-Meyer-Olkin measure verified the sampling adequacy for the analysis,  $KMO = .89$ , and was considered good (Field, 2009). Bartlett's test of sphericity,  $\chi^2(28) = 1,964.53, p < .001$ , suggested that the correlations between items were sufficiently large for EFA. The EFA produced a one-factor solution with all eight items loading adequately (i.e., above .32) on the single factor and 48.0% of the variance was explained. Cronbach's alpha for this eight-item scale was .87.

**OBCS-Body Surveillance.** An EFA was conducted on the eight items of this scale. The Kaiser-Meyer-Olkin measure verified the sampling adequacy for the analysis,  $KMO = .82$ , and was considered good (Field, 2009). Bartlett's test of sphericity,  $\chi^2(28) = 1,342.64, p < .001$ , suggested that the correlations between items were sufficiently large for EFA. The original EFA produced a two-factor solution, explaining 48.0% of the variance. However, given the aforementioned criteria, it appeared that a one-factor solution with six items was the best solution; this was supported by observing that removing two variables (i.e., "I often worry about whether the clothes I am wearing make me look good" and "During the day, I think about how I look many times") yielded a more stable solution. From a sociocultural perspective, men receive less pressure to be concerned about the clothes wear compared to

women, which may explain why the first item loaded poorly. Theoretically, it may be that the second item is irrelevant for men, as they may not be socialized in the same way that women are to self-monitor external appearance. This final solution, with a total of six items, explained 44.6% of the variance in body surveillance; although the variance explained in this modified scale is slightly less than the first, it better meets the criteria previously outlined to guide this factor analysis. It is important to note that this scale has a “N/A” option, which is coded as system missing when the EFA is calculated. Because of this, cases that included a response of “N/A” were automatically excluded listwise, which resulted in the inclusion of 515 cases for the final EFA. Cronbach’s alpha for this six-item scale was .83. See Table 3.

**OBCS-Body Shame.** Eight items were included on this scale which produced a two-factor solution and explained 51.0% of the variance. For this original solution, the Kaiser-Meyer-Olkin measure verified the sampling adequacy for the analysis,  $KMO = .86$ , and was considered good (Field, 2009). Bartlett’s test of sphericity,  $\chi^2(28) = 1,357.46, p < .001$ , suggested that the correlations between items were sufficiently large for EFA. Given the aforementioned criteria, it appeared that a one-factor solution with six items was preferred over the eight-item scale; removing two variables supported this. The item “Even when I can't control my weight, I think I'm an okay person” was removed; this variable may not be as relevant for men compared to women because men’s body image concerns are not as strongly associated with adiposity as it is for women. The item “I never worry that something is wrong with me when I am not exercising as much as I should” was also removed. It may be that this item is irrelevant for men because exercise may serve the purpose of both building strength and enhancing appearance, whereas women are more likely to receive the message that exercise is only for appearance-based reasons. This final solution, with a total

of six items, explained 52.8% of the variance in body shame. It is important to note that this scale has a “N/A” option, which is coded as system missing when the EFA is calculated. Because of this, cases that included a response of “N/A” were automatically excluded listwise, which resulted in the inclusion of 484 cases for the final EFA. Cronbach’s alpha for this six-item scale was .87. See Table 4.

**DMS.** Using the 15 items of this scale, the Kaiser-Meyer-Olkin measure verified the sampling adequacy for the analysis,  $KMO = .88$ , and was considered good (Field, 2009). Bartlett’s test of sphericity,  $\chi^2(105) = 4,850.44, p < .001$ , suggested that the correlations between items were sufficiently large for EFA. The original EFA produced a two-factor solution with all 15 items loading adequately on the expected sub factors as prescribed by the authors of the scale with the exception of the item “I think I would look better if I gained 10 pounds in bulk,” which loaded equally on both scales (i.e., attitudes and behaviors). The authors of this scale recommend that the items can be used to form two sub-scales, or as one total score; evidence suggests that these subscales are sub-factors of a higher-order factor (McCreary et al., 2005). To examine whether evidence for the unidimensionality of the DMS could be obtained, a second EFA was conducted using varimax rotation and constraining the number of possible factors to one. With this second EFA, all items loaded adequately (i.e., above .32) on the single factor and 35.4% of the variance was explained. Cronbach’s alpha for all 15 items on the scale was good (.89), a total score will be used in the present study. For reference, Cronbach’s alpha on the behaviors subscale was .89 and was also .89 for the attitudes subscale. It was noted that this scale appears to have a restriction of range in the present study. Specifically, it appears there is a floor effect given that no scores were in the high range of possible values.

## Preliminary Analyses

BMI was significantly correlated with body shame ( $r = .14$ ) and drive for muscularity ( $r = -.09$ ); this was statistically controlled in the path analysis through entering BMI as an exogenous variable that had a path leading to body shame and a separate path leading to drive for muscularity. To test the effect of sexual orientation on the variables in the path model (i.e., Research Question 10), a multivariate analysis of covariance (MANCOVA) was computed with variables of interest (e.g., GRCS, ISOS, SATAQ-I, MASO, OBCS-Body Surveillance, OBCS-Body Shame, and DMS) as dependent variables (DVs) and sexual orientation as the IV. Although BMI has a significant relationship with body shame and drive for muscularity, it was not entered as a covariate because BMI did not have a significant relationship sexual orientation,  $t(522) = 1.15, p > .05$ . Following the recommendation of Tabachnick and Fidell (2007), only levels of the variable sexual orientation with more cases than the squared number of dependent variables in the model (i.e., there are seven variables in the model, therefore  $7^2$ , which is 49) were tested. To comply, the effect of sexual orientation was tested by comparing all heterosexual participants to a group of all non-heterosexual participants combined into a single group. Box's M test of equality of covariance matrices indicated that the interrelations across the sexual orientation groups did not differ significantly,  $Box's M = 42.21, p > .05$  meaning that there was equality of variance across groups. Using Wilks's statistic, there was a significant effect of sexual orientation,  $\Lambda = 0.94, F(7, 516) = 4.46, p < .05$ , partial  $\eta^2 = .06$ , and the observed power was .99. Follow-up t-tests with alpha adjusted to minimize the risk of type I error (i.e. a Bonferroni adjustment;  $.05/7 = .007$ ) were conducted for each variable in order to determine the effect of sexual orientation, and the effect of sexual orientation did not reach statistical

significant on any variable when observing the adjusted alpha value. Given this finding, all men in the sample were analyzed as a single group. See Table 5 for between-subject effects.

### **Path Analytic Model**

The model depicted in Figure 1 was tested using the software program SPSS Amos. Prior to interpretation, model fit statistics were examined to verify adequacy. The hypothesized model was shown to be theoretically identified. Kline (2011) suggested that models have good fit under the following conditions: (a)  $\chi^2$  is not significant, (b) CFI is greater than .95, (c) SRMR is less than .05, and (d) RMSEA is less than .05. Fit statistics for this model were  $\chi^2(6) = 53.21, p < .001$ , CFI = .95, SRMR = .04, RMSEA = .12 (90% CI [.09, .15]). Good local-fit of the data is represented by having standardized residual values between variables in the model that do not exceed |2.00|; all but one variable fell within these parameters. Specifically, the standardized residual covariance between GRCS and body shame was 8.52 which indicated that, mathematically, the model would have better fit when allowed to estimate a path from GRCS to body shame. Based on statistical fit modification indices, it appeared that two additional paths should be added to the model; first by adding a path between GRCS and OBCS-Body Shame, followed by a path from ISOS to DMS. The decision to add these paths was informed by the fact that the model chi square would be significantly reduced, and because a theoretical rationale could be given for why these variables should be permitted to co-vary. By adding these two paths, the model becomes exploratory in nature. See Table 6.

### **Model Modification**

The first alternate model, which added a path between GRCS and body shame, was computed in order to see whether the model achieved better model fit. No known previous

research has estimated a relationship between these two variables, which is the reason it was not proposed in the conceptual model. However, both constructs involve internalization of external cues that link one's worth to his or her ability to meet societal norms that may explain why variance is explained between both variables. Fit statistics for this alternate model were  $\chi^2(5) = 18.96$   $p < .01$ , CFI = 0.98, SRMR = .02, RMSEA = .07 (90% CI [.04, .11]). Significant differences emerged between the original model and the modified model,  $\Delta\chi^2(1) = 34.25$ ,  $p < .001$ . This suggests that the modified model had significantly better data to model fit. The addition of this path is further supported by the fact that all standardized residual covariance values between variables are within |2.00|. However, after adding the direct path between GRCS and OBCS-Body Shame, modification indices reported that the model fit would improve by including a path between ISOS and DMS. Although no previous research has examined this relationship, this relationship theoretically makes sense, given that both constructs pertain to attention placed on external appearance.

Next, an additional model was computed in which a path was added between ISOS and DMS. Fit statistics for this alternate model were  $\chi^2(4) = 2.05$   $p > .05$ , CFI = 1.00, SRMR = .01, RMSEA = .00 (90% CI [.00, .05]). The addition of the path significantly improved the model fit,  $\Delta\chi^2(1) = 32.20$ ,  $p < .001$ . The addition of this path is further supported by the fact that all standardized residual covariance values between variables were within |2.00|. This final model, with the inclusion of two new paths, was retained.

Combined, all of the predictors in the model accounted for 20% of the variance in SATAQ-I, 15% of the variance in MASO, 27% of the variance in OBCS-Body Surveillance, 35% of the variance in OBCS-Body Shame, and 42% of the variance in DMS. Following the guidelines of Cohen (1992; i.e., .01 = small, .09 = medium, .25 = large), internalization of cultural

standards of appearance and self-objectification had medium effect sizes, whereas body surveillance, body shame, and drive for muscularity had large effect sizes. Most of the standardized path coefficients for direct links between variables were significant; however, there were three non-significant paths including the path between ISOS and MASO (path O), MASO and OBCS-Body Shame (path G), and OBCS-Body Surveillance and OBCS-Body Shame (path K). This said, while only three paths were non-significant, effect sizes of direct effects were only small to medium at best. Table 6 details parameter estimates and standard errors for all paths in the model. See Figure 2 for a representation of the final model that was retained.

Although only small and medium effects were obtained when examining direct paths in the model, medium and large effects were obtained when considering the amount of variance explained in each variable within the model. It would be expected that several paths would have larger direct effects in the model, but the biggest effects found are only medium-sized effects for paths associated with internalization of cultural standards of appearance. For body surveillance, body shame, and drive for muscularity, it may be that the variables predicting each may not have shared a large amount of covariance, meaning that each variable contributed a larger amount of unique variance to each outcome variable being predicted. This conclusion is supported by the fact that many of the correlations between variables in the model had small to medium effect sizes. This said, it is also possible that some of the small effects in the model are spurious in nature. Specific to drive for muscularity, it appears that there is a floor effect that may have reduced the effect sizes of paths to this variable because of constricted variance in drive for muscularity. Despite the restriction of range, all paths shared with drive for muscularity were significant.

## Test of Indirect Effects

Following an examination of model fit and direct path estimates, indirect path estimates were computed for the nine hypotheses of this study. Whereas Amos tests for total indirect effects (i.e., all possible paths leading directly and indirectly toward a criterion through one or more mediators) when one requests indirect effects for a model, the proposed hypotheses only pertained to the indirect effect of one predictor through a single mediator (rather than multiple mediators) onto a criterion. In order to specifically measure the indirect effects that were hypothesized in the study, while also estimating the influence of all covariances in the model, separate equivalent path models were computed. To test the indirect effect of interest, all paths between variables (with the exception of paths involved in the indirect effect of interest) were changed to correlations. By doing so, the estimated variance of the model remained the same as the original model while only computing a specified indirect path estimate and standard error for the specific hypothesis that was being tested. Therefore, nine separate models were computed, one for each hypothesis. As was done before, a bootstrapping procedure of 5,000 iterations was used to estimate the standard error of each indirect effect. See Table 7 for details regarding all indirect effects that were examined and see Figure 3 for an example diagram of how the model was built for each indirect effect that was tested.

Of the nine hypotheses tested, seven reached statistical significance. It was found that GRCS had a significant indirect effect on MASO through SATAQ-I (Hypothesis 1, path A x H);  $b = .005$ , 95% CI (.004, .007). SATAQ-I had a significant indirect effect on OBCS-Body Surveillance as mediated by MASO (Hypothesis 2; path H x I);  $b = .02$ , 95% CI (.012, .024). MASO had a significant indirect effect on OBCS-Body Shame through OBCS-Body-

Surveillance (Hypothesis 3; path I x K);  $b = .07$ , 95% CI (.025, .112). OBCS-Body Surveillance had a significant indirect effect on DMS through OBCS-Body Shame (Hypothesis 4; path K x M);  $b = .05$ , 95% CI (.030, .084). ISOS had a significant indirect effect on OBCS-Body Surveillance through SATAQ-I (Hypothesis 5; path N x F);  $b = .22$ , 95% CI (.138, .297). ISOS had a significant indirect effect on OBCS-Body Shame through SATAQ-I (Hypothesis 6; path N x E);  $b = .22$ , 95% CI (.140, .310). ISOS also had a significant indirect effect on MASO through SATAQ-I (Hypothesis 7; path N x H);  $b = .16$ , 95% CI (.102, .229). However, two hypothesized indirect effects were not significant. ISOS did not have a significant indirect effect on OBCS-Body Surveillance through MASO (Hypothesis 8; path O x I);  $b = .04$ , 95% CI (-.025, .100). ISOS also failed to have a significant effect on OBCS-Body Shame through OBCS-Body Surveillance (Hypothesis 9; path P x K);  $b = -.01$ , 95% CI (-.041, .029). See Table 3 for details of tests for indirect effects.

## CHAPTER 4

### DISCUSSION

The present study extends the current research on objectification theory by exploring the role of gender role conflict on the experience of sexual objectification among a diverse sample of men. Indeed, the inclusion of gender role conflict in the present study addresses etiological limitations of previous studies that have discussed the body image experiences of men in the context of objectification theory. Although, both gender role conflict and sexual objectification experiences were predictive of drive for muscularity through a series of direct and indirect effects that comprise the multi-stage process proposed in objectification theory, mixed-support was gleaned regarding whether self-objectification and body surveillance operate in the same way for men as they do for women. The study findings provide evidence that men experience body image concerns, but the results also challenge the premise that experiences of objectification operate in the same way as they do for women. Instead, the pattern of results suggests that objectification experiences may actually promote muscularity concern, which is a form of masculine norm conformity. As such, this process may even serve a broader systemic role that preserves patriarchal power structures.

#### **Predictors of Internalization of Cultural Standards of Appearance**

There was a significant positive direct effect of gender role conflict on internalization of cultural standards of attractiveness (path A) in the present study. Conceptually, this relationship was expected given that both variables reflect conformity to societal expectations as related to one's sense of self. More specifically, both variables reflect how the body falls victim to restrictive societal norms that are related to expectations of masculinity, as well as broader sociocultural expectations of attractiveness.

A significant positive direct effect of sexual objectification experiences on internalization of cultural standards of appearance (path N) also was present. Conceptually, one would expect that greater exposure to sexually objectifying incidents would predispose individuals to internalize messages that their worth is derived from how well their appearances conform to societal expectations. This relationship is well established in the literature on women, but only one known study on sexual minority men (i.e., Wiseman & Moradi, 2010) has examined the relationship between sexual objectification experiences and internalization of cultural standards of appearance with men. Hence, the establishment of a link between the two aforementioned variables for a diverse group of men is a new contribution to the literature. Gender role conflict and sexual objectification experiences are variables rooted in maintenance of patriarchal power structures. Hence, these findings support the notion that the very power structures that were instilled by men as a group may have consequences for men themselves; however, as will be discussed, the influence of these structures on men's appearance may also serve to further reinforce and preserve these power structures through conformity to norms of masculinity. The subsequent variable of interest to consider in the model is self-objectification.

### **Predictors of Self-Objectification**

Self-objectification was positively predicted by both gender role conflict (path B) and internalization of cultural standards of appearance (path H). Yet, the negative direct effect of sexual objectification experiences on self-objectification (path O) did not reach statistical significance. This finding is inconsistent with the experimental finding of Martins and colleagues (2007) who found that men in an objectifying condition had greater levels of self-objectification compared to men in a control condition. Despite the non-significant direct

effect of sexual objectification experiences on self-objectification, the positive indirect effect of sexual objectification experiences on self-objectification through internalization of cultural standards of appearance (Hypothesis 7) was statistically significant. It may be that the relationship between sexual objectification experiences and self-objectification is fully mediated through internalization of cultural standards of appearance. Conversely, because the magnitude of the direct effect of internalization of cultural standards of appearance was large relative to the direct effect of sexual objectification experiences, it may be that this drove the indirect effect to also be significant, even if there was only a negligible contribution made by sexual objectification experiences. Regardless of whether sexual objectification experiences made a meaningful contribution related to this indirect effect, it is evident that internalization of cultural standards of appearance strongly predicted self-objectification. This finding provides evidence that internalization of cultural standards of appearance plays an important role in the present model, as will be highlighted throughout the discussion.

Considering Hypothesis 1, there was a significant positive indirect effect of gender role conflict on self-objectification as partially mediated by internalization of cultural standards of appearance. This relationship makes sense given the strong relationship that the present study establishes between gender role conflict and internalization of cultural standards of appearance. It may be that increased gender role conflict makes men more susceptible to internalization of cultural standards of appearance because the experience of gender conflict fuels a stronger desire to meet societal norms, including those related to attractiveness. In turn, this results in an increased likelihood to view one's self as an object for the pleasure of others through self-objectifying. Schwartz and colleagues (2010) are the

only other known authors to study the relationship between the success/power/competition subscale of the GRCS and self-objectification; in their study, an inverse relationship between success/power/competition and self-objectification was found. However, the significant positive direct effect of gender role conflict on self-objectification, as well as the significant positive indirect effect of gender role conflict on self-objectification as partially mediated by internalization of cultural standards of appearance, contradict the findings by Schwartz and colleagues (2010). The authors interpreted the inverse relationship by suggesting that the college-aged students they sampled may have a greater focus on academic achievement rather than external appearance; however contradictory research suggests that body image is a greater concern for men who are younger (Murray & Lewis, 2012). Considering the finding of the present study, it appears instead that men who have a higher level of gender role conflict appear more likely to integrate external messages regarding masculinity and view their appearance through a lens that is influenced by traditional gender roles. Given the sociocultural nature of both variables, the men in the present sample who had an increased conformity to masculine norms were also more susceptible to the internalization of cultural standards of appearance, which increased the likelihood of self-objectification. Taken together, self-objectification was predicted by gender role conflict, sexual objectification experiences, and internalization of cultural standards of appearance; however, as will be seen, the support for the inclusion of self-objectification in this model will be called into question when considered in the context of other variables. It has been posited that internalization caused by self-objectification is related to body surveillance; hence, body surveillance will be considered next.

### **Predictors of Body Surveillance**

Two variables had significant positive direct relationships with body surveillance, including internalization of cultural standards of appearance (path F) and self-objectification (path I); sexual objectification experiences (path P) had a significant negative direct effect on body surveillance. These results extend the finding of Wiseman and Moradi (2010), who found that there was a positive relationship between internalization of cultural standards of appearance and body surveillance with a sample of sexual minority men, but contradict their finding that sexual objectification experiences had a positive direct effect on body surveillance. However, the results of the present study do support the findings of Parent and Moradi (2011) who reported a positive relationship between internalization of cultural standards of appearance and body surveillance for a sample of men who were predominantly heterosexual.

It is noteworthy that the Pearson's correlation between sexual objectification experiences and body surveillance was non-significant in the present study, but a small, significant inverse relationship was present between these two variables in the context of the full model; said differently, when the frequency of sexual objectification experiences increases, body surveillance decreases. This suggests that men in Western culture may partially benefit from sexually objectifying experiences in the sense that they may derive a sense a confidence from being objectified, which allows them to self-monitor their appearance less because external feedback validates how they look. As a result, men may be less inclined to think about their physical appearance throughout the day when they receive reinforcement through being sexually objectified. However, when considering the mediating role of internalization of cultural standards of appearance, the direct relationship between sexual objectification experiences and body surveillance is enhanced. There was a

significant positive indirect effect of sexual objectification experiences on body surveillance, as partially mediated through internalization of cultural standards of appearance (Hypothesis 5) despite the fact that the direct effect between sexual objectification experiences and body surveillance was negative. Given that the influence of internalization of cultural standards of appearance is strong enough to enhance the relationship between sexually objectifying experiences and body surveillance, it appears that internalization of cultural standards of appearance is extremely important to how men experience the process of sexual objectification.

The positive indirect effect of internalization of cultural standards of appearance on body surveillance as partially mediated by self-objectification (Hypothesis 2) was also statistically significant. However, the indirect effect of sexual objectification experiences on body surveillance, as partially mediated by self-objectification experiences (Hypothesis 8), was not statistically significant. This appears reflective of the fact that the direct path between sexual objectification experiences and self-objectification also was non-significant. The establishment of this process (i.e., sexual objectification experiences predicting self-objectification, which then predicts body surveillance) is a cornerstone of objectification theory. Given that this relationship does not hold true for the men in this sample requires a consideration of whether objectification theory, as it currently stands, can accurately explain men's body image experiences. Although consideration must be given that these results could be sample specific, credence should be given to the possibility that sexual objectification experiences operate differently for men compared to women. Whereas objectifying experiences deny women their humanity through reducing their worth to be based solely on appearance, these experiences may increase men's confidence and strengthen

the link between masculine appearance and agentic power for men instead of reducing their sense of worth. The inconsistency of results pertaining to body surveillance may indicate that sexual objectification experiences do not increase body surveillance for men, which has implications for the application of objectification theory as it currently stands when used to understand men's experiences. The last mediating variable within this model is body shame.

### **Predictors of Body Shame**

Although body shame was predicted both directly and indirectly by several variables, other predictors of body shame did not reach statistical significance, resulting in mixed evidence of the role of body shame in the sexual objectification of men. First, internalization of cultural standards of appearance (path E) had a significant positive direct effect on body shame which was expected based on the findings of Parent and Moradi (2011) and Wiseman and Moradi (2010). Additionally, there was a significant positive indirect effect between sexual objectification experiences and body shame, as partially mediated by internalization of cultural standards of appearance (Hypothesis 6). There was also a significant positive direct effect of sexual objectification experiences on body shame (path Q); this finding is consistent with the findings of Martins and colleagues (2007) as well as Kozak and colleagues (2009).

An additional positive direct effect of gender role conflict on body shame was found; this relationship was not originally hypothesized but was recommended based on statistical modification indices for the path model. The gender role expectation for men to represent their masculinity through achieving a muscular appearance may cause greater shame for men who desire a greater sense of agency over their masculinity. This relationship was not predicted in the present study as no previous research was established to suggest that this relationship existed; in fact, Schwartz and colleagues (2010) suggested that a nonsignificant

relationship existed between gender role conflict and body shame. However, previous authors have written that men seek a more muscular appearance as a means of conforming to traditional masculinity (e.g., Pope, Phillips, & Olivardia, 2000), which is supported by the findings in this study.

The expected positive direct effect of self-objectification on body shame failed to reach statistical significance (path G) despite having a statistically significant Pearson's correlation in the present study. Again, this finding suggests that the experience of self-objectification may differ for men compared to women. Considering the sociocultural context of appearance for women, greater emphasis is placed on linking one's worth to appearance, whereas men are more likely to receive feedback that their worth is derived from multiple areas (Levant & Pollack, 2008). In this way, it is less likely that men would derive a sense of shame compared to women. In fact, neuroimaging results have even suggested that women are more likely to derive self-worth based on appearance expectations compared to men (Owens, Allen, & Spangler, 2010). Other studies of the same relationship have also offered mixed findings. Although Martins and colleagues (2007) found a relationship between self-objectification and body shame with gay men, the same was not found for heterosexual men in their sample (it is important to recall that sexual minority men had limited representation in the present study). Daniel and Bridges (2010) also failed to find a relationship between the aforementioned variables. However, Daniel and colleagues (2013) did report a significant positive Pearson's correlation between self-objectification and body shame. Given that the reported relationship between self-objectification and body shame is conditional on the other variables in the path analytic model, it appears that self-objectification and body shame shares common variance with one or more other variables in

the model, which may have reduced the unique variance experienced between self-objectification and body shame and rendered the relationship non-significant. In this way, it appears other variables in the model with larger effect sizes may have greater relevance to the objectification process men experience.

Body surveillance was also expected to have a positive direct effect on body shame (path K); however, this relationship also failed to reach statistical significance. Again, this is interesting given that there was a significant Pearson's correlation between the two variables. Several previous studies have reported on the relationship between body surveillance and body shame, although none have examined this relationship in the context of all of the variables included in the present model. It may be that the lack of unique variance shared between these variables resulted from the presence of other variables in the model that share common variance. When examining the correlation between these two variables after controlling for internalization of cultural standards of appearance, the correlation became nearly zero and was statistically non-significant; this emphasizes the relevance of internalization of cultural standards of appearance when exploring male-objectification experiences.

Given that body surveillance does not appear to operate in the same way for men as it does for women, it may be that the confidence derived from sexually objectifying experiences validates one's appearance and negates the reason to experience body shame. Despite the fact the direct effect of body surveillance on body shame was non-significant, the positive indirect effect of self-objectification on body shame, as partially mediated through body surveillance (Hypothesis 3), was statistically significant. Although previous studies have examined either the relationship between self-objectification and body shame (e.g.,

Martins et al, 2007), body surveillance and body shame (e.g., Parent & Moradi, 2011), or self-objectification and body surveillance (e.g., Daniel et al., 2013), no known study has tested the aforementioned indirect relationship, which likely was driven by the relative large effect of self-objectification on body surveillance.

There was not a statistically significant indirect effect of sexual objectification experiences on body shame through body surveillance (Hypothesis 9) in the present study. Because the direct effect of sexual objectification experiences on body surveillance was negative, this had a suppressive effect on the indirect relationship of sexual objectification experiences on body shame through body surveillance. To further explore this, a semi-partial correlation between sexual objectification experiences and body shame that controlled for body surveillance was conducted. It was found that the correlation between sexual objectification experiences and body shame increased when controlling for body surveillance. Conceptually, it again appears that sexually objectifying experiences may cause men to feel a greater sense of confidence, which in turn may decrease body surveillance and consequently suppress the effect of sexual objectification experiences on body shame. In this way, it serves as additional evidence that the process of sexual objectification that is experienced by men is different than the process experienced by women. The final variable of consideration is drive for muscularity, which is described below.

### **Predictors of Drive for Muscularity**

In the present study, gender role conflict was significantly and positively related with drive for muscularity (path C), which provides support for the conclusion of McCreary and colleagues (2005), who found that two subscales of the GRCS (i.e.,

success/power/competition and conflict between family and work) had a statistically significant relationship with drive for muscularity. Internalization of cultural standards of appearance also had a significant positive relationship with drive for muscularity (path D); this is consistent with findings by Daniel and Bridges (2010) and Parent and Moradi (2011). However, body surveillance had a significant negative relationship with drive for muscularity (path L), which is inconsistent with findings by Daniel and Bridges (2010, 2012) and Parent and Moradi (2011), who found a positive relationship between these two variables.

Examining the indirect series of relationships between sexually objectifying experiences, body surveillance, and drive for muscularity, it appears that sexually objectifying experiences initially promote a decrease in body surveillance because men may derive validation from the feedback received through being sexually objectified, but then later experience an increase in drive for muscularity. Whereas women are more likely to receive messages that self-worth to cultural expectations of appearance, men are more likely to receive messages that promote their worth based on expressions of power, success, and intelligence, which may explain why sexual objectification experiences do not appear to have the same effect on men as it does for women. However, despite the inverse relationship between sexual objectification experiences and body surveillance, there is also an inverse relationship between body surveillance and drive for muscularity; in total, an increase in sexual objectification experiences results in an increase in drive for muscularity when considering this indirect set of relationships. This is consistent with the positive direct effect between sexual objectification experiences and drive for muscularity. This increase in drive for muscularity may cause men to experience a sense of agency over their masculinity as their desire to achieve greater muscularity increases. Theoretically, this could even have a

system-level role to help preserve patriarchal power structures, given that muscles serve as physical representation of male power (Parent & Moradi, 2011). Hence, the notion that sexually objectifying experiences are purely negative for men is questioned.

Body shame had a significant positive direct effect on drive for muscularity (path M); this result corroborates the findings by Martins and colleagues (2007) who found a relationship between body shame and drive for muscularity for both gay men and heterosexual men, and Parent and Moradi (2011) who found the same relationship in a sample combining both gay and heterosexual men. Michaels, Parent, and Moradi (2013) concluded that body shame had a statistically significant relationship with drive for muscularity with heterosexual men, but not with gay men. However, Daniel and Bridges (2010, 2012) concluded that there was not a relationship between body shame and drive for muscularity in two samples combining gay and heterosexual men; it may be that the findings in these two studies were limited by using only a college-aged sample and relatively small sample sizes in comparison to the present study.

Although not originally hypothesized, statistical modification indices recommended the inclusion of a direct path between sexual objectification experiences and drive for muscularity (path R); this path was both positive and statistically significant. The path was not included in the proposed model because no previous research had examined the link between these two variables. It would be understandable that an increase in the frequency of sexually objectifying experiences leads to an increased drive for muscularity; but this is seemingly contradictory to the inverse relationship between sexual objectification experiences and body surveillance. However, it appears there may be a two-stage process that occurs for men. Although an increase in sexual objectification experiences is related to a

decrease in body surveillance, it appears that this decrease in body surveillance corresponds with an increase in drive for muscularity. The initial decrease in body surveillance may facilitate a sense of validation due to external positive feedback regarding appearance. However, to preserve men's motivation to maintain a muscular appearance, it may be that the decrease in body surveillance then triggers an increased drive for muscularity, which perpetuates men's efforts to express their masculinity through their muscularity. Again, this process may have a systematic byproduct of preserving patriarchal power structures.

The direct effect of self-objectification to drive for muscularity (path J) was statistically significant in the current study. This supports two previous studies that positively linked these variables (Daniel et al., 2013; Martins et al., 2007). However, given the small size of the relationship, the effect of self-objectification on drive for muscularity may be better accounted for by a series of direct and indirect effects through body surveillance and body shame. This conclusion is reflective of the finding that body surveillance (which was positively predicted by self-objectification) had a significant positive indirect effect on drive for muscularity, as partially mediated by body shame (Hypothesis 4).

When considering all of the direct and indirect effects on drive for muscularity, it is important to recognize the restriction of range the variable had in the present study. Despite this restriction of range, it is notable that all of the relationships with drive for muscularity were still statistically significant and highlights the strength of these relationships. Reviewing the Drive for Muscularity Scale, the restricted response pattern of the participants may relate to the type of respondents solicited in this study. The scale heavily includes items that would only be relevant to high-intensity exercisers (e.g., "I think about taking anabolic steroids"), and it is likely that the general audience of respondents in this study may have not

felt that many of the items were relevant to them. In the context of the present study, there is strong evidence that drive for muscularity is relevant to consider when examining how men experience sexual objectification.

The intention of this study was to test the full model that is proposed in objectification theory with a group of men. Multiple negative outcomes are proposed in objectification theory (e.g., depression, disordered eating behavior, and decreased psychosexual functioning), meaning that several other variables could have been selected as the outcome variable in the present study. However, drive for muscularity was an appropriate criterion variable to use in the present study, given that muscularity is a visual representation of masculinity. Furthermore, previous literature emphasizes the examination of drive for muscularity (rather than drive for thinness) with men (Parent & Moradi, 2011).

Taken together, the present study provides mixed support for the use of tenets of objectification theory in understanding men's body image concerns. Although gender role conflict, sexual objectification experiences, internalization of cultural standards of appearance, and body shame appeared to be meaningful predictors of drive for muscularity, multiple variables that were hypothesized to be related to self-objectification and body surveillance were either inversely related or failed to reach statistical significance. Internalization of cultural standards of appearance consistently had moderate effects with other variables in the model, which reinforces the use of this variable when considering men's experiences of sexual objectification.

The purpose for the inclusion of gender role conflict in this study was to provide support for an etiological shift in how objectification theory is applied to the experiences of men. As such, gender role conflict was found to have a significant positive direct effect on

internalization of cultural standards of appearance, self-objectification, body shame, and drive for muscularity, and also had a significant positive relationship with sexual objectification experiences. Although not included in the path analysis, gender role conflict also had a significant positive correlation with body surveillance. Understanding the sociocultural factors that influence men's experience of body image concerns (e.g., gender role conflict), may be helpful to reduce maladaptive behaviors aimed at increasing muscularity. From a systemic perspective, an increased drive for muscularity may serve to partially maintain patriarchal power structures. This may be done through promoting muscular appearance, which partially acts as a physical representation of masculinity. Ultimately, the pattern of results in the present study indicates a need for researchers to modify their conceptual understanding of men's body image experiences to be understood as different from those of women.

### **Clinical Considerations**

Multiple treatment considerations can be made based on the findings of the present study. First, given the positive effect that gender role conflict has on internalization of cultural standards of appearance, it appears relevant to target specific interventions toward the reduction of gender role conflict. This may be done through educating individuals about what gender role conflict is, as well as helping clients develop an awareness of cultural standards of masculinity and how clients internalize and conform to these societal expectations. Because gender role conflict appears to have a strong proximal influence on the male-objectification process, it is important to focus on this as an initial treatment consideration with men internalize sexually objectifying experiences and traditional notions of masculinity. By doing so, discussion can also be had pertaining to how the maintenance

of a muscular appearance promotes a personal sense of agency regarding one's masculinity, and serves to promote a sense of power as a man in a patriarchal society.

The strong influence of internalization of cultural standards of appearance on men's experiences of self-objectification, body surveillance, body shame, and drive for muscularity also warrants close attention in clinical settings. When addressing cultural standards of appearance, it is important to help the client develop an awareness of what these messages are, how these expectations of appearance have been communicated to the client, what messages have become most salient for the client, and how these messages have ultimately linked with the client's own understanding of his worth in a sociocultural context. Once the client has developed this awareness, links can be drawn between how internalized cultural standards of appearance affect the client's body image concerns and drive for muscularity. At this stage, efforts can also be made to help prevent the internalization of these messages.

It is important to acknowledge that it is unlikely that men will present to therapy to specifically address concerns related to body image (Pope et al., 2000); rather, it is more likely that men will present with other forms of psychological distress, which they may not understand are related to concerns tied to a drive for muscularity, sexual objectification, or gender role conflict. Therapists must be mindful to assess for body image concerns, gender role conflict, and the degree to which male clients have internalization of cultural standards of appearance. Similarly, this highlights the need for counseling psychologists to engage in system-level interventions aimed at educating men about societal norms regarding masculinity and appearance. Connections should be drawn about the psychological risks (such as a drive for muscularity) that come from conformity to these norms, while also addressing the male dominance may be perpetuated at a broader level when men engage in

behaviors associated with traditional masculinity (such as striving for a muscular appearance which is maintained through having a high drive for muscularity).

### **Strengths, Limitations, and Future Directions**

The present study makes a unique contribution to the literature regarding the importance of considering the function of gender role conflict when examining drive for muscularity with men. Although this study concludes that objectification theory (as proposed for women) does not fully apply to the experiences of men, a new proximal influence of the male-objectification experience is introduced (i.e., gender role conflict). Furthermore, the sample is robust in size to detect true relationships and is more ethnically diverse compared to many studies of sexual objectification with men. Yet, multiple limitations to the present study warrant consideration.

It is important to recognize that the sample was primarily heterosexual. Although both heterosexual men and sexual minority men are susceptible to societal messages related to gender role, gay men also are more likely to receive messages from the gay community that promote a separate standard of appearance that also focuses on a drive for thinness. It would have been ideal to examine the moderating effect of sexual identity but there were an insufficient number of sexual minority men in the study to conduct a separate path model. In future research, it would be interesting to examine whether gender role conflict makes a meaningful contribution to understanding the sexual objectification of men beyond the effect of childhood gender nonconformity and internalized homophobia, two variables that emerged as important in work done by Wiseman and Moradi (2010). It would also be interesting to examine the sexual objectification experiences of heterosexual and gay men in two identical models to understand whether the experiences of each group are similar or different.

As an additional limitation, age was not collected in the present study. Although research suggests that the mean age of participants (male and female combined) who respond to surveys on MTurk is 32.8 (Buhrmester et al., 2011), the mean age and representativeness of the current sample cannot be verified. This also limits the ability to determine whether age has a moderating effect in the present study, as previous research with men has found that older men are less likely to experience body dissatisfaction compared to younger men (Murray & Lewis, 2012). It is also important to recognize that the external validity is limited by the fact that a non-random convenience sample was used. The sample was Internet-based, and may have been affected by the fact that only users of MTurk were able to access the study. Although the ethnic composition of this sample is more representative than previous studies, future research in this area may wish to examine the unique experiences of specific groups or examine a moderating effect of ethnicity as previous studies indicate that differences may exist between groups, especially for Asian men (both gay and heterosexual; Drummond, 2005; Schwartz et al., 2010).

Considering measurement issues, an additional limitation of this study is that body surveillance and body shame are treated as two independent constructs. Although this follows a tradition of many researchers who study sexual objectification, it is important to recognize that body surveillance and body shame are both subscales of a composite scale conceptualized as objectified body consciousness. Although the current study provided evidence of both body surveillance and body shame as unidimensional constructs, confirmatory factor analyses may reveal that these operate as conceptually unique constructs that are not sub-factor of a second-order factor for men. Furthermore, it is important to note that two items were dropped from both the OBCS-Body Shame and OBCS-Body

Surveillance because of poor factor loadings; this is further suggestive of the need to better understand the structure of these scales when used with men, as it may be that the measure needs to be modified when used with men.

Several statistical limitations must be understood when interpreting the results of this study. When examining outliers, a cut-off of  $|3|$  was used to remove cases per Kline (2011); however, Tabachnick and Fidell (2007) suggested a less stringent cut-off of  $|3.29|$ , which would have helped retain additional cases for analysis. Furthermore, cases were dropped solely based on statistical indicators, rather than considering whether the outliers truly had a meaningful negative effect on the model first and determining the reason why the case may be an outlier. Additionally, the distribution of scores for all variables was not observed until the end of the data screening process; by observing these at the beginning of data screening, and considering the use of transformations, it may have been that additional cases would have been retained for analysis. Finally, from a statistical perspective, the analyses would have likely been more homogenous if only heterosexual men were examined; however, this would also limit the generalizability of the findings.

More evidence needs to be established regarding whether self-objectification is in fact relevant to study with men, as the variable did not behave as it was expected to in the present study. To do so, a qualitative methodology may help provide better insight into what self-objectification looks like for men, and the relation that this process may or may not have to systemic power structures. Moving forward, in the literature, it will also be important to develop further support for the relevance of self-objectification and body surveillance, especially in light of the strong influence of internalization of cultural standards of appearance studying men's body image concern. Additionally, it seems important for

researchers to more thoroughly examine predictors of internalization of cultural standards of appearance. Examples include exposure to media and expectations of friends and family regarding appearance. It may also be relevant to study additional criterion variables beyond drive for muscularity, such as eating behavior, depression, or sexual dysfunction to more fully understand the consequences of male-objectification experiences. Finally, the question remains of whether it is accurate to describe the process that was outlined in the present study as a manifestation of what is traditionally understood as objectification theory, especially given that the process demonstrated in the present model appears to perpetuate male social dominance. Indeed, this contradicts the very purpose of objectification theory: to explain the consequences women experience because of oppression caused by men as a group.

The present study supports the notion that an etiological shift is necessary when considering the sexual objectification of men, and gender role conflict is an initial step toward better understanding the distal influences that affect this process. However, objectification theory was originally written to expose the consequences of patriarchal power structures on the mental health of women. Although some mechanisms of the proposed objectification process that have shown validity with women also operate for men based on the study results, the findings of the present study question whether objectification processes operate differently, and have a different meaning, for men and women. Taken together, it is clear that sociocultural messages of appearance negatively affect the well being of both men and women, and future research can serve to better clarify the unique processes experienced by both men and women in a Western context.

Table 1

*Means, Standard Deviations, Correlations, Covariances, Variances, Minimum Scores, Maximum Scores, and 95% Mean Confidence Intervals of all Variables (N = 525)*

Scale	Mean	SD	Min	Max	95% CI	BMI	GRCS	ISOS	SATAQ-I	MASO	Shame	Surv	DMS
BMI	26.90	6.41	10.19	78.91	(9.64, 10.74)	<u>41.14</u>	.01	-.06	.04	-.00	.14**	.00	-.09*
GRCS	127.23	31.24	42.00	218.00	(124.56, 129.90)	1.24	<u>975.72</u>	.17**	.41**	.24**	.42**	.21**	.40**
ISOS	1.84	.67	1.00	4.00	(1.78, 1.90)	-.25	3.61	<u>.45</u>	.24**	.05	.20**	-.02	.33**
SATAQ	22.40	6.96	8.00	40.00	(21.81, 22.99)	1.78	90.10	1.13	<u>48.47</u>	.38**	.50**	.45**	.56**
MASO	-.30	1.12	-3.92	3.30	(-0.40, -0.20)	-.01	8.36	.04	2.94	<u>1.26</u>	.26**	.39**	.27**
Shame	3.42	1.44	7.00	7.00	(3.30, 3.54)	1.26	18.86	.28	5.05	.41	<u>2.08</u>	.25**	.42**
Surv	3.84	1.24	1.00	7.00	(3.74, 3.94)	.02	7.99	-.01	3.85	.55	.45	<u>1.53</u>	.18**
DMS	2.94	.96	1.00	5.87	(2.86, 3.02)	-.58	12.04	.21	3.77	.29	.59	.22	<u>.93</u>

*Note.* 95% CI = 95% confidence interval for population estimate of the mean. BMI = Body Mass Index; GRCS = Gender Role Conflict Scale; ISOS = Interpersonal Sexual Objectification Scale; SATAQ-I = Sociocultural Attitudes Toward Appearance Questionnaire-Internalization; MASO = Male Assessment of Self-Objectification; Shame = Objectified Body Consciousness Scale-Body Shame; Surv = Objectified Body Consciousness Scale-Body Surveillance Subscale; DMS = Drive for Muscularity Scale. Diagonal with underlined coefficients represents item variances; data above diagonal represents correlations; data below diagonal represents covariances. \* =  $p < .05$  and \*\* =  $p < .01$ .

Table 2

*Structural Characteristics of Instruments*

Scale	N	# Items	KMO	Bartlett's Test	% Explained	$\alpha$
GRCS	525	37	.89	12,096.48(666)*	55.5%	.95
ISOS	525	15	.94	6,212.99(105)*	50.3%	.94
SATAQ	525	8	.89	1,964.53(28)*	48.0%	.87
MASO	525	18	.91	5,058.97(153)*	49.3%	.90 & .89 <sup>+</sup>
Shame	484	6	.86	1,357.46(28)*	52.8%	.87
Surv	515	6	.82	1,342.64(28)*	44.6%	.83
DMS	525	15	.88	4,850.44(105)*	35.4%	.89

*Note.* All scales aside from MASO yielded a single-factor solution, MASO has two-factor solution because it is scored as a difference score between two scales. + .90 = competency subscale and .89 = appearance subscale. KMO = Kaiser-Meyer-Olkin;  $\alpha$  = Cronbach's alpha; GRCS = Gender Role Conflict Scale; ISOS = Interpersonal Sexual Objectification Scale; SATAQ-I = Sociocultural Attitudes Toward Appearance Questionnaire-Internalization; MASO = Male Assessment of Self-Objectification; Shame = Objectified Body Consciousness Scale-Body Shame; Surv = Objectified Body Consciousness Scale-Body Surveillance Subscale; DMS = Drive for Muscularity Scale. \* =  $p < .05$ .

Table 3  
*Objectified Body Consciousness Scale-Body Surveillance Item Stems and Coefficients (N = 503)*

Item Stem	
1. I rarely think about how I look	.23(.70)
2. I think it is more important that my clothes are comfortable than whether they look good on me	.20(.66)
3. I think more about how my body feels than how my body looks	.22(.68)
4. I rarely compare how I look with how other people look	.24(.70)
5. I rarely worry about how I look to other people	.19(.64)
6. I am more concerned with what my body can do than how it looks	.17(.62)

*Note.* Pattern coefficients are followed by structure coefficients in parentheses.

Table 4

*Objectified Body Consciousness Scale-Body Shame Item Stems and Coefficients (N = 484)*

Item Stem	
1. When I can't control my weight, I feel like something must be wrong with me	.16(.67)
2. I feel ashamed of myself when I haven't made the effort to look my best	.17(.72)
3. I feel like I must be a bad person when I don't look as good as I could	.26(.78)
4. I would be ashamed for people to know what I really weigh	.13(.64)
5. When I'm not exercising enough, I question whether I am a good enough person	.17(.72)
6. When I'm not the size I think I should be, I feel ashamed	.31(.82)

*Note.* Pattern coefficients are followed by structure coefficients in parentheses.

Table 5

*Multivariate Factors Test Between Subject Effects for Heterosexual vs. Non-Heterosexual*

Scale	<u>Heterosexual</u>		<u>Non-Hetero.</u>		df	F	p	partial $\eta^2$	Observed Power
	Mean	SD	Mean	SD					
GRCS	127.75	30.45	122.61	38.05	1	1.24	ns	.00	.20
ISOS	1.83	0.66	1.86	0.74	1	.11	ns	.00	.06
SATAQ	22.14	6.85	24.75	7.63	1	6.52	< .05	.01	.72
MASO	-0.31	1.11	-0.15	1.24	1	.95	ns	.00	.16
Shame	3.34	1.40	4.11	1.66	1	13.39	< .001	.03	.96
Surv	3.79	1.21	4.32	1.38	1	8.80	< .01	.02	.84
DMS	3.67	1.22	3.70	1.24	1	.02	ns	.00	.05

*Note.* GRCS = Gender Role Conflict Scale; ISOS = Interpersonal Sexual Objectification Scale; SATAQ-I = Sociocultural Attitudes Toward Appearance Questionnaire-Internalization; MASO = Male Assessment of Self-Objectification; Shame = Objectified Body Consciousness Scale-Body Shame; Surv = Objectified Body Consciousness Scale-Body Surveillance Subscale; DMS = Drive for Muscularity Scale; ns = non-significant.

Table 6

*Parameter Estimates and Standard Errors for the Final Model*

Path	S. Estimate	U. Estimate	SE	<i>p</i> -value
GRCS → SATAQ-I	.38	.09	.01	< .001
GRCS → MASO	.10	.00	.00	< .05
GRCS → Shame	.23	.01	.00	< .001
GRCS → DMS	.15	.01	.00	< .001
ISOS → SATAQ-I	.18	1.84	.41	< .001
ISOS → MASO	-.05	-.09	.07	ns
ISOS → Surv	-.12	-.22	.07	< .01
ISOS → Shame	.17	.37	.08	< .001
ISOS → DMS	.15	.22	.05	< .001
BMI → Shame	.13	.03	.01	< .001
BMI → DMS	-.12	-.02	.01	< .001
SATAQ-I → MASO	.35	.06	.01	< .001
SATAQ-I → Surv	.38	.07	.01	< .001
SATAQ-I → Shame	.32	.07	.01	< .001
SATAQ → DMS	.42	.06	.01	< .001
MASO → Surv	.26	.28	.04	< .001
MASO → Shame	.06	.07	.05	ns
MASO → DMS	.08	.07	.03	< .05
Surv → Shame	.04	.05	.05	ns
Surv → DMS	-.09	-.07	.03	< .05
Shame → DMS	.13	.08	.03	< .01

*Note.* S. Estimate = standardized estimate; U. Estimate = unstandardized estimate; GRCS = Gender Role Conflict Scale; ISOS = Interpersonal Sexual Objectification Scale; SATAQ-I = Sociocultural Attitudes Toward Appearance Questionnaire-Internalization; MASO = Male Assessment of Self-Objectification; Shame = Objectified Body Consciousness Scale-Body Shame; Surv = Objectified Body Consciousness Scale-Body Surveillance Subscale; DMS = Drive for Muscularity Scale; ns = non-significant.

Table 7

*Bootstrap Analysis of Magnitude and Significance of Indirect Effects of Final Model*

Hypothesis	Predictor	Mediator	Criterion	Standardized Indirect Effect		Bootstrap Estimate		95% Confidence Interval	
				$\beta$	SE	B	SE	Lower Bound	Upper Bound
1 (A x H)	GRCS	SATAQ-I	MASO	.139	.022	.005	.001	.004	.007*
2 (H x I)	SATAQ-I	MASO	Surv	.099	.018	.017	.003	.012	.024*
3 (I x K)	MASO	Surv	Shame	.051	.018	.065	.022	.025	.112*
4 (K x M)	Surv	Shame	DMS	.070	.017	.054	.014	.030	.084*
5 (N x F)	ISOS	SATAQ-I	Surv	.116	.022	.215	.041	.138	.297*
6 (N x E)	ISOS	SATAQ-I	Shame	.102	.019	.216	.042	.140	.310*
7 (N x H)	ISOS	SATAQ-I	MASO	.094	.019	.158	.032	.102	.229*
8 (O x I)	ISOS	MASO	Surv	.020	.017	.038	.032	-.025	.100
9 (P x K)	ISOS	Surv	Shame	-.003	.008	-.006	.018	-.041	.029

*Note.* GRCS = Gender Role Conflict Scale; ISOS = Interpersonal Sexual Objectification Scale; SATAQ-I = Sociocultural Attitudes Toward Appearance Questionnaire-Internalization; MASO = Male Assessment of Self-Objectification; Shame = Objectified Body Consciousness Scale-Body Shame; Surv = Objectified Body Consciousness Scale-Body Surveillance Subscale; DMS = Drive for Muscularity Scale. \* =  $p < .01$ .

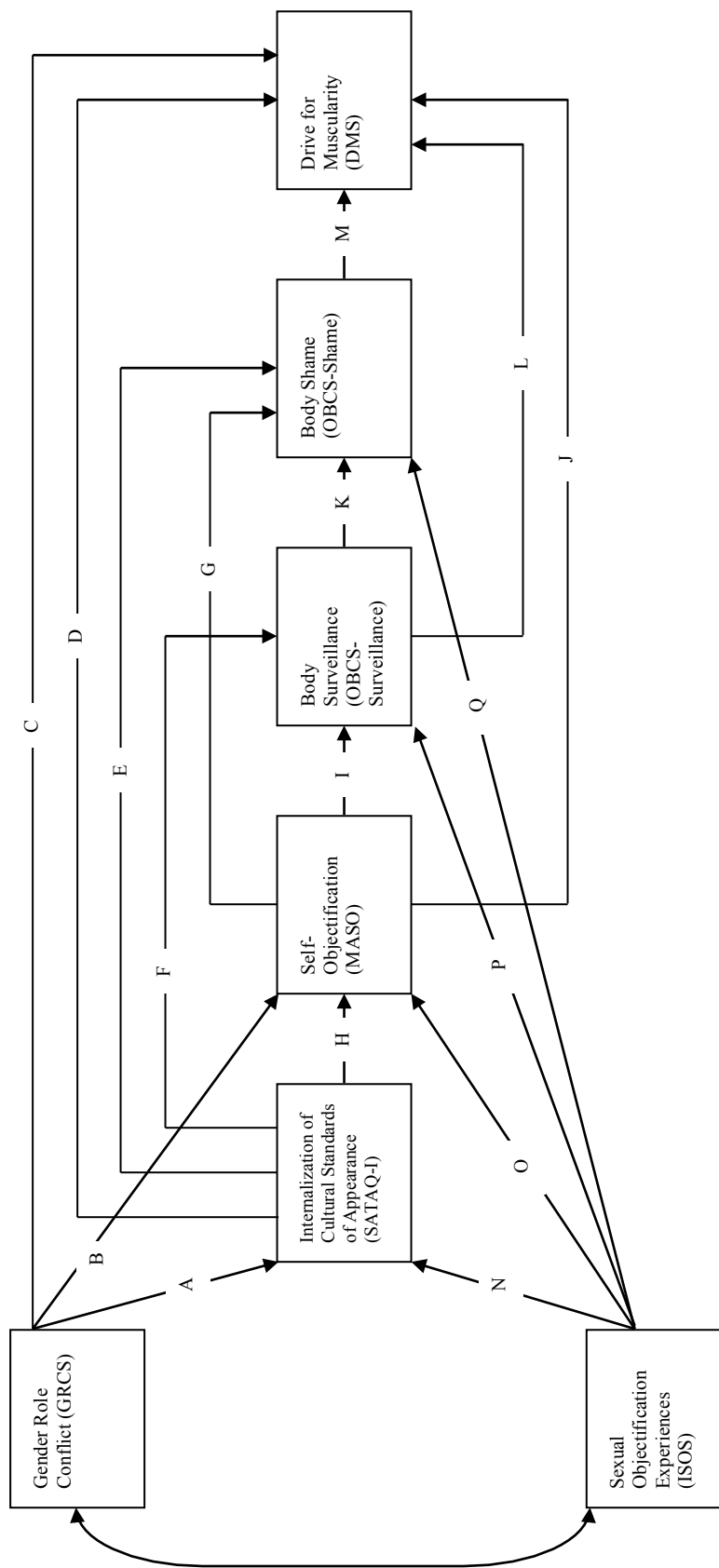


Figure 1. Conceptual model of proposed direct and indirect relationships.

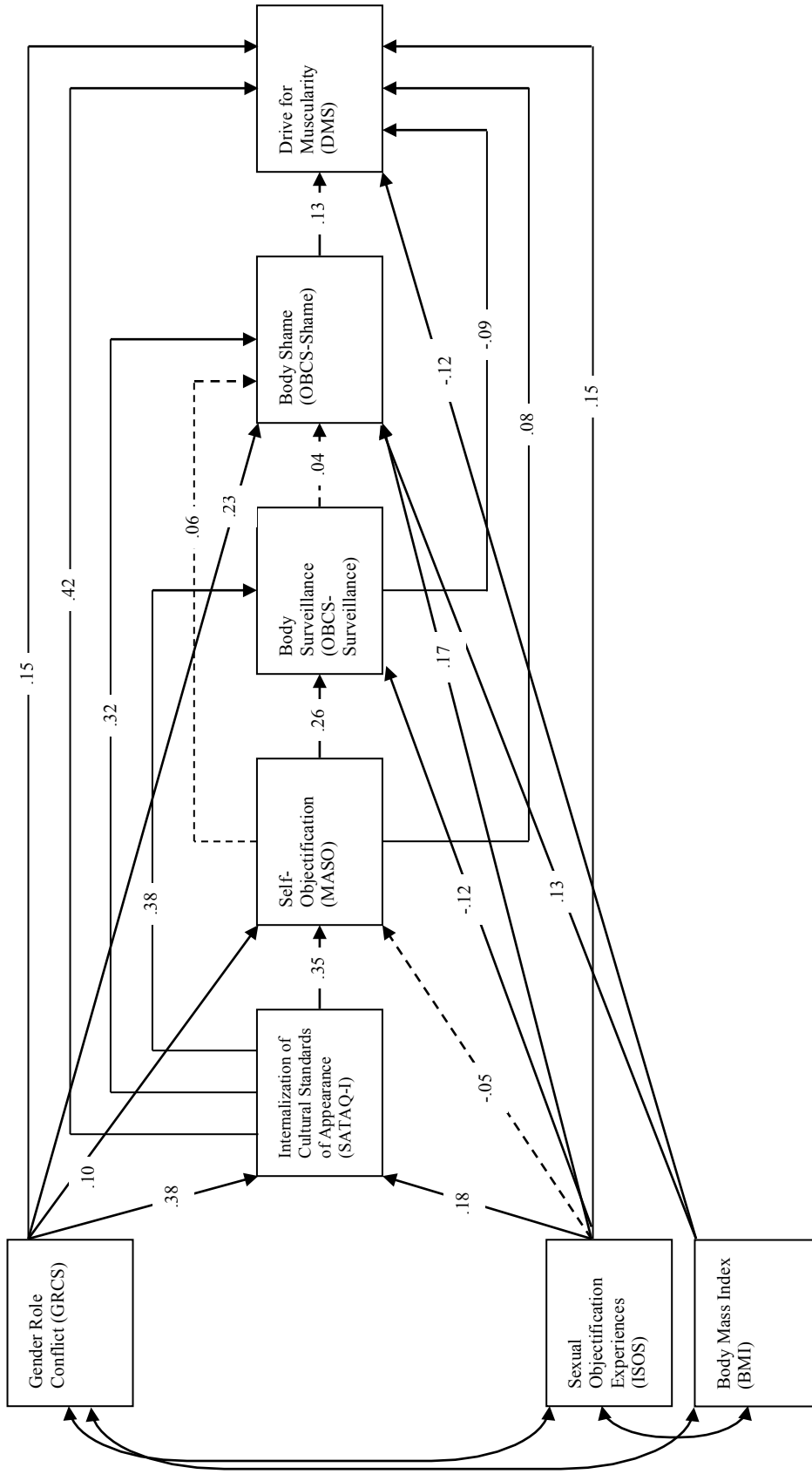
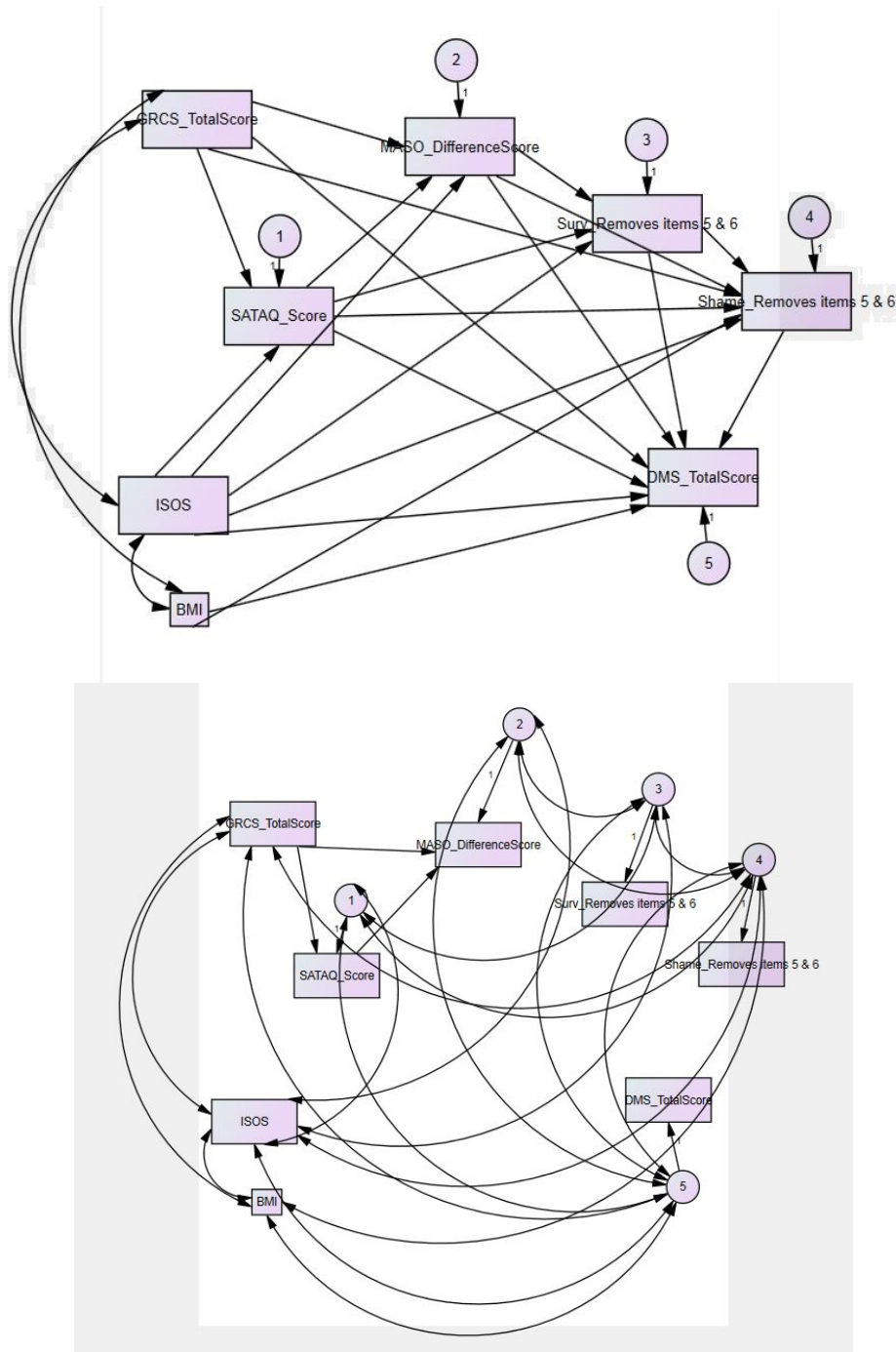


Figure 2. Final model of direct and indirect effects. Values represent standardized coefficients. Note that paths between gender role conflict and body shame, and sexual objectification experiences and drive for muscularity, were not originally hypothesized but were later added. Solid lines represent significant paths at  $p < .05^*$ ; dashed lines represent non-significant paths.



*Figure 3.* Example diagram of test of indirect effects. The top diagram represents the full path model that was retained after model modification; note that all relationships between variables (aside from exogenous variables) are represented with direct paths. The bottom diagram represents Hypothesis 1, in which direct paths are used to estimate the indirect relationship of gender role conflict onto self-objectification, as partially mediated by internalization of cultural standards of appearance; note that the remaining paths not associated with this relationship are represented with correlations rather than direct paths.

APPENDIX A

GENDER ROLE CONFLICT SCALE

---

Instructions: In the space to the left of each sentence below, write the number that most closely represents the degree that you Agree or Disagree with the statement. There is no right or wrong answer to each statement; your own reaction is what is asked for.

---

Strongly						Strongly
Disagree						Agree
1	2	3	4	5	6	

---

1. \_\_\_\_ Moving up the career ladder is important to me.
2. \_\_\_\_ I have difficulty telling others I care about them.
3. \_\_\_\_ Verbally expressing my love to another man is difficult for me.
4. \_\_\_\_ I feel torn between my hectic work schedule and caring for my health.
5. \_\_\_\_ Making money is part of my idea of being a successful man.
6. \_\_\_\_ Strong emotions are difficult for me to understand.
7. \_\_\_\_ Affection with other men makes me tense.
8. \_\_\_\_ I sometimes define my personal value by my career success.
9. \_\_\_\_ Expressing feelings makes me feel open to attack by other people.
10. \_\_\_\_ Expressing my emotions to other men is risky.
11. \_\_\_\_ My career, job, or school affects the quality of my leisure or family life.
12. \_\_\_\_ I evaluate other people's value by their level of achievement and success.
13. \_\_\_\_ Talking about my feelings during sexual relations is difficult for me.

14. \_\_\_\_ I worry about failing and how it affects my doing well as a man.
15. \_\_\_\_ I have difficulty expressing my emotional needs to my partner.
16. \_\_\_\_ Men who touch other men make me uncomfortable.
17. \_\_\_\_ Finding time to relax is difficult for me.
18. \_\_\_\_ Doing well all the time is important to me.
19. \_\_\_\_ I have difficulty expressing my tender feelings.
20. \_\_\_\_ Hugging other men is difficult for me.
21. \_\_\_\_ I often feel that I need to be in charge of those around me.
22. \_\_\_\_ Telling others of my strong feelings is not part of my sexual behavior.
23. \_\_\_\_ Competing with others is the best way to succeed.
24. \_\_\_\_ Winning is a measure of my value and personal worth.
25. \_\_\_\_ I often have trouble finding words that describe how I am feeling.
26. \_\_\_\_ I am sometimes hesitant to show my affection to men because of how others might perceive me.
27. \_\_\_\_ My needs to work or study keep me from my family or leisure more than would like.
28. \_\_\_\_ I strive to be more successful than others.
29. \_\_\_\_ I do not like to show my emotions to other people.
30. \_\_\_\_ Telling my partner my feelings about him/her during sex is difficult for me.
31. \_\_\_\_ My work or school often disrupts other parts of my life (home, family, health leisure).
32. \_\_\_\_ I am often concerned about how others evaluate my performance at work or

school.

- 33. \_\_\_\_ Being very personal with other men makes me feel uncomfortable.
- 34. \_\_\_\_ Being smarter or physically stronger than other men is important to me.
- 35. \_\_\_\_ Men who are overly friendly to me make me wonder about their sexual preference (men or women).
- 36. \_\_\_\_ Overwork and stress caused by a need to achieve on the job or in school, affects/hurts my life.
- 37. \_\_\_\_ I like to feel superior to other people.

## APPENDIX B

### PERMISSION FOR USE OF GENDER ROLE CONFLICT SCALE

---

On Sep 26, 2013, at 1:17 PM, Jimoneil1@aol.com wrote:

Chris:

I got the release form. The best to you with your research.

Jim

In a message dated 9/26/2013 12:32:54 P.M. Eastern Daylight Time, cmdwyb@mail.umkc.edu writes:

Dear Dr. O'Neil,

Under the direction of Dr. Laurel Watson, I would like to request the use of the Gender Role Conflict Scale in my dissertation, in which I intend to examine the relationship between gender role conflict and multiple variables relevant to objectification theory. Attached is a release form for use that I received from a colleague. Please inform me of whether you approve of the use of your scale, and do not hesitate to follow-up with questions. Thank you and I look forward to this project.

Kindly,  
Chris

Christopher M. Davids  
Counseling Psychology Doctoral Candidate

University of Missouri-Kansas City  
School of Education  
5100 Rockhill Road, Suite 215  
Kansas City, MO 64110

720-771-6918  
christopher.davids@mail.umkc.edu

APPENDIX C

INTERPERSONAL SEXUAL OBJECTIFICATION SCALE

---

Please think carefully about your experiences in **the past year** as you answer the questions below.

**1. How often have you been whistled at while walking down a street?**

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Almost Always

**2. How often have you noticed someone staring at your body when you are talking to them?**

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Almost Always

**3. How often have you felt like or known that someone was evaluating your physical appearance?**

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Almost Always

**4. How often have you felt that someone was staring at your body?**

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Almost Always

**5. How often have you noticed someone leering at your body?**

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Almost Always

**6. How often have you heard a rude, sexual remark made about your body?**

1	2	3	4	5
Never	Rarely	Occasionally	Frequently	Almost Always

**7. How often have you been touched or fondled against your will?**

1	2	3	4	5
---	---	---	---	---

- |  |       |        |              |            |               |
|--|-------|--------|--------------|------------|---------------|
|  | Never | Rarely | Occasionally | Frequently | Almost Always |
|--|-------|--------|--------------|------------|---------------|
- 8. How often have you been the victim of sexual harassment (on the job, in school, etc)?**
- |  |       |        |              |            |               |
|--|-------|--------|--------------|------------|---------------|
|  | 1     | 2      | 3            | 4          | 5             |
|  | Never | Rarely | Occasionally | Frequently | Almost Always |
- 9. How often have you been honked at when you were walking down the street?**
- |  |       |        |              |            |               |
|--|-------|--------|--------------|------------|---------------|
|  | 1     | 2      | 3            | 4          | 5             |
|  | Never | Rarely | Occasionally | Frequently | Almost Always |
- 10. How often have you seen someone stare at one or more of your body parts?**
- |  |       |        |              |            |               |
|--|-------|--------|--------------|------------|---------------|
|  | 1     | 2      | 3            | 4          | 5             |
|  | Never | Rarely | Occasionally | Frequently | Almost Always |
- 11. How often have you overheard inappropriate sexual comments made about your body?**
- |  |       |        |              |            |               |
|--|-------|--------|--------------|------------|---------------|
|  | 1     | 2      | 3            | 4          | 5             |
|  | Never | Rarely | Occasionally | Frequently | Almost Always |
- 12. How often have you noticed that someone was not listening to what you were saying, but instead gazing at your body or a body part?**
- |  |       |        |              |            |               |
|--|-------|--------|--------------|------------|---------------|
|  | 1     | 2      | 3            | 4          | 5             |
|  | Never | Rarely | Occasionally | Frequently | Almost Always |
- 13. How often have you heard someone make sexual comments or innuendos when noticing your body?**
- |  |       |        |              |            |               |
|--|-------|--------|--------------|------------|---------------|
|  | 1     | 2      | 3            | 4          | 5             |
|  | Never | Rarely | Occasionally | Frequently | Almost Always |
- 14. How often has someone grabbed or pinched one of your private body areas against your will?**
- |  |       |        |              |            |               |
|--|-------|--------|--------------|------------|---------------|
|  | 1     | 2      | 3            | 4          | 5             |
|  | Never | Rarely | Occasionally | Frequently | Almost Always |
- 15. How often has someone made a degrading sexual gesture towards you?**
- |  |   |   |   |   |   |
|--|---|---|---|---|---|
|  | 1 | 2 | 3 | 4 | 5 |
|--|---|---|---|---|---|

Never      Rarely      Occasionally      Frequently      Almost Always

**16. How often have you seen degrading images of men portrayed by the media?**

1                      2                      3                      4                      5

Never      Rarely      Occasionally      Frequently      Almost Always

**17. How often have you seen degrading image of men of color portrayed by the media?**

1                      2                      3                      4                      5

Never      Rarely      Occasionally      Frequently      Almost Always

APPENDIX D

MALE ASSESSMENT OF SELF-OBJECTIFICATION

**DIRECTIONS:** We are interested in how men think about their bodies. The items below identify 18 different attributes. We would like you to rate these image and performance attributes based on how **IMPORTANT** they are in the way you view your body and its abilities.

*NOTE:* It does not matter if you're satisfied or not with each attribute, but rather how **IMPORTANT** each attribute is in the way you view your body. For example, energy level can have a great impact on the way you view your body regardless of whether you consider yourself have a lot of energy, little energy, or any level in between.

<i>Attribute</i>	<i>Not at all</i>						<i>Very</i>	
	<i>Important</i>							
	0	1	2	3	4	5	6	
1. Upper Arm Diameter	0	1	2	3	4	5	6	
2. Flexibility	0	1	2	3	4	5	6	
3. Endurance (e.g., stamina)	0	1	2	3	4	5	6	
4. Coordination	0	1	2	3	4	5	6	
5. Body Weight	0	1	2	3	4	5	6	
6. Balance	0	1	2	3	4	5	6	
7. Stomach Appearance	0	1	2	3	4	5	6	
8. Chest size (e.g. measurements)	0	1	2	3	4	5	6	
9. Penis size (e.g., length and girth)	0	1	2	3	4	5	6	
10. Agility	0	1	2	3	4	5	6	
11. Head hair (balding, thinning, graying, etc.)	0	1	2	3	4	5	6	
12. Physical attractiveness	0	1	2	3	4	5	6	
13. Skin tone (NOT race, but shades – pale, tan, brown, etc.)	0	1	2	3	4	5	6	
14. Height	0	1	2	3	4	5	6	
15. Energy level	0	1	2	3	4	5	6	
16. Reflexes	0	1	2	3	4	5	6	

<i>Attribute</i>	<i>Not at all</i> <span style="float: right;"><i>Very</i></span> <i>Important</i> <span style="float: right;"><i>Important</i></span>						
17. Complexion (including facial or body breakouts)	0	1	2	3	4	5	6
18. Teeth (e.g., color, size, straightness, spacing, etc.)	0	1	2	3	4	5	6

APPENDIX E

SOCIOCULTURAL ATTITUDES TOWARDS APPEARANCE QUESTIONNAIRE-

INTERNALIZATION SUBSCALE

Please read each of the following items and circle the number that best reflects your agreement with the statement.

	1	2	3	4	5
	Completely Disagree		Neither agree Nor Disagree		Completely Agree
1. Men who appear in TV shows and movies project the type of appearance that I see as my goal.					
	1	2	3	4	5
2. I believe that clothes look better on muscular/fit models.					
	1	2	3	4	5
3. Music videos that show muscular/fit men make me wish that I were muscular/fit.					
	1	2	3	4	5
4. I do not wish to look like the models in the magazines.					
	1	2	3	4	5
5. I tend to compare my body to people in magazines and on TV.					
	1	2	3	4	5
6. Photographs of muscular/fit men make me wish that I were muscular/fit.					
	1	2	3	4	5
7. I wish I looked like a bodybuilder.					
	1	2	3	4	5
8. I often read magazines like <i>Men's Fitness</i> and <i>Muscle &amp; Fitness</i> and compare my appearance to the models.					
	1	2	3	4	5

APPENDIX F

OBJECTIFIED BODIES CONSCIOUSNESS SCALE

INSTRUCTIONS:

Circle the number that corresponds to how much you agree with each of the statements on the following pages.

Circle NA only if the statement does not apply to you. Do not circle NA if you don't agree with a statement.

For example, if the statement says "When I am happy, I feel like singing" and you don't feel like singing when you are happy, then you would circle one of the disagree choices. You would only circle NA if you were never happy.

1	2	3	4	5	6	7
N/A						
Strongly Disagree			Neither agree Nor Disagree		Strongly Agree	Does Not Apply

Body Shame Subscale

1. When I can't control my weight, I feel like something must be wrong with me
 

1	2	3	4	5	6	7	NA
---	---	---	---	---	---	---	----
  
2. I feel ashamed of myself when I haven't made the effort to look my best
 

1	2	3	4	5	6	7	NA
---	---	---	---	---	---	---	----
  
3. I feel like I must be a bad person when I don't look as good as I could
 

1	2	3	4	5	6	7	NA
---	---	---	---	---	---	---	----
  
4. I would be ashamed for people to know what I really weigh
 

1	2	3	4	5	6	7	NA
---	---	---	---	---	---	---	----
  
5. Even when I can't control my weight, I think I'm an okay person
 

1	2	3	4	5	6	7	NA
---	---	---	---	---	---	---	----
  
6. I never worry that something is wrong with me when I am not exercising as much as I should

	1	2	3	4	5	6	7	NA
7. When I'm not exercising enough, I question whether I am a good enough person								
	1	2	3	4	5	6	7	NA
8. When I'm not the size I think I should be, I feel ashamed								
	1	2	3	4	5	6	7	NA

#### Surveillance Subscale

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

## APPENDIX G

### DRIVE FOR MUSCULARITY SCALE

---

Please respond to each item using the following scale: 1 = always; 6 = never

1. I wish I were more muscular.
2. I lift weights to build more muscle.
3. I use protein or energy supplements.
4. I drink weight gain or protein shakes.
5. I try to consume as many calories as I can in a day.
6. I feel guilty if I miss a weight-training session.
7. I think I would feel more confident if I had more muscle mass.
8. Other people think I work out with weights too often.
9. I think I would look better if I gained 10 pounds in bulk.
10. I think about taking anabolic steroids.
11. I think I would feel stronger if I gained a little more muscle mass.
12. I think that my weight-training schedule interferes with other aspects of my life.
13. I think that my arms are not muscular enough.
14. I think that my chest is not muscular enough.
15. I think that my legs are not muscular enough.

## APPENDIX H

### DEMOGRAPHIC QUESTIONNAIRE

---

Please indicate your sex:

- Female
- Male
- Transgender MtF
- Transgender FtM

Please indicate your sexual orientation:

- Gay/ Lesbian
- Bisexual
- Queer
- Questioning
- Pan/Omnisexual
- Straight
- Other

Please select your ethnicity:

- African-American
- Asian/ Asian-American
- European-American/ Caucasian
- Hispanic/ Latino
- Native American
- Pacific Islander
- Bi/ Multiracial
- Other (please specify)

Please specify your relationship status:

- Single
- Dating
- Partnered
- Married
- Divorced
- Separated
- Widowed

Select the average income level of your immediate family:

- \$25,000 or below
- \$25,001 - \$35,000
- \$35,001 - \$45,000
- \$45,001 - \$55,000

\$55,001 - \$65,000  
\$65,001 - \$75,000  
\$75,001 - \$85,000  
\$85,001 - \$95,000  
\$95,001 - \$105,000  
\$105,001 and above

Select the item that most accurately depicts the amount of time you spend exercising/  
working  
out in an average week:

None  
Less than 1 hour  
1 – 2 hours  
2 – 3 hours  
3 – 4 hours  
Over 4 hours

Select the item that most accurately depicts your highest level of education:

Some High School/No Diploma  
High School Diploma  
GED  
Vocational or Trade School  
Some College/No Degree  
Associates Degree  
Bachelor's Degree (Ex: BA, BS, AB, BSW)  
Master's Degree (Ex: MA, MS, MSW, MPH, MEd)  
Doctorate Degree (Ex: Ph.D., Ed.D., Sc.D., DA, DB, DSW)  
Professional Degree (Ex: JD, MD, DO, DDS, DVM, PsyD)

List your current weight in pounds:

List your height in inches (e.g., 5 feet, 5 inches = 65 inches):

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## VITA

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