Exploring the Mediating Role of Rumination in the Relationship between Objectification and Psychological Burden among Young Females

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ABSTRACT

The current research aimed to examine the impact of sexual and self-objectification on psychological burden among young females. The study also explored the mediating role of rumination in the relationship between sexual and self-objectification and psychological burden. Data was collected from 211 young females by using the purposive sampling technique. Ruminative Response Scale, Depression, Anxiety and Stress Scale 21, Self-Objectification Questionnaire, and Interpersonal Sexual Objectification Scale were used in this study. To analyze the data, SPSS and Process Macr were used. Results revealed that there was a significant impact of self-objectification and sexual objectification on stress, anxiety, and depression in young females. Further, results revealed that rumination plays a mediating role in the relationship between self and sexual objectification and psychological burden. Significant differences were found between unmarried and married females in the scores of sexual objectification but there was no difference in the scores of self-objectification. The results pave the way for further research into the other mechanisms by which objectification leads to psychological burden. Future studies could explore long-term effects, potential resilience factors, and effective interventions.

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1. Introduction

According to Smolak and Murnen (2011), the sexualization of women can be elaborated as a communal custom. Instead of being seen as distinct beings with their imaginations, desires, and movements, women and girls in Western culture are seen as nothing more than simple bodies or sexual objects to be assessed and used by others. "Objectification", philosopher Kant (1996) said that, is the process of dehumanizing individuals to the point where they begin to see themselves as objects. Bartky (1990) explained that erotic objectification causes a female's personality to become divorced from her physical attributes and reduces her to a mere commodity to be consumed by others. A woman's identity is essentially diminished when society elevates her appearance at the expense of her other attributes, such as her ideas and feelings. In short, her appearance starts to take less precedence over who she is. According to Bartky, sexual objectification is harsh since it partially discriminates against women and occurs freely in them, which is not what they desire. The Objectification hypothesis was created by Fredrickson and Roberts (1997) in response to the abundance of evidence about sexual objectification. This theory offers a well-defined framework for investigating how sexual objectification affects young women's day-to-day functioning. Theoretically, self-objectification is the primary psychologically detrimental outcome of sexual objectification.
personality as opposed to a first-person perspective is known as objectification of the self. Examples of this include situations in which women and teenagers place greater importance on how other people perceive them than on how they feel about themselves or what more they can do to feel for themselves. Objectification of self happens when people view themselves as objects that were created to be observed and valued solely for their appearance. Girls who engage in self-objectification may feel a variety of negative consequences, such as sadness, reduced cognitive function, reduced physical performance, 2 flow, eating disorders, and other symptoms (Calogero et al., 2011). According to correlational studies, self-objectification is frequently linked to depression, sexual dysfunction, body shame, appearance anxiety, positive attitudes toward plastic surgery, and other types of disordered eating (Tiggemann & Williams, 2012). The theory of sexual objectification (OT) offers a framework for understanding psychological reactions (such typical body criticism) that are unique to female-bodied individuals and result from this objectification over the course of their lives (Fredrickson & Roberts, 1997).

Depression is a mental illness that is characterized by a certain collection of symptoms that are present daily for at least two weeks. Numerous symptoms may exist, such as a person dropping attentiveness in actions that they used to appreciate, having trouble falling asleep, feeling exhausted, and experiencing feelings of worthlessness, despair, and desperation. However, these symptoms cannot be the only ones that indicate depression in an individual (Levin et al., 2007). Notably, depression is assessed as a sensitive condition; yet, it also affects an individual's capacity for administrative work, insight, deliberation, and comprehension (Lee et al., & Chen, 2011). According to "The Meaning of Anxiety" (2015), anxiety is the response, acceptance, and interpretation of stress. " The body's generic reaction to any request " is what Selye defined as stress (Selye, 1976). Maranganti et al., (2007) states that the term "stress" in physics refers to the amount of force applied to an object. It has to do with how specific circumstances that imply force are applied to people's lives in actual life. For example, financial difficulties, health issues, and friendship conflicts all impose strain on a person's body, mind, and soul.

Throughout the history of psychological research, psychologists have examined people's unique ability to reflect on themselves (Nolen-Hoeksema, Wisco, & Lyubomirsky, 2008). Because it allows one to evaluate their actions and emotions, this self-reflection exercise can be beneficial for some people, but it can also be harmful if it turns out to be gloomier and harmful. Because it can be harmful, rumination is one type of self-reflection that has attracted a lot of attention. Rumination is a coping mechanism for negative emotions that involves self-examination and persistent, subservient focus on the person's unwanted response (Treynor, Gonzalez, & Nolen-Hoeksema, 2003). Rumination, as opposed to specific beliefs and thoughts, is more commonly classified as a general effort on an individual's feelings and challenges, much like it occurs in intellectual processes. In reality, rumination is a coping mechanism for stress exposure that speeds up the transition from anxious to depressed feelings (Cannolly and Alloy, 2017). Numerous readings have shown that ruminating foretells the onset of major depressive periods as well as an increase in depressed symptoms (Nolen-Hoeksema et al., 2008). The objectives of study are to investigate how objectification affects young girls' stress, anxiety, and depression, to ascertain how, in young females, rumination mediates the relationship between objectification and psychological burden and to investigate how young women are objectified differently depending on their marital status.

2. Method
2.1. Participants
The 211 females provided the data who were approached through the purposive sampling technique. Participants range in age from 21 to 30 with different marital status, education level, and cultural upbringing. Participating females were approached in different universities in Multan, South Punjab. Participants were informed about the characteristics of the study, and their consent was obtained. Information about age, relationship status, mode of transportation use, and social standing were included in the demographic sheet.
2.2. Instruments
To achieve the purposes of the designated research, the following measures were utilized: Depression Anxiety Stress Scale (DASS), Interpersonal Sexual Objectification Scale (ISOS), Ruminative Responses Scale (RRS), and Self-Objectification Questionnaire (SOQ).

2.3. ISOS
Kozee, Tylka, Augustus-Horvath, and Denchik (2007) designed the ISOS to quantify the incidence of sexual objectification encountered within the past year. There are fifteen questions in all, with five possible answers "Never, Rarely, Occasionally, Frequently, and Almost Always" for each question. The ISOS has a 0.89 dependability rating.

2.4. SOQ
Ten structured questions made up the SOQ (Noll & Fredrickson, 1998). According to their impression of their bodies, respondents ranked each question, which identifies a changed physical attribute, from 1 (least important) to 10 (most significant). There were five questions concerning appearance (gender attraction, weight, body measures, firm/carved muscles, and physical attraction) and five questions about competence (energy level, power, physical synchronization, physical fitness, and well-being). The SOQ's dependability is 0.83.

2.5. DASS
A frequently employed metric is the DASS-21, created by Lovibond and Lovibond (1995). This collection of three self-report surveys aims to measure stress, anxiety, and depression as emotional states. There are seven questions on each of the DASS-21 subscales. The DASS subscale for depression includes the following items: despondency, a reduction in the value of life, a lack of enthusiasm, a devaluation of oneself, dysphoria, inaction, and anhedonia. Skeletal muscle-specific effects, a person's feeling of situational anxiety, autonomic provocation, and anxious distress are all noted on the DASS anxiety subscale. The stress subscale of the DASS is sensitive to prolonged, common stimuli. It assesses difficulty providing comfort, nervous stimulation, and ease of distress, disturbance, irritability, hyperreactivity, and intolerance. The following is the assessment measure: "0 didn't at all apply to me; rather, it applied to me occasionally or to a certain extent. "2 Pertained to me significantly or a significant portion of the time" "3 Pertained to me extensively or the majority of the time." The DASS has a 0.91 dependability rating.

2.6. RRS
Based on the individual (e.g., "I think about what am I doing to deserve this?") indicators (e.g., "I think about how hard it is to concentrate"), likely outcomes, and motivators (e.g., "I go away by myself and think about why I feel this way"). the Response Styles Questionnaire (Nolen-Hoeksema & Morrow, 1991) subscale consists of 22 items. Scores range from 1 (almost never) to 4 (almost always). RSQ has a 0.87 reliability rating.

3. Results
Different statistical techniques were used to assess the results to identify variations in the study sample.

- Study factors and demographics (age, education, and marital status) are the subject of descriptive research.
- Regression analysis is used to investigate the influence.
- Analysis of mediation.
- An independent sample t-test to investigate the variation in marital status among young girls.

Table 1: Respondents' demographic information (N=361) Analysis of Regression showing the effect of objectification on depression

<table>
<thead>
<tr>
<th>Model</th>
<th>B</th>
<th>Std. Error</th>
<th>Beta</th>
<th>t</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>(Constant)</td>
<td>7.11</td>
<td>1.02</td>
<td>6.95</td>
<td>.000</td>
</tr>
<tr>
<td></td>
<td>ISOS</td>
<td>.09</td>
<td>.029</td>
<td>.21</td>
<td>.000</td>
</tr>
<tr>
<td></td>
<td>Self-objectification</td>
<td>.11</td>
<td>.032</td>
<td>.24</td>
<td>.000</td>
</tr>
</tbody>
</table>

Note: p<0.05, Adjusted R² = .10, F (13.19)
Table 1 displays the investigation consequences that demonstrate the impact of sexual and self-objectification on depression. The p-value is below 0.05. The findings indicate that adolescent females' sadness is greatly impacted by both sexual objectification and self-objectification.

### Table 2: Analysis of Regression showing the effect of objectification on anxiety

<table>
<thead>
<tr>
<th>Model</th>
<th>B</th>
<th>Std. Error</th>
<th>Beta</th>
<th>t</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (Constant)</td>
<td>6.36</td>
<td>.96</td>
<td></td>
<td>6.66</td>
<td>.000</td>
</tr>
<tr>
<td>ISOS</td>
<td>.10</td>
<td>.0</td>
<td>.248</td>
<td>3.78</td>
<td>.000</td>
</tr>
<tr>
<td>Self-objectification</td>
<td>.09</td>
<td>.03</td>
<td>.214</td>
<td>3.27</td>
<td>.000</td>
</tr>
</tbody>
</table>

Note: p<0.05, Adjusted R² = .11, F = (14.11)

In Table 2, the analytical results for sexual and self-objectification as they relate to anxiety are displayed. The significance value is below 0.05. The findings indicate that the objectification of sexuality and one's own body has a major impact on young girls' anxiety.

### Table 3: Analysis of Regression showing the effect of objectification on stress

<table>
<thead>
<tr>
<th>Model</th>
<th>B</th>
<th>Std. Error</th>
<th>Beta</th>
<th>t</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (Constant)</td>
<td>8.74</td>
<td>.99</td>
<td>8.77</td>
<td>.000</td>
<td></td>
</tr>
<tr>
<td>ISOS</td>
<td>.08</td>
<td>.03</td>
<td>.18</td>
<td>2.68</td>
<td>.000</td>
</tr>
<tr>
<td>Self-objectification</td>
<td>.09</td>
<td>.03</td>
<td>.22</td>
<td>3.23</td>
<td>.000</td>
</tr>
</tbody>
</table>

Note: p<0.05, Adjusted R² = .08, F (9.93)

Table 3 presents the analysis results that illustrate how self- and sexual objectification affects stress. The level of significance is below 0.05. The results imply that objectifying one's own body and sexuality has a major negative influence on young girls' stress levels.

### Table 4: Rumination as a Mediator between Interpersonal Sexual objectification and psychological burden (Depression, Anxiety and Stress) (n=211)

<table>
<thead>
<tr>
<th>Models</th>
<th>R²</th>
<th>F</th>
<th>B</th>
<th>95% CI</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Model without mediator</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total effect_ ISOS-DASS</td>
<td>.07</td>
<td>15.91</td>
<td>.31</td>
<td>.15</td>
<td>.46</td>
</tr>
<tr>
<td>Model with mediator</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ISOS-RS(Med) (a)</td>
<td>.05</td>
<td>11.49</td>
<td>.24</td>
<td>.10</td>
<td>.39</td>
</tr>
<tr>
<td>RS-DASS (b)</td>
<td>.28</td>
<td>41.53</td>
<td>.50</td>
<td>.38</td>
<td>.63</td>
</tr>
<tr>
<td>Direct effect_ ISOS-DASS</td>
<td>.18</td>
<td></td>
<td>.04</td>
<td>.32</td>
<td>.000</td>
</tr>
<tr>
<td>Indirect effect_ ISOS-RS-DASS</td>
<td>.12</td>
<td></td>
<td>.04</td>
<td>.22</td>
<td>.000</td>
</tr>
</tbody>
</table>

Note: DASS = Depression, Anxiety, and Stress Scale; RS = Rumination Scale; B = Standardized Beta Coefficient; CI = Confidence Interval; LL = Lower Limit; UL = Upper Limit; ISOS = Interpersonal Sexual Objectification Scale ***p<.001, *p<.05.

Table 4 demonstrates that young females' psychological suffering can be predicted by interpersonal sexual objectification, and rumination plays a role in mediating this link. Since the p-value is considerable in this instance, suggesting that mediation is taking place but is only partial, path c=0.18 (refer to figure 2) is condensed greatly, verifying that it is a partial mediation. If the direct effect coefficient approaches 0, it indicates ideal mediation.

### Figure 1

![Figure 1 Diagram](image)

Figure 1 shows the fact that c2 is less than 18 compared to c=.31 indicates that mediation is occurring. The graphic illustrates how sexual objectification and psychological load (stress, anxiety, and depression) are mediated by rumination.
Table 5 demonstrates that the Self-Objectification Questionnaire is a useful tool for predicting psychological distress in young women, and rumination plays a role in mediating this association. Because the p-value is substantial, showing that mediation is occurring but is only partial, the current scenario's path c=.25 (see figure 3) is significantly lowered, confirming it as a partial mediation. If the direct effect coefficient approaches 0, it indicates ideal mediation.

<table>
<thead>
<tr>
<th>Models</th>
<th>R²</th>
<th>F</th>
<th>B</th>
<th>95%CI</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Model without mediator</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total effect_ SOQ-DASS</td>
<td>.08</td>
<td>17.31</td>
<td>.34</td>
<td>.18</td>
<td>.51</td>
</tr>
<tr>
<td>Model with mediator</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SOQ-RS(Med) (a)</td>
<td>.02</td>
<td>5.02</td>
<td>.18</td>
<td>.02</td>
<td>.34</td>
</tr>
<tr>
<td>RS-DASS (b)</td>
<td>.30</td>
<td>45.02</td>
<td>.25</td>
<td>.11</td>
<td>.39</td>
</tr>
<tr>
<td>Direct effect_ SOQ-DASS</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Indirect effect_ SOQ-RS-DASS</td>
<td>.09</td>
<td>.02</td>
<td>.02</td>
<td>.18</td>
<td></td>
</tr>
</tbody>
</table>

Note: DASS = Depression, Anxiety, and Stress Scale; RS = Ruminative Scale; B = Standardized Beta Coefficient; SOQ = Self-Objectification Questionnaire; Confidence Interval (CI), Lower Limit (LL), and Upper Limit (UL) *p<.05, ***p<.001

Figure 2

Figure 2 shows the fact that c² is less than 25 compared to c=.34 indicating that mediation is occurring. The graphic illustrates how self-objectification and psychological load (stress, anxiety, and depression) are mediated by rumination.

5. Discussion

The study determined to look at the association between objectification and young women's psychological burden. Depression and consumption disorders have been specifically associated with objectification of self (Fredrickson & Roberts, 1997; Moradi & Huang, 2008). The objectification assertion has been supported by researchers who have used community samples and identified a correlation between females' involvement in being sexually symbolized and higher depression symptoms (Carr, et al., 2014; Szymanski & Feltman, 2015). To conclude the study, the following hypothesis was proposed.

The initial hypothesis was formulated to investigate the noteworthy influence of objectification on depression. It was approved based on the results as well. Numerous detrimental effects, such as disordered eating (Calogero, et al., 2005; Tiggemann & Lynch, 2001) and depression (Jones & Griffiths, 2015), have been linked to self-objectifying, according to earlier research. A paradigm in which expectations of body surveillance are based on attribute self-objectification, which is established as a result of assumptions about understandings of sexual objectification, as explained by Moradi and Huang (2008). To determine the substantial effect of objectification on anxiety, a second hypothesis was put out. The findings of the analysis supported it as well. According to the hypothetical framework, self-objectification and body surveillance together can lead to several negative consequences, such as increased body shame, anxiety, decreased awareness of one's internal bodily conditions, and condensed flow, all of which are associated with a decreased likelihood of reaching the highest motivational positions (Fredrickson & Roberts, 1997).
A third hypothesis was proposed to investigate the noteworthy influence of objectification on stress. According to Fredrickson & Roberts’ Objectification Theory, objectification of self can lead to several undesirable outcomes, one of which is a loss of bodily awareness. Women lean towards emphasis more on the appearance of their physiques than on their physical health, which causes an imbalance in consciousness. This physiological imbalance caused by stress is analogous to this metaphorical imbalance. Thus, stress may be intimately related to self-objectification and a decrease in body awareness (Fredrickson & Roberts, 1997).

To determine how rumination mediates the relationship between objectification and psychological stress, a fourth hypothesis was formulated. It was approved as well. According to McKinley and Hyde (1996), a woman's cognitive resources are allocated to evaluating her looks continually, and the amount and frequency of body-checking resulting from self-objectification are anything from trivial. Ruminative and passive concern are examples of the unpleasant mental state that has been demonstrated to result from self-objectification, according to Fredrickson and Roberts (1997). Bandura (2013) asserts that self-doubt makes a person self-centered and fixates on their flaws (e.g., "I will gain weight no matter what"). Ruminative or intrusive, repeating thoughts that focus on an individual's discomfort indicators (e.g., "I weigh too much") and the consequent implications and effects (e.g., "I am ugly; I am worthless") are thus examples of self-defeating thought patterns. Women ruminate more than males do, according to several studies (Nolen-Hoeksema, 1987). However, when individuals' physical appearance or attraction is the main focus, these gender disparities could be more noticeable (Mezulis, Abramson, & Hyde, 2002). A higher risk of depression has frequently been associated with ruminating, particularly in women (Nolen-Hoeksema et al., 1993).

The next hypothesis looked into the objectification of married and single women. It was approved as well. Women who don't meet the standards for attractiveness and appearance fear the consequences of society, especially losing men's attention and desirability (Bartky, 2014). Most women would prefer to avoid the absence of masculine care since it is assumed that women and girls are entertained to place a high value on utopian associations and that single women are stigmatized (DePaulo & Morris, 2006). Adolescents often give the impression that they are fixated on idealized relationships, investing time and energy in them, sometimes to the detriment of their own professional and academic goals (Holland & Eisenhart, 1990). The purpose of the last hypothesis was to investigate the objectification of married and single women. It was turned down. Studies have shown that married college women have higher general self-esteem and are happier with their bodies than single college women (Sanchez & Kwang, 2007; Wiederman & Hurst, 1998).

6. Conclusion
The study looked at objectification and interpreted a lot of other characteristics to find out how they are related to psychological burden. Teenage girls who objectify themselves frequently struggle with stress, anxiety, and depression related to their looks. Ruminative acts as a powerful mediator in the interaction between young females' psychological burden and objectification. Significant differences in sexual objectification were seen between married and unmarried females. Between married and unmarried females, there was no discernible change in their self-objectification scores. Based on the literature current study is conducted to pinpoint the instances of sexual objectification among Pakistani women specially in Southern Punjab. Raising awareness in the community is beneficial in enabling women to receive support from peers and family in navigating objectification and safeguarding themselves from psychological harm. When treating female clients who are sad, clinicians are encouraged to be aware of objectification practices and to assist the clients in lessening compulsive body checking and depression. Future researchers are recommended to explore other mechanisms by which objectification leads to psychological burden. Future studies could explore long-term effects, potential resilience factors, and effective interventions.

References


