Objectified Body Consciousness, Selfitis Behavior, and Self Esteem Among Young Women

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This study was carried out to investigate the relationship between objectified body consciousness and self-esteem with selfitis behavior in young Pakistani women studying at the undergraduate level in universities. A sample of female students ($N = 233$) with age range 18-25 years ($M = 21.51$, $SD = 1.79$) engaged in selfitis behavior as determined through the demographic sheet. The sample was selected through a convenient sampling from different universities in Lahore, Pakistan. Participants responded to the Objectified Body Consciousness Scale (OBC), Selfitis Behavior, and Self-Esteem Scale. Results revealed a significant positive relation between OBC and selfitis behavior; however, self-esteem was not associated with either of the variables. Linear regression analysis revealed that OBC and age were predictors of selfitis behavior; however, OBC was found to be a stronger predictor of selfitis behavior. This study is unique because it contributes to society's better understanding of the objectified body consciousness in young adult women and its influence on obsessive behavior like selfitis.

Keywords. Objectified body consciousness, selfitis behavior, self-esteem, predictor, young women

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Objectified Body Consciousness (OBC) is an emerging phenomenon among young Pakistani women. OBC is the practice of focusing excessively on one's body and physical appearance, leading to adverse psychological and social outcomes (Bhatti, 2015). OBC is characterized by a preoccupation with physical appearance and a tendency to view oneself from an outside perspective (Tariq et al., 2019).

Objectification theory highlights a framework that, based on their appearance, women's bodies are usually designed, analyzed, debated, and judged as objects. Sexual objectification of women's bodies and the abundance of such experiences can increase mental health risks that impact women disproportionately (Fredrickson & Roberts, 2006). Using a social psychological approach, the objectification theory offers a comprehensive theoretical structure to explain women's living experiences by highlighting the mediational effect of dependent self-esteem in the objectification context. There is a possible idea in which the connection between body shame and body surveillance with self-objectifying actions and self-esteem can be mediated by contingent self-esteem. It is concluded that dependent self-esteem is carried out by self-objectification. It is proposed that dependent self-esteem can be essential in objectification theory (Barzoki et al., 2018). According to a study women reported higher body surveillance and thin-ideal internalization than men, while men exhibited greater muscle/athletic internalization. Younger individuals and those with higher BMIs experienced more sociocultural appearance pressures. Racial differences revealed Black women had lower thin-ideal internalization, and Asian women reported greater family pressures. These findings underscore the importance of tailored interventions to address varied appearance concerns across demographic groups (Frederick et al., 2022).

OBC has been linked to low self-esteem, depression, and anxiety in young Pakistani women (Khan & Mehmood, 2020). Furthermore, it has been associated with developing "selfitis," an obsessive-compulsive disorder characterized by excessive self-focused behavior (Khan et al., 2019). Selfitis was defined as an obsessive-compulsive desire to take photos and share them via social media to compensate for low self-esteem. Women upload significant numbers of selfies of all kinds than men (Sorokowski et al., 2015). It is possible that women feel a sense of belongingness and get social acceptance by uploading selfies on social networking sites (Graff, 2018). Balakrishan and Griffiths (2018) formally operationalized selfies as a new probable behavior contributing to technology's psychological problems. Selfitis behavior was categorized into three levels, including borderline, acute,

and chronic selfitis Borderline selfitis behavior is defined as capturing photos of oneself at least three times per day without uploading them on social networking sites. Acute selfitis behavior is defined as capturing and uploading pictures of oneself at least three times a day on social media. Chronic selfitis behavior is defined as an uncontrollable desire to take pictures of oneself around the clock daily and upload them on social networking sites more than six times daily (Balakrishnan & Griffiths, 2017).

According to recent literature, selfie uploading is positively linked to women's self-esteem (Wang et al., 2018). It is observed that sharing selfies enables people to communicate their self-related acts and decide their self-importance and uniqueness (Ehmke, 2020). Recent Studies suggest greater self-esteem among participants who post more selfies. It was found that positive reviews (likes and comments) and body satisfaction were significantly related to self-esteem. Women perceive themselves favorably when they post selfies that typically contain flattering body-related details because of selective self-presentation, which boosts their self-esteem (Travers, 2020). Wollast et al. (2020) also suggest exploring how women of different cultural backgrounds develop body objectification and its correlations.

Self-esteem is fundamental to mental health and well-being and is essential in young Pakistani women. Low self-esteem is associated with several adverse psychological and social outcomes, such as depression, anxiety, and social isolation (Khan & Mehmood, 2020). It has been shown that OBC can lead to lower self-esteem in young Pakistani women (Bhatti, 2015). Additionally, selfitis is associated with lower self-esteem (Khan et al., 2019). Thus, it is essential to address OBC and selfitis to promote positive mental health and well-being among young Pakistani women. Objectified body consciousness and selfitis are emerging phenomena prevalent among young Pakistani women, and OBC and selfitis have been linked to lower self-esteem and adverse psychological and social outcomes (Balakrishnan & Griffiths, 2017; McKinley & Hyde, 1996; Tariq et al., 2019). These issues emphasize the need for interventions focusing on self-perception and digital behavior. Thus, it is essential to address OBC and selfitis to promote positive mental health and well-being among young Pakistani women.

In Pakistan, women's objectification in television and other social media advertising has been as widespread as in Western mass media. The ads objectify women and generate false knowledge regarding their actual worth (Ali, 2018). The literature suggests limited research on objectified body consciousness, self-esteem, and selfie-taking

behaviors in the Pakistani background. Existing research in Pakistan has explored issues like body image dissatisfaction, social media influence, and self-esteem. However, studies specifically examining the intersection of OBC, selfitis behavior, and self-esteem among young Pakistani women remain limited. For instance, Tariq et al. (2019) examined OBC and its psychological implications, highlighting cultural and social pressures but did not address selfitis or its impact on self-esteem. Similarly, Khan et al. (2021) explored social media's role in body image concerns explored social media's role in body image concerns but did not connect these to behavioral outcomes like selfitis. This study addresses the gap by linking these phenomena, offering a culturally contextualized analysis and contributing to interventions that improve self-perception and digital habits among Pakistani women.

Hypotheses

1. There would be a positive correlation between objectified body consciousness, self-esteem, and selfitis behavior among young women.

2. Objectified body consciousness and self-esteem would act as predictors of selfitis behavior among young women.

3. Selfitis behavior plays a mediating role on the relationship between objectified body consciousness and self- esteem among young women

Method

Sample

This correlational study was conducted from March 2020 to December 2020. A sample of 233 women with age ranges from18-25 years (M = 21.51, SD = 1.79). The demographic characteristics of the participants of this study are shown in Table 1.

Table 1: *Demographic Characteristics of Study Participants*

Variables	n	$\%$
Qualification		
Graduate	61	26
Undergraduate	172	74
Marital Status		
Single	221	95
Married	12	5

Continued…

Variables	n	%
Family Setup		
Nuclear	150	64
Joint	83	36
Birth Order		
First Born	71	31
Middle Born	106	45
Last	56	24
Frequency of Selfie-taking Behavior		
3 to 5 times a day	224	96
5 to 7 times a day	9	4

Table 1 shows the description of participants with reference to their education, marital status, family setup, birth order and frequency of selfie-taking behavior.

Measures

Objectified Body Consciousness Scale (OBC)

McKinley and Hyde in 1996 developed the Objectified Body Consciousness Scale (OBC), which is a 7-point Likert scale with the response options ranges from *Strongly disagree* = 1 to *Strongly agree* = 7. There are 24 items distributed in three subscales i.e. body surveillance (items 1-8) body shame (items 9-16), and participants' control beliefs (Items 17-24). There are reverse scores items (Items no. 1, 2, 3, 4, 7, 8, 13, 15, 17, 18, 20, 21, 22, and 24) in each subscale as well. The score on each subscale ranges from 7 to 56. High score on each subscale reflects the endorsement of each construct. The test-retest reliability varied between .73 to .79 ($p < 0.001$) for the subscales. The validity of the scales was evaluated by analyzing the relationships with body esteem. Surveillance correlated negatively with body esteem ($p < 0.001$, $r = -0.39$), and a significant negative connection was found between body shame ($p < 0.001$, $r = -0.51$) (John, 2003).

Selfitis Behavior Scale (SBS)

Selfitis Behavior was measured using the Selfitis Behavior Scale (SBS) developed by Balakrishnan and Griffiths (2017). It is a 20-item measurement. Responses are evaluated in numbers like 1 = *Strongly disagree*, 2 = *Disagree*, 3 = *Neutral*, 4 = *Agree*, and 5 = *Strongly agree* and are taken on a 5-point Likert scale. This scale contains six factors: self-confidence, attention-seeking, environmental enhancement, social conformity, social competition, and mood

modification. Total SBS scores vary from 20 to 100. More than .70 Cronbach's alpha score for all six factors, and .87 was the scale's general consistency. The required condition, content validity was satisfying because each item was substantially loaded with specified findings greater than .60.

Self-Esteem Scale

Morris Rosenberg in 1965 developed the Rosenberg Self Esteem scale (as cited in Adler, 2004a) evaluated adolescents' feelings of self-worth or self-acceptance. The scale has, in general, high consistency score. The scale consists of ten items; the values are assigned to all the items. The responses of items 1, 2, 4, 6, and 7 are evaluated as 0 = *Strongly disagree*, 1 = *Disagree*, 2 = *Agree*, and 3 = *Strongly agree*. The responses to items 3, 5, 8, 9, and 10 are evaluated with reverse scoring like 3 = *Strongly disagree*, 2 = *Disagree*, 1 = *Agree*, and 0 = *Strongly Agree*. The scale varies from 0 to 30, and 30 is the highest possible score. Test-retest correlations usually vary between .82 to .88; for various samples, the Cronbach alpha varies between .77 to .88 (Adler, 2004b).

Procedure

Young women were approached through an online Google form from universities of different cities in Pakistan. Young women were asked to fill out the form only if they captured and uploaded their selfies on social media thrice daily. The study link was advertised through emails, social media (e.g., Facebook), and smartphone applications (e.g., WhatsApp). The study's link was directed to an online form where participants were first provided with informed consent. Online data collection was preferred because of Covid-19's uncontrolled spread worldwide. Participants were included in the study only if they were women of age 18-25 years, engaged in acute selfie-taking behavior, and could read and understand the English language. Moreover, women who had any physical disability, were diagnosed with any mental illness, and those who belonged to the media were excluded from the study. Lastly, the participants took 20 minutes to fill the questionnaires on average.

Results

Descriptive statistics analysis, with standard deviations, mean, percentages, and frequencies, were reported for study variables. The study's inferential statistics were done through stepwise regression analysis.

Table 2: *Relationship Between Age, Objectified Body Consciousness, Self-Esteem and Selfitis Behavior Among Young Women (N =233)*

Measure	Age	OBC	Selfitis Behavior	Self Esteem
Age	-			
OBC	.008*	-		
Selfitis Behavior	-.15*	.304**	-	
Self Esteem	.14*	-.213	-.07	-

Note. OBC = Objectified Body Consciousness.
*$p < 0.05$. **$p < 0.01$.

Table 2 shows a moderate positive association of objectified body consciousness with selfitis behavior. Moreover, there is negative correlation between age and selfitis behavior and no significant association has been found of self-esteem with selfitis behavior and objectified body consciousness among young women.

Table 3: *Linear Regression Analysis and Analysis of Variance Statistics of Age and Objectified Body Consciousness as Predictors of Selfitis Behavior Among Young Women (N = 233)*

Variables	R	R^2	Adj. R^2	SS	df	MS	F	p
Age	.149	.022	.018					
OBC	.321	.103	.095	1345.15	1	1345.15	5.27	.023

Note. OBC = Objectified Body Consciousness.

The result indicates that age and objectified body consciousness predict selfitis behavior in young women [R^2, .103; $F = 5.27$, $p < .05$].

Table 4: *Coefficient statistics* of *Age, Objectified Body Consciousness, and Self Esteem in Women University Students (N = 233)*

Model	Unstandardized Coefficient		Standardized Coefficient		
	B	SE	β	t	p
(Constant)	80.537	12.641		6.371	.000
Age	-1.344	.586	-.149	-2.296	.023
(Constant)	36.678	15.496		2.367	.019
Age	-.936	.569	-.104	-1.643	.102
Objectified body consciousness	.348	.076	.288	4.551	.000

To see the prediction of age and objectified body consciousness it is found (Table 5) that objectified body consciousness is a stronger predictor of selfitis behavior than women university students ($\beta = .348$, $p < .000$).

Table 5: *Role of Age and Objectified Body Consciousness, as Predictors of Selfitis behavior Among Young Women (N = 233)*

Variables	B	S.E	B	p	95% CI LL	95% CI UL
Model 1						
Constant	80.54	12.64		.00	55.63	105.44
Age	-1.34	.586	-.15	.02	-2.50	-.191
Model 2						
Constant	36.68	15.50		.02	6.15	67.21
Age	-.94	.57	-.10	.10	-2.06	.19
OBC	.35	.08	.29	.00	.20	.50
R^a	.15					
R^b	.32					
R^{2a}	.02					
R^{2b}	.10					
F	5.27			.02		

Note. a = age; b = Objectified body consciousness.

Table 6: *Mediating Role of Selfitis Behavior on the Relationship Between Objectified Body Consciousness and Self-esteem Among Young Women (N = 233)*

Paths	B	SE	t	p	95% CI UL	95% CI LL	R^2	F	p
OBC → SB	0.36	0.07	4.85	.00	0.21	0.51	0.09	23.55	.00
SB → SE	-0.00	0.01	-0.0	.92	-0.03	0.03			
(Direct) OBC → SE	-0.06	0.02	-3.11	.00	-0.10	-0.02	0.04	5.44	.00
(Indirect) (via SB)	-0.00	0.00			-0.01	0.01			

Note. OBC = Objectified Body Consciousness; SB = Selfitis Behavior; SE = Self-Esteem.

Table 6 shows that Objectified Body Consciousness (OBC) significantly predicts Selfitis Behavior (SB), with a positive effect ($B = 0.368$, $p < .001$). This indicates that higher OBC is associated with higher SB. However, Effect of SB on Self-Esteem (SE) is non-significant ($B = -0.002$, $p = .923$), suggesting that SB does not directly influence SE. The direct effect of OBC on SE is negative and significant ($B = -0.067$, $p = .002$). This implies that higher OBC is associated with lower SE, independent of SB. The indirect effect through SB is very small and not statistically significant ($B = -0.001$, 95% CI [-0.015, 0.013]). This suggests that SB does not mediate the relationship between OBC and SE.

Discussion

The current study focused on the understudied phenomenon of objectified body consciousness, adding to the context of selfitis behavior and self-esteem and the ongoing debate on their associations. It was hypothesized that there would be a significant positive correlation between objectified body consciousness, self-esteem, and selfitis behavior and Objectified body consciousness and self-esteem would act as predictors of selfitis behavior. For the relationship between OBC, selfitis behavior, self-esteem, and age, this study's findings revealed a moderate positive association of objectified body consciousness with selfitis behavior in female university students. Furthermore, findings reveal that age and objectified body consciousness predicted selfitis behavior, whereas OBC more strongly predicted selfitis behavior in young women. Moreover, self-esteem was not associated with objectified body consciousness and selfitis behavior in young women.

Trait self-objectification demonstrated significant positive associations with negative impact variables (Rubino et al., 2002). The objectification theory was provided to understand better the mechanism of the consequences of living in a society that sexually objectifies women's bodies. Objectification arises whenever the body, without reference to the rest of the individual, is considered separate and judged on its own merits. Events of objectifying women in culture lead them to accept and rationalize a perception of their physical appearance from a third person that they see themselves as an object. It occurs through self-consciousness identified by the body and its appearance being monitored regularly. It is suggested that self-objectification has various emotional and cognitive implications. Objectifying events are often claimed to lead to mental and physical health issues that affect women significantly (Mercurio & Landry, 2008). A significant conclusion from research shows that more involvement in selfie-taking is linked to self-objectification. In other words, when selfie-maker perceives herself more strongly from the viewpoint of an outside observer focusing on physical appearance, she is more likely to be concerned with selfie-making, pick a selfie intentionally, and edit it significantly before uploading. This indicates that body image can be an output of using social media platforms and cause intervening selfie behaviors (Veldhuis & Alleva, 2020). Selfie-sharing is among the most common practices linked with social networking sites. As a result, the global emphasis on online physical appearance acceptance may strengthen selfie engagement as a particular body image-related activity, possibly linked to self-

improvement selfie-marketing tactics and troublesome use of social networking sites. It may have the ability to offer risky opportunities, particularly for adolescents and young adults. It was also presumed that posting selfies is gender-specific, especially for girls and women (Boursier, 2020).

It is concluded that this study's findings are consistent with the literature that young women studying at the university level scored high on objectified body consciousness, which predicts selfitis behavior. Instead of accepting and getting used to their physical shortcomings, women put more effort and time into making themselves acceptable because of societal pressure. This may lead them to get involved in negative habits like selfie-taking behavior. Rather than being negatively influenced by social and cultural norms, women can put more effort into accepting themselves and developing better-coping skills while living in a culture of appearance objectification.

Self-objectification and its effects may be reinforced by prevailing cultural expectations relating to gender and physical attractiveness. Different cultural norms enhance power structures that exploit and delegitimize women compared to men (Moradi, 2010). The perfect selfie can develop higher levels of vulnerability and degrading levels of self-consciousness. Social media has been said to fulfil two fundamental evolutionary social needs, i.e., connecting and portraying oneself. In other words, an individual sees himself as best online and can fit into the ideal status one wants. A slight criticism gives some people profound confusion and excessive self-consciousness. It can make an individual disappear from the social group to the degree it can negatively affect. A survey revealed that the rising number of plastic surgeries in the United States is due to selfie-taking behavior. In trying to appear admirable, certain people's insecurities drive them to take drastic action and appear according to their wishes (Nneoma, 2019).

Linear regression analysis and analysis of variance statistics of age, objectified body consciousness, selfitis behavior, and self-esteem are impressive findings that age and objectified body consciousness predict selfitis behavior in female university students. Moreover, coefficient statistics of age, objectified body consciousness, selfitis behavior, and self-esteem showed that age predicts selfitis behavior; however, OBC is a stronger predictor of selfitis behavior in young adult women.

To get positive reviews, young women post selfies on social media, and selfie-editing seems to be women's attempts to digitally

develop an ideal form of self-presentation. Self-objectification predicted selfie-posting behavior, particularly among women with more significant imaginative audience ideation (Zheng et al., 2019). According to a study, adolescents are more interested in taking selfies, sharing them, and using filters and editing tools than young adults. Likewise, young adults are more involved than older adults in taking their own and group selfies, sharing, editing, and modifying pictures. Regarding selfie-taking, uploading, and editing behavior, age has shown a more significant predictive impact on women than men (Dhir et al., 2016). It seems possible that body shame in girls existed even during high school; it may be a pattern for young women. Also, self-objectification is associated with higher body shame and a strict diet, and it contributes to the greater objectified body consciousness that can lead women to negative body experiences. Body shame is a component of objectified body consciousness, representing a person's shame if the body may not match cultural norms. Guilt can, therefore, provide a defense to enable self-worth to be determined by others' views (Mosewich, 2008).

A study was done in Pakistani culture on the association between selfie-taking and posting on social media with over-assessment of body appearance and body weight, eating behavior, and body dissatisfaction. It showed that girls who posted selfies on social media registered considerably higher body weight, body shape assessment, body image dissatisfaction, thin body, and diet-restricted idealization (Khan & Imran, 2019). For preserving memories, young people were highly interested in taking selfies at various events. Males were active in uploading selfies at a high rate on social networking sites; females did not upload their selfies because of cultural and spiritual problems within Pakistani society. Researchers reported that selfie-takers were neither obsessed with selfies psychologically nor suffered any harm due to selfies, but persistent practices may lead them to many psychological problems (Tarar, 2017).

Limitations and Suggestions

The researchers have attempted to proceed in the best possible way; however, different barriers were encountered. During the Covid-19 times, data collection was the most challenging part of this research work as it was impossible to visit Universities and collect data from students directly because all institutes were closed throughout the year. Due to these limitations, data could not have been proportionately collected. Otherwise, the sample could have been more representative if the sample size had increased.

This study revealed that exciting findings give insight into the need for such participants concerning their behavioral problems. In that case, it will benefit health psychologists and help them design appropriate interventions to prevent addictive behaviors from negatively influencing the human mind.

As a future endeavor, other demographic characteristics like both genders and work status can also be added to existing research variables. Different populations can also be included in the study, like disparity of selfitis behavior can be examined through various male and female academic and occupational groups.

Conclusion

Objectifying body consciousness is a psychological problem affecting and problematic for several women in Pakistani culture. This research serves as a baseline by providing knowledge of objectified body consciousness, its predictive relationship with selfitis behavior, and its contribution to the literature relevant to the culture. The study concluded that young women students of the university have higher objectified body consciousness that leads them towards selfitis behavior to get themselves accepted by others and upload their selfies on social media. This showed a significant relationship between objectified body consciousness and self-esteem. However, surprisingly there was no predictive relationship with self-esteem. This research shows how psychological factors influence the human mind in Pakistani culture.

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