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Inner body and outward appearance—the relationship between orientation toward outward appearance, body awareness and symptom perception

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Abstract

The present study aimed to investigate the relationship between orientation to outward appearance, body awareness, symptom perception, and gender, from Pennebaker's competition of cues model (1982). We expected a negative relationship between orientation to outward appearance and body awareness, and a positive one between body awareness and symptom perception. Furthermore, we hypothesized that both relationships would be stronger for women than for men. Respondents were 250 male and 275 female college students (mean age 20.4). Questionnaires were administered reflecting all concepts under study. Women compared with men appeared to be more oriented to and less satisfied with their outward appearances, and they were higher in body awareness, symptom perception, and external information. No sex differences were found in negative affectivity; there was a trend toward a difference regarding somatization. Orientation to outward appearance, external information and somatization had positive effects on body awareness, that were unaffected by gender. Body awareness and symptom perception were positively related, without any gender-effect. Women's as well as men's symptom perception was, additionally, positively related to somatization, negative affectivity, and body dissatisfaction. It was concluded that, in students, the internal and outward body are experienced as a unity. The results further indicate that the competion of cues model is valid only under certain conditions. © 2002 Elsevier Science Ltd. All rights reserved.

Keywords: Body image; Body esteem; Body awareness; Gender; Sex differences; Somatization; Negative affectivity; Eating disorders

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Empirical evidence consistently showed that women compared with men are more preoccupied and less satisfied with their outward appearances (e.g. Fallon & Rozin, 1985; Franzoi & Herzog, 1987; Garner, Garfinkel, & Olmsted, 1983). Female body dissatisfaction and worries about one's outward appearance have been identified as serious threatening factors for self-esteem (Silberstein, Striegel-Moore & Rodin, 1987) and as predictors of eating disorders (e.g. Stice, 1994).

Clinical observations (e.g. Vandereycken, 1993; Bekker, 1986) indicated that, in bulimic women, dieting and the obsession with slenderness and calorie-intake were associated with a diminished ability to recognize internal signals such as hunger, saturation, and specific food preferences. Thus, body awareness in bulimics, seems to be, at least partly, less than in normals. In addition, several authors (e.g. Berger, 1972; Coward, 1984; Franzoi, 1995) including experts with respect to anorexia nervosa such as Bruch (2001) have suggested that a strong orientation to outward appearance might imply a form of alienation from one's own body, in particular from one's own internal body; the (outward) body becomes the focus of one's attention and is considered and handled as an external aesthetic project or object. In sum, there seems to be a relationship between attention focusing on outward appearance, thus on one's outward body, and attention focusing on somatic processes, i.e. on the inner body.

Body awareness is generally conceptualized as the amount of attention one pays to his or her internal bodily sensations. Some people frequently focus on internal bodily sensations and are sensitive to many physiological fluctuations, while others are relatively unaware of internal sensations and easily seem to neglect high levels of pain and distress (Hansell, Sherman, & Mechanic, 1991). It is a well-known fact that women compared to men report more physical symptoms (e.g. Gijsbers van Wijk, 1995; Verbrugge, 1989). Gijsbers van Wijk (1995) presumed that women, due to sex-specific bodily experiences and sex role socialization, have higher body awareness, and thus, more symptom perception.

Pennebaker (1982) defined a physical symptom as the perception of, or a belief about, the condition of one's body. This definition implies that physical symptoms are determined not only by fysiological factors, but also by situational and psychological influences. Pennebaker (1982) postulated a continuous competition between internal, bodily cues and external cues from the environment, due to our restricted attention resources. In case of high stimulus-richness in the environment, body awareness and, thus, symptom perception will be relatively low. In case of low external information focusing, subjects will have higher awareness of bodily signals and, thus, higher symptom perception. The competition of cues model was empirically supported in several experimental studies by Pennebaker (Pennebaker & Lightner, 1980), although Gijsbers van Wijk (1995) failed to find a negative relationship between external information and body awareness in a study using questionnaires.

It is an intriguing question how a strong orientation to outward appearance is related to body awareness and symptom perception (see also Bekker, 2000). To our knowledge, no studies on this relationship have been done yet. Therefore, the present study was aimed at getting more insight into the relationship between attention focusing on the outward body and attention focusing on the inner body.

We were aware of the fact that 'attention' is a multidimensional construct, and includes a broad diversity of issues, all requiring specific ways of measurement (e.g. Baddeley, 1986; de Jong & Das-Smaal, 1993). In the present study, attention focusing was primarily considered having a particular (bodily) orientation, to be derived from self-reports. Following Franzoi (1995) in con-

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