Introduction

Self Objectification Theory: Women internalize and adopt an observer’s perspective of their bodies and begin to regard themselves as mere objects. 1, 2 Self-objectification fosters constant surveillance and hyper-attention to the body which can lead to negative psychological effects such as body shame and appearance anxiety. Such psychological effects among women increase self-consciousness about physical appearance, which can result in the devaluation of themselves as sexual beings and in turn threatens their sexual satisfaction and sexual functioning. 3

Body and Genital Image: Multifaceted construct including: 4 5 • Evaluative: being satisfied or dissatisfied • Affective: — Body and genital esteem • Cognitive-Behavioral — Inhibition — of sexual desires (cognitive distraction) pertaining to body and/or genital appearance during sexual activity

Sexual Well-Being: Multifaceted construct including: • Sexual satisfaction • Female sexual functioning (including desire, arousal, lubrication, orgasm, and pain)

Rationale and Study Goals

Relationship of Body and Genital Image and Sexual Well-Being: Research has shown the negative effects that poor body image and genital image have on sexual satisfaction and functioning. 6 This baseline survey re-examined these relationships in a broader sample of heterosexual and non-heterosexual women and examined how cognitive distraction mediates the relationship between image and well-being.

Need for an Intervention: Potential interventions that aim to decrease poor body image, genital image, and sexual insecurities are essential for women’s sexual well-being. Mindfulness-based mirror exposure is examined in this study. Past research on mirror exposure therapy has shown that after multiple sessions, body dissatisfaction, body checking, and body avoidance decreased. 7 8 However, these studies were mainly among patients with eating disorders, and no studies examined the effects of image and sexual well-being. The present research will measure these constructs and use a non-clinical sample of women.

Mindfulness-Based Mirror Exposure

• Objective: To change participants’ focus of attention from criticism to a more holistic perspective of the entire body
• Procedure: Individuals observed parts of their entire bodies in a full-length mirror and described body parts, without judgment or critical language

Although not all people who are at-risk for psychological disorders identify as women, for the purposes of this poster, I will refer to the main subjects as “women.”

Method: Baseline Survey

Goal: Examine relationships between various measures of body and genital image and sexual well-being

Participants: 166 women recruited by email and online

• Mean age 21.2 (SD = 3.19; range 18-48); 84% White, 15% Asian, 2% African American, 5% Indian

Online Survey: consisted of six adapted measures

• Body satisfaction (BSS; Rapport, Clark & Wardle, 2000)
• Body esteem (BSEA; Francois & Shields, 1984)
• General esteem (GAE; Marsh & Morland, 2009; Reinhold & Muehlenkamp, 1995)
• Cognitive distortion (CDS; Dove & Wiederman, 2000)
• Sexual satisfaction (SSS; Affemto et al., 1996)
• Sexual functioning (FSFI; Rosen et al., 2000)

Method: Mindfulness-Based Mirror Exposure Intervention

Goal: To investigate the role of mindfulness-based mirror exposure in reducing negative body and genital image, cognitive distraction, sexual functioning difficulties, and sexual dissatisfaction

• Participants were recruited from the baseline survey for a 4 session intervention
• 39 participants completed session one, 31 completed session two, 24 session three, and 26 completed the final session.

During each session: Via SurveyMonkey, the intervention guided each participant to view each body feature as they described them in front of the mirror

• Participants were asked to: 1. Imagine describing themselves to someone who is blind or who is drawing them. 2. Pay attention to all areas of the body. 3. Use terms related to color, texture, and proportion rather than subjective language. 4. Use nonjudgmental and kind language.

After each session they completed a short narrative reflection. After the final session, participants were asked to complete the baseline survey questions a second time.

Results

Hypothesis 1: Body and genital image are related to sexual satisfaction and sexual functioning. (Baseline survey; See Table 1)

• The more dissatisfied women were with their body parts the higher their sexual difficulties were. That is, difficulties with arousal, desire, orgasm, lubrication, and satisfaction during sexual activity.
• Women who experienced lower levels of body esteem reported more difficulties with sexual satisfaction and feeling aroused or achieving orgasm in sexual situations.
• Women with low genital image also reported lower levels of sexual satisfaction and all aspects of sexual functioning.

Hypothesis 2: Women with poor body image and poor genital image also have higher levels of cognitive distraction. (Baseline survey; See Table 1)

• Women who reported high levels of body image and poor genital image also reported high levels of distracting thoughts pertaining to their bodies and genitals during sexual activity.

Hypothesis 3: Women with higher levels of cognitive distraction also have higher levels of sexual functioning difficulties. (Baseline survey; See Table 1)

• Women who experienced increased appearance-based thoughts during sexual activity also experienced lowered levels of sexual satisfaction. They also had difficulties with arousal, desire, lubrication, and achieving orgasm.

Hypothesis 4: Cognitive distraction explains the relationship between body image and sexual well-being. (Medialcal analyses from baseline survey)

• Cognitive distraction fully mediated the relationships between body satisfaction and sexual satisfaction; body esteem and sexual satisfaction and functioning; and genital esteem and sexual satisfaction and functioning.

For participants attracted to the same sex, cognitive distraction did not explain the relationship between body image and sexual well-being.

Hypothesis 5: A mirror exposure intervention would increase body and genital image, decrease cognitive distraction, and increase sexual functioning and sexual satisfaction.

(1-tests comparing baseline survey means to post-intervention means; See Figure 1)

• After completing the four sessions of mirror exposure, participants’ body esteem significantly increased. No other changes were statistically significant.

Conclusions

Relationship Between Body and Genital Image and Sexual Well-Being

• There are important links between body and genital image and sexual well-being.

• For women attracted to the same sex, distracting thoughts during sexual activity did not relate to sexual satisfaction or sexual functioning, whereas distracting thoughts during sexual activity explained why body image concerns impacted sexual satisfaction and functioning for women attracted to the opposite sex.

• Professionals may consider body image concerns when clients present difficulties with sexual functioning or low levels of sexual satisfaction.

Mindfulness-Based Mirror Exposure

• The mirror exposure positively impacted women’s body esteem. After completing the session, women reported feeling better about their bodies and sexual satisfaction as a whole.

• It is expected that if participants continued to complete sessions of mirror exposure, genital image and sexual well-being would increase.

• Therapists may consider recommending mirror exposure therapy for patients who are experiencing body image concerns and sexual difficulties.

References


Note. BSS = Body Satisfaction Scale. BESAA = Body Esteem Scale for Adult Women. GAS = Global Sexual Satisfaction Scale. CSS = Cognitive Distraction Scale. FSFI = Female Sexual Functioning Index.