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Cynthia L. Manns

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BODY IMAGE: GENDER AND RACIAL DIFFERENCES

By

Cynthia L. Manns

A THESIS

Submitted to
Michigan State University
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ABSTRACT

Body Image: Gender and Racial Differences

By

Cynthia L. Manns

This paper evaluates the relationship between perceived body image, gender and ethnicity. The three central areas of focus are: the major influences on body image, the differences between males and females and finally, the differences in body image between Whites and African Americans. Data was obtained from a body image questionnaire submitted to college-aged students ($N = 253$) in the Fall of 2002. The results indicate that White women are less satisfied with their body images than African American Women, and in general men appear to have less concern over their body images than women. Additionally, media, peer and family influences play a significant role with body image satisfaction.

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INTRODUCTION

Body image can be defined as an individual's experience of his/her body. It is the mental picture a person has of his/her body, as well as the individual's associated thoughts, feelings, judgments, sensations, awareness and behavior. Body image is not a static concept. It is developed through interactions with people and the social world, changing across life span in response to changing feedback from the environment. Body image is shaped by many factors including physical changes in the body, physical conditions of the body, judgments from others, and the prevailing social values. Body image develops in childhood and this process continues throughout life.

The emphasis on thinness and attractiveness is socialized into children at a very young age. As adolescents mature, they become increasingly aware of what society's standards are for the "ideal body." Baby girls are described as "beautiful, soft and cute" while baby boys are "stronger and hardier" (Rice, 1995). Through this socialization, children learn that girls' bodies are to be made more beautiful while boys' bodies are to be developed and strengthened. Women grow up being complimented on their looks more than any other quality. Adolescent women are affected by these messages and it is common for girls entering puberty to develop body image problems, which may last throughout their life. The messages delivered by the advertisements are discriminatory against body shape and size. This discrimination leads women to believe that they are only valuable if they are thin and attractive.

Women (as well as men) on television, billboards and fashion magazines are always thin. In the past thirty years; women have been confronted with an impossibly thin standard of female beauty. Research has shown that almost 70% of female characters

on 33 top-rated TV shows were slender; only 17% of the male characters were thin (Silverstein, Petersen, Perdue and Kelly, 1986). Twenty-five years ago, models weighed 8% less than the average woman now models weigh 23% less than average (Silverstein, et al, 1986).

Clearly, there is a growing disparity between actual body size and the cultural standard. What this means is that it has become progressively more difficult for most women to live up to the ideals thrust upon them by society and media. Many women feel inadequate when they consider their bodies, but the truth is that the standard is impossible for most women to reach if they are to remain healthy. Another disturbing trend is that the ideal of physical beauty is becoming increasingly standardized throughout the world. Overwhelmingly the standard for beauty is: young, able-bodied, white, Western and wealthy (Demerest & Allen, 2000).

This increased dominance of this Euro centric image of beauty has had a powerful impact on women throughout the world (Chapkis; 1986). Black Latina, Asian and Native American women are under-represented and often invisible in fashion magazines and the popular media. The beauty standard promoted in North American Culture is white skin, blond hair, blue eyes and European facial features (Chapkis, 1986). If you browse through the popular magazines; the message is overwhelmingly overstated: women are encouraged by the beauty industry to conform to a very narrow image of beauty that is reflective of a small minority of the world's population.

LITERATURE REVIEW

Construction of Body Image

As stated earlier, there is often a large degree of discrepancy regarding the perception of the body. At what point in time this discrepancy begins is the subject of many research studies. How an individual perceives his or her body and how that perception impacts behaviors is of great theoretical interest. Early theorists provided glimpses of the connection between of body image and cognitive development. Freud recognized the significance of body attitudes in his developmental constructs in his personality development theory (Freud, 1908). Piaget (1960) ascribed basic importance to the perceived body as an organizing force. Erickson (1968) proposed that the body is a key component in affective and cognitive development. Goffman described three different types of stigmas and how they impact an individual's sense of identity (Goffman, 1963).

Most of the early theories on cognitive and personality development provide very sketchy paradigms of how children learn to make sense of their body experiences. How is it that we go from self-love (early childhood) to self-loathing, and is the process a direct result of cultural stimulus or internal family dynamics? Current research suggests that body image is a multidimensional construct consisting of many factors such as history, culture, social and biological factors (Slade, 1994). Research done by Cash and Henry (1995) suggests that body image is a combination of perceptual and attitudinal dimensions. Gleaves et al. (1995) model of body image consists of four components: fear of fatness, body distortion, and preference for thinness and body dissatisfaction. Other

theories on body image look at several components including perception, cognition, affect and behavior (Banfield & McCabe, 2002).

Clearly, researchers are faced with challenges when creating body image models. Because of the variance in the models currently being used, it is difficult to compare findings and interpret results. The multidimensional models are probably the most accurate, however, more investigation is necessary in order to determine which models provides the best theoretical framework for studying body image.

Gender Differences

Men and Body Image

Recently, Anastasia Volochkova, a Russian Ballerina was fired because of claims that she was “too heavy” to be lifted. The ballerina was 5’6 and weighed 110 pounds (Melnichuck 2003). In contrast, Doug Flutie, Boston College’s Heisman trophy-winning football hero was also faced with a strong cultural belief—that football requires big men. Flutie is only 5’ 9, which is significantly below the height of the typical quarterback. However, because of his skill and ability, he was able to overcome that stereotype and managed to become a successful professional quarterback. It was possible for Doug Flutie to become a Little Big Man, but not for Anastasia Volochkova to be a Big Little Woman. A policy like this sends a very clear message—there is an “ideal” body image men and women are expected to conform to, and this is true whether or not you are involved in sports or performing arts.

In general men appear to be more satisfied with their body images and they have less pressure to be thin than women (Cash, et al. 1986). A 1986 national survey indicated that only 41% of men were dissatisfied with their weight compared with 55% of women

(Cash, Winstead, & Janda, 1986). Drewnoski and Yee's (1987) research showed that men were split in terms of those who wanted to lose weight (40%) and those who wished to gain weight (45%). Recent research however, suggests that men may be falling victim to cultural trends. Men are receiving messages from the media that fat represents weakness and is not considered manly (Nemoroff Stein, Diehl and Smolack (1994). Men are under pressure in our society to be muscular and strong, and they also feel the pressure to over-exercise and diet. The ideal man as shown on TV, in movies and in advertising, has become increasingly lean and muscular. Even the proportions of G.I. Joe and other action figures have changed dramatically over the years, from more normal male proportions to a physique far bigger than the largest body builder. Guys may get the message that to be a "real man" they have to have huge muscles, a "six pack" abdomen and little body fat. This can be a hard look to achieve for many men and boys. Problems surface when excessive exercise and other extreme measures are used (Anderson, et al. 1995).

Garner and Kearney-Cooke's (1997) research shows evidence that men are increasingly reporting body dissatisfaction. The areas in which men are most dissatisfied with are their abdomens, chests and overall muscle tone (Gamer & Keaney-Cooke 1997). An example of this is can be shown in the area of cosmetic surgery. The most recent statistics available show that approximately 100,000 men undergo plastic surgery annually, compared to only 55,000 in 1992 (CNN 1999). Additionally, Schneider and Agras (1987) studies have shown that a larger number of men suffer from eating disorders, particularly youths in gay culture.

Women and Body Image

Given the impact that body image can have on women's physical, mental and social well being, there has been a tremendous amount of research on women and body image. Western perceptions of the ideal body type for women is consistent with women's increased dissatisfaction with their bodies, increased dieting practices and a significant increase in eating disorders (Anderson & DiDomenico, 1992). David Garner's 1997 body image survey of 3,452 women found that 89% of them wanted to lose weight. Survey data shows that 75% of women within normal weight in the United States feel fat and 50% of adult women in the United States are on some type of diet (Wolzon, 1998). Even more disturbing is that girls as young as five have expressed fears of getting fat and 80% of 10-year old girls have dieted (Center for Media Literacy's Newsletter, 1997).

One of the most serious consequences of negative body imagery are eating disorders. Research on bulimia and anorexia have shown that most eating disorders are found in females in their teens and early twenties, especially those from middle or upper class families (Garner and Garfinkel, 1985). Eating disorders and body dissatisfaction are becoming more common on college campuses. Garner and Garfinkel (1985) suggest that the differences between ideal beauty and actual weight creates conditions where individuals actively pursue ideal beauty through dieting and exercise, and eating disorders represent the extreme cases of this pursuit.

The Feminist Perspective

Leslie Heywood's *Dedication to Hunger* (1996), discusses how the 'anorexic aesthetic' is embodied in high modernism. It can be argued that the objectification and sexualization of women in general are the underlying influences that lead women to

unhealthy body images. Susan Bordo examines this phenomenon in her book *Unbearable Weight: Feminism, Western Culture and the Body* (1993). Even though Western culture has gone through several significant feminist movements, Bordo argues that women still carry the burden of their sexuality, and are still evaluated by their bodies. Interestingly enough, Bordo sees the emergence of eating disorders not from a psychological or medical view, but evaluates it by looking at our societal cultural norms. Her analysis is consistent with Niva Piran's (2001) perspective on body image. Piran states that "the unchanged rates of violence against women, sexual harassment, the commodification of women's bodies... are just a few of the diverse and multiple expressions of bodily oppression that women experience (2001)."

There are researchers who believe that the empirical models that examine female body image issues are inherently flawed. Pirkko Markula (2001) examines the problem of body image distortion (BID) from a Foucauldian feminist perspective. Foucault stated that medicine individualizes disease; in other words, Illness is a problem within the individual (Markula, 2001). Using this logic, through "cultural construction of femininity" women are told that it is their responsibility to resist the beauty ideals thrust upon them by the media, yet at the same time they are given information about body image distortion which leads them to diagnosis themselves with an illness instead of looking at the dominant cultural standards of beauty (Markula, 2001). A similar analysis of body image theory by Linda Wolzon (1998) criticizes the modern rhetoric of the "male-as-norm, women-are-deficient" discourse, which also blames body image distortion more on the individual, while ignoring the key role that are cultural beauty standards play on body image distortion.

Ethnic Differences

Research on the racial differences in body perception have shown that African American women report higher satisfaction with their body images than white women, and are more realistic about the perceptions of their body (Rucker & Cash, 1992, Molloy & Herzberger, 1998, Adkins, 1999). In general, African American women have lower incidences of eating disorders and are less likely to be obsessed with dieting (Markkar and Strube, 1995) however African Americans are not immune to the pressures to conform to cultural norms. Recent research on body image distortion has shown that African American women do not differ significantly from white women in body dissatisfaction (Demerest & Allen 2000, Bissell, 2002). As African American women attain higher income levels, they may begin to adopt more Euro-American values. This may make many of them feel unacceptable and powerless. Some women of color may try to ignore the cultural standards of beauty and gain support, validation and acceptance in their own communities, other women feel caught between two different cultures—being asked to look and behave in two different ways and told from early on that they have to conform to two standards of beauty (Hooks, 1984).

Media/Social Control

American women are obsessed with thinness. Advertisements bombard us with images of thin women who became that way because they drank Slimfast in the morning, took Dexatrim in the afternoon exercised to their TaeBo videos in the evening. Women are exhorted to strive for a physical ideal that is laden with moral judgment. Slenderness represents restraint, moderation, and self-control—the virtues of our Puritan heritage. Our culture considers obesity “bad” and ugly. Fat represents moral failure, the inability to

delay gratification, poor impulse control, greed, and self-indulgence. The slim figure has also come to represent health as well as beauty. The beauty industry, the pharmaceutical industry, and the food industry make billions of dollars annually by exploiting women's insecurities about their bodies. Bookstores are full of advice on losing weight, flattening the stomach, getting rid of cellulite, or dressing to look more slender. American food, weight loss, and cosmetic industries thrive on the purchases made to obtain the unobtainable goal of physical perfection. The slim and flawless cover girl is an icon created by capitalism for the sake of profit. Millions of women pay it homage. Women are inundated with the message that if you want to be valued in our society, then you must be thin and fit. Gender has always played a significant role in commercialism, and today's unrealistic beauty standards are clearly being used to control not only how women feel about their bodies, but also how we behave as consumers. (Bordo, 1993).

Stigma and other influences

Obesity is highly stigmatized in our society (Wolzon, 1998). Research has shown that children as young as six have already conceptualized a bias against fat (Wolzon, 1998). According to Erving Goffman, the term stigma refers to an attribute that is deeply discrediting, but it should be viewed in terms of a language of relationship (1963). A stigma is a special type of relationship between an attribute and a stereotype. Goffman identified three types of stigmas: 1) abominations of the body, 2) blemishes of individual character and 3) tribal stigma (1963). All three of these types of stigma can impact how women feel about their body images and create serious eating and weight problems. It helps to think of body image problems on a continuum. On the one end is the healthy body and positive self-esteem, which represent the goal of body and self-acceptance.

Dissatisfaction with the body image follows, then weight preoccupation, yo-yo-dieting, dieting induced weight gain and emotional and compulsive eating. Finally, the opposite end of the continuum is comprised of eating disorders such as anorexia and bulimia.

Hatred of fat is a socially acceptable form of prejudice and stigma. Large people are still the butt of jokes by many professional comics and the media. Health professionals rate fat people as more “disturbed” and likely to have less favorable results from treatment. Recently, a politician attempted to pass a law, which would have forced larger individuals to purchase two airline seats in order to accommodate their size, and several American airline companies have policies regarding weight restrictions for passengers (Crutcher, 2002). Overweight people have lower rates of acceptance to college, reduced likelihood of being hired for jobs, and lower rates of pay (Karris, 1977, Valenti, 2002). Strong economic, psychological and social sanctions against fat are imposed on women and men, however, studies indicate that women are discriminated against more than men. For example, larger women have a greater difficulty getting accepted into college, lower wages, and vulnerability to verbal and physical abuse because of their body size (Schonefeldt & Wieser, 1984).

Parents and peers also play a significant role in how individuals feel about their bodies. There are few studies that directly study the correlation between body image distortion and family and peers (McCabe, et al. 2001). McCabe et al. (2001) found that adolescent girls perceived that their mothers encouraged them to conform to societal ideal body standards. Moreover, peers were also indicated as influencing girls to conform to societal standards, however this pressure was not true for boys. Further research is necessary to explore the correlations between parental and peer influence on body image.

This research investigates the relationship between body satisfaction, gender and ethnicity. This study examined the factors that most influence body image, differences between males and females and finally, differences in body satisfaction between Whites and African Americans. My expected findings are:

Hypothesis 1—White women would have a lower satisfaction with their body image than African American women.

Hypothesis 2—Men of all races would report a higher satisfaction with body image than women, and

Hypothesis 3—African American women would have a higher satisfaction with their body image compared to White women.

METHODOLOGY

Participants

253 college-students—181 females and 72 males took part in this study. I obtained my sample by entering into two large sociology classes—Integrated Social Sciences 310 (ISS 310) and Sociology 315 (Soc 315) in the Fall semester of 2002 at Michigan State University. Because both classes were 300-level courses, the strategy was to obtain a pool of young adults reflective of the general college population. I explained that I was a graduate student interested in studying body image and I asked if students would be interested in participating. All of the subjects volunteered and were informed that they did not have to answer any questions that they were not comfortable with. The study was approved by The University Committee on Research Involving Human Subjects' (UCHRIS). The survey took approximately 15 minutes to complete.

Measures—Independent and Dependent Variables

The independent variables were gender and/or race. The dependent variables were the various questions that were asked about body image. Both the male and female respondents completed the same questionnaires. Race was coded into two categories: white and African American and students of other races were left out because of the small sample size.

After reviewing the literature on self-reports related to body image, I created a questionnaire consisting of 44 questions and statements concerning body image. The sequential order of the questions were to ask general questions in the beginning, the more personal/difficult questions in the middle of the survey, and the demographic information at the end of the questionnaire. The subjects were asked questions ranging from perceptual, affective, cognitive and behavioral issues concerning their bodies. Perceptions of body image were measured (for example, ‘Do you consider yourself overweight?') using yes/no format or a range of answers (for example, ‘How much weight do you want to lose?’). Affective questions (for example, ‘How do you feel about the way your body looks?’) were Likert-scaled from 1 = very satisfied to 5 = very dissatisfied. Cognitive questions also used a 1 to 5 scale (for example, “How often do you think about your body weight, 1 = always, 5 = not at all), and behavioral questions used a yes/no and range of answers format (for example, ‘Do you diet?’ and ‘How often?’). Additionally, the demographical measures of race, sex, family income and educational statuses were also recorded. Dummy variables were used for race and Sex (1= female, 1= African American). There were several questions used to identify variables associated with body image. For the main question “How satisfied are you with your body,” the categories

were: very satisfied (5), somewhat satisfied (4), satisfied (3), dissatisfied (2) and very dissatisfied (1). The measures used were demographic (age, sex, race, parental income and marital status), body satisfaction, perceptions about ideal body weight, dieting and other weight loss practices and influences on body satisfaction (media, friends, significant other, etc). The subjects were asked their current height/weight, if they considered themselves overweight, and if so, how much weight they wanted to lose.

FINDINGS

Table 1 represents the descriptive characteristics of the sample. The sample was generally reflective of the university's population, but approximately 70% of the sample was female and 28% were male. Almost 85% of respondents were white, compared to 15% who were Black or other. The mean age was 20.1, and the overwhelming majority was unmarried (97.6%). Almost 55% of the respondents had a family income of \$80,000 and above.

TABLE 1: DESCRIPTIVE DATA

SEX		
	Female	71.50%
	Male	28.50
RACE		
	White	84.60%
	Black	8.30
	Other	6.30
MARITAL STATUS		
	Single	97.60%
	Married	2.40
FAMILY INCOME		
	\$10,000-39,999	11.40%
	\$40,000-79,999	34.70
	\$80,000 and above	53.90

Table 2 shows a comparison by race of women the percentages that responded to six key questions regarding how they felt about their bodies. The first five rows are the percentages that responded to the question, “How do you feel about your body?” Row six contains the responses to the question, “Have you ever dieted?” Rows seven through nine show the responses to the questions about binge eating, vomiting to control weight and feeling depressed about how their bodies looked. Only five percent of white women listed that they were very satisfied with their body image, compared with 11.8% of Black women. More than 56% of white women listed that they had not eaten because of feeling

fat, compared to 23.5% of Black women. Interestingly, white and Black women reported similar response rates (23.7% and 23.5% respectively) to being dissatisfied with their body image. However, there were significant differences found in the questions related to binge eating, vomiting to control weight and being depressed about body image. Twenty-five percent of white women in the sample admitted to binge eating to control weight compared to only 5.9% of Black women. Almost 12% of white women admitted to binge eating, whereas only 5.9% of Black women reported such behavior. Depression about body image was significantly higher among white women. Over 35% in the sample reported to feeling depressed about their bodies, compared to only 17.6% of Black women.

TABLE 2: COMPARISON BY RACE—WOMEN ONLY

	WHITE	BLACK
Very Satisfied w/body	5.1%	11.8%
Somewhat Satisfied	39.1	29.4
Satisfied	30.8	35.3
Dissatisfied	23.7	23.5
Very Dissatisfied	1.3	--
Dieted	52.6	41.1
Not Eaten Because of Feeling Fat	56.4	23.5
Binge Eating	25.0	5.9
Vomited to Control Weight	11.6	5.9
Depressed About Body	35.9	17.6

Table 3 highlights a comparison of women by race of the top three influences on body image. For both white and Black women, friends, media and parents were the highest reported influences. Interesting, friends were slightly more influential than friends for white women, and the media was the most influential for Black women. This may indicate the strong message that Western media sends to young women: to be beautiful you must have a slender body.

TABLE 3: BODY PERCEPTION INFLUENCES—WOMEN ONLY		
	WHITE	BLACK
Friends	67.9%	35.3%
Media	64.1	41.2
Parents	29.5	17.6

Tables 4 and 5 shows the percentages of responses to five key questions on body image that were in a higher income bracket (\$80,000 or higher). These tables are also for women only and are divided by race. Over 70% of Black respondents, and 57% of white respondents reported that they were currently dieting. Fifty-nine percent o white women and 57% of Black women reported not eating because of feeling lit. This table indicates is that within the higher income brackets for both races there is even more pressure to be thin.

TABLE 4: HIGH FAMILY INCOME DIFFERENCES

White Family Income \$80,000 and Above	
Dieting	57.0%
Not Eaten Because of Feeling Fat	59.8
Binge Eating	29.0
Vomited to Control Weight	7.0
Depressed about Body	39.0

TABLE 5: HIGH FAMILY INCOME DIFFERENCES

Black Family Income \$80,000 and Above	
Dieting	71.0%
Not Eaten Because of Feeling Fat	57.0
Binge Eating	14.0
Vomited to Control Weight	14.0
Depressed about Body	14.0

Table 6 shows the responses of men to the six key questions regarding how they feel about their bodies. Although the data set is much too small to make any generalized conclusions, it is clear that men do not suffer from the same body image issues that women have. Men of both races reported higher body satisfaction than women.

TABLE 6: COMPARISON BY RACE—MEN ONLY

	WHITE	BLACK
Very Satisfied w/body	17.2%	--
Somewhat Satisfied	37.9	25.0
Satisfied	26.0	75.0
Dissatisfied	17.2	--
Very Dissatisfied	1.7	--
Dieted	33.0	25.0
Not Eaton Because of Feeling Fat	21.0	--
Binge Eating	14.0	--
Vomited to Control Weight	1.7	--
Depressed About Body	15.5	--

Hypothesis 1 predicted that white women would have a lower satisfaction with their body image compared to African American women. The dependent variable was body image and the independent variables were race and gender. Multiple regression analysis using SPSS (Statistical Program for the Social Sciences) did not support this hypothesis (See Tables 7 and 8). The most likely reason for this failure is due to the significantly limited number of African American women who participated in the study.

Hypothesis 2 predicted that men of all races would report a higher satisfaction with body image than women. This hypothesis is supported through regression analysis (See tables 7 and 8). Based on the responses, men appear to have less concern over their body images than women.

Hypothesis 3 predicted that African American women would have a higher satisfaction with their body image compared to White women. Again, because of the small number of African American respondents, this hypothesis was not supported by the data. Although African American women showed higher satisfaction with their body image, the difference was not statistically significant.

TABLE 7: ANOVA^b

Model	Sum of Squares	DF	Mean Square	F	Sig.
1 Regression	5.752	5	1.150	1.291	.268 ^a
Residual	21.248	236	.091		
Total	27.000	241			

^aPredictors: (Constant, single, pregnant, sex, race, age)

^bDependent Variable: Satisfaction w/Body

TABLE 8: Coefficient^a

Model	Unstandardized Coefficients		Standardized Coefficients		
	B	Std. Error	Beta	t	Sig.
1 (Constant)	2.453	.301		8.135	.000
Age	.365	.259	.096	1.411	.159
Sex	-.292	.140	-.138	-2.091	.038
Pregnant	.325	.280	.078	1.161	.247
Race	1.503E-02	.163	.006	.092	.927
Single	7.533E-02	.148	.033	.508	.612

^aDependent Variable: Satisfaction w/Body

DISCUSSION

My research indicates that White women are less satisfied with their body images than African American women, however, it appears that women from both races share common concerns about body their image; which may make many of them feel inadequate. Behaviors such as binge eating, vomiting, and being depressed about weight indicate that there is a great deal of shame, guilt and stress involved in women's relationships with their bodies. This contributes not only to eating disorders, but also to risky cosmetic surgery, depression, agoraphobia and feelings of helplessness (Freedman 2000). We learn to dislike our appearance and place a high premium on the cultural ideals of beauty. Underlying this concern is a strong cultural imperative for women to measure their value with physical attractiveness. Socialization and sex role stereotyping leaves many women feeling ugly, fat, inadequate, self-conscious and uncomfortable in their bodies. For many women, the body is not a pleasurable and functional part of being female, instead, it is an object to be manipulated, punished and misused: to be made more "acceptable."

In contrast, it appears that men in our culture are not bound to the rigid standards of beauty that exist for women. However, it is difficult to conclude this because the sample size was very small and this after reviewing the questionnaire, it is obvious that this study was designed for women.

Limitations to Study

A major limitation to this study is the under-representation of minorities. The sample size for African Americans women may have been reflective of Michigan State's minority population, but it failed to provide representation for African American women

as a whole. Future studies on body image must be sure to use probability proportionate to size sampling (PPS). For example, a study can be developed with equal numbers of Black and White females using a 2 X 2 mixed design. This method would ensure that African American perceptions on body image are accurately reflected.

My study failed to provide any meaningful data on what factors influence male body image—it is logical that they would be influenced by the media and other pressures, but in different ways than women. For example, men may not want to lose weight, but gain muscle and look more athletic. I realize that this study was not designed for men—the questions were, and a questionnaire designed to specifically looked at things such as what defines male prowess—muscles, money, and status—is needed. Clearly, there is evidence that men are experiencing some type of pressure to conform to an ideal standard of male beauty. In professional sports, there are always accusations of steroid use, and pressure to control and manage weight, however I found limited research in the area of males and body images, the exception being the literature on gay males. The overall majority of men that filled out my questionnaire did not express problems with their body image. Researchers are now starting to realize that by focusing on the problems associated with women, they are ignoring issues that may concern men (McCabe & Ricciardelli, 2001).

One obvious limitation in my study is that I used college students who are very young. Perhaps as individuals mature, their satisfaction with their body images may increase. It would be beneficial to look at different age groups of individuals and compare these results with the college age group to see what trends are consistent across timelines. However, considering the double standards that exist for aging in our culture

(de Beauvoir 1972)—in which women's aging is not as acceptable as men's aging—combined with the other pressures of physical aging, it is doubtful that older women have more satisfaction than younger women. Additionally, variables such as race and socioeconomic status should be explored to see how they influence older women's perceptions of their bodies.

Another component of my study that I would like to explore further is the correlation that I have discovered between higher economic status and lower satisfaction with body image. Although my study showed that friends and the media are significant factors on body images, parents may also play an important role in reinforcing the sociocultural messages regarding body image. More research is needed that looks into family structures and how this impacts body image, especially for women in higher income brackets because they are at the greatest risk for developing eating disorders. Parental comments about weight and dieting have been shown to increase dieting and body concerns in daughters (Dunkley, Wertheim, Paxton, 2001).

Even though my sample size was small, the overall findings suggest that upper middle class white women have a tremendous pressure to be thin, most women are not completely satisfied with their bodies, and it appears that the media does play a significant role. The majority of women wanted to change at least one part of their bodies, the most frequent desire being to have larger breasts. Magazines such as Glamour, Cosmopolitan and even Oprah—who has had public struggles with her own weight—depict wafer thin models in advertisements who are tall, tan, thin and well endowed. Everything from vacuum cleaners to beer ads depicts slim, shapely women with perfect hair and faces. The pressure to be thin seems to be a combination of peer,

media and family influences, and although African American women appear to be more satisfied with their body images, my qualitative research suggests that as their income increases—i.e. develop more middle class values, their satisfaction with their body image decreases. This study did not truly show this, due to the small sample size, however there is research that indicates that as African American women become more acculturated within the dominant white culture, they have a greater risk of becoming less satisfied with their bodies due to the higher exposure to the preferences, attitudes, and ideals of white culture (Allan & Michel, 1993).

Longitudinal research would also be helpful in order to determine the trajectory of body image, and if there is a time—such as early adolescence—when individuals actually find acceptance with their images. Moreover, it would be beneficial to look at research that examines what factors promote healthy body image and positive self-concept. This is critical if we ever hope to overcome the growing problem of eating disorders.

Finally, it is my opinion after doing this investigation that much of the research on body images falls to look at the broader issues of social control and social change. Millions of dollars are spent annually on products that tell women (and men) that there is something wrong with their bodies. The latest *Sports Illustrated* (Spring 2004) was more about flesh and beauty than swimsuits (there were several shots in which the women were not wearing bathing suits). Fashion trends often reflect the current themes or movements in our society. In the sixties, the skirts became shorter, women threw away their bras, and the sexual revolution was born. In the seventies, the aftermath of the sixties led to the polyester disco era. The eighties were symbolized by the extravagance and conservativeness of the Reagan era—big hair, big shoulders, and perhaps this was the

decade when the seeds of perfection that we are faced with now were sown. Blumer described fashion as an expression of collective behavior—a “positive wish fulfillment.” If this logic is applied to women and body image, perhaps women just want to be in “fashion” and look like the images that they are constantly bombarded with.

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