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Body-Image Attitudes and Perceptions Among African-Americans and Whites as a Function of Socioeconomic Class

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BODY-IMAGE ATTITUDES AND PERCEPTIONS AMONG
AFRICAN AMERICANS AND WHITES AS A FUNCTION
OF SOCIOECONOMIC CLASS

by

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A Dissertation submitted to the Faculties of
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ABSTRACT

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Virginia Consortium for Professional Psychology, 1991
Chairman: Dr. Thomas F. Cash, ODU

While many facets of body image have been extensively researched, relatively few studies have examined racial and social class differences in body image. The present paper consists of two studies examining racial and class differences in body image among males and females. Study 1 utilized a national sample of respondents to a 1985 Psychology Today survey to examine racial (Black and White) and educational differences in body image among men and women. Study 2 utilized a smaller sample of Black subjects, half drawn from several Southeastern universities and the other half from non-academic locations in the Tidewater area of Virginia to examine gender and social class differences in body image among Blacks. The results of the two studies were consistent in leading to three general conclusions: (1) Regardless of race or educational level, men have a more positive body image than women. (2) Regardless of sex or educational level, Blacks tend to have a more positive body image than Whites. (3) While White women tend to be more

invested than White men in various aspects of their body image, Black men are as invested in their body image as Black women. Results of the first study indicate that being better educated may result in a somewhat more positive body image, although this was not as strong or consistent a trend as the other ones noted above. The lack of significant results based on social class in the second study may reflect a lack of diversity in social class among the subjects in the study rather than the true absence of class differences in body image in the general population. Explanations for the differences, clinical implications, weaknesses of the studies, and suggestions for future research are discussed.

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Dedication

To my parents,
Eugene and Imogene,
who have been consistently supportive
and who encouraged me from an early age
to value the diversity in life

Acknowledgments

To put it mildly, writing a dissertation is no small task. Not only have I invested a tremendous amount of time and energy into this project, but so have a number of others who provided me with support and assistance along the way.

Most notably, my chairman, Tom Cash, has been very involved with this project from start to finish. He has embodied all of the best aspects of the phrase "strong chair." He carefully read through countless drafts and patiently helped work out numerous statistical problems, as well as providing his thoughts and opinions about the design and implementation of the study and the interpretation of the results. He readily made time for me in his own busy schedule, and consistently did so with good humor and support. At the same time, he allowed me to think for myself, to struggle with difficulties on my own when I needed to, and to learn in the process. His assistance was invaluable.

I am thankful to the other two members of my core committee, Janis Sanchez-Hucles and Bill Colson, who also provided helpful feedback and support. I would also like to express my appreciation to my two readers, Francine Peterson and Robin Lewis, the latter who chose to remain on my

committee, even pending the arrival of her first child about the time of my defense.

Special acknowledgment goes to Jay Robinson who was working on his own dissertation on a topic related to my own at the same time I was. As a result, we were able to offer each other support, feedback, and assistance along the way. Data collection, in particular, was made significantly easier because we were able to utilize the same subject pool, most of whom Jay solicited on his own. This dissertation would have been significantly more stressful and demanding of time and energy without Jay's help.

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In addition, several friends have provided emotional support during the ups and downs of this year, most notably my classmates Rachel Sheffet and Jennie Crim. Finally, my deepest gratitude goes to Stephanie Rieschel. While unfortunately living a few thousand miles away, she still provided me with tremendous support and understanding. She also helped keep me in touch with the world beyond my dissertation, reminding me just how special and wonderful that life can be.

TABLE OF CONTENTS

	Page
DEDICATION.....	iii
ACKNOWLEDGMENTS.....	iv
LIST OF TABLES.....	x
 CHAPTER	
1. Introduction.....	1
The concept of body image.....	2
Gender differences.....	4
Weight and body image.....	5
Cultural influences on definitions of beauty.....	9
Social class and body image.....	10
Social class and body weight.....	12
Race and body image.....	14
Black self-concept studies.....	16
SES, race, and gender effects.....	19
Summary and focus of present research.....	20
Hypotheses.....	23
2. Study 1: The National Survey.....	25
Method.....	25
Subjects.....	25
Educational attainment.....	27
Measures.....	27

	Page
The Body-Self Relations Questionnaire (BSRQ).....	29
Body Areas Satisfaction Scale (BASS).....	30
Weight-Related Scales.....	30
Results.....	31
Reliabilities.....	31
Group differences on MBSRQ body-image attitudes.....	31
Appearance-related scales.....	32
Fitness-related scales.....	37
Health-related scales.....	39
Weight-related scales.....	42
Weight satisfaction differences between weight groups.....	44
3. Study 2: The Local Survey.....	50
Method.....	50
Subjects.....	50
Social class.....	51
Measures.....	53
Multidimensional Body-Self Relations Questionnaire (MBSRQ)....	53
Eating Disorders Inventory (EDI) Drive for Thinness subscale.....	54
Body Image Assessment Procedure -Revised (BIAP-R).....	54
Weight History Questionnaire.....	55
Results.....	56
Reliabilities.....	56

	Page
Differences on the MBSRQ subscales.....	58
BIAP-R comparisons.....	60
Sex and class differences on other weight-related items.....	66
4. Discussion: Study 1 and Study 2.....	72
Gender differences.....	73
Racial differences.....	75
Educational differences.....	76
Summary of findings	77
Intra-racial variation.....	78
Racial differences.....	82
Racial differences in body image regardless of gender.....	82
Racial differences in body image related to gender.....	85
Education and social class effects.....	88
The complexities of defining social class.....	89
Race and social class.....	90
Methodological factors contributing to a lack of class differences in Study 2.....	91
Educational differences in body image...	94
Clinical implications.....	96
Weaknesses of the studies.....	99
Future research.....	102
References.....	105

	Page
Appendices.....	116
A. MBSRQ.....	116
B. Eating Disorders Inventory Drive for Thinness Scale.....	122
C. Body Image Assessment Procedure-Revised.....	123
D. Background Information.....	132

LIST OF TABLES

Table	Page
1. Distribution of Subjects Based on Sex, Race, and Educational Level.....	28
2. Reliabilities (Cronbach's Alphas) of the MBSRQ Subscales for Black and White Men and Women in Study 1.....	33
3A. <u>F</u> Values for Main Effects of Sex, Race, and Education on MBSRQ Subscales and Weight-Related Scales.....	34
3B. <u>F</u> Values for Interactive Effects of Sex, Race, and Education on MBSRQ Subscales and Weight-Related Scales.....	35
4. Adjusted Means for Sex x Race Groups on Appearance-Related Scales.....	36
5. Adjusted Means for Sex x Race Groups on Fitness-Related Scales.....	38
6. Adjusted Means for Sex x Race Groups on Health-Related Scales.....	40
7. Means and Standard Deviations on MBSRQ Scales for Subjects with Some College Education or Less and Subjects with a College Education or More.....	41
8. Adjusted Means for Sex x Race x Education Groups on Weight-Related Scales.....	43
9. Distribution of Black and White Males and Females Across Four Weight Classification Groups..	46
10. Means, Standard Deviations, and <u>F</u> Values for Men and Women's Satisfaction with their Weight....	47
11. Reliabilities (Cronbach's Alpha) of Study 2 Scales.....	57

Table	Page
12. Mean Scores, Standard Deviations, and <u>F</u> Values on MBSRQ Subscales for Black Men and Women.....	59
13. Mean Scores and Standard Deviations on the BIAP-R Silhouette Items.....	61
14. <u>F</u> Values for Sexes on Between Item Differences on the BIAP-R.....	62
15. Distribution of Males Among Those Who Wanted to Increase, Decrease, or Maintain Body Size on BIAP-R Item Pairs.....	65
16. Mean Scores, Standard Deviations, and <u>F</u> Values on Weight-Related Scales for Black Men and Women..	67
17. Percentages of Male and Female Subjects Who Wished to Lose, Maintain, or Gain Weight.....	68
18. Means, Standard Deviations, and <u>F</u> Values for Weight Satisfaction Scores Among Men and Women Divided by Weight Class.....	71

CHAPTER 1

INTRODUCTION

In recent years increasing attention has been given to the role of body image in an individual's self-concept. This is due in part to the increased incidence and resulting study of eating disorders which often include as a symptom a negative and distorted body image. As with much psychological research, body-image studies have primarily focused on White middle class subjects. Relatively little research has been done on body image in Blacks and how it compares to body image in Whites. There has also been little attention paid to how socioeconomic status (SES) may be related to body image, and virtually no studies have examined how race and SES may relate to body image. In two separate studies, this paper will explore how multiple facets of body image are related to race and socioeconomic class.

A review of the relevant literature will precede presentation of the studies. The review will begin with a brief discussion of the concept of body image and various

factors that are generally included under that heading. Next, gender differences in body image will be discussed, with a particular focus on weight. Following that, the influence cultures have on defining what is considered attractive will be reviewed as an introduction to reviewing studies that have examined the relation of social class and/or race to body image. Finally, while considering the relation of race and body image, the classic Black self-concept studies involving the selection of Black or White dolls by young children will also be briefly discussed.

The Concept of body image

The term body image most generally refers to the thoughts, feelings, and perceptions people have toward their bodies. Body image is clearly a multi-faceted construct (Cash & Pruzinsky, 1990). For example, one of the most obvious somatic foci of body image is physical appearance. But other areas such as one's level of physical fitness (which may not always be immediately apparent to the eye), physical health, and sexuality also contribute to body image. Global physical appearance can be broken down into specific facial features, other body parts, height, weight, and general body shape, to name a few. Individuals' body experiences can be quite different across these various areas. For example, Cash (1989) found that "feelings about most discrete body parts do contribute uniquely and additively, but not equally to the affective Gestalt" (p.

18). Moreover, any particular area can be assessed from a variety of perspectives. These perspectives include an objective assessment based on some standardized measure, subjective perceptions and feelings about the area, the importance of the area to the person, efforts put forth to change or maintain the area, and so forth. For example, persons who are objectively normal weight may view themselves as overweight, feel slightly unhappy about it, but have a greater investment in their height and facial appearance, with which they may be satisfied. While a review of the findings of research in all these various areas of body image is beyond the scope of this paper, the most important general findings about body image will be briefly reviewed (see Cash & Pruzinsky, 1990, for a more thorough review of the literature).

Most people attend to and strive to improve their physical appearance. In perhaps the most extensive survey study of body image to date, Cash, Winstead, and Janda (1986) found that the vast majority of men and women (82% and 93%, respectively) are active in their attempts to manage and improve their physical attractiveness. In that study, approximately a third of the subjects said that they were dissatisfied with their looks as they were. Overall, it appears that most people have some dissatisfaction with one or more aspects of their body image (Fallon, 1990). A number of studies have found a correlation between one's

body-image attitudes and more general feelings towards oneself such as self-esteem as well as more general psychosocial adjustment (Cash et al., 1986; Cash, 1990; Fallon, 1990; Striegel-Moore, Silberstein, & Rodin, 1986).

Gender differences

While sometimes overstated by researchers, there do appear to be gender differences in body image with women having a greater preoccupation and dissatisfaction with their body image, particularly with regard to weight (Cash et al., 1986; Cash & Brown, 1989; Freedman, 1990; Hayes & Ross, 1987). In their development of the Body Esteem Scale, Franzoi and Shields (1984) identified three separate factors for men and women that contribute to their body esteem. For men the three factors related to physical attractiveness (primarily facial features and physical features related to being handsome), upper body strength/physique, and physical fitness. For women the three factors related to physical attractiveness (primarily facial features and aspects of appearance that generally can not be changed by physical exercise), weight concern, and physical fitness. They also found that aspects of men's body esteem were more highly interrelated than women's, indicating that in women there is greater differentiation among various physical attributes comprising global body image (see also Brown, Cash, & Mikulka, 1990). Other studies have found that men tend to be more focused on their level of physical fitness and

physique, whereas women are more concerned about their appearance, particularly related to weight (Brown et al., 1990; Cash et al., 1986; Fallon, 1990; Fallon & Rozin, 1985; Striegel-Moore et al., 1986). Overall, men tend to see their bodies as functional, active, and physical whereas women view their bodies more aesthetically and in terms of appearance (Striegel-Moore et al., 1986).

Weight and body image

Weight is one of the central factors contributing to an individual's overall body image (Cash, 1989). Cash et al. (1986) found that 55% of the women and 41% of the men were dissatisfied with their weight, while even more (63% and 44%, respectively) were concerned about being or becoming fat. Huenemann, Shapiro, Hampton, and Mitchell (1966) reported that an even greater percentage of adolescents (63%-70% of high school females and 53%-59% of high school males) wanted to change their weight. Most women who are dissatisfied with their weight want to weigh less while men who are dissatisfied are more evenly divided between those who want to lose and those who want to gain weight (Drewnowski & Yee, 1987; Huenemann et al., 1966; Rosen & Gross, 1987; Silberstein, Striegel-Moore, Timko, & Rodin, 1988). There may also be an age effect among men, who, as they become older, may express a less widespread desire to gain weight and an increase in those who are either

satisfied with their weight or would like to lose some weight (Fallon, 1990).

Implicit in such high percentages of people who want to lose weight is that some of them are not, in fact, overweight. Research has generally found that approximately half of normal weight women consider themselves to be overweight while approximately a quarter of normal weight men view themselves as overweight (Cash & Hicks, 1990; Cash et al., 1986; Drewnowski & Yee, 1987). Other studies have found smaller, but still significant percentages of normal weight individuals who misclassify themselves as overweight (Levinson, Powell, & Steelman, 1986). This is in contrast to findings that the majority of overweight individuals accurately perceive themselves as overweight (Cash et al., 1986; Huenemann et al., 1966). Studies have also found that women are less accurate in their weight self-classification (Cash & Hicks, 1990; Cash et al., 1986) and more dissatisfied with their weight than men (Levinson et al., 1986; Striegel-Moore et al., 1986). In fact, weight concern appears to be the area of greatest difference between the body image of males and females (Cash & Brown, 1989; Fallon & Rozin, 1985). These discrepancies between actual and self-perceived weight appear to be specific to subject's bodies since they can accurately judge the size of other bodies (Striegel-Moore et al., 1986). One result of this is that individuals who view themselves as overweight,

regardless of whether they actually are, tend to be unhappier with their body image compared to self-classified normal and underweight subjects (Cash & Hicks, 1990; Cash et al., 1986; Gray, 1977).

Unfortunately, while many people commonly believe that losing weight is relatively straight forward and can be achieved through dieting and/or exercise, a growing body of research indicates that long-term weight change may not be that simple. There is clear evidence that a person's weight is, in part, genetically determined, possibly through varying metabolic rates (Striegel-Moore et al., 1986; Stunkard et al., 1986). Because of its reproductive function, women's bodies generally average a 25% fat content while a 15% fat content is normal for men (McFarland & Baker-Baumann, 1990). Women also tend to naturally put on weight during pregnancy, not all of which is always lost afterwards. In addition, there is an age effect where women tend to put on weight as they get older while men tend to gain their maximum weight in their 20's and 30's (Rothblum, 1990). All of these factors work against women becoming or staying as thin as society may dictate. The result is increased dissatisfaction among women with what objectively may be a normal and natural weight for them.

The most common explanation for this gender difference in body image is the significant impact of cultural and social norms in defining what is attractive and what is

unattractive. The mass media, advertising, parents, teachers, peers, and even children's books all help to convey the societal definitions of beauty, as well as to provide pressure to conform to such standards (Fallon, 1990; Striegel-Moore et al., 1986). There is widespread evidence that women in particular are pressured to conform to beauty standards and are evaluated and judged accordingly (Fallon & Rozin, 1985; Furnham & Alibhai, 1983; Garner, Garfinkel, Schwartz, & Thompson, 1980). The higher incidence of eating disorders among women is just one consequence of this. The role culture and society play in shaping body image is an important factor and will be briefly reviewed below.

Another reason for women's increased focus on body image and weight may relate to gender-related differences in values. It has been found that women tend to be more interpersonally-oriented than men (McFarland & Baker-Baumann, 1990). Body image is certainly one important element in interacting with other people. Therefore, women may be more likely to focus on their body image because of their desire to connect with other people.

Body image may also be more important to women because they have fewer avenues towards status and affluence in this society than men do. Women are also socialized to be more passive and less ambitious than men. As a result body image takes on more importance for women. Good looks may increase the likelihood of a woman getting hired for a job or

attracting a higher status husband. As McFarland and Baker-Baumann (1990) put it, attracting becomes an alternative to acting for women.

Cultural influences on definitions of beauty

Because we are daily bombarded by definitions of what is attractive and unattractive, it becomes easy to make the assumption that what is beautiful in this society has always been beautiful and is true everywhere. But a closer look at non-western societies, and even our own society in other eras, reveals that definitions of beauty can vary substantially from culture to culture and from era to era.

One example of this is the variance in cultural attitudes held about being overweight. In our present culture, obesity is generally considered unattractive and a sign of laziness and poor self-control, among the many ascribed negative qualities. In one study, even such presumably well-informed individuals as physicians tended to describe their obese patients as "ugly" and "weak-willed" (Fallon, 1990). In contrast, many non-western countries such as China and the Middle Eastern countries regard fatness as an attractive quality while thinness is often undesirable (Fallon, 1990; Furnham & Alibhai, 1983; Nasser, 1988). Even in western cultures, it has been noted that the equating of thinness with beauty is a relatively recent development and that for hundreds of years being heavy was considered attractive (Rothblum, 1990).

One factor that contributes to whether being overweight is considered attractive is how well-nourished people in that culture are. A general rule of thumb is that if malnourishment and food shortages are a salient problem in the culture then fatness is considered attractive--a sign of survival skills or resources. Conversely, when most of the culture is well-fed, thinness is likely to be more highly valued (Fallon, 1990; Hsu, 1989; Sobal & Stunkard, 1989).

Further evidence of the cultural relativity of beauty can be found in examining the body-image ideals of foreigners who move to a new culture. Goldblatt, Moore, and Stunkard (1965) examined families that had immigrated to the U.S. within the past four generations. They found that, with regard to weight, each successive generation conformed more closely to the American standard of thinness. This effect held even when age and SES were controlled. This and other studies (Furnham & Alibhai, 1983) have found evidence that immigrants tend to gradually adopt the beauty standards of the culture in which they currently live. The extent to which those standards are adopted is also related to the level of exposure to the culture and the pressure to conform to those standards (Fallon, 1990; Goldblatt et al., 1965; Mahoney, 1990).

Social class and body image

Another factor that contributes to cultural standards of physical attractiveness is social class. With regard to

those aspects of physical appearance that are most readily changed (e.g., weight, clothing, hair style), the upper class attempts to set standards of attractiveness that are achievable by themselves, but more difficult for the larger working class to achieve due to a lack of resources such as money, time, and appropriate facilities. In that way what is currently considered attractive is associated with the elite and wealthy, distinguishing them from the poor (Fallon, 1990; Hayes & Ross, 1987).

Fatness provides an excellent example of this trend in America. In earlier times, when food was not as easily acquired and men and women often were engaged in a large amount of physical labor, heaviness was regarded as more attractive. With the industrial revolution and other social forces, the poor had readier access to food and expended less energy working, likely increasing the prevalence of fatness. It is also possible that eating became a primary means of socializing and nurturing among the poor in America. For example, the money might not be available to buy someone a nice present on a special occasion, but a favorite meal could always be prepared. Possibly in response to this change among the poor, thinness became the standard of beauty, with the upper class having the time and money to be able to diet and become involved in weight-loss programs. As dieting and thinness have become more widespread, the slim but well-toned and muscular body for

women has become the standard (Fallon, 1990). Once again it is a form that is more easily achieved by the wealthy who have the time and money to enroll in health clubs and regularly exercise.

Skin tone is another example of changing beauty standards designed to single out the economically elite. In the days when the working class (as well as African-American slaves) worked outside and would become quite tanned, paleness was considered to be attractive. This was true among Blacks as well where the mulattos were given special privileges over their darker-skinned peers. With the relocation of a large part of the working class indoors as a result of the industrial revolution, a dark tan is now considered fashionable (although it is not dark skin tone, but tanned skin that is the fashion). One question this trend raises is whether there are significant differences in body image between social classes. This is an issue that will be explored below.

Social class and body weight

Extensive research has focused on the connection between class and weight in Western countries. The results have been impressively consistent in finding an inverse relationship between social class and the prevalence of overweight women (Goldblatt, Moore, & Stunkard, 1965; Hsu, 1989; Rosen & Gross, 1987; Ross & Mirowsky, 1983; Sobal & Stunkard, 1989). This has been found to be true whether

class was defined by income, education, or occupation, and whether fatness was defined by body mass, skinfold thickness, or technical obesity (Flegal, Harlan, & Landis, 1988a). It has also been observed in a number of Western countries other than the U.S., including Canada, Britain, Holland, Belgium, Czechoslovakia, Israel, and Norway, among others (Sobal & Stunkard, 1989). In men the trend is less clear. While there is some evidence of a similar inverse relationship between weight and class (Goldblatt et al., 1965; Mustajoki, 1987), other studies have found a direct relationship (Flegal, Harlan, & Landis, 1988b; Garn & Clark, 1976; Levinson et al., 1986; Sobal & Stunkard, 1989). Factors that may contribute to these gender differences might include a greater pressure on women to conform to societal standards of attractiveness and that among women it is preferable to weigh too little rather than too much, whereas for men the reverse is true (e.g., "the 98-pound weakling").

Age also appears to affect the relationship between weight and class. Among children some studies have found a direct relationship between weight and class. Children from a higher SES tend to weigh more than children from a lower SES (Garn & Clark, 1975, 1976; Kumanyika, 1987). However, a few other studies have found the reverse, or no effect at all (Sobal & Stunkard, 1989). What appears to happen is that during adolescence lower income adolescents,

particularly females, tend to put on more weight which pushes them ahead of upper income females with regard to body mass (Flegal et al., 1988a; Garn & Clark, 1975, 1976; Kumanyika, 1987). However, there is some indication that dieting is becoming more widespread among lower income women, perhaps in part on the increased focus on having a healthy lifestyle, including eating more nutritious meals (Rosen & Gross, 1987).

Race and body image

Another cultural factor that interacts with body image is race. The largest number of studies have examined Black-White differences, which this discussion will consider. With regard to weight, differences between Blacks (i.e., African Americans) and Whites are similar to differences between lower and upper classes. A number of studies have found that Black females tend to weigh more than White females even when level of education, SES, and number of live births are held constant (Flegal et al., 1988a; Garn & Clark, 1976; Klem, Klesger, Bene, & Mellon, 1990; Kumanyika, 1987; Levinson et al., 1986). Findings concerning weight-related racial differences among males are less clear, although most studies have found only minor weight-related racial differences among men (Flegal et al., 1988b; Garn & Clark, 1976). It is estimated that nearly half of all adult Black women are obese (i.e., 20% or more overweight) and that rate climbs to 60% among women from 45

to 75 years of age (Wadden, Stunkard, Rich, et al., 1990), compared with approximately one third of Black men and one fourth of White women and men (Kumanyika, 1987; Rand & Kuldau, 1990).

Blacks also hold more positive attitudes (or less negative attitudes) towards being overweight than do Whites. Studies have found that Black women are less concerned about their weight (Huenemann et al., 1966; Rucker & Cash, in press; Wadden et al., 1990) and have less negative reactions towards obese people (Kumanyika, 1987; Levinson et al., 1986). Black women also tend to view themselves as less heavy than weight-matched White women view themselves, and are, overall, more accurate in their weight classification, whereas White women tend to overestimate their weight (Huenemann et al., 1966; Levinson et al., 1986; Rosen, 1990; Rosen & Gross, 1987; Rucker & Cash, in press). One recent study also found that Black women evaluated other bodies (silhouettes) as less fat than White women perceived them to be (Rucker & Cash, in press). The one study that identified a majority of Black women believing they were too fat primarily surveyed young, well-educated, single Black women (Thomas, 1989).

Developmental trends of fatness in Blacks are similar to those in lower SES people--namely, Blacks generally weigh similar to or less than Whites until adolescence when Black females put on more weight and become heavier than White

females (Huenemann et al., 1966; Wadden et al., 1990).

Among Black men there is not so significant a change. This has been found to be true even when socioeconomic class is controlled (Garn & Clark, 1976).

Black self-concept studies

Another area of study related to body image has been Black self-concept. Beginning with the classic Clark & Clark studies (1947) nearly 50 years ago, a number of studies have looked at Black self-concept relative to White self-concept. Many studies have asked young children (i.e., 3-8 years old) to choose between Black and White dolls, puppets, pictures, or drawings by selecting the one they liked more, would prefer to play with, and so forth (see Brand, Ruiz, & Padilla, 1974, for a review of the literature). The underlying assumption is that Black children with a positive self-concept (and positive body image) would prefer the Black options while Whites would prefer the White choices. Although some studies have found a Black preference for Black images (see Williams & Morland, 1979 for a review), results have generally shown the majority of Blacks to select the White stimulus in various settings (Clark & Clark, 1947; Powell-Hopson & Hopson, 1988; Gopaul-Mc.Nicol, 1988). The most common interpretation of these findings is that by indicating a preference for White dolls there is a related rejection of being Black. That is

offered as support of the beliefs that many Blacks have a negative self-image or self-concept relative to Whites.

In spite of the continuing notoriety of these studies (including among the general public), the methodology of the studies as well as the conclusions reached have been questioned on several grounds (Baldwin, 1979; Banks, 1976; Banks, McQuater, & Ross, 1979; Brand et al., 1974; Nobles, 1973). One is whether a choice of a doll or puppet is actually a reflection of the child's own self-concept (McMillan, 1988). The underlying assumption is that in choosing a doll of a particular color, children are making a statement about how they feel about themselves. However, it may be more a statement of how they feel about the doll or a reflection of the common skin color of the images they see through the mass media (e.g., book illustrations, television shows, movies, advertisements). Another possible confound is that the selections may have been made more on the basis of the familiarity of White dolls and puppets (relative to Black ones) which Black children were more likely to have played with in the past (Brand et al., 1974). Another problem is that many of the studies focused on young children (i.e., ages 3-8) and attempted to generalize those results to adolescents and adults, a highly questionable extrapolation. For example, in their review of studies, Williams and Morland (1979) found that school-age Black children were more likely than pre-school children to pick

the Black stimulus over the White stimulus. They speculated that pre-school children may not yet fully understand that they belong to a particular ethnic group for which they should express a preference. Finally, Banks (1976) pointed out that while significantly more Blacks preferred the White stimuli than Whites choosing the Black stimuli, the key statistical issue is whether the Blacks' choice of a White option significantly deviated from a chance or random response. Applying that new criterion, Banks found that the vast majority of studies no longer found a Black preference or found a Black preference for Black stimuli.

A few other studies have looked more directly at the desire among Blacks to have more caucasoid features (e.g., less coarse hair, lighter skin tone, less broad nose, etc.). In a review of some of these studies Neal and Wilson (1989) concluded that "for many Black Americans, central feelings related to perceived self-worth, intelligence, success, and attractiveness are determined by such factors as the lightness of their skin, the broadness of their nose, and the kinkiness of their hair" (p. 324). They cited studies indicating that Black subjects rated unattractive women as having darker skin, and gave more positive ratings to women who had more caucasoid features. They also cited evidence of prejudice among Blacks against women concerning skin tone and caucasoid features in both "Whiter" and "Blacker" directions. Bond and Cash (1991) found only

limited evidence of a linkage between actual or desired skin color and body-image satisfaction among Black college women. Moreover, a few other studies (Gray, 1977; Prendergast, Zdep, & Sepulveda, 1974; Rucker & Cash, in press) have found Black women, relative to White women, to express more positive views towards their general appearance and to experience more positive body affect.

Relatively few studies have looked at other aspects of Black body image. One study that examined level of physical fitness in Blacks relative to Whites found that Black women were not as physically fit as White women (Farrell, Kohl, & Rogers, 1987).

SES, race, and gender effects

There have been few studies that have looked at how SES and race interact or combine to affect body image among males and females. There is evidence that class and race effects are additive vis-a-vis actual body weight. For example, while Black women tend to weigh more than White women and poorer women tend to weigh more than wealthier women, poor Black women tend to weigh the most of all (Flegal et al., 1988a). Just as the race and class trends are less evident and consistent for men, the combination of the two also does not yield significant results (Flegal et al., 1988b). A study that compared body masses of Mexican and American men and women across classes found similar results (Ross & Mirowsky, 1983). In examining weight

modification tendencies in high school girls, Rosen and Gross (1987) found a somewhat similar pattern with higher income and race (i.e., White) each separately increasing the percentage of girls trying to lose weight, with high SES White girls the likeliest to be attempting to lose weight. While none of these studies directly examined whether race or class contributed more heavily to weight differences or weight modification, in both of the studies of body mass, there were greater overall changes in body mass across classes than across races. Such a trend was less clear in the Rosen and Gross (1987) study of desires for weight modification.

A few other studies have examined how class affects Black identity and self-image. The findings of these studies indicate that as SES increases in Blacks there is a greater likelihood that Blacks will ascribe to the majority beauty standards (Brand et al., 1974; Hsu, 1987; McCarthy & Yency, 1971). Another study found that Black prejudice against dark-skinned Blacks may be more prevalent among upper class Blacks (see Neal & Wilson, 1989). Overall there has been little attention to how race and class combine to affect body image.

Summary and focus of present research

Taken as a whole, body-image research, primarily concerning weight and weight related attitudes, indicates a tendency for minority and lower income populations to be

less concerned about their weight, to be less active in changing it, and to be more accepting of it compared with the White and middle- and upper-class population. These differences are most evident among women. Race and class appear to independently contribute to these differences, with some indication that class is the stronger influence of the two. Perhaps the simplest explanation of these findings is that much of the societal emphasis on physical appearance is directed towards the White middle- and upper-class populations who more readily internalize and act upon such standards and are therefore more dissatisfied with their appearance. Because this society puts greater emphasis on physical appearance in women, women are more heavily invested in "looking good" as defined by society and more easily and extensively dissatisfied with their appearance. Because weight would appear to be the most easily adjustable aspect of physical appearance aside from clothing and other items of adornment, it receives the greatest amount of attention. Consistent with the above, is the finding that eating disorders, which are based on a concern with weight and represent some of the most extreme responses to body image dissatisfaction, are most common in White women who are more likely to be from the middle or upper class (and better educated, which is also related to social class) (Dolan, 1991; Hsu, 1987).

There is clearly much research left to be done with regard to the impact of race and class on body image. While a number of studies have examined how body mass varies as a result of race or class, few have looked at weight-related issues such as dieting or how focused individuals are on their weight. Even more significantly, virtually no studies have examined how class and race influence body image in areas other than weight such as level of satisfaction with or focus on one's general appearance, health, or physical fitness. While class and race seem to have less of an impact on weight and weight concerns in men, it is unknown if that will hold true for other aspects of men's body image. There is also little known about to what extent body-image issues are a focus of concern for Black men. The two studies in this paper were designed to look at racial and class differences in body image in a wide variety of domains including weight-related issues, other aspects of physical appearance, health concerns, and physical fitness. The goal was to determine to what extent past body-image findings apply to Blacks and lower income individuals, two populations that have generally been overlooked in the past, and whether they have the same concerns and issues concerning body image that have been found to be true for the middle and upper class white populations that are usually studied.

Hypotheses

Based on the research that has been done on racial and class differences in body image, the following four hypotheses are put forth: (1) The gender differences previously found in body image (Cash et al., 1986; Fallon, 1990; Freedman, 1990) will hold true regardless of race or social class. (2) Consistent with weight-related research (Flegal et al., 1988a; Huenemann et al., 1966) and other recent findings (Gray, 1977; Rucker & Cash, in press), and contrary to some of the Black self-image studies (Brand et al., 1974; Clark & Clark, 1947; Powell-Hopson & Hopson, 1988), Blacks will have a more positive body image than Whites. (3) Also consistent with weight-related research (Sobal & Stunkard, 1989; Striegel-Moore et al., 1986), there will be an inverse relationship between social class/educational level and body image (i.e., the higher the social class the more negative the attitudes towards body image), particularly in weight-related areas. The exception to this will be in the health-related areas where economics and higher education are more directly influential in individuals taking care of themselves as well as the negative health consequences of lower income individuals weighing more (Kumanyika, 1987). In those health-related areas there is expected to be a direct relation between class and body image. (4) The race effects mentioned above, particularly among women, will be most evident among those

who are poorer or less well-educated. As education and class increase it is expected that the racial differences, particularly among women and in the weight-related areas, will decrease, as previous studies have found (Brand et al., 1974; Hsu, 1987).

CHAPTER 2

STUDY I: THE NATIONAL SURVEY

Method

Subjects

Nearly 30,000 people voluntarily completed a national body-image survey distributed several years ago in Psychology Today (Cash et al., 1985, 1986). For this study, all subjects were between the ages of 22 and 59, inclusive. Subjects younger than 22 might not have had the opportunity to have completed their education. Few Blacks beyond the age of 59 responded to the survey, relative to younger ages, so that upper limit was set for Blacks and Whites. A second constraint set on the sample was that no one could be more than 50% over their body weight percentage based on 1983 Metropolitan Life normative weights for men and women. One thousand two hundred thirteen White respondents (603 males and 610 females) within those age requirements were randomly selected. Among Blacks, 435 respondents (193 males and 242 females) were selected--all of the Black respondents who fell within the age and weight requirements.

Men and women did not differ significantly in age ($\bar{M} = 36.4$, $SD = 10.3$ for men, $\bar{M} = 36.4$, $SD = 10.2$ for women). There was a significant race difference on age [$F(1, 1646) =$

51.06, $p < .01$], with Whites being significantly older ($M = 37.6$, $SD = 10.7$) than Blacks ($M = 33.5$, $SD = 8.5$). With regard to marital status, more Blacks were not married than Whites (69% vs 52%, $z = 4.90$, $p < .01$). Men and women were more similar in their marital status, with 59% of the men single compared with 54% of the women. The larger number of single Blacks may be due to Blacks being younger than Whites in this sample. There was a significant Sex x Race effect on educational level [$F(1, 1644) = 15.11$, $p < .01$], with White males being significantly better educated than both Black males [$F(1, 794) = 21.06$, $p < .01$] and White females [$F(1, 1211) = 20.13$, $p < .01$]. There was also a trend ($p = .06$) for Black females to be better educated than Black males. There was a significant Sex x Race effect on normative weight percentage [$F(1, 1529) = 5.78$, $p < .05$], with White females weighing (relative to their normative weight) significantly less than both Black females [$F(1, 850) = 22.16$, $p < .01$] and White males [$F(1, 1211) = 80.96$, $p < .01$]. Black males also bordered ($p = .06$) on weighing more than Black females. The relatively young mean age of the Black sample, as well as its being somewhat better educated than the average population may explain why the mean normative weight percentage of the Black women is less than that of Black men, contrary to what has been found in past research. Because weight plays a significant role in

body image (Cash, 1989), normative weight percentages will be controlled for in the data analyses.

Educational attainment

Previous research has found that level of education is strongly correlated with occupational scores (where the higher the status of the occupation, the higher the score) ($r = .84$ for males and $.85$ for females) and that the two are predictive of social class (Hollingshead, 1975). Because the occupational information collected was not precise enough to be utilized, years of education should provide a good approximation of social class, especially if only subjects who are 22 years of age or older are included (to allow for the opportunity to have attended and completed college). For this study subjects were split into two groups based on education--those who had less than a 4-year college degree and those who had at least a 4-year college degree. Table 1 provides the number and percentages of Black and White males and females in each educational class. Further support for the connection between education and class in this particular study was that there was a significant difference in reported income with the better educated group earning more [$F(1, 1644) = 15.11, p < .01$].

Measures

The survey instrument comprised what is now referred to as the Multidimensional Body-Self Relations Questionnaire

Table 1Distribution of Subjects Based on Sex, Race, and Educational Level

	<u>Less Than College</u>	<u>College or More</u>
Subject Group		
Black Males	84	98
White Males	165	400
Black Females	89	135
White Females	245	321

(MBSRQ). The MBSRQ inventory consists of the following measures:

The Body-Self Relations Questionnaire (BSRQ). This is a 54 item self-report questionnaire that focuses on subjects' attitudes across a number of body-image dimensions (Cash et al., 1985, 1986). Subjects respond to each body-image statement on a 5-point scale ranging from definitely disagree (1) to definitely agree (5). The BSRQ contains six subscales. The subscales focus on subjects' evaluation of themselves across three separate domains related to physical appearance, physical fitness, and health as well as their focus on and the importance of each of those domains to them. The six subscales are: Appearance Evaluation, Appearance Orientation, Fitness Evaluation, Fitness Orientation, Health Evaluation, and Health Orientation. The validity and reliability of the BSRQ has been demonstrated in a number of studies (e.g., Cash & Brown, 1989; Cash & Hicks, 1990; Keeton, Cash, & Brown, 1990; Rucker & Cash, in press). A recent factor analytic study of the BSRQ found statistical support for the six subscales as well as identifying a seventh factor which has been labeled Illness Orientation and refers to subjects' alertness to physical symptoms of illness (Brown et al., 1990). All 54 items of the BSRQ load on one of the seven scales and only a few items load on different scales in the factor analysis compared to the original conceptually defined scales.

Internal consistencies of the BSRQ subscales have ranged in the past from coefficient alphas of .75 to .91 (Brown et al., 1990).

Body Areas Satisfaction Scale (BASS). This scale examines subjects' level of satisfaction with seven different aspects of their body: face, lower torso, mid torso, upper torso, muscle tone, weight, and height. Each area is rated on a 6-point scale ranging from extremely dissatisfied (1) to extremely satisfied (6). The BASS is based on the Body Parts Satisfaction Scale (Berscheid, Walster, & Bohrnstedt, 1973; Bohrnstedt, 1977). It has been found to have adequate internal consistency with Cronbach's alphas of .79 and .78 for males and females, respectively (Cash & Hicks, 1990).

Weight-related Scales. Four individual face-valid questions focused on subjects' weight concerns and dieting practices. Those questions, with their label listed in parentheses are: (1) "I constantly worry about being or becoming fat" (Fat Anxiety), (2) "I am very conscious of even small changes in my weight" (Weight Vigilance), (3) "I am on a weight loss diet" (Current Dieting), and (4) "I try to lose weight by fasting or going on crash diets" (Eating Restraint). The first three questions were answered on a 5-point scale ranging from definitely disagree (1) to definitely agree (5). The last question was answered on a 5-point scale ranging from never (1) to very often (5).

Previous research (Cash, Wood, Phelps, & Boyd, 1991) has established the reliability and validity of a composite scale, Overweight Preoccupation, based on the means of these four items. Another scale, Subjective Weight Label, had subjects classify themselves as either: very underweight, somewhat underweight, normal weight, somewhat overweight, or very overweight (see Cash & Hicks, 1990).

Results

Reliabilities

Prior to comparing the groups on the various dependent variables, reliabilities (Cronbach's alphas) were calculated on the scales for Black and White women and men. All of the variables had acceptable levels of internal consistency ranging from .65 to .91. See Table 2 for the reliabilities for each scale with each group.

Group differences on MBSRQ body-image attitudes

A 2 (sex) x 2 (race) x 2 (educational level) multivariate analysis of covariance (MANCOVA) was conducted on the seven BSRQ subscales (Appearance Evaluation, Appearance Orientation, Fitness Evaluation, Fitness Orientation, Health Evaluation, Health Orientation, Illness Orientation) and the Body Areas Satisfaction Scale (BASS), controlling for normative weight percentage differences. A second 2 x 2 x 2 MANCOVA was performed on the MBSRQ Overweight Preoccupation Scale and Subjective Weight Label, controlling for normative weight percentage differences.

ANCOVAs, controlling for normative weight percentage, were conducted on individual scales when there were significant multivariate effects. Tables 3A and 3B list the multivariate and univariate F values and p levels for differences on each scale as a function of sex, race, and educational level.

Appearance-related scales. Table 4 provides the adjusted means and standard deviations for men and women of each race on the appearance-related scales (i.e., Appearance Evaluation, Body Areas Satisfaction, Appearance Orientation). Means based on educational differences for the appearance related and other BSRQ scales are given in Table 7. Men evaluated their appearance more positively than women, both on the Appearance Evaluation scale ($M = 3.64$ vs. $M = 3.38$, $p < .01$) and on the BASS ($M = 4.24$ vs. $M = 3.80$, $p < .01$). Blacks evaluated their appearance more positively than Whites on those same two scales ($M = 3.67$ vs. $M = 3.44$ on Appearance Evaluation, $M = 4.11$ vs. $M = 3.96$ on the BASS, $p < .01$ for both). Individuals who had at least a college education also scored higher on those two scales ($M = 3.56$ vs. $M = 3.43$, $p < .01$ on Appearance Evaluation, $M = 4.04$ vs. $M = 3.94$, $p < .05$ on the BASS). Blacks were more invested in their physical appearance than Whites as indicated by scores on the Appearance Orientation scale ($M = 3.96$ vs. $M = 3.73$, $p < .01$). However, while White women were significantly more invested in their appearance than White

Table 2

Reliabilities (Cronbach's Alphas) of the MBSRQ Subscales for Black and White Men and Women in Study 1

Scale	White Males	Black Males	White Females	Black Females
Appearance Evaluation	.89	.83	.88	.89
Appearance Orientation	.88	.85	.86	.80
Fitness Evaluation	.78	.71	.79	.67
Fitness Orientation	.91	.87	.91	.87
Health Evaluation	.80	.79	.83	.79
Health Orientation	.78	.75	.77	.75
Illness Orientation	.79	.78	.76	.73
Body Areas Satisfaction	.80	.89	.79	.78
Overweight Preoccupation	.71	.71	.72	.65

Table 3A

F Values for Main Effects of Sex, Race, and Education on
MBSRQ Subscales and Weight-Related Scales

Scale	Main Effect F-values		
	Sex	Race	Educ.
MANCOVA main effects (MBSRQ)	24.12**	18.18**	7.13**
Univariate main effects:			
Appearance Evaluation	46.93**	26.56**	8.22**
Body Areas Satisfaction	125.73**	9.59**	3.88*
Appearance Orientation	65.87**	40.58**	29.39**
Fitness Evaluation	28.12**	23.70**	1.84
Fitness Orientation	56.39**	11.01**	12.55**
Health Evaluation	7.75**	3.56	30.70**
Health Orientation	4.10*	4.40*	10.58**
Illness Orientation	.05	92.87**	1.88
Multivariate effects (weight)			
	158.86**	18.07**	4.93**
Univariate main effects:			
Overweight Preoccupation	197.85**	2.38	2.17
Subjective Weight Label	360.35**	20.92**	.69

*p < .05 **p < .01

Note: Degrees of freedom for univariate effects range from
df = 1, 1579 to df = 1, 1708.

Table 3B

F Values for Interactive Effects of Sex, Race, and
Education on MBSRQ Subscales and Weight-Related Scales

Interactive Effects F-values				
Scale	Sex x Race	Sex x Educ.	Race x Educ.	Sex x Race x Educ.
Multivariate interactive effects (MBSRQ scales)	4.18*	.99	1.76	.84
Univariate interactive effects:				
Appear. Eval.	.34	----	----	----
Body Areas Sat.	.14	----	----	----
Appear. Orient.	10.94**	----	----	----
Fitness Eval.	.93	----	----	----
Fitness Orient.	13.73**	----	----	----
Health Eval.	.03	----	----	----
Health Orient.	6.37*	----	----	----
Illness Orient.	.01	----	----	----
Multivariate interactive effects (weight)	3.98*	.00	1.62	3.10*
Univariate interactive effects:				
Overweight Preoc.	6.02*	----	----	4.22*
Sub. Weight Label	.40	----	----	3.77

*p < .05 **p < .01

Table 4

Adjusted Means for Sex x Race Groups on Appearance-Related Scales

Subject Group	Appearance Evaluation		Body Areas Satisfaction		Appearance Orientation	
	<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>
Black Males	3.85	(.73)	4.40	(.97)	3.91	(.62)
White Males	3.56	(.84)	4.18	(.84)	3.58	(.67)
Black Females	3.54	(.91)	3.89	(.87)	3.99	(.57)
White Females	3.30	(.84)	3.73	(.85)	3.89	(.61)

Note: Means were calculated adjusting for normative weight percentage differences. The standard deviations are based on unadjusted calculations.

men [$F(1, 1210) = 67.15, p < .01$], there was not a significant difference between Black men and women on how invested they were in their appearance. Subjects with less than a college education were also more invested in their physical appearance than those who had completed college ($M = 3.90$ vs. $M = 3.73, p < .01$).

Fitness-related scales. Table 5 provides the adjusted means and standard deviations for Black and White men and women on the fitness-related scales (i.e., Fitness Evaluation and Fitness Orientation). On the Fitness Evaluation scale men evaluated themselves as more physically fit than did women ($M = 3.81$ vs. $M = 3.56, p < .01$). Blacks evaluated themselves as more fit than did Whites ($M = 3.86$ vs. $M = 3.61, p < .01$). There was no difference on Fitness Evaluation scores based on educational group. Not surprisingly, males tended to have a greater investment in their physical fitness than did females ($M = 3.54$ vs. $M = 3.22, p < .01$). Among men, Blacks had a greater investment in their physical fitness than did Whites [$F(1, 783) = 23.28, p < .01$]. Among women, there was no significant racial difference in the extent of investment in physical fitness. Finally, those with at least a college education were more invested in their physical fitness relative to those with less than a college degree ($M = 3.43$ vs. $M = 3.27, p < .01$).

Table 5

Adjusted Means for Sex x Race Groups on Fitness-Related Scales

Subject Group	Fitness Evaluation		Fitness Orientation	
	<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>
Black Males	3.98	(.82)	3.80	(.71)
White Males	3.74	(.93)	3.44	(.88)
Black Females	3.77	(.82)	3.25	(.76)
White Females	3.47	(.97)	3.20	(.88)

Note: Means were calculated adjusting for normative weight percentage differences. The standard deviations are based on unadjusted calculations.

Health-related scales. Table 6 provides the adjusted means and standard deviations for Black and White men and women on the health-related scales (i.e., Health Evaluation, Health Orientation, and Illness Orientation). Males considered themselves to be more healthy than females ($\bar{M} = 3.99$ vs. $\bar{M} = 3.89$, $p < .01$). There was also a trend ($\bar{M} = 3.95$ vs. $\bar{M} = 3.88$, $p = .06$) of Whites evaluating their health more positively than Blacks. There was an education effect with those with at least a college degree evaluating themselves as more healthy compared to those with less than a college degree ($\bar{M} = 4.01$ vs. $\bar{M} = 3.80$, $p < .01$). On subjects' level of investment in their health (Health Orientation), White men scored significantly lower than both Black men ($F(1, 783) = 10.1$, $p < .01$) and White women ($F(1, 1210) = 7.13$, $p < .01$). Black men and women expressed an equivalent interest in their health as did Black and White women. In other words, White men were significantly less invested in their health than White women or Black men and women ($p < .01$). Those with at least a college degree were more invested in their health than those who had less than a college degree ($\bar{M} = 3.76$ vs. $\bar{M} = 3.64$, $p < .01$). There were no sex or educational differences among subjects in their level of attention to symptoms of illness (Illness Orientation). There was a significant race difference with Blacks indicating a greater alertness to illness than Whites ($\bar{M} = 3.60$ vs. $\bar{M} = 3.17$, $p < .01$).

Table 6

Adjusted Means for Sex x Race Groups on Health-Related
Scales

Subject Group	Health Evaluation		Health Orientation		Illness Orientation	
	<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>
Black Males	3.93	(.75)	3.80	(.66)	3.62	(.83)
White Males	4.00	(.72)	3.62	(.70)	3.18	(.83)
Black Females	3.85	(.77)	3.73	(.68)	3.59	(.82)
White Females	3.89	(.76)	3.74	(.66)	3.16	(.81)

Note: Means were calculated adjusting for normative weight percentage differences. The standard deviations are based on unadjusted calculations.

Table 7

Means and Standard Deviations on MBSRQ Scales for Subjects
with Some College Education or Less and Subjects with a
College Education or More

Scale	Some College or Less		College Degree or More	
	<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>
Appearance Evaluation	3.43	.87	3.56	.83
Appearance Orientation	3.90	.63	3.73	.66
Fitness Evaluation	3.70	.88	3.64	.97
Fitness Orientation	3.27	.84	3.43	.87
Health Evaluation	3.80	.83	4.01	.69
Health Orientation	3.64	.72	3.76	.66
Illness Orientation	3.32	.86	3.27	.83
Body Areas Satisfaction	3.94	.92	4.04	.86

Note: Means were calculated adjusting for age and normative weight percentage differences. The standard deviations are based on unadjusted calculations.

Weight-related scales. Table 8 lists the adjusted means and standard deviations for subjects based on sex, race, and educational group on the weight-related scales (i.e., Subjective Weight Label and Overweight Preoccupation). On Subjective Weight Label, women labeled themselves as being more overweight than men did ($\bar{M} = 3.63$ vs. $\bar{M} = 3.13$, $p < .01$). Compared to Blacks, Whites also labeled themselves as normatively heavier ($\bar{M} = 3.44$ vs. $\bar{M} = 3.29$, $p < .01$). Black women and White men who had completed college labeled themselves as heavier relative to those who had less than a college education [$F(1, 219) = 7.01$, $p < .01$ for Black women, $F(1, 562) = 4.44$, $p < .05$ for White men]. Black and White women who had completed college did not differ on Subjective Weight Label ($p = .40$), whereas there was a significant difference between Black and White women who had not completed college [$F(1, 330) = 18.32$, $p < .01$]. White men labeled themselves significantly heavier than Black men of the same weight percentage in both educational groups [$F(1, 246) = 6.75$, $p < .05$, in the less educated group; $F(1, 494) = 12.49$, $p < .01$, in the more educated group]. Among Black men and White women, level of education did not significantly affect how heavy they labeled themselves. Overall, these results indicate that women were more likely to label themselves as normatively heavier relative to men of the same weight percentage. Similarly, Whites were more likely to label themselves as heavier

Table 8

Adjusted Means for Sex x Race x Education Groups on Weight-Related Scales

Subject Group	Subjective Weight Label		Overweight Preoccupation	
	<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>
Some College or Less				
Black Males	2.95	(.85)	2.54	(.94)
White Males	3.15	(.81)	2.44	(.97)
Black Females	3.43	(.89)	2.87	(.87)
White Females	3.71	(.75)	3.25	(.93)
College Degree or More				
Black Males	3.04	(.72)	2.48	(.94)
White Males	3.25	(.74)	2.55	(.92)
Black Females	3.64	(.66)	3.02	(.97)
White Females	3.69	(.71)	3.13	(.98)

Note: Means were calculated adjusting for age and normative weight percentage differences. The standard deviations are based on unadjusted calculations.

relative to Blacks of the same weight percentage. Education made little difference on this perception for White women or Black men. However, for Black women and White men, being better educated was associated with somewhat heavier self-labels relative to their less educated peers. For Black women in particular, more education eliminated their lower self-classified weight relative to White women.

On the Overweight Preoccupation scale, women scored significantly higher than did men ($M = 3.11$ vs. $M = 2.49$, $p < .01$). There were no significant racial differences except that among women who had less than a full college education, White women scored significantly higher than Black women [$F(1, 330) = 12.85$, $p < .01$]. There was no racial difference among better educated women ($p = .34$). As occurred with weight labeling, more education eliminated the Black women's reduced concern about being overweight relative to White women. There were no other significant differences based on education.

Weight satisfaction differences between weight groups

For this analysis the sample was divided into four weight groups. Those who were 10% or more under their normative (Metropolitan) weight were classified as underweight. Those who were within 10% of their normative weight were classified as normal weight. Those who were 10% or more but less than 20% over their normative weight were classified as marginally overweight. Those who were 20% or

more over their normal weight were classified as overweight. Table 9 lists the number of males and females in each weight group.

An ANOVA was conducted to see if there were significant differences between the weight groups (i.e., underweight, normal weight, marginally overweight, and overweight) in their level of satisfaction with their weight. Not surprisingly, there were significant differences between the weight groups in their weight satisfaction scores [$F(3, 1707) = 171.66, p < .01$]. A separate $2(\text{sex}) \times 2(\text{race}) \times 2(\text{education})$ ANOVA was then calculated for each weight group to check for significant differences within that weight group on weight satisfaction. It should be noted that there were a few scattered significant normative weight differences based on sex, race, and/or education within certain weight classifications (e.g., among overweight subjects Blacks weighing significantly more than Whites). However, calculating ANCOVAs for each weight group with normative weight controlled for yielded an identical pattern of significant results to the ANOVAs. Therefore, only the ANOVA results will be discussed.

There were significant sex differences in weight satisfaction scores for each weight group. Table 10 provides the means, standard deviations, F values and p levels for men and women in each weight group. Men were

Table 9

Distribution of Black and White Males and Females Across
Four Weight Classification Groups

Subject Group	Under-weight	Normal Weight	Margin. Over-weight	Over-weight
Black Males	9.8%	49.2%	21.8%	19.2%
White Males	10.9%	50.7%	21.1%	17.2%
Black Females	19.8%	46.3%	17.8%	16.1%
White Females	31.6%	46.7%	11.3%	10.3%

Table 10

Means, Standard Deviations, and F Values for Men and Women's Satisfaction with their Weight

Weight Class	Men		Women		<u>F</u>
	<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>	
Underweight	4.18	1.44	4.55	1.15	5.95*
Normal weight	4.51	1.14	3.30	1.22	218.23**
Marginally Overweight	3.41	1.23	2.41	1.17	47.86**
Overweight	2.68	1.29	1.70	.98	42.23**

*p < .05 **p < .01

Note: Degrees of freedom range from df = 1, 249 to df = 1, 739.

significantly more satisfied than women with their weight in every weight group, except among those who were underweight, where women were most satisfied ($p < .01$ for all weight groups except underweight subjects where $p < .05$). The Newman-Keuls procedure was used to examine significant differences in weight satisfaction scores between weight classes, for men and women separately. It was found that the scores were significantly different from each other in every weight class comparison. Women classified as underweight were most satisfied with their weight while women classified as very overweight were least satisfied. Men classified as normal weight were most satisfied while men classified as very overweight were least satisfied with their weight. Overall, women who were either marginally or clearly overweight were dissatisfied with their weight (i.e., a mean score of 3 or less), while only the very overweight men were dissatisfied with their weight.

The only significant race difference on weight satisfaction was in the underweight group where there was a significant interaction between race and educational level. It was found that underweight Blacks with less than a college degree were significantly less satisfied with their weight ($\bar{M} = 3.54$, $SD = 1.39$) than Blacks with at least a college degree [$\bar{M} = 4.69$, $SD = 1.30$, $F(1, 59) = 10.93$, $p < .01$]. Underweight Blacks with less than a college degree were also less satisfied with their weight than Whites with

less than a college degree [$M = 4.60$, $SD = 1.10$, $F(1, 120) = 17.06$, $p < .01$]. There was no difference in weight satisfaction among underweight Whites based on education ($M = 4.50$, $SD = 1.19$ for college educated underweight Whites). In other words, underweight Blacks with less than a college education were significantly more dissatisfied with their weight than underweight Whites with less than a college education or underweight Blacks with a college degree. While there were no significant racial differences in weight satisfaction in other weight groups, among marginally overweight and overweight subjects, there was a trend in the direction of Blacks being more satisfied with their weight than Whites ($p = .10$ among marginally overweight subjects, $p = .06$ among overweight subjects). With the exception of the single interactive effect mentioned above, there were no significant educational differences in weight satisfaction.

The discussion of these results will follow the presentation of Study 2, which focused on Blacks' body images only, in relation to gender and social class.

CHAPTER 3

STUDY II: THE LOCAL SURVEY

Method

Subjects

Packets of questionnaires were distributed at and collected from a total of seven sources: patrons of a beauty shop and a church, Portsmouth City employees, male occupants of the Portsmouth City jail, and students at three local universities (Norfolk State University, Hampton University, and Old Dominion University). Norfolk State University and Hampton University primarily have African-American students while Old Dominion University primarily has Caucasian students. All subjects in this study were Black. The questionnaires were distributed by a Black graduate student at every location except to the ODU students, who received the packet from their White psychology professor. Seventy-nine Black males (37 college students, 42 non-students) and 119 Black females (79 college students, 40 non-students) completed and returned the packet of materials. Males were approximately evenly divided between students and non-students while approximately two-thirds of the females were students. Students who completed the questionnaire received research credit. Non-students who completed the

questionnaire were entered into a lottery for a total of 8 cash prizes ranging from \$25 to \$100.

There were no sex differences on educational level ($p = .84$) or normative weight percentages ($p = .75$). Males were significantly older than females [$M = 32.7$, $SD = 15.6$ for males vs. $M = 27.3$, $SD = 12.2$ for females, $F(1, 193) = 7.35$, $p < .01$].

Social class

Hollingshead's Four Factor Index of Social Status (1975) was used to determine subject's social class level. Taking marital status and a subject's significant other into account, this measure uses level of education and occupation to predict the subjects' SES. The multiple correlation between estimated SES and education and occupation found in an earlier study was .975 (Hollingshead, 1975), indicating that this is a very accurate assessment of SES.

Hollingshead suggested that, based on subjects' scores, they should be classified into one of five categories: (1) unskilled laborers, menial service workers; (2) machine operators, semiskilled workers; (3) skilled craftsmen, clerical and sales workers; (4) medium business, minor professional, and technical workers; and (5) major business and professionals (Hollingshead, 1975).

Consistent with these guidelines, for this study, if subjects were not students, then their occupation and educational level were used to calculate their social

status. If they were married, their spouse's occupation and educational level were also averaged in. If subjects were married students, then their spouse's present occupation and educational level were used to calculate the subject's social class. If subjects were students and not married, then social class was determined based on their parents' occupations and educational level.

Two graduate-student raters separately assigned each subjects' reported occupation a numerical value from 1 to 9, based on listings from Hollingshead (1975). In terms of the particular 9-point occupational score(s) used to determine the subjects' social class, there was perfect agreement 52% of the time; the raters were within 1 point 76% of the time; within 2 points 87% of the time; and within 3 points 94% of the time. In practical terms, 85.5% of the subjects fell into the same social class group (as outlined below) regardless of which rater's score was used. To compensate for these differences, if there was more than a 3-point discrepancy on the particular occupational score used to calculate the subject's social class, then the subject's social class was not calculated and his/her responses were not used in analyses involving social class. If there was a difference in the relevant occupational score of 3 points or less, the mean of the two judges' occupational ratings was utilized in calculating the subject's social class. A total of 167 subjects received social class scores.

In this study, subjects who fell into Hollingshead's three lowest classifications (i.e., machine operators, menial service workers, semiskilled and unskilled workers, clerical, sales, and skilled craftsmen) were placed in the "lower class" group. Subjects scoring in Hollingshead's upper two classifications (i.e., professionals, business, and technical workers) were placed in the "higher class" group. "Higher class" is intended here as a relative term and subjects in the "higher class" group should not be assumed to be in the upper class. Twenty-seven men and 45 women were in the lower class group while 35 men and 60 women were in the higher class group. There were no class differences in age ($p = .58$) or normative weight percentage ($p = .16$). There was also not a significant class difference in whether subjects came from a collegiate or non-collegiate setting [$\text{Chi-square } (1, N = 167) = .01$].

Measures

Multidimensional Body-Self Relations Questionnaire (MBSRQ). This self-report questionnaire's subscales closely resemble the BSRQ, BASS, Overweight Preoccupation, and Subjective Weight Label scales identified in the previous study with a few slight modifications. The BASS in this study was expanded to include two additional items: hair and overall appearance. Each item was rated on a 5-point (rather than a 6-point) scale from very dissatisfied (1) to very satisfied (5). The internal consistency was found to

be the same as the seven item, 6-point rating scale, with Cronbach's alphas of .79 and .78 for males and females, respectively (Cash & Brown, 1989). The 4-item Overweight Preoccupation scale was included as before. The wording of the Subjective Weight Label item was slightly changed from "I am . . ." to "I think I am . . .". An additional item assessing how the subject thinks others view him/her was added ("From looking at me, most other people would think I am . . ."). These two items correlate highly ($r_s > .8$). The MBSRQ items are listed in Appendix A.

Eating Disorder Inventory (EDI) Drive for Thinness subscale. Drive for Thinness is a subscale of the EDI which was developed by Garner, Olmsted, and Polivy (1983). The Drive for Thinness subscale focuses on thoughts, feelings, and concerns about weight and dieting. It consists of seven items that are rated on a 6-point scale from always (1) to never (6). It has good internal consistency, with a Cronbach's alpha of .87 when administered to college females. The EDI items are listed in Appendix B.

Body Image Assessment Procedure-Revised (BIAP-R). Initially developed by Williamson et al. (1985, in press), the BIAP involves subjects making a selection among nine silhouettes that vary in body mass. To assess perceptual (self and ideal) body image, Williamson's original BIAP included only female silhouettes; Keeton, Cash, and Brown (1990) developed a comparable set of nine male silhouettes.

Collectively, these two sets are the BIAP-R. Each silhouette has a different numerical value based on its visual body mass ranging from extremely thin (1) to extremely heavy (9).

In the present study the nine silhouettes will be reduced in size so that they can be displayed on a single page in a random order. Subjects were asked to select the appropriate figure for four different situations, the one that most resembles: (1) the subject's present body size, (2) the subject's ideal or desired body size, (3) the size the subject believes the opposite sex prefers for the subject's sex, and (4) the most desirable size the subject prefers in the opposite sex. For the first three items the silhouettes were of the subject's own sex, while the fourth item displayed the silhouettes of the opposite sex. Keeton et al. (1990) found an interrater reliability of .94 when individuals have to pick the silhouette that was most similar to a photographed individual. Another study (Davis, Williamson, Ruggerio, Rappaport, & Gresham, 1986) found test-retest reliabilities of .92 for females and .79 for males. The BIAP-R silhouettes are shown in Appendix C.

Weight History Questionnaire. Subjects were asked several questions concerning their current weight, ideal weight, present dieting behaviors, and whether they ever considered themselves overweight. This questionnaire was included for empirical purposes that fall beyond the scope

of the present study. Only the current weight item was used here. The Weight History items are listed in Appendix D along with other demographic items.

Some additional measures were included in the testing packet for a separate study that also used data collected from this subject pool. Those measures included, a self-esteem scale, the Social Desirability Scale, an assessment of level of racial identity and level of preference for nose and lip size, hair textures and styles, and lightness/darkness of skin.

Results

Reliabilities

All of the multi-item scales used in this study displayed satisfactory levels of internal consistency (Cronbach's alphas) ranging from .59 to .87, with the exception of the Fitness Evaluation scale which had a Cronbach's alpha of .73 for males and .51 for females. The poor reliability for females is likely due in part to the scale consisting of only three items. Consistent with this, the Overweight Preoccupation scale, which consists of only four items had the next poorest reliability (.62 for males and .59 for females). For this study, the Fitness Evaluation scale was not included in data analyses. Table 11 lists the reliabilities for each sex on each of the scales.

Table 11

Reliabilities (Cronbach's Alphas) of Study 2's Scales

Scale	Black Men	Black Women
Appearance Evaluation	.75	.83
Appearance Orientation	.78	.81
Fitness Evaluation	.73	.51
Fitness Orientation	.86	.88
Health Evaluation	.67	.70
Health Orientation	.74	.79
Illness Orientation	.68	.74
Body Areas Satisfaction Scale	.68	.66
Overweight Preoccupation	.62	.59
Drive for Thinness	.76	.81

Differences on the MBSRQ subscales

In contrast to the first study, in this sample there were not significant sex (or class) differences on normative weight percentage. Therefore normative weight was not controlled for in the analyses. A 2 (sex) x 2 (social class) MANOVA was conducted on the MBSRQ subscales (i.e., Appearance Evaluation, Appearance Orientation, Fitness Orientation, Health Evaluation, Health Orientation, Illness Orientation, and the Body Areas Satisfaction Scale). There were no significant multivariate class or Sex x Class effects on the MBSRQ subscales [$F(7, 152) = 1.01$, for Class; $F(7, 152) = .47$, for Sex x Class]. A significant multivariate main effect of Sex was found for the MBSRQ subscales [$F(7, 152) = 7.28$, $p < .01$]. Therefore, individual ANOVAs were done for each scale. Table 12 provides the means and standard deviations on the subscales for each sex as well as F values and p levels.

Overall, results show that Black males generally reported more positive body-image affect and a greater focus on different aspects of their body image than females. Black females, on the other hand, were more focused on gaining weight and on staying thin. Specifically, males were more positive in their evaluations of their physical appearance (Appearance Evaluation, $p < .05$), their satisfaction with individual body areas (Body Areas Satisfaction Scale, $p < .01$) and their health (Health

Table 12

Mean Scores, Standard Deviations, and F Values on MBSRQ Sub-
Scales for Black Men and Women

MBSRQ Scale	Black Men		Black Women		<u>F</u>
	<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>	
Appearance Evaluation	3.83	.57	3.60	.74	5.11*
Appearance Orientation	3.89	.52	3.94	.56	.41
Fitness Orientation	3.82	.61	3.29	.67	27.40**
Health Evaluation	3.87	.59	3.58	.67	9.68**
Health Orientation	3.64	.62	3.52	.71	1.47
Illness Orientation	3.66	.75	3.56	.80	.82
Body Areas Satisfaction	3.77	.61	3.52	.64	7.82**

*p < .05 **p < .01

Note: Degrees of freedom range from df = 1, 191 to
df = 1, 195.

Evaluation, $p < .01$). Males were also more invested than females in their physical fitness (Fitness Orientation, $p < .01$). There were no sex differences on the level of investment in their appearance (Appearance Orientation), health (Health Orientation) or their becoming ill (Illness Orientation).

BIAP-R comparisons

A 2 (social class) x 3 (Revised Body Image Assessment Procedure rating) repeated measures MANOVA was done for males and females separately to examine differences between subjects' ratings on the first three BIAP-R silhouette items (i.e., present body size, ideal body size, and belief about what the opposite sex would prefer). Because different silhouettes were used on the questions for males and females it was not possible to compare their scores on the BIAP-R items (with the single exception discussed below).

Table 13 includes the mean scores on each BIAP-R item for males and females. Table 14 provides F values and p levels for differences between questions for each sex. There were no significant class differences for either males or females on the first three BIAP-R items (i.e., perceived body size, ideal body size, and perceived opposite-sex preference). Among women, there was a significant difference between their present and ideal body size ($p < .01$), with their ideal body size being smaller. There was also a significant difference among women between their

Table 13

Mean Scores and Standard Deviations on the BIAP-R Silhouette Items

BIAP-R Item	Black Men		Black Women	
	<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>
Perceived Body Size	3.76	1.87	5.44	1.97
Ideal Body Size	3.83	1.20	4.46	1.33
Perceived Opposite-Sex Preference	3.96	1.24	4.76	1.08
Body Size Preferred in Opposite Sex	4.79	1.03	3.79	1.12

Table 14

F Values for Sexes on Between Item Differences on the BIAP-R

BIAP-R Items	Men	Women
Self vs. Ideal	.10	42.35**
Self vs. Perceived Opp. Sex pref.	.89	12.03**
Ideal vs. Perceived Opp. Sex pref.	1.88	5.56*

* $p < .05$ ** $p < .01$

Note: Degrees of freedom range from df = 1, 73 to
df = 1, 116

present body size and the female body size they believed men preferred ($p < .01$), with their present body size being larger. The difference between women's ideal body size and what they believed men preferred also differed significantly ($p < .05$), with the ideal body size somewhat smaller. This implies that some women preferred to be even thinner than what they believed men preferred.

Among males there were no significant differences between their perceived body size, ideal body size, and perceived opposite-sex preference. However, it is possible that because some men may have wanted to lose weight while others wanted to gain weight, the changes in their scores would have offset each other so that the mean score would have changed little. To check to see if this was the case, a matched sample t test was conducted on the absolute values of the difference scores between BIAP-R items (relative to a difference of 0). This approach revealed that, contrary to the implications of the ANOVA, men's present perceived body size was significantly different from their ideal body size [$t(75) = 8.29, p < .01$]. Men's present body size was also significantly different from the body size in men they believed women preferred [$t(75) = 9.97, p < .01$]. Men's ideal body size was also significantly different from what they believed females preferred in men [$t(75) = 4.69, p < .01$].

While the above analyses indicate that there are significant absolute differences among the BIAP-R items for men, the results do not reveal if significantly more men wanted to increase or decrease their body size. To determine this, a z test for differences between observed proportions and equivalent proportions (50%) was calculated for each of the three pairs of BIAP-R items mentioned above. In all three cases, the z scores were not significant, indicating that men were fairly evenly divided in each instance between those who wanted to increase their body size and those who wanted to decrease their body size. Table 15 provides the numbers and percentages of men who wanted to increase, decrease, or keep their body size the same for each BIAP-R item pair.

The fourth BIAP-R item presented subjects with silhouettes of the opposite sex and asked them to circle the body size they preferred. The third BIAP-R item asked subjects to circle the body size of their own sex that they thought the opposite sex preferred. An ANOVA compared how accurate men and women were in their predictions of what the opposite sex preferred. Mean BIAP-R scores are given in Table 13. Results indicated that there were no significant differences between the body size one sex believed the other sex preferred to see in them (i.e., the female body size males preferred and the male body size females preferred) and the body size the other sex actually preferred. In

Table 15

Distribution of Males Among Those Who Wanted to Increase,
Decrease, or Maintain Body Size on BIAP-R Item Pairs

BIAP-R Items	Increase body size		Decrease body size		Maintain body size	
	<u>N</u>	%	<u>N</u>	%	<u>N</u>	%
Self vs. Ideal	31	41%	19	25%	26	34%
Self vs. Perceived Opp. Sex pref.	31	42%	22	30%	21	28%
Ideal vs. Perceived Opp. Sex pref.	12	16%	9	12%	53	72%

other words, men and women were accurate in their predictions of what the other sex preferred.

Sex and class differences on other weight-related items

A 2 (sex) x 2 (social class) MANOVA was conducted on the weight-related scales (i.e., Weight Satisfaction, Drive for Thinness, Overweight Preoccupation). There were no significant multivariate effects for class or Class x Sex interactions. There was a significant multivariate effect for sex [$F(4, 156) = 3.64, p < .01$]. Therefore, univariate ANOVAs were conducted. Table 16 lists the means, standard deviations, F values, and p levels for those scales. Women were significantly less satisfied with their current weight than were men (Weight Satisfaction, $p < .01$), more focused on avoiding gaining weight (Overweight Preoccupation, $p < .01$), more focused on striving to be thinner (Drive for Thinness, $p < .01$), and labeled themselves as significantly heavier (Subjective Weight Label, $p < .05$).

Chi-Square analyses were conducted to check for possible sex or class differences in whether subjects wished to lose, maintain, or gain weight. There was a significant sex difference [Chi-Square (2, $N=198$) = 9.86, $p < .01$] with more women than men wishing to lose weight. Table 17 lists the percentages of men and women who wished to lose, maintain, or gain weight. There were no significant class or Sex x Class differences.

Table 16

Mean Scores, Standard Deviations, and F Values on Weight-Related Scales for Black Men and Women

Scale	Black Men		Black Women		<u>F</u>
	<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>	
Weight Satisfaction	3.28	1.13	2.76	1.16	9.63**
Drive for Thinness	2.06	2.92	4.73	5.18	17.30**
Overweight Preoccupation	2.14	.76	2.64	.92	15.14**
Weight Label	3.06	.67	3.28	.75	4.15*

* $p < .05$ ** $p < .01$

Note: Degrees of freedom range from df = 1, 192 to df = 1, 196.

Table 17

Percentages of Male and Female Subjects Who Wished to Lose,
Maintain, or Gain Weight

Subject Group	Gain	Maintain	Lose
Males	29.1%	32.9%	38.0%
Females	15.1%	25.2%	59.7%

Separate 2 (sex) x 2 (class) ANOVAs were calculated for subjects who wanted to gain weight and subjects who wanted to lose weight to check for differences in the percentage they wanted their weight to change. There was a single significant sex effect among those who wanted to lose weight [$F(1, 97) = 10.02, p < .01$], with women wanting to lose a significantly greater percentage of their body weight than men desired to lose ($M = .13, SD = .09$ for women vs. $M = .08, SD = .05$ for men).

As in the first study, subjects were divided into four objective weight classes: those at 10% or more beneath their weight based on the Metropolitan life insurance norms (underweight); those within 10% of their normative weight (normal weight); those 10% or more but less than 20% over their normative weight (marginally overweight); and those 20% or more over their normative weight (overweight). An ANOVA was conducted to examine possible differences in satisfaction with weight among those four groups. Significant differences in weight satisfaction were found [$F(3, 178) = 7.80, p < .01$]. A 2 (sex) x 2 (social class) ANOVA was then conducted for each separate weight group to examine differences on how satisfied subjects were with their weight. There were no significant class or Sex x Class differences for any of the weight groups. There were also no significant sex differences in level of satisfaction with weight among those who were underweight or who were

normal weight. In both the marginally overweight group and the overweight group, men were significantly more satisfied with their weight than were women [$F(1, 40) = 4.49, p < .05$ among marginally overweight subjects; $F(1, 39) = 15.36, p < .01$ among overweight subjects]. Table 18 lists the mean weight satisfaction ratings, standard deviations, F values, and p levels for men and women in each weight class.

Table 18

Means, Standard Deviations, and F Values for Weight
Satisfaction Scores among Men and Women Divided by Weight
Class

Weight Class	Males		Females		F value
	<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>	
Underweight	3.00	1.10	3.04	1.08	.01
Normal Weight	3.46	1.17	3.32	1.06	.30
Marginally Overweight	3.11	1.29	2.39	.89	4.49*
Overweight	3.13	.96	1.88	1.01	15.36**

* $p < .05$, ** $p < .01$

Note: Degrees of freedom range from df = 1, 28 to
df = 1, 67

CHAPTER 4

DISCUSSION: STUDY 1 AND STUDY 2

The purpose of the above two studies was to explore how race and social class affect body image. Much of the extensive research on body image has primarily focused on body image in White, middle class people, especially college students (e.g., Cash & Brown, 1989; Silberstein et al., 1988). Little body-image research has considered African Americans or persons of varying social classes. What research has been done on this topic has focused primarily on weight.

The first study was based on a nationwide subsample drawn from those who several years ago completed and returned a body-image survey through Psychology Today magazine. The goal of the first study was to examine racial differences in body image for a national sample. In addition, the effects of levels of educational attainment were examined to evaluate how one key facet of social class might relate to aspects of body image. Actual body weight was controlled in this study.

The second study was intended to be based on an economically diverse sample of African Americans from the Tidewater area of Virginia. Attempts were made to include

subjects outside of a collegiate environment, where body-image studies have often been conducted. The second study was designed to focus even more closely on social class within a sample of Black subjects. The study was also conducted to collect more detailed information about weight-related aspects of body image, as Rucker and Cash (in press) have suggested.

The findings of the two studies will be briefly integrated and summarized below. First, simple sex effects will be summarized, then simple race effects, next Sex x Race interactions, and finally significant simple and interactive effects based on education and social class will be summarized. Several general statements will be made based on the pattern of results. The explanation for and implication of each pattern will be discussed in turn. The possible reasons why there were virtually no significant social class results in the second study will then be discussed. Finally, clinical implications and possible directions future research in this area might take will be briefly discussed.

Gender differences

Consistent with previous research (Levinson et al., 1986; Striegel-Moore et al., 1986) and the first hypothesis put forth (i.e., sex differences would hold across race and class), the above two studies found that men were generally more satisfied with their present weight and had less of a

concern about being or becoming overweight compared to women. This gender difference was true regardless of race or educational level. The second study found that, relative to Black women, Black men's present weight was closer to their ideal, that they were generally satisfied with their present weight, and that they had less of a focus on losing weight. While those Black women who were dissatisfied with their body size generally wanted to lose weight, Black men were more evenly divided between those who wanted to gain weight and those who wanted to lose weight, which is consistent with past research (Drewnowski & Yee, 1987; Rosen & Gross, 1987; Silberstein et al., 1988). Therefore, just because Black men were less focused on losing weight, did not mean that they were disinterested in changing their weight, either by losing or gaining weight. Further consistent with this result, Black men's ideal body size as well as the male body size they believed women preferred were significantly different from their present perceived body size. However, men were approximately equally divided on whether they wanted to be smaller or larger and on whether they believed women preferred smaller or larger men relative to their present body size. Also consistent with previous research (Cash et al., 1986; Cash & Brown, 1989; Freedman, 1990), regardless of race, men tended to evaluate their appearance, individual body areas, physical fitness, and health more positively than did women. Men were also

more invested in their level of physical fitness than women. There were no sex differences on how focused subjects were in becoming ill.

Racial differences

Consistent with the second hypothesis put forth (i.e., that Blacks would have a more positive body image in general than Whites), results from the first study indicated that, regardless of gender, relative to Whites, Blacks tended to evaluate their general appearance, individual body areas, and physical fitness more positively. There was also a trend of Whites evaluating their health more positively than Blacks. Blacks were more invested in whether they became sick relative to Whites.

While there are fairly clear sex and race differences in how positively individuals feel about their appearance and physical fitness, there is a slightly different, but quite consistent pattern of results when it comes to how invested subjects are in those areas. Blacks were significantly more invested in their appearance than Whites. Among Whites, women were more invested in their physical appearance than were men. However, among Blacks, men were just as invested in their appearance as women. While men were more invested in their physical fitness than women, Black men were significantly more invested than White men. There was no such difference in that area between Black and White women. In level of investment in health, White males

were significantly less invested in their health than the other three groups who were all equally invested in their health. Because of the additive effects of Blacks and men generally evaluating their appearance and physical fitness more positively, Black men also scored higher in their evaluations of those areas than any other group. Taken as a whole, these results indicate that Black men, more so than any other group (i.e., Black women, White men and women), report having the most positive body image and are overall the most heavily invested in their body image.

Educational differences

The pattern of results with regard to education is a little less solid, but still fairly consistent. There were virtually no significant results based on social class in the second study. Possible reasons for that will be discussed later, but the lack of significant results may be related to a limited range in social class in the sample assessed rather than a true lack of differences in body image between social classes. In the first study, subjects who had at least completed college, compared to those who had stopped their formal education prior to completing college, felt more positive about their general appearance, individual body areas, and their health. Those with less education were more invested in their appearance than those who had completed college. There were no significant differences based on education in how subjects felt about

their physical fitness. College-educated subjects were more invested in their health as well, while there was no educational difference in how invested subjects were in dealing with illnesses.

Better educated subjects also appeared to be somewhat more focused on their weight, although education appeared to interact to some extent with sex and race. Specifically, while White men and Black women who had graduated from college tended to view themselves as heavier than less well-educated peers, there were no significant educational differences for Black men and White women. Similarly, White females with less than a college degree were more concerned about becoming fat than their Black counterparts while there was no significant difference between Black and White women who had completed college.

The weight-related findings offer support for the third and the fourth hypotheses (i.e., that less well-educated subjects would be less concerned about their weight and that as education increased racial differences in body image, particularly among women, would decrease). However, some of the other educational findings run contrary to what was predicted with regard to social class.

Summary of findings

Four general conclusions can be reached based on the results as summarized above. First, regardless of race or educational level, men tend to have a more positive body

image in general than do women. Second, regardless of sex or educational level, Blacks tend to have a more positive body image than Whites. Third, as a result of the first two findings, Black men appear to have the most positive body image of all. In addition, Black men are consistently more invested in their body image than White males and as invested as Black females. Finally, with regard to the effects of education there are some indications that better educated individuals may have a more positive body image in certain areas than less well-educated peers, with certain exceptions. The possible reasons for and implications of these findings as well as some important issues related to the complexity and ambiguity of concepts such as race and social class will be discussed below.

Intra-racial variation

Before beginning a discussion of the reasons for the racial differences found, it is worth considering that the relationship of race with various aspects of a person's life, such as body image, is likely to pose questions that cannot be fully answered by the present study. Although certain analyses reveal racial differences, important intra-racial patterns may also exist. As Zuckerman (1990) noted, "there is much more variation within groups designated as races than between such groups" (p. 1297). Some of the possibly significant variations within a racial group with

regard to body image and the results of these two studies will be briefly discussed below.

One important question related to intra-racial variation that should be asked is: To whom were the subjects comparing themselves in terms of their evaluation of aspects of their body image? For those who are a racial minority this may be a particularly important question. It is likely that among the African Americans surveyed, some evaluated their body image relative to Whites, others evaluated themselves relative to other Blacks, while still others evaluated themselves relative to both Whites and Blacks. There can be even more variation within those reference groups, based on social class and the characteristics and norms of one's environment. For example, an African American who compares him/herself to Black peers at a private boarding school may have quite different standards from an African American who compares him/herself to Black peers at an inner city public high school. A more direct example of this comes from the second study where two of the schools subjects were drawn from--Hampton University and Norfolk State University--are primarily composed of Black students while Old Dominion University has primarily White students. It is possible that there were differences between students attending those schools with regards to the racial group(s) with whom they tended to compare themselves.

Another source of intra-racial variation is ethnic identity. It is likely that Black subjects varied greatly in how strongly they identified with a distinct African-American culture. While some may have a strong investment in and are very aware of their African-American heritage, others may primarily identify with and follow the mainstream White culture, while still others attempt to strike a balance between the two. Level of identification with a distinct African-American culture may significantly influence certain aspects of body image. A study, utilizing the same subjects used in the second study, will examine these issues (Robinson, 1991).

Another more obvious aspect of intra-racial variation that may affect body image is variation in physical appearance. Although all racial group members vary among themselves in characteristics such as skin tone, hair texture, and facial features, African Americans also vary with regard to how "negroid" or "caucasoid" they appear. Such variations in racial features can lead to quite different experiences in some settings and quite similar experiences in others. Both light- and dark-skinned Blacks can and have been the target of prejudice from other Blacks as well as Whites (Bond & Cash, 1991). It is simply not possible to make one simple statement about a relationship between the ethnicity of one's appearance and how that affects one's body image.

A related issue is what percentage of one's ancestors need to be Black in order for one to consider oneself Black. That definition of ancestry has varied over time, ranging from individuals with any Black ancestors being considered Black in the southern states prior to the Civil War to individuals with any White ancestors being considered White in Brazil (Zuckerman, 1990). Even defining one's ethnic identity is a very subjective process with no single clear definition of what makes a person African American or Caucasian (or Native American or Asian American, etc.). Perhaps what is most important in this area is the racial identity the individual chooses to hold, regardless of their genetic background.

The above are just a few of the ways African Americans can differ from each other that may contribute to differences among them in their body image. The important point to keep in mind is that African Americans are a very heterogeneous group in a variety of ways and any generalizations made threaten to overlook and dismiss the diversity present. Still, even with the large amount of intra-racial variance there may exist some inter-racial variance, as was found here. Some possible explanations for that variance will be discussed below. It is done so with the caveat that the findings will vary in their applicability to any particular individual and even similar

results among individuals may be due to very different processes.

Racial differences

Previous research that has focused on weight has found that Blacks tend to feel more positive about their weight than Whites (Huenemann et al., 1966; Rucker & Cash, in press; Wadden et al., 1990). The results of this study indicate that those racial differences in attitude apply not only to weight but to physical fitness and appearance in general as well as specific body areas. There are a number of possible factors that may contribute to this racial difference, a few of which will be discussed below. First, some possible explanations for racial differences regardless of gender will be discussed followed by discussion of some possible gender-specific explanations for racial differences.

Racial differences in body image regardless of gender.

One possible explanation for Blacks's more positive evaluations of their fitness and appearance is that Blacks may not compare themselves to the unrealistically high standards of attractiveness that Whites do (most commonly conveyed by the mass media), particularly White women. The reasoning here is that, contrary to the belief that being exposed to White standards of beauty may make Blacks feel more negative about their own appearance, Blacks actually may be less influenced by such pressures because they may

feel such standards are directed towards Whites and do not apply to them. One positive consequence of not having as many Black models and actors (who are usually highly attractive, regardless of their race) in movies, on television, or in advertisements is that Blacks may be less likely to compare their appearance to such extremely high standards of beauty. Instead, Blacks may rely more on other influences, such as the opinions of family and friends to evaluate their appearance. It may be that among Blacks there are stronger messages from family members and friends that they are attractive and should feel good about their appearance. As a result, they feel more satisfied with their actual physical appearance (Rucker & Cash, in press; Pumariega, 1986; Thomas, 1989; Thomas & James, 1988).

The Black pride movement of the 1960's as well as the more recent reemergence of the pride in being an African American, including an increasing number of African-American book, clothing, and art stores, may be another contributing factor to the more positive body image reported among Blacks. Those movements have encouraged Blacks to be proud of their heritage and ethnicity, including their appearance. Diversity among Blacks, including physical appearance, is to be treasured rather than condemned. Even those Blacks not actively involved with the movement may still be positively influenced by it and to feel greater pride in being African American.

There may also be a greater respect for and appreciation of physical diversity among Black people. This may be due to a combination of already being different from the majority culture as well as the presence of a greater range of skin tones, hair textures and styles, and other physical features. While a Black person may have personal preferences in those areas (e.g., preferring darker skin or finer hair), variations are more likely to be respected as simply different rather than seen as unattractive. The result, with regards to body image, is that there may not be one, but many different standards of beauty. There may be fewer negative comments heard from peers or others resulting in a more positive body image. This is not to say that there is not prejudice among some Blacks against lighter- or darker-skinned peers, but that the more prevalent attitude may be one of respect for such diversity.

Another factor that may contribute to the racial differences found is the finding of some previous studies that weight is the single most influential factor in how one feels about one's physical appearance (e.g., Cash, 1989). As indicated by some of the weight-related results in this study as well as by a number of previous studies (Huenemann et al., 1966; Klem et al., 1987; Kumanyika, 1987; Levinson et al., 1986), Blacks appear to be more accepting of being slightly heavier or overweight than do Whites. This increased acceptance of being a little heavier may translate

into a slightly more positive general evaluation of their level of physical attractiveness and fitness.

Racial differences in body image related to gender. The meaning of a positive body image may be different for Black women as compared to White women. Black females may be more likely to learn from an early age that they need to be self-reliant and self-supporting in order to make it in the world (Staples, 1989). There may be less of a belief that if they are physically attractive they will marry a man who will financially and emotionally take care of them. One consequence of that may be that they are less self-critical of their appearance and spend less time worrying about it.

One possible explanation for the higher investments among Black men in their bodies relative to White men is related to differences in role models available to each race. The most salient male Black role models in America are athletes and entertainers where physical fitness and physical attractiveness are the most important and desirable qualities. In contrast, Whites, particularly White men, have a much wider range of role models including business executives, scholars, scientists, politicians, and so on. As a result, certain aspects of body image, namely physical attractiveness and physical fitness, may become more highly valued among Black men because they are commonly present in their role models.

Another reason for Black males to be particularly invested in their body image may result from the limited avenues to status available to Black men combined with the gender-related messages given to people in our society. As men, Black men may still be getting the same messages to achieve, to make something of themselves economically, and to gain status that White men receive. Yet, due to both subtle and overt racism there may be fewer opportunities for Black males to achieve these things relative to White males. Thus, many Black males may find themselves in the situation of trying to live up to society's traditional male standards of success while not having the same opportunities as their White male peers. One result may be that Black males focus more on their physical appearance. Through the mass media messages and opportunities available, overall it may be easier for Black males to "look good" than to accomplish vocationally what their White peers can (Cazenave, 1981). An extreme example of this has been how important name brand sneakers and other items of clothing have become to boys and young men who are poor and Black. Lacking the skills or opportunities to gain status through the more traditional routes of education and employment utilized by Whites, young Black men have made wearing designer sneakers and clothes one of the most important indicators of status. Even among those Black males who do achieve some economic success and influence, because they

are Black they may come under greater scrutiny by their coworkers and superiors. That can lead to an increased awareness of how they visually appear to others and more effort invested in maintaining a good physical appearance.

In part, Black men may have received higher body image evaluation scores than other groups because they were more likely to "talk up" and endorse unrealistically high evaluations of themselves, greater than how they actually felt about themselves. As mentioned above, body image may be particularly important for Black men who get strong messages to achieve while having fewer means of doing so. For Black men, to acknowledge that they are not completely satisfied with their appearance or fitness may be more damaging to their sense of masculinity and self-esteem than is the case for other groups who have a greater number of additional sources of esteem (i.e., career and financial success for White men, family and relationships for women).

Finally, the general trend of White men being less invested in their appearance than either White women or Blacks of either sex may be related to White men having the most influence and status in our society. Because of this White men are in a better position to set the appearance standards while not having to extensively attend to their own physical appearance. For those people with less status and influence, such as Black and White women and Black men, appearance is more important. Because their physical

appearance may be one of the few things that they have some control over, they give it more attention and emphasis.

Education and social class effects

As mentioned earlier, based on the results of the first study, there is some indication that better educated individuals may have a more positive body image and also tend to focus more on certain aspects of it such as health and fitness. However, for Black women increased education appeared to be related to increased concerns about their weight and dieting. One goal of the second study was to help clarify those results, particularly in terms of how they affect Blacks. A second goal was to utilize a more accurate measure of class. While there is certainly a connection between education and socioeconomic status, other factors, including occupation and income, also contribute to socioeconomic status. In the second study subjects' occupation as well as their level of education were utilized to calculate their social class. Virtually no significant differences were found among subjects based on social class. The complexities of defining social class and how interactions with race further complicates that process will first be discussed. That will be followed by a discussion of evidence that indicates that methodological problems may be responsible for the lack of class differences in the second study. Finally, explanations for the results with

regard to education found in the first study will be discussed.

The complexities of defining social class. Like race, social class is a characteristic that initially appears easy to measure, but is actually fairly difficult to define. Social class has been objectively defined and assessed in terms of income, education, and/or occupation, among other factors. However it is defined, social class reflects as much a set of values or a lifestyle as anything. While those values or that lifestyle may tend to relate to a person's income (e.g., one is more likely to regularly attend symphony concerts if one has a high income), that may not be true all of the time or even most of the time. For example, there are still a number of free or low cost cultural events available in most places. On the other hand, just because one has a high education or a large income does not mean one will necessarily attend such cultural events.

Another factor to consider is that terms like "upper class" and "lower class" are innately relative. In a small farming town, the local public school teachers may be considered among the upper class, while in a large urban city, those same people would be considered part of the middle class. Similarly, the lower class lifestyle in this country is generally still far better off than the lower class lifestyle of people living in third world countries.

Therefore, the issue of how "well off" someone is depends on the question "compared to whom?" It is possible that any relations between class and body image that do exist may be based more on relative definitions of social class (i.e., the status of a person within their own community) rather than more objective factors such as occupation or income.

Race and social class. The definition of class becomes even more complex when race is taken into consideration. Because of the widespread racism present in this country, race and class cannot be completely separated. If one is African American, one is more likely than a White to experience negative economic consequences. Similarly, statistically, African Americans are more likely than Whites to be born into lower income households. So being a "have not" is much more common to the Black experience than it is to the White experience of living in America. One result may be that social class may be differently defined by African Americans than by Whites. Working in a particular occupation or having a certain income or living a certain lifestyle may have different meanings for Blacks and Whites. Occupations that may be taken almost for granted in some White communities (e.g., doctors, professors) may be much more highly regarded in Black communities.

Another racial difference with regards to class is that Blacks may be more likely to visibly show off their status. Because Blacks have been denied some of the same economic

and educational opportunities that Whites have taken for granted, Blacks may be more likely to visibly show off their wealth or advancement in ways that others can see.

At the same time, because Blacks have fewer economic opportunities than Whites, income may play less of a central role in defining social class. Other variables such as values (e.g., getting an education, a strong family support system, community involvement) may be more central to Black definitions of class and affluence. If true, then factors other than income, such as education and the pursuit of education, may be a better measure of social class for Blacks.

As this discussion should make apparent, there is no single correct definition of social class, and it is likely that social class has different meanings for different people. While examining class differences in body image is important, future research should begin to broaden how social class is defined, including acknowledging differences in the definition of social class based on race, geographical location (i.e., rural, urban, suburban, small town), and other factors.

Methodological factors contributing to a lack of class differences in Study 2. It appears that the sample of subjects in Study 2 was more limited in the range of social classes included than intended, consisting primarily of middle and higher class subjects. There are two reasons for

why the sample turned out to be so limited in its SES range. The first reason is that there were relatively few subjects who fell in the lower income ranges. Only 4% of the subjects fell into the lowest social classification (e.g., unskilled laborers and menial service workers, only approximately 15% of whom came from non-collegiate settings), and only 16% of the subjects fell into the second lowest social classification (e.g., machine operators, semiskilled workers, only 23% of whom came from non-collegiate settings). More than half of the "lower class" group actually came from Hollingshead's middle classification, which includes skilled craftsmen, clerical, and sales workers. Thus, in the second study, the "lower class" group was more akin to a lower middle class group while the "higher class" group was more akin to an upper middle class group.

The second reason for the limited range is a result of the process used to calculate subjects' social class scores. Two-thirds of the sample consisted of college students (who also composed approximately two-thirds of each of the two SES classifications). The social class of college students was calculated based on the occupation and education of their parents. The problem here is that, just by virtue of choosing to attend college, students coming from lower class homes are likely to actually move up in class. Their experiences in college had likely already

started to influence their identities, values, and self-conceptions, moving them away from some of the values that may have been presented in the lower class homes in which they were raised. Similarly, even if students were raised by parents with a low income or low status job, by virtue of making it to college the values within the home may be more similar to a typically middle class home. As a result, it is likely that some of the student subjects were actually more similar to their somewhat higher class peers than to the lower class homes from which they came. Therefore, while some students, based on their parents' scores fell in the lower class group, students' own attitudes and values may have been more similar to subjects from higher classes.

Because of the limited representation of the lowest two economic groups, combined with the majority of subjects receiving social class ratings based on their parent's social status which may be no longer applicable to them, it appears that there was an inadequate range and diversity of social classes, particularly at the lower end. As a result the "lower class" and "higher class" groups may have been more alike than those two classifications generally are. The lack of differences in body image between those groups may be more a reflection of the similarities of those specific two groups than similarities found between lower class and higher class people in the general population.

Educational differences in body image. Better educated individuals have additional skills and abilities that can help compensate for a less attractive general appearance. Those additional skills and abilities may also increase their level of self-esteem, competence, and/or well-being which may be manifested in more positive ratings of general appearance. Such skills and status also may reduce somewhat (although certainly not eliminate) their level of investment in and the importance of their general appearance. It is easier to overlook a person's appearance when evaluating them if they have a high income or a prestigious occupation than if they make relatively little money in an unremarkable job.

However, education appears to be less related to weight-related aspects of body image. That may be partly due to the perceived control individuals have over that aspect of their appearance. Perhaps more than almost any other element of one's physical appearance (e.g., facial features, height), weight is viewed as being primarily behaviorally controlled. People are also more likely to make value judgments about individuals based on their weight. That is, it is commonly (and, sometimes erroneously) thought that people who eat too much (i.e. who have poor self-control) or are less active (i.e., who are lazy) are thought to put on weight while people who are more self-disciplined, concerned about their appearance, and "eat

right" tend to be thin (Fallon, 1990). Those judgments may be applied to oneself as well as to others. Because the upwardly mobile tend to be achievement oriented, they may be particularly hard on themselves when they struggle to achieve their ideal weight.

The educational differences in evaluation of health and investment in health and fitness may reflect better-educated individuals' increased awareness of the importance of a healthy lifestyle and the corresponding increase in behaviors related to those areas. The result is that they believe themselves to have a healthier lifestyle. The findings are also consistent with the regular reports of the inverse correlation of social class and incidence of illness. Better educated subjects are also more likely to have the resources available to pursue a more healthy lifestyle, such as eating more well-balanced meals, exercising more regularly, and having more regular contact with a doctor.

One possible reason that college-educated Black women, compared to their non-college-educated peers, tend to have more negative attitudes towards their weight (similar to college-educated White women) may relate to what is needed by Black women to attract a potential mate. It has been found that among White women who do not go to college there is a correlation between their physical attractiveness and the status of their husband. However, among college-

educated White women no such relation was found. Among Black women a correlation between their physical attractiveness and the status of their husband was found to be present regardless of how well-educated they were (as cited in Staples, 1989). In other words, even at a college level, for Black women physical attractiveness continues to play an important role in attracting men to which they must attend. It may, indeed, be even more important than among their less well-educated peers because more Black women than Black men attend college as well as those Black men who do attend being the most desirable with regard to status and therefore the most heavily competed for.

Clinical implications

One set of clinical implications relates to the assumptions a therapist may make when working with an African-American client. It is important to keep in mind how being African American has uniquely contributed to the client's lifestyle and experiences in the world. One assumption that some therapists may make related to body image, based on some past and dubious psychological research, is that Blacks may feel some shame or have some negative feelings about their Black appearance and themselves simply because they are Black. The findings of the present research indicate that, at least when it comes to body image, that appears not to be the case.

This is particularly true in terms of body weight. Being overweight appears to be more widely accepted by Blacks and carries less stigma, particularly among Black women. For example, if two women are overweight and one is White and the other is Black, the White woman is likely to feel more negatively about her weight than the Black woman. So clinically, body image may be less of an issue for Black women and body-image issues such as being overweight may be less likely to be either a symptom or a source of psychological stress in Blacks and Black women in particular. One example of that is the relatively low incidence of eating disorders such as bulimia and anorexia nervosa among Black women, although the incidence of eating disorders among Black women is increasing (Dolan, 1991; Hsu, 1987). On the other hand, obesity contributes to a number of medical conditions which have a higher incidence in Black women such as diabetes, high blood pressure, and heart disease (Kumanyika, 1987). Therefore, due to the greater prevalence of overweight Blacks (particularly Black women), complicating medical conditions may be more commonly seen in Black clients.

One clinical implication of the interaction of race and education is that it is possible that the incidence of eating disorders among Black women will continue to increase. This might occur if more Black women are influenced by White beauty standards as they pursue higher

levels of education. One unfortunate consequence is that Black women may become more likely to adopt the same sort of negative self-assessment and concern with their weight that is prevalent among White women. This would likely lead to an increasing number of Black women developing eating disorders.

While weight is likely to be less important to Black women, particularly less well-educated Black women relative to White women, body image seems more important to Black than White men. Results of this research indicate that Black men in general are as invested or more invested in their body image (particularly in non-weight-related areas) and evaluate it more positively than White men and women or Black women. The clinical implication is that when working with Black males in therapy, their evaluation about their body image is likely to be more important to them than is true for White males. Therefore, more time evaluating and focusing on feelings related to their body image may be needed when working with Black men than with White men, where body image may be less important than other areas of esteem. Understanding the meaning of such experiences in their cultural context is a crucial task for the therapist.

However, decisions about the relevance of body image issues in Blacks need to be made on an individual basis. As discussed earlier, there is a tremendous amount of diversity among African Americans and no generalizations based on race

will hold true for everyone. For some Blacks, having a negative body image may be an appropriate response to negative experiences in the past (e.g., being put down and criticized by family members concerning the darkness of their skin, attending a primarily White school where they were regularly the target of racist remarks about their appearance). For others it may be just one symptom of a clinical depression or low self-esteem. The important point is that body image issues, like any clinical issues, need to be framed and understood within the context of the individual's life experiences.

The above are just a few of the most obvious clinical implications of this research. In general, it is important to realize that both race and education do have a significant effect on body-image issues, and not always in the direction that some psychologists have predicted. Further research in this area will hopefully further clarify how body image needs to be taken into account when working with diverse social and ethnic minority clients.

Weaknesses of the studies

The most significant weakness of these studies is that neither appeared to successfully sample a representative socioeconomic range of subjects. In the case of the first survey study, just by virtue of appearing in a monthly psychological magazine, the subject pool contained fewer less educated subjects (who spend less time reading) and

fewer poor subjects (who are likely to have less money to spend on a psychology magazine). As explained in detail earlier, the second study also appeared to utilize a fairly narrow socioeconomic range of subjects. Therefore, the basic question of how socioeconomic class affects body image has not been satisfactorily addressed by this research, beyond some tentative findings related to education.

Another issue relates to how to handle demographic differences between the races. In the first study there were significant racial differences in age, weight, and education. The weight difference is consistent with past research that has found Blacks to weigh significantly more than Whites. The educational difference may also reflect a real population difference between Blacks and Whites, in which Blacks in general do not advance as far educationally. The age difference is not as easy to justify as a reflection of actual population differences. It has been found that Blacks have a shorter life expectancy than Whites. However, an alternative explanation is that if the sample is skewed away from less well-educated and poorer subjects, then the younger Black sample may be a reflection of how younger Blacks have had more opportunities for educational and economic advancement than those a generation or two older. In that case, the sample does not reflect the larger Black

population, leaving out a disproportionately larger number of older and less well-educated Blacks relative to Whites.

Even if the above differences are a reflection of the larger population, there is the dilemma of whether to control for such differences or to keep them in as an accurate reflection of the larger population. Not to control for demographic population differences may mean that any significant findings may, in fact, reflect age, weight, or socioeconomic differences rather than purely racial differences. On the other hand, to control for demographic differences in populations may result in rigorous, but unrealistic comparisons. What is the point of matching Blacks and Whites on weight, if Blacks generally weigh more than Whites? Not to include the weight differences means that the results only address part of the reality of being Black, with weighing a little more another significant aspect. This is obviously not so much a weakness of this research in particular, but relates to the larger issue of what exactly is meant when one talks about racial or economic differences.

Another weakness of this study, common to much of the research done on body-image attitudes, is that it is based on self-report questionnaires. The assumption is that subjects were honest in reporting how they feel about various aspects of their body image. However, it is possible that some subjects may have overstated or

understated how they feel about aspects of their body image. It is therefore important to keep in mind that the scores reported are based on what subject's said, rather than any objective measure. However, because the results were generally consistent between the two studies and consistent with previous research (e.g., Rucker & Cash, 1991) it appears likely that overall the results fairly accurately reflect the attitudes held by Black and White men and women.

Finally, as has already been discussed earlier, variables such as race and class are quite complex and contain a great deal of internal variance so that making generalizations based on race or class can be misleading and oversimplify a much more rich and complex interactive process. The danger of presenting fairly simple, concise statements about racial or class differences in any area including body image is that a respect for and awareness of the incredible diversity within those categories, as well as the subjectivity of their definitions can be lost. It is important to keep in mind that these findings are only a beginning to understanding how race and class interact with body image, not a final conclusion.

Future research

One apparent direction for future research, alluded to above, is to study further how socioeconomic class (both by itself and in combination with race) affects body image. In particular, a more representative sample of the

socioeconomic population needs to be utilized to examine the issues raised in this research. Particularly in light of this study's findings that Blacks may actually have a more positive body image than Whites, it will be important to determine how social class influences that. It may be that some of the negative feelings that Blacks reportedly feel about themselves are more a result of their economic status than their race.

A second task for future research would be to look at body-image attitudes in other racial groups such as Asian-Americans and Latinos. Especially with both those populations growing in size in the U.S. there will be a greater need to determine if commonly held beliefs about body image are as applicable to other races as to the White samples that are often studied. This research has indicated that while there are similarities, there are also important differences between Whites and Blacks. Further multicultural studies are crucial, in view of the powerful role of cultural socialization in body-image development (Cash & Pruzinsky, 1990).

Finally, further studies of race and body image could further explore how some of the variations among Black-Americans such as racial identity, level of exposure to the majority culture, ethnicity of physical appearance (e.g., skin tone and hair texture), and other factors interact with body image. Related to this, it is appropriate that future

research on body image focus solely on issues among African Americans based on aspects of their culture, without framing the results or explanations as relative to White culture and past findings. Just as much of the past research on body image among Whites has not been done relative to Black culture, it is appropriate that future research focus on body image in Blacks independent from past findings on Whites.

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Appendix A
MBSRQ
INSTRUCTIONS--PLEASE READ CAREFULLY

The following pages contain a series of statements about how people might think, feel, or behave. You are asked to indicate the extent to which each statement pertains to you personally.

Your answers to the items in the questionnaire are anonymous, so please do not write your name on any of the materials. In order to complete the questionnaire, read each statement carefully and decide how much it pertains to you personally. Using a scale like the one below, indicate your answer by entering it to the left of the number of the statement.

1	2	3	4	5
-----	-----	-----	-----	-----
Definitely Disagree	Mostly Disagree	Neither Agree Nor Disagree	Mostly Agree	Definitely Agree

EXAMPLE:

_____ I am usually in a good mood.

In the circle on the answer sheet, enter a 1 if you definitely disagree with the statement; a 2 if you mostly disagree; a 3 if you neither agree nor disagree; a 4 if you mostly agree; or enter a 5 if you definitely agree with the statement.

There are no right or wrong answers. Just give the answer that is most accurate for you. Remember, your responses are anonymous, so please be completely honest. Please give an answer to all of the items.

	1	2	3	4	5
	Definitely Disagree	Mostly Disagree	Neither Agree Nor Disagree	Mostly Agree	Definitely Agree
_____	1.	Before going out in public, I always notice how I look.			
_____	2.	I am careful to buy clothes that will make me my best.			
_____	3.	I would pass most physical-fitness tests.			
_____	4.	It is important that I have superior physical strength.			
_____	5.	My body is sexually appealing.			
_____	6.	I am not involved in a regular exercise program.			
_____	7.	I am in control of my health.			
_____	8.	I know a lot about things that affect my physical health.			
_____	9.	I have deliberately developed a healthy lifestyle.			
_____	10.	I constantly worry about being or becoming fat.			
_____	11.	I like my looks just the way they are.			
_____	12.	I check my appearance in a mirror whenever I can.			
_____	13.	Before going out, I usually spend a lot of time getting ready.			
_____	14.	My physical endurance is good.			
_____	15.	Participating in sports is unimportant to me.			
_____	16.	I do not actively do things to keep physically fit.			
_____	17.	My health is a matter of unexpected ups and downs.			
_____	18.	Good health is one of the most important things in my life.			

- | | 1 | 2 | 3 | 4 | 5 |
|-----------|---|--------------------|----------------------------------|-----------------|---------------------|
| | Definitely
Disagree | Mostly
Disagree | Neither
Agree Nor
Disagree | Mostly
Agree | Definitely
Agree |
| _____ 19. | I don't do anything that I know might threaten my health. | | | | |
| _____ 20. | I am very conscious of even small changes in my weight. | | | | |
| _____ 21. | Most people would consider me good-looking. | | | | |
| _____ 22. | It is important that I always look good. | | | | |
| _____ 23. | I use very few grooming products. | | | | |
| _____ 24. | I easily learn physical skills. | | | | |
| _____ 25. | Being physically fit is not a strong priority in my life. | | | | |
| _____ 26. | I do things to increase my physical strength. | | | | |
| _____ 27. | I am seldom physically ill. | | | | |
| _____ 28. | I take my health for granted. | | | | |
| _____ 29. | I often read books and magazines that pertain to health. | | | | |
| _____ 30. | I like the way I look without my clothes. | | | | |
| _____ 31. | I am self-conscious if my grooming isn't right. | | | | |
| _____ 32. | I usually wear whatever is handy without caring how it looks. | | | | |
| _____ 33. | I do poorly in physical sports or games. | | | | |
| _____ 34. | I seldom think about my athletic skills. | | | | |
| _____ 35. | I work to improve my physical stamina. | | | | |
| _____ 36. | From day to day, I never know how my body will feel. | | | | |
| _____ 37. | If I am sick, I don't pay much attention to my symptoms. | | | | |

	1	2	3	4	5
	Definitely Disagree	Mostly Disagree	Neither Agree Nor Disagree	Mostly Agree	Definitely Agree
_____ 38.	I make no special effort to eat a balanced and nutritious diet.				
_____ 39.	I like the way my clothes fit me.				
_____ 40.	I don't care what people think about my appearance.				
_____ 41.	I take special care with my hair grooming.				
_____ 42.	I dislike my physique.				
_____ 43.	I don't care to improve my abilities in physical activities.				
_____ 44.	I try to be physically active.				
_____ 45.	I often feel vulnerable to sickness.				
_____ 46.	I pay close attention to my body for any signs of illness.				
_____ 47.	If I'm coming down with a cold or flu, I just ignore it and go on as usual.				
_____ 48.	I am physically unattractive.				
_____ 49.	I never think about my appearance.				
_____ 50.	I am always trying to improve my physical appearance.				
_____ 51.	I am very well coordinated.				
_____ 52.	I know a lot about physical fitness.				
_____ 53.	I play a sport regularly throughout the year.				
_____ 54.	I am a physically healthy person.				
_____ 55.	I am very aware of small changes in my physical health.				

_____ 56. At the first sign of illness, I seek medical advice.

_____ 57. I am on a weight-loss diet.

For the remainder of the items use the response scale given with the item, and enter your answer in the space beside the item.

_____ 58. I have tried to lose weight by fasting or going on crash diets.

1. Never
2. Rarely
3. Sometimes
4. Often
5. Very Often

_____ 59. I think I am:

1. Very underweight
2. Somewhat underweight
3. Normal weight
4. Somewhat overweight
5. Very overweight

_____ 60. From looking at me, most other people would think I am:

1. Very underweight
2. Somewhat underweight
3. Normal weight
4. Somewhat overweight
5. Very overweight

61-69. Indicate how satisfied you are with each of the following areas of your body:

1	2	3	4	5

Very Dissatisfied	Mostly Dissatisfied	Neither Satisfied	Mostly Satisfied	Very Satisfied

- _____ 61. Face (facial features, complexion)
- _____ 62. Hair (color, thickness, texture)
- _____ 63. Lower torso (buttocks, hips, thighs, legs)
- _____ 64. Mid torso (waist, stomach)
- _____ 65. Upper torso (chest or breasts, shoulders, arms)
- _____ 66. Muscle tone
- _____ 67. Weight
- _____ 68. Height
- _____ 69. Overall appearance

Appendix B

Eating Disorders Inventory Drive for Thinness Scale

Please use the following 0 to 5 scale to answer the questions below. Write your answer in the space beside each statement.

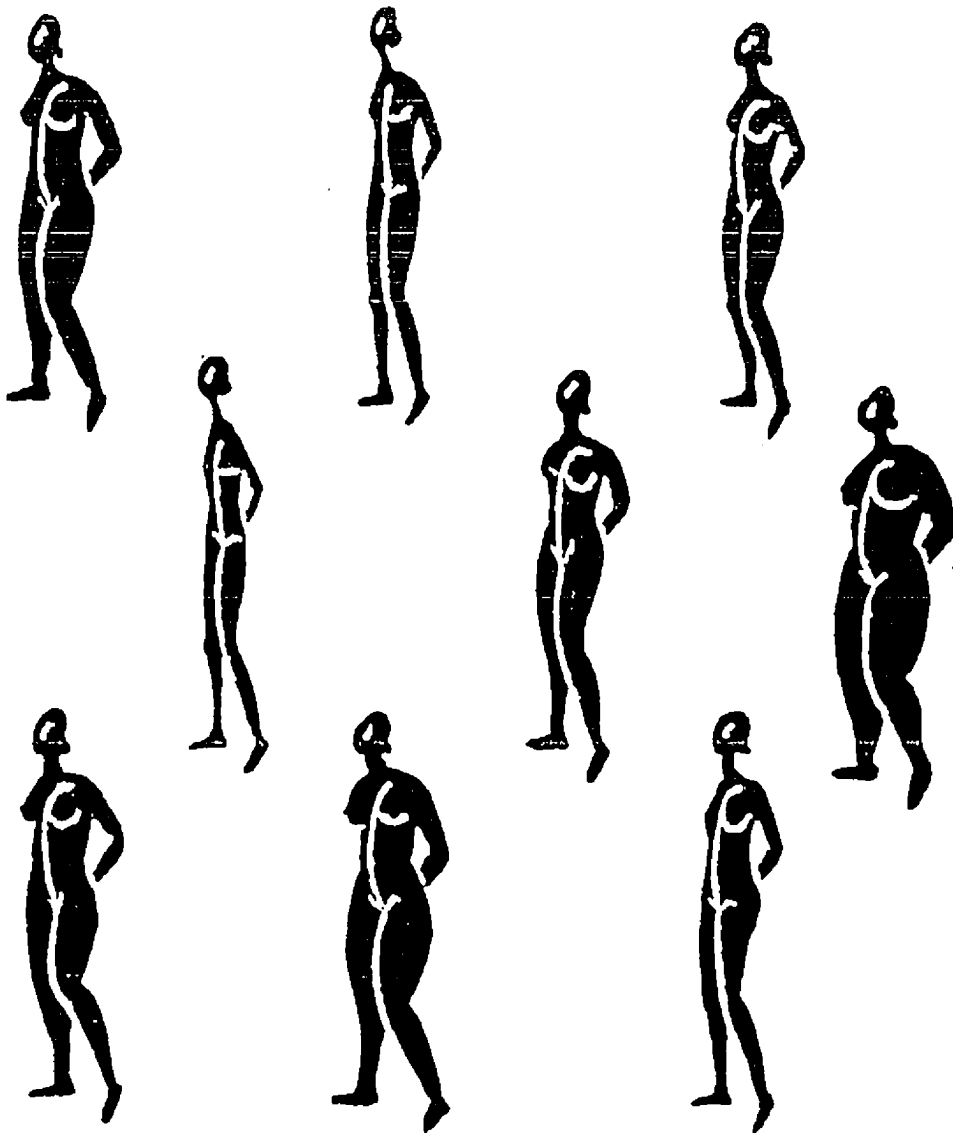
	0	1	2	3	4	5
	Never	Rarely	Sometimes	Often	Usually	Always
_____	1.	I eat sweets and carbohydrates without feeling nervous.				
_____	2.	I think about dieting.				
_____	3.	I feel extremely guilty after overeating.				
_____	4.	I am terrified of gaining weight.				
_____	5.	I exaggerate or magnify the importance of weight.				
_____	6.	I am preoccupied with the desire to be thinner.				
_____	7.	If I gain a pound, I worry that I will keep gaining.				

Appendix C
Body Image Assessment Procedure-Revised

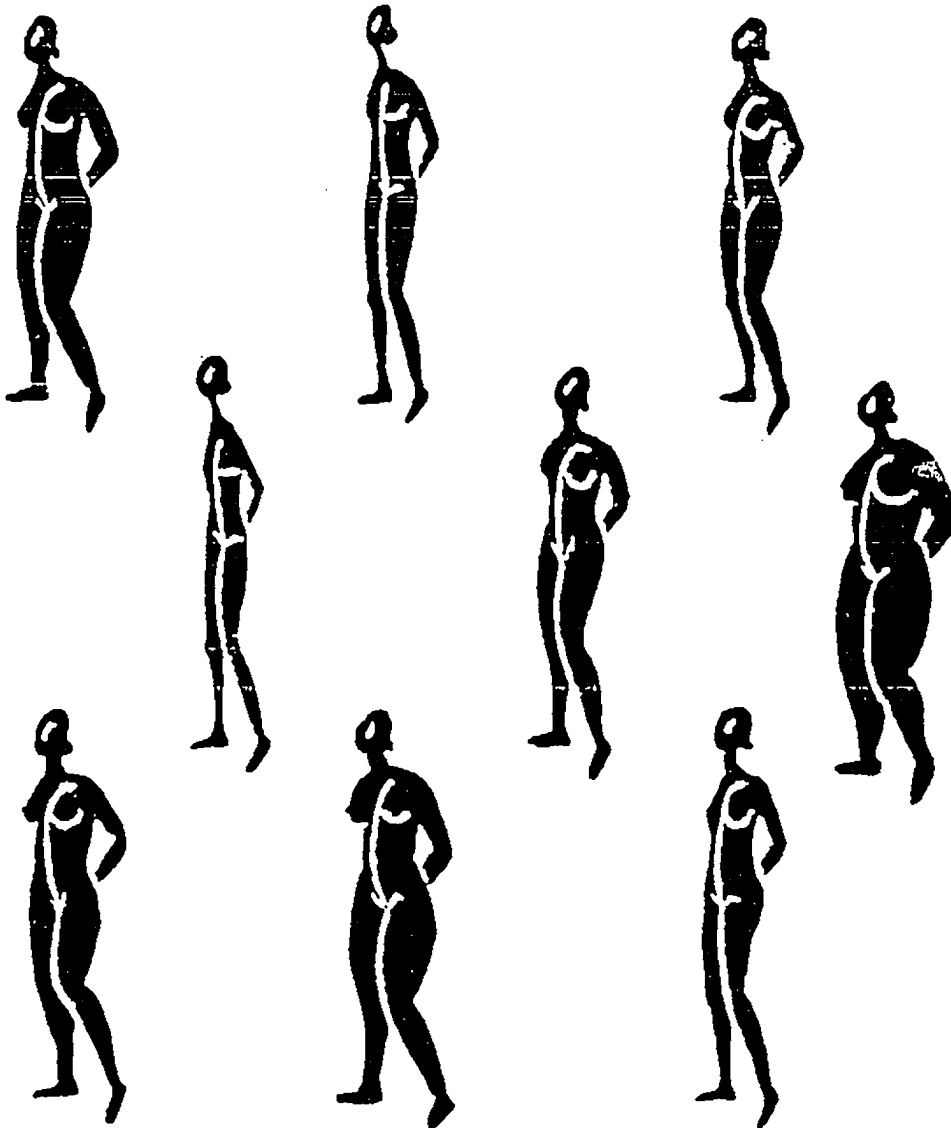
The following 8 BIAP-R silhouette items (4 items for females followed by 4 items for males) were reduced by 30% from their questionnaire size to conform with margin requirements.

Circle the one drawing below that looks most like your actual body size:

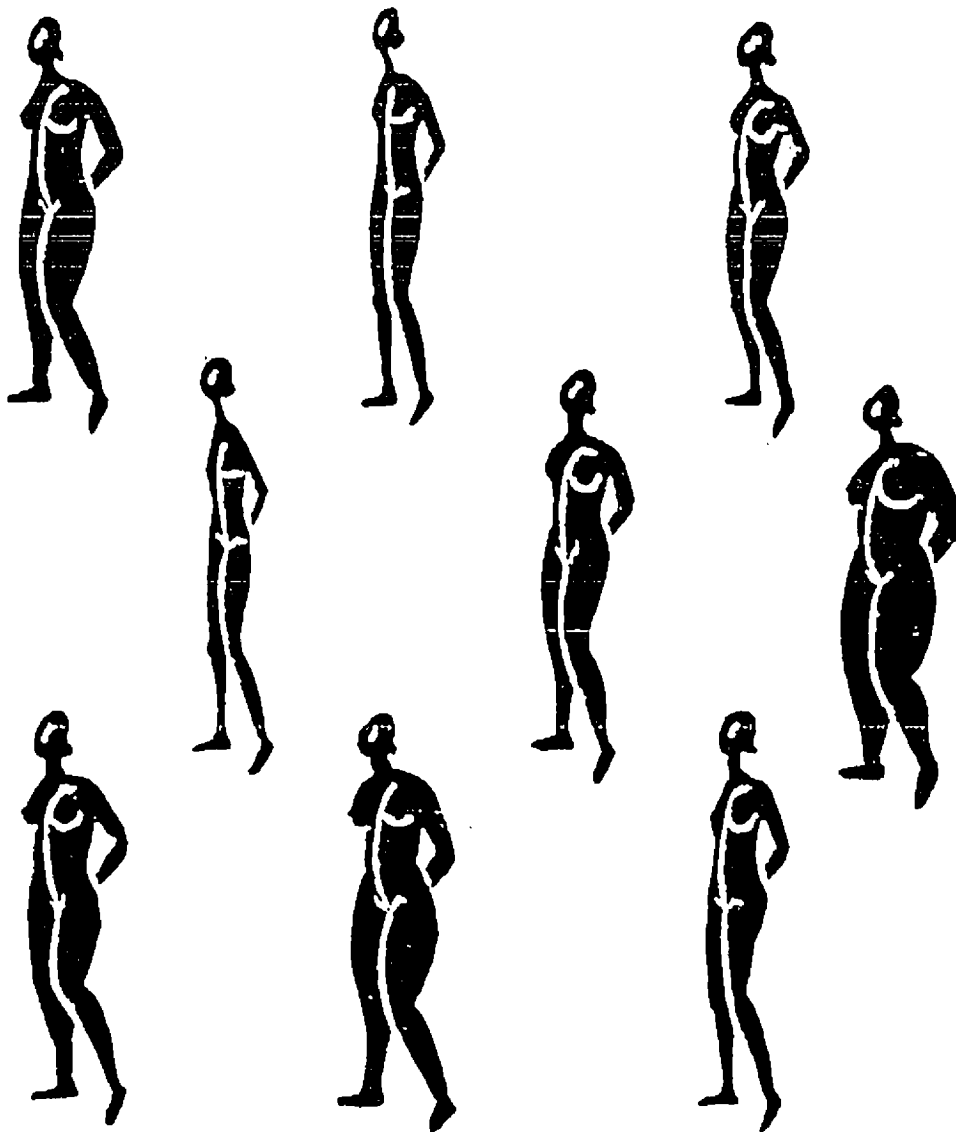
124



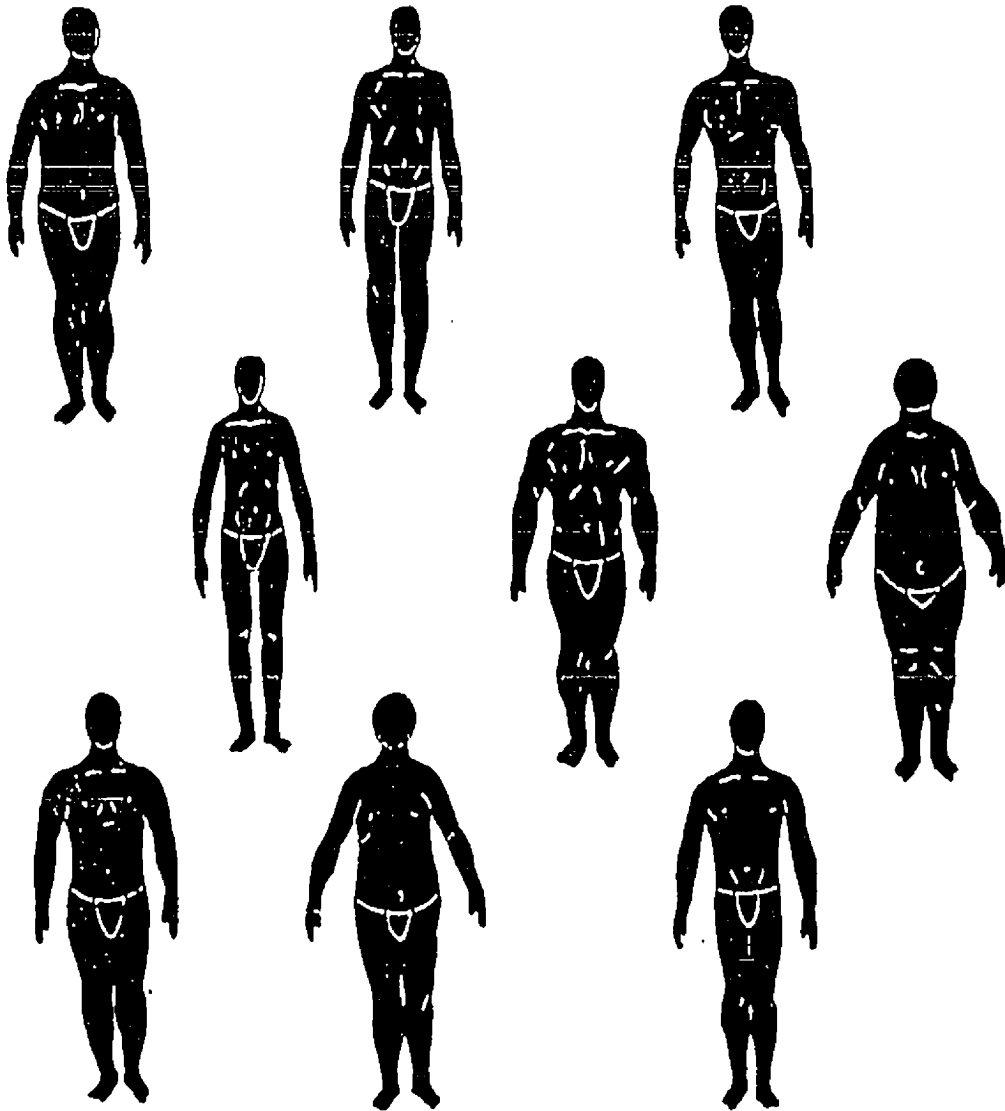
Circle the one drawing below that looks most like the body size that you would prefer to have:



Circle the one drawing below that you believe men find to be the most attractive female body size:

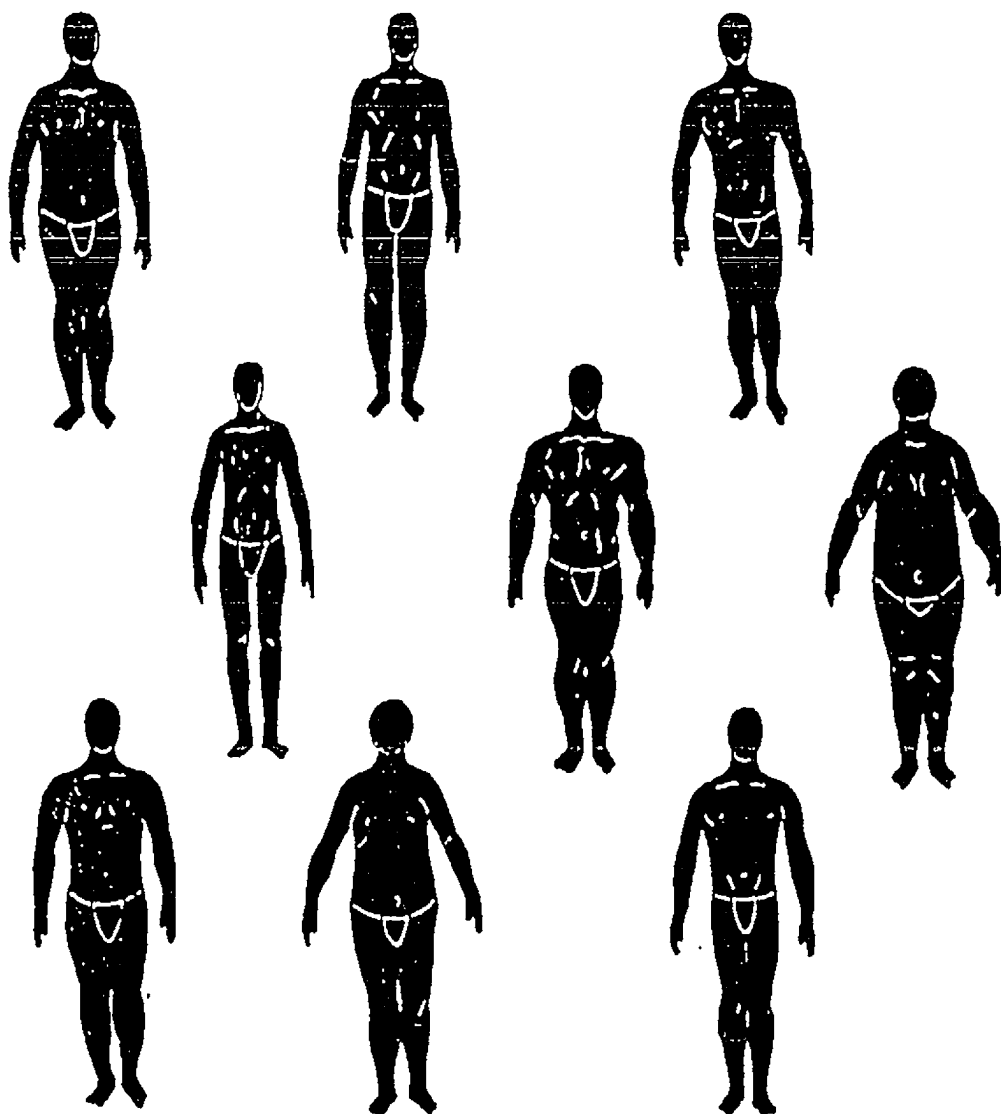


Circle the one drawing below that you find to be the most attractive male body size:



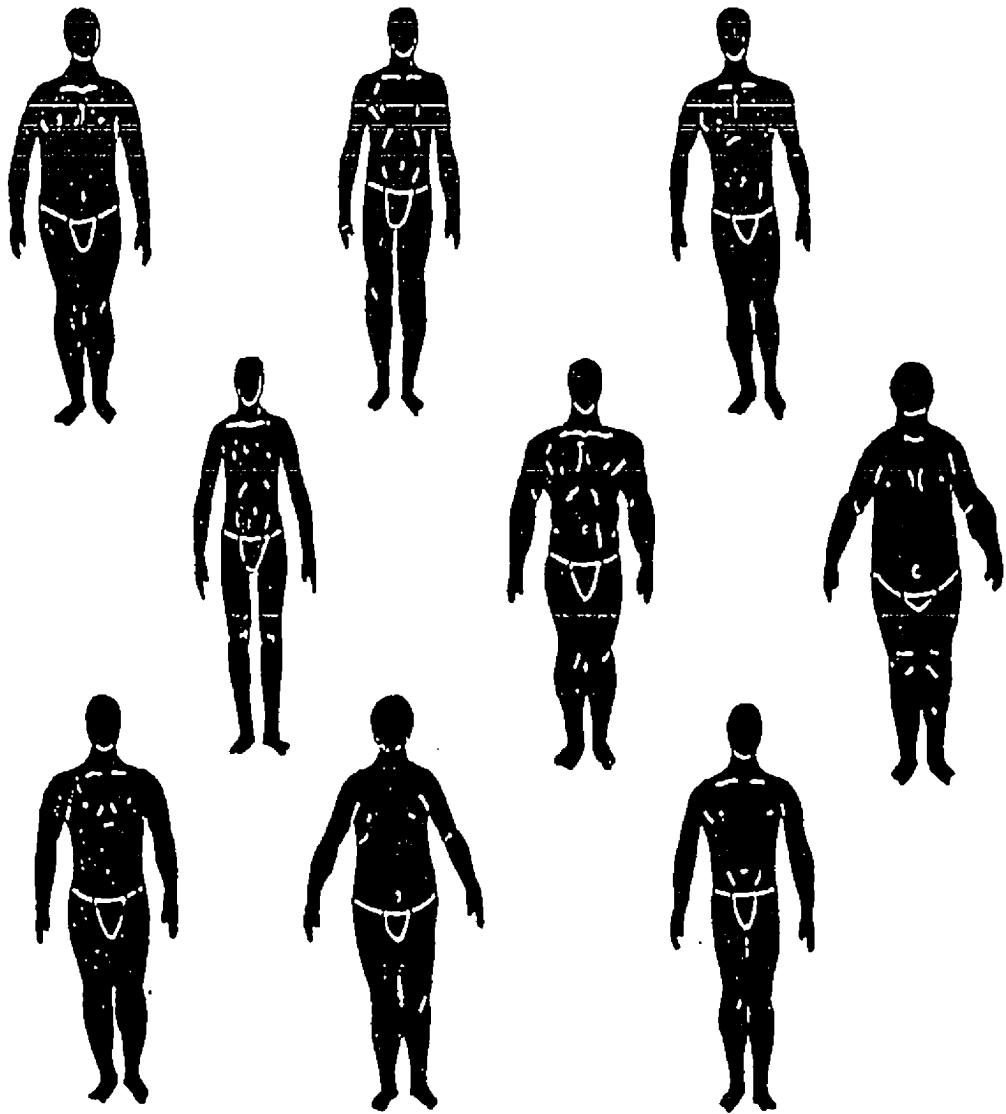
Circle the one drawing below that looks most like your actual body size:

128

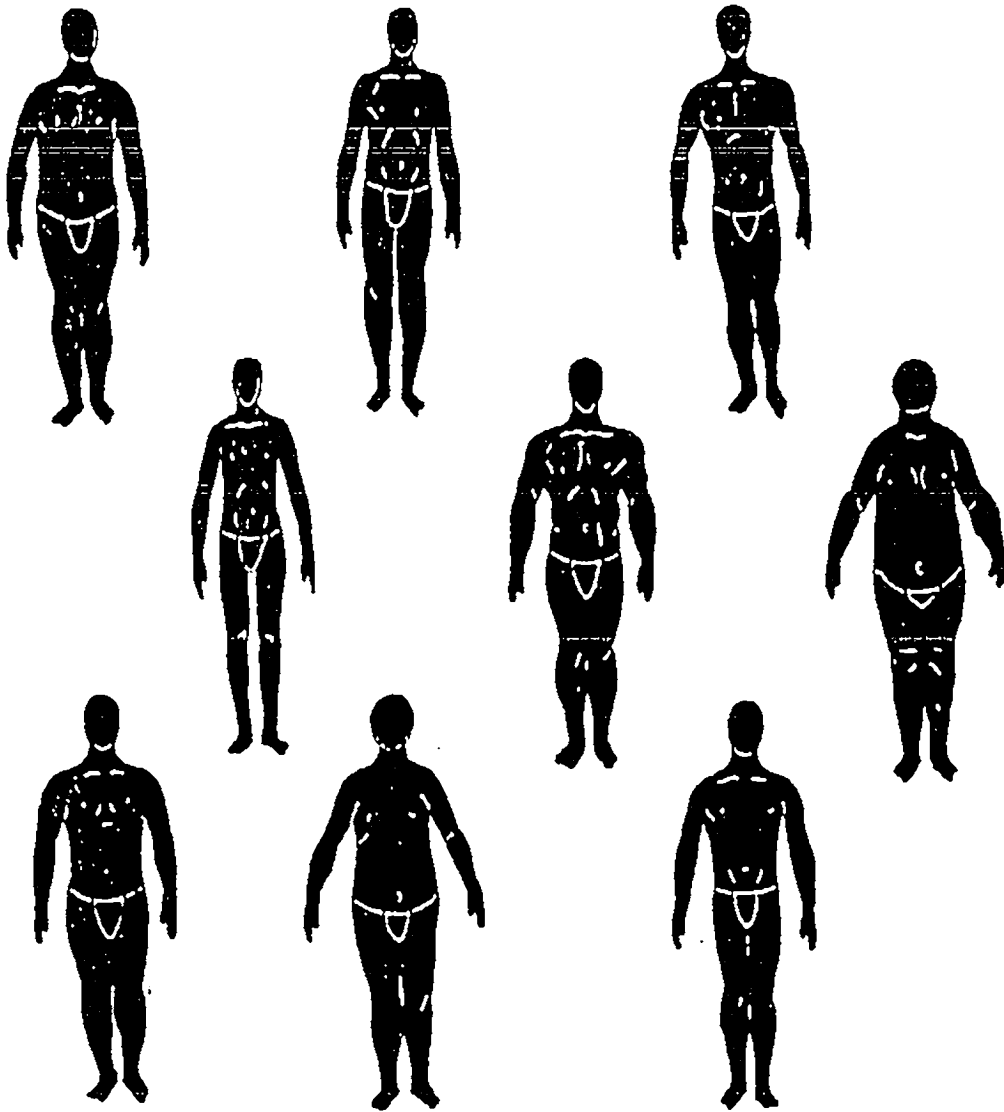


.

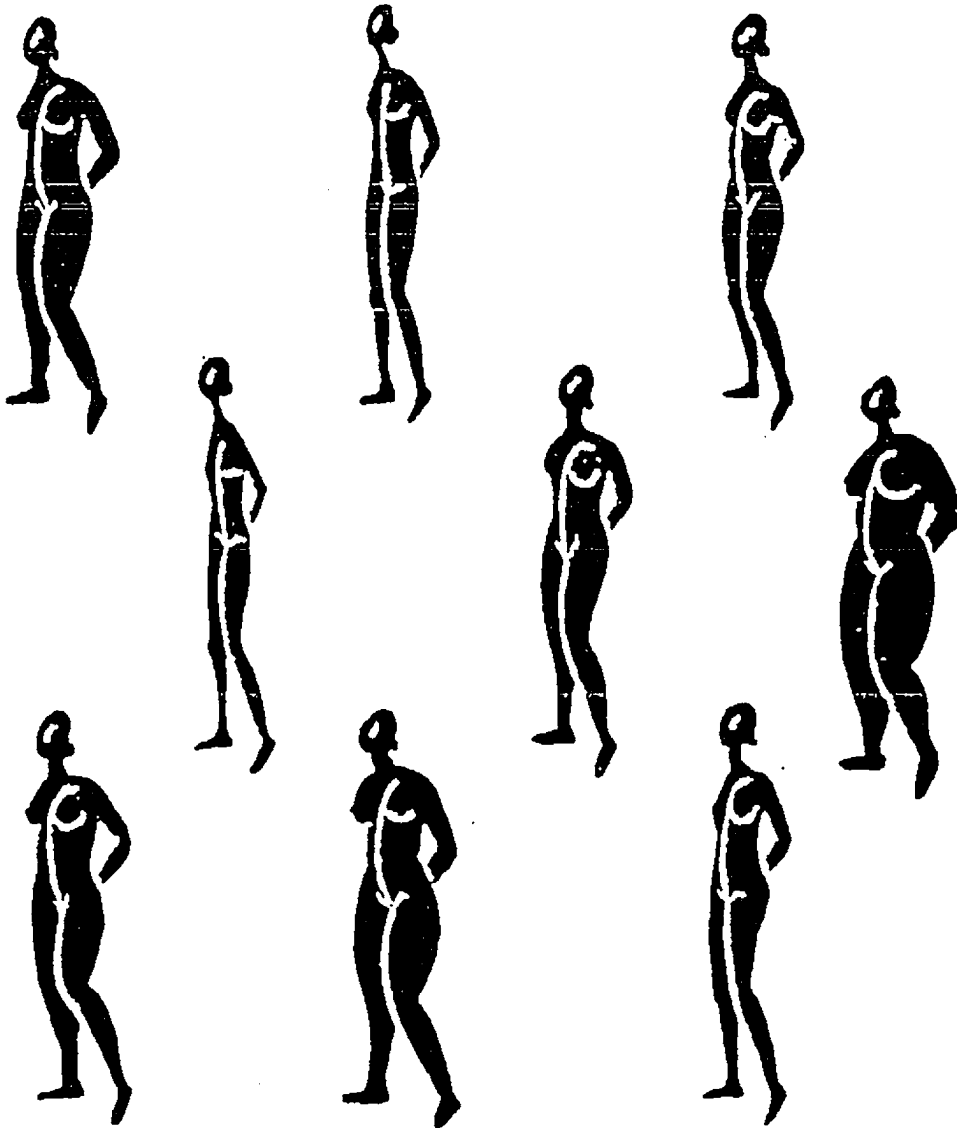
Circle the one drawing below that looks most like the body size
that you would prefer to have:



Circle the one drawing below that you believe women find to be the most attractive male body size:



Circle the one drawing below that you find to be the most attractive female body size:



Appendix D
Background Information

1. Your sex: Male Female
2. Your age: ____ years
3. Your marital status (circle one):
single married separated divorced widowed
4. Your education (highest grade or degree completed):

5. The education (highest grade or degree completed) of the person/people who raised you: _____
6. If you are married, the education (highest grade or degree completed) of the person you are married to: _____

For the following three questions if you (or the person the question is referring to) are presently unemployed or retired, list the job you (or the person the question is referring to) previously held.

7. Your occupation: _____
8. The occupation(s) of the person/people who raised you:

9. If married, the occupation of the person you are married to: _____
10. Your current height (without shoes):
_____ feet _____ inches
11. Your current weight (with indoor clothing):
_____ pounds
12. Your desired weight: _____ pounds

13. With regards to your weight, are you presently trying to:

lose weight maintain your weight gain weight

14. Do you consider yourself to be currently overweight:

_____yes _____no

If yes: (a) How many pounds overweight do you consider yourself to be: _____pounds

(b) How long ago were you last at normal weight:

_____years _____months

15. Do you consider yourself to be currently underweight:

_____yes _____no

If yes: (a) How many pounds underweight do you consider yourself to be:

_____pounds

(b) How long ago were you last at normal weight:

_____years _____months

16. Do you consider yourself to have ever been overweight as an adult:

_____yes _____no

If yes: What is the total length of time that you have been overweight as an adult:

_____years _____months

17. Do you consider yourself to have ever been underweight as an adult:

_____yes _____no

If yes: What is the total length of time that you have been underweight as an adult:

_____years _____months

18. Did you consider yourself to have ever been overweight as a child or teenager:

_____yes _____no

If yes: As a child and teenager, what was the total length of time that you were overweight:

_____years _____months

19. Did you consider yourself to have ever been underweight as a child or teenager:

_____yes _____no

If yes: As a child and teenager, what was the total length of time that you were underweight:

_____years _____months

Autobiographical Statement

Christopher Eugene Huffine was born in Chicago, IL on September 2, 1963. He attended Carleton College in Northfield, MN, graduating cum laude with a Bachelor of Arts degree in Psychology in May, 1985. He began his graduate studies at the Virginia Consortium for Professional Psychology in 1987. He was an intern at Tualatin Valley Mental Health Center in Portland, OR from 1989-1990. He is a member of the American Psychological Association and the Oregon Psychological Association.