

7-21-2009

# Black and White College Men's Preferred Body Types for Black and White Female Figures

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BLACK AND WHITE COLLEGE MEN'S PREFERRED BODY TYPES FOR BLACK  
AND WHITE FEMALE FIGURES

A Dissertation

Submitted to the School of Graduate Studies and Research

in Partial Fulfillment of the

Requirements for the Degree

Doctor of Psychology

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Indiana University of Pennsylvania

August 2009

Indiana University of Pennsylvania  
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The present study investigates the role of the racial identity of the female figures in a figure rating scale in African American and Caucasian men's preferences for female thinness. It also examines what role, if any, acculturation plays in men's selection of attractive female body sizes and whether the men's BMIs, their mothers' body sizes, and their household income are significant factors in their preferences for thinness.

Participants were administered African American and Caucasian versions of Klawitter's Figure Rating Scale and asked to select the figure they found most attractive in the opposite sex, the range of body sizes that they have dated, and the figure that represents their mother's body size. They also completed a short demographics questionnaire and selected subscales of the African American Acculturation Scale—Revised.

The results indicated a trend towards African American men selecting larger female figures than Caucasian men, although this trend disappeared when acculturation was considered as a covariate. African American men also have dated a larger range of women's body sizes than Caucasian men. It first appeared that the men chose similar black and white female figures as being attractive, but when the men's BMIs were introduced as a covariate, the race of the female figures became significant. Men with

higher BMIs selected significantly larger black female figures than white female figures. Furthermore, African American men's own BMIs were predictive of their choice of attractive black females, whereas acculturation was the sole predictor of white female attractiveness ratings made by Caucasian men.

This study was the first to investigate the role of the race of the female figures in assessing black and white men's preferences for female thinness. It found that the race of the female figures does make a difference in the men's ratings, which suggests that the perceived race of the female figures in prior studies could be a confounding variable. Furthermore, this study suggests that men's BMIs and acculturation of Caucasian men, both of which have been overlooked in prior research, are important factors in determining men's preference for female thinness.

## ACKNOWLEDGMENTS

I would like to thank my dissertation chair, Dr. Maureen C. McHugh, for all of her gracious guidance and encouragement throughout this process. I could not have completed this research without the time, energy, and support of Dr. McHugh. I also would like to thank my dissertation committee members, Dr. Beverly J. Goodwin and Dr. David J. LaPorte, for sharing their time and their knowledge. Additionally, I would like to thank Henny Schultz for kindly offering his talent at graphic art. Without his patience and his skills, I could not have created the two new versions of Klawitter's Figure Rating Scale. Furthermore, I would like to thank Joshua Watt for being a great friend and for donating his time and his statistical expertise to help me with the analysis of my data.

Finally, I would like to thank my family. Thank you to my parents, Kenneth and Brenda Klawitter, for a lifetime of love and generosity. I could not have made it through college and graduate school without their encouragement and support. Thank you also to my husband, Frank, to whom I dedicate this dissertation. He selflessly followed me to West Chester, Indiana, Norfolk, and (soon) York to allow me to pursue my dream. I truly appreciate his sacrifice. He was always willing to stay up late to help me with projects and to offer words of encouragement when school got overwhelming. He always believed in me and has always been by my side, giving me the strength to succeed.

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## CHAPTER I

### INTRODUCTION

#### Body Image in Women

Body image refers to the “perceptions, attitudes, emotions, and personality reactions of the individual in relation to his or her own body” (Lau, Lum, Chronister, & Forrest, 2006). It encompasses how one perceives, thinks, and feels about one’s looks, which in turn affects one’s behavior in different situations. Body image is subjective, and it has a very low correlation with an objective level of attractiveness. Research has shown that less than 7% of one’s personal view of one’s appearance is accounted for by actual attractiveness (Thompson, Heinberg, Altabe, & Tantleff-Dunn, 1999). This implies a largely internal, mental role behind body image.

In support of this, some of the earliest investigations of body image focused on its neurological basis. In 1926, Head created the term body schema to describe the cognitive processes that organize new information about one’s appearance into an already existing schema (Head, 1926). Other early studies of body image focused on how self-image changes after brain damage.

In 1944, Burgess and Wallen turned the focus from neurology to self-perceptions of appearance by measuring self-ratings of attractiveness made by married couples. Around 1950, Schilder developed a multidimensional conceptualization of body image. He believed that emotions, attitudes, wishes, and social relationships all influence conscious and unconscious processes that in turn contribute to body image (Schilder, 1950). Schilder opened the door for psychoanalysts such as Freud, Adler, and Jung to formulate psychological concepts of body image.

With the new focus on self-perceptions of appearance, psychologists began to develop ways to measure body image. The first attempt was in the early 1950s, when Secord and Jourard created the first scales to assess a subjective rating of one's appearance (Secord & Jourard, 1953). However, in the 1960s and 1970s, attention turned from assessing body image to treating clinical populations with eating and weight disorders. Not surprisingly, a disturbance in body image was found to be a key component in anorexia nervosa and bulimia nervosa (Stunkard & Mendelson, 1967).

A disturbance in body image can take an affective, cognitive, behavioral, or perceptual form (Thompson et al., 1999). An affective disturbance involves being distressed, upset, or anxious about one's appearance. A cognitive disturbance consists of unrealistic expectations of how one can look. A behavioral disturbance could involve avoiding situations that bring forth body image inspection or overly-focusing on such situations. A perceptual component consists of overestimating or underestimating one's body size (Thompson et al., 1999).

Today, body image is viewed in terms of a continuum model. Levels of body image disturbance range from none to extreme, but most people fall somewhere in the middle, experiencing some mild or moderate degree of distress and dissatisfaction. Higher levels of body image disturbance are related not only to eating disordered behaviors, but also to higher levels of depression (Thompson et al., 1999).

This disturbance in body image is known as *body dissatisfaction*. The term, which refers to an underlying shame surrounding one's body image, captures the core of one's subjective appraisal of his/her body. The causes of body dissatisfaction and disordered eating are multi-factorial, but much recent research has focused on the sociocultural

etiologies. The sociocultural model explores the role that social and cultural norms and values play in either protecting people against or driving people towards body image disturbance, dissatisfaction, and eating disorders.

Body dissatisfaction affects men, women, and children of all ages and races. In a 1995 survey by Cash and Henry, women ranging in age from 18 to 70, and representative of the United States population in aspects of race, income, education, and geographic location, were questioned about their body satisfaction and preoccupation. Dissatisfaction and weight preoccupation were equally prevalent in all ages (Cash & Henry, 1995). Similarly, in a 1996 study of over 2,300 nine and ten-year old Caucasian and African American girls, there was no statistical difference in the age or the ethnicity of girls who were trying to lose weight (Thompson et al., 1999). Furthermore, Thompson, Corwin, and Sargent (1997) found that 30% of fourth grade boys and 49% of fourth grade girls wanted to be thinner.

Men, especially homosexual men, also experience body dissatisfaction, although they are often more interested in gaining weight than in losing it. Men frequently focus on muscularity, chest size, and male pattern hair loss as areas of concern (Thompson et al., 1999). Grieve, Newton, Kelley, Miller, Jr., and Kerr (2005) stated that the media's presentation of the ideal male is changing from a normal appearance to a taller, more muscular, V-shaped physique. This can lead men to develop muscle dysmorphia, which can drive them to excessive dieting and weight lifting. One study adapted the Contour Drawing Rating Scale to reflect nine hand-drawn male physiques ranging from very thin to very muscular. An administration of this new scale, the Body Shape Assessment, to college men revealed that men wanted to be more muscular than they currently believed

themselves to be. They also overestimated the degree of male muscularity that women would choose as ideal (Grieve, Newton, Kelley, Miller, Jr., & Kerr, 2005). This research raises an interesting point about the assertion that gender differences in body image dissatisfaction are increasing. It appears that women are more dissatisfied than men and that the difference is continually widening, especially among the adolescent age group (Thompson et al., 1999). This could be a real discrepancy, due to the differential appearance standards set and portrayed by the media. Content analyses of television shows and magazines indicate that male images vary in size and shape, while images of women are nearly always extremely thin (Miller & Halberstadt, 2005). However, it could also be a fictitious discrepancy caused by researchers assessing desire for thinness in males and neglecting to assess desire for muscularity.

It is clear that body dissatisfaction is a problem that is growing increasingly more prevalent in American society. *Psychology Today* surveyed readers in 1972, 1985, and again in 1996, asking questions about satisfaction with physical appearance. In 1972, 15% of men and 23% of women were dissatisfied with their overall appearance. In 1985, the numbers jumped to 34% of men and 38% of women, and in 1996, 43% of men and 56% of women reported dissatisfaction with their overall appearance (Thompson et al., 1999). More specifically, Garner (1997) found that 89% of women in America wanted to be thinner, and a disturbing 24% were willing to sacrifice three years of their life if they could reach their ideal body weight.

Body dissatisfaction has been growing since the 1950s, when the ideal body size portrayed for women slowly shifted from the curvy shape of Marilyn Monroe to the thinner, more boyish figure of Kate Moss (Almond, 2000). The body ideals, which were

measured in a study of Playboy centerfolds and Miss America contestants, have been steadily decreasing (Garner, Garfinkel, Schwartz, & Thompson, 1980), and are now reaching dangerously thin levels. Fallon (1990) examined models in fashion over the past 100 years. In 1894 the ideal woman was 5'4" and 140 pounds. In 1947, the weight had dropped to 125 pounds. By 1975, the ideal woman had grown to 5'8", but her weight had decreased to 118 pounds (Fallon, 1990). Today, the average model is 5'11" and weighs 117 pounds (National Eating Disorders Association, 2006).

As the ideal shape has been getting smaller, the average American woman has been getting larger. Today's average woman is 5'3.8" and 162.9 pounds (NIH MedLine Plus, 2007). In fact, men and women have been growing increasingly heavier, with the prevalence of overweight adults increasing from 44.8% in 1960 to 66% in 2004 (National Center for Health Statistics, 2006). This prevalence has increased steadily among both genders, all ages, all races and ethnicities, and all educational levels (Mokdad, Ford, Bowman, Dietz, Vinicor, Bales, & Marks, 2003). Today, approximately 63.6 million American adults (31.4%) are obese, meaning that they have an abnormally high proportion of body fat, and over 5 million children are obese (National Center for Health Statistics, 2006). As the discrepancy between the average and the ideal continues to widen, it is only logical that body dissatisfaction is going to affect more and more people, especially because body size is one of the few personal attributes still seen as an acceptable target of prejudice (Thompson et al., 1999).

In addition to being thin, the ideal female figure in Western culture is tall with pale skin, blond hair, and traditional European American facial features (Lau, Lum, Chronister, & Forrest, 2006). This could explain body dissatisfaction in women of

different racial and ethnic origins. When these women compare themselves to European American standards of beauty, they often grow dissatisfied with their own ethnically distinct features.

It is important to study body image because body image dissatisfaction has been linked with depression, low self-esteem, and eating disorders (Lau, Lum, Chronister, & Forrest, 2006). It is causing women to turn to unhealthy dieting, exercise, and even plastic surgery in their efforts to lose weight (Wardle, Bindra, Fairclough, & Westcombe, 1993).

#### Male Preference for Female Thinness

One possible reason that women are so dissatisfied with their bodies and are striving to be thin is that men prefer thinner women. However, research shows that women overestimate the degree of thinness that men prefer. Rozin and Fallon (1988) gave male and female college students and their parents Stunkard's Figure Rating Scale and asked them to choose the opposite-sex figure that they most preferred and the same-sex figure that they believed the opposite sex would prefer. Results indicated that women of both generations chose a thinner female figure than what men actually selected as most attractive. On the other hand, men of both generations selected a male figure that was consistent with their current size and which was larger than the figure that women actually chose as most ideal. This phenomenon could explain why women experience a greater degree of body dissatisfaction than men. Women perceive themselves as being larger than the figure that men find ideal, while men believe that their bodies are consistent with the figure that women find ideal. Therefore, men do not perceive themselves as needing to lose weight to be attractive to the opposite sex, while women

do. In reality, women are putting undue pressure on themselves to achieve a level of thinness that they think men find ideal, but which is actually even thinner than what most men prefer (Rozin & Fallon, 1988).

Gleaves et al. (2000) found similar results using Spanish and American male and female college students. They found that the women in both Spain and in America predicted that men preferred a smaller female body figure than what the men actually preferred. However, they also found that American men chose a smaller female size as ideal than what the Spanish men chose as ideal. This could explain why American women exhibited a larger degree of body dissatisfaction and why a larger percentage of normal weight American women wanted to be thinner, relative to the Spanish women (Gleaves et al., 2000). Another interesting finding was that when men showed dissatisfaction with their bodies, which was far less frequently than their female counterparts, American men wanted to be larger than they currently were, while Spanish men wanted to be smaller than their current size.

Boyfriends/spouses are not the only males to influence women's body images. One study examined fathers' roles in the development of body dissatisfaction in their daughters. Fathers were found to comment on their daughters' weight significantly more than they commented on their sons' appearances (Schwartz, Phares, Tantleff-Dunn, & Thompson, 1999). Also, there was more disordered eating in daughters when they perceived negative messages from their fathers to their mothers about the mothers' weights (Gross & Nelson, 2000). One study investigated mother-father-daughter triads and found that daughters were most likely to have body dissatisfaction in families where the mothers and the fathers commented on their daughters' weights and where the fathers

were dissatisfied with their own weights. Fathers' and mothers' teasing about weight were predictive of their daughters' body dissatisfaction (Keel, Heatherton, Harnden, & Hornig, 1997). These studies demonstrate that fathers often encourage their daughters to be thin, which can foster body image disturbance or body dissatisfaction in the daughters. Furthermore, it teaches girls from a young age that men prefer them to be thin.

#### Racial Differences in Preference for Thinness

This thin ideal is not universal to all cultures. In some non-Western countries, a large body size is quite valued, as it is associated with wealth, prestige, and fertility (Wardle, Bindra, Fairclough, & Westcombe, 1993). Furthermore, Soh, Touyz, and Surgenor (2006) posited that the collectivist structure of some families and societies could offer some protection against disordered eating.

While no one is safe from body image disturbance or body dissatisfaction, research indicates that there are racial differences in the level of body dissatisfaction that women experience and in the level of female thinness that males and females choose as ideal. Senekal, Steyn, Mashego, and Nel (2001) stated that, compared to white women, non-westernized and even some groups of westernized black women select a larger ideal body size. They also report greater body satisfaction and are more accepting of being overweight. They feel less pressure, especially from men, to be thin. They do not equate being overweight with being unattractive, so they are less likely to strive to be thin. Despite being seven times more likely than white females to report that they are not overweight (Kemper, Sargent, Drane, Valois, & Hussey, 1994), black women are heavier, on average, than white women. Research shows that 79.6% of non-Hispanic black women are overweight or obese, compared to 57.6% of non-Hispanic white women

(National Center for Health Statistics, 2006). Black women also diet and exercise less than their white counterparts, even when socioeconomic status is controlled. For example, one study showed that black college students were less likely to diet than white college students. This may be because the black students chose larger body ideals than the white students, which led them to be more satisfied with their bodies. More specifically, the black students chose ideals that they considered to be of healthy weight, while the white students chose ideals that were smaller than what they considered to be healthy (Aruguete, Nickleberry, & Yates, 2004).

Edwards-Hewitt and Gray (1993) compared female students at a predominantly black-American college to students at a predominantly white-American college on measures of eating attitudes, drive for thinness, body dissatisfaction, dietary restraint, and attitudes regarding racial identity. They found that white students had a significantly higher prevalence of the behaviors and attitudes of disordered eating than black students. Interestingly, there was also a significant difference for body dissatisfaction by region. Participants from the South were significantly more satisfied with their bodies than participants from the North (Edwards-Hewitt & Gray, 1993).

Similarly, Powell and Kahn (1995) asked black and white college females to select which of nine silhouettes they considered to be the ideal size, which one most resembled their current size, and which one they thought would be most attractive to males. They were also questioned about weight concern, dieting, and pressure to be thin. Results showed that white women chose significantly thinner ideal body sizes than black women and felt more pressure to be thin. White women also reported more dieting and weight concerns (Powell & Kahn, 1995).

In South Africa, black women view obesity as a normal state of health (Senekal, Steyn, Mashego, & Nel, 2001). In a study of black South African students, many of the underweight students wanted to gain weight, while the overweight and obese students were likely to underestimate their weight. The black students showed less body shape dissatisfaction than the white South African students. However, there was evidence of dietary restraint and use of hazardous weight reduction methods, indicating that the black students were not immune to body dissatisfaction and disordered eating (Senekal, Steyn, Mashego, & Nel, 2001).

Similarly, a national study of African American and Caribbean Black adults and adolescents found that anorexia nervosa was extremely uncommon but that bulimia nervosa, with a lifetime prevalence of 1.49%, was not nearly as rare as previously believed (Taylor, Caldwell, Baser, Faison, & Jackson, 2007).

Alegria et al. (2007) found similar results with a national study of Latinas. Anorexia nervosa was quite uncommon in this population, whereas eating disorders that involved a binge-eating component (bulimia nervosa, binge eating disorder) were within the range of prevalence estimates for non-Hispanic white samples and were a significant health concern among Latinas.

Miller et al. (2000) compared African American, European American, and Latino/a American male and female college students on measures of body satisfaction and body esteem. They found that African Americans scored significantly higher than European Americans and Latino/a Americans on Appearance Evaluation and Body Areas Satisfaction, as well as being less concerned with their weight than the other two groups. Both African Americans and Latino/a Americans scored higher than European Americans

on the Body Esteem Scale Total Score. Additionally, African Americans scored higher than Latino/a Americans, and both groups scored higher than European Americans on self-reports of sexual attractiveness (Miller et al., 2000). This study offered evidence of large differences between females of different races, while the males of each race were much more similar in their responses. Similarly, Cash and Henry (1995) found that African Americans were more satisfied overall with their bodies than both Hispanics and Caucasians.

Research on Asian American women has been scarce and inconsistent. Some studies found that Asian American women are less concerned with their body image and have a smaller rate of eating disturbances than women of other races and ethnicities. Other studies have found that Asian American women actually have lower self-esteem than European American women. These studies assert that a lot of the dissatisfaction centers around racially defined features, such as skin color, nose, and eyes (Lau, Lum, Chronister, & Forrest, 2006).

Ogden and Elder (1998) evaluated white and Asian American mothers (aged 39-60 years) and their daughters (aged 18-26), and found that white participants reported higher levels of restrained eating than Asian participants. More specifically, the white daughters were the most dissatisfied with their bodies and the most concerned with the calorie content of their food. This could be because the media inundates Americans with images of thin, young, white females, making it easier for the white daughters to identify with the images than the older women and the Asian women (Ogden & Elder, 1998).

Wardle, Bindra, Fairclough, and Westcombe (1993) compared Asian and Caucasian female students attending college in London. They found that more of the

Caucasian than Asian students wanted to lose weight. Interestingly, the Asian students considered themselves significantly thinner than the Caucasian students, but calculations of body mass indices revealed that there was only a marginal difference in actual weights. More specifically, the Asian females rated their stomachs, thighs, and buttocks significantly smaller than Caucasian students did. Even when the women's body mass indices were taken into consideration, Caucasian women still felt fatter than Asian women of the same weight. However, both groups had a discrepancy between ratings of their current size and ratings of their ideal size, indicating some degree of body dissatisfaction in both groups. Also of interest, both groups chose similar figures as being "the shape men like most," which indicates that Asian women perceive men to prefer the same thin figure that Caucasian women believe men prefer (Wardle, Bindra, Fairclough, & Westcombe, 1993).

Akan and Grilo (1995) compared Caucasian, African American, and Asian American college women on measures of self-consciousness, social anxiety, self-esteem, eating attitudes and behaviors, teasing, body satisfaction, and acculturation. There were several interesting results. First, African Americans had higher body mass indices than their Caucasian and Asian American counterparts. Despite this, it was the Caucasian women who reported higher levels of disordered eating, dieting behaviors and attitudes, and body dissatisfaction than African Americans and Asian Americans, who were nearly equal on these measures. Additionally, the frequency of having been teased about weight and size was predictive of problematic eating behaviors and body dissatisfaction in Caucasians and African Americans, while Asian Americans reported very low frequencies of ever having been teased (Akan & Grilo, 1995).

Very few studies have investigated eating disorders or body satisfaction in Native Americans. Rosen et al. (1988) surveyed 85 Chippewa girls and women living on or near a reservation in Michigan. The results revealed that 74% were trying to lose weight and that 75% of those who were dieting had endorsed using one or more potentially dangerous techniques, including 24% who had engaged in purging behaviors. The investigators also found that the Native American girls and women with higher body mass indices were more likely to utilize dangerous weight-control methods (Rosen et al., 1988).

There are also racial differences in men's preferences for female thinness. Greenberg and LaPorte (1996) examined racial differences in the body type preferences of men for women. They gave black and white college males a modified version of Stunkard's Figure Rating Scale, altered to appear racially neutral and randomly ordered in terms of size. Participants were asked to rank each figure in order from most attractive to least attractive. They were also asked questions about whether they preferred their girlfriend to be thinner or heavier, how important their girlfriend's weight is to them, and how often they have asked their girlfriend to change her weight. Results indicate that white participants chose a significantly thinner figure than black participants as their most attractive choice. The white participants also reported wishing that their girlfriends were significantly thinner than the black participants reported. These results support the notion that white women may experience more pressure to lose weight and be thin in order to conform to men's preferences, while black women may be somewhat protected from body dissatisfaction and pressure to be thin by the African American culture's standards of beauty (Greenberg & LaPorte, 1996).

Another study found that black adolescent males desired their girlfriends to be larger than their current size, while white adolescent males wanted their girlfriends to be thinner than their current size (Thompson, Sargent, & Kemper, 1996). When examining specific dimensions of the female body, there was no difference between black and white males' ratings of the ideal size for a female chest or stomach. However, black adolescent males were 1.9 times more likely to prefer a larger hips and buttocks and 1.7 times more likely to prefer a larger thigh size than white adolescent males (Thompson, Sargent, & Kemper, 1996).

Powell and Kahn (1995) gave black and white men a figure rating scale, consisting of nine female silhouettes ranging from extremely underweight to extremely overweight. They asked the participants to rate each silhouette on a 5-point scale ranging from "never" to "definitely" on how likely they would be to ask out a woman of that size and on how likely they would be to be ridiculed by their friends if they dated a woman of that size. Results indicated that black men were much more willing to date women with a larger silhouette than white men, and they did not believe that they would be ridiculed by friends nearly as much as white men feared they would be if they dated a larger woman. Furthermore, white men endorsed the statement "I prefer the women I date to be thin" significantly more than black men (Powell & Kahn, 1995). These differences between black and white male preferences could act as a protective factor for black females, because black males do not desire the degree of thinness in women that white men prefer.

#### Influence of Acculturation on Preference for Thinness

One explanation for these racial differences in body dissatisfaction and disordered eating is the influence of acculturation, or the adoption of the dominant culture's values,

attitudes, and society standards upon being exposed to them. It includes cultural, physical, psychological, biological, political, and economic changes in one's identity and attitude (Soh, Touyz, & Surgenor, 2006). The inherent stress associated with the adaptation to a new culture is known as acculturative stress (Perez, Voelz, Pettit, & Joiner, Jr., 2002). Acculturation can also occur during the westernization and/or urbanization of formally non-Western cultures, usually through an increased exposure to Western advertising, media, entertainment, and fashions. One such societal standard that a minority member might adopt is a culture's definition of beauty, which for Western women means a thin, prepubescent-looking body. This acculturation explanation for racial differences in body dissatisfaction grew in popularity when immigrants to Western cultures began to show an increased risk of eating disorders (Aruguete, Nickleberry, & Yates, 2004). However, to date, the research on the effects of acculturation has been mixed.

Lau, Lum, Chronister, and Forrest (2006) believe that this is because there are actually two types of acculturation. Behavioral acculturation, or the adoption of the host culture's behaviors, tends to happen quickly, because the behaviors are more necessary for surviving economically. Values acculturation, or the adoption of the host culture's values, occurs more slowly, if at all. Some of the values emphasized by Western culture include independence, individuality, separateness, egocentricity, and self-sufficiency (Lau, Lum, Chronister, & Forrest, 2006). These values clash with many other cultures, such as the Asian culture, which values collectivism, familial piety, conformity to norms, and humility. Much research focuses on behavioral acculturation and neglects the role of values acculturation.

Lake, Staiger, and Glowinski (2000) have an alternative explanation as to why the research on acculturation is so inconsistent. They argue that there are two opposing viewpoints regarding acculturation. The first states that the risk for body dissatisfaction and the development of eating disorders increases in non-Western women when they move to a Western society and become acculturated to the norms and values of this new culture. The alternative explanation is that non-Western women who move to a Western society but remain traditional, in the sense that they continue to have a stronger identification with their non-Western country of origin, are at a higher risk for body dissatisfaction and eating disorders. This is because these women experience a culture clash between the two sets of cultural values, which leads to distress and disordered patterns of eating (Lake, Staiger, & Glowinski, 2000).

Some research indicates that acculturation is linked to a higher likelihood of body dissatisfaction and disordered eating. For example, Chamorro and Flores-Ortiz (2000) looked at acculturation and disordered eating among five generations of Mexican American women. They found that second-generation women (i.e., women born in the United States to parents born in a foreign country) were the most acculturated and had the most disordered patterns of eating. Overall, as levels of acculturation increased, so, too, did levels of disordered eating.

Lopez, Blix, and Blix (1995) found that Latina women who had immigrated to the United States prior to the age of 17 selected smaller body silhouettes as their ideal body size than Latina women who immigrated later in life. The authors concluded that early socialization to the dominant cultural values impacts the development of body image (Lopez, Blix, & Blix, 1995). Similarly, Alegria et al. (2007) found that foreign nativity

was associated with a decreased risk of binge eating and that Latinas who had spent more than 70% of their lives in the United States reported the highest lifetime rate of bulimia nervosa. The authors posited that Latinas will continue to grow more at risk for developing eating disorders as they adopt American conceptions of beauty and preoccupation with slimness (Alegria et al., 2007).

Perez, Voelz, Pettit, and Joiner, Jr. (2002) compared white, black, and Hispanic college women at a United States university. Each student was given the Societal, Attitudinal, Familial and Environmental Acculturative Stress Scale (SAFE), as well as the Eating Disorder Inventory and the Body Image Scale, a shortened version of Stunkard's Figure Rating Scale. Consistent with other studies, the white students reported the highest levels of body dissatisfaction, followed by the Hispanic students, and then the black students. Results also showed that the Hispanic students were experiencing the most acculturative stress, followed by the black students. Interestingly, they found that minority women who were high in acculturative stress showed a strong correlation between their amount of body dissatisfaction and the number of bulimic symptoms they reported. On the other hand, minority women who were low in acculturative stress did not demonstrate a significant correlation between body dissatisfaction and bulimic symptoms. Therefore, body dissatisfaction in minority women was not enough to lead them to disordered eating. It was the interaction of acculturative stress with their body dissatisfaction that resulted in symptoms of bulimia (Perez, Voelz, Pettit, & Joiner, Jr., 2002).

A study of young men and women in New Zealand, a Westernized country, revealed that the women, but not the men, of New Zealand are experiencing body

dissatisfaction, evidenced by their selection of smaller ideal figures on the Figure Rating Scale than the figures they currently thought they looked like. Total media consumption did not differ between New Zealander men and women and their American counterparts. However, while both the men and women of New Zealand indicated an awareness of the importance their Westernized society places on attractiveness and thinness, only the women internalized these norms (Miller & Halberstadt, 2005).

In addition to being linked to body dissatisfaction and disordered eating, acculturation is also associated with a worsening of nutritional eating and an increase in body fat. In fact, after ten years of residence, Hispanic immigrants to the United States are significantly more obese than their United States-born counterparts (Keski-Rahkonen, 2005).

On the other hand, ethnic Fijian cultural traditions have shown a strong preference for robust eating patterns and body size, which is viewed as reflecting good physical health and a thriving society (Becker, Fay, Gilman, & Striegel-Moore, 2007). Feasting traditions are a strong part of the Fijian culture, and participation in the feasts is viewed as essential to maintaining social relationships. Traditionally, there has been a very low incidence of eating disorders and few reported attempts at weight loss. However, Fiji has recently undergone a rapid social and economic change from an agriculturally based economy to a cash economy. Becker, Fay, Gilman, and Striegel-Moore (2007) studied two cohorts of Fijian females—adolescents, aged 16-20 years, and community members, aged 19-63 years. Participants were assessed on measures of body shape concern, acculturation to Western values, and personal characteristics. Results indicated that higher levels of acculturation in the two groups were significantly associated with greater

body shape concern (Becker, Fay, Gilman, & Striegel-Moore, 2007). These results suggest that as Fijian women become more acculturated to Western attitudes, they will be at an increased risk of developing body dissatisfaction and disordered eating.

In a study of South African black female students, differences emerged between the rural and the urban dwellers. Those students who had urban origins were more likely to be restrained eaters. They also reported more past weight loss attempts, more future goals of weight loss, and more fear of weight gain. Therefore, even though there was no difference in body mass indices between the two groups, students from urban locations were more concerned with weight loss and thinness than their rural counterparts (Senekal, Steyn, Mashego, & Nel, 2001). This indicates that acculturation of black females in urban areas is taking place more rapidly than acculturation of black females in more rural areas.

Taylor et al. (2007) posited that the rising rates of bulimia nervosa in African American and Caribbean Black women are due to the acculturative stress and pressure they feel to assimilate into the dominant American culture. They hypothesize that the positive body image that protects African American and Caribbean Black women from body dissatisfaction and eating disorders will erode as they adopt the thinner ideals of American culture.

Finally, some research indicates that Native Americans become more at risk for eating disorders as they acculturate into the dominant American culture. For example, Yates (1989) found that anorexia nervosa among Navajo girls in Arizona occurred at the highest frequency in girls whose families had moved off of the reservation.

There is also a plethora of research that fails to show a significant relationship between acculturation and body dissatisfaction or disordered eating. For example, Aruguete, Nickleberry, and Yates (2004) found that acculturation was not correlated with eating disturbance in black college students. Also, in the study by Akan and Grilo, discussed earlier, they found no evidence of acculturation having an influence on eating and dieting behaviors and attitudes or body image (Akan & Grilo, 1995).

Abdollahi and Mann (2001) compared Iranian women living in Iran to Iranian women living in Los Angeles, California. They chose Iran for this comparison because access to Western media has been illegal in the country since the Islamic revolution in 1978. Furthermore, women living in Iran are mandated by law to wear a full-length veil and body covering while in public. Their hypothesis was that women in Iran would have less body image concern and body dissatisfaction than Iranian women in America because they do not expose as much of their bodies or wear tight clothing and because they have not been exposed to Western standards of thinness. Surprisingly, the results showed that both groups of women showed fairly equal degrees of body image concern and dissatisfaction. The few results that were significantly different between the two groups indicated that the women in Iran were actually more dissatisfied with their body size and wanted to lose more weight than the Iranian women living in Los Angeles. This suggests that acculturation to Western culture may not be as strong of a risk factor for body dissatisfaction as previously thought. However, one criticism of this study is that acculturation was measured primarily by asking participants about their language usage and length of exposure to Western culture. Other important aspects of acculturation, such as how much media consumption the women engage in, how many American friends

they have, or how strongly they adhere to their original culture, were ignored, and this could have affected the results (Abdollahi & Mann, 2001).

Lau, Lum, Chronister, and Forrest (2006) examined values acculturation in Asian American college women. They administered the Asian Values Scale, in addition to measures of overall body image and body satisfaction, media influence, and time spent watching television. They found a significant correlation between values acculturation and body image. Surprisingly, women who had adopted the values of Western culture had significantly less body dissatisfaction than women who maintained their Asian values.

Lake, Staiger, and Glowinski (2000) evaluated Australian-born and Hong Kong-born college students living in Australia. They divided the Hong Kong-born students into two subgroups—those who were highly acculturated to Western society and those who maintained a strong Chinese ethnic identity—based on their scores on the Ethnic Identity Scale. They then obtained measures of eating attitudes and body satisfaction. Results indicated that the acculturated Hong Kong-born participants had more positive attitudes towards eating and towards their bodies than the traditional Hong Kong-born participants, whose scores closely resembled the Australian-born participants. This offers some evidence for the hypothesis that traditional females, who identify more strongly with their country of origin, are experiencing some sort of culture clash, or struggle with blending their traditional values with the values of their new culture (Lake, Staiger, & Glowinski, 2000).

Reddy and Crowther (2007) agree that culture clash, rather than acculturation, could be more salient as a psychosocial correlate of negative eating attitudes and body

image dissatisfaction. They surveyed South Asian women between ages 18 and 30 living in the United States. Measures included the Eating Attitudes Test, Body Esteem Scale, Ideal-Body Internalization Scale—Revised, the Physical Appearance Related Teasing Scale, Measure of Ethnic Teasing, Suinn-Lew Asian Self-Identity Acculturation Scale, and Cultural Values Conflict Scale. They found that acculturation was not correlated with body dissatisfaction or maladaptive eating attitudes. However, cultural conflict, which they define as the negative affect and cognitive dissonance that can result from an attempt to assimilate the values and expectations of the majority culture and one's own culture, was significantly correlated with the development of body dissatisfaction and negative eating attitudes. Reddy and Crowther (2007) posit that conflicting pressures from both cultures may lead some women to reject their ethnic identity, which may place them at a greater risk for a variety of psychological problems.

#### Influence of Male's BMI and Mother's BMI on Preference for Thinness

Sexual imprinting is the early fixation to a set of family characteristics that will later shape mate preferences in adulthood (Berezkei, Gyuris, & Weisfeld, 2004). Berezkei, Gyuris, and Weisfeld (2004) found that there was a significant resemblance between women's husbands and their fathers, and they posited that it was because individuals create a mental model of their opposite-sex parent that they later reference when choosing a partner. Although this study focused on facial features, it logically follows that the body size of the opposite-sex parent might also be imprinted and utilized for later mate selection. Body mass index, or BMI, is a number calculated by dividing a person's weight (kg) by his/her height squared ( $m^2$ ). To date, no studies have examined the role of a male's BMI in his selection of his ideal female body size, although

Berezkei, Gyuris, and Weisfeld (2004) also posit that partners often resemble each other in many traits.

### Influence of Family Income on Preference for Thinness

The few studies that have been done on body image that include socioeconomic status (SES) as a factor have concluded that high SES is positively correlated with dieting behaviors, despite the inverse relationship between SES and obesity in developed societies (Sobal & Stunkard, 1989). For example, Story, French, Resnick, and Blum (1995) found that females of lower SES reported less frequent dieting and were less likely to view themselves as overweight than females of higher SES. On the other hand, females of higher SES were less likely to engage in unhealthy weight loss behaviors and were more likely to be proud of their bodies than females of lower SES. Story, French, Resnick, and Blum (1995) attributed this to the greater access that higher SES people have to health information, healthy foods, and weight loss programs.

However, SES does not appear to be a significant factor in the development of eating disorders. One research study showed that SES was linked to body size, unhealthy dieting and weight control, and body dissatisfaction, but it was not a significant contributor to the development of anorexia or bulimia nervosa (Rogers, Resnick, Mitchell, & Blum, 1997). To date, research has not investigated the role of SES or family income in men's preferences for female thinness.

### Assessment of Preference for Thinness

#### *Scales and Questionnaires*

In the past three decades, a multitude of tools for assessing body image and body satisfaction have been developed. Frequently utilized methods of measuring overall body

satisfaction, as well as satisfaction with one or more specific regions of the body, include questionnaires, scales, and interviews. One of the earliest of these tools was the Body Dissatisfaction Scale of the Eating Disorder Inventory, which was developed in 1983 by Garner. This scale contains nine statements about specific body parts or regions being too large, to which people indicate the degree of their agreement (Garner, Olmsted, & Polivy, 1983).

The development of the Body Dissatisfaction Scale was followed closely by Petersen's 1984 development of the Self-Image Questionnaire for Young Adolescents—Body Image Subscale. This subscale contains eleven items that measure positive attitudes towards one's body. It is designed to be used with ten- to fifteen-year olds and is still one of the few scales that is appropriate for use with adolescents (Petersen, Schulenberg, Abramowitz, Offer, & Jarcho, 1984).

Mendelson and White developed the Body-Esteem Scale in 1985. It consisted of different statements about one's body, for which people indicated their level of agreement. However, the scale was revised in 1998 and became a 23-item scale with three subscales: Appearance, Attribution, and Weight. It was also modified to be used with a younger population, from ages 12 to 25 years (Mendelson, White, & Mendelson, 1998).

The creation of body image and body satisfaction assessment tools continued to flourish. In 1987, a 34-item questionnaire regarding concern about one's body shape, entitled the Body Shape Questionnaire, was developed (Cooper, Taylor, Cooper, & Fairburn, 1987). Then, in 1990, Slade developed the Body Satisfaction Scale for people to indicate their degree of satisfaction with sixteen parts of the body, falling on three

subscales: the general, the head, and the body (Slade et al., 1990). The Physical Appearance State and Trait Anxiety Scale emerged in the same year. Reed and colleagues (1990) developed this scale to measure one's anxiety regarding each of 16 different body sites. Half of the body sites are weight relevant, while half are unrelated to weight. Both trait and state versions of the scale are available. The trait scale assesses one's general disposition towards body image disturbance, whereas the state scale measures day-to-day changes in body image anxiety (Reed, Thompson, Brannick, & Sacco, 1990).

Alfonso and Allison created the Extended Satisfaction With Life Scale—Physical Appearance Scale in 1993. Scale users are asked to rate their general satisfaction with their appearance on a seven-point scale (Alfonso & Allison, 1993). Two years later, Cash developed the Multidimensional Body Self-Relations Questionnaire—Appearance Evaluation Subscale. This is a seven-item scale that assesses the evaluation and satisfaction with one's overall appearance (Cash & Szymanski, 1995).

Cash and Labarge (1996) developed and validated the Appearance Schemas Inventory. This 14-item scale assesses core beliefs in women regarding the importance, meaning, and effects of one's appearance.

In 2003, Thompson, Dinnel, and Dill developed and validated the Body Image Guilt and Shame Scale (BIGSS). The BIGSS assess body image guilt and body image shame in males and females.

Chen, Jackson, and Huang (2006) developed and validated a 48-item Negative Physical Self Scale, which is a multidimensional measure of body image concerns to be used with Chinese adolescents and adults. The five dimensions of this scale are general appearance, facial appearance, shortness, fatness, and thinness, which are inclusive of

factors with which Chinese people often struggle and which is more appropriate to use with Chinese people than measures that focus only on body weight (Chen, Jackson, & Huang, 2006).

Although scales and questionnaires are a quick and inexpensive means of gathering a large amount of data, there are some limitations to these methods. First, while they can give a general sense of one's satisfaction/dissatisfaction with one's body, they cannot pinpoint the specific degree of satisfaction/dissatisfaction. In addition, they do not indicate what body size the participants think that they are, nor do they specify how distorted their views actually are. Furthermore, the questions are abstract and require a good verbal fluency in order to comprehend them. Finally, some of the questionnaires and scales are lengthy and challenging to score or interpret (Truby & Paxton, 2002).

#### *Figure Rating Scales*

Perhaps the simplest way to measure overall weight satisfaction is to compare a person's ideal weight with his/her current weight, using the discrepancy between the two as an indication of the degree of dissatisfaction (Thompson et al., 1999). Similarly, overall body dissatisfaction can be assessed using schematic figures or silhouettes of varying sizes, ranging from very thin to very overweight. The gap between the figure a person selects as ideal and the figure that he/she believes matches his/her current size is examined. Not only is the size of the discrepancy indicative of body dissatisfaction, it is also related to eating disturbance. Larger discrepancies suggest a greater potential that the person has or will develop an eating disturbance. In particular, the difference between a person's affective response (what body shape he/she *feels* like) and his/her ideal body shape is more strongly correlated with eating disturbances than the difference between a

person's cognitive response (what body shape he/she *thinks* that he/she looks like) and his/her ideal body shape. This discrepancy is significantly related to eating disturbance for both men and women (Thompson et al., 1999).

Albert Stunkard developed one of the first figure rating scales in 1983 (Stunkard, Sorenson, & Schulsinger, 1983). It consists of nine hand-drawn female figures that vary in size from very underweight to very overweight. People are asked to select the figure they think they look like, the figure they feel like most of the time, and the figure they ideally would like to resemble. This scale is very useful for determining body dissatisfaction because it makes it easy to calculate the discrepancy between how a person thinks or feels she looks and how she ideally would like to look.

Huon and Brown created the Body Mapping Questionnaire and Color-the-Body-Task in 1989. People are asked to rate their feelings about 21 different body regions on a scale that ranges from strongly dislike to strongly like. The body sites that they like about themselves, they are asked to color red, whereas the body sites that they dislike are to be colored black (Huon & Brown, 1989).

A tool to measure body dissatisfaction in children was developed in 1991, when Collins created a figure rating scale consisting of seven boy and seven girl figures of various sizes. This scale was an important development, because body dissatisfaction has been identified in increasingly younger age groups (Collins, 1991). In the same year, Wooley and Roll created the Color-A-Person Body Dissatisfaction Test, which requires participants to use five colors to represent their level of satisfaction with different body sites on a schematic figure (Wooley & Roll, 1991).

The following year, Thompson and Tantleff developed the Breast/Chest Rating Scale. It is comprised of five male and five female figures, with upper torsos that range from small to large. This scale can be used to identify dissatisfaction with the chest region in men and women (Thompson & Tantleff, 1992).

In 1995, Thompson and Gray developed the Contour Drawing Rating Scale. As with Stunkard's Figure Rating Scale, the Contour Drawing Rating Scale consists of nine male and nine female schematic figures of varying weights. Their goal was to create a scale with consistent size gradations between figures, a commonly criticized flaw in Stunkard's Figure Rating Scale. For instance, the proportional change from figure 40 to figure 30 in Stunkard's scale is 0.018, while the change from figure 30 to figure 20 is 0.03. The Contour Drawing Rating Scale has more consistent gradations between sizes (Thompson & Gray, 1995).

Also in 1995, Lenart, Goldberg, Bailey, and Dallal created the Athletic Image Scale, which includes 30 female physiques with and without muscular definition. This scale is a useful addition to the literature, because it assesses desire for muscularity instead of thinness.

Similarly, Grieve, Newton, Kelley, Miller, Jr., and Kerr (2005) modified Thompson and Gray's (1995) Contour Drawing Rating Scale to create the Body Shape Assessment. The Body Shape Assessment consists of nine drawings of male body physiques, ranging from very thin to very muscular. This scale was created when it was realized that many men do not wish to be thinner, but rather more muscular.

As useful as these figure rating scales are, there are some problems commonly associated with them. One problem with this method of assessment, as mentioned

previously, is that they are not all graded in even increments between figures. Another downfall is that the sizes and dimensions of the figures may not match the person rating them, leaving the person believing that none of the figures are truly representative of him/her. A third nuance is that the hair and facial features on the figures often imply a Caucasian race, which makes it difficult for people of other ethnicities to relate to the figures (Thompson et al, 1999). Finally, figure rating scales are not realistic because they are outline figures drawn by an artist in an attempt to depict a real human body.

Truby and Paxton (2002) attempted to overcome some of these shortcomings when they developed the Children's Body Image Scale (CBIS). In comparison to other figure rating scales, the CBIS has two innovative, unique qualities. First, the scale was developed using photographs of real children, in order to increase the life-like qualities of the images and make them easier to identify with. Second, Truby and Paxton (2002) used body mass index (BMI) to choose the photographs that would be in the scale. The CBIS used photographs of girls whose BMIs were representative of the normal range of percentile variations of BMIs in Australian children between 7 and 12 years of age. The seven conventional 1979 National Center for Health Statistics percentiles (3<sup>rd</sup>, 10<sup>th</sup>, 25<sup>th</sup>, 50<sup>th</sup>, 75<sup>th</sup>, 90<sup>th</sup>, and 97<sup>th</sup>) for 10 year olds were used, in order to portray the spectrum of body sizes expected in a child population. Psychometric checks of the CBIS found that it is a reliable indicator of body size in girls and boys (although a slightly less strong correlation existed for boys) and that it is a valid measure of body size dissatisfaction in both girls and boys (Truby & Paxton, 2002). Although the CBIS is representative of the full range of children's body sizes, one problem with the scale is that, as mentioned

previously with regards to Stunkard's Figure Rating Scale, incremental increases between each figure are not equal to one another.

### *Computerized Rating Scales*

Another variation of a figure rating scale is in the form of a computer program. Participants are shown a computer image of a person and directed to alter the shape of the image until it matches his/her personal perception or his/her preference for thinness (Dickson-Parnell, Jones, Braddy, & Parnell, 1987). Some of the programs even use digital images of the participant (Shibata, 2002; Sands, Maschette, & Armatas, 2004), which solve the problem of having to appear ethnically neutral.

Schlundt and Bell (1993) developed the Body Image Testing System (BITS). BITS allows subjects to adjust the size of nine different body parts, including the face, neck, shoulders, arms, chest, breasts, stomach, hips, and thighs. Subjects are also given the opportunity to provide satisfaction ratings for each of these body areas.

Cullari and colleagues (2002) developed a program that uses a digital image of the participant and alters it into 10 additional images, half of which are smaller and half of which are larger than the participant's original image. The participant then can view each image in random order and select his/her actual, ideal, and most attractive images. However, the researchers admitted that it took over 30 minutes to create the images and have the participants make their selections (Cullari et al., 2002).

Pope et al. (2000) created the somatomorphic matrix, which is a computerized test that measures body image perception in general and clinical populations. They developed both male and female versions of the test. Each test contains a computerized library of 100 images of that sex, created by a graphic artist using photographs of real men who had

been weighed and measured. These images were then placed into a 10 x 10 matrix, representing 10 degrees of fatness and 10 degrees of muscularity that span a wide range of body shapes. The subject uses a computer to enter his/her sex and demographic information. He/she is then presented with a sample body image from the middle of the matrix, which he/she can increase or decrease in terms of fatness and muscularity. The subject is asked to choose the image that represents himself/herself, his/her ideal body, the average body of someone his/her age, and the image most desired by the opposite sex (Pope et al., 2000). This instrument is useful because images vary along axes of both fat and muscularity, rather than just one axis of increasing size.

Despite the appeal of using real images of the subjects, it is unlikely that these computer programs will ever be widely used, because they include extensive directions, are costly, require an average of 30 minutes to complete per person assessed, and are difficult to mass administer (Dickson-Parnell, Jones, Braddy, & Parnell, 1987).

#### *Klawitter's Figure Rating Scale*

In 2003, I developed Klawitter's Figure Rating Scale, modeled after the Children's Body Image Scale, which improved on some of the commonly cited flaws of figure rating scales. In developing the scale, I calculated women's body mass indices and took digital photographs of them. I preselected the following nine BMIs to be represented in the scale: 17, 19, 21, 23, 25, 27, 29, 31, and 33. According to the National Institutes of Health, National Heart, Lung, and Blood Institute's (1998) guidelines, a BMI of less than 18.5 is considered underweight, a BMI of 18.5 to 24.9 is a normal weight, a BMI of 25 to 29.9 is overweight, and a BMI of 30 or greater is obese. Therefore, the selected BMIs, which range from 17 to 33, represent a wide range of body sizes. In addition, the

increments between each photograph are even gradations, because each photograph represents an increase of 2 BMI points over the previous photograph. Furthermore, the images are more realistic and representative, because they are photographs of real women rather than hand-drawn silhouettes. Finally, the heads on the images were removed and replaced with circles, and the bodies were shaded to make the figures appear more ethnically neutral. Test-retest reliability and convergent validity were both strong (Klawitter, 2003).

### Present Study

Much research has been done on racial differences in body dissatisfaction and disordered eating in women, most of which indicates that African American women experience more positive eating attitudes and less concern about their body size than Caucasian women. One reason that African American women may turn less often to disordered eating and may feel more satisfied with their bodies than Caucasian women, despite being larger than white women on average, is that they feel less pressure from African American men to be thin. In other words, African American men's preference for dating larger women and being less concerned about their girlfriends' weights than Caucasian men may serve as a protective factor for African American women. Past research supports this notion that African American men choose larger silhouettes on figure rating scales as being most attractive and report less desire for their girlfriends to be thin than Caucasian men.

Acculturation may also affect African American women's desire to be thin. Extreme thinness is what is currently valued in the American culture as being ideal and attractive. However, traditional African culture has placed more value on a larger body

size, equating it with wealth, beauty, and fertility. The degree to which African American women subscribe to their African heritage, versus being acculturated into Western society, could impact their degree of body dissatisfaction and disordered eating, although research on acculturation has had very mixed results. Similarly, the degree to which African American men are acculturated into the American culture could affect their preferences for female thinness. One would expect that a man who retains traditional African values and beliefs would have less desire for a thin girlfriend, whereas a man who is more acculturated into Western society or who is feeling a great deal of acculturative stress would internalize the thin ideal and desire a thinner woman.

To date, research involving men's preference for female body size has had several limitations. First, the figure rating scales used are often not racially/ethnically neutral. For example, Stunkard's Figure Rating Scale, the most commonly utilized scale, uses figures that have been criticized as having Caucasian hair and facial features. Therefore, this research is really assessing men's preference for *white* female body size. A second limitation is that these studies have only looked at the racial differences of the male participants (i.e., white preference versus black preference) and have failed to look at the racial differences of the female figures. In other words, past research has failed to differentiate between white female figures and black female figures. This is important because it would reveal whether black men prefer larger *black* women but still prefer *white* women to be thinner, or whether they find the same size attractive in both races of women. Similarly, it would reveal whether white men have equal preferences for thinness in both black and white women, or whether they only hold the cultural value of thinness true for white women.

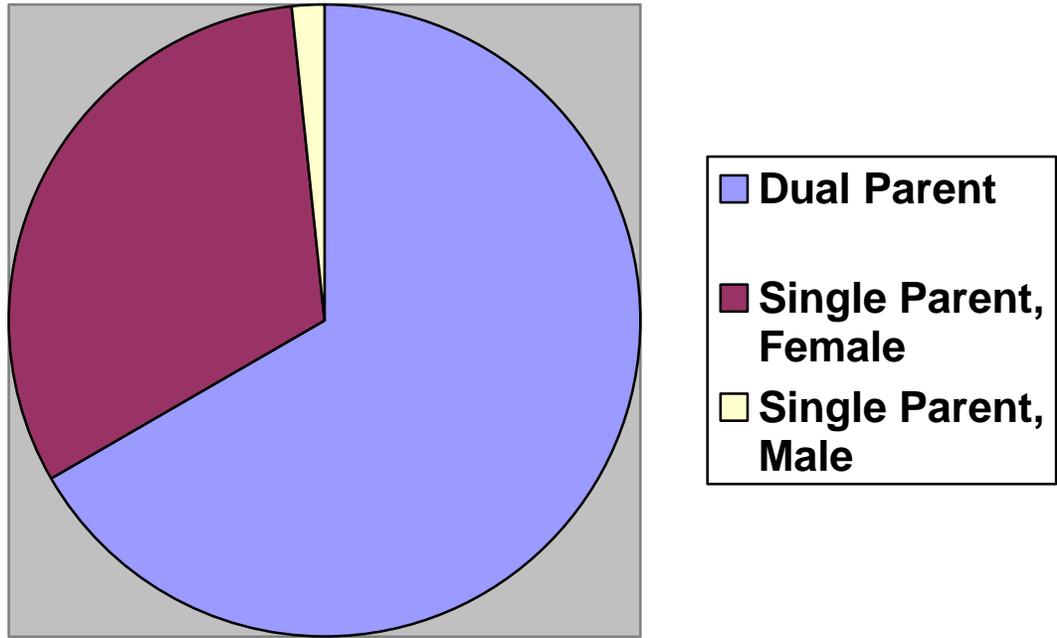
The present study aims to investigate the role of the racial identity of the female figures in African American and Caucasian men's preferences for female thinness. It will also examine what role, if any, acculturation plays in the men's selection of attractive female body sizes. My first hypothesis is that Caucasian men will choose female figures that are thinner than the figures that African American men will choose. My second hypothesis is that African American men will choose a black female figure and a white female figure that are equal in size. My third hypothesis is that Caucasian men also will choose a black female figure and a white female figure that are equal in size. My next hypothesis is that African American men will have dated a larger range of women's body sizes than what Caucasian men have dated. I also hypothesize that men (both black and white) who are more acculturated into African American culture will choose female figures that are larger than those chosen by men who are less acculturated into African American culture. My sixth hypothesis is that the men's body mass indices will be unrelated to their preferences for female thinness. Next, I hypothesize that the size of the men's mothers will be significantly related to the men's preferences for female thinness. My final hypothesis is that family income will be inversely related to men's preferences for female thinness.

## CHAPTER II

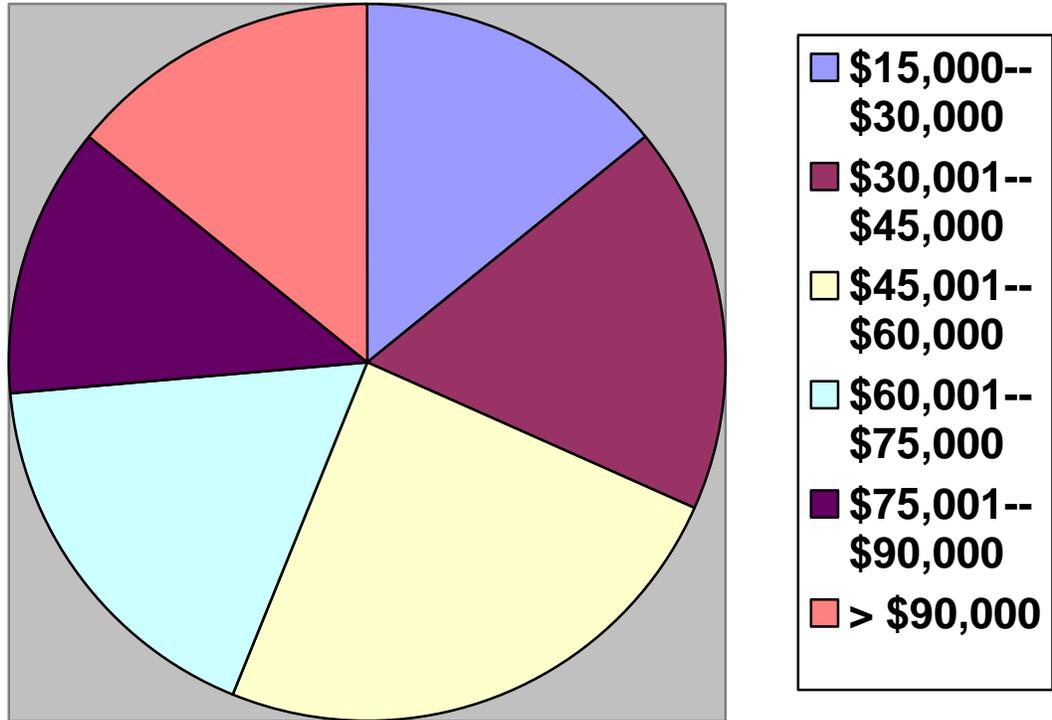
### METHODS

#### Participants

Participants were recruited from Introduction to Psychology courses at Indiana University of Pennsylvania. They received credit in their psychology course for partaking in the study, but they were permitted to withdraw from the study at any time without penalty. Sixty-one males completed the study. However, in order to reduce confounding variables, data from participants over the age of 24, as well as data from participants who did not identify themselves as either African American/Black or Caucasian/White, was eliminated. The participants ranged in age from 18 to 24 years (mean = 19.26, standard deviation = 1.17). Their body mass indices, calculated by using self-reports of their height and weight, ranged from 19.40 to 42.30 (mean = 26.28, standard deviation = 5.08). The majority of participants (38 respondents, 66.7%) had been raised in a dual parent household during their first ten years of life. Eighteen participants (31.6%) reported being raised in a single parent household headed by their mother or a female caregiver, while the remaining one respondent (1.8%) reported being raised in a single parent household headed by his father or a male caregiver (see Figure 1). When asked to estimate family income during the participant's first ten years, the mode response was \$45,001 to \$60,000 (14 respondents, 24.6%). Eight respondents (14%) fell in the \$15,000 to \$30,000 range; ten respondents (17.5%) fell in the \$30,001 to \$45,000 range; ten (17.5%) fell in the \$60,001 to \$75,000 range; seven (12.3%) fell in the \$75,001 to \$90,000 range; and eight participants (14%) estimated that their families made more than \$90,000 (see Figure 2).



*Figure 1.* Participants' household structure during their first 10 years of life.



*Figure 2.* Participants' household income during their first 10 years of life.

## Measures

### *Klawitter's Figure Rating Scale (KFRS)*

Klawitter's Figure Rating Scale (KFRS) is a rating scale designed to assess body dissatisfaction in women and preference for female thinness in men (see Appendix A). It consists of nine digital photographs of women, ranging in size from underweight (BMI = 17) to obese (BMI = 33). KFRS improves on previous rating scales by using photographs of real women, as opposed to hand-drawn silhouettes, by creating equal gradations between each figure, by identifying the exact body mass index that corresponds to each figure, and by utilizing an ethnically neutral skin shade (Klawitter, 2003).

KFRS was shown to be a psychometrically sound instrument. Test-retest correlation coefficients for the questions on KFRS were all significant at the 0.01 alpha level, indicating strong reliability. Furthermore, concurrent validity tests, using several well-validated measures, also resulted in correlation coefficients that all were significant at the 0.01 alpha level (Klawitter, 2003).

For the purposes of this study, KFRS was altered to create two separate scales. The figures on the first scale were lightened to appear Caucasian, and the blank circles on their heads were replaced with a Caucasian female face (see Appendix B). The figures on the second scale were darkened to appear African American, and the blank circles were replaced with an African American female face (see Appendix C). Body sizes were not changed.

### *African American Acculturation Scale—Revised (AAAS-R)*

The African American Acculturation Scale – Revised (AAAS-R) is a 47-item inventory measuring eight dimensions of African American culture (Klonoff & Landrine,

2000). It is a revision of the original 74-item inventory, which contained questions that some participants found objectionable. High scores on the scale indicate a more traditional cultural orientation, or more immersion in African American culture. Alternatively, low scores on the scale reflect acculturation, or less immersion in African American culture. The AAAS-R consists of eight subscales, each of which is an empirically derived factor. The subscales, and the percent of variance each accounts for (Klonoff & Landrine, 2000), are as follows: Religious Beliefs and Practices (24%), Preference for Things African American (9%), Interracial Attitudes (6.5%), Family Practices (5.6%), Health Beliefs and Practices (4%), Cultural Superstitions (3.5%), Segregation (3.3%), and Family Values (2.8%). For the purposes of this study, only the Preference for Things African American subscale and the Segregation subscale were utilized and were renamed the Beliefs and Attitudes Survey (see Appendix D). The Preference for Things African American subscale assesses a preference for Black music, magazines, and people, whereas the Segregation subscale assesses the extent to which one grew up and currently resides in a mostly Black neighborhood (Klonoff & Landrine, 2000).

The AAAS-R has demonstrated excellent psychometric properties. The internal consistency reliability of the eight subscales ranges from 0.67 to 0.89, while the internal consistency reliability of the entire scale was 0.93. Specifically, the Preference for Things African American subscale has an internal consistency reliability of 0.89, while the Segregation subscale has an internal consistency reliability of 0.76. The split-half reliability of the scale was 0.79. Furthermore, the AAAS-R correlated almost perfectly ( $r = 0.97$ ) with the original African American Acculturation Scale. Additionally, the

concurrent validity, as measured by several related instruments, was high. Finally, additional tests revealed that scores on the African American Acculturation Scale – Revised were not related to the participants’ age, education, or income level (Klonoff & Landrine, 2000).

### *Demographics*

Lastly, participants were asked to complete a short demographics questionnaire (see Appendix E). They were asked to provide their age, race/ethnicity, height, and weight. They were then asked to estimate the percentage of students at their high school who were Black, White, Asian, Hispanic, and Native American. Next, participants were asked to indicate whether they grew up in a single or dual parent family, the job(s) that their parents or caregivers held during the participants’ first ten years of life, and their families’ average yearly income. Finally, they were asked to list the female in popular culture that they find the most attractive (see Appendix F).

### *Procedure*

Participants were telephoned and/or emailed and scheduled for an individual appointment time. Upon arriving at the testing room, participants were given a consent form to read and sign. They were told that the experimenter was interested in comparing two new scales to determine which one had better reliability and validity. The participants were then given either the African American or the Caucasian version of Klawitter’s Figure Rating Scale (counterbalanced to avoid ordering effects). Using the scale, they were asked to select the figure that they found most attractive in the opposite sex. They were also asked to select the figure that corresponds to the thinnest female they have dated and the figure that corresponds to the heaviest female they have dated (with

an alternate option of selecting “I have not dated any women.”). They then were asked to select the figure that most represents their mothers. Next, they were asked to complete a short demographics questionnaire. Following completion of the demographics questionnaire, they were given the other version of Klawitter’s Figure Rating Scale and asked to answer the same questions as they had answered on the first version. Finally, participants were given the aforementioned subscales of the African American Acculturation Scale – Revised, which were given the heading of “Beliefs and Attitudes Survey” to avoid influencing the participants’ responses. After completing all of the scales and questionnaires, participants were debriefed about the true nature of the study and were given the opportunity to ask questions and provide feedback.

## CHAPTER III

### RESULTS

Data from twenty-seven African American males and thirty Caucasian males was included in the final analyses. The data was analyzed using SPSS (see Appendix G for respondents' means and standard deviations for each question on Klawitter's Figure Rating Scale).

A 2 x 2 x 2 mixed-design ANOVA was calculated to examine the effects of the race of the male participant (African American, Caucasian), the race of the female figure (black, white), and the order of scale presentation (KFRS African American version first, KFRS Caucasian version first) on the attractiveness ratings of the female figures. The Race of Respondent x Race of Female Figure interaction was not significant ( $F(1, 53) = 1.539, p = 0.220$ ), nor was the main effect for Race of Female Figure ( $F(1, 53) = 0.659, p = 0.420$ ). Furthermore, the main effect for Order was not significant ( $F(1, 53) = 0.015, p = 0.902$ ), indicating that there were no order effects confounding the results. However, the main effect for Race of Respondent approached significance ( $F(1, 53) = 3.391, p = 0.071$ ). Attractiveness ratings were not influenced by the race of the female figure or the order of scale presentation, but they were influenced by the race of the male participant. African American men tended to choose larger female figures as being attractive (mean = 35.500, s.d. = 2.190) than Caucasian men (mean = 29.850, s.d. = 2.078).

A one-way ANOVA was computed to compare body mass indices (BMIs) between African American and Caucasian men. A significant difference was found between the races ( $F(1, 55) = 4.215, p = 0.045$ ). African American participants had significantly higher BMIs (mean = 27.700, s.d. = 5.892) than Caucasian participants

(mean = 25.010, s.d. = 3.891). Of note, using a very conservative Bonferroni correction, which adjusted the alpha level to 0.01 to account for the five analyses of variance that were run, made the difference between the races non-significant. A Pearson product-moment correlation between BMI and same-race attractiveness ratings revealed a moderate positive correlation of 0.373 ( $p = 0.004$ ), indicating a significant linear relationship between the two variables. Participants with higher BMIs tended to select larger female figures as attractive.

Next, a 2 x 2 mixed-design ANCOVA was calculated to examine again the effects of the race of the respondent (African American, Caucasian) and the race of the female figure (black, white) on the attractiveness ratings of the female figures, this time covarying out the effect of the men's BMIs. BMI was significantly related to attractiveness ratings of the female figures ( $F(1, 54) = 4.148, p = 0.047$ ). The Race of Respondent x Race of Female Figure interaction was still not significant ( $F(1, 54) = 0.444, p = 0.508$ ). The main effect for Race of Female Figure became significant ( $F(1, 54) = 5.394, p = 0.024$ ), while the main effect for Race of Respondent became non-significant ( $F(1, 54) = 1.719, p = 0.195$ ). The men rated larger black female figures (mean = 33.132, s.d. = 1.718) than white female figures (mean = 32.131, s.d. = 1.558) as being most attractive when the effect of the respondents' BMI was covaried out. Again, using an ultra conservative Bonferroni correction made the main effects for BMI and for Race of Female Figure non-significant.

To determine whether acculturation into the black community was correlated with the participants' preferences for female thinness, a Pearson product-moment correlation was conducted. Each participant's total score from the Preference for Things African

American and Segregation subscales of the African American Acculturation Scale – Revised (AAAS-R) was correlated with his rating of the female figure of his same race that he found most attractive. Acculturation scores ranged from 14 to 75, with a mean of 39.386 (see Appendix H for AAAS-R individual question means). A moderate positive correlation of 0.320 ( $p = 0.015$ ) was found, indicating a significant linear relationship between acculturation and attractiveness ratings. Participants with higher acculturation scores tended to rate larger female figures as attractive.

Next, another 2 x 2 mixed-design ANCOVA was calculated to examine the effects of the race of the respondent (African American, Caucasian) and the race of the female figure (black, white) on the attractiveness ratings of the female figures, with acculturation into Black culture as a covariate. The resulting Race of Respondent x Race Female Figure interaction ( $F(1, 54) = 0.095, p = 0.759$ ) was not significant. Similarly, the main effects of Race of Female Figure ( $F(1, 54) = 0.081, p = 0.777$ ) and Race of Respondent ( $F(1, 54) = 0.079, p = 0.780$ ) were not significant. Therefore, the race of the respondent and the race of the female figure had no effect on the attractiveness ratings of the female figures after covarying out acculturation.

A one-way ANOVA was calculated to compare the range of women's body sizes that African American and Caucasian men reported dating. A significant difference was found between the races ( $F(1, 54) = 6.402, p = 0.014$ ). African American participants have dated women with a larger range of body sizes (mean = 34.852, s.d. = 20.939) than Caucasian men (mean = 23.035, s.d. = 13.458). Of note, using a very conservative Bonferroni correction made the difference between the races just barely non-significant.

Next, a correlation matrix was computed to examine relationships among race of respondent, BMI, income, mom's size, acculturation, attractive black figure ratings, attractive white figure ratings, and the range of women's sizes dated (see Table 1). Being more acculturated into the African American community was correlated with being African American, having a higher BMI, reporting a lower family income, and choosing larger black female figures as being attractive. Additionally, participants tended to choose black and white female figures that were similar in size. Also, men with larger BMIs tended to select larger black female figures as being attractive. Interestingly, no significant correlation was found between men's BMIs and their selection of white female figure attractiveness. Finally, the range of women's body sizes dated was found to be correlated with race, mom's body size, and attractiveness ratings of white female figures. More specifically, dating a larger range of women was correlated with being African American, having a mom who is larger in size, and selecting larger white female figures as being attractive.

A multiple linear regression was calculated to predict attractiveness ratings for black female figures based on the participants' race, BMI, mom's size, income, and acculturation, using a stepwise analysis method. The regression equation was significant ( $F(1, 55) = 10.670, p = 0.002$ ), with an  $R^2$  of 0.162 (see Table 2). Attractiveness ratings for black female figures are equal to  $3.480 + 1.123(\text{BMI})$ . Attractiveness ratings for black female figures increased 1.123 points for each BMI point, which was the only significant predictor. Men's race, mom's size, income, and acculturation did not predict their preferred thinness in black female figures.

This multiple linear regression was repeated using data from only the African American participants, in order to see if the predictor variables acted differently in the two races. The regression equation was still significant ( $F(1, 25) = 4.314, p = 0.048$ ), with an  $R^2$  of 0.147 (see Table 3). African American men's attractiveness ratings for black female figures are equal to  $9.527 + 0.993(\text{BMI})$ . These attractiveness ratings increased 0.993 points for each BMI point, which was still the only significant predictor. African American men's mom's size, income, and acculturation did not predict their preferred thinness in black female figures.

This multiple linear regression was repeated again, this time using data from only the Caucasian participants. The regression equation was not significant ( $F(4, 25) = 0.775, p = 0.552$ ), with an  $R^2$  of 0.110 (see Table 4). Caucasian men's BMI, mom's size, income, and acculturation did not predict their preferred thinness in black female figures.

Another multiple linear regression was calculated to predict attractiveness ratings for white female figures based on the participants' race, BMI, mom's size, income, and acculturation. This regression equation was not significant ( $F(5, 51) = 0.411, p = 0.839$ ). Men's race, BMI, mom's size, income, and acculturation did not predict their preferred thinness in white female figures (see Table 5).

This multiple linear regression was repeated using data from only the Caucasian participants, in order to see if the predictor variables acted differently in the two races. This time, a significant regression equation was found ( $F(1, 28) = 4.553, p = 0.042$ ), with an  $R^2$  of 0.140 (see Table 6). Caucasian men's attractiveness ratings for white female figures are equal to  $16.735 + 0.563(\text{acculturation})$ , where acculturation is the participant's total score on the AAAS-R. Attractiveness ratings for white female figures increased

0.563 points for each point of acculturation, which was the only significant predictor. Caucasian men's BMI, mom's size, and income were not significant predictors of their preferred thinness in white female figures.

This multiple linear regression was repeated again, this time using data from only the African American participants. The regression equation was not significant ( $F(4, 22) = 0.413, p = 0.797$ ), with an  $R^2$  of 0.070 (see Table 7). African American men's BMI, mom's size, income, and acculturation did not predict their preferred thinness in white female figures.

Table 1

*Correlation Coefficients of Race, BMI, Income, Mom's Size, Acculturation, Attractive Black Ratings, Attractive White Ratings, and Range of Women's Body Sizes Dated*

	Race	BMI	Income	Mom's Size	Acculturation	Attract Black	Attract White	Range Dated
Race	1.000	-0.204	0.257	-0.111	-0.831**	-0.256	-0.177	-0.280*
BMI		1.000	-0.180	0.050	0.379**	0.403**	0.138	0.099
Income			1.000	-0.130	-0.326*	-0.102	-0.069	-0.135
Mom's Size				1.000	0.096	0.071	0.008	0.288*
Acculturation					1.000	0.293*	0.174	0.251
Attract Black						1.000	0.612**	0.222
Attract White							1.000	0.450**
Range Dated								1.000

\* Correlation is significant at 0.05 alpha level (2-tailed).

\*\* Correlation is significant at 0.01 alpha level (2-tailed).

*Note.* Spearman's rho correlation was used when correlating variables with race and income. Pearson correlation was used when correlating two continuous variables.

Table 2

*Regression Analysis Summary for Respondent Variables Predicting Attractiveness Ratings of Black Female Figures*

Variable	B	SEB	$\beta$
Race	-0.178	ns	ns
BMI	1.123	0.344	0.403**
Mom's Size	0.051	ns	ns
Family Income	-0.077	ns	ns
Acculturation	0.164	ns	ns

\*\*  $p < 0.01$ .

*Note.* Using a very conservative Bonferroni correction, which adjusted the alpha level to 0.008 to account for the six regressions that were run, did not change the significance of BMI as a predictor.

Table 3

*Regression Analysis Summary for Respondent Variables Predicting African American Men's Attractiveness Ratings of Black Female Figures*

Variable	B	SEB	$\beta$
BMI	0.993	0.478	0.384*
Mom's Size	0.003	ns	ns
Family Income	0.015	ns	ns
Acculturation	0.025	ns	ns

\*  $p < 0.05$ .

*Note.* Using a very conservative Bonferroni correction, which adjusted the alpha level to 0.008 to account for the six regressions that were run, made BMI non-significant as a predictor.

Table 4

*Regression Analysis Summary for Respondent Variables Predicting Caucasian Men's Attractiveness Ratings of Black Female Figures*

Variable	B	SEB	$\beta$
BMI	0.923	0.638	0.294
Mom's Size	0.045	0.147	0.069
Family Income	-0.524	1.564	-0.069
Acculturation	-0.007	0.316	-0.005

Table 5

*Regression Analysis Summary for Respondent Variables Predicting Attractiveness Ratings of White Female Figures*

Variable	B	SEB	$\beta$
Race	-1.156	6.007	-0.050
BMI	0.189	0.347	0.082
Mom's Size	-0.009	0.086	-0.015
Family Income	-0.318	1.099	-0.043
Acculturation	0.053	0.168	0.087

Table 6

*Regression Analysis Summary for Respondent Variables Predicting Caucasian Men's Attractiveness Ratings of White Female Figures*

Variable	B	SEB	$\beta$
BMI	0.152	ns	ns
Mom's Size	-0.016	ns	ns
Family Income	-0.200	ns	ns
Acculturation	0.563	0.264	0.374*

\*  $p < 0.05$ .

*Note.* Using a very conservative Bonferroni correction, which adjusted the alpha level to 0.008 to account for the six regressions that were run, made acculturation non-significant as a predictor.

Table 7

*Regression Analysis Summary for Respondent Variables Predicting African American Men's Attractiveness Ratings of White Female Figures*

Variable	B	SEB	$\beta$
BMI	-0.010	0.415	-0.005
Mom's Size	-0.116	0.120	-0.206
Family Income	-0.581	1.872	-0.080
Acculturation	-0.216	0.224	-0.245

## CHAPTER IV

### DISCUSSION

While many past studies have concluded that African American men choose significantly larger female figures as being attractive than the figures that Caucasian males choose (Greenberg & LaPorte, 1996; Powell & Kahn, 1995), previous research has not examined male preferences using both white female figures and black female figures. The purpose of this study was to investigate the role of the racial identity of the female figures in African American and Caucasian men's preferences for female body types. It also reexamined the role of acculturation in males' selection of attractive female body sizes, given that previous research results on the effect of acculturation have been mixed (Lau, Lum, Chronister, & Forrest, 2006; Lake, Staiger, & Glowinski, 2000). An important contribution of the present study was to introduce the examination of the respondents' own BMIs in relation to their figure choices. Finally, the present study also examined the roles of respondents' mothers' body sizes and their family income in their ratings of attractive female body sizes.

My first hypothesis was that Caucasian men would choose thinner female figures than African American men would choose. Although not reaching statistical significance at the 0.05 alpha level, there was clearly a trend towards Caucasian men selecting thinner female figures than African American men. This supports much previous research that shows that there is a difference in preference for thinness between Caucasians and African Americans (Greenberg & LaPorte, 1996; Thompson, Sargent, & Kemper, 1996; Powell & Kahn, 1995). Interestingly, this trend of African American men choosing larger female figures than Caucasian men disappeared when acculturation was entered as a

covariate, suggesting that attraction to larger female figures may have more to do with adhering to Black cultural values than with race. Acculturation was significant as a covariate, indicating that, as predicted, participants who were more acculturated into the African American community selected larger female figures as being attractive than participants who were less acculturated. Past research on the effects of acculturation has been mixed, but the results of this analysis indicate that adhering to the beliefs and values of the African American culture (as measured in this study by the AAAS-R) is correlated with acceptance of larger body sizes as being attractive. A correlation matrix revealed that being more acculturated into the African American community was correlated with being African American, having a higher BMI, reporting a lower family income, and choosing larger black female figures as being attractive than participants who were less acculturated. These results are expected, given that there are higher rates of obesity among those with a lower socioeconomic status (Sobal & Stunkard, 1989), and given that much research suggests that men who adhere to African cultural standards prefer larger female body sizes (Wardle, Bindra, Fairclough, & Wesetcombe, 1993). As mentioned, when acculturation was covaried out, there was no longer a difference between races in their selection of attractive female figures.

No research to date has used both white and black female figures; this is the first study to compare African American and Caucasian men's preferences for both black and white female figures. At first glance, African American and Caucasian men did not differ in their attractiveness ratings of white female figures, nor did they differ in their attractiveness ratings of black female figures, as was predicted. However, with the introduction of the men's BMIs as a covariate, the effect of the race of the female figures

became significant. Without BMI influencing the results, the men selected larger black female figures as being attractive than white female figures. This study also found that African American participants had a higher BMI than Caucasian participants, which is consistent with past research (National Center for Health Statistics, 2006). BMI was significant as a covariate, indicating that men with a higher BMI tended to choose larger attractive female figures. Furthermore, BMI was the only significant predictor of attractiveness ratings in black female figures. This was a surprising finding, and one that was not hypothesized. Prior research has not focused on the potential role that one's BMI might play in the selection of an attractive significant other. However, it appears from this study that BMI is a very significant factor, as men with high BMIs chose larger female figures as being attractive than men with low BMIs. In fact, BMI was a stronger predictor than race, mom's size, income, and even acculturation, and emerged as the only significant factor to predict attractiveness ratings for black females. This finding supports Bereczkei, Gyuris, and Weisfeld's (2004) assertion that significant others often resemble each other in certain traits.

As mentioned previously, BMI was the only significant predictor of black female figure attractiveness ratings made by the men. This finding held true when examining black female figure attractiveness ratings made by African American males, but it did not extend to black female figure attractiveness ratings made by Caucasian males.

Alternatively, there was no significant predictor of white female figure attractiveness ratings made by the men. However, when examining white female figure attractiveness ratings made only by Caucasian men, acculturation became a significant predictor. Caucasian men who were more acculturated into the African American

community selected larger white female figures as being attractive than Caucasian men who were less acculturated. This effect did not extend to white female figure attractiveness ratings made by African American males. Of note, the AAAS-R was not normed on Caucasian men, so little is known about how Caucasian men respond to the scale's questions.

The hypothesis that African American men would report having dated women with a larger range of body sizes in comparison to the ranges reported by Caucasian men was supported. African American men reported dating women with a significantly larger range of body sizes than Caucasian men reported. This is related to the finding that African American men chose significantly larger female figures as being attractive than Caucasian men selected. There was more variability in the range of attractive female body sizes chosen by African American men than those chosen by Caucasian men. This result is also likely related to Powell and Kahn's (1995) finding that African American men were more willing to date larger women and did not believe that they would be ridiculed by their friends for doing so. Furthermore, a correlation matrix revealed that dating women with a larger range of body sizes is correlated with being African American, having a larger mom, and selecting larger white female figures as being attractive.

This research also examined the hypothesis that the size of the men's mothers would be significantly related to the men's preferences for female thinness. This hypothesis was also not supported. The size of the men's mothers had no bearing on their preferences for black or white female thinness, although it was positively correlated with dating a larger range of women. Research on the effect of sexual imprinting in mate

selection has focused on facial features (Bereczkei, Gyuris, & Weisfeld, 2004). It appears from the present study that this effect of sexual imprinting may not generalize to body size.

In order to control for Type I errors associated with running multiple analyses, Bonferroni corrections were calculated. The adjusted significance of each analysis was mentioned in the results section. However, the Bonferroni correction is extremely conservative and likely unnecessary for the number of analyses run in this study. There is a high risk of Type II errors when following such a stringent correction. Therefore, while it was important to consider the effect of this correction, no further mention will be made.

This study was important because no previous research has examined the race of the female figures in figure rating scales to determine if the race of the figures influences African American and Caucasian men's preferences for female thinness. Many studies have concluded that African American males choose larger female figures as being attractive than the figures chosen by Caucasian males, but these studies have used existing figure rating scales, which have been largely criticized for their lack of ethnic neutrality. Therefore, these studies are really concluding that African American males choose larger white female figures (or perhaps just unshaded line drawings) as being attractive than the white/unshaded female figures that Caucasian males choose. The perceived race of the female figures in these prior studies could be a confounding variable that has affected the results of the studies. By altering Klawitter's Figure Rating Scale into black female figures and white female figures, the present study was more accurately able to determine the role of the females' race in the males' choice of most

attractive female figure. The race of the female figures clearly impacted the men's ratings.

This study found a trend towards African American men selecting larger female figures than Caucasian men. This result most likely would have reached a higher statistical significance with a larger sample size than was able to be obtained. This trend disappeared when covarying out acculturation. Being acculturated into the African American community was related to being African American, having a higher BMI, having a lower income, and choosing larger female figures as attractive. Additionally, African American men have dated a significantly larger range of women's body sizes than Caucasian men have dated. Dating a larger range of body sizes was correlated with being African American, an increased mom's body size, and choosing a larger white female figure as being attractive.

This study was also the first to look at the role of the men's BMIs in their preference for female thinness. It first appeared that the men chose similar black and white female figures as being most attractive. However, when BMI was considered as a covariate, the race of the female figures became significant. Men with larger BMIs chose significantly larger attractive black female figures than attractive white female figures. Furthermore, African American men's own BMIs were predictive of their choice of attractive black female body sizes, while acculturation was the sole predictor of white female attractiveness ratings made by Caucasian men. Therefore, this study found that not only is the race of the female figures important in determining men's preferences for thinness, but so too are the men's BMIs. Furthermore, this study demonstrated that it is important to consider the acculturation of the Caucasian men, rather than just the African

American men, because Caucasian men who grew up in predominantly Black neighborhoods and/or prefer Black culture are more likely to select larger white female figures as being attractive.

### Implications for Women

Research shows that nearly all American women experience some degree of body dissatisfaction and that the percentages of dissatisfied women are growing higher each decade (Thompson et al., 1999; Cash & Henry, 1995; Garner, 1997). This is a disturbing trend because body dissatisfaction has been linked to the development of depression, low self-esteem, and eating disorders (Lau, Lum, Chronister, & Forrest, 2006). It also can lead women to engage in unhealthy dieting, exercising, or plastic surgery in their quest to lose weight (Wardle, Bindra, Fairclough, & Westcombe, 1993).

Reasons for women's desire for thin bodies are complex; many factors have been investigated. One factor influencing women's dissatisfaction with their bodies is that many men prefer thin women. Research shows that US American men prefer to date thinner women than men from other cultures prefer (Gleaves et al., 2000). These preferences of US American men may explain why American women are more dissatisfied with their bodies than women from other cultures (Senekal, Steyn, Mashego, & Nel, 2001). Furthermore, Caucasian American men prefer to date thinner women than what African American men prefer (Greenberg & LaPorte, 1996; Powell & Kahn, 1995), which could explain why African American women diet less, exercise less, and report greater body satisfaction, despite being heavier on average than their Caucasian American counterparts (Aruguete, Nickleberry, & Yates, 2004; Edwards-Hewitt & Gray, 1993). Therefore, ascribing to the traditional African culture, which equates a large

female body size with wealth, beauty, and fertility, may lead men to find larger women attractive and may serve as a protective factor against body dissatisfaction in women. Similarly, obtaining less exposure to Western advertising, media, entertainment, and fashions may protect those who are more acculturated into the African culture from ultra thin ideals and body dissatisfaction (Aruguete, Nickleberry, & Yates, 2004). In fact, although the research results are mixed, many studies support the idea that acculturation into the American culture increases women's body dissatisfaction (Chamorro & Flores-Ortiz, 2000; Perez, Voelz, Pettit, & Joiner, Jr., 2002). Research also shows that acculturation into the American culture increases the risk of developing disordered eating, which is made even more dangerous by the fact that treatment utilization rates are often very low among minority groups (Alegria et al., 2007).

#### Limitations of the Research

One limitation of this study is the relatively small sample size. The university at which this data was gathered is a predominantly Caucasian school. Although every eligible African American male in the subject pool was contacted, only twenty-seven African American men ultimately replied and agreed to participate. The trends indicated in the study may have achieved significance with a larger sample.

A related limitation is that, because this data was collected at a predominantly Caucasian state university in a rural setting in the mountains of western Pennsylvania, the results may not generalize to the United States population. Many of the students at this university come from urban settings in Pennsylvania, but they are urban men who are willing to attend a moderate-sized public university in a small town in rural Pennsylvania. This might be a select group. Although it is likely that these participants were raised in a

variety of urban and rural settings, they may not be representative of the population. Men in different regions of the country may hold different preferences for female thinness. Furthermore, these participants ranged in age from 18 to 24 years and may not share the same preferences for thinness as males in younger or older cohorts.

Another limitation of this study is that participants were asked on the demographics questionnaire to estimate the percentages of various ethnicities at their high schools and their families' average yearly incomes. Many of the participants indicated that they were unsure and had to guess. A more precise way to collect this data would have been to contact the participants' schools and families directly, but this method also would have been very time consuming.

A final limitation is that the two versions of Klawitter's Figure Rating Scale were administered within 5-10 minutes of each other. This was done to minimize the risk of participant attrition that would arise if participants had been asked to return in several weeks to complete the study. However, administering the two scales so closely in time gives rise to the possibility that participants chose the same female figure on the second scale that they remembered choosing on the first scale, which also could explain why some of the resulting statistics did not reach significance.

#### Future Research

Future research could improve upon these limitations. A larger sample size, consisting of a group of participants that is demographically diverse and representative of the American population, could impact the statistical significance of these results and make them more generalizable to the population. More precise data about the

participants' school and family history could be collected by going directly to the source. A test-retest time period of two weeks or longer could help eliminate memory effects.

Future research could also use these new versions of Klawitter's Figure Rating Scale with younger or older participants or with female participants, investigating racial differences in ideal female body size in various age groups or between African American and Caucasian females. In addition to using KFRS with African American or Caucasian women, new versions of the scale could be made for use with other ethnicities, such as an Asian version or a Native American version. Similarly, a scale that is modeled after KFRS, but which uses photographs of men, would be useful. This scale could investigate body dissatisfaction in men of various racial/ethnic backgrounds, as well as females' preferences for male thinness. In fact, this study could be replicated by having women respondents of different races evaluate male figure rating scales depicting different races.

Additionally, future research could investigate some of the surprising findings of this study, such as BMI emerging as the sole predictor of African American men's attractiveness ratings of black female figures or acculturation being the only predictor of Caucasian men's attractiveness ratings of white female figures. This finding of acculturation being a predictor of Caucasian men's attractiveness ratings of white female figures could be replicated using a different acculturation scale, particularly one that has been normed on Caucasian men. Acculturation also could be examined in other ethnic groups. Furthermore, a measure of acculturation into the dominant culture, such as the White Racial Identity Attitudes Scale (Helms & Carter, 1993), could be administered to different racial groups to determine if acculturation into the dominant culture impacts preferences for thinness.

## Clinical Implications

There are several clinical implications of this study. First, when assessing body dissatisfaction or preference for thinness, it is important to choose an instrument that appropriately reflects the race of the respondent or the desired race of the figures on the rating scale. For example, if one wants to assess an African American woman's body dissatisfaction, he/she should choose a figure rating scale that depicts black women. If one wants to assess a Latino man's preference for thinness in black women, he/she should again choose a figure rating scale consisting of black women, rather than one of the many existing figure rating scales that depict female figures that clearly appear Caucasian. This study has shown that participants do respond differently to figures of different races. Another implication is that clinicians should not overlook the role acculturation can play in people that appear to be members of the dominant culture. This study had the surprising finding that Caucasian men's level of acculturation into the African American culture was a strong predictor of their preference for white female thinness. If the researcher had made the assumption that Caucasians could not be acculturated into a non-dominant culture, this important finding might have been overlooked. Perhaps the biggest clinical implication is that, in order to successfully eradicate body dissatisfaction and eating disorders, we need to intervene on a societal level, rather than just an individual level. This study has demonstrated how preference for thinness is influenced by cultural factors, such as adherence to the beliefs and values of a particular group of people. Past research has shown that factors such as the media are quite influential in determining body satisfaction and which body sizes will be considered attractive/ideal (Thompson et al., 1999). Therefore, it follows logically that interventions

must be targeted not just at the individual, but at society at large. Efforts to change the way American culture defines beauty and ideal size could have a big impact on how people determine attractiveness in themselves and others and could serve as a protective factor against body dissatisfaction and eating disorders in both men and women.

This research supports the existing body of literature regarding African American men's acceptance of a larger range of black women's body sizes, particularly men who adhere to traditional Black cultural values. This acceptance likely contributes to the higher rates of body satisfaction that African American women experience in comparison to other ethnic groups. Therefore, it logically follows that encouraging Caucasian men to appreciate the beauty in different body sizes could serve as a protective factor against body dissatisfaction, eating disorders, and depression for Caucasian women. This encouragement could come in several forms, such as media literacy programs, minimum size requirements for models, or school projects centered on body acceptance. Inspiring men and women to reject the traditional European American ideal of thinness and embrace a broader range of body sizes as being attractive, as the African American culture has done, is an important first step towards eliminating body dissatisfaction.

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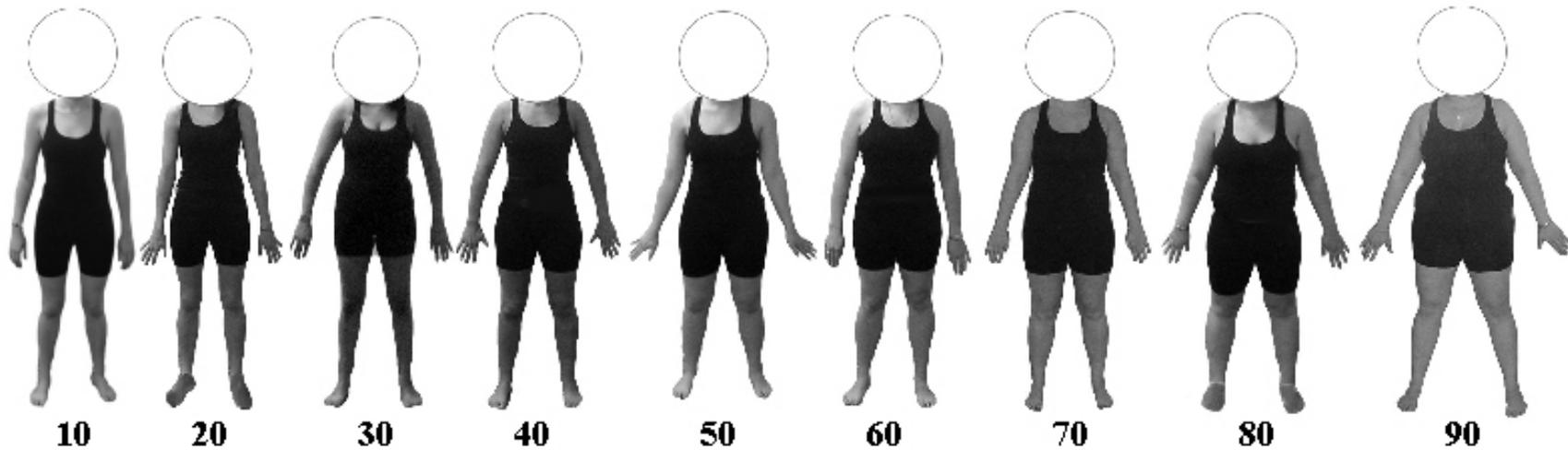
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Appendix A

Klawitter's Figure Rating Scale

## Klawitter's Figure Rating Scale



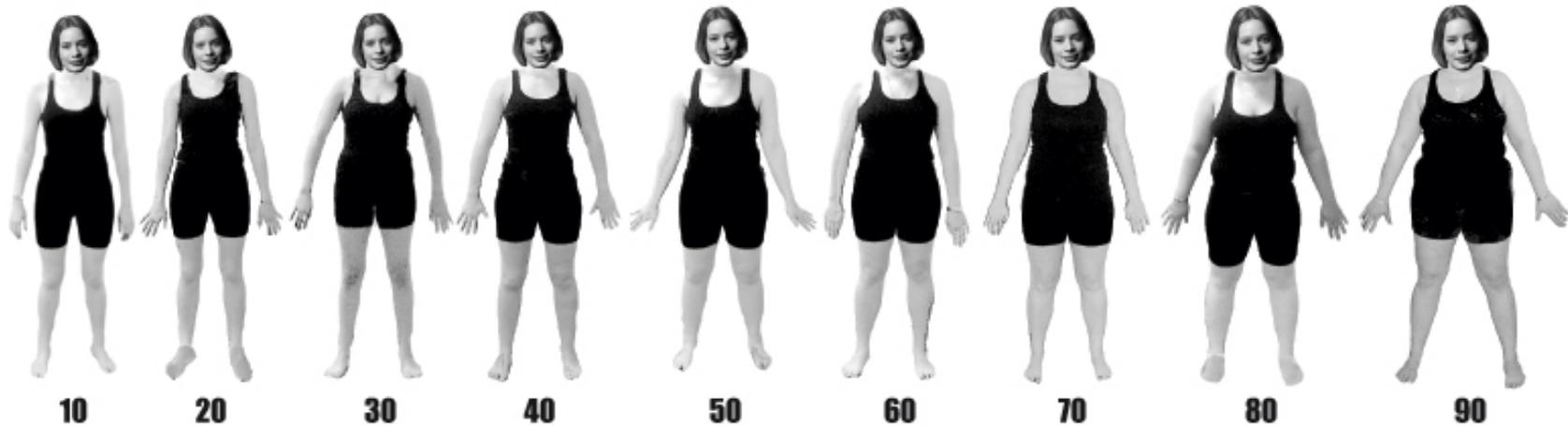
**Complete each statement using a scale of 0—100.**

1. Choose the number below the figure which best illustrates how you *think* you look: \_\_\_\_\_
2. Choose the number below the figure which best illustrates how you *feel* most of the time: \_\_\_\_\_
3. Choose the number below the figure which best illustrates how you would like to look (ideal figure): \_\_\_\_\_

Appendix B

Klawitter's Figure Rating Scale, Caucasian Version

## Figure Rating Scale—Version A



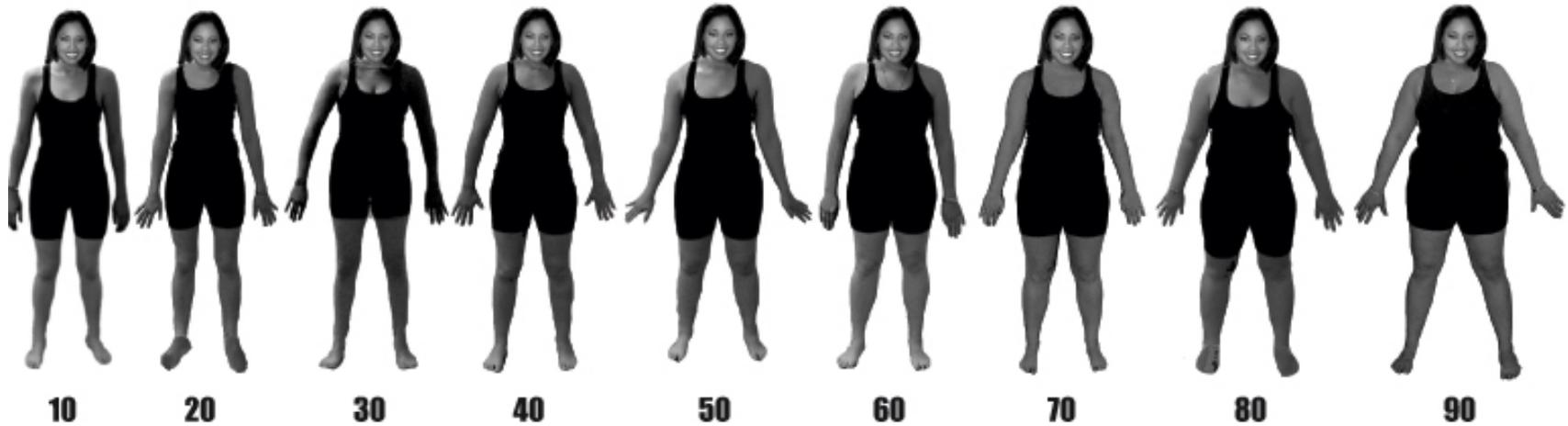
Complete each statement using a scale of 0—100.

1. The figure that I find most attractive is \_\_\_\_\_.
2. I have dated women: YES NO (If you answered NO, skip ahead to statement 5.)
3. The figure that represents the thinnest female I have dated is \_\_\_\_\_.
4. The figure that represents the heaviest female I have dated is \_\_\_\_\_.
5. The figure that represents my mom is \_\_\_\_\_.

Appendix C

Klawitter's Figure Rating Scale, African American Version

## Figure Rating Scale—Version B



Complete each statement using a scale of 0—100.

1. The figure that I find most attractive is \_\_\_\_\_.
2. I have dated women: YES NO (If you answered NO, skip ahead to statement 5.)
3. The figure that represents the thinnest female I have dated is \_\_\_\_\_.
4. The figure that represents the heaviest female I have dated is \_\_\_\_\_.
5. The figure that represents my mom is \_\_\_\_\_.

Appendix D

Beliefs and Attitudes Survey

**Beliefs and Attitudes Survey**

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	<i>I Totally Disagree/ Not True at All</i>		<i>Sort of Agree/ Sort of True</i>		<i>I Strongly Agree/ Absolutely True</i>		
1. Most of the music I listen to is by Black artists.	1	2	3	4	5	6	7
2. I like Black music more than White music.	1	2	3	4	5	6	7
3. I listen to Black radio stations.	1	2	3	4	5	6	7
4. I try to watch all the Black shows on TV.	1	2	3	4	5	6	7
5. The person I admire the most is Black.	1	2	3	4	5	6	7
6. When I pass a Black person (a stranger) on the street, I always say hello or nod at them.	1	2	3	4	5	6	7
7. Most of my friends are Black.	1	2	3	4	5	6	7
8. I read (or used to read) <i>Ebony</i> , <i>Vibe</i> , or <i>The Source</i> magazine.	1	2	3	4	5	6	7
9. I grew up in a mostly Black neighborhood.	1	2	3	4	5	6	7
10. I went to (or go to) a mostly Black high school.	1	2	3	4	5	6	7
11. I went to a mostly Black elementary school.	1	2	3	4	5	6	7
12. I currently live in a mostly Black neighborhood.	1	2	3	4	5	6	7

Appendix E

Demographics Questionnaire

**Questionnaire**

1. Age: \_\_\_\_\_

2. Race/Ethnicity: \_\_\_\_\_

3. Height: \_\_\_\_\_ feet \_\_\_\_\_ inches

4. Weight: \_\_\_\_\_ lbs.

5. Please estimate the percentage of the students at your high school who were of the following backgrounds:

Black \_\_\_\_\_%

White \_\_\_\_\_%

Asian \_\_\_\_\_%

Hispanic \_\_\_\_\_%

Native American \_\_\_\_\_%

6. In the first 10 years of my life, I grew up mostly in a (SELECT ONE):

A. Mostly single parent family with my mom

B. Mostly single parent family with my dad

C. Dual parent family with my mom and dad

D. Other (please explain: \_\_\_\_\_)

7. In the first 10 years of my life, my mother/female caregiver held the following job(s):

\_\_\_\_\_

8. In the first 10 years of my life, my father/male caregiver held the following job(s):

\_\_\_\_\_

9. In the first 10 years of my life, my family's average yearly income was (SELECT ONE):

- A. Less than \$15,000
- B. \$15,000--\$30,000
- C. \$30,001--\$45,000
- D. \$45,001--\$60,000
- E. \$60,001--\$75,000
- F. \$75,001--\$90,000
- G. More than \$90,000

10. Please list the female in popular culture (i.e., movies, television, music, magazines, etc.) that you find most attractive: \_\_\_\_\_

## Appendix F

### Most Attractive Female in Popular Culture

<b><u>Female</u></b>	<b><u>Frequency (Black)</u></b>	<b><u>Frequency (White)</u></b>	<b><u>Frequency (Total)</u></b>
Jessica Alba	2	5	7
Jennifer Aniston	0	4	4
Drew Barrymore	1	0	1
Halle Berry	3	0	3
Jessica Biel	0	2	2
Brooke Burke	0	2	2
Sophia Bush	0	1	1
Jennifer Connelly	0	1	1
Kirsten Dunst	0	1	1
Melyssa Ford	1	0	1
Scarlett Johansson	1	1	2
Angelina Jolie	0	1	1
Toccarra Jones	1	0	1
Milla Jovovich	0	1	1
Alicia Keys	1	0	1
Beyonce Knowles	4	0	4
Avril Lavigne	0	1	1
Lindsay Lohan	0	3	3
Lauren London	6	0	6
Catherine McCormack	0	1	1
Eva Mendes	1	0	1
Nicki Minaj	1	0	1
Mo'Nique	1	0	1
Allison Mott	0	1	1
Hayden Panettiere	0	1	1
Candace Parker	1	0	1
Kyla Pratt	1	0	1
Rihanna	1	1	2
Kimora Lee Simmons	1	0	1
Jessica Simpson	0	1	1
Kerry Washington	1	0	1
Emma Watson	0	1	1

Appendix G

Participants' Means and Standard Deviations on the Questions of Klawitter's Figure Rating Scale, Versions A and B

	<u>Attractive Black Figure</u>	<u>Attractive White Figure</u>	<u>Thinnest Dated</u>	<u>Heaviest Dated</u>	<u>Mom's Size</u>
<u>African American Respondents</u>	37.037 (15.253)	33.963 (10.872)	20.444 (14.208)	55.296 (16.434)	52.815 (19.249)
<u>Caucasian Respondents</u>	29.367 (12.218)	30.333 (12.388)	16.655 (8.393)	39.690 (13.808)	49.600 (18.735)
<u>Total</u>	33.000 (14.151)	32.053 (11.734)	18.482 (11.617)	47.214 (16.931)	51.123 (18.879)

## Appendix H

### Participants' Means and Standard Deviations on African American Acculturation Scale – Revised

<u>Question</u>	<u>African American</u>	<u>Caucasian</u>	<u>Total</u>
<u>Preference for Things</u>			
<u>African American subscale</u>			
1—listen Black music	5.519 (1.312)	2.967 (1.771)	4.175 (2.019)
2—like Black music	5.037 (1.400)	2.500 (1.570)	3.702 (1.955)
3—listen Black radio	5.407 (1.782)	2.533 (1.871)	3.895 (2.320)
4—watch Black TV	3.259 (1.163)	1.633 (0.765)	2.404 (1.266)
5—admire Black	5.296 (1.772)	1.933 (1.202)	3.526 (2.253)
6—hello to Black	3.815 (1.861)	3.433 (1.675)	3.614 (1.760)
7—friends are Black	5.222 (1.625)	2.300 (1.149)	3.684 (2.019)
8—Black magazines	3.370 (2.133)	1.333 (0.711)	2.298 (1.851)
<u>Segregation subscale</u>			
9—grew up neighborhood	5.259 (2.123)	1.300 (0.837)	3.175 (2.536)
10—Black high school	4.926 (1.838)	1.400 (0.814)	3.070 (2.251)
11—Black elementary	4.222 (2.375)	1.300 (0.750)	2.684 (2.253)
12—current neighborhood	4.963 (2.361)	1.533 (1.137)	3.158 (2.498)