The Stigma of Obesity in Women: 
The Difference is Black and White

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This study examined whether there is subcultural variation in the stigma of obesity. Black and White women rated photographs of thin, average, and large Black and White women on a number of evaluative dimensions. The photographs depicted professional models dressed in fashionable clothing. Results showed that White women rated large women, especially large White women, lower on attractiveness, intelligence, job success, relationship success, happiness, and popularity than they did average or thin women. By contrast, Black women did not show the same denigration of large women, and this was especially true when they were rating large Black women. A number of possible explanations are offered for these results, such as the difference in Black and White women’s social role models, weight salience, subcultural beliefs concerning obesity, and disidentification from mainstream values.

She’s big, but she’s solid. And she looks nice in her clothes. As long as she looks nice and can find pretty clothes, I’m not so worried about her weight.

A Black woman’s statement about her 198-pound daughter  
(Wadden et al., 1990, p. 350)

It is commonly observed that North Americans are obsessed with the pursuit of thinness, and indeed, Americans spend more money on trying to be thin each year than they do on the entire educational system (Brownell, 1991). However, there is substantial variation in the extent to which different segments of the population appear to be influenced by this obsession. For instance, the prevalence of obesity in North America is much greater for Black women than for White women (Kuczynski, Flegal, Campbell, & Johnson, 1994; Van Itallie, 1985), with one study finding that 48% of all adult Black women and 60% of Black women between 45 and 75 years of age are obese by medical standards (U.S. Department of Health and Human Services, 1984). Perhaps surprisingly, however, obese Black women appear to be much less concerned about weight than are similarly sized White women, and they are more than twice as likely to report being satisfied with their weight than are White women (Stevens, Kumanyika, & Keil, 1994). Given the enormous cultural pressures in North America to be thin, these findings are striking and raise the possibility that there is subcultural variation in the way obesity is perceived. The current study examines potential ethnic differences in the stigma of obesity.

A stigma is any attribute that deeply discredits or spoils the identity of its holder by indicating an undesirable distinctiveness from others (Goffman, 1963). Possessing a stigma typically affects all aspects of the holder’s life, having negative repercussions and adverse consequences for the self-concept as well as for interactions with nonstigmatized others (Archer, 1985; Crocker, Major, & Steele, in press; DeJong & Kleck, 1986; Jones et al., 1984). Obesity is a particularly noxious stigma, at least in North American society, because it elicits shame and guilt in the possessor for failing at self-control and evokes immediate negative reactions from others because of its displeasing aesthetic qualities (Allon, 1982; DeJong, 1980). Unlike many other stigmatized individuals, those who are obese tend to be held personally responsible for their condition (Maddox, Back, & Liederman, 1968; Northcraft, 1980; Weiner, 1995; Weiner, Perry, & Magnusson, 1988).

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Negative attitudes toward obesity are held not only by thin people but also by obese individuals themselves, a feature that is quite different from the typical stigmatizing condition (Crandall & Biernat, 1990; Maddox et al., 1968). Similarly, although many stigmatized individuals protect their self-esteem by attributing criticism and rejection to others' prejudices, obese individuals fail to make such attributions (Crocker, Cornwell, & Major, 1993; Crocker & Major, 1989). Rather, obese individuals recognize that the criticism or rejection is due to their obesity and lay the blame on themselves for being obese rather than on the critic or rejector for being prejudiced. Such attitudes may explain in part why obese individuals tend to have lower self-esteem than their nonobese counterparts (Crandall & Biernat, 1990; Crocker et al., 1993; Wadden, Foster, Brownell, & Finley, 1984). In sum, the available evidence seems to suggest that people of all ages and sizes hold negative attitudes toward obese individuals.

Fat as a Woman's Issue

Although both men and women tend to stigmatize obese people, the evidence is overwhelming that women experience the stigma of obesity much more severely than do men (Crocker et al., 1993; Dejong & Kleck, 1986; Fallon, 1990; Striegel-Moore, Silverstein, & Rodin, 1986). Because women are judged, in large part and much more than men, on the basis of their appearance (Fallon, 1990; Jackson, 1992), obesity is severely handicapping to women. Obese women tend to be lower in socioeconomic status than nonobese women and are also downwardly mobile in socioeconomic status compared to their parents (Sobal & Stunkard, 1989), primarily because obese women make less money than nonobese women (Sargent & Blanchflower, 1994). Female applicants appear to be particularly discriminated against in the college selection process (Canning & Mayer, 1966), and if they enter college settings, they receive less financial assistance from their parents than do their male counterparts (Crandall, 1991, 1995). In addition to receiving harsher social and economic consequences for being fat, women are also more preoccupied with weight issues and concerns throughout the whole span of their lives more than are men (Feingold, 1996; Jackson, 1992; Pliner, Chaiken, & Flett, 1990). The current examination focuses on women only because weight is especially central to their lives (see Crandall, 1994; Pintoore, Dugoni, Tindle, & Spring, 1994).

Culture, Subculture, and the Stigma of Obesity

In a comprehensive sociocultural review of appearance, Fallon (1990) suggested that each cultural group has its own definition of the ideal body image. Whereas some cultures value high cheekbones and big, blue eyes, others value tiny, mutilated feet or pierced nasal septums. Similarly, the meaning and importance of obesity to body image may also fluctuate across cultures. One factor that may influence the desirability of fatness within a given culture is that culture's socioeconomic condition (Cassidy, 1991; Sobal, 1991). For instance, although obesity is rare among Western society upper classes, it is much more common among the upper classes in developing countries (Allon, 1982; Sobal & Stunkard, 1989). Obesity may be desirable in developing countries because it helps prevent the acquisition of some infectious diseases, reduces one's likelihood of starvation, and is associated with having more successful births (see Cassidy, 1991). Obesity in developing countries may also serve as a status symbol indicating that one can afford to gorge oneself on meals, a liberty that is not available to individuals of lower classes (Fallon, 1990).

Documentation of cross-cultural variations in the stigma of obesity is far from substantial and mostly anecdotal. A recent study assessing Mexican and American students' attitudes toward obesity provides initial evidence for the existence of cross-cultural differences (Crandall & Martinez, 1996). Compared with Mexican students, American students reported significantly greater negative attitudes toward obese individuals. Identities composed of conservatism, self-determinism, and strong beliefs in a just world—those that Americans were more likely to possess—were found to be correlated with antifat attitudes (see also Crandall, 1994). Interestingly, sex differences emerged in the study such that Mexican women reported being significantly more fearful of becoming fat than did Mexican men. Thus, although American women were significantly more fearful of becoming fat than were Mexican women, the moderate fear levels for Mexican women raise the possibility that they may be internalizing Western cultural values regarding obesity.

There may be subcultural variation in the stigma of obesity even within Western culture. For instance, although there is no clear evidence documenting a lack of stigma of obesity among Black Americans, there is some evidence that Black individuals might prefer larger body sizes than White Americans. An examination of first through third grade students' perceptions of body figures showed that Black girls chose for themselves significantly larger ideal body figures than did White girls (Collins, 1991). Similarly, an examination of the preferences that men have in women revealed that Black men were more likely than White men to desire larger and heavier women (Cunningham, Roberts, Barbree, Druen, & Wu, 1995). When describing attractive buttocks of a woman, Black men were also more likely to use desirable descriptors such as "big" or "large," whereas White men were more likely to use descriptors such as "small" or
“firm.” Such studies provide initial evidence that Blacks may be more accepting of larger body shapes than Whites.

**Potential Reasons for Subcultural Variation**

A number of processes and mediating factors might account for potential subcultural variation in the stigma of obesity. First, Black Americans may not stigmatize obesity to the same extent as do White Americans because the greater statistical frequency of obesity among Black women may make obesity less salient and therefore less deviant for Black women than for White women. The link between statistical frequency and stigma was described by Zebrowitz-McArthur (1982), who proposed that people with statistically novel features or appearances are more likely to attract causal attributions for their conditions. Thus, White women might stigmatize large figures because obesity is less salient in White women than in Black women.

Ideological and socioeconomic factors may also play a role in potential subcultural variation in the stigma of obesity. Archer (1985) noted that stigmatizing conditions are socially constructed and vary according to cultural context. Thus, obesity may carry a different meaning for Black Americans than for White Americans. Crandall (1994) has demonstrated that the stigma of obesity is related to a more conservative ideological outlook, in which self-control and personal responsibility for failure are emphasized. That is, people who are conservative tend to believe that fat people are fat because they are morally weak and have little self-control; in short, obesity indicates sloth of character and lazy self-indulgence. Black Americans, who are generally less likely than Whites to ascribe to conservative philosophies, may be less likely to link body weight with moral and characterological weakness.

Similarly, and as mentioned previously, Black Americans may be less likely to view body size as indicative of socioeconomic status. In her review of the sociocultural determinants of body image, Fallon (1990) proposed that cultural ideals for body shape reflect deviations from the average figure that only the rich and elite are able to attain. For women, being thin in North America is often taken as a sign of prosperity, and being really thin requires time, effort, and money that the lower and middle classes are unable to afford. Only those rare individuals who are “lucky at birth” or those who can afford costly health club memberships or personal trainers can realize the emaciated ideal of most White women.

Finally, it is possible that obesity may be less stigmatized among the Black community because of explicit rejection of mainstream White values. Steele (1992) has described the process of disidentification, in which Black Americans reject the standards and ideals of the White community to protect or affirm their sense of self-esteem. Kerr, Crocker, and Broadnax (1995) similarly proposed that Black women may protect themselves from the stigmatizing effects of being overweight by rejecting the views of others as a relevant basis for self-esteem. Kerr et al. found that compared to White women, Black women reported that their self-esteem was less dependent on others’ evaluations. Thus, having long had to contend with negative appraisals based on racist stereotypes, Black women may have learned to disidentify from mainstream stereotypes based on ethnicity or on body type. Hence, just as Black Americans may reject White educational ideals (Steele, 1992), they may also reject White standards for thinness. Moreover, just as Blacks may discourage other Blacks from attaining academic excellence, Black women might possibly discourage the pursuit of thinness among other Black women. Certainly the mothers of obese Black girls appear to be less concerned about their daughters’ weights than are mothers of obese White girls (Wadden et al., 1990). In other words, a process of disidentification from mainstream White values may foster increased acceptance of—and even preference for—large body shapes.

Taking the disidentification approach one step further, it is possible that Black individuals may even create a value system for themselves that is precisely the opposite of that which exists for White culture (Ogbu, 1995). That is, Black individuals may transform what is valued in mainstream culture (e.g., intelligence, achievement, thinness) into something undesirable. Further, they may transform devalued characteristics into favorable characteristics (e.g., drug use, nonachievement, criticism of society). Such a reversal of mainstream cultural values may explain, in part, why Black individuals stigmatize obesity less than do White individuals and possibly even value it.

There are a number of limitations to past research that preclude definitive conclusions about the basis of subcultural differences in the stigma of obesity. For example, many previous studies have not included Black Americans, either as targets or as participants—most studies have examined the stigma of obesity using only White participants. Another major problem is that previous research has typically portrayed obese individuals through the use of line drawings or through frank descriptions of targets’ weights. These methods are likely to be unduly influenced by demand characteristics and may also constrain the generalizability of the findings. For example, body size and gender will undoubtedly have effects when participants have only size and gender information on which to base their judgments. A more ecologically valid method is to provide participants with pictures of actual people. Finally, a more minor limitation of past research is that studies tend to use too few
target stimuli, so that participant responses may be biased by idiosyncratic reactions to specific stimuli (see Dejong & Kleck, 1986).

The Current Study

The current study investigates subcultural variations in the stigma of obesity by having Black and White women rate pictures of Black and White women of various body sizes. Pilot work that we conducted provides some initial evidence for subcultural variation (Heatherton, Kiwan, & Hebl, 1995). Specifically, we had participants view pictures of nine Black women and nine White women, of whom one third were thin, one third were average size, and one third were large. Participants were asked to indicate their perceptions of each target's attractiveness, intelligence, job success, relationship success, happiness, popularity, and job occupation. We hypothesized that White participants would show a clear denigration of the large White targets, whereas Black participants would be less likely to base their ratings on the target's body weight. A total of 40 Black and 24 White women took part in our pilot study, and we found that for popularity, relationship success, and happiness, Black participants did not rate large targets more negatively than thin or average targets, whereas White women rated large targets much more negatively on these personal dimensions. In fact, for happiness and popularity, there were marginal trends suggesting that Black participants rated large Black targets more positively than average and thin targets. In addition, we also found that Black women were willing to ascribe jobs of a professional nature to Black targets of all sizes, whereas White women reserved assignments of professional jobs for thin and average White women only.

Although our findings were largely supportive of our hypotheses, two methodological problems associated with the stimuli prevented us from drawing firm conclusions. First, our large White targets were perceived to be significantly heavier than our large Black targets (by both Black and White participants), which might explain the greater denigration that occurred for large White women as compared with large Black women. Second, the target weight may have been confounded by the type of clothing worn by the targets. We used pictures of college students and graduate students dressed in everyday clothing, and a post-hoc scrutiny of the pictures revealed that large targets were dressed differently than the thin and average targets. Specifically, the clothing worn by the heavy targets appeared to be much less attractive and stylish than the clothing worn by thin and average participants (perhaps priming the "sloppy fat" stereotype). In fact, this may not be too surprising given the lack of stores that cater to heavier women (see Allon, 1982). The lack of standardization in clothing may have introduced a systematic difference that independently affected the participants' ratings. To eliminate this potential source of bias in the current study, we used pictures of professional models, all of whom were dressed in stylish and professional attire. Moreover, we used careful pretesting to ensure that perceived weight was similar for Black and White targets. Thus, the current study was designed to correct the apparent problems with the target stimuli used in our pilot work, and we therefore expect to find greater support for our hypothesis that White women stigmatize large targets to a greater extent than do Black women.

Overall, we expect to find evidence for the stigma of obesity. If there is no subcultural variation, we expect to see only main effects for target weight, with all participants evaluating larger targets more negatively than thin and average sized targets. If socioeconomic differences or conservative ideology account for differences between Black and White individuals, we expect to see Black women not stigmatizing obesity among either White or Black targets. If a statistical frequency explanation is accounting for the results, we expect both Black and White women to rate large Black women positively and large White women negatively. Finally, if, as we hypothesize, disidentification processes are occurring, we expect that Black participants will rate large Black women positively but White participants will rate large White women negatively.

METHOD

Participants. A total of 47 (22 Black and 25 White) undergraduate women signed up on psychology sign-up sheets to participate in the experiment and were paid $5 each. There were no differences between the two groups in height or body weight, \( F < 1 \).

Materials. The stimulus materials consisted of 18 photographs of women obtained from various magazines (nine Black, nine White). In an attempt to ensure that there were no systematic differences in photographs, other than body size and ethnic category, each picture had to meet a number of criteria: The pictures had to show most of the model's body from a frontal perspective, the model had to be dressed in professional looking clothing and be wearing minimal or no jewelry, and the models had to have a slightly positive facial expression. The targets were selected from a variety of fashion magazines and catalogs, and therefore all of our models were at least moderately attractive and they were all dressed in stylish, although not extravagant, clothing. The pictures were pretested to ensure that they were reliably viewed as thinner than average, as average, or as larger than average. Note that we did not use pictures of ex-
tremely thin women or extremely heavy women; all of
the photographs represented women who were within a
reasonably normal range.

Participants were asked to complete a questionnaire
(adapted from Gledhill, 1990) that assessed their percep-
tions of the targets. Specifically, participants were asked
to rate each target according to six dimensions: (a) "How
attractive is she?"; (b) "How intelligent is she?"; (c) "How
good is she at her job?"; (d) "How successful is she in her
relationships?"; (e) "In general, how happy is she with
her life?"; and (f) "How popular is she with other peo-
ple?" Participants rated targets on each dimension using
a scale with anchors of −100 (extremely negative) and +100
(extremely positive). Ratings were averaged across the
three target stimuli for each ethnicity and weight cate-
gory on each dependent measure.

The questionnaire also asked participants to indicate
which job, from a list of 13 jobs (e.g., bank clerk, lawyer,
office cleaner, high school teacher), they believed best
served each of the targets. Each occupation was classified
into one of four categories: (a) professional, (b) skilled,
(c) clerical, and (d) manual labor. Finally, the last seg-
ment of this questionnaire served as a manipulation
check to ensure that those targets we categorized as thin,
average, or heavy were perceived likewise by the partic-
ients. Hence, participants were asked to rate the weight
of each of the 18 women in the photographs on a scale
anchored by −100 (extremely underweight) and +100 (ex-
tremely overweight).

Participants also completed the Restraint Scale
(Herman & Polivy, 1975),^ which is a measure of chronic
dieting tendencies, and a brief questionnaire about eat-
ing attitudes and behaviors.

**Procedure.** Participants were recruited by sign-up
sheets to participate in a study described as "Women's
Perceptions of Women." They were tested individually
and were told they would be viewing photographs of a
number of women. Upon viewing each photograph,
participants recorded their immediate perceptions on
a single sheet containing a series of rating scales. Par-
ticipants completed one sheet for each of the 18 photo-
graphs. A final sheet of items asked participants to go
back through the photographs and rate each target for
body size. Participants were told that their responses
would remain confidential and that they should respond
as accurately as possible. The order of photograph pre-
sentation was arbitrary, although consistent across sub-
jects. Postexperimental questioning was used to elicit
participants' perceptions of the purpose of the study. No
participant reported knowing that weight was a relevant
factor while they were filling out the personal ratings for
each target.

**RESULTS**

**Manipulation Checks**

We used a repeated measures analysis of variance
(ANOVA) to examine participants' perceptions of the
stimulus targets' weights. This analysis revealed that par-
ticipants successfully distinguished between the three
target weight groups, $F(2, 86) = 200.26, p < .0001$ (see
Table 1). There were no differences between Black par-
ticipants and White participants in their ratings of the
target body sizes, $F(1, 43) = 1.41, p = ns$, and ethnicity of
participant and target size did not interact, $F(2, 86) < 1$.

Unlike in our pilot study, there were no significant dif-
fferences in the size ratings of Black and White targets, $p =
ns$. The interaction between ethnicity of target and size
category of target was not significant, $F(2, 86) < 1$. Thus,
although participants perceived the targets to be of
different weights, this did not vary as a function of the
target ethnicity.

**Overall Effects**

We hypothesized that the stigma of obesity would be
more prevalent for White women than for Black women.
To test this, we conducted a doubly multivariate analysis
of variance (MANOVA) on the six dependent measures
used to assess stigma (ratings of attractiveness, intelli-
gence, happiness, job success, relationship success, and
popularity), with participant ethnicity as a between fac-
tor and target ethnicity and target weight as within fac-
tors. The MANOVA revealed a main effect for weight,
such that overall the large targets were rated more nega-
tively than the thin or average targets, $F(12, 170) = 18.03,
p < .0001$ (each of the univariate tests of this effect was
significant, all $p < .001$ except popularity where $p < .03$).

As predicted, the interaction between participant eth-
nicity and target weight was significant, $F(12, 170) = 3.01,
p < .001$ (each of the univariate $p$s was also significant).
White women stigmatized large White targets across all
dimensions, $p < .01$, whereas Black women denigrated
large White women marginally so for intelligence, rela-
tionship success, and happiness, $p < .10$. In terms of the
large Black targets, White women stigmatized them
across all dimensions, $p < .01$, whereas Black women
denigrated large Black targets only in attractiveness, $p < .05$. Thus, Black participants rated the targets (both
Black and White targets) differently than did White
participants across all dimensions except attractiveness.

In line with the statistical frequency and role model
hypotheses, we also observed an interaction between
target weight and target ethnicity, $F(12, 170) = 9.63, p <
.0001$, indicating that large Black targets were less stig-
matized by both Black and White participants. However,
the univariate tests revealed that this effect occurred only

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TABLE 1: Participants’ Ratings of Targets’ Weights

<table>
<thead>
<tr>
<th>Target Size</th>
<th>Thin</th>
<th>Average</th>
<th>Large</th>
</tr>
</thead>
<tbody>
<tr>
<td>Black targets</td>
<td>Mean</td>
<td>18.1</td>
<td>0.5</td>
</tr>
<tr>
<td></td>
<td>SD</td>
<td>15.7</td>
<td>4.1</td>
</tr>
<tr>
<td>White targets</td>
<td>Mean</td>
<td>20.4</td>
<td>-1.1</td>
</tr>
<tr>
<td></td>
<td>SD</td>
<td>16.7</td>
<td>7.1</td>
</tr>
</tbody>
</table>

for popularity, $p < .0001$, and happiness, $p < .05$. The patterns for these interactions can be seen in Table 2.

In examining both the within_ethnicity and cross-race ratings (see Table 2), it became apparent that Black targets were rated more positively than White targets across all of the personal dimensions, and indeed, there was a highly significant effect in the overall MANOVA, $F(6, 40) = 25.13$, $p < .0001$. Although this effect was stronger for Black participants than for White participants, $F(6, 40) = 8.09$, $p < .0001$, both groups rated Black targets as being more attractive, intelligent, successful, in their jobs and relationships, happy, and popular than White targets. Such consistent findings might represent some form of in-group favoritism for Black participants and political correctness on the part of White participants, or it may represent some other unknown source of bias (for a potential explanation of this pattern, see Judd, Park, Ryan, Brauer, & Kraus, 1995). Certainly this phenomenon is striking and interesting in its own right, but this pattern also raises conceptual problems for testing our hypotheses. Because the cross-race ratings undoubtedly were influenced by factors other than size of the target, we believe it is inappropriate to draw conclusions about the reasons for these cross-race patterns. Therefore, we decided to focus our analyses on within-race ratings. That is, the primary hypotheses of this study concern whether Black individuals stigmatize obese Black individuals to the same extent as White individuals stigmatize obese White individuals.

Within-Ethnicity Ratings

To test the hypothesis that Black participants stigmatize large Black targets to a lesser extent than White participants stigmatize large White targets, we conducted a 2 (ethnicity of participant) × 3 (target weight) × 6 (personal dimensions) MANOVA. As was found in the overall MANOVA, there was a main effect for target weight, $F(12, 170) = 11.95$, $p < .0001$, demonstrating that large targets were rated more negatively than thin or average targets (all of the univariate tests were significant, $p < .01$, except for job success, which was marginally significant, $p < .08$). As predicted by our hypothesis, this effect was qualified by an interaction between participant ethnicity and target weight, $F(12, 170) = 6.78$, $p < .0001$. Each of the univariate tests was significant ($p < .01$, except job success where $p < .05$), demonstrating a greater stigmatization of large targets by White participants than by Black participants across all the personal dimensions.

We also conducted a series of focused contrasts that compared the ratings of thin and average weight targets against large targets, and the results of these comparisons are noted in Table 2. Large White targets were rated more negatively than average and thin White targets across all dimensions ($p < .05$) and the planned contrasts revealed that Black participants did not rate large targets differently than average or thin targets on intelligence, job success, happiness, or relationship success. They did, however, show a preference for thin and average targets in terms of attractiveness, with large Black targets being rated as less attractive than thin and average targets ($p < .05$). As may be seen in Table 2, this effect is largely attributable to the thin Black targets, who were rated as being extremely attractive. Surprisingly, large Black targets were rated as more popular than average or thin Black targets, $p < .05$. Thus, except for the dimension of attractiveness, there was little evidence of stigmatization of large targets by Black participants.

Overall Positivity

In an attempt to examine whether the six dimensions could be collapsed into a single factor or fewer units than six, a principal components factor analysis was con-
ducted on all six of the dependent measures. The results revealed that all measures loaded onto a single factor (Eigenvalue = 4.54). A Cronbach reliability coefficient revealed alpha = .93 on the six items and hence, a composite (the average of all the dependent measures) was created. An additional ANOVA was conducted on this variable. As expected, the results revealed a strong stigma of obesity for White women and no stigma of obesity for Black women, $F(2, 90) = 3.20, p < .05$.

**Type of Job**

Participants were asked to select one of 13 jobs that seemed to be best suited for each target, and these responses were then classified into four categories: manual labor, clerical, skilled, or professional. Very few of the participants in this study selected manual labor occupations for any of the targets, which may reflect the fact that all photographs depicted professionally attired women. White participants showed substantial discrimination against the large targets, relegating them to much lower status jobs than they did for average or thin targets, $\chi^2(6, N = 25) = 54.6, p < .0001$. For instance, 56% of thin and 84% of average White targets were assigned to skilled or professional occupations, whereas only 28% of large targets were assigned to these two categories. More strikingly, professional occupations were chosen for large White targets only 2.7% of the time. See Table 3 for a breakdown of these assignments.

In contrast, there was no systematic bias for Black women rating Black targets, $\chi^2(6, N = 22) = 5.1, p = \text{ns}$. Indeed, roughly equal proportions of thin (71.2%), average (74.2%), and large (71.1%) Black targets were assigned to skilled or professional occupations (see Table 3).

**DISCUSSION**

The results of this study provide strong support for our hypothesis that there is greater stigmatization of obesity among White women than among Black women. White women rated large White targets as lower in attractiveness, intelligence, popularity, happiness, relationship success, and job success, as well as less likely to hold prestigious occupations than their thinner counterparts. For Black women there was very little evidence for the stigma of obesity, and indeed, Black participants even rated the large Black targets as more popular than average and thin targets, a finding that would be unimaginable for White women.

We were not surprised that both Black and White women showed a tendency toward finding the thinner targets more attractive than the heavy targets. After all, North Americans are bombarded by media and popular messages that say that “thin is in” and that being fat is unattractive and unhealthy. However, physical attractiveness refers more to aesthetic ideals than to actual stigma. It is only when the aesthetically displeasing characteristic contaminate ratings across other personal dimensions that it becomes stigmatizing. That is, a stigmatizing condition is one that spoils or blemishes judgments of people across all aspects of their lives. Heavy White women were viewed not only as unattractive but also as unintelligent, socially awkward, and unskilled. Body size permeates all aspects of their lives, and they are judged primarily by their “unsavory” physical appearance. Black women showed a preference for thin body types in terms of attractiveness, but this preference did not spill over into ratings of interpersonal or career domains. Rather, some of our findings indicate that having a larger body size might actually convey some benefits for Black women. Thus, although being large may be less aesthetically appealing for Black women, it is not a stigmatizing condition.

The current findings are consequential because they reveal ethnic variation in the extent to which a given attribute (in this case weight) is used to make social judgments. The importance of such a finding is highlighted by recent theoretical articles promoting the study of culture, an examination that has too often been neglected in social psychology (Betancourt & Lopez, 1993; Bond, 1988). Betancourt and Lopez (1993) suggest that one solution to the lack of cultural focus in mainstream social psychology is to “begin with a phenomenon observed in the study of culture and apply it cross-culturally to test theories of human behavior” (p. 632). The current study questions the general assumption of a stigma of obesity by demonstrating subcultural differences within American society. These findings support Betancourt and Lopez’s suggestion that cultural factors are important for understanding social phenomena such as stigma.
Why Differential Stigma?

In the introduction, we considered a number of possible explanations for the differential stigma of obesity. Our results were most consistent with Steele's (1992) disidentification theory, which proposes that Black women may not be adhering to White American values (Kerr, Crocker, & Broadnax, 1995; Steele, 1992; Steele & Aronson, 1995). To protect themselves from the stigma of obesity, Black women appear to disidentify from mainstream White ideals for body size. It is even possible that through their experiences with systematic and entrenched discrimination, Black women may develop pride in characteristics that are associated with being Black. That is, some evidence indicates that Black individuals display stronger in-group favoritism than do White individuals (Judd et al., 1995), a pattern that was striking in our own studies. Given that Black women, as well as their most powerful Black female role models, are larger than White women, being large may be taken as an in-group characteristic, and we therefore expect that larger body sizes might become increasingly favored within Black culture. Indeed, consider that White role models of successful women are typically quite thin, although there are a few notable exceptions (e.g., Roseanne Barr’s in the media and entertainment industry. In contrast, although there may be fewer role models for Black women overall, those who do exist look very different than the typical White role model. Black role models are typically big and large, and perhaps even obese (e.g., Oprah Winfrey, Aretha Franklin, Toni Morrison, Jocelyn Elders, and Maya Angelou). At this point, it is unknown whether the number of positive large Black role models is responsible for, or conversely, the result of, disidentification from mainstream White values (or whether they are even meaningfully related).

The pattern of results does not fully support the idea that differences in statistical frequencies are responsible for the observed cultural variation. A frequency explanation would have predicted that both White and Black women would stigmatize White women less than Black women (because obesity is more prevalent among Blacks), and yet we found that White women stigmatized both Whites and Blacks. The results also do not support the notion that Black women possess less conservative ideologies and maintain relaxed attitudes toward obesity. If Black women did possess less conservative ideologies than White women, this outlook should have affected judgments on the basis of weight for people regardless of ethnicities (see Crandall, 1994; Crandall & Martinec, 1996). However, Black women did appear to stigmatize large White women and therefore there was evidence for a denigration of obesity among Black women, but only when they were evaluating White targets.

To summarize, we propose that being large is a very different condition for Black women than for White women. For White American women, being large is not only considered unattractive, but it also is taken as a sign of characterological weakness, indicating a lack of willpower and diminished intelligence. This stigma of obesity may condemn large White women to downward socioeconomic mobility because of widespread discrimination. Indeed, it is not uncommon to read media accounts of obese women who are fired from their jobs primarily because of their size, and many employers (such as airlines) use body weight as an explicit criterion for hiring. Although Black women may have an aesthetic preference for thin body shapes, they tend not to generalize this preference to non-weight-relevant domains, such as occupational ability or social status.

Our findings have important implications. For instance, there is some controversy about the extent to which obesity is a risk factor for health problems, with some reviews of the literature suggesting that the health consequences of mild obesity have been overstated by the medical community (Bennett & Gurin, 1982; Garner & Wooley, 1991). However, the evidence is clear that stigmatizing obesity promotes a host of psychological problems, including damaged self-esteem, eating disorders, and other adjustment problems (Heatherton & Baumeister, 1991; Heatherton & Polivy, 1992). Given body weight trends over the past few decades, we may soon need to face the choice of destigmatizing obesity and risking some potential health problems—although in the process, perhaps alleviating mental distress for large segments of our society—or we may be encouraged to increase the stigmatization of obesity, especially for Black Americans, to encourage weight loss and presumably better health. Although how we should decide this issue is not entirely obvious, we believe that the mental health and socioeconomic consequences of trying to stigmatize obesity must be given equal priority with efforts to promote public health.

Future Research Directions

Although our findings allow us to make some tentative conclusions regarding the plausibility of different explanations for subcultural variation in the stigma of obesity, it is important to note that these claims are somewhat speculative given that the data collected in the current study did not set out to formally evaluate the mechanisms. This section highlights directions for future research that might clarify the relative importance of the various mechanisms. What may be most informative to this research area is to derive the cultural elements that are responsible for creating such differences. For instance, if the responsible mechanism is disidentification, one method for testing this might be to examine

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measures of "acculturation," or the extent to which minority groups subscribe to in-group traditions and norms (see Betancourt & Lopez, 1993). If disidentification is driving the subcultural variation effect, we might expect that Black Americans who identify most with their own in-group would be those who are least likely to stigmatize obese individuals of their own ethnicity, particularly if the importance of weight to White American society and the knowledge that there is an overabundance of Black individuals who are larger than White individuals were made salient. The inclusion of male subjects and targets would assist in identifying the generality of the disidentification hypothesis.

Attention should also be paid to the possibility that individuals who possess a stigma of some sort (e.g., ethnicity) may be more compassionate and accepting of individuals who hold other sorts of stigmas (e.g., obesity). In his theoretical writings, Goffman (1963) proposed that stigmatized individuals might be less prejudiced toward other stigmatized groups, but this hypothesis remains empirically unexplored. Finally, it is possible that the meaning of stigma changes in those bearing multiple stigmatizing conditions. That is, relatively little is known about whether possessing one stigma is less disadvantageous than possessing multiple stigmas. Moreover, among those with multiple stigmatizing conditions, some of the conditions will assuredly have more impact on interpersonal judgments than others.

CONCLUSION

Our findings demonstrate that there is substantial subcultural variation in the stigma of obesity. Although both Black and White women view thin figures as more attractive than heavy figures, White women are much more likely to generalize their negative impression to all aspects of large people's lives. That is, the thin ideal in White culture not only represents an aesthetic ideal, but it is taken as a sign of self-reliance, masterful self-control, and interpersonal acumen. Such perceptions are reinforced through selective exposure in the media favoring thin and attractive role models. For Black women, being thin is not a relevant indicator of interpersonal or professional success. Rather, Black women might disidentify from mainstream White standards for body weight and they may even value larger body types. Indeed, although media role models of Black women are few, they are as likely to be large women as thin or average size women. We conclude that being overweight is much more stigmatizing for White women than for Black women.

NOTES

1. An additional nine photographs depicting thin, average, and large Arab women were included in the picture packet. However, postexperimental questioning revealed that participants could not distinguish Arab targets from Caucasian targets. Moreover, the Arab participants did not represent a homogenous group, with some of them raised in non-Western cultures and some of them fully integrated into North American society. Thus, because the main objective in this study was to examine the stigma of obesity in Black Americans, we do not consider the results for Arab participants or targets in this manuscript. In general, Arab targets, although not recognized as such, were rated by Arab participants much in the same manner that White participants rated White targets. That is, there was substantial stigmatization of the large Arab targets by the Arab participants.

2. We included a measure of dieting because we initially thought that dieting status might reflect the degree to which participants held strict standards for thinness. However, subsequent research indicates that dieters do not hold more stringent standards for thinness than do nondieters—although dieters do see themselves as being farther away from their ideal weight (Heatherton, 1993). Dieting status also was not a significant factor when added to any of the analyses.

3. We report the averaged F tests based on Wilk's Lambda. These findings are identical to those obtained for the multivariate F tests.

4. We note that Roseanne Barr has become known for portraying the perfect stereotype of a lower class, sloppily dressed, lazy and indulgent fat woman. If it is rare to find examples of large White women in the media, it is almost impossible to find positive examples of overweight White women, and those that do occur were popular long before their weight gain (as epitomized in the statement "All our lives we have wanted to look like Elizabeth Taylor and now—God help us—we do:" Fallon, 1990).

REFERENCES


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