

impossible to maintain—no one is flawless and everyone ages. Growing older is the great taboo. Women are encouraged to remain little girls (“because innocence is sexier than you think”), to be passive and dependent, never to mature. The contradictory message—“sensual, but not too far from innocence”—places women in a double bind: somehow we are supposed to be both sexy and virginal, experienced and naive, seductive and chaste. The disparagement of maturity is, of course, insulting and frustrating to adult women, and the implication that little girls are seductive is dangerous to real children.

Influencing Sexual Attitudes

Young people also learn a great deal about sexual attitudes from the media and from advertising in particular. Advertising’s approach to sex is pornographic: it reduces people to objects and de-emphasizes human contact and individuality. This reduction of sexuality to a dirty joke and of people to objects is the real obscenity of the culture. Although the sexual sell, overt and subliminal, is at a fevered pitch in most commercials, there is at the same time a notable absence of sex as an important and profound human activity.

There have been some changes in the images of women. Indeed, a “new woman” has emerged in commercials in recent years. She is generally

presented as superwoman, who manages to do all the work at home and on the job (with the help of a product, of course, not of her husband or children or friends); or as the liberated woman, who owes her independence and self-esteem to the products she uses. These new images do not represent any real progress but rather create a myth of progress, an illusion that reduces complex sociopolitical problems to mundane personal ones.

Advertising images do not cause these problems, but they contribute to them by creating a climate in which the marketing of women’s bodies—the sexual sell and dismemberment, distorted body image ideal, and children as sex objects—is seen as acceptable.

This is the real tragedy, that many women internalize these stereotypes and learn their “limitations,” thus establishing a self-fulfilling prophecy. If one accepts these mythical and degrading images, to some extent one actualizes them. By remaining unaware of the profound seriousness of the ubiquitous influence, the redundant message, and the subliminal impact of advertisements, we ignore one of the most powerful “educational” forces in the culture—one that greatly affects our self-images, our ability to relate to each other, and effectively destroys awareness and action that might help to change that climate.

9

The Influence of Gender Socialization in Eating Disorders

DIANE E. TAUB AND PENELOPE A. MCLORG

Not everything we learn through the process of socialization has positive results. Consider eating disorders that result from the preoccupation many people, especially young women, have with body shape and weight. As Taub and McLorg note, in order to reduce this prevalent problem, we must consider the source of the negative body images and how to change the emphasis in the socialization process on ideal images.

As you read, think about the following:

1. *What messages do women and men receive about ideal body types, and from where?*
2. *What could be done to change the negative results of socialization, such as abuse, neglect, and unrealistic body images?*

GLOSSARY

Anorexia and bulimia nervosa Eating disorders that involve (1) self-starving and (2) bingeing and purging behaviors.

Internalization The process of making ideas and behavior patterns an integral part of one’s repertoire of behaviors.

Gender socialization Learning the gender roles expected in society.

Agents of gender socialization Ways gender expectations are passed on.

THE OCCURRENCE OF ANOREXIA nervosa (self-starvation) and bulimia nervosa (binge-purge syndrome) has recently been called epidemic (Gordon, 1988; Wiseman and others, 1992). As a risk group, females are much more likely than males to be affected, comprising approxi-

mately 90–95 percent of reported cases (Halmi, Falk, and Schwartz, 1981; Leichner and Gertler, 1988). This gender difference can be clarified by examining factors of gender socialization that relate to physical appearance.

Traditionally, more emphasis has been placed on females’ appearance than on males’ (Orbach, 1985; Schur, 1984). Women show awareness of this focus by being more concerned with their appearance than are men (Hayes and Ross, 1987; Pliner, Chaiken, and Flett, 1990). Physical appearance is also more crucial to self-concept among females than among males (Rodin, Silberstein, and Striegel-Moore, 1985). Whereas in men self-image is associated with skill and achievement, among women it is linked to physical characteristics (Hesse-Biber, Clayton-Matthews, and Downey, 1987). In terms of bodily appeal, males’ physical attractiveness is related to physical abilities, with their bodies valued for being active and functional. In contrast, females’ bodies are judged on the basis of beauty (Mishkind and others, 1986; Rodin and others, 1985).

One important consideration in appearance is body shape. Concerns about body shape expressed by women range from mild weight consciousness at one extreme to eating disorders at the other (Gordon, 1988; Rodin and others, 1985). As part of the socialization in the “cult of thinness” (Hesse-Biber and others, 1987, p. 512), females accept an ideal body shape and a corresponding need for weight control. Dissatisfaction from a failure to meet slim appearance standards as well as subsequent dieting behavior

have been identified as risk factors for the development of eating disorders (Drewnowski and Yee, 1987; Polivy and Herman, 1986; Striegel-Moore and others, 1986).

This reading examines the relationship between eating disorders and gender socialization. Our purpose is to demonstrate the important contribution female and male socialization makes to the social context of anorexia nervosa and bulimia nervosa, including the gender difference in occurrence. To illustrate the connections between gender socialization and eating disorders, we use the following framework: (1) ideal body shape, as a representation of gender norms, (2) role models and mass media messages, as agents of gender socialization, and (3) dieting, as an expression of gender socialization. Ideal body shape affects agents of socialization, which in turn reinforce ideal body shape. Both acceptance of ideal body shape norms and exposure to agents of gender socialization are expressed through dieting behavior; eating disorders are an extreme response.

Ideal Body Shape

Current appearance expectations specify thinness for women (Chernin, 1981; Garner and Garfinkel, 1980; Garner and others, 1980; Silverstein, Peterson, and Perdue, 1986). Slim bodies are regarded as the most beautiful and worthy ones; overweight is seen as not only unhealthy but also offensive and disgusting (DeJong, 1980; Ritenbaugh, 1982; Schwartz, Thompson, and Johnson, 1982). Although both males and females are socialized to devalue fatness, women are more exposed to the need to be thin (Rodin and others, 1985).

In contrast, males are socialized to be muscular and not skinny or weak (Dwyer and others, 1969; Leon and Finn, 1984; Mishkind and others, 1986; Polivy, Garner, and Garfinkel, 1986). In ratings by preadolescent, adolescent, and college-aged males, the mesomorphic or muscular male body type is associated with socially favorable behaviors and personality traits (Guy, Rankin, Norvell, 1980; Lerner, 1969). Compared with

endomorphs (plump) and ectomorphs (slender) individuals, mesomorphs are judged more likely to assume leadership, be assertive, and be most wanted as a friend. The devaluing of a thin body for males is also reflected in the frequent desire of preadolescent and teenage boys to gain weight and/or size (Collins, 1991; Dwyer and others, 1969; Huenemann and others, 1966; Striegel-Moore, Silberstein, and Rodin, 1986).

Among females, the orientation toward slimness is so established that even when they are not overweight, they frequently perceive themselves as such (Connor-Greene, 1988; Halmi, Falk, Schwartz, 1981). For example, although over 60 percent of college females believe that they are overweight, only 2 percent actually are (Connor-Greene, 1988). Over four out of five college women report that they want to lose weight (Hesse-Biber and others, 1987). In addition, college females underestimate the occurrence of being underweight. While 31 percent of college women are measured as underweight, only 13 percent think they weigh below weight norms (Connor-Greene, 1988).

Other results indicate that the ideal body shape of college women is significantly thinner than both their actual body type and what they perceive as most attractive to males (Fallon and Rozin, 1985). In a study of families, Rozin and Fallon (1988) show that mothers and daughters both want slimmer bodies than they currently have. Furthermore, the shape these females believe most attractive to males is thinner than what males actually prefer.

Collins (1991) has recently demonstrated that gender-based ideas of attractive bodies develop in children as young as 6 or 7 years. First-through third-grade girls select illustrations of their ideal figures that are significantly thinner than their current figures; this pattern is found across all levels of actual weight. Moreover, girls choose significantly slimmer figures than boys do for the ideal girl, ideal female adult, and ideal male adult (Collins, 1991).

Among females, learning to desire thinness begins at an early age. In general, females want to be slim and are critical of their weight, regardless of

their actual body size and weight. A similar concern for thinness in male bodies is not common among males (Collins, 1991; Connor-Greene, 1988; Fallon and Rozin, 1985; Hesse-Biber and others, 1987; Rodin and others, 1985; Rozin and Fallon, 1988). The inaccuracy with which females of all ages perceive their body shapes (Rodin and others, 1985) parallels the distorted body images held by individuals with eating disorders.

Agents of Gender Socialization

Images of ideal body shape affect agents of gender socialization, such as role models and mass media. In turn, these influences support expectations of body size. Reflecting gender socialization, traditional female role models and mass media messages express thinness norms for females.

ROLE MODELS

Examining patterns of ideal body shape, Garner and colleagues (1980) study the measurements of Miss America contestants over the twenty-year span from 1959 to 1978. Mazur (1986) and Wiseman and colleagues (1992) conduct similar analyses of contestants' dimensions covering the period of 1979 to the mid-1980s. Both Garner and co-workers (1980) and Mazur (1986) report decreases in bust and hip measurements of Miss America contestants over the study periods. However, waist dimensions demonstrate periods of increase, suggesting a less "hourglass-shaped" standard. Further, weight for height of Miss America contestants progressively declines (Garner and others, 1980; Mazur, 1986), with a trend from 1970 to 1978 for pageant winners to be thinner than the average contestant (Garner and others, 1980). Analyzing contestants' weight in relation to expected weight for their height and age, Wiseman and colleagues (1992) additionally find a significant decrease in the women's percentage of expected weight from 1979 to 1985.

Garner and colleagues (1980), Mazur (1986), and Wiseman and co-workers (1992) also examine the beauty ideal represented by *Playboy* centerfolds. As with Miss America contestants, bust

and hip dimensions decline and waist measurements rise from 1959 to 1978 (Garner and others, 1980). During the early 1980s, bust, waist, and hip dimensions of centerfolds decrease (Mazur, 1986). Centerfolds also show declines in weight for height between 1959 and the early 1980s (Garner and others, 1980; Mazur, 1986).

The trends of slenderization exhibited by both *Playboy* centerfolds and Miss America contestants illustrate the slimness norm. In fact, from 1979 through the mid-1980s, approximately two-thirds of these ideals of female beauty weighed 15 percent or more below their expected weight; maintaining such a weight level is one of the criteria for anorexia nervosa (Wiseman and others, 1992). Thus, the declining size of female figures considered admirable represents a body size reflective of an eating disorder.

Other female role models, such as movie stars and magazine models, have become less curvaceous over the past twenty to forty years (Morris, Cooper, and Cooper, 1989; Silverstein and others, 1986; Silverstein, Peterson, and Perdue, 1986). Hence, portrayals of females in media geared toward women as well as men demonstrate the thinness norm. The "anorectic body type" of models in major women's fashion magazines illustrates "an idealized standard of beauty and high fashion" (Gordon, 1988, p. 157). As preferred bodies, fashion models set an example of slimness that is unrealistic for most women. The majority of women are thus continually reminded of their inadequacy (Pliner and others, 1990) and kept "permanently insecure" about their appearance (Stannard, 1971, p. 125).

Women's socialization to be slim is also demonstrated by role models on television. In prime-time, top-ten Nielsen-rated television shows and their commercials, females are more likely to be thin than heavy and to be thinner than males (Kurman, 1978). A related study (Silverstein and others, 1986) of most-watched television programs demonstrates that 69 percent of the actresses and only 17.5 percent of the actors are slim. In addition, 5 percent of the women are evaluated as heavy, while over a quarter of the men are rated as such. These contrasts remain

over a range of ages of the performers (Silverstein and others, 1986).

Research on newspaper and magazine advertisements similarly indicates that male figures are generally portrayed as bigger than female figures (Goffman, 1979). Such representation of the size of men symbolizes their "social weight," in power, authority, or rank (Goffman, 1979, p. 28), as well as the positive valuing of a larger body in males (Schur, 1984). In contrast, females in print advertisements, along with other role models from beauty contestants to television and film actresses to fashion models, provide continual exposure to the thin female standard.

MASS MEDIA MESSAGES

Beyond displaying slim female role models for imitation, agents of gender socialization promote consciousness of weight and diet. Mass media messages encourage virtually uniform standards of beauty (Mazur, 1986), with messages directed toward females emphasizing the thin ideal. Surveying major women's magazines, Garner and colleagues (1980) find a significant increase in diet articles from 1959–1978. From 1979 to 1988, the same women's magazines show a leveling off in number of diet articles but an increase in articles on exercise as a strategy for weight loss (Wiseman and others, 1992). In addition, dieting and weight control listings in the *Reader's Guide to Periodical Literature* almost double from 1977 to 1986 (Hesse-Biber and others, 1987).

Media emphasis on a slim body standard for females is also illustrated in comparisons of female- and male-directed magazines. An analysis (Silverstein and others, 1986) of the most popular women's as well as men's magazines indicates significant differences in content of articles and advertisements. In women's magazines, ads for diet foods, and articles and advertisements dealing with body shape or size, appear 63 times and 12 times more often, respectively, than in men's magazines (Silverstein and others, 1986).

Similarly, Andersen and DiDomenico (1992) find that the most popular magazines among women aged 18 to 24 contain 10 times more ar-

ticles and advertisements on dieting or losing weight than do the most popular magazines among men aged 18 to 24. The focus on weight control in young women's magazines may have particular importance, as the late teens are a period of onset for both anorexia nervosa and bulimia nervosa (Leichner and Gertler, 1988; Mitchell and Pyle, 1988).

In addition to advertisements and articles on weight control, women's magazines surpass men's magazines in material concerning food. Articles on food and ads for food (excluding those for diet foods) in women's magazines exceed those in men's magazines by seventy-one to one (Silverstein and others, 1986). Thus, through this printed medium, females are being presented with conflicting messages. While food advertisements and articles encourage the consumption and enjoyment of food, diet aids and body shape ads and articles reinforce control of eating and weight. Popular magazines effectively maintain women's weight control preoccupation through their dual messages of "eat" and "stay slim." Moreover, although exposure to magazine advertising may be similar for individuals with and without eating disorders, anorexics and bulimics are especially likely to believe that advertisements promote the desirability of slimness (Peterson, 1987).

As agents of socialization, mass media and role models present a consistent portrayal of thin females in material directed toward both female and male audiences. Media preference for slimness in women is additionally shown in messages encouraging females' weight control efforts. Through their selective representation of thin women, these sources not only reflect the slim ideal body shape for females, but also strengthen this gender norm for appearance. Role models and mass media effectively reinforce females' acceptance of weight consciousness. The impact of these influences is to encourage and perpetuate women's repeated attempts to conform to the thin standard. A similar promotion or expression of a slimness ideal is not an aspect of the socialization experience of males (Andersen and DiDomenico, 1992; Bachman,

Johnson, and O'Malley, 1984; Drewnowski and Yee, 1987; Silverstein and others, 1986; Taub, 1986).

Dieting

Concerns about thin body size reflect gender socialization of females. With the role obligation of being visually attractive, women alter their bodies to conform to an appearance ideal. Dieting can be viewed as a response to the gender norm of slimness in females. Weight concerns and weight-loss efforts are so common among females that they have become norms (Rodin and others, 1985; Striegel-Moore, Silberstein, and Rodin, 1986). Nasser (1988, p. 574) terms dieting a "cultural preoccupation" among females, with considerations about weight and weight control persisting even into women's elderly years (Pliner and others, 1990). Females' continual efforts toward the thinness ideal are usually unsuccessful (Bennett and Gurin, 1982; Chernin, 1981; Silverstein and others, 1986).

Frequency of dieting is related to actual body size, as well as to ideal body size and the emphasis a woman places on the importance of attractiveness (Silverstein and Perdue, 1988). A history of dieting, beginning in the teen years, is common among anorexics and bulimics (Crisp, 1977b; Lacey, Coker, and Birtchnell, 1986). In fact, researchers consider dieting a "precondition" (Polivy and Herman, 1986, p. 328) or a "chief risk factor" (Drewnowski and Yee, 1987, p. 633) of eating disorders.

As shown in a Nielsen survey, 56 percent of all women aged 24 to 54 diet during the course of the year; 76 percent do so for cosmetic, rather than health, reasons (Schwartz and others, 1982). Even twenty-five years ago, high school senior females indicated that they dieted for reasons of "beauty or good looks," rather than for "physical fitness" (Dwyer and others, 1967, p. 1051). More recently among high school females, over half had dieted by the time they entered high school; and nearly 40 percent were currently dieting (Johnson and others, 1983). Another study demonstrates an even greater occurrence

of dieting in preadolescent girls. Half of 9-year-olds and nearly 80 percent of 10- and 11-year-olds indicate that they have dieted (Stein, 1986). With dieting so common among girls and women, it is not surprising that "serious dieting" in females is seen as "normal" (Leon and Finn, 1984, p. 328).

Compared with young females, young males are much less likely to diet. In one sample, 10 percent of boys versus 80 percent of girls had been on a diet before the age of 13 (Hawkins and others, cited in Striegel-Moore and others, 1986). Similarly, 64 percent of first-year college females, but only 29 percent of first-year males, followed a reduced-calorie diet in the previous month (Drewnowski and Yee, 1987). The gender difference regarding dieting behavior is additionally shown by the more frequent use of over-the-counter diet pills by high school senior women. In a nationwide sample, 1 in 3 high school senior women had taken diet pills in the previous year, compared to 1 in 10 men. Moreover, 2 in 100 females use diet pills daily, while only 1 in 1000 males report daily use (Bachman and others, 1984). High school senior women are also much more likely than their male classmates to use prescription amphetamines without a physician's orders for the purpose of losing weight (Taub, 1986).

Overall, studies demonstrate that females of differing ages frequently diet or engage in other weight loss behavior. In addition, females are much more likely than males to pursue weight loss through various methods. The extent and persistence of females' dieting efforts indicate the acceptance of the thin ideal. As an expression of gender socialization, dieting also reveals exposure to both role model and mass media promotion of slimness. Anorexia nervosa and bulimia nervosa represent extreme responses to female socialization toward thinness, with dieting usually preceding an eating disorder.

Conclusion

The influence of gender socialization in anorexia nervosa and bulimia nervosa is suggested by the

gender distribution of the syndromes, with occurrence at least ten times higher among females than males. In their connections with appearance expectations, eating disorders illustrate normative elements of female socialization. For example, females' weight loss efforts can be attributed to the greater importance of appearance in evaluations of women than of men; women's figures are more emphasized and more critically assessed (Mishkind and others, 1986; Rodin and others, 1985; Schur, 1984).

As agents of gender socialization, role models and mass media are affected by, and support, notions of ideal body shape. Beauty queens, *Playboy* centerfolds, fashion models, and female television and movie characters are predominantly slender (Garner and others, 1980; Kurman, 1978; Mazur, 1986; Morris, Cooper, and Cooper, 1989; Silverstein and others, 1986; Silverstein, Peterson, and Perdue, 1986; Wiseman and others, 1992). Such role models serve as ideals for the female body shape. In addition to promoting the slimness standard, nude layouts and beauty contests epitomize the viewing of women as objects, with women's bodies judged according to narrow beauty standards (Schur, 1984).

Also supporting the expectation of thinness in females are the numerous articles and advertisements on diet aids and body size in women's magazines (Andersen and DiDomenico, 1992; Garner and others, 1980; Silverstein and others, 1986; Wiseman and others, 1992). These media messages especially promote dieting behavior when accompanied by ample food articles and advertisements that encourage individuals to eat. Although females may enjoy "forbidden" food, they are continually reminded of the need to be thin. This double-edged message of "enjoy eating but control your weight" reinforces dieting.

A low rate of success for dieting (Bennett and Gurin, 1982; Chernin, 1981), combined with consistent pressure to be slim, results in repeated weight-loss efforts by females. Such manipulations of eating and body shape illustrate the tendency of females to view their bodies as objects, subject to modification for an attractiveness standard (Rodin and others, 1985; Schur, 1984).

While dieting reflects acceptance of gender norms for body shape, anorexia nervosa and bulimia nervosa represent extreme examples of gender socialization toward slimness.

Women's concerns with body shape range from mild weight consciousness to fully developed eating disorders (Gordon, 1988; Rodin and others, 1985). Individuals with eating disorders exemplify "weight phobia" (Crisp, 1977a), and can be viewed as extensions of the slim body ideal for females (Nasser, 1988; Rodin and others, 1985). Understanding of the gender distribution of anorexia nervosa and bulimia nervosa can be expanded by examining linkages with elements of gender socialization. Analysis of these factors is crucial for explaining the social context in which eating disorders occur.

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QUESTIONS FOR DISCUSSION

For further discussion of this topic, see the Wadsworth Sociology Resource Center, “Virtual Society,” <http://sociology.wadsworth.com>, under *Sociological Footprints*, by Cargan and Ballantine. You can respond to the discussion questions there or enter your own comments in the online chat forum.

SUGGESTED READINGS AND SOCIOLOGY INTERNET RESOURCES

See the Wadsworth Sociology Resource Center, “Virtual Society,” <http://sociology.wadsworth.com>, for additional links, suggestions for further reading, and learning tools related to this chapter.

Either from the “Virtual Society” website or directly from your web browser, you may access InfoTrac College Edition, an online university library that includes over 700 popular and scholarly journals in which you can find articles related to the topics in this chapter.

CHAPTER 3

Culture

WHY WE DO THINGS THE WAY WE DO



HUMAN BEHAVIOR IS BOTH PATTERNED AND orderly because within our society we are taught to follow similar rules of behavior (*norms*) and to cherish similar objects and behaviors (*values*). These similarities create the culture of a society: *its total way of life*. In Chapter 2 Kingsley Davis noted that the importance of culture is indicated by the fact that most human behavior is learned within a cultural context (Reading 5).

It is through *cultural relativism*—looking at other cultures in an objective manner—that we attempt to understand learned cultural patterns and behaviors by considering the functions they serve for society. In the first reading in this chapter, Horace Miner gives us an anthropological look at what appears to be a “primitive” group by examining the societal needs served by the unusual attitude of the Nacirema toward the human body. If, while reading this selection, you feel glad to be an American while