



Interpreting Weight

THE SOCIAL
MANAGEMENT
OF FATNESS
AND THINNESS

Jeffery Sobal
Donna Maurer
Editors

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Preface

What is “too fat”? What is “too thin”? Interpretations of body weight vary widely across and within cultures. Meeting cultural weight expectations is a major concern for many people because failing to do so may incur dire social consequences, such as difficulty in finding a romantic partner or even finding adequate employment. Attaining an “ideal weight” is a social achievement. Without cultural expectations and sanctions, and without the pressures of social interactions with family, friends, co-workers, and acquaintances, body weight would only be a health issue. While socially constructed standards of acceptable body weight may seem immutable, they are re-created continuously through social interaction. Social interactions can perpetuate or transform social expectations about body weight.

Understanding social constructions of body weight requires insight regarding how people develop and use constructions in their daily lives. While structural conditions and cultural environments make important contributions to weight constructions, the chapters in this book focus on the *social processes* in which people engage while they interpret, negotiate, resist, and transform cultural definitions and expectations. As such, most of the chapters in this volume borrow from and contribute to a symbolic interactionist perspective.

THE SOCIAL CONSTRUCTION OF BODY WEIGHT AND SYMBOLIC INTERACTIONISM

Social constructionist thinking occurs in many forms, with symbolic interactionism as a core theoretical perspective. Symbolic interactionists are concerned with the production of meanings and the creation and social management of selves. In addition, they examine how people construct definitions and preferences in the course of human interaction. This approach contrasts with a “social facts” or objectivist perspective, which focuses on documenting and explaining the existence of social phenomena primarily through quantitative analyses and interpretations (Ritzer 1975).

This brief overview addresses some of the basic concepts used by authors in this volume.

HUMAN AGENCY, MEANING, AND INTERPRETATION

A central concept in symbolic interactionism (as well as in this book) is human agency: each person's potential capacity to make choices and to affect others' actions, despite the constraints imposed by large, pervasive structural realities. While agency can be a problematic theoretical variable (Alexander 1987; Emirbayer and Mische 1998), it is key to symbolic interactionism and other related perspectives (including many forms of social constructionism, social phenomenology, and humanist sociology) because it suggests that human actions are not determined only by social structure. Humans are creative beings fully capable of initiating and carrying out positive social changes.

Exerting agency, however, necessitates an understanding of the social environment, which is discovered through the interpretation of meanings. Meanings do not reside within individuals; they are social phenomena made possible by a common language. "Symbolic interactionism sees meanings as social products, as creations that are formed in and through the defining activities of people as they interact" (Blumer 1969:5). Meanings become solidified through habituated social interaction and often become taken for granted (Berger and Luckmann 1966). Hence, people often act upon these meanings as if they are objectively real. As W. I. Thomas wrote, "If men define situations as real, they are real in their consequences" (1966:301). If people define themselves as "overweight" with reference to a shared cultural ideal, they are likely to act on the basis of this definition, by perhaps dieting, wearing certain clothes, or acting as they believe an "overweight" person should act. When people regard socially constructed meanings as facts, they sustain and perpetuate these meanings as seemingly objective reality.

Shared meanings do not necessarily perpetuate cultural beliefs and standards, however. When people share a social world, they can negotiate joint lines of action that generate new meanings. These emergent meanings can have behavioral consequences. As social meanings about ideal body weight shift, people may interpret their social environments and personal experiences differently. For example, within certain social groups, "fatness" may shift from a pejorative to a neutral term, leading their members to define themselves differently and to act in accordance with these new definitions. Accepting an emergent definition of "fat acceptance" may lead a person to abandon dieting rituals and to focus on personal qualities and characteristics other than body weight.

SELF AND IDENTITY

Symbolic interactionism also deals with the creation and re-creation of the self. "All interactionists . . . agree that self is not an object that has inherent meaning, but is a construct that is given meaning through an actor's choices, mediated by the relationships, situations, and cultures in which she or he is embedded" (Fine 1993:78). The "self" is not innate or static, but an emergent social product created through interacting with others (Charon 1998). Like all other social objects, the self is socially defined; hence one's self is, in part, created by others in the social environment. These social responses contribute to a person's *identity*, how one sees oneself and how others view and categorize one as being a particular *type* of person. While the *self* may include a broad set of perceptions about who one is, one's *identity* tends to be more specifically grounded in socially constructed cultural categories (Cerulo 1997). For example, a person may identify or be identified by others as a fat person or someone with anorexia nervosa.

Cultural consensus develops around the interpretation of specific identities, with some identities preferable to others. For example, being fat in most Western societies is an undesirable, stigmatized identity associated with negative personal characteristics (Sobal 1999). Possessing a stigmatized identity requires social management to lessen the negative responses of others (Goffman 1963). Those with stigmatized identities may engage in behaviors that lessen the magnitude of their negatively perceived characteristic. For example, a culturally defined fat person may dress to diminish the size of her appearance, or may eat less in public to assuage people's negative comments (Zdrowski 1996).

Self and identity, then, affect people's choices as they present themselves to the world in ways congruent with their self-definitions. People effect presentations of self as they attempt to engage in effective role performances, emphasizing the most desirable aspects of their identities and minimizing the least desirable ones. As people define situations and the attendant social identities of others with whom they interact, they serve as both actors and audiences in a variety of social settings (Cahill 1998). Effective performances are key to managing any social stigma, as social interactions provide opportunities for stigmatized individuals to redefine themselves, both personally and socially.

CONCLUSION

A symbolic interactionist perspective contributes to our understanding of social constructions of body weight because it focuses our attention on

the microlevel, interactive, and processual aspects of human life. Social constructions exist within a culture and often are perpetuated by those with economic interests, providing a common set of social meanings that people interpret, respond to, and potentially can transform. A symbolic interactionist perspective provides insight into the various dimensions of these social processes.

Donna Maurer
Jeffery Sobal

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I

INTRODUCTION



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1

The Social Management of Fatness and Thinness

DONNA MAURER and JEFFERY SOBAL

People manage their appearance, particularly their weight, in order to make attractive social presentations and obtain positive social reactions. Many strive to manage appearance through weight control because thinness is widely valued and rewarded in contemporary postindustrial societies. Yet how do people construct their weight-related identities and manage them in social situations? How is the ideal presentation of weight shaped by social and cultural contexts? What roles do organizations play in shaping weight ideals? Are reinterpretations of cultural expectations about body weight possible? The chapters in this volume explore these various questions, focusing on the symbolic and interpretive processes involved in managing fatness and thinness. In the following sections, we provide a thematic overview of the chapters in this book.

WEIGHT IDENTITIES

People construct and shape their personal identities through social interaction (Mead 1934). Weight identities are continually open to change. This is particularly evident when someone experiences dramatic weight loss (English 1993). For example, people who lose large amounts of weight undergo a dramatic process of identity change, using informal personal and social rituals to ease the transition and to mark their new status (Rubin, Shmilovitz, and Weiss 1993). This identity change process depends on status cues in the social environment, which are messages that indicate to a person how fat others perceive him or her to be (Degher and Hughes 1991). When external cues do not match a person's internal perception of how he or she appears to others, the person "recognizes" the

inappropriateness of the previous identity and constructs a new one. In this volume, Douglas Degher and Gerald Hughes elaborate on the development of a fat identity through the use of internal and external cues, and explain five major ways of coping that people use to minimize the negative effects of possessing a fat identity. People use these coping methods to socially manage their stigmatized identity.

While the social management of the stigma of obesity may focus on the neutralization of negative characteristics associated with the stigma (English 1991), it also may include resistance to the application of a deviant identity or label. Gina Cordell and Carol Rambo Ronai's chapter explains how some stigmatized individuals use narrative resistance to manage their identities and protect themselves from the "external cues" described in the chapter by Degher and Hughes. The authors show how stigmatized individuals, by distancing themselves from people they perceive as fat and the negative attributes associated with them, attempt to resist a deviant identity. In a further analysis of resisting deviant identity, the chapter by Leanne Joannis and Anthony Synnott also articulates a variety of ways in which large people react to and resist stigmatization, including forms of active, passive, and reflective resistance. The chapters in this section all address the ways stigmatized individuals develop their identities and manage the social reactions of others.

REDEFINING WEIGHT

Weight-related constructions are malleable and shaped by cultural environments, social organizations, experts, and individuals (Fallon 1990). Obesity and eating disorders, for example, are seen as culture-bound syndromes that reflect culture-specific meanings and norms (Ritenbaugh 1982; Swartz 1985). Expectations regarding ideal body weight within a particular culture also depend on a variety of social statuses, including gender, ethnicity, and socioeconomic status (Sobal 1991). Ideal weights and ways of obtaining them are not objective facts, but constructed ideals and prescriptions. The chapters in this section suggest that body weight ideals and ways to achieve them are open to negotiation and reinterpretation. They also point to variations in the ways broader cultural discourses influence interpretive processes.

For many people, especially women, weight control is an ongoing project (Germov and Williams 1996). At any given time, as many as sixty-five million Americans may be dieting, with more than seventeen thousand different weight loss plans from which to choose (Hesse-Biber 1996:39).

Increasingly, however, commercial diet programs seem to be attracting fewer customers (Fraser 1997), while people are engaging in more diffuse weight control practices that may or may not include conventional dieting (Levy and Heaton 1993). In this volume, Gwen E. Chapman analyzes how many people may be shifting from dieting for weight loss to “healthy eating” for weight control. These two discourses on body weight are interrelated, although the “healthy eating” discourse emphasizes permanent lifestyle changes rather than the temporary eating plan promoted by most diets. She proposes that dissatisfaction with the success of conventional diet plans, as well as other discursive shifts within government-sponsored health and nutrition programs and the mass media, have all contributed to an environment in which the “healthy eating” discourse has emerged.

The medical and psychological professions possess a profound capacity to structure the mainstream discourse on fatness and thinness, medicalizing weight and defining the clinical categories for obesity and eating disorders (Sobal 1995). These clinical categories ultimately can affect how diagnosed individuals perceive themselves and the ways they are treated by others. As Susan Haworth-Hoepfner describes in her chapter, medical discourse on eating disorders does not necessarily reflect people’s lived experience. While medical discourse sets up a dichotomy between “normal body image” and “abnormal body image” to describe people’s self-perceptions, she finds that body image and body satisfaction exist more as a continuum than as dual categories. All of her study participants (clinically defined anorectic, self-defined anorectic, and nonanorectic) expressed degrees of dissatisfaction with their appearance and weight. Her research raises important questions about how medical professionals define normal body image.

Definitions of weight depend on specific cultural contexts. Weight definitions change throughout the life course (Gordon and Tobias 1984), but they are especially evident during life transitions. During these times, our attention to body weight and appearance are especially heightened. Cultural expectations regarding people’s weight may change to accommodate changes in their social roles. As people move from one role to another, they often engage in public presentations that mark these transitions. Jeffery Sobal, Caron Bove, and Barbara Rauschenbauch focus on one important social ritual—weddings—to explain how participants (especially brides) construct expectations regarding body weight through three sets of interacting social processes: interpretation and definition; negotiation and management; and performance and presentation. Their chapter draws attention to the influence of cultural expectations on the social processes involved in the construction of body weight.

ORGANIZATIONAL PROCESSES IN WEIGHT MANAGEMENT

Social organizations provide opportunities to negotiate, interpret, and solidify meanings about weight that exist within the culture. People often seek membership in organizations in order to bond with others who share common experiences. Weight loss organizations, for example, provide various "latent social services" to their members by enabling them to "let off steam," and by providing social support and opportunities to gain practical knowledge about dieting (Allon 1975). These organizations offer their members sets of meanings that they may use to define themselves and others, and they may employ a variety of strategies to motivate their members to lose weight (Laslett and Warren 1975).

Weight-related organizations often provide blueprints for understanding and reconstructing the self. Such organizations may play an important role in the process of "dramatic self-change" (Athens 1995). In this volume, Rebecca J. Lester identifies Overeaters Anonymous (OA) as a "technology of the self" that people may use to reshape their inner lives and describes how the OA recovery process may reinforce cultural values that uphold disordered eating patterns. Lester explains that the philosophy of OA is not focused on changing specific compulsive eating behaviors, but on reforming "sick" selves into "healthy" selves.

While weight-related organizations may offer some unique interpretations of cultural meanings, Karen Honeycutt's chapter suggests that women involved in highly divergent groups with contrasting ideologies—a size acceptance organization and a weight loss organization—as well as women involved in neither group, share some common weight interpretations. As in Haworth-Hoepfner's chapter earlier in this volume, Honeycutt finds that all women in her study, regardless of organizational affiliation, are intensely preoccupied with weight. Her chapter considers the difficulties that organizations may experience when trying to transform dominant cultural expectations about weight.

College athletic teams may not be immediately perceived as weight-related organizations, yet the performance demands upon college athletes often lead them to be highly preoccupied with food and dieting (Brownell, Rodin, and Wilmore 1992; Marquart, Koszewski, and Sobal 1994). In her chapter, Elizabeth Ransom describes how the structure and environment of women's collegiate cross-country track teams lead female athletes to be preoccupied with weight and at risk for developing eating disorders. For many of the women in her study, the desire to appear both feminine and athletic sets up contradictory demands that are difficult to reconcile. Along with the other organizations discussed in this section, college athletic teams provide a set of legitimated meanings that their members are expected to appropriate.

REINTERPRETING WEIGHT

Although current cultural standards of body weight may appear to be immutable, new interpretations of these standards frequently emerge. Certainly, those who have the power to set and shape weight standards can use their capacity to effect new definitions (Sobal 1995), but less influential individuals and small groups also can reinterpret extant definitions and create new ones. For example, as demonstrated in earlier chapters in this volume, weight-stigmatized individuals can resist negative social responses and expectations. The chapters in the final section demonstrate in more detail how reinterpretations of weight are possible at both micro- and macrolevels. Thomas F. Cash and Robin E. Roy explain the concept of body image as a key component of the self and articulate some of the ways a negative body image may be reinterpreted into a more positive one through educational efforts. While people certainly can benefit directly by developing a more positive body image, this positive body image can best be sustained in a cultural environment that accepts people regardless of body size. In the final chapter, Jeanine C. Cogan outlines how people can work toward a shift in the dominant cultural paradigm regarding body weight. As definitions of "ideal weight" change, so can the accompanying social consequences, making it easier for people to maintain a positive body image.

CONCLUSION

All of the chapters in this volume demonstrate the centrality of body weight to people's everyday lives. Various chapters elaborate different concerns about the social management of fatness and thinness, using, developing, and extending important sociological concepts to examine the connections between social interaction, culture, and social structure.

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II

WEIGHT IDENTITIES



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2

The Adoption and Management of a “Fat” Identity

DOUGLAS DEGHER and GERALD HUGHES

The interactionist perspective plays an important part in contemporary identity theory. At its core is an emphasis on “process” rather than viewing identity as a static entity. Attention is focused on the interaction between the individual and others and the consequences of this for conceptions of identity.

This chapter examines two crucial issues in the analysis of identity and its relationship to weight management: (1) how people come to think of themselves as “fat” and thereby adopt a “fat” identity; and (2) how individuals cope with the problematic interactions that arise with the adoption of a fat identity. By identity, we refer to the internalization of societal conceptions regarding specific statuses. In this case we focus on obesity. The adoption of a *fat* identity involves the internalization of external and internal status cues that transmit to the individual societal conceptions about being fat. Individuals then use these cues to recognize that they do not possess a “normal” body build. The next step in the process involves “placing” one’s self into a more appropriate category. Once placing occurs, the individual must deal with the pejorative aspects of this identity. The second section of this chapter focuses on the techniques and mechanisms obese individuals use to cope with the problematic interactions they confront.

The data in this chapter are drawn from research that was conducted upon members of a national weight reduction organization. Two types of data were collected for this study: field observations performed while attending meetings of a weight control organization, and in-depth interviews of group members. Interviews were conducted with twenty-nine members and yielded more than six hundred pages of typed transcript. This material was coded and subjected to a form of grounded analysis that

generated the conceptions of "identity" presented here and in two earlier articles (Degher and Hughes 1991; Hughes and Degher 1993).

"FAT" AS A DEVIANT IDENTITY

Obese individuals possess a "spoiled identity" (Goffman 1963). They suffer both externally from discrimination based upon negative stereotypes, and internally from negative self-concepts.

One of the most significant social consequences of obesity is that it is a condition for which there are many negative stereotypes. Studies of school-age children have consistently found that the overweight child is the least liked, has the fewest friends, and is attributed the greatest number of negative personality characteristics (Dion and Berscheid 1974; Caskey and Felker 1971; Lerner 1969; Lerner and Gellert 1969; Lerner and Schroeder 1971; Penick and Stunkard 1975; Staffieri 1967). The severity of the situation is highlighted by the fact that in studies of children, even obese children accept and often internalize these negative stereotypes (Alexander 1968; Lerner and Gellert 1969, Lerner and Schroeder 1971; Mendelson and White 1985; Penick and Stunkard 1975; Stunkard and Mendelson 1961).

In the area of sexuality, obese individuals, especially obese females, are far less likely to be perceived as desirable sexual partners (Regan 1996). One recent study found that men were less likely to respond to personal advertisements in which the woman was represented as obese than they were when she was represented as having a history of drug addiction (Sitton and Blanchard 1995).

Obese people are not only the subject of negative stereotypes, they also are actively discriminated against in college admissions (Canning and Mayer 1966), pay more for goods and services (Petit 1974), receive prejudicial medical treatment (Maddox, Back, and Liederman 1968; Maddox and Liederman 1969; McArthur and Ross 1997), are treated less promptly by salespersons (Pauley 1989), have higher rates of unemployment (Laslett and Warren 1975), are less likely to be promoted (Baum 1987), and receive lower wages (Register 1990).

In response to the negative externally held stereotypes, most obese individuals have a poor self-concept, suffer from low self-esteem, and have extreme body dissatisfaction (Alexander 1968; Allison et al. 1995; Cahnman 1968; Greenberg and LaPorte 1996; Grilo, Wilfley, Brownell, and Rodin 1994; Grogan and Wainwright 1996; Martin, Housley, and McCoy 1988; Mendelson and White 1985; Pauley 1989; Schumaker, Krejci, and Small 1985; Stein 1987; Striegel-Moore, Schreiber, Pike, Wilfley, and Rodin 1995; Wadden, Foster, and Brownell 1984).

Being labeled "fat" in our society clearly fits Becker's description of a "master status":

Some statuses in our society, as in others, override all other statuses and have a certain priority. . . . [T]he status deviant (depending on the kind of deviance) is this kind of master status. . . . [O]ne will be identified as a deviant first, before other identifications are made. (1963:33)

Obese people are "fat" first, and only secondarily are seen as possessing ancillary characteristics. The focus of the first part of this chapter is on how individuals develop such a devalued and stigmatized identity.

ADOPTING A FAT IDENTITY: THE IDENTITY CHANGE PROCESS

In conceptualizing how a person adopts a fat identity, it is useful to employ the concept of "career." An important aspect of this career model is career contingencies, which are

those factors on which mobility from one position to another depends. Career contingencies include both the objective facts of social structure, and changes in the perspectives, motivations, and desires of the individual. (Becker 1963:24)

Thus, the "identity change" process must be viewed on two levels: public (external) and private (internal):

One value of the concept of career is its two-sidedness. One side is linked to internal matters held dearly and closely, such as image of self and felt identity; the other side concerns official position, jural relations, and style of life and is part of a publicly acceptable institutional complex. (Goffman 1961:127)

On the public level, social statuses exist as part of the public domain. These social statuses are both socially defined and promoted. The social environment not only contains definitions and attendant stereotypes for each status, it also contains information, in the form of *status cues*, about the applicability of that status for the individual.

On the internal level, two distinct cognitive processes must take place for the identity change process to occur: first, the individual must come to recognize that the current status is inappropriate; and second, the individual must locate a new, more appropriate status. In response to the external

status cues, the individual comes to internally recognize that the initial status is inappropriate, and locates a new, more appropriate status. Thus, identity change occurs in response to and is mediated through status cues in the social environment.

Status Cues: The External Component

Status cues make up the public or external component of the identity change process. A status cue is some feature of the social environment that contains information about a particular status or status dimension. Status cues provide information about whether or not the individual is "fat," and if so, how "fat."

"Recognizing" and "placing" comprise the internal component of the identity change process and occur in response to and are mediated through the status cues. To fully understand the identity change process, it is necessary to explain the interaction between outer and inner processes (Scheff 1988).

Status cues are transmitted in two ways: actively and passively. Active cues are communicated through interaction. For example, an individual is informed by peers, friends, spouse, etc. that he or she is overweight. The following are typical comments that occurred repeatedly in the interviews in response to the question, How did you know that you were fat?:

That's when it started. I would say maybe ten or fifteen pounds overweight. I was starting to be called chubby, and being teased in school.

When my mother would take me shopping, she'd get angry because the clothes that were supposed to be in my age group wouldn't fit me.

A second category of cues might be accurately described as passive. The information in these cues exists within the environment, but the individual must in some way be sensitized to that information. Such passive cues might involve standing on a scale, seeing one's reflection in a mirror, standing next to others, fitting in chairs, or, as frequently mentioned by respondents, the sizing of clothes. The comments below are representative of passive cues.

I think that it was not being able to wear the clothes that the other kids wore.

I would see all these ladies come in and they could wear size 11 and 12, and I thought, Why can't I do that? I should be able to do that.

Both active and passive cues serve as mechanisms for communicating an understanding about a specific status. Events occur that force the individual to evaluate conceptions of self.

Recognizing

The term "recognizing" refers to the cognitive process by which an individual becomes aware that a particular status is no longer appropriate. As diagrammed in Figure 2.1, the process assumes the individual's acceptance of some initial status. For obese individuals, the initial status is that of "normal body build." This assumption is based on the observation that none of our interviewees assumed that they were "always fat." Even those who were fat as children could identify the time in their career when they became aware that *they* were "fat." Through the perception of discrepant status cues, the individual comes to recognize that the initial status is inappropriate.¹

An important point is that the acceptance (or rejection) of a particular status does not occur simply because the individual possesses a set of *objective characteristics*. As a case in point, two people may have similar body builds, and though one may have a self-definition as "fat," the other may not. There appears to be a rather tenuous connection between objective condition and subjective definition. The following comments are supportive of this disjunction.

I was really, as far as pounds go, very thin, but I had a feeling about myself that I was huge.

Well, I don't remember ever thinking about it until I was about in eighth grade. But I was looking back at pictures when I was little. I was always chunky, chubby.

This lack of necessary connection between objective condition and subjective definition points to an important and frequently overlooked feature of social statuses: the extent to which they are *self-evident*. Self-evidentiality refers to the degree to which a person, who possesses certain objective status characteristics, is *aware* that a particular status label applies to them.

Some statuses possess a high degree of evidentiality. Gender identification is one of these. We are referring here to the physiological description

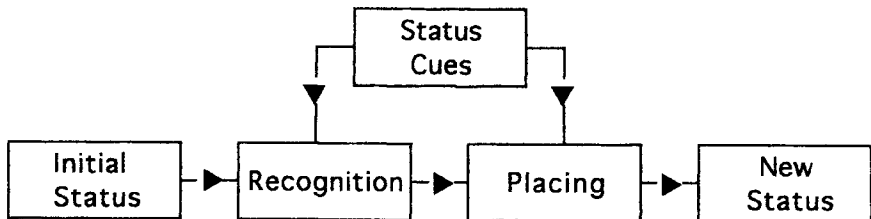


Figure 2.1. Visualization of the identity change process (ICP).

of being male or female. We realize that gender roles are much less self-evident. On the other hand, being beautiful or intelligent is somewhat non-self-evident. This is not to imply that individuals are ignorant of the statuses or the characteristics that they are assigned. A person may know that some people are intelligent, and may apply that designation to others, and yet they may be unaware that the label applies to them.

One idea that emerged quite early from the interviews is that being "fat" is a relatively non-self-evident status. Individuals do not always recognize that "fat" is a description that applies to them. Conversely, a number of individuals thought of themselves as "fat" or "obese," and were objectively "normal." In this case, the existence of objective indicators was insufficient to prevent the individual from adopting a fat identity. The objective condition of being overweight is not sufficient to promote the adoption of a fat identity. This non-self-evidentiality is demonstrated in the following interview excerpts:

I think that I just thought that I was a little big here and there. I didn't think of it, and I didn't think of myself as looking bad. But you know, I must have.

I have pictures of me right after the baby was born. I had no idea that I was that fat.

The self-evidentiality of a status is important in the discussion of the identity change process. The less self-evident a status, the more difficult the recognizing process becomes. Further, since recognition occurs in response to status cues, the self-evidentiality of a status will influence the type of cues that play the most prominent role in identity change.

Recognizing, for our subjects, occurred primarily through active cues. When passive cues were involved, they typically involved highly visible and unambiguous cues. In general, the active cues appear to be more potent in forcing the individual's attention to the information that the current status is inappropriate. The predominance of these active cues may be a consequence of the relatively non-self-evident character of the "fat" status. The less self-evident a status, the more likely that the recognizing process will occur through active, rather than passive cues.

Once the individual recognizes the inappropriateness of an initial status, it becomes necessary to locate a more appropriate one. This search for a more appropriate status is referred to as the "placing" process.

Placing

Placing refers to a cognitive process whereby an individual comes to identify an appropriate status from among those available. The number of status categories along a status dimension influences the placing process. A status dimension may contain from two to an infinite number of status

categories. If there are only two status-dimensional categories, such as in the case of gender, the placement process is more or less automatic. When an individual recognizes that he or she does not belong in one category, the remaining category becomes the obvious alternative. The more status categories, the more difficult the placing process becomes.

The body build dimension contains an extremely large number of categories. When an individual recognizes that he or she does not possess a "normal" body build, there are innumerable possible alternatives. The knowledge that one's status lies toward the "fat" rather than the "thin" end of the continuum still presents a wide range of choices. In everyday conversation, we hear depictions of these alternatives: Chubby, porky, plump, hefty, full-figured, beer belly, love handles, etc. All are informal descriptions reflecting the myriad categories along the body build dimension:

I wasn't real fat in my eyes. I don't think. I was just chunky.

Not fat. I didn't exactly classify it as fat. I just thought, I'm, you know, I am a pudgy lady. I don't think that I have ever called myself fat.

I have called myself heavy.

Even when individuals adopt a fat identity, they attempt to make distinctions about how "fat" they are. Since being fat is a devalued status, individuals attempt to escape the full weight of the negative attributes, while still acknowledging the nonnormal status. The following response exemplifies this attempt to neutralize the pejorative "fat" status. The practice of differentiating one's status from others becomes vital in managing a fat identity. As one respondent remarked to a question by the interviewer:

Q. How did you know that you weren't that fat?

A. Well, comparing myself to others at the time, I didn't really feel that I was that fat. But I knew maybe because they didn't treat me the same way they treated people who were heavier than me. You know, I got teased lightly, but I was still liked by a lot of people, and the people that were heavy weren't.

As is apparent from this excerpt, the individual neutralized self-image by linking "fatness" with the level of teasing by peers.

New Status

The final phase of the identity change process involves the internalization of a negative (deviant) definition of self. For many fat people, accepting a new status brings with it a significant number of personal and public