

September 26, 2004

Self-Esteem and the Stigma of Obesity

Jennifer Crocker

Julie A. Garcia

University of Michigan

Self-Esteem and the Stigma of Obesity

Americans are becoming increasingly overweight. Currently, 127 million (64.5%) adults, in the U.S. are overweight, 60 million (30.5%) are obese, and 9 million (4.7%) are severely obese (*Obesity in the U.S.*, 2002). Yet, even as more Americans become overweight, the standard for attractiveness remains thin and fit (Fallon, 1990), and overweight people are stereotyped as lazy, lacking self-discipline, and mentally slow (Allon, 1982). As the chapters in this volume document, people who are overweight face discrimination in employment, housing, and relationships. In contrast to many stigmatizing conditions, overweight persons are stigmatized by close others, including friends and family members. Even parents discriminate against their overweight children; one study found that parents of overweight daughters were willing to pay less for their daughter's college education than parents of normal weight daughters (Crandall, 1995). Even the overweight themselves dislike people who are overweight (Crandall, 1994).

Our goal in this chapter is to examine the implications of stigmatization of the overweight for self-esteem. In light of the harsh stereotypes and discrimination they face, it seems sensible to assume that overweight people internalize these negative views and suffer from low self-esteem. Yet, studies comparing the self-esteem of overweight and normal weight people have yielded mixed results (see Friedman & Brownell, 1995; Jarvie, Lahey, Graziano, & Framer, 1983, for reviews). A recent meta-analysis found that, across studies, the correlation between *self-perceived weight* and self-esteem was much stronger ($r = -.34$) than the correlation between *actual weight* and self-esteem ($r = -.12$; (Miller & Downey, 1999), suggesting that in some cases, low self-esteem may cause people to see themselves as overweight, rather than the stigma of overweight causing them to have low self-esteem. There is considerable variability in the self-

esteem of overweight people; some people are very vulnerable to the stigma of overweight, whereas others seem unfazed by it. Our first aim, then, is to explore what makes some overweight people vulnerable to low self-esteem, and how other overweight people protect their self-esteem in the face of stigma and discrimination.

Our second aim is to explore the consequences of both the beliefs and strategies that make some overweight people vulnerable to low self-esteem, and the beliefs and strategies that protect the self-esteem of other overweight people. We argue that whether or not overweight persons deflect stigma and protect self-esteem, or internalize it and damage self-esteem, there are costs for both the self and others. Essentially, we suggest that there are costs when overweight people *question* whether their weight makes them worthless, regardless of whether their ultimate resolution to this question is favorable or unfavorable to the self. Our third aim is to suggest how overweight people can respond to stigma in a way that enables them to achieve their most important goals.

Vulnerability and Protective Factors

Why do some overweight people have self-esteem that is vulnerable to stigma, and what makes other people resilient to this stigma? In our research, we have explored three types of beliefs that predict whether overweight people internalize stigma or deflect it: whether negative reactions from others are attributed to prejudice and discrimination, the perceived controllability of weight (and related beliefs), and beliefs about what one must be or do to have value and worth.

Attributions to prejudice. Our first research on self-esteem and stigma of overweight was part of a broader program of research testing the hypothesis that when stigmatized people experience negative outcomes such as rejection or discrimination, their self-esteem is protected when they attribute the negative outcome to prejudice, instead of to their own personal lack of

deserving (Crocker & Major, 1989). In research examining the effects of a male evaluator's criticism of an essay on women, and a white student's social rejection of an African-American, we found that students who could attribute the negative outcome to gender or racial prejudice had more positive affect and higher self-esteem after receiving negative feedback than those who could not attribute it to prejudice (Crocker, Voelkl, Testa, & Major, 1991). This research was consistent with our idea that attributing negative events to prejudice protects the self-esteem of stigmatized people.

When we extended this research to overweight women, however, the results suggested a more complex story (Crocker, Cornwell, & Major, 1993). When overweight women who were rejected for a potential date by a male peer attributed the rejection to their weight, their self-esteem was not protected. Specifically, overweight women who were rejected by a male evaluator were more likely to attribute their rejection to their weight, and to the man's concern with appearance, than normal weight women who were rejected, or overweight or normal weight women who were not rejected. Yet, despite recognizing the role of weight in his rejection of them, overweight women who were rejected felt more depressed and hostile, were marginally more anxious, and had lower appearance self-esteem than overweight women who were not rejected, or normal weight women who were rejected.

Considering the pattern of results across studies, we reasoned that for African-Americans and women, attributing negative outcomes to race or gender is equivalent to attributing them to the other person's sexism or racial prejudice. In fact, for African-Americans, attributions to "my race," "the other person's racism," and "the other's discrimination" were highly correlated and combined into a single index with good internal consistency ($\alpha = .73$). Although it may seem obvious, it is quite significant that these African-American students thought that someone who

rejected them because of their race was racist and exhibited discrimination. Apparently, rejecting someone because of race is, on its face, illegitimate and racist (Crocker & Major, 1994), so African-Americans' self-esteem does not suffer. Yet, overweight women do not seem to reason the same way about their weight. They believe that, when they are rejected for a potential date by a man who is aware of their weight, that their weight was a major cause of his response. However, they do not seem to view this response as illegitimate. Instead, they seem to think that being overweight makes them unattractive and less deserving, and therefore a legitimate reason for rejection. Their self-esteem suffers as a result of this attribution.

Perceived controllability of weight. What is the difference between weight and race that accounts for this different response to rejection? Unlike race or gender, weight is seen as an attribute over which people have control (Crandall, 1994; Weiner, Perry, & Magnusson, 1988). Despite considerable evidence that biological mechanisms make weight loss extremely difficult, overweight people are stereotyped as lazy, self-indulgent, and lacking self-discipline, and are held accountable for their weight, and therefore for negative outcomes that follow from it. Rejection of an overweight person, then, is seen as justifiable, and not an instance of prejudice.

We hypothesized that if overweight women could be convinced that weight is not controllable, they would be more likely to attribute rejection to weight prejudice, and this would protect their self-esteem. Amato, Crocker, and Major (1995) tested this hypothesis in a study in which overweight and normal weight women were rejected by a male, and their beliefs about the controllability of weight were manipulated by having them read a pseudo-scientific summary of research, arguing either that the preponderance of evidence shows that weight is a function of calories consumed and calories expended (i.e., controllable), or that weight is a function of biological mechanisms such as set-points and therefore almost impossible to change over the

long-term (i.e., not controllable). As predicted, overweight women who read that weight is not controllable were more likely to attribute the rejection to weight prejudice, and had higher self-esteem, than overweight women who read that weight is not controllable, or normal weight women in either condition. Interestingly, overweight women who were told that weight is not controllable had more negative affect than any of the other three groups, perhaps because it made them hopeless about losing weight in the future. Thus, believing that weight is not controllable seems to be a double-edged sword; on one hand, it encourages overweight people to interpret rejection as revealing prejudice, instead of a personal failing, and this protects self-esteem. On the other hand, it may create a sense of powerlessness or hopelessness about the prospect of weight loss.

The Protestant ethic. In light of evidence that beliefs about the controllability of weight are central to recognizing weight prejudice, and therefore protecting self-esteem, we then examined what makes overweight people more likely to believe that weight is controllable, and therefore vulnerable to low self-esteem. Crandall and his colleagues (this volume), showed that conservative political ideologies and endorsement of the Protestant ethic are linked generally to beliefs about personal responsibility, and specifically to the belief that weight is controllable; these beliefs predict dislike of overweight people (even among the overweight themselves). In line with these findings, Quinn and Crocker (1999) found that among normal weight and overweight women, endorsement of the Protestant ethic was significantly related to belief in the controllability of weight and dislike of the overweight. The implications of these beliefs for self-esteem depended on whether the women considered themselves to be normal weight, somewhat overweight, or very overweight. As expected, among normal weight women, greater endorsement of the Protestant ethic predicted higher self-esteem. Among somewhat overweight

women, there was no relationship between endorsement of the Protestant ethic and self-esteem. Finally, among women who thought they were very overweight, greater endorsement of the Protestant ethic predicted lower self-esteem. Beliefs about the controllability of weight showed similar effects to Protestant ethic; beliefs about controllability predicted higher self-esteem in normal weight women, and lower self-esteem in (self-perceived) very overweight women. To our surprise, the effects of endorsing the Protestant ethic on self-esteem were not explained by its association with controllability beliefs; to the contrary, when we examined both beliefs simultaneously, only the Protestant ethic explained self-esteem differences among overweight and normal weight women. Perhaps the moralistic judgment inherent in endorsement of the Protestant ethic, more than controllability per se, accounts for its effects on self-esteem in overweight women.

Of course, the results of this study are correlational, so it is impossible to draw conclusions about whether endorsement of the Protestant ethic causes overweight women to have low self-esteem. We examined this issue in two studies in which we manipulated the salience of the Protestant ethic and related beliefs by having participants read essays. Ideological messages about the importance of self-discipline and the rewards of hard work hurt the self-esteem of overweight women (Jambekar, Quinn, & Crocker, 2001), whereas messages that are more inclusive (Jambekar et al., 2001) or encourage relaxing and savoring life have beneficial effects (Jambekar et al., 2001). This research suggests that self-blame for weight, associated with beliefs about controllability, not recognizing weight prejudice, and Protestant ethic beliefs contribute to low self-esteem in the overweight, and that it is probably the moral judgment, and not merely the controllability beliefs per se, that account for this effect.

Externally contingent self-worth. A different vulnerability factor explored in our research on stigma and self-esteem is externally contingent self-worth. As William James (1890) argued over a century ago, people differ in what they believe they must be or do to have value and worth as a person. People may base their self-esteem on a wide range of things; some people base their self-esteem on being virtuous, others on academic competence, and still others on approval and regard from others, or their physical appearance (Crocker, Luhtanen, Cooper, & Bouvrette, 2003). Crocker and Wolfe (Crocker & Wolfe, 2001) hypothesized that people with external sources of self-esteem, that depend on other people, should be particularly vulnerable to stigma. Quinn and Crocker (1998) provided support for this hypothesis in a survey of college women; for all participants, the more they based their self-esteem on others' approval, the lower their level of self-esteem, but this effect was more pronounced for overweight than for normal weight women.

Because weight is an important aspect of appearance, especially for women, it seems likely that basing self-esteem on one's appearance would be a particular risk factor for women. Indeed, women who base their self-esteem on their appearance, particularly those who report that their self-esteem drops when they do not look good (as opposed to rising when they look good), have lower self-esteem, more symptoms of depression, and more symptoms of disordered eating (Power & Crocker, 2004). Interestingly, men whose self-esteem was based on their appearance showed significantly fewer psychological problems than women whose self-esteem was based on appearance. Although we did not include a measure of actual or self-perceived weight in this study, other data suggest that college women, on average, believe that they are far from the cultural ideal for their gender, particularly with respect to being thin and beautiful (Sanchez & Crocker, 2003). Men in our study, on the other hand, rated themselves as meeting or exceeding

the cultural ideal for men. In sum, because women (even the young, healthy, and generally affluent college freshmen in our sample) believe that their bodies fall short of the ideal, they are vulnerable to a range of psychological problems, including low self-esteem, when they base their self-esteem on appearance, and particularly when they report drops in appearance when they think they don't look good.. In a subsequent study we found that the more that women based their self-esteem on appearance, the higher they scored on body shame ($r = .64$), body dissatisfaction ($r = .54$), and drive for thinness ($r = .60$; (Crocker, Stein, & Luhtanen, 2004)).

In sum, for all women, and particularly for women who feel overweight, basing self-esteem on external sources such as appearance and others' approval appears to be a vulnerability factor for low self-esteem.

The Stigma of Overweight and the Ego Gap

In our view, at the heart of all of these findings on the stigma of overweight and self-esteem is something we call the "ego gap." The ego gap refers to a psychological state in which people are focused on and concerned about their self-worth, and feel some uncertainty about whether they are worthy or worthless. When people are caught in the ego gap, they have reasons to think that they are wonderful and worthy, but they also have reasons to think that they are worthless. Thinking in the ego gap tends to be "all-or-nothing;" either I'm competent or incompetent, good or evil, worthy of love or not. As Stone, Patton, and Heen (1999) put it,

"The primary peril of all-or-nothing thinking is that it leaves our identity extremely unstable, making us hypersensitive to feedback. When faced with negative information about ourselves, all-or-nothing thinking gives us only two choices for how to manage that information, both of which cause serious problems. Either we try to deny the information

that is inconsistent with our self-image, or we do the opposite: we take in the information in a way that exaggerates its importance to a crippling degree” (p. 114).

In the context of the stigma of overweight, negative stereotypes and cultural images, along with ideologies like the Protestant ethic, suggest that overweight people deserve their negative outcomes, because they are responsible for their weight. The stigma, when it is salient, raises questions about one’s worth and value. The problem is that this binary choice—either my weight is my fault, I deserve to be rejected, and therefore I’m worthless; or my weight is not my fault, I don’t deserve to be rejected, and therefore the other person is bad (bigoted or unfair)—is a limited and limiting set of options, with costs no matter which option prevails. When overweight people conclude that they are worthless, the costs in terms of psychological well-being are obvious. But there are also costs in terms of life goals and relationships that overweight persons let go of because they feel worthless, as well as costs to others, as the low self-esteem, depression, and sometimes disordered eating become burdens to others as well as the self. On the other hand, those overweight people who blame their negative outcomes on others’ prejudice may protect their self-esteem, but their blaming attitude makes others feel accused and defensive, which creates conflict and separation, and ultimately has costs for the overweight person as well.

In both cases, the most important cost, in our view, is that when overweight people (or anyone, for that matter) question whether they are worthy or worthless, they are disconnected from reality and blinded to the real issues they face. They are disconnected from the reality that all human beings are flawed, non-perfect, capable of making mistakes, with strengths and weaknesses. When overweight people question their worth and value, they have difficulty recognizing that the reality is that they are human. And, because they are human, they have real

issues to address in their lives, some of which might concern their weight, but others of which have nothing to do with their weight. For example, perhaps the overweight person who is rejected for a job is discriminated against, but also there are almost certainly areas in which his or her job skills could be improved, because everyone has room for improvement. Perhaps the overweight woman is rejected for a date because a man is prejudiced against her, but there might also be areas in which she could improve her ability to connect with people, because strides can often be made in this domain.

To clarify, we are not suggesting that discrimination against the overweight is not a reality. Unfortunately, in our society people are inundated with messages extolling the value of beauty and thinness, and as the chapters in this volume document, prejudice and discrimination against overweight and obese persons are very real. Rather, we suggest that when overweight people respond to stigmatization by questioning whether their weight makes them worthless (when self-esteem becomes a goal) there are already costs (Crocker & Park, 2004). Regardless of whether they blame rejection on the self or the other, or whether such attributions lead to higher or lower self-esteem, being caught in this binary choice distracts from other, more important goals..

Recommendations and Conclusions

From this vantage point, we propose that the solution to the self-threat inherent in the stigma of overweight is not to vigilantly search for weight prejudice, nor is it to decide that one's weight is not controllable, nor is it to abandon ideologies about personal responsibility or the Protestant ethic. We also do not think it is realistic, in our culture, to abandon the belief that one's worth and value depends on one's physical appearance. Instead, we suggest the solution is to stop worrying about self-esteem, and to refrain from asking the question of whether being

overweight makes one worthless. We recommend shifting away from a focus on “what does it mean about me,” “what do they think about me,” or “does my weight discredit me as a human being?” Instead, we suggest that people focus on what they need to learn about the real issues they face, and what can they do about them, as well as what they want to contribute to their relationships, to the organizations they work for, or to the world. The solution to the problem of low self-esteem may be to focus on something larger than the self, and what one wants to create or contribute.

References

- Allon, N. (1982). The stigma of overweight in everyday life. In B. Wolman (Ed.), *Psychological aspects of obesity: A handbook* (pp. 130-174). New York: Van Nostrand Reinhold.
- Crandall, C. S. (1994). Prejudice against fat people: Ideology and self-interest. *Journal of Personality and Social Psychology*, *66*, 882-894.
- Crandall, C. S. (1995). Do parents discriminate against their heavyweight daughters? *Personality and Social Psychology Bulletin*, *21*, 724-735.
- Crocker, J., Cornwell, B., & Major, B. M. (1993). The stigma of overweight: Affective consequences of attributional ambiguity. *Journal of Personality and Social Psychology*, *64*, 60-70.
- Crocker, J., Luhtanen, R., Cooper, M. L., & Bouvrette, S. A. (2003). Contingencies of self-worth in college students: Measurement and theory. *Journal of Personality and Social Psychology*, *85*, 894-908.
- Crocker, J., & Major, B. (1994). Reactions to stigma: The moderating role of justifications. In M. P. Zanna & J. M. Olson (Eds.), *The psychology of prejudice: The Ontario symposium* (Vol. 7, pp. 289-314). Hillsdale, NJ: Erlbaum.
- Crocker, J., & Major, B. M. (1989). Social stigma and self-esteem: The self-protective properties of stigma. *Psychological Review*, *96*, 608-630.
- Crocker, J., & Park, L. E. (2004). The costly pursuit of self-esteem. *Psychological Bulletin*, *130*, 392-414.
- Crocker, J., Stein, K. F., & Luhtanen, R. K. (2004). *Contingent self-worth, self-schemas, and symptoms of eating disorders in college women*. Unpublished manuscript.
- Crocker, J., Voelkl, K., Testa, M., & Major, B. M. (1991). Social stigma: Affective consequences of attributional ambiguity. *Journal of Personality and Social Psychology*, *60*, 218-228.
- Crocker, J., & Wolfe, C. T. (2001). Contingencies of self-worth. *Psychological Review*, *108*, 593-623.
- Fallon, A. (1990). Culture in the mirror: Sociocultural determinants of body image. In T. F. Cash & R. Proziński (Eds.), *Body images: Development, deviance, and change* (pp. 80-109). New York: The Guilford Press.
- Friedman, M. A., & Brownell, K. D. (1995). Psychological correlates of obesity: Moving to the next research generation. *Psychological Bulletin*, *117*, 3-20.
- Jambekar, S., Quinn, D. M., & Crocker, J. (2001). The effects of feeling overweight and achievement on the self-esteem and mood of women. *Psychology of Women Quarterly*, *25*, 48-56.
- James, W. (1890). *The principles of psychology* (Vol. 1). Cambridge, MA: Harvard University Press.
- Jarvie, G. J., Lahey, B., Graziano, W., & Framer, E. (1983). Childhood obesity and social stigma: What we know and what we don't know. *Developmental Review*, *3*, 237-273.
- Miller, C. T., & Downey, K. T. (1999). A meta-analysis of heavyweight and self-esteem. *Personality and Social Psychology Review*, *3*, 68-84.
- Obesity in the U.S.* (2002). [web page]. American Obesity Association. Retrieved July 19, 2004, from the World Wide Web: http://www.obesity.org/subs/fastfacts/obesity_US.shtml

- Power, C. M., & Crocker, J. (2004). *Ups and downs of self-esteem: Appearance contingencies and psychological well-being of male and female college students*. Unpublished manuscript, Ann Arbor.
- Quinn, D. M., & Crocker, J. (1998). Vulnerability to the affective consequences of the stigma of overweight. In J. S. C. Stangor (Ed.), *Prejudice: The Target's Perspective* (pp. 125-143). San Diego, CA: Academic Press.
- Quinn, D. M., & Crocker, J. (1999). When ideology hurts: Effects of feeling fat and the Protestant ethic on the psychological well-being of women. *Journal of Personality and Social Psychology*, 77, 402-414.
- Sanchez, D. M., & Crocker, J. (2003). *Why investment in gender ideals affects well-being: The role of external contingencies and gender discrepancies*. Unpublished manuscript, Ann Arbor, MI.
- Stone, D., Patton, B., & Heen, S. (1999). *Difficult conversations: How to discuss what matters most*. New York: Penguin.
- Weiner, B., Perry, R. P., & Magnusson, J. (1988). An attributional analysis of reactions to stigma. *Journal of Personality and Social Psychology*, 55, 738-748.