

Ideal Thinness of Young Females in Japan

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Abstracts

To assess body shape preferences of Japanese young females, a questionnaire was developed and administered to 973 college subjects in 1990. Their perceived ideal thinnesses for their current heights were analysed using the body mass index and the national references of 'weight for height for age' issued by the Japanese Ministry of Health and Welfare. Their extreme slim-body preference seemed to have its root in the lack of proper understanding of what the 'average' body weight was, which might be further accelerated by the fact that they set their ideal shape at the level even lower than their misunderstood 'average'. The tendency was striking among those who considered their ideal body shape to be 'thin' and 'very thin'. These findings have not changed in the last five years in Japan.

Key Words: Ideal weight, Body Shape Preferences, Body Mass Index, Social Pressure for Thinness, Japanese Young Females

抄録

日本人の若い女性の体格意識を把握するために質問紙を作成し、1990年に 973人の女子大学生を対象に調査を行った。現在の身長のもとでのいくつかの体格意識を Body Mass Indexと厚生省の肥満とやせの判定基準を用いて解析した。対象者の極端ともいえる「やせ指向」は平均的な体格を誤ってとらえていることがまず根本にあり、さらにその「誤った」平均よりもさらにやせたレベルを指向していることで拍車がかかっていると示唆された。とくにその傾向は、やせているものに顕著にみられ、憂慮されるところであった。この 5年間で改善の兆しはみられなかった。

見出し語: 体格意識、理想体重、Body mass index、やせ指向

Introduction

Misperceptions of body shape and dissatisfaction with body weight observable among young females have often been reported in some Western countries^{1), 2)}. Specialists have focussed on the social pressure for female slenderness in such studies that concern inappropriate eating behaviors, anorexia nervosa and bulimia³⁾. In Japan, some researchers pointed out that many young females wished to lose weight because of their tendency to perceive themselves as overweight though they're mistaken in most cases^{4) 5)}. There are, however, few studies on thier ideal for their body shape and grounds for their slim-body preferences. I conducted a survey on the body shape preferences of Japanese female college students.

Methods

In 1990, 973 Japanese female students from five colleges in Kanto area were selected. Their mean height and weight were almost the same as those of the national samples in 1989. They completed anonymous questionnaires containing eight questions regarding 1. age, 2. self-estimated body shape, 3. current height, 4. current weight, 5. perceived 'average' weight for their current height, 6. perceived 'ideal' weight for their current height, 7. borderline weight perceived as 'very fat' for their current height, 8. borderline weight perceived as 'very thin' for their current height. The self-estimated body shape (Item No.2, above) was selected from among the five categories : 1. very thin, 2. thin, 3. normal, 4. fat, 5. very

fat.

Using the body mass index (BMI)⁶⁾, I calculated five variables of body shape indices: 1. current BMI. 2. perceived 'average' BMI 3. perceived 'ideal' BMI 4. perceived 'very fat' BMI 5. 'perceived' very thin' BMI.

The nationally-estimated body shape was also derived from the national references of 'weight for height for age' issued by the Japanese Ministry of Health and Welfare⁷⁾. Sample data (current height and weight) were grouped into five categories, as in the same manner as we did for the item of self-estimated body shape above.

Results

Samples' ages, heights, weights, and perceived body shape indices are shown in Table 1. They perceived the 'average' BMI at about -0.5 S.D. of mean current BMI. They perceived the 'ideal' BMI at about -1.0 S.D. of mean current BMI, which fell into the nationally 'thin' category. The perceived 'very fat' BMI was at about +0.7 S.D. of mean current BMI falling into the nationally 'normal' category. The 'very thin' BMI was perceived at about -1.7 S.D. of mean current BMI.

Table 2 details the relationships between the nationally-estimated and self-estimated body shapes. The percentages of those overestimated their actual body shapes were 64.1% (600 samples). Nationally-estimated 'thin' samples tended to overestimate their fatness (68%). 15.9% of those nationally-estimated as 'normal' considered themselves as 'very fat'. On the other hand, those who underestimated their body shapes were 2.4% (23 samples).

The analysis of variances followed by Duncan's multiple range tests was performed to detail the associations between nationally-estimated body shapes and perceived BMIs (table not shown). Those who were categorized as 'very thin', 'thin', and 'normal' nationally set their 'average', 'ideal', and 'very fat' BMIs at nationally discouraging levels. On the other hand, those classified as 'fat' and 'very fat' nationally seemed to estimate their 'average' BMIs more accurately, and their

'ideal' BMIs at the nationally-recommended levels. 20.2% of those nationally-estimated as 'thin' perceived the 'average' weights below their current weights. 74.9% of those nationally-estimated as 'normal' also did the same. 71.9% of those nationally-estimated as 'thin' considered the 'ideal' weights to be below their current weights. 96.5% of those nationally-estimated as 'normal' also did the same. 82.8% of those nationally-estimated as 'very thin' self-estimated the 'very thin' weight at even lower weight levels than their current weights.

Discussions

Some researchers reported in the western countries that the desire for thinness of young females has close relationships with the misperceptions of their own weight/body shape⁸⁾.

We also have observed the same tendency among Japanese samples. The mean height and weight of our samples were almost the same as those of the national samples in Japan⁹⁾. Our samples, however, perceived their 'average' BMI at -0.5 S.D. of their mean current BMI. As a consequence they were very strict in setting the fat-borderline and tolerant in the thin borderline. Their perceived 'very fat' BMI fell into the nationally-normal range. Their perceived 'very thin' BMI was found to be far below the nationally 'very thin' borderline.

Brennan found that many adolescents consider being below the normal weight range as desirable¹⁾. The 'ideal' BMI of our samples was at -0.5 S.D. of their perceived 'average' and at about -1.0 S.D. of their actual average, away from the nationally-recommended range. It is assumed that their extreme slim-body preference had its root in the lack of proper understanding of their actual average BMI, which might be further accelerated by the fact that they set their 'ideal' shape at the level even lower than their misunderstood 'average'. These preference among Japanese young females seem to be attributable to the social pressure for thinness. Not much has been studied scientifically in Japan on this subject, while many western researchers have dealt

TABLE 1. AGES, HEIGHTS, WEIGHTS AND BODY SHAPE INDICES

Variables	
Age	19.4±1.4
Current Height (cm)	157.9±4.8
Current Weight (kg)	51.5±5.4
Perceived 'average' weight (kg)	49.4±4.3
Perceived 'ideal' weight (kg)	47.2±4.0
Perceived 'very fat' weight (kg)	54.8±5.2
Perceived 'very thin' weight (kg)	43.3±3.8
Current BMI	20.6±1.8
Perceived 'average' BMI	19.8±0.9
Perceived 'ideal' BMI	18.9±1.1
Perceived 'very fat' BMI	21.9±1.5
Perceived 'very thin' BMI	17.3±1.0

TABLE 2. NATIONALLY-ESTIMATED AND SELF-ESTIMATED BODY SHAPES (row %)

	self-estimated				
	very thin	thin	normal	fat	very fat
<u>nationally-estimated</u>					
very thin (34):	32.3% (11)	20.5% (7)	47.0% (16)	0% (0)	0% (0)
thin (154):	3.9% (6)	27.9% (43)	56.4% (87)	11.6% (18)	0% (0)
normal (622):	0.3% (2)	1.9% (12)	32.4% (202)	49.3% (18)	15.9% (99)
fat (94):	0% (0)	0% (0)	1.0% (1)	28.7% (27)	70.2% (66)
very fat (31):	0% (0)	0% (0)	0% (0)	6.4% (2)	93.5% (29)

Numbers enclosed with () are raw numbers of the samples.

38 samples are missing cases.

with the theme^{2), 3)}. It is suggested that there are significant differences of perceptions and preferences between the nationally-categorized as 'very thin', 'thin', 'normal' (the normal/thin group) and those as 'fat', 'very fat' (the fat group). Many of those in the normal/thin group misunderstood their actual average BMI and their 'ideals' were at extremely thinner levels. Surprisingly, more than 10% of those classified as 'thin' estimated themselves as fat. These distortions may have some associations with the onset of clinical eating disorder or anorexia nervosa^{2), 9)}.

I could find little significant differences as to the above results and findings between my previous survey conducted in 1985 and this time^{10), 11)}. That is, there seemed to be no 'better' changes in the 'desire for thinness' of

the Japanese young females during these last five years.

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