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RESEARCH IN ECONOMICS AND RURAL SOCIOLOGY

OBESITY AND FOOD IN WORKING CLASSES: AN APPROACH TO THE FEMALE BODY

Obesity does not concern all social classes equally; the most exposed ones are women from the working classes (16% of obese women among employees), who also belong to groups where average corpulence (frame 1) is the highest and where attention to the body (desire to lose weight, weighing frequency, practice of a sport) is the lowest. Even so, they are not cut off from the dominant body standards. A survey on working-class obese women -ex manual workers- shows that attention to the body and weight increases with proximity to the middle classes and the working world, and decreases as these women's situation becomes precarious, turning into a medical imperative.

Obesity and corpulence: social inequalities

If obesity affects 10% of the French male/female population (frame 1), it is unequally distributed between social milieus, and the differences especially stand out among women. Obesity concerns 6% of women from the fourth quartile of income against 13% of women from the first quartile; 3% of women whose education level is higher than degree level, but 19% without qualifications.

All things being equal, if we analyse obesity risk according to social hierarchy (Régnier 2005), it appears above all that women from the working classes are the most concerned. Thus, once age, socio-professional category, birthplace and living area are taken into account, obesity appears to be noticeably linked to socio-professional category: blue-collar and unemployed categories, in particular, include more obese women than average. In the same way, once age, degree level, income and living area taken into account, obesity is clearly linked to the lowest level of education. Moreover, if obesity has increased in women in a relatively homogenous way over the last 30 years – women from all social categories including the more obese – manual workers and lower qualified women represent the categories where the obesity rate has increased the most (respectively +7 and +6 points).

Aside from obesity – threshold within the continuum of corpulence (frame 1) – working-class women also have a higher rate of corpulence than well-off women. Blue-collar workers and unemployed women have an average BMI of 25 against less than 23 for executives. This modest growth in working women's corpulence involves a very strong growth in obesity risk: from 4% obese women among higher-level managers, we reach 16% for blue-collar workers (table 1).

In the same way as for obesity, the social differences of corpulence are greater in women than in men. While among men, higher-level managers and blue-collar workers almost have the same corpulence rate, if one compares higher management women with blue-collar women from the point of view of the distribution of corpulence fractiles (figure 1), large gaps appear between both categories: the median for blue collar women is far higher (22.5 for higher-level managers, 24.5 for blue collar women) and executive women as a whole are more homogenous than blue collar women are, who quickly reach a higher corpulence rate. What about body representations among working-class women and the attention they give to corpulence?

Representations of corpulence and attention to the body

First of all, it is paradoxical to note that the willingness to lose weight seems uniform in all social milieus. 59% of executive women and 54% of manual workers wish to lose weight, this gap being of no significance at a 5% threshold. But corpulence is quite different from one social group to another: at equal corpulence, fewer manual workers wish to lose weight than executive women. For the same weight, the working classes are much less careful about putting on weight than the well-off categories and for that reason exceed certain corpulence limits, particularly obesity. Would social pressure regarding slimness be different according to social milieu? This desire to lose weight can be measured more precisely in the different social classes. What are the differences between women's actual corpulence and their ideal (frame 1)?

Graph 2 shows great diversity in terms of both reality and ideal between the social classes, while men are more homogenous (BMI ranging from 24.8 among executive men

to 26.1 among farmers). Women from well-off categories (higher and lower level managers) have the lowest real and ideal corpulence. Less stricken by obesity, having a lower corpulence than working-class women, they nonetheless have a more restrictive vision of ideal corpulence. Inversely, manual working women have high actual corpulence and seem less eager to be careful about putting on weight. They are less attentive to their weight development – 34% say they weigh themselves once a week against 43% of women from the middle classes – and they practice sports less regularly (42% of executive women say they do sports at least once a week against only 18% of manual workers) (graph 3). Because of their corpulence, less attention to their weight and less regular sports activity than the well-off categories, unemployed women are very similar to blue-collar workers: here our findings are similar to others regarding less care taken with physical appearance by unemployed women owing to their withdrawal into the domestic life (Herpin, 1987; Schwartz, 1990). As to white collar workers, they are very different from blue collar and unemployed women, which, aside from the strong heterogeneity of the group, probably comes from their proximity to executive or professional women as well as because of a greater exogamy.

Yet although women from working classes are more corpulent than others, they are not cut off from the dominant standards, circulated for example in women's magazines or on television. As proof, we note that it is among manual workers and unemployed women, perhaps conscious of their difference from the dominant standards, that we can find the biggest gap between real and ideal corpulence.

However, they do not adopt the same ideal body as the well-off categories. Differences between categories are slight: executives would like to lose 3 kilos and manual workers – 4 kilos heavier – 4.2 kilos, while they are, on average, 3 cm shorter. Manual working women therefore have executives' real weight as their ideal weight, while the latter would like to be even slimmer.

Eating habits leading to a gain in weight

The data from survey among women in a situation of relative precariousness (frame 2) focuses on statistical results and brings to the fore the diversity of configurations in women from the working classes. All unemployed, most of them ex-blue collar workers or ex-servants (except for one retired tradeswoman) without any qualifications, having started work very early until their children arrived, these women live alone or with children, on social minima. They live quite a withdrawn, solitary existence.

Obesity, which led them to the nutritional education plan of action where we met them, first refers to their singular food practices. Classical sociological work showed how the working classes are distinguished by the consumption of traditional foods needing more domestic time for their transformation. And yet these women are at odds with the model: they say they do not cook anymore. This break can be understood from the point of view of the place that food takes in married life. Cooking is not a problem of available time for these women out of work. Nor is it a problem of know-how: the eldest of numerous families, they learned with their mother or grand-mother, and as mothers

themselves, they cooked for their family. The problem lies elsewhere, in their conjugal structure, in the deleting of family links and solidarities which make cooking lose its flavour. Thus the partial deconstruction of married and family life goes hand in hand with the deconstruction of feeding and cooking practice, where skipping meals starts with the husband's departure (death or separation) and intensifies with that of the children.

The consequence of these forms of food deconstruction is "compensatory" food. The women that we met shared boredom, which each one tries to escape in a different way (by getting involved in association, by sleeping, watching TV, looking after the grandchildren), but all of them agree that tediousness saps them and they compensate by eating. Family burdens, financial difficulties, isolation, but also problems of self-image linked to an appearance which embarrasses them - when it does not go hand in hand with health problems - seem to lead to a compulsive relation to food consumption. These women say they go through times when they "stuff themselves" in front of the television. However, beneath this apparent uniformity in relations with food, there are relative different physical economies and relationships with dietary practice. These differences are linked to their degree of proximity to the working world. Women aspiring to a job will get closer, in terms of ideal, to their standard of corpulence.

Losing weight: diversity of configurations

Sociological work has showed the extent to which the body is an active memory where the history of the social group and individual trajectories settle. In the case of the women we met, following a diet is not only linked to the maintenance of appearance but in certain circumstances also to medical reasons. The inquiry shows evidence of three types of dietary relation which oscillate between body standards and medical orders.

For a first group of women, for whom non-qualified work is occasional, the body remains a compelling part of social dynamics. This is the case of younger women who still think they have a professional horizon. The diets they go on are situated in an esthetical register and are accompanied by the willingness to gain an anchorage point where work on their body goes hand in hand with self-training. In this case, they seem to want to do the diet by themselves and do not exclude having recourse to the market (that is to say to liberal or purchase of low-fat food products). They expect the diet to be very strict and choose weight-loss targets that they scrupulously measure with their scales. Being the most socially integrated women (through associative activities or being active members of a family network), they aim to model themselves on employees' standards, their reference group professionally and socially speaking.

A second case concerns older women. Diet is included in a series of body maintenance acts where the aesthetic criterion and health considerations, if they are not considered together, are nonetheless closely linked to their daily body and health economics. Damaged bodies reflect existences marked by physical or symbolical violence and scars from numerous surgical interventions. Contrary to the previous women, these women do not expect results in terms of weight loss and prefer to see it on their clothes rather than

on the scales. It is more difficult to start a diet on their own and recourse to a plan of action above ally helps break the isolation of these ageing and lonely persons, who come to this education meeting more for contacts than for nutritional recommendations.

A third case concerns women for whom, by curing a degraded body, diet becomes a health condition. Linked to illness and seen as such, weight problem is expected to be treated by the medical institution: hospitalisation. This example is in opposition to the first. At the same time as their body is deteriorating, the women go into a deep isolation from which they do not know how to get out. These situations of precariousness follow the same trajectories marked by uprooting and isolation which have only worsened the process of putting on weight, to the extent where it became a physical and psychological handicap.

Conclusion

Relationships between obesity and social status are strong in women. In particular, women from the working classes are more affected by obesity. And although obesity has progressed in all social milieus, blue-collar workers and less qualified women form the categories where the obesity ratio has increased the most. In a broader sense, they belong to groups where average corpulence is the highest, where attention to weight watching is the least marked: the importance of slimness is less asserted than in upper categories. However, they are not cut off from the dominant standards. A qualitative survey on unemployed women from the manual working class shows that their attention to weight increases in line with their proximity to the middle classes and the working world, and decreases as their situation becomes more precarious, to the extent that it turns into a medical necessity. The question of obesity is not only a concern of the food business but also a wider one of social links.

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Caillavet F. (coord.), 2004. *L'alimentation des populations défavorisées comme dimension spécifique de la pauvreté en France.* Vol.1: **Caillavet F., Darmon N., Lhuissier A., Régnier F.**, *L'alimentation des populations défavorisées en France. Une revue de la littérature dans les domaines économique, sociologique et nutritionnel*, Rapport pour l'ONPES, 134 p., February 2004; Vol. 2: **Andrieu E., Caillavet F., Lhuissier A., Momic M., Régnier F.**, *L'alimentation des populations défavorisées comme dimension spécifique de la pauvreté. Approches croisées de la consommation alimentaire des populations défavorisées*, Rapport pour l'ONPES, 197 p + appendix, February 2005.

Herpin, N. (1987). L'habillement et le corps, *Economie et statistique*, n° 196, pp. 55-63.

Régnier, F. (2005). Obésité, corpulence et statut social : une comparaison France/Etats-Unis (1970-2000), INRA Sciences Sociales, n° 1, 4p.

Schwartz, O. (1990). *Le monde privé des ouvriers, hommes et femmes du Nord*, Paris, PUF, 531 p.

Frame 1

Here, corpulence refers to Body Mass Index (BMI), i.e. the weight ratio in kilos per height (in meters) squared. It helps specify the following corpulence: underweight: $BMI < 18.5$; normal weight: $18.5 < BMI < 24.9$; overweight: $25 < BMI < 29.9$; obesity: $BMI > 30$.

Statistical results depend on the INSEE *Health and Medical Care* surveys from 1970 (n=14842) to 1990 (n=15794) and the *Permanent Survey on Family Living Standards* from 2001 (n=5113). One part of the variables concerns households, the other individuals.

The variable "How much would you like to weigh?", by differentiating between people's real and ideal weight, helps highlight the individuals' desire to lose weight and estimate their desired weight loss as well as their ideal corpulence.

Frame 2

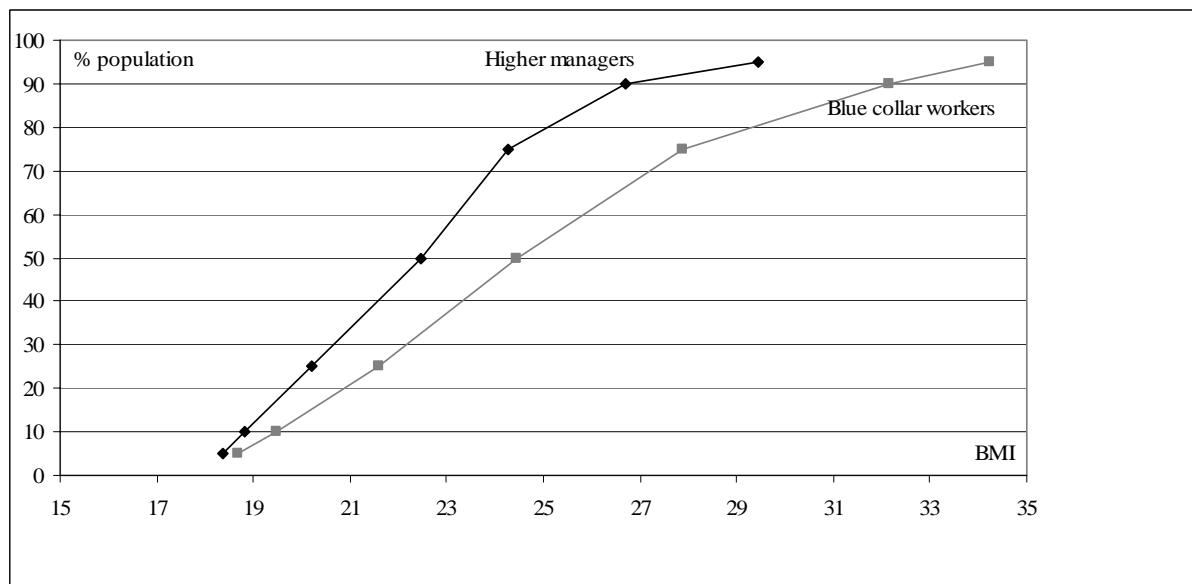
The survey took place between March and September 2003 with a nutritional education plan of action aimed at 15 overweight women living in a Lille district categorised as a social development area. The observation of 15 group meetings followed by 10 interviews helped bring to light practices connected with consumption, food, illness and the body that can be understood in the light of every family configuration.

Table 1 – Average corpulence of different socio-professional categories and obesity ratio in women in France, 2001

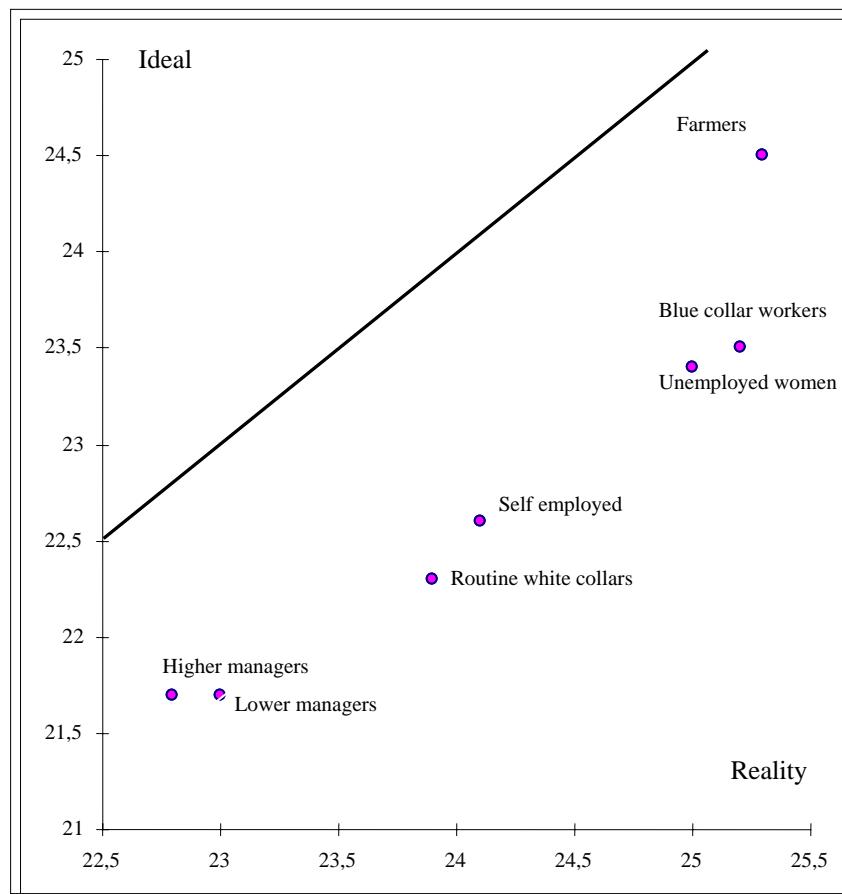
Average BMI	% of obese people	SPC
25	10%	Farmers
24	12%	Self employed
23	4%	Higher managers
23	6%	Lower managers
24	10%	Routine white collar
25	16%	Blue collar workers
25	13%	Unemployed women

Note: retired women are quoted in their previous job; unemployed women have never worked.

Graph 1 - Function of corpulence distribution in higher managers (series 1) and blue collar workers (series 2) in France, 2001.



Graph 2 - Women's real and ideal corpulence in France (2001) according to their socio-professional category



Reading: the graph indicates real corpulence on the abscissa and ideal corpulence in ordinate, in women. The further the point goes away from the diagonal, the greater the gap is between reality and ideal.

Graph 3 – Weighing themselves and practising sport at least once a week, French women, 2001

