



Asian and Pacific Islander Girls

This information sheet is designed to raise awareness of disordered eating and eating disorders among Asian American and Pacific Islander girls. It highlights findings from recent studies and provides suggestions for promoting positive body image and healthy eating behaviors among middle school Asian American/Pacific Islander students.

Asian American girls are at risk

Many people believe that only White girls are affected by eating disorders. In reality, no ethnic or socioeconomic group is immune to the dangers of this disease. Studies typically do not include ethnically diverse populations; therefore, cases of eating disorders among diverse racial ethnic groups, including Asian Americans, are often underreported. In addition, many Asian Americans equate psychological problems with weakness and shame; therefore, women and girls may avoid seeking treatment.¹

Asian American girls express high levels of body dissatisfaction

Many Asian American girls struggle with self-esteem and identity based largely on issues of attractiveness.² Research that included Asian American girls reported that often they are as concerned or more concerned than white girls about their weight and shape.³

In a study of more than 900 middle school girls in northern California, Asian American girls reported greater body dissatisfaction than White girls. Among the leanest 25% of girls, Asian girls reported significantly more dissatisfaction than White girls.⁴

Recent research on Asian Americans suggests that body dissatisfaction is increasing due to the promotion of the Western beauty ideal.⁵ One study, for example, reported

The term Asian American/Pacific Islander refers to the more than seven million people from 28 Asian countries and 25 Pacific Island cultures in the U.S. The largest subgroups are Chinese, Filipino, Japanese, Asian Indians, Koreans, and Vietnamese. Hawaiians comprise the largest subgroups of Pacific Islanders (58%), followed by residents of Samoa, Guam, and Tonga. Each subgroup has its own history, language, and culture.⁶

that Japanese Americans desired to be taller, weigh less, and have larger busts and smaller waists and hips.⁷ Some researchers believe that racism and sexism may contribute to negative feelings among Asian American women regarding their physical features, such as eye and nose shape, skin color, straight hair, and short stature.⁸ Eyelid and nose reconstruction are the most popular types of surgery requested by Asian American women.⁹

Perfectionism and need for control can also contribute to eating disorders

Asian Americans are often perceived as the “model minorities” and expected to be successful and high achieving. Asian American girls may attempt to seek power and identity through the pursuit of a physically ideal body. The drive to become the “perfect Asian woman” can lead to perfectionism, which is linked to eating disorders, particularly anorexia.¹⁰ In addition, the cultural value of “saving face,” which promotes a façade of control, may also contribute to disordered eating or eating disorders.¹¹

Acculturation may increase vulnerability

Adapting to a new culture creates a set of stressors that for Asian American and other immigrant girls may cause confusion about identity, including gender roles. For example, an adolescent girl raised by her family to be obedient and demure may experience emotional



turmoil in a Western culture that prizes independence and individualism.¹²

For Asian American girls, acculturation can lead to feelings of isolation, low self-esteem, and the devaluation of native cultural identity which can increase their vulnerability to eating disorders.¹³

Highly acculturated Chinese females are more likely to report bulimic behaviors and drive for thinness than those who stay closer to their family values. One report found that the more acculturated Asian American girls were at greatest risk for adopting the “dysfunctional” behaviors of white American society, including poor eating habits and accepting media messages regarding standards of beauty.¹⁴

Obesity is also a risk factor

Rates of obesity are very high for some Asian/Pacific Islanders, such as Hawaiians and Samoans.¹⁵

Overweight and obesity are risk factors for disordered eating behaviors, such as bingeing and purging. Dieting for weight loss is also associated with the development of eating disorders and other unhealthy behaviors, including skipping meals and diet-binge cycles.¹⁶ One study, in fact, revealed that binge eating was more prevalent in Asian American than white females.¹⁷

“Being Korean...I wanted to fit in and be perfect and have that good, really skinny body...being an immigrant in this country was a major factor that led to my bulimia and anorexia.”¹⁸

Dee, age 19

End Notes

¹ Hall, C.C. Asian eyes: Body image and eating disorders of Asian and Asian American Women. *Eating Disorders: The Journal of Treatment and Prevention* 1995, vol. 3, no. 1, pp. 8-18.

² Root, M.P.P. Disordered eating in women of color. *Sex Roles* 1990, vol. 22, pp. 525-536.

³ Field, A.E., Colditz, G.A., & Peterson, K.E. Racial/ethnic and gender differences in concern with weight and bulimic behavior among adolescents. *Obesity Research* 1997, vol. 5, pp. 447-454; French, S.A., Story, M., Neumark-Sztainer, D., Downes, B., Resnick, M., & Blum, R. Ethnic differences in psychosocial and health behavior correlates of dieting, purging, and binge eating in a population-based sample of adolescent females. *International Journal of Eating Disorders* 1997, vol. 22, pp. 315-322; and Story, M., French, S.A., Resnick, M., & Blum, R.W. Ethnic/racial differences in dieting behaviors and body image perceptions in adolescents. *International Journal of Eating Disorders* 1995, vol. 18, no. 2, pp. 173-179.

Things You Can Do

As an adult working with adolescents, you can take help identify those at risk, promote an environment that discourages negative body image and disordered eating behaviors, and prevent eating disorders.

1. Provide adolescents with information on the benefits of healthy eating and regular physical activity.
2. Educate parents about eating disorders.
3. Do not tolerate sexual harassment or teasing about another person’s body shape, weight, or race.
4. Conduct media literacy activities that explore the images of thinness as beauty in television, magazines, and advertisements targeting girls.
5. Incorporate culturally appropriate materials, curricula, and interventions and include ethnically diverse role models.
6. Refer girls who want to achieve a healthy weight to appropriate health professionals for information on healthy weight management strategies.
7. Help girls understand cross-cultural differences regarding body image and weight control.
8. Assist families in locating appropriate health care services

⁴ Robinson, T.N., Killen, J.D., Litt, I.F., Hammer, L.D., Wilson, D.M., Haydel, K.F., Hayward, C., & Taylor, C.B. Ethnicity and body dissatisfaction: Are Hispanics and Asian girls at increased risk for eating disorders? *Journal of Adolescent Health*, Dec. 1996, vol. 19, no. 6, pp. 384-93.

⁵ Hall, 1995.

⁶ U.S. Census Bureau. *Resident population estimates of the United States by sex, race, and Hispanic origin*. Washington, DC: Author, 1990.

⁷ Hall, 1995.

⁸ Root, 1995.

⁹ Hall, 1995.

¹⁰ Hall, 1995.

¹¹ Hall, 1995.

¹² Hall, 1995.

¹³ Hall, 1995.

¹⁴ Hall, 1995.

¹⁵ World Health Organization. *Obesity: prevention and managing the global epidemic: Report of a WHO consultation on obesity*. WHO/NUT/NCD/98.1. Geneva, Switzerland: Author, 1998.

¹⁶ Patton, G.C. Eating disorders: Antecedents, evolution and course. *Annals of Medicine* 1992, vol. 24, pp. 281-285.

¹⁷ Story et al., 1995.

¹⁸ Wax, E. Immigrant girls are starving to be American, studies find. *The Washington Post*, March 6, 2000, B01.