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The dreaded body: disgust and the production of "appropriate" femininity

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ABSTRACT

While some literature has explored women's feelings about social identities like fatness, race, disability, queerness, and aging, little research has examined, from an intersectional perspective, how women construct a dreaded or viscerally disgusting body and how this produces "appropriate" femininity. This paper utilized thematic analysis of qualitative data from a community sample of 20 US women (mean age = 34, SD = 13.35) to illuminate how women imagined a body they dreaded. Responses indicated that defective femininity, having "freak" body parts, fear of excessiveness, loathing a particular person's body, and language of smelliness and disgust all appeared, weaving together women's fears about fatness, dark skin, and becoming old or disabled. Implications incorporating visceral disgust to examinations of body image, and the intersectional foundations of women's dreaded selves, were discussed. Further, imagining "Other" bodies may produce especially vivid narratives around social biases and internalized oppression.

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Body image; sexism; disgust; women's bodies; gender roles; intersectionality; fatness

Introduction

Though psychologists, body image researchers, and gender scholars have long argued that women discipline and control their bodies in order to meet socially-accepted standards of thinness, whiteness, youth, heterosexuality, and ability (Bordo, 2003; Ringrose & Walkerdine, 2008; Tiggemann & Lewis, 2004), far less research has examined the sorts of visceral disgust women in Western contexts often feel toward their own and other's bodies. Rather than framed as a social justice issue, bodily disgust has instead been framed either as a facet of eating disordered behavior (Abrams, Allen, & Gray, 1993) or as a tool for shaping social identities like class (Lawler, 2005) and race (Hill Collins, 2000). While feminist scholars have directed attention to notions of healthy embodiment and body-affirming practices for women and girls (Roberts & Waters, 2004), they clearly still struggle with a host of competing discourses about body affirmation and body shame (Johnson-Robledo, Sheffield, Voigt, & Wilcox-Constantine, 2007; Werner, Isaksen, & Malterud, 2004).

While internalized racism (Speight, 2007), internalized fat phobia (Meleo-Irwin, 2011), and ideologies that value youth and discourage aging (Chrisler, 2011; Halliwell & Dittmar, 2003) have been studied separately in the literature, previous research has not looked at ideas of visceral bodily dread and disgust from an intersectional perspective, weaving together identity categories like race, class, gender, age, size, ability, and sexual identity and how these identities are co-constructed in Western contexts.



As such, this study examined qualitative narratives from twenty US women with diverse backgrounds (race, age, current relationship status, parental status, class backgrounds, and sexual identities) in order to examine how women constructed, in an imagined sense, the body they would least like to occupy. By examining these multiple sites of bodily dread through qualitative analysis, this study illuminated five themes that appeared in women's responses while also showcasing the powerful and vivid imagery women created around their own dread and disgust toward an imagined Other.

Literature review

Disgust and dread

The notion of the dread as connected to women's bodies first appeared in an essay by Horney (1932) where she described men's dread about around the female body, most often because it lured them to their demise. In subsequent years, dread in relation to the body, defined as the extreme apprehension and reluctance to become something one does not want to become, has morphed into a larger discussion around disgust as an affective response to people's repulsion about different stimuli (Haidt, McCauley, & Rozin, 1994). The emotion of dread (more broadly) thus produces the specific emotion of disgust. Researchers who have studied disgust have found that disgust as an emotion can increase the severity of moral judgments about others much more effectively than emotions like sadness, as disgust often serves a role in distancing the self from the 'morally inferior' other (Schnall, Haidt, Clore, & Jordan, 2008). In particular, disgust leads to affective reactions that create moral judgments rather than rational cognitions (Haidt, Koller, & Dias, 1993). As such, disgust and dread are often tied to notions of cleanliness, goodness, and social ideals (Schnall, Benton, & Harvey, 2008), suggesting that disgust can readily attach to social prejudices, 'isms,' and cultural stereotypes about different groups of people (Taylor, 2007).

Disgust also connects to social processes that stigmatize less powerful identity groups. In a study of attitudes about public urination, women were judged especially harshly for this behavior and were constructed as more immoral and dirty than men (Eldridge, 2010). With regard to fatness, people who felt disgust about fat or 'Othered' bodies also judged them as morally deficient and fully responsible for their own fatness (Vartanian, 2010). For social class, people rated crimes against the wealthy as more serious and more disgusting than crimes against the poor (Smith, Baranowski, Allen, & Bowen, 2013), assessed welfare recipients as more disgusting than others (Soldatic & Meekosha, 2012), and rated the homeless as the most disgusting of all (Snow & Anderson, 1993). Doctors, too, were found to express more disgust toward fat bodies, intersex bodies, and trans bodies as well (Feder, 2011), suggesting that disgust serves an important role in relaying information about justifying and reproducing social biases and power hierarchies.

Contemporary gendered biomedical discourses also haunt attitudes about body shapes and sizes and dictate what we find disgusting, repulsive, or distasteful (Bordo, 2003). As women become neoliberal subjects, they utilize the rhetoric of 'choice' to construct (morally) good bodies (Gill, 2007). Within makeover shows, the narratives of transformation reveal not only 'ideal' selves, but also the abject and uninhabitable selves – the selves women must not become (Ringrose & Walkerdine, 2008). Disgust as an emotion thus creates and regulates ideas about appropriate bodies and dictates not only who people should become but more importantly who people should avoid becoming.

Fear and disgust about fatness

Disgust may serve the same social function by discrediting and devaluing the actions of the less powerful, but the specifics of how this process may work can differ by social group. For example, fat studies scholars have noted that fatness is often seen as a symbol of self-indulgence and moral failure, particularly in recent times when food scarcity is less prevalent in the Western world, though women have faced more fat stigma than men (Rothblum, 1992; Wray & Deery, 2008). Anti-obesity proponents often

declare facts about obesity in absolute terms, propelling people (especially women) toward disordered relationships with food and diet (for a critique of this rhetoric, see Rich & Evans, 2005). Women who engaged in frequent weight-loss dieting were primarily motivated by a desire to avoid an unfavorable fat identity rather than by a desire to acquire a favorable thin identity, as the fear of fatness overwhelmed their weight-loss motivations (Dalley & Buunk, 2009, 2011; Vartanian, 2010). Sorority women reported especially strong fears of becoming fat along with more body dissatisfaction and more weight concern compared to other university women (Schulken, 1997), suggesting that the contexts that value traditional femininity may correspond with especially fat phobic attitudes.

Because discourses of fat phobia dominate contemporary portrayals of fatness, fat women were more likely to report negative well-being as a result of fat prejudices (Wray & Deery, 2008). Further, fat women were also taught to divest themselves of sexuality and to feel 'uncultivated' and 'uncared for' (Murray, 2004), thereby promoting a fear among thinner women that they will 'let themselves go' or 'lose control' (Rice, 2007). For fat women, they often learn to withdraw, become invisible, and feel disembodied, particularly in relation to spatial discrimination and microaggressions they face (Owen, 2012). Interestingly, while fat men felt more secure about their bodies than did fat women, fat men also expressed more dislike of fat people than did fat women, perhaps pointing to men's role as evaluators of others' (abject) bodies (Aruguete, Yates, & Edman, 2006).

Women and girls often viewed thinness as a requirement for feeling acceptable to themselves and others (Williamson, 1998). Intensifying concerns about eating too much and gaining weight have appeared both in the increasing numbers of women who require eating disorder treatments and women's imagined fears of gaining weight (Dalley & Buunk, 2009). Mothers also reported fears of their children gaining weight, though this did not translate into restricting children's eating (Jaffe & Worobey, 2006). Even for those groups historically protected from body image problems and hatred of fatness, such as African–American women and Latinas, increasing body distress and fear of fatness has emerged (Williamson, 1998). Still, white women continue to show higher levels of body dissatisfaction and more often idealized thinness compared to women of color (Abrams et al., 1993).

Race and skin color attitudes

Race has a long history of eliciting disgust in the US Many studies have identified the problems associated with internalized racism, including, historically, distaste for darker skin, attempts to lighten skin or remove any features that mark women as being of color, and struggles with accepting non-white body sizes, hair types, and dimensions of esthetic appearance (Coard, Breland, & Raskin, 2001; Hill, 2002; Mucherah & Frazier, 2013). African–American bodies have been subjected to hypereroticism or constructed as sites of impropriety and crime for generations (Bennett & Dickerson, 2000), thereby marking women of color in particular as targets for dread and disgust. African–American women reported, in several studies, an overwhelming desire for lighter colored skin (Bond & Cash, 1992; Hill, 2002; Mucherah & Frazier, 2013). Notably, Afro-Caribbean women felt most satisfied with their body shapes compared to white and biracial women, while biracial women felt most satisfied with their skin color (Mucherah & Frazier, 2013), thereby mapping complicated terrain around race, skin color, and body image.

Latinas have also struggled to negotiate cultural stereotypes of them as hypersexual and more curvy (Brooks, 2010), with two studies finding that Latinas envisioned the fit and thin white woman as the ultimate body ideal while the Latina curvy body was denigrated, as cultural and media influence provide complicated feedback to women of color about their bodies (Contento, Basch, & Zybert, 2003; Viladrich, Yeh, Bruning, & Weiss, 2009). One study found that all 187 of the Latina participants valued a thin/white body despite sometimes wanting a plumper body ideal for their children (Contento et al., 2003). Notably, even when reporting a white and thin ideal body, African–American and Latina women still claimed to be self-accepting (Rubin, Fitts, & Becker, 2003), suggesting conflicting and even contradictory accounts within the body image literature around how women of color negotiate their own body images.



Fear and disgust about disability and aging

Cultural ideals around able-bodiedness and youth have also persisted in popular and medical discourses throughout the Western world. Popular culture often evokes fear, pity, and dread surrounding disability (Shakespeare, 1994), thus affecting disabled people's self-image and encouraging feelings of helplessness and neediness (Phillips, 2001; Taleporos & McCabe, 2001). Consequently, disabled women with chronic pain felt the need to distance themselves from the stereotypes of the 'crazy,''lazy,''illness-fixated,' or 'weak woman' by instead affirming their strength, even if that meant distancing themselves from other disabled women with similar conditions (Werner, Isaksen, & Malterud, 2004). Even the sociological literatures have often framed disability merely as 'frailty' without attending to lived experiences of disability, leaving people with largely-unquestioned associations between passivity and disability (Hughes, 2009).

Aging, too, evokes threat and stigma within popular and medical discourses, as the push toward eternal youth and denigration of aging shapes perceptions around the conditions of aging (Chrisler, 2011). While women's bodily products (e.g. menstrual fluid, breast milk) have been marked as 'disgusting' no matter what the age (Bramwell, 2001), older women's bodies are seen as particularly disgusting and dreaded as they age (Chrisler, 2011; Saucier, 2004). In particular, care work that manages others' loss of bodily control was often seen as especially repulsive (Isaksen, 2000).

Women in middle-age and beyond reported anxiety and depression about not meeting cultural expectations for femininity (Saucier, 2004), particularly as bodies, sexual desire, and sexual function shift (Yee, 2010). Attitudes about death and dying and family dynamics greatly affected women's perceptions of aging and its challenges, particularly across racial groups (Hunter, Linn, & Pratt, 1979). Older women often reported feeling younger than their actual age, mostly due to their fear of aging (Montepare & Lachman, 1989). Successful aging (defined as the avoidance of disease and disability, the maintenance of high physical and cognitive function, and sustained engagement in social and productive activities, see Rowe & Kahn, 1997), on the other hand, involved increased concerns about generativity (that is, passing one's legacy down to subsequent generations) and fewer concerns about aging compared with those women with less successful aging (Versey, Stewart, & Duncan, 2013).

Regulating femininity

In addition to managing fatness, skin color, ability, and aging, women overwhelmingly learn to regulate the features of their bodies in order to produce 'proper' femininity, particularly around skin color, body imperfections, and body fitness and tightness (Kenway & Bullen, 2011). The material qualities of the body coexist with symbolic and cultural constructions of the body, even in supposedly transgressive spaces like sport (Adelman, 2008). Women also learn to regulate the presentation of their sexual identity and to carefully construct a properly heterosexual appearance and lifestyle (sometimes involving 'performative bisexuality') in order to avoid discrimination, sexism, and homophobia (Fahs, 2011; Hamilton, 2007). Collectively, these productions of the gendered body lead to discipline and control of body parts, actions, and gender presentation (Bordo, 2003; Fahs, 2011).

Along these lines, studies have also shown that women care deeply about maintaining femininity through adherence to body hair norms, with women's hairlessness serving a key role in the production of 'proper' femininity (Fahs, 2011; Tiggemann & Lewis, 2004). Women rated other women who did not adhere to the hairless standard as dirty, gross, and less sexually attractive, intelligent, sociable, happy, and positive compared to hairless women (Basow & Braman, 1998; Toerien & Wilkinson, 2004). Women reported removing their body hair for attractiveness and femininity reasons (Tiggemann & Lewis, 2004) and to avoid social stigma (Fahs, 2011). Further, though women differed about their imagined expectations of growing out body hair, women who experimentally grew out their body hair for a class assignment experienced rejection from romantic partners, parents, siblings, friends, and coworkers (Fahs, 2011). Thus, regulating femininity was not only attached to identity regulation for fatness, race, class, gender, disability, and age, but also to the regulation of specific aspects of gender as imprinted onto the body.



Intersectional identities

Several disciplines and subfields – including fat studies, disability studies, critical race studies, women and gender studies, and queer studies – have all argued that bodies are produced in social contexts and that feminist attitudes matter (Bordo, 2003; Cooper, 2010). In particular, Hill Collins (2000) has argued that bodies exist in social contexts driven by *controlling images* meant to exploit existing symbolic images and create new ones. More importantly, controlling images largely go uncriticized within people's minds, as people rarely challenge or confront these stereotypes.

In general, people know quite little about the lived experiences of those outside of their own homogenous social circles. Research that asks people to imagine others' lives is especially scarce. While one study asked people to 'imagine being disabled' (Smith, 2008) and another asked people to 'imagine the cosmetic surgery patient' (Gimlin, 2010), most research on bodies and social identities has not utilized the imagined other to assess attitudes about bodies, power, and hierarchies. By exploring ideas about the 'Other,' people can assess both positive and negative appraisals of themselves, their identities, and their social worlds (Petersoo, 2007).

Research questions

Given the variety of ways that women internalized negative messages about their own and other's bodies across a variety of identity categories, this study drew from several research questions to guide its analysis: first, How do women imagine a body of disgust and dread, and what would they articulate about such a body? What does it mean to inhabit or imagine abject bodies, and how is the production of the self written onto these imagined bodies? How do women discuss or access their ideas about disgust, and do they use their own or others' bodies to do so? What do women's narratives about dreaded bodies reveal about the relationship between social identity, social justice, power, and emotion? How can discussions of the 'imagined Other' reveal connections between seemingly disparate embodied experiences, particularly along race, class, gender, sexuality, ability, and size lines?

Method

This study utilized qualitative data from a sample of 20 adult women (mean age = 34, SD = 13.35) recruited in 2011 in a large metropolitan Southwestern US city. Participants were recruited through local entertainment and arts listings distributed free to the community as well as the volunteers section of the local online section of Craigslist (for the benefits of using Craigslist to recruit participants see Worthen, 2013). Both outlets reached wide audiences and were freely available to community residents. The advertisements asked for women ages 18-59 to participate in an interview study about their sexual behaviors, practices, and attitudes. Participants were selected only for their gender, racial/ ethnic background, sexual identity, and age; no other pre-screening guestions were asked. A purposive sample was selected to provide greater demographic diversity in the sample: sexual minority women and racial/ethnic minority women were intentionally oversampled and a diverse range of ages was represented (55% or 11 ages 18–31; 25% or 5 ages 32–45; and 20% or 4 ages 46–59). The sample included 55% (11) white women and 45% (9) women of color, including three African–American women, four Mexican-American women, and two Asian-American women. For self-reported sexual identity, the sample included 60% (12) heterosexual women, 30% (6) bisexual women, and 10% (2) lesbian women (though women's reported sexual behavior often indicated far more same-sex eroticism than these self-categorized labels suggest). All participants consented to have their interviews audiotaped and fully transcribed and all received USD\$20.00 compensation. Identifying data was removed and each participant received a pseudonym to ensure anonymity. Participants directly reported a range of socioeconomic and educational backgrounds, employment histories, and parental and relationship statuses.

Participants were interviewed using a semi-structured interview protocol that lasted for approximately 1.5–2 hours, where they responded to 36 questions about their sexual histories, sexual practices,

and feelings and attitudes about their sexuality and their body. This study and the specific interview protocol were both approved by the Institutional Review Board. All participants were interviewed by the author in a room that ensured privacy and confidentiality of responses. Questions included aspects of their best and worst sexual experiences, feelings about their bodies and sexualities, and questions about body image. For the purposes of this study, women were asked one direct question about the concept of the dreaded body: 'What is the most dreaded body you can imagine? In other words, whose body would you least want to occupy?'This question was scripted, but served to open up other conversations and dialogue about related topics, as follow-up questions were free-flowing and conversational. As the question was broad, open-ended, and contained no references to social identities, participants could set the terms of how they would discuss the dreaded body and what information they wanted to share.

Responses were analyzed qualitatively using a phenomenologically oriented form of thematic analysis that draws from feminist theory and gender theory (Braun & Clarke, 2006). This type of analysis allowed for groupings of responses based on women's attitudes and feelings (e.g. defective femininity; fear of excess). This method of analysis also supported an examination of the intersections between different identity categories that women mentioned in their responses to this question. To conduct the analysis, I familiarized myself with the data by reading all of the transcripts thoroughly, and I then identified patterns for common interpretations posed by participants. In doing so, I reviewed lines, sentences, and paragraphs of the transcripts, looking for patterns in their ways of describing the dreaded body (Braun & Clarke, 2006). I selected and generated themes through the process of identifying logical links and overlaps between participants. After creating these themes, I compared them to previous themes expressed by other participants in order to identify similarities, differences, and general patterns. After this initial reading, I also utilized two independent readers to repeat this same process; in the course of a meeting together, we refined and reworked the themes until we arrived at a mutually agreed upon list of five themes that reflected women's constructions of the dreaded body.

Results

All of the women in this study were able to identify something they imagined as their dreaded body, with all but two women answering this immediately and without further clarification. Two women required me to restate what I meant by the question, and were then able to generate a response. This study identified five themes associated with women's dreaded bodies: (1) defective femininity; (2) 'Freak' body parts; (3) fear of excessiveness; (4) dread about a specific person's body; and (5) disgust about smelliness. As evident in the descriptions below, some participants' responses overlapped between themes in that one participant's responses fit into multiple themes.

Theme 1: defective femininity

When imagining a dreaded body, one third of the sample (7 women) mentioned fears about threatened or impaired femininity. The fear of not being personally sexy or attractive, particularly along stereotypically gendered lines, appeared in some women's responses, such as Rhoda (57/White/Heterosexual) who connected fear of fatness and fear of losing femininity: 'Not being fit and not feeling pretty enough or desirable enough. I wouldn't want to be disgusting and I would turn somebody off and not be considered attractive so that's what I'm afraid of.' Defective femininity fears also appeared around aging, as Kelly (23/White/Heterosexual) framed her fear of a deteriorating body with her fear of losing her youthful femininity: 'I fear aging in my face more than my body. I try to exercise and keep fit and active but I worry about having small boobs and them getting saggy.' The construction of piecing apart her body and dividing the face and the body in terms of aging also reveals the way women often objectify and assess their bodies in sections and parts rather than as a whole, especially when imagining sites of dread.

At times, women described their ideas about defective femininity by piecing together a large number of dreaded identities into one abject body, revealing again the intersectional foundations of women's dreaded loss of stereotypical attractiveness or 'proper' femininity. Hannah (57/White/Bisexual) described her combined fear of fatness, aging, and disability:

I worry about all the things that would make me not as good of a woman, I guess. Being fat, old, or not being able to have sex anymore, or someone who is frail, handicapped, with sagging breasts or wrinkles and stuff like that.

Here, she constructed the dreaded body not only around her own loss of mobility and tightness of her skin, but also around lack of functionality to be a 'good woman.'

Theme 2: 'Freak' body parts

Four women described their dreaded body specifically around a fixation on particular 'freak' body parts, again revealing the ways in which women objectified themselves not as a whole entity, but rather, as a collection of (potentially defective) parts. Cris (22/White/Lesbian) described a fear of both small breasts and body hair: 'Being flat chested. Thick dark hair. I wouldn't want any dark hair or small boobs.' Similarly, Patricia (28/African–American/Heterosexual) feared having an emaciated face and described it in visceral detail:

What do you call those people who are really really skinny? That just makes the person look bad. Their face gets all sunk in and they look like they're going to blow away with the wind. I wouldn't want that.

In both of these descriptions, the body becomes divided into potentially defective or 'freaky' body parts: small breasts, dark hair, sunken face.

The fusion between disability and aging also appeared in three women's responses, as they fused together their fear of disabled body parts, fatness, and aging facial features. Tania (25/White/Heterosexual) feared both severe disability, fatness, and particularly abject facial features: 'A handicapped person. Quadriplegic. Someone who couldn't walk, who couldn't see, who couldn't hear. And I wouldn't want acne, facial moles, broken bones, or deformities of any kind. And definitely not fat.' The leaps between totalizing features of the body (permanent and severe disability), general fatness, and highly specific facial defects imply that sites of dread can be sweeping and identity-based or quite precise and body-part-specific, sometimes at the same time.

Theme 3: fear of excessiveness

The dreaded body was also, for eight women, associated with the fear of excess or excessiveness. The aversion to the idea of being 'too much' in any one area – too fat, too old, too sick, too disabled, too queer, or too black – haunted women's perceptions of the body they most feared. For example, Leticia (41/Latina/Bisexual) feared becoming too old, saying: 'Probably an old woman, where her skin's just loose and there's no tightness to it. That's what I would hate. I don't ever want to think about how my body's going to be when I'm 70 and too old.' As another example, Jean (57/White/Bisexual) described the fear of the trans body and excessive queerness in her response (along with, of course, 'defective' femininity), saying: 'I wouldn't want to be a she-male or something like that. Have you ever seen those things? That's just, ugh, oh my god, freaky stuff you know?' Jean's notable description of the trans body as a 'thing' also revealed the displacement of humanity projected onto the dreaded body.

The fear of excessiveness and 'too muchness' (both small and large) also appeared as an intersection across multiple identity categories, as evidenced by Inga's (24/White/Bisexual) description of her aversion toward thinness, hairiness, and anything excessive at all:

I would never want to be obscenely, obscenely skinny, the whole ribs showing through your skin. I don't want to be too hairy either, like back hair or chest hair or something like that, or randomly too much hair. Nothing too much.

Clearly, the notion of being an outlier in any way – particularly along the lines of traditional presentations of femininity – threatened women and appeared in their depictions of the dreaded body.

Theme 4: dread about a specific person's body

Three women described specific people's bodies they would not want to inhabit, interpreting the question not as something that elicited generalized stereotypes or fixations on body parts, but rather, specific individuals they knew or did not want to be. Dessa (19/Mexican–American/Heterosexual) imagined a

pseudo-celebrity that had once appeared on *Britain's Got Talent* as the ultimate dreaded body: 'Susan Boyle. She just seems really big, sad, and unlucky.' Evoking Boyle's fatness, emotional state, and how the media mocked her for being pitiful, Dessa had this as a specific image in mind when answering this question. In a related way, Sylvia (23/White/Heterosexual) added a racial dimension onto her description of the dreaded body: 'I wouldn't want to be a big ginormous black guy because people are intimidated by that.' Fusing together the physical and emotional dimensions of this body and drawing upon cultural stereotypes of threatening black masculinity, Sylvia's description reveals how imagining the dreaded Other sometimes had overtly racist overtones against people of color (no one mentioned disgust about whiteness).

Interestingly, one woman interpreted the question by talking directly about her own mother as a site of dread. Abby (26/White/Heterosexual) described her mother's substance use, repulsive bodily qualities, fatness, aging, and hygiene together as her dreaded body:

I wouldn't want to be in my mom's body. She smokes and she drinks and she doesn't even remotely try to be healthy and she doesn't bathe a lot so she smells all the time. She's fat and her cholesterol is out of control and her teeth are kind of rotting and she doesn't have a lot of hair. She is such a mess.

This response was particularly vivid in its ability to exemplify the detailed emotional language that infused some women's responses to this question.

Theme 5: disgust about smelliness

As a final theme, five women specifically mentioned smelliness when describing their dreaded body, often discussing race, gender, and fatness in relation to smelling bad. Zhang (36/Asian–American/Bisexual) discussed her family's negative reactions to dark-skinned men of color along with her own negative appraisals of their smell:

A dark colored skinned person. I grew up and my father said, 'I am going to have to accept that maybe my future son-in-law is going to be white, but I don't want you to bring home any dark skinned babies because the community will look down on you and our family will look down on you.' Plus I'm not attracted to African-Americans or people of color. I've dated a Mexican guy before but their body odor just smells different.

This interplay between her family's biases and her own imagined sensory experiences provided an especially vivid example of how racism gets attached both to actual bodies and to imagined bodies.

Smell and the foul odors of the dreaded body also appeared in other women's responses as they considered what they found repulsive. Florence (38/White/Bisexual) put fat phobia and racism together by saying: 'Somebody totally overweight, or full black people. I mean, just because I don't like their smell. Their smell is different. Their hair smells.' The frankly racist tone of this statement also highlights how readily women could uncritically access their own in-group prejudices and repulsion related to entire groups of people. In a similar manner, Jane (59/White/Heterosexual) described her fear of aging and fatness: 'I wouldn't want to be obese. It's difficult to stay clean and not smell, to move, have mobility. Your ability to do things is limited and in this society it's not looked upon favorably.' Framing her fear of aging and fatness as something people feel (generally) also allowed her to blame these feelings on the culture rather than owning them as originating within herself.

Discussion

This study makes a unique contribution to the existing literature by excavating and examining women's ideas about an *imagined* disgusting or dreaded body rather than asking them to reflect merely on their own corporeal bodies. Women easily answered this question and readily accessed aspects of bodies they found dreadful and disgusting, raising questions about the ease of accessing such ideas and the production of 'appropriate' femininity. The specter of this dreaded body – appearing in this study in a multitude of ways – provides insight into the visceral qualities of disgust that women have about bodies typically constructed as 'Other.' Notably, the fact that women interpreted this question so widely and that they assembled such a vast range of sites toward which they directed their dread speaks

to the intersectional nature of oppression. Women feared their own defective femininity just as they targeted specific body parts or segments of their bodies; further, they loathed the idea of becoming excessive or 'too much,' just as they attached that excessiveness to the sensory experience of smelliness. In instances where women constructed a specific person to dread, these narratives revealed clear ideas about race, class, gender, and size, often woven together in vivid ways. Identities with positive social status – becoming men, tall, strong, white, heterosexual, and so on – were notably absent from women's narratives of the dreaded body.

Clear social identity implications existed throughout women's narratives about dreaded bodies, revealing not just a pervasive fear of fatness (and, in a few cases, excessive thinness) but also how fatness attaches itself to racial, age, disability, and gueer narratives as well. For some women, these connections allowed them to create a sort of 'Frankenstein' like body, a composite of many fears pieced together (with the implication of an impending loss of control embedded in each additional fear added to their list). The links and overlaps between women's fear of aging and disability, for example, seemed clear, just as fatness and blackness seemed to link together in some of the narratives. More specifically, the social identity categories women mentioned in their dreaded body narratives highlighted the painful fears of becoming too fat, too skinny, too black, too disabled, or too old, as these stories haunted women's concepts of body image, self-esteem, and an imagined future self they wanted to avoid. At times, women imagined identity categories that they could potentially become (e.g. getting fat or aging) while at other times they imagined identity categories they could never become but nevertheless felt disgust toward (e.g. white women mentioning blackness and brownness with disdain).

Importantly, the imagined dreaded body revealed the way that categories of oppression fuse together in the project of both building an ideal self and avoiding the dreaded self. When women said they want to feel attractive and sexy (and that they did not want to challenge their sense of traditional femininity), this was a projection of an idealized self that they felt they could not achieve; still, that idealized self was often built around a body they did not want to inhabit (Dalley & Buunk, 2011). This study addresses this latter point especially well, highlighting women's framing of the dreaded, abject, excessive body to understand their desired and idealized bodies. In short, body image researchers have sometimes undervalued the affective, emotional, and visceral qualities of how women think about their own and others' bodies, particularly bodies they want to avoid at all costs. This visceral disgust perhaps drives women's quest for an ideal body even more than the more cognitive or goal-oriented belief systems women have. Consequently, future research could certainly better address the ways that emotions like dread and disgust impact women's body images and drive their eating, grooming, and 'maintenance' patterns related to their bodies.

The construction of the defective, damaged, or disliked body united a fascinating and disturbing mix of different types of bodies, parts, and emotions. In particular, women's language of visceral disgust met with the language of defectiveness and excess, as feeling repulsion interfaced with 'too muchness.' This may represent a particularly gendered experience of the body, as scholars like Douglas (2002) and Martin (2001) have framed women's bodily experiences around themes of dirt, excess, and emotion management. Foucault (1995) has argued that 'docile bodies' become framed as passive entities subjected to multiple sources of intrusion, control, and discipline; they are, in short, the canvases upon which cultural anxieties are dumped. Ultimately, imagining a dreaded body seemed to reveal these processes quite clearly as the textures of racism, classism, homophobia, sexism, ageism, ableism, and fat phobia informed women's sites of dread and disgust. In doing so, women subjected themselves to forms of social control while also ensuring subscription to culturally-validated values of 'proper' bodies and 'proper' femininity.

This study also pointed to the ways that 'controlling images' (Hill Collins, 2000) still dictate much of how women experience their own bodies and others' bodies. Whether expressed through the fear of becoming a particular person (e.g. a 'ginormous black guy; Susan Boyle) or whether framed as disgust toward an entire group of people (e.g. quadriplegics, trans people), women in this study likely responded to the imagery available to them in families, schools, and the mainstream media that dictates and controls ideas about proper bodies and acceptable body expressions. Future research could examine

how exposure to certain kinds of images in the media (e.g. watching certain kinds of television shows; more exposure to advertisements in general) or communicated within families and schools (e.g. ideas about dating, fear of different races) affects women's ideas about disgusting or revolting bodies related to a variety of stereotypical identity categories (Ward, Merriwether, & Caruthers, 2006).

Limitations and future directions

Certain research decisions may have affected this study's results, as the choice for wording the interview questions may have captured only some, but certainly not all, of the facets of women's ideas about dreaded bodies. Studying men and their ideas about disgusting bodies could also yield insights into how gender and masculinity inform ideas about dreaded bodies. A larger sample size of women might find new themes while more quantitative research questions, approach, and analysis could also work to identify patterns along gender, race, class, and sexual identity lines (e.g. ranking disgust toward other bodies). Further, because the dreaded body question may be influenced heavily by the social identities of the researcher/interviewer (as social desirability may have led participants to not disclose their disgust about identities that the interviewer seemed to represent), future research could use interviewers from different social backgrounds (e.g. race, age, size, ability, and so on) to determine if social desirability changes how people talk about disgust and dread. Finally, professors in women and gender studies courses may want to use disgust in the classroom as a means to generate discussions about body politics, social identity, and oppression, as students may be able to easily access and generate ideas about what they find repulsive; such conversations could yield fruitful insights about our deeply embedded social norms and stereotypes.

Ultimately, fields like emotion, fat studies, and body image studies can benefit from the results of this study by focusing not only on how fat and disabled bodies are intersectionally created and understood (particularly along race, class, and gender lines) but also how fat phobia and ableism connect deeply with racism, classism, and homophobia. Perhaps, for example, fat studies could reframe excessiveness as a form of resistance rather than a mark of deviance or oppression; still further, perhaps fields in critical body studies could situate bodies on the fringe, bodies that rebel, and bodies that refuse assimilation, obedience, and compliance as useful and valuable to the feminist and anti-racist projects. By better understanding the visceral, painful aspects of social oppressions (e.g. accusations of smelling bad) as something that cuts across identity categories, we can not only better confront discourses that shame and humiliate individuals and groups, but also work to join forces with others in the fight for social justice.

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