

The illustration features a purple silhouette of a woman's body. Her arms are raised, and her hands are behind her head. Dashed white lines with arrows indicate measurements of her chest and waist. Her legs are spread apart, and dashed white lines with arrows indicate measurements of her thighs. The background is white with various colored dotted lines and dashed lines in shades of purple, blue, and orange. The title 'Body Image' is centered in a purple script font, enclosed in a dashed purple rectangular border.

Body Image

**DISRUPTIVE[™]
WOMEN**
IN HEALTH CARE

NOVEMBER 2012
#DWBODY



David Lee,
Creative Director

The design of the cover visualizes the concepts of proportions, measurements and aesthetics in body image. Dotted and textured lines signify obscure boundaries and outlines of expectations, which are synonymous with mainstream society’s idealizations. Subliminally imposed expectations, which vary between cultures, demographics and time periods, ultimately restrict people from thinking freely about their self-image.

The silhouette featured in the cover is intended to portray this confinement, which tends to be skewed toward affecting women more heavily than men. Surrounding this silhouette are various types of lines that denote specific elements of self-image: thin and thick lines signify weight and stature, long and short lines imply hair length, straight and diagonal dashes suggest sexuality, and, perhaps the most discernible, the diversity of colors allude to that of racial and ethnic origin. These lines represent the plurality of images, traits and identities that should be embraced by those who possess them as well as by society as a whole.

Serving as a preface to the content and contributors of this book, the cover design is also a prelude to the visuals featured in subsequent pages, most of which depict more female silhouettes that diverge from the conventional vision of body image.

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Robin Strongin, Creator & Founder



If someone asked you to describe yourself, what are the first three words that come into your head? Don't think about it too long, just the first three things that come to mind. No right or wrong answers here. 🍃

I find it interesting how different people answer a question that seeks to get at the essence of who and how a person sees herself (or himself). Some answer this by describing their outside physical appearance (sometimes in a positive light, in other instances, not so much), while others describe more of their personality attributes. And, interestingly, when I ask women to answer this question, I almost always have to say, "don't be shy," because the women I ask are typically apologetic or self-conscious when they share something positive about themselves.

How we see ourselves, how others see us and how society and the media say we should see ourselves are dramatically different and have profound ramifications for our mental health, physical well-being and overall happiness and sense of self. Not surprisingly, the research on the relationship between body image and career advancement and satisfaction is not pretty.

When the Disruptive Women in Health Care team set out to explore this dimension of health during our Summer 2012 Body Image series (click here to see the full set of posts), we made a commitment to be as inclusive as we could about the issues. When it comes to body image, there is a never-ending list of troubling issues. Despite our best efforts to capture the multitude of topics, we no doubt missed a few. If you have something to share—about topics we covered or topics we inadvertently omitted—by all means jump in, and stay tuned for an interesting post being written by the spouse of a breast cancer

survivor because our discussion of this topic on Disruptivewomen.net isn't over.

I would like to send an enormous shout out and offer my heartfelt gratitude to all our bloggers who not only took the time to contribute to this important series but shared deeply personal, often painful stories, insights, and lessons, so that all of us could learn from them.

I also want to say a special thank you to Carrie Winans, who was point person on this effort as well as the rest of the Disruptive Women gang: Elena Berger, Marian Kerr, Hope Ditto and Andre Blackman, all of whom contributed to make this series so successful. And to David Lee, whose artistic expertise is evident in this ebook. I hope you will take a moment to read David's vision and explanation of the design elements he used to convey the concept associated with Body Image.

After reading through the posts, you may want to give some extra thought to how you describe, define and think about your body image and how you can help others "see" themselves differently.

But don't stop there. There is much we must do. As Shannah Koss explains in her piece, Disruptive Women, through its Health In Place (HIP) initiative, is calling on you, our Disruptive Women community, to work with us as we seek to identify solutions that are needed to improve women's body image and self-esteem.

Once we stop allowing others to define us, we will be unstoppable – in the workplace, in politics, in life.



From Soldier to Beautiful Civilian

By Jennifer Crane

Jennifer Crane is a veteran in the Society for **Women's Health Research's** (SWHR) **Fatigues to Fabulous** campaign. She is a combat veteran of the United States Army, who served in the fourth rotation of Operation Enduring Freedom (Afghanistan) in 2003. Since returning home and accepting the fact that she is a disabled veteran, Jennifer has dedicated her life to helping others.

Femininity is a rare treat among women in the armed forces, especially during deployments. With women now transitioning into more combat roles, being feminine may be even less on the radar than it was before.

Most days are spent in uniform, blending in with the male population. I believe this is a point that is too easily overlooked, or worse, is viewed as vain for even acknowledging. But for women, it is important to identify not just as a soldier but also as a beautiful woman, who just happens to wear boots more than heels.

As a former female soldier, I can tell you that body image can change dramatically for some while serving our country. When you wear the uniform day in and day out, it can be hard to feel pretty. I for one had some serious body image issues after my service. I never felt pretty and I developed eating disorder tendencies in a frighteningly fast fashion.

After coming home, there was no transition back to being a woman. I left a woman, became a soldier, and came home lost. I felt pride when I wore my uniform. I never felt that in my civilian clothes. I hated my whole closet and came to the decision that it was because I was not pretty enough and skinny enough to dress femininely. I only identified with my manlike wardrobe. If I am being honest, I still feel that way most days.

Some women will wear some makeup while in uniform but I was not one of

them. I loved being a soldier and wanted nothing more than to be accepted by my male counterparts. Sometimes the loss of identity happens so slowly you do not even realize it until it's too late.

When the uniform came off, my whole identity was gone.

I had no clue how to be a woman or even just a civilian for that matter. I would see other girls my age and wonder how they could look so beautiful when I couldn't. As a result, I began criticizing my body. I have Post Traumatic Stress Syndrome from my service in Afghanistan and that fueled my body image issues. I would venture to guess that I am not the only woman who has had body image/eating disorder issues that manifested along with PTSD.

With that said, through this journey, now eight years later, I am beginning to find the woman I can be without the uniform. I put on my makeup and do my hair and try not to be too hard on myself. I still struggle daily with body image issues and now see how closely related they are to my time in service. But I am learning that being feminine is a good thing and not a sign of weakness. I want to love the body I have now that wears sandals and heels as much as I love the soldier I once was.



Can We Appreciate the Mature Female Body?

By Margaret Huyck, PhD



We know the birthday cards. You know, the ones where 'older woman' is signified by sagging everything and bunny slippers.

The advertisements urging us to utilize the latest magical cure ("hated by dermatologists") to restore wrinkly, saggy, puffy skin to an earlier, more youthful visage. We remember the astonished comments when Dove began showing real women, with real curves (and fat) in their advertisements, even on buses. And the current comments about the young woman who protested (effectively) to Seventeen Magazine about air-brushed images of the women who were presented as their models.

Attractiveness is equated with intelligence, beginning in nursery school. By midlife we are all too aware that attractiveness is often used synonymously with "youthfulness." When people began saying, "Oh, you don't look 60! ...or 70!" they meant it as a compliment. When my friends began serious hair coloring and face lifting, and stopped marking birthdays or even mentioning their graduation year, and worried about holding on to jobs in which competence was connected with appearance... we knew we were all in trouble.

The Older Women's League (OWL) has always worked for economic security for midlife and older women. That means keeping a job, and being promoted because one has developed competence along with maturity and experience. Rationally, an appearance that says "mature," "experienced" and even "wise" would seem to be an asset. But this is often not the standard we see in the real world. This issue is most apparent in the high-visibility jobs (the TV anchor, the model, etc.) but we have a great deal of evidence that it creeps into many other positions.

Body image concerns emerge early, and persist long. My first graduate school research project explored body image and self-concept among adult women. I was appalled (but not surprised) that few Caucasian women in 1963 America liked their bodies; they especially did not like their hips. I didn't like my hips. My mother made it very clear to me that my hips were a major impediment in achieving the American Girl dream of the 1950s: having that ideal 34-24-34 profile that just fit the Vogue patterns and the Seventeen fashions.

Since those early days of humiliation, regret, shame, dieting, hope, exercise, and futility, I have gained a new appreciation for my body – and the bodies of those

Many older women recognize their inner beauty and inner strength, and use those to advocate for the changes needed to preserve and protect the world they want for their daughters and granddaughters.



These are the challenges of later life: how to feel good about ourselves, and commit to preserving the best of our values and traditions for future generations when we no longer recognize our physical selves, when we are not validated in the same ways by others, and when we are uncertain about the future.

beauty and sexual/social desirability to define themselves as adequate and desirable humans. Many of these women are indeed wonderfully beautiful; I admire them as I admire any work of art. I recognize the work required to create and sustain such beauty. I also mourn, in advance, the adjustments that may be required when such women (or men) realize that they can no longer rely on their physical beauty for social acceptance or self-esteem.

Less advantaged women (like me) learn earlier that we cannot depend upon our physical beauty to garner social approval or acceptance, or to feel adequate or good about ourselves. Some rely on a "good marriage" and/or "good children" for self and social approval; others look more to independent, career-oriented modes of affirmation. Any of these may work to sustain a sense of worth, short term or long term.

Many women are in the mid-range: we feel pretty good as long as we have some semblance with models of beauty within our age group, and we are recognized as attractive within our social group. The "attrac-

whom I cherish.

At 73, I am familiar with the ways my body has betrayed me. After an exuberant period of power walking, power-listening (to books), and feeling finally in total control (in my 60s), my knees began to protest with pain, my hips ached, and I succumbed. I had knee replacement and therapy, followed by hip replacement with therapy, followed by new efforts toward modified senior fitness. Keeping even moderately fit requires more and more energy, with unreliable results.

However, I have also experienced the persistence and ripening of sensuality. I move slower, but I appreciate even more the sensual appeals of food preparation, food sharing, and food memories. Orgasms are more rapid, more spontaneous, relieved of the anxieties of wondering if my body is perfect enough; I have become familiar enough with my own sensuality to know how to arouse myself, with or without the "perfect partner." I realize that all of us have sensual potentials waiting to be enjoyed; perfect proportions in women, and strong erections in men, are not essential. Flaccid penises still experience pleasure, ripe clits can respond to many different sensations, and our erotic imaginations and memories are intact.

In my observations, the women who have the most difficulty dealing with the inevitable physical changes of age are those who have relied on the culturally-defined standards of

veness" may relate to our partnership, our parenting, our social involvements, or our work accomplishments. In later life, many of these are challenged as sources of self-esteem. Our partners may desert (physically and/or emotionally), the children may disappoint, our close friends and allies may die, and our work accomplishments may fade under the enthusiasms of our newly-empowered replacements. Many women speak of being rendered "invisible" in the social sphere.

These are the challenges of later life: how to feel good about ourselves, and commit to preserving the best of our values and traditions for future generations when we no longer recognize our physical selves, when we are not validated in the same ways by others, and when we are uncertain about the future.

Fortunately, most of us rise to the challenges. Many older women recognize their inner beauty and inner strength, and use those to advocate for the changes needed to preserve and protect the world they want for their daughters and granddaughters. They seek out partners who appreciate their special varieties of sensual and sexual vitality. They ignore or resist the influences of advertisements and other messages that imply that "older" is a bad word, because we know better. We were young, and we appreciate the wonderfulness of that stage of life; we also appreciate the specialness of maturity.



Olympic Bronze for a “Big Girl”

By Elana Meyers

In 2010 when I was named to the U.S. Olympic bobsled team, I was one of the biggest, if not the biggest, female athlete on the team. I was definitely not the tallest, but I did have one of the highest weights – it was even reported in an article.

In my sport, the goal is to push a 400-pound bobsled as fast as you can for approximately 5 seconds and then hop in, so it requires pure explosive speed, strength, and power. Competing in a sport where bigger is better, as long as you can still move, I came into the games anywhere between 178-180 pounds. It might seem odd to think of a female athlete who weighs 180 pounds, but moving a 400-pound sled is no easy task, and as my teammates like to say, “it takes mass to move mass.” I proved that theory; at 180lbs I won an Olympic bronze medal.

Why is my weight at all significant? Ever since I started playing sports I highly valued a muscular body. When I saw a muscular body, I thought of all the power and strength that it must have. Growing up, many of my female peers wanted to be skinnier, wanted that thin model look, but I wanted to be strong, fast, and powerful. In middle school I finally started developing muscles, and I quickly became known as a “big girl.” I entered high school at 5’8” and 168 pounds, and continued to gain more and more muscle (and probably some fat as well). My athletic performance improved accordingly. Sure, I had problems buying jeans and I would never be elected homecoming queen, but I was okay with that because I thought I was doing what I needed to do to achieve my athletic dreams.



Elana Meyers celebrates her share of her team's American victory during the 2010 Winter Games in Vancouver, Canada.

(ALEXANDER HASSENSTEIN/GETTY IMAGES)

Until people started telling me otherwise...

People are very quick to tell “big girls,” even “big girl athletes,” what they can or cannot do. Everyone knows that “big girls” can’t do the same things as skinny girls can, and they’re quick to tell them that. I was told that as well. I was told I couldn’t run 100 meters as fast as the small skinny girls, and yet I placed 5th in the State Championship in High School. I was told that I couldn’t play positions on the softball field because I wasn’t as quick as the smaller girls, but I became an All-Conference

shortstop in college and played professionally. They said that I couldn’t be a guard in basketball because I was just too big, but I did, and was even recruited to play collegiately. If I had listened to all the people who tried to place limitations on me just because of my size, I wouldn’t be where I am today. **The question is though, how many girls succumb to these beliefs about what a “big girl” can’t do? How many potentially great athletes stop trying because they’re told they’re too big?**

I can’t say I was always this confident. At one point I did start to feel the societal pres-

ures to be thinner, and thought to myself I could be quicker if I was smaller. I started dieting, which ultimately led to an eating disorder – bulimia coupled with a deep depression. From outside appearances you would never know. At my lowest weight I was still 155-160 pounds, but I was 20-25 pounds lighter than my norm and was significantly weaker.

The breaking point came when I went to run a track meet, and was so weak and slow that I performed horribly. I realized that I was robbing myself of my athleticism, and one

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of the things that meant the most to me: my athletic career. Through treatment and through my faith, I was able to recover. I gained back not only my size, but my strength and speed as well. That experience made me realize that my size is my biggest asset. It helps me be the athlete I am today, and it allowed me to win an Olympic medal for my country.

Size is no longer a limitation. There are plenty of “big girls” going out there and following their dreams, and I stand as an example of one of them. Sometimes when people place limits on us, it’s because they were too afraid to follow their dreams themselves. To all my “big girls,” you can do anything you put your mind to, no matter what the scale says. To everyone else, the next time a “big girl” has a dream of playing a collegiate sport, running a marathon, climbing Mt. Everest, or even winning an Olympic medal, think twice before placing limits on her.

If there’s one thing any cardiologist will tell you, the bigger the girl, the bigger the heart.



(BRYAN BEDDER/GETTY IMAGES)

OLYMPIC BRONZE.

Meyers, of Douglasville, Georgia, won the silver in the bobsleigh two-woman event with Shauna Rohbock at the 2009 FIBT World Championships in Lake Placid, New York. She was then named to the US team for the 2010 Winter Olympics on 16 January 2010. On February 24, 2010 Meyers along with Erin Pac won the bronze medal at the 2010 Winter Olympic Games. Their runs had a total of 3:33.40, a difference of +1.12 from first place.

I'm a Butch

By Kait B. Roe

I'm not trying to make you uncomfortable. I don't live my life to make a point or to be political or even to make you think. Frankly, my existence isn't about you at all. I try to live the most authentic life I can. I have never fit into the world comfortably. My body is female. My heart is butch. I am not transgendered, which means that I do not want to be a man. If you watch television looking for me, you won't find me.

According to the media, I don't exist – even in shows well received by the gay community. I am not Shane, or even Max, from *The L Word*. I am not trying to be anyone other than who I am, exactly as I was born. I am a queer butch dyke.

When I was a child I played with Tonka trucks, Matchbook cars, enjoyed sports on TV, and learned to shoot a gun. I played baseball as a catcher with the boys well into high school and spent time working on my car. I played girls' basketball for all of my middle and high school years. None of these activities was outside my capability as a girl, but I spent an incredible amount of time explaining why I liked to do them. I had great support from my grandparents and close friends, but I was bullied and teased fairly aggressively by classmates and even teammates. I did it anyway because I loved doing this stuff and frankly, I was good at it. I had played basketball and baseball since I was old enough to put on a catcher's mitt and dribble a basketball between my short little legs. I had a natural athletic aptitude and I used it to stay healthy and learn team work and have fun. I still do.

As a child I liked Levis and t-shirts and sneakers; as an adult I still like wearing clothes that are comfortable. I like clothes that don't cut me at the neck or arms, and which don't emphasize my shape. Most people think I wear men's clothes to make a statement. I don't. I wear them because they seem to fit my broad shoulders better and my waist more comfortably. Men's clothes are not sized in ways to attack my self-esteem. I used to try to buy women's business suits, but they aren't sized for someone with my shape. I don't like clothes that try to emphasize my breasts or minimize my hips, or any other number of things I think women's clothes are designed to do. I like simple shirts – not frilly, lacey, beaded or embellished. I want to wear soft cotton or a fine silk that is classic, but not feminine. For work, I wear clothes I buy in the men's department: a nice button down shirt, a pair of chinos, a suit coat and sometimes a tie. I don't do this for any reason other than it is

what is comfortable for me.

I am not trying to change you. I am not trying to change me. I like me the way I am and I would like to be accepted as I am – in this body, in this expression. Gender is not a binary experience in my world. Gender is a fluid process I inhabit day to day, moment to moment. There is a really good discussion/description of the gender spectrum at a great site called [It's Pronounced Metrosexual](#). I encourage everyone to take a look at it and really try to understand how much of a disservice our culture does to each and every one of us when it tries to pigeonhole us in a very narrow definition of what gender is. To be clear, according to the gender scale the author uses, I am on the more male side of the middle or androgyny.

In the last twenty years I've often bemoaned the loss of my butch sisters. I miss the days when I was a young adult and there were so many more self-described butches. Many of those who might have identified as butches are now identifying as transgendered. I am sad and struggle daily with my worry that in opening up access to hormone therapy we have offered an option to many of those who would have been baby butches to change their bodies instead of the culture which so marginalizes those who don't fit into the culture's binary gender assignments.

I wish for a culture that accepts me for who I am, without having to take testosterone to fit into the world's idea of where I ought to fit. I am a butch woman who opens doors for my femme girlfriend, who puts on a suit and tie for the office, but has no interest in changing my gender. I am a butch dyke who is lovingly called "bro" by many of her friends, but who prefers the female pronouns.

I wish for a culture that doesn't make me feel uncomfortable when I walk into a ladies' room simply because I look less feminine than expected. I wish for a culture that can appreciate Rachel Maddow for her amazing intellect and embrace her without making her look more feminine than she prefers to be in her daily life.

Children with Chronic Diseases

My sense of body image drastically changed when my daughter was misdiagnosed with Lupus when she was 9-years-old. High dose steroid treatment rapidly added 60 pounds to her slender frame, and overnight, all of her girlfriends renounced their friendships with her. **By Santi KM Bhagat, MD**

Lying down on our sofa, with her head on my lap, she would look up at me and say, "Mommy, you're so beautiful." Suddenly, I lost my ability to focus on myself. Perhaps I felt guilty. Perhaps, just like my daughter, I was in shock. I stopped looking in the mirror, stopped wearing make-up and stopped dressing up. I could only think of how my daughter felt, about her body and her life. I would tell her

she was beautiful. She didn't believe me. She was – and she is. Her kindness and sweetness continue to amaze me. She doesn't realize that the beauty of her soul is reflected in her face and expression. She refused to have her picture taken for years. Now, 15 years later, she's lost most of her steroid weight, but not her feelings of pain and abandonment.

I learned so much about life through my daughter's eyes. Like her, there are so many other young people whose health or disability affects their body image. No one addresses their feelings and how society treats them. They are supposed to figure it out themselves.

I learned so much about life through my daughter's eyes. Like her, there are so many other young people whose health or disability affects their body image. No one addresses their feelings and how society treats them. Instead, they are supposed to figure it out themselves.

In an effort to address this issue, Physician-Parent Caregivers, the organization I founded, decided to hold a Salon Studio Shoot for young adults with chronic conditions. Marcella Johnstone, a senior stylist at Ilo Day Spa in Washington, D.C., organized a day of pampering, with haircuts, styling, and make-up.

Photographer Tom Van Veen shot photos of each of them posing like supermodels. For the finale, the videographer captured the group sitting in a circle as they talked about their lives and their dreams.

What we learned was invaluable. What we felt was invaluable. All of the young adults glowed. They felt good; no one needed to fit a mold. These young people were poised and elegant, and their inner grace dominated the room. Given the stage, they spoke candidly about how they handled society's lack of understanding about them and their lives. All of the stylists came away with the realization that there are many young people who live with chronic conditions and disabilities and have had difficult struggles.

The Salon Studio Shoot taught us that we are missing a huge opportunity. The national focus on obesity, physical exercise, and nutrition all seem to skip over young people who have chronic health conditions and disabilities. This group needs more attention, not less. Most of their time and energy is spent on managing their health and staying in school. But, just like their peers, they need to feel good about their body image to succeed in interviews, make friends and find romance. Feeling good about themselves improves their ability to handle each day. The salon event was easy to carry out. It's even easier if each of us makes a simple effort to spend time with these young people to go for a haircut, shop for clothes, try on makeup – or just take pictures.



Man of the Month Interview: Jasjit Singh

By Laura Harwood

Jasjit Singh is the Executive Director of the Sikh American Legal Defense and Education Fund (SALDEF), and we're proud to name him our Man of the Month during our Body Image series and share with our readers his experiences as a Sikh American who wears articles of faith.

Laura Harwood: How do you react when small children or uninformed people ask you why you are wearing a turban?

Jasjit Singh: I think that I and other members of my community are pretty used to the fact that people may not know about Sikhs. Often when people stare, it isn't negative attention but rather a lack of awareness. One thing that happens quite often is a very innocent child or someone who doesn't know anything about my faith will make a comment. We welcome those moments as opportunities for education. A child on the street may ask his mother, "What's that on his head?" or "Why does that man have a beard?" or funnier yet, "is that a pirate?" I'm usually within earshot of hearing it and the mother will generally say "don't worry about it or we'll talk about it later." I always wonder what they'll say later to the child. However, if I do have a chance to talk to them, I let them know that we're members of the Sikh religion, that there are 700,000 Sikh-Americans in the country, that it's the 5th largest religion in the world, that we've been here over 100 years, and that our ideals match closely with American ideals. These are usually quick interactions and you don't have time to correct. I just hope they Google it or go to the library and find the correct information.

Has there ever been a time when wearing a turban has made you feel self-conscious or uncomfortable?

Yeah, definitely, especially when I was younger and I really stood out in the crowd.



Jasjit Singh speaks during the Sikh American Legal Defense & Education Fund's annual national gala in Washington, D.C. in 2011.

There's so much pressure when you're young to conform and not stand out that much, right? If you wear physical articles of faith, that's almost impossible. When I was young, I wore a top-knot and I never cut my hair so my hair was wrapped in a bun. Many people used to confuse me for a little girl. (My sister actually played that up a little too much.) You put together the long hair and an article of faith that resembles a bracelet, and you're a target for anyone to make fun of. That was certainly very challenging. But then when you get older, you begin to grow a beard and go to the complete other end of the spectrum very fast. All of these things change not only your appearance but also your interactions with society and certainly your self-image as well.

Who makes the decision about switching from a top-knot to a turban, and at what age does that happen?

I started my full turban when I was a ju-

nior in high school – so about 16 years old. Typically this decision can be made at any age, but it's usually when your beard starts to come in. A full turban is almost less problematic than the top-knot from a teasing or taunting perspective. I think it's because the top-knot can look unfamiliar and is even less often recognized as a piece of religious clothing. The turban has been seen a little bit more often. Don't get me wrong, the connotation isn't always positive, but people may at least recognize it as a religious article.

Did your family ever discuss the possibility of you not wearing articles of faith?

Both my parents were fairly religious so the idea of me getting a haircut or not showing outward articles of faith never really came up. However, we did have family friends that ranged from following the religion to the T to those who just practiced the more spiritual aspects. So I did know Sikhs who didn't keep a turban or beard, but re-

gardless there was always a strong sense of acceptance of everyone.

Has there ever been a moment where being someone who wears a turban has made you feel especially proud or self-confident?

Definitely. I had a lot of pride knowing the history behind it and knowing the many people who contributed to the faith and what their ideals were. I grew up in a pretty diverse suburb of Chicago, but even so, my cousin was the only other Sikh in the school. We were on our school's tennis team, and senior year we won our sectional title and went to states. This was a source of pride for our families and the local community of Sikhs. It was really nice to see two pictures of Sikhs in the local paper and at the high school. My cousin was also recognized as valedictorian. Again, a person in a turban in the long line of scholars, you get the sense that you represent something bigger than yourself. You feel you need to conduct yourself in a way that represents yourself and represents your community. You're always reminded of your responsibility to the larger community.

It sounds like you took on a role model position to younger Sikhs. Do you feel that positive role models are hard to find in the mainstream media? Who do you look at as role models in your daily life?

It's definitely tough. A beard and a turban do not have a positive connotation these days, especially post 9/11. Things on the news about Al Qaeda or the Taliban really make it hard for others to believe that having a turban and a beard can be an uplifting experience. My personal role models are always there. I really need to look no further to find positive Sikhs than looking to the generation right before me. There are many people a few years older than I am who started successful companies and are leaders within their professional lives, but have also built institutions to promote Sikhs in America – institutions like the one I'm a part of today.

But even more broadly, I'm proud of the people who realize that our responsibility goes beyond raising our own children and that we need to demonstrate what the Sikh ideals are. The turban stands for the brotherhood of everyone, the spread of peace of unity. The people who volunteer their time to serve this broader mission are role models to me. This is the idea we strive for at SALDEF, this broader societal rights issue.

There are some Sikh role models who are more visible – the CEO of MasterCard is a Sikh, there are three Sikhs in the US army, and there is a Sikh now in the Washington Metro Police Department. These people break glass ceilings and positively affect the brand of what it means to be a Sikh in America. It is unfortunate though that I can't point to mainstream media.

You mentioned 9/11... Many people equate turbans with the Muslim faith. How drastically do you feel 9/11 changed the way you were viewed by people?

I would say that while people have always looked at me differently, after 9/11 I remember this feeling or energy shift that went from curiosity to suspicion. People were suspicious about what I was doing, who I was, and why I was in certain places. Previously I had felt unique or different. Post 9/11 it was like I was viewed as a threat or foreigner, even though I was born here and have lived in America my whole life.

I'd love to see the media include more diverse images in their marketing. More sexual orientations, religious orientations, cultural identities, whatever it may be that is lacking, we need more. I have always felt that America's strength is in its diversity. Too often, for political benefit or whatever reason, there is a desire to make someone "the other."

We definitely view 9/11 as a watershed moment for our community, although there was always something we seemed to be working against. In 1978 with the hostage situation in Iran, people discriminated against Sikhs thinking they were behind that. In the 1990s, there was desert storm. They would call us "Saddam" and more hate crimes would be committed. Now it's "Osama, Taliban, Al Qaeda." It happens less often in DC or in an educated area, but it still does happen. We've come to realize that we have to tell our story in order to change people's perceptions.

You played an important role in getting the Metropolitan Police Department to allow Sikh officers to wear their turbans. How did you accomplish this?

This started many years ago with my predecessors. We did a lot of cultural awareness trainings about who Sikhs are. We know that when there is a lack of knowledge about us people will fill in those gaps with misconceptions about who we are. The fact of the matter is that police officers have the responsibility of protecting all members of society. Without the right information they won't know fully how to protect and even worse, may racially profile the very people they are supposed to protect. For that reason, among others, we made a decision to launch a law enforcement

partnership program back in 1999.

We produced a training video with the Department of Justice and really reached out to the other police departments here and around the country. We worked with Hate Crime Coalitions and we made a special effort to connect with progressive police departments. The fact that Washington Metro PD is viewed as progressive and has a female Chief made the department a great candidate for us to pursue this historic policy change.

When we talked with other Police Departments about making such an accommodation for community members, we often faced a chicken or egg scenario. We would go to a police department and say, "Hey, we have a Sikh who would like to join your police department. Would you mind amending your policy so they can wear a turban with their uniform?" They would say, "If you think they want to apply, why don't you have them apply and then we can update the policy as we go?" What ends up happening is Sikhs will be hesitant to apply in this situation because they aren't sure if they'll be allowed to keep their articles of faith once accepted. Often we see people go through and complete training successfully just to be told they shouldn't plan on wearing their turban to work the first day. It's always a shock to the applicant.

How long do you think it will be until we see a Sikh in Congress or in the Cabinet of the White House?

I think there is a very strong movement toward that. Back in 1957 the first Asian-American elected to Congress was actually a Sikh named Dalip Singh Saund. He was from California and it was a great moment of pride for the community. Granted, he did not wear a turban or wear physical articles of faith. However, he did maintain his culture, upbringing and spirituality on a personal level. It would be really amazing if we could see a Sikh in a turban within a high position in DC. There are Sikhs in the Department of Justice, White House and Capitol Hill who have made these strides. I am confident that within the next 5-10 years we will see even more progress on this front.

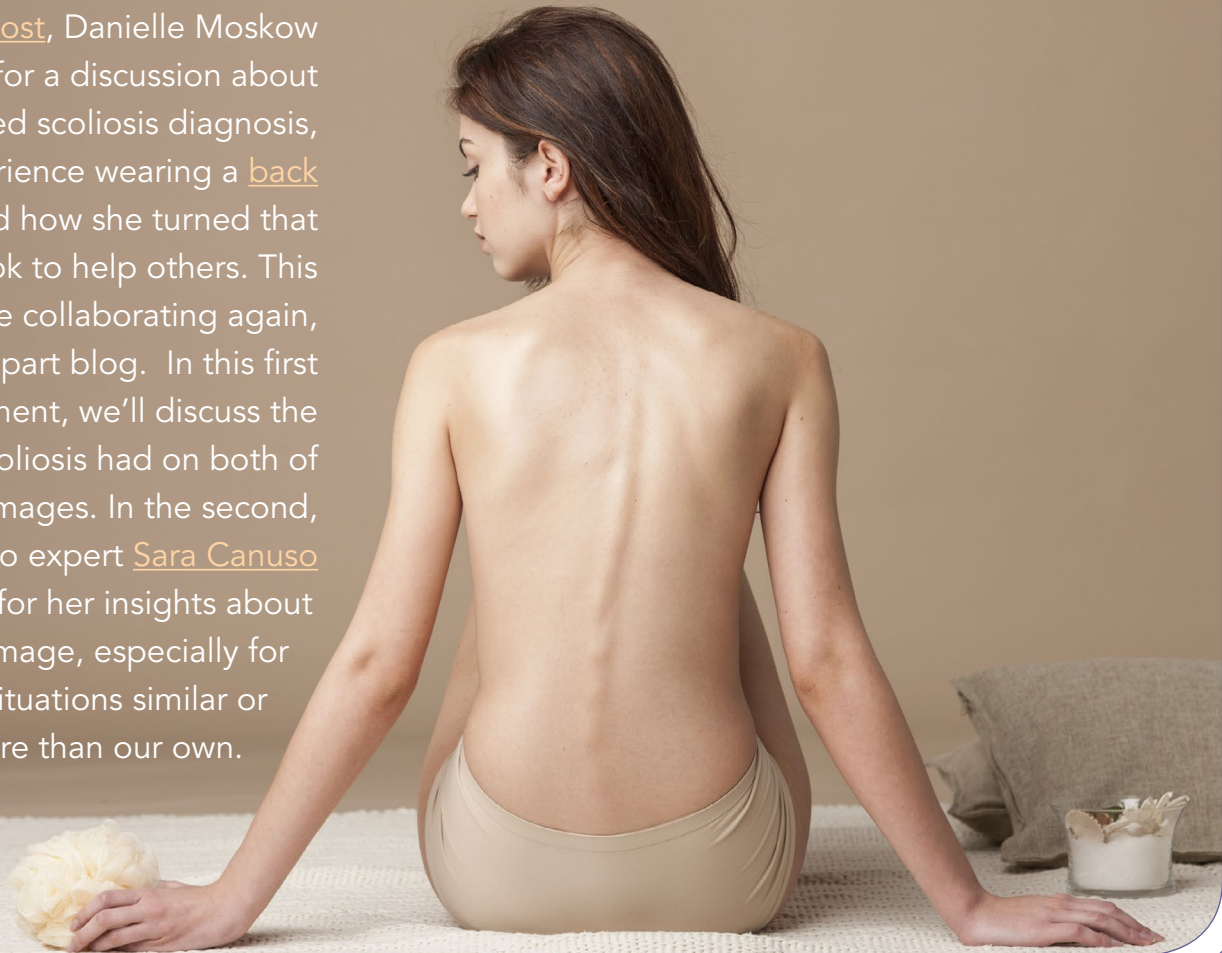
What would you like to see the media do in terms of Sikh representation?

I'd love to see the media include more diverse images in their marketing. More sexual orientations, religious orientations, cultural identities, whatever it may be that is lacking, we need more. I have always felt that America's strength is in its diversity. Too often, for political benefit or whatever reason, there is a desire to make someone "the other." One way to do that is to just not include them at all and never give people a chance to recognize any similarities. It's always heart-warming for me whenever I see a diverse population. It goes a long way to impact not only the Sikh community, but all American communities.

Disabilities, Deformities & Defining a New “Normal”

By Glenna Crooks, PhD & Danielle Moskow

In June’s [post](#), Danielle Moskow joined me for a discussion about our shared scoliosis diagnosis, her experience wearing a [back brace](#) and how she turned that into a book to help others. This month we’re collaborating again, on a two-part blog. In this first installment, we’ll discuss the impact scoliosis had on both of our body images. In the second, we’ll turn to expert [Sara Canuso](#) to ask for her insights about body image, especially for people in situations similar or more severe than our own.



Glenna's Comments:

At the outset, Danielle and I would like to acknowledge that we see great value in being attractive and appreciate advice on how to be. My own appreciation for beauty heightened dramatically in my early 20’s. I was injured in a training accident as I prepared for Olympic Trials, hoping to represent the US in my sport: Karate. A wild kick to the left side of my face smashed some bones and required surgery to repair. Even when the bruising and swelling went down, to me my face looked different. Though no one else notices, I still do.



We think it’s time to redefine “normal” to encompass a much wider array of body types. We’re not sure what that means, but we know it’s not the current portrayal of tall, slim and “perfect.”

Like so many people with facially disfiguring accidents – even when they’ve recovered with no noticeable after effects – I’ve become alienated from my own face. It’s a perfectly nice face by the way; it’s just not mine. Danielle and I recognize that many people who are beautiful (by all usual standards) suffer when they believe their bodies have betrayed them by not being as perfect as some ideal, Photoshopped model. In this post, however, we’d like to create some recognition for those like us who are unable to meet that standard by dint of ge-

netic conditions or who are disabled and face even greater challenges. Clothes don’t fit without substantial alterations, beauty advice columns and fashion magazines ignore them and regardless of how much they diet and exercise, they’ll never be what society feels is “normal.” We think it’s time to redefine “normal” to encompass a much wider array of body types. We’re not sure what that means, but we know it’s not the current portrayal of tall, slim and “perfect.”

Danielle’s Comments:

I definitely felt insecure wearing a brace, especially initially. I have a small build, so wearing the brace under my clothes was definitely noticeable. It was hard to not look like the “me” I was used to and I was concerned about how I’d appear to others. It took some getting used to, but I managed. I bought bigger shirts that made the brace less noticeable, and the more comfortable I became, the less it mattered. After all, I knew it was only temporary and I reminded myself not to let the brace define me. However, I was affected by the diagnosis itself in another way I could not have anticipated. Before the diagnosis, I never noted anything was “wrong” about my body. My doctor said this was because my curve was so slight that only an expert would ever see it. But once I learned I had a curve, I started to notice that my hips were also not “normal;” they were disproportionate, a common occurrence in those with scoliosis. My doctor said no one would notice unless they were looking for it, but it still bothers me and probably always will. The media I saw growing up did not spotlight real women and it continues to present a skewed view of what “normal” is, showing only perfect bodies, Photoshopped to an “unreal” level of perfection to sell products. Advertisers cre-

ated the notion that we can never be “good enough,” making it clear that not only do we need to buy clothes and, of course, bathing suits to create a better image and “hide the flaws,” but our hair needs to be tamed according to our body type as well, according to [Ladies’ Home Journal](#). But as I see it some women are now fighting back. In 2009, singer [Kelly Clarkson](#) was digitally slimmed to be on the cover of *Self*. Just days after the cover released, she appeared on [Good Morning America](#), making it obvious that her body was nothing like the one headlining that issue, which was called – ironically – “The Body Confidence Issue.” She made it clear that she was confident about her body weight and had no problem on the Red Carpet. It is unfortunate that the editors of *Self* did not agree and felt they needed to Photoshop her to a smaller size. While it is hard for most women to feel confident seeing what the media regularly displays as “normal,” it is an even greater obstacle for those with abnormalities or disabilities. Europe offers some fresh perspectives we should look at here in the US.

[Lara Masters’](#) love of fashion did not end with the below-the-knee amputation of her legs, caused by meningococcal septicemia. She learned to incorporate fashion into her new life, saying that when “...I look good I feel good...and it enables other people to see me as ME instead of my disability.” [Ann Oliver](#), whose [Multiple Sclerosis](#) confines her to a wheelchair, designs a fashionable and functional clothing line for [disabled people](#). It’s called Xeni and as she told the British Telegraph, “...the clothes we wear are an indication of how we feel about ourselves.” [Tanja Kiewitz](#), beautifully models a black [Wonderbra](#) in Belgian newspapers, a photo we’ll likely not see in US papers – at least not for a long time to come. “They have to see that I’m a woman above all and that I can be beautiful and sexy, and the handicap is secondary.”

[Shannon Murray](#), in a wheelchair since breaking her neck as a teen, is making appearances in High Street fashions in British retailer’s Debenhams’ store windows. She joins models in fashions to size 16.

While it is hard for most women to feel confident seeing what the media regularly displays as “normal,” it is an even greater obstacle for those with abnormalities or disabilities.

Now, from Both of Us:

Will the U.S. catch up? We hope so. There’s a lot riding on it. Not just for people like us who will never be the media’s “normal,” but for everyone else we know, who can’t be Photoshopped to perfection before their next date or job interview. Perhaps [Push Girls](#) – a reality show following Mia Schaikewitz, Auti Angel, Angela Rockwood and Tiphany Adams through everyday life and challenges in motherhood and relationship break-ups – will help. Seventeen Magazine, as well, recently pledged not to Photoshop its models. We think Tanja is right; she is beautiful. Laura, Anne and Shannon rock in their focus on fashion. And as for the Push Girls, they have spunk and courage, as does the [Sundance Channel](#) for airing the show. As we were contemplating this post, [Glee, The Concert](#) was airing. We were delighted to see that one performer was in a wheel chair, that is, until he got out of the chair and danced. It was disappointing to see that the show could not have even cast someone who really does have Artie’s spark with a real disability. He could not hold a candle to [Auti and Mia](#) of Push Girls. Please [watch them in action](#), their “wheels in motion” at [www.sundancechannel.com/sunfiltered/2012/06/watch-push-girls-dance/](#) We can promise you it will be the most exhilarating two and half minutes you’ll spend today. As the Push Girls say, “If you can’t stand up, stand out.” **We agree.**



An African Woman in America

By Josephine Karianjahi

I remember a time when my childhood friends and I innocently sang along with a catchy ad for a skin cream that would make my skin, all mocha, into something fairer and lovelier.

I have seen countless television talking heads, reality shows, and clothing connoisseurs talking about how a black woman should look. The noise goes on all day, and every day – a loud beat in every voice telling me and other black women there is something wrong with the way we look. I wonder, how many black women will be influenced by this to change their appearance? How far do they have to go to fit in?

Every ounce of my health training has taught me to consider the mind an integral part of staying healthy, or recovering from a health condition. Our minds are open sponges from the day we are born, rapidly absorbing the right kind of information about what things to eat in order to thrive, what is a danger to us, and how to survive in the world we are born into. When we move to new places, again, we take in all the information we can about places to go, things to eat and how to interact within this new culture.

Born to African parents in an African country, I learned that black is beautiful, and to be proud of my looks and body shape. I learned to value my contributions to the world. As a teen, I battled the full range of growing pains, discovering the unpredictability of my weight and skin, and navigating the emotional rollercoaster that is growing from girl to woman. Fortunately I had an extensive network of school friends, sister, mother and a bevy of aunts who made these times seem normal. They cemented my view that I was beautiful,

first and foremost, and that nothing and nobody could ever take a strong sense of self away from me.

And then as an adult, I moved to the United States, and settled into the college culture, where I quickly discovered that black women and other women of color received many of the same messages, but were also often rejected in their youth for their skin and figure. There was incessant image manipulation noise about what size I should become, what diet I should be on and how I should blend in.

I would like the world's media to issue a retraction, a giant proclamation that they were wrong, that black is beautiful, and so is brown, and any other shade of color. Because that is the key to the way that we can start loving the skin we are in.

I am not sure what an ideal black female in America is supposed to look like any more. I have observed that women who are celebrities look nothing like my mother, aunts and grandmothers – nor the women on TV when I was little. And even with these fiercely independent positive role models, I still battled with the overwhelming sense that I should want to be like that idealized woman. I changed my hair and my look, and never quite found a happy medium until I had shorn off my hair to about an inch off my scalp, and started planning to sport a natural look. And more importantly, I started to think that my struggle was multiplied for anyone who had no alternate frame of reference as I did.

I can't tell you how many times I have heard some women of color express deep dissatisfaction with their bodies, and even at times wish they were born another race. Malcolm X said in 1962: "Who taught you to hate the color of your skin? Who taught you to hate

the texture of your hair? Who taught you to hate the shape of your nose and the shape of your lips? Who taught you to hate yourself from the top of your head to the soles of your feet?" These are questions we must answer to retrieve ourselves from the way we have been conditioned to think about black skin.

How can we accomplish that? One way is through affirming the variety of skin tones and body types in fashion, beauty products and throughout film and television. We need to ensure that women are not compelled to change the hue of our skin and the way we look to blend in, or to emulate icons like Beyonce, who have lighter skin and fairer hair. More than anything, let us start with young women, many of whom have internalized these harmful messages, and teach them to share it back and defuse this desire to change their selves totally.

I am asking us to implement our own public health intervention, that requires us to reject the media's portrayal of the black female body – stop comparing ourselves to the TV stars and we endlessly see, stop trying to carve our features into those of another, and start asking ourselves: Who am I and who made me hate the skin that I am in? I would like the world's media to issue a retraction, a giant proclamation that they were wrong, that black is beautiful, and so is brown, and any other shade of color. Because that is the key to the way that we can start loving the skin we are in.



A Photographer Reflects on Seeing

By Annie Levy

Documentary photographer Dorothea Lange has said that "the camera is an instrument that teaches people how to see without a camera."

My work has largely consisted of portrait projects showcasing different aspects of people's lives, frequently at the intersection with the world of medicine. This began with my spending a good deal of time photographing older people. Frequently people would tell me that I was the best photographer they'd ever had. I found the comment a little strange, since they hadn't even seen the picture yet. Although I try to create a good experience for the subject, that didn't strike me as enough to deserve that level of praise.

So I asked one of my subjects about this. In essence, she told me that it was because I made her feel comfortable enough to be herself. I gave this a good deal of thought as it seemed at the very least important to my work. Although the subjects were "older adults" or "people with xyz condition" I didn't actually photograph them with those categories in mind.

I was given a camera at a very young age and was fortunate enough to travel the world with my parents. My dad, an artist himself, would always want the picture of the landmark without us in it – he loved us, but he didn't love us in front of the Eiffel Tower or the Coliseum or even blocking the view of the Magic Kingdom. Years later we all agreed it would have been much more fun to have those ridiculous family photos of us in front of landmarks, but at the time we were more interested in the artistry of the shot.

I think this made me lonely for people in pictures. The Eiffel Tower is always the Eiffel Tower, but it is the person in front of it smiling, frowning, pointing to the top that, for me, brings the place to life. In addition, although I'm outgoing I am also shy, so any chance to connect with someone by simply being allowed to see them, show appreciation and

not have to worry about what they are thinking is wonderful. So when I used my camera in this context I felt an unqualified YES about the person in the photo. I was so happy that they were in the frame – it was like being alone but not being lonely. They felt like a comforting presence in the room.

In one of my photo workshops with young people, the assignment "What Inspires Me" produced an image by a young photographer of her 14-year-old niece having her face painted. The photographer said that she was inspired by the girl "being herself," and she was afraid that as she got older she would find that difficult.

On the face of it, being oneself would seem to be the easiest thing in the world. And yet in practice it's not so simple.

On the face of it, being oneself would seem to be the easiest thing in the world. And yet in practice it's not so simple.

Who hasn't experienced the feeling of wanting to be different from oneself, particularly when a camera is pointed one's way? I have been on the other side of the camera, having been a subject for a photographer who I felt was scrutinizing my face in a way that made me feel negative about myself. How would I look in the final product? Would he let me see it? Could I trust him to photograph me properly? Did he have the right angle? The right lighting? And perhaps worst of all, if he got it all wrong it would live forever on the internet. It was a roll of the dice, so how could I look anything but terrified in the picture?

More recently I was photographed by another photographer who, it turned out, was one of my "best photographers ever." I felt seen – not only without judgment but with an eye that let me be, well... me. It was such a rare feeling that it took me a while to identify what it was. I think that eye is the eye that produces trust and is completely disruptive – in life and in photography.

As a result of my work I recently started an organization called [Photo ID Foundation](#), the mission of which is to change the way we see and are seen through projects, experiences and exhibits – more simply put, to see with an eye that says YES.



(ANNIE LEVY / ALZHEIMER'S ASSOCIATION SERIES)



(ANNIE LEVY / HEBREW HOME SERIES)



(ANNIE LEVY / NEUROLOGY NOW SERIES)

My Body or My Baby: Amanda's Story

By Amanda Bruce

"THAT is not acceptable."

She stared down at me coolly over steel grey eyes framed by glasses. Her perfect blonde hair framed a disapproving scowl as she pointed towards my dessert of choice. An Oreo cookie, broken in two during my cramped subway ride after my get-well retail job, suddenly looked measly to me. I had been so proud of my meal planning at home for the Intensive Outpatient Program I was participating in. They had told us to step outside of our comfort zone and pick foods we normally wouldn't eat.

On the list of choices we were given it clearly read, "One Oreo." "That is not enough for your dessert," the group leader continued loudly in front of the group. "You will have to get something else next time." She continued on to the next client's dinner, scrutinizing it in front of everyone. I was red-faced and full of shame. I felt like I had been exposed as an eating disordered deviant who didn't deserve to be there. And my internal voice, which hadn't quite developed yet, grew angry. "One f—ing Oreo," I muttered to myself. Needless to say, I do not look back favorably on my experience at that particular treatment facility. Food is merely a symbol in eating disorders, and that therapist was focused on it like a pointer dog. Food is the mask that control and anxiety issues hide under, and in my opinion, many treatment providers become stuck on the outside of a client when they should be treating the inside. "You look so thin" might be better replaced with "You seem to be really struggling. How can I best support you?" When considering menu planning, instead of "That's not enough food!" a therapist might say, "I notice you're trying to cut corners. I wonder if something else is going on for you today?"

A month earlier, I had undergone a wildly different experience at the Partial Hospitalization Program I had attended. I had walked into group one day to discover a piece of scratch paper and pencil

on my seat. The dark-haired, kindly group leader requested that we bring our attention to the body part that we despised the most, and write it down.

I grimaced as I thought of my stomach.

My stomach, the one area I could never tone on my body, no matter how hard I restricted eating. My stomach, which never looked good in a bikini, even if I was thirty pounds underweight. My stomach, which reminded me of loss and greed and gluttony and just too much. The group leader then asked us to name a positive use for that body part. My eyes welled up as I wrote on the other side, "Pregnancy."

I had wanted a family of my own since I was a small child. I wanted to raise a healthy, imperfect, loving family of my own who didn't inflict trauma on each other. I wanted it so bad. But I wasn't going to have it at the rate I was going – my continued cycle of starvation and bingeing isolated me from any social contact whatsoever, rendering me practically hermit-like.

At that moment, I understood that my weight was not the right way to measure my body; my body was useful. I knew I had to dive head-in. I knew I had to give up this way of living forever.

It's enough that friends and family constantly have something to say about what is on our plate; it's either a sarcastic "Jeez, did



you order enough?" or "What are you trying to do, diet?" But when treatment providers start focusing on this, we are in trouble. Are weigh-ins and food measuring a necessary part of treatment? Absolutely. Those recovering from an eating disorder wouldn't learn or re-learn to eat any other way. However, there's a way of doing it that is shame-free and teaches a neutral attitude towards food. The real problem is the need for control that lurks underneath. What is the client trying to control? What is she trying to keep at arms' length?

For me, it was the fear that I was just too much. I feared my emotions were too big and my real, deep personality was too passionate and loud for someone to love. So, I starved it away until I was a person who took up hardly any space at all.

I moved on from both treatment experiences, and started to take a stab at life on life's terms. I attended grad school. I returned to community musical theater. I became a mental health

I realized I had finally gotten it. I had let things get messy and out of control. I had let go of control so I could have the very thing I had so yearned for in treatment that day, so very long ago.

Treatment that focuses on a symptom you can control may be effective short-term, but often can't be sustained. Conversely, treatment that focuses on your heart and spirituality and dreams – things that you cannot externalize – sticks.

Once you take care of the inside, the outside will catch up.

professional. I had slip-ups here and there with my eating, but they didn't stick the way they used to. After getting out of one tumultuous relationship and pursuing many others, I finally met a man who had just as loud of a personality that I did. He taught me that it was okay to let my jagged edges show and that it wouldn't chase real intimacy away.

And when we took our baby girl home from the hospital, I looked around our once-pristine living room – now strewn with boxes of delivery food, diapers, baby toys and cards – and



When media speculated about her “puffy” face, Ashley Judd wrote a [piece](#) on media misogyny for the Daily Beast. It turns out that Judd was on steroids to combat a sinus infection and flu – she had not gone under the knife. Judd denounced our patriarchal media system as one that conspires against women by placing “the interests of boys and men over the bodily integrity, autonomy, and dignity of girls and women.” According to Judd, this type of hate against women **“is subtle, insidious, and never more dangerous than when women passionately deny that they themselves are engaging in it.”**

Many women are oblivious to the impact that media has on our lives. Marketers spend billions of dollars per year to set a largely unachievable standard of beauty so that they can sell us more products as we strive to achieve the elusive perfect body. This deception creates feelings of inadequacy in women, especially children and young adults who are in the midst of cognitive development.

For women and girls of color the impact is even greater, as racial markers, such as dark skin and kinky hair, are rejected by the influential media. Women with these physical traits are seemingly unworthy of media attention. Indeed, women of color are largely invisible in media, and the darker one is the less likely she is to see people like her on TV. This is true even on Spanish-language television, which is dominated by light-skinned Latinos.

Even more revolting is the common marketing practice of digitally lightening the skin color and photo-shopping curves out of ad-

vertisements. No wonder young women of color are facing an epidemic of low self-esteem!

When Latinas do appear in media, they are regularly typecast in stereotypical roles.

For example, Lupe Ontiveros, the iconic U.S. Latina actress, estimates that she has played a maid between 150 and 300 times on screen. “[Minority Women, Media, and Body Image](#)”, a report out of the University of Florida’s Institute of Food and Agriculture Sciences, found that:

Minority Women in the Media

By Inez González

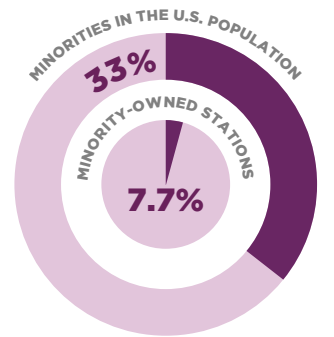
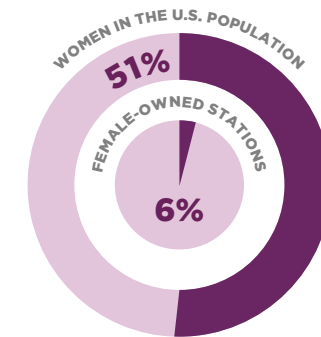


“Similar to the effects on African-Americans, the media has perpetuated stereotypes about Latin-Americans, those of which differ from the typical non-Hispanic woman. These images are shown on television, which is heavily consumed by Latin-American women. Latin-American women on average watch

four more hours of television daily than women in other ethnic groups. Due to this increase in exposure, Latin-American women are more susceptible to negative images, making comparisons to the media ideal more detrimental. As a result, Latin-Americans have a heavy loyalty to the health and beauty industry. The support that they give to this industry may be associated with the dissatisfaction felt when media ideals are used for comparison.”



Let’s get together and disrupt the status quo! Let’s hold the media accountable! Oftentimes, by unconsciously segregating we lose the power of our collective voice.



Media misogyny not only impacts our self-esteem but also how others perceive us. As many people in the U.S. come into contact with Latinas and other people of color exclusively through media, the importance of fair and accurate media coverage is even greater. For some, the media is the only way that they learn about people who are different than themselves, which encourages behaviors and attitudes towards these “others” without ever really knowing any of them.

According to a 2007 Free Press report titled “[Out of The Picture: Minority & Female TV Station Ownership in the United States](#),” while women comprise 51 percent of the U.S. population, they only own 6 percent of all stations. Racial or ethnic minorities (both men and women) own just 7.7 percent of all full-power commercial broadcast radio stations, though they account for 33 percent of the U.S. population. That lack of representation in ownership and other top-tier positions is one of the main reasons that women and minorities are not represented – or misrepresented – in the media.

So ladies, regardless of our

skin color, we have some work to do. Let’s get together and disrupt the status quo! Let’s hold media accountable! Oftentimes, by unconsciously segregating we lose the power of our collective voice. Let’s organize town halls in New York and Los Angeles and invite the top media executives to discuss our issues! Let’s find women of influence to back this project – first lady Michelle Obama would be a great start! Let’s figure out how we can create our own media – ownership is essential. Women like Oprah and Arianna Huffington understand the necessity of ownership, but we need more women to get into the game. By owning and running our own media, we can create a pipeline of women media executives and decision makers that can set a new standard. At a micro-level, at home and in our schools, let’s start talking to young women about the negative effect that media can have on our lives. Like the friend that we know is not good for us, let’s stop consuming media that doesn’t portray us fairly and accurately! Let’s move on this, ladies, to create a healthier body image and fairer treatment for all the women of tomorrow!

Photographer Rick Guidotti Captures the Beauty of Genetic Diversity

By Hope Ditto

It's the morning after the Academy Awards, barely twelve hours after the last little golden Oscar statue was presented, and your eyes are still burning with images of what our society conventionally considers "beauty." The Oscars are essentially a parade of broadly accepted beautiful people with beautiful hair and beautiful figures in beautiful clothing adorned with beautiful accessories and beautiful shoes. Between last night's red carpet glam-fest, that certain day of the year devoted solely to love and beauty two weeks ago and the annual release of the Sports Illustrated swimsuit issue last week, you're probably feeling like February's dished out all the beauty you can handle in a measly 28 days. In reality, it isn't beauty you're fed up with — rather it's the media's perception of what should constitute beauty that has got you so fed up.

So if you're at your wit's end with the notion that a toned bikini bod and/or a pair of really expensive shoes are the be all and end all when it comes to appearances, keep reading, because our February 2012 Man of the Month, photographer Rick Guidotti, has devoted his career to capturing beauty of a different sort. And we could find no better way to celebrate our favorite February holiday (my apologies to GW and Abe) — Rare Disease Day — than by honoring Rick's work.



(RICK GUIDOTTI / POSITIVE EXPOSURE SERIES)

Rick Guidotti began his career focusing, like most fashion and portraiture photographers, on capturing traditional beauty. Educated at New York's School of Visual Arts and based in Manhattan, Guidotti enjoyed the glamorous life of a successful high fashion photographer — snapping shots of conventional beauties for clients like Yves Saint Laurent, Elle and Harper's Bazaar in traditionally beautiful places like Milan, Paris and London.

But all of that changed in 1997, when Guidotti was drawn to focus his work on a different type of beauty — the "beauty of genetic diversity." Seeking to gain attention for this beauty he had discovered, Guidotti joined forces with Diane McLean, MD, PhD and together, the pair founded Positive Exposure (PE) — "a nonprofit organization that challenges stigma associated with difference by pioneering a new vision of the beauty and richness of genetic diversity." The organization "utilizes the visual arts to significantly impact the fields of genetics, mental health and human rights" by forging "cross-sector partnerships with health advocacy organizations, governmental agencies and educational institutions."

PE does not just display Rick's photos, though. They sponsor a number of initiatives and programs aimed at concurrently capturing the beauty of those suffering from genetic conditions and educating the broader public about them.

Still, they're known best for their flagship undertaking — the Spirit of Difference gallery, which is a collection of images and video interviews of people, particularly children, living with various genetic conditions. PE has an online version of the Spirit of Difference gallery that you can check out at <http://www.positiveexposure.org/>

That's not all PE does to impact and improve the lives of those living with these conditions, though. The organization sponsors and puts on "Self-Esteem/Self-Advocacy photographic and interview workshops" and "diversity workshops" and conducts "portable, sustainable educational and human rights programs and multi media exhibitions for physicians, nurses, genetic counselors, health care professionals-in-training, universities, elementary and secondary schools, legislators and the general public" around the country and the world. Using the photos and video interviews that Rick has taken, presenters (oftentimes Rick himself) shed light on not only the beauty but the unique spirit of his subjects, helping people to look past the differences created by their conditions and see that special, indescribable quality that so captivated Rick some 14 years ago.

But don't just take my word for it. Check out one of Rick's presentations, entitled "Redefining Beauty." I know I can't think of a better way to celebrate the holiday than by checking it out! And, for more information about Positive Exposure and its undertakings, you can visit their website at <http://www.positiveexposure.org/about>



(RICK GUIDOTTI / POSITIVE EXPOSURE SERIES)



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Twenty Pounds

By Janice Lynch Schuster

For the last 30 years or so, I have been trying to lose 20 pounds. I have the journals to prove it, my 15-year-old hand chronicling what I'd eaten and how much I'd exercised, how many calories I'd consumed, or carbs or grapefruits or sundaes or whatever the fad-of-the-week dictated.

There are the punishing words about myself, the disappointments and the failures. There are the bottomless bowls of Total, the bike rides and the aerobics classes, the miles I swam in the college pool. There are the four children and the bikini body class. Through it all, there are the 20 pounds. Whether I weighed 120 pounds or 180 pounds, I always needed to lose 20 pounds to become more... more what?

Simultaneously less and more of myself.

Now that I am 47 and still trying to lose 20 pounds, I'm beginning to wonder what that weight must signify. Several weeks ago, I joined Weight Watchers, widely thought to be one of the healthiest weight-loss programs in town, but I've found it impossible to stick to my allotted points (a number based on calories, fiber and fat). I'm back to counting calories (1,500 per day) and working out like crazy (treading class and aerobics, a personal trainer and weightlifting) and still losing nothing. (TIME Magazine TOLD me this would happen, but I ignored it.)

I know exactly how much 20 pounds is, what the heft of it feels like: bicep curls and triceps behind the head presses, the weight of a one-year old and the heave-ho of a bag of mulch. A doctor friend pointed out that fat is not so dense, and I might not have a real feel for the volume of it, but I do. I feel it when I try to button my "thin pants," or decide I can't swim laps because there's too much of me and too little bathing suit. I feel it when I catch a glimpse of myself from behind — that behind! — and when I try to jog on the treadmill. (There's so much of me to bring along!) At my job, I sometimes write about childhood obesity, all of the things we could do to reduce and eliminate this significant public health threat. And here I sit with my BMI of 27.5, contemplating my navel.

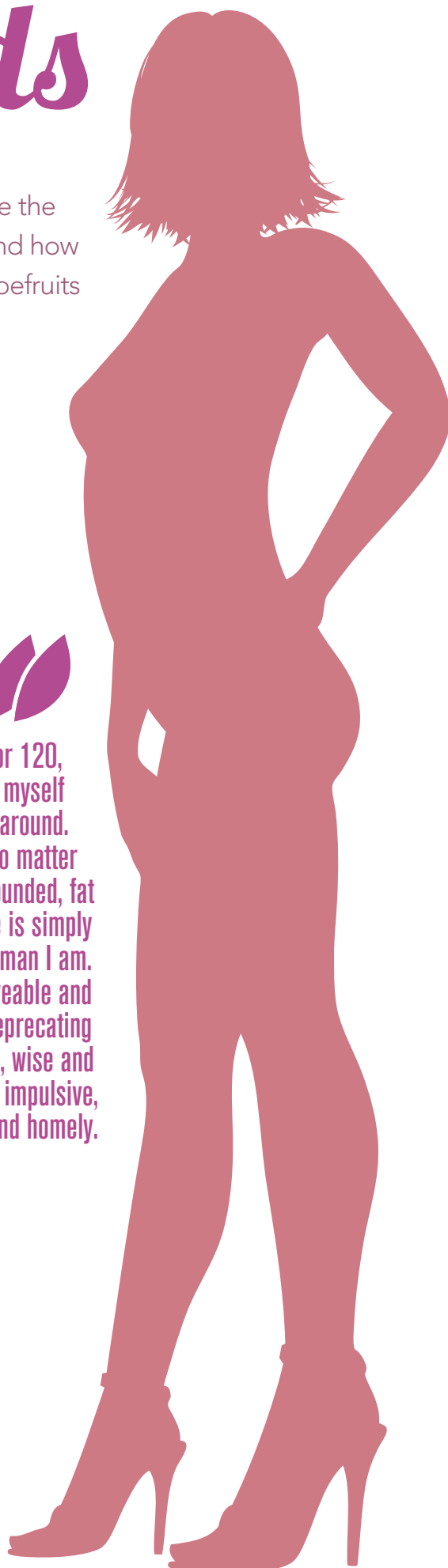
So I'm wondering, finally, at the end of a day when I have run for 45 minutes (well, almost) and eaten almost nothing (so close), what those 20 pounds must mean to me. Who would I be, minus that much of myself? Would I be more or less loveable? Would my husband be less absent-minded with his

affection? Would the little boy in my youngest child's class stop asking me whether I'm his grandmother? Would my clothes fit better, would I buy a smaller size? Would there be a party at the cash register, a "woo-hoo" sort of moment, if I made it down to a size 12? Would my children love me more? Would my life be transformed?

Not likely. At 160 or 140 or 120, I will still have myself to carry around. She's in there, no matter how she's surrounded, fat or muscle, she is simply the woman I am. She is at turns loveable and detestable, self-deprecating and self-admiring, wise and foolish, smart and impulsive, beautiful and homely. She is the product of a lifetime of years spent wishing she could be someone else. She is the product of her very own self. Twenty pounds will not make or break her. Her blood pressure, heart rate, cholesterol and blood sugar are low; she's never smoked; other than a propensity for sweets and chocolates and peanut butter, she follows the Surgeon General's Guidelines. And she is tired of worrying about that 20 pounds, tired of carrying it, metaphorically and literally. Tired of expecting that 20 pounds could make much of a difference. It is, after all, just a few bags of potatoes, or several gallons of milk, or the weight of a toddler, hoisted on a hip and carried off for nap time. It accounts for so little, and I have allowed it to count for so much.

I know that I am not alone in this — not alone in being overweight, not alone in wanting to lose it. My sisters and I all across America are on diets that promise to transform and perfect us. Maybe it is time, finally, to accept the imperfections for what they are. 20 pounds, more or less, do not a woman make.

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A HIP Initiative Inspired by the Disruptive Women Body Image Series

By Shannah Koss

I too am a woman who regularly struggles with body image and self esteem. I was over weight from 3rd grade until college and I constantly worry about my weight. I have realized that my self-image is heavily influenced by how satisfied I am with the rest of my life. When I feel good about work, family and my health (mid-to late menopause) then I usually like the way I look, but it doesn't take much for my inner image to go down hill with the ups and downs of every day life. I believe that if we can help all women to hold on to their inner beauty and let go of the "idealized woman" we will make significant progress for Health In Place (HIP).

You may recall the launch of the Disruptive Women in Health Care (DW) sponsored Health In Place (HIP) initiative at last December's mHealth Summit. The end of this post will give some brief background information about HIP.

The HIP board is exploring how the Disruptive Women Body Image series and ebook could offer a starting point for creating and fostering HIP solutions for a persistent health challenge: women's body image and self esteem. Although this can be a health challenge for both men and women, it disproportionately affects women for the many reasons articulated in the blogs and ebook.

The concept behind our HIP Body Image Initiative is to have you—our Disruptive Women community--help define what solutions are needed and which would have the greatest impact on improving women's body image and self-esteem.

What I found as striking as the blog series' themes are the diversity of the blog contributors — their demographics, professions and self-images struggles that exist with or without societal recognition, for example, self-image of women with disabilities and women athletes. Our goal is to identify HIP solutions-- some hypothetical examples include:

- **Web resources about women role models** that concentrate on attributes other than physical beauty.
- **An expose on the percentages of women who don't fit** the standard female model metrics used to sell clothes and cosmetics that perhaps were provided in PSA's interspersed between ads that use women's looks to sell products.
- **Awards for companies who have not used women's sexuality** to sell unrelated products e.g., cars & alcohol or who use models that represent the diversity of women in all shapes and sizes.
- **Conversely there could be the 10 worst companies** who misuse women's body images with a monthly list.

Body Image Blog Themes and Potential Next Steps

Some of the main themes I captured from the blog series included:

- **Low body image and self-esteem are pervasive** across American women in all walks of life.
- **Media, the fashion and cosmetic industries, the health care industry and societal norms perpetuate** narrow, unrealistic and often damaging norms of the "idealized woman."
- **These norms do not acknowledge the diversity of women** or the concept that there are, or should be, an unlimited set of characteristics that constitute beauty, i.e. beauty is in the eye of the beholder (preferably the individual herself protected or insulated from the current societal influences).
- **Body image, self-image and self-esteem are tightly coupled;** similarly mind, health and image are also tightly coupled. Our inner image often dictates our outer image and is heavily influenced at a younger age by the unhealthy norms.
- **We, women and society, need to change society and communities** to overcome the limited views of women/girls/beauty and to embrace the full diversity of women and individual beauty, inside and out.



We will be posting a new blog in the near future that will describe how you can get involved. We would like your help in developing one or more collaborative online environments that better define the problem and identify solutions that ideally prevent or reduce the need for traditional health care interventions. We're looking forward to your ideas! Stay tuned for more information.

The remainder of this post will give some HIP background. Look for more detailed next steps on the DW site about how we can all contribute.

The concept of Health In Place is founded on the belief that there are solutions out there that can enable people to live, thrive and survive wherever they are within the communities they choose.

Traditional health care delivery alone is insufficient to support HIP. By definition, traditional health care has historically only applied to a fraction of the full scope of health. Most of us spend 80-90% of our lives outside of the health care system. What we do during that time is the largest determinant of our health.

HIP solutions reframe how we define, measure, and think about health and wellness across a person's lifespan. You uniquely define your health, and how you live your life, at any given moment in time. It warrants, and may require, improvement or maintenance in all settings and circumstances that you experience through a broad spectrum of adaptable and evolving solutions.

For an intervention to be HIP, it should:

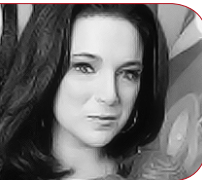
- Enable health by meeting people wherever they are — In Place @ home, school, work, shopping, traveling, playing, praying;
- Embrace innovative human and humanity factors;
- Ensure sustainability through broad applicability -- across demographics and disease/conditions; and
- Evidence cost savings and improved quality of life.



Santi KM Bhagat, MD is a physician, and the founder of a grassroots non-profit charitable organization, Physician-Parent Caregivers (PPC). Dr. Bhagat received her medical degree from the University of Bangalore and completed her residency in pathology and laboratory medicine at the Georgetown University Medical Center.



Amanda Bruce currently works as a licensed mental health counselor in Massachusetts. She earned her BA in Psychology at University of Massachusetts Amherst, and her MA in Expressive Therapies/Mental Health Counseling from Lesley University. To promote awareness about eating disorders, she writes the blog www.anotherpieceofcake.wordpress.com.



Jennifer Crane is a combat veteran of the United States Army, who served in the fourth rotation of Operation Enduring Freedom (Afghanistan) in 2003. Ms. Crane is a veteran in the Society for Women's Health Research's (SWHR) Fatigues to Fabulous campaign.



Glenna Crooks, PhD is the Founder and President of Strategic Health Policy International, Inc. Glenna solves some of the toughest health care problems of our time by distilling chaos and complexity into recognizable and easily digestible, action-oriented insights.



Hope Ditto is a Senior Associate for Public Affairs and Social Media at Amplify Public Affairs where she crafts and implements innovative communications strategies with knowledge and experience with both traditional and social media platforms. As an intern at ABC, Ms. Ditto co-wrote their daily news digest "The Note."



Inez González is Executive Vice President of the National Hispanic Media Coalition (NHMC), a non-partisan, non-profit media advocacy and civil rights organization dedicated to advancing American Latino employment and programming equity throughout the entertainment industry.



Laura Harwood brings to Mask Media Co. strong marketing and event planning skills. Her passion for mobile, health care innovation, startups and business development keeps her driven for success. Laura is on the board of Ladies DC, a young, professional women's networking group with roughly 2,000 members in the nation's capital.



Margaret Huyck, PhD has been a gerontologist for over 40 years. She is Professor Emeritus from the College of Psychology at Illinois Institute of Technology (IIT), a Fellow of the Gerontological Society of America, President of OWL—"the voice of midlife and older women," and was awarded a Senior Science Policy Fellow by the American Psychological Association.



Josephine Karianjahi is originally from Nairobi, Kenya, and completed her post-graduate program in public health at Columbia University. Her work focuses on protecting the health of the public in cities using technology and communication strategies to plan for urban spaces, transportation networks and school-based health.

Shannah Koss is a health policy, informatics expert and strategist. She was VP of Avalere Health and established a national Health Information Technology (HIT) practice. Ms. Koss has a Masters in Public Policy from Harvard's Kennedy School and a Bachelor's in Political Science from the University of Chicago.



David Lee is a graphic, web and animation designer at Amplify Public Affairs with experience in ideation, production and management of design in corporate, educational, non-profit and museum environments throughout Maryland, Virginia and Washington. Mr. Lee holds a Bachelor's in Graphic Design and a Bachelor's in Business Technology Administration from the University of Maryland, Baltimore County.



Annie Levy is a Creative Director and photographer who conceives, creates and exhibits projects. She is frequently asked to speak at conferences and present to groups, using her projects to discuss such topics as Visual Messaging, Health Care Design, Images and Aging.



Elana Meyers has been named the 2012 Women's Bobsled Athlete of the Year by the U.S. Bobsled & Skeleton Federation. This year, Meyers – a bronze medalist at the 2010 Winter Olympic Games in Vancouver – teamed with Katie Eberling to win the 2012 World Championship bronze medal in Lake Placid, N.Y.



Danielle Moskow is currently a Part-time Assistant at Strategic Health Policy International and has experience in the University of Pennsylvania Health System as well as Shriners Hospitals for Children. She received her Bachelor of Arts at Emory University.



Kait B. Roe has been a member of the Medicaid Advisory Council (the federally mandated oversight committee for Maine's Medicaid program) since 2005. Presently, she serves as a patient representative on the Working Group for Maine's Patient-Centered Medical Home Pilot Project (Funded by the RWJF/Quality Counts).



Janice Lynch Schuster is a Senior Writer for the Altarum Institute, a nonprofit health systems research and consulting firm. Her work on National Institute of Aging publications for physicians has received the Blue Pencil Award of the Government Communicators Society and the National Institute for Health Plain English Award.



Robin Strongin is President & CEO of Amplify Public Affairs and Creator & Founder of the award winning Disruptive Women in Health Care. Ms. Strongin is an accomplished public affairs expert with 30 years of experience working in Washington DC—with and for Federal Agencies, Congress, non-profits and the private sector. She serves on numerous boards, including: Kaiser Permanente's Institute for Health Policy, THE HILL Newspaper Publisher's Advisory Board, and the Institute for Music & Neurologic Function. Ms. Strongin was honored to be named one of the Women Rocking Health by Rock Health, the first seed accelerator for digital health start-ups.



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