

TRENDS & Ideas

SELF-IMAGE

Black, White Girls See Their Bodies Differently

African-American teenage girls are more likely than white girls to be happy with their bodies, writes Michele Ingrassia in *Newsweek*. Ingrassia cites a recent study by researchers at the University of Arizona showing that 90 percent of white junior-high and high-school girls were dissatisfied with their weight

and teens included full hips and thick thighs in their description of ideal beauty. Black girls were also less likely than whites to base attractiveness entirely on physical characteristics. Beauty, nearly two-thirds of them said, is having "the right attitude."

Mimi Nichter, a coauthor of the study, said broad cul-



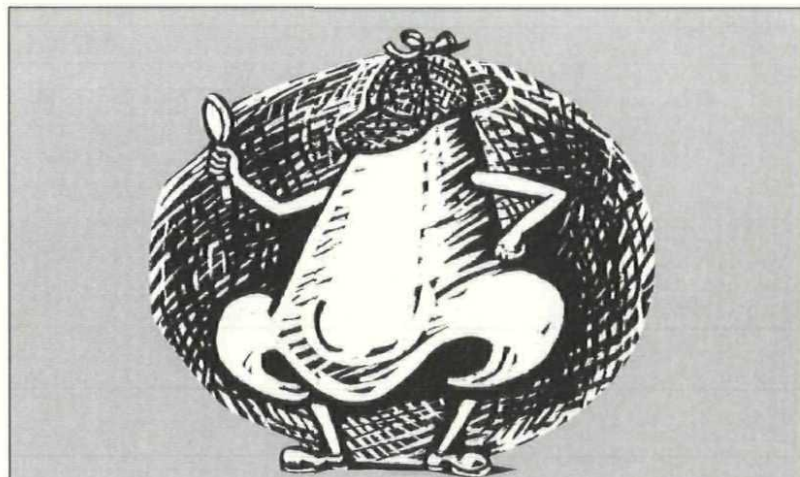
Sim Gellman

and shape. By contrast, 70 percent of the black girls surveyed were satisfied with theirs.

White teens in the survey defined female perfection as a girl standing 5 feet, 7 inches and weighing 100 to 110 pounds. But African-Ameri-

tural differences underlie white and black teens' ideas of beauty. African Americans tend to be more aware of life's limits, she said, while middle-class whites often dream of making themselves "over."

The differing views may explain why anorexia and



TECHNOLOGY

The (Electronic) Nose Knows

The sense of smell has gone high-tech. The electronic nose, according to the *Economist*, is becoming a tool of quality control for food, drink, and perfume industries. Even physicians are finding the electronic nose's olfactory capabilities useful.

The conventional method of detecting wound infection by culturing wound swabs can take five days. The electronic nose can determine whether a leg ulcer is healing by simply sniffing for infection with beta hemolytic streptococci. Sensors will eventually be incorporated into wound dressings, says Alan Syms, managing director of Aromascan, a maker of olfactory sensing equipment in Britain.

Food poisoning could decrease through the use of the electronic nose. The *Economist* reports that the U.S. Food and Drug Administration has found that one of

Aromascan's products has the ability to detect fish going bad "long before a human could detect any taint."

The food industry is also making use of the electronic nose to ensure quality control. For example, the *Economist* points out, once an electronic nose is trained to recognize the smell of Coca-Cola, it "will unfailingly spot the real thing from any supermarket upstarts, and ensure that the same real thing is pouring out of every Coca-Cola production plant in the world."

In addition, it is less expensive for manufacturers to use the electronic nose than current techniques. The electronic nose costs about \$3 a sniff, compared with about \$22 to \$37 for gas chromatography. The article says electronic noses are "less erratic than humans. And they don't catch cold."

bulimia trouble fewer black than white teens. Sixty-two percent of the white girls surveyed reported dieting at least once in the past year. Though 51 percent of African-American girls also reported dieting, follow-up

interviews indicated that they were less serious than white teens about sustained weight-loss programs.

Sixty-four percent of the black teens said it was better to be "a little" fat than too thin, an attitude that seems

more reasonable than the whites' obsession with thinness. But African-American girls often endanger their health with their greater tolerance of obesity. Teenagers of both races should find a middle way.

HEALTH

Results Mixed on Reaching Health Goals

Americans are achieving some of the health goals established by the U.S. Public Health Service in *Healthy People 2000*. Still, a number of strategies set to help Americans reach these health goals need correction, write J. Michael McGinnis, MD, and Philip R. Lee, MD, in the *Journal of the American Medical Association*.

Healthy People 2000's broad health goals—increase Americans' span of healthy life, reduce health disparities, achieve universal access to healthcare services—are to be reached through health promotion, health protection (population-wide interventions), and clinical preventive services.

Health promotion strategies have prompted a reduction in the number of adults who use tobacco products and the number of alcohol-related automobile deaths. "Positive but less striking gains are recorded for the proportion of adults exercising regularly, eating less fatty diets, and reporting stress-related problems," note McGinnis and Lee. But the proportion of the population that is overweight has increased, and the number of Americans who lead sedentary life-styles has not changed.

Health protection strategies such as the 55-mph speed limit, motor vehicle air bags, and laws that require the use of child safety seats

and seat belts "have all advanced highway safety and saved lives," report McGinnis and Lee. Although air quality has improved and a reduction in children's blood lead levels has occurred, indoor air quality is in need of improvement, "as evidenced in part by increased asthma hospitalizations," they point out.

A decline in the number of deaths as a result of coronary heart disease and stroke show that clinical preventive strategies that encourage Americans to lower their cholesterol levels and control hypertension are having a positive effect. The authors report that Americans are increasingly using cancer screening processes, and



cancer death rates are showing slight improvement. Although clinical preventive services are helping many Americans reach the health goals of *Healthy People 2000*, McGinnis and Lee point out that access to such services remains out of reach of many uninsured Americans who cannot afford them.

"Full accomplishment of the goals of *Healthy People 2000* is dependent on the success in reaching all Americans through a com-

prehensive health system that integrates personal health care and population-based public health," assert McGinnis and Lee. They note that with the growth of managed care, a medical care financing and payment system is developing that could reward healthcare providers and plans that keep people healthy. But, they warn, such a financing system must extend to all Americans and it must foster "true accountability for keeping people healthy."



MINORITIES

The Return of Redlining

"Redlining"—the refusal to make mortgage loans and sell homeowner's insurance to residents of entire neighborhoods—is illegal today. Since passage of the Community Reinvestment Act (CRA) of 1977, banks and insurance firms have been required to treat rich and poor, black and white communities alike. But poor and minority neighborhoods continue to be shortchanged, write Penny Loeb, Warren Cohen, and Constance Jackson in *U.S. News & World Report*.

An investigation by the magazine revealed that:

- The number of poor and minority homeowners who cannot get full-coverage property insurance is almost 50 percent greater than that for people who live in mostly white, middle-class neighborhoods. In addition, poor persons pay on average more than twice what middle-class persons pay for insurance.
- Though federal law forbids it, middle-income blacks from mostly minority neigh-

hoods are more than twice as likely as middle-class whites from mostly white areas to have mortgage loan applications denied.

• Today there are many fewer banks in poor neighborhoods than in the 1970s, which further limits the mortgage loans available to local residents. Baltimore, for example, had a nearly equal number of banks serving white and minority neighborhoods in 1970. By 1993 bank branches serving white areas outnumbered those in minority neighborhoods 5 to 1.

To make matters worse, the investigation showed that the four federal agencies responsible for regulating banking rarely punish those found violating the CRA. Now House and Senate Republicans have introduced bills that would exempt nearly 88 percent of U.S. banks from the 1977 measure. Such proposals will probably find friends in Congress, because banks and mortgage companies made almost \$12 million in campaign contributions in 1993-94.