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SELF-WORTH, BODY CATHEXIS, AND  
SATISFACTION WITH AVAILABLE SELECTION FOR THOSE WHO WEAR  
DIFFERENT-SIZE MATERNITY CLOTHING

by

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(ABSTRACT)

Clothing plays an important part in establishing and maintaining one's self-worth. Maternity clothing is especially important to the pregnant woman in maintaining her self-worth and in preparing for the new role as a mother. The maternity wear apparel industry caters to the average-size customer. Very often it is difficult or impossible to acquire maternity clothing to fit the small- or the large-size maternity wear customer. The purpose of this study was to determine the effects of self-reported dress size category on self-worth, body cathexis, and satisfaction with available selection of maternity clothing for pregnant females.

Data were collected using three previously validated instruments. Demographic information was also collected.

The instrument was pretested. The final sample of 83 pregnant females was derived from prepared childbirth classes taught in Virginia's New River and Roanoke Valley areas.

Data were analyzed using descriptive statistics, the Kruskal-Wallis One-Way Analysis of Variance, the Dunn multiple comparison procedure, and the Spearman's rank correlation coefficient. Respondents exhibited no significant difference in global self-worth and the associated subscales or satisfaction with available selection of maternity clothing. Large-size women indicated significantly lower prior body cathexis than the other two groups, however, no significant difference was found between the groups by current body cathexis. Significant correlation was found between global self-worth and current body cathexis.

The results of this study imply that pregnancy influences how satisfied women feel about their body and that large-size women's body cathexis may improve during pregnancy. The results of this study will be used as the basis for further research concerning maternity wear.

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## CHAPTER I

### INTRODUCTION

During pregnancy, women tread a delicate balance between positive and negative feelings. Psychologically, they fluctuate from happiness and laughter to acute depression. Physically, they often tire easily, suffer from nausea, dizziness, swollen feet and backaches, and experience an increase in body temperature. Fawcett and Larkin (1986) reasoned that women's sense of self-worth may be a key factor in how positively or negatively they react during pregnancy.

Clothing plays an important role in establishing and maintaining self-worth. In the early 1900's, James considered clothing to be one of the most important factors in the material self (James, 1952). Ryan (1966) stated that clothing helps an individual establish self-worth and that self-worth plays a distinctive role in determining what clothing individuals choose to wear.

The maternity clothing that pregnant women purchase is extremely important in maintaining their self-worth and in preparing them for their new roles of motherhood. Maternity clothing may not be readily available for women who fit into either the small- or large-size apparel

categories. Maternity wear manufacturers, like the majority of women's apparel manufacturers, tend to cater to average-size women. Though available clothing for the small- and large-size customer has increased in recent years, most research has shown that neither category has been saturated. There are still segments of the small- and large-size apparel market that have not been satisfactorily met ("Who is the," 1988).

Maternity wear for small- and large-size customers may be one of the niches that has yet to be filled by the apparel industry. The nonavailability of appropriate clothing to be worn during pregnancy may cause anxiety, a lowering of one's self-worth and dissatisfaction with the body. The purpose of this study was to determine the effects of self-reported dress size category on self-worth, body cathexis, and satisfaction with available selection of maternity clothing for pregnant women.

## CHAPTER II

### REVIEW OF RELATED LITERATURE

The review of literature pertinent to the study of women who wear maternity clothing will be divided into five sections. Self-worth will be discussed in the first section. Research concerning body cathexis will be reported in the second section. Sizing will be reviewed in the third section. Maternity wear and satisfaction with available selection will be discussed in the fourth and fifth sections.

#### Self-Worth

Self-worth, and terms such as self-concept, ego, personality, self-esteem, and self-perception have often been used interchangeably in the study of self. Though there is disagreement as to exactly which term best describes the self, there is general agreement that the study of self is important.

The term, global self-worth, has been used in recent years to indicate a domain-specific approach to self-concept. Previous measures of self-concept have covered a wide range of items which were summed for a total score of an individual. The measure for global self-worth deals with specific domains of competency and adequacy of an

individual as well as asking specifically how much one likes or dislikes oneself as a person. Each domain is summed separately rather than arriving at one individual score. Regardless of the mechanics of the measurement, global self-worth is based on the theories and tenets of self-concept (Harter, 1988; Messer & Harter, 1986).

Simply stated, self-concept is the way one thinks and feels about oneself (Horn & Gurel, 1981). An individual's self-concept is the product of social interaction which starts in infancy and continues throughout life. Self-concept does not remain static and is constantly being modified, redefined, and changed as one experiences interaction with others (Sherif, 1968; Kaiser, 1985).

Self-concept theory has been derived from the ideas set forth by early symbolic interactionists William James, Charles Cooley, and George Mead (James, 1952; Cooley, 1902; Mead, 1934). Self-concept is obtained from a person's own appraisal of self or interpretation of how others perceive him/her and that sense of self encompasses a global conception of who that person is (Kaiser, 1985).

In the late 19th century, James (1952) considered the self or "me" to be the "sum total of all that he can call his..." (p. 188). He divided the "me" into the

material self, the social self, and the spiritual self. James considered the two most important parts of the material self to be the body and the clothes worn on the body. The social self was described as an individual's recognition obtained from those with whom contact is made. The spiritual self was described as an individual's most intimate feelings about oneself.

James also considered that a person's self-feeling is based on a ratio of actualities (true realities) to supposed potentialities (believed capabilities). That is, if one feels successful in portions of life that are deemed important, high self-esteem will be attained. Conversely, low self-esteem may be experienced if a person feels unsuccessful in portions of life that one deems important (James, 1952; Messer & Harter, 1986).

The "looking-glass self" idea was proposed by Charles Cooley (1902). Cooley considered that there were three phases that took place in the social feedback process. They are: (1) the imagination of a person's appearance to others, (2) the imagination of other's judgment of a person's appearance, and (3) self-feeling which is feeling either pride or shame about oneself.

George Mead (1934) divided self into two parts, the "I" or active self and the "me" which is the social conscience self. Mead considered that "I" and "me" are separate entities but parts of a whole. The "I" initiates active behavior that may be random and unpredictable and the "me" component constitutes conduct itself. Without these two separated phases of self, "there could not be conscious responsibility, and there would be nothing novel in experience" (Mead, 1934, p. 178).

Clothing psychologist, Mary Shaw Ryan (1966), divided the self-worth into two parts; the somatic self and the social self. The somatic self was the body or physical characteristics of the perceived self. The social self consisted of the sort-of-person-I-am and the self as a member of a group.

Self-concept is considered to be multidimensional. Adults make judgments concerning overall self-concept in several dimensions of their lives. In past research, the overall self-concept was tabulated as a sum of several dimensions and was not measured independently of those measures (Messer & Harter, 1986).

In recent years, the works of James and Mead have been used as a theoretical base for the study of self-worth

viewed as a global entity. Messer and Harter (1986) perceived that global self-worth could be measured independently rather than as an aggregate of several domains. Along with specific domains to test competency and adequacy, global self-worth was tested by a set of items specifically asking how much one likes himself as a person. When global self-worth was measured independently, the researchers also were able to examine the relationships between global self-worth and domain-specific perceptions. The self-perceptions tested included domains such as sociability, nurturance, athletic abilities, physical appearance, morality, household management, intelligence, and sense of humor. Messer and Harter also found that in individual clinical counseling as well as in some group research, global self-worth could be predicted by calculating a discrepancy score between a person's hierarchy of competence judgments and a person's hierarchy of importance ratings (Messer & Harter, 1986; Harter, 1987).

A domain-specific approach to self-worth was developed and tested by Harter (1982) on 300 third- through sixth-grade school children. The Perceived Competence Scale for Children was used to assess childrens' sense of competence across the cognitive, social, and physical

domains in relation to general self-worth. Harter found that children as young as eight make clear differentiations among the domains. The researcher also found patterns of correlation among the different domains and global self-worth. The highest correlation existed between the general self-worth domain and the three other competence scales. The social and the physical subscales were also found to be highly related.

Messer (1986) examined the differences in self-evaluations between men and women based on Harter's conceptual global self-worth framework. In a sample of 141 parents, Messer tapped 11 domains and self-worth. The researcher found that adults do make distinctions in perceptions of competence/adequacy in various domains and that the domains were not equally important. In addition, the researcher concluded that adults with large discrepancies between competence scores and importance ratings in salient domains had lower general self-worth than adults with smaller discrepancy scores. This finding corresponded to Harter's earlier studies with children. All women felt the least competent in athletic ability. Messer also found differences among the three groups of women in the sample identified as homemakers, part-time

working women, and full-time working women. In the areas of general self-worth, job competence, athletic abilities, physical appearance, sense of humor, and intimate relationships, full-time homemakers scored the lowest. Part-time working women had slightly higher scores than the first group and full-time working women scored the highest. The part-time working women scored higher than homemakers and full-time working women in the areas of sociability, morality, and household management. Full-time working women scored the highest in nurturance, with part-time working mothers scoring the lowest (Messer, 1986; Messer & Harter, 1986).

The adequate provider subscale has the least internal consistency reliability (Messer & Harter, 1986). In Messer's (1986) study, a high coefficient (.90) was found for men and full-time working women had a correlation of .83. However, in this same study, part-time working women and full-time homemakers scored much lower. Messer and Harter (1986) explained that scores differed among the sample because many upper-middle class part-time working women and full-time homemakers do not view themselves as "providers". However, in another sample of 215 homemakers and working mothers with children under three, the adequate

provider subscale reliability proved to be adequate (.80). Messer and Harter (1986) stated that the confounding results indicate the adequate provider subscale may be a sample specific subscale.

The Harter Self-Perception Profile, adapted for adolescents in 1988, was used along with a revised clothing interest scale by Liskey (1989) in a study to investigate the relationships between clothing interest and self-perception among scoliosis patients and their nonhandicapped peers. The sample consisted of 70 adolescents, 35 having scoliosis and 35 nonhandicapped. The five domains of self-perception tested were social acceptance, athletic competence, romantic appeal, physical attractiveness and global self-worth. Liskey found that all subjects were concerned with appearance and the importance of clothing in social situations. However, adolescents having scoliosis were found to have a lower self-perception in each of the five domains than did the nonhandicapped adolescents.

#### Self-Concept as it Relates to Pregnancy

Psychologically, pregnancy creates a delicate balance between positive and negative experience. One moment a

woman may experience joy, anticipation, creativity, and exhilaration, then later experience anxiety, confusion, loss, and fear. The emotional upset can be attributed to normal reactions of change and development during pregnancy (Colman & Colman, 1971). The psychological condition involves a maturation and a regression process that takes place simultaneously. During the maturation stage, the woman is progressing from being her own mother's child to the role of her child's mother; a role to be assumed at the end of the pregnancy. At the same time, the woman is experiencing a regressive psychological process caused by identifying with the fetus so that the woman may begin to behave, feel, and function in certain aspects like a child (Greenhill & Friedman, 1974). Emotions are amplified in the sense that the woman may react with uncontrollable laughter or burst into tears during everyday events. A pregnant woman may also be prone to sudden states of anxiety with little apparent reason, or switch more rapidly from anger to forgiveness than a woman might under normal circumstances (Colman & Colman, 1971).

Theorists have defined the changing psychological tasks of pregnancy as a process of incorporation, differentiation, and separation. Incorporation involves

the acceptance that the fetus is present. During the first trimester, the woman's feelings are directed inward. The woman considers the child to be a part of her. Differentiation encompasses the realization that although the fetus is housed in the body, it is not part of her. The second trimester, when fetal movement is experienced and size begins to increase, the woman begins to realize that the child is a separate entity. Separation is the preparation to give the fetus up. During the third trimester, a woman experiences a mounting emotional tension and increasing physical discomfort and begins to be eager for labor to begin, thus separating from the fetus (Colman & Colman, 1971; Willson & Carrington, 1979).

Fawcett and Larkin (1986) suggested that during pregnancy a woman's global self-worth before pregnancy may be a key factor in determining how she will feel about her self and her body. The researchers reasoned that if the woman has maintained a positive sense of self before pregnancy, a positive feeling will most likely be maintained throughout pregnancy. This may be due to the fact that global self-worth is formed from the time one is a child and may not be altered during pregnancy. However, Fawcett and Larkin state that additional research should be conducted to substantiate this idea.

Horgan (1983) found that women's attitudes toward the self during pregnancy are viewed differently among different social classes. Upper class women, defined as having a family income of \$30,000 per year with one college graduate in the family, reported feeling more attractive and pampered during pregnancy. Working class women, defined as having a family income of \$10,000 to \$30,000, no college education in the family, and a husband who is a blue-collar worker, reported feeling fat and unattractive during pregnancy.

Taylor and Langer (1977) suggested that respondents tend to stare at or try to avoid pregnant women. Their reactions closely parallel reactions experienced by the physically handicapped. The researchers found that men may stare and avoid pregnant women primarily because they consider pregnancy a novel visual stimulus. This reaction, however, dissipated once a perceiver became accustomed to the novel attribute. Women in the study seemed to be concentrate less on the stimulus aspects of pregnant women and concentrate more on role expectations of the pregnant women's behavior. Women viewed passive behavior as more desirable for pregnant women, yet simultaneously rejected them as potential companions. The researchers found that such responses caused pregnant women to experience

psychological discomfort and withdrawal, since avoidance and staring can be interpreted as negative reactions, thus lowering their self-esteem.

#### Self-Concept as it Relates to Clothing

One of the fundamental thoughts of symbolic interaction theory is that self-worth or self-concept is established, maintained, and altered in and through communication with others. Clothing plays an important role in a person's self-concept. Clothing, whether it is functional or ornamental, is worn on the outside of the body and is one of the first characteristics seen when one interacts with others. The positive or negative responses received from others may cause an individual to form positive or negative feelings about one's self (Stone, 1962).

In an effort to discern whether there were significant differences in employed women's clothing attitudes and their self-concept according to age levels, Tyrchniewicz and Gonzales (1978) tested 194 women using the Secord and Jourard Body and Self-Cathexis Scale and Creekmore's Importance of Clothing measure. The researchers found that women varied significantly in their attitudes toward clothing. Modesty was found to increase

as age increased. However, interest, special attention, social approval, and psychological dependence decreased with age. The researchers also found that a relationship does exist between self-worth and clothing attitudes.

Thirty-five physically handicapped college students and 76 able-bodied students were used in a study by Feather, Martin, and Miller (1979). The researchers investigated the extent to which self-concept and clothing attitudes differ in the physically handicapped and the able bodied and the relationship between clothing attitudes and self-concept. They found that clothing attitudes were important to all the subjects regardless of their physical abilities; however, physically handicapped subjects consistently scored lower on clothing attitudes. Attitudes toward clothing were found to differ between men and women, with women expressing more positive clothing attitudes regardless of their abilities. The researchers also reported that self-concept scores did not differ significantly by physical ability. This may be due to the physically handicapped going through a rehabilitation process in which they reorganize their lives and value systems, and as a result, have a better feeling of self-concept. When correlations were examined by physical ability, sex, and the interaction effect, the researchers

concluded that no relationship existed between self-concept and attitudes toward clothing.

To determine the difference between two racial groups in the areas of self-esteem, body satisfaction, and clothing variables, as well as the possible relationships among the variables, Ford and Drake (1982) asked 164 White and 68 Black college females to complete a questionnaire. The researchers found that Blacks and Whites differed in the areas of adequacy of money for clothing, use of sexually attractive clothing, and self-esteem. Whites were found to have a more positive attitude toward adequacy of money for clothing; whereas Blacks were found to use sexually attractive clothing more often than Whites. Although both groups had relatively high self-esteem, Blacks were found to have higher self-esteem than Whites. The racial groups were found to be alike with regard to body satisfaction, attitudes toward unusual clothing, and flair in clothing. Ford and Drake also concluded that an association between variables did not differ between Blacks and Whites. The researchers further substantiated the findings of Secord and Jourard (1953) that self-esteem and body satisfaction are related.

### Self-Concept as it Relates to Size

Self-concept as it is related to clothing interest and perceived obesity was studied by Mucha (1980). Using 227 subjects, Mucha found that a negative relationship existed between the physical self and perceived obesity, and the moral-ethical self and perceived obesity. The researcher suggested that the negativity could be due to having negative feelings about the physical body when one considers oneself overweight. A person may also feel that being overweight is bad and is morally and ethically wrong. A positive relationship was found between perceived obesity and the personal self, the family self, and the social self. The fact that subjects scored negatively on some aspects of the self and positively on other aspects of the self lends credence to the theory that the self-concept is multi-dimensional.

Baggs (1988) investigated the differences in clothing interest, self-esteem, body satisfaction, and fashion-opinion leadership among underweight, average weight, and overweight college females. Using an instrument composed of three previously validated scales, the researcher found no significant difference in clothing interest, fashion-opinion leadership and self-esteem among the groups. Self-

esteem was found to be positively correlated with body satisfaction and fashion-opinion leadership. Clothing interest was found to be positively correlated with fashion-opinion leadership and body satisfaction.

To study self-esteem, body satisfaction, and design line preference of large-size women who shopped in department and specialty stores, Doss (1990) used a modified version of the Baggs instrument (Baggs, 1988). Doss found that there was no significant difference between department and specialty store large-size female shoppers on self-esteem, body satisfaction or design line preference and that the overall sample indicated a high positive self-esteem.

### Body Cathexis

Body cathexis is the degree to which an individual is satisfied or dissatisfied with one's own body. Most studies have supported the idea that body cathexis is closely related to a person's global self-image, self-esteem, or self-concept (Kaiser, 1985; Secord & Jourard, 1953; Ford & Drake, 1982; Baggs, 1988).

To study body cathexis as it relates to self, Secord and Jourard (1953) developed a 46-item body cathexis scale. The list consisted of body parts and body functions.

Subjects were asked to rate the strength and direction of feeling for each item. A sample of 70 male and 56 female college students were surveyed and the researchers found that respondents' valuation of the body paralleled their valuation of self. Secord and Jourard concluded that a high degree of satisfaction with self was positively related to a positive or high body cathexis. Low body cathexis was associated with feelings of insecurity. Anxiety, in the form of concern for pain, disease, or bodily injury was also found to be related to low body cathexis in some individuals.

Jourard and Secord (1955) studied the relationship between body cathexis and measured size, self-estimated size, and self-rating of ideal size of body parts. The researchers tested 60 female college students. A 12-item modified version of the original body cathexis scale was used. It was found that in all items but one, females tended to associate positive body cathexis with small size and negative cathexis with large size. The respondents rated a small bust negatively and a large bust was considered a more positive attribute. This may be due to the cultural stereotypic concept that the ideal female figure should have large bust, small waist, and small hips. The researchers also concluded that females' measured size

of selected body parts were significantly correlated with the satisfaction of those parts.

Mahoney and Finch (1976b) tested 98 male and 128 female college students to determine the dimensionality of body perception in terms of body cathexis. A modified body cathexis questionnaire was used. The researchers found that body perception in terms of satisfaction can be examined through a small number of dimensions. They identified six factors (legs, face, weight, height, torso, and voice/hair) that accounted for 72.2 percent of the variance for males. For females, five factors (face, weight, height, legs, and extremities) accounted for 62.7 percent of the variance. The female weight factor which contained high loadings on hips, weight, thighs, and waist was considered a physical unit even though previous analysis had demonstrated that weight alone accounted for variance in both self-esteem and self-perceived physical attractiveness. The height factor for females included the variables of height, leg length, and bust. Mahoney and Finch stated that the bust was included in this factor due to the statuesque ideal of the loading. The extremities factor (hands, neck size, and foot size) were included together because these are parts of the

body that do not usually change when height, weight, or facial characteristics change.

In another study, Mahoney and Finch (1976a) found a positive correlation between body cathexis and self-esteem. However, the researchers concluded that some aspects of the body previously considered important to self-image such as bust, waist, and weight in females are not necessarily important to self-esteem. Dissatisfaction to the point of desire to change body aspects appears to be irrelevant to self-esteem.

Baggs (1988) found that body satisfaction was positively correlated with self-esteem and fashion-opinion leadership. In addition, the researcher concluded that overweight females were much less satisfied with their bodies than those who were either underweight or of average weight. Doss (1990) also found that large-size women had low body satisfaction but while the sample scored low in body satisfaction they scored positively in self-esteem.

In a recent study conducted by Hamilton (1988), body cathexis was examined cross-culturally using the Secord and Jourard Body Cathexis Scale. Within the confines of the study, American women were found to have a more positive body cathexis than Scottish women. American subjects

indicated that media sources were relied on the most for sources of their feelings of body satisfaction and Scottish subjects relied on spouse and social institutions (church and school). Hamilton concluded that body satisfaction for individuals was complex and can be significantly influenced by one's cultural network.

Recently, LaBat and DeLong (1990) conducted a study concerning body cathexis, and satisfaction with fit of apparel. The 107 female consumers were found to be least satisfied with the lower body on the body cathexis measure. Body cathexis and fit satisfaction were found to be positively correlated. The lower body segment was found to have the strongest correlation with body cathexis.

Markee, Carey, and Pedersen (1990) investigated the difference between body cathexis and clothed body cathexis among 29 working women between the ages of 25 and 45. The researchers used a test and retest (administered three to four months after the retest) method. They found that significant differences were found in body cathexis and clothed body cathexis for the test and retest between weight distribution, waist, arms, general appearance, body build, thighs, and four other body parts. Clothed body

cathexis was found to be rated higher than the body cathexis values in both the test and retest comparisons.

#### Body Cathexis as it Relates to Pregnancy

Fawcett and Larkin (1986) suggested that pregnant women feel worse about the body as pregnancy progresses and after birth feel better about their bodies as they return to previous size. However, the researchers found that most women have a very accurate perception of their body size and the knowledge that their girth was increasing did not concern them. Negative feelings toward gaining weight and getting "fatter" were the exception to the rule. Fawcett and Larkin reasoned that women were not concerned with their increasing girth because the pregnant body is more positively accepted in our society today. The trend to continue physical exercise throughout pregnancy may lessen the anxiety associated with the weight gained being a permanent condition. The researchers generalized that women who have had at least one other child had a more positive body attitude than first-time mothers in the postpartum period and that women felt more negative about their bodies during the last trimester (last three months). Neither of these statements could be substantiated by

Fawcett and Larkin's research and they concluded that additional research should be conducted.

## Size

### Ideal Size

Fashion lets us know what our culture expects us to be, or to become or to struggle to become, in order to be acceptable to it, thereby exercising a devastating power over our lives on a daily basis. The image of women that appears in the advertisement of a daily newspaper has the power to damage a woman's health, destroy her sense of well-being, break her pride in herself, and subvert her ability to accept herself as a woman (Chernin, 1981, p. 87).

Women have long been concerned with what is considered the ideal body shape. For fashion's sake, in the Victorian era, women corseted themselves tightly to acquire a small waist. The tight lacing caused kidneys to become dislocated and the liver to be crushed. However, the women of the time tortured their bodies for the sake of their beauty and the considered ideal figure.

To acquire the ideal shape of the flat-chested boyish look popular in the 1920's, women bound their breasts and flattened their hips (Greenhill & Murphy, 1978). In the late 1950's and early 1960's, women such as starlet Marilyn Monroe, were thought to possess the ideal shape. Monroe was known for voluptuous breasts, small waist, and well-rounded hips. Women adopted the use of uplifting bras, girdles and a waist cincher called the Merry Widow to aid them in creating the 1950's ideal figure (Russell, 1983).

During the late 1960's, the pencil-thin figure popularized by the British model, Twiggy, was the popular ideal shape. The effects of the public's desire to be thin brought about the introduction of weight-loss programs such as Weight Watchers and Over-Eaters Anonymous. In the late 1960's and early 1970's were the first time in history that anorexia nervosa (an eating disorder) became a widespread social disease among women (Chernin, 1981).

By the 1980's, Monroe was considered fat and Twiggy was considered too thin (Chernin, 1981). Women were more health conscious than ever before. They were also more active. Previously considered feminine attributes such as delicate wrists, voluptuous curves, and tiny feet, were considered liabilities for women who want to be admired.

Firm, healthy bodies that allowed women to be active were sought as the ideal. Fashion designers were recognizing that large bones, particularly broad shoulders were attractive. Clothes were found to hang better on broad shoulders and designers had been emphasizing them by using shoulder pads in many garments. Large breasts were also considered a liability rather than an asset by active women. Women found that special support must be worn to jog and special compensation must be made for large breasts in a golf swing or a tennis stroke (Kaplan, 1981).

#### Fashion Industry Sizing

The labels used by most manufacturers for sizing are important guides for the consumer in the selection of clothing. The apparel industry labels clothing by a numbered sizing system based on height, weight, body proportion, and the silhouette of the body. Figure types for adults are determined by height measurements and level of bust or chest, level of waist and hip, and/or the length of the neck-to-waist (Gioello & Berke, 1979).

Sizing is sometimes very confusing for consumers. The numbers and terms that apparel manufacturers use to refer to specific sizes have no correlation with the shape or sizes of the women purchasing the garments. A size 10

that fits adult females does not refer to any part of their body measuring 10 inches. It is an arbitrary number. To add to the confusion, the misses size 10 that fits adult females is also quite different from the girls' size 10 (Constance, 1980; Lebow, 1985).

Several sizing techniques have been tried in the past. In an attempt to lessen confusion with sizing, some manufacturers have tried using the designation small, medium, and large. The nomenclature may be less confusing, however, with only three sizes, many consumers were obviously not getting a good fit (Constance, 1980).

In an effort to reduce stock, some manufacturers have tried double sizing. This is combining sizes such as 9/10, 11/12, 14/16, etc. This sizing technique is used often in junior and misses categories. Straddling the fence with size may reduce stock, however, creating a garment which fits two sizes, actually fits neither size (Hudson, 1980).

It has been noted that there is a tremendous amount of variation in sizing among manufacturers. The same garment produced by different manufacturers may vary in size markedly. Higher priced items often are associated with more fabric for a given size. In a more expensive garment, larger alteration seams may exist and the garment

may have better shaping (Constance, 1980). Depending on the style of clothing and the apparel manufacturer, average-sized women may possess clothing in their wardrobe that ranges from size 4 to 12. The existence of size variation is true for the small and large-sized women also (Hudson, 1980).

Psychologically, women have suffered because of the nomenclature confusion concerning sizing. Brill (1985a) stated that women who typically wore misses size 12 and gained 5 to 10 pounds continued to shop in the misses clothing section. They chose to squeeze into garments in the misses size category rather than shop in the women's section where the sizing started at 34. Though the size jump was not tremendously larger than the previous size, the larger number associated with the size increase made the consumers feel they would be making a major increase in size.

Many manufacturers are completely unaware of the sources of the sizing standards used today. The original study was done in the 1930's by the Bureau of Human Nutrition and Home Economics, U.S.D.A., and Works Progress Administration. The group gathered statistics from a broad sample of Americans (Constance, 1980). This study is now virtually useless. Lifestyles have changed, diet and

nutrition have improved, activities have changed, undergarments have changed, and attitudes toward bodies have changed since that time period and bodies are no longer the same shape as they were in the 1930's (Hudson, 1980).

In 1971, the Department of Commerce released information from a study entitled, "Body Measurements for Sizing of Women's Patterns and Apparel". The figures that the information was based on were a compilation of data submitted to the National Bureau of Standards by trade associations, manufacturers, and retailers. The information did not represent a cross section of the population as determined by the Census Bureau and it is not clear whether the data from this study has been used in the industry for sizing (Constance, 1980).

#### Average Size

Gioello and Berke (1979) define average-size customers as those who wear misses size 10 or size 12. They are approximately 5'5" to 5'7" tall. Their forms are characterized by fully developed figures that are well proportioned. They have normal waist and hips approximately two inches larger than the bust.

The apparel industry tends to cater to average-size customers. However, there are not as many women who fit into the average category as industry believes. When the average-size women's height was considered, one survey stated that 30 to 35% of all working women were either too short or too tall to be considered "average" ("Sizing: From Average", 1977).

#### Small Size

Gioello and Berke (1979) define small or petite women as approximately 4'8" to 5'3" tall with fully developed form though in smaller proportions than the misses or average-size women. The size range is from 0 to 8 ("Small Clothes Are", 1981). Petite styling is much like misses with the exception of shorter sleeves and waistlengths, as well as shorter skirt and pant lengths. The details of garments are also scaled for smaller figures. Business jackets will often have one or two buttons rather than two or three buttons ("Catering to Petites", 1989).

In 1979, a government study indicated that there were over 37 million women in the United States that were under 5'3" tall. The government study did not consider weight as part of their study and Retail Week stated that when height

and weight are considered, only 14 million women in the United States would be considered petite ("Misses Petites", 1979). In 1989, statistical data had indicated that over 55% of the women in the United States are under 5'3" tall which indicated a substantial increase since 1979 ("Catering to Petites", 1989).

Small women are looking for excellent design, quality, proper proportion and fit that are right for them ("Catering to Petites", 1989). There are several manufacturers that have added petite sizes to their lines, however, the market has yet to be fully realized ("Small Clothes Are", 1981).

### Large Size

Large-size clothing for women encompasses several different types of consumers. Large-size typically refers to the women's clothing category for consumers who are of average height with a fuller and rounder figure than those wearing misses clothing. Also included in the large-size clothing category are consumers who wear women's petite, half sizes and tall sizes.

### Women's/Women's Petites

Gioello and Berke (1979) define customers who wear women's sizes are approximately 5'5" to 5'7" tall with

well-developed forms that are fuller and rounder in all measurements than average-size customers (Gioello & Berke, 1979). Sizes range from 14W to 32W and 1X to 4X. Large sizes also exist for large-size petites who range in height from 4'8" to 5'3" with well-developed forms fuller and rounder in all measurements than average-size customers. The sizes range from 14WP to 32WP (Gioello & Berke, 1979; Brill, 1985b).

In the past, large-size clothing for women used to range from 34 to 52 (Brill, 1985a). Blouse sizes did not correspond to bust size and sizing for skirts and pants often did not correspond to waist size. Size differences also existed among apparel manufacturers (Brill, 1985b).

In the past, large-size women were at the mercy of the apparel manufacturers and retailers. Though most women wearing size 8 to 12 had many places to shop, large-size women had limited access to fashionable clothing. They relied on dark-colored, shapeless tent dresses made of synthetic fiber fabric which some referred to as "polyester Hefty bags" (Brubach, 1987; Mansfield, 1986).

In the past ten years, the large-size fashion industry has increased tremendously. Manufacturers and retailers realized that large-size women take just as much pride in their clothing as average-size women. Large-size

women want quality in their clothing and are willing to pay for the privilege (Brubach, 1987). In 1977, the large-size apparel market grossed two billion dollars and in 1988, the market gross had increased to ten billion dollars. Projections are that the large-size market will increase to 30 billion in the 1990's ("Who Is The", 1988).

It is only recently that sizing has improved for large-size women. In 1985, a symposium on sizing for large-size women sponsored by the National Retail Merchants Association was held. Manufacturers and retailers such as Sears, Roebuck and Company, Allied Stores Corporation, J. C. Penney, Bloomingdales, Lane Bryant, Carter Hawley Store, Inc., and Montgomery Ward voted to approve standardization of terminology for women's apparel. Under the new system, 16 different size ranges that were specifically designated for large-size women were reduced to two size ranges. The two size ranges were women's (W) and women's petite (WP). The sizes 14W to 32W were assigned to women's sizing and the sizes 14WP to 32WP were assigned to women's petite sizes. Manufacturers and retailers also agreed on large-size women's equivalents for small, medium, large, and extra large. The designations were 1X, 2X, 3X, and 4X (Brill, 1985b).

Positive events have happened to promote the large-size market. The "bible" of the fashion industry, Vogue, began publishing large-size women's advertising layouts in 1986 (Marano, 1986) and have continued to run a similar supplement twice a year. Designers such as Laura Biagiotti, Givenchy, Gloria Vanderbilt, and Albert Nipon have begun to design for large-size women (Mansfield, 1986). Gloria Vanderbilt now translates over 75% of her misses line for large-size women. Lane Bryant has stopped using large-size designers and manufacturers and begun using misses and junior manufacturers to produce their designs for large-size women (Brubach, 1987). There are also fashion magazines such as the BBW (Big Beautiful Woman) and It's Me currently providing fashion information for large-size women (Pattner, 1981).

Several surveys have been conducted concerning the number of women who wear size 14 and above. Brubach (1987) stated that as many as 50% of the women in the United States were large sized. In 1988, it was estimated that 47% of all American women were size 14 and above. This 47% constituted over 35 million women. The age range for this group of women was between 18 and 34. This age group is a very desirable market for apparel manufacturers because they reportedly spend more money on clothing than any other

age group. However, the large-size women in this age group reported that stylish clothing in their size was hard to find ("Who Is The", 1988).

Most large-size fashions stop at size 22 or 24. According to Bill Fabrey, Chairman of the National Association to Aid Fat People, there are approximately ten million women in the United States who wear sizes larger than 24 (Mansfield, 1986). Ron Therrien, president of Lady Pauline, Incorporated, believes one out of every five large-size women wear above the usual size range of 14 to 26. According to Therrien, this amounted to approximately eight million women ("Super Sizes", 1988).

To determine whether or not large-size ready-to-wear had developed to meet the needs of large-size customers, Baines-Love (1982) completed a study with 103 large-size women. Using the older sizing system, the women ranged in sizes from misses 16 to 24, women's 34 to 52, and half sizes 14 1/2 to 26 1/2. The researcher found that regardless of age, marital status, size, or educational level, most large-size women preferred to shop in department stores. However, the respondents indicated that the best selection for large-size clothing was most often found in large-size specialty stores. Baines-Love found that over 60% of the respondents had difficulty finding

clothing that appealed to them. The respondents remarked that clothing was unavailable due to poor or improper fit, clothing lacked fashionable style, clothing had a matronly appearance, clothing lacked variety in size ranges, and clothing lacked quality in construction and fabric.

In a sample of 60 large-size women who wear size 16 or larger, Hageman (1982) found that respondents rated clothing selection from good to fair. However, most were only somewhat satisfied with garment fit and clothing often required some type of alteration. The researcher found that large-size women tended to prefer A-line and double-pleated skirts, V- and U-necklines, A-line and shift dresses, and bishop and ruffle sleeves.

Chowdhary and Beale (1988) recently conducted a study of clothing interest, satisfactions, and dissatisfactions regarding six types of ready-to-wear apparel and selected factors for large-size women who wore size 16 or larger. The selected factors included clothing color, fabric, fashion, fit, selection, size, and style. The researchers concluded that large-size women do make an effort to keep their wardrobes updated, however, they were reluctant to purchase clothing that did not make them feel distinctive. This reinforces other research that states that large-size women are willing to pay for quality apparel. Chowdhary

and Beale found that the most common problems among participants existed in size and fit of clothing. The researchers also concluded that satisfaction with clothing differed by age and size with the smallest sizes and youngest age groups being the most satisfied.

### Half Sizes

It is hard to categorize the half sizes into small-, average-, or large-size categories. If one uses height as the categorizing factor, half sizes could fit into a small-size category since petite heights range from 4'8" to 5'4" tall. If one considers size, the sizing for half sizes covers both the misses size range (10 to 12) and the women's size range (14 to 26). Since half-size figures are rounded with full hips and thick waist, and more half sizes tend to be the equivalent of women's sizes, half sizes have been included as a large-size category (Gioello & Berke, 1979).

Half sizes fit women who are approximately 5'2" to 5'4" tall. Their forms are characterized by short, rounded figures, narrow shoulders, thick waist, and full hips. Though their forms are much like a misses, they are fuller in the bust, back, and shoulders. Half sizes range from 10 1/2 to 26 1/2 (Gioello & Berke, 1979).

### Tall Sizes

Also included in the large-size category are tall women. These women are over 5'7" tall. Their figures are fully developed and similar to misses sizes, but are longer in overall proportions (Gioello & Berke, 1979). There are approximately five million women in the United States who are 5'8" or taller ("Tall Women's Tale, 1989).

Tall women are still experiencing a great deal of frustration as they shop for fashionable, affordable, and quality clothing. Some apparel manufacturers and retailers are becoming more attuned to the difficulty tall women experience when shopping for clothing. J. C. Penney now publishes a specialty catalog twice a year for tall women. The catalog, Especially for You, offers tall clothing for women 5'8" to 5'11" and ultra-tall clothing for 6'0" to 6'2". Other mail-order firms that offer tall sizes include Sears Roebuck and Company, Spiegel, and Lane Bryant though none of these firms print a specialty catalog ("Tall Women's Tale", 1989).

### Size as it Relates to Pregnancy

Pregnant women experience external physical changes in their bodies throughout the last two trimesters of pregnancy. Women experience physical changes differently

and the first external physical changes occur at about four months (Gersh & Gersh, 1981).

Most women will note an increase of eight to ten inches at the waistline. Abdominal expansion will vary the most among pregnant women. Some women will carry their babies high, others will carry their babies low. Other women may carry the fetus toward the front of the body and some may seem to carry the fetus nestled farther back into their bodies (Sadler, 1974).

Regardless of the type of abdominal expansion women experience, body balance must be maintained which results in a temporary curvature of the spine. This curvature changes the posture creating a swayback appearance and the result lengthens the front of women's figures (Fite & Roberts, 1984).

Breasts will also expand in size during pregnancy. An average of two or three inches increase is usually expected (Sadler, 1974).

Ready-to-wear clothing and commercial pattern companies size maternity wear so that pregnant women can continue to purchase their customary sizes (Sadler, 1974). Most of the literature published to help women plan their maternity wardrobe also suggested that women buy maternity

clothing in the same size they have always purchased. However, several clothing specialists recommended caution when choosing garments (Anderson, 1987; Sadler, 1974; Fite & Roberts, 1984). Proper fit should be strived for in maternity clothing (Sadler, 1974), but it may be necessary to wear a larger size to attain comfort (Anderson, 1987).

### Maternity Wear

#### History

Clothing to accommodate the pregnant condition is a necessity. Fashion, as well as culture, has dictated maternity garment styles throughout history. What was worn helped maintain the general stereotypic views of proper conduct during pregnancy. Though some type of clothing has always been worn to provide for the pregnant condition, few scholarly studies of clothing worn during pregnancy have been conducted and costume history texts have provided little information with regard to maternity clothing (Bailey, 1981).

Review of early historical periods indicate that specific maternity dress was not available and women tended to either adapt the traditional dresses of the time period or did not appear in public. There have been times in

history when pregnant women were confined to the home after it became physically noticeable that they were pregnant. There have also been times during history when women wore clothing in public to give the illusion of being pregnant even when they were not really pregnant (Bailey, 1981; "Maternity Wear", 1959; Wertz & Wertz, 1977).

At the height of the Greek and Roman Empires, women simply adjusted the traditional gracefully draped garments to fit their physical growth. Due to the high regard for the body and the positive attitude toward pregnancy, no attempt was made to conceal pregnancy ("Maternity Wear", 1959).

Pregnancy as a fashionable condition was prevalent in 14th century France. During this time there was a growing concern for the population that had been depleted by wars and disease. In an effort to make it appear that the population was being increased, the ruling monarch, Charles the Fair, decreed that all women were to wear padded clothing giving the illusion of being pregnant and repopulating the country ("Maternity Wear", 1959).

During the 18th century the *sacque*, a dress that hung loosely from the shoulder to the floor in the back and front and often worn with a hoop petticoat, was popular.

Payne (1965) suggested that this garment was a convenient dress easily adapted for maternity wear.

The Empire dress worn by Empress Josephine after the French Revolution was considered a fashionable garment easily adapted for the pregnant condition. The waist of the dress was positioned just below the bust and the skirt hung loosely to the floor (Bailey, 1981; "Maternity Wear", 1959). The restrictive etiquette and the tightly waisted silhouette of the Victorian era caused women to be confined to home when it became evident that they were pregnant. Maternity clothing of this time period was a product of wearers' adaptation of the fashionable corseted garments. The dresses were loosened at the waist and often covered with over-sized shawls or fashionable wraps that covered the loosening of the dresses (Bailey, 1981; "Maternity Wear", 1959).

New attitudes toward bearing and rearing children began to emerge during the early part of the 20th century. It was no longer considered socially mandatory for women to remain in confinement during pregnancy. Lena (Lane) Bryant designed the first garment specifically for pregnant women. The maternity dress, described as a tea gown featuring hundreds of accordion pleats and an elasticized waistline

that allowed for expansion, was first publicized in a handwritten catalog in 1904. From this endeavor, the modern-day maternity wear industry was born. By 1910, the fashion house of Lane Bryant was offering a selection of maternity wear and advocating fresh air, sunshine and a continuation of social activities during pregnancy rather than confinement to the home practiced during the Victorian era (Bailey, 1981; "Maternity Wear", 1959; Wertz & Wertz, 1977).

Lingering Victorian attitudes of modesty and concealment of the pregnant condition inspired early 20th century maternity wear. Manufacturers continued to create voluminous robe-like dresses to be worn at home or street clothes worn under long jackets or under coats. Most garments were fastened with a wraparound or a surplice opening (Bailey, 1981; "Maternity Wear", 1959).

The forerunner of one of the familiar 20th century maternity wear silhouettes has been attributed to the Hollywood designer, Adrian. In 1940, Adrian designed a blousey smock worn over a slender skirt for his movie star wife, Janet Gaynor. The skirt's expansion feature was a cutout for the abdomen (Murray, 1989). The design became an instant success and later was known as a "kangaroo skirt". The expansion was also adapted for slacks and

shorts. In 1955 a stretch nylon panel replaced the cutout expansion feature. The smock worn with a skirt, slacks, or shorts has continued to be popular ("Maternity Wear", 1959).

The tent dress became popular during the 1950's and was quickly adapted for maternity wear. The tent dress was an unbelted adaptation of Dior's New Look of that time period which was unfitted and had a very full skirt. The tent dress has also continued to be a popular maternity costume (Bailey, 1981).

Though the silhouettes of the smock worn with skirts, slacks, and shorts, and the tent dress have remained popular, styling has changed dramatically over the past few years. Currently the puffed sleeves, ruffled "babyish" clothing and the use of pastel blues and pinks associated with the "nicer" (nonsexual) aspects of pregnancy are not being used as often. The sexual revolution of the 1960's, as well as an emphasis on natural childbirth and the resurgence of breastfeeding, have contributed to public awareness of the more sexual aspects of pregnancy. T-shirts stating, "I have been closely encountered", or "I should have danced all night" exemplify the fact that the more sexual aspects of pregnancy are publicly acceptable (Horgan, 1983). Sleek lines, classic styling, and tailored

looks have replaced the ruffles and puffed sleeves. Vibrant colors have replaced the pastels (Louie, 1983).

Recently, women's lifestyles have begun to change. More women are in the work force and there is a greater emphasis on leisure activities. Therefore, there has been a trend toward more career-oriented maternity apparel and specialized leisure wear. Classic three-piece maternity business suits and classic tailored dresses and jackets are being worn for career apparel (Nelton, 1983; Louie, 1983; Hoffman, 1987). For leisure time activities, maternity dresses, jumpers, jumpsuits, slacks, shorts, jeans, jogging suits, bathing suits, and exercise/bodywear are being worn ("Style", 1990; "Baby & You", 1990; Burggraf, 1987a).

#### Maternity Wear Consumers

The United States is currently experiencing the "echo" of the "baby boom" (1946-1964). It was expected to crest in 1989 and not officially end until 2009 as the last of the original "baby boomers" pass out of childbearing years. Over 3.8 million babies were born in the United States during 1987 (Burggraf, 1987a). First-time mothers who had not bought for themselves in the maternity wear market until their pregnancy represented 42% of those births ("No Baby", 1987). Though the maternity market

caters to only 1.5% of the nation's population, consumer demand for maternity wear is on the rise and manufacturers and retailers are enjoying sizable profits by meeting consumers needs ("Maternity: Making The", 1987).

In recent years, women have begun to postpone having children until their late 30's or early 40's. This has primarily been due to birth control, medical advances such as amniocentesis and chorionic-villus sampling, better methods of monitoring the pregnant woman and child, and a general trend of being more health conscious. Other reasons for postponing pregnancy may be attributed to having married later, marrying for a second time, or establishing careers (Adams, 1988). Women who become pregnant and choose to work during pregnancy, sometimes continue to work until the day of delivery (Belleau, Miller, & Church, 1988). In 1987, one out of every two mothers with children under one was employed. As more women have entered the work force, there has been an increasing demand for maternity career apparel. About 400,000 births in 1986 were to women in professional or managerial careers ("No Baby", 1987).

Employed pregnant consumers are now presumed to be more affluent and accustomed to better quality clothing than pregnant consumers of the past (Burggraf, 1987a;

Louie, 1983). According to industry statistics, average American women spend approximately \$400 to \$750 on maternity clothing per pregnancy. Therefore, as much as one billion retail dollars per year are generated through the sale of maternity clothing. Other industry sources think that the average expenditure for maternity clothing may be closer to \$500 to \$600 per pregnancy. However, some women are noted as spending quite a bit less than the estimated \$750 per pregnancy. These women fall into two categories; teenagers and women living in households with under \$10,000 annual income ("No Baby", 1987). Greer (1988) also reported that in a sample of 121 pregnant women attending hospital-sponsored classes, 42.1% of the sample spent between \$249 and \$499 on maternity clothing for their pregnancy. This amount is also lower than the range of industry estimate.

Another social trend that has affected the buying practices of pregnant consumers is the decrease in the number of children per family. Some American couples are choosing to have only one or two children rather than three or four children, which was the general practice several years ago. Many couples choose to remain childless ("No Baby", 1987). An official of the U. S. Census Bureau stated that in 1987, "average" American women were estimated as having only 1.8 children which is

considerably less than the 2.5 children attributed to "average" American women in 1970 (Burgraff, 1987a).

Even though the number of children per family has decreased, total births have continued to increase because there are more women in the childbearing age group of the population. Currently, there are approximately 50 million women, ages 18 to 44, who are of childbearing age. In 1950, the entire United States population amounted to only 150 million and the number of women in the childbearing age group was much smaller than that of today ("No Baby", 1987).

Of the births that are occurring, there are more first-time mothers in need of new clothing during their pregnancy. In 1987, over 42% of births were to first-time mothers as compared to 1965, when only 31% were first-time mothers. First-time mothers may not have an appropriate wardrobe and tend to purchase more clothing than women who previously have had a child and saved their maternity clothing. Therefore, sales continue to increase in the maternity wear market ("No Baby", 1987).

First-time maternity wear customers are considered "new experience customers". These customers know little

about what the market has to offer. However, due to physical changes of enlarging breasts and abdomen, they must seek clothing that is comfortable and compatible with their lifestyles (Burggraf, 1987b).

The clothing worn during pregnancy symbolically prepares women for their new roles as mothers. The wardrobes may be something completely different in style from what normally has been worn. Some women may find that choosing and wearing different kinds of garments are a creative and challenging experience (Belleau, et al., 1988).

Often, maternity clothing is purchased when pregnant consumers can no longer "get by" wearing "regular" clothing. The customers may be professionals who have achieved comfort and stability in many aspects of their lives and may find searching for appropriate clothing to be an overwhelming and frustrating experience ("No Baby", 1987).

Many pregnant women tire easily, suffer from nausea, dizziness, swollen feet and backaches, and may have increased body temperature. Therefore, shopping may not be much fun when these conditions exist ("Maternity: Making The", 1987).

In a study of 100 pregnant women attending childbirth classes and visiting obstetricians' clinics, Pipkin (1989) investigated the patronage behavior of pregnant apparel consumers, as well as attitudes toward shopping and importance of retailer attributes. The researcher found that the majority of the sample considered themselves to be functional and highly involved shoppers. The sample was equally divided between career and noncareer women. Pipkin indicated that there was no significant difference between career and noncareer pregnant women when considering choices of stores to patronize. Differences did exist between the two groups concerning satisfaction with maternity retailers, store atmosphere, and price. Career oriented consumers were less satisfied with maternity retailers and rated store atmosphere as more important than did noncareer oriented consumers. Noncareer oriented consumers deemed price of garments more important than career oriented consumers.

#### Merchandising

The maternity wear market is a relatively narrow market segment. Maternity clothing is sold primarily in specialty and department stores (Horgan, 1983) and does not offer the range of styles and price points that average women enjoy when not pregnant.

In a 1983 Gallup Poll for Levi Strauss's Maternity Wear, 321 mothers were asked several questions concerning their maternity wear shopping practices. The pollsters found that expectant mothers shop for maternity wear in several different types of stores. Chain stores, such as J. C. Penney and Sears were frequented 53% of the time. Forty percent of the time, customers chose to shop at discount stores such as KMart. Specialty stores were frequented 44% of the time, department stores 24%, and small dress shops 7% of the time ("No Baby", 1987).

It may be difficult to find the location of the maternity wear departments within the store where one normally shops. When considering the premise that "like things go together", Horgan (1983) found that the placement of maternity wear within a store reflected the different views of women in different socioeconomic groups. The high status store that catered to affluent consumers placed the maternity wear adjacent to the lingerie or loungewear departments indicating a view of pregnancy as being feminine, delicate, luxurious, joyous, personal, and private. Selection of clothing was also limited indicating that those with adequate income to shop there were special. The lower status stores that catered to working class women placed maternity wear near uniforms and large-sized

clothing reflecting pregnancy as being a job and a period when they are fat.

Pregnant women have several sources they can utilize when acquiring maternity wear, other than the conventional retail sources. Pregnant women will often choose to wear regular clothing until the fourth or fifth month. Because the basic styles of maternity clothing such as the tent dress and smock worn with slacks, skirt, or shorts have remained unchanged over the past few years, they may elect to borrow clothing from friends, relatives, and/or co-workers. They may also choose to sew their own maternity wardrobes and still feel quite fashionable. Husbands' closets may become "fair game" in the search for maternity clothing. Men's long-tailed dress shirts easily cover the growing abdomen and men's slacks may provide more room in the waist and legs ("Maternity: Making The", 1987). The 1983 Gallup Poll for Levi Strauss which allowed more than one response per person found that 79% of all first-time mothers purchased maternity clothing. Fifty-three percent of the mothers borrowed clothing, 47% used previously acquired clothing, and 35% made or had someone make clothing for them ("No Baby", 1987).

In a sample of 121 pregnant women, Greer (1988) found that a little over half (52.9%) used new purchases as

new purchases as the major source of maternity clothing and 85.1% stated they did not utilize previously purchased maternity wear for that pregnancy. Sixty three percent of the respondents stated that they utilized non-maternity clothing, and 39.7% of the participants indicated that they borrowed maternity wear as an alternative to buying clothing.

The high cost involved in purchasing maternity clothing that will be worn for a short time has prompted some designers to incorporate features into their designs that enable the clothing to be worn after the child is born. One company offers a skirt that can be adjusted to fit a smaller waist as the customer returns to normal size following the pregnancy (Hoffman, 1987). Other manufacturers are offering maternity blouses that can be adjusted for breastfeeding and slacks with snaps that expand for the waist increase during pregnancy and can be decreased after childbirth ("Baby & You", 1990; "Style", 1990). Designers such as Suzanne Eliastam of Toujours Belle created maternity garments that allow for size adjustments during pregnancy and discreet breastfeeding after the birth for such notables as Diana, Princess of Wales and Princess Caroline of Monaco ("The Birth Of", 1984).

Pregnant career women concerned with maintaining a corporate business look but unwilling to spend up to \$650 per maternity business suit may choose to rent a portion of their maternity wardrobes. Pro Creations, a Portland, Oregon firm, charges fees of \$9.95 to \$12.95 per week for each business suit. The short time period (16 to 20 weeks) that the garments are worn may make this practice financially feasible ("Rent a Maternity", 1987). Maternity evening wear may also be rented in much the same manner as one rents a tuxedo. This type of rental business provides expectant mothers access to beautiful maternity evening gowns for a special event at a minimal cost ("Maternity: Making The", 1987).

Another factor that has directly influenced the buying practices of pregnant consumers is the oversized fashion silhouette that has been popular during the last several years. Unfitted jackets and dresses have enabled pregnant women to use their current wardrobes for longer periods of time and to buy few maternity wear items (Burggraf, 1987a).

Fit may also be a contributing factor as consumers purchase maternity wear. Sometimes this is due to women's own ignorance of the changes their bodies make during pregnancy. Proper fit for the fourth month can be quite

different than that needed for the ninth month. Clothing purchased during the second trimester may become tight and uncomfortable during the third trimester. It is also economically unsound to purchase larger garments at the end of a pregnancy that would only be worn for another four to six weeks ("Maternity: Making The", 1987; Burggraf, 1987a).

#### Satisfaction with Available Selection of Maternity Wear

Today's pregnant consumers want the same kind of quality and fashion that they have been able to acquire in the general market. They want well-tailored garments with clean silhouettes. They also want garments made of natural fibers such as cotton, wool, and linen ("Maternity: Making The", 1987; Louie, 1983).

In the past, the maternity wear market had a reputation of being old-fashioned and out of touch with what pregnant consumers wanted ("No Baby", 1987). This reputation seems to be diminishing. Recently, maternity wear manufacturers and retailers report great interest in the maternity wear market ("The Birth Of", 1984; Burggraf, 1987a; Burggraf, 1987b; "Maternity: Making The", 1987).

The industry effort may be paying off as sales rise in the maternity wear market (Burggraf, 1987b). Maternity

wear consumers seemed to be generally satisfied with clothing choices. In a 1983 Gallup Poll only 18% wanted more fashion and style in clothing, 12% wanted more variety, and 3% wanted improvement in the quality of fabric offered ("No Baby", 1987).

Belleau and Miller (1986) suggested that career wear for pregnant women was emerging as a new market. The characteristic of the maternity wear depended significantly on age, education level, career orientation, and type of position a person held. Career-oriented or professional women preferred classically styled and casual garments that projected an appropriate image and offered comfort and function. The noncareer-oriented group preferred high fashion garments. Dresses, pants and jackets, and jumpers and blouses were the most desired working attire and suits consistently were ranked unfavorably.

In another study Greer (1988) also found that dresses were purchased more often and that suits, skirts, eveningwear, and hosiery were purchased less often. The researcher found that 67.7% of a sample of 121 were satisfied with available maternity apparel. However, 31 respondents (25.7%) of the sample either expressed dissatisfaction or strong dissatisfaction with available maternity clothing. Areas of dissatisfaction included

fashion level (20.8%), prices (23.1%), and sizes (14.9%) which corresponded with the 1983 Levi Strauss Gallup Poll data ("No Baby", 1987). Styles were said to be "too cute", and "not fashionable". Prices were thought too high when considering the short time the garments were worn.

Criticism related to size concerned maternity clothing being too large or too small and not fitting properly. Greer's sample consisted of 121 subjects and 64% of those subjects were identified as average size (size 7 to 12). Twenty-one percent of the subjects wore petite sizes and 15% of the subjects wore large sizes. These percentages indicated that over one-third of the sample had limited access to maternity clothing due to size ranges. Of the comments concerning dissatisfaction with apparel selection comments made by the respondents, 41.5% of respondent's comments were directly related to size. Respondents complained that both small and large sizes were limited. The researcher indicated that additional research is needed to see if size ranges for maternity wear should be expanded to include petites and large sizes (Greer, 1988).

Belleau, Miller, Elliott, and Church (1989) reiterated that pregnant employed women were beginning to form a new market segment with special needs for clothing worn in the

workplace. They further believe that this market could be divided into smaller target markets by factors such as age, educational level, and income level. The researchers found that there were significant differences between pregnant working women in some areas of their selection of workplace attire and age range, educational level, and income level. Belleau et al. found that the dress was ranked as a favorable workplace garment and that the younger age group (18 to 24) preferred dresses more than the older age group (25 to 42). The pants/blouse combination was also ranked favorably by both groups, however, the older group favored this ensemble more than the younger group. When the groups were divided by educational level, the researchers stated that classic styled garments and the pants/blouse combination were favored by respondents with college-graduate-or higher education group. Those respondents with less formal education preferred the pants/jacket combination. When income level was investigated, the researchers found that classic styling and willingness to purchase items that would need dry cleaning was preferred more by those in the \$36,000-or-over annual income category.

### Summary

Review of literature in the areas of self-concept, body cathexis, and satisfaction with available selection of clothing indicated that research has been done in each of these areas. Various research studies have also been conducted concerning maternity wear customers. However, no evidence was found that self-concept, body cathexis, and satisfaction with available selection of clothing had been researched with regard to the small-, average-, and large-size maternity customers.

Clothing plays an integral role in establishing and maintaining self-worth. Clothing for pregnant consumers may be extremely important for maintaining self-worth and preparation for their new roles of motherhood. Though maternity clothing is readily available for the average-size customer, those who wear either small- or large-size clothing may find that their clothing needs cannot be satisfactorily met. This nonavailability of clothing for the small- and large-size customers may cause anxiety, a lowering of self-worth, and dissatisfaction with their bodies. Therefore, research into this area was indicated.

### CHAPTER III

#### STATEMENT OF THE RESEARCH PROBLEM

During pregnancy a woman can be considered as being in a state of flux. She is experiencing rapid physical growth. Psychologically, she is experiencing both positive and negative emotions associated with pregnancy. Fawcett and Larkin (1986) stated that one's global self-worth during pregnancy is a key factor in how a pregnant person will react emotionally.

Clothing plays an important part in establishing and maintaining one's self-worth. Maternity clothing is especially important to the pregnant woman in maintaining her self-worth and in preparing for the new role as a mother. The maternity wear apparel industry, like the majority of apparel manufacturers, tends to cater to the average-size consumer. Very often it is difficult or impossible to acquire maternity clothing to fit the small- or the large-size maternity wear customer. Therefore, the purpose of this study was to determine the effects of self-reported dress size category on self-worth, body cathexis, and satisfaction with available selection of maternity clothing for pregnant women. Furthermore, the study explored whether relationships existed among the

dependent variables of global self-worth, body cathexis, and satisfaction with available selection of clothing among different-size females who wear maternity clothing.

#### Theoretical Framework

The theories of self-concept and body cathexis have been used as the basis of this research.

Self-concept is the way one perceives and feels about oneself. Self-concept is not a feeling that is perceived and remains unchanged for the rest of our lives, On the contrary, self-concept is constantly being altered and redefined from the time one is a child throughout one's entire life. The altering, maintenance, and redefinition of an individual's self-concept comes about through experience and interpretation of the experience during social interaction with others (Sherif, 1968; Horn & Gurel, 1981; Kaiser, 1985).

The Adult Self-Perception Profile instrument is based on Harter's (1982) theoretical conceptualization of self-worth. The approach to Harter's study reasoned that self-worth was multidimensional and should be looked at through a domain-specific approach. When self-worth was treated independently from other domains rather than as an aggregate of the specific domains, one may address the

relationships between self-worth and the domain specific self-perceptions. Thus, a clearer assessment of self-worth was obtained (Messer & Harter, 1986).

Harter's original instrument was structured for children. Messer (1986) used Harter's conceptual framework and instrument format to develop and validate the Adult Self-Perception Profile.

Body cathexis deals with the satisfaction or dissatisfaction one has with the physical body as a whole or in part. Body cathexis influences how one thinks and feels about oneself. Body cathexis has often been found to be closely related to self-concept (Secord & Jourard, 1953; Horn & Gurel, 1981; Kaiser, 1985).

The original Body Cathexis Scale was developed in 1953 by Secord and Jourard. Reliabilities for the original instrument were high for both men (.78) and women (.83). No reliability score was reported for the modified questionnaire.

In 1955, a shortened version of the Body Cathexis Scale was created. The list contained 12 body parts. Subjects were asked to indicate their feelings on a seven-point scale ranging from strong positive feeling to strong negative feeling. Of the 12 body parts contained on the

original questionnaire, Jourard and Secord found only eight body parts to be significant at the .05 level. The eight body parts were weight, hips, thighs, calves, ankles, feet, bust, and waist (Jourard & Secord, 1955).

The woman experiences a delicate balance between positive and negative feelings about self and satisfaction with the body during pregnancy. Psychologically, the woman deals with three basic stages of emotion during pregnancy. The first stage involves the acceptance of the fetus as part of the body. As the fetus begins to move, realization that the fetus is a separate entity occurs. During the final stage of pregnancy, a woman experiences increasing emotional tension influenced by an eagerness to give birth. Physically, a woman experiences the rapid growth of the fetus within the body. The rapid growth changes the appearance of the body dramatically. As the pregnancy progresses, the woman also experiences physical discomfort such as tiring easily, swollen feet, backaches, and an increase in body temperature. The psychological and physical changes that occur may directly influence the way a woman feels about the self and the body (Colman & Colman, 1971; Willson & Carrington, 1979).

Clothing and personal appearance have been found to indirectly influence self-concept, as well as body cathexis. Clothing and personal appearance have a great deal of impact on impressions formed by others. When one perceives positive or negative impressions from others with regard to clothing or personal appearance, that impression aids an individual in either altering, maintaining, or redefining the self and/or body cathexis.

For the pregnant woman who is experiencing added emotional stress and rapid physical growth, appropriate clothing becomes extremely important. Indirectly, appropriate clothing may help the woman to maintain, alter, or redefine the self-worth and the body cathexis in a positive manner.

For the woman who does not fall in the average clothing size range, it may be very difficult to find appropriate maternity clothing. Maternity wear is not readily available in all sizes. The woman who is small (underweight and/or short) and the woman who is large (overweight and/or tall), experience a very difficult time finding appropriate clothing. The lack of appropriate maternity clothing may cause the small- and/or large-size woman to experience a lower global self-worth and/or lower

body cathexis than the average-size woman who has access to appropriate maternity clothing.

#### Definition of Terms

##### Adult Self-Perception Profile Subscales

(Messer & Harter, 1986)

Adequate Provider: Supplying the means of support for oneself and one's significant others.

Athletic Abilities: The concept of abilities related to sports.

Global Self-Worth: The way one thinks and feels about oneself.

Household Management: Guiding or handling activities in the household.

Intelligence: The ability to learn and know.

Intimate Relationships: Close, meaningful interactions or relationships with one's mate, lover, and/or very special friend.

Job Competence: Perception of competence in one's major occupation, job, or work.

Morality: One's behavior based on standards of conduct, of what is right and wrong.

Nurturance: The process of caring for others.

Physical Appearance: The way one looks.

Sense of Humor: The ability to see the amusing side of things.

Sociability: One's behavior in the presence of others.

### Body Cathexis

Body Cathexis: The degree to which a person is satisfied or dissatisfied with one's own body (Secord & Jourard, 1953).

Current Body Cathexis: The degree to which a person is satisfied or dissatisfied with one's own body at the time the instrument was completed (during pregnancy).

Prior Body Cathexis: The degree to which a person is satisfied or dissatisfied with one's own body prior to pregnancy.

### Satisfaction with Available Selection of Clothing

Overall Satisfaction: Maternity consumers overall satisfaction with available selection of maternity clothing (Greer, 1988).

### Objectives

Four objectives were developed to guide the researcher in conducting this study. They were:

1. To determine the effects of dress size category (small, average, and large) on global self-worth, Harter's 12 subscales of global self-worth, prior and current body cathexis, and satisfaction with available selection of maternity clothing for pregnant females.

2. To determine the relationships between global self-worth and Harter's 11 subscales of global self-worth, between global self-worth and current body cathexis, and between global self-worth and satisfaction with available selection of maternity clothing among pregnant females.

3. To determine the relationship between current body cathexis and satisfaction with available selection of maternity clothing among pregnant females.

4. To determine whether increase in dress size during pregnancy is related to global self-worth, current body cathexis, and satisfaction with available selection of maternity clothing among pregnant females.

### Hypotheses

The following statistical hypotheses were postulated for the study:

1. There will be no significant differences in mean scores on global self-worth by dress size category for pregnant female respondents.

2. There will be no significant differences in mean scores on the sociability subscale by dress size category for pregnant female respondents.

3. There will be no significant differences in mean scores on the job competence subscale by dress size category for pregnant female respondents.

4. There will be no significant differences in mean scores for the nurturance subscale by dress size category for pregnant female respondents.

5. There will be no significant differences in mean scores on the athletic abilities subscale by dress size category for pregnant female respondents.

6. There will be no significant differences in mean scores on the physical appearance subscale by dress size category for pregnant female respondents.

7. There will be no significant differences in mean scores on the adequate provider subscale by dress size category for pregnant female respondents.

8. There will be no significant differences in mean scores on the morality subscale by dress size category for pregnant female respondents.

9. There will be no significant differences in mean scores on the household management subscale by dress size category for pregnant female respondents.

10. There will be no significant differences in mean scores on the intimate relationships subscale by dress size category for pregnant female respondents.

11. There will be no significant differences in mean scores on the intelligence subscale by dress size category for pregnant female respondents.

12. There will be no significant differences in mean scores on the sense of humor subscale by dress size category for pregnant female respondents.

13. There will be no significant differences in mean scores for current body cathexis by dress size category for pregnant female respondents.

14. There will be no significant differences in mean scores for prior body cathexis by dress size category for pregnant female respondents.

15. There will be no significant differences in the mean change in score between current and prior body cathexis by dress size category for pregnant female respondents.

16. There will be no significant differences in mean response to overall satisfaction with available selection of maternity clothing by dress size category for pregnant female respondents.

17. There will be no significant differences in mean response to size as a contributing factor in overall satisfaction with available selection of maternity clothing by dress size category for pregnant female respondents.

18. There will be no significant differences in mean response to amount purchased from selected purchase sources by dress size category for pregnant female respondents.

19. There will be no significant differences in mean response to satisfaction with selected purchase source by dress size category for pregnant female respondents.

20. There will be no significant differences in mean response to amount purchased from selected maternity clothing categories by dress size category for pregnant female respondents.

21. There will be no significant differences in mean response to satisfaction with selected maternity clothing categories by dress size category for pregnant female respondents.

22. There will be no significant relationships between global self-worth and Harter's 11 subscales of global self-worth for pregnant female respondents.

23. There will be no significant relationship between global self-worth and current body cathexis for pregnant female respondents.

24. There will be no significant relationship between global self-worth and satisfaction with available selection of maternity clothing for pregnant female respondents.

25. There will be no significant relationship between current body cathexis and satisfaction with available selection of maternity clothing for pregnant female respondents.

26. There will be no significant relationship between global self-worth and current body cathexis by increase in dress size for pregnant female respondents.

27. There will be no significant relationship between global self-worth and overall satisfaction with available selection of maternity clothing by increase in dress size for pregnant female respondents.

28. There will be no significant relationship between current body cathexis and overall satisfaction with available selection of maternity clothing and by increase in dress size for pregnant female respondents.

#### Limitations

The limitations of this study were:

1. The sample to be used in the study was not randomized due to the necessity of using women attending prepared childbirth classes.

2. The sample size was limited to pregnant women attending prepared childbirth classes in the New River and Roanoke Valley areas of Virginia who were willing to participate.

3. Due to the lack of randomization and the size of the sample, any inference concerning global self-worth, body cathexis, and satisfaction with available selection of clothing is confined to the population from which the sample was obtained. Generalizations to other populations can not be made from the results of this study.

4. The researcher had no control over:

- a. Social or economic status of the subjects
- b. Age of the subjects
- c. Clothing size of the subjects
- d. Established opinions of the subjects in regard to global self-worth, body cathexis, and satisfaction with available selection of clothing.

#### Assumptions

The assumptions of this study were:

1. Pregnant females have special clothing needs.

2. Women are able to recall accurately how satisfied or dissatisfied they felt about their bodies prior to pregnancy.

3. Women are able to recall accurately their satisfaction with available selection of clothing.

4. The Adult Self-Perception Profile, Body Cathexis Scale, and the Maternity Clothing Survey are reliable and valid for measuring the variables in the study.

5. A subject's response to the questionnaire used in this study represents a realistic assessment of a person's global self-worth, body cathexis, and satisfaction with available selection of clothing.

6. Responses are assumed to be independent of influence of others.

## CHAPTER IV

### PROCEDURE

The purpose of this study was to determine the effects of self-reported dress size category on self-worth, body cathexis, and satisfaction with available selection of maternity clothing for pregnant women. The study also investigated whether relationships existed among global self-worth, body cathexis, and satisfaction with available selection of clothing. The procedures used in this inquiry are discussed in the following order: instrumentation, selection of the sample, collection of data, method of data collection, pretesting the instrument, area clothing survey, and analysis of the data.

#### Instrumentation

The instrument used in this study was derived from three previously validated scales. Self-worth was measured by the Messer and Harter (1986) Adult Self-Perception Profile. Body cathexis was studied using a modified version of the Body Cathexis Questionnaire developed by Jourard and Secord (1955). Satisfaction with available selection of maternity wear was investigated using a modified version of the Maternity Clothing Survey developed

by Greer (1988). The instrument for this research has been entitled, Maternity Wear Customer Survey (Appendix A).

#### Adult Self-Perception Profile

The instrument used to investigate self-worth contained a total of 50 items that tapped specific domains of self-worth. Six items were provided to measure global self-worth. Half of the items for each domain and global self-worth were keyed positively and half were keyed negatively. The other eleven domains included sociability, job competence, nurturance, athletic abilities, physical appearance, adequate provider, morality, household management, intimate relationships, intelligence, and sense of humor. The eleven domains contained four items each. Each subscale was scored separately.

#### Body Cathexis

Body cathexis was measured by a modified version of the 1955 Body Cathexis Scale created by Jourard and Secord. The eight body parts found to be most important to women (weight, hips, thighs, calves, ankles, feet, bust, and waist) constituted this part of the instrument (Jourard & Secord, 1955). A seven-point scale ranging from strong positive feeling to strong negative feeling was used to

measure the subjects' feelings about each of the body parts prior to pregnancy and currently during pregnancy.

Satisfaction with Available Selection  
of Maternity Clothing

A modified version of the 17-question instrument developed by Greer (1988) was used to study satisfaction with selection of available clothing. No reliability scores were reported by Greer. However, due to the logical nature of the questions used on a like sample, the Greer instrument was deemed appropriate for this study.

The Greer instrument also included demographic questions which were deemed appropriate for this study. One question was added to request information on size of the last article of maternity clothing purchased. Size charts included in two questions were modified to include a wider range of sizes than the size chart used for the Greer (1988) investigation (Gioello and Berke, 1979).

Selection of the Sample

The sample for the study was taken from participants attending hospital-sponsored or individually instructed classes for expectant parents. Prepared childbirth classes using the Lamaze or the Bradley method were taught in

Virginia's New River and Roanoke Valley areas. An approximately equal distribution was sought between small and large city environments. The small city environments included Pulaski County, Montgomery County, and the City of Radford participants. The large city environments included Salem and Roanoke, Virginia participants.

Prepared childbirth classes typically met once a week for six to eight weeks and were often required by the attending physician. The classes are offered to first-time parents and parents who have previously had children using the Lamaze or Bradley method. Women were encouraged to attend prepared childbirth classes during the third trimester, an ideal time to obtain information for the study.

#### Administering the Questionnaire

The researcher attended the childbirth classes to explain and distribute the questionnaires. Subjects were asked to take the questionnaire home and complete it at their leisure before the next meeting of the class. The researcher collected the completed questionnaires during the next class. For respondents who forgot the questionnaires, addressed, stamped envelopes were provided.

To distinguish the different geographic areas used in the study, the questionnaires were duplicated in different colored paper; each area was assigned a specific color. A cover page with a brief explanation was attached to the front of the questionnaire. As an incentive to participate in the research, three \$10 gift certificates were awarded after data collection to randomly selected participants. A Gift Certificate Form was included on the questionnaire cover page. The form requested name, phone number, and a yes/no space for subjects to state whether they would like to know the results of the drawing. To protect the privacy of the subjects, the Gift Certificate Form was separated from the questionnaire by the researcher upon receipt.

#### Pretesting the Instrument

The three instruments selected for this study have all been used previously; however, because slight modifications have been made, a pretest was deemed necessary. A panel of experts reviewed the questionnaire and the pretest was planned.

The pretest was administered to women attending childbirth classes in the Radford area. Information from the pretest indicated that the overall questionnaire needed to be shortened and questions regarding satisfaction with

available selection of maternity clothing needed clarification. Placement of questions pertaining to satisfaction with available selection and demographics were rearranged. Name and address, rather than name and phone number were used for the Gift Certificate Form to alleviate the need for long distance telephone calls.

#### Area Clothing Survey

To facilitate the survey of sources available for maternity clothing in the area, the researcher solicited possible sources from prepared childbirth instructors as well as using newspaper advertisements and telephone yellow page directories. Through on-site investigation of sources and perusal of mail-order catalogs and commercial pattern catalogs, the following information was gathered:

In the small city environments which included Pulaski County, Montgomery County, and the City of Radford, maternity clothing was not readily available. Very few stores in the immediate vicinity were found to carry maternity items. Choices in style and color were limited. Sizes ranged from 6 to 18 and small, medium, and large. Many clothing categories such as business suits, warm-ups, swimwear, exercisewear, and party clothing were not available. Only two stores carried lingerie such as slips,

bras, underpants, and hosiery; often in only one style and limited sizing.

In the large city environments located in Salem and Roanoke, Virginia, women had more choices of places to shop. Several department stores carried maternity wear. Two maternity wear specialty shops in particular carried several choices of style and color of all categories of maternity clothing with the exception of business suits. Sizes ranged from 4 to 18, however, one store did carry one style of maternity slacks in size 20. Sizing such as XS (extra small) stated on the label as fitting size 3 to 5 through XL (extra large) stated on the label as fitting size 14 to 16 was also observed.

Women living in both the small and large city environments had two other possible sources available for purchasing new maternity clothing. They could order clothing from mail-order catalogs or purchase patterns for home sewing.

J. C. Penney and Sears Roebuck were the most easily accessible mail-order catalogs. They both offered maternity clothing in a range of styles, color, and clothing categories. Both catalogs offered petite sizes and tall sizes (Baby & You, 1990; Style, 1990).

Sizes generally ranged from double sizes of 3/4 to 15/16 or S (small), M (medium), and L (large) in the J. C. Penney catalog (Baby & You, 1990). The Sears Roebuck catalog was the only catalog to offer large sizes. The sizes in this catalog ranged from 6 to 18, 18W to 28W, as well as 1X (stated as fitting 18W to 20W), 2X (22W to 24W), and 3X (26W to 28W) (Style, 1990).

Home sewing commercial maternity clothing patterns were available in the Simplicity, Butterick, McCall, and Vogue pattern books. The clothing categories included business suits, dresses, jumpers, skirts, slacks, shorts, jumpsuits, and blouses. Sizes generally ranged from 6 to 24 (Simplicity, 1990; Butterick, 1990; McCall, 1990; Vogue, 1990).

#### Analysis of Data

The first fifty items of the instrument related to self-worth. The scoring format was the same scoring format used by Messer and Harter (1986). This format utilized a forced-choice, four-point scale format in the Adult Self-Perception Profile. The respondents were asked to read a two-part statement and choose which part of the statement best described them. They then indicated whether the part chosen was "Really True for Me" or "Sort of True for Me".

A score of one to four was assigned for each alternative. A low perceived competence or adequacy was indicated by the score of one. A high perceived competence or adequacy was indicated by the score of four. Questions were worded so that half started with a positive statement and half started with a negative statement. This format allowed one to answer each question without prior knowledge of what score might be given for that answer. Scores for global self-worth and for each subscale were computed by averaging the points assigned to the items in the relevant scales.

Eight items of the instrument were used to gather the body cathexis information. The same scale for scoring prior and current body cathexis was used for this research as that used by Jourard and Secord (1955). The scale consisted of a seven-point Likert-type scale. Values of one to seven were assigned to the scale as follows:

Strongly  
Negative

Strongly  
Positive

1 2 3 4 5 6 7

A score was obtained by averaging the responses to the eight items.

One item was used to measure overall satisfaction with available selection of maternity clothing. A seven-point Likert-scale was used for this question with Strongly Dissatisfied to Strongly Satisfied designations.

The Kruskal-Wallis One-Way Analysis of Variance nonparametric procedure was chosen for analysis of the data for Hypotheses 1 through 21. This test is easily conducted and has good power unless the sample sizes are large (Neave & Worthington, 1988).

If significance was found in the Kruskal-Wallis procedure, the Dunn multiple comparison procedure was used to discern which group of the sample was different from the others. This test was used for its simplicity, effectiveness, and its conservative nature (Neave & Worthington, 1988).

Hypotheses 22 and 28 dealt with relationships among the variables. The procedure used for analysis of this data was the Spearman's rank correlation coefficient. This procedure is a nonparametric analysis commonly used for ordinal data. This test is analogous to the classical product-moment correlation coefficient (Neave & Worthington, 1988).

In addition to statistical analysis to test hypotheses, the data were looked at descriptively. Crosstab procedures were used to summarize the demographic information.

Levels of rejection were set at the .05 level of probability for all tests except the Dunn test for which the level was .15. Neave and Worthington (1988) suggested that a higher level of significance be used for the Dunn test.

Distributions of respondents on the basis of self-reported dress size was computed. A three-size dress breakdown was established. Small size consisted of dress sizes 2 through 8. Average size consisted of dress sizes 9 through 13, and large size consisted of dress sizes 14 and over.

Respondents were asked to indicate prior size (dress size most often purchased prior to pregnancy) and current size (last maternity dress purchased). Prior and current dress size frequencies and percentages are presented in Table 1.

Table 1  
 Distribution of Respondents by Dress Size Prior to and  
 During Pregnancy

	Small		Average		Large		Total	
	#	%	#	%	#	%	#	%
Prior Dress Size	45	54	23	28	15	18	83	100
Current Dress Size	17	20	37	45	29	35	83	100

Respondent's prior reported dress size was used as the independent variable for investigating prior body cathexis. The respondent's current dress size was used for calculating global self-worth and the 11 subscales associated with self-worth, current body cathexis, satisfaction with available selection, and demographic information. The current dress size breakdown was also used for analysis of relationships between global self-worth, current body cathexis, satisfaction with available selection, and dress size change. Respondent's prior and current dress size were used as the independent variable for the study of mean change in score between prior and current body cathexis and determining the change in dress size due to pregnancy.

Scores dealing with self-worth were categorized such that low, moderate, and high distributions which varied. Scores dealing with self-worth were categorized such that a low score was less than 1.33, moderate score was between 1.34 to 2.67, and a high score was 2.68 or greater. Data concerning body cathexis were divided such that low equaled less than 2.49, moderate equaled 2.5 to less than 5.49, and high equaled to greater than 5.5. Data concerning amount purchased by selected purchase sources and amount purchased

by selected maternity clothing categories were divided such that none was equal to one, low was 2 and 3, moderate was 4 and 5, and high was 6 and 7. For all other questions involving the seven-point scale, low equaled 1 and 2, moderate equaled 3 and 4, and high equaled 5, 6, and 7.

CHAPTER V  
FINDINGS, RESULTS, AND DISCUSSION

The purpose of this study was to determine the effects of self-reported dress size category on self-worth, body cathexis, and satisfaction with available selection of maternity clothing for pregnant women. This chapter presents the results of the statistical analyses and a discussion of results in the following sections: description of the sample; global self-worth and Harter's 11 subscales of global self-worth; body cathexis; satisfaction with available selection of maternity clothing; and selected relationships of global self-worth and the 11 subscales, current body cathexis, and satisfaction with available selection of maternity clothing.

In addition to descriptive statistics, nonparametric statistical procedures used to statistically analyze the data were the Kruskal-Wallis One-Way Analysis of Variance, the Dunn multiple comparison procedure, and the Spearman's rank correlation coefficient. Within each section of the results chapter, the statistical procedures used are specified.

### Description of the Sample

One hundred fifty-five questionnaires were distributed during prepared childbirth classes taught in Virginia's New River and Roanoke Valley areas. The participants returned 86 questionnaires, with 83 deemed usable for the study. The usable return rate was 54%. The sample was approximately equally distributed between large city (49%) and small city (51%) environments. The small city environments included Pulaski County (7%), Montgomery County (28%), and the City of Radford (16%) and their surrounding areas. The large city environments included two hospital-sponsored prepared childbirth classes located in Salem (35%) and Roanoke (14%), Virginia and surrounding areas.

Demographic information is presented in Table 2. Percentages have been rounded to the nearest whole number and total percentages will not always sum to 100%.

### Age

The participants were between 18 and 40. Although the questionnaire provided space to indicate less than 18 or over 40, no participants checked these areas. The research sample is representative of women in the United

Table 2  
Distribution of Respondents' Demographic Information

Variable	Total #	%
<b>Age</b>		
18 to 20	3	4
21 to 25	27	32
26 to 30	33	40
31 to 35	19	23
36 to 40	1	1
<b>Education</b>		
Some high school	2	2
Completed high school	18	22
Completed trade school	4	5
Some college	20	24
Completed college	30	36
Some graduate school	3	4
Completed graduate school	6	7
<b>Employment</b>		
Employed full-time outside the home	64	77
Employed part-time outside the home	8	10
Not Employed outside the home	11	13
<b>Income</b>		
Less than 10,000	4	5
10,000 to 19,999	8	10
20,000 to 29,999	14	17
30,000 to 39,999	22	27
40,000 to 49,999	15	18
50,000 or more	19	23
<b>Pregnancy Factors</b>		
First trimester (1-3 months)	2	2
Second trimester (4-6 months)	3	4
Third trimester (7-9 months)	78	94
First pregnancy	63	76
Second pregnancy	20	24

States within the childbearing years of 15 to 44 ("Changing Profile", 1986).

In 1983, the national median age for women giving birth was 25.9 years of age and thought to be increasing ("Changing Profile", 1986). The largest group of this sample (72%) stated their age as between 21 and 30, somewhat like the national median age.

### Education

Over 70% of the respondents indicated some college or higher level of education. The percentages of respondents by educational level for this study are similar to the percentages reported by Greer (1988). Over 68% of Greer's sample indicated their level of education as having some college or higher education.

The motivation for some women to complete their education and join the work force has increased in the past few decades. Metropolitan Life, reporting statistics compiled by the Bureau of the Census and the National Center for Health Statistics, stated that in 1970, only 8 percent of all American mothers were college graduates. In 1980 the percentage of American mothers who were college graduates had risen to 14% and in 1983, the percentage had again risen to 16% ("Changing Profile", 1986). The sample

for this research (47%) far exceeds the 1983 national percentage of American mothers having completed college, attended graduate school, and/or completed graduate school. Perhaps this percentage is much higher because educated people may be attracted to the prepared childbirth classes from which this sample is taken. Another factor that may have contributed to this high percentage of educated respondents is that there are at least four colleges and universities located in the nearby vicinity area where the sample was obtained.

#### Employment

The majority of participants in this study (77%) were working full-time outside the home during their pregnancy. According to a Bureau of the Census survey reported by Stores, ("No Baby", 1987) one out of every two mothers with children under a year old were employed. Greer (1988) found that of 121 pregnant women, 67% worked until full term. Belleau and Miller (1986) conducted a study with 97 working pregnant women and concluded that pregnant career women are emerging as a new market segment. The sample for this research is not unlike pregnant working women used in these studies.

### Income

The largest segment of the sample (27%) indicated that their total family annual income was between \$30,000 to \$39,999. The next largest segment of the sample (23%) stated their total family annual income was \$50,000 or more. Greer (1988) stated that the largest segment of her sample (28%) fell into the \$20,000 to \$29,999 category and the next largest segment of respondents (25%) fell into the \$30,000 to \$39,999 category. A Bureau of the Census survey reported by Stores, stated that 18% of the new mothers in their study listed their family income as \$35,000 and over ("No Baby", 1987).

### Pregnancy Factors

Ninety-four percent of the sample were in the third trimester (7 to 9 months) of pregnancy. Only 6% of the sample consisted of participants in the first (1 to 3 months) and second (4 to 6 months) trimesters of pregnancy.

The participants indicating that this was their first pregnancy made up 76% of the sample. Twenty-four percent of participants were in their second pregnancy. In 1987, Stores reported that in 1985, 42% of the babies born in America were to first time mothers. The sample for this study is slightly above the national average reported from

1985 ("No Baby", 1987). This high percentage of first-time mothers may be due to the sample being taken from prepared childbirth classes. First-time mothers may be more inclined to attend this type of class because this is a new experience.

### Self-Worth

Hypotheses 1 through 12 were to determine if there would be a difference in mean score of the sample by dress size category for the 12 subscales associated with self-worth. A Kruskal-Wallis One-Way Analysis of Variance was used to analyze the data (Table 3). No significant differences in means on the 12 subscales were found between the small-, average-, and large-size respondents by dress size category. Hypotheses 1 through 12 were accepted. The results correspond with results reported by Baggs (1988). Baggs found no differences between underweight, average weight, and overweight college females in self-esteem.

Distributions for global self-worth and the 11 associated subscales of global self-worth are presented in Table 4. In general, the respondents indicated high or positive feelings (72 to 94%) for global self-worth, job competence, nurturance, adequate provider, morality,

Table 3  
Kruskal-Wallis Analysis of Self-Worth by Self-Reported Current Dress Size of Respondents.

Variable	Current Size			Kruskal Wallis	p value
	Small Mean	Average Mean	Large Mean		
Global self-worth	3.08	3.40	3.23	3.91	.1413
Sociability	2.68	2.98	2.99	2.39	.3030
Job Competence	3.40	3.37	3.28	.56	.7546
Nurturance	3.34	3.31	3.34	.22	.8949
Athletic Abilities	1.96	2.45	2.24	5.11	.0776
Physical Appearance	2.59	2.82	2.57	4.24	.1198
Adequate Provider	3.19	3.29	3.15	.81	.6679
Morality	3.28	3.35	3.28	.25	.8804
Household Management	2.93	3.24	3.07	2.46	.2927
Intimate Relationships	2.93	3.05	3.06	.36	.8367
Intelligence	2.82	3.02	3.00	1.27	.5309
Sense of Humor	3.37	3.20	3.20	1.14	.5661

Table 4  
 Distribution of Respondents' Level of Self-Worth by Self-Reported Current Dress Size Category.

Variable	Current Size			Total N=83 %
	Small n=17 %	Average n=37 %	Large n=29 %	
Global self-worth				
Low	0	0	0	0
Moderate	24	3	21	13
High	76	97	79	87
Sociability				
Low	6	0	0	1
Moderate	29	30	34	31
High	65	70	66	67
Job Competence				
Low	0	0	0	0
Moderate	0	8	14	8
High	100	92	86	92
Nurturance				
Low	0	0	0	0
Moderate	18	5	0	6
High	82	95	100	94
Athletic Abilities				
Low	29	11	14	16
Moderate	47	46	55	49
High	24	43	31	35
Physical Appearance				
Low	6	0	3	2
Moderate	47	27	45	37
High	47	73	52	60

Table 4 Continued

Variable	Current Size			Total N=83 %
	Small n=17 %	Average n=37 %	Large n=29 %	
<b>Adequate Provider</b>				
Low	0	0	0	0
Moderate	24	8	17	14
High	76	92	83	86
<b>Morality</b>				
Low	0	0	0	0
Moderate	6	19	10	13
High	94	81	90	87
<b>Household Managment</b>				
Low	6	0	0	1
Moderate	23	14	34	23
High	71	86	66	76
<b>Intimate Relationships</b>				
Low	0	0	3	1
Moderate	29	24	21	24
High	71	76	76	75
<b>Intelligence</b>				
Low	0	3	3	2
Moderate	35	19	28	25
High	65	78	67	72
<b>Sense of Humor</b>				
Low	0	0	0	0
Moderate	12	22	14	17
High	88	78	86	83

household management, intimate relationships, intelligence, and sense of humor. The majority of respondents (77%) for this study were employed outside the home. The results are somewhat comparable to Messer & Harter's 1986 studies in which full-time working women scored higher in global self-worth, job competence, sense of humor, and intimate relationships than either part-time working women or full-time homemakers.

Respondents in this study scored quite differently in the category of athletic abilities than Messer and Harter's (1986) sample. Messer and Harter stated that their working women respondents scored higher in the athletic abilities than either the part-time working women or the full-time homemakers. The current study refutes these results somewhat. The respondents in this sample (77% which were working full-time) indicated a high moderate (49%) range for athletic abilities rather than high range. Considering the advanced stage of pregnancy for the majority of the group (94%), it is not surprising that they scored less positively in the athletic abilities subscale.

Although advanced stages of pregnancy can make women feel less attractive, this sample scored somewhat high in the physical appearance category (60%). This may be due to

the fact that the majority of the respondents (77%) were still working outside the home and positively interacting with co-workers. Messer and Harter (1986) also reported that their sample of working women (though not pregnant) scored high or positively in their perception of physical appearance.

The adequate provider subscale which had been proven to be the least reliable subscale and possibly sample specific in Messer's 1986 study did not differ greatly from percentages received on the majority of the other subscales. For the adequate provider subscale, 86% of the respondents had high scores, 14% moderate scores, and 0% for low scores. The majority of these respondents were well educated and employed full-time outside the home and may have felt that they were adequately providing the means of support for themselves and for one's significant others.

Based on current dress-size category, average-size respondents scored the higher on global self-worth (97%) than small- or large-size respondents. The small-size and large-size groups scored somewhat alike 76% and 79% respectively having high scores. With regard to the 11 subscales associated with global self-worth, all three groups scored somewhat alike in the areas of sociability,

job competence, nurturance, adequate provider, morality, household management, intimate relationships, intelligence, and sense of humor. Small-size respondents scored slightly higher than the other two groups in job competence, morality, and sense of humor while average-size respondents scored slightly higher in sociability, athletic abilities, physical appearance, adequate provider, household management, and intelligence.

#### Body Cathexis

Hypotheses 13, 14, and 15 were formulated to determine if there were any differences in mean scores of the sample by dress size category for current body cathexis, prior body cathexis, and mean change in score between current and prior body cathexis. The Kruskal-Wallis test was used to analyze these data (Table 5).

No significant differences were found between small-, average-, and large-size respondents for current body cathexis or for the mean change of current body cathexis minus prior body cathexis. Hypotheses 13 and 15 were accepted.

The fact that large-size women do not experience a significant current body cathexis difference from other

Table 5  
 Kruskal-Wallis Analysis of Prior, Current and Mean Change of Body Cathexis by Associated Self-Reported Current and Prior Dress Size of Respondents.

Variable	Current Size:			Kruskal Wallis	p value
	Small Mean	Average Mean	Large Mean		
Prior Body Cathexis	5.21 <sup>a</sup>	5.31 <sup>a</sup>	4.39 <sup>b</sup>	10.78	.0046
Current Body Cathexis	4.35	4.16	3.92	.66	.7194
Mean Change	.82	1.41	1.41	4.61	.0926

<sup>ab</sup> Means within the same row with the same letter are not significantly different ( $p \leq .05$ ), Dunn's Test

groups during pregnancy may be explained in several ways. Fawcett and Larkin (1986) reasoned that pregnancy is viewed as more positively accepted in society today and that an increasing girth does not cause undue concern because it is considered a temporary physical state. Perhaps, pregnancy is the one time in the lives of large-size women when they feel that their bodies are not very different from the standard "ideal body" of most pregnant women.

Significant differences were found at the .05 level for respondents' prior body cathexis and a Dunn's test was calculated. Results indicated that the large-size group was significantly lower in prior body cathexis from the small- and average-size groups; therefore, hypothesis 14 was rejected. These results are in agreement with the results found by Baggs (1988). Baggs found that underweight and average weight subjects were more satisfied with their bodies than overweight respondents.

Distribution of respondent's level of prior and current body cathexis are presented in Table 6. Overall, more respondents indicated a high level of prior body cathexis (32%) than indicated a high level of current body cathexis (12%). The majority of respondents fell in the

Table 6  
 Distribution of Respondents' Level of Prior and Current Body Cathexis by Associated Self-Reported Current and Prior Dress Size Category.

Variable	Current Size			Total N=83 %
	Small n=17 %	Average n=37 %	Large n=29 %	
Prior Body Cathexis				
Low	0	0	7	2
Moderate	59	62	72	65
High	41	38	21	32
Current Body Cathexis				
Low	0	5	14	7
Moderate	82	81	79	81
High	18	14	7	12

moderate range indicating 65% in prior body cathexis and 81% in the current body cathexis.

Among the groups, the large-size group scored lower on body cathexis in both the current (14%) and prior (7%) categories. When considering current body cathexis, all groups distributed somewhat equally in the moderate range; however, in the high current body cathexis range, the small- (18%) and the average-size (14%) percentages were much higher than the large-size category (8%). In the prior body cathexis, slightly more large-size respondents (72%) fell in the moderate range while the small-(41%) and the average-size (38%) indicated a much higher prior body cathexis than the large-size respondents (21%). These results are somewhat like the results Baggs (1988) reported concerning overweight females being significantly less satisfied with their bodies than either average or underweight females. These results are also similar to those found by Doss (1990) who found that large-size females respondents had low body satisfaction.

#### Satisfaction with Available Selection of Maternity Clothing

Data concerning overall satisfaction with available selection of maternity wear and the extent to which size

related to overall satisfaction with available selection were calculated using the Kruskal-Wallis procedure (Table 7). No significant differences were found between the groups, therefore, hypotheses 16 and 17 were accepted. The lack of a significant difference between the small-, average-, and large-size respondents may be due to the increased thrust of industry to offer greater quality and quantity of styles for large-size women in the past few years (Brill, 1985b; Brubach, 1987; "Who Is The", 1988).

Distribution of respondents by size and level of overall satisfaction with available selection are reported in Table 8. In general, all groups reported themselves to be moderately satisfied (48%) with available selection of maternity clothing; however, more respondents (35%) reported a low satisfaction with available selection of maternity clothing than a high satisfaction (17%). This is similar to the results reported by Greer (1988). In Greer's study, 67% of the respondents indicated that they were satisfied with the available selection of maternity wear, while 25% of the respondents indicated dissatisfaction with available selection.

The small- and average-size groups reported a lower satisfaction with available selection of maternity clothing

Table 7  
 Kruskal-Wallis Analysis of Overall Satisfaction and Size as it Relates to Overall Satisfaction of Maternity Clothing by Self-Reported Current Dress Size of Respondents.

Variable	Current Size			Kruskal Wallis	p value
	Small Mean	Average Mean	Large Mean		
Overall Satisfaction	2.75	3.16	3.38	1.69	.4302
Size as it Relates to Overall Satisfaction	3.49	3.68	3.72	.15	.9258

Table 8  
 Distribution of Respondents' Level of Overall Satisfaction and Size as it Relates to Overall Satisfaction of Self-Reported Current Dress Size Category

Variable	Current Size:			Total N=83 %
	Small n=17 %	Average n=37 %	Large n=29 %	
Overall Satisfaction				
Low.	38	38	31	35
Moderate	56	43	48	48
High	6	19	21	17
Size as it Relates to Overall Satisfaction				
Low	29	35	31	33
Moderate	29	35	38	35
High	41	30	31	32

(38%) than the large-size group (31%). The large-size group had reported a slightly higher distribution of overall satisfaction with available selection of maternity clothing (21%) than average-size respondents (19%) and a much greater distribution than small-size respondents (6%). This may be due to the relatively narrow market of maternity wear as opposed to the larger selection of clothing offered in regular ready-to-wear ("Who Is The", 1988). Large-size women may be more attuned to searching for clothing than small- and average-size customers and may, therefore, report being more satisfied with available selection of maternity clothing than those who are not used to a limited clothing selection (Brubach, 1987; Mansfield, 1986).

In general, all respondents in the group were almost equally divided among low, moderate, and high satisfaction (approximately 33%) by size as it relates to overall satisfaction. The small-size group expressed the highest satisfaction with size as it relates to overall satisfaction (41%). The large-size group reported an equal percentage (31%) of low and high satisfaction with size as it relates to overall satisfaction and a slightly greater percentage (38%) of moderate satisfaction.

The results of this study also relate to results reported by Chowdhary and Beale (1988). They found large-size respondents to be satisfied with five of the six apparel categories studied and that the smaller size and the younger respondents reported greater satisfaction.

Table 9 reports the distribution of respondents' level of maternity clothing purchased for this pregnancy as well as the amount of expenditure on maternity clothing for this pregnancy. All three groups indicated a purchase of maternity clothing. The large-size group percentage (59%) was slightly higher than the small- (47%) and the average- (46%) size group. The results may be due to the oversized fashion silhouette available to all sizes and perhaps small- and average-size women may be able to use their current wardrobe for longer periods than large-size women (Burggraf, 1987a). However, the results also correspond and reinforce the idea that large-size women want to wear fashionable clothing that makes them feel attractive ("Who Is The", 1988; Chowdhary & Beale, 1988).

Clothing expenditures for this pregnancy varied among the groups. The largest number of the sample (43%) spent between \$100 and \$249 and 28% of the sample spent between \$250 and \$499. The expenditure per pregnancy is well below the average expenditure stated by the industry in 1987

Table 9

Distribution of Respondents' Levels of Maternity Clothing Purchased and Expenditure for this Pregnancy by Self-Reported Current Dress Size Category.

Variable	Current Size			Total N=83 %
	Small n=17 %	Average n=37 %	Large n=29 %	
<b>Maternity Clothing Purchased for this Pregnancy</b>				
Low.	41	35	24	33
Moderate	12	19	17	17
High	47	46	59	51
<b>Maternity Clothing Expenditures for this Pregnancy</b>				
Less than \$99	23	19	10	17
\$100 to \$249	23	49	48	43
\$250 to \$499	35	24	27	28
\$500 to \$749	18	0	14	8
\$750 to \$999	0	8	0	4
\$1,000 to \$1,499	0	0	0	0
\$1,500 or more	0	0	0	0

(\$750). It is somewhat below the average stated by Greer (1988) who found that the majority of that sample (42.1%) spent between \$249 and \$499 per pregnancy.

The distribution of the respondent's level of alternative clothing sources used for this pregnancy by dress size category is presented in Table 10. In general, the sample indicated low use of maternity clothing from a previous pregnancy, rented maternity clothing, and maternity clothing sewn by self or seamstress. Low use of these sources may be due to the makeup of the sample. A large part of the sample was made up of first-time mothers who were working fulltime. They did not have clothing from a previous pregnancy or the time to sew. A source for renting maternity clothing was not available in this area. All three groups did utilize borrowed maternity clothing and the non-maternity clothing sources such as oversized women's or men's clothing with approximately equal frequency.

Questions 54 and 55 concerned amount of maternity clothing purchased at selected purchase sources and amount of maternity clothing purchased from selected clothing categories as well as the associated satisfaction with the purchase source and clothing category. Some respondents did not complete Questions 54 and 55 correctly.

Table 10  
 Distribution of Respondents' Level of Alternative Clothing Sources for this Pregnancy by  
 Dress Size Category and by Self-Reported Current Dress Size Category.

Variable	Current Size			Total N=83 %
	Small n=17 %	Average n=37 %	Large n=29 %	
Alternative Sources of Maternity Clothing				
Clothing from Previous Pregnancy				
Low	88	83	78	82
Moderate	6	6	4	5
High	6	11	18	13
Borrowed Maternity Clothing				
Low	56	49	50	51
Moderate	25	16	18	18
High	19	35	32	31
Rented Maternity Clothing				
Low	100	100	100	100
Moderate	0	0	0	0
High	0	0	0	0
Maternity Clothing Sewn by Self or Seamstress				
Low	76	76	85	79
Moderate	18	12	7	11
High	6	12	7	9
Non-Maternity Clothing <sup>a</sup>				
Low	44	29	36	35
Moderate	25	38	25	31
High	31	32	39	35

<sup>a</sup>Oversized women's or mens clothing.

Respondents who completed the Questions 54 and 55 often incorrectly reported no purchase at a purchase source or no purchase of a selected clothing category and then recorded low, moderate, or high satisfaction with that source. Respondents also reported low or moderate use of a purchase source or selected clothing category, then recorded that they had no knowledge concerning that purchase source or selected clothing category. Where a respondent indicated no use of purchase source or clothing category and, low, medium, or high, it was considered incorrect. It was also considered incorrect when low, moderate, and high use of purchase source and clothing category and no knowledge of the purchase source or clothing category were reported by respondents. The incorrectly completed questionnaires concerning this information were deleted from the sample for analysis of the data for Questions 54 and 55, therefore, the total number of respondents varies for each variable.

Kruskal-Wallis One-Way Analysis of Variance was run for the amount of clothing purchased from the selected purchase sources (Table 11). Significant differences were found for the amount of clothing purchased at large-size

Table 11  
Kruskal-Wallis Analysis of Amount Purchased by Purchase Source Self-Reported Current Dress Size Category.

Variable	Size Breakdown			Kruskal Wallis	p value
	Small Mean	Average Mean	Large Mean		
<b>Purchase Source</b>					
Department Stores	3.30	2.86	2.86	.38	.8270
Maternity Speciality Stores	2.30	2.15	2.60	.79	.6733
Large-Size Specialty Stores	1.00 <sup>b</sup>	1.90 <sup>b</sup>	2.41 <sup>a</sup>	7.60	.0223
Discount Stores	3.70	3.87	3.65	.24	.8849
Mail-Order Companies	1.70	1.64	1.89	.14	.9335
Second-Hand Clothing Stores	1.89 <sup>a</sup>	1.00 <sup>b</sup>	1.82 <sup>a</sup>	6.50	.0388

<sup>ab</sup> Means within the same row with the same letter are not significantly different ( $p < .05$ ), Dunn's test.

specialty stores and second-hand clothing stores. Therefore, parts of hypothesis 18 were rejected.

A Dunn's test was run and results indicated that large-size women purchased more maternity clothing than the other two groups at the large-size specialty stores. Large-size women may have used this source for maternity clothing more than the other two groups because it is a source that they may use all the time.

The results of the Dunn's test also revealed that the average-size group purchased less clothing from second-hand clothing stores than the small- and large-size groups. This may be due to the fact that manufacturers tend to cater to the average-size customer ("Who is the", 1988). Average-size customer may not have to depend on second-hand shops for clothing. Hypothesis 18 was partially rejected.

Table 12 presents the frequency of respondent's level of amount purchased by purchase source by self-reported current dress size category. Frequency, rather than distribution was presented in this table due to the variation in the sample size and the small number of respondents per cell. Respondents frequented department stores and discount stores more often than other purchase sources. Purchase sources that were not used very often

Table 12  
 Distribution of Respondents' Level of Amount Purchased by Purchase Source and by Self-Reported Current Dress Size Category.

Variable	Current Size			Total
	Small	Average	Large	
<b>Purchase Source</b>				
Department Stores (n=53)				
None	3	6	6	15
Low	3	8	8	19
Moderate	2	7	5	14
High	2	1	2	5
Maternity Speciality Stores (n=50)				
None	6	10	9	25
Low	2	7	5	14
Moderate	0	2	4	6
High	2	1	2	5
Large-Size Speciality Stores (n=46)				
None	9	13	7	29
Low	0	3	6	9
Moderate	0	4	3	7
High	0	0	1	1
Discount Stores (n=53)				
None	1	4	3	8
Low	4	6	8	18
Moderate	2	8	4	14
High	3	5	5	13
Mail-Order Companies (n=50)				
None	6	14	13	33
Low	3	5	2	10
Moderate	1	3	2	6
High	0	0	1	1
Second-Hand Clothing Stores (n=46)				
None	6	19	13	38
Low	1	1	0	2
Moderate	1	0	2	3
High	1	0	2	3

were maternity specialty stores, large-size specialty stores, mail-order companies, and second-hand clothing stores. The results may be due to the available places to shop in the immediate area, or perhaps the sources not used may not be sources often shopped in by the maternity wear customer.

Kruskal-Wallis One-Way Analysis of Variance was used to test hypothesis 19 (Table 13). No significant difference was found between the small-, average-, and large-size groups for satisfaction with available selection of maternity clothing by purchase source. The hypothesis was accepted.

Frequency of respondent's level of satisfaction with available selection by purchase source and by self-reported dress size category is presented in Table 14. Moderate to high satisfaction were reported more often by respondents answering the question.

Hypothesis 20 dealt with amount purchased from selected maternity clothing categories and by self-reported dress size category (Table 15). No significant differences among the groups were noted for any of the clothing categories, thus hypothesis 20 was accepted.

Table 13  
Kruskal-Wallis Analysis of Satisfaction with Selection by Purchase Source and by Self-Reported Current Dress Size Category.

Variable	Current Size			Kruskal Wallis	p value
	Small Mean	Average Mean	Large Mean		
Purchase Source					
Department Stores	3.00	4.38	3.87	3.65	.1610
Maternity Speciality Stores	3.00	4.36	4.12	2.40	.3011
Large-Size Specialty Stores	0	4.12	4.40	.07	.7851
Discount Stores	3.76	3.95	3.53	.78	.6775
Mail-Order Companies	2.75	4.56	5.20	3.82	.1479
Second-Hand Clothing Stores	3.67	2.00	4.50	1.45	.4849

Table 14  
 Frequency of Respondents' Level of Satisfaction with Selection by Purchase Source and by Self-Reported Current Dress Size Category.

Variable	Current Size			Total
	Small	Average	Large	
<b>Purchase Source</b>				
Department Stores (n=39)				
Low	3	3	3	9
Moderate	5	6	8	19
High	0	7	4	11
Maternity Speciality Stores (n=28)				
Low	2	2	1	5
Moderate	2	5	7	14
High	1	4	4	9
Large-Size Specialty Stores (n=18)				
Low	0	1	1	2
Moderate	0	3	4	7
High	0	4	5	9
Discount Stores (n=46)				
Low	3	5	5	11
Moderate	1	7	9	21
High	5	8	3	14
Mail-Order Companies (n=18)				
Low	2	1	0	3
Moderate	2	3	2	7
High	0	5	3	8
Second-Hand Clothing (n=8) Stores				
Low	1	1	0	2
Moderate	1	0	2	3
High	1	0	2	3

Table 15  
Kruskal-Wallis Analysis of Amount Purchased by Maternity Clothing Categories and by Self-Reported Current Dress Size Category.

Variable	Current Size			Kruskal Wallis	p value
	Small Mean	Average Mean	Large Mean		
<b>Clothing Categories</b>					
Business suits	1.11	1.00	1.10	2.57	.2766
Dresses	2.00	2.61	2.95	3.64	.1623
Jumpers	2.12	2.26	2.09	.02	.9887
Skirts	1.10	1.43	1.58	3.57	.1680
Slacks	4.00	3.75	3.43	1.16	.5607
Shorts	1.60	1.68	1.47	1.21	.5453
Jumpsuits	1.00	1.48	1.70	3.38	.1847
Blouses	4.20	3.21	3.05	3.25	.1972
Sweaters	2.20	2.09	2.76	2.45	.2932
Exercisewear	1.90	2.66	3.00	2.36	.3078
Warm - ups	1.11	1.14	1.26	.69	.7062
Swimwear	1.00	1.43	1.05	1.01	.6024
Party clothing	1.00	1.32	1.20	1.56	.4584
Sleepwear	1.50	1.83	1.60	.71	.7025
Bras	3.30	3.30	2.95	.53	.7659
Underpants	4.30	3.91	3.86	.23	.8926
Slips	1.80	1.64	1.84	.75	.6868
Hosiery	3.60	3.13	3.00	.37	.8318

Table 16 presented frequency of respondent's level of amount purchased by maternity clothing categories and by self-reported dress size category. Many clothing categories such as business suits, skirts, shorts, jumpsuits, exercisewear, swimwear, party clothing, sleepwear, and slippers were not purchased by the respondents very often. Clothing categories reported as being purchased more often were dresses, jumpers, slacks, blouses, sweaters, warm-ups, bras, underpants, and hosiery. Clothing categories used may be directly influenced by need, season, and cost.

Satisfaction with available selection of maternity clothing categories by self-reported dress size category is presented in Table 17. No significant differences were found among the three groups for any of the variables tested; therefore, hypothesis 21 was accepted.

Table 18 presents the frequency of respondent's level of satisfaction with available selection of maternity clothing categories by self-reported dress size category. Respondents frequently noted moderate and high satisfaction with dresses, jumpers, slacks, blouses, sweaters, bras, underpants, and hosiery.

Table 16  
 Frequency of Respondents' Level of Amount Purchased by Maternity Clothing Category and  
 by Self-Reported Current Dress Size Category.

Variable	Current Size			Total
	Small	Average	Large	
<b>Clothing Categories</b>				
<b>Business suits (n=51)</b>				
None	8	23	17	48
Low	1	0	2	3
Moderate	0	0	0	0
High	0	0	0	0
<b>Dresses (n=54)</b>				
None	5	6	2	13
Low	3	11	14	28
Moderate	2	4	4	10
High	0	2	1	3
<b>Jumpers (n=52)</b>				
None	3	10	7	20
Low	4	8	11	23
Moderate	1	5	3	9
High	0	0	0	0
<b>Skirts (n=52)</b>				
None	9	15	16	40
Low	1	8	3	12
Moderate	0	0	0	0
High	0	0	0	0
<b>Slacks (n=55)</b>				
None	0	3	3	6
Low	3	8	10	21
Moderate	6	8	4	18
High	1	5	4	10
<b>Shorts (n=51)</b>				
None	5	11	14	30
Low	3	6	4	13
Moderate	2	5	1	8
High	0	0	0	0

Table 16 Continued

Variable	Current Size			Total
	Small	Average	Large	
<b>Clothing Categories</b>				
<b>Jumpsuits (n=50)</b>				
None	9	15	14	38
Low	0	5	4	9
Moderate	0	1	1	2
High	0	0	1	1
<b>Blouses (n=55)</b>				
None	0	6	7	13
Low	3	7	5	15
Moderate	5	8	6	19
High	2	3	3	8
<b>Sweaters (n=54)</b>				
None	4	14	7	25
Low	5	3	8	16
Moderate	1	5	3	9
High	0	1	3	4
<b>Exercisewear (n=52)</b>				
None	10	21	18	49
Low	0	0	1	1
Moderate	0	1	0	1
High	0	1	0	1
<b>Warm - ups (n=54)</b>				
None	6	11	7	24
low	3	7	5	15
Moderate	0	3	6	9
High	1	3	2	6
<b>Swimwear (n=50)</b>				
None	8	19	15	42
low	1	3	4	8
Moderate	0	0	0	0
High	0	0	0	0

Table 16 Continued

Variable	Current Size			Total
	Small	Average	Large	
Clothing Categories				
Party clothing (n=52)				
None	10	20	19	47
Low	0	0	3	3
Moderate	0	2	0	2
High	0	0	0	0
Sleepwear (n=54)				
None	1	16	15	39
Low	1	6	3	10
Moderate	1	1	2	4
High	0	1	0	1
Bras (n=53)				
None	0	5	4	9
Low	6	7	8	21
Moderate	3	8	7	18
High	1	3	1	5
Underpants (n=54)				
None	1	3	4	8
Low	4	5	5	14
Moderate	1	11	8	20
High	4	4	4	12
Slips (n=51)				
None	6	14	9	29
Low	3	7	8	18
Moderate	0	1	2	3
High	1	0	0	1
Hosiery (n=53)				
None	2	7	4	13
Low	4	5	9	18
Moderate	1	8	4	13
High	3	3	3	9

Table 17  
Kruskal-Wallis Analysis of Satisfaction with Selection of Maternity Clothing Category by Self-Reported Current Dress Size Category.

Variable	Current Size			Kruskal Wallis	p value
	Small Mean	Average Mean	Large Mean		
<b>Clothing Categories</b>					
Business suits	7.00	3.00	3.50	2.00	.3679
Dresses	4.17	4.32	5.05	2.46	.2924
Jumpers	4.00	4.70	4.33	1.40	.4973
Skirts	1.00	3.58	2.50	2.75	.2529
Slacks	4.20	4.17	4.50	.42	.8096
Shorts	4.80	4.00	4.80	1.24	.5367
Jumpsuits	0	4.44	4.67	.01	.9261
Blouses	5.00	4.60	4.64	.44	.8010
Sweaters	4.17	4.60	5.20	2.30	.3169
Exercisewear	5.50	5.00	5.08	.08	.9589
Warm - ups	6.00	2.60	3.50	2.42	.2981
Swimwear	0	5.33	3.00	.89	.3458
Party clothing	0	3.50	3.67	0	.9999
Sleepwear	3.00	4.40	6.00	5.18	.0749
Bras	4.90	4.29	4.12	2.72	.2567
Underpants	4.22	4.95	4.59	.87	.6474
Slips	3.50	4.22	4.80	1.22	.5437
Hosiery	3.62	3.88	4.31	.81	.6658

Table 18  
 Frequency of Respondents' Level of Satisfaction with Selection of Maternity Clothing by  
 Self-Reported Current Dress Size Category.

Variable	Current Size			Total
	Small	Average	Large	
<b>Clothing Categories</b>				
Business suits (n=5)				
Low	0	1	0	1
Moderate	0	0	2	2
High	1	1	0	2
Dresses (n=54)				
Low	0	3	0	3
Moderate	4	6	8	18
High	2	10	11	23
Jumpers (n=38)				
Low	0	2	2	4
Moderate	4	5	5	14
High	2	10	8	20
Skirts (n=15)				
Low	1	3	1	5
Moderate	0	6	1	7
High	0	3	0	3
Slacks (n=51)				
Low	2	5	3	10
Moderate	3	7	6	16
High	5	11	9	25
Shorts (n=11)				
Low	0	0	0	0
Moderate	0	0	0	0
High	3	5	3	11
Jumpsuits (n=18)				
Low	0	1	0	1
Moderate	0	4	6	10
High	0	4	3	7
Blouses (n=44)				
Low	0	3	1	4
Moderate	4	6	7	17
High	6	11	6	23
Sweaters (n=31)				
Low	0	3	0	3
Moderate	5	1	6	12
High	1	6	9	16

Table 18 Continued

Variable	Current Size			Total
	Small	Average	Large	
Warm-ups (n=31)				
Low	0	2	1	3
Moderate	1	3	4	8
High	3	9	8	20
Swimwear (n=10)				
Low	0	3	2	5
Moderate	0	2	0	2
High	1	0	2	3
Exercisewear (n=4)				
Low	0	0	0	0
Moderate	1	1	0	2
High	0	2	0	2
Party clothing (n=7)				
Low	0	2	1	3
Moderate	0	0	1	1
High	0	2	1	3
Sleepwear (n=17)				
Low	1	1	0	2
Moderate	1	5	1	7
High	0	4	4	8
Bras (n=43)				
Low	0	1	3	2
Moderate	4	10	8	22
High	6	6	5	17
Underpants (n=45)				
Low	2	2	2	6
Moderate	3	4	5	12
High	4	13	10	27
Slips (n=23)				
Low	1	3	0	4
Moderate	2	1	4	7
High	1	5	6	12
Hosiery (n=41)				
Low	2	5	3	10
Moderate	3	4	6	13
High	3	8	7	18

## Selected Relationships of Variables

Table 19 presents the Spearman's Rank Correlation Coefficient matrix for global self-worth and the 11 associated subscales. Significance at the .05 level was found between global self-worth and all the associated subscales. Parts of hypothesis 22 were rejected. This corresponds to results found by Messer and Harter (1988) and Liskey (1989). Significance was not found between athletic ability and the subscales job competence, adequate provider, nurturance, and morality. No significance was found between household management and the subscales job competence, and sense of humor.

Results of the Spearman's Rank Correlation Coefficient matrix for global self-worth, current body cathexis, and overall satisfaction are presented in Table 20. Significance at the .05 level was found between global self-worth and current body cathexis which corresponds with results found by Messer and Harter (1988), Liskey (1989), Baggs (1988), and Doss (1990). Hypothesis 23 concerning a relationship between global self-worth and current body cathexis was rejected; however, hypothesis 24 dealing with a relationship between global self-worth and satisfaction with available selection of maternity clothing and

Table 19  
Spearman's Rank Correlation Coefficient Matrix for Global Self-Worth and Associated Subscales by Self-Reported Current Dress Size of Respondents.

	Global Self-Worth	Sociability	Job Competence	Nuturance	Athletic Ability	Physical Appearance	Adequate Provider	Morality
Global Self-Worth								
Sociability	.6485****							
Job Competence	.4461****	.2011****						
Nuturance	.5340*	.4101****	.2062					
Athletic Ability	.2536****	.3542****	.0785*	.3576***				
Physical Appearance	.6705****	.4626**	.2550*	.3327****	.2967**			
Adequate Provider	.5167****	.3342****	.2594**	.4207****	.1794	.4790****		
Morality	.5492*	.4791**	.2848	.4211*	.1645	.3921*	.4427*	
Household Management	.2555***	.3385****	.1056**	.2285****	.2220*	.2565****	.2696****	.3625***
Intimate Relationships	.6316****	.5635****	.3313***	.5285****	.2884**	.4619****	.4623****	.3440****
Intelligence	.7044****	.5968****	.3894**	.4680****	.2905	.6196****	.4679****	.4476****
Sense of Humor	.5606	.4606	.3024	.3940	.1870	.3639****	.3974	.3656
		Household Management	Intimate Relationships	Intelligence				
Intimate Relationships	.2420**							
Intelligence	.2794	.5619****						
Sense of Humor	-.0382	.5719	.5262****					

\* Significant at .05 level.  
 \*\* Significant at .01 level.  
 \*\*\* Significant at .001 level.  
 \*\*\*\* Significant at .0001 level.

Table 20  
 Spearman's Rank Correlation Coefficient Matrix for Global Self-Worth,  
 Current Body Cathexis and Overall Satisfaction by Self-Reported Dress-Size  
 of Respondents.

	Global Self-Worth	Current Body Cathexis
Global Self-Worth		
Current Body Cathexis	.2965*	
Overall Satisfaction	.0569	.1219

\* Significant at the .05 level.

hypothesis 25 dealing with a relationship between current body cathexis and satisfaction with available selection of maternity clothing were accepted.

The Spearman's Rank Correlation Coefficient matrix for global self-worth, current body cathexis and overall satisfaction by change in self-reported dress-size of respondents is presented in Table 21. Significant correlations were found at the .05 level for current body cathexis and overall satisfaction of available selection by one dress size increase and three or more dress sizes increase. Hypotheses 26 and 27 were accepted, however hypothesis 28 was rejected.

Table 22 presents the distribution of respondent's self-reported increase in dress size category. Overall, the sample in general (45%) increased by one dress size. The average-(13%) and large-size (17%) groups both had several respondents who increased at least three dress sizes during pregnancy.

Table 21  
 Spearman's Rank Correlation Coefficient Matrix for Global Self-Worth,  
 Current Body Cathexis and Overall Satisfaction by Change in Dress Size  
 Category and by Self-Reported Dress - Size of Respondent's.

	Global Self-Worth	Current Body Cathexis
<u>No change</u>		
Global Self-Worth		
Current Body Cathexis	.2083	
Overall Satisfaction	.1226	.4978
<u>One dress size increase</u>		
Global Self-Worth		
Current Body Cathexis	.1577	
Overall Satisfaction	.0261	.4684
<u>Two dress sizes increase</u>		
Global Self-Worth		
Current Body Cathexis	.4481	
Overall Satisfaction	-.0454	-.1107
<u>Three or more dress sizes increase</u>		
Global Self-Worth		
Current Body Cathexis	.5855	
Overall Satisfaction	.5803	.7350

Table 22  
 Distribution Level of Respondents' Increase in Self-Reported Dress Size.

Variable	Size Breakdown			Total N=83 %
	Small n=17 %	Average n=37 %	Large n=29 %	
No change	35	13	21	20
Dress Size Increase				
One dress size	47	46	41	45
Two dress sizes	18	27	21	23
Three or more dress sizes	0	13	17	12

## CHAPTER VI

### SUMMARY AND CONCLUSIONS

Women tread a delicate balance between positive and negative feelings during pregnancy. Psychologically, they easily fluctuate from happiness and laughter to acute depression and physically, they often experience tiredness, nausea, dizziness, swollen feet and backaches, and an increase in body temperature. Fawcett and Larkin (1986) reasoned that women's sense of self-worth may be a key factor in how positively or negatively they will react during pregnancy.

Clothing plays an important role in establishing and maintaining self-worth. Maternity clothing is especially important to the pregnant woman in maintaining her self-worth and in preparing for the new role as a mother. The maternity wear apparel industry, like the majority of apparel manufacturers, tends to cater to the average-size customer. Very often it is difficult or impossible to acquire maternity clothing to fit the small- or the large-size maternity wear customer. Therefore, the purpose of this study was to determine the effects of self-reported dress size category on self-worth, body cathexis, and

satisfaction with available selection of maternity clothing for pregnant women.

The instrument for this study was derived from three previously validated scales. Self-worth was measured by the Messer and Harter (1986) Adult Self-Perception Profile. Body cathexis was studied using the Body Cathexis Questionnaire developed by Jourard and Secord (1955). Satisfaction with available selection of maternity wear was investigated using a modified version of the Maternity Clothing Survey developed by Greer (1988). Selected demographic questions were also included. In addition to descriptive statistics, nonparametric statistical procedures used to analyze the data were the Kruskal-Wallis One-Way Analysis of Variance, the Dunn multiple comparison procedure, and the Spearman's rank correlation coefficient.

The sample consisted of 83 pregnant women enrolled in prepared childbirth classes taught in Virginia's New River and Roanoke Valley areas. Participants were between the ages of 18 and 40 and over 70% of the respondents indicated some college or higher school education. Seventy-seven percent of the women were working full-time outside the home and the largest segment of the sample (27%) stated that

their total family annual income was between \$30,000 to \$39,999. Ninety-four percent of the sample were in the third trimester of pregnancy and 76% of the respondents indicated that this was their first pregnancy.

Analysis of data revealed no significant difference between small-, average-, and large-size females in global self-worth or the 11 subscales associated with global self-worth. No significant difference was found between the groups for current body cathexis or overall satisfaction with available selection of maternity clothing, however, significant difference at the .05 level was found between the groups for previous body cathexis. The Dunn multiple comparison test revealed that large-size women were had significantly lower prior body cathexis from the small- and average-size groups. A positive correlation was found between global self-worth and all Harter's subscales of global self-worth. Global self-worth was also found to be correlated to current body cathexis.

### Suggestions For Future Research

1. Further research is needed to determine if the small- and large-size women's clothing needs are being met in the maternity wear market.

2. This research could be replicated using a different geographic location area and source of sample other than prepared childbirth classes. Findings could be correlated with this study.

3. This study could be replicated concerning global self-worth including Harter's Importance Rating Scale (normally used for individual clinical studies) to determine what pregnant women importance ratings would be.

4. This research could be used as the basis for further research on the maternity wear customer as well as the basis for a functional apparel design maternity wear study with the present results representing parts of the first two steps of the functional design process.

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APPENDIX A  
Instrument

MATERNITY WEAR CUSTOMER SURVEY

Statements on the first three pages of the questionnaire concern what you are like as a person. This is not a test. There are no right or wrong answers. Since adults are very different from one another, each individual will be marking something different. Please read the entire sentence across. Decide which of the two parts is most like you. Then decide if this statement is REALLY TRUE for YOU or SORT of TRUE for YOU. Check only one of the four boxes for each statement.

The second part of the questionnaire concerns your opinions on satisfaction with your body, satisfaction with available selection of maternity clothing, as well as several demographic questions. Again, there are no right or wrong answers. Please circle the answer that best describes you or your opinion.

Thank you for your participation.

Janine W. Manley  
Graduate Student  
Department of Clothing and Textiles  
Virginia Tech  
Blacksburg, Virginia

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To participate in the drawing for the three \$10.00 gift certificates, please complete the form below. To insure your privacy, the researcher will separate the form from the questionnaire immediately upon receipt.

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GIFT CERTIFICATE FORM

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

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Questions 1 through 50 of the instrument concerned global self-worth and the 11 subscales associated with global self-worth (Messer & Harter, 1986). This portion of the instrument is copyrighted. Instructions given to respondents for completing this portion of the instrument and a sample question have been included.

The following statements allow people to describe themselves. There are no right or wrong answers. Please read the entire sentence across. First decide which one of the two parts of each statement best describes you; then go to that side of the statement and check whether that is just Sort Of True for you or Really True for you. Check ONE of the four boxes for each statement.

Really True for Me	Sort of True for Me		Sort of True for Me	Really True for Me			
1.	<input type="checkbox"/>	<input type="checkbox"/>	Some adults like the way they are leading their lives	BUT	Other adults don't like the way they are leading their lives	<input type="checkbox"/>	<input type="checkbox"/>

51. Below is a list of eight body aspects. To the left of the list, circle the number that indicates how you currently feel about each of these body aspects. To the right of the list, circle how you felt about these body aspects before pregnancy.

<u>Current Feeling</u>								<u>Feeling Before Pregnancy</u>							
Strongly Negative				Strongly Positive				Strongly Negative				Strongly Positive			
1	2	3	4	5	6	7	Weight	1	2	3	4	5	6	7	
1	2	3	4	5	6	7	Hips	1	2	3	4	5	6	7	
1	2	3	4	5	6	7	Thighs	1	2	3	4	5	6	7	
1	2	3	4	5	6	7	Calves	1	2	3	4	5	6	7	
1	2	3	4	5	6	7	Ankles	1	2	3	4	5	6	7	
1	2	3	4	5	6	7	Feet	1	2	3	4	5	6	7	
1	2	3	4	5	6	7	Bust	1	2	3	4	5	6	7	
1	2	3	4	5	6	7	Waist	1	2	3	4	5	6	7	

52. What percent of your maternity clothing was purchased for this pregnancy? \_\_\_\_\_

53. Overall, how satisfied were you with the selection of maternity apparel available to you for purchase for this pregnancy?

Strongly Dissatisfied                      Strongly Satisfied  
 1 2 3 4 5 6 7

54. Below is a list of purchase sources. On the first scale circle the number that best indicates the amount of maternity clothing you purchased from that source. On the second scale, circle the number that best indicates your level of satisfaction with available selection of maternity clothing at each source for this pregnancy.

	<u>Amount Purchased</u>							<u>Satisfaction With Selection</u>							Not Knowledgeable about Selection at This Source
	None					Many	Very Unsatisfied					Very Satisfied			
a. Department stores (for example: Sears, Penneys)	1	2	3	4	5	6	7	1	2	3	4	5	6	7	—
b. Maternity specialty stores (for example: Mothercare)	1	2	3	4	5	6	7	1	2	3	4	5	6	7	—
c. Large - size specialty stores (for example: Lane Bryant, Added Dimension)	1	2	3	4	5	6	7	1	2	3	4	5	6	7	—
d. Discount stores (for example: KMart, Roses, Walmart)	1	2	3	4	5	6	7	1	2	3	4	5	6	7	—
e. Mail - order companies (for example: Sears, Penneys, Spiegel)	1	2	3	4	5	6	7	1	2	3	4	5	6	7	—
f. Second - hand clothing sources (thrift shops, resale shops)	1	2	3	4	5	6	7	1	2	3	4	5	6	7	—

55. Below is a list of maternity clothing categories. On the first scale, circle the number that best indicates the amount you purchased from each category. On the second scale, circle the number that best indicates the level of satisfaction with selection in each maternity clothing category.

	<u>Amount Purchased</u>							<u>Satisfaction With Selection</u>							Not Knowledgeable about This Category
	None					Many	Very Unsatisfied					Very Satisfied			
a. Business suits	1	2	3	4	5	6	7	1	2	3	4	5	6	7	—
b. Dresses	1	2	3	4	5	6	7	1	2	3	4	5	6	7	—
c. Jumpers	1	2	3	4	5	6	7	1	2	3	4	5	6	7	—
d. Skirts	1	2	3	4	5	6	7	1	2	3	4	5	6	7	—
e. Slacks	1	2	3	4	5	6	7	1	2	3	4	5	6	7	—
f. Shorts	1	2	3	4	5	6	7	1	2	3	4	5	6	7	—
g. Jumpsuits	1	2	3	4	5	6	7	1	2	3	4	5	6	7	—
h. Blouses	1	2	3	4	5	6	7	1	2	3	4	5	6	7	—
i. Sweaters	1	2	3	4	5	6	7	1	2	3	4	5	6	7	—
j. Warm - ups	1	2	3	4	5	6	7	1	2	3	4	5	6	7	—
k. Swimwear	1	2	3	4	5	6	7	1	2	3	4	5	6	7	—
l. Exercisewear	1	2	3	4	5	6	7	1	2	3	4	5	6	7	—
m. Party clothing	1	2	3	4	5	6	7	1	2	3	4	5	6	7	—
n. Sleepwear	1	2	3	4	5	6	7	1	2	3	4	5	6	7	—
o. Bras	1	2	3	4	5	6	7	1	2	3	4	5	6	7	—
p. Underpants	1	2	3	4	5	6	7	1	2	3	4	5	6	7	—
q. Slips	1	2	3	4	5	6	7	1	2	3	4	5	6	7	—
r. Hosiery	1	2	3	4	5	6	7	1	2	3	4	5	6	7	—

56. Circle approximately how much you spent to purchase clothing in all the above categories for this pregnancy.

- a. Less than \$99
- b. \$100 to \$249
- c. \$250 to \$499
- d. \$500 to \$749
- e. \$750 to \$999
- f. \$1,000 to \$1,499
- g. \$1,500 or more

57. Indicate below how many of your maternity clothing items have come from alternative sources

	None							Many
a. Maternity clothing from previous pregnancy	1	2	3	4	5	6	7	
b. Borrowed maternity clothing	1	2	3	4	5	6	7	
c. Rented maternity clothing	1	2	3	4	5	6	7	
d. Maternity clothing sewn by self or seamstress	1	2	3	4	5	6	7	
e. Non-maternity clothing (oversized women's or men's clothing)	1	2	3	4	5	6	7	

58. What dress size did you most often purchase prior to pregnancy? (circle one)

Petite	2	4	6	8	10	12	14	16
Junior	3	5	7	9	11	13	15	
Misses	6	8	10	12	14	16	18	20
Half Size	10½	12½	14½	16½	18½	20½	22½	24½
Women's	18(38)	20(40)	22(42)	24(44)	26(46)	28(48)		

59. Please indicate the size of the last article of maternity clothing you purchased. (circle one)

Petite	2	4	6	8	10	12	14	16
Junior	3	5	7	9	11	13	15	
Misses	6	8	10	12	14	16	18	20
Half Size	10½	12½	14½	16½	18½	20½	22½	24½
Women's	18(38)	20(40)	22(42)	24(44)	26(46)	28(48)		

60. To what extent did the availability of appropriate sizes affect your overall satisfaction with maternity clothing

Not Affected							Affected
	1	2	3	4	5	6	7

61. Is this your first pregnancy?

No \_\_\_ Yes \_\_\_

62. At what stage are you in your pregnancy? (circle one)

- a. first trimester (1-3 months)
- b. second trimester (4-6 months)
- c. third trimester (7-9 months)

63. What is your present age? (circle one)

- a. Less than 18 years
- b. 18-20 years
- c. 21-25 years
- d. 26-30 years
- e. 31-35 years
- f. 36-40 years
- g. 40 or more years

64. What is the highest level of education that you have completed? (circle one)

- a. some high school
- b. completed high school
- c. completed trade school
- d. some college
- e. completed college
- f. some graduate study
- g. completed graduate school

65. Have you been employed outside the home at any time during this pregnancy? (circle one)

- a. employed full-time outside the home
- b. employed part-time outside the home
- c. not employed outside the home

66. Which of the following categories best describes your total family annual income? (circle one)

- a. Less than \$10,000
- b. \$10,000 to \$19,999
- c. \$20,000 to \$29,999
- d. \$30,000 to \$39,999
- e. \$40,000 to \$49,999
- f. \$50,000 or more

67. Please feel free to make any additional comments in the space below.

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## VITA

Janine W. Manley, daughter of Joe H. and Helen Whirley, was born on December 16, 1949. In 1968, she graduated from Coahoma High School in Texas. She worked as a secretary for 8 years in the Dallas/Fort Worth area. In 1976, she moved to Las Cruces, New Mexico working as a secretary for two years. She married Ronald W. Manley in 1980 and they have two daughters. She received an undergraduate degree, January 1984, in Home Economics Communication and in January 1985, received a master's degree in Home Economics from New Mexico State University. She continued her education in the doctoral program at Virginia Polytechnic Institute and State University. Throughout the first four years of study, she held a graduate assistantships in the areas of construction, design, and historic costume. She held an adjunct teaching position in the Department of Fashion at Radford University, Radford, Virginia during the 1989/90 academic year. During the 1990/91 academic year, she held a full-time teaching position in the areas of design and historic costume in the Department of Clothing and Textiles at the University of North Carolina at Greensboro.

Janine W. Manley