Phat or Fat

Black culture celebrates sisters' curves. And who doesn't love a teddy bear brother? But as research reinforces the link between obesity and disease risk, we ask: Is our "thickness" making us sick?

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It's a crisp Sunday afternoon, around the time Big Mama would throw down in the kitchen and fry everything but the Kool-Aid. However, today there are no fish 'n' grits in sight. I am dining at a quaint Mexican eatery in South Orange, New Jersey, with Tanisha Malone, 27, winner of Mo'Nique's *F.A.T. Chance*, a plus-size beauty pageant on the Oxygen Network hosted by the eponymous buxom comedienne. The plate of steamed shrimp fajitas with veggies that Malone is eating looks appetizing. Yet she sets down her fork, leaving a quarter of the meal untouched. "I was starving," she says.

In Newark, New Jersey, where she and I come from, starving calls for plate licking. I wait to see if she'll relaunch her utensil. But Malone doesn't budge when the waiter sweeps away the dish—pitas and peppers still stacked. Big Mama would've been insulted.

At five feet eight inches and 190 pounds, Malone, a size 16, doesn't consider herself fat. Nor is the forensic pathology assistant in denial about her size. She just looks at it differently from pageant producers—and most of the medical community. "I see myself as plump or thick," she beams, "fabulous and thick," explaining the acronym of the crown she wears—Miss F.A.T. Her confidence surpasses her hips. Like the average black person, Malone isn't the least bit interested in being as skinny as six o'clock—which allows more room for self-acceptance. But it may also prevent us from assessing ourselves honestly when we weigh too much for our heart and organs to function normally.

A License to Ill?

"Americans don't have a realistic picture of how big they really are," says nutritionist Rovenia Brock, PhD, author of Dr. Ro's *Ten Secrets to Livin' Healthy* (Bantam). A Yale University nursing school research paper reviewing 18 obesity studies found that Americans have skewed perspectives on fatness. Many of us picture an obese person stuck in the house, begging Montel for help. As long as we're not that big, we're not in danger, we think. Society promotes this belief, with manufacturers cutting clothes larger and widening office seats and middle-aged men now sporting oversize clothing previously worn by youth.

“If your body mass index [BMI] is 25 or more, you are overweight and at risk for obesity-related diseases,” says Andriette Ward, MD, a pediatric obesity specialist at Children’s Hospital Los Angeles. “If it is 30 or more, you are obese and at an even greater risk.” Our BMI measures how much muscle and fat we carry compared to our height. A healthy BMI lies between 18.5 and 24.9. Anything higher than that is “too much weight for your organs to function optimally,” adds Brock. Malone’s BMI is 28.9. (Find yours on the National Institutes of Health’s BMI calculator at www.nhlbisupport.com/bmi.)

Experts consider your BMI measurement a better predictor of disease risk than weight alone because it takes your height into consideration. For example, if you weigh 200 pounds, your BMI will differ depending upon whether you’re five-feet-five or six-feet-five. The BMI’s downside is that it doesn’t account for your ratio of muscle to fat. While the Centers for Disease Control and Prevention (CDC) states that a BMI between 25 and 29.9 is “less healthy for most people,” it adds that if your body is muscular and buff, such a BMI “may be acceptable.” Conversely, your BMI may read “healthy” though you have “ex--cess body fat and little muscle.” What’s more, many black women have denser bones than women of other races (the same is not true of black men). Still, any extra poundage we carry should be “big bones” and muscle, not fat.

Brock explains, “It’s just as possible to be fit at a size 14 as it is to be unfit at a size 4. So if your blood pressure, cholesterol and lipids are normal and you can run up a flight of stairs without getting winded, you are in good cardiovascular health.” She coins this physical state “healthy-curvy” for women or “lean-bulky” for men, which seems achievable—provided we don’t carry too much fat.

How much chub is too much? The American Council on Exercise con-siders a person fit if their body fat lies between 21% and 24% for women and 14% and 17% for men; acceptable if it’s between 25% and 31% for women and 18% to 25% for men; and obese if it’s more than 31% for women and 25% for men. (Several options are available to measure your body fat, including DEXA whole body scanning, hydrostatic weighing and calipers. Consult your doctor to see what’s best for you.) But here’s the hiccup: A lot of us don’t think we need to lose weight. Nonetheless, the government’s National Health and Nutrition Examination Survey, the most comprehensive study on the obesity epidemic, reports that roughly 78% of black women and 62% of black men surveyed are overweight; of those, nearly 50% of black women and 28% of black men are obese.

The Eye of the Beholder

The Yale report states that white women, “talk more frequently about health problems related to being overweight,” whereas black Americans don’t consider obesity a health risk. Instead, many sisters aspire to be “stacked,” and brothers want that NFL linebacker look. But “carrying more fat is a precursor for chronic illnesses, such as hypertension, heart disease and type 2 diabetes,” says Brock. African Americans suffer from all three disproportionately.

Some experts believe that blacks may not link their health problems with being overweight because the lifestyle that causes it has deep cultural roots. “Think of the movie *Soul Food*,” says Dr. Ward. “No one made the connection between Big Mama’s death due to diabetic complications

and the mac ’n’ cheese, candied yams, fried chicken and barbecued ribs she cooked and which probably played a role in killing her.” This lack of understanding of how weight relates to health puts many of us in harm’s way. Too many black men die young of obesity-related diseases, including crooners Gerald Levert, age 40 and Luther Vandross, age 54; baseball umpire Eric Gregg, aka the “Plump Ump,” 55; and “The Walrus of Love,” Barry White, 58. But we don’t have to be heavy, die from preventable diseases or set up our loved ones to do likewise.

However, we’re still stubborn about change. “Tell a sister she’s fat. Her defense is, ‘I’m big-boned, just like my mama and aunties.’ ” Brock says. “My husband calls his belly ‘a woman’s playground.’ But I tell him ‘I don’t want an amusement park!’ ” Dr. Ward confirms that a fuller frame doesn’t have to include an unhealthy diet and a sedentary lifestyle—it just usually does, which is why most medical professionals warn against it.

Dr. Ward says the fat around your hips and behind doesn’t increase your disease risk. Abdominal fat is what’s dangerous—for both women and men. “You want a pear shape—lean in the midsection—rather than an apple shape that’s round all over,” adds Brock. Women should try to keep their waistline below 35 inches; men, below 40, according to the National Institutes of Health. But Dr. Ward hopes to move away from the numbers game: “If we promote overall health, rather than a healthy weight, black people may be more likely to change.”

Pretty, Healthy and Thick

Depending on your genetic predisposition and other factors, even when health and fitness is your goal, you just may settle in on the plus side of the scale. But don’t fool yourself into thinking that you can’t do more to optimize your health.

“I have to work out to maintain my curves,” says Malone. “Or I’d look like a muffin top.” She wouldn’t mind losing ten or 15 pounds to feel more comfortable in her jeans, although she would have to lose 26 pounds just to reach a BMI of 24.9, the uppermost end of the recommended scale. That’s why Dr. Ward’s advice of not being a slave to the scale is sound. Malone agrees. “I want young girls to realize the biggest part of loving your body is taking care of it—making smart food choices, eating small portions, exercising daily,” she says. “Be plus-size—not lazy.”

When the waiter returns with a dessert menu, Malone signals that she’s not interested. Even when I leap for the flan and request extra whipped cream, she doesn’t waver. “I can have that too,” she says, “just not every day. I’m not in the mood, anyway.” If there were diet gods, they would have been smiling. When Malone leaves the restaurant, she’ll grab her dumbbells and head to the park for a half-hour power walk. No time for napping. The sister’s got health-related business to handle.

THICK OR SICK?

In addition to your body mass index, body fat percentage and waist size, these questions can help you gauge whether your thickness may eventually put you at risk of developing a weight-related disease.

- Is your BMI over 25? (Visit www.nhlbisupport.com/bmi.)
- Is your blood pressure above 130/80 (for African Americans) or 139/89 (for others)?
- Is your cholesterol over 200?
- Is your fasting blood sugar greater than 100 mg/dL?
- Do you get winded after running up a flight of stairs?
- Is bending over to tie your shoes uncomfortable?
- Do you regularly order takeout or eat fatty, fast or fried foods?
- Do you eat any foods that list “partially hydrogenated oil” (a way manufacturers disguise dangerous trans fats) in the top five ingredients?
- Do you regularly consume beverages sweetened with high fructose corn syrup (soda, fruit drinks, lemonade, teas, sports drinks, etc.)?

Chee Gates is a staff writer/editor at Fitness magazine.

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