Facial Attractiveness and Physical Health

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Previous research has documented that more facially attractive people are perceived by others to be physically healthier. Using self-reports, observer ratings, daily diary methodology, and psychophysiological assessments, this study provides limited empirical evidence that more facially attractive people ($N = 100$) may be physically healthier than unattractive people. Discussion suggests the value of an evolutionary psychological perspective for understanding the relationship between facial attractiveness and physical health. © 1999 Elsevier Science Inc.

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The relationship of facial attractiveness to physical health is an important issue from several theoretical perspectives. An evolutionary psychological perspective, for example, suggests that facial attractiveness may provide information about underlying health (Buss 1994; Gangestad 1993; Symons 1995). A social constructivist perspective, in contrast, suggests no necessary relationship between facial attractiveness and health. Instead, judgments of attractiveness reflect societal ideals, which in turn reflect fluctuating preferences of the mass media and fashion industries (Englis et al. 1994; Fallon 1990; Freedman 1984). The purpose of this study is to empirically assess whether facial attractiveness provides information about underlying health.

Previous research indicates that more facially attractive people are perceived to be healthier. Cunningham (1986) found that men judge women with more attractive faces as more fertile and as likely to experience fewer medical problems. Grammer

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and Thornhill (1994) documented that opposite-sex raters judge more facially attractive people to be healthier than less attractive people. Kalick et al. (1998) replicated these findings using both opposite-sex and same-sex raters. Singh (1993, 1995) found that not only are women with a lower waist-to-hip ratio (WHR) judged to be physically healthier, more fertile, and more attractive, but women with lower WHRs report fewer health problems and higher fertility.

A single study has investigated whether more facially attractive people in fact are physically healthier than less attractive people. Kalick et al. (1998) correlated adolescent facial attractiveness with health during adolescence, middle adulthood, and later adulthood. A health rating was recorded for each participant and for each time period by medical researchers on the basis of clinical examination and medical records. Health was rated on a five-point scale ranging from “no illness” to “severe illness.” Using this gross assessment of health, no relationship was found for men or women between adolescent facial attractiveness and health in adolescence, middle adulthood, or later adulthood. A goal of the present study is to replicate the research of Kalick et al. (1998) using more specific health data provided by participants as well as data on cardiovascular health secured from assessments of cardiovascular recovery time.

Like the study by Kalick et al. (1998), this study drew upon archival data collected from a group of intensively assessed participants. The fact that the data files on these participants contained their photographs provided the opportunity to obtain observer ratings of the participants on several dimensions, including facial attractiveness. The idea for this study came after the data were collected, so we had no input on what variables were assessed. We selected for analysis only those variables that directly index physical health. Previous reports present different analyses using these data. Shackelford and Larsen (1997), for example, reported analyses of the relationship of facial symmetry to health. The present research reports new analyses of the relationship of facial attractiveness to health. In these data, facial symmetry is not significantly correlated with facial attractiveness (Shackelford and Larsen 1997).

METHODS

Participants

Participants were 66 women and 34 men (mean age about 20 years; range 18 to 23 years) enrolled in a psychology research course at one of two universities in the midwestern United States. Participants received credit toward their grades based on participation in weekly class meetings, timely completion of homework assignments, and a final term paper.

Materials and Procedure

Daily physical symptom reports. Participants provided daily reports of physical symptomology. Participants were instructed to check which of seven symptoms were experienced for the relevant time period. These seven symptoms were headache, runny or stuffy nose, nausea or upset stomach, muscle soreness or cramps,
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