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MINDFUL NUTRITION COUNSELING

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When Eating Hurts

Peer Pressure Cooker

It's back to school and once again hallways are filled with the chatter and light-hearted banter of students catching up with one another after a long summer. The first few weeks of school are exciting and sometimes, a bit overwhelming. There is pressure to excel academically and this, coupled with changing hormones, can be stressful for your teen or middle schooler.

For some teens, there is anxiety over "fitting in" with their peers. Studies have found that the groups teens identify with can affect whether they smoke

cigarettes, drink alcohol, or take drugs. It now appears that this may be true when it comes to body image, eating behavior, and physical activity. *The National Longitudinal Study of Adolescent Health, or ADD Health*, is a nationally-representative study that was designed to examine how social groups (such as families, peers, schools, and communities) influence teens' health and risk behaviors.



Beginning in 1994, a random sample of 90,000 adolescents in 132 middle schools and high schools across the U.S. was studied. Within each school, girls with the same Body Mass Index (BMI), were found to share similar behaviors concerning diet and weight control. Females were less likely to control their weight in schools where the average BMI was high. Conversely, there were more average weight females who exhibited weight control behaviors in schools where the number of underweight girls was high. Lead study author Anna Mueller, at the University of Texas at Austin, says "What our findings showed was that girls were more aware of what others like them were doing". More recent phases of ADD Health are underway and original study participants are being re-interviewed to determine how their body image attitudes and perceptions have changed over time.

The media can have a powerful effect on one's self-image and is often to blame when a teen has a skewed perception of their body. However, peer groups can play a central role in a individual's view of themselves. A teen who is teased about their weight may restrict their food intake and lose too much weight, or overeat in order to cope with the added stress. People who are preoccupied with their weight may be at risk for eating disorders and other mental health issues such as depression and anxiety.

Don't panic if your teen or pre-teen thinks about her or his weight. However, if your child obsesses about food, their weight, and even exercise to the exclusion of other things, it may be a red flag. Review the information in the box to the right, which are warning signs of a possible eating disorder. Consider seeking help from a mental health professional and/or medical doctor if you have concerns that your child has developed an unhealthy relationship with food.



The following behaviors are red flags which may indicate that your child is suffering from disordered eating.

Has experienced recent, unexplained weight loss

Has a significant fear of gaining weight or of being overweight

Is engaging in new, strange food rituals

Is spending unusual amounts of time in the bathroom after eating meals

Has a distorted body image

Is preoccupied with the caloric value of food

Visits web sites which promote disordered eating behavior

Eats alone or in private

Is hoarding food

Has suddenly developed amenorrhea, or loss of menstrual period

Is delayed in their onset of puberty

Engages in compulsive exercise

Wears bulky clothes

Is withdrawn from family and friends



What Causes ED's?

Frustration, anger, and grief. These are a few of the emotions that you may be grappling with while your child withers away before your eyes. Shock may be replaced by fear as you see you daughter or son exercise relentlessly in their bedroom into the wee hours of the night. You are not alone as you try to make sense out of something that seems unreal. But for your child who is exhibiting these obsessive thoughts and ritualistic behaviors, it makes a lot of sense.



According to experts at The National Eating Disorders Association (NEDA), eating disorders are the culmination of long-standing behavioral, biological, emotional, psychological, interpersonal, and societal factors. Recent research indicates that some people are genetically more vulnerable to developing eating disorders. For example, some individuals have a sibling, or parent who has struggled with disordered eating, suggesting a possible genetic link. Neurochemicals such as serotonin, norepinehrine, and dopmaine influence eating behavior and are often abnormal in individuals who suffer from anorexia, bulimia, and binge-eating disorders.

Psychological and emotional issues may place an individual at risk for disordered eating. They may struggle with anger issues, impulsive behavior, and troubled relationships. Unrealistic portrayals of beauty in the media, and peer pressure to be thin can significantly impact one's self-worth, influencing the way they perceive their physical self, and their relationship with food.

Every person who struggles with an eating disorder has unique factors that contribute to it. The following are common factors that place an individual at risk for disordered eating:

- Low self-worth
- Feelings of inadequacy or lack of control in life
- Depression, anxiety, anger, or loneliness
- Troubled personal relationships
- Difficulty expressing emotions and feelings
- History of being teased or bullied because of size or weight
- History of physical and/or sexual abuse
- Narrow definitions of beauty that include only women and men of specific body weights and shapes
- Cultural norms that value a person's physical appearance
- Possible biochemical or biological factors which influence appetite, satiety, and digestion
- Genetic factors that often run in families and increase the likelihood of an eating disorder

Equal Opportunity Illness

Eating disordered behavior does not discriminate between females and males. Many people assume that eating disorders affect only females, however, recent research suggests that five to 15 percent of adolescent teens who meet the criteria for disordered eating are male; upwards of 35% exhibit binge eating disorder. Eating disorders historically have been viewed as an issue affecting women. Physicians are less likely to suspect an eating disorder in a male patient with a low BMI. An adolescent male may say that they are eating more healthfully by cutting out fats and sugars, and hitting the gym everyday. On the surface this may be seen as okay until the individual becomes more rigid in their behavior, or ups the ante by eating only fruits, vegetables, and protein powder shakes, for example.



Conversely, overweight men who are binge eaters or compulsive overeaters are more readily accepted by society than overweight women, and therefore, are often undiagnosed. According to Arnold Andersen, author of the book Males with Eating Disorders, women are usually near their ideal healthy weight before the onset of their disordered eating behaviors, but they typically "feel fat". Men are more often overweight before the development of the disorder.

Despite the differences between the sexes as to how they initially present clinically, their treatment needs are the same. Unfortunately males are less apt to seek help and, therefore, do not get adequate treatment. Compounding this problem are the multitude of athletic activities that necessitate a specific weight range such as track, wrestling, gymnastics, and swimming. Coaches need to be keenly aware of this and prohibit excessive weight control or bodybuilding practices by their young male athletes.

For more information on this topic, click on the link in the box below; *The National Association of Males with Eating Disorders, Inc., or www.namedinc.org.*

Helpful Resources for Parents

<http://www.nationaleatingdisorders.org>

<http://www.allianceforeatingdisorders.com>

<http://www.edreferral.com>

<http://www.namedinc.org>

<http://www.anad.org>