

Body Image, Eating Disorders, and the Relationship to Adolescent Media Use

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KEYWORDS

• Anorexia • Bulimia • Internet • Television • Weight concerns • Body dissatisfaction

KEY POINTS

- Historically and currently, media messages around body shape and size emphasize the importance of being below-average weight for women and hypermuscular for men.
- The media messages around physical appearance are not realistic for most and lead to body dissatisfaction for adolescents.
- Interventions designed to mitigate the influence of negative media messages on adolescents' body image are presented; however, most have shown limited success.

Although in flux throughout life, an individual's body image begins to solidify in early adolescence.¹ The construct of body image is multidimensional, and includes cognitive, affective, evaluative, and behavioral aspects of physical appearance.^{1,2} Evaluative or attitudinal body image changes with life experiences as individuals assimilate sociocultural body ideals and determines their own physical self-satisfaction.^{1,2}

The development of body image is of particular interest, because extreme physical and cognitive changes occur during this period. During puberty, children gain 50% of their adult body weight, and girls experience an increase in body fat and widening of the hips.^{3,4} With Western culture favoring a thin physique, these changes can pull girls farther from the ideal body shape. Puberty does the opposite for boys; adolescent boys experience changes that bring them closer to the cultural ideal of a large, muscular man.^{4,5} These gender differences arise at 13 to 15 years of age, with girls experiencing increased body dissatisfaction and boys experiencing decreased body dissatisfaction.⁶

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Cognitively, adolescence is also accompanied by increased awareness of societal norms and values surrounding physical appearance and relationships.^{3,7,8} Concurrently, the circulation of gonadal hormones can increase sexual interest and place further importance on body image.³ Adolescent dating behaviors and notions of physical desirability are heavily guided by peers, families, and media.^{1,4,8} Adolescent girls often derive self-esteem from their physical appearance. In this context, thinness is important. Adolescent girls associate thinness with beauty, popularity, and successful dating relationships.^{7,8} Adolescent boys also rate female thinness as an important factor in determining attractiveness and dateability. This scrutiny often leads to feelings of inadequacy in body shape, and increased interaction between genders has been positively associated with body dissatisfaction.⁸

Based on a biopsychosocial model, body dissatisfaction, or negative evaluation of one's own body compared with an ideal body, is modulated by multiple factors.^{3,7} From a biologic standpoint, increased body mass index has been correlated with increased body dissatisfaction, although this varies by gender.^{1,9} Race may also play a role, with studies showing that Caucasian adolescents report more body dissatisfaction than African American adolescents.³ Psychological factors include low self-esteem, which is one of the strongest risk factors for body dissatisfaction. Adolescents who create strict evaluative criteria for success and strive for perfection may never realize their body ideal, and may remain perpetually dissatisfied with their bodies.⁹

Sociocultural factors related to body image can promote unrealistic standards of physical appearance, which are unattainable for most adolescents.⁹ Socially, peers are an important influence. Weight-related teasing and encouragement to lose weight may contribute to body dissatisfaction.^{9,10} Additionally, girls who compare their bodies with those of peers are more likely to report negative body image.¹⁰ Parents, too, have a strong influence. Negative body image is correlated to parental complaints about their own weight and mothers' comments about their daughters' weights.¹⁰ In girls, a drive for thinness, or the willingness to alter one's body to meet the social ideal of physical attractiveness, was correlated with parental encouragement to lose weight and the mothers' dieting behaviors.

Most adolescents who develop body dissatisfaction do not experience clinical manifestations, but, in some, eating disorders may develop.^{3,11} Aspects of body image, such as low self-esteem and self-oriented perfectionism, lead adolescents to pursue unattainable physical appearances and have been suggested as prerequisites for the development of eating disorders.^{7,12} Some adolescents develop dichotomous thinking patterns that can lead to eating disorders. Individuals with this type of thinking believe that higher-order goals, such as happiness, are unattainable without first reaching lower-order goals, such as losing weight. This type of thinking places increased emphasis on the relentless pursuit of unrealistic body ideals in an effort to achieve happiness and wellness.¹²

Using *Diagnostic and Statistical Manual of Mental Disorders* (Fourth Edition) (DSM-IV) criteria, the lifetime prevalence estimates of anorexia nervosa, bulimia nervosa, and binge eating disorder in women in Europe and the United States are 0.9%, 1.5%, and 3.5%, respectively; men in the same study had prevalence estimates of 0.3%, 0.5%, and 3.5%.¹³ In Australia, cross-sectional surveys have shown that the prevalence of disordered eating behaviors, such as bingeing, purging, and strict dieting, more than doubled between 1995 and 2005; this increase was attributed to increased public preoccupation with weight.¹⁴ Prevalence figures, however, are difficult to compare because they vary greatly among countries and studies because of sociocultural differences in baseline values and variations in study methods.¹⁵ For example, the

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