

Stigma, obesity and adolescent risk behaviors: current research and future directions

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Adolescents are particularly vulnerable to risk behaviors as, in this life stage, they are experiencing intense physical, psychological and social changes. Adolescents who are overweight/obese, but particularly those who perceive themselves as such, are more likely to engage in risk behaviors than those who are, or perceive, themselves of normal-weight. Weight stigma and discrimination may contribute to this association as they reinforce poor body image and create intense stress. Stress is associated with poor emotion regulation, more impulsive, contextually-determined, and less rational decision-making, leading to greater engagement in risk behaviors. However, pathways from weight stigma/discrimination to risk behavior may be moderated by adolescents' social networks. This review provides a conceptual model and empirical evidence to illustrate the proposed pathways from weight stigma and discrimination to risk behaviors. Public health implications and future research directions are also discussed.

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Current Opinion in Psychology 2015, 5:56–66

This review comes from a themed issue on **Health behavior**

Edited by **Joseph W Ditre** and **Stephen A Maisto**

For a complete overview see the [Issue](#) and the [Editorial](#)

Available online 23rd March 2015

<http://dx.doi.org/10.1016/j.copsyc.2015.03.021>

2352-250X/Published by Elsevier Ltd.

Introduction

Overweight prevalence remains high among adolescents, with approximately one-third of United States (US) adolescents classified as overweight or obese [1]. Also prevalent are perceptions of being overweight and poor body image. Of particular concern are the associations of overweight/obesity and perceptions of overweight/obesity with health risk behaviors.

Experimentation with risk behaviors is common during adolescence, as young people's independence from parents, peer modeling, and access to potentially harmful

substances increase. Engaging in health risk behaviors may be considered normative and might serve a developmental purpose, such as rebellion against authority and identification with the youth subculture [2–4]. Health-risk behaviors may also help adolescents cope with stressful life events [5].

Adolescents who are overweight/obese and those who perceive themselves as such are particularly vulnerable to risk behaviors and are more likely to demonstrate maladaptive coping. Given the increased stigmatization of overweight/obesity in the last few decades, perceptions of being overweight may be related to more psychological distress and risk behaviors than perceptions of being about the right weight [6,7,8*,9].

This paper presents a conceptual framework that connects weight stigma and discrimination to risk behaviors. Theoretical perspectives and empirical evidence, focusing mainly on the past two years, is also presented in support of the proposed pathways. Finally, implications and future directions will be discussed.

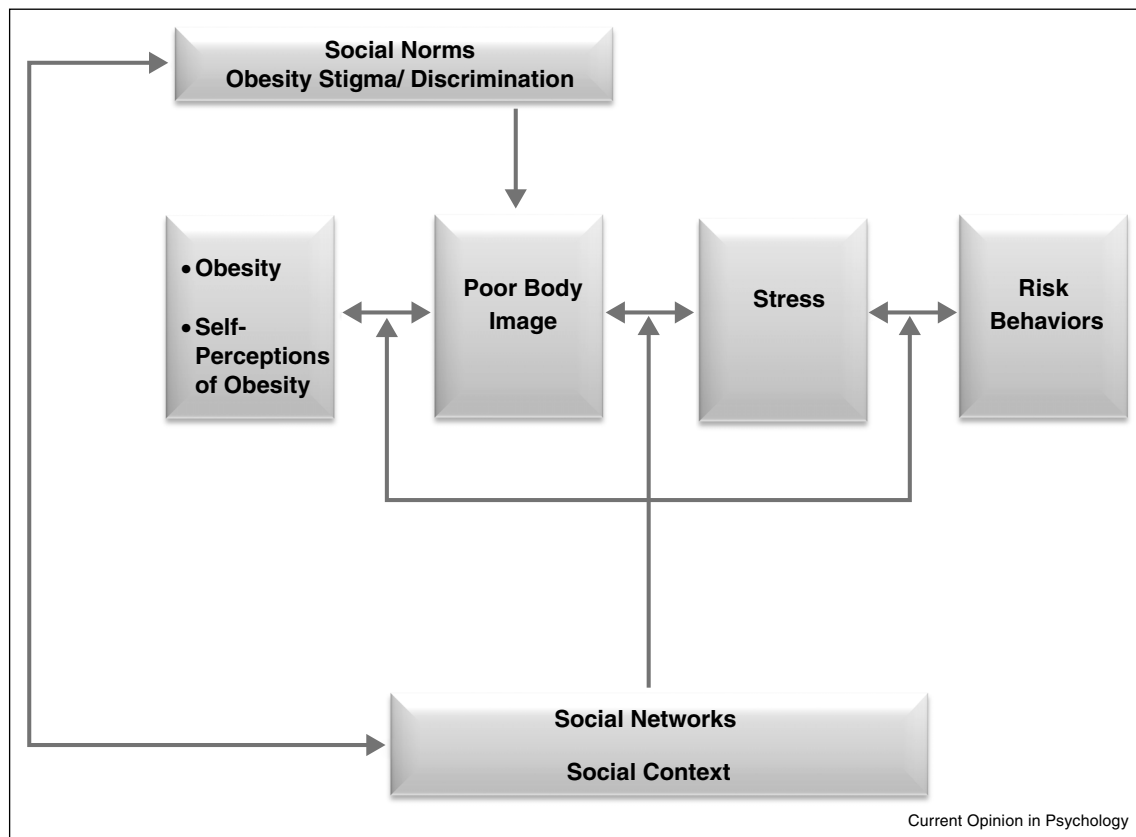
Pathways from obesity stigma to stress

Drawing on theories from social psychology, adolescent development, and behavioral neurosciences, a multilevel framework is proposed to illustrate the relationships between weight stigma/discrimination, overweight, self-perceptions of overweight, and risk behaviors. The conceptualization suggests that weight-related social norms, namely weight stigma and discrimination, affect risk behaviors through their influence on body image and stress. However, these associations may be moderated by adolescents' social network and social context (Figure 1). Evidence for these pathways is presented in the following paragraphs and pertinent studies are summarized in Table 1.

Weight stigma is defined as the disapproval of individuals perceived to be overweight or obese. Discrimination refers to negative interactions with people who are overweight/obese [10]. Healthy People 2020 recognized discrimination as a social determinant of health that can have adverse consequences on mental, physical and social health [11].

Weight stigma and discrimination are highly prevalent among youth, with often deleterious consequences on adolescents' well-being [12**]. Compared to their normal-weight peers, youth who are overweight/obese are more

Figure 1



Conceptual framework for the relationships of weight stigma, overweight/obesity, perceptions of weight status and risk behaviors.

likely to experience impaired peer relationships, stigma, and weight bias [8[•],12^{••},13,14]. It has been reported that the rates of weight discrimination in American society are close to or sometimes higher than the reported rates of racial discrimination, particularly among women [15]. Girls who are overweight/obese are more subject to weight discrimination than overweight/obese boys, and girls are more likely than boys to discriminate against overweight/obese peers [16].

Self-perceptions of overweight (whether accurate or not) may be stronger stressors and predictors of maladaptive coping than actual weight. Agnew's General Strain Theory (GST) [17] posits that perceptions may be a stronger predictor of stress than objective assessments and are more strongly related to deviant outcomes because they are more likely to produce stress. In addition, empirical evidence has demonstrated that self-perceptions of overweight are more strongly associated with poor health-related quality of life [8[•]], dating violence victimization [6] and risk behaviors [9,18^{••}]. Further, while the association of overweight/obesity with risk behaviors is inconsistent across studies, that of perceptions of overweight/obesity with risk behaviors is more universal, suggesting

that weight perceptions may be more accurate predictors of adverse behavioral outcomes than weight status [9,18^{••},19^{••},20–22].

Weight stigma/discrimination and perceptions of overweight/obesity can contribute to obesity as evidenced in recent research. Weight stigma may trigger an increased production of the stress hormone cortisol which promotes fat storage and increased eating, which, in turn, stimulates weight gain. Additional weight exposes individuals to greater experiences of weight stigma, prompting the production of cortisol and setting the cycle in motion again. Further, because of weight stigma, adolescents who are overweight/obese or perceive themselves as such are less likely to engage in physical activity and more likely to be sedentary, thereby increasing their likelihood of becoming overweight/obese [10,19^{••},23[•]].

Given the extent of negative stereotypes and discrimination associated with obesity, adolescents who are overweight/obese or who perceive themselves as such may internalize weight-based stigma and suffer from poor body image [24]. Social comparison theory posits that individuals compare themselves to others to establish

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