

Eating Disorders and Body-Image Concerns

Carole W. Sebenick, Ph.D. (2002)

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What is Normal? What is Problematic?

We live in a society of contradictions about eating and body image: while we're told that "good" eating takes place at "all-you-can-eat" buffets and restaurants that "super-size" portions, our value as a person is often measured against standards of weight and body-fat levels that are unrealistically low. For many individuals, problems with body image (self-concept based on physical appearance) begin early in adolescence; this is a time when the body experiences changes in shape, weight, metabolism, and function (e.g., sexual development) and the brain experiences a growth spurt which is associated with increased social awareness and emotional development. Dieting sets the stage for the development of eating disorders, and it is supported by a marketing and product industry that brings in millions of dollars a year.

Conservative estimates indicate that 5 to 10% of all teenage girls and women suffer from diagnosable eating disorders such as anorexia nervosa (which involves self-starvation), bulimia nervosa (which involves bingeing and purging), and binge eating disorder (which involves compulsive overeating). However, many others—including boys and men—go undiagnosed or experience problems deemed "sub-clinical" but nonetheless contribute to unhealthy and unhappy living. With almost 50% of American women and 25% of American men on diets, it can be hard to tell what's normal and what's cause for concern. Consider these distinctions:

Normal:

- Desire to improve physical appearance, health, and wellness
- Excitement about a new fitness or healthy-eating plan
- Appreciation of oneself, including appearance and social attractiveness
- Pursuit of a challenging physical training program that incorporates good nutrition, sleep, and self-care

Problematic:

- Focus only on weight loss or restrictive dieting; self-worth based on body image
- Berating or punishing oneself for eating habits or physical appearance
- Excessive exercise, purging, or restricting after eating
- Working out to lose weight regardless of health or nutritional needs; rigid approach to a diet/exercise routine

Why Be Concerned?

While some individuals may experiment with disordered eating behaviors and experience few negative consequences, prolonged restricting (dieting/starving), purging (vomiting, using laxatives and/or diuretics), and/or excessive exercising can lead to nutritional, medical, psychological, academic, and athletic impairment. These problems may lead to disruption in the body's ability to nourish itself, problems with brain development, heart failure, tooth decay, gastrointestinal problems, ruptures in the esophagus, kidney or liver failure, skin conditions, osteoporosis, irregular menstruation, depression, anxiety, sleep problems, withdrawal in social and academic situations, memory and concentration problems, inability to achieve goals in sports, sports injuries, and other problems.

What To Do?

There is overwhelming evidence that treatment by professionals with the involvement of supportive family and friends can prevent or minimize problems in the early stages of disordered eating/body image and CURE existing problems. Successful treatment requires psychological, medical, and nutritional intervention and commitment of the individuals and his/her support network to change in how they relate to each other, deal with emotions, and approach issues of food and body ideals.