Eating disorders in children

Health & Medicine, Disease



When the topic of body image andeating disordersis brought to a person's attention, more times than not the idea of a self-conscious, thin adolescent girl comes to mind. However, reports have shown that children are exhibiting signs of lowered impressions of their own body and the presence of eating disorders are increasing at a younger age (Kedesdy, 2007). Very little is known about the commonness of eating disorders in pre-pubertal girls and boys. However, eating disorder specialists and programs in the United States are reporting an increase in young children who need help with related eating problems.

According to the text book "Exploring Life Development", in their attempt to reach " perfect" slimness, anoerexics lose between 25 and 50 percent of their body weight. (Katzman, 2005). The problem with body dissatisfaction is causing an increase in disordered eating and weight loss in young children. " Recent studies have shown that 42 % of first-, second- and third-grade girls want to be thinner; that 40 % of almost 500 fourth-graders surveyed said they diet "very often" or "sometimes"; and that 46 percent of 9-year-olds and 81 percent of 10-year-olds admit to dieting, binge eating or fear of getting fat" (Equit, M. Palmke, M., Becker, N., Moritz, A., Becker, S., & Gontard, A., 2013). This essay will explore the development of eating disorders in children. It will show that these disorders are closely connected to a combination of physiological changes, environmental, and social factors. There are two types of eating disorders which are noted as being used to controlfoodintake and result in extreme weight loss, Anorexia Nervosa and Bulimia. Anorexia is a condition in which a child refuses to eat adequate calories out of an intense and irrational fear of becoming fat.

Bulimia is a condition in which a child binge eats and then purges the food by vomiting or using laxatives to prevent weight gain. Diagnosing a child with an eating disorder is difficult. It is hard for specialists and doctors to diagnosis school aged children for many reasons. The first reason is the frequent growth spurts in both height and weight that pre-pubertal children exhibit during this time in their life. Therefore, it is hard to measure an expected weight for a child at this age because all children are different. Children who do not gain weight around this age, but do grow in height are not always target for an eating disorder. This is the age which children are very active and participate in sports which may be the reason why they do not gain weight (Kedesy, 2007). In addition to the problems with the diagnosing children, specialists and physicians are not adequately trained to look for eating disorders in children. Problems with eating focus on picky eaters and issues of slow weight gain based on the stage of development for younger children. Physicians seldom consider that a child who is not eating may be linked to a problem with body dissatisfaction.

It is more common to associate eating problems with the notion that the child is a picky eater rather than with them having an eating disorder. Children raised in a dysfunctionalfamilyare at higher risk for developing an eating disorder. A family life where there is physical or sexual abuse may result in a child turning to an eating disorder to gain a sense of control. Eating disorders are a child's remedy. They help them deal with emotions and are especially prevalent in children who were raised in a home that did not allow feelings to be expressed.

Research also shows that children are at a high risk for developing an eating disorder if their parents are preoccupied with appearance and weight. (Equit, M., Palmke, M., Becker, N., Moritz, A., Becker, S., & Gontard, A., 2013). If parents (or siblings) are constantly dieting and expressing dislike towards their own bodies, the child will receive the message that appearance is the most important thing to be concerned about. Society and the media also sends the message that being thin is the most important and necessary thing there is. Media is many things; media iseducation, knowledge, news, culture, corruption.

This has been used as a form of pursing or influencing young children into believing that what they see is real. Commercials are used to tell children what to buy or what is "in". There are several messages that that the media sends out to young children, some of them beneficial and some fraudulent. Women in particular have been portrayed to be flawless and tremendously thin, and if you are not then you must become flawless and thin. The textbook " Exploring Lifep Development" mentions that this societal image of "thin is beautiful" contributes to the poor body image of many girls, specially early-maturing girls. (Tyrka, Graber, & Brooks-Gunn, 2000). Media messages have a great effect on young children that want to be liked and sadly enough they think that media is what matters. Some of these messages have resulted in young girls and boys going to the lengths of eating disorders to look like some of the messages they receive. Some children are more vulnerable to these messages than others. Children who are insecure about themselves or eager to please others are most likely to fall in to this horrible craze of being "thin and beautiful".

Children are bombarded with images and messages that reinforce the idea that thin is happy and successful. I believeit's important everyone, especially parents, are aware of these eating disorders. Most importantly, set an example for their children. Children learn by what they observe. If they are observing a healthyenvironmentwhich is not focused on a negative body image with an emphasis on dieting, then they will be likely to follow the model set in place for them. An eating disorder is a very serious problem and needs to be treated as early as possible. It is important, as mentioned earlier to have treatment which includes the family.

This is because the child's eating disorder may be based on a problem which is deep seeded with in the family dynamics and also because of the child's age. It is the initial approach to any problem with body image or eating disorder which is crucial for a person to recover and create a positive relationship with themselves and with food. Reports have also shown that 80% of girls in grades 3 - 6 have bad feelings about their bodies (Kedesdy, 2007). This issue of body dissatisfaction diverts the young child's attention away from school work and from social interactions with peers.

Preteen boys also worry about how their build compares with others. They are focused on sports and with the muscular men they see on television and have been conditioned to believe that muscles are more important than what is on the inside. The relevance of my findings to modern society is that there are many extreme pressures existing in the world we live in, which directly affect a large number of the population to the point of extremity. In an age of hightechnology, rapid development, and intense social pressure, the pressure to be the best of the best prevails.

Many people succumb to the pressure in a variety of ways, some beneficial, and some detrimental. Eating disorders such as Anorexia Nervosa and Bulimia in part result from an intense pressure to achieve the perfect ideal body weight and physical appearance. Emphasis on being perfect begins early inchildhoodand continues to grow with age, sometimes so much that apersonalitytakes on a perfectionistic drive affecting every aspect of daily life. Perfectionism is a common individualized personality trait which in part stems from this ardent cultural pressure.