

# Teens and anorexia nervosa theory



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Anorexia Nervosa is an eating disorder that causes a person to obsess about their weight and the food they eat (MFMER. 2008, Para. 1). Anyone can have the disease, but women are particularly susceptible. People who have this condition will view themselves as fat when they look in the mirror although they are in reality dangerously thin and far below the normal weight for their body's height and age (Lofshult, 2006). They attempt to lose weight by starving themselves and often by obsessive and compulsive exercise. This condition can affect people of all ages, yet teens in America are greatly affected by the disease because they are at a vulnerable development stage and extremely subject to body image issues. (MFMER, 2008).

Anorexia Nervosa is at its core an issue with self worth and not really about food at all. When teens are struggling with emotional self esteem issues, they will often try to cope with these feelings through the unhealthy practice of losing weight. It is believed that if they are thinner they will be more accepted by society. Anorexia Nervosa, also known as Anorexia, is a disease that causes them to equate self worth with being thin (MFMER, 2010) It can have serious complications on the body and be life threatening if not treated properly. During the early development years of adolescence, the body requires essential nutrients for growth, making the disease especially harmful on the bodies of teens. If not handled appropriately at an early stage, irreversible damage can be done to the body (Lofshult, 2006). This disease is always difficult to overcome, but with early diagnosis and proper treatment, serious complications can be avoided and even reversed. (MFMER, 2008).

## **Two theories that can be used to describe and explain Anorexia in teens**

### **Erikson's Psychosocial Theory**

Erickson believed that people go through stages of development from birth to death. There are eight stages of human development in Erikson's Psychosocial Theory. These developmental stages include tasks that result from both biological forces and age related social or cultural expectations (Ashford, J. B. & LeCroy, C. W. 2010). Erikson's Psychosocial Theory can be used to describe and explain Anorexia in teens. Teenagers are very much aware of their bodies. According to Erickson teens are concerned with the image they portray to others. During young adulthood which is the fifth stage in Erikson's Theory, the identity crisis that teens face is Identity vs. Identity Confusion.

### **Bandura's Social Learning Theory**

Bandura's Social Learning Theory can help explain how Anorexia Nervosa begins. Bandura believed people could influence their environment through conscious cognitive learning. This theory contends that people learn through observations taking place around them. People observe behavior of others around them, known as models. Even if there is no reinforcement of the modeling behavior a person may imitate the behavior observed (Ashford & LeCroy, 2010). This process requires indirect learning cognition of their environment. It is cognitive because role models must be observed and then information must be processed and stored in their memory to imitate the behavior (Cherry, 2013). Models are the key in the progression of personality development because of the observational learning principle. The Social

Learning Theory combines the cognitive processes with learning principles. It ascertains that people learn when watching others, even though there may be no direct involvement (Ashford & LeCroy, 2010).

## **Contrast and compare the principal concepts as applied to anorexia in teens**

According to Erikson's theory, if a teenager is unable to make deliberate decisions they may experience role confusion, which may manifest itself in a number of ways. In the case of eating disorders, role confusion often manifests itself in what Erikson called a 'moratorium' in which teenagers withdraws from adult responsibilities. If teens successfully work through earlier conflicts of childhood such as trusting others and believing in themselves, this moratorium may simply pass. When a teen has an eating disorder their earlier conflicts may not have been worked through, the moratorium stage may keep the teen stuck in childhood. Having an illness such as an eating disorder is a way to extend childhood and to ensure that the child may remain dependent on the parents without having to face the challenges of adult responsibilities.

A major component in Bandura's Social Learning Theory is self-efficacy (Ashford & LeCroy, 2010). This refers to a person's belief that they are able to achieve specific behaviors. When a person has confidence in their ability to achieve a goal it is more likely that they will not give up easily and that they will be willing to work harder to succeed (Cherry, 2013). This is helpful in understanding how the mind works when a person is suffering with Anorexia. Research has shown that the media plays a significant role in the way teens view body image. (Harrison, 2001). Also if a teen believes they are

fat, they will see themselves as fat when they look in the mirror, even if they are terribly thin (MFMER, 2010).

In comparison, Erikson's theory is inherently dependent upon the childhood developmental stages and Bandura's theory hypothesizes that changes can be made in the adult stage through confidence building strategies without accessing childhood experiences. Bandura's modeling theory can be used to reshape body image ideals with current effective role models. Erikson theory will need intensive counseling to come to terms with childhood trauma for recovery to be effective (Bandura, Thoresen, & Praeger, 2007).

### **Compare and contrast the strengths and weaknesses to explain anorexia in teens**

The strength of Erikson's Theory is that if teens successfully work through earlier conflicts of childhood such as trusting others and believing in themselves, this moratorium may simply pass. Teenagers have to find a balance between developing a unique, individual identity while still being accepted and fitting in. The weakness to this is that a teen has an eating disorder their earlier conflicts may not have been worked through, the moratorium stage may keep the teen stuck in childhood. For girls, even though it's completely normal (and necessary) to gain some additional body fat during puberty, some respond to this change by becoming very fearful of their new weight and feel compelled to get rid of it any way they can.

Teenagers are overloaded by images of thin celebrities. When you combine the pressure to be like these role models with a changing body, it's not hard to see why some teens develop a distorted body image. Teenage that

struggling with an eating disorder, are full of confusion, self-doubt and the searching for their identity.

The strength of Bandura's Theory in explaining Anorexia in teens, is how young girls are greatly affected by peer pressure they experience during the teen years (Harrison, 2001). Most women with Anorexia began to develop the disease in their teens, when peer pressure was at its height. However, it has been diagnosed in children as young as young as five years old and in women as old as 90. The American Dietetic Association (ADA) estimates that almost one percent of all female teenagers between the ages of twelve and eighteen have Anorexia Nervosa. It has also been determined that at least thirty percent of all adolescent girls engage in some form of unhealthy form of dieting. Researchers have concluded that teens who diet on a regular basis have a greater potential for developing this disease later in life than those who do not diet at all. For those that diet a severe level, they were eighteen percent more likely to develop Anorexia (Lofshult, 2006). It is important that we educate young girls to the possible dangers of excessive dieting (Harrison, 2001). As social workers it is necessary that we become aware of the severe consequences of early dieting and seek to help young people and their parents to understand that dieting can lead to a much higher risk of developing an eating disorder like Anorexia. Education of the disease is needed to change the culture that is promoted in the media today (Lofshult, 2006).

## **Compare and contrast the theories compatibility with social work values and ethics to describe anorexia in teens and its commitment to economic and social justice**

Erikson's Psychoanalytical theory forms an important part of social work, as it helps practitioners understand the inner mental universe of affected individuals and helps them come up with effective therapeutic techniques. Today, many modern approaches like crisis intervention and cognitive-behavioral theories have evolved out of early psychodynamic explorations, which help people through individual counseling and rehabilitation methods. According to Erikson' the period between school entry and puberty becomes a period of learning a mastering the more basic skills needed in society. Teenagers suffer from Anorexia because of the desire to be thin. However there is absolutely no doubt that the body image obsession is a major causal factor in the high incidence of bulimia in Western society.

From a social work perspective the existing conditions should not always be perceived as the fault of the individual, based on his or her bad choices. Addressing social justice and encouraging social change is so important to the field of social work that the preamble to the National Association of Social Workers Code of Ethics clearly states that “ social workers are sensitive to cultural and ethnic diversity and strive to end discrimination, oppression, poverty, and other forms of social injustice.” (Delegate Assembly, Approved 1996; Revised 2008, p. 2) Many girls that begin a bulimic lifestyle tend to start on or before puberty – a critical stage of development where most of us begin to form lifelong beliefs about ourselves. As social workers must help clients understanding oneself strength, help them define who they are.

One of Bandura's most famous experiments which exemplified the social theory, through observational learning was the Bobo doll experiment (Ashford & LeCroy, 2010) Bandura allowed children to observe an adult behaving violently towards a Bobo doll. Later, the children were sent back into the room with the Bobo doll and the children automatically began to imitate the violent behavior they had seen previously by the adults (Cherry, 2013). Bandura hypothesized from the children's behavior that humans can learn from just watching others, even though there has been no formal teaching taking place (Ashford & LeCroy, 2010). He identified 3 basic models that influence behavior, the live model, verbal instructional model and the symbolic model (Cherry, 2013).

The symbolic model best exemplifies how social work values and ethics are related to anorexia in teens and encourages more of a commitment on anorexic teens' behalf (Cherry, 2013). It is a clear social and economic injustice that the media is allowed to influence young girls in such a strong way by giving impressions of successful young girl's and their size (Harrison, 2001). The symbolic model, involves fictional characters or real people being displayed in books, films, online media or television programs (Cherry, 2013).

Society does not specifically tell teens that they need to be thin, but messages are sent via media that say otherwise (Harrison, 2001). Bandura indicated that external, environmental reinforcement was not the only factor that influences behavior. He believed there is also a central reinforcement of our cognitive thoughts, such as pride, satisfaction and a sense of accomplishment. Bandura described these cognitive internal thoughts as



cognitive development and said that they could reinforce behavior (Cherry, 2013). Young girls are highly motivated by feeling of acceptance by their peer and due to media representations by social media in America, girls are made to feel pride and satisfaction when thin (Harrison, 2001).

### **Assess the theories' contribution to social work practice.**

Erikson's theory of psychosocial development is one of the best-known theories of personality in psychology among teenagers that struggle with Anorexia. I feel that teenagers are unhappy with the way they look because all of the people on TV are good-looking and are living a good life. I also feel that there is too much pressure in being popular because you would not know who to talk to or to sit with at lunch. This can make teens be overly critical of ourselves, which will eventually lead to self-destruction.

Bandura's Social Learning Theory has many important implications in the field of teen development. Teachers, parents and medical professionals recognize today that modeling is an important aspect teen behavior. It is common today, for social workers and other professionals to use self-efficacy principles which are found in Bandura's Social Learning Theory (Cherry, 2013). New studies show how the brain is linked to positive emotions and having a healthy view of oneself. It is now understood that a person's consciousness plays a major role in how the brain works. The focus of attention of a teen, what they continually think about, can alter their behavior and character (Bandura et al., 2007). Teens are bombarded with "thin media" in areas such as, magazines, movies, TV programs and billboards, which affects their continued mental processes on the subject (Harrison, 2001). Bandura's theories are used to encourage new medical and

psychological research that continues to help people learn new behaviors by refocusing their cognitive processes through positive outlooks and beliefs. (Bandura et al., 2007). Over the past three decades, Bandura's Social Cognitive Theory has been the single most influential and highly cited theory in psychology (Bandura et al., 2007, p. 40).

Social work is a professional and academic discipline that seeks to improve the quality of life and wellbeing of an individual. Social Workers we use the strengths perspective assesses the inherent strengths of a person or family, and then builds on them. Strength is defined as almost anything that assists a person in dealing with life's challenges. It uses people's personal strengths to aid in recovery and empowerment. It's really about reframing personal perception to find good even in the worst situation.