

BODY IMAGE AND ADOLESCENTS

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Body image is the dynamic perception of one's body—how it looks, feels, and moves. It is shaped by perception, emotions, physical sensations, and is not static, but can change in relation to mood, physical experience, and environment. Because adolescents experience significant physical changes in their bodies during puberty, they are likely to experience highly dynamic perceptions of body image. Body image is influenced strongly by self-esteem and self-evaluation, more so than by external evaluation by others. It can, however, be powerfully influenced and affected by cultural messages and societal standards of appearance and attractiveness. Given the overwhelming prevalence of thin and lean female images and strong and lean male images common to all westernized societies, body image concerns have become widespread among adolescents.

- 50-88% of adolescent girls feel negatively about their body shape or size.^{1,2}
- 49% of teenage girls say they know someone with an eating disorder.¹
- Only 33% of girls say they are at the “right weight for their body”, while 58% want to lose weight. Just 9% want to gain weight.³
- Females are much more likely than males to think their current size is too large (66% vs. 21%).⁴
- Over one-third of males think their current size is too small, while only 10% of women consider their size too small.⁴
- Strikingly, while only 30% of older adolescents surveyed consider their current size acceptable to *them*, 85% of females and 95% of males considered their current size socially acceptable for *others*.⁴
- 85% of young women worry “a lot” about how they look and twice as many males as females say they are satisfied with their appearance.⁵
- A report by the American Association of University Women indicated that for girls, “the way I look” is the most important indicator of self-worth, while for boys, self-worth is based on abilities, rather than looks.⁶

Going through puberty can amplify body image concerns. Puberty for boys brings characteristics typically admired by society—height, speed, broadness, and strength. Puberty for girls brings with it characteristics often perceived as less laudable, as girls generally get rounder and have increased body fat. These changes can serve to further enhance dissatisfaction among girls.⁷ Going through puberty later or earlier than peers can have an impact on body image as well as psychological health. Generally, early development for girls and late development for boys present the greatest challenges to healthy body image.⁸

ETIOLOGY/CONTRIBUTING FACTORS

Media Messages

Strong social and cultural forces influence body image in young people. From childhood to adulthood, television, billboards, movies, music videos, video games, computer games, toys, the Internet, and magazines convey images of ideal attractiveness, beauty, shape, size, strength and weight. Consider these statistics from the TV-Turnoff Network:⁹

- Adolescents watch an average of 28 hours of television per week.
- American youth spend, on average, 900 hours a year in school and an average of 1,023 hours a year watching television.
- The average American consumes 11.8 hours per day of media of all kinds.
- Children view more than 20,000 commercials per year.
- 75% of all adolescents spend at least 6 hours a week watching music videos.¹⁰

Eight million children at 12,000 schools across the country watch television at school each day via Channel One, an in-school broadcast current events program provided (including TV and VCR equipment) free of charge to schools. The program includes ten minutes of broadcast news and current events coverage and two minutes of advertisements for products such as chips, candy, and beauty-aids. These advertisements promote poor body image through their “beauty” ads and provide mixed messages regarding adolescent lifestyle.¹¹

In childhood, popular toys such as action figures and dolls have similar body shapes: tall and slender for female figures and tall, slender, and muscular for male figures. The body shapes advertised by these toys, dolls and media sources are not realistic (see Table 1). If Barbie were real, her neck would be too long and thin to support the weight of her head, and her upper body proportions would make it difficult for her walk upright. If Ken were real, his huge barrel chest and enormously thick neck would nearly preclude him from wearing a shirt.

TABLE 1
If Barbie and Ken Were Real

| | If Barbie was a real female | Real female | If Ken was a real male | Real male |
|-------------------------|--------------------------------|-------------|---------------------------|-----------|
| Height (ft, in) | 7'2" | 5'2" | 7'8" | 6" |
| Chest (in) | 40 | 35 | 50 | 40 |
| Waist (in) | 22 | 28 | 43 | 33 |
| Neck Circumference (in) | 12 | 12.2 | 23.4 | 15.5 |
| Neck Length (in) | 6.2 | 3.0 | 6.35 | 5.5 |

Source: Statistics from Brownell KD, Napolitano MA. Distorting reality for children: body size proportions of Barbie and Ken dolls. *Int J Eat Disord* 1995;18(3):295-298.

Magazines targeted at female adolescents are full of images of young, slim, attractive, blemish-free females with small waists, large chests and only ever-so-slightly-rounded hips, while magazines produced for males are full of strong, lean, attractive, blemish-free males, frequently displayed with the aforementioned females in close proximity. Beauty pageants continue to be a popular and avidly watched showcase of ideal societal beauty.

- The average female model is 5'10" and weighs 110 pounds. The average American female is 5'4" and weighs 144 pounds. That makes the average model at least 30 pounds lighter and 6 inches taller than the average female looking at her.
- Over 800 million Barbie dolls have been sold and annual sales amount to more than 1 billion dollars.¹² If Barbie were real, given her proportions, she would barely be able to stand upright.
- Miss America contestants have become increasingly thinner over the past 75 years. In the 1920s, contestants had BMIs in the normal range of 20-25. Since then, pageant winners' body weights have decreased steadily to a level about 12% below levels from the mid-1900s. Since 1970, nearly all of the winners have had BMIs below the healthy range, with some as low as 16.9, a BMI that would meet part of the diagnostic criteria for anorexia nervosa.¹³
- Even educational materials have messages regarding body size. Textbook images of girls have gotten more slender every decade since 1900, while images of boys have not changed significantly.¹⁴
- Adolescent females watching the most media idealizing thin body types, such as soap operas and movies, report the highest body dissatisfaction and those watching music videos report a strong drive for thinness.¹⁵
- Young women surveyed before and after being shown fashion and beauty magazines have decreased self-image and increased desire to lose weight as compared to young women shown news magazines. Females report they exercise and diet more in response to fashion magazine images.^{2,16}
- Drive to attain the ideal standard of attractiveness for males (bigger, bulkier, and more muscular) has been associated with poor self-esteem and depression.¹⁷
- While most body image research has been done with white youth, research does indicate that African-American adolescents, particularly females, tend to have healthier body images than their white counterparts. However, even among African-American females, as their body shapes and sizes get further from the cultural idealized shape and size, body dissatisfaction increases.⁸
- Asian Americans may have healthier body images than their white, African American or Hispanic peers due to cultural norms influencing modesty and are the only group in which boys and girls have similarly high body satisfaction.⁸ However, as more acculturation in American society occurs, body satisfaction decreases and body image concerns arise, particularly among males.⁸

Familial Messages

Familial concerns and pressures may also contribute to increased body dissatisfaction and body image concerns. Socialization encourages males to strive to become stronger and more developed, while females are to make their bodies more beautiful. Parents tend to become less positive and more critical regarding their children's appearance, eating and physical activity as they move into and through adolescence. Adolescents receive the most criticism regarding their physical appearance and the most efforts to change their appearance.¹⁸ Parental over-concern with children being thin or encouragement to avoid being fat can influence young people to become constant dieters and use unhealthy weight control methods.¹⁶ Health professionals should work with parents to help them encourage their children to be healthy in a manner that supports healthy body image development.

CONSEQUENCES

While the contributing factors may vary, the outcomes are similar. Overconcern with body image and shape can lead to restrictive dieting and unhealthy weight control methods which may lead to potentially dangerous disordered eating behaviors. Societal reinforcement of body image concern, in the form of a multibillion-dollar diet and weight loss industry, aids in maintenance of body dissatisfaction and the elusive search for the perfect body. Societal promotion of the thin ideal may also lead to prejudicial treatment of overweight individuals or teasing based on weight and shape, especially among youth. Over-concern with body image can have damaging effects.

- In large scale studies, approximately 30% of boys and over 55% over girls report using unhealthy weight control methods such as vomiting, laxatives, diet pills, cigarette smoking, and diuretics in effort to lose weight.^{19,20}
- At 8 years-old, girls believe that weight control is strongly associated with self-worth and view dieting as a means of improving self-worth.²¹
- Poor body image often leads to dieting, which can lead to unhealthy weight control behaviors, disordered eating, and ultimately eating disorders.
- Poor body image is strongly associated with low self-esteem and low self-worth, both of which can severely limit the potential for youth to succeed.
- Teasing related to weight and shape is implicated as contributing to disordered eating.²²

SCREENING/ASSESSMENT

Given the ubiquitous nature of body image concerns and socio-cultural messages regarding body shape and size, as well as the complexity of the nature of body image, it is prudent to screen all adolescents for body image issues and work to foster a healthy body image among all youth. Screening can be done in a number of ways.

- First, *listen*.
 - Listen to adolescents talk about their health or about any particular health concern; determine if their concerns may be body image related or affecting their behaviors.
 - Adolescents may talk about wanting to lose weight or ask for weight loss advice; seize the opportunity to discuss body image, healthy weight and shape, media influences on youth, etc.
 - Young people may talk about a particular diet they or someone they know are trying, or would like to try; again seize the opportunity to provide them with nutritionally sound information about myths, misinformation, and dangers related to fad diets.
 - Adolescents may speak in a subtle or a strong way about a disliked part of the body or a concern about eating or food; use their comments as a starting point from which to explore their perception of their body and whether or not they are accurate.
 - In general, be attentive. An adolescent may make a brief comment that could serve as a terrific entrance into a valuable conversation about body image.

- Second, *ask questions*. (Table 2 provides some sample questions around body image.)
 - Incorporate questions about body image into your usual routine.
 - Ask body-image-related questions of youth, as well as their parents or support people.
 - Ask about peers and body image concerns youth think their friends may struggle with.
 - Ask on a regular basis, starting from before puberty and into adulthood.
 - Try a brief questionnaire from which to begin conversation (see Table 3).
 - Try your own questionnaire. Compile questions that have worked well in the past when discussing body image issues with youth and use them regularly with all youth.
 - Ask *teens* what are the best questions to ask.

| TABLE 2 Screening Questions: Asking About Body Image |
|---|
| <p>Are you concerned about your weight (or shape or size) at all? Do you think your friends are concerned about their weight? Do you or your friends talk about your weight a lot?</p> <p>Do you know that diets are the worst way to lose or maintain weight? Have you ever dieted? Why?</p> <p>Do you know how to tell if you are too thin or too heavy or just right? How do you feel right now?</p> <p>Do you know that eating only low-fat or fat-free foods is NOT healthy eating? Do you know that you need fat in your diet and without it you can have all kinds of health problems?</p> <p>What would you do if you had a problem with your eating or if you were concerned a friend had a problem? Do you know anyone who has a problem with their eating? Have you talked to them about it?</p> <p>Do you follow any special diet? (like counting calories and/or fat grams, fad diets, skipping meals, etc.)</p> <p>Do you ever take any pills to control your appetite or your weight? Does anyone you know?</p> <p>What kind of exercise do you do? Why do you do it?</p> <p>Sources: Adapted in part from Abigail H. Natenshon, http://www.empoweredparents.com</p> |

- Third, have resources for youth who *do* have body image issues or concerns.
 - Have accurate, youth-oriented resources available to read, look-up on the internet, or find in a library.
 - Encourage youth to continue conversations about these issues, either with you, their parents, another health professional, a trusted teacher or caring, knowledgeable adult.
 - Encourage them to become media literate to better handle the challenge of media stereotypes.
 - Know which health care professionals or clinics in your area treat eating disorders and understand their referral and screening process so you can make a referral if necessary.

TABLE 3
The Healthy Body Survey

Answer **True** or **False** to the following questions:

1. I know that very skinny models and actresses have unhealthy eating and exercise lifestyles. I must not model myself after them. T/F
2. No one can know how fit or unfit I am simply by looking at me. T/F
3. Body shapes and sizes vary from one person to the next. No two bodies can or should look the same. T/F
4. Kids become overweight because they eat too much. They need to eat less. T/F
5. You will be thinner if you skip breakfast. The fewer your meals, the thinner you become. T/F
6. Sweets are not good for you. T/F
7. Eating fat in your food makes you become fat. T/F
8. I worry that the more I eat, the more weight I will gain. T/F
9. If I am overweight, I deserve to be teased or not accepted by my peers at school. T/F
10. A person can gain a pound or more from eating a serving of cake, meat, or ice cream. T/F

Answers to The Healthy Body Survey

1. TRUE. It is unnatural and unhealthy to try to get your body to be thinner than it needs or wants to be, no matter how normal the models or actors make thinness seem. When you eat right and stay active, your body will determine the best weight for you and will maintain that weight to keep you feeling good and fit.
2. TRUE. Nobody can tell how fit you are simply by looking. Largely built or overweight people are frequently strong, healthy and in very good shape; their heredity may determine their large size. Did you know that many overweight people exercise regularly and vigorously and are fine athletes? ... all this, despite the fact that they may not look like fashion models or track stars?
3. TRUE. Just as every finger print is different from every other, no two people are created to look just the same. We all come in different sizes and shapes, with different strengths and weaknesses, with different talents and interests. Our unique qualities set us apart and make us special. Who we are as people has less to do with how we look and more to do with how we think, feel, and behave.
4. FALSE. No one becomes overweight because he or she eats too much nutritious food. People become overweight when they eat too much of less nutritious foods and/or when they do not remain active, riding bikes or engaging in sports or other forms of regular exercise. Moving your body vigorously through space in some form of exercise is one sure way to keep your metabolism healthy and capable of burning fat, giving you energy and keeping you trim. When people are overweight, they do not need to diet or eat less. They may need only to learn to eat differently, to establish a healthier eating and exercise lifestyle.
5. FALSE. You can't expect to be alert and to learn efficiently at school unless you feed your brain well after its extended overnight fast. People who skip breakfast damage the function of their metabolism, interfering with their body's capacity to burn fat effectively. In addition, excessively hungry people tend to overeat their next meal or snack; non-breakfast eaters are more apt to develop weight problems in their childhood and into their adult years.
6. FALSE. There is nothing wrong with eating sweets. A dessert now and then, even once a day, is fine. Candy on Halloween, and cake and ice cream on birthdays is great fun and in the spirit of the celebration. It would in fact be problematic if you could not feel free to eat these foods. Sweets become problems only when people eat them in excess, or instead of foods that nourish and build strong bodies.

7. FALSE. Eating fat in your diet does not make you become fat. Though an over abundance of saturated fats can be unhealthy, other kinds of fats are necessary to keep your body healthy and functional. The healthy eater is the person who eats all types of foods, as long as they are eaten in moderation (not too much and not too little).
8. FALSE. When your body is well fed and healthy, it will eventually arrive at what its called its “set point” weight. The body’s set point weight is the weight your body wants and needs to be in order to be healthy. Once this weight is achieved, there it will stay.... give or take a pound here or there. If one day you eat more than usual, the scale may show a slight increase in weight, but within a day or so of eating naturally again, your body will settle comfortably back to its set point weight. You can count on it.
9. FALSE. You do not deserve to be teased, ever, for any reason. If you have something to learn about yourself from another person, there are more constructive ways to communicate those things than through teasing. You have done nothing wrong in being uniquely who you are. What is most important is that you learn to take care of yourself. If you have concerns about your weight or how you look, there is a lot you can do to bring about constructive changes short of feeling shame, going on a diet to restrict food, or becoming the butt of others’ jokes.
10. FALSE. It is important to understand that neither meat nor dairy products are bad for you. Quite the contrary. Some people believe that when they take in food, it will immediately be visible on their body as excess weight. This is not how food works. In fact, when a person eats food, it is broken down by the body into energy and fuel for growth and alertness. Particularly when you eat nutritionally dense or nourishing foods in appropriate amounts, it all gets used up and disappears before it could ever be stored as fat.

How can you tell if you might have a problem with food or fitness?

- You don’t eat three meals a day.
- There is never time for breakfast.
- Some “meals” consist of foods that are not nourishing to your body, like chips or soda.
- You don’t eat a wide variety of nutritious foods.
- You do not eat a cooked hot dinner with your family every night.
- Your home does not have a lot of nutritious foods on hand for meals and snacking.
- You spend a lot of time eating in front of video games or television.
- You rarely go outside to play or walk.
- You do not take gym in school.
- You feel guilty after you eat.
- You are embarrassed about how you eat or how you look.
- It takes trying on many outfits before you can find one that you feel looks good enough on you.
- You are afraid or uncomfortable about eating in front of others.
- You feel that you should never leave the dinner table feeling full or satisfied.

Source: Abigail H. Natenshon www.empoweredparents.com Used by permission of author.

**PROMOTING HEALTHY BODY IMAGE:
PREVENTION AND COUNSELING STRATEGIES**

In order to help youth experience healthy body image as the norm rather than the exception, adolescents and their parents need accurate information regarding healthy eating and the effects of media, society, culture, peers, and family on body image. Beginning at a young age, youth need to understand that bodies come in many different sizes and shapes. The message that everyone is different, and that different shapes and sizes are normal, should be clear and unbiased. Youth need to understand the physical and emotional changes that they will experience in puberty and be reassured their development is normal. To cultivate a healthy body image, they need to develop skills to help them navigate through all the messages they hear and see related to body image, appearance, and eating. A variety of people in the lives of adolescents can contribute to this skill development. Table 4 gives tips for youth, parents, and professionals for fostering a positive body image among youth.

**Table 4
Tips for Fostering a Positive Body Image Among Children and Adolescents**

| Child or Adolescent | Parent | Health Professional |
|---|--|--|
| Look in the mirror and focus on your positive features, not the negative ones. | Demonstrate healthy eating behaviors, and avoid extreme eating behaviors. | Discuss changes that occur during adolescence. Assess weight concerns and body image. |
| Say something nice to your friends about how they look. | Focus on non-appearance-related traits when discussing yourself and others. | If a child or adolescent has a distorted body image, explore possible causes and discuss potential consequences. |
| Think about your positive traits that are not related to appearance. | Praise your child or adolescent for academic and other successes. | Discuss how the media can negatively affect a child’s or adolescent’s body image. |
| Read magazines with a critical eye; find out how photographers make models look the way they do. | Analyze media magazines with your child and adolescent. Demonstrate that you love your child or adolescent regardless of what he or she weighs. | Discuss normal variation in body sizes and shapes among children and adolescents. Educate parents, physical education instructors, and coaches about realistic and healthy body weight and healthy eating. |
| If you are overweight, and you want to lose weight, be realistic in your expectations and aim for gradual change. | If your child or adolescent is overweight, don’t criticize his or her appearance—offer support instead. | Emphasize the positive characteristics (appearance- and non-appearance-related) of children and adolescents. Take extra time with an overweight child or adolescent to discuss psychological concerns and weight control options. |
| Realize that everyone has a unique size and shape. | Share with a health professional any concerns you have about your child’s or adolescent’s eating behaviors or body image. | Refer children, adolescents, and parents with weight control issues to a dietitian or appropriate specialist (i.e. eating disorder specialist) |
| If you have questions about your size or shape, ask a health professional. | | |

Source: Story M, Holt K, Sofka D, eds. *Bright Futures in Practice: Nutrition*. (Appendix I) Arlington, VA: National Center for Education in Maternal and Child Health, 2000.

Healthy Eating

Empower youth and parents by providing them with accurate information regarding healthy eating. Teach them about moderation with eating and help them to learn how to listen to their bodies and their natural hunger and satiety signals. Table 5 lists some components of healthy eating to discuss with youth. Talk about healthy eating with youth and ask them what messages they hear in society that try

to convince them to tune out their body’s signals (e.g., “super sized” portion sizes in restaurants, ads for diet products, machines, or supplements, ads for low nutrient density foods on television, unrealistic body shapes and sizes in media, etc.).

TABLE 5
Components of Healthy Eating

Healthy eating is...

- Eating when hungry and eating until satisfied, not stuffed.
- Eating a wide variety of foods.
- Eating three meals a day, plus one or more snacks; not skipping meals and then eating a huge meal or snack later.
- Eating from all the foods groups to ensure adequate nutrients.
- Not being afraid to eat foods that have fat in them or add fat to foods when appropriate (e.g. peanut butter on toast, butter on bread, cream cheese on bagels).
- Not needing to count calories or fat grams.
- Not eating just because of boredom, sadness, loneliness, joy, or other emotions.
- Not being “on a diet”.

Dieting

Talk to youth about why dieting or other unhealthy weight control behaviors are not good ideas. This is particularly salient for those youth who express interest in dieting or those who are already dieting in an effort to improve their body image. Discuss with youth reasons not to diet, such as the top ten reasons to give up dieting from the International No Diet Coalition, shown in Table 6.

TABLE 6
Top Ten Reasons To Give Up Dieting

- #10: Diets don’t work.** Even if you lose weight, you will probably gain it all back and you might gain back more.
- #9: Diets are expensive.** If you did not buy special diet products, you could save enough to get new clothes, which would improve your outlook right now.
- #8: Diets are boring.** People on diets talk and think about food and practically nothing else. There’s a lot more to life.
- #7: Diets don’t necessarily improve your health.** Like the weight loss, health improvement is temporary. Dieting can actually cause health problems.
- #6: Diets don’t make you beautiful.** Very few people will ever look like the models. Glamour is a look, not a size. You don’t have to be thin to be attractive.
- #5: Diets are not sexy.** If you want to feel and be more attractive, take care of your body and your appearance. Feeling healthy makes you look your best.
- #4: Diets can turn into eating disorders.** The obsession to be thin can lead to anorexia, bulimia, bingeing, and compulsive exercising.
- #3: Diets can make you afraid of food.** Food nourishes and comforts us, and gives us pleasure. Dieting can make food seem like your enemy, and can deprive you of all the positive things about food.
- #2: Diets rob you of energy.** If you want to lead a full and active life, you need good nutrition, and enough food to meet your body’s needs.
- #1: Learning to love and accept yourself just as you are will give you self-confidence, better health and a sense of well-being that will last a lifetime.**

Media Literacy

Youth also need to be aware of the power of the media and learn how to view media with a critical eye. Media literacy skills can be taught to young children and can continue to help youth make their way through the life-long sea of media they will encounter. Once young people learn about overt media tactics, they are empowered and can experience media in a different way. Table 7 lists some of the multitude of media techniques commonly used. Discuss these techniques with youth and teach them to recognize how companies use these techniques as they experience media, particularly as it relates to body image and self-esteem. Encourage them to share their new knowledge with their peers and parents.

TABLE 7
Media Tricks and Techniques

Media Tricks:

- Computer retouching of photographs of models in magazines and catalogs
- Special lighting positions to highlight certain areas of the body and block out others
- Replacement (in ads, movies, videos and television) of one person's body part with another person's more flattering or desirable body part

Media Techniques:

- Symbols (pictures or characters associated with products)
- "Scientific evidence" (using scientific sounding language or a using a health professional (certified or not) to present product information)
- Exaggeration (using hype to make a product sound fabulous)
- Humor (make people laugh, either related to product or not)
- Name-calling (speaking poorly of another product or using comparisons)
- Flattery (either flattering the potential user of the product or characters flattering each other)
- Bribery (particularly common in food advertisements)
- Using groups to sell product (especially with young people, form of peer pressure)
- Repetition (again and again and again and again and...)
- Simple solutions (the idea that this product will solve your problems, popular with youth oriented ads)
- Age group specific target markets (specific ads are targeted to specific age groups)

Source: Adapted from Bob Gannon, Executive Director, New Mexico Media Literacy Project <http://www.nmmlp.org>

Once young people understand how media tries to target them, they can more carefully decipher the advertisements they see and take a stand against the negative effects media may have on their body image. Media literacy training groups can provide useful training to youth and the professionals who work with them. Clear, concise information for use when educating youth about media and its effects is available on the web and in print.

CONCLUSION

Finally, be aware of your own body image issues and feelings related to your own body satisfaction. These feeling and biases may influence your work with youth. Empower yourself by becoming media literate and challenging unhealthy beliefs you may have regarding weight, shape, and eating. Encourage your colleagues to do the same. Youth are not the only ones affected by media, familial, peer, and social influences. Work to make your work and home environment as body image friendly as possible. Youth will feel more comfortable, and so will the adults working with them.

RESOURCES

National Eating Disorders Association

<http://www.nationaleatingdisorders.org>

Provides thorough information, as well as reliable links, on eating disorders, body image issues, and dieting among youth in American society, as well as ways to get involved in prevention of disordered eating, body image disturbances, and eating disorders. Information on the GO GIRLS™ Program (Giving Our Girls Inspiration and Resources for Lasting Self-Esteem), a self-esteem building program with a focus on body image and media, is available here.

New Mexico Media Literacy Project

<http://www.nmmlp.org>

An excellent program with the goal of teaching all youth to be media literate and savvy. Their site has sample media deconstructions, some free media literacy educational material, links to the resources they provide, products and services they produce for sale, and information regarding trainings around media literacy.

American Academy of Pediatrics Media Matters Program

<http://www.aap.org/advocacy/mmcamp.htm>

Provides information on media literacy instruction as well as research done in the area of media literacy, media effects on youth, and advocacy and policy issues around media.

Empowered Parents

<http://www.empoweredparents.com/>

<http://www.empoweredkidZ.com/>

Both sites have useful information regarding healthy eating, eating disorder prevention, healthy eating and body image for youth, and how parents can cope with their child having an eating disorder. Site content by Abigail H. Natenshon, author of When your child has an eating disorder: a step-by-step workbook for parents and other caregivers (New York: Jossey Bass Publishers, 1999).

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Adolescents and the social media landscape. As clinicians, we must be attuned to our patients' family dynamics and their online activities and understand how these environmental factors influence their psychological and physical health. Tweens and teens average six and nine hours, respectively, using media each day. Social media, body image and disordered eating. Eating disorders are among the most complex, confusing and life-threatening psychiatric conditions pediatricians will face in their practices. They typically present during the teen and young adult years. Body image on the adolescents aged between 13-17 years in the context of Nepal. Body image refers to one's own perception of his/her physical appearance. The topic "Body Image" in the Nepalese field of research is a rare one although extensive work has been done in the developed countries. By using mixed research design with the combination of survey as well as FGD methods for data collection, it was found that over half of the adolescents were dissatisfied with their body image among which percentage was more for girls who wanted to change something about their physical appearance if they could as compared to boys. As found in the other studies conducted in western countries, over half the number of girls wanted to be thin while more boys wanted to gain weight. The Relation between Body Image Satisfaction and Self-esteem to Academic Behaviour in Adolescents and Pre-adolescents by Charulata Gupta University of Manitoba June 10, 2011. Body image 2. Adolescence is an important period for forming views about oneself and socio-cultural ideals. Harter refers to this process as the "construction of the self" as individuals are discovering who they are and how they fit into the world during this stage (p. 3). Some of the challenges associated with self construction are accounted for by the many rapid physical and emotional changes that mark the transition from childhood to adulthood (Harter). With the beginning of puberty, physical appearance, body image, and self-esteem become vital to the overall self image of an adolescent. Body image has often been defined as the self-perception of the physical self and the feelings and thoughts that result from that perception (Cash, 2004 ; Grogan, 2006). Disturbance in any of these domains is referred to as body image concerns or negative body image. Appraisals of physical development or body image are areas of self-evaluation that are particularly salient to adolescents and their risk for internalizing problems (Graber and Sontag, 2009). Children with higher BMI may feel discriminated against due to their image, which would lead them to present internalizing symptoms in the long-term.