Obesity and Mental Health

We note that requests from schools for information about the relationship between mental health and obesity are increasing. From all indications, concern about this is going to be a controversial topic for the next couple of years. What's the controversy? What's good practice? Here's part of a response given on the Center's Practitioner Listserv.

First, Who Are We Talking About?

Children are considered obese when their weight is at least 10 percent higher than recommended for their age and height. Obese children between the ages of 10 and 13 have an 80 percent chance of being obese adults. (Source: American Academy of Child and Adolescent Psychiatry http://www.psych.org/news_room/press_releases/childrenobesity92903.pdf)

What's the Relationship to Mental Health?

Not surprisingly, a review of the literature reveals there is not a strong science-base on the relationship, and there is controversy. The prevailing literature presents obesity as a MH problem. It is commonplace to read that there is "a clear association between obesity and depression and anxiety disorders among children and teens" and "untreated depression is both the cause and effect of obesity." Here's a sampling of support for this view:

(1) An American Psychiatric Association sees the mental health impact of childhood obesity as a burgeoning public health crisis in the U.S. An online article entitled: "Obesity can be Harmful to your child's Mental Health: Research shows significant risks, impacts" states that obese children are at increased risk for emotional problems that last well into adulthood. The article concludes that obesity and the mental disorders obesity contributes to should be considered as serious as other medical illnesses. http://www.psych.org/news_room/press_releases/childrenobesity92903.pdf

(2) Investigators at the University of Medicine and Dentistry of New Jersey report that obese girls ages 13 to 14 were four times more likely to experience low self-esteem than non-obese girls. They also report that obese boys and girls with low self-esteem had higher rates of loneliness, sadness and nervousness and were more likely to smoke and drink alcohol. They note that depression, often an outcome of low self-esteem, affects as many as

750,000 teens in the U.S. (Source: Pediatrics, "Childhood Obesity and Self-Esteem," January 2000.)

(3) A University of Minnesota study reports that children who were teased about being overweight were more likely to have poor body image, low self-esteem, and symptoms of depression. The study found that 26 percent of teens who were teased at school and home reported they had considered suicide, and 9 percent had attempted it. (Source: Archives of Pediatrics and Adolescent Medicine, "Associations of Weight-Based Teasing and Emotional Well-being Among Adolescents," August 2003)

Concern about unintended negative effects of campaigns against obesity

Concern is growing that the new "campaign against obesity" may have unintended negative effects. These include amplifying youngsters' self-consciousness and embarrassment about their body size, possible increased harassment by peers, heightened pressures to reach an "ideal" weight despite genetic predispositions, and eating disorders.

Those expressing concerns suggest there is an alternative to stigmatizing campaigns. They call for approaches that focus on a healthy lifestyle and physical fitness for all children and youth.

Still others argue for greater acceptability of those who weigh more than others. See such advocacy groups as the American Obesity Associations (www.obesity.org) and the Fat Acceptance National Association (www.NAAFA.org).

What Practices Are Recommended?

Depending on one's agenda, recommendations encompass advocacy for acceptance, greater attention to promoting healthy behaviors, dieting, and a variety of treatment approaches (medication, psychological treatment, surgery).

The Centers for Disease Control and Prevention (CDC) emphasizes a variety of prevention strategies for schools and communities– see
> http://apps.nccd.cdc.gov/shi/default.aspx
> http://www.cdc.gov/HealthyYouth/physicalactivity/index.htm
> http://www.cdc.gov/nccdphp/dnpa/programs/index.htm

From perspective of obesity as related to mental health problems, the American Academy of Child and Adolescent Psychiatry offers the following advice:

C Help children understand that being overweight can undermine physical and mental health and is more than an appearance issue;

C Talk to children about why they overeat and how they feel about themselves. Identify feelings and situations that cause them to overeat, and discuss coping strategies;

C Criticizing an obese child or trying to humiliate them into losing weight will increase the child's emotional difficulties. The child may become lonelier, more depressed, and less likely to make changes that might help;

C Praise your child's strengths and accomplishments;

C Help children gain control over their weight by discussing and encouraging healthy food choices and exercising regularly with them. Individualize food and exercise plans according to the child's interests and your commitment level;

C Set an example – make healthy eating and exercise a family affair;

C Encourage children to make smart choices and understand the benefits of feeling better and being healthier. Explain the long-term medical impacts of a healthy lifestyle;

C Limit access to high-calorie, high-fat and sugary foods, including soda and juices--especially at home;

C Limit sedentary activities including television and computer time; and

C Do not use food to reward or punish children. Establish a system to reward weight goals and help the child get back on track when they fall off."

Source: American Academy of Child and Adolescent Psychiatry
http://www.psych.org/news_room/press_releases/childrenobesity92903.pdf