



Body dissatisfaction and disordered eating

A child or young person's body image, particularly how satisfied or dissatisfied they are with their body, can influence their relationship with eating and exercise.

What is body dissatisfaction?

Body dissatisfaction occurs when an individual experiences a discrepancy between what they look like and what they want to look like.

This can result in a person having negative feelings about their body, which can include the size and shape of their body, particular body parts, or the overall appearance of their body.

Body dissatisfaction is the most significant risk factor in the development of disordered eating and diagnosed eating disorders. It's linked with a variety of adverse mental health outcomes, including poor self-esteem and depressive symptoms.

Many factors can influence how satisfied or dissatisfied a young person feels about their body, including self-esteem, and body comparison tendencies.

These could include social or cultural pressures to conform to a particular appearance ideal (for example, thin, muscular).

These pressures can come from family, friends, peers, coaches, intimate partners, media and social media.

Appearance-based bullying and teasing can also increase the risk of body dissatisfaction.

When a person feels dissatisfied with their body, they are more likely to engage in problematic behaviours.

These may include emotional eating or restrictive dieting, increasing or decreasing movement, withdrawing from friends and family, and increasing risk-taking behaviours, such as smoking, drug use, steroid and supplementation use, cosmetic procedures and unsafe sex.

The dangers of restrictive dieting

People who experience body dissatisfaction may engage in restrictive dieting as means of modifying their shape, size or weight.

While dieting is normalised in our society, particularly amongst young people, it should not be considered a normal part of childhood or adolescence. Young people should be discouraged from engaging in restrictive dieting.

Restrictive dieting usually involves rigid rules that limit the amount and type of food that is eaten and/or how frequently food is eaten. Counting calories, eliminating whole food groups (for example, carbohydrates, 'fatty' foods), eating only a selected number of foods, fasting, skipping meals, and using meal replacements are all examples of restrictive dieting.

Some people may perceive or hope that weight loss or a change in their appearance will improve their happiness and self-confidence, although this is seldom the case. Dieting normalises disordered eating behaviours, such as restricting particular food groups.

The pervasive diet culture in Western society doesn't allow for diversity and differences in body size and shape and suggests that there is a one size/body shape that fits all. This reinforces weight stigma and fat phobia.

Restrictive diets shame and demonise particular foods and food groups (for example, assigns moral value to foods as 'good' or 'bad'), and decrease a person's ability to read their own physical satiety and hunger cues. These factors make it extremely challenging to have a positive relationship with food.

Eating and body attitude

While disordered eating and eating disorders are complex in their development, people experience eating and body satisfaction across a spectrum or continuum.

The spectrum spans healthy behaviours, problematic behaviours, disordered eating and eating disorders.

People of all weights, shapes and sizes can sit anywhere along the spectrum and move along it in different phases throughout their life.

Seeing this as a spectrum reminds us of the importance of improving body satisfaction and establishing healthy behaviours and attitudes to food and exercise.

Healthy behaviours

- Mostly positive feelings experienced about weight, body shape, size, height.
- Balanced intuitive eating, where a person will respond to their body's physical cues for hunger and satiety.
- Eating for nourishment and enjoyment.
- Exercise and movement are consistently engaged in for enjoyment and overall health benefits.

Problematic behaviours

- Increased level of body dissatisfaction. A preoccupation with shape, size, muscularity, leanness, food, eating and their body.
- Dislikes the way their body looks.
- Eating and exercise are driven by a desire for weight loss, change in body shape and/or muscle growth.
- May experience feelings of guilt after eating particular foods (for example, breaking a restrictive diet, eating a food categorised as 'bad' or 'naughty') and exercise may be used to compensate for eating or food choices.
- Occasional binge eating/overeating.

Disordered eating

- High level of body dissatisfaction.
- Frequent problematic eating behaviours, including restrictive dieting and excessive or extreme exercise, in an attempt to lose weight.
- Binge eating.

Learning communities can support children and young people to develop healthy attitudes and behaviours by:

- incorporating evidence-based programs into the curriculum that address the modifiable risk and protective factors that underpin the development of body dissatisfaction and disordered eating
- encouraging staff to role model positive behaviours around food, exercise and body image. Learn more in the Be You Fact Sheet on [body image](#).
- adopting a zero-tolerance to appearance-based bullying and teasing, and ensuring it is included in existing anti-bullying protocols and policies
- ensuring healthy eating programs are balanced in their approach. Learn more in the Be You Fact Sheet about [supporting healthy eating and physical activity](#).

What can I do if I'm concerned about a child or young person?

If you're concerned about someone, it's important that they are supported to seek help. Learn more in the Be You Fact Sheet about [supporting children and young people experiencing disordered eating](#).

You could also call the Butterfly National Helpline on **1800 ED HOPE (1800 33 4673)** or email support@thebutterflyfoundation.org.au

The helpline offers free support for anyone in Australia concerned about an eating disorder or body image issue.

Butterfly's qualified counsellors are experienced in supporting people affected by an eating disorder with information, counselling, and guidance on treatment options.

Be You Professional Learning

Learn about noticing and supporting children and young people who might be showing signs of mental health issues in the [Early Support](#) domain.

References

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External links

Butterfly – [National Helpline](#)