

The Effects of Eating Disorders of Young Adults

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Introduction

Eating disorders are a group of related conditions including anorexia, bulimia and binge eating that can range from mild to life-threatening. They are displayed and characterised by various irregular and unsafe eating practices and behaviours which are joined by undesirable beliefs and perceptions concerning eating, weight, and body shape. A general belief taken up by many people who have an eating disorder is that they are unable to feel anything positive about themselves. This is seen by the fact that they tend to label themselves with negative characteristics like 'ugly' and 'fat', even though this subjective self-judgement tends to be false. Eating disorders are said to have many permanent side effects on the people affected. This is because those negative terms people label themselves with, leads to many people with eating disorders to feel undesirable and unwanted, leading to huge insecurities that they will carry for potentially the rest of their life (Zachrisson and Skårderud, 2010).

1 Literature Review

Eating Disorder

Dietary issues, especially, anorexia and bulimia have been a focus for specialists and researchers for many years. Dietary issues are one of the most important and significant issues when it comes to a range of people, like adults, teenagers and even young children. These complex disorders can be believed to come from the interaction of multiple risk factors. These Dietary issues are characterized and defined by disturbance in eating patterns and habits that might be either extremely excessive or extremely insufficient. Bulimia and anorexia and binge eating are the most widely recognized types of dietary issues. As characterized in DSM-5, anorexia is a steady attempt to maintain body weight below ordinary weight (85%) or body mass index <17.5 for age and height, with an extreme dread of putting on weight, despite the fact that they remain constantly underweight (Rikani, Choudhry, Choudhry, Ikram, Asghar, Kajal, Waheed and Mobassarrah, 2013). Researchers have seen a huge increase in the effect of eating disorders in young people in recent years. An example of this is from a report published by Public Health England, explaining how the amount of hospital admissions for eating disorders in only 10-year-old girls had increased by 146% since 2013/14 with an overall sum of 2196 admissions of children and young people aged 10 to 24 years in 2017/18 (<http://www.pharmatimes.com>).

Effects on Young Adults

According to recent data, eating disorders affect 5% of adolescent and young adult females. An example of one of these eating disorders is anorexia nervosa. Anorexia nervosa is an incredibly life-threatening, dangerous eating disorder, that affects between an estimated 0.3% and 1.2% of the world population at any one time (Romeo, 1994). The huge range of symptoms of anorexia like refusal to eat, intense dieting, pathological fear of gaining weight and a distorted body image, makes this disorder very hard to explain from one perspective.

Explanations of Eating Disorders

One of the explanations is through biology, more importantly genetics, and how anorexia can be passed through families. Evidence for this is found through twin studies of MZ and DZ twins. From different studies on twins, it is evident that MZ twins, due to their 100% share of genes, have a higher concordance rate for MZs which is evident of a genetic component to anorexia. According to Anthony Holland et al, who studied 45 pairs of female twins, and found a concordance rate of 56% for MZ twins but only 5% for DZ twins. For the purpose of reliability, when the study was replicated by Janet Treasure, MZ twins had a concordance rate of 65%, with 32% for DZ (Treasure and Holland, 1995). Another biological factor that has an effect on eating disorders like anorexia is candidate genes. According to a candidate-gene association study (CGAS), carried out by Ashley Scott-Van Zeeland,

where 1205 anorexia nervosa patients and 1948 control participants discovered that only one gene was important when associated with anorexia: epoxide hydrolase 2.

Another explanation for anorexia nervosa is through psychological reasons like cognitive distortions. According to the cognitive explanation, the core psychopathology of anorexia nervosa is cognitive distortions about body shape and weight. According to Rebecca Murphy et al, clinical features of anorexia stem from disturbed distortions, including thoughts of food, eating and weight, which can be presented through behaviours like food restrictions and constant checking in the mirror. Several studies have shown that anorexia nervosa sufferers always overestimate their body size, shape and weight. Study by Don Williamson et al used the body image assessment to estimate their current body size on 37 participants diagnosed with anorexia and found that those participants had a tendency overestimate their size and had a significantly thinner ideal body shape than other controlled groups (Baker, Williamson, and Sylve, C.,1995).

A second significant disorder that affects the lives of many young adults is obesity. According to the World Health Organisation obesity is when an individual has an abnormal or excessive amount of body fat on them that presents a huge risk or threat to their health (www.who.int). Obesity is seen, by many, as a major problem to young adults, especially in today's day and age. Overweight and obesity are major risk factors for many reasons, for example chronic diseases like cancer cardiovascular problems and diabetes. It has been reported that majority of teenagers who develop an eating disorder may not have had obesity in the past, however it may have developed whilst young adults attempt to lose weight (Golden, Schneider, and Wood, 2016). There are many reasons behind the explanation for obesity, for example biological reasons like the passing of obesity through families. There seems to be clear evidence at show family-related patterns to obesity, that is measured in terms of mass body index. Many studies, majority studies on twins, have showed that at least 50% of the tendency towards obesity can be inherited (Kiess, Reich, Müller, Meyer, Galler, Bennek and Kratzsch, 2001). Cassandra Nan et al used twin studies were used to suggest greater genetic component. She conducted a meta-analysis of 12 twin studies involving 8000 MZ and approximately 10,000 DZ twins. Concordance rates ranged from 61% to 80%. This shows that there is a very clear genetic component to obesity and being overweight that had also remained to be a huge influence from late childhood through adolescence adulthood, which is why it still remains a major issue for young adults (Nan, Guo, Warner, Fowler, Barrett, Boomsma, Nelson, Whitfield, Beunen, Thomis, and Maes, 2012).

Another reason for obesity, can stem from the psychological side of a young adult. An example of this is the restraint theory that was created by Peter Herman and Janet Polivy in 1975. Herman and Polivy developed a cognitive theory, arguing that restrained eating may be incredibly counterproductive and more harmful to the person obesity situation than they think. Restrained eating is when people tend to limit their food intake in order to lose weight. They noticed a significant pattern during the research on obesity, which was that people who restrict their food intake and partake in restrained eating, actually fail to lose weight, as they usually overeat to the extent that they become obese (Klajner, Herman, Polivy, and Chhabra, 1981).

The Failure of Dieting

One common aspect of all eating disorders that seems to be a connecting thread between them all is the process of dieting. According to the NHS a well-balanced diet, is when people eat a range of foods within the correct proportion, as well as consuming the correct amount of food and drink to be able to have and maintain a healthy weight (www.nhs.uk). However, due to the limited amount of food, many people are met with failure when they start to diet. According to

The spiral model by Todd Heatherton and Janet Polivy proposed a model of dieting in terms of a chain of linked events. They showed how the process of dieting usually begins in adolescence, as usually teenagers (especially females) tend to have lower self-esteem and experience high levels of body dissatisfaction. Low self-esteem is seen as a huge risk factor when it comes to dieting attempts, as it seems to be a pattern in teenage dieting, that individuals are more likely to make negative comparisons whilst losing weight. Heatherton and Polivy suggested that people who diet for the first time may experience some success, as they temporarily lose weight and body fat. However, they also realised that long lasting weight loss seemed to be rare, which ultimately lead to all the weight being regained and an overall outcome of failure (Heatherton, and Polivy, 1991).

The ironic processes theory is another theory that can be used to explain the failure of dieting. As previously stated, when going on a diet with the intention of losing weight people tend to deliberately restrict the intake of food, in order to lower the number of calories that eat on a daily basis. This leads to a very dangerous situation for the individual, as they tend to have thoughts that are preoccupied with food. Daniel Wegner (1994), provided an explanation for this, which stemmed from his observation in an experiment. He asked people to not think about a white bear, which he found out led them to directly thinking about one, even more often than when people are asked to specifically think of one. He linked this to the failure of dieting as he concluded that when dieters label food as forbidden, they tend to stand out more to them. They are more likely to have intruding thoughts about the forbidden food, for the pure fact that they are trying not to, eventually leading to a failure of dieting (Wenzlaff and Wegner, 2000).

The Impact of Social Media

Social media is one of the biggest and greatest forms of communication in the twenty first century and has a major influence in the way people, especially teenagers engage and to talk to each other. Even though it has the ability to create a positive change in the world, through allowing people from all corners of the world to connect, by sending messages and pictures, it also holds great destructive power in wreaking havoc and danger for someone suffering with issues revolving around eating disorders.

Firstly, social media creates the problem of body dissatisfaction. Body dissatisfaction is when an individual is unable to have any positive thoughts about their own body and look at themselves through negative emotions like self-hate. Many experiments with adolescent girls showed significant patterns between media ideals and body dissatisfaction, and how young girls seem to be heavily impressionable and want the 'ideal' types of bodies displayed in magazines and on social media (Ferguson, Muñoz, Garza and Galindo, 2014). A study conducted on 242 high school female students, who completed questionnaires at two separate points in time, over a 2-year period. From the results of the questionnaire it was concluded that young, teenage girls with heavier actual weight and perceptions of being overweight, were very vulnerable to having low-self-esteem and developing self-conscious behaviour (Tiggemann, 2005)

The alarming problem of body dissatisfaction can lead to even more dangerous problems for teenagers and eating disorder behaviour, for example the problem of peer competition. Peer competition is when teenagers begin to see their peers as competition and try everything in their power to compete against them and win (<http://florida4h.org>). A study on a sample of mostly 237 Hispanic females on television, peer competition, social media and influences on body dissatisfaction showed that the influence of social media had a direct link and correlation to peer competition in

young girls, however it did not have a direct link to body related problems and outcomes (Ferguson, Muñoz, Garza and Galindo, 2014). Another similar study showed how 150 young women, who were randomly selected, had to watch a television series with and without thin-ideal actresses, and were exposed to peers who were either dressed in sexual competitiveness or weren't. The results indicated that competition with unfriendly young girls and television exposure predicted emotions of inferiority to other young girls (Ferguson, Munoz, Contreras, and Velasquez, 2011)

Methodology and Methods

The research that went into completing this literature review took form through different types of methodology. In order to investigate the phenomenon of eating disorders in young adults, both qualitative and quantitative data was used. Quantitative data (information based on statistics) was used as it is best for measuring, identifying patterns and making generalisations for comparisons. Qualitative data on the other hand (interpretive and subjective information), was used for its great ability of describing, interpreting and gaining in-depth insights into specific areas of eating disorders, and is able to give more understanding into the personal affects it has on certain individuals. Quantitative data has high levels of validity, as it is very easy to see how hardcore, objective facts cannot be influenced by feelings and emotions, unlike qualitative data. However, qualitative data also has many strengths in the sense that it is able to help the researcher gain reliable results, allowing data to be individually compared between two very different, yet personal cases.

The methods used to complete this research was done through many forms, for example reports, one of many qualitative forms of research. The report, that was published on 12th July 2019 by Public Health England, who had produced a report showing the patterns in numerical form of all hospital admissions as a result of eating disorders in young people. These were categorised by sex as well as single year of age for residents in England. The main aim of this report was to allow national organisations and local authorities to monitor and keep an eye on the trends in eating disorders, and the high levels these trends have reached, specifically over recent years.

Qualitative data was also used in order to gain evidence to support the research used. An example of this was the questionnaire that was taken place on 01 June 2005, which was given to 242 female high school students to get a more in-depth understanding on how social media can lead to young girls feeling highly insecure and having low levels of self-esteem throughout their teenage years. The strength of using a qualitative method like questionnaires is the fact that researchers can get a huge variety of answers. This is because of the option of open and closed questions. Closed questions give more restricted answers; however, these can be great for quick comparisons with other studies or same studies from different years. However, on the other hand open questions, give a lot of more diverse answers, as participants are able to give answers that are rich in opinions and feelings, allowing researchers to understand their participants on a deeper level.

Secondary data was mainly in order to collect the necessary data to explain eating disorder in young adults. Secondary data refers to data that was collected by another individual, and is put on accessible platforms like Google, to be used by other people. In this case, Google Scholar was used in order to find information on different case studies and surveys that were used to investigate the trends of eating disorders. The advantage of Google Scholar is the fact that it has high levels of validity. This is due to the fact that there are reliable books written and published by trustworthy sources, allowing researchers to use the sources on this website without a worry of using information and data that is false. Another strength of using Google Scholar as a secondary source is that it has data and information from many years ago as well as data from recent years. This can be a huge advantage to

many researchers, as it allows comparisons to be made from over the years, allowing trends and patterns to be noticed and observed.

Findings, Conclusion and Recommendations

The main findings of this review were that an increasing number of young adults are being affected by eating disorders, due to advances in the 21st century, like technology. In order to improve the livelihoods of teenagers, I recommend that parents have more control over the number of hours their children spend on their phones. This will enable teenagers to understand that there is more to life than staring at their screen all day, and be able to pick up new hobbies that will be able to limit and reduce their stress, like painting, reading and meditating. Current methods and data sources give some reliable tracking of these trends in certain areas; however, these still remain quite limited, and through more extensive research, can be upgraded and adapt to suit the needs of majority of cases. However further research is still needed to have a grasp and understanding of underlying mechanisms that have been recently spotted in child and adolescent mental health issues, like issues with anorexia and obesity (Maughan, Iervolino, and Collishaw, 2005).

To conclude, it is obvious that eating disorders have huge effects on all people of all ages and gender, however it can be said that the effects of eating disorders are more harmful to teenagers. This is due to the fact that adolescence is a time of change, most importantly a physical change to our bodies to both females and males. The effects of eating disorders may create body image issues, as it will cause it to be harder for teenagers to accept their new bodies shape and size (CONSTRUCTED, 2008). There have been recent high rates of eating disorders in young adults, through evidence suggesting that for adolescents, eating disorders are the third most common chronic condition, along with obesity and asthma (Fisher, Golden, Katzman, Kreipe, Rees, Schebendach, Sigman, Ammerman and Hoberman, 1995). These high rates have been a huge concern for specialist, as they try to figure out effective methods of helping teenagers through these hard times through different psychotherapy treatments, like therapy and counselling. This is because eating disorders have been found to cause young people and children to have significant mortality from eating disorders and may cause many of them to die from medical complications (Golden, Schneider and Wood, 2016).

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