



Gia Marson, Ed.D., and Danielle Keenan-Miller, Ph.D.
The Binge Eating Prevention Plan

5 Tips for Talking to Kids About Weight and Eating

The American Academy of Pediatrics offers important, evidence-based help.

Posted March 30, 2022

 Reviewed by Ekua Hagan



KEY POINTS

- Among children, negative messaging about weight, body shape, and food can lead to risky behaviors around eating and even to eating disorders.
 - Positive associations with food and weight can lead to greater body satisfaction, higher self-esteem, and balanced eating.
-



Source: kali9/istockphoto

by Gia Marson, Ed.D.

If you're a parent of a child or adolescent, it's likely that food, eating, exercise, and body size are part of your daily conversations.

You may remind your child to pack a healthy lunch, or insist that they eat all their vegetables before leaving the table. You may casually mention that one scoop of ice cream is enough and tell them it's important to get outside in the fresh air. These conversations may happen without much thought. Yet, *how you and the other adults in their lives have these discussions* can have a big impact on children and adolescents. Studies suggest that the way we talk to our kids about food and eating can influence their behaviors around food and their opinions of their bodies.

Targeting weight control directly may be risky

Weight among youth has been on the rise. But what's been less prevalent in the messaging about weight is that, in the past two decades, hospitalizations for eating disorders increased more than 100 percent for children younger than 12.

The very public, fear-based messaging around body weight may inadvertently increase the risk of the onset of an eating disorder in children and adolescents. And because there are high physical and mental health costs as well as high mortality rates for individuals with eating disorders, confronting issues of food and weight with children should be handled thoughtfully. The role of parents, educators, trainers, coaches, and health professionals in these discussions is not as simple as some headlines may make it seem.

Therefore, adults attempting to engage in conversations about healthy eating, issues of body weight, and exercise should be especially conscientious and err on the side of caution. Fortunately, the American Academy of Pediatrics has five straightforward, evidence-based guidelines you can follow whenever you feel the urge to raise the topic of food, eating, or weight.

Labeling children or adolescents “overweight,” or having a talk with them about their weight percentile or BMI, may impact their self-esteem and motivate them to find ways to lose weight or attempt to control it. For example, it’s not uncommon for teens who view themselves as “overweight” to engage in risky weight-control behaviors such as dieting, self-induced vomiting, or taking laxatives.

ARTICLE CONTINUES AFTER ADVERTISEMENT



It can get even worse. The weight control behaviors may progress to a full eating disorder. Adolescents may initiate periods of starvation, inadvertently trigger compulsive and excessive exercise, begin a cycle of restrictive eating fol-

Sadly, the seriousness of a significant weight loss may be missed and a lower weight may even be praised. For the child or adolescent, though, an ongoing preoccupation with dieting can lead to unhealthy symptoms such as obsessional thoughts, medical problems, social isolation, irritability, difficulty concentrating, intense fear of gaining the lost weight back, reliance on reassurance, negative body image, or the onset of a clinical eating disorder.

While we cannot control what peers might say to children or teens or what they might be exposed to on social media, caring adults can learn to implement a positive strategy that minimizes risks.

Evidence-based strategies for families and adults who care for kids

Here's what the American Academy of Pediatrics (AAP) suggests you can do to protect the health of children you care about when food and weight are involved.

1. **Do not encourage dieting.** Dieting is risky and counter-productive. In a large study of 14- and 15-year-olds who

18 times more likely to develop an eating disorder than those who did not diet. Research is clear, a child's weight should not be managed by putting them on a diet.

2. **Have regular family meals.** In general, family meals are associated with balanced eating and less risk of eating disorder behaviors. One study of more than 13,000 children and adolescents showed that eating family dinners most days was protective against dieting, self-induced vomiting, and binge eating. Not only are family dinners a time to eat balanced meals and connect by talking together, but they also offer your child an opportunity to experience care that boosts self-esteem.
3. **It's a good idea to stop weight talk.** According to one study, parents who had conversations about weight had adolescents who were more likely to engage in dieting, unhealthy weight-control behaviors, and binge eating. However, if the focus of the conversation shifted away from body shape or size and onto healthful, consistent, balanced eating behaviors, adolescents with larger bodies were less likely to diet or use unhealthy weight-control behaviors. So, instead of talking about weight, focus any conversations on balanced eating.

significant others were associated with unhealthy weight-control behaviors and binge eating in both males and females in young adulthood. So make it a house rule that teasing about weight and body shape is always off-limits.

5. **Promote healthy body image.** Being dissatisfied with their bodies is associated with children engaging in dieting, binge eating, reduced physical activity, and unhealthy weight control behaviors—and it is one of the risk factors for an eating disorder. Therefore, supporting the development of a positive image in children, regardless of their weight, is an important step toward prevention. Adolescents with greater levels of body satisfaction are more likely to have a positive association with balanced eating habits and staying active.

ARTICLE CONTINUES AFTER ADVERTISEMENT

A positive, proactive approach is best

These AAP recommendations support my own clinical experiences. As a psychologist who provides treatment for children, teens, and adults with eating disorders, it is all too common to hear about the profound negative impact of seemingly helpful interventions about a child's weight when it comes from adults. Even well-meaning parents, healthcare providers, and school personnel can trigger dieting behaviors that lead to an eating disorder.

Beyond choosing your words more carefully, focus on what you do as well. Remember that your actions may speak louder than your words. We can be role models when it comes to not dieting, eating and offering a wide variety of balanced meals, having family meals as frequently as possible, and staying away from negative comments about our own bodies and weight. We can refuse to pass along messages that do more harm than good, by not conflating weight and health, not advising cutting out food groups, not labeling bodies as "overweight," not labeling foods as good or bad, and not teaching nutrition fads as if they are facts. Although adults are bombarded with the same fear-based messages