

Childhood Obesity, Developmental Psychological Factors Affecting Body Image Discontent

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Introduction

Obesity, a serious health condition, has become more prevalent in recent decades all across the world, particularly in industrialised countries. And, as developing countries adopt to Western lifestyles and eating patterns, obesity appears to be reaching epidemic proportions in these countries as well, affecting people of all ages as well as the middle class. Obesity is now being found in an increasing number of children and adolescents around the world. Obese people acquire so much body fat that it can have a detrimental impact on their health, both physically and mentally, such as cardiovascular disease and Type 2 diabetes.

Obesity is frequently caused by a sedentary lifestyle combined with a high caloric consumption. It is well recognised that a significant number of children with childhood obesity also have fat parents. Obese parents contribute to the creation of distinct dietary settings from an early age. From a young age, children are exposed to high-fat diets, with a preference for fatty foods beginning in the toddler years. Shopping habits that include high-calorie foods that are frequently stocked at home provide easy access to these foods, resulting in weight gain. The usage of air conditioning from birth and eating habits has also been identified as factors of paediatric obesity in other research [1].

Psychological Factors

Anxiety and depression: According to a recent study, the majority of studies show a potential link between eating disorders and depression. This association, however, is not one-way; sadness can be both a cause and a result of obesity. Additionally, obese adolescents had a greater lifetime prevalence of anxiety disorders than non-obese controls in a clinical sample. Despite the fact that certain studies show no link between increased BMI and greater anxiety symptoms. As a result, the link between fat and anxiety may not be one-way and is far from clear [2].

Low Self-esteem: In terms of self-esteem, research findings comparing overweight/obese children to normal-weight youngsters have been inconsistent. Obese children exhibit decreased self-esteem in some research, while non-obese youngsters do not. The broad approach to self-esteem measuring with overweight/obese children is misleading, according to the literature, because the physical and social domains of self-esteem appear to be where these children are most vulnerable.

At all ages, research has consistently demonstrated that males are more satisfied with their bodies than females. Gender disparities in attractiveness may reflect westernised cultural norms of beauty, in

which thinness is the only culturally defined ideal for girls, whereas males are pushed to be both slender and muscular. Thus, for girls, there is a linear link between body dissatisfaction and increasing BMI, whereas for boys, there is a U-shaped relationship, indicating that boys with BMIs at the low and high extremes have significant levels of body dissatisfaction [3].

Eating disorder syndrome: Characteristics linked to eating disorders tend to be prevalent in teenage obesity populations, especially among girls. Obese children/youth have a higher prevalence of eating-related pathology (such as anorexia, bulimia nervosa, and impulse regulation), according to a number of studies.

Medical repercussions: Obesity in children has been linked to a variety of medical issues. Fatty liver disease, sleep apnea, Type 2 diabetes, asthma, hepatic steatosis (fatty liver disease), cardiovascular disease, high cholesterol, cholelithiasis (gallstones), glucose intolerance and insulin resistance, skin conditions, menstrual irregularities, impaired balance, and orthopaedic problems are examples of these conditions [4].

Obesity's social implications may contribute to the difficulty in maintaining a healthy weight. Overweight children prefer to escape to secure areas, such as their homes, to protect themselves from unfavourable words and attitudes by seeking solace in food. Furthermore, overweight children have fewer friends than children of normal weight, resulting in less social engagement and play, as well as more time spent in sedentary activities. Physical activity is more challenging for overweight and obese children because they experience shortness of breath and have a tough time keeping up with their peers. As a result, weight gain is unavoidable because the amount of calories ingested exceeds the amount of energy expended [5].

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