

Ethnicity and Eating Disorders

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Eating Disorders

- Pica
- Rumination
- Anorexia Nervosa
- Bulimia Nervosa

Anorexia Nervosa DSM-IV Criteria

- Refusal to maintain body weight at 85% or greater than a minimally normal weight for age and height or failure to make expected weight gain during period of growth leading to body weight less than 85% of expected.
- Intense fear of gaining weight despite being underweight.
- Misperception of body shape or weight.
- Amenorrhea in postmenarchal females.
- Subtypes: restricting, binge-eating/purging

Treatment of Anorexia Nervosa

- Restoration of normal eating pattern, which may need hospitalization.
- Correct metabolic disturbances.
- Behavioral treatment, often rewards and punishment based on weight gain.
- Cognitive therapy to improved accuracy of body image.
- Family therapy
- Pharmacotherapy: SSRIs have been shown to be effective during recovery and maintenance phases.

Bulimia Nervosa DSM-IV Criteria

- Recurrent episodes of binge eating, with sense of lack of control during binge.
- Recurrent, inappropriate compensatory behavior in an attempt to prevent weight gain.
- Self-evaluation influenced by body shape and weight.
- Disturbance does not occur exclusively during episodes of anorexia.
- Subtypes: purging, non-purging

Treatment of Bulimia Nervosa

- Cognitive and behavioral treatments to decrease binge-eating and purging.
- Pharmacotherapy: SSRIs
- Family therapy

Research Findings

- Eating disorders span all ethnic and socioeconomic groups.
- Ethnic minorities have lower eating disorder symptomatology, but similar prevalence rate compared to Caucasian women.
- Though there are cultural differences in body type ideals, deviation from American ideals proved to be a stronger prediction of bulimic symptoms than deviation from cultural ideal.
- Ethnic minorities are less likely to seek eating disorders treatment.

Effect of Stereotypes on Eating Disorder Recognition

- Clinical stereotype associates eating disorders with privileged Caucasian females.
- It has been shown that detection of eating disorders is influenced by the ethnicity of the patient, but not by the evaluator.
- It has also been shown that Latino and Native American participants in a study were less likely than Caucasian participants to receive a recommendation or referral for further evaluation of eating disorder symptoms.

Prevalence of Disordered Eating Behaviors Among Adolescents

- Disordered eating behaviors assessed: unhealthy weight control behaviors (fasting, smoking, vomiting, diet pills, laxatives) and binge-eating.
- More prevalent among female adolescents than male.
- Overall most prevalent among Hispanic and Native American adolescents.

Ethnic Differences in Disordered Eating Among Female Adolescents

- Among ethnic minorities, Black and Asian females with lowest prevalence of disordered eating.
- Binge-eating reported most by Hispanic females.
- Native American females most likely to fast, smoke, take diet pills, and vomit.
- Hispanic and Asian females with higher likelihood of disordered eating behavior than white females.

Association Between Ethnicity and Risk Factors for Disordered Eating

- Females: strong appearance concerns, having friends concerned about them, smoking and drinking more frequently
- Hispanic females: alcohol use
- Native American females: alcohol use
- Black females: cigarette smoking
- Asian females: cigarette smoking

Association Between Ethnicity and Protective Factors for Disordered Eating

- Females: high self-esteem, high levels of emotional well-being, high family connectedness, school achievement
- Hispanic females: high self-esteem and emotional well-being
- Native American females: high family connectedness
- Black females: high emotional well-being
- Asian females: two-parent household, high self-esteem, high emotional well-being

Conclusions

- Be aware of subclinical disordered eating behavior.
- Consider ethnic differences when asking screening questions.
- Provide information and resources to all at risk, but remember that minorities are less likely to seek treatment.

References

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