

What families can do to help their teens achieve a healthy weight and positive body image:*

Cornerstone Behavior	Specific Steps that Parents/Families Can Take	Supportive Research
Model healthy behaviors for your children	<ul style="list-style-type: none"> • Avoid dieting or, at least, unhealthy dieting behaviors • Avoid making weight-related comments as much as possible • Engage in regular physical activity that you enjoy • Model healthy (but not perfect) eating patterns and food choices 	<ul style="list-style-type: none"> • Although not consistent across studies, correlations are often seen between parental and adolescent eating, activity, and dieting behaviors. Associations are strongest when behaviors are noticed by teens (i.e., reported by teens rather than by parents) ¹⁻³. • Parents' comments about weight may be more important than their behaviors ⁴⁻⁶. In the AHEAD study, negative weight comments within families were one of the strongest correlates of unhealthy weight control practices in teens with type 1 diabetes ⁷.
Provide an environment that makes it easy for your children to make healthy choices.	<ul style="list-style-type: none"> • Make healthy foods readily available • Establish family meal norms that work for your family • Make physical activity the norm in your family, and limit TV watching • Support your teen's efforts to get involved in physical activity 	<ul style="list-style-type: none"> • In Project EAT, the strongest correlate of fruit/vegetable intake was home availability ⁸ • In focus groups, the teens stated very clearly: "If it's out, I'll eat it!" ⁹ • Family meals are strongly correlated with better dietary quality ^{10, 11} • Research suggests the importance of decreasing sedentary activity and increasing physical activity for weight management and the important role that parents can play in supporting their children's efforts to be active ¹²⁻¹⁴
Focus less on weight; instead, focus on behaviors and overall health.	<ul style="list-style-type: none"> • Encourage your teen to adopt healthy behaviors without focusing on weight loss • Help your teen develop an identity that goes beyond physical appearance • Establish a no-tolerance policy for weight teasing in your home 	<ul style="list-style-type: none"> • Dieting for weight loss is associated with weight gain over time and the onset of disordered eating/eating disorders, suggesting the importance of focusing on more effective behaviors that can be implemented safely over a long period of time ¹⁵⁻¹⁹ • Among teens, body image and more global self-esteem tend to be linked and there is a high prevalence of body dissatisfaction among teens ²⁰⁻²²
Provide a supportive environment with lots of talking and even more listening	<ul style="list-style-type: none"> • Be there to listen and provide support when your teen discusses weight concerns • When your teen talks about fat, find out what's really going on • Keep the communication lines open – no matter what • Provide unconditional love, not love based on weight, and let your child know how you feel 	<ul style="list-style-type: none"> • The prevalence of weight-teasing is high among teens, particularly overweight teens ^{23, 24} • The impact of teasing on psychological well being and disordered eating was found to be high in Project EAT ^{23, 25} • High levels of family communication protect adolescents against an array of health-compromising behaviors ^{7, 26} • In individual interviews, overweight teens indicated that in the face of weight-related teasing/mistreatment, they appreciated support from their family, not weight-loss advice ^{24, 27}

*Source:

Neumark-Sztainer D. "I'm, Like, SO Fat!" Helping Your Teen Make Healthy Choices about Eating and Exercise in a Weight-Obsessed World. New York: The Guilford Press; 2005. Reprinted with permission of the Guilford Press. As reproduced in: Neumark-Sztainer D. Preventing the broad spectrum of weight-related problems: working with parents to help teens achieve a healthy weight and a positive body image. *Journal of Nutrition Education & Behavior*. 2005; 37 (Suppl 2):S133-40.

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