



# BABY GOT BACK

by Samantha DeLaCerde

I've always been a bit on the burly side when it comes to my weight. It's something that I have struggled with since I was 13 years old. Over the first two years of college, I gained exactly 42 pounds.

Finally, last winter, I couldn't take it anymore and I couldn't figure out what it was that I was doing wrong. So, I decided to develop a plan. I had tried all of those random "fad diets"—like the Atkins, the one where you don't eat any carbs. Then there was the "no-sugar" diet. That was going well until I tried to bring yogurt and fruit back into my diet. I gained 7 pounds instantly. I decided I was going to gather up all of the knowledge and research that I had done on dieting and make-up something that would work for me and for my lifestyle.

The first thing I did was committed to referring to it as a "life change," and not a diet. That way I never thought negatively about what I was doing. Then I went out to Target and bought a pack of mini-pocket-sized notebooks so that I would be able to keep track of everything that went into my mouth during the day. I wanted to start on April 11 because it was the day before I was heading back to school and it was a Sunday which would make it easier for me to track weight loss from week-to-week. When I stepped onto the scale that first day it read 184 pounds. My official goal was to lose 20 pounds, because I read somewhere that having a goal makes it easier to stay committed.

I ate 5 small meals every day, no matter how hard it was. I kept reminding myself that it was a life change and the harder it was now, the better it would be in the end. It was all about having self-control and finding healthy snacks. I packed meals and carried them with me if I knew I was going to be at work or in a class. I kept to a schedule—every 2 hours I would eat. I drank only water, and a glass of skim milk with breakfast. For the first 6 weeks, I didn't eat after 6:30 p.m. so that my body had time to digest what I had eaten before I went to sleep. I also ran 2 miles, 3 times a week. I knew cardio is what burns the fat, so that is what I stuck to. I stopped being so hardcore about the running after week 6 because I just didn't have the time to keep up with it, but the eating habits were making a big difference.


After the first 10 weeks, I was down 18 pounds. It was an awesome feeling! I had just about reached my goal and it had taken only 2 ½ months. The end stretch was the hardest—those last 2 pounds were a killer. I was at a standstill for 2 weeks and I was really discouraged. I just started eating grapefruit in the morning the next week to jump-start my metabolism and by the end of week 13 I had officially lost 27 pounds. It felt like I had climbed the biggest mountain in the world the day I got on the scale and it read 157. I was amazed. The new task was going to be keeping it off. I started to put back a treat here and there and I accepted that there would be times I would have to eat later than 6:30 at night. The best part was that I was still losing weight. By week 16, I was down 31 pounds. I had been able to keep it off and then lose a bit more.

This semester, I committed to a fitness plan with my roommate just to tone up. I eat what I want now, just in moderation and I mentally keep tabs on what I have eaten throughout the day. I have lost another 7 pounds and it was all about having a positive attitude regarding what I was doing and realizing that being healthy was what mattered. The numbers were just something fun to keep track of.



JUST DO IT.





**Are you** truly unshakeable? Unbeatable?  
Undeniable? Are you truly maximizing every  
ounce of sweat you put in? Are you truly training  
for your team? For you? For set-in-stone glory?  
Are you truly ready to rescue victory from the  
split second, the tough call, the off day?

**ARE YOU  
TRAINING  
TRUE?**

# 3 Good Reasons to Maintain a Healthy Diet

## How healthy eating can help YOU be a better student

by Clifton Ward

As a student myself, I have plenty of experience dealing with the effects of not eating healthy. It can seem like there are more important things to get done in the day than worrying about what I'm eating: classes, homework, work, changing diapers, etc. Most of the time, simply worrying about keeping my GPA up and learning what to do for future careers and such is enough to make what I'm eating and how it plays a part in my education at the bottom of my list of important things to think about.

The truth is, what a student eats directly affects her ability to learn and her overall performance as a student. From a person who has felt the repercussions of ignoring the foods that do a body good, here are three wonderful benefits to help motivate any lover of learning.

### 1 Healthy Eating Gives You Energy!

Most students have at some time or another blamed their academic shortcomings on a lack of energy. Though many students eat plenty, as can be confirmed by the oh-so-prevalent "freshman 15," much of what is being eaten is

not of sufficient nutritional value to give the students what they need to feel as well as they should (this can be confirmed by the low freshman GPA). The National Health/Education Consortium says that "when students are hungry or undernourished, they are irritable, have diffi-





culty concentrating, and experience low energy, all of which can impede learning.” This same study points out the obvious but important fact that unhealthy eating makes it easier for illness and disease to enter your body. Being sick is a definite energy killer. If we need as much energy as we say we do, why not throw some more nutritional foods into our diet and get energized?

## **2 Healthy Eating Relieves Stress!**

About healthy eating and stress, The BYU-Idaho Counseling Center says, in a very simple but poignant epigram, “When our bodies function more effectively, our capacity to deal with stress is increased.” For many students, oppressive and debilitating stress is an ever-present evil that is nearly impossible to be rid of. A simple remedy to alleviate, if not eliminate, this burden on learning is to eat healthy. For

something as arduous as stress, a salve like this just seems too good to be true. But it is both good and true! A healthy diet breeds a healthy attitude and an increased ability to be a happy, fully-functioning individual.

## **3 Healthy Eating Improves Brain Function!**

This fact is probably the most important of the three. If our brains are working to their full capacity, worrying about grades will decrease; the left over energy can be spent elsewhere. Likewise, if we’re not constantly worried that we’re not good enough or that a class will defeat us, the stress caused by these worries will be gone and we will be just that much happier, not to mention emotionally and psychologically healthier. Take a look at these foods that you should consider implementing into your diet to improve your ability to think critically, solve problems, think clearly, concentrate, remember, and im-





prove the overall physiological health of your brain:

- Egg Yolks
- Spinach
- Yellow-fin tuna
- Cranberries
- Sweet Potatoes
- Strawberries
- Kidney Beans
- Raisin Bran
- Lamb Loin
- Wheat germ

This is in no way an exhaustive list of brain foods, but this diverse selection gives the very best of them and gives at least one or two foods that any of you could enjoy. To read a complete description of the benefits of these and similar foods, visit: <http://www.thedietchannel.com/Food-For-Thought.htm>

So whatever your academically related deficiencies or struggles may be, incorporating a healthy diet into your daily life is worth it. Your grades will improve. Your confidence will rise. And most importantly, you will be happy because you have the knowledge that your ability to acquire knowledge will become easier.

Massey, Marilyn. "Adolescent Nutrition: Needs and Recommendations." *The Clearing House* 75.6 (2002): 286-291. Web. 14 Nov. 2010.

"Stress Management." *BYU-Idaho Counseling Center*. 2010. Web. 14 Nov. 2010.

Turcotte, Michèle. *TheDietchannel.com*. 2006. The Diet Channel. Web. 14 Nov. 2010.



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# Fitness: Not *Just* About



**Heart-Healthy Guidelines YOU need to know**

# Looking Great by April Ruhl

Many American women want to be healthy and are striving to be fit for the obvious benefits—a more attractive body, more self confidence, or more energy for work, school, or family. These short-term benefits are excellent reasons for maintaining fitness; however, fitness yields more prominent benefits in the long-term. Cardiovascular Disease (CVD) is the leading cause of death in the United States and is almost entirely preventable by... you guessed it, fitness! According to the most recently published American Heart Association statistics, “Nearly 2,300 Americans die of CVD each day, an average of **one death every 38 seconds**,” causing more deaths than cancer, chronic lower respiratory disease, and accidents combined! Most of these individuals are 65 years of age and older, but the cause is the same—poor life-long health decisions and habits. *Now is the time to work towards fitness, while you are in your twenties, because it may save your life down the line!*

Many people associate fitness only with being a healthy body weight, but fitness is much more than being skinny. In fact, the women who wear size 0 jeans that everyone else is so jealous of may not be any more fit than you are. Fitness can be better categorized as a lifestyle than a body weight. There are four universally agreed criteria that must be consistently followed in order for someone to be considered “fit.” These criteria, known as “Healthy Lifestyle Characteristics” by the American Heart Association, are as follows:

1. Regular physical activity and exercise
2. A nutritious and balanced diet
3. Weight control
4. No drinking, smoking, or use of illegal drugs

## #1: Regular Physical Exercise

**A healthy amount of physical exercise consists of 30 minutes of aerobic exercise a day, four or more days of the week.** Aerobic exercise is long-lasting activity such as walking, running, biking, dancing, etc. According to the Texas Heart Institute, this type of exercise “drives the body to use oxygen more efficiently and delivers maximum benefits to the heart, lungs and circulatory system.” Among the different types of cardiovascular disease, Coronary Heart Disease (CHD) is one of the most common. This disease develops when the arteries on the outer surface of the heart, called the coronary arteries, become lined with a buildup of fatty deposits on their inner lining. This plaque buildup eventually leads to the narrowing of the blood vessels, which is very unhealthy because it causes unnecessary strain to the heart and leads to a heart attack if an artery is completely blocked off. In the United States, CHD was the cause for **one of every six deaths** in the year 2006. Also, both the American Heart Association and the National Heart, Lung and Blood Institute recognize physical inactivity as a significant risk factor for developing coronary artery disease.





### #2: Nutritious and Balanced Diet

Our bodies depend entirely on what we eat to provide the nutrients needed to function properly. Some of the main nutrients we need are proteins, carbohydrates, lipids (preferably unsaturated fats), fiber, vitamins, and minerals. The United States Department of Agriculture has outlined a healthy balance between each of the food groups in the “MyPyramid” diagram. Eating more of certain nutrients can actually reduce CVD. For example, it is a known fact that eating fewer fats can reduce the risk of CVD because it prevents fatty deposits from building up on the lining of the coronary arteries. Eating more vitamins A, C, and E also may prevent CVD because these vitamins actually deter the formation of plaque in the arteries. Overall, by eating a bal-

**“Being even slightly overweight increases your risk of heart disease”**

anced diet, your risk of heart disease decrease.

### #3: Weight Control

According to the U.S. Department of Health and Human Services, **68% of American Adults age 20 or older are either overweight or obese** (Body Mass Index of  $\geq 25$ ). There is a known correlation between body weight and risk of CVD. The Texas Heart Institute states, “Being even slightly overweight increases your risk of heart disease, and being obese...is clearly linked to cardiovascular problems.” If you are not at a healthy weight, consult your physician on ways to reach a healthy weight or take a proactive role in keeping track of how many calories you eat versus the amount of calories you burn a day. Losing weight requires a lot of control and



patience, but an unwavering desire to lose weight is the first step!

Considering we live in an LDS community here at BYU – Idaho, I think we’ve got criteria #4 (abstaining from drugs and alcohol) mastered. However, we should be constantly striving to live by the first three criteria, which will in the long run greatly reduce our risks of developing CVD.

**“...it is not just weight or appearance that categorizes someone as being fit.”**

So remember, it is not just weight or appearance that categorizes someone as being fit.

Someone that does not incorporate *all four criteria* into her daily life may still be at risk for getting cardiovascular disease later in life. Ladies, make a personal goal *now* to live life healthy! Be

fit! The long-term benefits of fitness are well worth it!

American Heart Association. *Heart Disease and Stroke Statistics—2010 Update*. Dallas, Texas: American Heart Association, 2010. Web.

Johnson, Michael D. *Human Biology: Concepts and Current Issues*. 5th ed. San Francisco: Pearson Education, Inc., 2010. Print.

“Statistics Related to Overweight or Obesity.” *Weight-control Information Network*. Feb. 2010. U.S. Department of Health and Human Services. Web. 10 Nov. 2010.

Texas Heart Institute. *Heart Owner’s Handbook*. New York: John Wiley & Sons, Inc., 1996. Print.







# MY BUTT IS BIG

AND ROUND LIKE THE LETTER C  
AND TEN THOUSAND LUNGES

HAVE MADE IT ROUNDER

BUT NOT SMALLER

AND THAT'S JUST FINE.

IT'S A SPACE HEATER

FOR MY SIDE OF THE BED

IT'S MY AMBASSADOR

TO THOSE WHO WALK BEHIND ME

IT'S A BORDER COLLIE

THAT HERDS SKINNY WOMEN

AWAY FROM THE BEST DEALS

AT CLOTHING SALES.

MY BUTT IS BIG

AND THAT'S JUST FINE

AND THOSE WHO MIGHT SCORN IT  
ARE INVITED TO KISS IT.

**JUST DO IT.**

NIKEWOMEN.COM 





# How Healthy Are You Really?

Find out **NOW!**



**BYU—Idaho**

**Wellness Center**

by Samuel Johansen

**D**o you ever get the feeling that you should be healthier, but you don't know exactly what to improve or how to go about improving in an effective and efficient manner? Who has time for focusing on healthy living at college anyway? What's more, who has the money to order the kinds of tests it would take to determine how healthy they are?

The Wellness Center at BYU-Idaho has your answers without costing an arm and a leg to get healthy (that would be counter-productive!).

The Wellness Center, located in room 152 of the Hart building, is a student-run program whose goal, according to the center's web site, is to "contribute to the overall health and quality of life of the BYU—Idaho campus community." So basically, it is a place where trained students help other students assess their bodies' wellness and teach them how to improve their health.

The primary function of the Wellness Center is to provide **free or affordable services** from blood pressure







tests to a full blood-lipid profile. Free tests include blood pressure, body composition, flexibility, muscular strength and endurance tests, nutrition analysis, and more. Paid services include a bioimpedance test and a blood-lipid profile, costing \$1 and \$15, respectively, as listed on their web site. Any of the above services, offered by a doctor in this area, would individually cost you in the neighborhood of \$25, if advertized as “low-cost screening.”

If you are like me and some of those tests sounded way too technical for you to care about, the web site gives a brief overview of the purpose and importance of each individual test. None of them seem unnecessary or unhelpful; in fact, reading about them helped me to see more clearly the **importance of being able to monitor my health and wellness**. Getting a clearer picture of your health will help you to more clearly establish a plan to live healthier,



focusing on the places most in need of improvement.

In addition to their services, the Wellness Center has a few programs in which any student can participate. Right now, you can enter a nutrition awareness program for an opportunity to **win the P90X exercise program**, just for learning how to eat right! Also, stop by the wellness center to pick up a **free pedometer** and get entered into a weekly drawing for other prizes, with a chance at

a grand prize at the end of the semester for having the most steps.

For more information about the wellness center, visit their web site at <http://www.byui.edu/CampusWellness/default.htm>, call their office at (208) 496-7491, email them at [Wellness@byui.edu](mailto:Wellness@byui.edu), or just stop by the Hart building, room 152 from 8 a.m. – 6 p.m., Monday – Thursday and 9 a.m. – 4 p.m., Friday. Check them out and get working toward the healthy lifestyle you have been looking for!

WELLNESS CENTER SERVICES	
SERVICE	COST
Blood Pressure	FREE
Anthropometric Measurements	FREE
Body Composition	FREE
Cardiovascular VO2 Max	FREE
Flexibility	FREE
Muscular Strength	FREE
Muscular Endurance	FREE
Nutrition Analysis	FREE
Bioimpedance	\$ 1
Blood Lipid Profile	\$ 15

“Campus Wellness.” *Brigham Young University – Idaho*. Web. 12 Nov. 2010.





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HEALTH FACTS

# HEALTH ASSESSMENT: UTILIZING BODY MASS INDEX



**Great News!**  
There's a better way to assess your health than just weight—it's called **Body Mass Index (BMI)**. Check it out!

by Alicia Garcia

Body Mass Index (BMI) is one of many ways to measure body fat and can be used to screen individuals for obesity as well as being used as a measure of overall health or fitness. BMI is

the quickest and easiest method of measuring body fat. According to the Center for Disease Control and Prevention (CDC), other methods used to measure body fat include skinfold thickness measurements (with calipers), underwater weighing, bioelectrical impedance, dual-energy x-ray absorptiometry (DXA), and isotope dilution. Some of these other methods are certainly more accurate, however, they are not always readily available, and are often either expensive or require highly trained personnel to administer the test.

BMI is one way to determine overall health and assess an individual's body based on different categories, including: underweight, normal weight, overweight, obese and extremely obese. While BMI is a great starting point, other factors such as family history, physical activity and diet must also be taken into consideration when testing body fat and rendering an assessment of an individual's overall health.





According to the CDC, the relationship between the BMI number and fatness is usually fairly accurate; however the correlation varies by sex, race, age, an fitness level. The variations include:

- At the same BMI, women tend to have more body fat than men.

- At the same BMI, older people, on average, tend to have more body fat than younger adults.
- Highly trained athletes may have a high BMI because of higher weight as a result of increased muscularity rather than increased body fatness.

### BMI CHART FOR WOMEN

	NORMAL						OVERWEIGHT					OBESE									EXTREME OBESITY			
BMI	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42
Height (Feet-Inches)	Weight (Pounds)																							
4' 10"	91	96	100	105	110	115	119	124	129	134	138	143	148	153	158	162	167	172	177	181	186	191	196	201
4' 11"	94	99	104	109	114	119	124	128	133	138	143	148	153	158	163	168	173	178	183	188	193	198	203	208
5' 00"	97	102	107	112	118	123	128	133	138	143	148	153	158	163	168	174	179	184	189	194	199	204	209	215
5' 01"	100	106	111	116	122	127	132	137	143	148	153	158	164	169	174	180	185	190	195	201	206	211	217	222
5' 02"	104	109	115	120	126	131	136	142	147	153	158	164	169	175	180	186	191	196	202	207	213	218	224	229
5' 03"	107	112	118	124	130	135	141	146	152	158	163	169	174	180	186	191	197	203	208	214	220	225	231	237
5' 04"	110	116	122	128	134	140	145	151	157	163	169	175	180	186	191	197	204	209	215	221	227	232	238	244
5' 05"	114	120	126	132	138	144	150	156	162	168	174	180	186	192	198	204	210	216	222	228	234	240	246	252
5' 06"	118	124	130	136	142	148	155	161	167	173	179	186	192	198	204	210	216	223	229	235	241	247	253	260
5' 07"	121	127	134	140	146	153	159	166	172	178	185	191	198	204	211	217	223	230	236	242	249	255	261	268
5' 08"	125	131	138	144	151	158	164	171	177	184	190	197	204	210	216	223	230	236	243	249	256	262	269	276
5' 09"	128	135	142	149	155	162	169	176	182	189	196	203	210	216	223	230	236	243	250	257	263	270	277	284
5' 10"	132	139	146	153	160	167	174	181	188	195	202	209	216	222	229	236	243	250	257	264	271	278	285	292
5' 11"	136	143	150	157	165	172	179	186	193	200	208	215	222	229	236	243	250	257	265	272	279	286	293	301
6' 00"	140	147	154	162	169	177	184	191	199	206	213	221	228	235	242	250	258	265	272	279	287	294	302	309
6' 01"	144	151	159	166	174	182	189	197	204	212	219	227	235	242	250	257	265	275	280	288	295	302	310	318
6' 02"	148	155	163	171	179	186	194	202	210	218	225	233	241	249	256	264	272	280	287	295	303	311	319	326
6' 03"	152	160	168	176	184	192	200	208	216	224	232	240	248	256	264	272	279	287	295	303	311	319	327	335
6' 04"	156	164	172	180	189	197	205	213	221	230	238	246	254	263	271	279	287	295	304	312	320	328	336	344

Adapted from: George Bray, Pennington Biomedical Research Center; *Clinical Guidelines on the Identification, Evaluation, and Treatment of Overweight and Obesity in Adults: The Evidence Report*, National Institutes of Health, National Heart, Lung, and Blood Institute, September 1998.

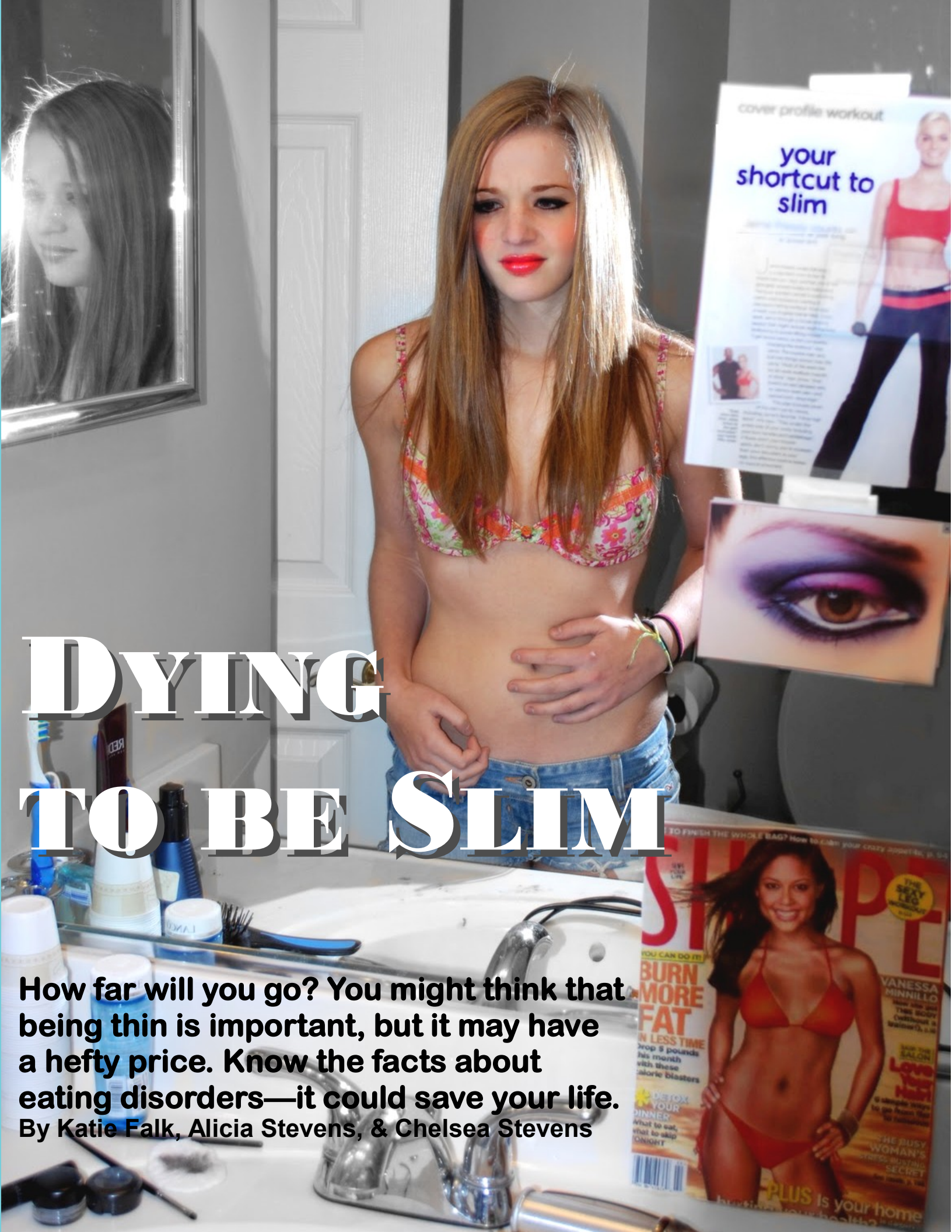


**WHAT'LL WE LOSE ON THIS DIET?  
LOTS OF PEOPLE EVERY YEAR.**

People with bulimia don't just induce vomiting. They induce heart arrhythmias, intestinal bleeding and rupturing of the esophagus. It can be life threatening, but it can also be treated. Go to [myneda.org](http://myneda.org)







# DYING TO BE SLIM

How far will you go? You might think that being thin is important, but it may have a hefty price. Know the facts about eating disorders—it could save your life.  
By Katie Falk, Alicia Stevens, & Chelsea Stevens







Think back to the beginning of your college experience. You've signed up for classes, purchased your textbooks, and picked out a new backpack. Only one problem left: determining what to wear on your first day of school. You try on outfit after outfit, becoming more and more frustrated with the person you see in the mirror. Your new top accentuates your love handles; your favorite jeans now make your butt and thighs look huge; every T-shirt shows off your "Relief Society arms" and every sweater makes your mid-section look lumpy. What a dilemma!

Our society places a strong emphasis on the value of being skinny. Russell Baker, an American Pulitzer Prize winner once said, "Americans like fat books and thin women." Although his comment is humor-

ous, it truly acknowledges our society's fixation on being slim and reveals a standard of thinness as ideal. The idolizing of ultra-thin bodies is consistently present, aided significantly by the media and societal norms. The constant portrayal of slenderness as a determinant of beauty has created an obsession with being skinny which is nearly epidemic, especially for college age girls. This obsession causes many young women, even at BYU – Idaho, to persistently seek attainment of the socially-constructed ideal body type: a thin body.

Many students have such a strong desire to be thin that they go to extreme measures which can lead to the development of eating disorders. Two of the most common eating disorders, both nationwide and



on our campus, are bulimia and anorexia nervosa. Robin T. Peterson, in her article entitled, “Bulimia and Anorexia in an Advertising Context,” explains that “Alarming high numbers of individuals, particularly girls and young women, have become victims of bulimia and anorexia nervosa,” with “close to twenty percent of the individuals in the age range 17-20”. The social pressures to be thin seem to be particularly influential on females. While many high school age girls are affected by these diseases, “The highest incidence of victims...is in college age females,” during a time when physical attractiveness seems especially important. While students with these disorders may see no harm in their behaviors, “The impact upon the physical, emotional, and mental health of these victims and their families [is] substantial. These diseases can have detrimental effects, and thus necessitate a greater awareness and understanding of them. Because eating disorders are so common for college age females, it is likely that during your time at school, you will have a friend, roommate, or classmate with bulimia or anorexia nervosa—or that you, yourself, may struggle with these issues. It is important to understand the contributing factors, characteristics, and effects of these disorders so that you may help others—or yourself—with overcoming these challenges.

#### BODY IMAGE

Diets have come and gone, but the passion for slimming down has steadily inclined over the years and is more prevalent today than ever. It seems as though the focus on body image has reached an obsessive level, particularly in the U.S., and prominently on college campuses. There is a perceived necessity for everyone to be one of the “beautiful people” if they are to be loved and successful. Becoming one of the “beautiful people” often seems to necessitate acquiring the ideal body type, which is typically considered to be an exceptionally thin body type. This current health craze epidemic has produced a population consumed by the need to be attractive, and thus thin. The resulting fitness consciousness is a healthy trend, but the diet craze, which has also been induced, may be more harmful than beneficial.

#### **Relationship with Food**

The relationship a woman develops with food plays a

### **“The highest incidence of victims is in college age females.”**

significant role in how she views the act of eating. This relationship seems to serve a particularly important function for college age students. Research shows that their interest in food is not in its nutritional properties, but rather in their relationship to it and through it to their bodies and to extreme thinness as a standard of beauty. Instead of viewing and using food’s nutritional value as a benefit to a healthy lifestyle, many students see it specifically as a cause for making them fat. Women are especially more concerned about calories than vitamins, minerals, fats, carbohydrates, and proteins. By being so concerned only with the intake of calories, many female students may neglect necessary nutritional components in their diet, and suffer health issues as a result.

It is particularly critical for all college age adults, not just women, to consider the ramifications of their diets. It is wise for people of all ages to develop healthy eating habits, but perhaps more important during the “college years” when students are likely to experience consistent stress and sleep deprivation in order to keep up with school, work, and other commitments. Because of this, a well-balanced and nutritious diet is very important in maintaining the body’s health and resistance to illness. Despite this need, many students develop poor eating habits, even though it is in direct conflict with the goal of achieving the socially admired physique. Even attending an institution like BYU – Idaho, where we have an understanding of “spiritual beauty,” most of us still feel the need to look like supermodels in order to attract a mate and be accepted socially. As a result, even our spiritual-based campus has students who suffer from distorted body image and the associated byproducts of low self-esteem, unhealthy dieting habits, anxiety, depression, and eating disorders.

Our relationship with food is established over time and is developed through our eating patterns and habits. We view the act of eating differently, depending on our personal relationship with food, which is developed as a result of our experiences with food rules which are embedded in the value system of the U.S. society and taught, essentially, through social and cultural norms. In “Food Rules in the United States: Individualism, Control, and Hierarchy,” Carol M. Counihan explains that “Food rules convey a belief in self-



control and individual choice and they uphold hierarchical social relations.” Individualism and independence are manifested by an individual’s ability to define their own good diet. In this context, “‘good’ and ‘bad’ foods are simply what we make them to be,” regardless of how healthy the choices are, or how much and in what manner they are consumed. Therefore, “eating is a behavior which constructs the self,” as it promotes individualism and personal power through exercising judgment over dietary consumption. Thus, diet and eating habits are an external manifestation of a person’s individualism and independence.

### Societal Pressures

Women are constantly being bombarded with the pressure to conform to certain body shape standards of thinness. The media is one significant factor in the development, maintenance, and promotion of the trend toward the ideal body image being extreme and unrealistic thinness. Commercials, television shows,

**“BMI is an important factor in how female physical attractiveness is perceived by both men and women.”**

and movies endorse and portray this ideal by using beautiful actresses in roles where the thin, pretty girls always get the guy, while heavier people are portrayed as either funny or obnoxious—entities devoid of sexual appeal. Internalization of societal pressures concerning existing standards of attractiveness appears to

intensify the media’s effects on women’s perceptions of their own bodies and satisfaction with them. With the media advertising and promoting the trend of extreme thinness, women begin to sacrifice their health and safety in order to reach this standard of beauty. Many, in an act of desperation, turn to crash diet-

ing, or develop eating disorders. As they do this, the perceived standard of beauty or acceptable body type may become more and more extreme and more and more unobtainable.

### Consequences of a Negative Body Image

Women on college campuses are under extreme pressure to measure up to social and cultural ideals of beauty, which can lead to poor body image. Having a



poor body image can cause many problems. It often leads to low self-esteem, unhealthy dieting habits, anxiety, depression, and eating disorders. Poor self-confidence is a frequent companion of low self-esteem. Low self-esteem and poor self-confidence may be significant factors in general findings of more attractive people receiving preferential treatment in social and professional environments. Poor body image and low self-esteem can become reinforced when attractive people are unfairly given preferential treatment and less attractive people receive discriminatory or punitive treatment without justification. With a negative body image, you can develop a distorted perception of your shape and size as you compare your body to others and feel shame or anxiety about your own body. Being unhappy with your body can affect how you think and feel about yourself as a person, and can often cause you to believe erroneously that your weight is a determinant of your self-worth. Also, when a female's perception of herself is distorted, believing her imperfections to be magnified far beyond reality, it can lead to further dissatisfaction, as she perceives her own body to be further from society's creation of the ideal body type. As a result, the prevalence of eating disorders has increased as people strive to reach the perfect size.

Body Mass Index (BMI) is often used to measure the overall health status of an individual by evaluating weight based on height. In response to societal standards of beauty, research has found that the BMI is an important factor in how female physical attractiveness is perceived by both men and women, wherein a low BMI is deemed most attractive. A group of scientists, Tovee, Emery, and Cohen-Tovee, conducted an experiment that examined perceptual distortion. The researchers asked 204 female observers, which consisted of 31 anorexic, 30 bulimic, and 143 control, to estimate their own as well as other individuals' body mass index (BMI). An interesting finding was that anorexic and bulimic observers not only overestimated their own body mass as well as others, but that they rated a significantly lower body mass to be most favorable and attractive. This study showed that as the BMI of the observer declined, the overestimation of the body mass increased. This reveals a strong connection between a low BMI and a distorted perception of body image. This perception compounds the difficulty in achieving the desired appearance as these individuals perceive themselves to be fatter or heavier than they

really are in addition to perceiving their physical goal as being further from their reach. This understanding provides valuable insight as to how an initial health consciousness can morph into an eating disorder as individuals strive to reach the ultra-thin body revered by society.

#### EATING DISORDERS

Poor body image is a contributing factor in the development of eating disorders. In "Prevention of Disordered Eating Among Adolescents," Marilyn Massey-Stokes states that "Concerns with body weight and body image coupled with unhealthy weight management practices may manifest themselves in clinical eating disorders." Thus, because of the growing focus on body image, many women, even on BYU-Idaho campus, resort to poor eating habits. These poor eating habits may eventually lead to the development of eating disorders.

For many woman who become obsessed with striving to conform to this socially-constructed, ideal body type, bulimia and anorexia nervosa—two of the most well known eating disorders—often seem like logical methods for achieving these goals. Because of this, these ailments are rapidly gaining popularity in the United States and at BYU – Idaho. Even here, we remain fixated upon thinness. Students who resort to these radical behaviors often assume that starving or purging are insignificant, failing to see or understand the long-term consequences of these actions. Such naivety—or even blatant disregard for conse-



quences—is relevant to the fact that the onset of both Anorexia and Bulimia usually occurs in adolescence to early adulthood, at a time when immaturity may contribute to this mindset. Also, society’s impact on body image seems to most strongly affect women, as revealed by the fact that 90% of bulimics and 95% of anorexics are women.

### Bulimia Nervosa

We, as women, must be aware that bulimia and anorexia are unique and manifest themselves differently. Bulimia is a disorder characterized by bingeing and purging. Bingeing is defined as consuming more than the recommended daily food allowance, often as much as 3 to 27 times more. The U.S. Department of Health and Human Services reveals that, “A person with Bulimia feels he or she cannot control the amount of food eaten. This lack of control the bulimic feels permeates into their everyday life. By bingeing and purging, bulimics maintain some of that control they feel is lacking.” The binge eating is often followed by purging or self induced vomiting. Many bulimics also abuse or misuse laxatives, diuretics or other medications for fear of gaining weight. They may also exercise a lot, eat very little or not at all, or take pills to pass urine often to prevent weight gain. Bulimics fear gaining weight and loss of control. However, they often do not exhibit weight loss. As a result, those who suffer from bulimia

**“90% of bulimics and 95% of anorexics are women.”**

actually remain at a normal, healthy weight, thus making their habits harder to detect.

As mentioned, it can be difficult to identify a family member, friend, or roommate with bulimia. Typically, purging, and even bingeing, is done in private because the person with bulimia feels shame or disgust. However, other signs can be useful in identifying individuals with this disease. Signs to look for include teeth that look clear, swollen cheeks or jaw, and broken blood vessels in eyes. Often, Bulimics will frequently go to the restroom, typically right after eating, in order to purge what they have eaten. These signs are common and can be signifiers of bulimia. It is important to

be aware and informed of the symptoms and signs of bulimia, so that we may help those we care about to overcome this challenge.

The behaviors associated with bulimia can be harmful. Because nothing appears to be wrong with a bulimic’s body, individuals assume nothing is wrong. However, the most severe damage done to a bulimic’s body occurs internally as a result of bingeing and purging. For this reason, it is so important for us to be aware and conscious of other’s behavior around us. Bulimia can lead to an irregular heartbeat which in turn can lead to weakening of the heart muscle, and eventual heart failure. The teeth and stomach are also greatly affected. The stomach can form ulcers and can even rupture because of the bingeing and purging engaged in by the Bulimic individual. The teeth of those with bulimia may be one of the most significantly affected areas. The mouth can form excessive cavities, gum disease and tooth sensitivity because of bulimia.

### Anorexia Nervosa

Many individuals, 95% being women, opt for anorexia nervosa, another equally dangerous and difficult disorder. According to psychologist, Dr. Kyle D. Killian, anorexia nervosa is a “complex emotional disorder characterized primarily by an obsession with food and weight.” Anorexic individuals become obsessed with food and weight often because, like bulimics, they lack a control throughout their individual lives. What we consume on a daily basis is something that can be controlled. Therefore, individuals with anorexia use it to regain order and control. Often, women on college campuses turn to eating disorders because they are







overstressed, overworked, and overtired. It may seem like a logical solution to a life spinning out of control, but do not be deceived.

Because of this need for control, anorexic individuals often manipulate their diet and exercise in order to maintain a large calorie deficit each day. Women who are anorexic often cook for others and maintain an exercise regimen, seeming to be normal, healthy people. However, this is a simple façade. Individuals who suffer from this disorder often restrict themselves to eating fewer than 1000 calories per day and exercise excessively, burning far more calories than they consume. Like bulimics, anorexic individuals may also abuse laxatives, diuretics or other prescription drugs by a means to maintain a low weight. Each of these behaviors is a result of the constant determination to be slim and be perceived as a “healthy individual.” We, as friends and neighbors, need to be constantly aware of those whom we come in contact with. Although someone looks beautiful and thin on the outside, there may be turmoil and self hatred happening within.

There are many indicators of anorexia. Due to the dietary restrictions and often excessive exercising, rapid weight loss is usually the most obvious indicator of this disorder. However, it is not the only one. Because students with anorexia often feel pressure to be perfect, they can develop obsessive behaviors associated with food. Often young women with anorexia will cut their food into small pieces, or arrange things in a specific arrangement on their plate. Furthermore, because young women with this disorder can be so meticulous and hard on themselves, they often alternate between this disorder and bulimia, seeking any means

necessary to achieve the ultra-thin body.

Anorexia is a very dangerous disorder and can lead to many problems. The affects of anorexia are generally more outward than bulimia because bulimic individuals can still maintain a normal weight for their height. Anorexic students usually look very slender, to the point of being too thin. According to Lindsey Hall and Monika Ostroff, authors of the book, *Anorexia Nervosa: A Guide to Recovery*, “Anorexics usually maintain a weight that is 15% less than their ideal or recommended weight.” This is often accompanied by the loss of menstrual cycles because of the lack of nutrients received by the body. Because of these drastic changes, anorexia is often easier for family and friends to detect.

### The Primary Problem

Eating disorders are not simply a display of poor habits or behavior. Hall and Ostroff explain that “Anorexia Nervosa is much more than just a diet gone awry...It is a complex problem with intricate roots that often begins as a creative and reasonable solution to difficult circumstances, and is thus, a way to cope.” This statement applies simultaneously to bulimia nervosa. Both anorexia and bulimia are secondary symp-



toms to a primary problem. They are both ways in which individuals cope with a loss of control in their own lives. Anorexia, in particular is a way in which individuals who feel their lives are spinning out of control gain back their footing, by manipulating one of the few things they feel they can control: their eating. However, it is indeed a complex neurological and emotional disorder, not just a behavior. Thus, it is important to be sensitive when striving to help individuals with this disorder.

### Getting Help

While anorexia and bulimia are both very dangerous and complex disorders, there is hope. If you or someone you know is suffering with these eating disorders, help is available. Often, women are able to receive treatment as a result of a friend or family member's recognition of the disorder. Both anorexia and bulimia have certain signs and signals families and friends can look for if they are concerned for a loved one. Because of the complexity of these issues, there are multiple symptoms and signs to look for, but the ability to recognize a student with one of these disorders is very important. These disorders often are part of a larger tapestry of emotional issues being dealt with by the person suffering. These issues and behaviors can often lead to self loathing, then to depression. All of these things combined lead to a feeling of failure in school and personal life.

Because of the widespread affects of eating disorders on college campuses nationwide, BYU – Idaho has taken a proactive approach in preventing and treating these deep rooted issues. We have a Counseling Center here on campus that is a wonderful resource. Their mission statement is as follows: "The Counseling Center therapists and staff provide a confidential and supportive environment where students can share and explore their concerns. Students learn to develop and restore balance to their lives." The counselors are committed to serving the needs of students in a safe, confidential environment. The Counseling Center also offers many resources in regards to eating disorders. They provide free pamphlets about eating disorders and have made resources available through the Counseling Center website: [www.byui.edu/CounselingCenter/EatingDisorderAwareness.htm](http://www.byui.edu/CounselingCenter/EatingDisorderAwareness.htm). Some of



these include ways to prevent eating disorders, steps to self acceptance, and a brief overview of eating disorders. These resources and others have been developed in response to the prevalence of eating disorders at BYU – Idaho as a result of the pressures girls and women feel to be thin.

**"You are not alone."**

The societal pressures to be thin, along with the added stress of school, contribute to the prevalence of eating disorders among students and make this topic one appropriate for examination and discussion. The most important thing to remember is that if you are suffering from an eating disorder, you are not alone. There are people available to talk to. There are an unbelievable amount of resources to consider on campus. Together, we can be successful in our quest to becoming happier and healthier women.

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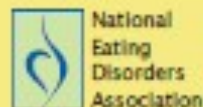
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**THE MONSTER ISN'T  
UNDER THE BED.  
IT'S IN THE FRIDGE.**

People with eating disorders often distort the size of their food, so they'll eat less. They distort the size of their body, so thin looks fat. Which yields a fact that isn't distorted at all – without treatment, many won't survive. But to read about those who have, go to [myneda.org](http://myneda.org)



National  
Eating  
Disorders  
Association

# MY HIPS

## RETURN TO PUBERTY

WHEN I'M IN DANCE CLASS.

MUSIC AFFECTS THEM LIKE HORMONES

MAKING THEM CRAZY

AND SPONTANEOUS

AND OPTIMISTIC

AND PRONE TO DRAMA

AND I DON'T UNDERSTAND THEM

AND SOMETIMES THEY

DON'T UNDERSTAND THEMSELVES.

WHEN THE MUSIC STOPS

THEY'RE STILL CHARGED

DON'T TOUCH ME

SPARKS WILL FLY.

**JUST DO IT.**

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