

# Food insecurity during adolescence is a risk factor for disordered eating in young adulthood

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The COVID-19 pandemic both raised public awareness about and contributed to the problem of household food insecurity. In 2020, 15%

of U.S. households with children were classified as food insecure. However, less is known about how household food insecurity uniquely affects adolescents.

University of Minnesota School of Public Health (SPH) researchers examined how household food insecurity during adolescence is related to [disordered eating](#) and [weight](#) status eight years later. The study, published in the *Journal of Adolescent Health*, was led by SPH Ph.D. candidate Laura Hooper.

"This age group may be affected by food insecurity in unique ways, especially given the tremendous changes in the body and the high energy and nutrient needs required to support their rapid growth and development," said Hooper. "Disordered eating and high weight status, or [obesity](#), are two adverse health outcomes potentially linked with food insecurity."

Hooper used data from Project EAT, a long-running study surveying the health and well-being of adolescents as they age into adulthood. More than 1,300 [adolescents](#) supplied answers to questions about their nutrition, activity and other related factors and behaviors for the study over the course of eight years.

The study found that:

- Household food insecurity during adolescence was a risk factor for new onset of high weight status and binge eating eight years later in young adulthood.
- Among participants who had experienced food insecurity during adolescence, 21% began engaging in binge eating during young adulthood, compared to 16% in those who did not experience food insecurity.
- Among participants who experienced food insecurity during

adolescence, 16% had high weight status for the first time in young adulthood, compared to 11% among those without a history of food insecurity.

"These findings add to the evidence that many health outcomes, such as high weight status, defined by the CDC as obesity, are largely determined by factors outside of an individual's control," said Hooper. "They suggest that policy makers, researchers, public health practitioners and healthcare providers should broadly consider non-stigmatizing upstream solutions that create a more equitable food environment to support all young people to thrive."

Possible solutions could involve policies that make it easier for people to afford their food or increasing equitable access to healthcare, including behavioral health services.

Hooper and the other authors point out that research, clinical, and public health programs for young people often separately approach the issues of [food insecurity](#), disordered eating and high weight status. This study's findings suggest that these three problems are prevalent and interconnected. Therefore, research, clinical and public health approaches to address them should do so in a coordinated and comprehensive manner.

**More information:** Laura Hooper et al, Experiencing Household Food Insecurity During Adolescence Predicts Disordered Eating and Elevated Body Mass Index 8 Years Later, *Journal of Adolescent Health* (2022). [DOI: 10.1016/j.jadohealth.2021.11.026](https://doi.org/10.1016/j.jadohealth.2021.11.026)

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