
Growth and weight changes in teenagers

Summary

- Eating problems, such as overeating or crash dieting, can occur during the teenage years.
 - The way you respond to your child's body image concerns can sway their attitudes and behaviours.
 - Always see your doctor if you are concerned about your child's growth – the doctor can use a range of charts to help assess whether or not your child's growth is of concern.
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There are a variety of ways to assess growth. The transition from child to adult triggers a significant growth spurt. The average teenager may eat staggering amounts of food as their body builds bone and muscle.

Peer pressure and media images may influence the way your child relates to food. Eating problems, such as overeating (which may lead to obesity) or crash dieting (which may lead to underweight) can occur during the teenage years.

Despite what many parents may think, even the most defiant teenagers still look to their parents for guidance. If you encourage healthy eating habits for the whole family, your teenage children are likely to follow your example.

Your reaction is important

Parents are a teenager's main role model, despite the powerful influences of peers and the media. The way you respond to your child's body image concerns can sway their attitudes and behaviours. Suggestions include:

- Be a good role model – don't crash diet or skip meals. Educate your child about the pitfalls of unhealthy eating habits.
- Don't react severely against their choices. Teenagers like to experiment with food choices. For example, some teenagers may want to try being vegetarian. Try to respect your child's choice and help them to plan a vegetarian diet that includes all the essential nutrients.
- Boost your child's self-esteem. Encourage them in physical activities that help them to appreciate what their body can do, rather than what it looks like. Studies show that high self-esteem can protect a teenager against harmful behaviours such as crash dieting.
- Educate your child about the persuasive marketing methods of advertising.
- Encourage your child to find out about health issues and take responsibility for their own attitudes and behaviours. A stubborn teenager may dismiss your advice about nutrition. However, they may react with more enthusiasm if you give them access to information from independent and reliable sources such as your doctor, a dietitian or the Better Health Channel.
- Don't assume that your child is eating less because they are trying to lose weight. The end of a growth spurt often triggers a drop in appetite.

Growth charts in Australia

Growth charts are used to measure growth. Growth charts are taken from population studies and reflect the normal range of height and weight for the population from birth up to adulthood. In 2005 Victoria adopted a recommendation of the National Health and Medical Research Council to use the United States Centre for Disease Control growth charts to assess and monitor the growth of children.

How growth is measured

Doctors, nurses and other health professionals use a variety of ways to assess growth in teenagers. They may use one or a combination of methods. The most common ways include:

- **Growth charts** – standard growth references or growth charts are used to help interpret the teenager's height and weight measurements.
- **BMI** – a calculation of BMI (body mass index) and use of age-specific BMI percentile charts gives an indication of weight-for-height ratio.
- **Body composition analysis** – this measures the amount of body fat or muscle. For example, the 'skin fold test' involves gently pinching the skin with callipers (a two-pronged measuring tool) to assess the amount of fat below the skin. Underwater weighing is a more accurate body composition test, but it's expensive and mostly used for research purposes.

Body mass index (BMI) percentile charts for young people

The body mass index or BMI is the most common way to assess whether a person is underweight, normal weight or overweight. The BMI is a single number that interprets a person's weight in relation to their height. It is calculated by dividing a person's weight in kilos by their height in metres, squared.

BMI percentile charts are available for use in children over the age of two to assess weight and obesity. The charts use percentile cut-offs as a guide only. The 85th percentile and above indicates a child is overweight. The 95th percentile and above indicates obesity.

As children grow, their amount of body fat changes and so will their BMI. That's why a BMI calculation for a teenager must be compared against growth charts appropriate for their age.

Ask your doctor for advice if you are concerned

Always see your doctor if you are concerned about your child's growth. Your doctor can use a range of charts to help assess whether or not your child's growth is of concern.

Puberty can have a major impact on a child's growth. The fact that puberty can occur any time between the ages of nine and 13 years in girls, and 11 and 15 years in boys, makes assessing their development a bit more complicated. That's why it's a good idea to seek professional advice if you're concerned.

Where to get help

- Your doctor
- Dietitians Association of Australia Tel. 1800 812 942
- School Nursing Program, Office for Children and Early Childhood Development Tel. (03) 9096 8417
- The Royal Children's Hospital Tel. (03) 9345 5522
- Department of Health Victoria, Prevention and Population Health.

Things to remember

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