译 | 专家解释为什么LGBTQ群体更容易饮食失调

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Experts Explain Why LGBTQ People Have More Eating Disorders i 专家解释为什么LGBTQ群体更容易饮食失调



By Ariel Sobel September 26 2018 1:57 PM EDT

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While the National Eating Disorder Association reports that the LGBTQ community is disproportionately plagued by eating disorders, experts are saying that being a minority contributes to this dilemma.

国家饮食失调办会报道了LGBTQ群体并不匀称地受到饮食失调问题的困扰,专家们认为,他们作为少数群体的特质是导致这个问题的因素之一。

Dr. Norman H. Kim, national director for program development at Reasons Eating Disorder Center, believes that queer people are drawn to unhealthy eating habits because of minority stress. Behaviors such as binging, purging, and undereating are a symptom of chronic social stress LGBTQ people experience as minorities, he told Stylecaster.

国家饮食失调原因项目发展中心的主任,Norman H. Kim博士告诉Stylecaster,他认为性少数群体会因为他们作为性少数而产生的压力形成不健康的饮食习惯。比如暴饮暴食,强行呕吐,饮食不足等行为就是LQBTQ群体作为性少数所受到的慢性社会压力带来的症状。





The rates at which queer people are having this reaction to being otherized are alarming. According to the National Eating Disorder Assocation, gay men, who are believed to represent five percent of the male population, make up 42 percent of men with eating disorders. They are 12 times more likely to report bulimic purging than straight men. Across the gender line, lesbians, bisexual women, and "mostly heterosexual" women are twice as likely as straight-identified women to engage in binge eating at least once a month.

性少数群体因被异己化而产生饮食问题的比率很惊人。据国家饮食失调协会报道,占男性人口5%的男同性恋群体,在有饮食失调问题男性中的比例是42%。他们出现暴饮暴食问题的可能性是异性恋男性的12倍。从另一个性别来看,同性恋女性、双性恋女性和'基本异性恋'女性在一个月之内至少暴饮暴食一次的可能性是绝对异性恋女性的两倍。

Transgender individuals also face significant battles with eating disorders. 跨性别者同样面临与饮食失调做斗争的重大问题。





"Studies have shown that compared to their cisgender counterparts, trans youth in particular are more likely to engage in unhealthy fasting, using diet pills and steroids and taking laxatives. In fact, the risk is about four times greater in this population of individuals," psychologist Ashley Solomon told Stylecaster. As Eating Recovery Center's regional managing director of telebehavioral health, she works in Ohio and South Carolina.

心理学家Ashley Solomon向Stylecaster表示: "研究表明跨性别青年,相对于与他们对应的目跨性别者,更容易进行不健康节食或使用节食药品、类固醇、轻写药等药品。确切的说,这个群体面临此问题的风险是其他群体的四倍。"她作为饮食恢复中心信息技术健康保证的地区负责人在俄亥俄和南卡罗莱州工作。

Solomon believes that transitioning is intertwined with discomfort in one's body, and in the process of transforming their secondary sex traits, trans women may develop an eating disorder in their efforts to appear thinner and more traditionally feminine.

Solomon认为性别过渡期与身体的不适应紧密联系,而在转换第二性征的过程中,跨性别女性可能会为了显得更苗条,更加贴切传统女性化的标准而出现饮食问题。





Regardless of whether LGBTQ people are cisgender or trans, Solomon believes that the stigma, prejudice, and rejection the community regularly faces contribute to poor physical and mental health as well as low self-esteem. These struggles are key risk factors for an eating disorder.

无论LGBTO群体是不是跨性别者,Solomon认为这个群体日常面临的羞耻,偏见与排斥会危害他们的身心健康并且会挫败他们的自尊心。这些问题是造成饮食失调的关键因素。

"Eating disorder behaviors generally develop as a mechanism for coping with seemingly unmanageable feelings and stress," Solomon said. "In particular, a personal and cultural history of social stigma and discrimination is a major risk factor for developing mental health challenges, including eating problems. For someone who has the genetic makeup to be at risk for an eating disorder, bias, bullying, family rejection, and an overall hostile world can tip the scales, so to speak, and lead to dangerous eating disorder symptoms."

Solomon说:"饮食失调行为通常是为了应付不可控的情感与压力而产生的机制。尤其要主意的是,个人与文化历史中的社会耻辱和歧视是造成包括饮食失调在内的心理健康问题的重大因素。对于那些本来基因组成就有出现饮食失调风险的人,偏见、欺凌、家庭的冷落和一个整体态度很恶劣的世界很有可能压垮他,并导致一些很危险的饮食失调症状。





However, although LGBTQ people, particularly trans individuals, are disproportionately affected by these disorders, medical professionals often lack the tools to deal with this population.

虽然LGBTO群体,尤其是跨性别个体,不匀称地受这些问题影响,医疗专家却经常缺乏帮助这个群体的手段。

"The greatest danger is that in the eating disorder treatment community, just like most of the medical and psychological communities, there is very little understanding of how to work with [trans] people," Kim explained. "Finding eating disorder specialists who also have experience working with the trans population is essential but can be challenging, although we are seeing increasing efforts to correct this in our field."

"最大的问题就在于,在饮食失调台疗群体中,很少有人知道如何去和跨性别者接触。这个问题在别的医疗和心理部门中也很普遍。"Kim解释道,"即便我们看到很多人在这个领域正不断地努力,发现具有与跨性别者有接触经验的饮食失调专家仍然既关键又富有挑战性。"





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[1] https://www.advocate.com/health/2018/9/26/experts-explain-why-lgbtq-people-have-more-eating-disorders

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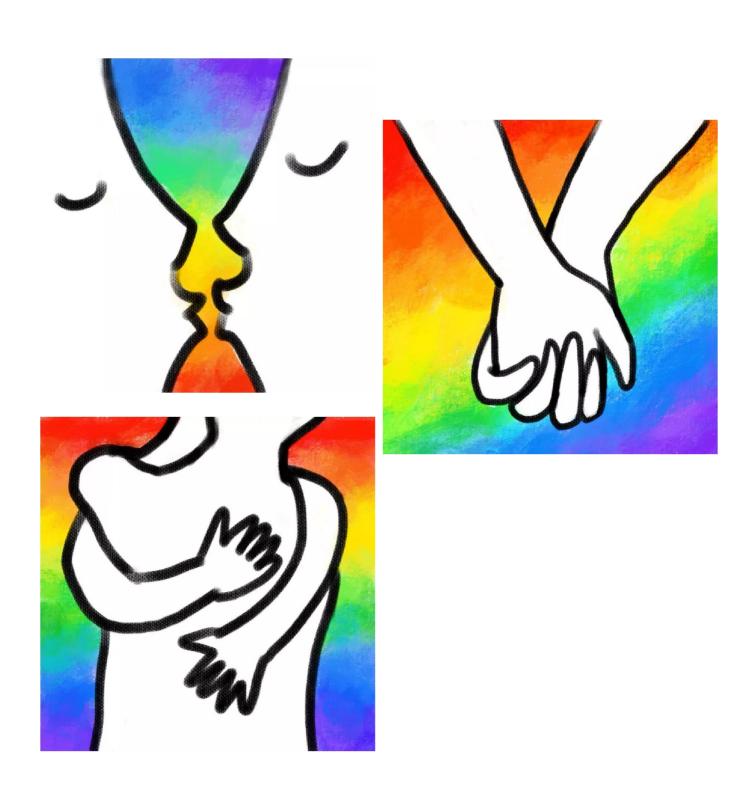
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心理健康状态,即人对内部环境具有安定 愿,对外部环境能以社会上的任何形式去适应。 遇到任何障碍和困难,心理都不会失调。能以适 当的行为予以克服,这种安定、适应的状态就是 心理健康的状态。衡量心理是否绝对健康是非常 困难的。健康是相对的,没有绝对的分界线。一 般判断心理是否正常,具有以下三项原则:

1. 心理与环境的统一性: 正常的心理活

动,在内容和形式上与客观环境具有一致性;

 心理与行为的统一性: 这是指个体的心理 与其行为是一个完整、统一和协调一致的过程;

 人格的稳定性:人格是个体在长期生活经 历过程中形成的独特个性心理特征的具体体现。



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