



Testimony

of

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before the

New York City Council Committee on Health

on

Body Image and Inclusivity

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Good morning Chair Levine and members of the committee. I am Dr. Myla Harrison, Assistant Commissioner of the Bureau of Mental Health at the New York City Department of Health and Mental Hygiene. I am joined by Dr. Chanelle A. Coble, a pediatrician affiliated with NYC Health and Hospitals at Bellevue and NYU Langone Hospitals. On behalf of Commissioner Barbot, thank you for the opportunity to testify on the issues of body image today.

The Health Department is committed to protecting and promoting the health of all New Yorkers and aims to ensure that New Yorkers have access to high quality mental health care, preventive and primary care, and nutritious food regardless of zip code.

No one should face discrimination in any form, especially biases and prejudice aimed at the way their body looks, and no one should experience societal pressure to change the way their body looks. All people regardless of their body type should be treated with respect and dignity.

While the Health Department does not collect data on rates of body image challenges and eating disorders among New Yorkers, we know from academic work that people who idealize thinness tend to be dissatisfied with their body image and tend to experience anxiety, depression, eating disturbances, and poor self-esteem. Women who are exposed to images of thin women experience not only decreased body image and satisfaction but also increased anxiety.

Because social media is nearly ubiquitous, we need to be attentive to the impact of social influencers on New Yorkers, including celebrities who make money based on the number of people who buy the products they promote online. 72% of Americans use at least one social media site, and for many, social media is part of their daily routine. Among teens, over 90% report being online daily and 70% report using social media multiple times per day. On social media, users may be exposed to images from social media influencers that idealize thinness and promote untested products that claim to bring weight loss and beauty. A study of users of one social media site found that those who endorsed a thin-appearing female body type tended to also engage in social comparison and express intentions to engage in extreme weight loss. Low self-esteem and depressive symptoms have been directly linked with social media users' internalization of thinness as the ideal body form.

Although academic literature on body image has primarily focused on straight, cisgender women, LGBTQ and gender non-conforming people also face pressure to conform to standards of beauty. Among young people, LGBTQ and gender non-conforming youth are twice as likely than their non-LGBTQ peers to be dissatisfied with their body image and four times more likely to report disordered eating behaviors.

Individuals with body dissatisfaction are at greater risk for disordered eating behaviors, such as skipping meals, eliminating certain foods, or engaging in extreme exercise to burn off calories. Research has demonstrated that idealizing bodies and engaging in social comparison on social media are behaviors that are linked to disordered eating. Disordered eating behavior represents one risk factor for eating disorders, however eating disorders are defined by extreme preoccupations with food and weight that interfere with functioning and can be life threatening. While eating disorders are caused by a complex interaction of genetic, biological, behavioral, psychological, and social factors, addressing social media influencers' promotion of untested,

unproven weight loss products may be one strategy that can ameliorate one of the factors that may be related to eating disorders.

The City of New York is working to educate New Yorkers about body image issues and promote inclusivity. The Department of Education provides health education in body image and body confidence for middle school and high school students during the HealthSmart Nutrition unit. At all grade levels, lesson plans include skills development around media literacy and analyzing information for reliability and informed decision making. At NYC Health and Hospitals, physicians screen patients for eating disorders as part of routine primary care, and outpatient treatment for eating disorders is available at certain H+H locations throughout the City. If a patient requires more intensive care such as an extended hospitalization or long-term outpatient care, they are referred to institutions that specialize in this care.

If you or a loved one are seeking help with an eating disorder, we encourage you to call NYC Well. NYC Well is a phone, text, and online chat service that operates 24/7, 365 days a year and is staffed with English, Spanish, Cantonese, and Mandarin speakers, with additional interpretation services available in more than 200 languages. It is a confidential service staffed with crisis counselors and peers with lived mental health experience. NYC Well counselors can refer callers to over 150 providers throughout New York City who offer counseling, treatment, or support for eating disorders.

We also encourage the Council to contact the New York State Department of Health for more information on publicly funded resources and services for people impacted by eating disorders. The State Department of Health funds three Comprehensive Care Centers for Eating Disorders, including the Metropolitan Comprehensive Care Center for Eating Disorders, which is a collaboration of New York-Presbyterian Hospital, Cohen Children's Medical Center, and the New York State Psychiatric Institute at Columbia University Medical Center. With Columbia University Department of Psychiatry serving as an entry point, this Comprehensive Care Center for Eating Disorders offers a comprehensive range of specialized clinical services at all levels of care to patients of all ages.

Regarding the legislation being heard today, Intro 1485, which would restrict the sale of senna- and saffron-based products in New York City, the Administration appreciates Council's concern in enacting protective measures for consumers. However, to date we have not received any complaints about these types of products and do not have the expertise to assess the nutritional effects of these products. We would like to investigate this issue and discuss further with Council the best way to address the potentially harmful effects of these products.

We remain committed to ensuring that all New Yorkers receive the mental health care they need. Thank you to the Council for your focus on these important topics.

I am happy to take your questions.