



Eating disorders

Definition

Eating disorder involve a disturbance of eating habits or weight-control behaviour which results in impairment to physical health or which affects the person's psychological and social functioning.

First Aid for Eating disorders

Step 1: Ask, assess and act (assess the risk of suicide or self-harm)

Any eating disorder poses serious health risks for young people.

Anorexia in particular can lead to immediate health problems, including heart failure and sudden death.

People with eating disorders have an increased risk of suicide and self-harm.

Things to say:

- I know this is difficult, but I am proud of you.
- I might not understand, but if you need someone to talk to I will help as much as I can.
- I trust/believe you.
- I don't know what the right thing is to say, but I am here to listen.
- I'll help you find help
- It's not your fault that you feel like this
- You deserve happiness
- Try to build up their self-esteem
- Give your time and listen to them, and try not to give advice or criticise.
- Ask to speak to them alone or 'find an opportunity'
- Ask them how things are at the moment
- Use open questioning
- Listen more than you talk, let them feel heard
- If they don't open up, let them know you're available if they need to talk in the future
- Take it slowly
- Sensitivity when/if discussing shape and weight
- Aim to build your relationship/engage

Things not to say:

- You Look Great/Healthy/Better than Ever!
- I'm Glad You Ate Dinner/Lunch/Breakfast.
- Don't refer to physical appearance
- Is that all you're eating?
- You are making me worried
- Don't use the term 'eating disorder'
- Don't get drawn into talking about food & appearance

Step 2: Listen non-judgementally

- Stay calm, try not be over-emotional or angry
- Try to see the young persons behaviour as due to an illness rather than due to wilfulness or self-indulgence
- Listen to their concerns: there may be problems in their life that needs to be identified and appropriate support sought

- Emotional and mental health problems such as anxiety and depressions may also be present
- Don't criticise the person's body size or shape
- Speak to them privately and allow time to talk
- Avoid blaming or assigning guilt

Step 3: Give reassurance and information

Explain to the person that they may have an illness and that this can be helped with an appropriate treatment. Most people with eating disorders recover.

People with eating disorders may not be motivated to change. You can help by giving them accurate information about the help and treatments that are available and healthier coping strategies.

If the young person is experiencing emotional trauma, depression or anxiety provide information regarding effective help and treatments.

NB. The burden of eating disorders on carers is very high. People with eating disorders are often ambivalent about treatment even in the face of severe illness. This places carers in a position of battling against their loved ones whilst worrying they are to blame.

Step 4: Enable the young person to get the most appropriate professional help

Physical symptoms indicating referral to a professional include:

- Very low body weight
- Delayed or cessation of menstruations
- Evidence of depressions, anxiety or self-harm
- Recurring bouts of physical ill-health such as fainting, low energy and repeated infections
- Vomiting regularly and using laxatives

Types of professional who can help:

School nurses, practice nurses and GPs can check and monitor weight and BMI to check significant weight loss.

GPs and Nurses can also provide information on the risks and appropriate interventions for eating disorders. They can make a referral to SOLAR and other appropriate professionals:

- Psychiatrists
- Clinical psychologists
- Counsellors
- Dieticians and nutritionists

Treatments

Evidence based treatment for anorexia are those that incorporate talking and psychological interventions such as family therapy. These include:

- Cognitive analytic therapy (CAT)
- CBT
- Interpersonal psychotherapy (IPT)
- Family interventions focused explicitly on eating disorders

Step 5: Encourage self-help strategies

- CBT self-help books and websites for eating disorders
- Avoid alcohol or drugs
- Self-help strategies for co-occurring disorders (anxiety, depression, self-harm)
- Exercise should be undertaken only on the advice of a medical professional
- Mood/food diary to monitor thoughts and feelings

- Love, trust and accept self, listen to feelings and body
- Stay in touch with family and friends
- Focus the mind on positive things, do enjoyable activities, be creative, play sports or start a hobby
- Appropriately recognised support groups/recovery networks
- Get help for relationship problems.

Useful websites

Anorexia and Bulimia Care (ABC)

www.anorexiabulimiare.org.uk

UK national eating disorder organisation. ABC provides personal advice and support to anyone affected by anorexia, bulimia, binge eating and all kinds of eating distress.

Boy Anorexia

www.bioyanorexia.com

Informative website about anorexia in boys

The royal college of psychiatrists

www.rcpsych.ac.uk

Well researched information about eating disorders for the public, with information for parents, teachers and young people

Student Run Self Help

www.srsh.co.uk

A project aiming to improve support available to students and young people with eating disorders by setting up a network of student run self-help groups.

NHS choices

www.nhs.uk/conditions/anorexia-nervosa/pages/lynsey-and-helen-storeis.aspx

Information about eating disorders and videos of young people's recovery from anorexia/bulimia.

Beat (beating eating disorders)

www.b-eat.co.uk

beat is the working name of the eating disorder associations.

Procedure

- Inform the DSL
- Contact parents
- If parents are aware then support the plan
- If parents are unaware then a referral to be made
- Action has to be considered carefully as it may negatively affect the student