



National
Eating Disorders
Collaboration

8 Tips for Dealing with an Eating Disorder



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8 Tips for dealing with an eating disorder

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**1 understand
what eating
disorders are**



Eating disorders are serious mental illnesses that can have a significant effect on your health and wellbeing.

They are not a **lifestyle choice** or a **diet gone 'too far'**.

Eating disorders can be related to serious medical complications and other psychological problems such as depression, anxiety, substance abuse and personality disorders. In some cases, the effects and consequences of an eating disorder can be life-threatening.

Eating disorders are more common than most people think. About **one in 20 Australians** has an eating disorder and the rate in the Australian population is increasing.

The reasons for developing an eating disorder will differ from person to person; known causes include genetic predisposition and a combination of environmental, social and cultural factors. There are four specified eating disorders: Anorexia Nervosa, Bulimia Nervosa, Binge Eating Disorder and Eating Disorder Not Otherwise Specified (EDNOS). You can learn more about each of these eating disorders by reading our fact sheets at <http://www.nedc.com.au/fact-sheets>

Eating disorders are often misunderstood. Many people have mistaken beliefs about eating disorders, dieting and body image. To read the truth about these, and other, common misconceptions go to <http://www.nedc.com.au/myths-about-eating-disorders>, and learn more about eating disorders at www.nedc.com.au/eating-disorders-explained

2 promote positive body image for yourself and your friends





Body image refers to the way you see, think and feel about your physical self and your appearance.

Positive body image is when you are able to **accept**, **appreciate** and **respect** your body.

If you have negative thoughts and feelings about your body, body dissatisfaction can develop. Body dissatisfaction can affect people of all ages but is most common in young people. Body dissatisfaction is an internal process but can be influenced by external factors like family, friends, acquaintances, teachers and the media. If you are in an appearance oriented environment or receive negative feedback about your appearance, this can increase your risk of body dissatisfaction.

Body image issues have increased worldwide over the last 30 years and body dissatisfaction is often identified as one of the top issues of concern for young people. Body dissatisfaction is a serious problem because it can make you less resilient to eating disorders. People experiencing body dissatisfaction can become fixated on trying to change their body shape, which can lead to unhealthy practices with food and exercise. These practices don't often help to change your body shape or your body image and can instead give you intense feelings of disappointment, shame and guilt.

You can support yourself and your friends in promoting positive body image. This could include giving each other compliments which focus on non-physical attributes and avoiding **fat talk**, **teasing** and **bullying** of any sort. 'Fat talk' is anything you say that might make others feel like beauty depends on being thin or looking a certain way (e.g. 'I feel so fat', 'Do I look fat in this?', 'You look great, have you lost weight?').

Always remember that beautiful, healthy bodies come in all shapes and sizes.

The media is a major external contributor to body dissatisfaction. We are all bombarded with images through TV, magazines, internet and advertising. Try to remind yourself and your friends that these images have been fabricated by stylists, art teams and digital manipulation and often promote **unrealistic**, **unobtainable** and **highly stylised** appearance ideals which **cannot be achieved in real life**.

Tips for improving your body image

While some aspects of your appearance can be changed, others, like your **height**, **muscle composition** and **bone structure** are genetically fixed. It's important to understand that there's no right or wrong when it comes to weight, shape, size and appearance. Challenging beauty ideals and learning to accept your body shape is a crucial step towards positive body image. We all have the power to improve the way we see, feel and think about our bodies by following these tips:

- Focus on your positive qualities, skills and talents
- Appreciate and respect what your body can do
- Say positive things to yourself every day and avoid negative or critical self-talk
- Set positive, health focused goals rather than weight loss related ones

Admiring others' beauty can improve your own body confidence but it's important to appreciate your own beauty, avoid comparing yourself to others, accept yourself as a whole and remember that everyone is unique and **differences are what make us special**.

Body & image & Eating Disorders

What is body image?

1. Body image is the perception that a person has of their physical self.

2. It is also the thoughts and feelings a person experiences as a result of that perception.

3. These feelings can be positive, negative or a combination of both.

4. They are influenced by individual and environmental factors.

Poor body image is a risk factor for **Eating Disorders**

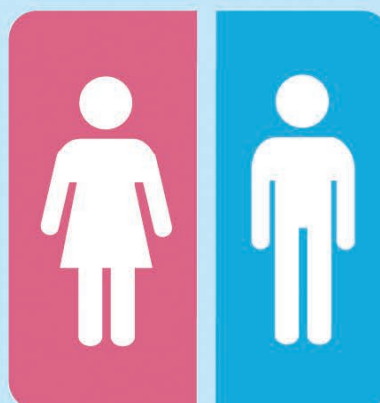


People with **negative body image** can become fixated on trying to change their body shape. This can lead to unhealthy practices with **food** and exercise.

There is no right or wrong when it comes to **weight, shape, size** or appearance. Learning to accept your **body shape** is a crucial step towards positive body image.

What is an eating disorder?

Eating disorders are **serious mental illnesses**; they are not a lifestyle choice or a diet gone 'too far.'



Eating disorders occur in both **men and women, young and old, rich and poor**, and from **all cultural backgrounds**. About **one in 20 Australians** has an eating disorder and the rate in the Australian population is **increasing**.

Positive body image occurs when a person is able to:

accept
appreciate
and **respect**
their body.

Positive body image is a protective factor which can make a person more resilient to eating disorders.

Getting help

If you feel dissatisfied with your body or if you feel like you are developing unhealthy eating or exercise habits, it is important to get professional help.

Professional support can help guide you to change negative beliefs and behaviours.

Visit our website to find help in your area.

nedc.com.au/helplines



3 Know the risks of 'dieting'



Studies in Australia and New Zealand have found that for females, as many as **75% of high school girls** feel 'fat' or want to lose weight and approximately **half of adolescent girls** have tried to lose weight and practise extreme weight loss behaviours such as fasting, self-induced vomiting and smoking. The truth is that **severely restrictive diets can be a very dangerous practice**. Although moderate changes in diet and exercise have been shown to be safe, extreme or unhealthy dieting practices have significant mental and physical consequences. **Eating disorders almost invariably occur in people who have engaged in dieting or disordered eating**.

Disordered eating is when a person regularly chooses unhealthy, destructive eating behaviours like restrictive dieting, compulsive eating or skipping meals. When the body is starved of food it responds by reducing the rate at which it burns energy. This can lead to overeating or binge eating behaviours which may result in weight gain and obesity. Disordered eating often causes feelings of guilt and failure which can arise as a result of binge eating, 'breaking' a diet or weight gain. A person with disordered eating behaviours may isolate themselves for fear of socialising in situations where people will be eating. This can contribute to low self esteem and other emotional problems.

Disordered eating and dieting behaviour are the most common indicators of the development of an eating disorder. Young people who diet even moderately are more likely to develop an eating disorder. Dieting is also associated with other health concerns including **depression, anxiety, nutritional and metabolic problems**, and contrary to expectation, with **an increase in weight**. In fact, the risk of obesity in girls is greater among those who have dieted than it is for non-dieters.

Disordered eating can have a destructive impact upon every aspect of your life, including your academic and athletic performance, psychological and physical wellbeing, and social functioning.



4 Look out for
yourself and
your friends



Young people go through periods of great change biologically, physically and psychologically.

These changes can be stressful and might make you feel insecure or self-conscious, particularly when we know that concerns and pressures about **weight**, **appearance** and **eating** are common in today's society. All these things can increase the risk of developing an eating disorder. Although the onset of an eating disorder can occur at any age, it is most common in young people.

In 2010 the NEDC spoke with young people like you about their experiences with eating disorders and we found that most young people know at least one other young person who they think might have an eating disorder.

Recognising the signs of an eating disorder can be tricky. Eating disorders can't be identified by someone's size or shape and a person with an eating disorder may go to great lengths to hide, disguise or deny their behaviour. It's often really hard for someone with an eating disorder to ask for help and they may not recognise that anything's wrong. This means there's often a long delay before someone with an eating disorder receives treatment (on average **around 10 years for people with Bulimia** and **15 years for those with Anorexia**). These delays are a big problem because we know that **early diagnosis and intervention can greatly reduce the length and severity of an eating disorder** and increases the chances of recovery; particularly in young people. If you think you, or someone you know, might have an eating disorder it's really important to seek professional help straight away.

Eating disorders myths

Myth

Eating disorders are not serious; they are a lifestyle choice or about vanity.

Truth

Eating disorders are serious and potentially life threatening mental illnesses. A person with an eating disorder experiences severe disturbances in their behaviour around eating, exercising and related self harm because of distortions in their thoughts and emotions.

Myth

Families, particularly parents, are to blame for eating disorders

Truth

Due to the nature of an eating disorder a person may go to great lengths to hide behaviour, or may not recognise that there is anything wrong. Eating disorders are not a phase and will not be resolved without treatment and support.

There is no evidence that eating disorders can be caused by parenting styles. A person's genetic predisposition may predispose them to an eating disorder, not the fault of the family.

Myth

Eating disorders are a cry for attention or a person 'going through a phase'

Myth

Dieting is a normal part of life

Eating disorders are not a cry for attention. They are a serious mental illness. Dieting is not a normal part of life. It is a complex condition involving anxiety, depression, metabolic changes, and an increase in

Snapshot



To find out more visit nedc.com.au/myths

Myths

Busted

particularly
of
eating

Truth

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Truth

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**MYTH
BUSTED**

Truth

Eating disorders can affect anyone. They occur across all cultural and socio-economic backgrounds, amongst people of all ages, from children to the elderly and in both men and women.

Myth

Eating disorders only affect white, middle class females, particularly adolescent girls

These factors make some people more likely to develop body dissatisfaction or an eating disorder:

- **Their gender** – adolescent girls are more prone to body dissatisfaction than adolescent boys; however the rate of body dissatisfaction in males is rapidly approaching that of females (you can read more about eating disorders in males at <http://www.nedc.com.au/fact-sheets>)
- **How they spend their time** – people involved in activities that emphasise a thin or muscular body type are at risk (e.g. ballet dancer, gymnast, model, athlete)
- **The stresses they are under** – people who are under pressure to achieve and succeed and those who experience peer pressure, teasing or bullying (especially about weight or shape) are at risk
- **Their friends and family** – role models who diet and express body image concerns, troubled family/personal relationships or a family history of eating disorders can increase a person's risk
- **Their body** – those with a larger body size, or who go through puberty earlier than peers are at risk
- **Their personality** – perfectionists, high achievers, 'black and white' thinkers, people who often compare themselves to others and those who internalise beauty ideals are at risk
- **Their mental health** – overvaluing body image, low self-esteem, anxiety, obsessive compulsive behaviours, depression, neuroticism, 'feeling out of control', stress and trauma all increase risk
- **Their physical health** – people with diabetes and those with Polycystic Ovary Syndrome are at risk

Someone at risk of developing an eating disorder might become fixated on:

- **Food** e.g. saying they've eaten when they haven't, hiding uneaten food, wrappers or leftovers, eating very slowly, cutting food into tiny pieces, insisting that meals are served at exactly the same time every day, suddenly disliking food they have always enjoyed in the past, eating unusually large amounts of food, rigid thoughts about food being 'good' or 'bad', making lists of good or bad foods, dieting behaviour (fasting, counting calories/kilojoules, avoiding food groups such as fats and carbohydrates), feeling anxious or 'out of control' around food or at meal times, cooking for others, eating or refusing to eat as a way of dealing with boredom, stress or depression
- **Exercise** e.g. exercising in bad weather, in spite of sickness, injury or social events; and experiencing distress if exercise is not possible
- **Their body** e.g. extreme sensitivity to comments about body shape, weight, eating and exercise habits, or feeling obsessed with body shape, weight, eating and exercise

You might also see them:

- **Treating friends and family differently to normal** e.g. eating in private and avoiding meals with other people, changes in emotional state (depression, stress, anxiety, irritability, low self esteem)
- **Looking different to normal** e.g. rapid weight loss, frequent weight changes, wearing baggy clothes
- **Not feeling well** e.g. always feeling tired and not sleeping well, fainting or dizziness, loss or disturbance of menstruation in females, feeling cold most of the time even in warm weather
- **Behaving differently after eating** e.g. vomiting (frequent trips to the bathroom during or shortly after meals)



5 If you're
worried
about someone,
talk to them



There's no 'right' or 'wrong' way to talk to someone with an eating disorder but it's important to be prepared.

Remember the person may be feeling anxiety, shame, embarrassment, guilt or denial, or may not recognise that anything's wrong. They might be frightened and could respond with anger or denial, which doesn't necessarily mean they don't have a problem. Make sure you approach them in a caring way and in a place where you can have an open and calm conversation. Don't approach them around food, or if either of you are angry, tired or emotional. Let them know you care about them and want to support them through every stage of the process.

Tips for talking to someone you think might have an eating disorder

DO

- Use 'I' statements (e.g. 'I care about you', 'I'm worried about you')
- Help them to feel it's safe to talk to you
- Ask them how they feel and give them time to talk about their feelings
- Listen respectfully to what they have to say
- Encourage them to seek help!
- Persevere with revisiting this topic many times in order to influence change and help seeking

DON'T

- Focus on food – talk about how they're feeling instead
- Try to be a therapist – you don't need all the answers, just listen, give them a chance to talk and help them find the right person to talk to
- Blame them for what is happening to them.



**Get help as soon
as possible**



Even though a person with an eating disorder might be confused or scared, getting help as soon as possible is very important.

You can help them by remaining **supportive**, **positive** and **encouraging**. If you think you, or someone you know, might have an eating disorder, it's really important that you talk to an adult as soon as you can and ask them to help you, or the person you're concerned about, seek professional help.

It's really important that a person with an eating disorder gets a professional diagnosis and appropriate treatment. There are a range of clinicians with specialised knowledge, including **medical doctors**, **psychiatrists**, **psychologists**, **nurses**, **dieticians**, **counsellors** and **occupational therapists** who are specifically trained to help people with eating disorders. A GP is a good first place to go for help and they can refer a person with an eating disorder to these specialists.

To find help in your area you can:

- go to www.nedc.com.au/helplines,
- call the National Support Line on 1800 ED HOPE (1800 33 4673),
- or contact Headspace (www.headspace.org.au) or ReachOut (au.reachout.com).

7 Stay positive and look after yourself





The path of recovery from an eating disorder is a personal journey.

Each day will bring its own triumphs and challenges to both the person with the eating disorder and to those who care about them. But, with appropriate treatment, hard work and commitment, recovery from an eating disorder is achievable.

Focusing on the process of recovery from an eating disorder can feel less overwhelming than focusing on the end result. People who have recovered from an eating disorder tell us that these things helped them along the way:

- **Support** – a circle of support helps a person’s treatment and recovery and decreases their isolation
- **Hope and motivation** – a strong sense of hope and motivation to change is the basis of recovery
- **Healthy self esteem** – remembering they are worthwhile reminds a person recovery is too
- **Understanding and expressing your emotions** – it’s normal for a person with an eating disorder to feel a range of emotions and it’s helpful for them to acknowledge and express their feelings
- **Acknowledging set-backs** – with a focus on recovery, even set-backs can be part of making progress
- **Coping strategies** – developing a list of coping strategies that calm a person down and help them regulate their emotions can help them during stressful or triggering situations
- **Engaging in activities and interests** – revisiting things a person enjoyed before their eating disorder builds self-esteem and reconnects the person with the world around them (e.g. if a person enjoyed drawing, taking a pencil and paper to their favourite place can be a helpful, enjoyable experience)

Most importantly, don't let the eating disorder take over the identity of the person you care about.

Remember they're still the same person they've always been. Separating the person from the illness can be helpful for you and the person you care about. Talk about things they enjoy and are good at and things you like about them. Reminding the person of their **life outside of their illness** can help them to realise there is **more to them than their eating disorder** (e.g. take them to a play if they love the theatre or to a football game if that's what they enjoy).

Even if you're really worried about someone it's very important you look after yourself as well by **making time for yourself**, **setting boundaries** and **finding some support**. Taking time out for yourself will help restore your energy and rejuvenate your mind. Make the time to see other friends, go for a walk, do some exercise or see a film. The better you care for yourself, the more you'll be able to help the person you care about. To make sure that your support for your friend or loved one doesn't take over your life, you need to set yourself limits which allow you to keep making the most of your own life and them stick to the boundaries you choose.

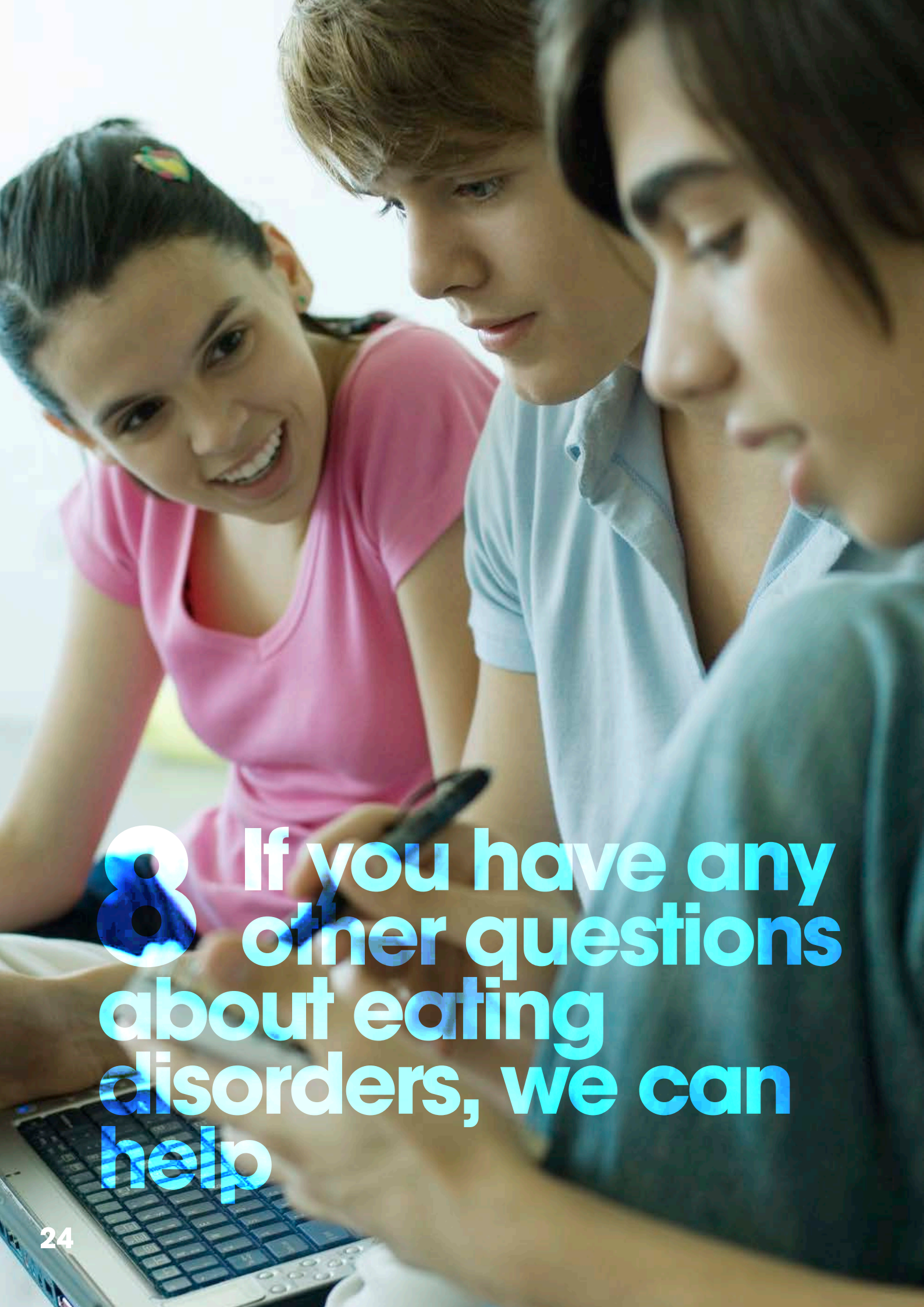
Helping a person with an eating disorder can be a big burden to carry and it will help you to have your own support network of trusted people you can talk to about your feelings. If you find you need professional support call the National Support Line on **1800 ED HOPE (1800 33 4673)**, or contact Headspace (www.headspace.org.au) or ReachOut (au.reachout.com).

Guys get eating disorders too.

Even though many people think eating disorders only affect females, this is not the case. In fact, large population studies suggest that up to a quarter of people suffering with Anorexia or Bulimia are male, and almost an equal number of males and females suffer with Binge Eating Disorder. We also know that guys with eating disorders often feel a cultural pressure not to discuss their illness or seek help, so the actual numbers might be even higher than this.

Don't forget that evidence shows the sooner someone starts treatment for an eating disorder, the shorter and more successful the recovery process can be. Eating disorders can develop at any age but males and females are most at risk for Anorexia and Bulimia in their late teens and early twenties, and for Binge Eating Disorder in their mid-twenties.

Find out more about eating disorders in males: www.nedc.com.au/males



8 If you have any other questions about eating disorders, we can help



If there's anything you're wondering about, check out our information for young people at www.nedc.com.au/young-people or contact the National Eating Disorders Collaboration by calling **02 9412 4499** or emailing info@nedc.com.au



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For a downloadable copy of this resource visit:
www.nedc.com.au/young-people

The National Eating Disorders Collaboration
(NEDC) is an initiative of the Australian
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