

Eating Disorders in a Nutshell

A download leaflet for Youth Leaders

What is an eating disorder really about?

Eating disorders develop gradually as a **defensive, coping response to difficult things in life.**

Eating disorders are a **physical expression of an emotional state.** They are symbolic of an attitude to life.

Society assumes it is about will power or seeking attention, and reacts with impatience, or even disgust. **But all eating disorders have negative implications for health and must be taken seriously.**

By understanding what eating disorders are really about and knowing how to spot the signs early, we can intervene sooner. The earlier a young person gets help, the sooner they will make a full recovery. Untreated, eating disorders can be immensely devastating and even fatal.



Definitions of eating disorders (variations exist):

- Anorexia nervosa – control of eating, starving the body, sometimes to death
- Bulimia nervosa – eating much food in a ‘binge’ and vomiting it up
- Binge eating disorder – eating much food in a ‘binge’, in secret
- OSFED – Other Specified Feeding or Eating Disorder (variations/mixtures of above)

Eating disorders are usually preceded by what is called ‘disordered eating’. This is surprisingly common but usually does not lead to an eating disorder. However, it is good to be aware of the signs of disordered eating. The table below explains the difference.

NORMAL EATING	DISORDERED EATING	AN EATING DISORDER
<ul style="list-style-type: none">• Recognising real hunger• Not eating when not hungry• 3 meals a day• Snacks• Sometimes eating a lot• Sometimes eating a little• No ‘forbidden’ foods• Knowing when you feel full• Not needing to weigh yourself or only very occasionally <hr/> <p>All of the above with no worry or guilt attached</p>	<ul style="list-style-type: none">• Yo-yo dieting• Sometimes eating too much but not feeling particularly guilty• Food in the back of the mind• Image in the back of the mind• Health is not seriously compromised <hr/> <p>None of the above becoming obsessive or seriously physically affecting the person or other people close to them</p>	<ul style="list-style-type: none">• Food becomes the main focus of the sufferer’s life• Friends and family are affected by it as well• Social life is curtailed• Physical and emotional health is compromised• Life is threatened <hr/> <p>Food is the main focus in the sufferer’s life and think or worry about it all the time</p>

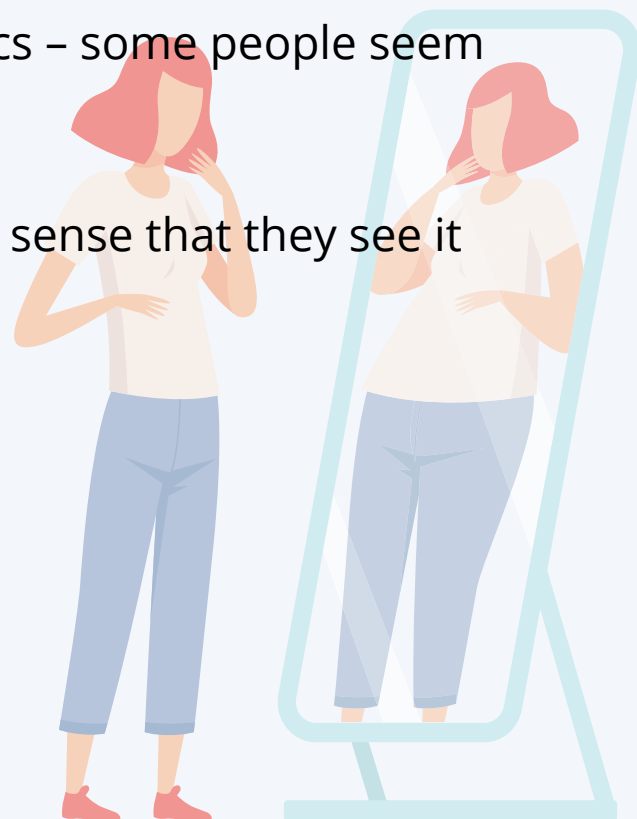
Why do eating disorders happen?

There are often a number of reasons or triggers that mean someone might turn to food management to cope.

Eating disorders are like an iceberg: the eating disorder behaviour is above the waterline but below there are many possible underlying reasons.

There is always a complex mixture of triggers and each person will be different. But common triggers can include:

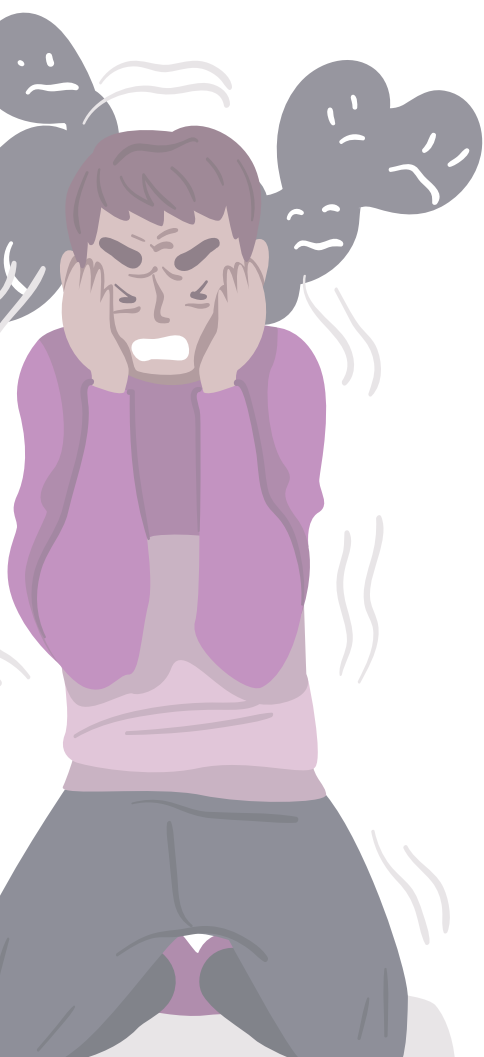
- Bullying or negative comments about body shape or size
- Perceived or real pressure or very high expectations (academic or other)
- A desire to be 'perfect'
- Low self-esteem
- Negative body image
- Addiction to the behaviour (once it becomes more ingrained)
- Psychological profiles and genetics – some people seem prone
- Trauma or abuse in the past
- Copycat – it can be 'caught' in the sense that they see it modelled by others
- Inadequate emotional skills



Eating disorders are **ultimately a defence mechanism for coping with life.**

For most sufferers (but not all), they believe that if they lost weight, life would be 'better', whatever 'better' might look like for them. So they go on a diet. This dieting can be the real trigger: the dieting 'high' can drive the behaviour to more extremes, resulting in the development of an eating disorder.

What is it like to have an eating disorder?



For the eating disorder sufferer: no food is neutral. They think about food all the time – whether eating too much or too little.

ALL the TIME.

Self-esteem plummets, social life can be curtailed, and fear and shame mean the disorder is hidden from others.

Having an eating disorder is devastating for both the sufferer and their family.

What is recovery and how does it happen?

Recovery is:

- To be fully engaged with life – to taste life
- Normal eating patterns
- 'I began to get better when I began to like myself'
- No longer planning everyday life around meals and food

What does recovery involve?

- It takes patience and is often complex and each person is different
- It requires grace, not reward and punishment
- Recognising that there is a problem and making the decision to change
- Taking baby steps – the only way forward is one small step at a time
- Accepting support – Christian, medical and especially one-to-one help
- Understanding and coming to terms with the past, as much as possible
- Challenging thoughts and beliefs
- Choosing life by getting involved with activities

FACT: It is 100% possible to break free from an eating disorder! The sufferer must believe that.

Also, in our experience, by acknowledging the spiritual side and letting God in will bring whole person healing

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What can I do to help?

Spotting an eating disorder - what are the behaviours?

Anorexia – moving food around the plate, refusing to eat, weight loss, wearing baggy clothes (to hide weight loss), anxious around food, may hide food instead of eating, low mood, social withdrawal, lethargy.

Bulimia – some of the above, but less likely to show anxiety around food. Harder to spot as they may be the life and soul of the party and weight remains 'normal', often fond of sweet things, and of cooking for others, disappears to the toilet after eating, mood swings.

Binge eating – often does not eat much around others, but stashes high calorie food for a binge, anxiety around food, mood swings, weight gain.

OSFED – any combination of the above.

What can I do if I suspect an eating issue?

If you suspect an eating issue, discuss with other leaders, but aim to talk, either to the person, or to their leader/parent/guardian/etc.

Try not to convey blame or directly challenge (unless you are very worried): 'I am wondering whether you are struggling with food, and want you to know I am here if you want to talk about it. It's up to you, but it must be miserable for you'. Say something, even if you hit denial, as the sooner a sufferer gets help, the better the outcome.

Bear in mind that the eating behaviour is likely to be masking deeper issues, and giving the sufferer a way of coping. Showing acceptance, encouragement and care will go a long way as the sufferer will be feeling bad about themselves.

You can run tastelife's short course **Youth Track: Understanding Eating Disorders** to open up the topic in a safe way.

If you are very concerned, then you have to refer them to a GP. Offer prayer, and concentrate on acceptance and love for the person, just as they are. If you want to help on a longer-term basis, train to run a tastelife course. Contact admin@tastelifeuk.org or see www.tastelifeuk.org

**Taste and see that the LORD is good;
blessed is the one who takes refuge in him.**

Psalm 34.8