## **Eating Disorder Education for Caregivers**

Most people know someone who is critical of their body image. That person may be constantly counting calories, restricting foods, hyper-focused on working out, compares their body to others, or a list of other behaviors that focus on food, weight, appearance, image of self, or willpower. Eating disorders are compulsions to control a person's body shape that are harmful to one's physical and mental health. They can have serious medical problems that affect the heart, brain, and other body organs and tend to be linked to unhealthy coping skills that arise to handle stress and anxieties. People with eating disorders often have low self-esteem or feelings of helplessness. Eating disorders are complex and affect all kinds of people. Risk factors for all eating disorders range from biological and psychological health as well as and sociocultural idealization rooted in thinness. Eating disorders look differently across ages and across cultures.

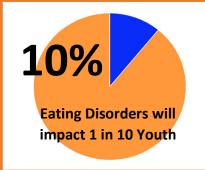


### EVERYONE THINKS ABOUT THEIR BODY IMAGE. AN EATING DISORDER IS DETERMINED BY:

- 1. SEVERITY thoughts and behavior are excessive and impact multiple areas (physical, psychological, behavioral)
- 2. **DURATION** excessive worrying is over several weeks, months, or years
- 3. INTERFERING WITH THE PERSON'S VIEW OF SELF, ACTIVITIES, AND FAMILY/SOCIAL RELATIONSHIPS.

#### **Physical**

- Weight loss or weight fluctuations
- Sensitivity to the cold
- Changes in or loss of periods
- Swelling around cheeks or jaw, calluses on knuckles, or dental discoloration from vomiting
- Fainting, dizziness, or feeling weak
- Changes in sleeping
- Exhaustion
- Excessive physical exercise
- Low blood pressure
- Slow or irregular heartbeats



### **Psychological**

- Perfectionism
- Preoccupied with food, body shape, and weight
- Extreme body dissatisfaction
- Distorted body image (complaining of being, feeling, or looking fat when at a healthy weight or underweight)
- Heightened anxiety around meal times
- Depression, anxiety, or irritability
- •Low self-esteem (e.g. negative opinions of self; guilt, self-loathing)
- •Rigid thinking (e.g. labeling of food as either good or bad)

### Behavioral

- Dieting behaviors
- Hoarding food
- Restrictive eating (without a tie to cultural or medical needs)
- •Staying away from foods deemed unhealthy or foods they liked before
- Replacing meals with fluids
- Avoidance of eating meals around others
- Checking body weight of shape obsessively
- Social withdrawal
- Lying about food consumed eating

# How we can support youth:

- L. Give Reassurance and Listen Non-judgmentally
- Use "I" statements to convey your feeling or concerns. Focus on showing support, empathy, and allow your child to speak about their feelings. Try not to focus on weight, food, or commenting on their weight or appearance. Be patient and emphasize you love and support them.
- 2. Promote support networks and healthy lifestyle habits
- Help youth connect with positive peer and adult relationships when

they are having a hard day. Support youth engaging in activities they enjoy that aren't food centered. Accessing relationships and hobbies can support improved feelings of self-worth.

- 3. Model how you talk and treat your body
- Youth often copy the habits from others around them. Model healthy sleep, eating, and moderate exercise. Be mindful in how you talk about your own body, appearance, and size. If you speak negatively about your body or others, youth will too. Increase praise that is unrelated to body image that can increase self-esteem.
- 4. Encourage appropriate help and further educate yourself
- Eating disorders are complicated and can come with serious health risks. If you are concerned about your child, seek help from a primary care physician or mental health professional.

Additional supports shown to be effective: Cognitive Behavioral Therapy, Mindfulness

Resource for tools, acitivities, and support groups on eating disorders: https://www.crisistextline.org/resources/