# Nourishing Hope

## Caring Amidst the Chaos of an Eating Disorder

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# Nourishing Hope: The Ultimate Eating Disorder Bootcamp Manual – 01/26

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# Preface

The Nourishing Hope: Caring Amidst the Chaos of an Eating Disorder is a labour of love. It has been created to help caregivers navigate their way through the eating disorder journey from beginning to end. When I started my journey with my daughter, I wish I had known half of the things in this Guide.

She has overcome insurmountable obstacles in her way including anorexia nervosa and hospitalizations. Without her, none of this would have been possible. She shared with me the secrets she held when she was ill so I can pass along them to others to be aware of. She's opened her life in the creation of this to try to help other people suffering in silence. I love you more than you know and I'm thankful you let me in when you didn't have to and it was uncomfortable.

This guide is written to honor my daughter's journey with an eating disorder. She is a true warrior, a trooper, and an inspiration in my eyes and we have ridden the waves of the eating disorder together. As a parent, I knew there were huge gaps in the resources available for those supporting a loved one. This is meant to fill in the gaps until your loved one can get into treatment and to provide you a quick reference in the meantime. You are my hero "Blackout" – keep being your amazing self.

I would be amiss if I didn't write that it is critical to recognize that eating disorders affect young and old as well as every other demographic imaginable. She often told me how all the literature she read made it seem like eating disorders were "skinny white girls" - her words. Everyone is affected by eating disorders so please remember to be kind.

This is a living document that means I will be adding personal experiences throughout as I go along including YouTube videos for those topics that cannot be adequately conveyed in writing. It will not stay the same and as I learn more, I will add or change it. I do not purport myself to be an expert in eating disorders, simply a mom who cares about her daughter. All of the information in here should be viewed from that perspective, not as a scholarly paper.

It will evolve as the evidence does, and I will attempt to keep up with the relevant updates.

In closing, I want you to know that full recovery is absolutely possible. Be the light for your loved one so they know you believe in them too. You may be the only source of hope for them and shine your light brightly. It doesn't mean to say you won't get discouraged, you most certainly will along the way. But know too, that there is an army of other parents like me behind you willing to walk the journey with you and provide a map as best as we can.

I am a strong proponent and highly involved in peer support. Here is an article on the benefits of peer support in eating disorders. Peer support for eating disorders in Canada: program user perspectives

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This is the daughter, Blackout. I wanted to write a quick disclaimer that I signed off on everything included in his book (and wrote and edited a lot). I decided to add the crisis lines first so those reading this would be able to get immediate help if it is needed. There are more lines to call for non-emergencies near the end of the book. Thank you, I hope my journey will be put to good use.

**ISBN: 978-1-7390484-2-6**
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# Crisis Lines in Alberta/Canada

## Definition of a Crisis Line

A crisis line is a special phone line or website that provides emotional support to individuals in need of assistance. It's staffed by trained professionals who are available to provide guidance and direction during difficult times when an individual may be feeling overwhelmed, suicidal, or generally in distress. Crisis lines typically offer listening services to those who call in, as well as referrals to other health care and social services if necessary.

In Canada, there are several national and regional crisis lines available for people facing mental health issues and other challenges. These include the Canadian Association for Suicide Prevention (CASP), Mental Health Help Line Canada, Kids Help Phone, Trans LifeLine, Distress Centers of Canada (DCC), Aboriginal Hope & Wellness Helpline, Eating Disorder Hope & Support Line and more. Each of these organizations offers phone numbers and websites with resources specific to the issue being addressed.

## Types of Crisis Lines in Canada

Crises can happen in any person's life, at any time. In Canada, there are numerous crisis lines available to provide support and guidance when needed. These crisis lines include services such as mental health support, suicide prevention, bullying and violence intervention, and sexual assault response. It is important to know the types of crisis lines available in order to get the right help during a difficult time.

The Canadian Mental Health Association provides a national toll-free number for individuals requiring assistance with mental health issues. This service is free of charge and staffed by trained professionals who offer advice on topics such as depression and anxiety disorders; they also provide referrals to local resources if needed.

## List of Canadian Crisis Lines and Their Phone Numbers and Websites

Are you in crisis and looking for help? Here is a list of some Canadian crisis lines, their phone numbers and websites available to provide support and assistance.

Many Canadians are faced with difficult life challenges that can leave them feeling overwhelmed and unable to cope. In these moments, it's important to have access to reliable sources of help, such as crisis lines. Crisis lines are staffed by trained professionals who are there to provide emotional support, advice, and resources for anyone in need.

This list provides information about some of the most popular Canadian crisis lines. Each line offers a different set of services, so be sure to read through this information carefully before making a call or visiting the website for more details. With this resource at your fingertips, you'll be able to find the right type of support quickly and easily – no matter where you live in Canada!

## List of Mental Health Crisis Lines and Numbers in Canada

Mental health crisis lines and numbers in Canada are essential resources for those struggling with mental health issues. Whether you're dealing with depression, anxiety, grief or any other mental health issue, having a support system is key to helping you get through it. Crisis lines offer confidential listening services and resources to help you find the assistance and support that you need.

**Ontario's ConnexOntario** at 1-866-531-2600

Kids Help Phone at 1-800-668-6868
Website: https://kidshelpphone.ca/

**Good2Talk** at 1 866 597 3256.

**The Canadian Association for Suicide Prevention** also provides details on local suicide prevention services across the country. https://suicideprevention.ca/resources/

**Alberta Health Services (AHS) Mental Health Helpline:**
Phone: 1-877-303-2642
Website: https://www.albertahealthservices.ca/info/Page13278.aspx

**Distress Centre:**
Phone: 403-266-4357 (Calgary)
Website: https://www.distresscentre.com/

**Addiction and Mental Health:**
Phone: 1-866-332-2322
Website: https://www.albertahealthservices.ca/amh.aspx

**Canadian Mental Health Association, Alberta Division:**
Phone: 780-482-6576 (Edmonton)
Website: https://www.cmha.ab.ca/

**The Centre for Suicide Prevention:**
Phone: 1-833-456-4566 (Alberta suicide prevention line)
Website: https://suicideinfo.ca/
Website: https://kidshelpphone.ca/
**Mental Health Help Line:**
Phone: 1-877-303-2642
Website:
https://www.albertahealthservices.ca/findhealth/Service.aspx?id=6810&serviceAtFacilityID=1047134

# Can You Prevent an Eating Disorder?

There is no one definitive way to prevent eating disorders, as the causes of these conditions are complex and multifaceted. However, some strategies that may help include:

- Encouraging healthy and balanced eating habits: This includes promoting the
- consumption of a wide variety of nutrient-dense foods.
- Promoting body positivity: This includes challenging negative stereotypes and cultural messages about body image, and teaching children and adolescents to appreciate their bodies for their abilities, rather than their appearance.
- Addressing underlying psychological issues: Eating disorders often have underlying psychological causes, such as anxiety, depression, or trauma. Identifying and addressing these underlying issues can help prevent the development of an eating disorder.
- Seeking early intervention: If an individual is showing signs of an eating disorder, it is important to seek professional help as soon as possible to prevent the condition from becoming more severe.

## Before A Diagnosis?

## How Do I know If My Loved One Has An Eating Disorder?

### Symptoms to Look For

Some of the most common signs of an eating disorder include drastic weight loss or gain, preoccupation with food and body image, change in clothing style, extreme worry about having to eat certain types of food or being afraid of gaining weight, and avoiding social situations where food is involved. People with eating disorders also may exercise excessively, take diet pills or laxatives to restrict calorie intake. They may hoard food or hide their binging episodes from others. Other warning signs include changes in mood, low energy levels, and feeling guilty after eating.

When it comes to identifying an eating disorder in a loved one, it can be difficult to know where to start. They can have serious effects on physical health, relationships, and overall quality of life. It is important to understand the warning signs that may indicate a loved one has an eating disorder and knowing how to approach them with care and compassion if they do.

You may feel uncomfortable discussing this topic with your loved one but it is important to remind them that they don't have to face this issue alone.

Please note that you do not need to have all of these to have an eating disorder. They are simply some common signs that you can watch for if you suspect your loved one has an eating disorder. Likewise, everyone's eating disorder presents differently and what you are seeing may not be on this list. Always have a medical professional do an assessment if you think something is going on.

- Preoccupation with body weight Changes in eating patterns
- Body checking Extreme moods
- Use of laxatives or diuretics Vomiting after eating
- Checking nutritional content of foods
- Odd eating behaviour like cutting up food really small Not eating foods otherwise liked before
- Not wanting to eat in front of other people
- Have food rules
- Blocked or clogged drains in bathrooms Dizziness or fainting
- Feeling cold all the time Laguna (fine body hair)
- No longer having monthly cycles Hair falling out
- Distorted body image
- Social withdrawal from activities
- Extreme weight loss
- Secrecy around food
- Feeling guilty about eating food Unexplained stomach issues
- Food rituals such as eating things in a certain order

If you observe any of these behaviors in your loved one it is important to seek help immediately from a healthcare provider who specializes in the treatment of eating disorders.

## What Are The Screening and Assessment Tests For An Eating Disorder?

An eating disorder can be difficult to detect and diagnose, but it is important to recognize the signs. Screening and assessment tests are two of the most commonly used tools for determining if a loved one has an eating disorder.

The first step in diagnosing an eating disorder is screening. This involves asking questions about personal behaviors, such as diet and exercise habits, weight concerns, and body image issues. These questions help determine if further assessment is necessary. If so, more comprehensive tests can be conducted to gather more detailed information about the individual's behavior, thoughts, feelings and physical health status in order to make an accurate diagnosis. Common assessments include psychological evaluations, nutritional questionnaires and interviews with family members or friends who may have witnessed changes in behavior associated with the suspected eating disorder.

There are several commonly used screening tools for eating disorders, including:

- SCOFF questionnaire: This is a five question self-report questionnaire that screens for symptoms of anorexia nervosa.
- Eating Disorder Examination (EDE): This is a structured interview that assesses the presence and severity of eating disorder symptoms.
- EAT-26
- Eating Disorder Inventory (EDI): This is a self-report questionnaire that assesses the presence and severity of eating disorder symptoms.
- Body Mass Index (BMI): This is a measure of body fat based on weight and height, and it is often used to assess the nutritional status of individuals with eating disorders.

It's important to note that screening tools should not be used to make a definitive diagnosis, but rather as a starting point for further assessment and evaluation by a trained professional. Eating disorders are complex conditions that require a comprehensive evaluation, including a thorough medical and psychological assessment.

## Conclusion: Taking Care of Yourself

In conclusion, take care of yourself. Eating disorders can be isolating and difficult to manage, but it's important for both individuals suffering from eating disorders and their loved ones to know that recovery is possible.

It's essential for anyone living with or supporting someone living with an eating disorder to remember that there are resources available to help. There are a variety of treatment options available such as therapy, nutritional counseling, medical interventions, inpatient programs, and support groups. It's also important for caregivers to take time for themselves and seek out the help and support they need as well.

Making self-care a priority is especially important when caring for someone who has an eating disorder. Self-care looks different for everyone; some people might find joy in spending time outdoors while others may prefer reading a book or listening to music.

# Food Behaviours To Watch For

People with eating disorders may exhibit a wide range of unusual food behaviors. Some examples include:

- Eating in secret: Hiding food, eating alone, or eating in secret to avoid judgment from others.
- Ritualistic eating: Eating in a specific order, cutting food into small pieces, or only eating certain foods.
- Food hoarding: Stashing or collecting large amounts of food, often in secret, and eating it later.
- Chewing food and spitting it out: Chewing and spitting out food rather than swallowing it, to taste it but not consume any calories.
- Moving food around on the plate Eating foods in a certain order
- Taking foods apart and eating it in pieces (ie. hamburgers) Cutting out certain foods or categories of foods
- Saying they don't like previously favourite foods
- "I'm full" is a common phrase used to avoid the discussion of food. Hiding food or finding empty wrappers hidden

- Unhealthy Weight-control Behaviours
- What Are Compensatory Behaviors in People with Eating Disorders?

# Everything You Should Know About an Eating Disorder But No One Talks About

**Not all of these are sure indicators of an eating disorder, but they can be subtle signs to watch out for and be aware of. This section is written exclusively by Blackout.**

- Noticing that feminine hygiene products are not being used monthly
- Being on their phone around mealtimes – usually trying to determine the nutritional content of the foods
- Bloating, constipation, abdominal pain not diagnosed
- Denying feeling hungry
- Food rituals
- Blocked drains and sinks in bathrooms
- Wanting to be involved in the cooking and the ingredients being used
- Sudden increase in baking, cooking and recipes but not eating it themselves
- Unusual food combinations and excessive and odd use of condiments
- Choice of clothing changes – either really baggy or extremely tight
- The scale suddenly becomes a permanent fixture in their bathroom
- Change in diet such as suddenly becoming a vegetarian or vegan
- Using calculators to add up calories
- Very common fitness Apps are a cesspool of eating disorders
- Social App that rhymes with Bumbler is unfettered access to thinspiration and has very little censoring or monitoring including self-harm pictures, thinspiration pictures, and eating disorder tricks
- Block calorie counting apps (they are also a great spot to hide)
- Cutting up food into tiny pieces
- Cotton balls in diet coke to make themselves full of no calories (not super common)
- Weird food combinations

- Only eating half buns or leaving half of everything
- Seeing measuring cups and spoons out and about
- Excessive bowls and plates because you measure food separately
- Eating food in a certain order
- Flushing food and seeing food residue in the toilet
- Talk a lot during meals to avoid eating
- Hiding food in napkins or bags at the table
- Leaving empty food containers out while flushing the food to make it look like you ate
- Showers after eating and bathrooms
- Putting food in Ziploc bags
- Weighing down clothes and undergarments with coins before weighing in

- Avoiding salt because you retain water which makes you look bloated
- Drinking lots of water before weigh ins
- Over seasoning food – but no salt
- Avoiding water or just drinking copious amounts of water
- Alcohol use to avoid being hungry like vodka or low-calorie ones
- Chewing gum and mints
- Drinking coffee and tea as it is an appetite suppressant
- Knowing kg to lbs or calculator in their phone as you must convert
- Foods that suppress appetites like fenugreek, water, celery, oatmeal, cayenne pepper, ginger, garlic, caffeine, green tea
- Switching out bread for wraps and for lower calorie options (i.e.. keto)
- Eating a lot of pre-packaged food because it already has calories etc. on it
- Frozen meals, oatmeal containers etc. for the same reason
- Watching people when they cook for you
- Watching YouTube videos MUKBANG – people eating huge amounts of food (distraction)
- Hair elastic around your wrist so you can snap it when you get hungry
- SLANG TERMS: anorexia-ANNA (talked about like person)
- Keeping food logs (physical or electronic)
- Meds that suppress appetites
- Taking up new hobbies as it gets you out of eating more often
- Eating TUMS to reduce acid for purging
- Being up at weird hours of the night
- Taking showers weird times of the night
- Getting spots around your eyes from purging

- Asking people how you look more frequently
- Casually dropping in conversation – “oh I haven’t eaten today” – asking for help and bragging a bit
- Buying a lot of new clothes
- Sneaking onto a scale
- Drinking milk before going to the bathroom to reduce acid for purging
- Avoiding food related talk)
- “Forgetting” to eat meals or “I already ate”

- I have a sore throat so can only eat broths, soups etc.
- I got food poisoning from (food name) so I’m not going to eat that again
- Wearing slippers all the time and hiding food in them
- Dumping food into water bottles and then disposing of when out
- Eating in their room a lot
- Pretend like you like to eat, throws people off track
- Mood swings, irritability (“hangry” 24/7)
- Not wanting to be touched as it will allow people to feel your protruding bones
- Waking up early or late to eat
- Isolating when they eat
- Being embarrassed about eating in front of people
- Thinking that food needs to be earned, not a right

## Do I Have an Eating Disorder?

If you are concerned that you may have an eating disorder, it is important to seek professional help. A mental health professional who specializes in eating disorders, such as a therapist, counselor, or dietitian, can provide a comprehensive assessment and help you determine if you have an eating disorder.

There are a variety of signs and symptoms that may indicate an eating disorder. Some common signs of eating disorders include:

- Extreme concern with weight, shape, and food: This may include frequent weighing, measuring, and counting calories, as well as obsessing over food and meal planning.
- Distorted body image: This can manifest as a persistent feeling that one's body is too large or too small, even if it is clearly not the case.
- Extreme weight loss or weight gain: This can be a sign of anorexia nervosa or bulimia nervosa.
- Abnormal eating patterns: This may include skipping meals, eating very little, or binge eating, as well as purging through vomiting, laxative use, or excessive exercise.
- Social withdrawal: People with eating disorders may withdraw from friends, family, and activities they once enjoyed.

- Emotional instability: People with eating disorders may experience mood swings, depression, or anxiety.

If you have several of these symptoms, it may be worth seeking help from a mental health professional. Keep in mind, it's a process, it may take time for you to fully understand and accept the diagnosis. Recovery is a challenging journey but with the right support, it is possible.

- EAT-26: Eating Attitudes Test & Eating Disorder Testing – Use the EAT-26 to help you determine if you need to speak to a mental health professional to get help for an eating disorder.
- Eating Disorders Screening Tool | Help & Support | NEDA
- Eating Disorders: Screening & Assessment | CAMH
- ED About Teens
- ED Types Defined
- How Doctors Diagnose Eating Disorders
- SCOFF screening tool

# What Are The First Steps To Take After an ED Diagnosis?

## Eating Diagnosis Overview

It can be difficult for parents to understand the diagnosis process for their child's eating disorder, leaving them feeling overwhelmed and unsure of what to do next. Parents should know that there are steps they can take after their child has been diagnosed with an eating disorder in order to ensure they receive proper care.

The first step is understanding the diagnosis itself, so parents should research the different types of eating disorders and any associated signs or symptoms their child may be exhibiting. This will help them gain a better understanding of what treatment options may be available, as well as any potential triggers or risk factors associated with the particular diagnosis. Once parents have familiarized themselves with the different types of eating disorders, they should make sure they are aware of the warning signs associated with these conditions. Looking out for these signs will help them know whether their child may be suffering from an eating disorder and when to seek professional treatment.

## Medical Evaluation

When a child has been diagnosed with an eating disorder, the initial step is to seek medical attention. It is important for parents to find a professional who specializes in treating such disorders, as they are uniquely qualified to provide appropriate care and support. A medical evaluation should be conducted by an experienced healthcare provider in order for them to understand the severity of the condition, assess any nutritional deficiencies, and properly diagnose the underlying issue. The doctor will examine various aspects of the patient's physical health including vital signs, body weight, height and body mass index (BMI). Additionally, blood tests and other laboratory tests may be conducted in order to check for any metabolic or

hormone-related abnormalities that could be contributing factors leading up to or resulting from the eating disorder diagnosis.

## Research Nutrition and Treatment Options

The second step in the process of helping your child with an eating disorder is to research nutrition and treatment options. It is important to learn about the various approaches for dealing with an eating disorder, such as talking therapies, meal plans and other lifestyle changes.

The best place to start when researching nutrition and treatment options is speaking with a doctor or mental health professional. They can provide invaluable insight into which approach would be most suitable for your child's specific needs and help you understand the

potential benefits of each option. Additionally, they may be able to refer you to resources such as support groups and online forums where you can connect with other parents who are going through a similar experience.

It is also helpful to consult a dietician who specializes in nutritional counselling for people with eating disorders.

## Seek Support from Health Care Team

In the third step of managing an eating disorder diagnosis for a child, it is essential to seek support from a health care team. An interdisciplinary team that includes healthcare providers with expertise in nutrition, mental health counseling and medical intervention is necessary to provide comprehensive treatment. Depending on the type of eating disorder, this may include a pediatrician or primary care provider, psychologist or psychiatrist, registered dietician and/or other medical specialists such as cardiologists or

endocrinologists. This team should be able to provide both individualized assessment and evidence-based treatment strategies.

In addition to finding an appropriate care team, it is important for families to make sure they understand the responsibilities that accompany each treatment plan and what resources are available locally for support.

## Develop a Meal Plan

Meal planning is a crucial step in the process of managing an eating diagnosis for your child. After completing the first three steps of getting an accurate diagnosis, assessing nutrition needs, and working with healthcare professionals to develop a safe plan, it's now time to start developing your meal plan. A meal plan can be tailored to meet your child's individual needs by incorporating foods that are healthy and enjoyable. It should include meals that provide adequate amounts of protein, vitamins, minerals, and fiber. When creating a meal plan it's important to focus on balance and variety so you can easily rotate foods in order to make sure each day is different. You may want to involve your child in the process by asking them what type of food they enjoy or letting them select from several options you provide once they are later in recovery.

## Monitor Progress

The fifth step after an eating diagnosis for your child is to monitor their progress. Keeping track of how the treatment plan is going and assessing if it's working or not is essential in order to make any necessary adjustments and ensure the best possible outcome for their health. You may need to track physical changes, such as weight gain or loss, as well as mental changes such as new behaviors or improved eating habits.

It's also important to keep a journal of your child's meals, snacks, and activity levels so you can keep a record of what works and what doesn't work over time. Additionally, check in with your team who can provide feedback on their performance and if the treatment plan needs to be adjusted based on any changes they have seen while monitoring your child's progress. Be patient with yourself and be honest with others if you need help.

## Conclusion: Taking Action

Taking action after a child's eating disorder diagnosis can be an overwhelming prospect for any parent. However, it is important to remember that the earlier interventions can begin, the better the chances of recovery. There are several steps that parents and caregivers can take once their child has been diagnosed with an eating disorder in order to ensure they receive the best care possible.

# What If You Think Someone Has an Eating Disorder?

## Recognizing Eating Disorders

The topic of eating disorders is one that has become increasingly prominent in our society, and yet there are still many individuals who do not know how to recognize the signs of an eating disorder. Learning how to identify the symptoms and warning signs of any type of disordered eating can help you to provide support for someone who may be struggling with an unhealthy relationship with food.

## Who To Talk To?

When it comes to eating disorders, the best thing you can do is seek professional help. But who should you tell if you think someone has an eating disorder? It can be difficult to know how to react and who to turn to for help.

Opening up a dialogue with someone you suspect may have an eating disorder is essential. However, the person's age and relationship with the person should be taken into consideration when deciding who should be told about any issues related to their health. If the person is a child or teenager, then their parent or guardian should always be informed first so that they can provide support and help facilitate treatment options.

If the person in question is an adult, then it might not necessarily involve their parents; rather friends or healthcare professionals may be more suitable sources of assistance.

## Talking to a Friend with Eating Disorder Concerns

Talking to a friend with an ED is an important and difficult conversation, but it’s one that could potentially save their life. If you think someone has an eating disorder, it can be hard to know the right thing to do. After all, it’s a very sensitive subject and it’s important not to jump to conclusions too quickly. However, if you start noticing signs that your friend may have an eating disorder such as rapid weight loss or changes in food behaviors, then it is time for some tough conversations. The first step is understanding that talking about eating disorders can be uncomfortable and scary. It takes courage to open up the subject with a friend who may have an ED, so be prepared with knowledge and empathy before having the talk.

It can be a difficult conversation, but it’s important to start the dialogue if you suspect your friend may have an ED. If left untreated, ED’s can become progressively worse and even life-threatening. As such, it is essential to create an environment in which your friend feels comfortable discussing their condition openly and honestly. When talking to a friend about their possible ED, it is important to remain respectful and non-judgmental at all times. Use open-ended questions that allow them space for honest answers and provide reassurance that they are not alone in their struggles or feelings of shame or guilt. Avoid pressuring them into taking immediate action but let them know that help is available when they are ready to reach out.

## The Reaction, Now What?

Response Patterns

When addressing an individual's concerns about their well-being or behavior, the person's response can vary significantly. It is important for caregivers to be prepared for a range of reactions and emotions. Understanding these potential responses can help caregivers better navigate conversations and provide appropriate support.

1. Positive and Open:
In some cases, the person may respond positively to the caregiver's concerns. They may appreciate the caregiver's empathy and willingness to address the issue. This open response indicates a readiness for change and a desire to work together towards a solution.

2. Admitting a Problem:
Some individuals may acknowledge that they have a problem when confronted by a caregiver's concerns. This self-awareness is an encouraging sign, as it demonstrates their willingness to accept responsibility and seek help.

3. Denial, Defensiveness, Anger, or Tears:

On the other hand, it is not uncommon for individuals to deny any problems or become defensive when confronted. This defensiveness can manifest as anger or tears as a means of protecting themselves from perceived judgment or intrusion.

4. Perceiving Caregiver as Pushy or Nosey:
In certain instances, individuals may perceive the caregiver's intervention as intrusiveness or unnecessary interference in their personal lives. They might feel that their privacy has been violated and view the caregiver as pushy or nosey.

5. Reassurance Efforts:
The person might attempt to reassure the caregiver that everything is under control even if it likely isn't true. They may downplay any concerns raised in order to maintain independence or avoid burdening others with their problems.

6. Difficulty Trusting Others:
For some individuals, trusting others can be challenging due to past experiences or inherent personality traits. Therefore, they might struggle with accepting assistance or confiding in someone else about personal matters.

7. Time for Processing:
Given the sensitive nature of these conversations, individuals might need time to process the caregiver's concerns and reflect on their own thoughts and feelings. It is essential to grant them this time and allow them space to come to terms with the situation at their own pace.

8. Distancing from Caregiver:
In certain cases, individuals might feel overwhelmed or vulnerable after a discussion about their well-being. As a result, they may distance themselves emotionally or physically from the caregiver as a means of coping with the discomfort triggered by the conversation.

It is crucial for caregivers to approach these situations with empathy, patience, and understanding. By recognizing and respecting individual responses, caregivers can foster a supportive environment where open communication and trust can be established over time.

Remember, every person is unique, and their reactions will be influenced by their personality traits, life experiences, culture, and personal circumstances. Therefore, it is essential for caregivers to adapt their approach accordingly.

## Responding to Negative Reactions

When a person responds negatively to concerns raised by a caregiver, it is essential for the caregiver to remain patient, understanding, and supportive. Negative reactions can range from denial and defensiveness to anger or tears. By responding sensitively in these situations, caregivers can maintain trust and promote future opportunities for meaningful dialogue.

1. Understand Their Perspective:
Recognize that the person may not perceive their eating habits as disordered or problematic. They may genuinely believe that their behaviors are reasonable or necessary for various reasons. It is crucial to acknowledge their perspective while gently expressing your concerns.

2. Be Patient and Allow Time:
If the person reacts negatively, it is important not to force the conversation further at that moment. Respect their decision and be prepared to revisit the topic again when they might be more receptive.

3. Respect Their Readiness:
It's essential to remember that individuals differ in their readiness for change. If they are resistant at present, forcing them into accepting help may create additional tension or push them further away. Offer support without insisting on immediate action.

4. Acknowledge Coping Mechanisms
Recognize that certain behaviors might serve as coping mechanisms for the individual. Losing these strategies can make them resistant to change initially as they navigate alternative ways of managing their emotions or problems.

5. Don't Take it Personally:
Negative reactions should not be taken personally by caregivers. Remember that the response is likely rooted in fear, discomfort, or frustration rather than directed towards you personally.

6. Respond Calmly:
In instances where the person becomes angry or defensive, it is important for caregivers to remain calm and composed in their own responses. Getting angry in return will only escalate the situation and hinder effective communication.

7. Express Continued Support:

Make sure to communicate that your support remains available even if they do not agree there is a problem at this time. Reinforce your concern for their well-being and let them know they can reach out whenever they feel ready.

8. Allow for Space:
If the person becomes angry or wants to end the conversation abruptly, it is essential not to let guilt overshadow your actions. Respect their need for distance and allow them to walk away or end the conversation if necessary. Showing understanding can help preserve the relationship and future opportunities for discussion.

By adopting a compassionate stance, respecting boundaries, and focusing on maintaining trust, caregivers can significantly influence the person's receptiveness to further conversations about their well-being. Patience and understanding are key throughout this process.

# Reassuring the Person

When addressing concerns about disordered eating or unhealthy behaviors, it is essential to reassure the person that your intentions are genuine and supportive. Reassurance can help ease their worries and create an environment where they feel safe to share their thoughts and seek help.

1. Communicate Your Limits:

In order to establish trust, it is important to explain that while you are committed to helping, there may be certain limits to what you can do. Make it clear that you are not a professional therapist or counselor but are offering support as a caregiver or concerned individual.

2. Express Care and Commitment:

Emphasize your concern for the person's well-being and let them know that your intentions come from a place of care. Assure them that you genuinely want to see them happy, healthy, and supported throughout their journey
towards recovery.

3. Avoid Control or Judgment:

Reassure them that your intention is not to control their life or make decisions for them. Let them know that you understand they have autonomy over their own choices. Instead, emphasize that your role is more about assisting them in accessing appropriate help and resources.

4. Offer Support:

Reiterate your commitment by letting the person know that you are available for emotional support, guidance, and assistance in finding professional help if needed. assure them that you will be there throughout their journey regardless of whether they immediately recognize or accept the problem.

Remember: Each individual's response will differ; some may be receptive while others may take longer to come around. Patience, empathy, and open communication can go a long way in building trust with the person struggling with disordered eating habits.

# When to Seek Help

Recognizing the signs and symptoms of a problem is essential when it comes to seeking help for any issue, including disordered eating. This chapter will explore the importance of seeking professional attention promptly and provide guidance on when and how to encourage someone who may be struggling with disordered eating to seek help.

The Sooner, the Better:

When it comes to disordered eating and many other mental health conditions, early intervention is key. The sooner an individual seeks help, the better their chances of recovery. By addressing the problem early on, individuals can prevent further physical and emotional damage that may result from struggling with disordered eating for extended periods.

Behaviors and Symptoms Indicating a Problem:

It's crucial to pay attention to behaviors or symptoms that may indicate a problem. These can include significant changes in eating habits, excessive concern about body weight or shape, secretive behavior around food, obsessive thoughts about food or exercise, extreme mood swings related to eating patterns, withdrawal from social activities involving food, frequent fluctuations in weight, or physical signs such as hair thinning or growth of fine body hair.

Considering Professional Attention:

If you notice these behaviors or symptoms in yourself or someone else, it is important to consider seeking professional attention. Professionals trained in eating disorder treatment can conduct an assessment to determine if a problem exists and recommend appropriate next steps. Even if there is uncertainty about whether the issue is severe enough for professional intervention, it's always better to err on the side of caution.

Benefit at Any Stage:

It's worth noting that seeking professional help can still be beneficial even if an individual has been struggling with disordered eating for a long time. Trained professionals understand how complicated these disorders can be and possess the expertise necessary to guide individuals towards recovery, regardless of the duration of their struggle. It's never too late to seek help.

Encouraging Prompt Help-Seeking:

When you become aware of someone who may be experiencing disordered eating, it is essential to encourage them to seek professional help as soon as possible. While it's natural for individuals to feel hesitant or resistant about seeking help, emphasizing the importance of early intervention can motivate them to take action. Assure them that seeking help does not signify weakness, but rather strength and a commitment to their well-being.

Supporting Someone Unable to Seek Help:

In severe cases, individuals struggling with disordered eating may be incapable of taking responsibility for seeking help due to the overwhelming effects of the disorder. In such situations, it becomes crucial for family members, friends, or loved ones to intervene and ensure that the individual receives the necessary assistance. This can involve contacting healthcare professionals, providing emotional support, and guiding the person towards appropriate treatment options.

Recognizing when to seek help for disordered eating is vital for promoting recovery and preventing further harm. By understanding the significance of early intervention, considering professional attention for symptoms and behaviors indicating a problem, emphasizing the benefits of seeking help at any stage, encouraging prompt action towards locating professional assistance, and supporting individuals unable to seek help themselves, we can contribute positively towards their journey of healing and recovery. Remember: seeking help is a brave step towards regaining control of one's health and well-being.

## What Kind of Help?

Once you've recognized the need for professional help in addressing disordered eating, it's important to understand what kind of assistance is available and how to find the right support. This lesson will delve into the different types of help individuals can consider and provide guidance on facilitating the process while respecting autonomy.

Seeking Professionals with Expertise:

Not all health professionals are adequately trained to detect and treat disordered eating. It is crucial to find someone with specific expertise in eating disorders. Look for psychologists, psychiatrists, or therapists who specialize in this area. They can provide tailored treatment approaches and have a deeper understanding of the unique challenges associated with disordered eating.

Eating Disorder Organizations:

Connecting with reputable eating disorder organizations can provide valuable support and information. These organizations often offer resources such as helplines, online forums, educational materials, and support groups. Reach out to them for guidance on finding qualified professionals or treatment centers in your area.

Varied Treatment Options:

There are various treatment options available for individuals struggling with disordered eating. It's essential to understand that different approaches work for different people. Some may benefit from outpatient therapy, while others might require more intensive forms of care such as residential treatment or day programs. Encourage exploring these options and let the individual decide which one aligns best with their needs and preferences.

Challenges in Identifying Disordered Eating:

Recognize that sometimes it can be challenging for health professionals to identify disordered eating accurately. Individuals may try to conceal their behaviors or symptoms out of shame or fear judgment. However, persistent concerns about body image, unhealthy relationships with food, excessive exercise patterns, or dramatic weight changes should raise red flags. If standard medical appointments do not address these concerns adequately, encourage seeking specialized help specifically focused on addressing disordered eating.

Offering Assistance:

Taking the first step towards seeking help can be overwhelming for individuals struggling with disordered eating. Offer your assistance in making that initial call or appointment if needed. Accompanying them to appointments can provide support and help ease their anxiety during the early stages of seeking help.

Respecting Autonomy:

When it comes to adult individuals struggling with disordered eating, respect their autonomy in making decisions about when, how, and what kind of help they seek. While it's essential to offer support and express concern, remember that ultimately the decision lies with them.
Encourage open conversations about treatment options, benefits, and potential risks associated with different approaches. Empower them to make informed choices while ensuring they understand the urgency of seeking help sooner rather than later.

Finding appropriate help for individuals struggling with disordered eating requires careful consideration and understanding of available resources. By seeking professionals with expertise, reaching out to eating disorder organizations, exploring various treatment options, recognizing challenges in identification, offering assistance, and respecting autonomy in decision-making processes, you can guide someone toward the right path of recovery.

Remember that seeking help is a significant step towards improving one's well-being and reclaiming a healthy relationship with food and body image.

## What to Do If the Person Decides to Meet with a Health Professional

When someone decides to seek help for their disordered eating and meets with a health professional, it's important to approach the situation with understanding and support. This lesson will delve into what you can do to provide assistance while respecting their privacy and individual journey.

Respect Their Privacy:

While it is essential to encourage seeking professional help, it's equally vital to respect the person's decision if they are not ready to disclose seeing a health professional. They may feel uncomfortable discussing this topic or sharing personal information at this stage. Be understanding of their boundaries and assure them that their privacy will be respected.

Allow Open Communication:

Encourage open communication by creating an environment free from judgment. Let them know that you are available whenever they are ready to discuss their experiences or thoughts surrounding their decision to meet with a health professional. Give them the opportunity to share their worries, fears, or uncertainties without interruption.

Provide Emotional Support:

Recognize that reaching out for help can be emotionally challenging for the individual. Offer emotional support by being present, empathetic, and validating their feelings. Reassure them that seeking professional help is a positive step towards healing and recovery. Remind them that they are not alone in this journey.

Offer Practical Assistance:

If appropriate and welcomed, offer your assistance in practical matters related to meeting with a health professional. This could involve making phone calls, scheduling appointments, or accompanying them during visits if they desire company. However, always remember to prioritize their autonomy and allow them space to make decisions on how they want others involved in the process.

Educate Yourself:

Take the initiative to educate yourself about disordered eating and its treatment options so that you can better understand what the person may be going through. Familiarize yourself with common terms associated with eating disorders and stay informed about evidence-based therapies used in treatment. This knowledge will enable you to offer more informed support and engage in meaningful conversations about their journey.

Respect Their Pace:

Each individual's healing process is unique, and it's essential to respect their pace. Some may need time to build trust with a health professional before fully engaging in treatment. Avoid pressuring them to progress faster than they are comfortable with but continue to encourage seeking professional help at their own pace.

Celebrate Their Courage:

Let the person know that taking the step of meeting with a health professional for help is incredibly courageous. Celebrate their bravery and acknowledge their efforts towards self-care and growth. Reinforce positive reinforcement and remind them that they are making important strides towards reclaiming their health and well-being.

When someone decides to meet with a health professional for help with disordered eating, it's crucial to be understanding, respectful, and supportive. Respect their privacy if they choose not to disclose seeing a health professional immediately, provide emotional support, offer practical assistance if needed, educate yourself about eating disorders, respect their pace, and celebrate

their courage throughout the process. By doing so, you can play an instrumental role in supporting them on their path toward recovery.

## What to Do If the Person Is Reluctant to Seek Professional Help

In some cases, individuals may be hesitant or resistant to seek professional help for their disordered eating. As a supportive friend or family member, there are steps you can take to encourage them and help them understand the importance of seeking professional assistance. This lesson will provide guidance on how to approach the situation when someone is reluctant to seek help.

Emphasize the Effectiveness of Professional Help:

When someone is reluctant to seek professional help, it is important to highlight that seeking support from qualified professionals is the most effective way to treat disordered eating.
Explain that healthcare professionals have specialized knowledge and expertise in dealing with these issues and can provide the necessary guidance for recovery.

Reassure Them about Strength in Seeking Help:

Dispelling misconceptions and stigma surrounding seeking help for mental health is crucial when someone is reluctant. Reassure them that reaching out for support demonstrates strength rather than weakness. Explain that acknowledging disordered eating and taking steps towards recovery require courage and self-awareness.

Focus on Addressing Co-Existing Symptoms:

If they are still resistant to directly addressing their disordered eating, encourage them to focus on addressing co-existing symptoms instead. Many individuals with disordered eating also struggle with other mental health issues like depression, anxiety, or insomnia. By highlighting the connection between these symptoms and their overall well-being, you can motivate them to seek assistance without directly confronting their disordered eating behaviors.

Provide Resources and Education:

Equip yourself with information about available resources such as helplines, therapy options, support groups, or online communities focused on disordered eating recovery. Share these resources with them and offer to assist in finding suitable options based on their preferences.

Lead by Example:

Sharing stories of individuals who sought professional help for disordered eating and successfully recovered can inspire hope and motivation. Hearing real-life examples of people who overcame similar challenges can help reduce the person's fear or reluctance.

Listen with Empathy:

It is important to maintain an empathetic and non-judgmental stance throughout the discussions. Actively listen to their concerns, fears, and reasons for being hesitant. Validate their feelings and create a safe space where they feel comfortable opening up about any struggles they may be facing.

Encourage Start with Small Steps:

Instead of pressuring them into seeking professional help abruptly, encourage small steps

towards recovery. Suggest options such as reading self-help books or educating themselves about disordered eating through reliable sources. This approach can gradually build their confidence and willingness to explore more formal avenues of support.

Addressing someone's reluctance to seek professional help for disordered eating requires patience, understanding, and empathy. By emphasizing the effectiveness of professional intervention, highlighting strength in seeking help, focusing on co-existing symptoms, providing resources, leading by example, listening with empathy, and encouraging small steps towards recovery, you can gently guide them towards the support they need on their journey towards healing.

## Conclusion

If you suspect someone has an eating disorder, it is important to talk to them about your concerns. It's important to remember that the person may not be aware of their own actions or behaviors and may require help from a trained medical professional.

When talking to someone who you think might have an eating disorder, it's important to approach the conversation with care and understanding. Avoid using language that can make the individual feel blamed or judged for their condition, as this could cause them more harm than good. Use non-judgmental and supportive language that encourages them to seek out help.

- Helping Someone with an ED Guide
- When Should you Access Support for an Eating Disorder

# Language Matters

## Common Eating Disorder Abbreviations

| | |
|---|---|
| ACT | ACCEPTANCE AND COMMITMENT THERAPY |
| ADD | ATTENTION DEFICIT DISORDER |
| ADHD | ATTENTION DEFICITY HYPERACTIVITY DISORDER |
| AN | ANOREXIA NERVOSA |
| AN – BP | ANOREXIA BINGE-PURGE |
| ARFID | AVOIDANT/RESTRICTIVE FOOD INTAKE DISORDER |

| | |
|---|---|
| BED | BINGE EATING DISORDER |
| BDD | BODY DYSMORPHIC DISORDER |
| BMI | BODY MASS INDEX |
| BMR | BASAL METABOLIC RATE |
| BN | BULIMIA NERVOSA |
| B/P | BINGE PURGE |
| BSFT | BEHAVIOURAL SYSTEMS FAMILY THERAPY |
| CAT | COGNITIVE ANALYTICAL THERAPY |
| CBT | COGNITIVE BEHAVIOURAL THERAPY |
| CRT | COGNITIVE REMEDIATION THERAPY |
| COE | COMPULSIVER OVEREATING |
| CW | CURRENT WEIGHT |
| D | DAUGHTER |
| DBT | DIALECTICAL BEHAVIOUR THERAPY |
| ED | EATING DISORDER |
| EDNOS | EATING DISORDER NOT OTHERWISE SPECIFIED |
| EAT | EATING ATTITUDES TEST |
| EBW | EXPECTED BODY WEIGHT |
| EDE | EATING DISORDERS EXAMINATION |
| FGW | FINAL GOAL WEIGHT |
| GW | GOAL WEIGHT |
| HW | HIGHEST WEIGHT |
| IBW | IDEAL BODY WEIGHT |
| IFS | INTERNAL FAMILY SYSTEMS THERAPY |
| IP | INPATIENT HOSPITAL TREATMENT |
| IOP | INTENSIVE OUTPATIENT TREATMENT |
| LTGW | LONG TERM GOAL WEIGHT |
| LW | LOWEST WEIGHT |
| MET | MOTIVATIONAL ENHANCEMENT THERAPY |
| MFT | MULTI-FAMILY THERAPY |
| NES | NIGHT EATING SYNDROME |
| NG | NASOGASTRIC FEEDING |
| OCD | OBSESSIVE COMPULSIVE DISORDER |
| OSFED | OTHER SPECIFIED FEEDING AND EATING DISORDERS |
| OP | OUTPATIENT |
| PHP | PARTIAL HOSPITALIZATION PROGRAM |
| RC | RESIDENTIAL CARE |
| RAN | RECOVERED ANOREXIC PATIENT |
| RBN | RECOVERED BULIMIC PATIENT |
| RD | REGISTERED DIETICIAN |
| RTC | RESIDENTIAL TREATMENT CENTRE |
| S | SON |
| SED | SELECTIVE EATING DISORDER (ARFID) |
| SI | SUICIDAL IDEATION |
| SI | SELF INJURY |
| SH | SELF HARM |

| | |
|---|---|
| SIB | SELF INJURIOUS BEHAVIOUR |
| SSRI | SELECTIVE SEROTONIN RE-UPTAKE INHIBITOR STGW |
| STGW | SHORT TERM GOAL WEIGHT |
| TB | TARGETED BEHAVIOUR |
| TW | TARGET WEIGHT |
| WR | WEIGHT RESTORED |

# What is Anosognosia?

Anosognosia, or unawareness of illness, is a condition that can affect those suffering from eating disorders. It is the inability to recognize the physical and mental effects of an eating disorder and can be debilitating for individuals trying to overcome their eating disorder. This lack of awareness makes it difficult for patients to seek treatment or even understand why they need help in the first place.

It is important to note that anosognosia does not affect everyone who has an eating disorder; some individuals are able to recognize when they need help and take steps towards recovery on their own. However, this kind of insight is not common among sufferers of Anorexia Nervosa, Bulimia Nervosa, Binge Eating Disorder, Avoidant/Restrictive Food Intake Disorder (ARFID), or other related conditions.

## Symptoms of Anosognosia

Signs of anosognosia include believing that one's unhealthy behavior is normal, refusing to accept medical advice about their food intake or weight loss goals, and not recognizing the effects their behaviors are having on their physical health. Conclusion: Understanding Anosognosia

Anosognosia, a rare neurological disorder that affects the way individuals perceive their own physical and mental health, is a condition that has been largely studied in relation to eating disorders. The conclusion of this research is that anosognosia can have serious implications for those who suffer from it, as well as their loved ones.

Understanding anosognosia is essential to ensure proper diagnosis and treatment of sufferers. Diagnosis requires careful examination of an individual's behavior and symptoms to identify if they are exhibiting signs of the disorder. Treatment options include cognitive behavioral therapy, psychotherapy, medication management and lifestyle modifications to help patients recognize the impact of their behaviors on themselves and others. With proper understanding of anosognosia and appropriate support systems in place, individuals with this disorder can lead fulfilling lives despite its challenges.

- My Daughter Does Not Want to Recover From Her Eating Disorder | HealthyPlace

## What is Disordered Eating?

Disordered eating is an umbrella term used to describe a wide range of unhealthy eating behaviors that do not mean the criteria for an eating disorder diagnosis. It can include anything from an occasional bout of stress-induced binging to more serious issues such as anorexia, bulimia and binge-eating disorder. It's important to note that disordered eating does not necessarily mean an individual has a full-blown eating disorder; rather, it can be used to identify behaviors that have the potential to become problematic.

The most obvious sign of disordered eating is rapid weight gain or loss, along with changes in attitude or behavior related to food. Other common signs are preoccupation with food, body image and dieting; extreme restriction or 'binge' episodes; avoidance of certain foods; guilt after meals; and obsession over calories or fat content in food.

## Eating Disorder Types

These are very brief descriptions of the eating disorder types. They are broad in nature because many of them have sub- types with different presentations. A definitive diagnosis by a medical professional is critical to be able to get the correct treatment required. It is very important to not try to self-diagnose.

## What is Anorexia Nervosa?

### Symptoms: Eating Habits, Emotional Changes

Anorexia nervosa is an eating disorder characterized by extreme food restriction and a distorted body image. It can have severe consequences, including physical and emotional symptoms. Eating habits are often the first sign of anorexia, as individuals severely limit their caloric intake and avoid certain foods.
Additionally, emotional changes such as depression, anxiety, irritability and low self-esteem may develop in people struggling with anorexia due to the drastic lifestyle changes they make.

It is important to be aware of any patterns that may indicate an unhealthy relationship with food or body image in order to address concerns early on. Those who notice signs like dramatic weight loss or refusal to eat should speak with a doctor or mental health professional for evaluation and treatment options. With proper care, it is possible for someone living with anorexia nervosa to
recover from their symptoms and lead a healthier life. Some symptoms of anorexia nervosa include:

- Extreme weight loss
- Refusal to maintain body weight at or above a minimally normal weight for age and height
- Intense fear of gaining weight or becoming fat Distorted body image
- Amenorrhea (absence of menstrual periods) Extremely restricted eating
- Excessive exercise
- Use of laxatives, diuretics, or other weight-loss aids Low self-esteem and feelings of inadequacy
- Obsessive thoughts and behaviors related to food and weight

## Treatment Options: Therapy, Medication

Treatment options for anorexia nervosa are multi-pronged and involve both medication and therapy. Typically, treatment for anorexia involves addressing both physical and psychological aspects of the illness. Therapy is often recommended as the primary form of treatment to help individuals better understand their eating behaviors, thoughts, feelings and emotions related to food. This helps them develop new cognitions that will lead to healthy behaviors around food while also providing emotional support during recovery. Medication may be used to treat co- occurring psychiatric issues like depression or anxiety which can contribute to disordered eating behaviors associated with anorexia nervosa. It is important to remember that "food first" is a general understanding that people have to be nourished before things like therapy can help.

## Complications: Physical and Mental Health Issues

Physical complications associated with anorexia are numerous, ranging from physical exhaustion to cardiac arrest. In addition to these physical issues, an individual suffering from this disorder may experience a variety of mental health issues such as depression or anxiety. It's important for individuals who are living with anorexia nervosa to recognize the seriousness of their condition and seek help in order to prevent long-term damage.

The most common physical symptoms associated with anorexia include loss of muscle mass, dehydration, low blood pressure, and fatigue. Individuals may also experience hair loss or brittle nails due to malnutrition. More severe cases can lead to electrolyte imbalances which can result in abnormal heart rhythms or even cardiac arrest.

Treatment typically involves addressing the underlying psychological and emotional issues that contribute to the disorder, as well as addressing the physical complications of the disorder. With appropriate treatment, many individuals with anorexia nervosa can make a full recovery and go on to lead healthy, fulfilling lives.

- Anorexia May Be Linked to Metabolism
- Disrupting the Habits of Anorexia
- Getting help for young-adults with anorexia not too old for family therapy
- MICROBIOME: A NEW DIRECTION IN UNDERSTANDING ANOREXIA NERVOSA

My daughter was diagnosed with restrictive anorexia nervosa. She has lived through it twice as of January 2026.

## What is ARFID?

ARFID, which stands for Avoidant/Restrictive Food Intake Disorder, is a recently recognized eating disorder. It is characterized by an extreme or selective food avoidance due to the person's fear of particular textures, tastes, smells and other characteristics of certain foods. This disorder can develop in both adults and children, but it typically begins in childhood. It goes beyond being a "picky" eater.

People with ARFID may avoid specific food groups such as meats or dairy products, or they may restrict their intake to only a few accepted foods that are deemed safe by them. These people often have difficulty meeting their nutritional needs due to persistent restrictions in their diet that can lead to malnutrition and weight loss. Symptoms associated with ARFID include fear of choking or vomiting during mealtime, limited dietary variety and significant emotion distress when faced with the prospect of eating unfamiliar foods.

## What Are The Risk Factors For ARFID

Certain psychological and behavioral issues may put individuals at risk for developing this disorder. People who suffer from social anxiety or perfectionism are more likely to develop ARFID due to feeling overwhelmed in social situations where food is involved. Traumatic experiences such as bullying may also raise the likelihood of someone having ARFID due to fear of ridicule when attempting new foods. Other conditions such as autism spectrum disorder, obsessive-compulsive disorder (OCD), selective mutism and depression may play a role in putting people at risk for ARFID.

## Treatment and Therapy Options

When it comes to understanding and treating Avoidant/Restrictive Food Intake Disorder (ARFID), there are many different therapy and treatment options available. Understanding the condition is key in determining which type of therapy or treatment best suits the individual's needs. A variety of therapies can be used effectively to treat ARFID, including cognitive- behavioral therapy (CBT), psychotherapy, nutritional counselling and family-based approaches.

## Coping Strategies For ARFID: What You Need To Know

Living with Avoidant/Restrictive Food Intake Disorder (ARFID) can be an overwhelming experience, but it is possible to manage the condition. The key to coping with ARFID is to develop strategies that promote healthy eating while minimizing feelings of fear or anxiety. Working with a therapist or nutritionist is highly recommended as they are trained to assist in creating individualized treatment plans.

These treatment plans should include steps for expanding food choices, helping individuals become more comfortable around food and meal times, and making sure nutritional needs are being met. It's important that people living with ARFID do not push themselves too hard when trying new foods and should be encouraged to take small steps at their own pace. Additionally, talking through techniques such as breathing exercises and mindfulness techniques can help reduce the feeling of fear or anxiety associated with eating certain foods.

- AFRID - Nourished Child
- ARFID
- ARFID and FBT
- ARFID Assessment
- ARFID Treatment

- ARFID Treatment for Adults

## What is Binge Eating Disorder?

Binge Eating Disorder (BED) is an eating disorder characterized by recurrent episodes of eating large amounts of food in a short period of time (typically less than 2 hours) and feeling out of control during these episodes. This is often followed by feelings of guilt, shame, or distress.

Unlike Bulimia Nervosa, where individuals engage in purging behaviors to get rid of the food they have consumed, people with BED don't engage in those behaviors.

Symptoms of BED include:

- Recurrent episodes of consuming large amounts of food in a short period of time, without engaging in compensatory behaviors like purging or excessive exercise.
- A feeling of lack of control overeating during the binge episode
- Distress, guilt, or shame after binge eating
- Eating when not hungry, or eating to the point of feeling uncomfortably full
- Eating alone due to embarrassment about the amount of food being consumed
- Rapid eating or eating until feeling uncomfortably full
- Unhappy with their body weight and shape.

BED is a serious condition that can lead to significant physical and emotional distress and increase the risk of other health problems such as obesity, diabetes, high blood pressure, and depression.

Ironically, this is the eating disorder that I have. At first, I thought it was just "emotional eating" however upon further reflection, I met all of the criteria for it and sought medical help. Please know that while BED isn't always talked about in the world of eating disorders with the same urgency as some of the restrictive ones, I can assure you it can be just as disruptive for your life.

- Are Emotions Driving Your Binges?
- Binge Eating and Premenstrual Syndrome
- BINGE EATING DISORDER
- Dialectical Behavioral Therapy in the Treatment of Binge Eating Disorder
- How to Support Someone with Binge Eating Disorder
- Support “How-To’s” for Loved Ones of Those with Binge Eating Disorder

- Understanding the Binge Cycle: The Role of Dieting
- Understanding the Binge Eating Cycle

## What is Bulimia Nervosa?

Bulimia nervosa is an eating disorder characterized by recurrent episodes of binge eating (eating large amounts of food in a short period of time and feeling out of control) followed by compensatory behaviors such as self-induced vomiting, misusing laxatives, or diuretics, fasting, or excessive exercise. Individuals with bulimia nervosa often have a distorted body image and are preoccupied with their weight and shape. They may also have a fear of gaining weight or becoming fat and may have a history of weight cycling or yo-yo dieting. Symptoms of bulimia nervosa include:

- Recurrent episodes of binge eating followed by compensatory behaviors such as self-induced vomiting, misusing laxatives, or diuretics, fasting, or excessive exercise.
- A feeling of lack of control overeating during the binge episode
- Distress, guilt, or shame after binge eating
- Preoccupation with body weight and shape
- Fear of gaining weight or becoming fat
- Unhappy with their body weight and shape
- Rapid eating or eating until feeling uncomfortably full
- Eating alone due to embarrassment about the amount of food being consumed
- Secretive or secretive behavior related to food or eating

Bulimia nervosa is a serious condition that can lead to significant physical and emotional distress and can also increase the risk of other health problems such as electrolyte imbalances, heart problems, and damage to the gastrointestinal system.

## Treatments for Bulimia

Treatments for bulimia typically involve a combination of psychotherapy, nutritional counselling, and medications. Cognitive behavior therapy (CBT) emphasizes developing healthier coping skills and changing the negative thought patterns that may be contributing to the condition. In addition to providing emotional support, a nutritionist or dietitian can help create individualized meal plans as well as provide education about healthy eating habits.

- ANEB: Help and support for people with eating disorders and for their loved ones. - Aneb
- BANA – Bulimia Anorexia Nervosa Association – You are not alone on this journey!
  Bulimia Nervosa - HelpGuide.org
- Bulemia - AHS

- Bulemia - Symptoms and Causes
- Bulemia - Symptoms and Diagnosis
- Bulemia - Youtube
- BULIMIA NERVOSA
- Bulimia Symptoms & Common Side-Effects
- Electrolytes and Bulimia: Why Is This a Big Deal?
- Supporting Your Loved One Struggling with Bulimia Nervosa - Youtube Feast
- The Connections Between the Brain and Urges to Binge and Purge
- The Silent Shame Of Bulimia

## What is Orthorexia?

Orthorexia is an eating disorder characterized by an obsession with healthy eating. It is often misunderstood and can be difficult to identify in someone's behavior, since some of the symptoms may overlap with those of other disorders. Common signs and symptoms of orthorexia include an excessive focus on healthy eating regimens, such as eliminating certain food groups or types of foods; guilt when unable to adhere to a strict diet; excessive exercise; difficulty removing oneself from meal planning, shopping for food, or preparing meals; increased anxiety surrounding nutrition-focused topics; and a feeling that one's self-worth depends heavily on the quality of their diet.

Often people with orthorexia become increasingly restrictive in what they will eat and will avoid any foods that are seen as "unhealthy" or "bad".

## Treatment for Orthorexia

Treatment for orthorexia can be a long, arduous process. The first step in treatment is to recognize that there is a problem with the eating habits and lifestyle choices that needs attention. To do this, it is important to speak candidly with a mental health professional like a therapist or psychologist who specializes in eating disorders. They will be able to help explore the underlying causes of the condition and develop strategies for overcoming it.

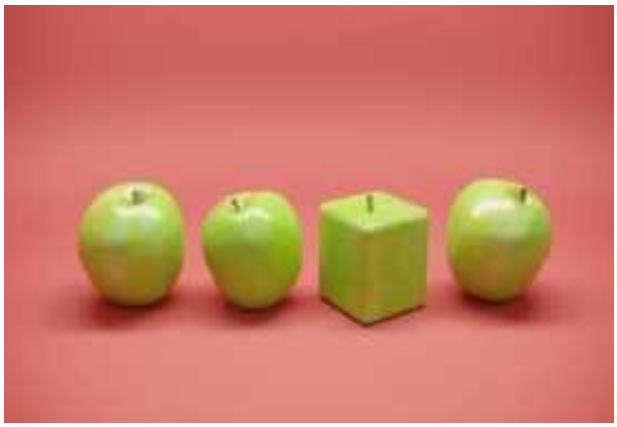
It may also be beneficial to join an online support group or find an in-person support group where someone can talk about feelings with people who are experiencing similar

issues. This kind of mutual understanding and validation can provide helpful insight into how best to manage symptoms related to orthorexia.

Treatment for orthorexia usually consists of psychological therapy and nutritional counselling. Therapy helps the individual gain insight into their thought patterns around food and its role in their life while developing healthy coping strategies to manage their stress levels. Nutritional counselling focuses on providing support and guidance as the person transitions back to healthier eating habits by normalizing eating behaviors such as regular meals with snacks in between if needed.

- Orthorexia | National Eating Disorders Association
- Orthorexia-10-signs-you-should-seek-help-now
- Orthorexia: Dangers of the 'Disorder Disguised as Virtue'
- Orthorexia: The dangers of healthy eating
- Orthorexia - CCI

## What is OSFED?



OSFED (Other Specified Feeding or Eating Disorder) is a category of eating disorders that describes individuals who have symptoms of an eating disorder but do not meet the full diagnostic criteria for anorexia nervosa, bulimia nervosa, or binge eating disorder.
Examples of conditions that fall under the category of OSFED include:

- Atypical anorexia nervosa: Individuals who meet all of the diagnostic criteria for anorexia nervosa except that they have regular menstrual cycles, or their body weight is above the threshold for underweight.
- Purging disorder: Individuals who engage in purging behaviors (such as self-induced vomiting or misusing laxatives) but do not binge eat.
- Night eating syndrome: Individuals who eat large amounts of food in the evening or at night and have difficulty sleeping.
- Binge eating disorder (less frequent or less severe episodes)

Symptoms of OSFED may vary depending on the specific type of disorder, but they may include:

- Distorted body image
- Preoccupation with food, weight, and shape
- Fear of gaining weight
- Unhappy with their body weight and shape

- Rapid eating or eating until feeling uncomfortably full
- Eating alone due to embarrassment about the amount of food being consumed
- Secretive or secretive behavior related to food or eating
- Engaging in compensatory behaviors such as fasting or excessive exercise
- Binge eating or purging behaviors

- Other specified feeding and eating disorders (OSFED)

## What is Pica?

PICA is a disorder characterized by an appetite for non-nutritive items, such as chalk, ice, dirt, or paper. It is classified as an eating disorder due to its potential risk of nutritional deficiency and potential harm to the body from ingesting harmful objects. For many with PICA, the disorder can cause distress, which may lead to struggles in everyday life and activities.

At its core, PICA is seen as an extreme form of cravings for non-food items; however, it can be quite serious if left untreated. In some cases people with PICA develop stomach aches and digestive problems due to their cravings of inedible materials like clay or chalk. Furthermore long-term deficiencies in minerals and vitamins may arise as a result of repeated ingestion of foodstuffs unrelated to nutrition.

- Learning About Pica

## Risk Factors

Disordered eating is a serious concern for many people. Although the issue affects individuals of all ages, it is particularly prevalent among adolescents and young adults. Understanding the risk factors associated with disordered eating can help individuals identify symptoms that may suggest its presence in themselves or someone they know.

Risk factors for disordered eating include a history of dieting, low self-esteem and body dissatisfaction, depression and anxiety, family conflicts or problems with friends, chronic medical issues such as asthma or diabetes that require close monitoring of food intake and weight changes, feeling overwhelmed by life's pressures such as schoolwork or college admissions processes. Additionally, athletes engaging in sports that focus on appearance may be at an increased risk due to pressure to maintain a certain physique. People who have experienced traumatic events such as sexual abuse or violence may also be more likely to develop disordered eating habits.

## Get Help Now

If you or someone you know is struggling with disordered eating, it can be hard to know where to start. Disordered eating includes a range of behaviors, developed out of an unhealthy

relationship with food and body image. This behavior can significantly interfere with an individual's quality of life and needs to be treated by trained professionals.

Getting help for disordered eating can be difficult, but there are many available resources to give individuals the guidance they need to establish a healthier relationship with food. Professionals such as dietitians, mental health counselors or psychiatrists may have specialized training in treating disordered eating that could help those affected break free from its debilitating effects. These specialists will work collaboratively with their clients to develop personalized strategies for recovery tailored specifically for the individual's situation and needs.

- Disordered Eating - CCI

# Eating Disorder Diagnosis, Now What?

## Securing A Good Team Is Critical

### What is an Eating Disorder Team?

An eating disorder team is an invaluable resource for those who are struggling with any eating disorder. These teams of professionals provide comprehensive, personalized care that can help individuals to regain control over their relationship with food. A great eating disorder team will bring together various specialists and providers to create a holistic treatment plan tailored to the individual's specific needs.

Eating disorder teams typically include multiple medical, psychological, and nutritional professionals. Doctors may be consulted in order to assess the overall physical health of the individual, while dieticians can offer guidance on how best to nourish the body in a safe, healthy way. Psychotherapists provide emotional support and coping strategies for dealing with triggers and cravings associated with disordered eating behaviors.

## Who to Look For

Securing a great eating disorder team can be a daunting task. With the right information and guidance, you can assemble an incredible team to help manage your personal health needs. To ensure that you have the best care possible, there are certain key members of your eating disorder team to look for.

First, it's important to work with a therapist or psychiatrist who is knowledgeable about eating disorders and has experience in treating them. You should also ask if they have specialized training or certification in this area; having someone on your team with specific credentials can make all the difference. Additionally, consider working with a dietitian who specializes in nutrition therapy for individuals with eating disorders, as well as a primary care physician who is willing to collaborate closely with other members of the team. It is also extremely important to make sure your loved one connects with all members of the team otherwise it may be hard to get the buy-in you need.

Finally, make sure you think about the resources available in your area. Are there any support groups that you can join?

## Tips for Locating Professionals

Finding the right eating disorder team to help you or a loved one can be a difficult process. It is important that the professionals you choose are experienced, knowledgeable and able to provide comprehensive care. Here
are some tips for locating professionals who can get the job done:

The best place to start when looking for an eating disorder specialist is with your primary care physician or therapist. They can recommend specific professionals in your area who specialize in eating disorder treatment.

Start by doing your research on potential providers. Make sure they are qualified to handle an individual's unique set of symptoms and that they understand the complexities of eating disorders. It's also important to find out if they specialize in any particular treatment modalities or approaches such as cognitive behavioral therapy (CBT) or family-based therapy (FBT).

In addition to asking your primary care provider, you can also do research online and look into reviews from current and past patients of potential specialists. Knowing what type of treatment options each practitioner offers will help you determine which one may be right for you.

Additionally, speaking with friends or family members who may have had experiences with different specialists could be beneficial as well.

## Setting Boundaries and Expectations

Setting boundaries and expectations is key to maintaining a successful eating disorder treatment team. Whether it's a therapist, nutritionist, or support group, having clear-cut guidelines will help ensure that everyone involved in the patient's recovery is on the same page. Establishing reasonable limits and parameters can provide a safe environment for open communication and trust between all parties.

When building an eating disorder treatment team, make sure to discuss what is expected from each member of the team. Everyone should be aware of their roles, responsibilities and scope of practice so that there are no surprises down the road. Additionally consider setting up rules for how often everyone should meet or talk about progress or any changes in treatment plans. This will give everyone involved with the patient's journey an opportunity to stay connected during times of transition or recovery milestones. It is also important to lay out what criteria would warrant an immediate visit to the team.

- Understanding and Finding Help for Eating Disorders
- NEDIC Tips for choosing professional help

## Some Questions You Need To Ask After Diagnosis

If you have been diagnosed with an eating disorder, it's important to have a clear understanding of your condition and treatment options. Here are a few questions you may want to ask your doctor:

1. Are there any concerns about my physical health, and what are they?
2. Are there any concerns about my safety and what are they?
3. Are there any other medical or mental health conditions that need to be considered?
4. Have I had any previous treatment for an eating disorder, and if so, what was it and how did it work for me?
5. How can my family and friends be involved in my treatment?
6. How have my eating behaviors and food rules affected my daily life?
7. How long have I been experiencing symptoms?
8. How often will we meet, and who will be on my treatment team?
9. What are my current symptoms?
10. What are my goals for treatment and what are my expectations?
11. What are the possible risks and benefits of the different treatment options?
12. What is my current weight, height, and body mass index (BMI)?
13. What is the recommended treatment plan and what are the different options available?
14. What type of eating disorder have I been diagnosed with?

It's important to understand that the recovery process may vary depending on your needs and the severity of the disorder, and that a professional team of healthcare providers such as a registered dietitian, a therapist, and a physician will be able to help you develop a treatment plan that works best for you. These questions can also be asked about your loved one.

## What to Do During a GP/Doctor's Appointment

Attending a doctor's appointment with your child can be an essential step in addressing their health concerns. Creating a productive and informative appointment is crucial for obtaining accurate diagnoses, discussing treatment plans,
and ensuring proper follow-up care. In this chapter, we will explore key tips on maximizing the effectiveness of these appointments, including recording important information, involving other professionals in the child's care when necessary, and preparing for potential challenges.

1. Record Important Information:

Instructions and Diagnoses:
During the appointment, it is advisable to bring along a notepad or use your smartphone to record instructions provided by the healthcare professional. Take note of any diagnoses given as well as recommendations regarding further tests or treatments. This written record will serve as a useful reference in the future

Medications and Prescribed Tests:
Ensure that you accurately document any prescribed medications or tests ordered by the doctor. Write down their names, dosage instructions, and potential side effects if applicable. This information will help you administer medication correctly and monitor any changes in your child's health.

2. Involve Other Professionals:

School involvement:
If recommended by the healthcare professional, consider contacting your child's school to involve them in the treatment plan. By informing teachers or counselors about your child's condition or recommended accommodations, you create an environment that supports their overall well-being and academic progress.

Collaborating with Additional Professionals:
Depending on your child's specific health concerns, it may be beneficial to include other professionals in their care team. These could include therapists, dieticians/nutritionists, occupational therapists, or speech-language pathologists. Such collaboration ensures a comprehensive approach to addressing your child's needs.

3. Discuss Potential Side Effects:

Medication or Treatment Side Effects:
When prescribed medication or recommended treatments are discussed during the appointment, don't hesitate to inquire about potential side effects. Understanding the possible risks associated with any intervention allows you to make informed decisions and monitor your child's well-being closely.

4. Be Prepared for Challenges:

Addressing Refusal:
Some children may exhibit resistance or refusal during medical appointments. This can make the process challenging for both the parent and healthcare professional. Be prepared to address any refusal calmly, seeking guidance from the doctor on how best to handle such situations.

Record Follow-Up Appointments and Contact Details:
Ensure that you accurately record upcoming follow- up appointments and any contact details for after- hours support, should you have any urgent concerns. Having this information readily available ensures seamless communication between you, the doctor, and other relevant parties involved in your child's care. Doctor's appointments are crucial opportunities to advocate for your child's health and well-being. By recording important information, involving other professionals when necessary, discussing potential side effects, preparing for challenges like refusal, and keeping track of follow-up appointments and contacts, you can ensure a collaborative approach towards addressing your child's healthcare needs effectively. Remember that open communication with healthcare professionals plays a significant role in optimizing outcomes for your child's health journey.

## What Caregivers Need to Know

### Definition of Caregiving

Caregiving is an important role that many people take on in order to support and care for others. Whether it's for a family member, friend or other loved one, being a caregiver can bring great rewards but also come with its own set of challenges. Understanding the nature of caregiving and what it entails is key to providing effective and compassionate care.

When caring for someone with an eating disorder, caregivers need to understand how this type of illness affects the individual they are caring for. Caregivers must be aware of the physical and emotional issues which arise from an eating disorder as well as develop strategies that will help encourage a healthy lifestyle. It’s important to remember that everyone experiences eating disorders differently, so a customized approach may be needed in order to adequately meet each individual’s needs.

### Challenges for Caregivers

Being a caregiver for someone with an eating disorder can be a challenging and emotional journey. Caregivers must be aware of the signs and symptoms of the disorder, as well as how their own actions can influence the recovery process.

Eating disorders are classified as severe mental illnesses and often require long-term treatment plans. As a caregiver, it is important to understand that this is not a short-term issue that can be resolved quickly or easily. You must also recognize that eating disorders are complex illnesses, which require both physical and emotional care to achieve full recovery.

It is not uncommon for people with eating disorders to be resistant to treatment or resist taking their medications. This can cause frustration for you as a caregiver, especially if you are trying  to help your loved one get better.

## Supporting Someone with an Eating Disorder

Eating disorders are serious mental health conditions that can have a profound impact on both the individual affected and those in their life. Caregivers play an essential role in helping to support someone with an eating disorder, but they must first understand the complexities of the illness. The Mayo Clinic explains that eating disorders develop from a variety of factors such as cultural pressures, genetics, or environment.

They also often occur alongside other mental illnesses like depression or anxiety. Red flags for early identification include dramatic changes in weight or body size due to restrictive dieting and exercise habits; intense fear of gaining weight; preoccupation with food; avoiding social events centered around meals; secretive behaviors around food; excessive use of laxatives or diet pills.

### It Is Not Your Fault

Eating disorders can be difficult to understand for both the person suffering from them and their caregivers. It can be hard to know how to provide care and support without feeling overwhelmed or helpless. It is important for those caring for someone with an eating disorder to remember that it is not their fault.

The person suffering from an eating disorder is responsible for wanting to recover from their illness, but they may not be able to control it. It is the job of family members and friends to provide support, love, and care. Most importantly, it is essential to remember that it’s not the fault of either the caregiver or the patient when it comes to eating disorders.

## It Is Their Journey But You Can Walk Beside Them

Caring for a loved one with an eating disorder can be an emotionally and physically exhausting experience. As a caregiver, it is vitally important to remember that the journey of recovery is ultimately up to the individual living with the disorder. However, caregivers have an essential role in providing support, resources and compassion throughout this process.

Being there for someone on their journey to better health requires understanding the disorder from all angles: the physical, mental and emotional aspects associated with eating disorders. From getting educated about treatment options to being patient as treatments are explored, caregivers must stay informed and remain available as a source of comfort when needed.

## Next Steps

Caregivers of an individual with an eating disorder must have the right knowledge and resources in order to provide effective support.

Next steps for caregivers include researching treatment options and connecting with medical professionals that specialize in eating disorders. Some healthcare providers refer patients to outpatient programs such as cognitive-behavioral therapy or family therapy, while others may suggest residential treatment depending on the severity of their condition. It's important for caregivers to find a mental health professional who is experienced in treating individuals suffering from eating disorders and can provide guidance on how best to help them through their recovery journey.

## Providing Support in the Home

When a child is struggling with disordered eating, it is essential for parents and caregivers to provide an environment of love, support, and understanding. This chapter explores effective strategies for providing support in the home setting. By creating a caring and supportive environment, parents can help their child on the path to recovery.

Maintain a Caring and Supportive Environment:
It is crucial to maintain a caring and supportive environment at home while addressing disordered eating. Here are some ways to achieve this:

Avoid unintentionally supporting disordered eating behavior:
Be mindful of the language used around food, weight, and appearance. Focus on promoting a healthy relationship with food rather than emphasizing strict rules or judgment.

Remind the child of love and avoid judgment:
Approach discussions about their eating habits with empathy and understanding. Remind them that your concern comes from a place of love and care rather than criticism.

Set Boundaries with Others:
While offering support at home, it is important to establish boundaries with extended family members, friends, and acquaintances regarding discussions about the child's eating habits. Here are some tips:

Discourage others from probing about the child's eating habits:
Inform relatives or close friends about your child's situation to avoid unwelcome comments or questions that may trigger negative emotions or reinforce disordered behaviors.

Encourage Healthy Habits:
To help your child develop a healthy relationship with food and their body, it's important to encourage healthy habits while discouraging harmful ones:

Discourage excessive physical activity:
Ensure that physical activity remains balanced and does not become excessive or compulsive as a means to control weight or shape.

Communication & Connection:
Maintaining open lines of communication and spending quality time together can have a positive impact on supporting your child's journey towards recovery:

Make time for listening, talking, and enjoyable activities:
Create opportunities to engage in open conversations where your child feels heard and supported. Allocate regular quality time for enjoyable activities together to strengthen bonds and boost their overall well-being.

Support siblings who may also be affected emotionally:
Recognize that the disordered eating behaviors of one child can have an emotional impact on siblings. Provide them with guidance, reassurance, and support as needed.

Involvement with School:
Collaborating with the child's school is essential to ensure they receive the necessary support during their recovery process:

Talk to the child's school about needed support:
Initiate a conversation with teachers or counselors at the child's school if their disordered eating is affecting their learning or daily functioning. It may be helpful to create a plan that allows for accommodations or additional resources.

Avoid always letting the child decide meals for the whole family:
While respecting your child's autonomy in food choices, it is important not to let their preferences dominate meal planning for the entire family.

Encourage variety and balance in shared meals while prioritizing everyone's nutritional needs.
Providing support in the home is crucial when helping a child struggling with disordered eating. By maintaining a caring environment, setting boundaries, promoting healthy habits, fostering communication and connection, supporting siblings, and involving the child's school, parents can play a significant role in their child's recovery journey.

## Addressing Resistance: When the Child Does Not Recognize the Problem

In some cases, a child may not acknowledge or recognize that they have disordered eating behaviors. It is important for parents and caregivers to understand and address this resistance in a compassionate and effective manner. This chapter explores strategies for dealing with a child who does not think anything is wrong.

**Validate their Feelings:**

Acknowledge their perspective:
It can be challenging to accept that your child does not see the severity of their disordered eating behaviors. However, it is essential to remember that they may feel trapped by their thoughts and behaviors around food.

**Show empathy:**

Express understanding and compassion towards your child's struggle. Let them know that you are there to support them
on their journey towards healing, even if they cannot fully grasp the extent of the problem at the moment.

**Educate and Inform:**

Provide information:
Gather relevant information about disordered eating, including its potential physical and emotional consequences. Share this information with your child in an age- appropriate manner, focusing on facts rather than judgment or criticism.

Encourage professional guidance:
Highlight the importance of seeking professional help from a healthcare provider or therapist who specializes in eating disorders. Explain how these professionals can provide valuable guidance in understanding and addressing disordered eating behaviors effectively.

**Foster Open Communication:**

Create a safe space:
Establish an atmosphere where open communication is encouraged without judgment or blame. Let your child know that they can talk openly about their thoughts, feelings, concerns, and doubts regarding their eating habits.

Engage in active listening:
Listen attentively when your child opens up about their experiences related to food and body image issues. Avoid interrupting or dismissing their feelings; instead, validate their emotions and provide empathetic responses.

**Model Healthy Behaviors:**

Set a positive example:
Be mindful of your own attitudes and behaviors around food. Demonstrate healthy eating habits, body positivity, and self-care practices that promote overall well-being.

Involve the entire family:
Engage the whole family in adopting healthy eating habits and regular physical activity routines. This approach helps normalize these behaviors and encourages unity and support within the household.

**Seek Professional Help:**

Consult with experts:
If your child persists in denying any problem, consider seeking guidance from healthcare professionals who specialize in pediatric disordered eating. These experts can help provide a comprehensive assessment and appropriate recommendations for treatment.

Offer joint appointments:
In some cases, inviting your child to attend a doctor's appointment with you may allow them to hear information directly from a healthcare professional. This can encourage them to reflect on their behaviors more objectively and potentially help them recognize the need for intervention.

Addressing resistance when a child does not see anything wrong with their disordered eating requires patience, understanding, and open communication. By validating their feelings, providing education, fostering open conversations, modeling healthy behaviors, and seeking professional help if necessary, parents and caregivers can support their child's journey towards recognizing and addressing disordered eating patterns.

## Recognizing and Responding to Medical Emergencies in Eating Disorders

In this chapter, we will discuss how to recognize and respond to medical emergencies in individuals with eating disorders. It is crucial to be able to identify the signs and symptoms of a medical emergency promptly; this knowledge can potentially save lives. Medical emergencies in eating disorders may arise due to severe malnutrition, electrolyte imbalances, dehydration, or cardiovascular complications. Understanding these physical and psychological signs will enable you to take appropriate action and seek professional help when needed.

## Recognizing & Responding to Imminent Life-Threatening Medical Emergencies

In this chapter, we will discuss how to recognize and respond to imminent life-threatening medical emergencies in individuals with eating disorders. It is crucial to be able to identify the signs and symptoms of a medical emergency promptly; this knowledge can potentially save lives. Imminent life-threatening conditions in eating disorders may arise due to severe malnutrition, electrolyte imbalances, dehydration, or cardiovascular complications. Understanding these physical and psychological signs will enable you to take immediate action and seek urgent medical help when needed.

## Physical Signs of Imminent Life-Threatening Conditions:

- Severely low body weight: Noticeable weight loss, extreme thinness, and an emaciated appearance are common signs of severe malnutrition. In extreme cases, patients may appear skeletal or have prominent bone structures.
- Rapid heart rate (tachycardia): A heart rate significantly above the normal range (typically over 100 beats per minute at rest) can indicate cardiovascular stress due to electrolyte imbalances or dehydration.

- Hypotension: Low blood pressure may manifest as dizziness, fainting, or weakness. It can result from inadequate fluid intake and severe malnutrition.

- Electrolyte abnormalities: Electrolytes such as potassium and sodium play vital roles in bodily functions. Dangerously low levels of these electrolytes can lead to cardiac arrhythmias (irregular heartbeat), muscle weakness, seizures, confusion, or even coma.

- Dehydration: Reduced fluid intake or excessive purging behaviors like vomiting or abusing diuretics can cause dehydration. Symptoms include dry mouth, increased thirst, dark urine color, dizziness upon standing up, and fatigue.

## Psychological Signs of Imminent Life-Threatening Conditions:

- Severe depression or irritability: Individuals with eating disorders often experience mood disturbances due to malnutrition and the physical stress placed on their bodies. Appearance of extreme sadness, hopelessness, or irritability could indicate a deterioration in mental health.

- Suicidal ideation: In severe cases, individuals with eating disorders may experience suicidal thoughts or behaviors. If someone expresses intentions to harm themselves or exhibits high-risk behaviors, it is imperative to seek immediate help from mental health professionals or emergency services.

- Cognitive impairment: Persistent cognitive difficulties such as poor concentration, memory problems, confusion, disorientation, or delirium can occur when the brain does not receive adequate nutrition. These symptoms should be taken seriously and require urgent medical attention.

## Responding to a Medical Emergency

- Recognize the severity: If you suspect a medical emergency related to an eating disorder based on physical or psychological signs mentioned above, it is crucial to treat it as a serious situation requiring immediate medical attention.

- Stay calm and supportive: Approach the individual with empathy and without judgment. Be supportive but avoid trying to force them into recovery; instead emphasize the importance of seeking urgent medical help.

- Call for professional assistance: Contact emergency medical services or seek guidance from a healthcare professional experienced in eating disorders. They can provide appropriate advice and guide you through the next steps.

- Monitor vital signs: Keep a close eye on their heart rate, blood pressure, temperature, and overall well-being until medical help arrives.
- Provide emotional support: Offer reassurance, maintain open communication, and encourage them to express their feelings. Remind them that help is available and that seeking treatment is essential for recovery.

## Actions to Take in Imminent Life-Threatening Situations:

- Call for immediate medical assistance: Do not hesitate to call emergency services if you suspect an imminent life-threatening medical emergency. Time is critical in these situations.

- Stay with the person: Offer emotional support and reassurance while waiting for medical professionals to arrive. Be attentive to any changes in their condition and provide basic first aid if necessary.

- Do not force food or fluids: While tempting to offer sustenance, it is vital not to coerce someone into eating if they are unwilling or unable. Allow medical professionals to assess and intervene appropriately.

- Communicate with healthcare providers: Share all relevant information regarding the person's eating disorder history, current symptoms, and any warning signs you have noticed. This will assist healthcare providers in making informed decisions regarding their care.

- Encourage them to seek ongoing treatment: After stabilizing the person's immediate health concerns, emphasize the importance of long-term treatment for their eating disorder. Offer support and resources for finding professional help specialized in eating disorders.

Recognizing and responding promptly to imminent life-threatening medical emergencies in individuals with eating disorders can be lifesaving. By understanding the physical and psychological signs associated with these emergencies, you can take appropriate action by seeking medical assistance without delay. Remember, your role as a supportive friend or family member is crucial in assisting the affected individual on their journey to recovery.

# Outlets and Resources

## Find An Outlet and Self Care

There are various forms of support available in Canada for caregivers of individuals with eating disorders. Some of the options include:

- Support groups: Many organizations and health care facilities offer support groups for caregivers of individuals with eating disorders. These groups provide a forum for caregivers to share their experiences and provide emotional support to one another.

- Counselling and therapy: Caregivers may benefit from individual or family counselling and therapy to help them cope with the stress and emotional impact of caring for someone with an eating disorder.

- Online resources: Many organizations, such as the National Eating Disorder Information Centre (NEDIC), offer online resources and information for caregivers, including tips on how to support a loved one with an eating disorder, and how to take care of oneself while caring for someone with an eating disorder.

- Caregiver support programs: Some organizations and hospitals offer specific programs for caregivers of individuals with eating disorders, which may include counseling and therapy, education and training, and other forms of support.

- Financial assistance: Caregivers may also be eligible for financial assistance to help cover the costs of treatment and care for their loved one with an eating disorder.

It's important to note that these support options may vary depending on the region you live in Canada, and it's always best to check with local organizations and health care providers for more information about support programs available in your area. It's also important to remember that caregivers also need to take care of themselves. It's important to seek help if you're feeling overwhelmed and stressed, and it's important to know that you're not alone in this journey.

## What is Self Care?

What is self care? Self-care is an important part of being a caregiver for someone with an eating disorder. It involves taking time to prioritize your own needs and wellbeing, as well as managing stress levels, in order to be able to effectively support the person you are caring for. Self-care

helps caregivers feel refreshed and balanced, which can make a big difference when it comes to providing quality care.

Self-care practices can vary depending on individual preferences and needs; examples include exercising regularly, engaging in hobbies or activities that make you feel relaxed and happy, maintaining positive relationships with friends and family members, getting enough sleep each night, eating healthy meals throughout the day, finding ways to reduce stress such as journaling

## Self Care Basics

Self-care allows caregivers to have the emotional and physical strength they need to provide continuous, quality care.

Self care is about taking time for yourself as a caregiver so you can relax, recharge, and stay healthy. It's important that caregivers focus on their own needs in order to be available when needed by the person needing extra help. Taking time away from your loved one allows you to better assess their needs and respond more effectively when they need assistance or support.

## Common Self Care Strategies

Self care is an important part of taking care of a loved one with an eating disorder. Taking time to look after your own mental and physical health can help you cope better with the stress and demands of caring for someone who is ill. Here we look at some common self-care strategies that caregivers can use to stay balanced and manage the challenges they face.

From prioritizing routine activities such as sleeping to engaging in mindful practices like yoga or journaling - there are many different ways that caregivers can practice self-care. It's also important to take breaks from caregiving duties when possible; allowing yourself some 'me-time' helps restore energy levels so that you can continue giving your best self to others.

## Seeking Professional Help

Seeking professional help does not mean you need to enter into therapy yourself; it simply means finding the answers and resources needed to ensure that you are able to properly care for another person with an eating disorder. Professional help could include speaking with a therapist or doctor about how best to approach the situation, attending support groups or classes related to eating disorders, or even reaching out for counselling from those who may have gone through similar experiences in their lives.

## Reap Benefits of Self Care

Self care is an important aspect to consider when caring for someone with an eating disorder. Caregivers of individuals who are struggling with disordered eating should be mindful of their own needs and prioritize them in order to best support their loved one's recovery journey.

When caregivers take the time to self-care, they can reap many benefits such as improved mental health, reduced stress levels, and increased energy. When caregivers are feeling emotionally balanced, they will have the capacity to be more present and available for their loved one. Additionally, engaging in activities that bring joy and relaxation can help to create a safe environment where both caregiver and care recipient can grow together.

Self care should not be seen as a luxury but rather something essential for all caregivers of those with an eating disorder.

I used to think that self care was bubble baths and hot coffee. When my daughter was in the height of her unwellness, self care meant getting a good sleep, finding support, and binge watching TV. To my way of thinking, self care has become a catch phrase to encompass all sorts of things but really misses the mark about what self care is. It's getting easier to take time to myself to recharge, but during the hard days, it was challenging enough to get a shower. Oh yeah, and self care also included not having to make 3 snacks and 3 meals a day sometimes. Some days it was eating whatever we had in the house and not caring about the menu plan. Hang in there everyone!

- 6 things you CAN say to someone with an eating disorder | Metro News
- Advanced Parenting Four part video series
- Compassion Fatigue: Parents of Children with Eating Disorders | Eating Recovery Center| Eating Recovery Center
- Eating Disorders in Youth- A Webinar for Parents & Caregivers: Webinar Recording - YouTube
- Eating Disorders: What Pediatricians and Parents Should Know
- Family Support Guidelines When Your Loved One Has an Eating Disorder | Eating Recovery Center
- Help Your Teenager Beat an Eating Disorder by James Lock and Daniel Le Grange
- How to Persuade Your Loved One to Seek Professional Help

- Learn how to respond to 'I won't eat that', 'I don't want help', 'I Feel Fat', in ways that are loving and production
- NIED-Safety-Crisis-Readiness-Caregivers-Tool_FINAL.pdf
- Parent coaching and/or therapy when your child has an eating disorder | More-Love.org
- Parental Guilt & Eating Disorders: 4 Parental Responses to Avoid (& 2 to Adopt) - The Renfrew Center
- Parenting Dimensions Scale-
- Super-feeler
- The Best Grief Definition You Will Find
- The Emotions of an Eating Disorder: Webinar for Carers:
- Thrive to Survive
- Tree Roots Feelings Image
- Ten Things I Wish Physicians Would Know About Eating Disorders - Eating Disorders Catalogue
- Clever Replies to Damaging Remarks
- Parental Blocks
- Please Don't Weigh Me
- About Me Story to Present to Med. staff

# Secrecy and Deception

## Eating Disorders and Secrecy

Eating disorders are a serious mental health issue that affects millions of individuals each year. Unfortunately, far too often those suffering from an eating disorder keep it a secret and don't seek out necessary help and treatment. This secrecy is due to the fear of judgment and embarrassment, as well as the stigma around mental health in general.

People with eating disorders can be ashamed of their condition or they may feel judged by friends, family members, or even society itself. They may also worry about being labeled as "weak" and not capable of controlling their behaviour. As a result, they don't seek out support or resources available to them, leading to an increased risk for developing more serious side effects like depression or anxiety.

Breaking down these barriers is essential for those who want to receive proper treatment for their disorder.

## Social Stigmas

Social stigmas are the societal beliefs that can be negative or positive and place value judgments on individuals or groups. Eating disorders, in particular, often face a pervasive stigma caused by lack of understanding, leading to secrecy and shame among those affected. For those suffering from an eating disorder, the fear of being judged as ‘unattractive’ or ‘weird’ can be strong enough to prevent them from seeking help. This is why there is so much secrecy surrounding eating disorders.

It is important for us to take action against social stigmas by spreading awareness about eating disorders and their complex nature, as well as dispelling false myths associated with them. We must also strive to create an inclusive society that fosters acceptance rather than judgment towards those suffering from mental health illnesses such as eating disorders.

## Fear of Judgment

The fear of judgment is an all too common experience for those suffering from eating disorders. It can be hard to reach out for help when you feel like your struggles may not be understood, or even worse, ridiculed. Eating disorders are largely misunderstood and many sufferers feel ashamed to talk about their experiences and emotions surrounding them.

Those who don’t understand the complexities of eating disorders may assume that they’re a choice, but in reality they’re usually rooted in deeper issues such as trauma, depression or anxiety. This can often lead to feelings of isolation and shame because it’s hard to explain something that you yourself don’t fully understand yet. As a result, many people with eating disorders try to hide their struggles from friends and family out of fear that they won't be taken seriously or will be judged harshly.

## Pressure to be Perfect

Pressure to be perfect is a common experience in today's society. With the rise of social media, the pressure to look and live a certain way has made unrealistic expectations part of everyday life. This pressure can lead to an increase in eating disorders, as people strive for perfection in their appearance and behavior. The secrecy that often accompanies an eating disorder can create significant problems for those who suffer from them, as they struggle with both physical and mental health issues. Many individuals feel ashamed or embarrassed about their condition, leading to feelings of isolation and helplessness that can complicate their recovery process. Unfortunately, this secrecy often keeps people from seeking help when it is most needed. It's important for us all to recognize the dangers of striving for unrealistic goals and take steps to reduce the pressure on ourselves and others around us.

## How to Overcome Secrecy in an Eating Disorder

To start overcoming secrecy in an eating disorder, it is important for individuals to recognize that their experience is valid and common. Seeking out support groups or online communities

can help those struggling to find strength in numbers and realize that they are not alone in the experience.

## Conclusion

In conclusion, the secrecy associated with an eating disorder is multi-faceted and complicated. This has been demonstrated by looking at the various motivations behind why individuals keep their eating disorder a secret, such as shame or fear of judgment. Furthermore, it has also been shown how difficult it can be for friends and family members to detect signs of an eating disorder when someone is suffering in silence.

The takeaway message here is that there needs to be more awareness about the commonality of eating disorders, as well as more understanding from those around those suffering from them. This can start with simple conversations around nutrition and body image, encouraging those affected to reach out for help without fear of being judged or misunderstood. By creating a safe space for open dialogue about these issues, we can begin to break down the walls of secrecy and assist individuals in getting the help they need.

As a parent, I found this to be the most challenging aspect to deal with. The eating disorder (ED) brought about a high level of secrecy and deception, making it difficult to distinguish truth from falsehood. I constantly lived in fear, hoping that the information I received was honest, even though deep down, I knew it wasn't. Thankfully, our relationship has been restored, and for that, I am grateful. Looking back, I regret not confronting the ED more forcefully during its severe stages, despite anticipating resistance.

# Communication

## Communication Is Key

### Eating Disorder & Communication

Eating disorders can have a severe and lasting impact on the li
Communication can play an important role in both understan
disorders. While it may be difficult to talk about, being aware
impacts can help individuals, families and carers better manag

Open communication between family members, friends, healt
living with an eating disorder is essential for treatment succes
about eating disorder behaviours; gives insight into their
potential causes; provides support to sufferers through listeni
developing an action plan for recovery; and allows for early in

Communication also plays a key role in providing emotional
eating disorder by creating a safe atmosphere where they feel understood without being
judged or criticized.

### Effects of Poor Communication

Poor communication can have a negative effect on many aspects of a person's life, especially when it comes to eating disorders. Eating disorders are often rooted in complex emotions and lack of self-esteem, making effective communication even more important for those who suffer from them. Poor communication can lead to feelings of isolation, misunderstanding, and frustration among those with an eating disorder.

When someone is suffering from an eating disorder, there may be a barrier between themselves and the people that care about them. This barrier can be created by stigma or reluctance to discuss certain issues surrounding their eating disorder. Without clear channels for communication between family members or friends and the individual suffering from the eating disorder, it is difficult to provide support or even understand what they are going through. Additionally, poor communication may also lead to misunderstandings regarding treatment options which could negatively affect their recovery process.

## Benefits of Quality Communication

The importance of effective communication in an eating disorder cannot be overstated. Quality communication is essential for individuals suffering from an eating disorder to receive the treatment and care they need for successful recovery.

Excellent communication skills provide a platform for sufferers of eating disorders to express their feelings, thoughts, and concerns about their condition without fear or judgment. This helps to build trust between the individual and the medical professional responsible for providing treatment. It also allows the healthcare provider to understand what kind of support the patient needs, as well as how best to approach them when it comes to discussing their illness. Additionally, quality communication can also help reduce stress levels by making it easier for individuals with an eating disorder to communicate openly with those around them about their condition in order to get support from friends and family members.

## Barriers to Effective Communication

Communication can be challenging for those who suffer from eating disorders as there are several psychological and environmental barriers that can impede effective communication.

The first barrier is the lack of understanding about the disorder itself. Eating disorders can often be shrouded in secrecy due to fear or stigma surrounding the illness. This can lead to difficulty communicating openly with health professionals or family members about symptoms or treatment options—a key factor in recovery success. Additionally, many individuals may struggle with expressing emotions associated with the disorder due to low self-esteem or shame related to weight changes. This inability to verbalize feelings of sadness or anxiety may result in further isolation from potential support networks which could lead to a worsening condition over time.

## Strategies to Communicate Better

Here are some strategies to help you communicate better with a loved one who has been diagnosed with an eating disorder.

First, create a safe environment where your loved one feels comfortable expressing themselves openly and honestly. Ask open-ended questions that invite conversation rather than making assumptions or judgments. Listen actively and non-judgmentally to what they have to say, no matter how hard it may be to hear. Respect their privacy by creating

boundaries on how much information you share with others about their condition if they wish for it to remain private.

Be aware of the potential for your loved one to feel shame and guilt, especially in situations where they do not meet social or cultural expectations. Avoid making statements that place blame on them or the eating disorder. Don't make comments about your loved one's body or weight. This includes making comments about your own body in their presence.

Be patient and let your loved one know that you are available if, and whenever, they want to talk.

## Conclusion: Key Importance

Communication is a key element in treating an eating disorder and can help to determine the severity of the condition. It's important to understand how communication can be used as a tool for both medical professionals and those suffering from eating disorders. By addressing the root cause of an eating disorder, a patient can better manage their symptoms and have access to more effective treatments.

By engaging in open dialogue between healthcare providers and patients, it's possible to gain further insight into why someone is struggling with an eating disorder. This understanding leads to stronger relationships between doctors and patients, providing them with an opportunity to collaborate on treatment plans that are tailored specifically for each individual's situation. Additionally, improved communication allows clinicians to monitor progress more effectively while helping individuals develop coping strategies that will enable them to maintain healthier lifestyles in the long-term.

In granting my daughter the authority to notify us whenever our seemingly innocuous remarks inadvertently triggered her, I came to understand that the term "healthy" and the act of visiting a secondhand store were both triggers for her. These actions held significance as they were associated with her period of extreme illness. Adapting to a mindset without judgment concerning the disclosures made during vulnerable moments is essential. Cultivating the skill of acknowledging their emotions, irrespective of personal agreement or comprehension, is an acquired ability. I also grasped the concept that by commenting on her appearance with a suggestion of sickness, I unintentionally reinforced her desired outcomes. She expressed a preference to be informed of perceived lapses in decision-making rather than attributing any form of illness. My failure to validate her emotions subsequently generated anger within her.

# Words Really Do Matter

## Impact: How Language Shapes Our Perception

Words matter, especially when it comes to understanding how language shapes our perception. Language has the power to shape our thoughts and feelings about ourselves and others. This is especially relevant with respect to eating disorders where language can have a significant impact on both individuals with an eating disorder and those who love them.

In recent years, there has been a shift in attitude surrounding eating disorders, specifically towards recognizing the significance of using appropriate language when discussing these issues. Eating disorder professionals advocate for mindful use of words such as “illness” or “condition” rather than labelling someone as “anorexic” or “bulimic”. This shift in thinking recognizes that words play an important role in how an individual perceives their illness - they should not be objectified by being labelled as something they are not.

## Power: Words as a Tool for Healing

Words have incredible power. They can build people up or tear them down and in the case of eating disorders, words can be a powerful tool for healing.

For those struggling with an eating disorder, how they talk to themselves and how they communicate with others is often influenced by the disorder itself. These negative thoughts and behaviors can further enhance feelings of guilt, shame or insecurity that accompany the illness. Using words as a tool for self-expression and self-reflection has been shown to be beneficial for those who are trying to recover from an eating disorder.

Words can provide a sense of comfort, support and understanding during difficult times, which is why it’s so important to use them carefully when talking about eating disorders.

## Compassion: Empowerment Through Language

Having an eating disorder can be difficult to overcome, but using language correctly can help to empower sufferers and show genuine compassion. Language is a powerful tool that shapes our understanding of the world around us - what we call ourselves and each other affects how we perceive ourselves and those around us. In the context of eating disorders, words like "diet" or "regimen" can have negative connotations and are associated with restrictive behavior; meanwhile, words like "eating plan" may provide more hope for recovery. Compassionate language helps individuals suffering from an eating disorder to feel accepted, empowered, and hopeful about their future.

## Awareness: Promoting Open Dialogue

When it comes to open dialogue about the topic, many find themselves at a loss for words. In order to create an environment of understanding and support for people with eating disorders, raising awareness is key.

Raising awareness means talking openly and honestly about eating disorders - discussing their causes, effects and treatments in a respectful manner. It also means disrupting any long-held stigmas or false beliefs that may exist in our society - such as equating thinness with beauty or mistakenly associating eating disorders exclusively with young women. By promoting open dialogue about these sensitive topics, we can foster better understanding which will help remove barriers to treatment access for those who need it most.

## The Importance of Language in Recovery

Language is an incredibly powerful tool that can help people in recovery from eating disorders. The language we use to describe our experiences, thoughts, and feelings can be crucial for creating a supportive environment for recovery.

We looked at how the language used by medical professionals and those around us affects our experience of our own body image and sense of self-worth. We also discussed the importance of using positive language when talking about food and emotions in order to foster healthier relationships with both. Finally, we noted how language can be used to create a safe therapeutic space where people feel comfortable enough to talk openly about their struggles without fear of judgment or criticism.

In conclusion, words have an immense impact on our mental health and wellbeing, especially when it comes to recovery from eating disorders.

In terms of my communication with my daughter, I learned this lesson the difficult way. I was completely unaware of the significant influence that word choice, or even the absence of words, could have on her self-perception.

However, once I comprehended this concept, it became simpler for me to empathize with her and engage in open dialogues.

## Validating Statements

### What are Validating Statements?

Validating statements are an important tool in treating eating disorders. They involve expressing understanding and empathy to the person struggling with the disorder, while helping them to recognize their feelings as real and valid. Validating statements provide a safe space for those dealing with an eating disorder to express their feelings without fear of judgment or criticism.

When used correctly, validating statements can provide validation for a person's emotions and struggles with food or body image issues. Through this type of positive reinforcement, it can help to encourage healthy behaviors and attitudes towards food, exercise, and self-care. This type of support is essential for those struggling with disordered eating patterns as it helps them to recognize their individual strengths and weaknesses in order to gain control over their own lives.

Most importantly, validating statements offer hope that recovery is possible. Through understanding and acceptance, individuals can gain insight into why they are feeling overwhelmed and unmotivated to seek help for their condition. By acknowledging emotions like guilt, shame, anger, sadness or fear, validating statements make it easier for individuals to talk about the issues underlying their eating disorder in order to address them head-on.

Three Types of Validating Statements

Validating statements are important in any eating disorder treatment plan. These statements help to create a safe space for the patient, allowing them to express and work through their feelings without fear of judgment or criticism. Validating statements can be divided into three main types: acknowledgment, reflection, and recognition.

Acknowledgment statements are when a person acknowledges another's thoughts and feelings without judgment. An example of an acknowledging statement might be "I see that you're feeling frustrated about your progress" or "I understand how hard it must feel for you right now". This type of validation helps the patient to know that their experience is being heard and understood, which in turn can reduce feelings of shame or guilt associated with the eating disorder.

Reflection statements are ones that reflect back to the patient what they have said. Reflection statements can be used to encourage the patient to explore their experience further. For example, if a patient says 'I feel sad' you could say 'you seem down in the dumps today". An example of a reflection statement might be "you seem really angry right now" . The reflection statement encourages the patient to keep talking and helps them to realize that they are being understood. Reflecting back is a technique that can be used during any part of the session and is especially effective if used when the patient has just said something that you think is important. Egan and Fisher (1995) have provided a useful framework for discussing the process of making a reflective statement. They suggest that there are four stages to this process:

1) Taking in what the patient has said, which involves listening carefully and thinking about what they have just heard.
2) Making the statement. This involves identifying the patient's feelings, thoughts and wishes, and then formulating a response to their communication.
3) Responding to what has been said by the patient in turn. This includes confirming and clarifying the information provided.
4) Asking questions to clarify the patient's understanding of the information provided.

Recognition Statements

Recognition Statements are a way to validate an individual's feelings and experiences. They are often used in the context of eating disorders, as they create a space for understanding, acceptance and compassion. By validating someone's experience, recognition statements can be an important part of recovery from an eating disorder.

Recognition statements are simple phrases that allow people to acknowledge their thoughts and feelings without judgment or criticism. They emphasize the importance of self-expression and respect for one's own unique experience. Recognition statements create a safe environment where individuals can explore their emotions without fear of being judged or dismissed by others. Additionally, these statements can help those struggling with an eating disorder realize that they are not alone in their struggles, allowing them to connect with others who have similar experiences.

## Examples of Validating Statements

Validating statements are powerful tools for helping those suffering from an eating disorder. By communicating understanding and compassion through these statements, it can help create a safe environment to begin the process of recovery. Here, we will explore some examples of validating statements that can be used in supporting someone with an eating disorder.

The first example is “I hear you” as this communicates that you understand their feelings and experiences. This statement also provides comfort in knowing they are not alone and have support when facing challenges related to their eating disorder.

Another example is “It sounds like you’re struggling right now” as this shows empathy towards their current state without becoming judgmental or placing blame on them. It allows the individual to take ownership of the problem without feeling ashamed or guilty about it.

## How to Use Validating Statements

Validating statements are an important tool for people struggling with an eating disorder. These short phrases, when used correctly, can help the individual cope with their emotions and reinforce positive behavior. Validating statements allow the individual to feel supported and accepted in a safe environment while helping them make healthier choices.

In order to use validating statements effectively, it is important to understand how they work. Validating statements acknowledge what someone is feeling without providing judgment or criticism. They recognize the person's feelings no matter how severe or irrational they may seem. Additionally, these statements provide encouragement and reassurance that there is hope for recovery from an eating disorder.

## Conclusion: Validate Yourself

In conclusion, validating statements in an eating disorder is a reminder that you should always validate yourself. Validation can come from the kind words of others, but it is ultimately up to the individual to give themselves internal validation. This will help individuals who struggle with an eating disorder or other issues with self-confidence and body image to build resilience and improve their self-esteem.

Self-validation does not mean one should lower their standards or ignore disordered thoughts altogether; instead, it means taking steps to recognize and accept your own unique qualities. This includes identifying both positive and negative aspects about oneself, such as acknowledging mistakes made without criticizing oneself for them. By validating yourself, you are creating an internal dialogue that is supportive and understanding – which can be empowering when struggling with an eating disorder.

- Behaviour Coaching
- Validating Anger
- Validating Silence

# Uncomfortable Conversations and Communication
## Learning to Live With Distress

### Definition of Distress Tolerance

Distress tolerance is a very important concept in the treatment of eating disorders. It is an individual's ability to tolerate difficult or uncomfortable feelings and situations without avoiding them or relying on unhealthy coping mechanisms. Distress tolerance can be developed through both psychological and behavioral interventions that teach individuals how to cope with life stressors in more healthy ways.

Distress tolerance is typically seen as part of Dialectical Behavior Therapy (DBT), a form of psychotherapy used to treat people struggling with issues such as substance abuse, anxiety, depression, and eating disorders. The purpose of DBT-based distress tolerance skills training is to help individuals become more resilient when faced with stressful situations so they are less likely to resort to unhealthy behaviors like binge eating or self-harming.

### Symptoms of Distress Intolerance

Distress intolerance is an important concept to understand when it comes to eating disorders. It is the inability to tolerate distress or uncomfortable emotions, which can lead to unhealthy coping mechanisms such as binge eating. Knowing the symptoms of distress intolerance can help individuals recognize their own behaviors and develop healthier ways of dealing with difficult emotions.

The most common symptom of distress intolerance is avoidance—an individual may try to avoid situations that seem overwhelming or stressful. They may also show signs of impulsivity, such as outbursts of anger or sudden decisions without thinking about consequences. Other signs include difficulty managing cravings for food, feelings of guilt and

shame related to food choices, self-criticism and perfectionism about dieting habits, a lack of control over emotions related to food, and difficulty regulating hunger cues.

## Coping Strategies for Distress Tolerance

Distress tolerance is an important skill in the recovery journey for those struggling with eating disorders. This skill helps individuals cope better with difficult emotions and urges, as they work towards a healthier relationship with food. It can be challenging to practice distress tolerance due to the intensity of emotions associated with eating disorder recovery, but there are several strategies that can help increase resilience.

One effective way to boost distress tolerance is by practicing mindfulness-based activities such as deep breathing or meditation. Mindfulness enables individuals to observe their thoughts and feelings without judgment, which can help them become more aware of any destructive thought patterns or behaviors that contribute to their disordered eating habits. Additionally, engaging in activities like yoga or meditation can also be helpful for self-soothing when feeling overwhelmed by intense emotions or urges.

## Benefits of Strengthening Distress Tolerance

Strengthening distress tolerance can be a powerful tool for improving mental and physical well- being. Gaining insight into why one feels distressed and building up resilience are key components of strengthening distress tolerance in an eating disorder recovery journey.

The benefits of strengthening distress tolerance extend far beyond those with eating disorders. Individuals who are able to tolerate unpleasant emotions can better manage stress, build healthier relationships with others, make positive change in their lives and ultimately lead happier lives. By recognizing warning signs that one is becoming overwhelmed by their emotions and learning techniques such as grounding techniques or mindfulness meditation, individuals can learn how to better manage difficult feelings without resorting to unhelpful coping mechanisms such as bingeing or purging food.

## Conclusion: Long Term Health Outcomes

The long-term health outcomes of distress tolerance in an eating disorder can vary greatly. As the capacity to tolerate emotional discomfort is often impaired in patients with eating disorders, understanding the role of distress tolerance through various treatment approaches is essential for reducing symptoms and improving overall health. With a better understanding of distress tolerance, practitioners can develop more effective treatments that help people regain control over their illness and achieve lasting wellbeing.

Research has shown that individuals who are able to regulate their emotions more effectively tend to have fewer episodes of relapse and are better equipped to make healthier lifestyle choices. Cognitive Behavioral Therapy (CBT) has been linked to improved distress tolerance among those dealing with anorexia nervosa or bulimia nervosa, allowing them to maintain healthy behaviors for longer periods of time.

I think in our journey, I was the one who had to learn distress tolerance. It was awful watching my daughter suffer through a meal or eating fear foods but they were all critical parts of her living in wellness. It took every ounce of strength sometimes to not rescue her or remove her from the situation that was causing her distress. I guess at the end of the day we both learned how to handle distress better.

## Giving Loved Ones Permission to Share Their Concerns and Triggers

### Permission for Sharing

The importance of providing permission for individuals to share their concerns and triggers is often overlooked in today's society. Not only can these conversations lead to the resolution of conflicts, but they can also create a platform for people to feel heard, understood and accepted. Acknowledging these issues starts with setting aside time and space where individuals are offered permission to express themselves openly.

Giving permission to share one's worries, fears and red flags can be incredibly beneficial in developing trust between individuals. It encourages a safe environment where both parties feel comfortable expressing their opinions without fear of judgment or dismissal; creating an opportunity for understanding, respect and growth within relationships. This doesn't have to be done through formal conversation; it could also consist of simple activities such as sharing stories or experiences that will help build trust levels over time.

### Benefits: Emotional Outlet

Many people of diverse backgrounds often suffer from a range of mental health issues, and it is important to provide them with an emotional outlet for their worries and anxieties. Giving permission to share their concerns and triggers with others can be a powerful tool in helping individuals cope with their feelings.

Opening up about one' s experiences can be difficult, yet it can also relieve stress and bring clarity. Having someone to talk to who understands the individual's struggles can help them feel less alone in their journey. It provides a safe space where they are able to talk openly without fear of judgment or criticism.

Discussing one's thoughts and emotions allows for further exploration into the causes behind these

reactions, as well as how best to deal with them. By providing this opportunity, individuals are given the chance to gain insight into themselves while finding ways of managing their mental health more effectively.

## Tips for Listening: Open Mind, Respectful Questions

When it comes to listening, it's important to have an open mind and respect other people's views. Active listening involves taking the time to understand what someone is saying and asking respectful questions to ensure you understand them. This can be especially helpful in giving permission for someone else to share their concerns and triggers with you.

It can be difficult when trying to help someone who is struggling emotionally as they may feel vulnerable or embarrassed expressing themselves. It's important that you create a safe space for them by demonstrating that you are present, respectful of their experiences, and non- judgmental about whatever it is they choose to share with you. Practicing active listening skills such as paraphrasing what they say back to them so that they know their thoughts are understood can help build trust between both parties during these conversations.

## Strategies for Communicating Triggers: Acknowledge Feelings, Set Boundaries

When it comes to triggers, communication is key. A trigger is something that evokes a strong emotional or physical reaction. However, when communicating about triggers, it's important to remember that both parties should be aware of each other's feelings and boundaries.

Acknowledging feelings is an essential part of communicating about triggers. It's important for both parties to take responsibility for their own emotions and reactions so that the conversation can stay respectful and focused on understanding each other's perspectives rather than just trying to justify one side over the other. Additionally, setting boundaries can help ensure that conversations remain constructive by limiting distractions or topics that may cause further conflict or distress.

## Safe Space to Share

In the section, we discussed the importance of creating a safe space for people to share their feelings and experiences. This is especially true when it comes to those who are dealing with mental health issues or other traumatic events. Creating a safe space allows individuals to open up about their thoughts and emotions without fear of judgment or criticism.

The conclusion of this brings focus back to why creating a safe place for sharing is so important. When individuals feel comfortable enough to express themselves fully they can begin the process of healing in earnest. Without that feeling of safety, any attempt at finding resolution or peace may be futile as the individual will not be able to vocalize how they truly feel without fear of being judged negatively.

Being open about triggers was something that my daughter had to teach me. So many things I said were insensitive to her but in all honesty, I just didn't know what would trigger her. I could say something like "you are sick", and she would say, "mom, you can say the words "have anorexia". She wanted me to talk openly about it without using secret meaning words. However, this is definitely not the case for everyone. Just giving her permission to tell me when I said something that made her uncomfortable made all the difference in our relationship**.**

# Things Caregivers Need To Know

## You Did Not Cause This – No Blame, No Shame

### Parental Role in Eating Disorder Development

When it comes to eating disorders, parents may often feel overwhelmed with guilt and responsibility for their child's condition. However, the truth is that parents are not the cause of a child's eating disorder. While parenting
plays a role in shaping an individual's emotional health, there are many other factors at play when it comes to the development of an eating disorder. Parents should be aware that they have limited control over their child's mental health, but they can still play an important role in preventing or addressing an existing eating disorder.

To start off, parents need to be aware of potential risk factors that could increase the likelihood of developing disordered eating habits. This includes identifying signs such as restrictive dieting and extreme weight loss behavior in their children early on before issues become more severe.

## Reassessing Blame

When it comes to parenting, responsibility is a huge factor. In many cases, parents are quick to blame themselves for their child's issues. This especially holds true when it comes to mental health conditions such as eating disorders. However, this is not always the case and it is important for parents to reassess their role in their child's life and health.

While parents may feel responsible for the challenges their children face, research shows that there is often more going on than meets the eye. In fact, most eating disorders are caused by an array of factors that have nothing to do with a parent's influence or lack thereof. Genetics, hormones, environment etc., all play a role in developing an eating disorder - so blaming yourself should be done cautiously.

## Reframing Responsibility

Parents are not responsible for their child's eating disorder. It is not the result of a lack of parenting, but rather an underlying illness that can be addressed through treatment. Reframing responsibility and recognizing the true origin of these disorders can help both parents and children better understand the condition and work towards recovery.

It is important for parents to know that they are not to blame for their child's eating disorder. They should take care of themselves and show compassion to their child as well as those who may have had a role in developing the disorder. Parents should also remember to reach out for support from family, friends, or professionals if they need it.

## Can You Randomly Get an Eating Disorder?

There is a common misconception among the public that eating disorders do not “just happen”, but that they require long-term stress or trauma to develop. While it is true that a person's environment and experiences may be contributing factors in developing an eating disorder, this does not mean it cannot randomly manifest. Eating disorders are complex psychological illnesses, and can arise out of the blue for seemingly no reason at all. It could be a result of genetics, brain chemistry, hormones or any combination of these issues working together.

While there is no single cause of an eating disorder, certain factors can increase a person's risk for developing one. It is not possible to say that a person can randomly get an eating disorder, as it's not a random event but a combination of several factors that interact together. However, it is important to understand that anyone can develop an eating disorder regardless of their age, gender, race, or socioeconomic background. Eating disorders do not discriminate and can affect anyone. It is also important to understand that eating disorders are not a choice, they are serious mental

illnesses that require professional help.

It's also important to understand that eating disorders are not only about food and weight, but they are also often symptoms of underlying emotional and psychological issues that are not resolved by simply addressing weight and food. It's important to seek professional help as soon as possible if you suspect you or someone you know may have an eating disorder.

No one should ever feel ashamed if they find themselves dealing with an eating disorder without knowing what triggered it. Eating disorders are serious illnesses caused by biological as well as environmental factors, so nothing should be overlook ed when seeking treatment for them.

## What Factors Can Contribute to Eating Disorders?

Eating disorders are complex conditions that are thought to be caused by a combination of genetic, psychological, and environmental factors.

Genetic factors: Eating disorders tend to run in families, suggesting that there may be a genetic component to their development. Studies have identified certain genetic variations that may increase the risk of developing an eating disorder.

Psychological factors: Psychological factors such as low self-esteem, perfectionism, and difficulty regulating emotions are common in individuals with eating disorders. Trauma, abuse, and negative experiences can also contribute to the development of eating disorders.

Environmental factors: Environmental factors such as societal pressure to conform to a certain body shape or size, exposure to images of thin ideal body types, and cultural attitudes towards food and weight can contribute to the development of an eating disorder.

Biological factors: Abnormalities in the regulation of hunger, feeling of fullness, and metabolism, as well as imbalances in hormones, neurotransmitters and brain chemicals have been linked to the development of eating disorders.

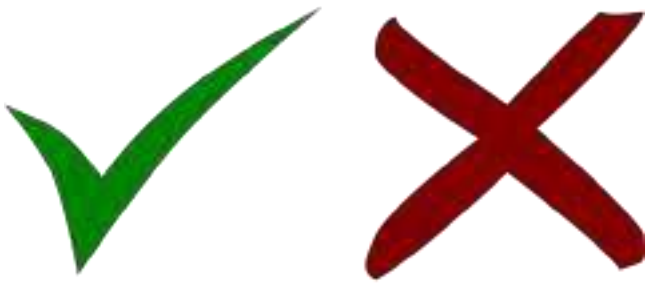
Interpersonal factors: Difficulties in interpersonal relationships and communication, lack of social support and poor problem-solving skills have been linked to eating disorder development.

It's important to note that the cause of eating disorders is not fully understood and that it can vary from person to person. Eating disorders are complex and multifaceted conditions that require a comprehensive and individualized treatment approach.

- Cultural and Social Factors
- Dr Cynthia Bulik: Recent study identifies eight risk loci and implicates metabo-psychiatric origins for anorexia nervosa
- ED and Genetics?
- ED Risk Factor
- ED Risks and Genetics

- Genetic and Behavioral Factors Increase Risk of Anorexia
- **Genetic Research Study**
- Genetics
- Risks of an ED from Childhood
- Yale finds neuron behind fatal anorexia, and solution in high-fat diet | YaleNews
- Youtube - Genetics

## Do's And Don'ts Of Eating Disorder Care



When caring for someone with an eating disorder, it is important to be informed about best practices and to approach the situation with compassion and understanding. Here are some dos and don'ts of eating disorder care:

DO:

- Educate yourself about eating disorders: Understanding the causes, symptoms, and treatment options for eating disorders can help you to provide better care and support.
- Listen and be supportive: Let the person know that you are there for them, and that you believe in their ability to recover.
- Encourage the person to seek professional help: Eating disorders are serious conditions that require professional treatment. Encourage the person to see a mental health professional who specializes in eating disorders.
- Be patient: Recovery from an eating disorder is a process that takes time. Be patient and understanding as the person goes through the recovery process.
- Help them to refocus on healthy activities: Encourage the person to engage in activities that they enjoy and that promote physical and emotional well-being.
- Be a good role model: Be mindful of your own attitudes and behaviors towards food, weight, and body image, and strive to model healthy habits.
- Develop Empathy and Understanding: One of the most important aspects of caregiving is cultivating empathy towards individuals experiencing an eating disorder. Seek to understand their thoughts, emotions, challenges they face daily regarding body image. Show them compassion by listening without judgment or criticism.
- Create Safe Spaces for Open Communication: Establish trust through open communication where clients feel comfortable expressing themselves openly discuss fears, anxieties and struggles.
- Encourage Professional Support: While you play a vital role as a caregiver, it's essential to recognize that professional support is necessary. Encourage the individual to seek guidance from therapists, dietitians, doctors experienced in

treating eating disorders who possess hub expertise. Collaborate effectively with these professionals and respect their boundaries.

- Support developing healthy coping mechanisms : As someone supporting an individual dealing with disordered eating patterns strive to teach them health copy mechanism that don’t revolve around food or self harm.

- Encourages balanced relationships with food: Promote balanced relationships between individuals and food by focusing on nutrition education informing understanding critical components

**Celebrate Progress:** Recognizing progress is essential to provide encouragement during recovery. Celebrate even small achievements along the way; this acts as motivation for continued growth, perseverance and unwavering commitments.

By adhering to these dos as a caregiver, you can provide the support and encouragement needed for individuals with eating disorders to reclaim their well-being and nourish their spirits.

When caring for someone with an eating disorder, it is important to be informed about best practices and to approach the situation with compassion and understanding. Here are some of the "don'ts" of eating disorder care:

- Don't blame or shame the person: Eating disorders are serious mental illnesses, and the person is not to blame for their
- condition. Avoid making critical or judgmental comments about the person's weight, food choices or appearance.
- Don't ignore the person's condition: Eating disorders are serious conditions that require professional treatment. Don't ignore the person's symptoms or try to treat the condition on your own.
- Don't compare the person to others: Each person's recovery journey is unique and comparing the person to others can be hurtful and unhelpful.
- Don't focus on weight: Weight is not an accurate indicator of health or recovery. Instead, focus on the person's overall well-being and behaviors and encourage them to seek professional help.
- Don't be dismissive of their feelings: Eating disorders often stem from underlying emotional and psychological issues, and dismissing the person's feelings can make them feel invalidated and unsupported.
- Don't make assumptions: Each person's experience with an eating disorder is unique. Avoid making assumptions about the person's thoughts, feelings, or behaviors.

- Don't isolate the person: Eating disorders often thrive in secrecy and isolation. Encourage the person to spend time with friends, family and loved ones.
- Avoid manipulative statements, threats, or ultimatums: Maintain a compassionate and understanding tone by avoiding any form of manipulation in your language or resorting to making threats/ultimatums as these tactics are unlikely to generate positive results but instead breed further mistrust and distress.

- Avoid forcing or tricking them into eating: It's essential to respect an individual's autonomy when it comes to their eating choices. Forcing or tricking someone with disordered eating behavior might lead to feelings of distress, betrayal, and may deteriorate trust in the caregiving relationship.
- Avoid making unkept promises or giving weight loss advice: Refrain from promising things you can't fulfill as it creates false hope and undermines trust.
- Avoid presenting simple solutions for overcoming disordered eating: Be mindful not to oversimplify the challenges associated with disordered eating by offering quick fixes or easy solutions. Recovery is usually a complex and long-term process that requires professional guidance along with consistent support offered by caregivers like yourself.
- Avoid body size arguments: Steer clear from engaging in discussions about their body size by trying to convince them they are not fat (or any other derogatory term) or arguing against negative perceptions related towards it.

- 6 things you CAN say to someone with an eating disorder | Metro News
- Terms to avoid or reconsider in the eating disorders field
- What Not to say to someone...

## Externalization of an Eating Disorder

Externalizing an eating disorder refers to the process of shifting the focus of the disorder from the individual's internal thoughts and feelings to the disorder itself, which is seen as an external entity. This can help the individual to gain a sense of control over the disorder and to see it as something separate from themselves.
There are several strategies that can be used to externalize an eating disorder:

- Naming the disorder: Giving the disorder a name can help the individual to see it as something separate from themselves. For example, an individual might refer to their
- eating disorder as "ED" or "Michaela" rather than saying "I am anorexic" or "I am bulimic." It's important for the loved one to pick the name of what they refer to their eating disorder as.

- Using "I" statements: Encourage the individual to use "I" statements when talking about their disorder, such as "I have an eating disorder" rather than "I am an eating disorder." This can help them to see the disorder as something they have, rather than something they are.
- Using imagery: Encourage the individual to visualize the disorder as a separate entity. For example, they might imagine the disorder as a cloud that is following them around.
- Encourage the individual to speak up and advocate for themselves. Help them understand that the eating disorder is not their fault, and that they are not alone, and that it is important to seek for professional help.
- Educating the individual about the disorder: Provide information about the causes, symptoms, and treatment options for the disorder. This can help the individual to understand that the disorder is a real illness, and that it can be treated.

It's important to note that externalizing an eating disorder is not a standalone treatment, and it should be used in conjunction with other evidence-based treatments such as cognitive- behavioral therapy, family-based therapy, and psychotherapy. Also, it's important to note that the externalization process can be different for each patient, and it should be tailored to their specific needs.

- Externalization narrative therapy: Separate yourself from your problems

The best way I can describe trying to battle an eating disorder is having a battle with a ghost. You can't see it in plain sight, but you know it's there, hiding, waiting to have full reign again**.**

## Not Sick Enough

## What is Not Sick Enough?

The phrase "not sick enough" is a term used to describe the experience of individuals with eating disorders. It speaks to the difficulty of finding treatment for those who may not meet certain criteria for anorexia, bulimia, and other related conditions. This term can be used in many different contexts, from health care settings to mental health services, as well as by people with eating disorders themselves.

Eating disorders are complex illnesses that involve physical symptoms such as weight loss or gain, changes in appetite, and body image disturbances. But they also involve psychological issues such as perfectionism and distorted thought patterns about food and body size. When someone is labeled "not sick enough," it can mean they aren't experiencing the physical symptoms of an eating disorder at a severe level or their behaviors haven't caused significant medical complications yet.

## The Not Sick Enough Complex

The Not Sick Enough Complex is a complex issue for those suffering from eating disorders. It can be defined as a situation in which an individual does not see themselves as having an illness or severe enough of an illness to be taken seriously and to receive help. Unfortunately, this complex can make seeking treatment very difficult if not impossible.

It is estimated that 10 million individuals in the United States and 1 million individuals in Canada alone, struggle with some form of an eating disorder and yet only 1 in 10 receive any sort of treatment. The Not Sick Enough Complex creates a barrier between those who are struggling with their mental health and accessing the care they need to improve their quality of life. Those who suffer from this complex may feel that they do not have an "illness" serious enough to seek treatment, making it hard for them to reach out for help even when it is desperately needed.

## Overcoming the "Not Sick Enough" Mindset

Living with an eating disorder is a difficult and often isolating experience, as many people with the condition are not taken seriously and are denied access to treatment due to their outward appea rance or lack of medical symptoms. It implies that in order to be worthy of help and support, a person must present with visible physical signs - such as extreme weight loss - or have a clear diagnosis from a doctor.

However, it's important to remember that these physical signs do not always reflect the severity of an eating disorder. The psychological implications can often be far more serious than any physical ones, making it essential for medical professionals to take all aspects of an individual's health into consideration when providing care.

## Barriers to Treatment

When it comes to eating disorders, there are many barriers that prevent someone from getting the help they need.
Studies have found that those with anorexia nervosa and bulimia nervosa often fail to seek treatment due to a variety of reasons. One such reason is the misconception of not being "sick enough" or "bad enough" to require help. This concept is one of the leading obstacles standing in the way of successful treatment for individuals suffering from an eating disorder.

The phrase “not sick enough” can be interpreted differently across different contexts, making it difficult for those with an eating disorder to understand what it means for them and their own recovery process. It can refer to a person's physical health and stability, as well as their mental state and ability to cope with symptoms associated with their condition. The term is often used to describe a person's weight, size, or shape. It describes the perception that a person must be underweight in order to be considered sick enough for treatment.

## Recognizing Help Is Needed

In conclusion, recognizing when help is needed for an eating disorder is a critical step towards recovery. Eating disorders often go undetected, as individuals may minimize their struggles and feel they are not “sick enough” to receive help. However, it is important to understand that even milder symptoms can lead to severe health issues if left untreated.

It is also important to recognize that individuals suffering from an eating disorder should never be judged or shamed for their condition, especially in times of crisis. To truly recover from an eating disorder, those affected must have unconditional support from family and friends.

We struggled with being told my daughter was not sick enough for treatment for 6 months. All this did was make her believe she wasn't doing well enough in her eating disorder to deserve help and it forced her to get really sick before treatment could begin. I compare it to someone having an arterial spurt and being given a bandaid and told to come back if it bleeds anymore. Sounds ridiculous, right? Sadly this is where we are at with eating disorder treatment and diagnosis right now. Yes, a little bit bitter.

- Distress Intolerance - CCI

# Setting Boundaries

Setting boundaries with someone who has an eating disorder can be difficult, as the person may be in a vulnerable state and may not be receptive to criticism or attempts to change their behavior.
However, it's important to establish boundaries to protect your own well-being and to support the person's recovery. Here are a few tips for setting boundaries:

- Be clear and specific: Clearly state what behavior or actions you will no longer tolerate and the consequences of not respecting your boundaries.
- Be consistent: Stick to the boundaries you set and don't make exceptions.
- Focus on your own feelings: Express how their behavior affects you and let them know that you care about them, but that you can't continue to enable or participate in their disorder.
- Be prepared for resistance: The person may not be ready to accept your boundaries and may resist or try to manipulate you. Be prepared for this and remain firm in your position.
- Seek professional help: If the situation becomes too difficult to handle on your own, seek the help of a therapist or counselor who can provide guidance and support.
- Remember that recovery takes time: Setting boundaries is an important step in helping a person with eating disorder, but it's important to remember that recovery is a long-term process and it's important to be patient and supportive.

It's important to remember that setting boundaries is not about controlling or changing the person, but rather about protecting your own well-being and supporting the person's recovery. Also, it's important to be aware that the person with an eating disorder may not be able to adhere to the boundaries you set, and that doesn't mean they don't want to change or recover.

- Setting Boundaries - Strong Bonds - Building Family Connections

# How to Handle the Holidays

## Handling Holidays

The holiday season is often a time for celebration and joy, but for families with a child who has an eating disorder, it can be anything but merry. Navigating through the holidays when your child has an eating disorder can be difficult. From mealtime issues to managing stress levels and emotions, there are certain strategies parents should consider in order to make sure their child is supported throughout the festive period.

It's important to remember that while celebrations may look different than they used to due to COVID-19 restrictions, it doesn't mean you cannot create a safe environment for your family during this time. It takes an open dialogue between all family members, understanding of one another's needs and sensitivity towards triggers that might set off harmful behaviors from your child with an eating disorder.

## Planning: Identify Triggers

By identifying potential triggers before they arise, parents can create a plan that helps their family manage any difficult moments that may come up during the holidays. This may include avoiding certain conversations or situations, as well as having strategies in place to address any negative emotions that might arise such as guilt or anxiety. It's important to remember that no two individuals have the same experience with an eating disorder; what works for one person may not work for another. Therefore, it's important to provide guidance and support tailored specifically to you and your child's unique needs.

## Establish Boundaries

The holidays are a time for celebration, joy and togetherness. But when your child has an eating disorder, the challenges can be daunting. Eating disorders involve a complex set of behaviors and attitudes surrounding food — behaviors that may not fit with traditional holiday practices.

Establishing boundaries is key to helping your child enjoy the season without compromising their recovery from an eating disorder.

It's important to talk openly with your child about ways to include them in favorite family traditions without triggering disordered thoughts or behavior around food. This might mean setting new expectations or creating alternative holiday activities outside of meals, such as

baking cookies together instead of attending a large holiday dinner party. Setting clear limits on how many treats they should have in one sitting can help prevent overeating while still allowing them to enjoy some of their favorites during the holidays.

## Preparing your Child

While there is no one-size-fits-all solution for dealing with this difficult situation, there are several strategies that parents can use to help their child manage during the holidays.

The most important thing is to find out what your child needs in terms of support and understanding. Depending on the type of eating disorder they have, certain foods may be triggering or off limits altogether. It's also important to be aware of any potential triggers that could cause them distress such as family gatherings, holiday parties, or even certain activities like gift exchanges.

You can also help your child by helping them feel more in control of their situation. Providing them with strategies for managing food and the emotions that come along with it may help.

## Communicating with Family/Friends

The holidays are a time for friends and family to come together, but when your child has an eating disorder, it can take extra preparation and care. The presence of loved ones may be both comforting and challenging at the same time. Having open communication with family and friends is key to ensuring that your child feels supported. Discuss with your friends before about not talking about food, weight, diets, body appearance etc. so that they are not caught off guard either.

- 6 tips to handle holidays with an eating disorder
- Christmas eating disorder helps cope - Newbridge Health UK
- Creating a Game Plan for the Holidays
- Eating disorder holiday survival guide - NEDIC
- Holiday Dos and Donts
- Navigating binge eating disorder recovery during holiday season
- Walden Eating Disorders the holidays 5-tips to support your loved one

# Eating Disorders and Family

## Siblings (The Forgotten Ones)

Having a sibling with an eating disorder can be incredibly difficult for the entire family. It can be hard to understand the root of the problem and how best to help the child with an eating disorder. Unfortunately, these issues often extend beyond the individual and have an impact on siblings as well. We will explore how an eating disorder in one child can affect their siblings, looking at both short-term and long-term impacts.

### Affects on Siblings

When one child in a family suffers from an eating disorder, the entire family is affected. Not only are parents and guardians deeply concerned about their child's wellbeing, but siblings may also experience various issues due to their brother's or sister's health condition. An eating disorder of one sibling can have detrimental impacts on the mental and physical health of other children in the same household.

Siblings of those with an eating disorder may feel that they don't receive the same amount of attention from their parents as their sick brother or sister does. This could lead them to feeling neglected and unimportant within the family unit. Additionally, it can be challenging for siblings to comprehend why their brother or sister has chosen to engage in disordered eating behaviors such as starvation or binging/purging episodes, leading them to feel scared, helpless, embarrassed, and confused by the situation. Siblings often struggle with their own fears and anxieties about the situation, which can be intensified by the fact that they may not fully understand what the eating disorder is or how it affects their brother or sister.

Family therapy sessions are a common part of treatment for an individual with an eating disorder. This type of therapy focuses on the whole family unit and how the illness is directly impacting each member. When one child in the family is receiving treatment for an eating disorder, it is likely that their siblings will be asked to participate in family therapy as well.

Siblings can have a difficult time understanding why they must attend these sessions even though they may not have any symptoms of an eating disorder themselves. It is important for them to understand that even if they do not have an eating disorder, their brother or sister's illness can still affect them. Family therapy provides a safe space where each member of the family can share their feelings and experiences without judgment or criticism from others.

## Emotional Well-being of A Sibling

Having a sibling with an eating disorder can have a significant impact on the emotional wellbeing of their brothers and sisters. It is normal for siblings to experience feelings of guilt, worry and confusion as they grapple with understanding what is happening in their family life. Not only do they worry about t heir own safety, but also that of their brother or sister who suffers from an eating disorder. Often, they feel like they have to become another "parent" to
monitor the behaviors of their siblings. Bluntly, that is not their job nor should they be put in a position like that with their sibling.

When the illness takes center stage in the household, siblings often feel neglected. This can lead to feelings of fear, isolation and inadequacy which are all associated with poor emotional wellbeing. Furthermore, when one sibling's behavior changes due to an illness like this, it affects the dynamics between all family members in ways that may damage relationships and create mistrust among them. Siblings may also struggle with understanding why it is happening or how to cope with these changes.

## Guilt and Shame

Guilt and shame are two very powerful emotions that can have a lasting impact on an individual's life. For siblings of children with eating disorders, these emotions can be even more intensely felt. Having a sibling who is facing a mental health issue such as an eating disorder can create feelings of guilt and shame in the other children in the family. Guilt may come from feeling that they should be able to help their brother or sister in some way, while shame may arise from feeling embarrassed by their sibling's behavior or worrying that it reflects badly on them or their family. These feelings of guilt and shame often linger long after the eating disorder has been treated, making it important for families to learn how to manage them effectively.

## Family Interactions

The family unit is one of the most important and influential relationships in our lives. Each family member has a unique role within the family, and when one person's health is affected, it can have a ripple effect on the entire family.

In particular, how an eating disorder of one child impacts their siblings can be far-reaching and often overlooked. Eating disorders are complex psychological issues that require intense treatment, yet how they affect other members of the family is often overlooked.

## Summary & Solutions

Finally, an eating disorder in one child can greatly affect their siblings. Eating disorders can be difficult for everyone to cope with, but siblings may feel distress and confusion due to the complexity of the situation. It's important for siblings to be included in conversations about treatment and recovery plans, so they are aware of how to best support their brother or sister.

Siblings should also be mindful that their own mental health needs are important too, especially during such a difficult time. Parents and other adults should take the time to communicate with siblings and provide additional resources if needed. Seeking counselling through a licensed professional is often a good way to help all family members process emotions related to an eating disorder in one sibling.

Virtually everything in this played out for my daughter's sibling.  We had to really work on spending quality time with him that did not revolve around the eating disorder.  I called my son the “lost child” because his needs seemed to get lost in the overwhelming nature of the eating disorder.

- Supporting Multiple Children with an Eating Disorder

# Relationships

## Why Can It Be Hard to Maintain A Good Relationship?

Maintaining a healthy relationship with your partner can be difficult when one of your children has an eating disorder. Not only does the stress of dealing with the disorder take its toll on you, but it can also strain the stability of your relationship. When one or both partners are consumed by worrying about and managing their child's health, it is easy to neglect each other and ignore important aspects of a relationship such as communication, compassion, and trust. This can lead to feelings of loneliness within the partnership and ultimately create rifts in any connection that was previously established.

Having a child with an eating disorder can be a difficult and often overwhelming experience for parents. It can be hard to know how to best support your child and navigate the complicated relationships that can come with parenting a child with an eating disorder. This will discuss how parents can support each other as they support their child through the eating disorder journey.

## How Eating Disorders Affect Relationships

When a child is struggling with an eating disorder, it can have an effect on the entire family. Eating disorders can disrupt relationships and put strain on family dynamics. Parents may find themselves in a situation where they are feeling overwhelmed and unsure of how to support their child. This can lead to tension and disagreements between parents as they navigate their child's eating disorder.

Parents may also feel a sense of guilt or blame for their child's eating disorder, which can further strain the relationship between them. Parents may also have different opinions on how to best help their child, which can lead to disagreements. It's important for parents to recognize that they are in this together and to support each other as they support their child.

## Tips for Parents in Eating Disorder Relationships

Parents in eating disorder relationships need to be aware of their own needs and be willing to be honest and vulnerable with each other. It's important that parents feel comfortable expressing their emotions and concerns and not be afraid to ask for help.

It's also important for parents to make sure that they are taking care of themselves. Eating disorder relationships can be emotionally and physically draining, so it's important to make sure that parents are taking the time to focus on their own wellbeing.

Parents should also make sure that they are communicating openly and honestly with each other. This can be difficult, especially when parents are feeling overwhelmed and unsure of how to best help their child. But it's important for parents to make sure that they are communicating their thoughts and feelings and listening to each other.

## The Importance of Self-Care for Parents in Eating Disorder Relationships

Self-care is essential for parents in eating disorder relationships. It can be difficult for parents to take the time for self-care when they are overwhelmed with their child's eating disorder, but it's important to make sure that they are taking care of themselves.

Parents should make sure that they are getting enough rest when possible. It's also important to make time for activities that they enjoy and to find healthy ways to cope with stress. Taking the time to engage in activities that they find relaxing, such as reading a book or going for a walk, can be beneficial for parents in eating disorder relationships.

## Keeping a Strong Relationship

Keeping a strong relationship with your partner when your child has an eating disorder can be difficult. It's important to talk about any difficulties, worries and fears that arise during this time. Communication is key; expressing how you feel and talking openly and honestly with each other will help ensure that both of you are on the same page and support each other in finding solutions. It is also imperative to protect your relationship by having at least some time where it's just the two of you without any distractions or pressures from outside sources. Make sure

that you talk about these issues together – don't allow yourself or anyone else to fall into a dynamic where one parent takes sole responsibility for caring for the child.

- Eating Disorders Eat Away at Loving Relationships
- Supporting a Spouse with an Eating Disorder

## Eating Disorders & Anger

When a child has an eating disorder, it can be very difficult on parents. The physical and psychological struggles of the child can cause tremendous amounts of stress for parents which, in turn, results in feelings of anger. It is important to understand what causes this anger so that parents can find ways to cope with it effectively.

It is not unusual for frustration and feelings of helplessness to arise when caring for a child who has an eating disorder. Parents may feel like all their efforts are futile or that they are failing as caregivers. Additionally, ongoing arguments between parent and child about food
or dieting habits can lead to increased levels of angry outbursts from both parties. There are many causes of parental anger in this situation, stemming from feelings of helplessness and fear. Parents

may feel overwhelmed by the pressures of providing their child with a supportive environment to help them through their struggles with food.

At times, parents may become angry out of frustration at not being able to understand what is causing their child's eating disorder or how to best support them during this difficult time. Other times, they may become frustrated that they have been unable to stop the behavior before it reaches a serious level or because they feel like they are not doing enough to help their child. Additionally, some parents may lash out due to feeling judged by others when discussing their child's eating disorder in public.

## Social Stigma & Shaming

Social stigma and shaming can be a major contributing factor to the anger experienced by a parent whose child has an eating disorder. Such parents often feel helpless, ashamed, and embarrassed in public due to their child's condition; they are constantly on edge because they fear that their child will be judged or ridiculed. This feeling of shame is often intensified when the parent encounters dismissive responses from medical professionals, friends, family members, or even strangers who don't take the seriousness of the situation into account.

It's not uncommon for these parents to feel like their lives have been taken over by their child's illness; it affects all aspects of life - from work to social situations. As a result, many parents of children with eating disorders experience frustration and anger as they struggle to help their loved one recover while dealing with negative reactions from those around them.

## Guilt & Shame A Parent May Feel

Guilt and shame are two very real emotions that parents whose children have eating disorders often experience. From the initial shock of discovering their child’s illness to the ongoing struggle to maintain a positive attitude, these parents can feel overwhelmed by guilt and shame. To try to understand why some parents feel guilty or ashamed when their child has an
eating disorder, it is important to look at wha t causes anger in them.

It is common for parents of children with eating disorders to blame themselves when they initially discover that their child has been struggling. They may question if they should have noticed signs earlier, or if they could have done something differently that would have prevented the development of the disorder.This feeling of guilt can be compounded by

feelings of regret for not being able to take away the pain and suffering their child is going through. I think if I heard "just get them to eat" one more time I would have been the one vomiting.

## Managing the Emotions

An important factor in managing emotions is having an understanding of where these feelings are coming from and how they manifest. Knowing that anger is a normal reaction to such a stressful situation helps create healthy boundaries between your child and yourself as you both navigate this journey together. Additionally, recognizing how your own thoughts and behaviors influence your emotions will enable you to better manage them going forward.

It's important for parents to remember that there is no right or wrong way to feel when their child has been diagnosed with an eating disorder.

## How to Effectively Communicate in Eating Disorder Relationships

Communication is key for parents in eating disorder relationships. Open and honest communication can help to ensure that everyone's needs are being met. Parents should make sure that they are listening to each other's concerns and being respectful of each other's opinions.

It's also important for parents to be patient with each other. Eating disorder relationships can be difficult and it can take time to find a way to effectively communicate. Parents should be willing to compromise and to be open to each other's ideas.

## Finding Support for Eating Disorder Relationships

Parents in eating disorder relationships should also make sure that they are seeking support. Talking to a therapist or joining a support group can be beneficial for parents in eating disorder relationships. It can help to provide a safe space for parents to talk about their experiences and to learn from each other.

It's also important for parents to remember that they are not alone in this journey. There are many resources available to help parents in eating disorder relationships. Reach out to your local eating disorder support organizations for more information about support and resources.

## Navigating Eating Disorder Relationships: What to Do When You Disagree

It's important for parents to remember that disagreements are normal in eating disorder relationships. It's important for parents to be able to communicate their differences in a respectful and constructive way.

When disagreements arise, it can be helpful to take a step back and to focus on the facts. It's important to remember that parents are on the same team and that they want the same thing: to help their child. Taking a moment to reflect on this can help to put disagreements into perspective.

Navigating eating disorder relationships can be difficult and overwhelming, but it is possible to find ways to support each other and your child. It's important for parents to remember that they are in this together and to make sure that they

are taking care of their own needs. Open and honest communication, setting boundaries, and finding support are all important for successful eating disorder relationships.

Ultimately, understanding anger in parents of children with eating disorders is paramount for providing effective treatment plans. Parents can benefit greatly from increased access to counselling or support groups which provide a safe space for them to discuss their feelings openly without judgment. By creating strategies for managing emotions, parents can take control back over the situation and foster an environment where healing becomes possible.

- How Eating Disorders Affect Relationships | Recovery Warriors

# Hope

## Instilling Hope

Hope is one of the most important resources a person with an eating disorder can have. It gives them the strength they need to face their struggles and eventually overcome their condition. Therefore, it is essential for individuals struggling with an eating disorder to instill hope within themselves in order to start the recovery process.

The first step towards instilling hope for an eating disorder is for individuals to be honest about their feelings and acknowledge that they are not alone in this struggle. For many people, understanding there are others who share similar experiences helps ease feelings of

loneliness and isolation, reminding them that healing is possible even if it may seem out of reach at times. Having a support system from family or friends can also help boost confidence during challenging moments.

## Why to Have Hope in an Eating Disorder Journey

Hope can be a difficult concept to relate to when it comes to an eating disorder. Eating disorders often create a sense of isolation and hopelessness, making it difficult for the individual to see any kind of future. However, hope should not be overlooked in an eating disorder journey. Hope is powerful; it gives us something to strive for, something that we can look forward to. It is also essential in helping us get through the hard times and challenging moments that come with battling an eating disorder.

Having hope helps individuals realize that although recovery may take time and effort, there is still light at the end of the tunnel. Knowing that this period can eventually pass is incredibly empowering and encourages people on their journey towards recovery. The power of hope can give individuals strength when they feel weak or discouraged during their recovery process.

# Establishing Boundaries for Eating Disorder Relationships

## Eating Disorders & Boundaries

Eating disorders are serious psychological conditions that affect millions of people around the world.
People with an eating disorder struggle to establish a healthy relationship with food and their own body image. They may experience extreme guilt, shame, or distress when it comes to their eating habits. But there is hope for recovery—and establishing boundaries can be a powerful tool to help those suffering from an eating disorder on their journey towards health and wellbeing.

Establishing boundaries is essential in any situation where one's safety, physical health, mental well-being and autonomy are at risk. For people struggling with an eating disorder, setting clear boundaries can provide structure and support while they work through their recovery process. Boundaries provide individuals with a sense of protection from anxiety-provoking situations such as peer pressure or feeling out of control when it comes to meal times.

## Reasons for Setting Boundaries

For individuals suffering from an eating disorder, boundaries are a key factor in the recovery process. The reasons for setting boundaries are varied, but most importantly they provide structure and security to those suffering from an eating disorder.

First of all, boundaries will help establish a sense of safety for individuals struggling with an eating disorder. Establishing limits can be comforting to someone who is facing new challenges during recovery and needs reassurance that their well-being is being taken into account. Boundaries also provide structure by creating a framework within which one must operate in order to make progress towards goals and stay on track with treatment plans.

Additionally, boundaries help create space between oneself and the disease. People with anorexia or bulimia often feel hopelessly intertwined with their illness, viewing it as part of their identity instead of just something they have to work through.

## How to Set Boundaries as a Parent

Setting boundaries as a parent is an important part of helping your child develop healthy eating habits. It's especially important for parents of children with an eating disorder, as boundaries can help them to recover and stay well. Establishing clear ground rules that are specific and consistent will help you keep your child safe and manage their disorder.

When setting boundaries, it’s important to take into account any underlying issues the child may have with body image or food-related behavior. Be mindful of how the rules you set could be interpreted by your child; a boundary that is too restrictive could make them feel restricted or even worse, ashamed. Instead, focus on promoting healthy behaviors rather than punishing unhealthy ones.

It's also wise to discuss boundaries before they're put into place so that everyone understands what’s expected of them and why it’s important.

## How to Set Healthy Boundaries

Setting healthy boundaries is an important step in overcoming an eating disorder. When a person struggling with disordered eating takes the time to create boundaries for themselves, it allows them to gain control over their behaviors and feelings. These boundaries can be physical, environmental, emotional, or even mental.

Having physical boundaries means creating a safe space where the individual feels comfortable expressing their emotions without fear of judgment. This could include finding a private area away from family and friends where they can have time to focus on recovery goals and practice self-care activities like journaling or reading.

Environmental boundaries involve setting limits on what kinds of people and places are okay for the individual to be around when trying to recover from disordered eating habits. These may include avoiding certain restaurants or shopping malls that may trigger unhealthy

cravings or impulses.

Setting boundaries with someone who has an eating disorder can be difficult, as the person may be in a vulnerable state and may not be receptive to criticism or attempts to change their behavior. However, it's important to establish boundaries to protect your own well-being and to support the person's recovery. Here are a few tips for setting boundaries:

- Be clear and specific: Clearly state what behavior or actions you will no longer tolerate and the consequences of not respecting your boundaries.
- Be consistent: Stick to the boundaries you set and don't make exceptions.
- Focus on your own feelings: Express how their behavior affects you and let them know that you care about them, but that you can't continue to enable or participate in their disorder.
- Be prepared for resistance: The person may not be ready to accept your boundaries and may resist or try to manipulate you. Be prepared for this and remain firm in your position.

Seek professional help: If the situation becomes too difficult to handle on your own, seek the help of a therapist or counselor who can provide guidance and support.

## Challenges of Establishing Boundaries

Setting boundaries is one of the major challenges in dealing with an eating disorder. Establishing healthy boundaries is a necessary step to ensure recovery, but not always easy to accomplish. It can be very difficult for individuals struggling with an eating disorder to understand and accept limits that are placed on their behavior and thought patterns.

When it comes to establishing boundaries, it's important to understand that they need to be tailored specifically for each individual situation. Eating disorder sufferers must learn how to recognize and maintain physical, emotional, and mental safety in order for them to make progress towards recovery. It requires patience, understanding, and self-compassion from both the individual suffering from the disordered eating as well as their loved ones or support system. Education about healthy behaviors and coping strategies can also play an essential role in helping those affected learn how to create realistic boundaries.

## Respectful Balance

The conclusion of any conversation surrounding boundaries in an eating disorder is a respectful balance. It is important to understand that creating healthy boundaries can be difficult and may not happen overnight. Recovery requires dedication, knowledge and patience. It starts with recognizing the need to set up well-defined and mutually respected boundaries between

yourself and your loved ones in order to ensure that both parties are protected from further hurt or harm. In order to establish a respectful balance, it's important for those affected by an eating disorder as well as their friends/family members/caregivers to work together towards establishing healthy boundaries that promote recovery. They should consider each other's feelings when making decisions about the overwhelming amount of personal challenges associated with an eating disorder diagnosis. This includes respecting each other's opinions on how best to navigate through the struggles associated with setting up effective boundaries.

Wow, this one brings back a flood of emotions for me. I never realized how important boundaries were to my well being and to my daughter's well being until she started pushing back in a big way. Oh, I'll eat this, but not that. Can I have this instead of that? I'll clean my room once I get back. The negotiations were endless and the Eating Disorder tried to wear me down. Some days I failed, some days I stood my ground. All I know is that when I held firm on the boundaries, things seemed to go a lot smoother and ED seemed to quiet down a bit when the eating disorder realized I wasn't backing down. Stay strong!

# Tests And Monitoring

## Eating Disorder Indications and Blood Work

There are several blood tests that may be used to evaluate the health status of an individual with an eating disorder. These tests can help detect any potential medical complications related to the eating disorder and monitor the individual's progress during treatment.

- Complete blood count (CBC): This test measures the number of red blood cells, white blood cells, and platelets in the blood. It can help detect anemia (low red blood cell count), leukopenia (low white blood cell count), and thrombocytopenia (low platelet count), which can be caused by malnutrition or other medical conditions.
- Electrolyte panel: This test measures the levels of electrolytes such as sodium, potassium, chloride, and bicarbonate in the blood. Electrolyte imbalances, especially low potassium levels, can occur as a result of purging behaviors or restrictive eating.
- Liver function tests (LFTs): These tests measure the levels of enzymes and proteins in the liver. Elevated liver enzymes can indicate liver damage and can be

caused by malnutrition, excessive alcohol consumption, or other medical conditions.

- Thyroid function tests: This test measures the levels of thyroid hormones in the blood.
- Disordered eating can affect the thyroid gland, which can lead to changes in the levels of thyroid hormones, and can cause symptoms such as fatigue, weight changes, and irritability.
- Renal function tests: This test measures the levels of creatinine and blood urea nitrogen (BUN) in the blood. These tests can help detect kidney health.
- Amylase and lipase tests: These tests measure the levels of enzymes in the blood that are produced by the pancreas. Elevated levels may indicate inflammation or damage to the pancreas, which can occur because of purging behaviors such as self-induced vomiting.
- Vitamin and mineral levels: These tests measure the levels of vitamins and minerals such as iron, vitamin D, vitamin B12, and zinc. Deficiencies in these nutrients can occur because of restrictive eating or poor absorption due to disordered eating behaviors.
- Glucose test: This test measures the level of glucose (sugar) in the blood. Low blood sugar levels can occur because of restrictive eating or over-exercising, which can lead to symptoms such as fatigue, irritability, and shakiness.

- Folate, Vitamin B12, and iron: These tests measure the levels of these essential nutrients in the blood. Malnutrition and restrictive eating can lead to deficiencies in these nutrients, which can cause anemia, fatigue, and other health problems.
- Albumin: This test measures the levels of a protein in the blood called albumin. Low levels of albumin can indicate malnutrition or malabsorption.

It's important to note that the specific blood tests ordered may vary depending on the individual's specific symptoms and medical history. It's also important to keep in mind that these tests are not diagnostic of an eating disorder, but they can help to identify any medical complications that may be related to an eating disorder.

- Laboratory Test Reference Ranges | Nova Scotia Health Authority - Corporate
- Blood Tests Abbreviated - LIG

## Other Tests Done for Eating Disorders Assessment

In addition to blood tests, there are several other tests that may be done in the assessment of an eating disorder. These may include:

- Psychological evaluation: This may involve a clinical interview and the use of standardized questionnaires or assessment tools to evaluate the

- individual's symptoms, thoughts, behaviors, and emotional well-being related to their eating disorder.
- Nutritional assessment: This may involve measuring the individual's weight, height, and body mass index (BMI), as well as evaluating their dietary intake and nutrient deficiencies.
- Imaging studies: These may include an X-ray, CT scan, or MRI to evaluate for any bone density loss or other complications related to the eating disorder.

- Gastrointestinal evaluation: This may involve an endoscopy or colonoscopy to evaluate for any gastrointestinal complications related to the eating disorder.

- Cardiac evaluation: This may involve an electrocardiogram (ECG) or echocardiogram to evaluate for any cardiac complications related to the eating disorder.

Overall, the evaluation of an eating disorder is multidisciplinary and will involve a team of healthcare professionals including a physician, dietitian, psychologist, and others. It's important

to note that these tests are done to check the patient's physical and mental health status and to provide the best care and treatment plan accordingly.

Physical examination is an important part of the assessment of a patient with an eating disorder. The examination may include:

- Measurement of weight and height: This will be used to calculate the patient's body mass index (BMI), which is a measure of body fat based on height and weight.
- Vital signs: The patient's blood pressure, pulse, and temperature will be measured to assess their overall health status. This includes a sitting and standing blood pressure and pulse to measure the difference.
- Inspection of the skin and nails: The patient's skin may be dry or yellowish in color due to malnutrition or excessive vomiting. Fingernails may be brittle or have spoon-like deformities, indicating a history of low calorie or low protein diet.
- Inspection of the hair: The patient's hair may be thin or brittle, indicating a history of malnutrition or excessive vomiting.
- Inspection of the oral cavity: The patient's teeth may be eroded or discolored due to exposure to stomach acid from excessive vomiting.
- Inspection of the abdominal area: The patient's abdomen may be distended if they have a history of constipation or if they have a history of over-exercise.
- Inspection of the extremities: The patient's extremities may be cold or mottled, indicating poor circulation or anemia.
- Palpation of the abdomen: The patient's abdomen may be tender if they have a history of constipation or if they have a history of over-exercise.
- Inspection of the spine and hips: The patient may have a curvature of the spine or

loss of bone density in the hips, indicating a history of malnutrition.

These are some physical examination findings that the clinician may look for during the examination of the patient with eating disorder. However, it's important to note that the examination is not diagnostic on its own and should be used in conjunction with laboratory tests and other diagnostic evaluations to determine the patient's health status.

# Eating Disorders And Mental Health

## What Mental Illness has the Highest Mortality Rate?

Eating disorders are serious mental illnesses that can have severe physical and psychological consequences. Unfortunately, eating disorders also have a high mortality rate, and individuals with eating disorders are at an increased risk of death compared to the general population.
The mortality rate for individuals with anorexia nervosa is estimated to be around 10%, which is the highest among all mental illnesses. Studies have also found that the rate of death by suicide in individuals with anorexia nervosa is around 20%.

The mortality rate for bulimia nervosa is lower than that of anorexia nervosa, but it is still significantly higher than the general population. Studies have found that the rate of death by suicide in individuals with bulimia nervosa is around 5%.

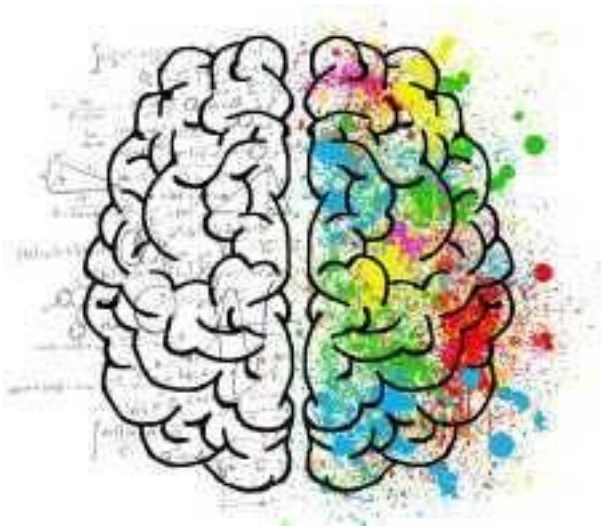
The physical consequences of eating disorders can also lead to death. For example, anorexia nervosa can cause severe malnutrition, which can lead to organ failure and death. Similarly, bulimia nervosa can cause electrolyte imbalances, which can lead to heart problems and death. It's important to note that eating disorders are treatable and early intervention is crucial for a better outcome. With the right treatment and support, individuals with eating disorders can improve their physical and mental health and reduce their risk of death.

- 4-part video series | mhfoundations-efft
- 9 Things Every Parent with an Anxious Child Should Try
- Anxiety and Depression in Children and Youth - Diagnosis and Treatment - Province of British Columbia
- Eating Disorders and Substance Use: Eating Disorders Resources
- Foundry - Where Wellness Takes Shape -
- Freeing Your Child from Anxiety By Tamar Chansky
- Freeing Your Child From OCD by Tamar Chansky
- Get support with these mental health resources - Kids Help Phone
- Home - Anxiety Canada
- Mental Health Literacy
- NIMH » Ask Suicide-Screening Questions (ASQ) Toolkit
- Online Trainings | mhfoundations-efft

- Somatization and the Mind-Body Connection | Kelty Mental Health
- What is Addiction? [Gabor Maté] - YouTube
- What to Do (and Not Do) When Children Are Anxious

# Anxiety And Eating Disorders

## Anxiety & Eating Disorders



Anxiety and Eating Disorders are two closely related psychological issues that can have a major impact on an individual's life. Studies have shown that people suffering from anxiety disorders or panic attacks often struggle with disordered eating, which can lead to further health complications.

This interrelationship between anxiety and eating disorders is complex and not fully understood by researchers. It is thought that the onset of one condition may trigger the development of another; for example, stress caused by an anxiety disorder could lead to someone developing a disordered eating pattern in order to cope with their symptoms.

## Relationship Between Anxiety & Eating Disorders

As a society, we are increasingly becoming more aware of the relationship between anxiety and eating disorders. This is particularly important to understand as mental health concerns such as depression and anxiety affects so many people worldwide. It is estimated that up to 70% of those diagnosed with an eating disorder have co-occurring symptoms of anxiety.

The link between anxiety and eating disorders often goes unnoticed by healthcare professionals, friends and family due to the complexity of these conditions. Anxiety can be both a cause and consequence of disordered eating behaviours. Research suggests that individuals who experience high levels of stress, fear or anxiousness can use food as a form of coping mechanism for managing uncomfortable emotions. Alternately, developing an eating disorder can lead to increased levels of stress and anguish over time putting even more strain on one's mental health.

## Coping Strategies

Anxiety and eating disorders can have a devastating effect on individuals, as well as their families. Understanding the challenge of managing both mental health issues is key to finding effective coping strategies. Here we'll explore how to cope when faced with an anxiety disorder and an eating disorder in order to reduce feelings of distress, improve self-esteem, and create a healthier lifestyle.

While it may feel like there are too many things to handle at once, by taking small steps towards creating better coping mechanisms for dealing with both conditions, individuals can learn healthier ways of thinking about themselves and their circumstances. Learning how to recognize triggers for anxiety or overeating episodes is an important part of developing successful strategies for dealing with these challenges.

Anxiety, anxiety, anxiety, how I hate you. As someone who suffers with anxiety myself, I am shocked I didn't recognize the signs of anxiety early on in my daughter. Starting in grade 6 with a big transition, anxiety ruled her life. Vomiting became a part of the morning ritual and eventually morphed into the eating disorder. There is help for anxiety and the earlier it is caught, the better the outcome.

- Anxiety Workbooks/Sheets - CCI

# Self Esteem

## Definition of Self-Esteem

Self-esteem is an important concept when discussing eating disorders. It's a measure of how we value ourselves and our worth as individuals. Self-esteem is closely linked to self-confidence and self-image, both of which can be affected by negative thoughts about our physical appearance or body shape. Poor self- esteem can lead to the development of unhealthy eating habits and disordered eating, so understanding what it is and how it affects us is essential in preventing these issues from forming.

Self-esteem is often described as an individual's overall appraisal or evaluation of their own worthiness or value. This includes beliefs about one's ability, competence, character traits, physical features and accomplishments. If a person has low self-esteem this means that they have difficulty feeling good about themselves and may feel inadequate in comparison to others around them.

## Impact on Eating Habits

One key factor in the development of an eating disorder is self-esteem. It is important to understand how self-esteem plays a role in determining if someone is at risk for developing an eating disorder, as well as how it can affect the severity of their condition.

Self-esteem is defined as one's opinion or evaluation of their own worth, and those with low self-esteem often struggle with body image issues, which are commonly associated with eating disorders. People who suffer from eating disorders tend to have unrealistic perceptions about their own bodies and physical appearance, resulting in unhealthy behaviors such as restricting caloric intake or excessive exercising. Furthermore, individuals who lack confidence may turn to compulsive habits like overindulging in food or bingeing to satisfy some kind of inner void.

## Conclusion

Concluding the discussion on how self-esteem affects eating disorders, it is clear to see that there is a significant correlation between low self-esteem and an increased risk for both anorexia and bulimia. Self-esteem has been linked to body image issues, which can lead to disordered eating habits as individuals attempt to gain control over their lives. This can be especially true among adolescents or those with a history of trauma who are particularly vulnerable to developing unhealthy coping mechanisms such as disordered eating.

It is important for individuals struggling with low self-esteem or feelings of worthlessness to seek help in order to prevent any further development of an eating disorder. Engaging in positive activities such as journaling, or mindfulness practices can all contribute towards increasing one's sense of self-worth and overall wellbeing.

- Self Esteem Workbooks/Sheets - CCI

## Perfectionism And Its Correlation To An Eating Disorder

Perfectionism & Eating Disorders have a long history of being linked together, yet the correlation between them has never been explored in depth. Recent research into the matter has revealed that perfectionism can be one of the primary triggers for developing an eating disorder. Studies suggest that individuals with a perfectionist outlook on life are more likely to develop severe disordered eating behaviours such as anorexia or bulimia nervosa.

The concept of striving for absolute perfection is often engrained in people from a young age and it can cause an immense amount of psychological stress and anxiety as they reach adulthood. Perfectionists tend to make impossibly high standards for themselves, which leads to feelings of guilt when those standards are not met. This guilt can lead to extreme forms of self- punishment, such as restricting food intake or over exercising.

## Definition: What is Perfectionism?

Perfectionism is a personality trait characterized by an individual's tendency to strive for flawlessness and setting excessively high performance standards. It can manifest in many areas of life, such as work, school, or relationships. Perfectionism often precedes an eating disorder diagnosis due to its focus on achieving impossible goals and unrealistic expectations.

The American Psychological Association defines perfectionism as “a combination of excessively high personal standards and overly critical self-evaluations.” In other words, perfectionists tend to set unreasonable goals for themselves while also being overly self-critical if they don't achieve those goals. This can lead people with this trait to become easily overwhelmed or anxious when faced with tasks that seem difficult or too complex. They may also struggle with decision making as they continually try to make the perfect choice rather than simply the best one available.

## Causes of Perfectionism

It can also lead to a number of physical and mental health problems, such as eating disorders. There are many potential causes of perfectionism, which include biological factors, environmental influences, and cognitive processes.

The biological causes may include genetic predisposition or changes in the brain chemistry. For example, some individuals may have depression-like tendencies due to inherited genes from their parents or other relatives.

On the other hand, environmental factors can also play a role in developing perfectionism. This includes family dynamics where one is raised with unrealistic expectations; this creates an environment where it's difficult to function without being perfect all the time.

## Strategies for Coping with Perfectionism

Perfectionism is a trait that can lead to immense amounts of stress and anxiety, as well as feelings of low self-esteem. In fact, studies have shown that perfectionism has a strong link to eating disorders such as anorexia and bulimia. If you find yourself struggling with perfectionism, here are some helpful strategies for coping.

The first strategy for managing perfectionism is to practice self-compassion: instead of beating yourself up for not achieving something perfectly or up to your standards, reframe it in a more positive way and show yourself kindness. Additionally, try to stay mindful of the present moment; ask yourself if the situation really matters in the grand scheme of things and if it's worth stressing over. Finally, set realistic expectations; don't strive for unattainable goals or believing that everything must be perfect all the time.

## Finding Balance

Perfectionism and its correlation to eating disorders is a subject that affects many people. The two conditions often go hand-in-hand, making it difficult for individuals to find balance in their lives. Fortunately, there are ways to fight the negative aspects of perfectionism and maintain healthy mental and physical health.

In conclusion, recognizing perfectionistic traits in oneself can help prevent the development of an eating disorder and other mental health issues. Identifying key areas where one may be holding themselves back from success due to their need for perfection is the first step. After this, one must take steps towards creating realistic expectations for themselves while also maintaining healthy habits such as getting enough sleep. With effort and dedication, finding balance between perfectionism and healthy living can be achieved!

My daughter tended towards perfectionistic tendencies so I can really see how this is an issue. I had to really look inward and address my own bias towards doing everything "perfect" all the time and it's no surprise she does too. Sometimes good is good enough and maybe our kids need to hear that more in hindsight.

- Perfectionism Sheets/Workbook - CCI

# Eating Disorders And Self-Harm, Suicidal Ideation

## Eating Disorders & Self-Harm

Eating disorders and self-harm are two issues that are commonly linked in both research and personal experiences. Unfortunately, it can be difficult to understand the relationship between these two topics as they can arise from different sources and may manifest themselves in different ways. Eating disorders and self-harm often share characteristics such as a desire for control, feelings of shame or guilt, or thoughts of isolation. The purpose is to further explore the relationship between eating disorders and self-harm by looking at the connection between suicidal ideation.

We will discuss how eating disorders can be connected to self-harm, their potential causes, and how suicidal ideation may enter into the equation. It will also provide insights into treatment options available for those dealing with eating disorders and/or self-harm behaviors.

### Common Causes of Self Harm

Many people who suffer from eating disorders also have a history of self-harm or suicidal ideation. Self-injury and suicide are complex issues that can be caused by a variety of factors, including psychological distress and physical pain.

Self-harm is often used as a way to cope with intense emotions such as anger, sadness, guilt, shame, and fear. It is not uncommon for those dealing with an eating disorder to turn to self-harming behavior in order to cope with their struggles. In addition to psychological distress, certain physical ailments can contribute to the urge to engage in self-destructive behavior. These may include chronic pain or discomfort related to an illness or injury.

Other factors that may lead individuals towards self-harm include feelings of isolation and low self-esteem as well as difficulties in relationships or conflict within the family unit.

### Impacts of Eating Disorders & Self- Harm

Eating disorders and self harm are two issues that can have a profoundly negative impact on an individual's life. Eating disorders such as anorexia or bulimia, involve disordered eating patterns that can lead to serious physical and mental health problems over time. Self-harm is defined as the intentional act of causing oneself physical pain, usually through cutting or

burning. Both of these behaviors can be linked with suicidal thoughts or attempts, making them even more dangerous and potentially life threatening.

When it comes to understanding the relationship between eating disorders and self-harm, research has found that around 50-90% of people with an eating disorder will also engage in some form of self-harm behavior. This could be due to a number of factors such as low self esteem, feelings of worthlessness or depression which are commonly associated with both conditions. It's of note to look for excessive razor use or other sharp objects that cannot otherwise be explained.

## Cutting and Eating Disorders

There is a well-established correlation between cutting and eating disorders. Many individuals who struggle with eating disorders also engage in self-harming behaviors such as cutting. Both cutting and eating disorders often serve as ways to cope with underlying emotional distress, feelings of control, or a desire to escape from overwhelming emotions. It is important to address both issues simultaneously in treatment, as they are intertwined manifestations of deeper psychological struggles. By understanding and addressing the connection between cutting and eating disorders, healthcare professionals can provide more comprehensive support and help individuals on their path to recovery.

## Prevention Strategies

Eating disorders and self-harm have become a growing concern for many in today's society, with an alarming spike in suicidal ideation. Mental health professionals are looking for effective prevention strategies to help those at risk of developing these conditions.

One such strategy is the implementation of education programmes on mental health awareness, so that those vulnerable to eating disorders and self-harm can identify potential triggers and warning signs before they spiral into more serious issues. These education programmes should also teach appropriate methods of dealing with emotions, as well as coping mechanisms to deal with stressors.

In addition, it is important to provide support systems for those affected by eating disorders or self-harm; this could include counselling services, peer groups or even mentors who can offer guidance when needed.

The issue of eating disorders and self-harm, as well as suicidal ideation, are serious matters that require prompt attention. While the causes and motivations for these behaviors are varied, one thing is clear: it takes a united effort from parents, educators, healthcare providers, and other members of the community to ensure those afflicted with these conditions receive the support they need.

Eating disorders can be successfully addressed when an integrated approach is employed that addresses both physical and psychological components of health. This includes creating an empowering environment where individuals feel safe to express their feelings without fear or judgment; providing education about healthy nutrition habits; providing resources for mental health services such as counseling or therapy; offering early intervention programs; and encouraging positive activities.

This one hits very close to home for me for many reasons. I'm choosing not to go into this any further at the moment, but am working on a chapter of it's own for this one. Update: this was very present in our own but tattoos have covered and replaced the scars.

- Eating Disorders and Suicidal Behaviors in Adolescents with Major Depression:
- Eating Disorders: Stopping Negative Thoughts
- ED and Self Harm
- Preventing suicide: Warning signs and how to help/
- Removing the Shame from Eating Disorders and Suicide
- Self-Harm and Eating Disorders
- Self-injurious behaviour in patients with anorexia nervosa: a quantitative study

# Eating Disorders And Substance Abuse

## Substance Abuse and Eating Disorders

Substance abuse and eating disorders are two very serious issues that can have devastating consequences for those affected. An important question to consider is how these two conditions are connected. Research has indicated that there is a strong link between substance abuse and eating disorders, with many individuals suffering from one of these conditions being found to also suffer from the other.

Those with anorexia or bulimia nervosa, for example, tend to be at higher risk of abusing alcohol or drugs as a way of coping with their emotional distress. Meanwhile, people who already struggle with addiction may use food restriction as a means of control in order to compensate for their lack of control over

substance use. This unhealthy behavior can often lead to an addiction-eating disorder cycle in which both conditions feed off each other and worsen over time.

## Causes of Coexistence

The issue of substance abuse in relation to eating disorders is a complex one that deserves further exploration. The causes of this coexistence can be multifaceted, ranging from environmental factors to genetics and self-esteem issues. It's important to understand the underlying reasons for these correlations in order to provide more effective treatment options for those affected.

Drug and alcohol use can be both a cause and a consequence of eating disorders. In some cases, people who struggle with anorexia or bulimia may reduce their food intake as a way of coping with psychological distress, which can lead them to seek out substances in order to cope with cravings or fill emotional voids. On the other hand, individuals struggling with addiction may also develop an eating disorder as a side effect of drug use, such as when someone binges on food after coming down from cocaine or meth. In addition to the risk of physical harm or death, people who struggle with eating disorders and drug addiction are at an increased risk of developing co-occurring mental health conditions.

Certain substances can have an impact on eating disorder behaviors, for example:

- Alcohol can lower inhibitions and lead to binge eating.
- Stimulants such as cocaine and amphetamines can suppress appetite and lead to weight loss.
- Opioids and depressants can cause changes in metabolism, weight gain, and disordered eating.

## Impact on Health Outcomes

The relationship between substance abuse and eating disorders is an important factor in determining health outcomes. Substance abuse and eating disorders often occur together, creating a complex set of health challenges that require comprehensive treatment. Studies have shown that substance abusers with eating disorders can be at higher risk of medical complications than those without a dual diagnosis.

Substance use puts strain on the body and may make recovery from an eating disorder more difficult. Eating disordered behavior leads to malnutrition, which can further complicate the damaging effects of drugs or alcohol on the body. To ensure positive outcomes for individuals who suffer from both conditions, a thorough assessment must be done to determine the best treatment plan for each person's unique needs. Interdisciplinary approaches such as cognitive- behavioral therapy (CBT) are recommended as they help to address both conditions simultaneously, allowing for better overall physical health outcomes.

## Conclusion

The relationship between substance abuse and eating disorders is complex. While the two conditions can be related, the exact nature of this relationship is not fully understood. To conclude, it appears that both substance abuse and eating disorders have a great deal of overlap in terms of their symptoms and causes. Furthermore, research suggests that individuals who suffer from either condition may be more likely to develop the other one as well.

In addition, treatment for one condition can help address underlying issues leading to the other condition and vice versa. For example, helping someone with an eating disorder manage their emotions without resorting to drug or alcohol use can help reduce an individual's risk for developing a substance use disorder. Similarly, treating a substance use disorder with therapy and counseling may reduce behaviors associated with an eating disorder such as extreme dieting or binge-eating. It's important to address both the eating disorder and substance abuse simultaneously, as treating one without the other can negatively impact the treatment outcome. A team of healthcare professionals that includes a therapist, dietitian, and psychiatrist can provide a comprehensive treatment program that addresses both conditions.

- CLIENTS WITH SUBSTANCE USE AND EATING DISORDERS
- Eating Disorders & Substance Use: Co-Occurring Disorders
- ED and Substance Abuse - NEDA
- Hungry for Something More: The Link Between Eating Disorders & Substance Abuse
- Substance Abuse and Eating Disorders - YouTube
- The Risk of Substance Use Among Adolescents and Adults With Eating Disorders
- When Eating Disorders and Substance Abuse Problems Collide

# Body Checking / Social Media

## Diet Culture

### Defining Diet Culture

The concept of diet culture has been a hot topic in recent years, as more and more people are becoming aware of the negative impacts it can have on health. But what exactly is diet culture? Diet culture is an approach to food and nutrition that focuses on body shape, size, and weight as the primary criteria for health. It places value on restriction and deprivation rather than nourishment and balance.

At its core, diet culture promotes an unhealthy relationship with food by encouraging extreme eating behaviors such as fasting or restricting certain foods. Additionally, it often involves rigid rules about what you should or shouldn't eat; for example, forbidding yourself from eating certain types of carbohydrates or fats. Diet culture also perpetuates unrealistic beauty standards that can lead to disordered eating patterns such as bingeing or purging.

## Historical Origins of Diet Culture

Diet culture is a phenomenon that has become deeply rooted in our society for centuries. It can be traced all the way back to ancient Greece and Rome, where people used diets as a form of social distinction or status-seeking. However, it was not until the early 20th century when diet culture really began to take shape in the modern world. With the emergence of new medical treatments and pharmaceuticals, dieting became more accessible than ever before - leading to a dramatic rise in its prevalence.

As technology evolved during the latter half of the 20th century, so too did diet culture. The internet revolutionized how information was accessed and shared among individuals, opening up a whole new realm of possibilities for those wanting to follow (or promote) certain lifestyles or dietary habits. The Impact of Diet Culture on Mental Health

## The Impact Diet Culture on Mental Health

Diet culture has become a pervasive part of our society, and its effects on mental health are undeniable. Many people feel an immense pressure to conform to the ever-changing standards of beauty that diet culture perpetuates, and this can lead to disordered eating patterns, body image issues, and depression. Diet culture is not only about physical appearance; it's also about having control over one's life. In an effort to gain control over their lives, many people turn to restrictive diets that can be emotionally taxing in the long run. This can create feelings of guilt and anxiety around food choices, resulting in poor self-esteem and a negative relationship with food. It's clear that diet culture has had a profound impact on mental health, but what exactly is it?

## Negative Emotions Tied to Diet Culture

Diet culture seems to be everywhere these days, with extreme diets, restrictive eating plans and other weight-loss tactics becoming a part of everyday life for many. But what about the negative emotions that come along with diet culture? Research shows that dieting can have a significant impact on our mental health, leading to feelings of guilt, shame, loneliness and even depression.

It's easy to get caught up in the world of diet culture – whether it's scrolling through Instagram influencers touting "clean eating" or reading articles offering tips on how to "lose 10 pounds in one week!" – but getting caught up in these unrealistic expectations can lead us down an unhealthy path.

## Alternatives to Diet Culture

While it's important to be mindful of our health and nutrition, diet culture can become toxic when its messages lead to extreme behaviors, disordered eating, or guilt surrounding food choices. Thankfully, there are alternative lifestyles that prioritize healthy bodies without the negative mental health effects of diet culture.

One such lifestyle is intuitive eating which focuses on trusting one's body to guide their food choice decisions. Intuitive eaters don't rely on external cues like diets or meal plans; instead they learn to listen to their body's signals for hunger and fullness, honoring them by consuming foods that leave them feeling satisfied both physically and emotionally.

## Overcoming the Pressure

As the world becomes increasingly aware of the dangers of diet culture, it is important to recognize there are ways to overcome the pressures it can create. Overcoming this pressure is no easy task, but there are steps that can be taken to reduce its power.

The first step in overcoming diet culture's influence is to understand its implications and influences. Knowing that diet culture equates thinness with success and goodness can help you move away from those expectations. Secondly, practice body positivity by recognizing and appreciating your body for all that it does rather than focusing solely on aesthetics or numbers on a scale.

Finally, surround yourself with people who value more than just physical appearance; these supportive people will encourage you when times seem difficult and remind you of your worth beyond looks.

- Dear-kids-your-body-is-not-the-problem-diet-culture-is
- Have you Lost Weight Is Not a Compliment
- How to React to Comments About Your Body, According to an Anti-Diet Dietitian
- Recognizing and Resisting Diet Culture
- Weight Bias & Stigma | UConn Rudd Center for Food Policy & Health
- What Parents and Educators Need to know about diet culture
- What Parents need to know about diet culture and eating disorder recovery

# Social Media & Eating Disorders

The rise of social media platforms in recent years has brought up the discussion of their impact on eating disorders. With Instagram filters that promote unrealistic beauty standards and YouTube "thinspiration" videos, it's no wonder why young people are struggling with body image issues more than ever before. While these platforms can be a great way for people to connect and create meaningful relationships, they can also have dangerous implications when it comes to mental health and disordered eating habits.

When studying the effects of social media on those struggling with eating disorders, there are two key components: exposure to content related to disordered eating, as well as risk factors such as poor self-esteem or feeling excluded from peers. Exposure to pro-eating disorder content found on platforms like Instagram can lead an individual into deeper struggles with an existing disorder, or even trigger the development of one in someone who was previously unaffected.

## Role of Social Media in Eating Disorders

As technology advances and social media becomes more accessible, an important question to consider is how these platforms can affect one's mental health. One of the most serious issues that has been linked to social media use is eating disorders. Social media has contributed to the development of eating disorders, such as anorexia nervosa or bulimia, in multiple ways through exposure to unrealistic beauty standards, trolling and body shaming.

The link between social media and eating disorders has been a growing concern among healthcare professionals. Social networking sites often portray impossible beauty standards while promoting dieting plans or lifestyle changes that are not necessarily attainable for everyone. This exposure may lead some individuals to develop body image issues or dissatisfaction with their own appearance leading them towards unhealthy diets in search of an unattainable ideal physique.

## Comparison of Eating Disorder Rates Pre/Post Social Media

Social media has become an integral part of everyday life and its impact on society continues to be debated. A recent study conducted by researchers at the University of Pittsburgh School of

Medicine sought to examine how social media may affect eating disorder rates. The study compared eating disorder rates pre-social media against current levels post-social media, indicating a marked increase in cases since the emergence of social media platforms.

The team used data from the National Eating Disorder Association (NEDA) which indicated that prior to the introduction of social media, only 2 million people were estimated to suffer

from anorexia nervosa or bulimia nervosa. After tracking changes in eating disorder rates for over 10 years, it was found that this number had more than tripled with 6 million individuals now affected by one or both conditions.

## Impact of Social Media on Self Image

In today's society, social media has had a tremendous impact on the way individuals perceive their self image. With the constant bombardment of images of what is considered "the ideal body", it is no wonder that many are struggling with their own sense of worth. Recent studies have shown a definitive correlation between social media and eating disorders, leading to mental health issues such as anxiety and depression.

It is estimated that up to 70% of people who use social media report feeling pressure to portray an ideal version of themselves online. The overwhelming majority – 91% - state that viewing images on sites like Instagram make them feel worse about their physical appearance and body image.

## Accessibility & Availability of "Thinspiration"

The internet has become an integral part of everyday life, allowing people to connect and share information from all around the world. However, with this increased access to information comes certain risks; one of the more concerning dangers is how social media can affect eating disorders. By providing a platform that encourages body image comparison among users, social media platforms are often used as a medium for sharing "thinspiration" - images designed to motivate even further weight loss by promoting unhealthy dieting practices.

Unfortunately, the accessibility and availability of thinspiration on social media makes it easy for those susceptible to eating disorders to find validation in their struggles. Not only is there a plethora of content centered around extreme weight loss methods or unrealistic beauty standards on these platforms, but there are also dozens of online communities dedicated solely to encouraging users in their pursuit of thinner figures.

While we were writing this together, she brought up the one application or website that taught her how to be better at her eating disorder. She said if she could give any tips to parents, it's to delete or block the social media platform that rhymes with "mumbler". She perfected her eating disorder with seeing graphic pictures that were not censored and tips on how to hide it from your parents.

## Positive Ways to Use Social Media for Recovery

Social media can have a powerful influence on our mental health, especially when it comes to eating disorders. While many people might think that social media can be a negative force in terms of developing or perpetuating an eating disorder, there are actually positive ways in which it can be used for recovery.

Using social media as a tool to connect with others who understand and support your journey is one way to make your recovery more manageable. By participating in online communities dedicated to fighting eating disorders, you not only gain access to helpful resources, but also the support of individuals who know exactly how you feel. Additionally, many online platforms offer education about body image and nutrition that will help you change the way you see yourself and adopt healthier habits.

Finally, using social media as an outlet for creativity is another great way to channel negative thoughts into something productive during recovery.

- As America's Eating Disorders Increase, What Role Does Social Media Play?
- Canadians' assessments of social media in their lives
- Eating Disorders and Social Media Prove Difficult to Untangle
- Social Media and Eating Disorders
- Social Media Influencers are Triggering Eating Disorders
- The impact of the media on eating disorders in children and adolescents
- The Influence of Social Media on Adolescent Eating Disorders

# Body Dysmorphia Disorder (BDD)

Body dysmorphic disorder (BDD), also known as body dysmorphia, is a mental health disorder characterized by a preoccupation with one or more perceived flaws in one's appearance. These flaws are often minimal or nonexistent, but they are perceived as significant and cause significant distress and impairment in daily life.

Individuals with BDD may engage in various behaviors, such as excessive grooming, mirror checking, or seeking reassurance from others, to mitigate their perceived flaws. They may also engage in repetitive and compulsive behaviors, such as skin picking, or in severe cases, may seek unnecessary medical treatments or surgery to correct the perceived flaws.
BDD can affect both men and women and can occur in all ages, most commonly starting in adolescence. It can be associated with other mental health disorders, such as depression,

anxiety, and eating disorders.

BDD can be a debilitating condition that can lead to significant impairment in one's quality of life, including difficulty in school, work, and social life. It's important for individuals with BDD to seek professional help and receive appropriate treatment, which may include therapy, medication, and self-help techniques.

Helping someone with BDD can be challenging, but there are a few things you can do to support them:

- Listen and validate their feelings: People with BDD often feel self-conscious, ashamed, and misunderstood. Listening to them and validating their feelings can help them feel heard and understood.
- Educate yourself: Learn more about BDD so you can understand what the person is going through and how you can best support them.
- Encourage them to seek professional help: BDD is a treatable condition, and professional help is essential for recovery. Encourage them to see a mental health professional, such as a therapist or counselor, who can help them manage their symptoms.
- Avoid commenting on their appearance: People with BDD are often hyper-sensitive to comments about their appearance, even if they are meant to be complimentary. Avoid
- commenting on their appearance or offering unsolicited advice about how they can change their appearance.
- Support them in their recovery: Recovery from BDD can be a long process, and it's important to be patient and supportive. Encourage them to stick with their treatment plan and celebrate their progress.
- Help them to find alternative activities: Encourage them to find activities that they enjoy and that take their mind off their appearance. This could be anything from sports, hobbies, or volunteer work.

It's important to remember that recovery from BDD is possible, and with the right support and treatment, individuals can learn to manage their symptoms and improve their quality of life.

- CCI - Body Dysmorphic Disorder Resources for Clinicians
- What is BDD - CCI

# Mirror Mirror On The Wall. Body Checking

## What is Body Checking?

Body checking is a behavior associated with eating disorders in which an individual focuses on the physical characteristics of their body. It can be used as a means to regulate or monitor food intake and often includes behaviors such as weighing oneself, measuring body parts, and examining one's reflection in the mirror. Body checking has been linked to poor mental health outcomes, including increased anxiety and depression.

The frequency and intensity of body checking can vary among individuals who suffer from disordered eating behaviors; some may check their body several times a day while others may only engage in this behavior every few weeks or months. Generally speaking, those who struggle with anorexia nervosa tend to exhibit more frequent body checking than those living with bulimia nervosa or binge eating disorder.

Body checking becomes problematic when it leads to extreme thoughts about one's size or shape. Individuals who engage in this behavior may become excessively preoccupied with their appearance, leading them to focus more on their perceived physical flaws than personal achievements. Additionally, it can create an environment of fear around food and exercise which can sabotage recovery from an eating disorder by making good health decisions difficult to pursue.

## Types of Body Checking

Body checking is a behavior associated with eating disorders where an individual examines their body and/or measures their weight to gain assurance that they are achieving the desired shape or size. It can be used as a way of judging progress, monitoring and controlling food intake, or as a type of self-punishment. There are several different types of body checking which can include:

- First is weight monitoring. This involves checking the scale regularly to ensure that the individual's weight is not changing in any undesirable direction. Individuals might take steps to manipulate their weight by limiting food intake or exercising more to create a certain appearance.

- Another type is body measurements such as taking circumference measurements around certain areas of the body like waist, hips, etc., in order to monitor changes in size over time. Who knew "hip dip"?

- A third type is body comparison. This involves comparing one's appearance to

someone else, typically a person of higher weight or a celebrity. Individuals might look at pictures of celebrities and compare their own bodies to them.

## Effects of Body Checking

Body checking can lead to an unhealthy obsession with one's weight or appearance, as people may constantly compare themselves to others or become overly critical of their own bodies. Furthermore, it can severely impact a person's self-esteem. The constant negative evaluation of their physical form can cause feelings of shame and low self-worth which further perpetuate the cycle of body checking and poor mental health.

## How Do I Stop Someone From Body Checking

Body checking is a relatively common behavior in those with eating disorders. So how do you stop someone from body checking?

The first step is to understand why it is happening and for that person to feel heard and respected. Ask them open-ended questions about their thoughts and feelings when they engage in body checking behaviors, as well as trying to find out what triggers these episodes. Once you have a better understanding of what motivates the behavior, it can be easier to find ways of helping them stop. Practical strategies such as removing mirrors from bedrooms or avoiding weighing scales can help reduce the chances of engaging in body checking activities. It's important to identify strategies for stopping someone from body checking so they can focus on developing healthy relationships with food and their bodies.

This was a really big first indicator that I missed.  I didn't realize why our bathroom scale found a permanent new home in her bathroom or why the measuring tape was all of a sudden in her bedroom.  She was measuring her wrists and ankles, monitoring her hip dip, and weighing multiple times a day.  If you see these, it may be time to open up a discussion with your loved ones.

- Body Dissatisfaction - CCI

# What is Body Avoidance?

## Body Avoidance

Body avoidance, or body image avoidance, is a type of behavior that often occurs with eating disorders. It involves avoiding activities that might bring attention to one's physical appearance, such as undressing in front of others or wearing revealing clothing. People who suffer from this may also avoid situations where they feel they are being judged or evaluated based on their looks. This type of behavior can have a serious impact on an individual's health and wellbeing, as it can interfere with their ability to engage in everyday activities.

The effects of body avoidance are not limited to just individuals suffering from eating disorders; many people experience this type of anxiety regardless of whether they have an eating disorder or not. Individuals with body image avoidance may find themselves withdrawing from social situations out of fear that their physical flaws will be criticized by others.

## How to Help Someone with Body Avoidance

Body avoidance is an important factor to consider when treating an eating disorder. It involves a person’s feelings of anxiety, discomfort, or shame surrounding their body size, shape and appearance. This type of behavior can lead to isolation and prevent individuals from seeking help for their condition. Fortunately, there are ways to help someone with body avoidance in order to make a difference in their recovery journey.

One way to support someone with body avoidance is by encouraging them to speak openly about their feelings and experiences with the disorder. When providing this support it is important not to pressure them into discussing these topics if they don’t feel comfortable doing so but instead offer a safe space where they can express themselves without judgment or criticism. It is important to be patient and understanding as your loved one may need time to process what they are feeling and will benefit from the opportunity to do so in their own time. Allow your loved one to take the lead. Ask your loved one what they need or want, and offer to help.

## Taking Action Against Body Avoidance

Body avoidance is an issue that affects people with eating disorders, and unfortunately it can be difficult to overcome. It is important to take action against body avoidance in order to begin the journey towards recovery. There are many different strategies and techniques

that can be utilized when tackling body avoidance. These include cognitive behavioral therapy (CBT), dialectical behavior therapy (DBT), nutrition counseling, support groups, family therapy,  lifestyle changes, and mindfulness practices. Each approach has its own unique benefits which should be taken into consideration when deciding on the best course of treatment for an individual's needs.

- Body Image & Eating - Foundry –
- Body Image | MediaSmarts
- What is the Health at Every Size Movement
- What is your body really for?
- Body Checking/Avoidance - CCI

# All About Food

## Fear Foods

### Definition of Fear Foods

Fear foods are a common symptom of many eating disorders. They refer to the avoidance of certain foods and food groups due to an intense fear of gaining weight or other related consequences. Fear foods can be either healthy or unhealthy, depending on the individual's personal beliefs and anxieties.

For individuals struggling with anorexia nervosa, fear foods often include high-calorie items such as pasta, desserts, and processed snacks. For those with bulimia nervosa, fear foods may include healthier items like fruits and vegetables that have been avoided out of guilt or shame associated with "over-eating" them. Binge eaters can also experience fear food avoidance through not wanting to engage in their binge behavior again if they were to consume these items again.

### How Fear Foods Manifest

Fear foods are an important part of understanding and managing an eating disorder. These are the specific foods or groups of food that cause intense fear, anxiety, guilt or shame for someone with an eating disorder. It is often thought that fear foods will be unhealthy processed items such as sugary snacks and fast food. However, fear foods can range from any type of food group to something seemingly healthy like vegetables or lean proteins.

Understanding how fear foods manifest in an individual's life is a critical step in learning how to manage the condition. Fear foods can take on different forms within each person's experience; some may have irrational fears about a certain type of food while others may

feel immense guilt after eating anything at all. Whatever form it takes, these fears can be debilitating and warrant professional help in order to fully understand and address them appropriately.

## Common Types of Fear Foods

One common type of fear food is “forbidden” foods such as those that are high in fat or sugar. People who struggle with disordered eating often feel guilty for indulging in these types of food

and so they become fearful of them and avoid them altogether. Other types of fear foods can include certain textures or flavors, anything new or unfamiliar and sometimes even healthy options like fruits and vegetables.

## Overcoming Fear Foods

The first step to overcoming fear foods is to identify what they are and develop a plan on how to address them. It is important to recognize the feeling of fear associated with particular food items so one can assess why these triggers occur in the first place. Understanding the emotional connection behind these fears will help create a plan for exposure therapy or other methods of slowly introducing certain food items into one’s diet. A support system throughout this process may be beneficial as well, whether it is provided by family members, friends or medical professionals. Professional help can be instrumental in identifying these fear foods, understanding why they are feared, and developing skills for managing them when faced with them in daily life.

## Taking Control

Now that we understand what fear foods are in an eating disorder, it's important to recognize how to take control of your own mental health. Fear food can be extremely disruptive and damaging if left unchecked. Therefore, it is essential to develop healthy coping mechanisms when dealing with fear food and identify the underlying cause of why you have a fear of certain foods.

An effective way to address fear food is through cognitive behavioral therapy (CBT). This type of therapy helps individuals identify behaviors or thoughts that keep them from engaging in healthier ones. It also encourages creating new patterns that lead to healthier behaviors and habits. Additionally, CBT helps patients become aware of their distorted thoughts and irrational beliefs about food so they can learn how to challenge them in order to overcome the anxiety associated with eating certain foods.  I have included sheets on adjusting the rules and fear foods in the resources section.

# Food Rules

## Food Rules in Eating Disorders

Those struggling with an eating disorder often find themselves relying on a set of rigid food rules to control their behaviors and emotions. These so-called “food rules” can take many forms, but they all serve the same purpose: to provide structure, control, and safety in times of distress or uncertainty.

Food rules tend to fall into three broad categories: restriction, ritualization, and compensation. Restriction involves limiting food choices according to certain criteria—such as calories, fat content, type of food—while ritualization involves following strict rituals or patterns around eating (like cutting foods into specific shapes or sizes). Lastly, compensation involves compensatory behaviors such as purging after eating or over-exercising in order to make up for the perceived wrongfulness of having eaten something.

## What are Food Rules?

Food rules are a set of dietary restrictions that individuals with an eating disorder impose upon themselves. These rules can have a significant impact on the individual’s health and wellbeing, as they often involve drastic changes to the person’s diet or lifestyle. Food rules come in many forms and vary from person to person, but all serve to help control the individual’s food intake. Common food rules include avoiding certain foods, such as fats or carbohydrates; counting calories or macronutrients; measuring portions; and following rigid meal schedules. In a more practical way, it can involve cutting up food into small pieces, moving food around the plate, not drinking calories, eating foods in certain orders, not going above a certain calorie level, not eating double carbs and so on.

In addition to these common food rules, individuals may also enforce stricter guidelines for themselves in order to manage their weight or shape. For example, some people may restrict their daily caloric intake below recommended levels, while others might limit their meals to only certain times of day.

## Reasons for Establishing Food Rules

Establishing food rules, or rigidly controlling what you eat, can be a common symptom of an eating disorder. However, the reasons why people with eating disorders develop food rules are complicated and vary from person to person. Food rules may provide a sense of control in an

individual’s life, enabling them to feel more comfortable in unpredictable and chaotic

situations. For some individuals with eating disorders, diet and nutrition become areas where they can focus their energy instead of dealing with difficult emotions. Additionally, many people who have experienced trauma or neglect as children may have difficulty distinguishing between hunger-driven cues and emotional hunger. Thus, establishing food rules helps them cope by providing structure and regulating unpredictable emotions.

## Consequences of Not Adhering to Food Rules

When someone does not adhere to these pre-determined food rules, it can be detrimental to their recovery process and cause them to struggle even more with their disorder.

Not adhering to the predetermined food rules can contribute to feelings of guilt, anxiety and shame. These emotions can lead to increased behaviours which have both physical and psychological consequences.

## Strategies for Avoiding Rigid Food Rules

One important strategy is learning how to identify triggers for following food rules; this could include certain emotions or situations that cause one to resort back into disordered eating patterns. Additionally, focusing on understanding the motivation behind restrictive behaviors is essential for recognizing when unhealthy behaviors start taking hold again. This includes examining why it feels necessary to stick with old routines or punishments for breaking them.

## Conclusion: Reject Restrictive Eating

At the end of a long journey, it is time to reach a conclusion. Restrictive eating should be rejected in all cases, especially for those suffering from an eating disorder. It simply does not work and can do more harm than good. Restrictive eating relies on rules and regulations that are too difficult to maintain for those suffering from an eating disorder, as the individual often does not have control over their emotions or reactions to food. For example, restrictive diets can lead to a feeling of deprivation and guilt when individuals do consume certain foods due to the rules they have set for themselves. This leads to feelings of shame and further confusion about how they should interact with food.

Instead of restrictive eating, individuals with an eating disorder may benefit from learning mindful practices around food such as intuitive or mindful eating techniques.

When I was told by a counsellor that there was such a thing as food rules I asked my daughter what hers was. I had no clue, completely unaware that she would only eat 1 hamburger bun because having both was considered a double carb. If you are a caregiver, I encourage you to ask what your loved ones food rules are if they will tell you.

- Adjusting the Food Rules - CCI
- Tackling Avoided Foods Worksheet - CCI

## Meal Support

Meal support can be a valuable component of treatment for an individual with an eating disorder. Some ways to provide meal support include:

- Eating together: Eating meals together as a family or with a support group can provide a sense of accountability and help the individual feel less alone in their recovery.
- Meal coaching: A trained professional, such as a dietitian or therapist, can provide guidance and support during meals to help the individual learn to manage their eating disorder and develop healthy eating habits.
- Positive reinforcement: Encourage the individual for their efforts towards recovery, even small successes.
- Identifying and addressing triggers: Identify and address any triggers that may lead to disordered eating behaviors and create a plan to manage these triggers.
- Providing structure: Meal support can provide structure and routine to help the individual feel more in control of their eating.
- Emphasizing balance: Emphasize the importance of balance and moderation in meals, rather than restriction or elimination of certain foods.
- Encourage self-compassion: Encourage the individual to be kind and compassionate towards themselves, and to understand that recovery is a process that takes time.

This was one of the things I struggled with the most in the recovery journey. Part of me felt like I was having to go back to feeding my child like when they were a toddler. I had gotten used to the freedom of having teenagers and it really did throw me for a loop. We didn't really eat meals together as both of my kids liked to eat in their rooms (looking back I should never have allowed this). However, when she came home for the hospital we ate every meal and snack together. We would often watch funny videos to help her get through the meals and I would always ask if she needed extra support. It works, hang in there and support your loved one through their journey.

The following resources have lots of great information to help you provide the best meal support possible.

- Eating Disorders Meal Support: Helpful Approaches for Families (Full Video) - YouTube
- Eva Musby Youtube Channel
- Help your child eat with trust, not logic: the bungee jump (Anorexia & other Eating Disorders)

- Kelty Eating Disorders Center (BC), Meal Support, Helpful Approached for Families
- supporting-your-child-or-other-loved-one-with-an-eating-disorder-through-the-holidays/
- Supportive Meal Therapy Training for Carers:
- When Your Child Refuses to Eat - Youtube Kelty

# Menu Planning

Menu planning is an effective way to maintain healthy eating habits and establish regular meals. However, it can be difficult for those with eating disorders to menu plan when they are struggling to overcome their condition.

It is important for people with eating disorders to seek professional help so they can safely navigate the process of menu planning while managing their disorder. This means seeking out qualified professionals who understand how to identify triggers that may lead to disordered behavior related to food and nutrition decisions in order to develop sustainable plans for meal preparation. With the right guidance and support, individuals with eating disorders will have the resources necessary for them to create menus that not only promote physical health but also mental well-being.

## Assessing Your Needs

When it comes to meal planning and having an eating disorder, it's important to start by assessing your needs. Meal prepping can be helpful in allowing for more control over food and preparation of meals that adhere to dietary restrictions, but it often requires some examination first. It's essential to consider the type of relationship you have with food and how this could potentially affect any menu planning activity. Moreover, asking yourself questions about what kind of meals would best suit your lifestyle and needs is key before starting a meal plan.

It is also important to recognize the importance of flexibility within the menu plan. Being aware that one's needs may change over time, and being open to adjustments when needed will ensure that the meal plan remains manageable. If a meal plan is too restrictive, it may lead to feelings of anxiety and stress. If a meal plan is too lax, it may contribute to feelings of guilt and unhappiness. Developing a flexible approach to meal planning will help you achieve the optimum balance between fun, healthy eating and experimentation. Medical professionals should always be involved in any integral changes to the menu planning requirements.

## Seeking Professional Help

When you are struggling with an eating disorder, the idea of menu planning can seem daunting and overwhelming. But with the right guidance and support, it can be an invaluable tool in your recovery journey. Professional help is essential to address underlying issues that may have caused or contributed to your eating disorder.

There are a variety of resources available to individuals seeking professional help for their

eating disorders. Licensed nutritionists, dietitians and therapists specialize in helping people recover from disordered eating behaviors such as restrictive diets, bingeing and purging. A professional will work with you to create a personalized meal plan tailored to your individual needs that is both nutritious and enjoyable. This plan will be designed to meet any dietary restrictions you may have while also providing balanced meals that suit your lifestyle.

## Fats, Carbs, Iron, Calcium

Eating disorders are a devastating condition that affect millions of people around the world. Affecting both physical and mental health, eating disorders can have life-altering consequences if left untreated. In order to better understand how the body is affected by an eating disorder, it is important to analyze the role of essential nutrients such as fats, carbs, iron and calcium.

This will explore how these key vitamins and minerals play into an eating disorder as well as how individuals with an eating disorder can maintain a healthy balance of these nutrients in their diet.

### Why Fats are Good

Fats are an essential part of a healthy diet, but they can often get a bad rap. Fats provide the body with energy and help to regulate hormones, aid in absorption of vitamins and minerals, and support cell growth and development. In individuals struggling with an eating disorder, such as anorexia nervosa or bulimia nervosa, incorporating fats into the diet can be especially beneficial.

The importance of fat consumption cannot be overlooked when discussing proper nutrition for those suffering from an eating disorder. Fats are necessary for good health; they play a critical role in regulating metabolism and providing key nutrients to the body which helps to reduce cravings for unhealthy foods.

### What Do Carbohydrates Do

Carbohydrates are a major source of energy for the body and play an important role in maintaining overall health. They provide the fuel necessary to keep our bodies functioning and energized throughout the day. This is especially important for individuals with eating disorders, as they often have difficulty getting enough calories from food to sustain them. Carbohydrates can help to satisfy hunger, provide essential nutrients, and reduce cravings.

In addition to providing energy, carbohydrates also aid in weight loss by slowing down digestion and increasing feelings of fullness after meals. This can be beneficial for those struggling with binge eating or overeating due to intense cravings or low self-esteem. Carbohydrates also help

maintain healthy blood glucose levels which is crucial for proper bodily functions like

digestion and metabolism.

## Iron: Deficiency & Sources

Iron is an essential mineral found in many foods and is used by the body in a variety of ways. A deficiency of iron can lead to serious health complications, especially for those with eating disorders. Iron helps the body produce red blood cells that carry oxygen throughout our system, so it is important for us to know how much we need and where to get it from.

For someone suffering from an eating disorder, getting enough iron into their diet could be a challenge. Those with eating disorders may not be getting enough nutrients including this vital mineral due to skipping meals or cutting out entire food groups. It's important that people suffering from an eating disorder understand their body needs more than just fats, carbs and calcium - they need iron too! Young women are already predisposed to iron deficiency due to their monthly cycles.

## Calcium: Benefits & Sources

Calcium is an essential mineral that is required for many bodily functions. It helps build strong bones and teeth, aids in muscle contraction, regulates hormones, and helps to keep the heart beating regularly. A balanced diet rich in calcium can have a positive impact on overall health and well-being.

In individuals suffering from eating disorders such as anorexia nervosa or bulimia nervosa, calcium intake may be particularly important due to increased bone loss and decreased absorption of this vital nutrient. While fats, carbohydrates and iron also play significant roles in maintaining health when living with an eating disorder, it’s essential to understand the benefits of calcium and where it can be found in order to prevent complications associated with a lack thereof.

## Effects of Low Nutrients

The effects of low nutrients can be far-reaching and damaging, particularly in individuals with an eating disorder. Nutrients such as fats, carbohydrates, iron, and calcium are essential for a healthy lifestyle and to support bodily functions. Eating disorders can lead to dangerously low levels of these nutrients in the body. When an individual is not consuming enough of these important components, their body will begin to suffer from the lack of nourishment.

Inadequate nutrition has multiple consequences on physical health including significant weight loss or gain, fatigue, brittle nails and hair loss. It may also affect mental health by causing depression or anxiety due to changes in hormones or chemical imbalances created by the lack of nutrients. If left untreated for a long time it can result in serious medical conditions such as osteoporosis due to inadequate calcium intake or iron deficiency anemia caused by a lack of iron.

## Conclusion: Healthy Balance

Eating disorders are serious medical conditions that can have a severe impact on an individual's mental and physical health. Achieving a healthy balance of fats, carbs, iron, and calcium can be difficult for those who suffer from eating disorders. In this section we explored the important role each of these nutrients plays in maintaining an overall balanced diet.

For individuals suffering from eating disorders, it is essential that they seek professional help to ensure their nutritional needs are met. Eating disorder treatment plans often involve both nutrition counselling and psychotherapy to restore balance in the body as well as create healthy coping skills to prevent relapse. Additionally, continuing education about proper nutrition is vital in order to maintain a balanced diet long-term.

Ultimately, the best way to approach overcoming an eating disorder is through comprehensive care that addresses both physical and psychological needs.

# Vegetarian And Restrictive Type Diets

When these diets are followed in a restrictive or extreme way, they can lead to nutrient deficiencies and disordered eating patterns. Some individuals may become fixated on avoiding certain foods or food groups, which can lead to obsession, anxiety, and guilt when these foods are consumed.

Similarly, the ketogenic diet, which is a high-fat, low-carbohydrate diet, can be beneficial for certain medical conditions, but when followed in a restrictive or extreme way, it may lead to disordered eating. Some people may become fixated on achieving and maintaining ketosis, which can lead to obsession, anxiety, and guilt when carbohydrates are consumed.

In both cases, it's important to remember that any diet that eliminates or greatly restricts certain food groups or macronutrients, can lead to disordered eating, malnutrition, and other health issues if not well balanced and followed under the guidance of a healthcare professional.

Individuals who have a history of disordered eating or who are at risk of developing an eating disorder should be cautious when considering restrictive diets and should consult with a healthcare professional before making any changes to their eating habits.

# What Does "I am Full" Mean?

## “I am Full”

"I am full" is a common phrase used to indicate that one has eaten enough food and no longer wants more. However, in the context of an eating disorder, this phrase can take on an entirely different meaning. For individuals struggling with disordered eating, "I am full" may mean something much deeper than simply having eaten enough food.

For someone with an eating disorder such as anorexia nervosa or bulimia nervosa, the phrase "I am full" may represent a sense of being overwhelmed by emotions or thoughts related to body image, food, dieting and/or weight control. This feeling of being “full” can lead to feelings of guilt, fear and distress due to the inability to meet societal standards for beauty or health.

Some people with eating disorders may also use the phrase "I am full" as a way to justify their restrictive behavior or to conceal their disordered eating habits. They may say they are full even when they are not, to avoid eating more, or to avoid raising suspicion from others. It is important to note that in an eating disorder context, "I am full" may not be an accurate representation of a person's true physiological state of hunger, it can be a manifestation of the illness and the distorted thoughts, feelings and behaviors that come along with it. Individuals with eating disorders need professional help to change their relationship with food and to learn how to listen to their body's signals of hunger and fullness.

## Taking Control

The term “I am full” is a statement that can be used in many different contexts, but it has special significance when it comes to eating disorders. For those struggling with an eating disorder, "I am full" can often be a difficult concept to embrace. Many feel that they have lost control of their body and the ability to stop when they are truly satisfied. However, by taking back that control and learning the true meaning behind these three simple words - “I am full” - individuals with eating disorders can begin to take charge of their health.

Understanding what it means to be truly full can have a tremendous impact on one's physical and mental wellbeing. Eating until satisfied is essential for maintaining healthy weight levels, as well as for feeling emotionally balanced after meals.

This was a big one in our family. I'm full became an almost daily catch phrase used whenever our daughter didn't want to eat. It was often accompanied with "my stomach hurts" or a variety of other GI complaints. Thinking back, I had no idea that this was the start of her full fledged eating disorder. I just assumed she was a teenager and had had her fill and I wasn't going to push it. I wish I knew it was code word for "I don't want to eat and I refuse to eat". It continued on for about 4 months until 3 consecutive ER admissions and an astute physician to help us realize what was really being said.

- A Little Fat Helps the Vegetables Go Down
- Anorexia and Dietary Fat
- Anorexia and Dietary Fat: Brain Function, Hunger and Satiety
- Decision Making
- Facts about Fat
- FATS
- Human Perceptions and Preferences for Fat-Rich Foods
- Nutrition and MacroNutrients
- Processed Foods
- **Three Things Nutritionists Need to Know About the Body, Brain, and Eating Disorders**

# Exercise and Eating Disorders

## Exercise & Eating Disorders

Exercise can be a great way to stay healthy and in shape, but for people with eating disorders, it can be particularly dangerous. For those individuals who are struggling with anorexia or bulimia, exercise has been known to exacerbate the symptoms of their disorder. It is also important to note that taking part in regular physical activity does not guarantee protection from developing an eating disorder. Therefore, it is important for people with eating disorders to approach exercise in a thoughtful and mindful manner.

For people affected by eating disorders, exercise may cause them to become overly obsessed with losing weight or burning calories which can lead to further health issues such as dehydration and nutrient deficiencies. Additionally, they may become so fixated on the number of calories they have burned that they don’t take into account how much energy their body needs replenish itself after a workout session.

# Effects of Exercise on Eating Disorders

Exercise can have many beneficial effects on overall physical and mental health, from improved heart health to reducing stress. However, when it comes to eating disorders, the opposite is true. Eating disorders such as anorexia nervosa and bulimia nervosa are complex psychological illnesses that involve disordered eating patterns as well as distorted body image perceptions.
For those struggling with an eating disorder, exercise can be detrimental in many ways. It can lead to further feelings of body dissatisfaction or guilt and perpetuate the cycle of unhealthy behaviors associated with these conditions. Furthermore, exercise may lead to a decrease in energy intake which could result in nutritional deficiencies or other medical complications related to malnutrition. Therefore, it is important for individuals with an eating disorder to practice mindfulness when engaging in physical activity so they can stay safe while taking care of their mental health needs.

## Identifying an Unhealthy Relationship with Exercise

Developing an unhealthy relationship with exercise is common among those who struggle with eating disorders and can quickly spiral out of control without proper intervention. Excessive exercising is one of the most commonly seen behaviors in individuals struggling with eating disorders. Someone may engage in this behavior if they are trying to control their weight, burn off calories consumed, or use it as a distraction from negative feelings and thoughts about food. The amount and intensity of activity that is considered excessive varies from person to person based on health status, age, nutrition habits, etc.

## Conclusion

Not only should individuals carefully consider the intensity of their workouts and the potential impact on their mental health, but they should also consult a doctor beforehand if necessary. It's essential for those struggling with an eating disorder to recognize when too much exercising can become detrimental and seek help if needed. By understanding how their exercise habits may be contributing to unhealthy behaviors or thoughts, individuals can focus on developing healthy coping skills and achieve long-term recovery success.

Many parents I have spoken with have shared that their children exercised so compulsively that it was an almost 24 hour per day job trying to monitor it.  Many people would get up in the middle of the night and do push ups, leg lifts in beds or any other type of movement possible.  This wasn't our experience but it can be very overwhelming for families living with someone who will watch a movie standing, do push ups on the bed, or walking around the house in the middle of the night.

- 3 Tips For Finding Freedom From Compulsive Exercise
- 6 Signs Your Gym Habit Could Be An Eating Disorder In Disguise
- Calories burned in 30 minutes for people of three different weights
- Compulsive Exercise and Eating Disorders in Athletes

- Compulsive exercise to control shape or weight in eating disorders: prevalence, associated features, and treatment outcome
- Compulsive exercise: links, risks and challenges faced
- Excessive Exercise as an Eating Disorder Symptom
- Exercise and the Severely Anorexic Patient
- Exercise Caution: Physical Activity and Eating Disorder Recovery
- Exercise I: As A Way To Restrict? You Bet.
- Exercise II: Insidious Activity
- Returning to Exercise After Eating Disorder Treatment
- The lower-level movement trap

## Athletes and Organized Sports: Recognizing and Addressing Disordered Eating

Recognizing the signs of a potential problem is crucial for early intervention and ensuring the well-being of athletes in organized sports settings.

Familiarize Yourself with Mental Health Policies:

Before addressing concerns related to disordered eating, it is important for coaches to familiarize themselves with the mental health policies of their respective clubs or organizations. Understanding these protocols will guide coaches in effectively handling any mental health issues that may arise among their athletes.

Encourage Families to Seek Professional Help for Child and Adolescent Athletes:

If an athlete is a child or adolescent displaying signs of disordered eating, it is essential to involve their families in seeking professional help. Collaborating with parents, guardians, or caregivers can provide valuable support systems for young athletes as they navigate through treatment.

Overcoming Resistance Due to Stigma or Perceived Performance Benefits:

Athletes may be hesitant to acknowledge or address their disordered eating due to stigma or misguided beliefs about potential benefits for performance. Coaches should be prepared for resistance and approach the subject gently, emphasizing the importance of overall health and well-being.

Encourage Athletes to Undergo Assessment:

When an athlete denies having a problem with disordered eating despite evident signs, it is important to encourage them to seek a professional assessment. This assessment can provide a comprehensive evaluation of their physical and psychological well-being while also guiding further interventions if necessary.

Prioritize Physical Health: Reduce or Suspend Participation if Needed:

If an athlete's physical health is at risk due to disordered eating behaviors, coaches should prioritize their well-being by reducing or suspending participation until they are cleared by a healthcare professional. The athlete's safety must always be the top priority.

Utilize Available Support Services:

Coaches should be aware of the support services available to athletes within school or university settings. These resources often include mental health counselors, dietitians, and other professionals who can provide specialized assistance tailored to the needs of athletes with disordered eating.

Communicate the Purpose of Reducing Participation:

When reducing an athlete's participation in organized sports due to disordered eating concerns, it is crucial to communicate that this decision is made in the best interest of their physical and mental well-being. Reinforce that protecting against harm caused by disordered eating is vital for long-term health and continued athletic performance.

Recognizing and addressing disordered eating among athletes in organized sports requires a proactive approach from coaches. By familiarizing themselves with mental health policies, encouraging assessment and professional help when necessary, and prioritizing an athlete's physical health, coaches play a vital role in protecting the well-being of their athletes. Remember, early intervention can make a significant difference in an athlete's recovery and overall quality of life.

# Health Risks And Complications of An Eating Disorder.

## What Is Starvation Syndrome?

Starvation syndrome is a term used to describe a medical condition that occurs when an individual severely restricts their food intake, resulting in nutritional deficiencies and other physical and mental health issues. This syndrome can occur as a result of an eating disorder or any other form of disordered eating. People suffering from Starvation syndrome may experience extreme fatigue, low energy levels, dizziness, rapid weight loss, constipation, dry skin and hair loss.

It is important to note that Starvation syndrome is not the same as malnutrition; it occurs when an individual has sufficient calories but not enough of the necessary nutrients needed for optimal health. Malnutrition occurs when there are insufficient amounts of both calories and essential nutrients in the diet. Depending on severity and length of time spent in this state of starvation, individuals can suffer from long-term physical damage including organ dysfunction or failure.

# Symptoms of Starvation syndrome

Starvation syndrome is an eating disorder that can have a variety of symptoms. It is characterized by extreme, chronic restriction of caloric intake and can lead to significant physical, emotional and cognitive issues over time. If you or someone you know is experiencing the signs of starvation syndrome, it is important to seek medical advice from a qualified health care provider as soon as possible.

The symptoms of starvation syndrome can be grouped into three categories:

- Metabolic changes: These include a decrease in basal metabolic rate, muscle wasting, and organ dysfunction.
- Behavioral changes: These include a preoccupation with food, changes in activity levels, and increased apathy and lethargy. Emotional symptoms are also associated with Starvation syndrome which may include low moods, persistent sadness or anxiety around food or eating habits.
- Psychological changes: These include depression, anxiety, irritability, and a loss of emotional control.

Some of the common physical symptoms of starvation syndrome include:

- Fatigue
- Weakness
- Dizziness
- Constipation
- Cold intolerance
- Anemia
- Dry skin and hair loss
- Loss of menstrual periods
- Osteoporosis

# Treatment for Starvation syndrome

The primary goal of treatment for Starvation syndrome is to restore a healthy weight through balanced nutrition, exercise, and lifestyle changes. Treatment usually involves individual therapy with a qualified mental health professional who specializes in treating eating disorders as well as medical intervention from a doctor or nutritionist to ensure appropriate nutrient intake. Additional elements may include family support, group therapy sessions with peers suffering from similar disorders, and nutritional education programs that help individuals recognize the signs of starvation syndrome before it becomes dangerous.

## Long-Term Impacts

Starvation syndrome is a serious and potentially life-threatening eating disorder that has long- term physical, psychological, and emotional impacts on individuals. Undiagnosed or untreated starvation syndrome can lead to damage of the body's organs, including the kidneys, liver and heart. It can also cause severe dehydration, electrolyte imbalances, loss of muscle mass and hair loss.

In addition to physical side effects, starvation syndrome often includes changes in behavior as well as mental health issues. People with anorexia may experience depression or anxiety which can lead to social isolation or even suicide attempts. They may suffer from poor concentration, fatigue and insomnia due to nutritional deficiencies caused by their restrictive diets. Long-term effects of starvation syndrome may include cognitive deficits such as memory loss or difficulty thinking clearly.

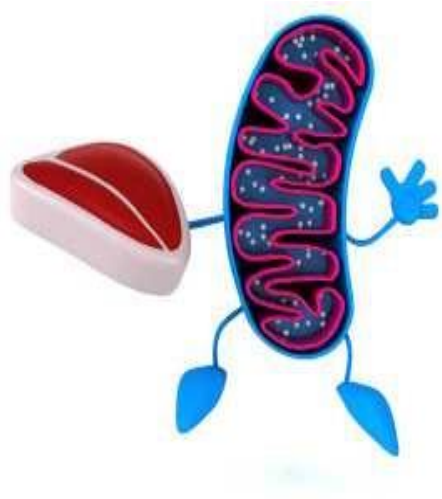
## Dental Damage

Eating disorders such as anorexia and bulimia can cause damage to the teeth and gums due to a lack of proper nutrition and the presence of stomach acids in the mouth. Anorexia can lead to tooth decay and enamel erosion from a lack of calcium and other vitamins and minerals, while bulimia can cause tooth erosion and gum damage from the frequent exposure to stomach acids during episodes of purging. Additionally, eating disorders can affect the salivary glands, leading to dry mouth and a decrease in saliva production, which can also contribute to dental problems. In addition, people with eating disorder may engage in other behaviours that are detrimental to dental health such as excessive brushing or tooth grinding.

## Metabolism

Having an eating disorder can come with several long-term health complications, including issues with metabolism. Metabolism is a term that refers to the body's ability to break down food and turn it into energy. When this process becomes disrupted because of an eating disorder, it can cause confusion in the body and lead to serious complications.

Metabolism-related issues in people who have eating disorders often result from inadequate nutrition and extreme dieting. This lack of nutrients causes the body to enter "starvation mode", where it attempts to preserve energy by slowing down its metabolic processes. As a result, these individuals may experience fatigue, difficulty sleeping, low body temperature, as well as dramatic changes in weight and/or body shape due to slowed burning of calories. In addition, they may also become dehydrated more easily because their bodies are not efficiently processing liquids or converting them into energy
like they usually would when functioning optimally.



## Cardiac Issues

### POTS (Postural Orthostatic Tachycardia Syndrome)

POTS and eating disorders have an interesting relationship.
Postural Orthostatic Tachycardia Syndrome (POTS) is a disorder that causes lightheadedness, fatigue, and rapid heart rate when standing up or with minimal physical activity. Eating disorders such as anorexia nervosa and bulimia can cause POTS in those suffering from them. This is because the lack of food or the restriction of calories can decrease your body's ability to produce enough blood while standing which in turn leads to POTS symptoms like tachycardia, dizziness, nausea etc. In addition, purging habits associated with bulimia can lead to dehydration which also triggers POTS.

## Bradycardia

Bradycardia is an abnormally slow heart rate that can be caused by a variety of medical conditions. Eating disorders are one of the most common causes of bradycardia, especially in those with anorexia nervosa. Bradycardia associated with anorexia may occur due to malnutrition and electrolyte imbalances caused by the eating disorder. It can also be caused by reduced activity levels or physical exhaustion from excessive exercise, both common side effects of anorexia.

Symptoms of bradycardia caused by an eating disorder include dizziness and fatigue, as well as difficulty breathing and potential loss of consciousness when standing up too quickly due to insufficient oxygen supply to the brain.

## Arrythmias

Navigating through life with an arrhythmia and eating disorder can oftentimes be daunting. An arrhythmia is a condition of the heart that causes it to beat abnormally, while an eating disorder is characterized by a pattern of disordered eating habits that adversely affect physical health, mental well-being, and interpersonal relationships. Coping with both simultaneously can be taxing; however, there are ways to ensure that one's overall health is taken care of.

The first step in handling this dual diagnosis is to seek professional medical help and stick closely to any prescribed treatment plans. It is important for individuals to remain compliant in taking their medication for their arrhythmia as prescribed by their doctor.

## Tests/Assessment

Cardiac issues can be a particularly serious consequence of eating disorders. For this reason, tests are essential for detecting any problems that might be happening in the heart. One of the tests used to assess cardiac health is an electrocardiogram (EKG). This test looks at electrical patterns in the heart and can detect rhythms that may indicate arrhythmias or other abnormalities. Another important test for checking cardiac health is an echocardiogram, which uses ultrasound waves to create images of the heart and its valves and chambers. This allows doctors to see if there are any blockages or irregularities that could be resulting from an eating disorder or other underlying cause. To assess for POTS, a doctor will generally do standing blood pressures to check for the acceptable range. I have included the chart in the resources section.

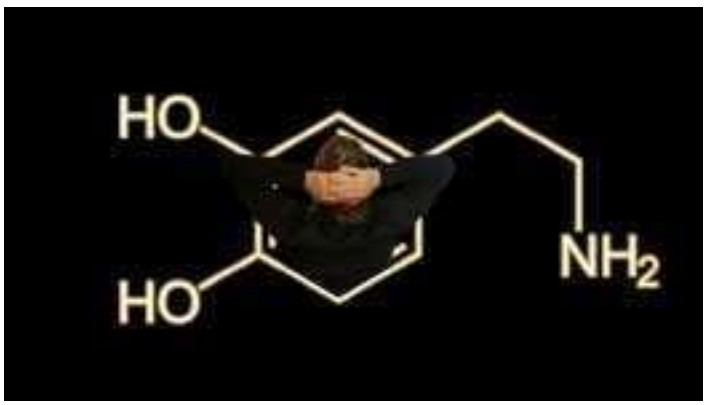
Finally, one more commonly-used test is a stress test which measures how well the body responds when put under physical strain, such as walking on a treadmill or riding a stationary bike.

# Conclusion

Cardiac issues due to eating disorders can have serious and sometimes fatal consequences. Those with anorexia, bulimia or binge eating disorder are at a higher risk of developing cardiac complications because these conditions can cause electrolyte imbalances and irregular heart rhythms that put strain on the heart. Additionally, those with anorexia may be deficient in certain vitamins and minerals that are important for keeping a healthy heart. Eating disorders can also cause high blood pressure, increased levels of cholesterol, and inflammation which contribute to the development of cardiac problems.

Having a supportive environment is essential when it comes to overcoming any form of disordered eating. It's important to get help from registered dietitians or therapists who specialize in treating these type of issues as they will be able to provide the necessary advice needed for recovery.

## Hormonal Changes




Eating disorders can cause a range of hormonal changes due to the abnormal eating patterns that are associated with these disorders. Here are a few examples of hormonal changes that can be caused by eating disorders:

- Low levels of leptin: Leptin is a hormone that regulates appetite and energy expenditure. Low levels of leptin can cause an increase in appetite, leading to binge eating or overeating.
- High levels of ghrelin: Ghrelin is a hormone that regulates hunger and promotes fat storage. High levels of ghrelin can cause an increase in hunger and a decrease in satiety, leading to restrictive eating or overeating.
- Low levels of insulin: Insulin is a hormone that regulates blood sugar levels. Low levels of insulin can cause an increase in blood sugar levels and lead to problems such as diabetes.
- Low levels of thyroid hormones: Thyroid hormones regulate metabolism and energy levels. Low levels of thyroid hormones can cause a decrease in metabolism and lead to weight gain, fatigue, and cold intolerance.
- Low levels of estrogen: Estrogen is a hormone that regulates menstrual function and bone health. Low levels of estrogen can cause menstrual irregularities, infertility, and osteoporosis.
- Low levels of testosterone: Testosterone is a hormone that regulates muscle mass and sex drive. Low levels of testosterone can cause muscle weakness, decreased sex drive, and infertility.
- Low levels of Growth Hormone: Growth hormone regulates growth, metabolism, and muscle mass. Low levels of growth hormone can cause poor growth, muscle weakness and delay in sexual maturation.

It's important to note that these hormonal changes can be severe and can lead to long-term health problems, and that early detection, intervention, and treatment are crucial in preventing and managing these problems.

## Hair Loss / Lanugo

### Lanugo

Lanugo is a soft, downy, and fine hair that is found all over the body. It usually develops on newborns before they grow thicker hair but can also develop in those suffering from an eating disorder. Lanugo appears because of malnutrition and can be one of the first symptoms to arise
for those struggling with anorexia nervosa or bulimia nervosa.

For individuals with anorexia, lanugo typically grows on the face, arms, and back as their bodies attempt to shield against further weight loss due to extreme dieting or lack of food intake. This thin layer of hair acts as insulation since the body doesn't have enough fat stored in order to stay warm which leads individuals to feel cold frequently.

### Hair Loss

Hair loss is a common symptom of eating disorders. Many people who suffer from anorexia or bulimia find that their hair becomes thin and brittle, or falls out completely due to the lack of nutrients in their body. This can be especially difficult for those who view their hair as part of their identity and beauty, making it hard to cope with the physical changes they experience.

In addition to being physically damaging, losing your hair can also have a significant psychological impact. People may feel ashamed that they are no longer able to style it in the same way or hide behind its thick mass when dealing with difficult social situations. It can also lead to feelings of low self-esteem and insecurity which only further complicates things for those living with an eating disorder.

## Bone Density

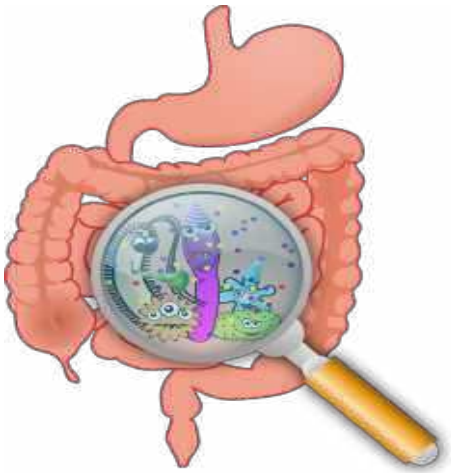
Eating disorders can have a detrimental effect on an individual's bone density. Those with eating disorders, such as anorexia or bulimia, often don't get enough calcium for their bones to remain strong and robust. This is especially true for individuals who are underweight due to their condition – the body needs more energy than it is taking in, which leaves less room for other vital nutrition such as calcium. Over time, this lack of calcium can cause weakened bones and even osteoporosis.

The effects of an eating disorder on bone density go beyond simply not getting enough calcium. Low body weight itself has been linked with decreased bone mineral density and poorer bone quality because the bones don't receive sufficient stress during exercise or daily activity due to the low mass of the body.

## GI Symptoms

### Gastrointestinal Issues

GI Symptoms are a common occurrence among individuals with eating disorders. These symptoms can range from mild to severe and can have long-lasting effects on the gastrointestinal system. Eating disorders, such as anorexia nervosa and bulimia nervosa, bring about a variety of physical changes that can cause damage to the GI tract. Nausea, vomiting, bloating, constipation, and abdominal pain are just some of the many symptoms experienced by those dealing with an eating disorder.



It is important for individuals with eating disorders to understand how their condition affects their digestive system. With proper treatment and lifestyle changes, it is possible to reduce or even eliminate these uncomfortable symptoms. In this section we will discuss how an eating disorder influences the gastrointestinal system through its effects on digestion as well as its potential impact on nutrient absorption.

## Malnutrition Effects

Malnutrition can lead to a variety of negative health outcomes, including poor digestion, nutrient deficiencies, and even organ damage.

The effects of malnutrition on the gastrointestinal system are far reaching. When food is not properly digested due to an eating disorder or other factor causing malnutrition, it can lead to digestive problems such as constipation or diarrhea. Nutrient deficiencies resulting from malnutrition can cause inadequate absorption of vitamins and minerals needed for optimal functioning of the gastrointestinal tract. In extreme cases, organ damage may occur due to malnourishment leading to serious medical conditions.

## Acid Reflux & Ulcers

Acid reflux and ulcers are two common gastrointestinal conditions that can be caused or worsened by an eating disorder. Eating disorders, such as anorexia and bulimia, can cause harm to the digestive system in many different ways. People with these disorders often lack essential nutrients from their diet, leading to nutritional deficiencies. They may also have irregular eating habits which can contribute to acid reflux and ulcers. Long-term use of certain medications used to treat eating disorders can also increase the risk of developing these conditions.

Acid reflux occurs when stomach acids back up into the esophagus due to a weakened lower esophageal sphincter muscle or overproduction of acid in the stomach. This causes heartburn and burning chest pain after meals or at night, as well as difficulty swallowing food properly. It may also cause bleeding which can be life-threatening and require immediate professional help.

## Gastroparesis

Gastroparesis, also known as delayed gastric emptying, is a serious eating disorder symptom that can have a wide range of adverse effects on the gastrointestinal system. It occurs when the muscles of the stomach and small intestine can not properly digest and move food due to decreased motility. This can cause complications in nutrient absorption, leading to malnutrition and dehydration. Symptoms of gastroparesis include nausea, vomiting, abdominal pain, bloating, early fullness and weight loss; all of which can significantly impact an individual's quality of life. Treatment for this condition often involves dietary modification and medical management such as drugs or even surgery in severe cases. However, treatment outcomes are variable depending upon the severity of symptoms present at diagnosis.

## Bowel Dysfunction

Bowel Dysfunction is a very common, yet often overlooked, side effect of having an eating disorder. Those who suffer from an eating disorder may experience issues with bowel

movements, including constipation or diarrhea, which can cause abdominal discomfort and further health complications.

## Overall Impact

While some individuals may not realize the effect an eating disorder can have on their digestive system, research has revealed a variety of ways in which it can be impacted.

The overall impact of an eating disorder on the gastrointestinal system is multi-faceted. Malnutrition, caused by unhealthy food choices and disordered eating habits, can lead to nutrient deficiencies that cause symptoms such as abdominal pain, bloating, constipation, diarrhea or bleeding. Additionally, restrictive dieting practices may also increase inflammation throughout the body which could lead to further digestive problems beyond those already associated with malnutrition.

In our situation, GI symptoms were the first obvious sign that something was very wrong. We went to the hospital 4 times with stomach pain, gastritis, and other GI symptoms not diagnosed. Thankfully an astute doctor picked up that this was a clear indicator of an eating disorder in my daughter's case. I am forever thankful to that doctor at Alberta Children's Hospital - and so is my daughter.

# Why Isn't My Loved One Thinking Clearly? The Brain!

## Neurobiological Effects of Eating Disorders

The effects of eating disorders on the brain and neurobiology are profound. Such conditions can cause severe damage to the body and mind, leading to a range of physical and psychological problems. In this section we will explore how eating disorders affect the brain and neurobiology in detail.

## Neurotransmitter Changes

Eating disorders can have a devastating effect on the brain. Neurotransmitters, which are chemicals that help to regulate our emotions and behavior, are often drastically altered when someone has an eating disorder. Here we look at how eating disorders can disrupt the balance of neurotransmitters in the brain, and how this disruption affects people's mental health as well as their physical health.

Neurotransmitters such as dopamine, serotonin, and norepinephrine can be profoundly impacted by eating disorder behaviors. Research suggests that these neurotransmitter imbalances contribute to a number of issues associated with eating disorders including depression, anxiety, obsessive-compulsive behavior and social isolation. Furthermore, studies have shown that these imbalances may even contribute to disordered thoughts or beliefs about food or body image.

## Hormonal Imbalances

Hormonal imbalances are a common consequence of eating disorders, such as anorexia, bulimia and binge eating. These conditions can have significant effects on the brain's neurobiology, impacting it in various ways. Hormones like cortisol, leptin and insulin are all affected by eating disorders and can result in serious health problems if not addressed properly.

The impact of hormones on the brain due to an eating disorder is largely related to the body's metabolism. When an individual is unable to consume enough food or nutrients, their metabolic rate decreases which in turn can cause a decrease in the production of important hormones like cortisol and leptin. This can lead to feelings of depression and anxiety, decreased energy levels, disturbed sleep patterns and even weight gain.

## Nutrition Deficiencies and Brain Function

Nutrition deficiencies, such as those found in eating disorders, can have a significant impact on brain functioning. Several studies have shown that an imbalance of essential vitamins and minerals due to inadequate dietary intake can interfere with the normal processes of the brain. In particular, it is believed that deficiency in specific nutrients such as Omega 3 fatty acids and B vitamins can lead to cognitive impairments and mood disturbances.

Eating disorders are particularly concerning because they often involve extensive periods of malnutrition which can result in long-term damage to the brain's structure, biochemistry and anatomy. In addition, these conditions may increase one's risk for developing depression, anxiety or other mental health issues. As such, understanding how nutrition deficiencies affect the brain is essential for detecting early signs of eating disorder-related disease states and providing adequate treatments.

# Brain Structure Changes

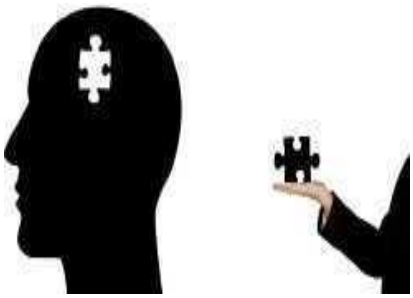
Brain Structure Changes is a topic that has been studied in depth in recent years to understand how eating disorders affect the brain and neurobiology.

In recent years, how eating disorders affect the brain and neurobiology has become a topic of intense study. As researchers continue to explore this subject, they have made some incredible discoveries about the structure of the brain and its connection to mental health. By understanding how eating disorders change the physical structures in our brains, medical professionals can begin to develop more effective treatments for those suffering from these conditions.

One of the most significant areas affected by an eating disorder is the hippocampus, which plays an important role in memory formation, spatial navigation and emotion regulation. Research has revealed that individuals with anorexia or bulimia tend to have smaller hippocampal volume than healthy individuals.

Research into this field has shown that certain parts of the brain are affected differently by different types of eating disorders. For example, those with anorexia nervosa may experience changes in their amygdala or hippocampus – two areas that deal with emotion regulation and memory formation respectively. Meanwhile, people with bulimia may have altered neural pathways related to reward and motivation.

# Cognitive Changes



Cognitive changes are some of the most serious and long-lasting effects that an eating disorder can have on a person's brain and neurobiology. Eating disorders can disrupt normal cognitive functioning by interfering with certain areas of the brain, leading to changes in behavior, thought processes, and perception.

For instance, people with anorexia nervosa often have difficulty concentrating or paying attention due to their lack of food intake causing slow neural processing times. They may also struggle with forming new memories or recalling older ones because of malnutrition-related deficiencies in essential nutrients like vitamins B6 and B12. Additionally, they may

experience increased impulsivity due to dysregulation of frontal lobe functions caused by malnourishment. Binge eating disorder is also associated with cognitive changes that can impair a person's ability to think clearly and make decisions about food choices. Depression is also common among those who have binge eating disorder. Depression is a mood disorder that can influence a person's thoughts, feelings, and behaviors. People with depression may experience feelings of sadness, hopelessness, and worthlessness.

## Impact on Brain And Neurobiology

Eating disorders, like anorexia nervosa, bulimia nervosa and binge eating disorder, can have a serious impact on the brain and neurobiology. Long-term restrictions of food can affect an individual's cognitive functions, influencing their memory formation and recall abilities. In some cases, it has been found that these effects can be permanent.

The effects of eating disorders on the brain and neurobiology should not be underestimated – early intervention is key to reducing long-term consequences for sufferers of these illnesses.

It's important to note that some changes in the neurological system are reversible, with proper treatment, and the earlier the treatment is provided, the greater the chance of recovery. Eating disorders should be treated as a medical condition and not a choice, and individuals who are struggling with an eating disorder should seek professional help from healthcare professionals who are specialized in treating eating disorders.


- Abnormalities found in 'insight' areas of the brain in anorexia
- Alterations of brain structure and functions in anorexia nervosa
- Brain Restoration in ED Recovery
- Brain tissue volume changes following weight gain in adults with anorexia nervosa
- DO EATING DISORDERS IMPACT THE STRUCTURE OF THE BRAIN?
- Dr. Dan Siegel's Hand Model of the Brain - Youtube
- Even after treatment, brains of anorexia nervosa patients not fully recovered
- How Brain Biology Promotes Starvation
- How Eating Disorders Affect the Neurobiology of the Brain
- How Malnourishment Affects the Brain
- Brain Shrinkage in Anorexia Is Reversible
- It's Time to Talk About It: The Brain and Eating Disorder - YOUTUBE
- Lower gray matter volumes of frontal lobes and insula in adolescents with anorexia nervosa
- Neurobiology & Disordered Eating How Our Brains Guide Our Forks - YOUTUBE
- Neurobiology and ED
- Neuroimaging in eating disorders
- Normal brain tissue volumes after long-term recovery in anorexia and bulimia nervosa
- PUZZLING SYMPTOMS: EATING DISORDERS AND THE BRAIN
- Rescuing the Brain: A Critical Part of Recovery
- Why Full Anorexia Recovery Is Crucial for Brain Health
- Three Things Nutritionists Need to Know About the Body, Brain, and Eating Disorders

# Laxative Use

Laxative abuse is a common behavior in individuals with eating disorders, particularly bulimia nervosa. Laxatives are medications or substances used to stimulate bowel movements and relieve constipation.

Individuals with bulimia nervosa may misuse laxatives to rid their bodies of food they have consumed and control their weight. They may take excessive amounts of laxatives, take them more frequently than prescribed, or misuse different types of laxatives in a dangerous manner.

The use of laxatives can lead to several serious health complications, including:

- Dehydration, electrolyte imbalances, and mineral deficiencies
- Damage to the intestinal lining and colon
- Chronic diarrhea, abdominal pain, and bloating
- Dependence on laxatives and difficulty having regular bowel movements without them
- Laxative-induced hyperalgesia, a condition in which the colon becomes more sensitive to pain, due to the damage caused by the laxatives.

- Bulimia and hair loss
- Electrolyte Abnormalities and Eating Disorders
- **Electrolytes and Bulimia: Why Is This a Big Deal?**
- Hair Loss and Anorexia: A Sign of Greater Danger
- Hunger and ED
- Lanugo and Eating Disorders
- Orthostatic Hypotension
- Purging Complications
- **The Effects Of Under-Eating**
- What are the Risks? - CCI
- Vomitting and your health - CCI

# Common Therapy Methods

This section will only briefly describe some of the most used types of treatment and therapy for an eating disorder. There will be links below describing each in more detail and to help you understand your choices when it comes to finding providers for your loved one.

## ACT (Acceptance and Commitment Therapy)

ACT (Acceptance and Commitment Therapy) is a form of psychotherapy that is used to help individuals with eating disorders and other mental health conditions. ACT is a mindfulness-based therapy that encourages individuals to accept their thoughts, feelings, and experiences without judgment, and to focus on acting towards values-based goals, regardless of their current emotional state.

ACT therapy for eating disorders typically involves the following steps:

- Acceptance: The therapist helps the individual accept and acknowledge their thoughts and feelings related to food, body image, and weight, without judging or trying to change them.
- Defusion: The therapist helps the individual learn to separate themselves from their thoughts and feelings, so they don't become overwhelmed by them.
- Mindfulness: The therapist helps the individual learn to focus on the present moment and to pay attention to their thoughts and feelings without becoming absorbed by them.
- Values: The therapist helps the individual identify their values and goals, and to take action towards them, even if it means facing difficult thoughts and feelings.
- Committed action: The therapist helps the individual develop a plan of action to achieve their goals, and to stick to it, even if they encounter setbacks or obstacles.

ACT therapy can be beneficial for individuals with eating disorders because it helps them focus on what is important to them, rather than on the symptoms of their disorder. It also helps them develop a sense of control over their thoughts and feelings, rather than feeling controlled by them. ACT therapy is often used in conjunction with other forms of therapy, such as cognitive- behavioral therapy, and with the guidance of a healthcare professional.

# CBT – Cognitive behavioural therapy

CBT (Cognitive Behavioral Therapy) is a type of psychotherapy that is widely used to treat a variety of mental health disorders, including eating disorders. The main focus of CBT is to help individuals identify and change negative thoughts, beliefs, and attitudes that contribute to their eating disorder symptoms.

CBT for eating disorders typically includes the following components:

- Identification of negative thoughts and beliefs: CBT helps individuals to identify negative thoughts and beliefs about food, weight, and body image that contribute to their eating disorder symptoms.
- Reality testing: CBT helps individuals to evaluate the evidence for and against their negative thoughts and beliefs, and to develop more balanced and realistic ways of thinking.
- Cognitive restructuring: CBT helps individuals to replace negative thoughts and beliefs with more positive and realistic ones.
- Problem-solving: CBT helps individuals to identify specific problems related to their eating disorder, and to develop strategies to solve those problems.
- Behavioral techniques: CBT includes different behavioral techniques such as graded exposure and response prevention, which helps individuals to confront and overcome their fears and anxieties related to food and eating gradually and systematically.

CBT is considered an effective treatment for a variety of eating disorders such as Anorexia Nervosa, Bulimia Nervosa, and Binge Eating Disorder. It can be done in individual or group settings and can be used in conjunction with other treatment methods such as nutritional counseling, therapy, and medication management. CBT focuses on the individual's thought process and behavior and helps them to develop healthy coping mechanisms and change negative thought patterns that contribute to the eating disorder symptoms.

# DBT – Dialectal behaviour therapy

DBT (Dialectical Behavior Therapy) is a type of psychotherapy that was originally developed to treat individuals with borderline personality disorder (BPD). However, it has been found to be effective in treating a wide range of mental health disorders, including eating disorders.

The main focus of DBT is to help individuals improve their ability to regulate their emotions, thoughts, and behaviors, and to develop better coping skills to manage stress and difficult situations.

DBT for eating disorders typically includes the following components:

- Mindfulness: DBT teaches individuals to be present in the moment and to observe their thoughts and feelings without judgment.
- Emotion regulation: DBT helps individuals to identify and label their emotions, and to develop strategies to manage and cope with intense emotions.

- Interpersonal effectiveness: DBT helps individuals to develop effective communication skills and to set healthy boundaries in their relationships.
- Distress tolerance: DBT teaches individuals to accept and tolerate difficult situations and emotions, rather than trying to avoid or control them.
- Behavioral chain analysis: DBT helps individuals to identify the chain of events that leads to problematic behaviors, such as binge eating or purging, and to develop strategies to interrupt or change the chain of events.

DBT for eating disorders is considered an effective treatment for individuals who meet the criteria of an eating disorder such as Bulimia Nervosa and Binge Eating Disorder, and it is best when used in conjunction with other treatment methods such as nutritional counseling, therapy, and medication management. DBT is a skills-based therapy, it helps individuals to develop a toolset of coping mechanisms and skills that can be used to manage their symptoms and improve their overall quality of life.

## EFFT – Emotionally Focused Family Therapy

EFFT (Emotionally Focused Family Therapy) is a type of psychotherapy that is designed to help families of individuals with eating disorders to improve their relationships with each other and to support their loved one in their recovery.

The main focus of EFFT is to help families to identify and understand the emotions that underlie their interactions with each other, and to develop more effective ways of communicating and expressing those emotions.

EFFT for eating disorders typically includes the following components:

- Identification of emotional patterns: EFFT helps families to identify the emotional patterns that exist within the family, and to understand how these patterns contribute to the eating disorder.
- Emotionally focused interventions: EFFT helps families to develop new ways of communicating and expressing emotions that are more supportive and effective.
- Problem-solving: EFFT helps families to identify and solve specific problems related to the eating disorder, and to develop strategies to support the individual in their recovery.
- Behavioral techniques: EFFT includes different behavioral techniques such as role-playing, which helps families to practice new ways of communicating and expressing emotions.

EFFT is considered an effective treatment for individuals with eating disorders, especially when used in conjunction with other treatment methods such as individual therapy, nutritional counseling, and medication management. It helps family members to understand the role of their emotions and actions in the disorder and how to support their loved one effectively.

# EMDR – Eye Movement Desensitization and Reprocessing

EMDR (Eye Movement Desensitization and Reprocessing) is a type of psychotherapy that is designed to help individuals with eating disorders to process and overcome traumatic memories and experiences that may be contributing to their disorder.

EMDR therapy is based on the idea that traumatic memories are stored in the brain differently than other memories, and that by processing these memories through a specific technique, the individual can reduce the negative impact of these memories on their current life.

EMDR for eating disorders typically includes the following components:

- Identification of traumatic memories: The therapist helps the individual to identify traumatic memories or experiences that may be contributing to their eating disorder symptoms.
- Desensitization: The individual is asked to focus on the traumatic memory while engaging in a specific type of bilateral stimulation, such as eye movements, taps, or sounds. This helps to reduce the emotional intensity of the memory.
- Reprocessing: The individual is asked to focus on new, positive thoughts and beliefs about themselves and the traumatic memory.

EMDR is considered an effective treatment for individuals with eating disorders, especially when used in conjunction with other treatment methods such as cognitive behavioral therapy (CBT), individual therapy, nutritional counseling, and medication management.

It can help individuals to process traumatic memories and experiences related to their disorder and to develop new, healthier beliefs about themselves and their relationship with food. It is used for individuals who have experienced trauma or abuse in their life, as it can help to alleviate symptoms related to eating disorders such as anxiety, depression, and negative self- image.

We did not use this therapy for an eating disorder but I have had experience with it for other things. It appears to be very effective for working through traumas, that often are the precursor to an eating disorder. Therapists who use this therapy must be highly trained and trusted as it can be a very emotional experience.

## Exposure Therapy

Exposure therapy is a type of cognitive-behavioral therapy (CBT) that is used to help individuals with eating disorders overcome their fears and anxieties related to food and eating. The goal of exposure therapy is to help individuals gradually and systematically confront and overcome their fears, in order to reduce their symptoms and improve their overall quality of life.

Exposure therapy for eating disorders typically includes the following components:

- Identification of feared foods: Individuals work with a therapist to identify the foods that they are most afraid of eating.
- Gradual exposure: The therapist will help the individual to confront and overcome their fears by exposing them to the feared foods in a controlled and safe environment gradually and systematically. This may involve starting with small amounts of the food and gradually increasing the amount over time.
- Cognitive restructuring: The therapist will help the individual to change their negative thoughts and beliefs about food and eating, and to develop more positive and realistic ways of thinking.
- Relapse prevention: The therapist will help the individual to develop strategies to prevent relapse and maintain their progress over time.

Exposure therapy is considered to be an effective treatment for eating disorders, specifically in Anorexia Nervosa and Bulimia Nervosa. However, it should be done under the supervision of a trained professional and in conjunction with other treatment approaches such as nutritional counseling, therapy, and medication management. The process can be difficult and challenging, but with the guidance and support of a therapist, it can help individuals overcome their fears and anxieties related to food and eating and improve their overall quality of life.

## FBT – Family-Based Treatment

FBT (Family-Based Treatment) is a type of psychotherapy that is designed to help individuals with eating disorders, specifically Anorexia Nervosa, to overcome their disorder by involving family members in the treatment process. FBT is also known as the "Maudsley Method" as it was developed by Dr. Christopher Fairburn and Dr. Janet Treasure in the UK.

FBT for eating disorders typically includes the following components:

- Emphasis on weight restoration: The primary goal of FBT is to help the individual to achieve a healthy weight as quickly as possible. This is done by educating family members about the importance of weight restoration and providing them with the tools they need to support the individual in this process.
- Empowerment of parents: FBT empowers parents to take an active role in their child's treatment by teaching them how to provide structure and support for the individual's eating and exercise habits.
- Re-establishment of normal family functioning: FBT helps to re-establish normal family

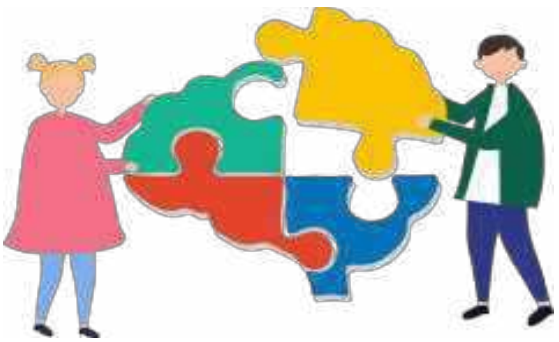
dynamics by addressing any problematic family patterns that may have contributed to the development of the eating disorder.
- Emphasis on psychological aspects of eating disorders: FBT incorporates psychological therapies to address the underlying emotional issues that led to the development of the eating disorder, such as low self-esteem, negative body image and distorted thinking patterns.

FBT is considered an effective treatment for individuals with Anorexia Nervosa, especially for children and adolescents. It has been shown to have high success rates in weight restoration and recovery. It is considered a family-centered approach that promotes family cohesion, improved communication, and emotional support. Studies have shown that families who participate in FBT have a greater understanding of the disorder and are better equipped to support the patient during and after treatment.

- FBT - CCI

## IFS – Internal Family Systems

IFS (Internal Family Systems) is a type of psychotherapy that is designed to help individuals with eating disorders to understand and manage their inner thoughts and emotions. It is a holistic model that focuses on the different parts of the self, including emotions, thoughts, and behaviors, and how they are interconnected.



IFS for eating disorders typically includes the following components:
- Identification of internal parts: IFS helps individuals to identify and understand the different parts of themselves that contribute to their eating disorder symptoms. These parts can include things like the "inner critic," the "perfectionist," and the "anxious self."
- Empathy and compassion: IFS encourages individuals to be kind and compassionate towards all parts of themselves, including those that contribute to their eating disorder symptoms.
- Self-leadership: IFS helps individuals to develop the ability to lead and manage their internal parts, rather than being controlled by them.
- Self-care: IFS encourages individuals to take care of themselves and to develop healthy coping mechanisms to manage their thoughts and emotions.

IFS is considered an effective treatment for individuals with eating disorders, especially when used in conjunction with other treatment methods such as cognitive behavioral therapy (CBT), individual therapy, nutritional counseling, and medication management. It helps individuals to understand the different parts of themselves that contribute to their eating disorder and how to manage them effectively.

It also emphasizes on self-compassion and self-acceptance which can be beneficial in treating eating disorders, where the individual struggles with self-worth and body image issues.

This is the therapy system we used with our daughter and it seemed to be very effective. She responded well to it and it made sense to her in her journey, at that time. Please remember to chose what works best for you and your loved one.

## Eating Disorder Treatment Type Links

Here are some links to the different types of treatment for an eating disorder. It is important that you find one that works for you and the medical team supporting your loved one.

- A Brain-Based Approach to Eating Disorder Treatment
- A Grown Up Approach to Treating Anorexia
- Adolescent-focused-therapy- AFT
- Adolescent-Focused-Therapy-for-Anorexia-Nervosa/James-Lock/
- CBT FOR ARFID
- DBT vs. CBT in Treatment for Eating Disorders
- Dialectical Behavior Therapy for Eating Disorders
- ERP Treatment
- Everything You Need to Know About Family-Based Treatment (FBT) | Eating Disorder Therapy LA
- Explaining What Keeps Eating Disorders Going (CBT Clinical Demonstration) - YouTube
- Exposure in the treatment of Eating Disorders
- Exposure Therapy
- Family based treatment of children and adolescents with anorexia nervosa: Guidelines for the community physician
- FBT Treatment
- FBT Treatment Team Members
- How Are Eating Disorders Treated?
- HOW TO FACE YOUR EATING DISORDER FEARS: EXPOSURE THERAPY
- Intro to EFFT for Eating Disorders - Emotion Coaching
- Introducing the Thought-Feeling Connection (CBT Clinical Demonstration) - YouTube
- Kelty Guide for Parents: Thrive to Survive
- Navigating the Search for a True Maudsley Method Treatment
- NEDIC | Eating Disorders & Treatment
- Restoring-nutritional-health-in-anorexia-nervosa-recovery-
- Treatment Manual for Anorexia Nervosa, Second Edition: A Family-Based Approach by James Lock, Daniel le Grange, W. Stewart Agras and Christopher Dare

# Treatment Types

## What Are The General Guidelines for Treatment?

In Canada, the guidelines for the treatment of eating disorders vary depending on the province or territory. However, there are some general principles that are typically followed in the treatment of eating disorders.

Multidisciplinary approach: Eating disorder treatment typically involves a team of healthcare professionals, including a physician, a registered dietitian, a therapist or counselor, and a mental health professional.

There are several factors are involved in choosing treatment for an eating disorder, including: The type and severity of the disorder: Different types of eating disorders, such as anorexia nervosa, bulimia nervosa, and binge eating disorder, require different types of treatment. The severity of the disorder also plays a role in determining the appropriate treatment.

- The patient's overall health: The patient's physical and mental health, as well as any co-occurring medical or psychiatric conditions, will be taken into consideration when choosing treatment.
- The patient's preferences: The patient's preferences and goals for treatment will be considered.
- The availability of treatment options: The availability of different types of treatment, such as inpatient, outpatient, or community-based care, and the location of treatment centers will be considered when choosing the best treatment plan.
- The patient's support system: The presence and involvement of a supportive family and social network can greatly enhance the chances of a successful recovery.
- The patient's motivation and readiness for change: A patient's willingness to engage in treatment and work on changing their behavior is an important consideration.
- The cost of treatment: Financial considerations can influence the availability of certain treatments.

Treatment for eating disorders typically includes a combination of therapy, medication, and nutrition education. The specific treatment plan will be tailored to the individual's needs and may include a multidisciplinary approach, involving a team of healthcare professionals such as a therapist, dietitian, and physician.

There are several types of eating disorder treatment programs available in Canada, including:

- Inpatient treatment programs: These programs provide round-the-clock care in a residential facility or hospital and include individual therapy, group therapy, and medical monitoring.

- Outpatient treatment programs: These programs allow individuals to receive treatment

while continuing to live at home and maintain their daily responsibilities. They may include individual therapy, group therapy, and medical monitoring.
- Day treatment programs: These programs provide intensive treatment during the day and allow individuals to return home at night. They may include individual therapy, group therapy, and medical monitoring.
- Cognitive Behavioral Therapy (CBT) programs: These programs focus on changing negative thought patterns and behaviors related to eating disorders.
- Family-based therapy (FBT) programs: These programs involve the entire family in the treatment process and are often used to treat children and adolescents with eating disorders.
- Medically assisted treatment programs: These programs provide medication-assisted treatment, such as antidepressants, to manage the symptoms of eating disorders.
- Nutritional counseling programs: These programs provide guidance and support to help individuals maintain a healthy relationship with food and promote healthy eating habits.

Evidence-based treatment: Treatment should be based on the latest research and evidence and should be tailored to the individual's specific needs and circumstances.

Medical stabilization: Prioritizing the stabilizing of the patient's physical and medical condition is essential. This includes ensuring that the patient is at a stable weight and that any medical complications related to the eating disorder are addressed.

Psychological treatment: There are several evidence-based psychological treatments for eating disorders, such as cognitive-behavioral therapy (CBT) and family-based therapy (FBT). These therapies focus on addressing the underlying psychological and emotional issues that contribute to the eating disorder.

Nutritional rehabilitation: Registered dietitians play a crucial role in the treatment of eating disorders, by providing education and support on proper nutrition and healthy eating habits.

Supportive care: Ongoing support, including follow-up appointments, and support groups, is important to maintain recovery and prevent relapse.

It's important to note that the availability and level of eating disorder treatment may vary in each region of Canada. Some regions have specialized eating disorder clinics and programs, while others may have limited resources. It's important to consult with a healthcare professional for guidance on the best treatment options for you.

- Pediatric Hospital Admissions Pathway (2).pdf

Like many others, we did not have a choice for what treatment options we were offered. The public eating disorder program had a waitlist of 12-13 months at the time and private counselling specializing in eating disorders was extremely expensive (but definitely worth it). It wasn't until we had a hospital admission that real treatment began. Covid-19 was around and day programs and other support groups were not available. There are private clinics available but it usually requires private insurance coverage that we didn't have.

- 10 Common Mistakes in Eating Disorder Treatment
- Eating Disorder Residential Treatment and What to Expect

## Setting Goal Weights

Setting a goal weight for someone with an eating disorder should be done in collaboration with a multidisciplinary team, including a physician, dietitian, and mental health professional.
Here are some factors that should be considered when setting a goal weight:
The patient's current weight: The patient's current weight should be measured and recorded to establish a baseline.

- Body mass index (BMI): The patient's BMI should be calculated based on their height and weight. A healthy BMI is generally considered to be between 18.5 and 24.9.
- Nutritional status: The patient's nutritional status should be assessed by a dietitian to determine if they are malnourished or at risk for malnutrition.
- Medical history: The patient's medical history should be reviewed to determine if there are any underlying medical conditions that may affect their ability to gain or lose weight.
- Psychological factors: The patient's mental health status should be evaluated by a mental health professional to determine if they have an eating disorder or other psychological conditions that may affect their ability to gain or lose weight.
- Treatment plan: The patient's treatment plan should be considered when setting a goal weight. For example, the patient may need to gain weight to receive other treatments, such as therapy or medication.

Once all these factors have been considered, a goal weight can be set that is realistic and achievable for the patient. It's important to note that the goal weight should not be the only focus of treatment, the focus should be on the patient's overall health and well-being.
It's also important to remember that for patients with eating disorders, weight gain or weight loss should not be the primary focus of treatment, rather, the focus should be on

addressing the underlying psychological and emotional issues that led to the development of the disorder, as well as addressing any physical health concerns that have developed because of the

Whenever she goes to a medical appointment and they want to weigh her, she asks for a blind weight and they need to respect your wishes. She turns around on the scales and asks not to be told of her weight. Many medical professionals will cover up her weight on her records so she can't see it which is a huge trigger for her. She started crying once when a nurse did this so she didn't have to see it. It made her day and made her feel heard. I am including a document with cards asking not to be weighed.

- Are We Setting Recovery Weights Too Low?
- BMI and ED
- BMI Monster
- Calculation of Expected Body Weight in Adolescents With Eating Disorders - Study
- Determining Ideal Body Weight
- Everything you know about Obesity is Wrong
- Full Recovery and Brain Health
- IN PRAISE OF THE BUFFER (THOUGHTS ON WEIGHT RANGES)
- My therapist was more scared of my weight gain than I was
- Overshooting in ED Recovery
- Past Weight Loss an Overlooked Factor in Disordered Eating
- Recovering From Anorexia: How and Why Not to Stop Halfway
- Scales for ED
- Set Point Weight
- Target weights being set too low - Youtube
- The Eating Disorder Recovery Podcast
- The Misuse of BMI in Diagnosis of Pediatric Eating Disorders
- The slippery slope: prediction of successful weight maintenance in anorexia nervosa - Study
- The Truth About Anxiety During Weight Restoration
- **Trading Health for a Healthy Weight: The Uncharted Side of Healthy Weights Initiatives**
- Weight Restoration
- What's Weight Got to Do With It?
- WILL I GAIN WEIGHT FOREVER?

# Road To Recovery

## Cycles of Readiness

### Eating Cycles of Readiness Overview

Eating disorders, such as anorexia and bulimia, have been around for centuries. They are complex mental illnesses that often require specialized treatment. For those suffering from an eating disorder, there is a distinct cycle of readiness they must progress through in order to initiate recovery. This will provide an overview of the various cycles of readiness associated with eating disorders and how individuals can start to break this cycle in order to make lasting change. People can move forward and backward through this cycle depending on where they are in their recovery, it is not always linear.

### Cycle 1: Precontemplation

Precontemplation is the first stage of understanding an eating disorder. In this stage, a person isn't aware that they have a problem or that change is necessary. They may not realize the potential consequences of their behavior and are usually unaware of any available resources to help them. It's important to understand the signs and symptoms of an eating disorder in order to identify when someone is stuck in Cycle 1: Precontemplation.

Common signs include extreme preoccupation with body shape, size, weight and food; dramatic changes in dieting habits; significant changes in energy levels and moods; frequent trips to the bathroom after meals; avoiding social situations involving food; speaking about calories excessively; using excessive exercise as punishment; increased isolation from friends and family members; and rapid weight loss or gain without explanation.

## Cycle 2: Contemplation

The second phase, known as Contemplation, is the stage when individuals start to recognize their behavior as problematic. Those with an eating disorder will begin to contemplate how to change their behavior and may even attempt to make changes on their own. In this stage, individuals may experience a range of emotions such as guilt or shame for not being able to control their behaviors. They may also notice that they are not experiencing the same level of gratification they used to get from engaging in disordered behaviors since they recognize it is counter-productive and damaging. In some cases, individuals reach out for help during this cycle, however this is not always the case. Individuals often remain in contemplation for quite some time before selecting a plan for recovery and actioning it.

## Cycle 3: Preparation

Preparation is an important step in the process of recovery from an eating disorder. This cycle involves a person reflecting on their journey and preparing for the next steps ahead. Preparing for recovery involves gathering helpful resources, such as mental health professionals, nutritionists, psychiatrists, or dieticians. It also includes educating oneself about eating disorders, learning new coping skills and self-care strategies to help manage stress and other triggers that can lead to disordered eating behaviors.

During Preparation, one should create a plan of action based off of what they have learned about themselves during the previous cycles; this includes understanding one's own personal triggers and developing healthy responses to those triggers. Setting realistic goals helps to keep focus on the journey towards recovery; it’s important to be gentle with yourself while setting these goals - big changes take time!

## Cycle 4: Action

The fourth cycle of readiness in an eating disorder is action. This cycle involves a person struggling with an eating disorder taking the necessary steps to address their disorder. These steps can include seeking professional help, such as therapy and medication, or making changes in their diet or lifestyle. It’s important for someone struggling with an eating disorder to recognize that this fourth cycle of readiness is not only the most difficult part of tackling their problem but also potentially the most rewarding.

It can take time and patience to reach this point in the recovery process, but it is critical for someone to get through all four cycles before they can effectively manage and overcome their eating disorder. The action cycle requires a commitment from both the individual and those close to them in order for it to be successful. During this stage, individuals must stay focused on their goals and maintain motivation by seeing progress over time.

## Cycle 5: Maintenance

Maintenance is the fifth and final cycle in the stages of readiness for an individual with an eating disorder. This cycle is marked by a significant shift from the other four cycles, as individuals move from actively seeking treatment to maintaining recovery. During this phase, those affected strive to practice healthy behaviors on a daily basis and solidify their progress towards full recovery.

At this stage, individuals are more likely to practice self-care habits such as physical activity, balanced nutrition, positive coping skills and mindfulness techniques. They may also work with healthcare professionals or support groups on an ongoing basis to help them stay accountable throughout their journey of recovery and prevent relapse into old patterns of disordered behavior.

Ultimately, maintenance is about learning how to maintain balance in all aspects of life while still managing any residual symptoms that may remain after treatment has ended.

## Cycle 6: Relapse

Relapse is a crucial point in the recovery from an eating disorder. This cycle can be extremely difficult for both the person with the eating disorder and their support system. The individual may become frustrated with their progress in recovery, and this can lead to a feeling of hopelessness or helplessness which can cause them to relapse. It is important that during this cycle everyone involved understands that relapse is not indicative of failure, but rather represents a natural part of the recovery process.

The individual may begin to feel like they have made no progress in recovery or that all their hard work has been for nothing; these feelings should not be discounted as invalid, but instead it should be acknowledged as part of the journey towards full remission.

## Conclusion: Understanding Cycles

The process of understanding the cycles of readiness in an eating disorder can be complex, but it is a necessary step toward successful treatment. The purpose of this was to provide insight into the various cycles and phases that occur with an eating disorder. By understanding these cycles and recognizing their signs, a person with an eating disorder or their loved ones can identify if they are ready for treatment or need additional help.

In conclusion, it is important to note that everyone is different when it comes to coping with their eating disorder. With the right support system and resources, individuals can strive towards recovery and break out of the cycle related to their illness. Seeking professional help from a licensed therapist can enable someone to gain insight into how they think about food and body image while providing effective strategies for managing difficult thoughts and emotions.

I did not learn about this cycle until after my daughter was living in wellness and I took a parent peer counsellor training course. I think if I had understood this before, it would have helped me not panic during the ups and downs of her recovery. Knowing this cycle would have also made me aware that she may not have been ready or see the need for change when I did. It may have saved a lot of arguments if I had known and been able to understand where she was in the moment.

## Extreme Hunger in Recovery

Extreme hunger in recovery is an issue affecting individuals who have struggled with eating disorders. It can be a difficult symptom to manage, and it has the potential to lead cause a relapse into disordered behavior.

Extreme hunger is an extreme sensation of physical craving for food that may be accompanied by intense cravings for certain types of foods. The person often feels as though they cannot stop themselves from eating and will eat more than their body needs. This can often lead to feelings of guilt, shame, and distress after the episode has passed. Extreme hunger episodes are sometimes triggered by

environmental factors, such as stress or seeing food on TV commercials or in magazines, but they can also happen spontaneously without any external triggers at all.

## Definition of Extreme Hunger

What is extreme hunger in eating disorder recovery? It is a critical question to ask for those who are navigating the journey of recovery. Extreme hunger, or hyperphagia, is a condition that occurs when an individual experiences an excessive amount of hunger and cravings that lead to episodes of binge-eating. It can be incredibly difficult to manage while in recovery from an eating disorder due to the physical, psychological and social implications it carries with it.

Although extreme hunger may have been present before starting treatment for an eating disorder, individuals can experience this symptom during their path towards recovery as well. Those recovering from restrictive behaviors such as anorexia nervosa may find that they experience intense episodes of hunger due to the physiological changes occurring in their bodies as they adjust back into healthier habits and lifestyles.

## Causes of Extreme Hunger

One main cause of extreme hunger during eating disorder recovery is a disruption in hormones. Hormones are responsible for regulating appetite and cravings, so when they become imbalanced due to an eating disorder or malnutrition, people may find themselves feeling ravenous all the time. Another possible cause of extreme hunger can be psychological; some people who are recovering from an eating disorder may use food as a coping mechanism for their emotions.

## Effects on Eating Disorder Recovery

Eating disorder recovery is a difficult yet rewarding process that requires dedication, patience and understanding. Those struggling with an eating disorder have the courage to confront their illness, but they may not be aware of all the effects that come along with it. One such effect is extreme hunger during the recovery process.

Extreme hunger can be both beneficial and detrimental during eating disorder recovery, as it can signal that one's body is responding to treatment in a positive way while also providing temptation for unhealthy behaviors. It can manifest in some people as extreme cravings or binges, which are commonly seen in those recovering from anorexia nervosa or bulimia nervosa. Understanding the cause and effects of extreme hunger can help patients make informed decisions about how best to cope with their condition and move toward healthier habits.

## Coping Skills for Extreme Hunger

Extreme hunger is a common symptom of eating disorder recovery. It can be emotionally and physically draining, as the body is trying to make up for lost nutrients. Learning effective

coping skills to deal with extreme hunger is an important step in maintaining long-term recovery from an eating disorder.

Coping with extreme hunger requires patience and practice. For example, it's important to have a plan for meals or snacks throughout the day so that you don't skip any necessary nutrition. Mindful eating techniques such as savoring each bite and focusing on how your food makes you feel can also help manage excessive cravings. Additionally, engaging in activities like yoga or journaling can be helpful distractions during moments of intense hunger.

## Conclusion: Managing Hunger in Recovery

In conclusion, managing hunger in recovery is a difficult process. However, with proper support and education, individuals can learn to effectively navigate hunger cues and make healthy food choices. It will take time and dedicated effort to learn how to manage extreme hunger during eating disorder recovery, but it can be done.

In order to foster successful recovery from an eating disorder, it's important for individuals to work with their treatment team or dietician on developing an individualized plan that works for them. This plan should include nutrition education, meal planning, and strategies for managing extreme hunger triggers. Additionally, practicing mindful eating and self-care may help reduce stress levels which may also contribute to extreme hunger sensations.

When my daughter was in the phase I remember it being very scary as everyone told me that I needed to watch her as she may try to purge.  This never happened thankfully, but it was certainly something I felt was a disservice to me as it made me overly cautious and made my daughter doubt her recovery.


- Anorexia Recovery Eating: There is never too much food
- Binges Are Not Binges
- Experiencing Extreme Hunger
- Extreme Hunger
- Extreme Hunger - What It Is and Why It Happens - Youtube
- Extreme Hunger and Bingeing in Recovery
- Extreme Hunger in Anorexia Recovery
- Extreme Hunger in Eating Disorder Recovery | Kati Morton - Youtube
- Extreme Hunger Part 2: The Experience and Science
- WHY CAN'T I STOP EATING!?": THE TRUTH ABOUT EXTREME HUNGER

# Recovery Is Not Linear

## Introduction: Eating Disorder Recovery

Eating disorders affect millions of people around the world, and recovery is a long and difficult journey. Recovery from an eating disorder isn't linear, as there are often highs and lows in the process. In order to understand how recovery works, it's important to understand the nonlinear nature of it. Here we look at how recovery from an eating disorder is not straightforward or predictable, but rather a complex path full of setbacks and triumphs.

The complexities of recovery can make it difficult for those affected by an eating disorder to stay motivated or even recognize progress they have made. It's also important to note that every person will have their own individualized experience when recovering from an eating disorder. No two people's journeys look exactly alike; everyone recovers differently based on their unique needs and circumstances.

## What is Non Linear Recovery?

Non linear recovery is an important concept to understand when it comes to recovering from an eating disorder. It refers to the idea that progress isn't always linear and can take many forms, including jumping forward as well as backward in terms of progress. Non linear recovery recognizes that recovery does not always follow a straight line, but rather ebbs and flows with different obstacles and successes along the way.

Recovery from an eating disorder is often a long process. It can be filled with feelings of fear, worry, or uncertainty at times - all of which are normal parts of the journey toward health and healing. Non Linear Recovery acknowledges these emotions and experiences as part of the healing process, instead of seeing them as setbacks or failures in progress towards wellness.

## Challenges in Non Linear Recovery

Recovering from an eating disorder is a difficult process for many, and often times it can be a non-linear journey of ups and downs. Eating disorders affect not only physical health, but also mental health and wellbeing, making the recovery process complex. Unfortunately, it can be challenging to navigate such a tricky path since there is no single formula that fits all.

The core of the challenge lies in the fact that each person's story and experience with an eating disorder is unique, meaning there is no one-size-fits-all approach to recovery. Even after treatment has been received or support groups have been attended, managing recovery day- to-day can be difficult when old habits or triggers creep back in to play.

## Coping Strategies for Setbacks

Recovery from an eating disorder is a long and difficult journey, full of obstacles and setbacks. It can be disheartening when progress stalls or even reverses, but there are several coping strategies that can help. It's essential to stay positive and remember that these setbacks are common experiences in the recovery process.

The first step is to recognize what has led to the setback. Is it related to increased stress? A recent change in diet? Emotional triggers such as sadness or anxiety? Once these things have been identified, it will be easier to develop specific coping mechanisms for each individual circumstance.
It's important to have a support system during this time, whether it's family members, friends or professional counselors. Talking through difficulties can help identify solutions and create healthier perspectives on what might feel like an impossible situation at the moment.

## Finding Support During Hiccups

Going through recovery from an eating disorder can be a roller coaster of emotions. As you progress on your road to full recovery, there are bound to be hiccups along the way. During these times, it's important to have support and understanding from family and friends so that you don't become discouraged. Finding this support during hiccups is key for successfully navigating the non linear path of eating disorder recovery.
It is normal for individuals recovering from an eating disorder to experience lapses in their recovery journey; it does not mean that they are backsliding or that their progress has been wasted. Rather than focusing on this setback as a failure, it is important to focus on the actions taken afterwards in order to get back up and continue moving forward with your treatment goals.

## Celebrating Progress

Recovery from an eating disorder is a difficult journey, but it is possible with the right support and direction. Celebrating progress along the way is an essential part of this recovery process.

As challenging as it may be to make consistent changes that pay off in the long run, small successes should be commemorated for their worth and meaning.

Living with an eating disorder can take its toll on mental health, which makes celebrating progress even more important. Progress can come in many forms, such as developing healthier coping mechanisms or making lifestyle changes to promote better nutrition habits. It's through these successes that individuals can gain strength and motivation to keep working towards their goals of full recovery.

By celebrating progress during recovery from an eating disorder, individuals are able to recognize their hard work and understand how far they have come in achieving lasting change.

## Conclusion: Taking it One Day at a Time

Recovery from an eating disorder is not a straight line; it is often full of ups and downs. In conclusion, it explains why it is important to take recovery one day at a time.

Although there may be periods of regression, being able to recognize the progress made can help individuals stay motivated in their journey towards health and wellbeing.

The first step towards recovery should be understanding that healing from an eating disorder requires patience and commitment. It is essential for individuals to remember that success cannot be measured within a certain amount of time—some days will feel like two steps forward and one back. Progress must also come with self-care practices such as getting enough sleep, engaging in physical activity, surrounding oneself with supportive relationships, and seeking professional help when necessary.

This was something I had to learn from very early in recovery. I think I expected that we would come out of the hospital and she was "cured". Far from it, but at least we were on the pathway finally. There were good days and bad days along the way, but we learned to take them in stride. I remember one day finding spilt milk behind her bed and thinking that her recovery journey was over. As I was told, this was just a blip in the recovery radar and we eventually had fewer and fewer of those blips until I finally felt that she was living in wellness.

# Building Motivation for Eating Disorder Recovery

## Building Motivation for Eating Disorder Recovery (For Loved Ones)

Supporting a loved one in their journey towards eating disorder recovery can be challenging but immensely rewarding. As a caregiver or family member, you have the power to positively influence and inspire your loved one's motivation. In this chapter, we will explore effective strategies to build and nurture motivation in your loved one for their eating disorder recovery. We will emphasize the importance of providing hope for a better future and understanding that past unsuccessful attempts do not determine future success.

### Cultivating Hope for a Better Future

Helping your loved one foster hope can be a significant source of motivation throughout their recovery. Here are some ways to provide them with hope:

Celebrate Progress: Acknowledge even the smallest milestones achieved during their recovery journey. Recognize and celebrate every step forward, no matter how small it may seem. This serves as a reminder that progress is possible, fueling their motivation to continue moving forward.

Share Success Stories: Introduce them to real-life success stories of individuals who have overcome eating disorders. Hearing about others' experiences can instill hope and help them envision a positive future free from the grasp of their disorder.

Encourage Professional Support: Assist your loved one in seeking professional help from therapists, nutritionists, or support groups specific to eating disorders. Connecting with experts who understand these challenges can instill confidence and provide concrete guidance towards recovery.

### Emphasizing Resilience and Growth Mindset

It's vital to remind your loved one that past unsuccessful attempts do not define their potential for recovery. Here's how you can encourage resilience:

Normalize **and Reframe** Setbacks: Emphasize that setbacks are part of the recovery process and should not discourage them from continuing their journey towards healing. Assist them in reframing setbacks as opportunities for growth instead of defining moments of failure.

Encourage Self-Compassion: Remind your loved one to be kind and compassionate towards themselves during difficult moments. Encouraging self-forgiveness helps them maintain motivation even in the face of setbacks.

Promote a Growth Mindset: Help your loved one adopt a growth mindset by emphasizing the belief that their abilities and potential for recovery can improve with effort and time. Encourage them to view challenges as opportunities for growth rather than insurmountable obstacles.

### Building a Supportive Environment

Creating a supportive environment is crucial for maintaining motivation throughout eating disorder recovery. Here are some ways you can help:

Active Listening: Be present and attentive when your loved one wants to talk about their feelings, struggles, or victories. Providing them with a safe space to express themselves fosters trust and helps them feel heard and understood.

Set Realistic Expectations: Ensure that expectations regarding their progress are realistic and achievable. Unrealistic expectations may lead to discouragement and diminished motivation. Work together with professionals to establish appropriate goals based on their individual needs.

Engage in Healthy Activities Together: Encourage participation in activities that promote physical and emotional well-being, such as engaging in hobbies or spending quality time together. These activities can provide additional sources of motivation outside of the recovery journey itself.

Motivating a loved one towards eating disorder recovery requires patience, understanding, and persistence. By providing hope for a better future and encouraging resilience despite past unsuccessful attempts, you can play a pivotal role in supporting their journey toward long-term healing. Remember that professional support is vital throughout this process, so collaborate closely with therapists and experts while building motivation within your loved one for their recovery.

## Refeeding And What to Look For

### What is Refeeding Syndrome?

Refeeding Syndrome is a serious condition that can occur in individuals recovering from an eating disorder. It is caused by the sudden introduction of food after a period of starvation

or malnutrition. Refeeding Syndrome can have dangerous consequences, and it is important for those who are in recovery to be aware of its symptoms and potential risks.

The term “refeeding” refers to the process of reintroducing food into the body after a period of caloric restriction or malnutrition. During this process, there may be an imbalance of electrolytes due to changes in fluids and hormones that cause refeeding syndrome. Symptoms include confusion, weakness, heart arrhythmias, low blood pressure, swelling due to fluid retention and low phosphate levels causing impaired respiratory function. If left untreated these symptoms can lead to cardiac arrest or death.

## Clinical Meaning

Refeeding syndrome is a serious medical condition that can occur in individuals recovering from an eating disorder such as anorexia nervosa or bulimia. It is a biochemical imbalance caused by the sudden reintroduction of nutrition to severely malnourished patients. This condition can lead to potentially life-threatening consequences if not properly managed and monitored.

The definition of refeeding syndrome has been established by clinical guidelines over the past few decades. In its simplest form, it is defined as an electrolyte disturbance resulting from the reintroduction of calories or nutrients into a patient who has been in a prolonged state of undernutrition or starvation. Patients are at risk for developing refeeding syndrome if they have had severe weight loss (more than 15% of body weight) or have become severely malnourished due to lack of food intake.

Refeeding syndrome is a dangerous, yet preventable medical complication that can occur when nutrition is reintroduced to someone with an eating disorder. Refeeding syndrome occurs when insufficient energy and electrolyte levels are restored too quickly in the body, leading to serious health complications such as cardiac arrest or death. To understand refeeding syndrome, one must first be aware of its causes and risk factors. When an individual severely restricts food intake, their body’s metabolism slows down significantly; this can lead to dangerously low levels of several important nutrients including phosphorus and magnesium. Additionally, people recovering from bulimia nervosa may be at higher risk for refeeding syndrome due to repeated cycles of binge-purge behavior causing rapid shifts in fluid and electrolyte balance in the body.

## Symptoms of Refeeding Syndrome

Eating disorders can have serious physical and psychological consequences. One of the potential risks of eating disorder recovery is refeeding syndrome, a complex metabolic condition that can occur when an individual begins to reintegrate food into their diet. Understanding the signs and symptoms of refeeding syndrome is essential for successful treatment and recovery.

The most common symptoms associated with refeeding syndrome include electrolyte imbalances, cardiac abnormalities, neurological deficits, fluid shifts, gastrointestinal issues and vitamin deficiencies. Electrolytes are minerals that help regulate water and acid-base balance in the body. When someone is experiencing electrolyte imbalances, they may experience muscle weakness, fatigue and irregular heartbeat.

## Treatment for Refeeding Syndrome

Treatment for Refeeding Syndrome should always be under the supervision of a medical professional, and must be tailored to the individual's specific needs. When refeeding an individual with Refeeding Syndrome, it is important to start slowly with small amounts of easily digestible carbohydrates and proteins. This helps restore electrolyte balance while still allowing the body to adjust without shock or strain. As recovery progresses, more complex foods may be added gradually until a healthy diet is achieved. Additionally, vitamin and mineral supplementation may also be necessary depending on the severity of malnutrition present in the individual's case.

## Conclusion

Refeeding syndrome can be a potentially life-threatening complication for individuals recovering from an eating disorder. It is important for an individual to understand the signs and risk factors associated with the condition, as well as how to prevent it through proper nutrition and medical supervision. Though refeeding syndrome can be serious and even deadly, if caught early on, it can be managed and treated successfully in most cases.

Ultimately, with the knowledge of what refeeding syndrome entails, those who are in recovery from an eating disorder have a better chance at avoiding this dangerous complication so that they may continue their progress towards full recovery. With informed minds and optimal treatment plans in place, individuals may recognize the symptoms of refeeding syndrome before it becomes a major issue.

I am thankful that this process took place in the hospital for my daughter. I remember that she had more vitamins and supplements to take that I could have kept track of. The gravity of the refeeding process didn't occur to me until the ED specialist said what a vulnerable and critical time it was. I think had we been home, I would have tried to get her to eat as much as possible as fast as possible without understanding the ramifications of that. If you are in this position, please speak to your doctor if your loved one isn't in the hospital during this process

- Refeeding syndrome: what it is, and how to prevent and treat it - PMC

## How Does Someone Overcome an Eating Disorder?

Overcoming an eating disorder is a complex and challenging process that requires professional help and support. Here are a few steps that can help you on your recovery journey:

- Seek professional help
- Look for a treatment team that includes a physician, a therapist, and a registered dietitian. They will be able to provide a comprehensive assessment and develop a treatment plan that is tailored to your needs.
- Learn about your disorder: Understanding the underlying causes and
- triggers of your eating disorder can help you to better manage your symptoms and make positive changes.
- Address underlying issues: Eating disorders often stem from underlying emotional and psychological issues, such as low self-esteem, trauma, or perfectionism. It is important to address these underlying issues to fully recover.
- Practice self-care: Eating disorders can take a toll on your physical and emotional well-being. It is important to take care of yourself by getting enough sleep, eating regular meals, and engaging in activities that bring you joy and relaxation.
- Build a support network: Surround yourself with people who understand and support your recovery journey. This can include friends, family, support groups, or a therapist.
- Be patient: Recovery from an eating disorder can be a long and difficult process. It's important to be patient with yourself and to remember that setbacks are a normal part of the recovery process.
- Keep seeking support: Recovery is a lifelong process, and it's important to continue seeking support even after you've achieved significant progress.

This has extreme personal meaning to me because friends and family assumed that an eating disorder was just that, about eating. I think if I heard the term "just tell her to eat" one more time I would have had some unkind words to say. Sadly, many people think that eating disorders are just about food and weight and they believe that eating is the way through it. If more people understood the complexity of an eating disorder and the mortality rate of it, I suspect they may re-evaluate their "suggestions".

## Does an Eating Disorder Go Away?

Does an Eating Disorder Go Away? Unfortunately, many people mistakenly believe that eating disorders will simply "go away" without proper treatment. However, this is not the case. In reality, eating disorders require professional medical attention and comprehensive treatment to be effectively managed.

While it is not impossible for individuals with eating disorders to make progress on their own or with the help of family and friends, this is not effective in the long run as eating disorders often become more severe if left untreated. An individual suffering from anorexia may struggle to maintain a healthy weight while someone with binge-eating disorder may continue to turn to food as a coping mechanism despite their attempts at self-control.Professional intervention is essential when trying to manage an eating disorder.

## Challenges to Recovery

Eating disorders are serious mental health conditions that can have lasting effects for those who suffer with them. Developing an eating disorder often has underlying psychological or emotional issues at its root, and working through these challenges is a key part of recovery and healing. Unfortunately, the path to recovery isn't necessarily linear; it's often filled with many twists, turns, and setbacks.

The most obvious challenge to successful eating disorder recovery is relapse. Eating disorders are incredibly difficult to overcome in the first place, so it isn't uncommon for individuals to fall back into unhealthy behaviors after they've made progress on their road to recovery.
Additionally, some people may become complacent and not take proactive steps towards managing their mental health. This can also lead them right back down the same path of disordered eating habits which they were trying hard to break away from in the first place.

## Long-Term Outlook

The long-term outlook for individuals with an eating disorder is often unclear and can vary greatly depending on several factors. To understand the potential outcome of an eating disorder, it's important to first identify the type and severity of the eating disorder.

The duration of symptoms also affects a person's long-term outlook. Generally speaking, eating disorders that have been present for a longer period of time can be more challenging to manage and may require more intensive treatment in order to achieve recovery goals. The presence of underlying psychiatric issues such as depression or anxiety can also complicate treatment and lengthen recovery time.

Treatment is essential for helping someone regain control over their relationship with food, body image, and mental health. However, it is critical to remember that full recovery is absolutely possible.

## Lasting Effects

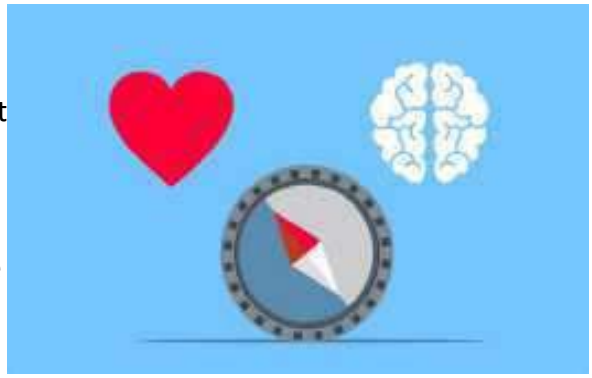
In conclusion, "Does an Eating Disorder Just Go Away?" an eating disorder can have lasting effects, even after treatment. While there are many success stories from those who have overcome their illness, it does not mean that life returns to normal for these individuals. Those with a history of an eating disorder must remain vigilant in recognizing any signs or symptoms of relapse and seek professional help when necessary.

The physical complications caused by an eating disorder can be long-lasting and permanent, depending on the severity and length of time since its onset. Even if all outward signs appear to be in remission, some internal changes may still exist. These include changes to metabolism or hormones which can affect fertility, bone health and other bodily functions important for overall well-being.

At the beginning, I just assumed that if I ignored it long enough, the "phase" would pass. Sadly, the behaviours got worse and my anxiety rose. I tried to help my daughter on my own, but then realized that I was way out of my league. Even with my medical training, I was in way over my head and was in no position to give my daughter the care and treatment she needed. After all, I really needed someone to coach me to tell me what I was dealing with. I had no idea that I was dealing with a monster that I couldn't battle on my own. Thankfully there are specialists that are there to help and we just needed to reach out and be the squeaky wheel.

# Intuitive Eating in Recovery

## Introduction: Intuitive Eating



Intuitive eating is a revolutionary approach to treating disordered eating and is based on the concept that individuals can learn to trust their own body's signals and responses in order to achieve a healthy relationship with food. It has been gaining traction as an effective method of recovery from restrictive or binge-eating disorders, as well as aiding in addressing issues like emotional eating or chronic dieting. Intuitive eating combines aspects of mindfulness and self- care with evidence-based treatment models, helping individuals understand how their emotions, thoughts, and physical sensations are connected to their food choices.

The goal here is to provide an overview of intuitive eating; what it means, how it works, its benefits for those recovering from disordered eating patterns, and tips for getting started.

## What is Intuitive Eating?

Intuitive eating has been gaining traction in recent years, particularly as it relates to eating disorder recovery. Intuitive eating is an approach that encourages people to stop dieting and learn how to trust their own bodies. This way of eating works to unlearn the diet mentality and instead focus on a positive relationship with food and body acceptance.

At its core, intuitive eating is about establishing a healthier relationship with food, one that does not involve restriction or guilt. It helps individuals recognize their internal hunger signals and break free from the diets and rules that have governed their lives for so long. People who practice intuitive eating are encouraged to honor physical hunger cues, listen to their body's needs, and make peace with foods they may have formerly labeled "forbidden" or "off-limits".

## Benefits of Intuitive Eating

Intuitive eating is a method of dealing with food cravings and managing your eating habits that aids in the recovery process for those battling an eating disorder. Developed by two dietitians, intuitive eating helps individuals to recognize their physical and emotional needs when it comes to food. It encourages people to be mindful of their body's natural cues and distinguish between physical hunger versus emotional hunger, while allowing them to enjoy the pleasurable aspects of food.

The benefits of intuitive eating are far reaching. It teaches individuals how to nourish their bodies without involving strict rules or diets that can lead to further disordered behavior. By understanding their own internal triggers, they can learn how to develop healthy coping skills for any emotions or situations that may arise regarding food.

## Challenges of Intuitive Eating

Intuitive eating is a non-diet lifestyle approach to food and nutrition, aimed at cultivating a healthy relationship with food. Eating intuitively can be an effective tool in the recovery process for individuals struggling with disordered eating or an eating disorder. However, this process of restoring one's connection with their body can come with its own set of challenges.

The first challenge that many people experience when trying to adopt an intuitive style of eating is relearning how to listen to their body's hunger signals. This involves understanding what it feels like to be properly nourished, as well as learning how different foods affect our bodies and moods. Additionally, maintaining balance within the diet can be hard for those transitioning from restrictive diets or binge/purge cycles.

## Mindful Approach

Mindful eating is a powerful tool in the recovery process from an eating disorder. It encourages individuals to become aware of their physical, mental and emotional responses to food, while also embracing non-dieting principles that focus on internal cues. As discussed here, intuitive eating can help those in recovery make peace with food and develop a healthy relationship with their body.

The mindful approach focuses on developing an awareness of physical hunger and fullness signals, which allows individuals to identify when they are truly hungry or not. It also helps them learn to distinguish between emotional needs and true physiological needs for nourishment. Additionally, it teaches people how to respect the natural diversity of bodies by promoting self-acceptance instead of striving for unrealistic ideals.

We moved into intuitive eating fairly quickly after she was medically stable and on the advice of medical professionals. She had always been a night eater and never really did eat breakfast (like me). Our goal was to get her pre-eating disorder patterns back and this worked really well for us. I know many parents and loved ones stay with the 3 and 3 for months or years and it's important to remember that everyone's journey is different.

- Contemplating Recovery
- Parent and Caregiver's Guide to Eating Disorders Treatment and Recovery (Full Video) - YouTube
- Talking About Recovery
- Coping with Triggers in Eating Disorder Recovery - The Emily Program

# Ed Myths

## Eating Disorder Myths

Some of the most common myths about an eating disorder are the following:

- Eating disorders are a choice or a phase.
- Eating disorders only affect young, white, affluent females.
- People with eating disorders are just attention-seeking.
- Eating disorders can be easily cured with willpower.
- Only thin people can have an eating disorder.
- Eating disorders are caused by parents or family.
- Only women can have eating disorders.
- People with eating disorders are lazy and lack self-discipline.
- People with eating disorders are all underweight.
- Recovery from an eating disorder is a straightforward process.

## Core Beliefs

Core beliefs are fundamental, deeply held beliefs about oneself, others, and the world that shape an individual's perceptions and reactions to life events. In relation to eating disorders, core beliefs often center around body image, self-worth, and control. Some examples of core beliefs that may be present in individuals with eating disorders can include:

- "I am not good enough unless I am thin/perfect."
- "My worth as a person is determined by my weight and shape."
- "I must always be in control of my food intake and weight."
- "I am a failure if I can't control my eating."
- "I am not lovable unless I am thin."
- "I am not worthy of love, acceptance, and happiness unless I am thin."
- "If I am thin, everything will be better in my life."
- "I am a bad person if I eat certain foods."
- "I am weak if I don't have the ability to control my eating."

These core beliefs can drive the development and maintenance of eating disorder symptoms and can make it difficult for individuals to recover.

- Why are Values Important? 8 Reasons | Life Persona
- Self Esteem Workbook/Sheets - CCI

# Can I Have Anorexia if I'm Not Underweight?

## Anorexia Beyond BMI

Anorexia is often associated with being underweight in relation to one's body mass index (BMI), but this does not tell the full story of anorexia. In fact, many individuals may suffer from anorexic behaviors despite having a BMI within a healthy range. This section delves into how anorexia can manifest beyond just BMI, including some of its signs and symptoms as well as ways to seek help for this difficult disorder.

The core symptom of anorexia is when individuals severely restrict their caloric intake in order to maintain or lose weight drastically, even if they are already considered underweight. Despite this, there are other signs that someone might have anorexic tendencies regardless of their weight.

Anorexia is a serious mental disorder that often leads to extreme weight loss, but what about those who are not underweight? Can someone still have anorexic tendencies without being underweight? The answer is yes. Even if someone's weight looks normal on the outside, there can be other signs of anorexia. It's important to recognize these signs in order to get early treatment and support.

The first sign of anorexia may be changes in eating patterns, such as skipping meals or avoiding certain foods altogether. Other signs can include making excuses for not eating, having intense fear of gaining weight, and exercising excessively despite fatigue or injury. It's also common for people with anorexia to obsessively weigh themselves and constantly monitor their body size or shape.

Do I have to look thin to have an eating disorder? Many people looking for information on anorexia and other eating disorders may be surprised to learn that a person can be affected by these disorders even if they are not underweight. It is important to understand that while being underweight can be a symptom of anorexia, it is not the only sign or indicator of this condition.

There are many different types of eating disorders, including bulimia, binge-eating disorder (BED), and orthorexia, none of which require a person to appear “thin” in order for them to be diagnosed. In addition to physical symptoms like dramatic weight loss or gain, psychological symptoms such as changes in mood or behavior can also signify the presence of an eating disorder.

## How Can Someone Hide an Eating Disorder if They Aren't Underweight?

Eating disorders come in many forms, and not everyone who has an eating disorder is underweight. It can be difficult for someone with an eating disorder to hide it from friends and family if they are not underweight. Yes, and hiding it isn't as easy as one might think.

An individual may choose to hide their eating disorder by lying about the amount of food they eat, or pretending to eat more than they actually do. Additionally, they may try to cover up any signs of malnutrition by wearing loose clothing or avoiding situations that require them to get undressed in front of others. These behaviors can make it difficult for loved ones to spot the signs of an eating disorder, as the person may appear healthy on the outside while still struggling with disordered thoughts and behaviors on the inside.

# Men And Eating Disorders

Eating disorders are commonly associated with women, but men struggle with eating disorders as well. It is estimated that one in three people diagnosed with anorexia and bulimia are male. Despite this, there has been a lack of awareness and research surrounding men and eating disorders.

Men face unique pressures when it comes to body image and have additional stigma related to seeking help for an eating disorder due to the societal expectation of masculinity. These issues make it difficult for many men to recognize symptoms or even admit they may be struggling with an eating disorder. Because of this, it is important to raise awareness about how men can be affected by these conditions in order to ensure that those struggling get the treatment they need.

## Symptoms in Men vs Women

Men and eating disorders are a serious issue but unfortunately, the signs and symptoms in men are often overlooked. This is because most cases of eating disorders are associated with women, however studies have shown that men suffer from them too. While the symptoms may manifest differently than those found in women, they can still be just as severe.

Common signs of eating disorders in men include feelings of guilt or shame related to food intake, extreme dieting or exercise habits to control weight gain, binging on excessive amounts of food, and an obsession with body image and shape. Men may also experience anxiety around meal times or withdraw socially due to fear of being judged for their appearance. In addition to physical symptoms such as fatigue and changes in appetite, some psychological symptoms can occur including depression, low self-esteem and difficulty concentrating.

## Why Don't Men Get Diagnosed

Men and eating disorders have long been under-recognized in the medical field, leading to a lack of understanding and treatment options for those suffering. While it is well known that women are more likely to suffer from eating disorders, men also suffer from these mental health illnesses at an alarming rate. Unfortunately, many men fail to get a proper diagnosis due to both social stigma and the lack of awareness surrounding male eating disorders.

The truth is that men can be just as vulnerable to developing an eating disorder as women. However, they often face greater difficulties in terms of seeking help due to feelings of shame or embarrassment related to their condition and gender identity. Many men feel uncomfortable talking about their struggles with body image or weight loss because they fear being judged or not taken seriously by medical professionals.

- Eating Disorders in Men and Boys
- should-you-be-concerned-about-your-son
- Understanding Male Eating Disorders
- Eating Disorders in Men CCI

# Eating Disorder Statistics

## Canadian Statistics

It has been estimated that approximately 1 million Canadians, or 3.4% of the population, have an eating disorder (ED) (Mental Health Commission of Canada, 2019). The prevalence of EDs is highest among females aged 15-24 years (Statistics Canada, 2016). The incidence rate per 100,000 people in this age group was 52.2 for females and 7.2 for males between 2009 and 2013 (Statistics Canada, 2016).

The prevalence of eating disorders in Canada is a growing concern among academics, with estimates suggesting that approximately 1 million Canadians are affected by an Eating Disorder (ED) at some point in their lifetime (Micali et al., 2018; Canadian Mental Health Association, 2017). Furthermore, the most recent available data indicates that EDs disproportionately affect young women between the ages of 15-24, although men and children are also impacted (Eating Disorders Association of Canada, 2019).

It's important to note that these numbers are estimates and may not fully reflect the true prevalence of eating disorders in Canada. Eating disorders are often underdiagnosed and underreported, and many individuals may not seek help or be diagnosed with an eating disorder.

In my estimation, this number is likely very under- reported. Many people do not realize that they have an eating disorder and chalk it up to "healthy eating" or "overeater". I never realized I had an eating disorder until I started this journey with this daughter. From talking with people, they do not want to report their experiences for fear of being labelled an "anorexic" or any other number of names.

## Canadians and Dieting

Canadians are increasingly aware of their weight and health and have responded by trying to lose excess pounds via dieting. A recent survey of Canadians has revealed that almost half, 47%, are either on a diet or want to lose weight. The trend is particularly popular among millennials, with 62% of them choosing to go on a diet or wanting to lose weight.

According to the 2016 Canadian Community Health Survey (CCHS), approximately 13.5% of Canadians aged 12 and over reported that they were on a diet for weight loss or control. The survey also found that women were twice as likely as men to be on a diet, with 18.8% of females aged 12 and over reporting that they were trying to lose or control their weight through dieting compared to 9.6% of males in the same age group. Additionally, the survey found age-related differences in Canadians' diets; 22.3% of those aged 25-34 reported being on a diet compared to 15.6% of those between 35 and 44 years old, and only 8.9% among 45-54 year olds.

In Canada, the dieting statistics are concerning. According to a 2019 survey conducted by Stats Canada, 43% of Canadians aged 18-79 reported that they were currently trying to lose weight or maintain their current weight through dieting or changing their eating habits. Of this percentage, 62% were women and 38% were men. This means that almost half of all Canadians are attempting to modify their diets in some way.

Of those people surveyed who responded positively to the question of whether they had tried to lose weight in the past year, 65% reported that they had done so unsuccessfully. This indicates that while many Canadian adults have good intentions when it comes to maintaining a healthy diet, they often find it difficult to achieve lasting results.

The availability of healthy food options can also impact how likely an individual is to follow a healthy diet. In 2015, StatsCan found that only 40% of Canadians have easy access to stores selling fresh produce rather than processed food.

The trend of dieting appears to be driven largely by the desire for aesthetic change or improved physical health rather than serious medical concerns. For example, research suggests that 67% of Canadian adults who reported trying to lose weight did so because they wanted to look better rather than because a doctor had recommended it. This indicates that many people are using dieting as a tool for self-improvement rather than out of necessity due to underlying medical conditions.

- Canadian Eating Disorder Strategies
- CCHS

## Impact on Canadians' Health & Wellbeing

An unhealthy relationship with food can lead to feelings of guilt, shame, and depression - all of which can have a significant impact on our lives. Additionally, crash diets and extreme forms of exercise done without proper guidance from healthcare professionals may lead to long-term medical issues such as nutrient deficiencies or other serious conditions.

This is a hard one for me because I seemed to have lived my life on a "diet". My daughter saw that and how I spoke negatively about myself. When she was diagnosed, I felt like I was responsible for it. Later, I was diagnosed with binge-eating disorder and it all made sense. However, I spent a good many months re-living my decisions and choices about my own body image and how many times I skipped meals to try to lose weight. Hindsight is 20/20 and while I may have modelled different behaviours, I do not accept responsibility for her eating disorder.

# How Has Covid-19 Affected the Prevalence of Eating Disorders?

## Prevalence of Eating Disorders Before Covid-19

Before the COVID-19 pandemic, eating disorders were already prevalent in Canada. The National Eating Disorder Information Centre (NEDIC) reported that 10-20% of Canadians will experience an eating disorder at some point in their life. Furthermore, NEDIC also noted that eating disorders are the most fatal mental illness amongst youth in Canada.

The Canadian Mental Health Association (CMHA) estimates that up to 1 million Canadians suffer from an eating disorder such as anorexia nervosa, bulimia nervosa, binge-eating disorder or other related conditions like body image dissatisfaction and disordered eating. Although men and women can both be affected by any type of eating disorder, it is more common for women to develop them than men.

## Impact of the Lockdown Restrictions

The novel coronavirus pandemic has changed the way we live and work, with stay-at-home mandates and other restrictions affecting the daily lives of Canadians. As the country continues to grapple with the ongoing health crisis, a new study examines how these measures have impacted mental health in Canada, particularly eating disorders.

The lockdown restrictions brought about by COVID-19 have had an especially profound effect on individuals struggling with pre-existing or developing eating disorders. For people already dealing with body image issues or disordered eating habits, having to remain confined at home can lead to isolation and increased stress levels that can further exacerbate their conditions.

Moreover, limited access to medical resources during this time has made it difficult for many people who need help managing their condition during this time of crisis.

## How Have Eating Disorders Increased in Canada since Covid?

Since the start of the Covid-19 pandemic in Canada, there has been an increase in individuals struggling with eating disorders. With many people stuck at home and unable to access appropriate care, this mental health issue has become more prevalent than ever. Research indicates that stress, anxiety and financial pressures associated with the pandemic are likely contributing factors to its spread.

The overall rate of eating disorders in the Canadian population is difficult to determine as not all cases go reported or diagnosed. However, a survey conducted by Eating Disorder Hope found that nearly one third of Canadians have experienced disordered eating behaviors since Covid-19 began. This number is significantly higher than before the

pandemic hit, pointing to a concerning rise in prevalence throughout Canada's population.

I have been involved in many studies on how Covid-19 has affected the rates of eating disorders. My daughter's eating disorder reared its head in June 2020, about 6 months after the pandemic began. We attribute it to being on IG and many other channels that encourage or are pro-ana sites. She was also unable to have the social contacts that she loves and began to spend more and more time isolated in her room.

- 'Worst it has ever been': Increase in eating disorder cases among teens overwhelms Ontario's pediatric hospitals
- A Perfect Storm: Rise in Eating Disorders Among Teens During COVID-19
- Acute Care Visits for Eating Disorders Among Children and Adolescents After the Onset of the COVID-19 Pandemic
- Canadian practice guidelines for the treatment of children and adolescents with eating disorders
- Death by Wait List: Eating Disorder Treatment in Canada
- EATING DISORDERS AMONG GIRLS AND WOMEN IN CANADA Report of the Standing Committee on the Status of Women
- Eating disorders rose dramatically among young Canadians during COVID's first wave
- Food for Thought: A Dissonance Between Healthcare Utilization Costs and Research Funding for Eating Disorders in Canada
- Hospitalizations for eating disorders among young women jumped by more than 50% during the COVID-19 pandemic.
- New Anorexia Cases More Than Doubled During First COVID-19 Wave in Canada-doubled-during-first-covid-19-wave-in-canada/
- Riccardo Dalle Grave M.D. Eating Disorders: The Facts How COVID-19 Affected Anorexia Nervosa Treatment
- Rise in eating disorder hospitalizations among young women linked to social media and pandemic isolation, experts say
- The COVID-19 Pandemic and Canadian Pediatric Tertiary Care Hospitalizations for Anorexia Nervosa
- Wait times for eating disorder treatment in Canada grow during the pandemic Social Sharing
- The financial and social impacts of the COVID-19 pandemic on youth with eating disorders

## What Country Has the Highest Incidence of Eating Disorders?

The incidence of eating disorders varies across different countries and regions, and the data on the subject is not always consistent. However, studies have found that developed countries, particularly those in Western cultures, have higher rates of eating disorders compared to developing countries.

According to the World Health Organization (WHO), the highest rates of eating disorders occur in North America, Europe, and Australia, with the United States having one of the highest rates of eating disorders in the world.

According to the National Eating Disorders Association (NEDA) in the United States, the lifetime prevalence of anorexia nervosa is about 0.3% of the population, and the lifetime prevalence of bulimia nervosa is about 1.5%.

There are also studies that indicate that countries like the United Kingdom, Australia, and New Zealand have high rates of eating disorders.

It's important to note that while some countries have higher rates of eating disorders, it is a global issue, and it is not limited to developed countries. Eating disorders can happen to anyone regardless of cultural background, race, ethnicity, gender, and socioeconomic status. Therefore, it is crucial to be aware of the signs of eating disorders and to provide help and support for those in need.

## What Group has the Highest Rate of Eating Disorders in Canada?

Anorexia nervosa is the most common eating disorder in Canada.

In Canada, eating disorders affect people of all ages, genders, and socioeconomic backgrounds. However, certain demographic groups may be at a higher risk of developing an eating disorder.

According to data from the Canadian Mental Health Association (CMHA), eating disorders are most common among young women, with up to 25% of females aged 15-24 experiencing an eating disorder at some point in their lives. However, males also can develop eating disorders, the lifetime prevalence for males is about 1-3% which is lower than females.

Another high-risk group is individuals with a history of dieting, body dissatisfaction, and weight cycling. Studies have found that people who have a history of dieting, particularly those who started dieting at a young age, are more likely to develop an eating disorder.

It's important to note that eating disorders are complex illnesses that can occur for a variety of reasons and are influenced by various factors including genetic, biological, environmental, and psychological. Therefore, it is crucial to be aware of the signs of eating disorders and to provide help and support for those in need.

From speaking with other parents and our own experiences, this seems to be extremely accurate. My daughter was an elite athlete with focus on body shape and this seems to be very common among young women especially in gymnastics, swimming, and modelling. It also occurs to me that this is the age group of young women where hormones start to make the body curvier and hormones start to play a bigger part of daily life. I'm not suggesting this as a causal relation, simply an observation of a mother who has talked and worked with many families.

# Two Stories of an ED Journey

- Two Stories of an ED Journey- YouTube

# Transitions

## College & Eating Disorders

It's estimated that one out of every 20 college students suffer from an eating disorder, such as anorexia nervosa or bulimia. Eating disorders are serious mental illnesses that can have devastating physical and emotional health consequences. Transitioning to adulthood and college with an eating disorder presents unique challenges for young adults and those who love them.

The transition to college is a complicated time for all young adults, but it can be especially difficult for those with pre-existing mental health issues such as eating disorders. This is because many of the support systems in place at home—such as parental guidance, family meals, and access to medical care—are no longer in place when they head off to college. It's important for those transitioning from high school to college with an existing eating disorder to take extra precautions in order to stay healthy throughout their academic career.

### Managing Triggers

Managing triggers can be a daunting task for those living with eating disorders, especially when transitioning to adulthood and college. Triggers often revolve around food and can

cause extreme distress, making it difficult to build the necessary skills to cope in new situations. To successfully navigate these changes, individuals must work on identifying potential triggers before they arise and developing individualized strategies to manage them.

Triggers come in many forms such as stress, emotions, events or even people. When exposed to such stimuli, an individual may feel overwhelmed and turn to unhealthy patterns of behavior as a coping mechanism. Therefore it is important for people living with an eating disorder to recognize their own triggers so they are better prepared in the event that they are faced with them during this period of transition.

## Communicating with College Support Staff

Navigating the transition to adulthood and college can be difficult for anyone, but for those with an eating disorder, it can feel even more overwhelming. It is important for students to familiarize themselves with the support staff available on their college campus. College advisors, counselors, and health professionals can provide vital assistance in the journey towards recovery.

Connecting with college-based support systems is particularly important for those navigating life with an eating disorder. These professionals understand how overwhelming this transition may be and are there to provide guidance every step of the way. They will also be able to advise on how best to manage classes alongside treatment needs; having a plan of action that takes both into consideration can make all the difference in being successful during this journey.

## Meal Planning & Self-Care Strategies

Meal planning and self-care strategies are essential components of transitioning to adulthood and college with an eating disorder. Eating disorders are complex conditions that require significant lifestyle changes in order to effectively manage symptoms. As young adults transition into higher education, they face a multitude of new challenges that can make it difficult to stay on track with their treatment plan. Fortunately, there are many tools and strategies available to help them maintain balance and stability throughout the process.

One way for individuals with an eating disorder to support themselves through this period is by developing meal planning skills. This involves creating meals plans tailored towards their own needs, taking into account nutritional requirements, food preferences and lifestyle factors such as time constraints or lack of access to fresh ingredients. Additionally, engaging in regular physical activity can be incredibly beneficial for those managing an eating disorder as well as providing positive distraction from the stresses of transitioning into college life.

## Embracing College Life

The transition to college life is a major adjustment that can be challenging for any young person, but especially so for those with an eating disorder. As difficult as it may seem, there

are numerous strategies and approaches available to help individuals manage their disorders while still fully embracing the college experience.

At its core, embracing college life means being able to balance the demands of academic success with the need for emotional stability. Thus, it's important for students coping with eating disorders to take time out from schoolwork in order to focus on maintaining their mental health. This could include setting aside time each day for mindfulness practices or seeking professional counseling or support groups if needed.

## How Does a Parent Let Go of The Medical Control When a Child Turns 18?

When a child turns 18 and transitions to adulthood, it can be difficult for parents to let go of the medical control they had while their child was younger. This is especially true when the child has an eating disorder; with college on the horizon, parents must begin to hand off responsibility for treatment decisions and care. It's important that parents provide support without taking over or overwhelming their child as they transition into adulthood.

Parents need to give their children space to make mistakes and learn from them. Encourage open communication between your family and any healthcare providers your child may have, so that everyone is aware of the plan of care – this will help ensure continuity of care when transitioning between home life and college. Developing a trusting relationship with your adolescent will help ensure that he or she feels comfortable talking about their feelings during this challenging time in life.

For parents of children with an eating disorder, letting go as they transition to adulthood and college can be a difficult process. The child's 18th birthday marks the legal age at which they become independent and parents must learn to adjust to their new role in their child's life. This period can be especially challenging for those who have had a large role in managing their child's medical care throughout their childhood.

The transition from being in control of all medical decisions to having limited involvement can feel overwhelming for both parent and child. Though it is important for young adults with an eating disorder to take charge of their own health, some parental support may still be necessary. It is essential that parents provide guidance while giving the space necessary for autonomy and allowing the adult-child relationship to develop naturally over time.

- College Drinking and Disordered Eating: Drunkorexia
- Eating Disorder College Contracts
- Good Mental Health Away From Home Starts Before College
- Is your child ready for College?
- Leaving the Nest: 10 Tips for Parents

- Sororities and Eating Disorders
- Supporting Your Adolescent with the Back to School Transition
- Thinking of Returning to School with an Eating Disorder?

# Resources

## Mental Health Resources in Calgary/Alberta

- Alberta Health Services (AHS) Mental Health: Website: https://www.albertahealthservices.ca/mh/Pages/default.aspx
- Canadian Mental Health Association, Alberta Division: Website: https://cmha.ca/alberta
- Addiction and Mental Health: Website: https://www.albertahealthservices.ca/amh/Pages/default.aspx
- Distress Centre: Website: https://www.distresscentre.com/
- Employee and Family Assistance Program (EFAP): Many employers in Alberta offer EFAP as a benefit to their employees, so you will have to check with your employer to see if they have a program.
- The Centre for Suicide Prevention: Website: https://suicideinfo.ca/
- Kids Help Phone: Website: https://kidshelpphone.ca/
- The Centre for Addiction and Mental Health (CAMH): Website: https://www.camh.ca/

It is important to note that these resources may change, and it is recommended to check with the organization's website or call them to confirm the services they provide and their availability. It's also important to seek professional help as soon as possible if you suspect that you or someone you know has a mental health issue.

## What Calgary Eating Disorder Resources Are Available?

Calgary is a city that offers many resources for people who are struggling with eating disorders. For those living in Calgary, there are many organizations and services available to help individuals cope with their eating disorder. The Alberta Health Services Eating Disorders Program provides comprehensive assessment and treatment for children, youth, and adults suffering from anorexia nervosa, bulimia nervosa, binge eating disorder or other specified feeding or eating disorders (OSFEDs). This program also offers specialized day programs, individual outpatient therapy and family therapy sessions.

In addition to the Alberta Health Services Eating Disorder Program, there are also several non- profit organizations in Calgary that provide resources for those dealing with eating disorders.

- The Eating Disorder Support Network of Alberta: This organization provides support and resources for individuals with eating disorders, their families, and caregivers.

They offer support groups, workshops, and educational materials.

- The Renfrew Center of Calgary: This center offers a range of services, including counseling, therapy, and medical treatment for individuals with eating disorders. They have specialized programs for different eating disorders such as the Day Treatment Program or the Intensive Outpatient Program.
- Alberta Children's Hospital Eating Disorder Program: This program offers specialized care for children and adolescents with eating disorders. Services include assessment, diagnosis, treatment, and ongoing support.
- Silver Linings Foundation
- Calgary Counselling Centre: This organization provides individual, couple, and family therapy, as well as group therapy for a variety of mental health issues, including eating disorders.
- Canadian Mental Health Association, Calgary: This organization provides support, information, and resources for individuals with mental health conditions, including eating disorders. They offer counselling, therapy, and support groups.

It is important to note that these are just a few examples of the resources available in Calgary, and more options may exist. It's always best to consult a healthcare professional for personalized recommendations.

## Registered Dieticians Specializing in ED

Registered dieticians in Calgary that specialize in eating disorders play a vital role in improving the lives of individuals with these conditions. Eating disorders are complex, and having an experienced professional guide an individual through their journey to health is invaluable.

Dieticians understand how food affects both physical and mental health, and provide tailored advice on nutrition to help people break negative habits and form positive ones. They also provide insight into the psychological aspects of eating disorder recovery, helping individuals identify underlying causes of their disorder and providing strategies for managing triggers.

Through comprehensive education, registered dietitians make sure that those affected by eating disorders have access to the most current evidence-based information about nutrition as well as understanding of how it relates to other areas such as mood regulation, stress management, sleep hygiene, body image concerns and overall lifestyle balance.

List of Eating Disorder Specialists

Please note that these resources may change, and it is recommended to check with the organization's website or call them to confirm the services they provide and their availability.

Also, it's important to note that, as with any healthcare professional, you should consult with your doctor or primary care physician before starting any treatment. We are not endorsing anyone in this document, simply providing the information so you need to satisfy yourself as to their appropriateness for your personal situation. This list is not an endorsement.

## Registered Psychologists Specializing in ED

Psychologists in Calgary who specialize in eating disorders provide a critical service to those struggling with this affliction. Eating disorders can have serious long-term implications, including issues with self-esteem and health. This is why finding the right psychologist is so important for anyone suffering from an eating disorder. In Calgary, there are many psychologists well equipped to handle such cases and help those struggling find their way back to a healthy life.

When seeking out psychologists in Calgary that specialize in eating disorders, it's important to look for someone who has been certified by the Canadian Psychological Association (CPA). A CPA certified psychologist is licensed and experienced enough to properly diagnose and treat those suffering from an eating disorder.

List of Psychologists Specialists

Please note that these resources may change, and it is recommended to check with the organization's website or call them to confirm the services they provide and their availability. Also, it's important to note that, as with any healthcare professional, you should consult with your doctor or primary care physician before starting any treatment. We are not endorsing anyone in this document, simply providing the information so you need to satisfy yourself as to their appropriateness for your personal situation. This list is not an endorsement.

We were so blessed to find the most amazing psychologist for our daughter. We had tried a couple of others and they just did not gel with my daughter so we kept looking. Only until we found someone who clicked with her and made sense to my daughter, did real effective change start to happen. Listen to your kids, if their therapist isn't working for them, it's okay to try to find someone else.

# Eating Disorder Organizations

## Eating Disorder Treatment Programs in Alberta

Here are some eating disorder treatment programs in Alberta:

- Alberta Health Services (AHS) Eating Disorder Program: AHS provides a range of services for individuals with eating disorders, including assessment, diagnosis, treatment, and support. They offer both inpatient and outpatient services, as well as community-based support. https://www.albertahealthservices.ca/info/service/1548/eating-disorders.aspx
- The Emily Program: This program offers specialized treatment for individuals with eating disorders, including individual therapy, group therapy, and family therapy. They also offer a partial hospitalization program and an intensive outpatient program. https://www.emilyprogram.com/locations/canada/calgary/
- The Renfrew Center: This center offers specialized treatment for individuals with eating disorders, including individual therapy, group therapy, and family therapy. They also offer a partial hospitalization program and an intensive outpatient program. https://www.renfrewcenter.com/locations/calgary-canada/
- The Meadows Ranch: This program provides specialized treatment for individuals with eating disorders, including individual therapy, group therapy, and family therapy. They also offer a partial hospitalization program and an intensive outpatient program. https://www.themeadowsranch.com/
- The Body Image Therapy Center: This center provides specialized treatment for individuals with eating disorders, including individual therapy, group therapy, and family therapy. They also offer a partial hospitalization program and an intensive outpatient program. https://www.bodyimagetherapycenter.com/
- The Center for Balanced Living: This center provides specialized treatment for individuals with eating disorders, including individual therapy, group therapy, and family therapy. They also offer a partial hospitalization program and an intensive outpatient program. https://www.centerforbalancedliving.ca/

Please note that these resources may change, and it is recommended to check with the organization's website or call them to confirm the services they provide and their availability. It's also important to seek professional help as soon as possible if you suspect that you or someone you know has an eating disorder.

It's important to note that some of these centers may also require a referral from a healthcare provider before being accepted into the program, and some may not accept all types of insurance, please check with the center for more information.

## Online Website Resources Worldwide

- Academy for Eating Disorders
- Access counselling services in the Yukon | Government of Yukon
- Alberta Wellness Center for Eating Disorders
- ANAD
- Annapolis Valley Family Care Givers
- Around the Dinner Table (ATDT) Feast's online discussion board
- BC Health Care Kelty Eating Disorders Center
- Beat Eating Disorders UK
- Body Brave Canada

- BodyPeace
- BridgePoint Center for Eating Disorders · BridgePoint - Center For Eating Disorders
- Butterfly Foundation of Australia
- Danielle's Place | A Place For Every Body
- Duke University Center for Eating Disorder YouTube Channel
- Eating Disorder Clinic Montreal | Anorexia | Bulimia - BACA
- Eating Disorder Foundation Of Nl
- Eating Disorder Support Network of Alberta (EDSNA
- Eating Disorder Support Organizations
- Eating Disorder Support Resources
- Eating Disorders Catalogue
- EATING DISORDERS CENTER FOR TREATMENT AND RESEARCH
- Eating Disorders Nova Scotia
- Eating Disorders Resources Catalogue
- Eating Disorders: Victoria
- Eva Musby, Anorexia Family: How to help your child recover from an eating disorder, anywhere in the world
- F.E.A.S.T. (Families Empowered And Supporting Treatment for Eating Disorders)
- F.E.A.S.T. Family Guide series of small booklets
- F.E.A.S.T. The First 30 Days, free, online, self-paced course for parents
- FEAST of Knowledge 2020 - YouTube
- Feed Your Instinct (FYI) online tool for assessing early warning signs
- Home - Looking Glass Foundation
- Hopewell Eating Disorder Support Centre
- Juno House
- Maudsley Parent Organization
- Mental Health Foundations
- Mental Health Services | Government of Prince Edward Island
- Mirror-Mirror Eating Disorders
- More-Love.org
- National Eating Disorders Association (NEDA) parent-toolkit
- National Initiative for Eating Disorders
- NEDIC (National eating disorder information center)
- Online Educational Tool for Parents/Caregivers of a Youth with an Eating Disorder
- ORRI UK Treatment Center
- Peer Support in Winnipeg | Home | All IN Family
- Sheena's Place - Support for Eating Disorders
- Tabitha Farrar, Eating Disorders Recovery Coach
- The Looking Glass Foundation
- World Eating Disorders Action Day (#WeDoAct)
- www.allianceforeatingdisorders.com/for-loved-ones/
- You are not alone | Eating Disorders Nova Scotia
- Youth Services Bureau of Ottawa

# Disability Tax Credit

The Disability Tax Credit is a Federal & Provincial non-refundable tax credit. It can be worth up to $ 4,700 per year, retroactive up to 10 years. It is a gateway designation that grants access to several other Federal and Provincial disability related programs such as the Registered Disability Savings Plan.

In Canada, to obtain a disability tax credit (DTC) for an eating disorder, an individual must first be diagnosed with the disorder by a qualified medical professional. The individual or their authorized representative must a submit a completed Form T2201, Disability Tax Credit Certificate, to the Canada Revenue Agency (CRA).

The medical section of the form must be completed by a medical professional who is familiar with the individual's condition and treatment. The eating disorder must have lasted or be expected to last a continuous period of at least 12 months. The eating disorder must markedly restrict the individual's ability to perform the basic activity of daily living of eating and/or mental functions necessary for everyday life. Eating disorders often qualify under an inordinate amount time application. This relates to the amount of time the individual and/or their caregivers take to manage the condition. An inordinate amount of time is defined as taking 3 times longer than an average person of the same age without the condition.

The form must also include information about the individual's treatment, such as the frequency and duration of therapy sessions and any medications used.

CRA adjudicates and renders an eligibility decision with respect to the Disability Tax Credit based on the information and medical evidence provided with the application. An unfavourable Notice of Determination may be appealed by means of a review request and/or a formal Notice of Objection. It is important to note that there are strict timelines associated with either method of appeal.

It is recommended that individuals and their respective caregivers consider utilizing a disability advocate to help them navigate the complexities of the Disability Tax Credit applicative process. If you would like more information, you can reach out to Paladin Disability.

## Nourishing Recipes

This is just a very small list of high calorie recipes. More will be added but a simple Google search will produce many resources that you may find better suit your family and their needs.

- Cdn Cystic Fibrosis Nutrition Guide-EN.pdf
- CFF - Healthy High-Calorie Eating
- Cooking with Oil and Lard
- Recipes from JD Oulette
- This Eating Stuff is Hard Work Recipe Book

# BOOKS & PODCASTS

1) A Parent's Guide to Defeating Eating Disorders: Spotting the Stealth Bomber and Other Symbolic Approaches
2) A Parent's Guide to Defeating Eating Disorders by Ahmed Boachie and Karen Jasper
3) All Fired Up
4) All Fired Up podcast with Louise Adams!
5) Anorexia and Other Eating Disorders, how to help your child eat well and be well by Eva Musby
6) Anorexia and other Eating Disorders: How to help your child eat well and be well. Practical solutions, compassionate communication tools and emotional support for parents of children and teenagers.
7) Anorexia and other ED_ Eva Musby
8) Bad Fat Broads
9) Belly Love Podcast
10) Body Kindness by Rebecca Scritchfield
11) Brave Girl Eating by Harriet Brown
12) Brave girl eating_ Harriet Brown
13) Brave Girl Eating: A Family's Struggle with Anorexia by Harriet Brown
14) Calming the Emotional Storm by Sheri Van Dijk
15) Comfort Food w/ Amy Palanjian & Virginia Sole-Smith
16) Decoding Anorexia- Carrie Arnold
17) Dietitians Unplugged
18) Dietitians Unplugged Podcast
19) Do No Harm Podcast
20) Don't Let Your Emotions Run Your Life for Teens by Sheri Van Dijk
21) Don't Salt my Game by Laura Thomas
22) Eating Disorder Recovery Podcast by Dr. Janean Anderson
23) Eating Disorders: A Parents' Guide
24) Eating With Your Anorexic: How My Child Recovered Through Family-Based Treatments and Yours Can Too
25) ED Matters Podcast
26) Escape Diet Prison - The Podcast with Anne-Sophie Reinhardt
27) Every Body Podcast
28) Fearless Rebelle Radio with Summer Innanen
29) Food Psych Podcast with Christy Harrison
30) Get out of Your Mind & Into Your Life by Steven C. Hayes
31) Good Bye Ed- Hello Me by Jenni Schaefer
32) Guidance
33) Help for Eating Disorders: A Parent's Guide to Symptoms, Causes & Treatment
34) Help Your Teenager Beat an Eating Disorder by James Lock and Daniel Le Grange
35) How to nourish your child through and ED- Cassey Crosbie and Went Sterling

36) Intuitive Bites
37) It’s Not About the Food: Intuitive Eating, Anti-Diet, Body
38) Life with ED
39) Life Without Ed: How One Woman Declared Independence from Her Eating Disorder and How You Can Too by Jenni Schaefer
40) Life. Unrestricted. Podcast: Boost your body image and
41) Love Fat- Tabitha Farrar
42) Mental Note: Journeys of Health and Recovery
43) My Kid is Back: Empowering Parents to Beat Anorexia Nervosa by June Alexander and Daniel Le Grange
44) No Body’s Perfect, Stories by Teens about Body Image, Self-Acceptance, and the Search for Identity by Kimberly Kirberger
45) Nourishing Women Podcast
46) Nutrition Matters Podcast by Paige Smathers
47) Nutrition Redefined
48) Off the C.U.F.F. by Nancy Zuker Ph.D
49) Own it Babe
50) Parenting a Teen Who has Intense Emotions by Pat Harvey, Britt H. Rathbone
51) Positivity with Dr. Stefani Reinold
52) RD Real Talk
53) Real Health Radio
54) Rehabilitate, Rewire, Recover!- Tabitha Farrar
55) Sick enough- Jennifer Gaudiani
56) Skilled Based Learning for Caring for Someone with an Eating Disorder by Janet Treasure
57) Skills-Based Learning for Caring for a Loved One with an Eating Disorder: The New Maudsley Method
58) Smart but Scattered Teens, by Richard Guare, Ph.D. et al
59) Surviving an Eating Disorder: Strategies for Family and Friends
60) The All Fired Up!
61) The Appetite is a podcast by the founders of Opal: Food+Body Wisdom
62) The Body Image Podcast with Corrine Dobbas
63) The Body Keeps the Score by Bessel Van Der Kolk, MD
64) The BodyLove Project with Jessi Haggerty
65) The Dialectical Behaviour Therapy Skills Workbook by Matthew McKay et al
66) The Eating Disorder Recovery Podcast by Tabitha Farrar
67) The Embodied & Well Mom Show
68) The F*ck It Diet with Caroline Dooner
69) The Love Food Podcast by Julie Duffy Dillon
70) The Mindful Dietitian with Fiona Sutherland
71) The Mindful Teen by Dzung Vo
72) The Mindfulness & Acceptance Workbook for Anxiety by John P. Forsythe et al
73) The Parent's Guide to Eating Disorders: Supporting Self-Esteem, Healthy Eating, and Positive Body Image at Home
74) The Psychology of Eating by Jane Ogden
75) The Reclaiming You Podcast

76) Therapy Thoughts by Tiffany Roe
77) Throwing Starfish Across the Sea: A Pocket-Sized Care Package for the Parents of Someone with an Eating Disorder by Laura Collins Lyster-Mensh and Charlotte Bevan
78) Treatment Manual for Anorexia Nervosa, Second Edition: A Family-Based Approach by James Lock, Daniel le Grange, W. Stewart Agras and Christopher Dare
79) Trust Your Body Project
80) Unpacking Weight Science by Fiona Willer
81) What to Say to Kids When Nothing Seems to Work: A Practical Guide for Parents and Caregivers by Adele Lafrance and Ashley Miller
82) When Perfect Isn't Good Enough: Strategies for Coping with Perfectionism by Martin M. Antony
83) When Your Child is Cutting, A Parent's Guide to Helping Children Overcome Self-Injury by Merry E. McVey-Noble et al
84) When your Teen Has an Eating Disorder: Practical Strategies to Help Your Teen Recover from Anorexia & Binge Eating by Lauren Mulheim
85) Women of Size
86) You Are Not Your Brain by Jeffrey Schwartz and Rebecca Gladding
87) You Can Eat With Us

# TOOLS/MANUALS/OTHER RESOURCES

- 21 Days of Mindfulness
- Body Peace Academy – Joyfully Inspired Life
- CCI - Mental Health Resources for Clinicians - Overview
- CCI Resources -Looking-After-Others
- Clinical Tools - Mental Health Literacy
- Clinical Tools and Resources - Kelty Eating Disorders
- Canadian Eating Disorders Strategy – NIED
- Eating_Disorders_Toolkit.pdf
- Eating-Disorders-Toolkit-for-PCP-2018.pdf
- From Survive to Thrive
- Break Free From ED - 01 - What Are Eating Disorders
- Adult Eating Disorders BC'S Community Hospital Guideline: Recommended Care Of The Patient With An Eating Disorder In The Emergency Room
- CCI - Self Help Resources for Mental Health Problems
- Alberta-Physician-Guide-for-EDs.pdf