



2011

Eating Disorder Awareness Week

Do you want to know more about eating disorders? Are you worried about yourself or a friend? Look inside this packet to learn more.

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What is an Eating Disorder?

You may have heard the terms anorexia, bulimia or binge eating disorder, but what is an eating disorder, really? It isn't simply a body weight, a percentage of fat, or a desire to be skinny. It is an improper relationship with food characterized by obsessive thoughts and habits. No one knows the exact causes of eating disorders, but in general, eating disorder behaviors are used to cope with anxiety or strong emotions. Some of those who have eating disorders have undergone extreme distress, trauma, or abuse.

So how do you know if you or a friend might have an eating disorder? Well, you won't know by assessing someone's weight or body shape. Here are some questions to consider:

- Do you constantly worry about gaining weight or becoming "fat"?
- Do you often feel uneasy around food or anxious before eating?
- Would gaining 5 pounds make you very upset?
- Do you prefer to eat alone, at night or in secret?
- Do you often feel ashamed, disgusted or guilty after eating?
- Have you ever made yourself vomit?
- Do you feel anxious, guilty or angry if you are unable to exercise?
- Do you often feel fat, even though people tell you that you are thin?
- Do you often eat so much that you feel sick or uncomfortable?



If you answered yes to any of these questions, you may have an eating disorder. Please call or email ANAD to find professional treatment resources.

ANAD

FACTSHEET

- Eating disorders have the highest mortality rate of any mental illness.¹
- 20% of people suffering from anorexia will prematurely die from complications related to their eating disorder, including suicide and heart problems.²
- Almost 50% of people with eating disorders meet the criteria for depression.³
- 25% of college-aged women engage in bingeing and purging as a weight-management technique.³
- Up to 24 million people of all ages and genders suffer from an eating disorder (anorexia, bulimia and binge eating disorder) in the U.S.⁴
- An estimated 10-15% of people with anorexia or bulimia are male.⁵
- Treatment can cost \$30,000+ a month and many patients need repeated hospitalizations.
- Only 1 in 10 men and women with eating disorders receive treatment.⁶
- Only 35% of people that receive treatment for eating disorders get treatment at a specialized facility for eating disorders.⁶

Sources

1. American Journal of Psychiatry, Vol. 152 (7), July 1995, p. 1073-1074, Sullivan, Patrick F.
2. The Renfrew Center Foundation for Eating Disorders, "Eating Disorders 101 Guide: A Summary of Issues, Statistics and Resources," published September 2002, revised October 2003, <http://www.renfrew.org>
3. Mortality in Anorexia Nervosa. American Journal of Psychiatry, 1995; 152 (7): 1073-4.
4. The Renfrew Center Foundation for Eating Disorders, "Eating Disorders 101 Guide: A Summary of Issues, Statistics and Resources," 2003.
5. Carlat, D.J., Camargo. Review of Bulimia Nervosa in Males. American Journal of Psychiatry, 154, 1997.
6. Characteristics and Treatment of Patients with Chronic Eating Disorders, by Dr. Greta Noordenbox, International Journal of Eating Disorders, Volume 10: 15-29, 2002.



The Etiquette

of Caring about Someone with an Eating Disorder

Do

- Talk openly and honestly
- Be gentle but firm
- Try to make yourself available
- Be honest about your own fears, struggles, and frustration
- Take time to listen
- Express your love and support
- Remember that an eating disorder is not about the food
- Avoid conflicts and battles of will
- Know your limits and respect them
- Realize that they have to want to recover

Don't

- Try to be a therapist
- Be afraid to upset them; communicate
- Ignore; they need truth
- Be taken in by lies and excuses
- Offer simple solutions (just eat?!)
- Blame, shame or guilt
- Threaten them with consequences
- Gossip about what they share
- Use "you" statements; they sound accusatory
- Expect an instant recovery
- Try to force someone to eat or stop exercising
- Pretend it will just go away



A PLAN FOR TALKING TO SOMEONE WHO MAY HAVE AN EATING DISORDER: **CONFRONT**

CONCERN

You care about the mental, physical, and nutritional needs of the person and feel the need to talk with them.

ORGANIZE

Decide WHO is involved, WHAT everyone is going to say, WHERE to confront, WHY you are concerned, HOW to talk, WHEN is a convenient time?

NEEDS

What will be needed after the confrontation? Locate several options in the way of professional help and/or support groups and have the information ready. On college campuses, find the number for the counseling center.

FACE

The actual confrontation. Be empathetic but direct, and offer specific examples of the behavior that concerns you. Expect denial and possibly anger, but do not back down. Don't get angry at them. Stick with "I" statements rather than "you" statements to avoid being accusatory. Keep emphasizing that you are coming from a place of love and compassion.

RESPOND

Listen carefully and respond without judgment.

OFFER

Help, suggestions, support. Find information on where they can go for professional help and even ask if they would like you to accompany them. You may want to encourage them to contact you when they need someone to talk to, but don't play therapist. Remember, there is only so much that you can do.

NEGOTIATE

Another time to talk and a time span to seek professional help. Follow up and be gentle but firm.

TIME

Recovery takes time and patience, from both you and them. Remind them how much they have to gain by that process, and also, how much they stand to lose if they choose to continue with these behaviors.