

Empowerment

Benefits of treatment

Early interventions for eating disorders improve the chances of successful treatment and the prevention of severe physical and emotional problems related to a the later stages of eating disorders.

Support

Although family dynamics may contribute to eating disorders, it is very important to keep in mind that parents are not the cause of children's eating disorders. Still, families are a big part of the healing process. If your child suffers from an eating disorder, he or she will depend on you to participate in an active, collaborative approach to treatment. This may be very hard work. Be aware of your misconceptions and resistances to the possibility of your child having an eating disorder, and seek support for yourself so that you can be there for your child.

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Support

Where to seek help

There is professional help for eating disorders. Due to the potential dangerousness and long-term negative effects of eating disorders on physical and emotional health, professional help is often required. Treatments initially focus on increasing healthy eating habits and establishing a healthy weight. Further treatment may address underlying issues of coping skills, self-control, and self-esteem that are common elements of the disorder. Family therapy is usually incorporated into treatment. This method may emphasize: healthy communication, modeling effective coping strategies, managing anger and other uncomfortable feelings without losing control, balancing family rules with the child's need for independence and control, modeling healthy eating habits, and avoiding substance abuse. Treatments for eating disorders require patience and persistence. If one approach doesn't work, try something different until you find what works for your child and your family.

Talk to your child's doctor about your concerns, and have your child's physical health closely monitored. In addition to providing medical treatment, a pediatrician or family practitioner can connect you with local counselors or treatment programs specializing in childhood/adolescent development and eating disorders.



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What is an eating disorder?

Eating disorders stem from an intense drive to lose weight or maintain a slim body image. People with eating disorders experience a strong need to control their food intake, an intense fear of weight gain, and distorted thoughts about weight, shape, and self-concept. The two main types of eating disorders are:

Anorexia

- refusal to maintain weight at or above minimum normal weight for age and height
- intense fears of gaining weight or becoming fat (despite being underweight)
- distorted body image (denial of low body weight, overemphasis on relationship between body image and self-concept)
- in females past puberty, the menstrual cycle stops for at least 3 months.

Anorexics may still eat whole meals and may also engage in "binging" and "purging" (which is usually associated with bulimia). Although anorexics may eat enough food, they may restrict certain types of food or over-exercise to maintain a dangerously low body weight.

Bulimia

- repeated bingeing: eating large amounts of high-calorie foods in a short time
- person feels a lack of control over bingeing periods, as if he or she cannot stop eating
- attempts to avoid weight gain from bingeing with some other behavior:
- vomiting or use of laxatives, diuretics, enemas, or other medications (purging)
- fasting or excessive exercise
- maintaining an overly-strong connection between body shape, weight, and self-image.

Eating Disorders...

...are not just about food. Rather, they develop out of emotional pain and poor coping strategies. Food becomes the target of these underlying problems because it is something that can always be controlled by the individual (nobody can make a person eat or stop them from purging). Many children and teenagers with eating disorders are described as "good kids" who want to behave well. Instead of acting out their problems at school or with their parents and peers, they keep the problems to themselves by "acting out" on their own bodies. Eating disorders are complicated by common cultural myths about the importance of a slim appearance, and on the typical associations between dieting, and exercise and health. Children and teenagers who develop eating disorders try to improve their self-esteem by fitting into cultural ideals of thinness. Although more common in females than males, eating disorders are not limited to any gender, age, race, or social class.

Individuals suffering from eating disorders may also experience problems with depression, anxiety, adjustment, sexuality, and substance use. For example, bulimic women are 3 to 5 times more likely to abuse alcohol and drugs than are other women in the population. Because eating disorders reflect problems with self-esteem and self-control, a child or teenager may have a variety of symptoms related to the development of self-image.

Recognizing eating disorders

Eating disorders are nearly impossible to recognize in the early stages. Trust your instincts and follow up on your concerns. Learn about eating disorders, and talk about your concerns with your child. There are some good books that describe what to look for and what steps to take, including *When your child has an eating disorder: A step-by-step workbook for parents and other caregivers*, by A. H. Natenshon (1999).

There are many early signs of eating disorders that you can learn to recognize. Some of these are:

- missing meals because your child is "too busy"
- radical changes in diet and awareness of high calorie foods
- weight loss
- not attending social gatherings that involve food
- not dealing directly with daily life stressors
- over exercising
- fainting or dizziness
- hiding food
- avoidance of risks and criticism
- frequent talk about "feeling" fat
- school absences, especially during lunch or other eating activities
- rituals of some foods (restricted diet)
- significant problems with concentration