

NIED

NATIONAL INITIATIVE FOR
EATING DISORDERS

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Need for NIED:



- Misunderstood.
- Inadequately Treated.
 - Underfunded.
- Devastating to Deal With.
- And the Deadliest of all Mental Diseases.

Things to Remember:



- Everyone's experience with an Eating Disorder is different.
- If you are noticing signs and symptoms here it DOES NOT mean you (or your child) has an Eating Disorder.
- At the same time, don't ignore the symptoms and signs, early intervention is the key to treating this illness.

How Common are EDs ?

At any one time...

- Teens ~ up to **1 in 20** girls have some form of diagnosable Eating Disorder
- University age females ~ up to **1 in 5**
- Approx. 1 male for every 3 females (ratio used to be 1:10) ~ and this is an underestimate because males are less likely to seek treatment (Hudson, Hinipi, Pope, & Kessler, 2007)

How Common is Disordered Eating?

❖ **43% of grade 1 – 3 girls** want to be thinner

(Collins 1991)

❖ **57% of teen girls** and **33% of boys** use unhealthy weight control behaviors (e.g., meal skipping, vomiting)

(Neumark-Sztainer, 2005)

Why pay attention?

- **Eating disorders are 12x higher than ALL causes of death in youth ages 15-24**
- Kids who don't talk about it have the highest likelihood of having chronic severe EDs
- Teens with EDs often have comorbid depression, anxiety, substance abuse problems, self-harm or suicidal tendencies
- Eating disorders are not a phase. They require treatment from trained professionals.



What do Eating Disorders look like?

(www.nationaleatingdisorders.org)

ANOREXIA NERVOSA



Anorexia nervosa is a serious, potentially life-threatening eating disorder characterized by an extreme fear of becoming fat, self-starvation and excessive weight loss.

In kids/teens, it involves failing to meet their growth curve goals.

Warning Signs Associated with Anorexia



- ✓ Dramatic weight loss or lack of appropriate weight gain.
- ✓ Preoccupation with weight, food/recipes, calories, fat grams.
- ✓ Refusal to eat certain foods, progressing to restrictions against whole categories of food (e.g. no carbohydrates).
- ✓ Sudden switch to vegetarianism
- ✓ Frequent comments about feeling “fat” or overweight despite weight loss.
- ✓ Anxiety about gaining weight or being “fat.”
- ✓ Excessive checking or fixing of body/appearance.



- ✓ Development of food rituals (e.g. eating foods in certain orders, excessive chewing, rearranging food on a plate).
- ✓ Denial of hunger.
- ✓ Consistent excuses to avoid mealtimes or situations involving food
- ✓ Excessive, rigid exercise regimen--despite weather, fatigue, illness, or injury, the need to “burn off” calories taken in.
- ✓ Withdrawal from usual friends and activities.
- ✓ Medical complications: loss of bone mass & menstruation, low HR/BP, skin/hair/nail changes, lanugo (baby hair)

BULIMIA NERVOSA



Bulimia nervosa is a serious, potentially life-threatening eating disorder characterized by a cycle of bingeing and compensatory behaviours such as self-induced vomiting.

WARNINGS ASSOCIATED WITH BULIMIA NERVOSA



- ✓ Evidence of binge eating, including disappearance of large amounts of food in short periods of time or wrappers and containers indicating such
- ✓ Evidence of purging behaviours, including frequent trips to the bathroom after meals, signs and/or smells of vomiting, presence of laxative packages.
- ✓ Excessive, rigid exercise regimen--despite weather, fatigue, illness, or injury, the compulsive need to “burn off” calories taken in.
- ✓ Unusual swelling of the cheeks or jaw area.

BINGE EATING DISORDER



Binge Eating Disorder (BED) is characterized by recurrent binge eating *without* the regular use of compensatory measures to counter the binge eating.

Warning Signs Associated with BED



- ✓ Frequent episodes of eating large quantities of food in short periods of time.
- ✓ Feeling out of control over eating behavior during the episode.
- ✓ Feeling depressed, guilty, or disgusted by the behavior.
- ✓ Behavioral indicators of BED include eating when not hungry, eating alone due to shame over quantities, eating until uncomfortably full.

Avoidant Restrictive Food Intake Disorder (ARFID)



- **Food/eating disturbances – E.g.:**
 - Fear and/or Decreased interest in food or eating
 - Avoidance of sensory characteristics of food
 - Concern about dangers/consequences of eating
- **Failure to meet energy needs – I.e.:**
 - Significant weight loss or failure to gain weight in kids or
 - Nutritional deficiencies or
 - Interference with proper psychological functioning
- **Not culturally related or due to food availability**
- **Not better accounted for by another disorder (e.g., depression, other eating disorders)**

Verbal Cues as Warning Signs for EDs



“I’ll just have a salad”

“I don’t need to eat”

“I’m don’t get hungry anymore”

“I’ve started this great diet...I’ve lost 10lbs already”

“I’m a little dizzy but it’s worth it”

“I can’t go to the movies...I have to work out every day”

“I just don’t care anymore...”

“I ate a big breakfast...”



The commonality in all of these conditions is the serious emotional and psychological suffering and/or serious problems in areas of work, school or relationships.

If something does not seem right, or there is a change in eating or exercise behaviour, it deserves attention.

Factors That May Contribute to Eating Disorders



Psychological Factors



- ✓ Low self-esteem
- ✓ Feelings of inadequacy or lack of control in life
- ✓ Depression, anxiety, anger, stress or loneliness
- ✓ Personality (e.g., perfectionism, obsessiveness)

Interpersonal Factors



- ✓ Troubled personal relationships
- ✓ Difficulty expressing emotions and feelings
 - ✓ History of being teased or ridiculed based on size or weight
- ✓ Having been encouraged to diet, incl. by doctors
 - ✓ History of physical or sexual abuse

Social Factors



- ✓ Cultural (&/or sport) pressures that glorify “thinness” or muscularity and place more value on obtaining the “perfect body” than on inner qualities and strengths
- ✓ Narrow definitions of beauty (and health) that include only women and men of specific body weights and shapes
- ✓ Stress related to racial, ethnic, size/weight-related or other forms of discrimination or prejudice
- ✓ Myths and misinformation about food and the ability or need to control body weight through mass media

Biological/Genetic Factors



- ✓ In some individuals with eating disorders, certain chemicals in the brain that control hunger, appetite, and digestion have been found to be unbalanced.
- ✓ Eating disorders often run in families. Current research indicates that there are significant genetic contributions to eating disorders and associated personality factors (e.g., perfectionism, obsessive compulsiveness).
- ✓ Timing/rate of pubertal growth.

What Can You Do to Help Prevent Eating Disorders?



- ✓ Do not comment on weight or shape.
- ✓ Link eating with fuelling our bodies to do what we want to do in life.
- ✓ Be a model of healthy self-esteem, body image, and eating behaviour.
- ✓ Help kids understand that all body shapes have beauty and value; and that body does not define one's personality.

Suggestions to Help Children Feel Good about Themselves.



- ✓ **PLAY** with kids
- ✓ **EXERCISE** with kids
- ✓ Recognize **YOUR** weight biases. Do **NOT** talk about your weight or other people's weights.
- ✓ **LISTEN** when children talk to you about their changing bodies and their feelings.
- ✓ **REDUCE** the need to control their bodies; instead focus on a healthy lifestyle.
- ✓ **ENCOURAGE** activities that promote children's self-esteem without focusing on appearance.

Adapted from: Discover Healthy Eating, Region of Peel Health Department, Toronto Public Health, York Region Health Services, 2000.

Suggestions for Preventing Problematic Eating



- ✓ There are no bad or forbidden foods, all foods in moderation.
- ✓ Eating when hungry and stopping when full. If you are full you don't have to eat everything on your plate, if you are hungry have a second helping.
- ✓ Be willing to try a variety of foods offered in the Canada's Food Guide.

Suggestions for Preventing Problematic Eating



- ✓ Make time to enjoy regular meals with family and friends. Breakfast, lunch and dinner.
- ✓ Sometimes giving yourself permission to eat “just because you feel like it”, even if you are not really hungry.
- ✓ Getting rid of your bathroom scales and no counting calories.

What to do if you suspect an ED at Camp



- **Step 1.** Become informed about EDs (see Resources).
- **Step 2.** Talk to camper privately and let them know you are concerned.
 - Focus on your concerns and observations: e.g., “I am worried that you are not healthy and/or able to really enjoy camp because you are not eating enough”
 - Be compassionate, patient and nonjudgmental – the eating disorder is not their fault & they need better coping skills
 - Do not comment on weight; focus on their behaviours/mood
 - Reinforce what you like about their qualities and abilities (unrelated to food or appearance)
 - Recognize that the camper may not be ready to change: denial, shame, and fear are common.

See also www.nedic.ca

What to do if you suspect an ED at Camp



- Step 3. Speak to parents and administrators about your concerns. Offer resources to interested parents.
- Step 4. Recommend the camper sees their doctor to ensure they are healthy enough to continue at camp.
- Step 5. Reinforce any efforts to change and encourage parents to follow up on the resources to get their child the help they need.
 - The treatment of eating disorders require health professionals with specialized training. Encourage them to follow through until they find someone that is a good fit.

ED Resources



- National Eating Disorder Information Centre - www.nedic.ca
- Sheena's Place - Toronto - www.sheenasplace.org
- Ontario Community Outreach Program for Eating Disorders - www.ocoped.ca
- Bulimia Anorexia Nervosa Association (BANA) - www.bana.ca
- Danielle's Place - www.daniellesplace.org
- Eating Disorders of York Region (EDOYR) - www.edoyr.com
- Hope's Garden, Eating Disorder Support & Resource Centre - <http://www.hopesgarden.org>
- Hopewell Eating Disorders Centre of Ottawa - www.hopewell.ca
- Niagara Network for Freedom from Eating Disorders (NNFED) - www.surf.to/nnfed

Resources, cont'd



- www.nied.ca
- www.kidshelpphone.ca
- www.teenmentalhealth.org
- www.cmha.ca/highschool
- www.howtochill.com
- www.thejackproject.ca
- www.mindyourmind.ca
- www.dietitians.ca
- www.psych.on.ca

Thank You for Your Support



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