

INFORMATION FOR EDUCATORS

EATING DISORDERS

Eating disorders can affect any gender, race and age. Certain students may exhibit many of the symptoms of eating disorders while others may only exhibit a small range. It is important to be aware of the signs/symptoms of an eating disorder and the issues surrounding their treatment.

Physical Symptoms

- extreme weight loss
- weight fluctuations
 - loss of hair
- swellings of glands
- lethargy/sluggishness
- discoloration of teeth
- scarring on backs of hands from induced vomiting
- layering of baggy clothing regardless of weather
 - feeling cold regardless of weather

Behavior Symptoms/Signs

- making frequent trips to the washroom
- avoidance of snacks and foods in general
 - abnormal eating habits
 - substance abuse
 - frequent weighing
- consistently and persistently critical of good school work
 - unable to accept praise
 - consistently/frequently avoids eye contact
- refuses or fails to engage in oral work in the classroom
- works instead of engaging in social activities during breaks from classroom activities especially during the lunch period
- recopying out classroom work until it contains no mistakes
 - social avoidance
 - withdrawing from friends/peers
- refusing to undress in front of peers for Physical Education Classes

Psychological Symptoms

- low self-esteem
- feelings of helplessness, guilt
 - depression
 - anxiety
 - perfectionist tendencies
- over-concern regarding body shape/size

PROFESSIONAL BOUNDARIES

It is important for a teacher/professional who suspects an eating disorder to encourage the student to seek help. Though the student may ask you not to, it is crucial that if a student confides in you about an eating disorder to involve appropriate help. If the teacher continues to be a confidant for the student then this should be agreed upon by the treatment team, including parents, doctors and the school itself.

NOTE: If approached by others or when first confiding in a counselor confronted the student may be unwilling to admit their problems/habits to a counselor they may first react by asking for help for problems or concerns that are unrelated to disordered eating. However by establishing a trusting relationship with a counselor or confidant they may later seek help for their eating problems.

WORKING TOGETHER

TREATMENT TEAM: Parents, Teachers, Doctors and the client all must work together for optimal treatment of an eating disorder

POSITIVE INFLUENCES

Some ways in which schools and teachers can positively impact those who are receiving treatment for their eating disorders

1. Work to help enhance the student's self-esteem
2. Facilitating and encouraging the student's social interaction with both peers and adults in the school setting
3. Adopting ways in which the student can display their strengths at school
4. Try to meet student's learning needs as well as their emotional needs

NEGATIVE INFLUENCES

Negative impacts can result from the school being inflexible and inconsistent with the treatment plan of the student

1. Valuing academic endeavors and achievements rather than the achievements of the student
2. Encouraging competition between peers
3. Calling for students to be exceedingly independent of adult support
4. Not making the student's individual educational and emotional needs a priority

HOW TO TALK WITH PARENTS

It is not uncommon for the family to be unaware of the problem or the severity of the issue. Try to keep this in mind while speaking to the parents regarding their child.

- Initially the parent may believe that their child's behavior is somewhat normal for their age group or gender you may want to indicate some of the signs and symptoms you have observed during your time with the student.
- For a parent to effectively support a child they have to look at and examine their own attitudes and feeling toward food and their body.
- One of the greatest reinforcement to parental resistance may be today's confusion about what truly constitutes healthy eating. Fat free and low fat eating not invariably healthy. Parents often lose sight of the fact that even the healthiest food attitudes become unhealthy when imposed too stringently or carried to extremes. In moderation there are no bad foods. Body image can also be affected by dieting within the household. Dieting may also be impacting the student more than realized and it may be useful to the child to curtail those behaviors/attitudes.
- Remember parents may feel very worried or guilty about their child's behavior and may want to avoid their own distress when discussing the severity of their child's issue.
- Teach the parents that signs of disorder or pre-disorder are disguised and difficult to detect.
- Share with the parents what the other kids have been saying about their child. Give specifics i.e. she is throwing away her lunch; she is exercising in the bathroom; she is throwing up; she is dizzy and faint. Also explain the observations you have made that indicate a potential problem.
- Give them a sheet on recognizing signs and detecting soft signs so they can value their children.
- Teach parents to see dangers of excess in their children. Excess is a sign of a potential disorder. Remind parents that eating disorders are secretive, symptoms show in a variety of ways and sometimes professionals make errors. Blood tests are not an indicator of disease. A child can be very underweight and have normal lab work. Educate parents that weight alone is not an indicator of a disorder.
- Teach parents that pathological behavior settle in when the child has lost control, when they no longer have free choice. Therefore the signs and symptoms of a disorder may vary across physical, behavioral and psychological boundaries.
- Keep persisting in addressing the severity of the issue with the parents even though they may get defensive or uncomfortable.
- Encourage parents to seek professional help for their child. The first step is to obtain the help of a physician who play a significant role in identification, assessment, diagnosis and care of those with an eating disorder.

Feel free to pass on the "INFORMATION FOR PHYSICIANS" form provided as a first step for parents to approach their doctor.

REFERENCES

Adapted from NEDIC

“The Development of Eating Problems in Children and Adolescents”

Author: Gail McVey May 1994 Vol. 9, No.2

“Schooling” m Author: Anna Tate Pg. 323 to 346

How to Address the Parents by Divya Kakaiya. *When Your Child Has an Eating Disorder* by Abigail Natenshon, 1999.

Website: http://www.healthywithin.com/for_teachers.htm#How%20to%20address

INFORMATION FOR PHYSICIANS

Physicians play a significant role in the early identification, assessment, diagnosis and care of those with eating disorders and disordered eating. If you have received this form, your patient has some concerns they would like to discuss with you.

What You Should Know

- Your role in the screening, early detection, assessment and ongoing medical monitoring of patients with eating disorders is important for timely access to appropriate care and for reducing medical risk
- Vital to your role is being aware of the signs and symptoms associated with disordered eating, and a willingness to ask screening questions to those people who you feel may be at risk
- Physicians are often the most consistent care provider for the patient with an eating disorder

Please visit www.cwedp.ca for professional, educational resources and step-by-step support with the following information:

Completing a Comprehensive Physical Assessment

1. Weight
2. Body Image
3. Means of Weight Control
4. Physical Examination
5. Laboratory Examination

Making an Eating Disorder Diagnosis

Please refer to the Diagnostic and Statistical Manual IV (DSM-IV) for guidelines around how to diagnose an eating disorder. Please note that for children/adolescents, diagnostic criteria may differ from the DSM-IV guidelines.

Helping Your Patient Receive Treatment

There are a variety of treatment options some of which will require a referral from you in order for your patient to proceed with (those with an * require a physician referral):

- Out-patient eating disorder treatment programs*
- Day-treatment programs*
- In-patient eating disorder treatment programs*
- Regular Physician follow-up appointments
- Private Therapy
- Support & Resource Centers

If you are a physician in the Central West Region and would like to receive a free, comprehensive resource and training binder that addresses assessment, diagnosis and ongoing medical management within a primary practice setting, please contact:

Central West Eating Disorder Program Regional Office
700 Dorval Drive, 6th floor
Oakville ON L6K 3V3 (905) 815-5124

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