



Dealing with Childhood onset Eating Disorders

Unfortunately, disordered eating and dieting are becoming more common. The National Nutrition Survey (1995) found that teenage girls were more likely to be on a diet than boys. Almost 20% of 16 - 18 year old girls reported being on some form of diet (6% were on a weight reduction diet, 5% were consuming a vegetarian diet, and a further 8% were on some other form of diet.)

Personality characteristics of those suffering from eating disorders tend to be quite universal. They are usually a perfectionist, talented or gifted in many fields (including sport), and high achieving, with commitment to performing well in all aspects of life. However, it is important to note that one comment or event in a child's life cannot create an eating disorder. Certain innate characteristics must exist in the child: triggers may then precipitate an eating disorder. It is important to identify an eating disorder as early as possible.

Warning signs to watch for anorexia nervosa include:

- dramatic loss of weight;
- relentless excessive exercise - many eating disorder sufferers use sport (especially weight and physique-related sports) to hide their eating disorder, and are often congratulated on their dedication to training;
- preoccupation with food, energy, fat, sugar and weight;
- total avoidance of food-related social situations;
- sudden decision to avoid red meat (however, this decision can be made for many different reasons);
- classifying foods as "good" or "bad"; and
- mood swings.

Warning signs to watch for bulimia nervosa include:

- noticeable weight loss or gain;
- excessive concern about weight;
- increased criticism of body size or shape;
- strict dieting followed by binge eating;
- visiting the toilet soon after meals; and
- depressive mood.

If you suspect a child you are working with may be suffering from an eating disorder, talk to their parents and refer to a professional skilled in dealing with eating disorders. The child will benefit from seeing a GP and / or paediatrician, dietitian, and psychologist / psychiatrist / counsellor. Do not judge the child or make comments about their size or shape – the best way to assist is to provide unconditional support and refer to a professional.