October 25, 2017

Eating Disorders:

Prevention and Early Intervention

A presentation to Lord Byng PAC

Potential Warning Signs

- Overly self-critical
- "Do I look okay?"
- Frequent mirror-checking
- Signs of depression, irritability
- Social withdrawal
- Excessive exercising

- Use of steroids or overuse of health supplements
- Significant weight fluctuations
- Preoccupation with muscle tone, fitness
- Efforts to cover up one's body (baggy clothes, hoods, etc.)

Potential Warning Signs

- Signs of binge eating or hoarding food
- Evidence of laxative or diuretics use
- Leaving the table immediately after meals
- Creating a complex life style, schedule or rituals to avoid eating, or to make time for binge-purge episodes
- Indications that weight loss, dieting, and control of food are primary concerns

Treatment Options

- Residential or hospital treatment
- Psychiatric counseling
- Meal support & nutritional guidance
- Individual, group, & family therapy



- Pharmacology
- Community support



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- Rather, ED behaviours become a source of shame and guilt, leading to even greater disconnect and feelings of being misunderstood – and the cycle repeats itself
- This makes coming forward for help DIFFICULT!

EDs Are About Pain

- Eating disorders are often about the avoidance of dealing with difficult emotions, or trauma
- ED sufferers are Suffering



What Causes an ED?

- Eating disorders are multifactorial. This means that there is no one, single thing that causes every eating disorder – rather, there are a number of different factors and triggers that contribute to an eating disorder's onset
- Remember: each eating disorder sufferer is a unique person, with a unique lived experience
- The following lists are not complete or exclusive there

Individual Factors

- Fear of natural body changes, or of growing up
- Difficulty functioning independently
- Drive for perfection & high self-control; competitive
- Low self-esteem or poor body image
- Overvaluation of appearance
- Identity problems
- History of trauma



Societal Factors

- "Culture of shame" that promotes a thin ideal, while stigmatizing other body shapes or natural aging
 e.g.: Fat-phobia, fat-shaming, anti-aging, etc.
- Social media: filters, comments, beauty focus...
- Fetishization of eating disorders/thinness in media
- Fashion, media, and diet industries

Peer Factors

- Isolation, lack of support
- Unhealthy or controlling relationships



- Body-focused comments: teasing, bullying, bodyshaming, negative self-talk, criticizing others
- Specific external peer pressures to control weight (e.g., prom, ballet, sports, impress a crush, etc.)

Family Factors

- Family history of mental illness (e.g. OCD, depression, ED, anxiety)
- High parental expectations (real or perceived)
- Maladaptive family attitudes to eating and weight
- Upsetting mealtime experiences (arguments, disliking foods, etc.)
- Difficulty with communication

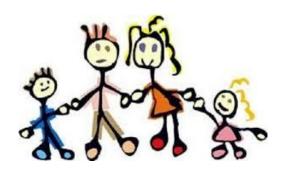
When the Factors Combine

- Social anxiety, or peer pressure to be "perfect"
- Struggling with unmet emotional needs
- Experiencing a "disconnect" within family or friends
- Feeling overwhelmed by too much change or too many demands of daily life
- Choosing to isolate and withdraw makes treatment and recovery challenging

A Factor is Not a Cause

Let's be clear: Friends, parents, and caregivers usually DO NOT directly cause eating disorders.

In fact, friends, parents, and caregivers can be the best resources for recovery – with the right skills, mindset, and approach to conversation and support.



Our Philosophy

Recovery is something we give ourselves in the company of people who genuinely care.

At the Looking Glass Foundation,

we care deeply.

Caring is Intervening

- Family, friends, teachers, coaches, administrators, counsellors, etc., CAN help those who are suffering from, or are at risk of developing, an eating disorder
- We can intervene in appropriate, respectful, and meaningful ways

Caring is Not Judging

- It is not our place to judge another person, nor is it helpful
- Passing judgment (however subtly) pushes someone away – it doesn't bring them toward us
- This is especially true for someone who might be suffering from, or at risk of developing, an eating disorder

Why We Intervene

- We DON'T intervene to "fix" the problem
- We DO intervene to:
 - Indicate the true strength of our relationship
 - Show that they can rely on us for truth & support
 - Encourage them to move forward

The Initial Approach

- Set a time to talk privately, in a comfortable setting
- Express your concerns clearly
- Invite dialogue to explore these concerns
- Avoid placing shame, blame, or guilt
- Resist conflict, or a "battle of the wills"
- Avoid giving simple solutions
- Express your continued and unconditional support

Start the Conversation

• It can be as simple as:

"Come sit with me... Can I make you a cup of tea? "

Speak the unspoken

- Be prepared to "speak the unspoken" the truth that you both know, but that neither of you want to say out loud. Call it by its name – an eating disorder
- Avoid "tip-toeing" around the issue in fear of setting them off – they will register your discomfort as a reason to remain withdrawn
- Express your own emotions (without adding guilt or shame) to demonstrate that opening up is OKAY

Be Prepared for Emotion

- Attend to the emotion
- Name it put it in words
- Validate the emotion
- Meet the emotional need
- Resist going to the "bright side"



Attend to the Emotion

 Calmly observe and acknowledge what the other person seems to be feeling – whether or not they're openly expressing it:

"I can see that you're upset."

Name it - Put it into Words

- Put into words the emotion (or range of emotions) that you think the other person might be experiencing.
- Help them to identify and describe what emotions they are feeling:

"Are you sad right now?"

Validate the Emotion

- Put yourself in their shoes and convey understanding of what *they* are experiencing
- Imagine what the situation must be like for them don't make it about you
- Accept, allow, and validate their emotions no matter how unexpected, or how hard they are for you to understand:

"It's okay to feel what you feel."

Meet the Emotional Need

- If someone is SAD, comfort them
- If someone is ANGRY, help them define what it is they're angry about
- If someone is AFRAID, give them assurance
- If someone is ANXIOUS, help them sort out the source of their anxiety

Resist Going to the "Bright Side"

- Don't gloss over, downplay, or put a "positive spin" on the situation
- It is what it is. Try to meet the person where they are
- If you can accept and deal with it, maybe they will trust themselves to do so as well

Curve Ball Conversations

- Conversations can sometimes go sideways, despite our very best intentions!
- Regroup by "circling back" and re-phrasing what was said before the conversation got off track
- Remain calm and earnest in your desire to get to a good place

Manage Tricky Situations

- Meals especially at restaurants and buffets
- After meals get occupied with something
- Exercise gyms, classes, sports (set boundaries)
- Holidays especially winter holidays
- Being "on" in front of others (attention)
- Competitive situations (pressure)

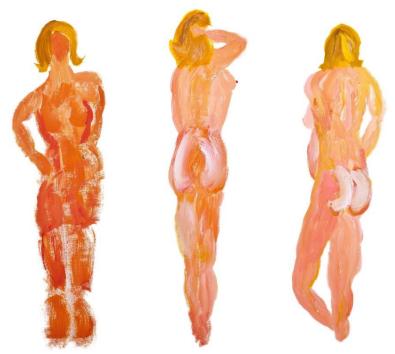
Avoid Tricky Conversations

Recognize that all of these can be sensitive subjects:

- Weight, body image, weight loss
- Diet, supplements, nutrition
- Exercise, body tone, fitness
- Being "perfect"
- High achievement, proving one's worth
- Criticism of self and others

Model Healthy Talk

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- The way we talk about bodies has a huge impact on our own, and others', perceptions
- When we constantly criticize ourselves, our colleagues, our families, or the people we see on film & social media, we create a negative and destructive neural pathway where anything less than perfection is failure
- Practice compassion, respect, and inclusivity in your own thoughts and conversations!

We Are All...

Perfectly imperfect

Be Perfectly Imperfect

 Humility, compassion, vulnerability, and humour connect us all as complex human beings

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- If others see that we can laugh at our mistakes and accept imperfection in ourselves, they will be more likely to engage in self-compassion when faced with their own imperfections

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So *love yourself* already

The Looking Glass Foundation

- People suffering from eating disorders need a caring community of support to rely on – from the earliest intervention, to paths of recovery, to ongoing relapse prevention
- This is the community and the programming the Looking Glass Foundation is building!

The Looking Glass Foundation

- Residential Care at the Looking Glass Residence (MSP)
- Hand-in-Hand 1:1 Match Support (free)
- Individualized Support Service (free)
- Online Peer Support (free)
- Summer Camp (\$200*)
- Scholarships (free)
- Blogs, Social Media, and Events (free)
- Outreach and Recovery Networking (varies)

Resources

www.lookingglassbc.com

LGF mission, support programs, event registration, Blog, volunteering, online donations

www.keltymentalhealth.ca

Info and resources for parents, teachers, counsellors, youth, families... about ALL mental health, not just ED

www.nedic.ca

National Eating Disorder Info Centre. Stats, facts, research, campaigns, resources

Suggested Reading

- Life Without ED
 by Jenni Schaefer
- Goodbye ED, Hello Me
 by Jenni Schaefer
- Drawing from Within by Lisa D. Hinz
- Brave Girl Eating
 by Harriet Brown

- Intuitive Eating
 by Evelyn Tribole & Elyse Resch
- The Food & FeelingsWorkbook

by Karen R. Koenig

 Mothers, Daughters, and Body Image

by Hillary McBride

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