Eating disorders and adolescents

Summary

- Eating disorders are serious mental illnesses.
- Changes in food behaviours, depression or feeling unhappy with body shape and size are common risk factors for the onset of an eating disorder.
- Children learn by imitating, so parents, teachers and other adults can help prevent eating disorders through positive role modelling.

Until recently, eating disorders have been rare in younger children. Unfortunately this is no longer the case. Both the Westmead Hospital in Sydney and the Royal Children's Hospital in Melbourne have observed that eating disorder cases have increased substantially in the under-12 age group.

Often, an eating disorder develops as a way for an adolescent to feel in control about what's happening in their life. While people with eating disorders focus on food, weight and shape, there are nearly always underlying issues being masked by the eating disorder.

As well as addressing the behavioural aspects of the eating disorder, such as restrictive eating, binge-eating, or over-exercising, it is important that the underlying issues are also dealt with. For example, significant life events, such as a divorce or death in a family, might trigger an eating disorder and the adolescent may need counselling to help manage these difficulties, such as issues of loss or feelings of abandonment.

Symptoms of eating disorders
Symptoms that should always be investigated further include:

- rapid weight loss or weight gain
- changes in weight or shape
- changes in behaviour around food
- excessive physical activity
- feelings of unhappiness with body shape and size.

Types of eating disorders
The main types of eating disorder include:

- **anorexia nervosa** - characterised by restricted eating, loss of weight and a fear of putting on weight
- **bulimia nervosa** - periods of bingeing on high-kilojoule foods (often in secret), followed by attempts to compensate by over-exercising, vomiting, or periods of strict dieting. The bingeing is often accompanied by feelings of shame and being 'out of control'
- **binge eating disorder** - characterised by recurrent periods of binge eating (can include eating much more than normal, feeling uncomfortably full, eating large amounts when not physically hungry). Feelings of guilt, disgust and depression can follow binge eating episodes. Binge eating does not involve compensatory behaviours, such as for bulimia nervosa
- **other specified feeding or eating disorder (OSFED)** - feeding or eating behaviours that cause the individual distress and impairment, but do not meet criteria for the first three eating disorders.

Risk factors for eating disorders
We don't know why some older children (aged eight years and over), particularly adolescents, develop an eating disorder and others don't. However, many factors might influence an adolescent to develop an unhealthy eating pattern or to become fearful about gaining weight. These factors may be psychological, social or environmental, or

betterhealth.vic.gov.au
biological. Often, a combination of things may trigger an eating disorder in a vulnerable person.

**Psychological risk factors**
Personality factors that make a person more at risk of developing an eating disorder may include:

- low self-esteem
- perfectionism
- difficulties expressing feelings like anger or anxiety
- being a ‘people pleaser’
- difficulties being assertive with others
- fear of adulthood.

**Social or environmental risk factors**
Social or environmental risk factors in the development of an eating disorder may include:

- being teased or bullied
- a belief that high expectations from family and others must be met
- major life changes such as family break-up, or the accumulation of many minor stressors
- peer pressure to behave in particular ways
- a parent or other role model who consistently diets or who is unhappy with their body
- media and advertising images of the ‘ideal body size and shape as slim and fit
- a cultural tendency to judge people by their appearance.

**Biological factors**
Contributing biological factors may include:

- adolescence and its associated physical changes
- genetic or familial factors - for example, families that are overtly focused on food, weight, shape and appearance.

**Boys and girls experience eating disorders**
Eating disorders are more likely to affect females than males. However, about 25 per cent of cases in adolescents occur with males. Girls and boys can experience different social pressures about how they should look. Primary-school-age children are not immune to these pressures, and their attitudes and behaviours reflect adult concerns.

Like many adult females, some girls want to lose weight and be thin and, like many adult males, some boys want to lose body fat, but increase muscle mass. Some boys try to meet unrealistically thin ideal standards.

**Early warning signs of eating disorders**
Adolescents can become fussy about particular foods or lose weight for lots of reasons, but it is important to get any concerns checked by a health professional

Some signs that a young person might have an eating disorder are:

- rapid weight loss
- an intense fear of gaining weight
- denial of being hungry
- deceptive behaviour around food -- for instance, throwing out or hiding school lunches
- avoiding food and eating in social situations
- compulsive exercising and a need to be active all the time
- eating in secret
- cutting out particular food groups, such as meat or dairy products
- developing food rituals -- such as always using the same bowl, cutting food up into tiny pieces or eating very slowly.
behavioural changes -- such as social withdrawal, irritability or depression
sleep disturbance.

**Dieting increases the risk of developing eating disorders**

Dieting is common among adolescents. Eating disorders such as anorexia or bulimia nervosa can be triggered by weight loss dieting.

A person who crash diets (severely restricts calories for a period of time), substantially increases their risk of developing an eating disorder. Adolescents should not be encouraged to 'diet'.

**Parents and teachers can help prevent eating disorders**

Children are great imitators, so parents, teachers and other adults can play an important role to help prevent eating disorders and promote positive body image in young children.

**Foster a healthy relationship with food**

You can encourage older children and adolescents to develop a healthy relationship with food if you:

- Try not to label foods as 'good' or 'bad' - this sets up cravings and feelings of guilt when the 'bad' foods are eaten.
- Avoid using food as bribes or punishment.
- Accept that children are likely to have different eating habits from adults - for instance, adolescents may require more food more frequently during the day or may go through periods of liking or disliking particular foods.
- Do not crash diet and don't try to put your child on a diet.
- Allow your child to eat when they are hungry and stop when they are full. Don't force your child to eat everything on their plate.

**Encourage older children and adolescents to feel good about their bodies**

There are lots of ways to help your children feel good about their bodies, including:

- Show an acceptance of different body shapes and sizes, including your own.
- Make a positive effort to portray your own body as functional and well-designed.
- Demonstrate healthy eating and sensible exercise.
- Don't criticise or tease your children about their appearance.
- Encourage your children to 'listen' to their bodies and to become familiar with different physical feelings and experiences.
- Encourage sport and regular exercise to help maintain your child's healthy weight and foster their body confidence.

**Encourage self-esteem**

A strong sense of identity and self-worth is important to help older children and adolescents cope with life pressures. You can:

- Help them to develop effective coping strategies.
- Encourage them to express their needs and wants, to make decisions (and cope with the consequences) and to pursue things they are good at.
- Allow them to say 'no'. Encourage them to be assertive if they feel they have been mistreated.
- Help them develop a critical awareness of the images and messages they receive from television and magazines.

**Professional help**

If your older child or adolescent is preoccupied and unhappy with their body, or seems to be developing behaviours like restricting their eating or binge eating, then professional advice may be helpful. See your doctor for information and referral.

**Where to get help**

[betterhealth.vic.gov.au](betterhealth.vic.gov.au)
• Your GP
• Local community health centre
• Dietitians Association of Australia Tel. 1800 812 942
• Psychologist
• Eating Disorders Victoria Tel. 1300 550 236
• Butterfly Foundation for Eating Disorders Tel. 1800 33 4673

This page has been produced in consultation with and approved by:
Eating Disorders Victoria (EDV)

Content on this website is provided for information purposes only. Information about a therapy, service, product or treatment does not in any way endorse or support such therapy, service, product or treatment and is not intended to replace advice from your doctor or other registered health professional. The information and materials contained on this website are not intended to constitute a comprehensive guide concerning all aspects of the therapy, product or treatment described on the website. All users are urged to always seek advice from a registered health care professional for diagnosis and answers to their medical questions and to ascertain whether the particular therapy, service, product or treatment described on the website is suitable in their circumstances. The State of Victoria and the Department of Health & Human Services shall not bear any liability for reliance by any user on the materials contained on this website.

For the latest updates and more information, visit www.betterhealth.vic.gov.au