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 to 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 is 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 excessive 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. Adolescents may need counselling to help manage these difficulties, such as issues of loss or feelings of abandonment.

Early warning signs of eating disorders

Adolescents can become fussy about particular foods or lose weight for lots of reasons. It is important to get any concerns checked by a health professional.

Some signs that a young person might have an eating disorder and that should be investigated further include:

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

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 binge eating (often in secret), followed by attempts to compensate by excessively exercising, vomiting, or periods of strict dieting. Binge eating 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
• **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 afraid of gaining weight. These factors may be psychological, social, environmental or 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 overly focused on food, weight, shape and appearance.

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

Dieting is common among adolescents and normalised by society, but it is not a healthy behaviour and should not be considered a normal part of being an adolescent. Eating disorders such as anorexia nervosa or bulimia nervosa can be triggered by 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 go on a diet.
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-aged 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. Like many adult males, some boys want to lose body fat, but increase muscle mass. Some boys try to meet unrealistically thin ideal standards.

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 a reward, or for 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.
- Avoid going on diets and do not try to put your child on a diet.
- Allow your child to eat when they are hungry and stop when they are full. Do not force your child to eat everything that is 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 engage in physical activity for health and enjoyment.
- 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 health and fitness 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 that they are good at.
- Teach them that it is ok 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 social media.

Professional help for eating disorders

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 GP for information
and referral.

**Where to get help**

- Your **GP (doctor)**
- 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

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