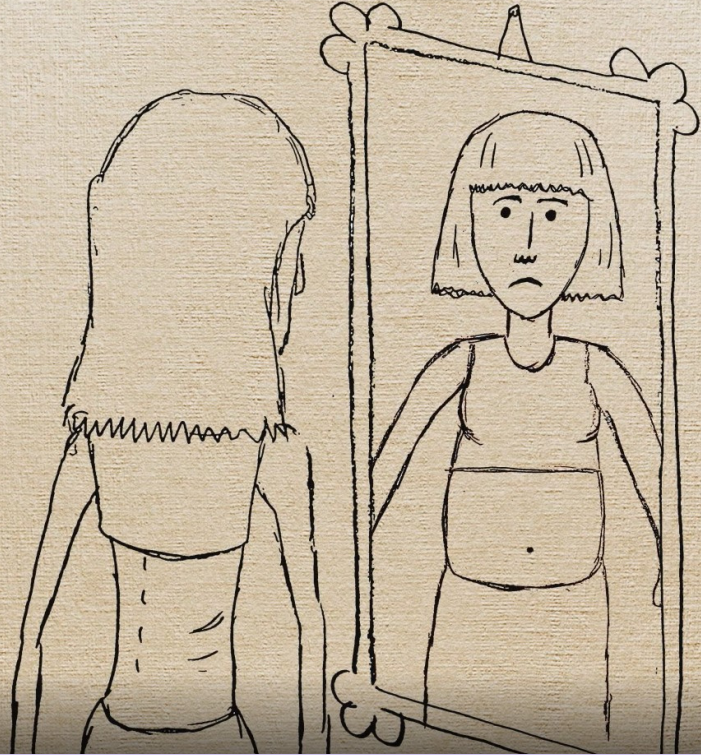




# Seed

EATING DISORDER SUPPORT SERVICE



# Eating Disorders

FACTS FOR SCHOOLS

Information to help  
school staff understand  
Eating Disorders and  
support pupils

# HOW BIG AN ISSUE?

**9%**

of the worldwide population are affected by Eating Disorders

**Over 3m**

people in the UK alone

**20%**

of sufferers die each year as a direct result of their illness or by taking their own life

**25%**

of sufferers are male

**100%**

everyone and anyone can develop an Eating Disorder

**12 yrs –  
20yrs**

the age at which sufferers are most likely to develop an Eating Disorder

**Female  
11–16 yrs**

the highest category of Eating Disorder sufferers

**85 pupils**

in an average sized secondary school in the UK

# What are Eating Disorders?



**They are  
about  
feelings NOT  
food!**

**Eating  
disorders can  
be fatal**

**They can  
cause serious  
harm both  
physically and  
emotionally**

**They are  
usually  
'triggered' in  
some way**

Eating Disorders are serious mental illnesses which affect people of all ages, genders, ethnicities and backgrounds.

Eating Disorders involve 'disordered eating' including:

- Restricting food intake
- Eating very large quantities of food at once
- Compensating for food eaten through purging, fasting or excessive exercise/drug use
- A combination of the above

Eating disorders are rarely about food.

The eating behaviour is often a coping mechanism or a way for the sufferer to feel in control.

# Three main types of Eating Disorder

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## Anorexia Nervosa

- People suffering from Anorexia reduce their intake of food to the point of starvation
- They evaluate themselves through body weight and shape and use the methods to avoid food intake at all costs
- Control is often a word used to explain their behaviours when in fact they may become so dangerously ill they lose control of everything

## Bulimia Nervosa

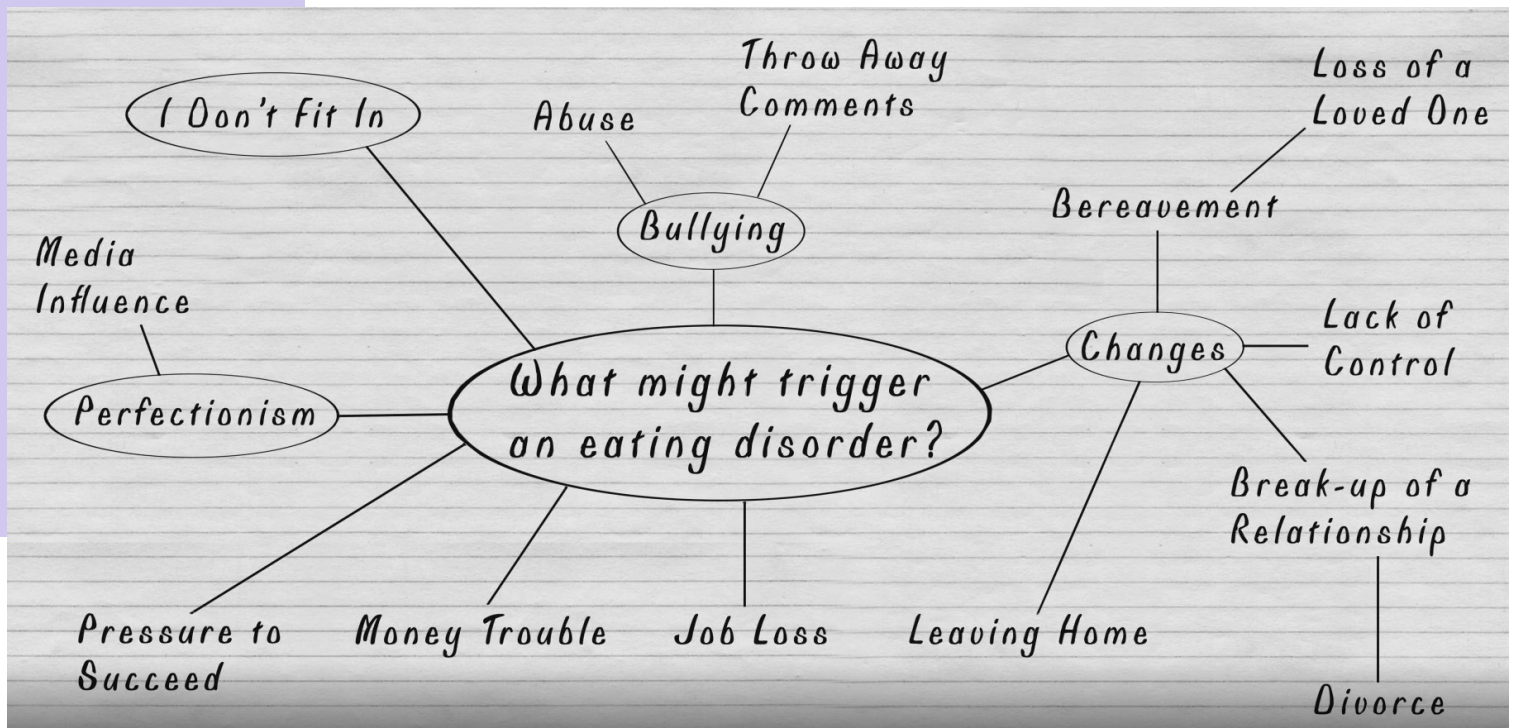
- People with Bulimia think about food 24/7
- They become caught in a cycle of eating large amounts of food (called the binge) and then rid themselves of that food by vomiting, laxative abuse or over exercise (called the purge)
- This leads to medical risk and health complications

## Binge Eating Disorder

- People with Binge Eating Disorder eat large amounts of food in a short period of time
- They tend to put on weight

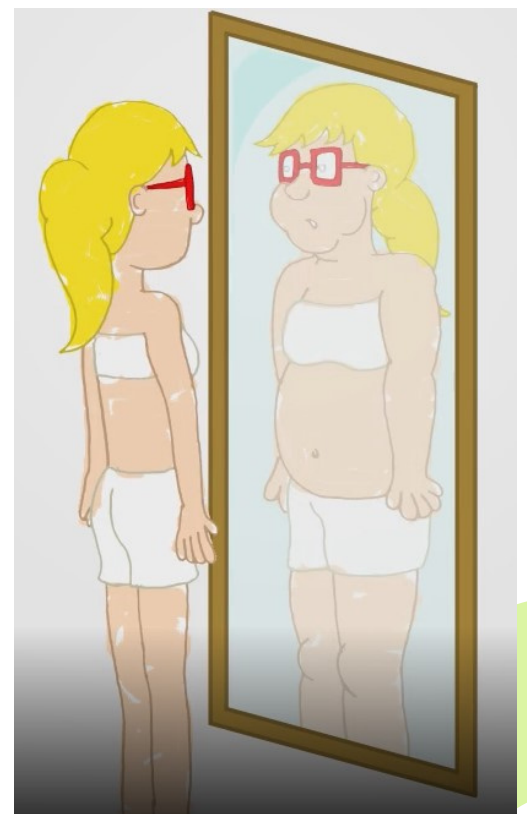


# What triggers an Eating Disorder?



Basically, anything at all that lowers a person's self-esteem can trigger the onset of an Eating Disorder including:

- Bullying at school
- Relationships
- Pressures of life in general
- Inability to fit in with peers
- Pressure to be perfect
- A diet that has gone to extremes
- A throw-away comment
- A bereavement or loss of a loved one
- Divorce
- Media influence - being slim is best!
- University
- Leaving home
- Loss of a job
- Abuse



# What might we notice?

**Remember - there can be physical and/or emotional signs. Recognising three or more may be a cause for concern**



There are numerous signs that might indicate someone has an Eating Disorder - some are physical and others are emotional:

**Attendance at school dropping?**

**Lacking the ability to concentrate in class?**

**Withdrawing socially or isolating from others?**

## **Anorexia - Physical:**

- Noticeable weight loss
- Fatigue
- Always feeling cold
- Poor hair condition
- Poor skin condition
- Not taking part in physical activities
- Skipping meals
- Avoiding eating with others
- Unwilling to attend school
- Absence of periods

## **Anorexia - Emotional:**

- Change in character
- Low moods
- Low self esteem
- Overall sadness
- Tearfulness
- Uncharacteristic outbursts
- Inability to concentrate
- Isolation
- Anti-social behaviour
- Pre-occupation with food
- Anxiety around food

## **Bulimia- Physical:**

- May be low in weight, but not always
- Poor hair/skin
- Eating large amounts of food
- Drinking large amounts of fluids with a meal
- Visiting toilet immediately after or during a meal
- Sores on knuckles
- Sore throat and mouth
- Arced front teeth (due to acid erosion)
- Swelling in cheeks (moon face)

## **Bulimia - Emotional:**

- Change in character
- Low moods
- Low self esteem
- Tearful
- Mood swings
- Isolation
- Withdrawing socially
- Fatigue
- Lack of concentration

# Weight vs State

Whilst an ED is a mental health illness,  
medical risks can occur very easily.

**1 in 5 sufferers die as a result of their illness!**



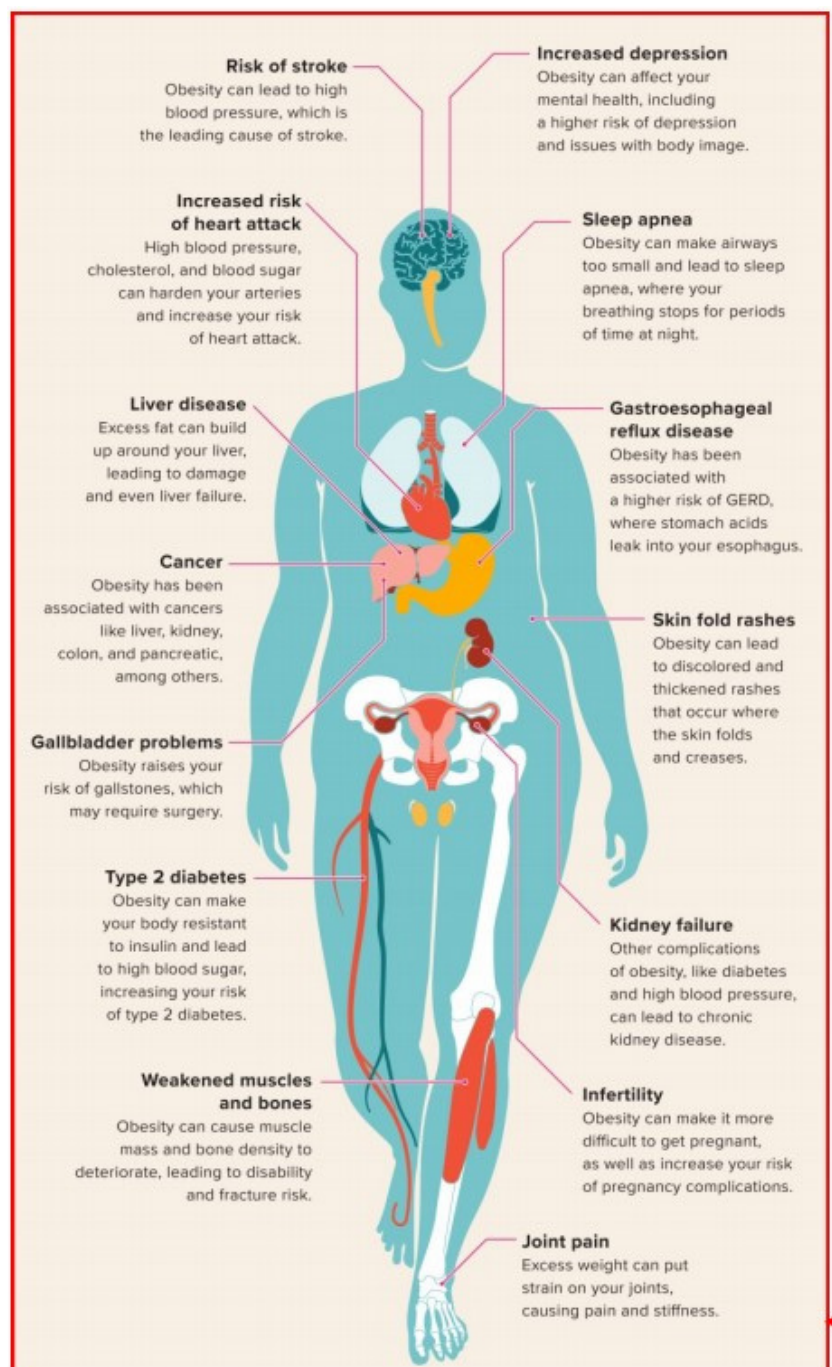
An Eating Disorder is a mental health illness. It is the underlying issues that cause the Eating Disorder in the first place but poor nutrition leads to serious medical risks.

**Body organs  
may become  
compromised**

**Brain capacity  
will be  
depleted**

**Depression  
will set in**

**Anxiety levels  
will be  
heightened**



**IT IS VITAL** that a sufferer is monitored according to the severity of their illness. Their GP has a duty of care to make sure their patient is safe and they are monitored regularly.

# What can we as a school do to help?

## **An Eating Disorder is a Safeguarding Issue**

**Schools have a duty of care to their pupils to make sure their needs are met.**

**Ensure staff are able to offer support, will listen and offer calm, rational information.**

**Recognise the ambivalence of the sufferer - the Eating Disorder is their 'friend' who will 'always be there for them' and who they can 'rely on'.**

**It is likely that their friends will struggle to know the 'right' thing to say so may use avoidance instead.**

If you are recognising an overall change in a person's personality, that they have become withdrawn, tearful, have prolonged absences or are academically struggling etc., then this may be the time to have a word with that person and, in some cases where safeguarding is an issue, contact the parents and inform the school nurse of your concerns.

Remember the 4 C's - Calmness, Compassion, Consistency & Confidentiality

It is not what you say but the way you say it! Posture, voice, tone, gesture, eye contact, personal space are all part of positive communication. It is important to see the person for who they are not as the illness. You need to connect with them NOT the Eating Disorder.

Referral may be necessary through the Child and Adolescent Mental Health Services (CAMHS). A referral is usually via the person's GP but a school nurse can also make that referral.

You cannot be expected to get everything right - Eating Disorders are recognised as being very complex illnesses to treat.

Early intervention is key  
Recovery is possible but can take 2 - 7 years



# Useful resources and contacts



EATING DISORDER SUPPORT SERVICE

**seedeatingdisorders.org.uk**

**Advice Line: 01482 718130**



**Tel:**  
**0808 801 0677**

**beateatingdisorders.org.uk**



**nhs.uk/conditions/  
eating-disorders**

"I am buzzing about this toolkit, it is fantastic and I have already trained four members of staff to use this in their school. I can't praise it enough."

John McBride, Chair of Governors Sandwell Community School

"I highly recommend this resource. I have used it for years 9, 10, and 11. All pupils and myself found the package to be very educational. The pupils were very positive and it led to lots of discussion. It depicted the subjects of Anorexia Nervosa and Bulimia Nervosa in an informative and straightforward way that the pupils could understand..."

Kerry Whitfield, Newland School for Girls

## The **Educational** TOOLKIT

**Helping educators teach responsibly and confidently about eating disorders, well-being and body image.**

We're excited to introduce you to the Eating Disorder Educational Toolkit – a valuable, easy to use resource developed specifically to enable schools to teach responsibly, confidently and sympathetically about eating disorders, body image and well-being.

Separate versions for Primary and Secondary schools have been created to ensure content is relevant as well as being age and subject specific. The Educational Toolkits are designed for pupils in Key Stages 2 (Primary), 3 and 4 (Secondary).

The Educational Toolkit comprises 3 main lessons followed by 3 further optional consolidation and extension lessons to reinforce pupils' understanding of the key issues.

Each lesson is clearly linked to statutory National Curriculum objectives, including the new Relationships Education, Relationships and Sex Education and Health Education Frameworks.

The lessons lead with video content, with breaks for discussions and activities, and a range of printable resources that are included within the User Guide.

<https://toolkit.seedeatingdisorders.org.uk/>