THE WHOLE STUDENT
INFLUENCES FROM THE PERSONAL/SOCIAL DOMAIN
As many as 10 million females and one million males in the United States are fighting a life-and-death battle with an eating disorder, experts estimate. Affecting both physical and mental health, eating disorders are complex illnesses with biological, genetic, psychological, social and developmental roots.

As a school counselor, you need to be familiar with the different types of eating disorders, signs and symptoms, early intervention, and preventative education. Eating disorders have the highest mortality rate of any mental disorder, and you are in the unique position to detect early onset and guide the student and his or her family towards life-saving treatment.

**DEFINING EATING DISORDERS**

The development of an eating disorder never has just a single cause. Rather, underlying causes involve interactions of biological, psychological, and social factors unique to each person. People are especially vulnerable to developing eating disorders during transition periods, such as moving from middle to high school. Clearly, these are not challenges that body shape or size can solve, but mastering body shape and size can become the go-to strategy for trying to cope with emotions and psychological issues, as eating disorders are often a vehicle to express control when the rest of one’s life feels out of control.

The most common eating disorders are anorexia nervosa, bulimia nervosa, and binge eating disorder.

Anorexia (clinically known as anorexia nervosa) is self-imposed starvation. Adolescents with anorexia are often profoundly dissatisfied with their body image and usually express a strong desire to lose weight. One of the key features of this disorder is denial. Although obsessed with food, they continually deny their hunger and are not able to recognize that they are physically and emotionally fragile.

Bulimia (clinically known as bulimia nervosa) is the repeated cycle of out-of-control eating followed by some form of purging. The purging associated with bulimia may be self-induced vomiting, excessive use of laxatives or diuretics, or obsessive exercising. Adolescents with bulimia are preoccupied with their shape, weight, and body image as a source of self-esteem.

Binge eating disorder (also known as compulsive overeating) is uncontrolled eating or bingeing followed by periods of guilt and depression. A binge is marked by the consumption of large amounts of food, sometimes accompanied by a pressured, “frenzied” feeling. Unlike bulimia nervosa, binge eating disorder does not involve purging, excessive exercise, or other compensatory behaviors.

These disorders are serious and potentially life-threatening illnesses that affect every body system. Several of the most common risks include digestive disorders, osteoporosis, and dental and esophageal erosion. Electrolyte imbalance—a common symptom—can lead to cardiac failure, even in people who are not underweight. Many physical symptoms resolve with treatment; others can be irreversible. Early identification and treatment increases the chances for full medical and psychological recovery.

**SIGNS & SYMPTOMS**

Below are some of the warning signs for the different eating disorders. A student may have symptoms of more than one diagnosis or may not fully meet the diagnostic criteria for one specific disease but may still need help.

**Anorexia**
- Thin and continues to get thinner
- Diets even though not overweight
- Distorted body image
- Loss of or thinning hair
- Excessively discusses food, cooking, or dieting

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Excessively exercises, even when tired or injured
Overemphasis of the importance of body image to self-worth

**Bulimia**
- Engages in binge eating
- Uses the bathroom frequently after meals
- Engages in vomiting, laxative or exercise abuse
- Reacts to stress by overeating
- Experiences frequent fluctuations in weight
- Overvalues weight as a basis for self-esteem
- Calluses on back of hands

**Binge eating disorder**
- Eats large amounts of food when not physically hungry
- Turns to food as a way of coping with feelings
- Eats rapidly or excessively throughout the day
- Eats to the point of feeling uncomfortably full
- Often eats alone because of shame or embarrassment
- Shows signs of depression and withdrawal and has extreme feelings of guilt and shame after eating
- High blood pressure

Other signs that you may notice at school could include social withdrawal, irritability, grade changes, and repeated absences.

**EARLY INTERVENTION**
Research shows the sooner an eating disorder is diagnosed and addressed, the more likely it is that treatment will lead to sustained recovery. Don’t shy away from expressing your concerns, but recognize that a trusting relationship will make this easier.

Curb your impulse to comment on weight or appearance; even alarmingly underweight students are sensitive to any talk about their weight or shape and this may derail your interaction. Express concerns about general well-being first and then name the behaviors that trouble you. For example: “I’ve noticed you don’t seem happy and I’m concerned something’s bothering you. You seem tired and distracted. I haven’t seen you at lunch for a while. Have you been having some problems eating?”

Remember, denial and shame accompany eating disorders. Remain non-judgmental, avoid pressing too hard, leave the door open for future conversations, and continue to be aware of the student’s behavior at school.

Depending on your level of concern, and taking into account both regulations and professional ethics, you should consider contacting parents. With full-blown eating disorders, the stakes are too high to keep quiet.

**TREATMENT**
When deciding on the best course of treatment, parents and referring healthcare professionals should select a program or combination of programs that specialize in treating eating disorders and allow the student to thrive. As a counselor, you should
- Be aware of local providers and make referrals to therapists, psychiatrists, and nutritionists.
- Be familiar with the different levels of treatment: Inpatient or residential facilities are the most comprehensive programs with 24-hour care. Day programs provide intense structure and support during the day and allow the patient to return home in the evening. Intensive outpatient services offer a structured environment for students to seek treatment in the evenings. Some treatment centers, such as The Renfrew Center, offer all levels of care within their network, allowing the patient to easily transition from one level to another.
- Coordinate educational needs with providers when appropriate, particularly if a student requires residential or day treatment and will be away from school for a time.

**RECOVERY**
Recovering from an eating disorder is a process. When the student is at school, you can help facilitate their recovery by
- Providing the student a safe environment (perhaps the nurse’s office) to eat lunch and snacks.
- Allowing frequent access to in-school support services while not enabling school avoidance.
- Consider implementing a 504 Plan to help a student meet academic goals if frequent absences for treatment are required. For example, it may help to decrease course load, minimize homework when a student attends an evening treatment program or extend time for testing if test anxiety exists.

Furthermore, school counselors should also be involved in providing preventative education.
- Educate teachers and staff about eating disorders and the importance of promoting healthy body image. Some schools have used in-services or faculty meetings.
- Help nurses use discretion in discussing weight with students. If your school requires BMI notices, people of all shapes and sizes need to be approached with sensitivity.
- If resources are available, consider starting a student group to explore issues related to appearance, body image and self-esteem. Publicize outside groups and programs of interest, such as National Eating Disorder Awareness Week held each February.

Eating disorders can be a matter of life or death. Knowing the signs and symptoms and providing early intervention can give students the opportunity to fully recover and lead a successful, eating disorder free life.

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