

SYMPTOMS/BEHAVIOURS

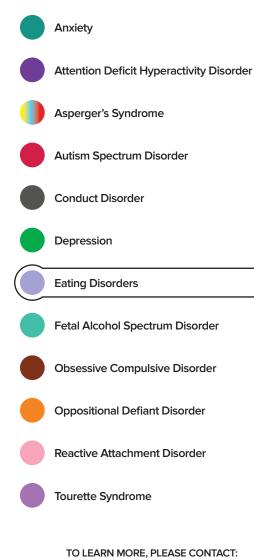
- Perfectionist attitude
- Withdrawn
- Anxiety, irritability and lethargy
- All or nothing attitude
- Mood swings, impaired concentration
 and depression
- Self-deprecating statements
- Fainting spells, dizziness, headaches
- Hiding food and avoiding snacks or activities involving food
- Frequent trips to the bathroom

EDUCATIONAL IMPLICATIONS

Students with Eating Disorders may appear like model students, often the leader of the class and very self-demanding. When students with Eating Disorders are preoccupied with body image and controlling their food intake, they may have short attention spans and poor concentration, resulting in poor academic performance. These symptoms may also be due to a lack of nutrients from fasting and/or vomiting. Often, the student will lack energy and drive to complete assignments or homework.



SERIES ON MENTAL HEALTH AND WELL-BEING



Rainbow District School Board Gord Ewin Centre for Education 275 Loach's Road Sudbury, ON P3E 2P8 Phone: 705.523.3308 rainbowschools.ca

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EATING DISORDERS



ABOUT EATING DISORDERS

On a daily basis, we are surrounded by messages that impact the way we feel about our bodies. For some, a poor body image is a sign of a more serious problem known as an Eating Disorder. Of the three types of Eating Disorders, anorexia nervosa and bulimia nervosa are the most common.

Often seen in teens and young adults, younger children are increasingly diagnosed with a form of Eating Disorder. Some as young as four and five are expressing the need to diet and it is estimated that 40 per cent of nine-year-olds have already dieted. Eating Disorders are not limited to females, as studies show between 10 and 20 per cent of adolescents with Eating Disorders are males.

Individuals with anorexia nervosa fail to maintain minimally normal body weight. For fear of weight gain, they engage in abnormal eating (food restriction) and (excessive) exercise habits and their perception of their body shape and size is significantly distorted. Menstruation may stop for teens battling anorexia, which could lead to similar bone loss suffered by women experiencing menopause.

Adolescents who have Eating Disorders are obsessed with food and their lives tend to revolve around body weight and food. Youth with bulimia tend to binge eat, where they compulsively consume large amounts of food within a short period of time. To avoid weight gain, they engage in inappropriate compensatory behaviour, including fasting, self-induced vomiting, excessive exercise, and the use of laxatives, diuretics and enemas. As a result, youths with Eating Disorders are at risk for alcohol, drug abuse and depression.

Athletes such as wrestlers, dancers or gymnasts may fall into disordered eating patterns in an attempt to stay thin or make weight.

An individual with an eating disorder may face serious health problems and, in extreme cases, death without medical intervention. If you suspect a student may be suffering from an eating disorder, refer the student immediately for a mental health assessment.

INSTRUCTIONAL ACCOMMODATIONS AND CLASSROOM STRATEGIES

- Stress acceptance in the classroom. Successful people come in all shapes and sizes.
- Watch what you say. Comments like "you look terrible," "what have you eaten today?" or "I wish I had that problem" are often hurtful and discouraging.
- Stress progress, not perfection.
- Avoid pushing students to excel beyond their capabilities.
- Avoid high levels of competition.
- Reduce stress where possible by reducing assignments or extending deadlines.



Resources:

Eating Disorders Resources/Gurze Books: www.gurze.net

National Association of Anorexia Nervosa and Associated Disorders: www.anad.org (hotline counseling, referrals, information and advocacy)

National Eating Disorders Association: www.nationaleatingdisorders.org

How Did This Happen? A Practical Guide to Understanding Eating Disorders for Coaches, Parents and Teachers, by the Institute for research and Education Health System Minnesota, 1999.

Public Health Agency of Canada