Eating Disorders: Information for Carers

This information is intended to help carers understand the process of change an individual recovering from an eating disorder might go through and provides tips on how to support their recovery.

Functions of the Eating Disorder

Individuals with eating disorders often experience conflict within themselves when they attempt to change their behaviours as there are both positive and negative aspects to their symptoms. This internal conflict can result in denial of the disorder, secrecy, lack of concern for physical symptoms, defensiveness or hostility.

For individuals with eating disorders, positive aspects of the eating disorder may include:

- Emotional: sense of security, comfort and routine;
 a way of managing difficult emotions
- Psychological: sense of mastery or achievement
- Social: increased attention or caregiving; a way of communicating with others
- Avoidance: avoid making difficult decisions or facing difficult situations; avoiding developmental challenges (e.g. puberty, sexuality)
- Identity: feeling special or unique
- Physical: e.g. increased endorphin production

Willingness and Resources

Change requires both a willingness to do things differently and the resources or skills to do so. Many factors affect a person's willingness to make changes, including: shame and fear; physical effects of starvation on the brain (which can affect emotion regulation and the individuals understanding of their condition); and depression (which is associated with hopelessness and low motivation). Therapy is often required to develop the resources to initiate and maintain lasting change.

The Stages of Change

It may be helpful to think about the stage of change your loved one is experiencing (DiClemente & Prochaska, 1998). People move back and forth between these stages over treatment and may even change within an hour or a day

- Pre-contemplation: "Not ready to change" -
- Contemplation: "Thinking about change" -
- Preparation: "Getting ready to change"
- Action: "Ready, Set, Go"
- Maintenance: "Hanging in there"
- 'Relapse': setbacks are a normal part of recovery.

Tips for Effective Communication

Communication is key to supporting a person with an eating disorder and can be improved by considering:

- Timing: allocate time for discussion when you can sit down without distraction
- Language: Use "I feel..." statements. e.g. "When you do... I feel upset" rather than "you make me upset"
- Body language: open stance, arms uncrossed, facing your loved one
- Voice: warm tone, slow pace, moderate volume
- Affirmation: don't just focus on the outcome, also comment on strengths, effort, and intentions
- Avoid comments about food, eating, appearance

The "LESS is More" Principle

- Listen carefully
- Empathise step into their shoes
- Share activities that are not food related
- Support provide a warm and loving environment

Setting and Maintaining Boundaries

Family or household rules are often disrupted by an eating disorder and may need to be re-established:

- Prioritise rules that are important e.g. hospital readmission if health deteriorates, eating dinner together as a family
- Ensure rules are clear to everyone in the family
- Be firm, consistent, and compassionate
- Notice and praise adherence to the rules
- Be compassionate when a rule is broken

The Importance of Self Care

You can only effectively help your loved one if you look after your own well-being:

- Recognise when you need to take time out
- Model your ability to sit with uncomfortable emotions e.g., "my emotions are too intense for me to think clearly at the moment. Let's come back to it later"
- Make time for yourself, family, friends
- Try not to let the eating disorder take complete charge of your life or routines

Seeking Help

- Encourage your loved one to get professional help. If your loved one is a child, you must insist on treatment
- Seek life-saving treatment for anyone in danger

For more information, visit: http://www.cci.health.wa.gov.au/

