

Eating

Disorders

Awareness

Week

March 10-15

Listen  
to  
your  
body.

Enjoy  
your  
own  
style.



# What are Eating Disorders?

The *eating* in eating disorder refers to a set of eating habits, weight control practices and attitudes about weight and body shape. The term *disorder* indicates that the eating behaviors and attitudes lead to imbalances in psychological and physiological well-being. While the vast majority of individuals with eating disorders are women, there is growing evidence that eating disorders are also a serious problem for men.

## Anorexia Nervosa (AN)

is characterized by self-starvation and dramatic weight loss. An all-consuming fear of becoming fat causes food, calories, weight and weight management to dominate the person's life. It is a serious illness with both physical and psychological components.

## Bulimia Nervosa (BN)

is characterized by uncontrolled binge eating followed by purging (vomiting, use of laxatives, diet pills, diuretics, excessive exercise or fasting). BN is usually accompanied by frequent weight fluctuations and becomes a compulsive cycle that is difficult to break. For some it seems the ideal solution to coping with the pressure of school and socializing (which often requires eating and drinking alcohol) and the pressure to remain thin.

The majority of people will find that their eating behaviors do not quite fit AN or BN, yet their eating attitudes and behaviors may not be centered on health either. Depending on how far from healthy eating one strays, s/he will experience differing levels of psychological and/or physiological imbalance.

# Causes

Eating disorders arise from a combination of factors. Feelings of inadequacy, depression, anxiety, loneliness and troubled family and personal relationships may contribute to the development of an eating disorder. American culture places great emphasis on the idealization of thinness and the “perfect body.” Striving to meet these expectations often is a contributing factor as well.

Furthermore, once started, eating disorders are self-perpetuating. Dieting, bingeing and purging are unhealthy strategies used by some individuals—to avoid certain events or feelings or to feel more in control of their lives. In reality, when using these techniques, physical health, self-esteem and a sense of competence and control may actually be undermined. An individual with an eating disorder often believes that rigid dietary control will lead to happiness. On the contrary, a vicious cycle of ritualistic behaviors with an intense focus on food is generally the end result.

# Do I have a problem?

One study of U M students showed that approximately 18% of freshman women had an eating disorder. If you feel that food or weight is playing a big part in your life, use these questions to help assess your behavior...

1. A day rarely passes that I don't worry about how much I eat.
2. I am terrified about becoming overweight.
3. I weigh myself often.
4. I become anxious prior to eating and guilty afterward.
5. I eat when I am nervous, anxious, lonely, upset or depressed.
6. After I eat, I think about ways of getting rid of or burning up calories.
7. I often feel bloated or uncomfortable after eating.
8. I feel terrible about myself if I don't do a lot of exercise every day.
9. I go on eating binges and can't stop eating until I feel sick.
10. I have forced myself to vomit (or tried) after eating.
11. I believe that being in control of food shows other people that I can control myself.
12. Food controls or is beginning to control my life.

# Prevention

There is no sure way to prevent an eating disorder, yet there are steps you can take to help yourself and others to develop healthy attitudes about body image, food and eating.

- Associate with people who make you feel good about yourself.
- Do not promote the erroneous belief that thinness and weight loss are great, while body fat, weight gain, or being overweight, are horrible or indicate immorality and sickness.
- Avoid categorizing foods as “good/safe” vs. “bad/dangerous”.
- Learn about the dangers of trying to alter your body shape through dieting. Dieting is not a harmless action or a necessary accompaniment to a healthy life. It may be associated with binge eating, irritability, depression, fatigue and paradoxically, long-term weight gain.
- Follow sensible eating plans that incorporate sound nutrition and exercise principles. Very low-calorie diets (less than 1200 calories/day) result in a decreased metabolic rate. Obtaining a healthy weight is often a matter of living and eating differently - not necessarily less. If you are concerned about your eating, see the dietitian at UHS for guidance (no cost for enrolled students).
- Remember that weight loss is not the solution to problems with self-esteem.
- Be alert to crises in your own life and in others'. Learn to confront these situations in ways that do not focus on food or weight and are not abusive to your health.
- Learn to be good to yourself and comfortable with who you are. A counselor can help you in this regard.  
**(CAPS provides services at no cost to students.)**

# Treatment for Eating Disorders

Eating disorders are treatable, particularly if they are identified early, managed by a team of trained professionals and supplemented by support groups. Treatment should be centered around emotional, physical and nutritional needs and therefore is best accomplished by a team approach. Professionals specializing in medical issues, psychotherapy, nutrition counseling and support groups for individuals with eating issues are all available on or very near campus. Many of these services are available to UM students at no charge or on a sliding fee scale (refer to back of pamphlet).

- Fatigue
- Weakness
- Dehydration
- Dizziness or fainting
- Menstrual irregularities
- Chronic kidney problems
- Decreased heart rate & blood pressure
- Bloating when eating or trying to refeed
- Esophageal reflux, esophageal damage (*"heart burn"*)
- Stomach enlargement/rupture from bingeing
- Irregular heart rhythms from electrolyte imbalance
- Intestinal problems from starvation, laxative abuse
- Constipation from starvation, dehydration, purging
- Damage to heart muscle from starvation &/or ipecac toxicity
- Tooth enamel erosion & increased cavities from stomach acid

**physical problems associated with disordered eating**

# U M Resources

## **1. University Health Service**

207 Fletcher Street

734-764-8325 to make an appointment

734-763-1320 for printed materials

[www.uhs.umich.edu](http://www.uhs.umich.edu)

## **2. Counseling & Psychological Services**

3100 Michigan Union

734-764-8312

[www.umich.edu/~caps/](http://www.umich.edu/~caps/)

## Recommended Reading

***Overcoming Binge Eating***, Christopher Fairburn

***Bodylove***, Rita Freedman, Harper Collins

***Bulimia: A Guide to Recovery***

Lindsey Hall & Leigh Cohn, Gurze Books, 1992

***Making Peace with Food***, Susan Kano, Harper Collins.

***When Food is Love***, Geneen Roth, Dutton, NY, 1991

***Breaking Free from Compulsive Eating***

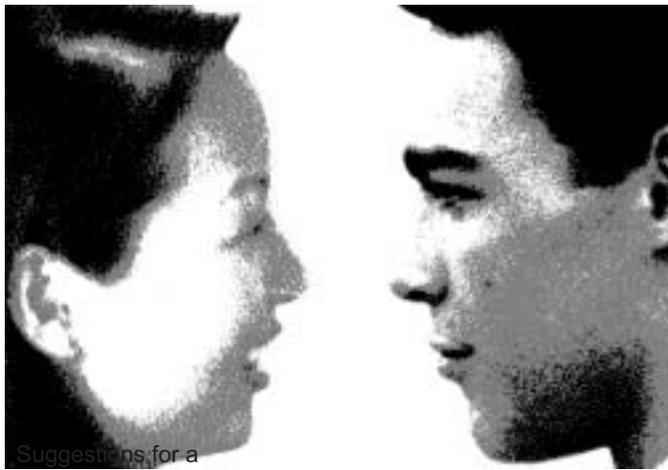
Geneen Roth, Penguin, USA

***Surviving an Eating Disorder: Strategies for Family***

***and Friends***, Michelle Siegel, Judith Brisman & Margot Weinschel, Harper Collins Publishers, 1998

***The Beauty Myth***

Naomi Wolf, Bantam



Suggestions for a

## *Caring Confrontation*

An initial discussion with someone about a problem with an eating disorder should occur when the person is alone. It is difficult to talk about these issues and denial of the problem is very common. While it is painful to know that someone you care about is hurting her/himself, you are not responsible for making sure that s/he seeks help. You can only provide information and support. Most people who have had these problems say that it takes several "caring confrontations" before they are able to see the impact of their behavior on themselves and others. While your attempt may not have immediate results, you may plant an important seed.

**Plan your discussion before you begin.** Choose a time when you are not likely to be interrupted and outline the major points you want to make. If you feel you can better express yourself in a letter, write one. You can talk about the letter after your friend has had time to think about it.

**Know the basic facts regarding the behavior you are confronting.**

**Be simple and direct.** Proceed openly and smoothly. Rushed encounters of any type are not conducive to increased awareness.

**Talk about how you have been affected** by the person's behavior. Share how this makes you feel.

**Talk about specific behaviors**, not values. Pushing your own values will only alienate the person and cause her/him to become defensive.

**Check your anger.** Direct it at the behavior NOT the person. Communicate this distinction to the person.

**Show you care!** At every available opportunity, communicate your interest in the person and ask clarifying questions: How do you view your current behavior? How do you feel about this situation?

**Maintain the offensive.** Don't become defensive about your behaviors if you have issues with food or body image for example.

**Stick to the issues.** Don't let the person bring in a lot of outside circumstances and rationalizations.

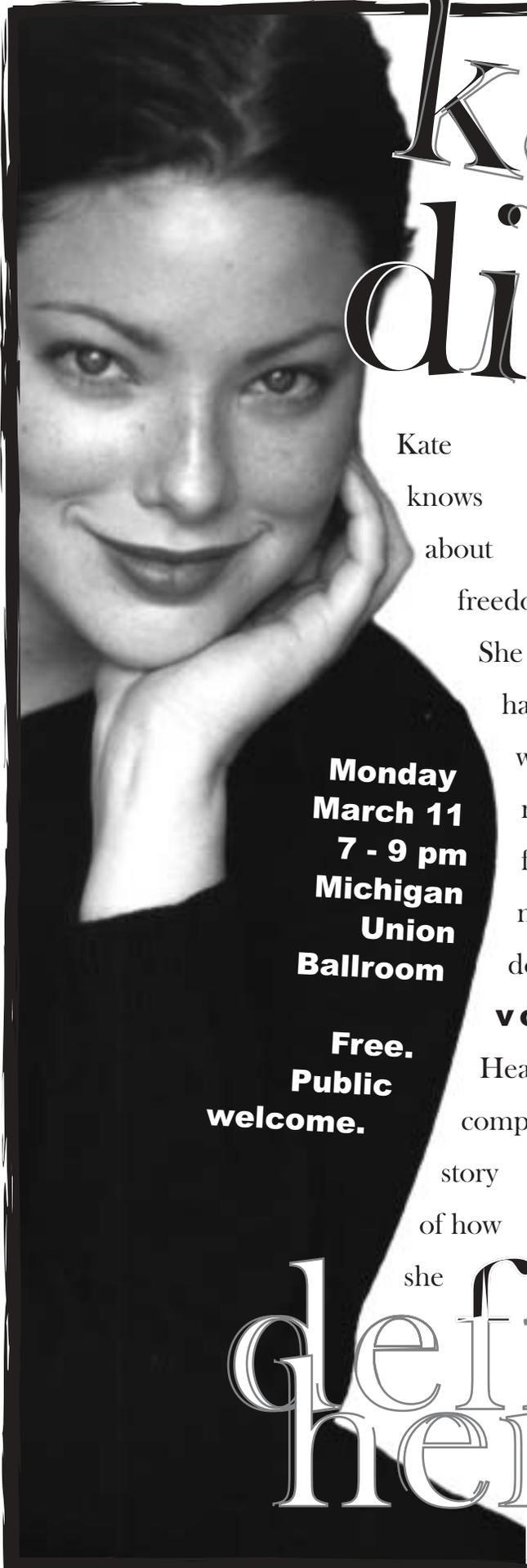
**Be careful relating personal experiences.** Be sure the focus of the conversation doesn't switch to your experiences and how you handled your problem. Remember, people handle experiences in different ways.

**Avoid "I told you so"** comments in confrontations.

**Convey** that your discussion is only an initial step; there are caring professionals who can provide help.

**Ask** what the person needs to change behaviors.

**Provide referral information** for the person to read later. Materials are available in Suite 2110, UHS.



# kate dillon

Kate  
knows  
about  
freedom.

She  
has  
what  
most  
fashion  
models  
don't - **a  
voice.**

Hear the  
compelling  
story  
of how  
she

# defines herself

**Monday  
March 11  
7 - 9 pm  
Michigan  
Union  
Ballroom**

**Free.  
Public  
welcome.**

# Special Events

## Eating Disorder Awareness Week 2002

### Sunday, March 10

- **DEFINING BODY IMAGE:**  
an Interactive Exhibition and Time line  
2 locations: Michigan Union and Pierpont Commons (runs through 3-15)
- **THE FEMALE BODY, MEDIA AND SOCIETY:**  
Confronting a Social Epidemic  
Interactive presentation by Alison Brzenchek, MSW, University Health Service  
Michigan Union, Pond Room 7-9 pm

### Monday, March 11

- **KATE DILLON**  
Presentation by this dynamic fashion model. Michigan Union, Ballroom 7-9 pm

### Tuesday, March 12

- **"I AM NOT THE AVERAGE GIRL ON VIDEO"**  
Body Workshop by Stacey Pearson, Ph.D., Counseling & Psychological Services  
Michigan Union, Pond Room 7-9 pm

### Wednesday, March 13

- **EATING DISORDERS: Signs, Symptoms & Support**  
Panel discussion by the Center for the Education of Women  
300 East Liberty, CEW Office 12-1 pm
- **HELP! Someone I know has an eating disorder**  
Presentation by Wendy Campbell, Psy.D., Counseling & Psychological Services  
Michigan Union, Pond Room 7-9 pm

### Thursday, March 14

- **SPEAK OUT:** Students in recovery from eating disorders share their stories.  
SPEAK, a student organization  
Hale Auditorium in Davidson Hall (UM Bus. Sch.)  
701 Tappan 7-9 pm

**A schedule of events is also available on line. Please visit:**

[www.uhs.umich.edu](http://www.uhs.umich.edu)

**Events are free and open to the public**

