

PARENTS & CARERS

1. Understanding Eating Disorders

- What eating disorders are (anorexia, bulimia, binge eating disorder, ARFID, OSFED).
- Common myths and misconceptions.
- Signs and symptoms to look out for (physical, emotional, behavioural).

2. The Parent's Role

- Why parents are not to blame.
- The power of modelling healthy attitudes toward food, body, and self-worth.
- Staying supportive without judgment.

3. Communicating with Compassion

- How to talk about food and body without shame.
- What *not* to say (e.g., avoiding comments on weight, appearance).
- Active listening and validating feelings.

4. Supporting Recovery at Home

- Encouraging professional treatment and teamwork with providers.
- Creating a supportive mealtime environment.
- Balancing patience and boundaries.
- Handling relapses or setbacks with empathy.

5. Caring for the Whole Child

- Addressing underlying issues (anxiety, depression, trauma, perfectionism).
- Promoting resilience, self-esteem, and identity beyond body image.
- Supporting social connections and activities outside of food/exercise.

6. Caring for Yourself as a Parent

- Coping with fear, guilt, or frustration.
- Preventing caregiver burnout.
- Building your own support system.

7. Practical Tools and Resources

- Crisis signs and when to seek immediate help.
- Finding qualified treatment providers.
- Recommended books, websites, and parent support groups.

8. Hope and Recovery

- Emphasising that recovery is possible.
- Stories or examples of resilience.
- Maintaining hope through setbacks.

A Parent/Carer's Guide to Supporting Your Child with Disordered Eating or an Eating Disorder

1. Understanding Eating Disorders

Eating disorders are serious mental health conditions that affect both the body and the mind. They are not a lifestyle choice, a phase, or simply "about food." At their core, eating disorders often reflect deep struggles with emotions, self-worth, or control.

Common types include:

- **Anorexia Nervosa** restricting food intake and often accompanied by an intense fear of gaining weight.
- **Bulimia Nervosa** cycles of binge eating followed by behaviours such as vomiting, laxative misuse, or over-exercising.
- **Binge Eating Disorder (BED)** recurrent episodes of eating large amounts of food in a short time, often linked to distress or shame.
- Avoidant/Restrictive Food Intake Disorder (ARFID) highly selective or restricted eating, often not related to body image, but due to sensory sensitivity, fear of choking, or lack of

interest in food.

• Other Specified Feeding or Eating Disorders (OSFED) – when someone experiences disordered eating patterns that don't fit neatly into one diagnosis, but are still serious and require support.

Key things to remember:

- Eating disorders can affect people of all genders, ages, sizes, and backgrounds.
- They are medical as well as psychological illnesses.
- Early intervention can make a big difference in recovery.

2. The Parent/Carer's Role

Parents often worry they have caused the problem – but eating disorders are complex and usually arise from a mixture of genetic, psychological, and social factors. Blame is not helpful; instead, focus on the influence you *can* have now.

*The most important thing we can do as parents in helping our child is to heal our own relationship with food/body image. Without meaning to, our own relationship with food can seriously impact the eating disorder. *

We should not be openly dieting, demonising food groups, commenting on food choices, commenting on our own food choices, commenting on our own bodies or the bodies of others' at all.

Unhelpful comments-

- 'I am trying to be "good" around food.' Food is not inherently good or bad. All food, in moderation, has a place in our lives. People with a disordered relationship with food often have a cognitive distortion/thinking style called 'black and white thing/all or nothing thinking'. The good/bad approach to food perpetuates this thinking style and is deeply unhelpful in recovery.
- 'I am trying to be "healthy" today.' For someone struggling with disordered eating, food choices are often tied up in fear, guilt, or comparison. A person living with anorexia, bulimia, binge eating disorder, or another eating difficulty may even see a salad as an "unhealthy" choice if it reinforces restrictive or obsessive patterns. This is why it's important to avoid labelling foods as "good" or "bad." Such labels can fuel shame and intensify the cycle of disordered eating. Instead, we can remind ourselves and our children that all foods have value, all foods can fit, and every food has a place in a balanced relationship with eating.
- 'You have inspired me to lose weight.'- Comments such as this one, or any remarks about someone's body, should be avoided. This includes praise for either weight loss or weight gain. Even well-intentioned compliments can reinforce harmful thinking patterns and place unhealthy focus on appearance. When we praise changes in someone's body, we send the message that their worth is tied to their size or shape. For a child or young person struggling with disordered eating, this can deepen the cycle of comparison, restriction, or over-control. Instead of focusing on weight or looks, it's far more helpful to

praise qualities like resilience, kindness, creativity, or courage – things that truly reflect who they are beyond appearance.

Your role includes:

- Offering consistent support being present, patient, and reliable.
- Creating a safe home environment reducing diet talk, criticism, or pressure.
- **Modelling healthy behaviours** showing balanced attitudes towards food, exercise, and body image.

Remember: you cannot "fix" an eating disorder on your own, but your support can be a vital foundation for recovery.

3. Communicating with Compassion

The way you talk about food, weight, and health matters. Children and young people with eating disorders are often extremely sensitive to language, and careless comments (even well-meant ones) can be damaging.

Helpful approaches:

- **Listen without judgement.** Let your child share their feelings without trying to immediately solve the problem.
- Validate emotions. Phrases like, "I can see this feels very hard for you" can be powerful.
- Focus on feelings, not food. Instead of "You need to eat more," try, "I'm worried about how stressed you seem around meals."
- It can be helpful to view the eating disorder (ED) as something separate from your childan illness they are living with, rather than who they are. This approach reduces blame and helps you to stay compassionate. For example, instead of saying "You seem overwhelmed," you might say, "The eating disorder must feel very loud right now." If you find yourself caught in arguments, remind yourself that you are not fighting your child you are challenging the eating disorder. Always remember: the eating disorder is the enemy, not your child.

Things to avoid:

- Talking about weight, calories, or appearance even about yourself.
- Using guilt or threats ("If you don't eat, you'll...").
- Assuming the eating disorder is a choice or "phase."

4. Supporting Recovery at Home

Recovery is rarely straightforward – there may be ups and downs. Home can become both a safe haven and a challenging place, particularly around mealtimes.

Practical ways to help:

- **Encourage professional support.** Eating disorders often require medical, nutritional, and psychological treatment.
- **Be a mealtime ally.** Stay calm, sit with your child, and try to keep conversation light and non-food-related.
- Establish routines. Predictability can reduce anxiety.
- Avoid conflict during meals. Save any difficult conversations for another time.

When setbacks happen:

Relapses are common. Instead of seeing them as failures, treat them as signals that more support is needed. Encourage your child to get back on track with professional guidance.

5. Caring for the Whole Child

While food may seem to be at the centre of the problem, recovery involves nurturing the whole person.

- Address underlying challenges. Anxiety, depression, trauma, or perfectionism are often linked to disordered eating.
- **Encourage non-food identities.** Support hobbies, friendships, and activities that help your child build self-worth outside of appearance.
- **Promote resilience.** Help your child to see their strengths, talents, and achievements beyond the eating disorder.

6. Caring for Yourself as a Parent

Supporting a child through an eating disorder can be exhausting. You may feel guilty, frightened, or even angry at times – and those emotions are completely valid.

- **Seek support for yourself.** Parent groups, therapy, or trusted friends can provide space to process your feelings.
- Look after your health. Sleep, nutrition, and rest matter for you too.
- **Set boundaries.** You can be supportive without losing yourself.

Remember: you cannot pour from an empty cup.

7. Practical Tools and Resources

When to seek urgent help:

- Rapid weight loss or refusal to eat.
- Signs of medical instability: fainting, irregular heartbeat, dehydration.
- Expressing suicidal thoughts or self-harm.

Finding support:

- Speak to your GP as a first step.
- Ask about local NHS eating disorder services or referral to CAMHS (Child and Adolescent Mental Health Services).

- Explore specialist charities such as **Beat** (the UK's leading eating disorder charity) for helplines, online groups, and resources for parents.
- Are you getting any carer therapy or counselling for yourself? Being a carer is a lot for one heart to handle and it can take its toll. BEAT does a great course https://www.beateatingdisorders.org.uk/training-events/find-training/training-forparents-and-carers/developing-dolphins/.
- Here is a helpful document on what style of parenting can be helpfulhttps://thenewmaudsleyapproach.co.uk/pdfs/AnimalAnalogies.pdf
- Here are some reading recommendationshttps://thenewmaudsleyapproach.co.uk/index.php/reading/
- All of the National Centre for eating Disorders information is really helpful- https://eating-disorders.org.uk/eating-disorder-counselling/carers-help/
- https://eating-disorders.org.uk/information/your-loved-one-has-an-ed/

8. Hope and Recovery

Recovery is absolutely possible. Many people go on to live full, healthy lives, even after years of struggling. Progress may be slow and uneven, but every small step counts.

As a parent, you can hold hope when your child cannot. Your steady presence, belief, and love provide a lifeline that helps them through the darkest moments.

★ Final note: Supporting a child with an eating disorder is not easy, but you are not alone.
With professional help, patience, and compassion, recovery is achievable.