**ESSENTIAL INFORMATION**

**Eating Distress**

What is Eating Distress?

Some might say that when we lose our appetite for food, we lose our appetite for life. Eating distress although most often viewed as a ‘problem’ can be better understood by seeing it as the ‘solution’ as the eating behaviour serves to mask difficult feelings and emotions, and enables the individual to feel more in control of their life. Starvation has the effect of temporarily numbing the body and mind, whilst bingeing enables the person to ‘push down’ and thus suppress their feelings with the food – ‘it is impossible to scream when your mouth is full’. Focussing on the symptom is no more useful than smashing the malfunction light on a machine rather than looking inside to fix what is wrong.

The three main Eating Disorders:

**Anorexia Nervosa** typically involves the individual restricting food intake by gradually adding more foods to their ‘forbidden’ list. They will use their control over food to feign control in their lives, thus losing dramatic amounts of weight. Although they will eat some foods, their list of safe foods will be small and very restrictive, and they may then purge by vomiting.

**Bulimia Nervosa** is typified by a cycle of binging or overeating and then purging. Purging can take the form of vomiting, over-exercising, laxative abuse or starvation. Although, the weight loss is less marked, the effect on the sufferer’s health is no less dangerous.

**The term Over-Eating includes Compulsive Eating and Binge Eating**. The sufferer obsessively eats to suppress uncomfortable feelings, however does not purge. He or she will most often gain weight or be significantly over weight, but will feel unable to control their urge to eat or their obsessive thoughts about food.

Food and eating play a very important part in our lives and are essential for our health and development. However, when food is used to help us cope with our emotional and psychological needs it may become a problem. There are many reasons we may develop an Eating Disorder: low self-esteem, family relationships, problems with friends, the death of someone special, feeling stressed and overwhelmed at university, lack of confidence, sexual or emotional abuse. Many people talk about simply feeling ‘too fat’ or ‘not good enough’.

How can I help myself?

If you feel you may have an issue with food and eating it may be advisable to initially speak to your GP to check your health and to discuss your concerns. It is also important to draw support from those around you: friends, family, your tutor, as an Eating Disorder can isolate you from others as you try to hide your eating behaviour.

It is vital that you begin to look at the underlying feelings, the difficult emotions you may be trying to avoid, as ignored emotions won’t just go away. Try thinking about when the issue began. What was happening in your life? What were you feeling? What might you be trying to control or suppress with the eating behaviour? It is not unusual to be fearful of eating more normally and healthily, and seeking help can be a frightening prospect.

Useful strategies for the road to recovery:

- Set realistic goals for your recovery and for the future. Being positive about these will give you something to think about other than food.
- Focus on what you can and have achieved, there is a lot to be learned from our achievements. As you return to more normal behaviours with food and eating, you will begin to experience the feelings you have used your disordered eating to avoid. This will only be a temporary discomfort and will pass.
- Accept the support from friends, family, the GP and the University Counselling Service.
- Plan mealtimes, it is often helpful to eat with someone else to normalise the experience and can act as a distraction.
- Eat slowly to enable your body to reconnect with the feelings of being hungry and then satisfied.
- Eat little and often, 6 small meals a day rather than 3 larger ones.
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- Share your feelings and concerns with those close to you. Explain to them what is helpful and what is not. For example, they may comment on how much you have eaten. Explain that it is easier if they don’t draw attention to what you have eaten.
- As you recover, people may comment on how well you look, which is often interpreted as ‘You are looking fat’. Try to accept the compliment in the positive light it was given rather than projecting negativity on to it.
- Be kind to yourself, and allow your body and mind time to adjust and to recover.

Further help and support

Speak to your GP, a trusted friend, a family member, tutor or supervisor, or call the Counselling team on 0118 378 4216 or email counselling@reading.ac.uk

Helpful contacts:

Visit the Drop-in Clinic at the University Health Centre on the last Thursday of each month – information is available at reception.

Attend the Student Run Self Help (SRS) group, visit www.srsh.co.uk

BEAT Eating Disorders Association helpline 0845 634 1414  www.b-eat.co.uk

www.sharon.nhs.uk a network promoting support and hope for recovery

MIND Infoline 0300 123 3393  www.mind.org.uk/help/diagnoses_and_conditions/eatingdistress

Useful publications:

‘Dying to be Thin - Understanding and Defeating Anorexia Nervosa and Bulimia – A Practical and Lifesaving Guide’ – Ira Sacker and Marc Zimmer

‘Breaking Free from Emotional Eating’ – Geneen Roth ‘Eating Disorders – The Path to Recovery’ – Dr Kate Middleton