An eating disorder is a medical/psychiatric illness characterized by dysfunctional attitudes and extreme behaviors surrounding weight and food. A child with an eating disorder has a negative view of their body weight or shape. There are two common types of eating disorders:

- **Anorexia Nervosa** is a disorder involving distorted body image and excessive dieting with a fear of becoming fat that leads to severe weight loss. The fear of gaining weight is so great that children with anorexia may decrease their food intake to very small amounts and/or exercise excessively to lose weight.

- **Bulimia Nervosa** involves frequent episodes of binge eating followed by behaviors such as self-induced vomiting to avoid weight gain. These behaviors may also include too much exercise or misuse of laxatives and medications to induce vomiting.

**Common Myths about Eating Disorders**

**Myth: You’re not sick until you’re emaciated.**

*Truth: Only a small percentage of people with eating disorder reach the state of starvation.*

**Myth: Children under age 15 are too young to have an eating disorder.**

*Truth: Eating disorders have been diagnosed in children as young as five years of age.*

**Myth: Achieving normal weight means that anorexia is cured.**

*Truth: People can recover from eating disorders but are not “cured,” as the process of recovery takes many years and for many with eating disorders is a daily process even after weight is restored.*

**Myth: Eating disorders are not illnesses.**

*Truth: Eating disorders are complex medical/psychiatric illnesses.*

**Myth: Eating disorders are a choice.**

*Truth: People do not choose to have an eating disorder.*

**Myth: Eating disorder occurs only in females.**

*Truth: Males can have eating disorders, but they are more likely to focus on their upper body and less likely to use the words “Fat”.*

**Myth: Eating disorders are about appearance and beauty.**

*Truth: Eating disorders are usually related to emotional issues such as control and low self-esteem.*

**How can an eating disorder affect a student at school?**

Students with eating disorders tend to be high achievers. The following issues may be impacted:

- Decreased ability to concentrate and focus
- Decreased ability to perform as well in sport
- Physical symptoms: Nausea, headache, dizziness, and fatigue
- Decline in ability to perform tasks as well as their healthy peers
- Irritability
- Prone to illnesses due to weakened immune system
- Some students may be either less active or overactive and restless
- Spends an extreme amount of time working on assignments to make sure that they are perfect.
How can schools assist students with an eating disorder?

**Academic**
- Begin intervention with a student referral to campus students' assistance program (Section 504)
- Be aware of the effects of eating disorders on cognitive abilities, so expectations are realistic.
- Develop an educational plan with needed accommodation and modifications for the student.
- Be flexible while balancing workloads and deadlines, and yet maintaining learning goals.
- Reduce level of courses.

**Social/Emotional**
- Meet with the student and parents before the student returns to school to discuss the support needed.
- Be aware of the need to be “perfect”.

**Physical**
- Students might need to be excused from physical education classes.
- Supervised lunches might be necessary.
- Medication may have possible side effects (e.g., drowsiness).
- Allow use of elevator if the student has physical activity restrictions.
- Monitor snacks.
- Extra sets of textbooks to be kept at home to limit physical activity involved in carrying textbooks.

**Signs and Symptoms of an Eating Disorder Specific to a School Setting**

**Emotional**
- Changes in attitude/performance.
- Body image complaints/concerns.
- Overweight but appears to eat small portions in presence of other.
- Appears sad/depressed/anxious/ and/or expresses feelings of worthlessness.
- Spends more time alone.
- Greater concern about being “perfect”.

**Physical**
- Sudden weight loss or gain.
- Abdominal pain.
- Feeling faint, cold or tired; has dry hair or skin, dehydration.
- Lanugo hair (fine body hair).

**Behavioral**
- Constantly talking about food.
- Exercises for long periods.
- Makes frequent trips to the bathroom.
- Avoids cafeteria.
- Carries their own food in backpack or purse.
- Denies difficulty.
- Wears very baggy clothes to hide a very thin body or weight gain.

**How Children’s can help?**

Children’s Health Center for Pediatric Eating Disorders, the only facility of its kind in Texas, offers a full continuum of care — from hospitalization to outpatient therapy. It’s also the state’s only center that treats boys and young children struggling with eating disorders.

Children’s moved the center to its Plano campus to expand its ability to treat the growing number of youngsters battling eating disorders. It offers a calm setting for patients with views of open fields, large therapy rooms, and a state-of-the-art kitchen used in the treatment process. For more information, call 214-456-8899.

For more information to assist students with eating disorders, contact:

**Other Resources:**
- National Eating Disorder Association (NEDA): Educator and Coach & Athletic Trainer Toolkit
  [http://www.nationaleatingdisorders.org/toolkits](http://www.nationaleatingdisorders.org/toolkits)
- The Elisa Project: Overcoming Eating Disorders Through Knowledge

**School Services Department**
- Children’s Health
- Children’s Medical Center
  - Dallas Campus: 214-456-7733
  - Plano Campus: 469-303-4670