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Dear Parent of Students in Grades Five through Twelve:

Eating disorders are serious but treatable mental and physical illnesses that can affect people of all genders, ages, races, religions, ethnicities, sexual orientations, body shapes, and weights. While no one knows for sure what causes eating disorders, a growing consensus suggests that it is a range of biological, psychological, and sociocultural factors. Eating disorders are not fads or phases, and can have serious consequences for health, productivity, and relationships.

Eating disorders can develop or re-emerge at any age. Eating disorder specialists are reporting an increase in the diagnosis of children, some as young as five or six. Many eating disorder sufferers report that their thoughts and behaviors started much earlier than anyone realized, sometimes even in early childhood. Although most people report the onset of their eating disorder in their teens and young adulthood, there is some evidence that people are being diagnosed at younger ages.

It is not clear, whether individuals are actually developing eating disorders at younger ages or if an increased awareness of eating disorders in young children has led to improved recognition and diagnosis.”

Recognizing the importance of early identification of at-risk students, the 2013 Virginia General Assembly passed a law requiring each school board to provide parent educational information regarding eating disorders on an annual basis to students in the fifth through twelfth grades.

It is important to note that eating disorders are not diagnosed based on weight changes as much as behaviors, attitudes, and mindset. Symptoms may vary between males and females and in different age groups. Often, a young person with an eating disorder may not be aware that he/she has a problem or keeps the issues secret. Parents/guardians and family members are in a unique position to notice symptoms or behaviors that cause concern. Noting behaviors common to people with eating disorders may lead to early referral to the primary care provider. It is important for eating disorders to be treated by someone who specializes in this type of care.

After reviewing the information included with this letter, if you think your child may be showing signs of a possible eating disorder, please contact your primary health care provider, school nurse, or one of the resources listed below.

- Eating Disorder Hope
<https://www.eatingdisorderhope.com/>
- Families Empowered and Supporting Treatment of Eating Disorders (F.E.A.S.T.)
www.feast-ed.org
- National Eating Disorders Association
www.nationaleatingdisorders.org
Toll free, confidential Helpline, 1-800-931-2237
Additional resources may be found at:
- Virginia Department of Education
http://www.doe.virginia.gov/support/health_medical/index.shtml, under the section titled, Eating Disorders

Sincerely,

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School Health Supervisor

What Are Eating Disorders?

Eating disorders are real, complex, and devastating conditions that can have serious consequences for health, productivity, and relationships. They are not a fad, phase or lifestyle choice. They are potentially life-threatening conditions affecting every aspect of the person's functioning, including school performance, brain development, emotional, social, and physical well-being.

Prevention: Prevention efforts may involve reducing negative risk factors, like body dissatisfaction, depression, or basing self-esteem on appearance, or increasing protective factors, like a non-appearance-oriented self-definition and replacing dieting and body snarking with intuitive eating and appreciation for the body's functionality.

Eating disorders affect both males and females of all ages.

Although it's too soon to say that any specific prevention program can reduce the rates of diagnosable eating disorders, these programs do show benefits in reducing risk factors for eating disorders, such as fasting, purging, and other unhealthy eating behaviors, as well as in decreasing disordered eating.

Eating disorders can be diagnosed based on weight changes, but also based on behaviors, attitudes and mindset. Be alert for any of these signs in your child.

Key things to look for around food:

- Eating a lot of food that seems out of control (large amounts of food may disappear, you find a lot of empty wrappers and containers hidden)
- Develops food rules—may eat only a particular food or food group, cuts food into very small pieces, or spreads food out on the plate
- Talks a lot about, or focuses often, on weight, food, calories, fat grams, and dieting
- Often says that they are not hungry Skips meals or takes small portions of food at regular meals Cooks meals or treats for others but won't eat them
- Avoids mealtimes or situations involving food
- Goes to the bathroom after meals often
- Uses a lot of mouthwash, mints, and/or gum
- Starts cutting out foods that he or she used to enjoy

Key things to look for around activity:

- Exercises all the time, more than what is healthy or recommended
 - despite weather, fatigue, illness, or injury
- Stops doing their regular activities, spends more time alone (can be spending more time exercising)

Physical Risk Factors:

- Feels cold all the time or complains of being tired all the time.
 - Likely to become more irritable and/or nervous.
- Any vomiting after eating (or see signs in the bathroom of vomiting
 - smell, clogged shower drain)
- Any use of laxatives or diuretics (or you find empty packages)

Other Risk Factors:

- Believes that they are too big or too fat (regardless of reality)
- Asks often to be reassured about how they look
- Stops hanging out with their friends
- Not able to talk about how they are feeling
- Reports others are newly judgmental or "not connecting"

Eating disorder screening tool:

<https://www.nationaleatingdisorders.org/screening-tool>

Weight is NOT the only indicator of an eating disorder, as people of all sizes may be suffering.

How to Communicate with Your Child

- Understand that eating disorder sufferers often deny that there is a problem.
- Educate yourself on eating disorders
- Ask what you can do to help
- Listen openly and reflectively
- Be patient and nonjudgmental
- Talk with your child in a kind way when you are calm and not angry, frustrated, or upset
- Let him/her know you only want the best for him/her
- Remind your child that he/she has people who care and support him/her
- Be flexible and open with your support
- Be honest
- Show care, concern, and understanding
- Ask how he/she is feeling
- Try to be a good role model- don't engage in 'fat talk' about yourself
- Understand that your child is not looking for attention or pity
- Seek professional help on behalf of your child if you have ANY concerns

If Your Child Shows Signs of a Possible Eating Disorder

Treatment: Getting a diagnosis is only the first step towards recovery from an eating disorder. Treating an eating disorder generally involves a combination of psychological and nutritional counseling, along with medical and psychiatric monitoring. Treatment must address the eating disorder symptoms and medical consequences, as well as psychological, biological, interpersonal, and cultural forces that contribute to or maintain the eating disorder.

Nutritional counseling is also necessary and should incorporate education about nutritional needs, as well as planning for and monitoring rational choices by the individual patient. There are a variety of treatments that have been shown to be effective in treating eating disorders. Generally, treatment is more effective before the disorder becomes chronic, but even people with long-standing eating disorders can and do recover.

Seek assistance from a medical professional as soon as possible; because they are so complex, **eating disorders should be assessed by someone who specializes in the treatment of eating disorders.** The earlier a person with an eating disorder seeks treatment, the greater the likelihood of physical and emotional recovery.