

# Solutions Newsletter

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Effective School  
Solutions

*Solutions* is a newsletter published by ESS for parents, guardians, and caretakers. Each issue highlights an important topic related to children's mental health and provides practical applications for parents in the home environment.

## When is Overeating a Binge Eating Disorder?

Each year during the month of February ESS joins the National Eating Disorders Association (NEDA) and other treatment and advocacy groups in their efforts to shine a light on a cluster of disorders that can seriously impact the physical and mental health of affected individuals and simultaneously devastate families. Eating Disorders Awareness Week (EDAW) will occur in the United States from February 19-25, 2024, and as described on the NEDA website it "is an annual campaign that raises awareness of eating disorders and aims to educate the public on the severity of these illnesses and to give hope to those who are affected by them."

Anorexia Nervosa, the extreme restriction of food intake, is probably the best-known eating disorder, but it is actually the least common. The most common eating disorder in the United States is Binge Eating Disorder (BED), affecting approximately 3.5% of women, 2% of men, and 1.6% of adolescents. It is characterized by repeated episodes of eating large amounts of food within a short period of time, typically in secret, and is accompanied by feelings of guilt, shame, disgust, and a loss of control. Sometimes referred to as compulsive overeating or food addiction, it was not until 2013 when the DSM-5 was published that BED was recognized as a distinct, diagnosable condition rather than a sub-category of another eating disorder, making its treatment eligible for health insurance coverage.

While most of us overindulge in food occasionally, people suffering with BED lose control of their eating and have excessive eating episodes at least once a week. They do not typically purge (self-induced vomiting) or over-exercise to manage weight, so they are often overweight or obese. Symptoms of BED include: eating unusually large amounts of food in a short amount of time, for example, within two hours; eating rapidly; eating even when full or not hungry; eating until uncomfortably, even painfully full; eating alone or in secret to avoid embarrassment; feeling distressed, ashamed, or guilty about eating; feeling out of control and "zoned out" during a bingeing episode; frequent dieting, possibly without weight loss. As with all eating disorders, the exact cause of BED is unknown, but likely involves a combination of biological, genetic, lifestyle (frequent dieting, societal messages about acceptable body types), and psychological factors (e.g., poor body image,

perfectionism, low self-esteem). Other mental health problems that often co-occur with BED are depression, bipolar disorder, anxiety, and substance use disorders. Eating patterns are among the first behaviors that new parents/caretakers monitor to determine the well-being of their babies.

Here are some signs that parents/caretakers can look for that might indicate that a teen might be struggling with a Binge Eating Disorder:

- Frequent weight fluctuations.
- Reluctance/refusal to eat in front of others and avoidance of social situations that involve food.
- Frequent comments about feeling out of control.
- Frequent dieting, with little or no weight loss
- Persistent, extreme perfectionism.
- A strong people-pleasing tendency.
- Frequent comments about disliking one's body or appearance.
- Excessive food wrappers or containers in your child's room or bag; hidden food; missing food.
- Rigid, inflexible all-or-none thinking.

If you suspect that your child has an eating disorder, discuss your concerns with their pediatrician and contact school-based and/or community mental health practitioners to schedule an initial assessment as soon as possible. Avoid frequent questioning or criticism about eating patterns, weight, or physical appearance. Look for opportunities to foster a healthy body image, regardless of body shape or size, and actively challenge harmful societal messages about the "perfect" appearance or body type. Monitor your child's internet and social media usage to discover whether they are visiting potentially damaging sites. And above all, do not lose hope: effective treatments are available for your child and family.