



Supporting children and young people experiencing disordered eating

Intervening early is important and can help reduce the severity and duration of an eating disorder, making recovery more likely.

An educator's role

It's important that learning communities develop relevant internal policies, procedures and guidelines to support students with mental health issues, including disordered eating behaviours.

Adolescence is a high-risk time for the development of disordered eating, and the school environment is where disordered eating may first be noticed.

However, disordered eating can emerge in childhood for anyone.

As an educator, you may be concerned about a child or young person. Or you may be alerted by a worried friend, peer or family member.

It's not your role to diagnose or treat an eating disorder – this is the role of qualified health professionals.

However, you can play an important role in identifying children or young people who may be experiencing a problem and supporting help-seeking or recovery.

Intervening in the early stages of disordered eating can increase the likelihood of a faster and full recovery. The aim of approaching someone is to help them feel safe so that they can talk openly about their concerns, and to encourage further support and treatment.

You can find more information in the Be You Fact Sheets about [body dissatisfaction](#) and the [warning signs of disordered eating](#).

Steps to take

If you are concerned about a child or young person, ensure you are aware of the best people to inform.

At your school this might be your head of wellbeing, your school counsellor or your guidance officer.

You may choose to raise your concerns with them and have a conversation about next steps.

Once you have raised your concerns with your wellbeing team, they may consider involving the family (depending on the age of the child or young person, their family circumstances and the degree of concern).

In primary school-aged children, families will need to be involved prior to the child being approached. However, there are more variables to consider with secondary school students.

As an educator, and someone who knows the child or young person well, you might be asked to be present for the conversation with the family and/or child or young person.

Check out the Be You Fact Sheets about what to do [before recommending additional support](#), [recommending additional support](#) and [communication skills for educators](#).

Have referral and help-seeking information on hand

A good place for the young person and their family to start is a visit to a GP, who will conduct an initial assessment and refer to appropriate professionals as needed. Offer realistic, sustainable, appropriate and ongoing support to help them feel supported.

It's important that children or young people experiencing disordered eating or eating disorders and their families know that they have the support of their learning community.

Check if there is anything you can do for the child or young person immediately, then let them know that you are there for them and intend to follow up with them. Continue to engage them following the initial conversation. It's important they understand you will continue to support them.

Things to do:

- Be empathetic, compassionate and non-judgemental.
- Stay calm and accept what the child or young person (or family member) says, even when it

may be difficult hearing their response or comments.

- Discuss your concerns in an open and honest way, using 'I' statements such as "I am worried..."
- Focus on emotional and behavioural signs, rather than weight, food and exercise.
- Reassure the person that your concerns are coming from a place of care.
- Allow the child or young person to talk about other issues, challenges or things that are troubling them (for example, "How are things for you at the moment?", "How have you been feeling lately?" "Is there something on your mind that you would like to talk about?")
- Decide on next steps, involving the child or young person as much as possible in decision-making.

Avoid:

- Being critical, blaming and shaming the person.
- Giving simple solutions or advice.
- Telling the child or young person that you think they have an eating disorder or attempt to provide them with a diagnosis.
- Statements such as "you look skinny" or "you look healthy". If a child or young person is seeking reassurance on their weight, you should avoid answering directly.
- Commenting on the child or young person's size, weight, shape or appearance.
- Making generalised statements, such as using the words 'never' and 'always'.
- Making promises that can't be kept as an educator.
- Approaching the child or young person when food is present (such as during, or leading up to, mealtimes).

Be You Professional Learning

Learn about noticing and supporting children and young people who might be showing signs of mental health issues in the [Early Support](#) domain.

References

Doley J., Hart L., Stukas A., Morgan A., Rowlands D. et al. Development of guidelines for giving community presentations about eating disorders: A Delphi study. *Journal of Eating Disorders*. 5:1-12. 2017

Doley J., Hart L.M., Stukas A. A., Petrovic K., Bouguettaya A. et al. Interventions to reduce the stigma of eating disorders: A systematic review and meta-analysis. *International Journal of Eating Disorders*. 50:210-230. 2017

Mental Health First Aid Australia (2008). *Eating Disorders: Mental Health First Aid Guidelines*.: Mental Health First Aid, Melbourne.

National Eating Disorder Collaboration (NEDC) (2016). *Eating Disorder in Schools: Prevention, Early Identification and Response*, 2nd edition. NEDC: Sydney. Retrieved from <https://www.nedc.com.au/assets/NEDC-Resources/NEDC-Resource-Schools.pdf>

External links

Butterfly – [National Hotline](#)

[Mental Health First Aid for Eating Disorders](#)

National Eating Disorder Association (US) – [Educator Toolkit](#)

National Eating Disorder Collaboration – [Eating Disorders in Schools: Prevention, Early Identification and Response](#).