Eating Disorders

About 24 men and women in the United States suffer from an eating disorder at some point in their life*. A study conducted in 2011 found that the median age for an eating disorder onset was 12-13 years old**. The most common types of eating disorders are anorexia and bulimia. Other less common types include hoarding and Pica.

There are many factors that contribute to eating disorders, including psychological, interpersonal, social and biological factors. Low self-esteem, troubled relationships, a history or physical or sexual abuse, depression, and difficulty expressing emotions and feelings are all contributing factors, and are things a child in foster care is most likely experiencing.

*Source
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Anorexia

The characteristics of Anorexia Nervosa (AN) are self-starvation and excessive weight loss. Those diagnosed with anorexia become obsessed with their weight and develop an intense fear of gaining weight. They will go to great lengths to control their food intake and will engage in activities to lose weight. More often than not, low-self esteem is linked with anorexia.

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Resources - Anorexia & Bulimia

ANAD - Get Help [Find support groups and treatment centers near you]

NEDA - Treating an Eating Disorder

New York Times - Treating an Eating Disorder and Paying for It

Maudsley Parents - Find Treatment [An organization created by parents with children who suffered from eating disorders, offering information on family-based treatments, treatment

The following are some of the warning signs of anorexia:

- Dramatic weight loss
- Frequent comments about being "fat"
- Loss of hair
- Irregular or absent menstural cycle in women
- Frequent excuses to avoid meals
- Rigid exercise routines

To learn more about the symptoms, health consequences, and explanation of the characteristics of anorexia please visit the National Association of Anorexia Nervosa and Associated Disorders (ANAD) site, and the National Eating Disorder Association (NEDA) site.

Treatment for Anorexia

The most common form of treatment is psychotherapy or psychological counseling. Other forms of treatment include outpatient therapy, individual therapy, group therapy, and family therapy. Support groups and nutritional counseling have also proved beneficial for some patients. In extreme cases, hospitalization may be necessary.

Bulimia

Bulimia Nervosa (BN) is characterized by binge eating followed by self-induced vomiting. Those suffering from bulimia will often binge-eat and then engage in various behaviors to "undo" the effects of their binge, like vomiting, excessive exercise, fasting, or the use of laxatives. They may also feel like they are out of control during their binging episodes, and likely have self-esteem issues related to their body image.

The following are some of the warning signs of bulimia:

- Evidence of large consumptions of food in a short period of time
- Frequent trips to the bathroom after a

providers, support, and more.]

NEDA - Parent Tool Kit [A PDF guide on basic eating disorder information, treatment options, questions to ask a therapist or treatment provider, and how to navigate insurance issues].

Additional Information - Anorexia & Bulimia

NEDA - Get the Facts

Fostering Perspectives -What's Eating You?

An Overview of Problematic Eating and Food-related Behavior Among Foster Children: Definitions, Etiology, and Intervention by Carolyn M. Casey, Catherine Cook-Cottone, Meredith Beck-Joslyn, and University at Buffalo, The State University of New York

Additional Information - Pica & Food Hoarding

Kid's Health - Pica

American Bar - Healthy Nutrition for Kids in Foster Care

meal is consumed
- Evidence of other purging behaviors, like laxative wrappers
- Excessive exercise
- Swelling in the jaw and salivary glands
- Broken blood vessels in the eyes
- Calluses on the backs of hands due to self-induced vomiting
- Teeth discoloration

For more information on the warning signs and an explanation of symptoms, please visit ADNA's page on bulimia. For more information on the warning signs, health consequences, and facts, please visit NEDA's page on bulimia.

Treatment for Bulimia

The treatment options for bulimia are the same as those for anorexia. Therapy, support groups, and nutritional counseling are a few options to explore. It is important that not only are the physical effects of bulimia addressed, but also the underlying psychological issues.

Other Types of Eating Disorders

Children who are in foster care may exhibit other food insecurities and eating disorders. Two of the more common ones are pica and food hoarding.

What is pica?

Pica is defined as the consumption of non-food objects. It is diagnosed when a child persistently and compulsively tries to consume non-food objects in their mouth, and this behavior goes on for over a month.

What are the warning signs of pica?

- Repetitive consumption of non-food items for over a month
- The behavior is inappropriate for the child's developmental state (18-24 months)

NACAC Adoptalk - Healing from Food Insecurity: Beyond the Stash

Adoption Nutrition - Provides information on nutritional needs of adopted children, tips and tricks, pre-adopt prep, and more.

- The behavior is not tied to a religious or cultural practice

What are the causes of pica?

While the causes of pica do vary, there is a link between pica and malnutrition, something kids in foster care may experience. Parental neglect, lack of supervision, developmental delays, nutritional deficiencies, and food deprivation have also been linked to pica.

How is pica treated?

Work with your child's doctor and therapist to help your child stop eating non-food items. Keep non-food items that your child eats regularly hidden. It is also important to exercise a lot of patience, as it may take some time for your child's pica to stop.

What is food hoarding?

A child may hoard food due to past neglect when they may not have been fed regularly. Hoarding food allows a child to ease any anxiety and insecurities they have about where their next meal is going to come from. Children use food hoarding as a self-preservation tool, and it can be a hard habit to break.

What are the warning signs of food hoarding?

- Eating quickly
- Stealing or hiding food
- Eating such large quantities of food that the child vomits
- Becoming upset if their food is limited and/or taken away
- Becoming upset if someone eats off their plate
- Only eating familiar or "safe" foods
- Crying at the end of a meal

How is food hoarding treated?

There are a number of different methods to helping a child heal their anxieties over food. Work with your child's doctor and therapist to come up with some strategies that will work the best for your child. Remember that every child is different, and some strategies will work for your child and others won't. Some common ones are:

- Allowing your child small "stashes" of food. Letting your child keep non-perishable foods in his/her backpack or room can help ease their anxiety because it lets them know they have food if they get hungry. While your child may not eat the food, it will be comforting to them knowing it's there.
- Feed your child yourself whenever possible. While you may be inclined to let your child help him/herself to a snack, it may only reiterate that they have to depend on themselves for survival. During snack or mealtimes, make sure you are the one serving your child.
- Feed younger children every 2-3 hours, and older children ever 3-4 hours. Offer food more frequently at first, to assure your child that there is food in the house for them to eat.
- Reassure them frequently that there is plenty of food and that you will not run out.
- Maintain a schedule and consistency. If your family will be out of the house during your child's regularly scheduled snack time, bring a snack with you.
- Let your child help you plan meals. This will help them feel like they have some control and assures them that there will be future meals.