Dear Parent of Students in Grades Five through Twelve:

Eating disorders are serious health problems that usually start in childhood or adolescence and affect both girls and boys. With early diagnosis, eating disorders are treatable with a combination of nutritional, medical, and therapeutic supports. 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 on the reverse side of 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.

* Academy for Eating Disorders (AED)

<http://www.eatingdisorderhope.com/information/help-overcome-eating-disorders/non-profits-organizations/aed>

* Families Empowered and Supporting Treatment of Eating Disorders (F.E.A.S.T.)

[www.feast-ed.org](http://www.feast-ed.org)

* National Eating Disorders Association

[www.nationaleatingdisorders.org](http://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,

Jesse L Glover, RN

Giles County School Health Coordinator

**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.**

Eating disorders affect both males and females of all ages.

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:

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

* 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

**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
* 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”

**If Your Child Shows Signs of a Possible Eating Disorder**

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.