

Are you bullied by the eating disorder voice?

What you eat...

How you eat...



Where you eat...

When you eat...

Could you be propping up eating disorder behaviours by covering up in terms of

Shopping...

Finance...

Cleaning...

Excess...



Our interventions provide education, skills, and the techniques to help and support you in adopting a more adaptive approach to you son or daughter's eating disorder. Our goal is for parents to promote the following:

- Strengthen the families' belief in their own abilities to make change possible
- Give the family the opportunity to express concern about the causes and effects of the illness
- Discuss the basic principles of behavioural change
- Teach good communication skills (the ability to express and process emotions)
- Promote respect, satisfaction, and a unified approach within the family unit
- Learn the skills of problem solving
- Maximize parenting skills (warmth with limits and boundaries)
- Highlight those factors which may be aggravating the problem

If you want to work with our team to advance medical knowledge by measuring the impact of sharing information and working collaboratively on people with eating disorders, then please get in touch to find out more:

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www.eatingresearch.com

“EVERY MISTAKE IS A TREASURE...”

**Prof. Janet Treasure
Guy's Hospital, London**

The Caring Role in Eating Disorders



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The Caring Role

Parents are the solution, not the problem! Eating disorder can and do put tremendous demands on the coping abilities of family members. Carers and other family members are usually the main support for the sufferer but frequently get caught up in unhelpful patterns of behaviour that, in turn, perpetuate eating disorder behaviours.

Nobody knows the cause of an eating disorder. There is no evidence that family factors are the cause – there may be a small genetic risk but this is not something over which the parent has any control. Consequently, guilt and self blame are futile and inappropriate. There is, however, evidence from naturalistic studies that the outcome of eating disorder is influenced by the emotional reactions of close others which can act as maintaining factors.

It is often necessary for members of the family themselves to change some aspects of their patterns of interacting responses to the eating disorder behaviours. The aim of our carer interventions is to highlight alternative techniques and strategies which allow both carers and sufferers to consider the impact of their responses to eating disorder behaviours and to use this information to reflect on their own unique emotional responses in guiding goal setting and action planning.

* “Skills-based learning for caring for a loved one with an eating disorder: The Maudsley Method” by Janet Treasure, Grainne Smith & Anna Crane

“This book will be a wonderful resource for parents, friends and families of those who suffer from eating disorders” Kitty Westin, President, the Anna Westin Foundation

What Type of Carer are you? *

Behaviour



The **kangaroo** ... does everything to protect, taking over all aspects of life. They treat the sufferer with kid gloves, burying them in their pouch, in an effort to avoid any upset / stress ... accommodating to all possible demands. The downside of this type of caring is that the sufferer fails to learn how to approach and master life's challenges, becoming trapped in the role of the eternal infant.



The **rhinoceros** ... fuelled by stress, exhaustion and frustration, or simply one's own temperament, the rhino attempts to persuade and convince by argument and confrontation. The downside is that even if the sufferer does obey confidence to do so without assistance will not be developed. More likely, however, arguing back with ED logic will merely produce a deeper hole for sufferer to hide in.



The Dolphin

Imagine your daughter / son at sea. The eating disorder is her life vest. She is unwilling to give up the safety of this life vest whilst living in her stressful and dangerous world. You are the dolphin, nudging her to safety, at times swimming ahead and leading the way, and at others times, swimming alongside with encouragement, or even quietly swimming behind.

Emotions



The **ostrich** ... Rather than confronting the difficult situation and behaviour, the ostrich finds it difficult to cope with the distress of challenging or confronting eating disorder behaviour and so, avoids talking and thinking about the problem at all. The downside is that the sufferer may misinterpret this approach as uncaring and feel unloved, thus strengthening low self-esteem.



The **jellyfish** ... Some carers may be engulfed in intense emotional responses. They may hold some false interpretations about the illness, high levels of self blame, or perfectionist tendencies with regards to parenting style. The downside is that the 'sad and mad' approach causes tears, anger and sleepless nights and worsens how everybody feels by raising anxiety levels.



The St. Bernard

A St. Bernard responds consistently unfailing, reliable and dependable in all circumstances. He is calm and collected, even in dangerous situations. He is dedicated to the welfare and safety of those who are lost ... calm, warm and nurturing.