Supporting a Friend with Eating Concerns
Gustavus Adolphus College Counseling Center

What You Can (and Can’t) Do

Express your concerns and recognize your limitations! There are many things you cannot do to help a family member or friend recover. You cannot force someone with anorexia to eat, keep a friend with bulimia from purging, or make friend with compulsive overeating stop overeating. Many forms of eating disorders are emotionally based and the behaviors are often a symptom to emotional and stress related problems. Often, disordered eating is an attempt to control, hide, stuff, avoid and forget emotional pain, stress and/or self-hate.

If your relationship with someone suffering from anorexia, bulimia or compulsive overeating is anything other than their parent, or if your child is over the age of 18, then you cannot force them to seek help. You can support and encourage your loved one, and gently express concern, and the best thing you can do is to learn to attentively listen.

In most cases it will be important for each sufferer to find a mode of recovery that will work for them. One-on-one therapy, support groups, clinics, in-patient or out-patient, art therapy, church groups, a combination of any, or none of the above but something completely different ... there are many options out there. Be encouraging -- there can be a lot of road blocks in searching for eating disorder recovery, so be reassuring that recovery is possible! Be there to listen and communicate.

Keep in mind that it is up to the individuals suffering to decide they are ready to deal with the emotional issues in their lives that have lead them to their eating disorder. They need to make a choice for recovery and to want to do the work to get there. There is no one in their lives that can make this choice for them, as they must want to do it for themselves. The final action to get better lies in the patient's desire to get better. Often times they feel afraid to ask for help, or don't feel there is a proper forum in which to ask. More often than not, the eating disorder sufferer does not feel they deserve help.

Things You Shouldn't Say...

"Are you sick?"
"You look like you have AIDS"

Let's remember that the person with an eating disorder often ALREADY has a low self-esteem. There's nothing wrong with approaching a close friend or family member you may be concerned about and saying "you've lost a lot of weight and I'm concerned about you" in a caring way, followed by "I'm here to listen if you want to talk." Any comment that comes across as insulting or an attack will be heard defensively and unproductive for what your original intention may have been.

"Would you just eat already!"
"I don't understand WHY you don't just eat..."
"You better stay out of the *&%'ing bathroom!"

These are not words of love, but of control. Threatening someone with eating concerns with "take-over" is not a good idea if you're trying to help. At times, there is a lot of guilt attached to eating disorders, so laying it on thick with statements like these only perpetuates that. If you're close enough, there's nothing wrong with a gentle "Want to have some dinner with me?" or "Talk to me" after a meal, but give them space if they react negatively.

"Why are you doing this to me?"
"Would you look at what you're doing to your boyfriend/husband/wife/kids..."

These types of questions may perpetuate guilt and lead to self-blame. They may only be perceived as a "don't burden us with your problems" or "look at all the trouble you're causing." If you are close to someone with an
eating disorder take it as an opportunity for yourself to learn to communicate more clearly, and to be a more understanding individual. Those suffering with eating disorders are not DOING anything to you, but are struggling tremendously themselves, inside.

"Why are you doing this to yourself?"
"You have good things in your life, what's the problem?"

Those with an eating disorder do not choose to do this to themselves. There is no conscious choice (in most cases) where a person suffering from an eating disorder would prefer that lifestyle as opposed to one filled with self-love and happiness. This is a coping mechanism, a means for dealing with depression, stress and self-criticism that has been built up over many years. It is a reflection of how the person suffering feels about themselves inside.

**Approaching Someone You Care About**

It may be helpful to approach your friend individually, rather than address them with a large intervention, which can lead to a feeling of being ambushed. Pick someone from a support network that may be best for a one-on-one conversation with your friend. This will decrease the likelihood that he/she will become defensive as a result of feeling ganged up on or gossiped about. Arrange a time to chat with your friend that is convenient for both of you, avoiding high-stress times such as mid-terms or finals. It’s okay to think about what you want to say beforehand, and writing it down first or practicing it with another friend may be helpful.

Be gentle and caring, and be prepared to listen without offering mounds of advice. You are not the person’s therapist, nor should you pretend to be. Being a good listener means your ears are open and you are not intervening with “yeah, I know what you mean, that happened to me once when....” - just listen. If they then finish and ask what your thoughts or opinions are, be honest and caring.

Be open and straightforward, and avoid statements that are judgmental, shaming, or place blame. Rather, give specific examples of why you are concerned about your friend’s behaviors. Using “I statements” tend to reduce blame and defensiveness. Keep in mind that there’s no “perfect” way to address your friend, and that some defensiveness is normal when addressing a friend with eating concerns. Some effective approaches may include:

- “I’ve heard you vomiting in the bathroom and it scares me.”
- “I’ve noticed that you haven’t been coming to meals much, and I’ve missed you in the Caf.”
- “I’m concerned with the amount of exercise you’ve been engaging in.”

Try not to make the person feel threatened. It is not your job to dictate what they should and shouldn’t do. If this person has finally decided to talk to you and trust you, cherish it and uphold your role in holding their confidence. In general, try not to overstep your boundaries.

Be encouraging. The recovery road can be a long and uphill battle, with pitfalls and setbacks. Don’t be disappointed or disapproving when a sufferer displays signs of falling back, just encourage them to continue pushing forward. Recovery is not only hard work, but can be very confusing and painful. Be sure to remind them that you understand this, and that "you cannot always continue to stride forward without a stumble from time to time. It's okay."

**Do not talk about food and weight!** Don’t continuously ask what the person has or hasn’t eaten, how much weight they have lost, or how great or bad they look after gaining or losing. This is threatening and you cannot win either way. Saying they look "healthy since you've put on some weight" is heard as "you are fat," and expressing disappointment or concern in weight loss comes across as "you're a failure" or "you're a burden." By the same token, don't be afraid to talk in front of the person about your own day to day living (such as, "yeah, Fred and I went out for dinner last night and the steak was so good.") Your stumbling to avoid topics will be as noticed as your persistence in discussing them. Don’t watch the person "like a hawk" when they are eating, or give looks when they excuse themselves from a meal or from the table. Be respectful and courteous and do not
try to be **The Food Police**. This ultimately leads to arguments and a battle of wills, which may intensify eating concerns.

**Taking Care of Yourself**

Helping a friend who is struggling with a potential eating disorder can feel emotionally draining and stressful. It’s important to accept your limits in changing the behavior of your loved ones, and continuing to support them and yourself is vital. Your responsibility is not to diagnose or provide therapy for your friend, but to communicate care and listen empathetically when they’re ready to talk.

Be a role model for your friend by maintaining your own healthy eating and exercise behaviors. Your friends are paying attention to how everyone talks about themselves and their body, and they may benefit from your example of positive body image and self-acceptance. We’re all in this together. These are some ways that we might encourage eating concerns without even knowing:

- Praising or glorifying another’s appearance based on body size or attractiveness
- Complementing someone when they lose weight or diet
- Talking negatively about our bodies
- Discussing measurements, weights, or clothing sizes (“Numbers Talk”)
- Thinking of foods as “good” or “bad”
- Making fun of another’s eating habits or food choices
- Criticizing your own eating habits
- Expecting perfection
- Allowing the media to dictate what body type is “in”

**Review of “Dos” and Don’ts”**

**DO...**

- Speak to the person privately and allow time to talk
- Tell the person you are very concerned about him/her. Do not be confrontational.
- Allow the person time to respond. Listen carefully and do not be judgmental.
- Keep the focus on problems (i.e., withdrawing from others).
- Share your concerns about your friend’s wellbeing and health with him/her.
- Know about resources for treatment, if you’re friend asks for information.
- Inform a professional (Health Service, Counselor) if you’re scared about your friend’s health (i.e., vomiting several times per day, complaining of chest pains, passing out, suicidal).

**DON’T...**

- Don’t threaten or challenge the person.
- Don’t be judgmental: don’t tell them they are crazy or sick.
- Don’t give advice about weight loss, exercise, appearance.
- Don’t diagnose or serve as your friend’s therapist.
- Don’t get into arguments or a battle of wills. Calmly repeat your concerns and your strong belief that the individual is in need of professional support. End the conversation if your friend becomes too upset.
- Don’t promise to keep what you have observed a secret. Statements such as “I care about you as a friend, and because of that I can’t keep this a secret” may help you navigate this difficult request from a friend. However, be sure to avoid gossip. Try to support your friend in informing others of his/her struggle when they are ready.
- Don’t try to keep track of what the person is eating and try not to force him/her to eat or not eat.
• Don’t let the person monopolize all of your time and energy. Take care of yourself too and be a role model for health.
• Don’t assume that eating disorders fit one type of individual (i.e., females, upper-class, etc.). Eating disorders do not discriminate.

Sources

• [www.something-fishy.org](http://www.something-fishy.org) (Comprehensive website with educational resources and treatment information for those with an eating disorder and those supporting a loved one)
• “Helping a Friend Who May Have an Eating Disorder,” Northeastern University Counseling Services (http://www.northeastern.edu/uhcs/wellness/Helping%20a%20Friend%20Who%20May%20Have%20an%20Eating%20Disorder.html)
• Columbia University Medical Center (http://www.columbia.edu/cu/aims/articles/Helping%20a%20Friend%20-%20Eating%20Disorders.pdf)

Additional Online Resources

• [www.renfrew.org](http://www.renfrew.org)
• [www.gurze.com](http://www.gurze.com)
• [www.nimh.nih.gov](http://www.nimh.nih.gov)
• [www.anad.org](http://www.anad.org)
• [www.edap.org](http://www.edap.org)
• [www.naafa.org](http://www.naafa.org)