

As easy as ABC?

Ministering to pupils with eating disorders

In this article, Jane Smith interviews a housemistress about her understanding of eating disorders and her experiences of managing them within a school setting.

Guilt, shame and secrecy

The term 'eating disorders' covers a wide range of problems and symptoms that affect people of all ages and both genders. Some studies suggest that as many as a quarter of 11 to 14 year old girls are struggling with an eating disorder. Five to ten per cent of people with anorexia or bulimia are male.

Eating disorders are complex and can often be hard to understand, but they bring huge distress to the sufferer and their families. Guilt, shame and secrecy exist and often a sufferer will go to great lengths to hide what is effectively a coping mechanism to deal with other areas of life that seem uncontrollable. Some eating disorders may go largely unrecognised if a young person is maintaining normal weights. However, serious health implications can occur alongside the misery of being caught in a vicious cycle of dieting, losing control and then having to purge foods eaten.

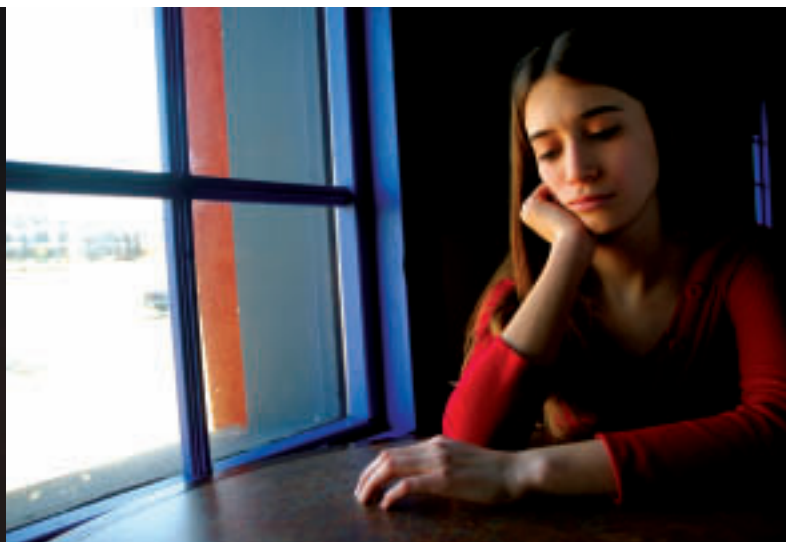
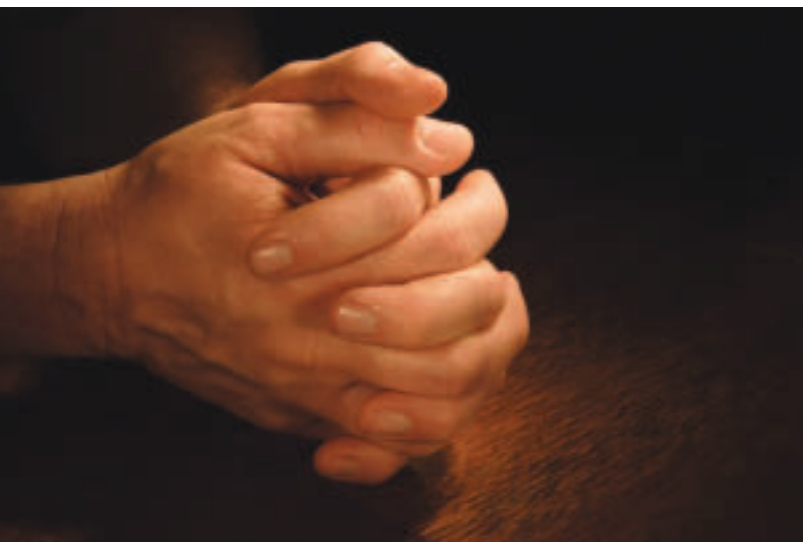
Support and hope

As the only national Christian organisation in the UK dealing exclusively with eating disorders, ABC (Anorexia and Bulimia Care) has a heart for improving awareness and understanding of these devastating psychological illnesses, particularly within Christian circles. ABC runs advice lines for sufferers and carers, and provides a resource for professionals such as teachers, counsellors, pastors, youth leaders and members of the medical profession. The charity responds to 50 or 60 new enquiries each week and its website receives more than 200 visitors a day. We aim to offer support and hope, reassuring people that it really is possible to recover fully from an eating disorder.

ABC recommends that those with an eating disorder – together with their teachers, family members, friends and colleagues – should hold on to the hope and the knowledge that a sufferer can recover. Ultimately, our prayer for everyone is that they will be able to have 'life to the full' (John 10:10) and come to the point when they are 'free indeed' (John 8:36).

How should schools respond to the issue of eating disorders and what support can they offer to pupils and families?





A school response

How should schools respond to the issue of eating disorders and what support can they offer to pupils and families? Is it possible to help prevent eating disorders from becoming serious? What difference can Christian teachers make when much of our youth culture portrays a person's worth as being measured by the media's image rather than God's image? How can we counteract the growing tendency for admiration and approval to be found in celebrity, wealth and achievement rather than in personal qualities found in our Heavenly Father? How can we promote God's healthy values, rather than society's unhealthy preoccupations?

One housemistress talked to us about her understanding of eating disorders and of managing them within her school. She has 12 years' experience with young people, both boarding and day pupils. Her views and the school's approach hopefully offer some insight and a basis for discussion in your school/college workplace.

Do you have the impression that eating disorders are on the rise in boarding schools today?

Actually it is far less of a problem now than it used to be. Some time ago we had a serious case of a boy with anorexia. We set up an eating disorders committee to find out more about the illness, how better we could help him and any other pupil facing difficulties.

Who made up the committee and what did it achieve?

It consisted of the deputy head, the nursing staff, and the house staff for both boys and girls houses. It established good communication between staff and a greater understanding of eating disorders.



Jane Smith is the Parent and Carers Co-ordinator at Anorexia Bulimia Care (ABC), the national Christian eating disorders organisation. Since 2004, she has run ACE, ABC's parent help-line. Jane lives in Somerset with her husband and three daughters, two of whom have recovered from Anorexia Nervosa. She is a former primary teacher and headteacher.

We have a very strong pastoral team too, involving PHSE teachers and individual tutors.

What is your understanding of eating disorders?

I know they are very complex psychological issues. Tact, time and a lot of trust are needed. It's not easy to pinpoint the causes of an eating disorder. Reasons I've seen include parents having problems at home and difficult marriage break-ups. Children also put themselves under pressure to be high achievers and perfectionists.

How do you spot an eating disorder?

We know our pupils very well so we notice changes in behaviour and notice when there is withdrawal and sadness. Children may wear baggy jumpers to conceal their true body shape. Their friends will often come and alert me to a problem because, for instance, they notice their friend isn't eating enough or going in to lunch.

What practical steps do you take to promote the health and welfare of pupils?

Pastoral support is, first and foremost, about making an effort to care about and understand individual young people. We try to steer them gently when they face difficulties. This includes empowering them to ask for help so they can deal with issues relating to food and eating, self-esteem and personal development. We try to identify problems, and take action, as early as possible by:

- providing opportunities for pupils to talk to staff and be listened to;

We try to identify problems, and take action, as early as possible

- cultivating and maintaining an attitude of trust;
- being aware of eating disorders generally and looking for signs in all our pupils;
- receiving training about eating disorders and going on refresher courses; and
- liaising with the medical team at school and with the tutors, dining staff and parents.

How do you monitor a potential problem?

Some schools tick pupils in and out of the dining room for all three meals. Here, our kitchen staff and teachers notice and inform me if, for example, a child is not eating enough or is being ‘over choosy’. Boarders are expected to go in three times a day for meals and, because staff are on duty, if they were skipping meals this would very quickly come to our attention.



How can we promote God’s healthy values, rather than society’s unhealthy preoccupations?

What do you do about a suspected eating disorder?

I would ‘find out’ very discreetly and generally first of all. Then, when the time was right, I’d have a chat with the pupil, if he or she had not already come to talk to me. Sometimes pupils notice a friend excusing themselves from a trip or going to the loo at odd times, particularly after meals, so I’d go and check afterwards.

How do you approach parents?

I do not inform the parents of boarders immediately and often pupils ask me not to. I begin by asking them to talk to another adult at school. Obviously, there comes a time when boarders need to talk to their parents about the situation – but, if the child’s health is not in danger, this conversation can wait. I would, however, involve day parents as soon as possible.

Is it difficult approaching parents when you need to?

Yes, but they do need to know. On the whole they are pleased we are ‘looking out’ for their children. We did have a mother once, a GP actually, who was adamant that I was wrong. She was unable to accept my views, especially as she was having problems herself. On the other hand, some parents approach me with their concerns.

What else can be done to help a pupil with an eating disorder?

I would go in and survey the situation. I would sit with the pupil, finding out about their situation, issues and problems. I’d want to look at time-tabling, maybe taking some academic pressure off them if they were overloaded – some pupils take on so many extra curricula activities too! I think prevention is better than cure. Often we can steer pupils away from an eating disorder before it gets a grip on them. We record the weight and height of boarders on a termly basis and are aware of any physical and emotional fluctuations.

As a staff, what support and back up do you receive?

The medical team at our school regularly attends training courses about eating disorders. Our PHSE

Children may wear baggy jumpers to conceal their true body shape

The symptoms	
<p>Anorexia Nervosa</p> <p>Deliberate restriction of diet, dramatic weight loss and extreme fear of weight gain</p> <ul style="list-style-type: none"> ■ Preoccupation with body size ■ Loss of, or irregular menstruation in females ■ Low blood pressure and dizziness ■ Over-exercising ■ Limiting food choice ■ Counting calories/fat content ■ Additional weight-loss methods ■ Ritualistic food behaviour ■ Reluctance to eat in front of others ■ Secrecy and negativity ■ Withdrawal and isolation ■ Deceitfulness about eating ■ Denial 	<p>Bulimia Nervosa</p> <p>Recurrent episodes of binge eating followed by self-induced vomiting, laxative abuse, diuretics, fasting or exercise . . . body weight is usually at or near ‘normal’</p> <ul style="list-style-type: none"> ■ Preoccupation with weight and body shape ■ Rapid weight fluctuations ■ Leaving the room after meals ■ Secretiveness due to shame ■ Chronic stomach aches and nausea ■ Other physical signs including bloodshot eyes, swollen glands under the jaw, loss of tooth enamel ■ Hypersensitivity ■ Excessive guilt ■ Extreme low self-esteem and body image

Eating disorders are complex and often can be hard to understand

director is very aware of eating disorders and educates and supports all pupils via the curriculum, so, too, do our sports teachers. The Boarding Schools Association (BSA) runs very good courses on eating disorders.

Have you had a case of severe anorexia or bulimia?

Recently we had a pupil with anorexia nervosa and, despite all our considerable efforts, she needed specialised out-patient care and then had to miss a term of school for in-patient care. This was our worst case, our only severe one. We liaised with the medical unit's school to help her continue her education and she did really well. We asked her mother – with whom we had developed a strong supportive relationship – to come into school to talk to the year group, so we could help her daughter settle back into school again. We also wanted to reassure her friends and help them come to terms with the shock, despite all their support and encouragement.

So how do you help see a pupil through an eating disorder?

It is always wonderful to see children overcome difficulties. Recovery from an eating disorder, however, is a slow business. Continue to observe and support them even though their weight appears more stable. Understand how difficult coming back into school is. I would try to keep the atmosphere 'normal' so that the returning pupil feels relaxed. Have a focus, but also be sensitive to how she or he feels on some challenging days. Furthermore, it is vital to communicate with parents and support them, giving them reassurance that the school is looking after their child, and helping them recognise their true worth.

■ Jane Smith

Information

ACHE (Anorexic Children, Help and Encouragement) is ABC's parent help-line. It provides advice and a listening ear to parents, siblings, family members and other concerned individuals such as teachers. It provides ongoing encouragement from a Christian perspective for those facing the impact of a child struggling with an eating disorder. ACHE also works to raise awareness of eating disorders in schools.

ABC provides training days to organisations and talks to schools and churches.

ABC, PO Box 173, Letchworth, Herts SG6 1XQ
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