



Tips for communicating with parents/guardians of a student with an eating disorder

After a student has been referred for follow-up to a school's student assistance program or appropriate school staff, here are some suggestions for implementing successful communications between the school and student and the school and parents.

Before you approach the family

- Consider the family dynamics and any cultural or social issues that may make it difficult for the parents/families to discuss issues.
- When approaching parents/families, always ask if it is a convenient time to talk, and then schedule a time if it isn't convenient at that moment.

When you start the conversation with family or guardians focus on empathy and concern

- Show empathy and support. Listen to what the family member says without interrupting, judging, or making pronouncements or promises.
- Aim to establish and maintain a positive, open, and supportive relationship with parents/families. Be mindful that parents may feel guilty, blamed, or responsible for the eating issue or disorder in some way.
- Begin by telling the parents/families that you are concerned about the student *AND* offer specific, factual observations about the student's behavior to illustrate your concerns. Don't interpret what the behavior could mean—just state the facts of the observed behaviors. Here are some examples:
 - *We are concerned about (student's name) because of some behaviors we've noticed recently. Specifically, he/she has been keeping to himself/herself a lot and has been [distracted, fidgety, agitated, unfocused] in class. I was wondering if you had any concerns or noticed anything recently.*
 - *We are concerned about (student's name) because of some comments we've heard him/her make about himself/herself recently. We've heard [student] make a lot of comments about feeling unhappy about his/her appearance, weight. I was wondering if you had any concerns or noticed anything recently.*
 - *We are concerned about (student's name) because of some behaviors we've noticed recently. We've noticed [student] does[not eat lunch; eats very little; throws lunch away; always requests a restroom pass immediately after eating and becomes very agitated or upset if not given a pass at that moment]. I was wondering if you had any concerns or noticed anything recently.*

- Don't persist with a conversation that isn't going well. This may damage future communication. To end a conversation that isn't going well:
 - acknowledge that you sense it must be difficult to talk about;
 - affirm that the choice to not talk about it is OK;
 - reiterate the school's concern for their son/ daughter;
 - leave the door open by reassuring them that you are available to talk anytime;
 - let them know that you will contact them again soon to check in; and
 - you may also want to let them know about the school's duty of care to its students.
- Don't make a diagnosis.
- Encourage the family to access support, information, or treatment from external agencies and have resources available to refer them to.

The school and student of concern

- If appropriate, involve the student in conversations with his/her parents/families.
- If possible, negotiate an agreement with the student to enable open communication with parents/families.
- Consider action in relation to duty-of-care if a student requests that parent(s) not be informed.
- Consider what action you are permitted to take if parents/families deny there is a problem and you feel the student is in crisis.



The school's ongoing communication with and support to the family and student

- Specify who at the school will be a family liaison so that the family has the opportunity to develop a supportive relationship with a school staff member. The school psychologist, counselor, or equivalent is generally the most appropriate person to communicate with parents/families.
- Be clear about the support the school can offer and the services available through the school.
- Follow up oral conversations with a written summary of the conversation and action steps agreed upon, and send the summary to the parent/family member to check mutual understanding of what was discussed.
- Focus on the general wellbeing of the student, rather than concerns about an eating disorder if the topic appears to be sensitive.
- Ask the family member what kind of support would be helpful. This may provide useful information about how to proceed, and it may also facilitate a sense of trust and safety with the family.
- Try and decide collaboratively on the next steps the school will take with the student and family.

KEY SOURCES:

Victorian Centre of Excellence in Eating Disorders, The Royal Melbourne Hospital, Australia <http://www.rch.org.au/ceed>

ECRI Institute Bulimia Resource Guide www.bulimiaguide.org

ECRI Institute interviews with educators