The Role of the Educator: Some "Don'ts" for Educators and Others Concerned About a Person with an Eating Disorder



By: Michael Levine, PhD and Linda Smolak, PhD

- 1. Don't cast a net of awe and wonder around the existence of an eating disorder. Keep the focus on the reality that eating disorders result in:
 - Inefficiency in the fulfillment of academic, familial, occupational, and other responsibilities.
 - Misery in the form of food and weight obsession, anxiety about control, guilt, helplessness, hopelessness, and extreme mood swings.
 - Alienation in the form of social anxiety, social withdrawal, secrecy, mistrust of others, and self-absorption.
 - Disturbance of self and others through loss of control over dieting, body image, eating, emotions, and decisions.
- 2. **Don't oversimplify.** Avoid thinking or saying things such as "Well, eating disorders are just an addiction like alcoholism," or "All you have to do is start accepting yourself as you are."
- 3. **Don't imply that bulimia nervosa is somehow less serious than anorexia nervosa,** because it is often associated with "normal weight."
- 4. **Don't be judgmental**, e.g., don't tell the person that what they are doing is "sick" or "stupid" or "self-destructive."
- 5. Don't give advice about weight loss, exercise, or appearance.
- 6. **Don't confront the person as part of a group of people**, all of whom are firing accusations at the person at once.
- 7. **Don't diagnose**: keep the focus on IMAD (inefficiency, misery, alienation, disturbance) and the ways that the behaviors are negatively affecting the person's life and well-being.



- 8. **Don't become the person's therapist, savior, or victim.** Do not "promise to keep this a secret no matter what."
- 9. **Don't get into an argument or a battle of wills**. If the person denies having a problem, simply and calmly:
 - Repeat what you have observed, i.e., evidence that there is a problem.
 - Repeat your concern about the person's health and well-being.
 - Repeat your conviction that the circumstance should at least be evaluated by a counselor or therapist.
 - End the conversation if it is going nowhere or if either party becomes too upset. This impasse suggests that the person seeking help needs to consult a professional.
 - Take any actions necessary for you to carry out your responsibilities.
 - Leave the door open for further conversations.

10. **Don't be inactive during an emergency**: If the person is throwing up several times a day, passing out, complaining of chest pain, or is suicidal, get professional help immediately.