

# SIGNS AND SYMPTOMS

to be on the lookout for

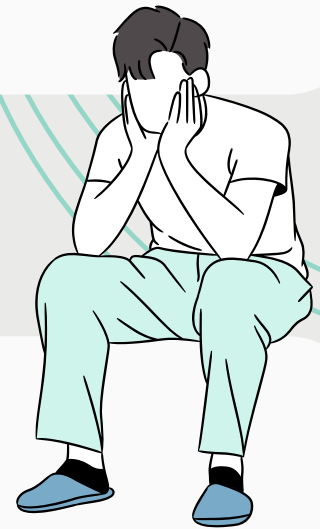
## Emotional

Preoccupation with weight  
 Calorie counting  
 Weighing self  
 Withdrawing from others  
 “Fat talk”  
 Obsessive thinking  
 Anxiety if unable to engage in food or exercise behaviors  
 Struggles with self-esteem  
 Increased feelings of shame  
 Frequent mood shifts



## Physical

Noticeable weight gain or loss  
 Changes in menstrual cycles  
 Abnormal blood work results  
 Difficulty regulating body temperature  
 Tooth decay  
 Dizziness  
 Difficulty concentrating or making decisions  
 Fainting  
 Irregular sleep  
 Excessive fine hair growth on body  
 Increased gastrointestinal complaints



## Behavioral

Body checking  
 Avoidance of mirrors  
 Frequent use of restroom  
 Frequent teeth brushing  
 Skipping meals  
 Declining meals, sharing food or invitations  
 Eliminating one or more food groups from diet  
 Eating in private frequently or hiding food  
 Frequent dieting  
 Mismanaging diabetes medication/insulin

# MEAL SUPPORT GUIDE

## Do's and Don'ts

### Caregiver Do's

Prepare and serve meals in the same way you would have prior to the ED.



Decide on the amount and variety of food (it will always be overwhelming to your loved one and seem like too much).



Eat the same/similar foods as your loved one. It can be very triggering to your loved one if the caregiver eats differently.



Create balanced meals and try to include ALL THE FOOD GROUPS.



Stay with your loved one throughout the ENTIRE meal. Monitor their mood and food intake. This also demonstrates moral and emotional support.



Use distractions as needed to help your loved one through the meal. Keep distractions light-hearted.



Be empathic, caring, and supportive, but also firm. It can be a tough balance to find!



Remember: any pushback or conflict is coming from a place of FEAR.



### Caregiver Don'ts

Comment on food, diets, or other nutrition messages such as weight, shape, calories, fat and carbohydrates.

Negotiate about the served meal.

Discuss body image - related issues or other people's (including your own) appearance.

Assume your loved one ate their food if you did not see them eat it. Staying with them for meals helps to eliminate (or lessen) conflict around asking questions/checking in to see if they ate properly.

Don't get up from the table, answer your phone, internet/computer, text, use the bathroom etc.

Have intense or difficult discussions at the table/at meal times.

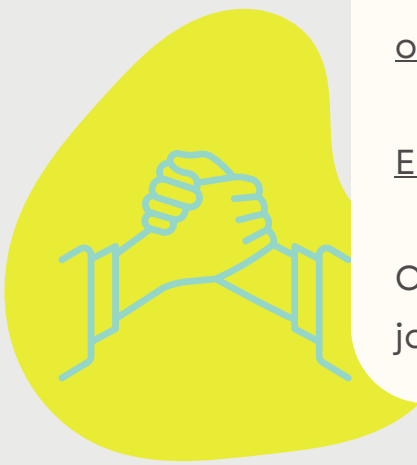
Express anger or frustration that you may feel toward your loved one. They are not being willfully disobedient.

Praise your loved one after eating. For some people this can be very triggering, even though it comes from a good place and is meant to be encouraging.

# RESOURCE GUIDE

for Caregivers

## Support Groups



National Allianance for Eating Disorders:  
[online support group](#)

[Eating Disorder Family Support Network](#)

Contact [EDCI](#) to express interest in  
joining a virtual support group for lowans

## Becky Henry resources:

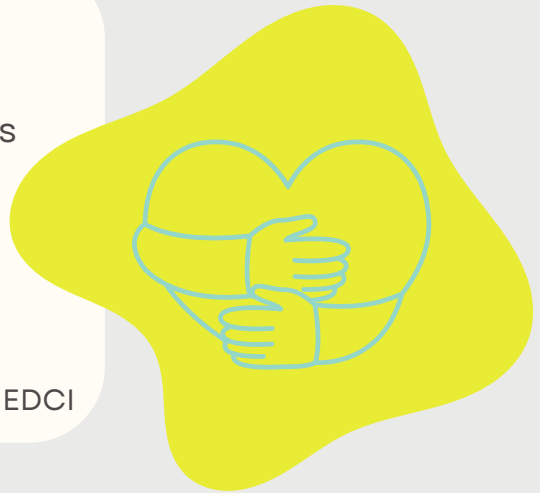
### Hope Network [HUG Kits](#)

Video series with associated handouts  
and a copy of Becky Henry's book.

### Recovery [Roadmaps](#)

Webinar Series

\*USE CODE EDCI



## Funding resources:



Resources to apply for financial  
assistance for higher levels of ED  
treatment:

[The Kristen Haglund Foundation](#)

[Project Heal](#)

[With All](#)

[Moonshadow's Spirit Organization](#)

[Rebecca's Eating Disorder Foundation](#)

[Mary Rose Foundation](#)

[Manna Fund](#)

## Parent toolkits:

National Eating Disorder Association  
comprehensive [toolkit](#) for parents

F.E.A.S.T [toolkits](#) available in multiple  
languages

General Do's and Don'ts [handout](#)

