If you are concerned about a friend or family member who might have an eating disorder, you may be in a unique position to help. The most effective approach is a caring interaction. If your friend is not in treatment, the aim is to refer him or her to an experienced therapist, nutritionist, or medical provider. Eating problems do not usually go away on their own, and the earlier the treatment, the more likely that medical complications may be reduced.

Take into consideration ...

Think about who may be the best person to do the talking.

Pick an occasion to talk when:
• you are feeling calm
• you know you won’t be interrupted, and
• the person you are speaking to will be comfortable

Consult with a knowledgeable person for support and assistance (for example: RHD, advisor, therapist, nutritionist or health educator).

Practice what you will say. A well-planned discussion will have a better impact and increase the likelihood that the person will respond positively.

Give some thought to the following points in order to be clear about what you want to say:
• What is worrying you about your friend?
• How do you feel about his/her behavior?
• What are your goals in talking to the person?

Keep in mind that you can stop the conversation if it starts to get out of control, and continue at a later date.

Guidelines for communication

Express your concern in a caring, non-judgmental way by sharing your feelings. Use “I” statements, such as: “I am worried about you because you seem tense and unhappy.” “I am concerned about you. You seem to worry so much about your weight.” or “It looks like you’ve been having a hard time, is there any way I can help?”

Don’t diagnose or label. It is better to say, “I think you may have a problem,” not, “You have an eating disorder.”

Invite the person to share his/her feelings with you. “Would you like to talk about it?” or “I often feel better after I talk something out with a friend. If you want to talk, I would be glad to listen.”

Reflect back to your friend the behaviors that are concerning to you.

Be supportive. Show the person you believe in him or her. Let your friend know that your conversation is confidential.

Be specific as you reflect back to your friend the behaviors that concern you, without condemning the person or getting into an argument. “I’ve noticed that you talk a lot about your weight and feel fat no matter how thin you get.” “I’ve heard you crying/being sick.”

Avoid judgmental statements such as the following: “How could you do this to yourself?” “It’s disgusting, why do you vomit/starve yourself?” They are not helpful.

If your friend declines to talk, don’t push. But do check back later. “I could be wrong; I just want you to know that I care and am interested. If you ever want to talk, I’m available.” After that, continue to treat the person in a normal, friendly way. Later on, ask again: “How are you doing?” “I wonder if you’ve thought any more about our talk last week?” “You know, even though you said everything’s okay, I still find myself thinking that something might be troubling you.”

Unless the situation seems urgent, give the person a little time. But, if nothing happens and you are still concerned, talk again to a professional about what to do next.

If your friend does confide in you, let him/her know you’re glad. “It’s so good that you told me. Let’s talk again and be in touch.” “I’d like to help.”

Don’t be a watch dog. Watching the person eat or telling the person what to do is usually not helpful. It’s best to ask how he/she would like
you to help. Note that if your friend asks a question such as, “Do I look fat?” a response such as, “No, you look great,” may only increase the disorder. Instead say, “I care more about how you feel and how you feel about yourself.”

Lead up to a referral. “I’d like to help more but I’m not sure how. I haven’t had much experience with this.” “You seem to feel better talking. Have you thought about talking to someone with experience working with these problems?” “I want to be here for you, but I don’t know how to help with this problem. How about talking with someone at Cornell Health, they have experience with this.”

Offer to help make an appointment at Cornell Health with a nutritionist, therapist, or medical provider in the Cornell Healthy Eating Program (607-255-5155). Consider offering to accompany your friend to the appointment.

If your friend objects to seeing a professional, there may be a good reason. Invite your friend to talk about it. Listen, then try to explore any objections, such as the following: “No one else can help, I have to do it myself.” “I once saw a therapist and it was awful.” “I don’t want my parents, friends, advisor to find out.” “I can’t afford it.”

Emphasize that health care is confidential. If your friend had a previous experience with health care that was bad, sympathize. “I can understand why you are nervous, but trying on your own doesn’t seem to be working. The person you see this time might be different.” Let your friend know that getting help may be one of the most important things to do in order to feel better and move forward with life.

Once you’ve made a referral, it’s helpful to check back with the person to ask, “How did it go?” Remind your friend that you care and would like to help.

### How to deal with your own frustrations if the situation doesn’t improve

Realize that you can’t make anyone change, the person has to be ready. It’s neither your responsibility nor your failure if someone doesn’t change.

Understand that behavior changes slowly. Even if the person is getting help, it may be weeks or months before any change is evident.

Limit conversation to what you are comfortable discussing. This will also help the person with the eating disorder.

- “I can’t talk now. I’m studying for a test. Tomorrow afternoon would be fine, though.”
- “I can talk but only for about twenty minutes, then I have to go the library.”
- “Let’s talk about something else. How are you doing otherwise?”

Then, bring up other topics of mutual interest to show that you care about the person and can give attention for other reasons.

Set limits for behavior that affects yourself and others. “I’m sorry you have this problem and I’d like to help. But, we can’t tolerate vomit in the bathroom.” Talk to someone about your own emotions, if you feel the need; consult with a professional for further help.

### Resources

The Collaborative Health and Eating Program (CHEP) provides confidential care for nutrition, eating problems, and body image concerns. To schedule an appointment, call 607-255-5155. There is no charge for an appointment to discuss another student about whom you are concerned. More information is available at health.cornell.edu/CHEP

The Nutrition Clinic of Elmira provides specialized treatment for eating disorders, phone 607-732-5646.

National Eating Disorders Association provides information and referrals for treatment across the US. Visit nationaleatingdisorders.org or phone 800-931-2237.

Recommended reading: Surviving an Eating Disorder: Strategies for Family and Friends, by Siegel, Brisman and Weinshel.