



Fact Sheet

2005

Student Health Services Texas A&M University

Guidelines for Helping a Friend with an Eating Disorder

DO:	DO NOT:
listen with understanding	tell your friend he/she is crazy
appreciate the openness and trust in sharing with you his/her distress	blame him/her
share your own struggles, be open and real	gossip about your friend
learn more about eating disorders	follow him/her around to check their eating or purging behavior
give support and be available	ignore your friend
give hope that with help and with patience he/she can free themselves from this disorder	reject him/her
give your friend a list of resources for help	tell him/her to quit this ridiculous behavior
	feel compelled to solve their problem
	make excess comments about being thin

DO heed the signs. Anorexic behavior includes extreme weight loss (often emaciation), obsessive dieting, and distorted body perception (a thin person thinks he/she is fat when they are not). Clues of bulimia are more subtle. Your friend may eat a great deal of food, then go to the bathroom. She/he may hide laxatives or speak outright about the “magic method” of having the cake and not gaining weight. Anorexics and bulimics tend to be preoccupied with food and many have specific rituals tied to their eating patterns.

DO approach your friend gently, but persistently. Explain that you’re worried; listen sympathetically. Don’t expect your friend to admit he/she has a problem right away. The first step is realizing there is a problem. Therefore, it is important to help your friend realize this.

DO focus on unhappiness as the reason your friend could benefit from help. Point out how anxious or unhappy he/she has been lately, and emphasize that it does not have to be that way.

DO be supportive, but do not try to analyze or interpret their problem. Being supportive is the most important thing you can do. Show your friend you believe in him/her – it will make a difference in recovery.

DO talk to someone about your own emotions if you feel the need. An objective outsider can emphasize the fact that you are not responsible for your friend; you can only try to help that person help him/herself.

DO be yourself. Be honest in sharing your feelings: i.e., “It’s hard for me to watch you destroy yourself.”

DO give non-judgmental feedback. For example, “We haven’t gone to lunch together in a while, is anything going on?” instead of “You haven’t gone to eat with me in a while, do you have a problem?”

DO cooperate with your friend **if he/she asks you** to keep certain foods out of common storage areas. This may help prevent a binge on such foods.

DON’T keep the “secret” from the family when your friend’s health and thinking are impaired.

DON’T forget that denial is a form of selective “deafness.”

DON’T be deceived by the excuses: “It’s not really bad. I can control myself.”

DON’T focus on your friend’s weight or appearance. Focus on your concern about his/her health and well-being.

DON’T change your eating habits when you’re around your friend. Your “normal” eating is an example to your friend of a more healthy relationship with food.

The Health Education office of Student Health Services offers programs and information on eating disorders as well as a list of resources available on campus, locally, and nationally. A team approach, with a psychologist or psychiatrist, health care practitioner, and a dietitian is the most effective. If you have any questions or want more information, please call any of the following numbers:

- ♦ Health Education at 458-8322 / Come by Rm. 008 of A.P. Beutel Health Center
- ♦ Student Counseling at 845-4427
- ♦ Student Counseling Helpline at 845-2700 (available evenings and weekends)