

Coping with College Series

Eating Disorders and Disordered Eating

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Often when we think of someone with Anorexia Nervosa or Bulimia Nervosa we envision an emaciated person, or a person who consumes many thousands of calories in a very brief period of time. Although these images can be accurate, many people don't reach the extreme conditions of an eating disorder, but still struggle with disordered eating habits. Similar to an eating disorder, disordered eating involves unhealthy dieting, and often unhealthy exercise. An individual who has disordered eating habits wouldn't meet all the conditions for anorexia or bulimia, but would be engaging in behaviors that could lead to physiological, emotional, and/or social difficulties. Further, disordered eating can lead to a chronic eating disorder.

Eating disorders can be viewed as occurring on a continuum. Imagine one end of the continuum labeled 1, and the other end of the continuum labeled 100. People who are hospitalized because of an eating disorder would likely fall close to 100. People who exhibit an absence of dieting, bingeing, purging, or other eating disorder behavior would fall closer to 1. In reality, most people probably find themselves somewhere in the middle of this continuum.

It is likely that many individuals will fluctuate along the continuum described above. As we spend time on or off a diet, we will be at different places on this continuum. As many as 80% of women in our society have been on a diet in their lifetime. While dieting, a good number of these women might move from the middle of the continuum towards the eating disorder side. Does this mean that 80% of women in the US have had eating disorders? Of course not. However, it does suggest that dieting behavior in our society is very typical, and that many people engage in the same sorts of behaviors as those of a person with an eating disorder. The behaviors of people with eating disorders are more extreme. However, many of us restrict calories, eat more than we need, or purge calories through exercise. The key is recognizing when healthy eating and exercise behaviors become unhealthy.

Answer the following questions about yourself. Do I often feel guilty after eating? Do I restrict caloric intake to less than 1000 calories per day? Do I ever take laxatives or vomit in an attempt to control my weight? Do I ever lose control of the amount of food I eat? Do I exercise when sick, injured, or against a doctor's advice? And finally, do my concerns or behaviors about eating or body weight ever interfere with my relationships or academic/work performance? If you answered yes to any of these questions, your eating and exercise behavior may be putting you at risk of developing an eating disorder. Answering "yes" to one of these questions doesn't mean that you have an eating disorder, only that it may be helpful for you to meet with a professional to discuss your eating and exercise behavior.

If you would like to speak with someone about these issues, the Student Counseling Services has a number of professionally trained counselors and psychologists who can assist you. You can arrange an appointment at room 320 of the Student Services Building, or by phoning 438-3655.