

# Clinicians | 10 ACTIONS

- 1 Understand that physical appearance alone does not measure the presence or seriousness of an eating disorder.** Thoroughly assess thoughts and behaviors in relation to food, eating, and compensatory behaviors such as purging or exercise.
- 2 Involve family and/or others that the individual identifies as support persons in assessment and treatment.** They are experts on their loved one, and they can offer valuable insight and support. Research shows improved prognosis for those who have support from family and friends.
- 3 Recognize that eating disorders have a ripple effect that creates a state of crisis not only for affected individuals, but for their families as well.** Assess how the eating disorder is affecting everyone and offer guidance to help alleviate distress and optimize support. Provide resources, education, and support for all.
- 4 Help individuals and caregivers understand the complex etiology of eating disorders.** Genetics, environment and many other factors contribute to their development. Don't use language that reinforces that eating disorders are choices or that blames anyone for the disorder.
- 5 Maintain a high index of suspicion for these serious disorders.** Screen individuals who present with 1. unexplained weight loss, gain or fluctuations, 2. fertility issues, 3. changes in mood or anxiety, 4. amenorrhea, 5. fatigue, 6. changes in exercise or eating patterns, 7. Changes in attitudes or behavior, especially when related to food, exercise or weight.
- 6 Re-evaluate frequently for medical and psychological danger.** Weight, size, body shape, and BMI are not the only markers for health. Educate yourself, the individual, and family members about the increased risk of medical complications and suicide. Refer to the Academy for Eating Disorders Medical Care Guidelines for more information.
- 7 Reassure individuals and their caregivers that recovery is always possible.** Even though prognosis is improved with earlier diagnosis and treatment, recovery can happen even in someone with a longstanding eating disorder.
- 8 Take caregiver concerns seriously and investigate further, even if the individual denies concerns.** Individuals with eating disorders may not recognize the seriousness of their illness and/or may minimize their symptoms.
- 9 Explain to individuals and their families that recovery is about more than just weight restoration.** Emphasize that eating disorder thoughts and behaviors are also important in determining recovery, and that these thoughts and behaviors can take longer to resolve. Some individuals may need to reach higher weights to achieve full recovery.
- 10 Promote diversity in clinicians and clinical spaces.** Understand how clinician biases regarding weight, or the types of individuals that get eating disorders, influences care. Recognize that eating disorders affect individuals of all shapes, sizes, ages, races and genders.