

CO-OCCURRING DISORDERS: ANXIETY & EATING DISORDERS



A co-occurring disorder is when an individual struggles with two or more mental health diagnoses. It is not uncommon for those with an eating disorder to struggle with an anxiety disorder. Regardless of which occurred first, both disorders often build on one another. Understanding the connection between an eating disorder and an anxiety disorder is key to treatment and ongoing support.

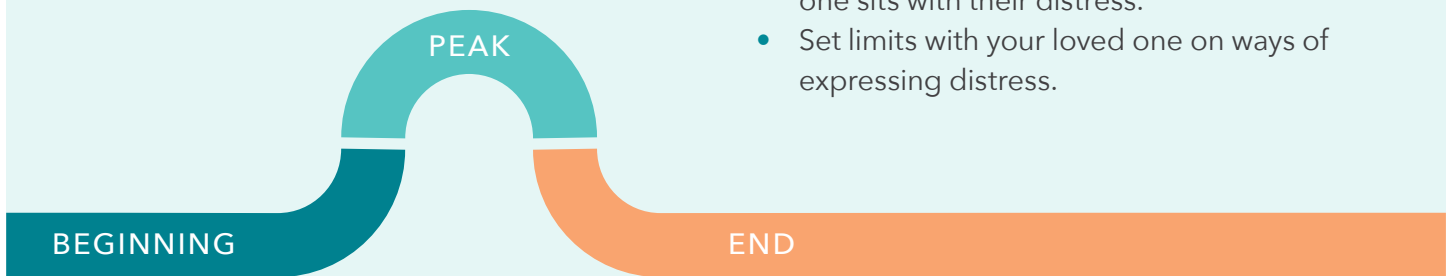
Riding the Wave

Anxiety, like other surges of emotion, can be compared to a tidal wave. It builds, gains momentum, reaches a peak and then rushes to the shore. As you know, there is no stopping a wave, so the only option is to ride it out. The good news is there is a beginning, a peak and an END.

While such waves can be intimidating, they are not dangerous. Yet as caregivers we may be inclined to accommodate and rescue. Naturally, our own feelings can make it hard to see when it is time to let our loved one learn to navigate distress. Research tells us that ninety percent of families and friends accommodate. We are wired to respond to the distress of our loved one.

Know that your loved one now has the tools to handle the distress. Believe in their ability to use those tools. Instead of accommodating, put into practice any of the following:

- Emotion Coach: “I see you are anxious” or “I can imagine this is hard for you” because, because, because...
- Show your loved one that you are not afraid of their distress by remaining calm, confident and neutral.
- Encourage your loved to tap into relaxation techniques or mindfulness exercises.
- Redirect your loved one to the task at hand with firmness and respect.
- Go on with your next task while your loved one sits with their distress.
- Set limits with your loved one on ways of expressing distress.



ANXIETY

- ✓ A normal response to stress
- ✓ Enables effective coping
- ✓ Facilitates fight or flight: the body's alarm system
- ✓ Not dangerous

PROBLEMATIC ANXIETY

- ✓ Brain sends false alarms in the absence of a real danger
- ✓ Prevents effective coping
- ✓ Normal functioning is impaired
- ✓ The feeling is still NOT dangerous

MAKING USE OF SUPPORTIVE PHRASES

Normalize mixed feelings.

“ Part of you feels..., yet part of you wants to...

Describe the facts as you see them. Respond calmly and with warmth.

“ I see what you think... I think you feel... I noticed that... How can I help...

Listen carefully to the answers.

“ Sounds like this might be the way you see things... Have I got that right?

Find out what, if anything, concerns the person with an eating disorder.

“ The doctor says it would be better to reduce exercising because your BMI is very low. What do you think would have to happen for you to do this?

Listen without judgment.

“ Everyone has different views. This is the way I see things; I accept you feel differently.

Modulate your emotional reactions. Remain calm and compassionate.

“ I've learned that it won't help if I get angry or anxious. Let me take a minute to calm down and then I'll be right back.

Ask what you and others might be able to do to help.

“ Is there anything I can do to help?

Express all positive thoughts and comments as often as possible.

“ Thanks for saying that... I like it when you...

Phrase comments on negative eating disorder behaviors in non-judgmental tones. Sandwich such comments between reassurances that while you dislike the behavior, you still love the person.

“ I don't like it when you shout at me; I love you and still don't like it when you shout at me; I love you and am concerned about you; I don't like it when ...

Adapted from: Skills-Based Learning for Caring for a Loved One with an Eating Disorder Janet Treasure MD, Grainne Smith and Anna Crane. Routledge, 2007.

For additional resources, visit EatingRecovery.com/FamilyFriendsSeries
For more information or if you have questions, please email Resources@ERCPATHLIGHT.COM