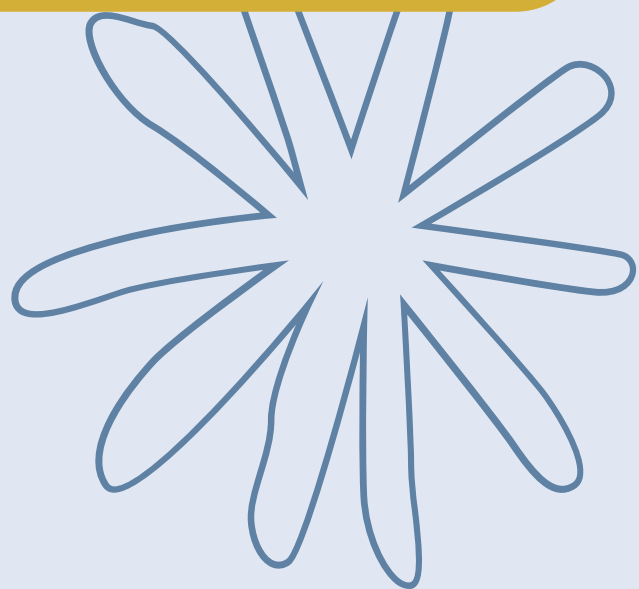




# **A CLINICIANS BRIEF GUIDE TO BEING EATING DISORDER INFORMED**



**THE EATING DISORDER CENTER**  
Eating Disorder Therapy & Recovery Coaching

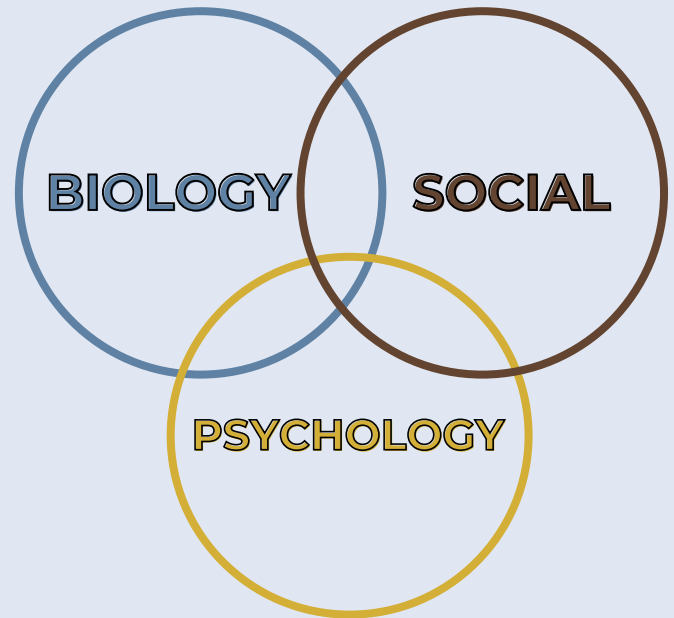
# PREVALENCE OF EATING DISORDERS

## Eating disorders (ED)

### affect people of:

- All races
- All cultural backgrounds
- All genders

## RISK FACTORS



## RESEARCH INSIGHTS

**1 in 7 males and 1 in 5 females are likely to experience an ED.**

**Those with nonbinary gender identities are 3.16 times more likely to be diagnosed with an ED.**

**People who identify within the LGBTQIA+ community have a higher incidence of eating disorders and associated behaviors than cisgender and heterosexual individuals.**

**BIPOC individuals are less likely to be asked about eating disorder symptoms and to be diagnosed or receive care.**

# WAYS TO HELP



DON'T LABEL  
FOODS AS  
GOOD OR  
BAD

AVOID  
MAKING  
COMMENTS  
ABOUT  
WEIGHT

VALIDATE  
FEELINGS  
AND  
EXPERIENCES

CREATE AN  
INCLUSIVE  
AND SAFE  
ENVIRONMENT



## IMPORTANCE OF REFERRING OUT

As clinicians, it is important for us to **reflect on our competencies** within the field. This includes referring out, even for concurrent treatment for other mental health disorders.

**REFER OUT TO  
A SPECIALIST!**

- 10,200 deaths happen each year directly resulting from an eating disorder.
- Approximately 26% of individuals who have eating disorders attempt suicide.
- Eating disorders have the 2nd highest mortality rate of mental health disorders.

**Eating disorder therapists complete specialized training. Consider the client's best interest when thinking about referring out.**

# Eating Disorder Screening Questionnaire

\*This is a screening tool and is not intended for diagnostic purposes. Saying "yes" to any of these means the person may benefit from a referral to an eating disorder therapist.

Answer "yes" or "no" to the following questions:

1

Do you spend a lot of time thinking about food and your body?

2

If you had to take a week off from exercise, would that give you anxiety?

3

Do you have food rules (for non-medical reasons)? Ex: limiting carbs or "I don't eat white bread."

4

Are you afraid of gaining weight?

5

Do you restrict (intentionally try to eat less), binge (eat more than usual in a short time period) and/or purge (vomit, use laxatives, etc)?

6

Do you have a small list of foods that you like and will eat and a long list of foods that you won't eat?

7

Do you ever feel shame or guilt after eating?

## To make a referral:



301-246-6856



INFO@THEEATINGDISORDERCENTER.COM



## THE EATING DISORDER CENTER

Eating Disorder Therapy & Recovery Coaching

**Life-  
changing  
help for  
eating  
disorders &  
body image  
issues.**


### OUR SERVICES

- EATING DISORDER THERAPY FOR CHILDREN IN MD.
- EATING DISORDER THERAPY FOR TEENS IN MD, VA, DC & FL.
- EATING DISORDER THERAPY FOR ADULTS (18+) IN MD, VA, DC, NY & FL.
- EATING DISORDER THERAPY FOR FAMILIES AND COUPLES IN MD.
- RECOVERY COACHING FOR TEENS AND ADULTS WORLDWIDE.

We use evidence-based treatment methods, including acceptance and commitment therapy (ACT), dialectical behavioral therapy (DBT) skills, cognitive behavioral therapy (CBT), and modified family-based treatment (FBT).

We pride ourselves on being action-oriented therapists, setting recovery goals, and doing exposures with clients, such as eating meals or snacks together. We value collaboration with other local eating disorder treatment providers, including dietitians, psychiatrists, and physicians.

We are thankful to have helped many people to recover from eating disorders and body hatred.

 301-246-6856

 [INFO@THEEATINGDISORDERCENTER.COM](mailto:INFO@THEEATINGDISORDERCENTER.COM)

