Your School – Help or Hindrance?

If your child is still at school and you suspect they're showing signs of an eating disorder, as a parent often your first "port of call" is the school. You will want to ask questions about their eating and about social and academic concerns and you will doubtless expect your school to do something to help your child and to have a level of understanding of eating disorders via the National Curriculum, the school's own policies and the expertise and training of individual members of staff. Just how effective are these? Two Parents report.

Where a school does not respond.

The Spotlight interview shows good practise at its best, but what about the other side, the cases we hear where sadly certain schools have not responded to parents and children quickly enough or with sufficient understanding or knowledge, or where individual teachers have not handled things with enough sensitivity or care?

ABC member, Jenny Langley, author of "Boys Get Anorexia Too" spoke to us about the way her school initially tackled Joe's descent into an eating disorder. He was 12yrs old at the time, and in the intervening years has made a complete recovery. Jenny says, "He was looking thinner and thinner and no-one at school noted it, despite us raising concerns. They reassured me that it was on account of all the sport he was playing". On returning to school after a holiday, Jenny again contacted the school with further, deeper concerns only to find that Joe had been the "talk of the staff room" and yet no one from school had contacted her.

Lack of action and defensive reactions

She makes the very valid point that boys often go un-detected for longer since sport is meant to be their domain and therefore over-exercising is not considered. Eating disorders in boys are not as common as in girls and even Jenny's GP was unable to give her the help she needed initially and the school's headmaster "reacted very defensively". The difficulty was compounded by the fact that Joe was eating well at home. Fortunately

Joe's form teacher put in every effort to try to understand his concerns and monitor his eating and his behaviour at school. This teacher became the main point of contact and a good support.

As is often the case with a fast-growing child into adolescence, Joe sadly lost weight dramatically during the following ten weeks and was rushed into hospital whereupon after four days he was transferred to the local unit for four months. "The Head of the school was very supportive when Joe came back to school but completely disregarded the idea that it could happen to any other boy. Once I had educated the school, the teachers were very supportive, but I believe there should be more in their basic training on body image, self-esteem and eating disorders.

The school nurse was not pro-active and there was no counsellor despite the fact that many children boarded there."

"

Once I had educated the school, the teachers were very supportive

When the teaching can actually trigger an eating disorder.

Sarah's daughter was only 9yrs old when she was diagnosed with anorexia. Sarah writes, "She was very sporty, very brainy and very ambitious. Like many primary school children what her teacher said was gospel. The school was teaching Nutrition and was trying to win a Healthy Eating Award. There was no obesity in the school and Naomi was very slight naturally with a very fast metabolism and coming up to puberty where she needed extra energy. Lessons that featured lists of good and bad foods and very simplistic teaching were disastrous for her. Coupled with the fact that she thought the teacher was directing her comments specifically towards her led her to stop eating certain items and to become frightened of food and guilty about it."

It was such a dramatic and fast descent towards a critical situation that the school had little chance to support them during her illness as Naomi was in hospital within the space of just a few weeks and then on to the local NHS unit for months.

No one was noticing.

Sarah maintains, "There had been little awareness from the school. It only realised just before she was taken into hospital after we'd tried many times to alert them to the problem. The teachers were good teachers and it was not an awful school. Her class teacher was so upset how Naomi had taken the teaching. we could have done with more sensitivity and awareness beforehand. The National Curriculum and the Government is



Children are different. Our daughter was at a dangerous point even when she didn't look too bad. We were having a really hard time and no one was noticing. Even the GP and the Health visitor thought we were over-dramatising. Once Naomi was in hospital the teachers were really good with cards and visits but so worried about children sitting in front of the TV and becoming obese, but what about the sporty children, ones with very fast metabolisms? Part of the nutrition teaching in primary school should take puberty into consideration i.e. the energy requirement of a growing and active body. Perhaps get a

sporty person in to say how much they need to eat. It should explain how a girl or boy's body will change. It needs to say that children come in all shapes and sizes and that family history plays a part. It shouldn't be a simplistic message that "fat is bad". Our school would only permit "healthy snacks" and the children were all comparing the contents of each other's lunch boxes. Other mums in the playground were saying that their daughters were becoming worried about their developing hips or their sons were refusing all sweets because they thought they'd have a heart attack."

Curriculum advice for teachers

The British Nutrition Foundation has developed a Food and Nutrition programme for use in schools with the help of professional teachers and support from the Ministry of Agriculture Fisheries and Foods and the Department of Health. It is designed to be integrated with the curriculum requirements, particularly those concerned with Science, PHSE and Design & Technology, and to enable children to acquire sufficient understanding to make sensible, well-informed choices concerning their own diets and lifestyles.

The BNF schools programme, 'Food - a fact of life', spans the whole range of compulsory schooling for children from 5 to 16 years of age. The packs are now in use in LEAs throughout the UK.

Claire Theobald from the BNF told us, "The basic message about healthy eating is about balance and variety, and of good health. We don't use the term "good" foods or "bad" foods and we take a gentle approach in primary years. Food as energy measured in kilojoules is started to be talked about in the 8-11yr module and we think verv carefully about the words used. Energy in and energy out is outlined although we don't go specifically into the nutritional needs of puberty or adolescence.

Creating a situation in which an eating disorder was easy to happen

Sarah is keen to explain that she doesn't blame the school or the teachers but says, "I do think they created a situation in which an eating disorder was very easy to happen.

The school did not help us. When Naomi came back for a visit from the unit prior to coming back to school, the teacher who sat with her to encourage Naomi to eat her lunch, only had a yoghurt herself. What kind of message is that?



If I could tell them what to do better, I would ask them definitely not to put too much emphasis on nutrition teaching. The children in Naomi's school were bombarded with it all round."

Some things teachers could consider

"I would ask teachers to be sensitive to their own issues around food and to understand different metabolisms and sensitivities of children.

I would ask them to think about how children interpret what they're hearing from the class teacher and understand the pressures that children are under.

They should also think about what's gone on in the playground such as teasing and watch what they say in the classroom and how they might inadvertently focus on one child with their eyes."

The nutritional needs of growing children.

"Teachers need to be aware of the nutritional needs of growing children. Fruit is good and we like fruit in our family but healthy active children need a variety (and usually plenty) of food to sustain growth and activity.

Children should not be made to worry about food and their eating at any level, certainly not at primary. I think teachers should be aware of the risk of weight loss generally in children and also for pupils in school and when on school trips. As a result of our experience Naomi's teachers were terrified that she ended up in hospital. Every teacher there will know that this could happen again."