Debate

Attempting to maintain a tenuous normality – Eating Disorders and the Coronavirus



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We at the Faculty for Social Wellbeing we reflect a lot about an how all that is happening will fin ha impact our communities as we go about in our ba engagement with research and he scholarship and the right for the scholarship and the research and scholarship and the research and scholarship and the research and scholarship and the right for the scholarship and the research and scholarship and the scholarship and the

changed extensively. In the space of a breath, the global outbreak of COVID-19 has taken away all the certainties that we took for granted and they have been replaced by uncertainty, fear and a dramatic shift in the way we live and do things. For some, this time of upheaval and uncertainty has hit especially hard. For people who are living with or recovering from an eating disorder this sea change has upset a fragile, tenuous balance in their day-to-day life.

Eating disorders are complex and often counter-intuitive conditions that cause severe mental health issues and manifest primarily in a distorted relationship to food. There are several disorders that are classed as eating disorders, the most well known of which are Anorexia Nervosa, Bu-limia Nervosa and Binge Eating Disorder. Persons suffering from Anorexia have a distorted body image whereby they think they are overweight even though they are not. They restrict their food intake and often also purge or exercise excessively to keep on losing weight. Sufferers of Bulimia Nervosa are also obsessed with food and losing weight, however this manifests differently. People with Bulimia feel compelled to eat ex-cessive amounts of food. These binges are accompanied by a feel-ing of loss of control over eating, a profound sense of shame and a compulsion to lose weight, so that sufferers purge, take laxatives, or over-exercise. Binge Eating Disor-der bears some similarities to Bulimia, in that sufferers will eat huge amounts of food in a short space of time, and that this is accompanied by a sensation of loss of control over their eating. However, there is not the compulsion to purge or exercise excessively. There are several other conditions that are classed as eating disorders and lines can become blurred, or sufferers could experience an atypical case, whereby although their disorder does not completely fit diagnostic guidelines, they will display symptoms that indicate the presence of a disorder, even if which disorder it is, is not clear cul.

Although eating disorders manifest in a distorted relationship to food, they are never really about food. For sufferers' food is simply a way of controlling their environment. For some it is a means of escape, or of releasing their frustrations or reacting to stress and fear. Eating disorders also cause sufferers distress and anxiety. Unfortunately, the current Coronavirus situation has brought stress, fear and disgust aplenty. The general unease felt everywhere in this time of social distancing and staying indoors is amplified, where there is a condition such as an eating disorder that adds its own pressures of fear and distress. In times like these, it is

even more important for persons with an eating disorder to manage their health, eating and mental wellbeing.

wellbeing. With people resorting to social media as a way of keeping in contact with family and friends, there are many comments and jokes out there about stockpiling, about how we are eating all our snacks in one sitting, about how fat we will be at the end of all this, and more to that effect. While this is understand-able as a bit of light hearted banter, a way of passing the time; it can be incredibly triggering for someone who is suffering from an eating disorder, particularly where bingeing is concerned. In such cases it might be better to stay off social media, especially if it is caus-ing distress; or to limit sessions on social media to brief, manageable bursts. Family and friends should also be mindful that social distancing means that we do not see each other as often, or that we take fewer meals together. Since se-crecy and concealment are a large part of maintaining a disorder, it could mean that sufferers, especially those who feel compelled to restrict food such as anorexia sufferers, are suffering in silence or using the situation to indulge in the harmful compulsions of their disorder. Checking in on friends and loved ones, encouraging sufferers of anorexia to eat well or persons suffering from binge eating or bulimia to ensure that they are keeping to food plans, being in contact with recovering eating disorder sufferers to support their recovery, is of great help.

Social distancing may also equal social isolation for sufferers of these disorders. Having an eating disorder is generally a very isolating experience, and while sufferers may feel liberated from the need to socialise in restaurants or around food, which is understandably very hard, they are also more alone and may not have anyone to talk to. Here again, checking in, putting encouraging posts on Another potential source of anxiety is the heightened emphasis on cleaning hands and maintaining good hygiene, particularly as eating disorders may cause compulsive behaviour around hygiene and cleaning.

one's social media and connecting with friends and family members who might be in need of a morale boost, will be a huge help. Such actions, even if unacknowledged, may be a vital link to a better day for someone you know.

Another potential source of anxiety is the heightened emphasis on cleaning hands and maintaining good hygiene, particularly as eating disorders may cause compulsive behaviour around hygiene and cleaning. It might be worth noting that the recommendation is to wash hands for 20 seconds, above all after contact with outside.

The closures of gyms, the recommendation to not go out, the closure of parks and street exercising equipment poses a problem for those for whom exercise is an essential component of their eating disorder. In some cases the compulsion to exercise is managed and moderated, for some it goes beyond. But to have it suddenly taken away without any compensatory plan in place could be torment for those whose choice is between exercise or letting the demons in their head take over. Fortunately, in this digital age there are numerous clips on various platforms that have workouts and exercises that can be done at home and that do not necessitate equipment. The key is to keep a balance and try to moderate the level of exercise.

Stockpiling, shortages of certain foods, the difficulty of finding fresh produce to prepare healthy meals... all of this is very distressing to someone for whom eating enough, eating properly or con-versely, limiting eating and controlling food intake may be a challenge. For many sufferers of eating disorders, following a preagreed plan and keeping to a routine is an important part of recovery. Added to this, social distancing might mean limited or no access to their support systems family, counsellors, nurses. Malta's Centre for the Treatment of Eating Disorders and Obesity, Dar Kenn ghal Saħħtek, with whom the Fac-ulty for Social Wellbeing is cur rently undertaking research to look at ways of enhancing the services presently offered by the centre, would like to remind clients to contact Dar Kenn għal Saħħtek if they need assistance. Dar Kenn għal Saħħtek, can be reached via telephone on 21453690, or through their Facebook page Kenn Ghal Sahhtek.

For sufferers of eating disorders, current conditions may well lead to an increase in eating disorder thinking, to obsessing about details that may be beyond one's control. In such cases, limiting time spent on social media, contact with loved ones, eating together, contacting counsellors or other mental health professionals and remembering that we are in this together, that we are all trying our best, will help. This too shall pass. If interested in any of the courses

If interested in any of the courses offered by the Faculty for Social Wellbeing contact us on: *socialwellbeing@um.edu.mt*

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