



EVERYBODY BENEFITS: EMPLOYEE GUIDE

Working with an eating disorder

You are not alone in your struggle

At least 1.25 million people in the UK are estimated to have an eating disorder.

Like any mental illness, eating disorders can affect all ages, genders, socio-economic backgrounds, body weights and ethnicities.

Eating disorders are associated with low self-worth and body dissatisfaction. They can have a significant impact on health, wellbeing and relationships. They can also affect day-to-day activities and sleep.

But long-term, eating disorders can cause damage to the heart, digestive system, bones, teeth, mouth and fertility - or even trigger life-threatening illnesses.

Although eating disorders are responsible for more loss of life than any other mental health condition, **with treatment and support, most people can recover from an eating disorder.**

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1.25 million
people in the UK are
estimated to have an
eating disorder¹

¹ beateatingdisorders.org.uk/get-information-and-support/about-eating-disorders/how-many-people-eating-disorder-uk/



Stigmas and stereotypes

*Try this,
it's delicious*

*You need to eat
something*

*Go on, just
a small
slice*

*How about
some cake?*

*When did
you last eat a
decent meal?*

*Please
just eat*

Sound familiar?

Eating disorder myths and misunderstandings

25%

of those affected by an eating disorder are male²

THE MYTHS

- Eating disorders are a female illness
- An attention-seeking fad
- Fussy eaters
- All people with binge eating disorders are overweight
- Eating disorders are rooted in vanity
- Only very thin people have an eating disorder
- Eating disorders are just about food
- Bulimia always involves throwing up after eating
- Eating disorders aren't serious illnesses
- Eating disorders are caused by parents

² Beat / Sweeting et. Al. (2015)

³ [theguardian.com/commentisfree/2020/jan/03/anorexia-mental-illness-nhs-hospital-admissions](https://www.theguardian.com/commentisfree/2020/jan/03/anorexia-mental-illness-nhs-hospital-admissions)

THE REALITY

Anorexia nervosa has the highest mortality rate of any psychiatric disorder.³

Eating disorders have nothing to do with vanity or looking better or slimmer than anyone else.

Eating disorders are about **feelings**. They are about **control**. They are a **coping mechanism**. They are a **serious mental illness**.

For sufferers, eating a meal is their **phobia**.

Disordered eating behaviours are a way to cope with difficult situations or emotions - and take back control and confidence.

Why am I like this? The link between neurodiversity and eating disorders

Although research remains limited, studies have consistently found that people with neurodevelopmental differences, including autism, ADHD, and intellectual differences, seem to be at a greater risk for developing eating disorders.

Some estimates claim that as many as **a third** of people with eating disorders may be autistic or present with high autistic traits, while those with ADHD are at a higher risk of developing an eating disorder.⁴

⁴ peacepathway.org/thinkadhd.co.uk/adhd-and-adhd-and-eating-disorders

23%
of people with eating
disorders are also
autistic

Recognising that you have an eating disorder

Accepting that you have an issue with your body image and food is the first step to recovery. Some of the more obvious signs include:

Do you participate in extreme fasting or calorie counting?

Do you limit the amount of food eaten and avoid certain foods altogether?

Are you exercising excessively?

Do you binge on large quantities of food at the dinner table then make yourself sick behind closed doors?

Are you misusing laxatives or diet pills?

Did you answer 'yes' to any or all of these?

Then you need and deserve compassionate support and professional help to recover from your eating disorder, your phobia, your mental illness.

We explain some of the different disorders and how to spot the signs in yourself or others - and signpost you to sources of support.





The 3 most common eating disorders

Eating disorders are serious mental health conditions characterised by unhealthy relationships with food and body image.

They are often accompanied by underlying emotional challenges, such as anxiety, depression or trauma.

1

Anorexia nervosa

Controlling weight by not eating enough food, over-exercising or both.

2

Bulimia nervosa

A cycle of eating large quantities of food (bingeing), then compensating for overeating by vomiting, taking laxatives or diuretics, fasting, or exercising excessively (purging).

3

Binge eating disorder (BED)

Regularly eating excessive amounts of food until you feel uncomfortably full.



Less-known eating disorders

Avoidant restrictive food intake disorder (ARFID)

Avoiding certain foods or types of food, restricting intake or both.

Orthorexia

An unhealthy obsession with eating pure, clean food.

Pica

A feeding disorder in which someone eats non-food substances that have no nutritional value, such as paper, soap, paint, chalk or ice.

Rumination disorder

An illness that involves repetitive, habitual bringing up of food that might be partly digested. The person may then re-chew and re-swallow the food.

Other specified feeding or eating disorder (OSFED)

For example, purging disorder or night eating syndrome.

Eating disorder triggers

Everyone has their own story about their personal and private struggles.

But **low self-esteem, bullying, bereavement or family problems and relationship breakdowns** are often cited as key triggers for eating disorders.

Another major contribution to eating disorders that often gets overlooked can be **workplace stress**.

Juggling work and an eating disorder

Work can be stressful for many of us. Tight deadlines, soaring sales targets, promotions missed, juggling home-work life balance or dealing with difficult clients or colleagues can all lead to stress and anxiety.

The result is an overwhelming feeling of being **out of control**.

Some cope by having a few glasses of wine to 'take the edge off' or throwing

themselves into a gym workout, a walk in nature – or talking therapies with professionals or their friend network.

But for others, managing what they eat is their escape.

Secret squirrel

Hiding an eating disorder at work can be yet another distressing challenge.

Hiding unusual eating habits or frequent trips to the toilet and avoiding team lunches or social events can be very stressful.

People with eating disorders tend to compare themselves professionally and personally against unrealistic perceptions and standards. They also worry about people's opinions of them – and if people are talking about them.

That means that dealing with colleagues who are not sensitive to the nuances of eating disorders can exacerbate feelings of isolation and humiliation.





Spotting the signs

People with eating disorders will often go to great efforts to avoid their illness being noticed. Although physical changes, such as weight loss, may be an obvious warning, the first sign of an eating disorder is often the person's behaviour.

Look out for these tell-tale physical, behavioural and emotional signs:

Physical

- Dramatic weight loss or fluctuations
- Long-term weight stagnation (adolescents typically put on weight until the age of 20)
- Constipation, cold intolerance, abdominal pain
- Lethargy or excess energy
- Mouth infections, bad breath, sensitive or damaged teeth
- Scars on fingers, knuckles or the back of hand from making themselves sick
- Missing menstrual periods

Behavioural

- Compulsive or excessive exercising
- Unusual behaviour around food e.g. cutting food into tiny pieces or even hoarding and hiding food
- An interest in cooking, but refusing to eat what they have cooked or cooking meals for others without eating
- Wanting to eat alone in a separate room
- Avoiding eating in public
- Wearing baggy clothes to hide weight loss
- Vomiting after eating
- Taking laxatives
- Going to the toilet immediately after eating
- Eating large quantities of food without appearing to gain weight
- Repeatedly weighing themselves
- Avoiding certain foods
- Preoccupation with weight, calories, fat grams, or dieting
- Intense fear of weight gain, being 'fat' or body dysmorphia
- Social isolation

Psychological symptoms

- Having an obsession with appearance and other people's perception of their body
- Talking about feeling guilty after eating
- Getting stressed at mealtimes
- Low self-esteem
- Depression, anxiety and panic attacks
- Intense mood swings
- Insomnia
- Self-harm, suicidal thoughts and impulses





First steps to recovery

Navigating life with an eating disorder can be a very lonely and scary place. Having the right support network at home and work can help make the journey to recovery that little less daunting.

If you are concerned that you may be suffering, you must see your GP for a formal diagnosis and treatment plan. It can be very hard to admit you have a problem and ask for help. Consider taking a friend or loved one with you to your appointment.

Time for treatment

While there are no specific drugs to treat eating disorders, a number of different talking therapies are available to help you understand your eating problems and feel more comfortable with food so you can reach a healthy weight.

You may be offered family or talking therapies, nutritional support, or **specialist supportive clinical management**, where a therapist helps you understand your eating issues and what to do about them.

Cognitive Behavioural Therapy for eating disorders (CBT-ED) or **Focal Psychodynamic Therapy** will help you understand how your eating habits are related to how you feel about yourself and others.

Here is more information about treatment options.

→ [FIND OUT MORE](#)

Support is out there

In the meantime, before you embark on a treatment plan, here are some invaluable sources of support.

At work

Ask your manager about available employee benefits:

- Private Medical Insurance (PMI): Access to private mental health services, which may include therapy for eating disorders
- Health cash plans: Covering costs for therapy, consultations or nutritional counselling
- Group income protection: Offering financial security if an eating disorder impacts on your ability to work
- Flexible working arrangements: to accommodate therapy sessions

At home

BEAT

Provides helplines, advice and resources for people of all ages dealing with eating disorders. Contact their helplines 365 days a year

→ [FIND OUT MORE](#)

First Steps ED

Offers care and support for children and their families, young people and adults affected by eating difficulties and disorders

→ [FIND OUT MORE](#)

BEAT Helpfinder

An online directory to find support groups in your local area

→ [FIND OUT MORE](#)

Worth Warrior

A free app created to manage early-stage eating difficulties or disorders

→ [FIND OUT MORE](#)

SEED

A group of ordinary people with firsthand experience of eating disorders, headed up by former Emmerdale actress Gemma Oaten

→ [FIND OUT MORE](#)

Supporting colleagues with eating disorders

It can be hard to know what to say and how to act around colleagues who may be suffering but giving them your time can make a big difference. Treating and talking to them as you always have will help to ensure they don't feel even more isolated.

- **Keep including them** – keep including them in team meetings and banter so they feel valued as part of the team. They may not want to go out to work social events but ask them along, they will still appreciate the invite.
- **Build up their self-esteem** – give positive feedback and share how much you appreciate them. Make sure they know you are there to listen when they need you.
- **Try not to give advice or criticise** – even when you do not agree with what they say about themselves and what they eat.





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