

Addressing barriers to young adults seeking help for eating disorders

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With only 1 in 4 young adults seeking help for an eating disorder, a new study by Flinders University experts flags a number of problems preventing more people from using an effective early intervention

service program available in the community.

The survey found self-denial among the main barriers to young people under 25 years old making use of an [early intervention](#) program for eating disorders—even though the primary health care model had good results for people who sought help.

The [article](#), "Addressing the gap of early intervention for eating disorders in primary health care" has been published in *Early Intervention in Psychiatry*.

Feedback from participants in the program, offered by Sonder and headspace in two low socio-economic areas south and north of Adelaide, included cognitive behavior therapy sessions and follow-up consultations, found one of the first obstacles was with individuals' denial of having an eating disorder.

"We found the main barrier identified by those surveyed to be denial or a belief that their problems are not bad enough to seek help," says College of Education, Psychology and Social Work researcher Dr. Marcela Radunz.

"In fact, based on our previous studies, we found that high eating disorder symptoms are associated with higher denial of illness and reluctance to seek help.

"So, we propose that early intervention services for eating disorders should be placed in primary health care, where individuals with eating disorders are not required to seek a referral from a GP. This may promote earlier help-seeking and promote their willingness to get help."

Barriers to the delivery of treatment in low SES populations included poor nutritional or food security issues, drug or alcohol use, [mental](#)

[health](#), other illnesses and lack of support networks for young people and families. Other conditions such as binge eating disorder and avoidance/restrictive food intake disorder were not included in treatment programs.

"Despite these problems, the range of disorderly eating behaviors continue to rise so there is clearly an important role for more early intervention and other models in [primary health care](#) settings in order to support all parts of the community," says Distinguished Professor of Psychology Tracey Wade, a co-author of the study.

"The pandemic has further exacerbated the prevalence of eating disorders which now have the highest mortality rate of any mental illness, so early intervention programs which proactively screen, detect and provide rapid and effective treatments is critical."

One U.S. study found about 5.7% of women and 2.2% of men live with an eating disorder, providing a "real challenge for public health and health care providers" around the world.

Professor Wade says the prevalence of eating disorders in young people has increased 15% since the pandemic started, resulting in a three-fold increase in demand for [eating disorder](#) treatments.

Meanwhile, in Adelaide, the Flinders University Services for Eating Disorders is trialing a single session intervention to help overcome denial and encourage the importance of adequate nutrition, introducing skills to decrease depression and introduce a focus on emotional regulation.

"It is really pleasing to report early results from the trial which show that 43% of people commencing this accessible method have reduced dietary restrictions by 30% or more," says Professor Wade, who also runs the Blackbird Initiative at Flinders University.

"This means interventions such as this could give a person a quicker start to therapy and they may need less therapy."

More information: Marcela Radunz et al, Addressing the gap of early intervention for eating disorders in primary health care, *Early Intervention in Psychiatry* (2024). [DOI: 10.1111/eip.13517](https://doi.org/10.1111/eip.13517)

Provided by Flinders University

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