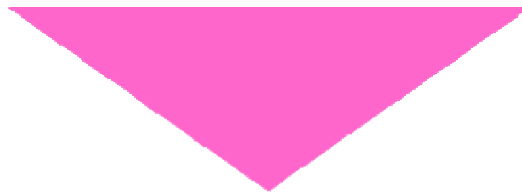


## **INFORMATION SHEET 1:**

# **EATING DISORDERS IN LGB COMMUNITIES**



### **Introduction**

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A body of research both in the Europe & USA over the past decade has established that there appears to be higher rates of a range of eating disorders within gay male communities. For some time, the accepted opinion had been that the condition largely affected young adolescent females, and that lesbian and bisexual women had lower rates. Recent work has suggested that the rates for lesbian and bisexual women are no different to their heterosexual peers. It has also been established that approximately 10% of people with eating disorders are men and approximately 20% of men with eating disorders identify as gay, which is double the proportion of gay men in the population.

### **What are Eating Disorders?**

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What we mean by eating disorders in fact covers a wide range of compulsive behaviours around eating and food

Food and eating play a very important part in our lives. We all vary in the food we like, how much we need to eat and when we like to eat. However, some eating patterns can be damaging. Problems with food can begin when it is used as a coping mechanism perhaps when we are bored, anxious, angry, lonely, stressed or sad or we use it as a way of coping with painful situations and feelings.

It is unlikely that an eating disorder will result from a single cause – it is much more likely to be a combination of many factors, events, feelings or pressures. These can include: low self-esteem, relationship difficulties, problems with friends, bereavement, work or study problems, lack of confidence or sexual/emotional abuse.

Often people say that the eating disorder is the only way they feel they can stay in control of their lives, but as time goes by, it is actually the eating disorder that is in control, not the person.

## Different Types of Eating Disorders

### Anorexia nervosa

Anorexia occurs when someone has lost the ability to allow themselves to satisfy their appetite. The person restricts the amount they eat and drink, sometimes to a dangerous level. The person may exercise to burn off what they perceive to be excess calories. It is a way of demonstrating that the person is in control of their body weight and shape. Ultimately the disorder takes control and the chemical changes in the body make it almost impossible for the person to make rational decisions about food and eating.

### EFFECTS OF ANOREXIA

Area	Effect
Body	<ul style="list-style-type: none"> <li>• Severe Weight loss</li> <li>• Tiredness</li> <li>• Dizziness</li> <li>• Stomach pains</li> <li>• Feeling cold</li> <li>• Growth of soft hair all over body</li> <li>• Feeling uninterested in sex</li> <li>• Poor skin</li> <li>• Hair loss</li> </ul>
Behaviour	<ul style="list-style-type: none"> <li>• Excessive exercise</li> <li>• Having ritual or obsessive behaviours</li> <li>• Being secretive around nutrition</li> <li>• Lying about eating</li> <li>• Cooking/preparing food for everyone else</li> <li>• Trying to please everyone alternating with being very angry.</li> <li>• Wearing baggy clothes to cover-up weight loss</li> </ul>
Mood	<ul style="list-style-type: none"> <li>• Feeling fat when really underweight</li> <li>• Irritable and moody</li> <li>• Being a perfectionist</li> </ul>

	<ul style="list-style-type: none"> <li>• Shutting yourself off from the world</li> <li>• Thinking things are either right or wrong with no in between</li> <li>• Difficulty concentrating</li> </ul>
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## Bulimia Nervosa

With Bulimia, individuals become involved in a cycle of eating large amounts of food (it is not uncommon for people to eat 2/3/4 times a normal amount of food in one go), making themselves sick, cutting down or starving for a few days or trying to find other ways to make up for the food they have eaten. Starving causes the person to become so hungry that they end up eating large quantities of food because your body is craving nourishment. Some people with bulimia do not vomit but take laxatives or diuretics which are described medically as “purging”. This type of behaviour is particularly dangerous for the individual.

Area	Effect
<b>Body</b>	<ul style="list-style-type: none"> <li>• Sore Throat</li> <li>• Dry or poor skin</li> <li>• Puffy cheeks</li> <li>• Dehydration</li> <li>• Fainting</li> <li>• Kidney &amp; bowel problems</li> </ul>
<b>Behaviour</b>	<ul style="list-style-type: none"> <li>• Eating large quantities of food at one time</li> <li>• Being sick or bingeing after meals</li> <li>• Taking laxatives or diet pills</li> <li>• Being secretive/lying about food</li> </ul>
<b>Mood</b>	<ul style="list-style-type: none"> <li>• Feeling depressed</li> <li>• Feeling out of control</li> <li>• Mood swings</li> <li>• Obsessed with dieting</li> <li>• Food disappearing unexpectedly or being secretly hoarded</li> </ul>

Binging, purging and dramatic loss of fluids can cause physical problems for the individual. Most can be corrected once the body is nourished. However an imbalance or dangerously

low levels of the essential minerals in the body can significantly affect the workings of the vital organs.

## **Binge eating Disorder and Compulsive Overeating**

The pattern of eating in a binge is very different to sitting down and having a meal. The person feels a lack of control during these binges but unlike bulimia, they do not try to get rid of the food. The person eats quickly, eat until they are uncomfortably full and/or eat large amounts even when not hungry.

It is important to remember that not everyone will have all the symptoms and those individuals may experience feelings associated with both anorexic and bulimic behaviours.

## **Why are Gay men over-represented in the cases of Eating Disorders?**

### **1. GROWING UP AS A MEMBER OF A SEXUAL MINORITY GROUP**

Over the past 20 years, there have been many advances in the rights won by LGB communities. For many LGB people much has changed for the better. But for a significant number the changes in the climate towards LGB people have passed their everyday life by. For social, cultural, religious and geographical reasons, for many people “coming out” is still a far from straightforward process.

Realising that you are “different” sexually from the majority of the population is not something the individual has any control over. The less control the individual has over their lives, the more vulnerable they can become to eating disorders. If you identify as being LGB others will make assumptions and form opinions of you over which you have no control. These views will be less influenced by who you are, and what you do or don't do, than by their perceptions of what being LGB means to them. For many LGB people, this lack of control can be difficult to handle and re-establishing control can take time and experience.

### **2. INTERNALISED HOMOPHOBIA**

As we grow up it is inevitable that LGB people soak up some of the negative atmosphere that surrounds being LGB and internalise it. It can become a part of how they see themselves and have adverse affects on their own self-esteem and self-acceptance.



When an individual realises that they are LGB, as well as potentially altering how other people view them, they have to alter how they see themselves and their relationship to the world around them. This can be a difficult task requiring them to look closely at many aspects of their life - past, present and future. For some people this can stir up powerful emotions, and for a minority this can lead to developing eating disorders as a way of coping with the emotional uncertainty.

### **3. GAY CULTURE**

Within any group, the need for acceptance and approval can be strong. Within the majority of the visible LGB communities – bars, clubs, magazines - appearance orientated criteria increasingly determine how much acceptance, understanding and positive regard the gay person receives.



For some gay men, it encourages the idea that to be accepted, successful and loved you have to have a lean defined chest, washboard abdominal muscles and an absence of body hair. This is more important than personality, abilities or accomplishments. For the majority of these men, this is not a natural possibility because of their genetic and biological make up. However the impact of this myth most strongly affect those most dissatisfied with their bodies or who see their bodies as furthest away from the ideal.

In an attempt to achieve the unachievable ideal, many gay men develop complex psychological cocktails of behaviour which mixes up obsessive exercising behaviours with eating disorders and body dysmorphic disorder (becoming obsessed with a perceived blemish in their appearance). These behaviours can often be accompanied by the misuse of substances – either to reduce fat or to increase body muscle.

The obsession with the narrow physical image of what it means to be a gay man often covers up many issues of low self-esteem and allows individuals to ignore other aspects of themselves, their personality and their abilities. As the individual grows older, it becomes even harder to achieve the unachievable without causing further damage to health – both physical and emotional.

#### 4. GAY COUNTER-CULTURE

As a counter to the accepted narrow image of the “gay body beautiful”, a counter culture has grown up within the male gay community known as “Bear culture”. **Bear** is LGBT slang for those in the bear communities, a subculture in the gay/bisexual male communities and an emerging subset of **LGBT** communities with events, codes and culture-specific identity. It also describes a physical type. This ultra-macho culture prides itself on having the antidote to traditional ideas of male beauty through its admiration for raw, unself-conscious masculinity. Bears tend to have hairy bodies and facial hair; some are heavy-set; some project an image of working-class masculinity in their grooming and appearance, though none of these are requirements or unique indicators. Some bears place importance on presenting a hyper-masculine image and may shun interaction with, and even disdain, men who exhibit effeminacy



Being a “Bear” in some circles has conversely become as restrictive as the cultural image it was set up to oppose. Fat (or lack of it) is a political issue among Bears, some of whom see their overweight condition as a form of self-acceptance. There is a similar level of pressure to conform to a body-type which in turn carries with it risks associated with eating disorders and Body Dysmorphic Disorders. This can also lead to associated physical health problems for the individual concerned when taken to the extremes.

#### LESBIANS AND BISEXUAL WOMEN & EATING DISORDERS

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Research about lesbians and eating disorders is confusing. Some claim that lesbians suffer from anorexia and bulimia in fewer numbers than straight women, but binge eat more. Some claim that lesbians are to some extent 'protected' from cultural pressures to be thin because 'feminist social norms in lesbian communities' put less importance on weight and appearance in determining attractiveness. Some find no noticeable difference between lesbians and straight women with eating disorders. But one study suggests that gender and gender identification, not sexuality, is what dictates body image. Those who are masculine-identified (straight men, butch gay men or butch lesbians) will have a lower prevalence of eating disorders than those who are more feminine-identified (straight women, effeminate gay men or femme lesbians).

## Sources of Help and further Information

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### **Yorkshire MESMAC Counselling Service**

<http://www.mesmac.co.uk/counselling/index.html>

[Counselling@mesmac.co.uk](mailto:Counselling@mesmac.co.uk)

### **LGB Mental Health & Well Being Project ( Bradford& Airedale)**

[http://www.mesmac.co.uk/Mental\\_health/home.html](http://www.mesmac.co.uk/Mental_health/home.html)

[c.spendlove@mesmac.co.uk](mailto:c.spendlove@mesmac.co.uk) Tel: 07913264967

### **Eating Disorders Association**

Extremely informative and helpful, with many online resources, including message forum

<http://www.b-eat.co.uk/Home>

### **Overeaters Anonymous**

National fellowship with support groups across the country, working to the traditions of the Twelve Step Programme

<http://www.oagb.org.uk/>

### **Royal College of Psychiatrists**

Straightforward, informative downloadable leaflets on eating disorders and related issues, available at

<http://www.rcpsych.ac.uk/mentalhealthinformation/mentalhealthproblems/eatingdisorders/eatingdisorders.aspx>

### **National MIND – mental health charity**

[http://www.mind.org.uk/help/diagnoses and conditions/body dysmorphic disorder](http://www.mind.org.uk/help/diagnoses_and_conditions/body_dysmorphic_disorder)

[http://www.mind.org.uk/help/diagnoses and conditions/eating distress](http://www.mind.org.uk/help/diagnoses_and_conditions/eating_distress)