

SPACE TO BREATHE THERAPY • SUPPORT HUB

Why Eating Disorders Thrive in Secrecy

Understanding shame, hiding and the first honest conversation

Secrecy is common across eating disorders. A person may hide food, symptoms, exercise, spending, purging or the intensity of their thoughts. This does not make them dishonest or manipulative. Shame and fear can become part of how the illness protects itself.

UNDERSTAND

NOTICE

SUPPORT

INSIDE THIS GUIDE

- Why telling can feel dangerous
- What secrecy costs
- A first honest conversation

Use this guide to understand, begin a conversation, or help someone feel less alone.

You do not need to read it all at once. Pause whenever you need to and return when you feel ready.

A compassionate information guide

This resource offers general information and does not replace individual medical or specialist eating-disorder care.

Understanding what may be happening

Why telling can feel dangerous

- Fear of losing control or having behaviours interrupted.
- Worry about judgment, anger, disbelief or being watched.
- Believing symptoms are not serious enough to deserve help.
- Feeling responsible for protecting family or avoiding burdening others.
- The eating disorder may promise safety while making life increasingly narrow.

What secrecy costs

- It delays medical assessment and specialist treatment.
- It increases isolation and gives distorted thoughts less challenge.
- It can strain relationships and create practical or financial consequences.
- It makes emergencies harder for others to recognise.

A first honest conversation

- Choose one safe person or professional.
- Write it down if speaking is difficult.
- Name what you need: listening, a GP appointment, transport or help at meals.
- You do not need to disclose every detail at once to begin getting help.

Gentle, practical ways forward

Support should always be adapted to the person, their diagnosis, physical health, culture, neurotype and treatment plan.

WHAT MAY HELP

- Try: “My relationship with food and eating is affecting my health and I need help.”
- Bring notes to the GP, including behaviours, physical symptoms and mental distress.
- Ask the person not to comment on weight or appearance.
- If the first response is unhelpful, tell another professional; one response does not define whether you deserve care.
- Use specialist support such as Beat alongside, not instead of, medical care.

A gentle reminder

Honesty can feel like betrayal of the eating disorder. In reality, it is an act of protection toward the person living underneath it.

Please seek urgent help for fainting, chest pain, confusion, severe weakness, uncontrolled vomiting, blood, serious dehydration, or immediate risk of harm. In the UK call 999/A&E; for an emergency, NHS 111 for urgent advice, or contact your GP/eating-disorder team.

Trusted information

NHS: Eating disorders overview

<https://www.nhs.uk/mental-health/feelings-symptoms-behaviours/behaviours/eating-disorders/overview/>

NICE: Eating disorders: recognition and treatment (NG69)

<https://www.nice.org.uk/guidance/ng69>

Royal College of Psychiatrists: Medical Emergencies in Eating Disorders (MEED)

<https://www.rcpsych.ac.uk/improving-care/campaigning-for-better-mental-health-policy/college-reports/2022-college-reports/cr233>

Beat: Eating-disorder information and support

<https://www.beateatingdisorders.org.uk/>

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