

PERFORMANCE NUTRITION OR DISORDERED EATING?



Following the themes raised in our April issue around the impact of body shaming, psychotherapist and former athlete **Allie Outram** looks at the importance of understanding our relationships with food

As an athlete, you may have attended nutritional advice seminars or worked with a specialist sports dietician, yet you may not have explored the mental health side of food in performance sport. You may be reading this with a diagnosed eating disorder, disordered eating, or as someone who has been able to recognise the dangers.

There is such an ocean of possibilities around how we engage with food that sometimes the smallest of changes in our behaviour surrounding it can go unnoticed, accumulate and, before we know it, we are out of our depth.

We are constantly bombarded with advice on how to live a “healthier” life but so much

of it is of poor quality and based on dubiously sourced information. Our understanding of nutrition is often clouded by misunderstood science, half-truths and myths that have woven their way into the fabric of our diets. With that in mind, I will aim to help you to understand how to navigate a path through.

Nourish to flourish

At the age of 16, I ran in the World Schools Cross Country Championships in Beijing. I was captain of the Great Britain team which comprised six athletes. No fewer than four of us had an eating disorder, but that isn’t entirely surprising when you consider that the traits of great athletes and characteristics of anorexia nervosa are very similar. I could hide and legitimise my disturbed eating habits and

weight-controlled behaviours for a long time.

When I first started competing, I was already beginning to formulate a sense of what it meant to have a “runner’s body”. That idea was shaped by the professional senior athletes I had seen at competitions, how athletes’ bodies were discussed on TV coverage and also by the people I saw winning the races I was running in.

I perceived the typically very slight girls at the front as being the model of leanness that was synonymous with being a good athlete – a perspective that was compounded by running being conflated with weight loss in popular culture. But, as the years went on, I saw that many of the athletes who were at the top when I first started would burn bright for a couple of years, but often be forced to leave the sport due to chronic cycles of injury or illness. These people were quickly replaced and so the cycle would continue.

These athletes were shaping the popular aesthetic of what runners should look like, yet so many of them were insufficiently fuelling, therefore risking their health and long-term performance.

Dieting and running gave me the sense of control that I lacked in my home life but, once the eating disorder had a grip on me, I lacked the skill, insight and awareness to pull myself out.

It has taken patience, perseverance and persistence, but I worked hard to have a solid foundation. I can now exercise for health-oriented rather than weight-loss reasons.

Strong is the new skinny for me. The power of gaining weight for strength has given me another weight to care about – the weight I am lifting. I now eat heartily, see food as fuel for life, seek out nutritious food and have a permissive rather than prohibitive diet. I have developed a meaningful lifestyle focused on health and wellness and feed my body to get the results I want.

Athletic eating v disordered eating and eating disorders

Eating behaviours in elite sport fall across a spectrum, from optimised nutrition – in which an athlete is supported through a specially created plan for peak performance – through to clinically diagnosed eating disorders.

The oft-murky grey area between is referred to as “disordered eating” or problematic eating behaviour that fails to meet the clinical diagnosis for an eating disorder. Eating disorders and disordered eating are common, even in the general population, but some sociocultural groups are at higher risk of eating



ABOVE: AW explored the issue of body shaming of female athletes in our April issue

disorders, and elite athletes are one of those groups.

While there are genetic factors that contribute to an individual’s likelihood of developing an eating disorder, there are also environmental and neurological factors that play a role – and this is where athletes are particularly susceptible.

There is increased pressure on elite athletes to attain and maintain a particular body shape and, neurologically, the people who are vulnerable to eating disorders tend to have certain characteristics – they’re often very driven, perfectionistic, competitive high achievers who want to play by the rules.

Those are also the characteristics you need to be a good athlete. It is therefore unsurprising that unhealthy eating habits can flourish in an arena that many celebrate as the epitome of good health.

Athletic eating is a term used to describe a nutrition approach directed towards performance improvements, rather than weight loss or altered body composition. More emphasis is placed on what needs to be included in one’s diet to maintain health and performance than what is forbidden or unnecessary. Ultimately, some foods do have a higher density of vitamins and minerals, but all foods have a time and place where they can be helpful in an athlete’s overall diet.

When there is less stress about food and fuelling, there is more mental and physical energy to support your training and life.

Disordered eating habits are often maintained or even exacerbated during periods of rest. They include behaviours such as:

- Sticking to a rigid routine surrounding food and exercise



- Feeling anxious about eating around others or in new places
- Attaching guilt and/or shame to eating certain foods
- General preoccupation with food, weight and body image
- Feeling out of control around food
- Using exercise, food restriction or fasting to "make up for" eating "bad" foods
- Exercising to "earn" food
- Restricting food intake on rest days

Eating disorders are diagnosed according to specific criteria surrounding body weight and eating behaviours. The difference between disordered eating and a clinical eating disorder, such as anorexia or bulimia, surrounds how much the disordered behaviours disrupt someone's daily life and impair their ability to function.

Many people experience some degree of disordered eating which falls short of an official diagnosis. It's important to look hard for the presence of disordered eating behaviours, not simply because they can quickly develop into more serious conditions, but also because they can be difficult to detect – especially among those eager to mask the issue. In many cases, disordered eating is a precursor for a clinical eating disorder, but any

level of disordered eating can have a significant impact on an athlete's overall health and performance.

Is food a friend or an enemy?

This is a good question for you to consider. Some foods used to be an enemy to me because I viewed them as a threat to my all-consuming goal of weight loss. However, I now have a healthier mindset and would consider food a friend.

The difference in outlook is due to a change in the terminology and language I use to describe food. Positive terms like "clean eating" can be harmful, as it assumes that every food which doesn't come under this umbrella is dirty or wrong. And with that comes a feeling of shame. The only type of unclean food is food that has fallen on the floor!

Generally I find that, when someone cuts something out, it only makes them want it more – often leading to eating in secret and sometimes binge eating.

Likewise, using terms like "guilty pleasures" and "guilt-free" misses the point, and applies preconceptions that can damage outcomes. We shouldn't feel guilty in the first place – it's only pudding! You don't need to earn pleasure, or deprive yourself of it entirely. Sustainability will not follow extremes. There are no bad foods – only those with more or less nutritional or calorific value.

Food isn't the issue, it is a symptom of an underlying cause

All eating disorder symptoms are significant and can only be understood as an expression of underlying issues and difficulties. Eating is never a mere physical function: it contains and carries much more than is evident on the surface. An eating disorder is an unconscious attempt by the person's body/mind/psyche to cope with something unbearable, usually shame.

One part continues on and another part, the true self, splits off as a reaction to shame. This split is at the core of eating disorders and addictions. We may see the symptoms of overeating or restrictive eating as opposites, but underneath is the inability to nourish or to receive. Underneath is doubt, shame and the inner critic, which fuels the overeating or restrictive eating, and also the body hate that drives the behaviour. When we are able to live in our bodies instead of hiding from them, we are able to have a relationship with ourselves and then with others.

Choosing the most effective intervention for



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someone with an eating disorder should take into account a number of variables, including physical and psychological risk, motivation, social support, co-morbidity (having more than one condition at the same time) and age.

Often and particularly in anorexia nervosa, treatment planning will require coordinated, multidisciplinary, physical and psychological service interventions. Psychological interventions are, however, considered to be crucial in addressing the core attitudes that underlie these disorders and in influencing the longer-term outcomes.

There are no magic bullets, no one-size-fits-all diets, no secrets to instantaneous health and wellness. A journey towards healthier living is typically a series of small, manageable and sustainable lifestyle choices,

guided by reliable information and personal introspection.

Remember that the path to wellness is not a sprint, but a marathon. Nutrition and health are not about strict restrictions, crash diets or quick fixes – they're about balance, variety and moderation. The world of nutrition may seem like a labyrinth of conflicting information, but you are no hapless wanderer. You can be an informed navigator charting your course towards peak fitness and health.

Where can you find support?

- You can contact me via my website allieoutram.co.uk
- Beat is the UK's National ED charity which has helplines, information and support beateatingdisorders.org.uk **AW**

ABOVE: A healthy relationship with food is important for athletes