



Up to 35% of those who are dependent on substances also have eating disorders.

At Aster Springs Outpatient, we recognize the significant overlap between eating disorders and addiction. Individuals who struggle with both substance use and eating disorder behaviors often become trapped in a cycle of substituting one set of maladaptive coping patterns for the other.

To interrupt harmful symptom swapping, our team developed a track designed to create an environment that is supportive of eating disorder recovery and is also a safe space to address substance use issues.

Our Co-Occurring Addiction Recovery Environment (CARE) track incorporates:

Support of Knowledgeable Providers

- If a client participates in the CARE track, they will be assigned to work with a therapist trained in substance use treatment.
- All of our clinicians are educated and trained to support clients with eating disorders and co-occurring substance use disorders.
- Our team partners and collaborates with local Substance Use Disorder organizations to provide integrated care and treatment.

Specialized Break Out Groups

- Clients in the CARE track participate in two breakout groups weekly which provide dedicated space to focus on substance use concerns and support.

Structured Accountability

- To provide necessary accountability for substance use behaviors, clients in the CARE track are breathalyzed daily and consent to random drug screens.
- Clients in the track are also encouraged to attend mutual support groups (AA, NA, SMART, Celebrate Recovery, etc.) weekly.

Who is a Good Fit?

The CARE track takes an individualized approach to substance use support. Staff integrate aspects of motivational interviewing, 12-step work, and education into the track. Although abstinence may be recommended, it is not required for clients to begin participating in the track. Clients with primary eating disorders in our care are a good fit for the CARE track if they:

- Admit from a detox or residential substance use treatment center
- Have been recommended by a medical professional to seek help regarding substance use
- Engage in substance use which conflicts with their treatment goals
- Recognize a history of problematic substance use
- Want to maintain sobriety while in eating disorder treatment
- Desire additional education about substance use or have a desire to explore their current substance use patterns

Both substance use disorders and eating disorders have a profound impact on an individual's life, affecting them socially, emotionally, and physically. When these two disorders co-occur, the consequences can be especially severe, often complicating the treatment process.

- What the Reserach Tells Us**
- 50% of people with eating disorders use alcohol or illegal drugs, which is five times higher than the general population.
 - Among those with eating disorders, 27% of people with anorexia, 37% with bulimia, and 23% with binge eating disorder (BED) also abuse or are dependent on other substances.
 - The most commonly abused substances among individuals with eating disorders include caffeine, tobacco, alcohol, laxatives, emetics, diuretics, appetite suppressants (amphetamines), heroin, and cocaine.

Common Risk Factors

Factors like family history, low self-esteem, depression, anxiety, social pressures, and trauma make individuals more susceptible to developing both eating disorders and substance use disorders.

Reinforcement Factors

Both eating disorder behaviors and substance use serve similar purposes, such as relieving boredom, stress, anxiety, or pain, increasing relaxation, and providing feelings of euphoria. Society and culture may even glamorize these behaviors.

Biological Factors

In the brain, both eating disorder patterns and substance use patterns are reinforced and perpetuated due to altered neurotransmitter activity, cravings, and urges.

Behavioral Similarities

With both eating disorder and substance use treatment, we observe comparable behavioral patterns, including a persistence in using harmful behaviors despite negative consequences, interpersonal problems related to these behaviors, denial, secrecy, shame, preoccupation with the behavior, impulsivity, appetite disruptions, and self-destructive actions.

Coexisting Disorders

Both eating disorders and substance use disorders are associated with higher rates of depression, anxiety, suicidality, Cluster B personality traits, and compulsive behaviors.



Aster Springs Outpatient is a proud part of the Odyssey Outpatient Network.

To learn more, contact our admissions team at 866.918.4285