Strong not Skinny:

Raising Awareness for RED-S

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The morning air was crisp, and the grass was still wet around the track. I stooped down and double-knotted my shoes just to be sure. I shook out my legs and swung my arms as I walked up to the start line, waiting for the signal. Today was going to be the day.

Mrs. Hall blew her whistle, and I was off in a sea of Ked-clad fourth graders. "Be patient," I told myself. "Most of them will slow down after the first curve; you have four laps to run." Tony the Tiger was coaching me along, "Show them that you are a tiger. Show them what you can do. The taste of Tony's Frosted Flakes brings out the tiger in you! You're Grrrrrrreat!"

I heard Mrs. Hall's voice breaking through my song on the final curve, "Tessa, if you run hard, you'll break 7 minutes!"

I ran a 6:38 mile that day. I could taste greatness.

Twelve years later, I watched the evening sun setting over the track with tears in my eyes. I had just run my final Division I race, and I had never lived up to the great runner of my 9-year-old mind's eye.

I always tried hard. My college coach nicknamed me "Blood and Guts." But like many young female runners, I was plagued with body image issues. No one ever talked to us about it. But the unspoken message was clear: skinny equals fast. I ran for four years, fueled by a fat-free and minimal protein diet of salads and Diet Coke. I never drank electrolytes and can remember staggering after a particularly hot track workout with double vision. I often felt feverish after a hard run and chalked it up to "post-workout syndrome."

Despite my efforts and restrictive eating, I often gained weight that fluctuated up and down by 25 pounds during my collegiate career. I felt ashamed that I lacked the discipline to get skinny enough. I knew about anorexia, bulimia, and the female athlete triad, and that it was possible to take it too far. I did not want a full-blown eating disorder that would result in stress fractures and a skeleton physique. I believed the key was to ride the line of being skinny enough to run fast, but not too skinny to become slow, and I could not do it.

Becoming a mother four years later changed many things for me. Pregnancy was tough, and I had to take daily medication to keep down food and water. I began to realize how important proper nutrition was and that my choices were also affecting another life. I started eating real food, and my life was changed.

I began to view food as fuel, rather than the enemy of my life goals and running aspirations. The idea of strong, not skinny, began to take root deep in my soul. Perhaps the plague of my college career was not my lack of discipline, but my chronic under-fueling.

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Five years ago, I began a new journey coaching middle and high school runners. My desire to create a supportive and healthy environment for my athletes led me to earn a Master's in Athletic Coaching. Through my studies, I finally discovered the answer I had been looking for, RED-S.

Relative Energy Deficiency in Sport (RED-S) describes a syndrome of poor health and declining athletic performance that occurs when athletes do not consume enough food to meet the energy demands of their daily lives and training (Mountjoy et al., 2014). RED-S describes athletes like me who do not fit into the traditional eating disorder categories. Awareness of this syndrome entered the world stage in 2014 when the International Olympic Committee published *"The IOC Consensus Statement: Beyond the Female Athlete Triad—Relative Energy Deficiency in Sport (RED-S)".* However, the information has been slow to reach coaches, athletes, parents, and healthcare providers.

RED-S can affect any athlete but females going through puberty in sports that have historically placed value on leanness are particularly vulnerable. For boys, puberty marks a more linear path to strength and speed. For girls, movement often feels harder and different in their changing bodies, and performance plateaus are a natural result. Puberty is a steppingstone to emerging as strong women, but most girls do not know this. Studies show that teenage girls drop out of sports at twice the rate of boys (Zarrett et al., 2020). Those who stay in sports and make it to the college level have a much higher risk of developing disordered eating habits than their male counterparts.

As coaches, educators, and parents, we can normalize and talk about menstrual cycles, breast development, and with it, the performance plateaus that are natural for girls experiencing puberty. While I cannot change my past, I can educate my athletes about fueling for optimal performance and refrain from engaging in body shaming. The United States Olympic and Paralympic Committee website provides visual "Athlete Plates" guides for eating that coaches can share with athletes if they do not have qualified nutrition staff (USOPC, 2025).

Educating parents and athletes about RED-S is one step I can take as a coach to help with change. For example, former professional runner Tina Muir developed an accessible YouTube series to educate people on the signs, symptoms, and recovery process for RED-S. When it comes to addressing this threat to athlete health that disproportionally affects girls and women, we need research-backed policies and procedures to ensure no girl stays in the dark. Professional runner and coach Lauren Fleshman explains, "The pathway from concussion research to policy change shows us the way; all we need now is the will" (Fleshman, 2023).

Will. I have always had will. I am back on the starting line, standing shoulder to shoulder with strong women. Some have stories like mine. Twenty years later, our bodies are giving us another chance. The gun fires, and I am off in a sea of women at the Masters Indoor Track and Field World Championships with USA proudly displayed across my chest. I smile at Tony the Tiger as I round the first curve.

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