

Worksheet 10.1: Eating is non-negotiable for everyone

Every family seeking to help a loved one with re-feeding is faced with the choices of what, where, when, how, with whom, etc. *SBC*, Chapter 12 is lengthy and carers can find it overwhelming. It can be useful to talk them through the different sections, highlighting some key points from each. There are six sections:

A. The role of eating and eating behaviours

Common food rules and compensatory behaviours are described as well as the balancing act of treatment. That is, on the one hand giving support to Edi in experimenting with non-rule-bound eating, and on the other hand not letting severe malnutrition and ED symptoms interfere with brain function

B. Thinking about changing eating habits

The Nutritional Risk Ruler is introduced to help carers to initiate a conversation around nutritional health. Also, some further guidance is provided on nutritional safety and medical risk with suggested phrases to use when medical risk is high.

C. Creating distance from eating disorder rules

The pros and cons of the status quo vs change are discussed, and the ABC model is introduced with guidance on helping to reduce post-meal anxiety.. Eating disorder rules represent a crucial safety net for many sufferers, for others they can be a shameful secret. The techniques in this section provide carers with tools to explore Edi's thought processes around food, both positive and negative.

D. Implementing eating

A guide to supporting Edi in planning to challenge rule-bound eating behaviour introducing the hierarchy grid, the importance of tackling one problem at a time, observing the anxiety levels and reviewing regularly to examine whether the feared consequences have occurred. DARN-C and SMART planning are useful here.

Eating is non-negotiable. Therefore there is no choice and so praise even for the effort may annoy. Maybe it is better to acknowledge that they have 'done what they need to do'.

An example of a written change plan for eating is given in this section of *SBC* as well as detailed guidance on things to consider when creating your own meal plans.

E. Supported eating

A 16-point guide is given that carers can use when Edi is unable to stick to the meal plan (*SBC*, pp. 204–10). This might be an adolescent who is in phase one of Family-Based Treatment and the parents have been instructed that they are in control of feeding their child. It might also be an adult who is struggling at home and unable to stand up to the eating disorder voice. Within this guide there are many examples of useful phrases that can be used to help Edi get through the meal or snack. The key is to maintain a firm stance with ED that eating is non-negotiable for all, while maintaining a calm and warm connection with the sufferer. Talking about food while eating is not helpful and will only be experienced as critical and unfeeling and the ED has the upper hand here. Talking about the detail of a meal is not helpful and neither is comparing portion sizes with other family members (*SBC*, p. 210 for examples of things to say and not to say). There is little point in discussing whether or not to eat food. Reassurance is useless and so are any enabling or accommodating behaviours.

Using lots of distractions and showing unconditional love are invaluable. Affirming efforts and intentions to eat are more helpful than a focus on the actual meal. Distraction and changing the subject are needed. Remember not eating is a way to maintain a sense of emotional control so once eating has started Edi will be feeling very frightened and out of control with their emotions.

F. Halfway support

Once Edi is able to take more responsibility for their nutritional health, carers can provide ongoing support in many ways, sometimes face-to-face and sometimes from a distance. Carers can be creative in coming up with suggestions while also encouraging Edi to tell them what might be helpful.

Carer task

As homework reread *SBC*, Chapter 12 and make notes on useful tips and phrases to use at home when coaching Edi in restoring regular eating.