

Meal Support for people with Eating Disorders: How do we do it?

What is the task? Helping a person to do something they need to do (eat for safety & health), but are fearful and reluctant to doing.

| Clinician Stance: | Prepared | Consistent | Calm | Assertive | Kind |
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| Do | Don't | | | | |
| <p>Preparation & planning:</p> <ul style="list-style-type: none"> - Understand treatment goals & tasks(?weight restoration; ?normal, regular eating; ? minimising binge eating; ? minimising purging behaviour; ?containing physical activity) - Prepare the dining environment ('pro-normal eating') - Keep clients informed (meal plan, meal time schedule & guidelines; what is expected of them & staff) - Check meal accuracy - What to do if the client is having trouble - What to do if the client can't complete the meal - Find out what the client finds helpful & supportive | <ul style="list-style-type: none"> - Don't address any concerns you may have about the treatment plan with the client. Take this up in team discussions - Be inconsistent as a clinician or a team - Assign this task to casual or inexperienced staff without preparation & support | | | | |
| <p>Coach-</p> <ul style="list-style-type: none"> - Encourage person to eat – break the task into small steps eg: "You need to make a start" - Remind them of the next step eg: "just pick up the sandwich" - stay calm outwardly, keep your voice at a normal level <p>provide praise for efforts</p> | <ul style="list-style-type: none"> - Behave in an angry or critical way; - nag - Humiliate or ridicule clients | | | | |
| <p>Distract-</p> <p>Eg: Chat about other things; get to know this person and their interests, have a joke together; read out loud; use puzzles</p> | <ul style="list-style-type: none"> - Talk / Argue about food, calories, dieting, the content of the meal | | | | |
| <p>Compassionate Reflection-</p> <ul style="list-style-type: none"> - Show person that you know this is hard for them and you are listening to them - Acknowledge their feelings & the challenge of their task <p>Eg: "I can see this is really hard for you"</p> | <ul style="list-style-type: none"> - Talk about why's – Eg: why the anorexia, why the treatment, why this is hard, why this food - Talk that makes the ED seem impossible to understand or stupid | | | | |
| <p>Remind person of the bigger picture-</p> <p>Eg: They need to eat; We all do. Food is their medicine and they need to eat to get out of hospital & into life</p> <p>Ask what they look forward to outside hospital</p> | <ul style="list-style-type: none"> - Over focus on the details of food & weight; physical experience of eating | | | | |
| <p>Remind yourself about externalising the Eating Disorder</p> <p>Eg: This is the <i>person</i> and this is the <i>anorexia</i> – the mental illness, and speak to the person who, on some level, wants to recover</p> | <p>Forget a client doesn't choose to have an ED</p> | | | | |