

MEAL SUPPORT FOR PEOPLE WITH EATING DISORDERS:

How do we do it?



THE VICTORIAN
CENTRE OF
EXCELLENCE IN
EATING
DISORDERS

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.

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| Clinician Stance: | Prepared | Consistent | Calm | Assertive | Kind |
|-------------------|----------|------------|------|-----------|------|

| Do | Don't |
|---|---|
| <p>Preparation & planning:</p> <ul style="list-style-type: none"> - Understand treatment goals and tasks (e.g., 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"> - 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 - Provide praise for efforts | <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 the person & 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 the person that you know this is hard for them and you are listening to them - Acknowledge their feelings and the challenge of their task Eg: "I can see this is really hard for you" | <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> <ul style="list-style-type: none"> - Ask what they look forward to outside hospital | <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,</p> <ul style="list-style-type: none"> - speak to the person who, on some level, wants to recover | <ul style="list-style-type: none"> - Forget a client doesn't choose to have an ED |