



Managing mealtimes when your child has an eating disorder

Meal times are some of the most difficult times that a young person with an eating disorder will encounter. Family members will be aware of the overwhelming feelings of anxiety that a young person with an eating disorder experiences when faced with a meal. It is important to try to make meal times as neutral and calming as possible. It is helpful to have a meal-plan agreed in advance so that expectations are clear between everyone about how much needs to be eaten. Parents, in consultation with a therapist or dietician, will normally decide this. The young person will usually be involved in this discussion, and have some choices about their meal-plan. Generally, it is most helpful to engage the young person in distracting conversations with the rest of the family, and actively discourage discussions about food during meal times. All family members should avoid conversations about dieting, weight or any associated eating disordered behaviour, for instance, references to vomiting, during the meal.

It can be a frustrating and distressing time for brothers and sisters sitting with a young person who is in the early stages of an eating disorder. Mealtimes can become very disrupted, which may have an impact on siblings' eating behaviour. Some families find it easier if everyone sits together, and others find it helpful to provide a separate space for the young person to eat, which can offer a more unobtrusive and calming environment. When the young person has established a routine of eating, they can then be reintegrated at the family meal table to enjoy a more social mealtime.

It is usually easier if the young person makes a start on eating as soon as he or she is seated, as eating can become more daunting the longer they wait. If the young person has not begun their meal after five minutes, gentle and clear prompting can help. For example, "I know this is difficult for you but you need to make a start on your meal now". The frequency of the prompting may need to increase the longer the young person takes to start their meal. Similarly, once they have started their meal, ongoing prompting may help them to continue. Prompting should be firm but nurturing, guiding the young person through their meal through the use of conversation and prompts.



In addition to prompting and support, family members can also help at meal times by acting as role models. This involves eating balanced, adult or age-appropriate sized meals and being aware of their own eating behaviours at the meal table. Eating with a young person who has an eating disorder can sometimes trigger concerns about food and weight among other family members. It is important to have an opportunity to think about how mealtimes are affecting each member of the family and to ensure that individual concerns are discussed. Usually this will be with a family therapist, but some family members may prefer to do this privately.

Young people with eating disorders may display unusual or inappropriate eating behaviours at the dining table. Some of these behaviours may include:

- Delaying the start of the meal
- Dissecting food into tiny pieces
- Tearing food apart – this is particularly applicable to food such as sandwiches or toast
- Picking at parts of all of the meal
- Playing with and pushing food around the plate
- Eating at a very slow pace or bolting the food without really chewing it
- Hiding, dropping or smearing food
- Inappropriate mixing of food types

In order to minimise these behaviours, it can help to have a realistic time frame for each meal. Suggested time frames are:

Breakfast	- 30 minutes
Lunch	- 45 minutes
Dinner	- 45 minutes
Snacks	- 15 minutes

By sticking to these guidelines, the

expectation is that all food should be consumed within the time given, and any dropped or hidden foods are replaced or given at the next meal. Napkins or tissues should be avoided as they can be used to hide food. Appropriate utensils should be given for each meal. Young people may ask for teaspoons to eat main meals or forks to eat yoghurt.

Post-meal support

After a meal it can be helpful for young people to spend half an hour or so with their parents and family. This is to allow the body time to begin digesting the food and receive praise and support for what they have managed to achieve. Additionally it prevents young people with excessive exercise difficulties from burning the food off, or finding other ways of undoing the hard work of the mealtime. During this time some young people may feel anxious or distressed by the feelings of having just eaten a meal or may be fearful of the weight that they imagine that they have put on. This is particularly so at first, when the stomach is getting used to more food. This is a time when parents or siblings may most be needed for support. During their 30 minute rest period it is a good idea for young people to stay seated. If vomiting is likely, it may be necessary to ask the young person to leave the bathroom door ajar. This only applies in the 30 to 60 minutes after a mealtime. It may be helpful to remind the young person to use the toilet prior to each mealtime, so they are not tempted go to the bathroom after meals. As the young person progresses the need for support after meals may diminish, although for some it remains important.



Meal plans

There is no 'right way to eat'. Every person, family and culture eats differently, from what is on their plate, to the time of the meal, to where they eat and with whom. However, when eating has become difficult it is easy to lose sight of what a normal meal pattern might be. It may be important to re-establish structures and expectations about eating which have been lost over time. We would not advise parents to become more expert than their children about calories or to start weighing and measuring food. This only leads to conflict, and generally we find that parents are pretty good judges of what their children need to eat.

The advantage of a meal plan is therefore not to 'prescribe' how much needs to be eaten, as this is judged by weight gain on a week-by-week basis, but to allow sharing of information about expectations of intake for a growing young person. Young people generally need to eat more calories than an adult because growing uses a lot of energy. The amount of energy needed to grow is often underestimated. Here is a guide for normal intake according to age, and a sample meal plan for 2400 calories per day. On average, this is the approximate amount that many young people need to eat to return to a healthy weight steadily but slowly. However, it is important that all young people are assessed individually for their nutritional requirements, as they can be extremely variable in their needs. For instance, despite being the same weight and height, two different people may have vastly different calorific needs. This would be affected by their current nutritional status, calorie intake, level

of activity, relevant medical information and psychological well-being. Meal plans usually begin with reduced amounts at first and then gradually increase to full portions. Initial intake should be sufficient at least to prevent further weight loss. It is usual to start with ensuring adequate fluid intake as this imposes the greatest medical risk.

Estimated Average Requirements for Energy

The following table indicates the Estimated Average Requirement (EAR) for energy for different age groups. These are estimates for weight maintenance not weight gain.

Age	Energy Requirements (kcal/day)	
	Female	Male
7-10	1740	1970
11-14	1845	2220
15-18	2110	2755

From: Dietary Reference Values for Food, Energy and Nutrients for the United Kingdom. Report on Health & Social Subjects No 41. Department of Health. 1991



Meal plans using 'Food Portions'

The food we eat can be classified into one of several food groups:

- **Carbohydrate**
e.g. bread, potatoes, pasta, rice
- **Fruit**
e.g. fresh, tinned and juice
- **Protein**
e.g. meat, chicken, eggs, nuts, cheese
- **Milk/dairy products**
e.g. fresh milk and yoghurt
- **Fats**
e.g. butter or spread, crisps & chocolate.
- **Vegetables**
e.g. broccoli, cauliflower, beans

In meal plans, food items are portioned according to their energy content and classified in a similar way. Vegetables are also included in the meal plan, however the energy content is not counted as it is minimal.

Each food item is measured by a portion size; each portion is approximately 150kcal. A list of foods with their portion size is below. Try to include as wide a range of foods as possible in the meal plan.

When increasing a meal plan it is usual to do this at a rate of one to two portions at a time, at a pace the young person can cope with. If things have got stuck, it can help to move to the next level, whereas if a young person is struggling to cope, it may be more beneficial to keep them at their current meal plan until they are feeling a bit stronger psychologically.

Food Portions

All equal to 1 portion unless otherwise stated

Carbohydrate

Bread:

- 2 slices bread
- 1 med. bread roll

Rice/Pasta:

- ½ cup cooked rice (brown/white)
- 1 small can spaghetti
- 1 cup cooked pasta

Potato:

- 1 jacket potato (med)
- 1 boiled potato (med)
- 10-12 chips
- 1 roast potato (small-med)
- 2 scoops buttery mashed potato

Breakfast cereal:

- Weetabix x 2
- Rice Crispies (30g) – 1/3 mug (standard ward mug)
- Cornflakes (30g) – 1/3 mug (standard ward mug)

Biscuits:

- 2 Custard Creams
- 2 Marie (1/2 portion)
- 3 Nice (1/2 portion)
- 3 Shortcake
- 3 Digestive
- 1 Fox's Caramel Rocky biscuit

Other snacks:

- 1 Twix bar
- 1 Jaffa Cake bar
- 1 Flake
- 1 pkt Milky Way Magic Stars (30g)
- 1 pkt Hula Hoops (34g)
- 1 pkt Walkers Crisps (34g)



Fruit

- 2 apples
- 2 oranges
- 1 large banana
- small bunch grapes
- 200mls juice (1/2 portion)
- 250mls Ribena
- 250mls Lucozade

Milk

- 200ml whole milk
- 300ml semi-skimmed milk
- 1 mug hot chocolate/Ovaltine or similar milky drink
- 1 carton yoghurt (fruit or natural)
- 3 tsp Nesquik in 200mls semi-skimmed milk

Fat

- 2 rounded tsp butter
- 1 tbsp mayonnaise/salad cream
- Peanut paste – see 'protein' section

Protein

- 2 slices meat (medium)
- 1 small chicken leg, breaded
- 2 sausages
- 3 fishfingers
- ½ serve lasagne (1 serve = approx 300kcal)
- 1 serve cottage pie (approx 150g)
- 4 chicken nuggets
- 1 beef burger, fried
- 2 eggs, or 1 egg in 1dsp mayonnaise/salad cream
- ½ large tin (200g) baked beans
- 1 tbsp peanut butter
- 30g nuts (shelled)
- 25g (1 individual portion) cheddar-type cheese
- 2 individual portions processed cheese e.g. Dairylea

Miscellaneous

- ½ tin Cream of chicken soup
- ½ tin Cream of tomato soup

Reading labels to determine 'portion' value

The following section provides information on working out the 'portion' value of foods from their labels. This may be useful for favourite foods or foods that are less familiar, which are not shown in the list of foods attached.

- Look for a nutrition panel on the product (not ingredient list)
- There will be 1 or 2 columns - 'per 100g' and/or 'per serve'.
- We are interested in the per serve column.
- Determine the serve size they are referring to. In the example below the serve size is a 40g bag (crisps).
- Look at the energy (calorie) value for this on the 'per serve' column. i.e. 193kcal
- Divide by 150 (as 1 portion = 150kcal). = 1.28
- Round up or down to nearest ½ portion.

In this example we would count the bag of crisps as 1 portion.

NUTRITION INFORMATION TYPICAL VALUES		
	PER 40g BAG	PER 100g
Energy	809 kJ 193 kcal	2022 kJ 483 kcal
Protein	2.6 g	6.5 g
Carbohydrate	23.2 g	58.0 g
of which sugars	0.4 g	1.0 g
Fat	10.0 g	25.0 g
of which saturates	4.8 g	12.0 g
Fibre	1.6 g	3.9 g
Sodium	trace	trace

Store in a cool, dry place.
For best before date see front of pack.



Sample Meal Plan: 2400kcal/day

Breakfast	
Carbohydrate	1 portion
Spread	1 portion
Jam	-
Milk	1 portion
Fruit juice	-
Mid-morning	
Fruit/biscuits	1 portion
Milk/fruit juice	1 portion
Lunch	
Sandwich of:	
Protein	1 portion
Carbohydrate	1 portion
Fat	1 portion
Salad garnish	-
Pudding/fruit/milk	1 portion
Mid-afternoon	
Biscuits/fruit	1 portion
Spread	-
Milk/fruit juice	1 portion
Evening meal	
Protein	1 portion
Carbohydrate	1 portion
Vegetables	1 portion
Pudding/fruit/milk	1 portion
Bedtime	
Milk	1 portion

Nutritional Supplements and “Build-up” drinks

Nutritional supplements or build-up drinks (such as Complan®) should not be used without the agreement of a dietician or other health professional. However, as part of an agreed plan, these can be a more acceptable way to boost calories if the young person is really struggling with eating. A young person’s calorie requirements should not be made up from supplements alone. These supplements are designed to ‘add’ to an established oral intake and not as a ‘complete nutrition’ feed. If given exclusively, the supplements may give unnecessary (and potentially dangerous) doses of some vitamins and minerals and may also provide excessive protein. For this reason, nutritional supplements are usually prescribed by a dietician or doctor.

Supplements should be seen as an addition to normal eating and not as an acceptable replacement. This is to ensure that normal eating patterns can be encouraged from the outset and effort is best directed at encouraging a normal diet and eating pattern. Additional sources of energy include high-energy drinks such as Lucozade® or other ‘sugary’ drinks.

Conclusion

Finally, it is never helpful to enter into arguments or bargaining at the meal table. A young person with an eating disorder will always respond best to a firm, clear but gentle and empathic approach. At times it can be difficult to be with a young person who is struggling through a meal. It is essential to their progress however that they are made to feel safe no matter how difficult it gets.



Notes

Compiled by the Feeding and Eating Disorders Service, Child and Adolescent Mental Health Service in collaboration with the Child and Family Information Group.

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