

# General Carer's Info

## For carers of young people with Eating Disorders

There are many different ways parents or carers feed their young person. Some of this has been included in this information leaflet, however, you may also come up with your own strategies. Keep communicating with your team and if something isn't working, please say so.

### Meal Plans

Whilst your young person is under CAMHS it is most likely they will be given a Meal Plan. Meal plans are a scaffold to support a young person's recovery. If this happens you will be expected to follow this completely, but as recovery progresses in conversation with your team there will be a transition to less structured eating.

Parents / carers are to buy, prepare and supervise ALL meals and snacks.

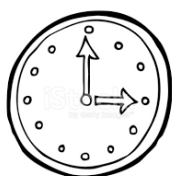
Young people should not be in the kitchen nor should they be involved in any aspect of the foods being bought.



- Do not be tempted to increase the portions or add in extra butter / fat.
- This can make your young person very suspicious and will only increase anxiety especially if their weight increases too quickly.

### Timings

In the early stages there should be NO negotiation away from what is stated on the meal plan (bar genuine food dislikes / allergies / intolerances).



**Meals** should take no more than 45 minutes for a main meal, this includes 30 minutes for main course and 15 minutes for dessert. Snacks should take no more than 15 minutes.

If the food is refused after this time, remove the meal / snack and keep a record, to help us understand how mealtimes are going at home.

Snacks can be offered later in the day or incorporated into a different meal or snack time when the young person is feeling calmer.

## Meal Plans

There are two main meal plans which you will likely be given:

**Restoring Regular Eating** - This meal plan is only to be used for 5 days at most. It is designed to give your body a gentle re-introduction to food. You will need to get blood tests done in these initial 5 days. Your team will advise you.

**Restoring a Healthy Weight** - this is the higher calorie meal plan which most young people stay on. This will help the young person get used to eating regularly again and will help them to restore the weight they have lost.

**The second meal plan may have much more food than a sibling or friends might eat. It is not expected to be something the rest of the family or parents follow. It is designed to restore weight and repay the 'debt' to the body.**

As time progresses and your young person starts to return to some of their previous activities (e.g. school) their activity levels may increase. We recommend giving extra snacks to compensate for the increased energy needs. There is a guidance sheet to advise on this.

- PLEASE DO NOT express concerns regarding the volume of food or any aspect of the meal plan in front of the young person - instead speak with your team.
- Try not to get into discussions about the meals and snacks they are expected to eat. Just gently encourage and supervise.
- We would ask that you try to change up the meals and snacks so that the young person does not become too rigid.

## During Meals

The meal plan includes some portion sizes. You should weigh or measure food **ONCE ONLY** and then use the same bowls / plates etc. and judge by eye.

Parents may wish to eat with their young person but you do not have to if you are not due your next meal. You are not on a meal plan therefore are not expected to eat the same items should you wish not to.

Once the meal has started, there should be no further discussion about what's on the plate. All food should be eaten, with minimal tearing / ripping apart etc. Excessive playing with food including smearing around the plate should be discouraged.

- Yogurt pots are to be scraped (including lids) and cartons of juice should be emptied into a glass.
- If you feel your young person is likely to try to conceal food then sleeves should be rolled up and hands should be visible at all times. Excessive leg jiggling should be gently stopped. Hair should be tied back.
- If they are an unhelpful distraction or are being too loud, younger siblings may be best supervised elsewhere.
- Pets, especially dogs, should not be around the table during meals. They are often able to dispose of discarded food very quickly and therefore are not helpful during meals. Keep their support for after meals!
- Extra yogurts / cereal bars etc. should be available in case the food is damaged or discarded and you want to try again.

### Why the Meal Plan is Important?

After a period of poor dietary intake or restriction the body needs lots of nutrients but the following are most important:

**Phosphate:** You need a high phosphate intake whilst you slowly increase the amount you are eating. During a period of starvation the body breaks down muscle and fat for fuel. Once food is available again there are extra demands on certain nutrients including phosphate.

To meet this extra demand it is important to have phosphate rich foods in the diet. If phosphate levels drop too low it can cause serious complications including cardiac problems therefore it is very important in the early stages of a young person eating again that this high milk meal plan is closely followed.

Milk and dairy foods e.g. yoghurts/custard and cheese are high in phosphate - these are found in large amounts in the first meal plans.



**Calcium:** Calcium helps to protect and strengthen bones and teeth. Young people have high requirements for calcium and vitamin D as they are rapidly growing. Often young people who have had weight loss are sent for a bone scan to check for this damage.

Having enough food rich in calcium and vitamin D AND putting on weight can help repair this bone damage and restart growth (height). However once the window of growth has passed (over 18) this damage is not repairable.

Ideally milk and dairy should not include low fat options (e.g. low fat yogurts) as this can make weight repletion take longer. Milk should be at least semi skimmed. Yogurts should be 'thick and creamy' style and cheese should be full fat.

If your young person has genuine allergies to milk or dairy, please seek advice regarding alternatives. **Oat / Almond / Rice / Hemp milk ARE NOT suitable alternatives to cow's milk.**

**Potassium:** Potassium is essential for contraction of muscles including the heart therefore having a level which is too low or high can be dangerous.



The level of potassium in your blood may be low if you have not been eating well or if a young person has been vomiting.

Fruit, fruit juice and some vegetables are high in potassium and will help to ensure that the level in the blood is enough.

**Fluid:** The body is made up of cells, every cell in your body needs water to work properly. So being well hydrated is important. However having too much water (water loading) can be very serious and will affect your salt balance.

Around 8 glasses of fluid per day is enough for general activity. If you are more active or if the weather is warmer this may be increased a little.

## **Distraction**

For some young people, distraction during meal times or immediately after, can help with feelings of guilt, distress and anxiety.

- ✓ Colouring in or drawing whilst listening to music
- ✓ Have a head set on whilst reading a magazine
- ✓ Watching your favourite TV or boxset whilst having your nails done

- ✓ Completing a puzzle / word search whilst watching TV
- ✓ Arts and crafts whilst speaking to your friends

What you do doesn't really matter just as long as it helps your young person relax.

### Other Information

**Rest after Meals:** A rest period after each meal and snacks should be enforced. This should last for 1 hour after meals and 30 minutes after snacks. During this time there should be no walking around, standing up, pacing or going to the bathroom or being on their own. Try to encourage distraction during this time.

**Weight Increases:** It is important to understand, that young people who have restricted their intake and lost weight over a number of months, have a huge **debt** to pay back to their body.

**The aim for recovery is steady gradual weight gain of between 500g-1kg /week.**

Starting to eat and drink again, combined with a damaged gut / bowel, can make young people feel bloated and overly full in the first few days. This can result in a rapid increase in 'scale's weight' and for some young people this can be very frightening.

It is important to remember this is temporary and **is not flesh weight**. You cannot gain weight that quickly! It is simply the body trying to do lots of different jobs whilst still quite damaged.

By continuing to eat regular meals, young people feel less cold and notice that they have more energy and their concentration is improving.

**Anxiety can become worse during this phase!** Speak to your team about how to manage this.

More importantly the damage starvation has done will slowly start to repair - but this doesn't happen overnight! Be patient.



A hot water bottle on the tummy and wearing stretchy bottoms (jogging bottoms or PJ's) in the initial few days will help reduce this feeling and ease discomfort. This should be discontinued if causing any red skin.

**Constipation:** Damage to the gut can also make it difficult for a young person to open their bowels. Usually this can be managed with extra fluid and trying to choose granary bread and high fibre breakfast cereals.

**Laxatives are unlikely to be prescribed and should not be given unless advised by your team.**

**Finally....**

Sometimes it is difficult to know what to say to encourage your young person. The following phrases may help:

*'This food is your medicine'*

*'I know it's difficult for you but this is the only way'*

*'Pick up the sandwich (fork etc.) and take the first bite'*

*'I'm here with you. Take a bite'*

*'I love you. This is what you need'*

*'Get this done and then we can go for a drive'*

**Useful Resources**

**Eva Musby** - parent website with useful videos demonstrating how to coach your young person.  
<https://anorexiafamily.com/>

**Maria Ganci** - *Survive Fbt: Skills Manual for Parents Undertaking Family Based Treatment (Fbt) for Child and Adolescent Anorexia Nervosa.*

**BEAT** - National UK website providing information and support  
<https://www.beateatingdisorders.org.uk/>

**MindED** - Minded for Families. <https://mindedforfamilies.org.uk/young-people/>

**Notes**

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