

Supported Meal Guidelines

Supported meals, known in the program as the Food and Feelings group, are a central part of the ED track. At meals, the following guidelines apply:

- **Portions:** Staff will provide a sample plate to help clients have a baseline for adequate portioning. Clients are expected to plate according to the sample plate, check in with staff to ensure their portioning is appropriate, and eat according to the meal plan discussed with the dietitian and primary therapist.
- **Hunger/fullness:** It is normal for people with EDs to receive misleading hunger and fullness cues. While the goal is to work toward intuitive eating, until food intake is regulated and normalized, these cues are unreliable. As a client progresses in the program, it may become part of the meal plan to incorporate hunger/fullness cues. However, clients are initially expected to follow meal guidelines rather than relying on internal cues.
- **Supplement:** If clients are unable to complete their meal according to the meal plan, they will be expected to supplement with a meal replacement. However, meal replacement is not an acceptable alternative to eating according to the meal plan, and if supplements are used frequently, a higher level of care may be indicated.
- **Preferences:** Strong preferences, ritualized patterns of eating, “acceptable” vs. “unacceptable” foods, difficulty with textures, and feeling “disgusted” by certain foods or food groups are all common among people with EDs. It can initially be difficult for clients to discern what is ED behavior and what is truly innocuous. Clients are expected to progressively challenge behaviors and preferences.
- **Food talk:** Talking about food (likes/dislikes, portion sizes, caloric content, etc.) during plating or the meal exacerbates ED thoughts and behaviors. Clients are asked to refrain from food talk until it can be processed post-meal.
- **Distractions:** Mindfulness of food and eating is important to recovery. Clients are asked to be present and engaged during the meal. Learning to tolerate discomfort during meals is an important part of the process, and distractions from the meal (e.g., phone use, repeatedly leaving the table) are discouraged.
- **Post-Meal Reflection:** Following meals, clients discuss the ED thoughts, feelings, and behaviors that arose during the meal. Clients are encouraged to be open and honest about their experience and use “I” statements to help disentangle ED from reality and prevent triggering other clients (e.g., “I felt anxious about the amount I was eating” instead of “There was too much food”).

Client Signature: _____

Date: _____