



Priya Tew
Freelance
Dietitian and
Specialist in
Eating Disorders

Priya runs Dietitian UK (www.dietitianuk.co.uk), a freelance dietetic service that specialises in eating disorder support. She works with NHS services, The Priory Hospital group and private clinics, as well as providing Skype support to clients nationwide. She also works with the media and with brands.

EATING DISORDERS: WORKING WITH ADOLESCENTS

Adolescents with eating disorders are very different to work with and need a thoughtful, skillful approach. Careful interviewing skills are needed to build the relationship, with the first step being engagement. Some adolescents will initially present as uncommunicative and hostile, or they may lack the confidence and communication skill set. Helping them feel secure enough to open up and breaking down the barriers is a big step.

This can mean that instead of launching into a usual dietetic patter, it may be best to skirt around the edge of the subject. Questions such as, “What is your favourite food?” or “Do you enjoy cooking?” can open up conversations around food without being too challenging for the patient. Using appropriate language is important as is showing that you empathise and are there to listen.

Creativity is key; aiming to bring some fun into sessions and having a good sense of humour is important and it can be helpful to have an activity ready to engage the patient (see Table 1).

mum is known to be over-controlling then it may be better to work with the adolescent on how they can take more responsibility for their meal plan. It can be helpful to have an initial session with a parent present, or to have sessions where the parent is present for the first part and then have some time with just the patient. Setting boundaries makes the patient and their family feel safer.

So explain how the session will work and what is expected of them. How will weighing work and do they need to keep a food diary? What rate of weight gain is aimed for and what happens if this is not met? Setting some ground rules around what happens if someone gets upset or angry is important and how to call a timeout.

There are often incorrect food beliefs that need to be challenged. Use of food models, pictures, or the traffic light system (see Table 1) can help show the dietitian what thought processes are going on. Are carbohydrates foods the main ones being avoided? If so, a session exploring the role of carbohydrates and thinking about why some are seen as ‘unhealthy’ will help. Validation is key: explain why you understand what the client believes, but then break down the science to show that their beliefs may not be correct. This patient group are usually thirsty for knowledge, but won’t ask for it. They want you to see into their minds and be understood.

Taking part in meal support can be a great way to see how an adolescent

Taking part in meal support can be a great way to see how an adolescent copes and can highlight where their anxieties lie. It can also be a way to gain their trust and many like to see what dietitians eat!

Working with adolescents also means working with their families and carers. This can prove to be complicated. Each family member can give altered viewpoints and report eating patterns as different. The family dynamics are important to understand and consider. Working within a therapy team becomes highly valuable as this will enable an insight for the dietitian into how best to work with the family and how interactions occur. For example, if



Table 1: Activities to engage the patient

Activity	Description
A table of foods	Get the patient to describe how each food makes them feel and explore why.
Role play	Pretend it is a meal plan and get the patient to be the carer and you the patient, then reverse roles. You can also do this with the carer and patient. It can be a great way to think through what goes wrong at meal times and come up with strategies to help relieve tensions and anxiety.
Traffic light foods	Rank a list of foods into red/amber/green for high/medium/low anxiety foods. This can provide a useful place to plan food challenges and can be good to revisit at a later date to see what progress has been made.
Ranking fear foods	Ask the patient to write out a list of foods that cause them anxiety, then rank these from high to low. Work through the list finding out why the foods cause anxiety and use this as a way to challenge incorrect food beliefs and give education.
Design your favourite meal	If you could eat any foods with no anxieties what would you have? This can be a wonderfully creative activity to think about the foods they used to love and meals that hold happy memories.
Meal plan design	Hand out a meal plan and ask the patient how they would change it to make it a weight gain meal plan and a weight loss meal plan.
Invite me for dinner	If I, the dietitian, was coming to your house for dinner, what would you cook me and how much would you serve me?
Portion size cups	Using a plastic cup and a range of foods, weigh out ideal portion sizes, measure into the cup and mark them. These can then be used at home for portion control.
Food challenges	Present a list of food challenges that can include eating out, pizza with friends, sweets at the cinema and use these to come up with a list for the adolescent. Help them explore the things that they are missing out on socially and the foods they wish they could allow themselves to eat.

cope and can highlight where their anxieties lie. It can also be a way to gain their trust and many like to see what dietitians eat! If you can't be present at an actual meal, then talking through what happens at meal times and how anxiety presents is a useful tool. If the anxiety comes when faced with a food, you can help that person come up with distraction techniques and calming suggestions. After a meal, discussing what helps deal with the

thoughts and guilt, planning in relaxation times and helping them normalise their feelings is key.

As a dietitian working in this area, you need to be ready to think on your feet and to change the direction of a session at any time, or cut a session short. There can be a bigger issue to discuss that suddenly comes up; in which case, follow the lead. However, also remember that there can be red herrings. That

Table 2: Creating effective sessions

Weighing	How often will it happen? Clothing and shoes? Toilet beforehand? Eat/drink before or after? Will the weight be discussed? Who will it be shared with? What happens if it goes up/down, or is the trend more important than the individual weight?
Session length/frequency	Shorter more frequent sessions can work better.
Who will be present?	Will family/carers be present and if so, for how much of the session?
What needs to be done between sessions?	Set clear goals that are written down or emailed. How will a food diary be kept? An app or list on a mobile phone? Any worksheets/education sheets?
Contact between sessions	Will this occur and if so, how often and by what route?
Time out in sessions	If a patient needs a break, then how can they signal this? What behaviour is not acceptable in a session?
Who to ask for help	If they are struggling at home, who is the person to ask for help? How is this support best provided? Should they alert you?
The wider team	Who is responsible for which part of the patient's care?

Table 3: Take-home tips

Be creative and innovative.
Take time to build the relationship first.
Listen lots and let them talk.
Set ground rules and boundaries.
Use activities to engage and draw out information.
Challenge incorrect food beliefs.
Be ready to deal with emotions and upset.
Plan in good supervision.

sudden need to discuss the role of proteins may be to prevent you making an increase to the diet plan. Emotions can run high, so the ability to help someone work through these, to contain them and to calm them, is important to learn. Another essential component of this work is having good supervision; this doesn't have to come from a dietitian; an experienced therapist or psychologist can give a great insight into your work that you would not otherwise get.

SUMMARY

Working with adolescents who have eating disorders can be a challenge. Dietitians need to be thoughtful and take a caring and skillful approach. It takes time to build a trusting relationship with a client in these circumstances. But, with the right techniques and careful planning, you can engage the patient and manage all the challenges and issues involved. Sessions can be fun and creative, providing the right environment for progress and healing.