

STRUCTURED EATING

1). Structured Eating Defined:

-Structured eating involves making yourself available to do planned eating at planned times each day. By using structured eating you are telling your body it will get a steady stream of nutrition, therefore it does not need to send out powerful cravings to binge.

*Many people are misinformed and think that eating will often lead to weight gain... This is not true. Eating regularly gives a massive boost to your metabolism and your energy levels.

a). To start with, structured eating basically means that:

- You eat three meals and three snacks a day, every day.
- You aim to eat every 3 hours.

-start by eating something every 3 hours and gradually build up your portion sizes.

Normalizing eating does NOT happen overnight, therefore you need to take things easy and not be too hard on yourself.

b). Helpful tips before you begin:

- Try not to react to small fluctuations in body weight
- Keep your food plan simple - obsessively counting calories can cause compulsive food behaviors
- Take things slow
- Only eat what you feel comfortable with at this early stage
- Remember food planning is work-in-progress aimed at normalizing food intake and normal eating behavior
- By keeping a record of all your food in your food journal, you are able to self-monitor and look for problems and obstacles in your meal planning as you go along.

2). Creating a structured eating plan: involves planning meals in advance of what will be eaten, when and how much. Meal spacing in this way is important in preventing underrating, overeating and bingeing!

a). How to do this

1. Think about what you will eat for breakfast, lunch and dinner and what snacks you will eat in between
2. Choose foods you feel comfortable eating, you may decide to avoid trigger foods initially at this early stage
3. If you do not have your food available, then it is a good idea to do a grocery shop.

4. Packed lunches can help - plan them and prepare tomorrow's meal
5. Plan the times when you will eat breakfast, lunch, dinner and your snacks.
6. Try to keep as close to your structured plan as possible.

b). Your structured eating plan should include...

- A full breakfast
- A full lunch
- A full dinner
- Snacks in between meals to stop you getting too hungry

You can choose when to eat but there shouldn't be more than a 3 hour gap between meals and snacks.

c). This is an example of a time frame based on waking at 7.30am. Please alter times to suit you, leaving no longer than 3-4 hours between meals and snacks.

- **07.30am wake up**
- **08.30am eat breakfast**
- **10.30am mid morning snack**
- **1.00pm eat lunch**
- **3.30pm mid afternoon snack**
- **4.30pm another snack**
- **6.00pm dinner**
- **8.30pm evening snack**
- **11.00pm Time for sleep**

NORMALIZED/INTUITIVE EATING

1). Normal eating is...

- being able to eat when you are hungry and continue eating until you are satisfied.
- being able to choose food you like and eat it and truly get enough of it—not just stop eating because you think you should.
- being able to use some moderate constraint on your food selection to get the right food, but not being so restrictive that you miss out on pleasurable foods.
- giving yourself permission to eat sometimes because you are happy, sad, or bored, or just because it feels good.
- three meals a day or it can be choosing to munch along.
- leaving some cookies on the plate because you know you can have some again tomorrow, or it is eating more now because they taste so wonderful when they are fresh.
- overeating at times: feeling stuffed and uncomfortable. It is also under-eating at times and wishing you had more.
- trusting your body to make up for your mistakes in eating.
- Something that takes up some of your time and attention, but keeps its place as only one important area of your life. In short, normal eating is flexible. It varies in response to your emotions, your schedule, your hunger, and your proximity to food.

2). What is Intuitive Eating?

Intuitive eating is a nutrition philosophy based on the premise that becoming more attuned to the body's natural hunger signals is the most effective way to attain a healthy weight; rather than keeping track of calories or fats for example. Intuitive Eating goes by many names, including non-dieting or the non-diet approach, normal eating, conscious eating, mindful eating and more.

Principles of Intuitive Eating

- Reject the diet mentality. Throw out the diet books and magazine articles that offer you false hope of losing weight quickly and permanently, don't buy diet foods.
- Honor your hunger. Keep your body biologically fed with adequate energy and carbohydrates. Otherwise you can trigger a primal drive to overeat.
- Make peace with food. If you tell yourself that you can't or shouldn't have a particular food, it can lead to intense feelings of deprivation that build into uncontrollable cravings and, often, bingeing.
- Challenge the food police .Scream a loud "NO" to thoughts in your head that declare you're "good" for eating salad or "bad" because you ate cake.
- Respect your fullness. Listen for the body signals that tell you that you are no longer hungry.
- Discover the satisfaction factor. When you eat what you really want, you will experience genuine satisfaction and pleasure which means it will take less food to feel full.

- Honor your feelings. Find ways to comfort, nurture, distract, and resolve your issues without using food. Food may briefly comfort you or distract you from the pain but you'll eventually have to deal with the difficult feelings.

INTUITIVE EATING STEPS:

- The **FIRST** step to listening to your body is being able to detect when you are getting hungry. If you are indeed truly hungry, and not just looking for food to cure your boredom, stress, or loneliness, then it is time to refuel.
- The **SECOND** key is being able to know when you have had enough. Listen to your body. When you begin to feel full, you will know that you have had enough to eat. The goal is to feel content - not uncomfortably stuffed but not starving either. For some people this means planning 5 or 6 smaller, well-balanced meals a day instead of 3 large meals. And remember, it takes about 20 minutes for your body to realize it's full. Also, be aware of what you are eating - eat sitting down, chew slowly, enjoy the tastes, smells, and textures of your food.
- The **THIRD** key is moderation, nothing to extremes. Often people here this advice and think it means they can eat whatever they crave, all the time. Obviously we cannot survive on potato chips or peanut butter cookies alone. And if you tried, chances are you'd probably start to crave some pasta or fresh fruit after a while. These cravings are your body's way of helping you get the nutrients it knows you need.

Physical Hunger vs. Emotional Hunger

Physical Hunger		Emotional Hunger
Tends to come on gradually and can be postponed	VS	Feels sudden and urgent
Can be satisfied with any number of foods	VS	Causes very specific cravings (say, for pizza or ice cream)
Once full, you're likely to stop eating	VS	You tend to eat more than you normally would
Doesn't cause feelings of guilt	VS	Can cause guilt afterwards

DEFINING RECOVERY:

- need to learn how to redirect energy into other channels that healthier, more productive
- need to recognize when old ED behavior returns under a new name, be aware of what the behavior is saying
- centers on ability to cope with anxiety/depression/stress without return to ED or use of another unhealthy behavior

In process when:

- ~eating in more balanced way
- ~weight has been stabilized for a period of time
- ~willing to try new foods and don't have risk foods
- ~symptoms aren't present on a continuous basis
- ~thinking of getting well in positive way, and feeling reconnected with oneself (and having reconnection between mind and body).
- ~sign of recovery is handling transitions/challenges directly, and not reverting to using ED to cope or avoid

Issues during recovery:

- ~Self-harm: sometimes used to express internal that cannot be expressed verbally, to lessen/calm anxiety or distress, relieve feelings of numbness
- ~Honeymoon period: ED behavior is diminished, medically okay; sometimes provokes anxiety (getting better too soon, difficulty coping with change from isolation to being with people, trouble handling realities of everyday life), a slip or lapse can also happen and be upsetting if viewed as a major setback or failure
- ~Conflict in recovery:
 - Romantic partners: may taken on parentified or other inappropriate role; being attentive/caring may reinforce the illness
 - Parents: differing points of view from client or each other; or blame the client (which client can internalize)

HANDLING SETBACKS:

- *Identify triggers, reasons, causes for setback
 - Common ones: interpersonal stress, transitions (positive or negative; may cause feeling of loss of control), major life events, deaths, gender identity confusion, trauma
 - Discussing trauma in therapy: can lead to slip/lapse due to emotional distress/anxiety it can provoke

STUMBLING BLOCKS IN RECOVERY:

1). SLIP: thought—but not an action—related to the ED. More than return to thinking about ED or contemplating engaging in a behavior; originates in irrational, ED mind, closely related to actively participating in ED behavior (e.g., don't want to eat that, will get fat, better start cutting down or I'm eating too much, don't know how to stop, am fat anyway so what's the difference if eat it all)

-very common occurrences

-must be able to accept imperfections

-most important part is not to allow behavior to continue or see self as a failure; irrational mind can lead to irrational behaviors.

2). LAPSE: obsessive thoughts and engaging in ED behavior, but in a limited way.

Experience is brief, shorter, less severe (example: B/P over a few days but then stop, or purchase binge foods that lead to purging behavior). Short-term behavior that don't mean return to recurrent to ED behavior. Important to recognize that this is common.

-need to process feelings, and identify what triggers key emotions

-accept that the lapse happened, is not a sign of failure, almost always quick and short-lived, need to allow self-forgiveness, figure out how to get over lapse and what worked and what didn't, and how to use experience to get back on wellness path.

3). RELAPSE: ED behavior returns on regular basis, and perhaps to full intensity

-often triggered by significant changes or transitions or internal events (depression, ED recovery)

~proneness: more often relapse occurs, more likely it is to happen again

~important to change learned pattern of recovery/relapse; people may get fearful of making changes in any direction due to worry that it will provoke a relapse

4). COLLAPSE: full-blown return of ED; no longer interested in wellness, are fully in ED identity. More common in people who've had illness for a long time