



Communicating with Individuals with Eating Disorders: Guidelines for Healthcare Providers

Eating disorders by definition distort an individual's relationship with food, eating, body size, and weight. This distortion extends to communication regarding food, eating and bodies as well. Comments that might seem innocuous in the general population can be interpreted as criticism, judgment, or advice, even when not intended that way.

Therefore when working with an individual with an eating disorder, iaedp recommends using weight-neutral and non-judgmental language about food and eating in conversation.

Specific guidelines and examples are below.

1. Do not comment on a patient's appearance, even when intended as a compliment or expression of concern.

No: "You look great!" and "You look healthier." (Can be misinterpreted as "I've gained weight," and puts too much focus on appearance.

No: "You've lost weight." (Can be misinterpreted as "I'm doing a great job!" or "All you care about is my weight. That is the only thing that gives me value as a person."

Yes: "I'm glad to see you."

2. When conveying weight-related issues in a medical or therapeutic context, provide information neutrally without judgment. Weight changes should be presented as a side effect of illness/recovery, not the illness itself.

No: "I'm very disappointed that you have lost weight again."

No: "Your weight is still going down/up. You must not be following the plan."

No: "Why aren't you gaining weight? Can't you see that you're going to die?"

Yes: "Let's talk about your eating."

Yes: "I've noticed a change in your weight. I wonder if that's a natural fluctuation or if it's related to something medical or nutritional. What's your point of view?"

The only exception is when used for specific therapeutic intervention, such as "We both know your weight has declined to a dangerous level, however you don't appear to be concerned. Can you help me understand your thinking?"

3. *When discussing food or eating and eating behaviors, use non-judgmental language.*

No: "When you eat, you pick apart your sandwich. That's gross and offends others at the table"

Yes: "I noticed that you ate your sandwich in a way that I've never observed before. Can you tell me about that? /Have you always done it that way?"

4. *Do not offer generic eating advice or bring your own eating or dieting topics into the conversation.*

No: "I wish I could lose weight like you have."

No: "You can eat whatever you want now because you have to gain weight. I would love to have to do that!"

No: "It is just a matter of pushing away from the table when you are full."

No: "It's great that you are avoiding sweets, they're bad for you anyway."

No: "Grapes are good for you, you should eat more of them."

No: "Carrots have too much sugar. You should eat leafy greens instead."

No: "If you're trying to lose weight, just cut out carbs."

Nutrition advice of any kind should be conveyed by the dietitian.

**Nutrition/Health Management Committee
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