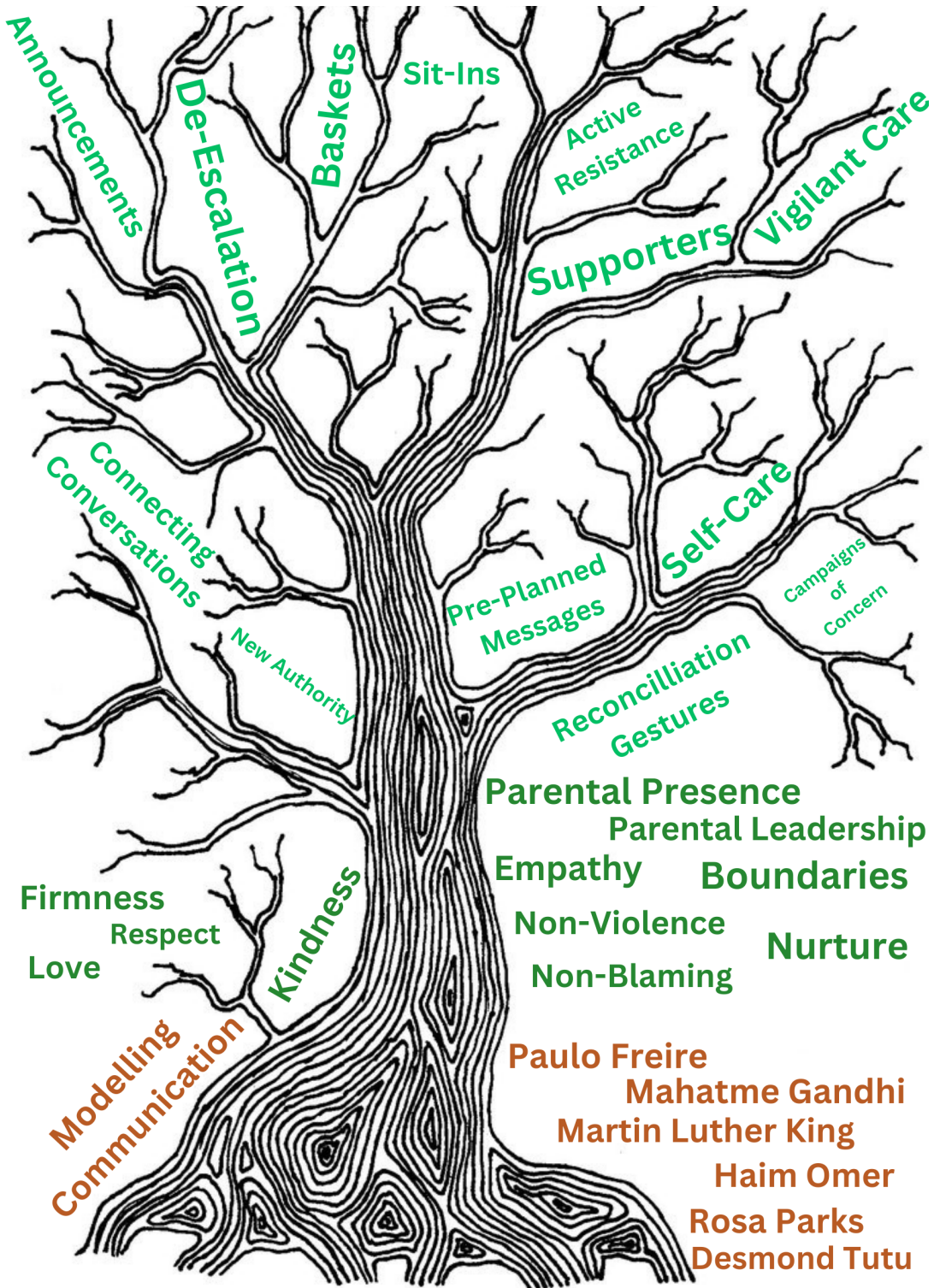





NON-VIOLENT RESISTANCE & EATING DISORDERS




<p>Self Control - avoid engaging in escalatory conflicts, e.g. by not responding immediately.</p> <p>Delayed reaction minimises the risk of escalation.</p> 	<h2 style="text-align: center;">Hostility Engenders Hostility</h2> 	<p>Reciprocal escalation – each feels the other is in the wrong.</p> <p>Examples, criticism, hostility, blaming, nagging. Creates resistance.</p> <p>Young person/Eating Disorder Bully digs their heels in.</p>
<p>De-escalation strategy – ‘striking when the iron is cold,’</p> <p>i.e. engaging in conversation about the eating disorder when your child is calm.</p>	<p>Conflict, hostility, criticism can maintain the eating disorder. Eating disorders can be a way of a young person seeking control in their lives and can worsen at times of stress.</p>	<p>Complementary escalation – when the conflict continues to escalate parents often submit/give-in. The young person learns that if they escalate enough, parents will give in.</p>
<p>De-escalation strategy – planning in advance how you will respond to your child e.g. if they are refusing to eat/follow the meal plan in order to avoid immediate reactivity.</p>	<p>De-escalation strategy - active listening, i.e. paying close attention to what your child is saying – sometimes feeling heard can diffuse a difficult situation.</p> <p>Empathise – show genuine concern for their feelings. Ask open ended questions to further explore how your child is feeling. Give choices within limits to help your child to feel they have some control/autonomy.</p> <p>Discuss choice options relating to food and exercise with your child’s Eating Disorder Team but do not accommodate your child’s eating disorder rules in relation to particular foods, e.g. low fat/calorie.</p>	<p>Complementary escalation and eating disorders – may mean accommodating the eating disorder, e.g. buying your child the food they want to eat such as low-fat foods, letting them take control of the cooking, providing constant reassurance about weight and shape – all of which maintain and fuel the eating disorder.</p>
<p>De-escalation strategies</p> <p>Staying calm Staying silent Walking away when your child starts to argue. Having pre-planned messages to avoid reacting immediately.</p>	<p>De-escalation strategies - Taking a magnifying glass approach to finding small steps forward to recovery.</p> <p>Acknowledge that having an eating disorder is difficult, but reminding them of progress achieved and also of their longer-term life goals. This is important as the eating disorder can become a child’s identity over time, and they can find it difficult to know who they are with out it.</p>	<p>De-escalation strategies does not mean letting your child away with things, but about continuing to persist in their child’s journey to the goal of recovery, including following meal plan plans and other advices given by your child’s Eating Disorder Team.</p>

Reconciliation Gestures - Reconnecting with your Child

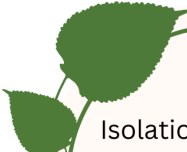


Reconciliation gestures aim to help re-build the loving parent – child relationship that may have become lost under the weight of your child’s difficult and challenging attitudes related to their eating disorder, which can lead to the positive aspects of the relationship disappearing and conflict being all that remains.



Reconciliation gestures allow for hostility to be replaced with affection. Reconciliation gestures can help a parent connect positively with their child outside of mealtimes, so that the eating disorder does not become the whole focus of their relationship.




Non-Violent Resistance and Support



Support is vital for families and their loved ones who are recovering from an eating disorder. Isolation will provide an opportunity for their eating disorder to thrive. Those with eating disorders can stay at home, restrict, exercise and avoid social eating – without having to explain any of their behaviours. Eating disorders thrive in secrecy but recovery flourishes in community.



NVR emphasises the need for parents to have support in dealing with difficulties their child may encounter. A support network is empowering for parents. It validates the steps they are putting in place to ensure their child’s recovery and makes transparent what needs to happen for recovery, thus countering the eating disorders push for isolation and secrecy. Your child’s Eating Disorder Team may be your main support and source of information, but grandparents, parents’ siblings, friends etc. can also be sources of practical and emotional support in recovering. NVR suggests that mounting a campaign of concern can be very helpful,
i.e. where extended family and friends intermittently contact your child by text, internet, phone, cards your child with supportive messages that they are there to support your child in standing up to the eating disorder bully.



Four Types of Relational Gestures

Shared activities / Quality Time

Regular contact has been shown to increase parental presence as it creates a stronger emotional bond, and leads a child to have a positive mental image of their parent, where their parent is seen as stronger than the eating disorder in the child's mind. Presence is also about parents getting back in their leadership role and taking the recommended actions for recovery despite the protestations of their child, whilst also being transparent and announcing to their child the actions for recovery that they will be taking.

So, it is important to re-establish quality time if this has been lost and enjoying the relationship you have with your child without the entire focus being on the eating disorder.

For example, what did you and your child enjoy doing together before the eating disorder, e.g. watching a favourite TV show, cooking together, going to a local theme park, the cinema, or to a favourite coffee shop?

Connecting Gestures

When there are problems, over time, many parents and children spend much of their time avoiding each other for fear of arguments and disagreements and they lose their connection and sense of trust, which makes it difficult to rebuild their relationship.

Connecting gestures are small gestures (also called acts of kindness) that show you care for your child no matter how difficult things get.

They are not rewards for good behaviour, they are offered despite problematic behaviour. They are given to help you re-connect to your child.

They should be small and regular, not expensive or occasional, e.g. a text during the day if they are still attending school, bringing home their favourite take-away coffee once a week, spending time watching their favourite TV show with them, showing interest in and offering to join them in online gaming.

Connecting time is for connecting only with no critical comments allowed.

Connecting Comments (Non-Violence in Speech and Action)

These are pre-planned connecting statements that help connections between you and your child to become re-established using **the three Ts**.

Timing (when to talk). Tone (how to talk). Talk (what to say).

Time to talk – Strike when the iron is cold. Talk when you and you and your child are calm.

Tone – Transmits emotion and influences how people perceive you. It can also reveal attitude and intention. A warm tone can convey happiness and enthusiasm. A harsh and sarcastic tone can convey anger or frustration.

Talk – What to say - Planned appreciation or praise comments are powerful conversational tools to build connection and presence with your child, for example, appreciative comments that are descriptive and specific about the positive behaviour e.g. “I appreciate your effort to finish the lunch I prepared for you,” rather than “Well done, I am proud of you.” Low key or subtle appreciative comments, rather than enthusiastic or elaborate comments e.g. – “You made some good efforts this week with your meal plan” rather than “That was absolutely wonderful/amazing.”

Take **an imaginary magnifying glass** to what your child is doing well, and what is working well in his/her recovery from their eating disorder. **The smallest successes towards recovery count**. This can help to identify strengths and positive attributes in your child that can help them in overcoming their eating disorder.

Delayed compliments/positive comments can also be very helpful in showing your child that you are noticing their efforts, e.g. ‘I noticed what a determined effort you made to eat at the restaurant on Saturday.’

Connecting comments if practiced regularly, help to shift stuck patterns of negativity and criticisms that can take hold in many families when there are long-term challenges such as may present when your child has an eating disorder. with children.



Reflective Listening

Emotional dysregulation, or difficulties in managing and regulating emotions, is often a key factor in the development or sustainment of an eating disorder.

Those with eating disorders frequently struggle with overwhelming emotions such as anxiety, anger, sadness, depression, and low self-esteem. The physiological impact of disordered eating can further exacerbate emotional dysregulation.

Eating disorders then may be used as a way of seeking relief from difficult emotions or as a way of feeling some sense of control over them.

Reflective listening involves putting feelings into words. In reflective listening, your aim is to help your child understand their feelings better without passing any judgement on their feelings. It is a way of listening that allows a child to talk without interruption for a few minutes. It is not about offering solutions but showing interest in a quiet and attentive way. Reflective listening builds trust and connection.

□ Hearing their emotions put into words by an adult helps children feel safe, supported and valued. It validates their emotions and let them know that their feelings are okay and understandable.

□ It can be very validating for children to feel heard by adults especially when they are asking a child to follow rules they don't always like. Reflective listening can demonstrate that you have a strong, caring bond, even when you disagree.

□ Try to choose descriptive, specific words, e.g. lonely, hurt, scared, frustrated, proud, brave etc to help children understand the nuances of their feelings.

□ Learning to separate themselves from their feelings – while exploring emotions, try to use “You feel!” phrases instead of “You are” phrases.

Watch out for non-verbal cues – It's not always easy to identify emotions from behaviour or words. Pay close attention to body language, facial expressions, context, and gestures

Self-Care - *Recovering from eating disorders are a marathon and not a sprint. The burden of caring for someone with an eating disorder can be high.*

Worried

I feel so stressed

I'm afraid my child might die

I feel depressed

So many conflicts over food

It's traumatising for all of us



Having a child or teen in eating disorder treatment is one of the most difficult things a parent can experience.

Children with eating disorders need more attention and support than usual, but as a caregiver, it is important to also care for yourself.

This will help you be a present and helpful ally on the journey to eating disorder recovery.

It basically means looking after yourself in a good enough way and then having enough energy to look after others.

‘You cannot pour from an empty cup’



Self-care is important as severely stressed parents tend to:

1. Overreact to MBIs (minor but irritating behaviours).
2. Praise less and criticise more.
3. Interpret a child’s behaviour through a negative lens, rather than considering what needs might be behind the child’s behaviour.
4. Experience compassion fatigue and burnout.

Examples of Self Care:

Talking with supportive friends	Getting enough rest
Eating well	Exercising
Attending an eating disorders support group	Coffee with a friend
Time on your own away from caring responsibilities	Journalling

Reading a good book

Spending time in nature

Self Care - an important question

‘What do I most enjoy doing?’

For more information on NVR contact: NVR UK

<https://nonviolentresistance.org.uk>

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