

# The Family Meal – A Guide for Families and Clinicians

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## Purpose of the Family Meal

- Usually the second session in treatment.
- Helps transition care to the allocated therapist.
- Builds therapeutic alliance through shared experience.

## Key Aims

- Observe real-time family dynamics around food.
- Identify positive deviations from patterns of failure.
- Focus on meal process, not just food intake.

## Expectations

- Not about forcing the child to eat.
- Encourages trying new strategies.
- Parents should accept that some attempts may not work immediately.
- Every meal is a learning opportunity.

## Session Setup

- Therapist prepares the room (table, cutlery, water).
- Parents bring food for all; child brings meal plan food if applicable.
- Therapist sets clear rules and time expectations (e.g., 90-minute session, 60 minutes for eating).

## Therapist Role

- Does not eat or sit at the table.
- Observes and guides family interactions.
- Highlights small successes and reinforces parental roles.
- Uses distraction techniques to reduce focus on eating.

## Team Involvement

- At least one other team member present (in-room or behind a screen).
- Team offers reflections after the meal to support family processing.

## Post-Meal Reflection

- Discuss what worked and what didn't.
- Explore family strengths and unique outcomes.
- Use circular questioning to uncover interaction patterns.

## Sample Questions

- How did you decide what to bring today?
- Is this what normally happens at home?
- Do you eat together as a family?

## Observational Techniques

- Direct observation of verbal and non-verbal communication.
- Highlight stuck patterns and suggest adaptive changes.

## Encouraging Change

- Reinforce helpful behaviours: "You're doing great—do more of that."
- Support distraction strategies: "I noticed your mum helps by talking about other things—keep doing that."

## Possible Pitfalls and Learning Outcomes

### Possible Pitfalls

- Forgotten or insufficient food: Therapist guides parents to bring appropriate food.
- Escalation during the meal: Therapist maintains calm boundaries and intervenes appropriately.
- Time overrun: Must leave time for reflection and feedback.
- Missed reflective opportunities: Important to explore strengths and unique outcomes.

### Learning Outcomes

#### a. Parents Try Hard and the Child Eats

- Reflect on family strengths and relationships.
- Build a new narrative of capability and resilience.
- Explore how these strengths can support future challenges.

#### b. Parents Try Hard and the Child Does Not Eat

- Focus on parental effort and commitment.
- Identify strategies to try again.
- Assess clinical risk and consider hospital admission or increased monitoring if needed.

**c. Child Eats Without Parental Prompting**

- Assess whether this is typical or new behaviour.
- Explore motivations and family influence.
- Use as a unique outcome to build on.

**d. Parents Don't Try and Child Doesn't Eat**

- Explore barriers to parental action.
- Assess risk and need for escalation.
- Discuss therapeutic alliance and consequences of inaction.