

# 20 GUIDELINES FOR FAMILIES

What to do and not do when reaching out to a struggling loved one



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CENTERS FOR EATING DISORDERS

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**D**ear Friends,

Rosewood's comprehensive family program includes an intensive "family week," which is designed to assist

patients and their family members in becoming more aware of the dynamics of eating disorders operating within a family system. Family week participants learn to share thoughts and feelings with each other in a non-judgmental way, to understand how family systems operate, particularly in relation to an eating disorder, and how eating disorders, addictions, and other disorders negatively impact communication.

Our experience shows that when families work together in support of one another, dysfunctional patterns and cycles can be broken and inter-generational patterns can be arrested. Individual family members are supported in making decisions on how to change these patterns into healthier interactions.

In order to help families better support one another, we have compiled this guide with twenty guidelines designed to foster productive communication.

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Please feel free to copy, print, or electronically distribute these handouts as you see fit, including bulletin boards, emails, discussion forums, at meetings, or in the class room.

**GET THE ELECTRONIC VERSION OF THIS GUIDE AT**  
[RosewoodTempe.com/Working-With-Family/](http://RosewoodTempe.com/Working-With-Family/)



# 20 GUIDELINES FOR REACHING OUT

## 1. LEARN ABOUT EATING DISORDERS

Learn as much about eating disorders as you can. Include information on treatment options. Educate yourself. Take a proactive role in dealing with your loved one's illness. There are resources for you to learn about eating disorders, related family dynamics, and the recovery process. Sometimes decisions you would make intuitively are not therapeutic. You need to learn how to support your loved one while not enabling his/her disorder. Attending a support group or participating in treatment also shows that you are willing to face the problem and model healthy behavior.



## 2. DEVELOP A SUPPORT NETWORK

Learn about and develop a support network where you can talk openly about your feelings and frustrations, where you can develop a plan of action to deal with the eating disorder. Locate your chapter of National Eating Disorders Association.



## 3. TALK TO THE PERSON STRUGGLING WITH AN ED

Talk directly to the person with the eating disorder about treatment options and programs. Offer to go with them to talk to a professional about your concerns.



## 4. SHARE INFORMATION WITH THE PERSON

Offer information to the person about eating disorder treatment options and programs. Offer to go with them to talk to a professional about your concerns.



## 5. BE SENSITIVE, BUT FIRM

Be sensitive, but be firm. Listen to your loved one with understanding, respect, and sensitivity. Learn to communicate in a clear and kind manner. Express affection openly and honestly. Do not spend all of your time with the eating disordered person. This will only encourage him/her to be more dependent on you.



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## 6. HONOR THE PERSON'S PRIVACY

Do not discuss the issues with others, unless the person with the eating disorder has given you permission. But do encourage other concerned individuals to speak with the person with the eating disorder.

## 7. BE OBJECTIVE

Try to be objective, calm, and caring in discussing the individual's behaviors that concern you. Avoid offering simple solutions to the person like "eat and you'll feel better." Or "don't throw up anymore." If it were that simple, there wouldn't be a problem. Do not try to control the disordered eating behavior. You can't make it stop. Threatening, punishing, blaming, or monitoring will only lead the person to become more secretive. Eating disorders are an attempt to solve unseen emotional issues.

## 8. DO NOT COMMENT ON WEIGHT GAIN OR LOSS

When you see your resident for the first time since entering treatment, please be aware that body image issues are often part of the ED. Do not make comments about apparent weight gain or loss. Comments on anyone's weight or appearance reinforce the cultural pressure to be thin at all costs. Rather than focusing on outward appearance, learn to notice and appreciate his/her personality, thoughts, opinions, and inner feelings. The eating disordered person needs to value all aspects of himself/herself and tune-in to an inner sense of self rather than continue to rely on external measures for self esteem.

## 9. GET NEEDED MEDICAL CARE

If a person is in acute medical danger, or when dealing with minors, you must exercise responsibility and authority. Trying to CONVINCED them they need treatment may not be an option.

## 10. TRY TO MAINTAIN NORMALCY

Try to maintain as normal and healthy a lifestyle as possible. It's important for you and the person with the eating disorder not to structure your life around the eating disorder.



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## 11. DON'T ALLOW UNNECESSARY DISRUPTIONS

As much as possible, try not to allow your life to be disrupted by discussions (arguments, threats, bribes, guilt, or blame) concerning issues of weight, eating, and food. Do not buy food solely to satisfy the eating disorder person nor allow him/her to dictate menus or mealtimes. Household chores involving food should be negotiated.



## 12. ENCOURAGE THE PERSON TO TAKE RESPONSIBILITY

Encourage the person with the eating disorder to take responsibility. Allow them to participate in treatment decisions. Don't shield the person from the consequences of having an eating disorder. Seek consultation from a qualified professional. The prognosis for recovery is always better when the eating disorder is identified early. Be certain to see a professional that specializes in the treatment of eating disorders. If your loved one has weight loss, vomits, abuses laxatives, or has any physical complaints, he/she should see a physician.



## 13. BE PATIENT

Try to stay patient. The physical, psychological, behavioral, social, and cultural rehabilitation of a person with an eating disorder takes time.



## 14. DON'T BLAME YOURSELF

Remember there is no single cause for an individual's eating disorder. Don't blame yourself. Your job is to be supportive. Looking for reasons and blaming the past is counterproductive. Blame only hinders the healing process, making the eating disordered person even more guilty and ashamed. Eating disorders are very complicated and causes are always a combination of individual, family, and cultural factors.



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## 15. SHARE YOUR FEELINGS

Share your thoughts, feelings, frustrations (without discussing the person) with others who are involved. Also talk directly to the person with the eating disorder without laying guilt or blame. Admit that you sometimes feel angry, frustrated, helpless, or afraid. Showing these feelings gives the struggling person permission to feel and express their own pain, frustration, fear, loneliness, etc. Realize the importance of patience and that recovery is a gradual process.



## 16. BE A GOOD ROLE MODEL

Be a good role model around food and when discussing food or weight related issues.



## 17. TAKE CARE OF YOURSELF

Take care of your own social and emotional needs. If you are exhausted (emotionally or physically), you won't be able to provide much emotional support.



## 18. BE COMPASSIONATE, YET FIRM

Compassion does not mean being manipulated by the person. Require that the person be responsible for his/her behavior and deal with the consequences of it. Don't be afraid to upset him/her. He/she needs to learn to deal with frustration, disappointment, and anger. Avoid urges to protect the person from the natural consequences of his/her behavior. Pain caused by consequences may be necessary for recovery.



## 19. HONOR THE PERSON'S HUMANITY

Remember the person has an eating disorder, but don't let the person's identity get too wrapped up on that. Refrain from speaking of "the anorexic" or "the bulimic."

## 20. READ THE FAMILY INTERVENTION HANDOUT

Suspect an eating disorder but not sure what to do? Download "10 Eating Disorder Intervention Tips To Help Families Reach Out to a Struggling Loved One." Share this handout with clients too!

# MEET THE WRITER

## BILLIE CHURCH, MC, LPC

### Family Therapist

As the family therapist, Billie facilitates the Family Week Program for the adult and adolescent patients of Rosewood. Billie is responsible for implementing the intensive five day family program, which includes educational lectures as well as intensive communication exercises. Billie believes that family involvement is key to the healing and recovery process for our patients. Billie joined Rosewood with over nineteen years experience working with individuals, families, children/adolescents, and adults.



"Rosewood's Family Week Program not only touches the patients and family members but also touches me personally. I am fortunate in this position as family therapist to witness and take part in growth, forgiveness, and the recovery journey every week."

~Billie Church, MC, LPC, Family Therapist

“I went to family week and worked out my deepest family secrets; our problems weren't completely fixed but I started calling my parents again. I did many family sessions with my therapist and my family got more educated on how to support me. My body became more used to normal eating. Although it wasn't a summer camp, I had some relaxing activities such as pool, tai chi, yoga, ropes, and walks. I stayed for 47 days and it was quite a journey!. - Alaine C., Rosewood Alumni

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