



Restoring sDOR in Eating Disorder Care

sDOR Transition Stages	sDOR Concepts	Eating Competence Factors
Early	Whether and How Much (with high level support)	Eating Attitude Contextual
MID-I	Whether and How Much (with high level support)	Eating Attitude Contextual Internal Regulation
MID-II	Whether and How Much (with low level support)	Eating Attitude Contextual Internal Regulation Food Acceptance
Late	sDOR Whether and How Much	Eating Attitude Contextual Internal Regulation Food Acceptance

Eating Attitude: Positive eating attitude is nurtured when caregiver provides meals and snacks consistent with pre diagnosis routines. Food is offered in a non-judgmental way. Previously accepted foods are re-introduced.

Contextual: The structure of meals and snacks offers a reference for future autonomy of taking care of oneself with food by prioritizing making time to plan, prepare and eat. Context is closely tied to internal regulation by offering consistency and predictability of developing hunger. In later treatment stages the structure supports flexibility in amounts eaten at any given meal/snack time.

Internal Regulation: Closely tied to context, internal regulations supports getting enough to eat. In MID-I stage it is introduced by actively allowing child to have more of anything served to allow some flexibility in intake at any given meal/snack depending on their hunger or appetite (what tastes good to them). They are not allowed to eat less given risk for regression in treatment sequence. In MID-II stage, child is allowed to increase frequency of plating for themselves with natural ebbs and flows of intake by volume. Corrections are made less frequently and typically limited to times that a pattern is noted by caregiver, thus allowing for child to “correct” mistakes with how much or little they eat at any given meal/snack.

Food Acceptance: Supported by FBT and in the EC Contextual skill factor, in accessing shared meals with family foods and incorporating previously accepted foods. Foods are offered in a non-judgmental way so that child is given permission to like and accept value of all foods. Presents most typically in MID-II and Late stage supported by internal regulation; when getting enough to eat, requesting certain foods or asking for different foods or requesting more variety become more frequent.