



# Evaluation Rubric

Programming and Materials Consistent  
with fdSatter and ecSatter

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Evidence supports using the Satter models as the foundation for nutrition education, counseling, and medical nutrition therapy. That evidence indicates that the Satter Eating Competence Model (ecSatter) is associated with dietary quality and positive health parameters. Even though ecSatter says nothing at all about what or how much to eat or what to weigh, adults who are eating competent—who score above the cutoff point on ecSI 2.0—have better diets, more-effective food-management skills, the same or lower BMIs, superior metabolic profiles, more-positive quality of life indicators, and better oral health.<sup>1</sup> Parents who are eating competent do better with respect to following sDOR and experience lower stress levels. Children whose parents follow sDOR have lower nutritional risk.<sup>2</sup>

ecSatter and the Satter Feeding Dynamics Model (fdSatter) are based on trust in adults and children to act on their own behalf, naturally learn and grow, and bring themselves along to the best of their ability with nutrition and food selection.<sup>3</sup> Because the Satter models are grounded in the trust paradigm, they are fundamentally different from prevailing control paradigm approaches—nutrition policy, programming, and materials. Both ecSatter and fdSatter emphasize providing structured food availability, then trusting the utility and effectiveness of biopsychosocial processes to guide what and how much to eat and what to weigh. Those processes are hunger and the drive to survive, appetite and the need for pleasure, the social reward of sharing food, and the biological propensity to maintain preferred and stable body weight. Prevailing control paradigm approaches give guidance on what and how much to eat and how much to weigh. Achieving such stated outcomes requires ignoring and overruling biopsychosocial processes.

### **The Satter models, how they are operationalized, and how they are tested**

- ecSatter<sup>4</sup> has a validated inventory, ecSI 2.0,<sup>5</sup> and is implemented with Becoming Eating Competent (sBEC): the Joy of Eating.<sup>6</sup>
- fdSatter<sup>7, 8</sup> is implemented with the Satter Division of Responsibility in Feeding (sDOR).<sup>9</sup> Parent adherence to sDOR can be measured with the validated inventory, sDOR.2-6y.<sup>2</sup>

### **The purpose of this rubric**

This document is intended to help you, the educator and/or practitioner, do fidelity assessment: to determine whether you are applying fdSatter and ecSatter as originally defined. You and your audience can experience the freedom and creativity of practicing based on ecSatter and fdSatter and thereby get the best ecSI 2.0 and sDOR.2-6y scores. However, the Satter models are nuanced and contrary to prevailing thought and control paradigm content is insidious. It is all too easy to let control-paradigm content creep in, and that content dilutes, distorts, and blocks the effectiveness of fdSatter and ecSatter.<sup>10</sup> To achieve a positive outcome, your materials and programming: 1) Must be consistent with the Satter models and 2) Not add on anything not contained in the models or take anything away.



Use this rubric to help you consider whether you have conveyed the principles that 1) Healthful eating is based on enjoyment, comfort, and relaxation, as well as self, food, and body acceptance; and that 2) Raising children to be eating competent preserves their inborn positive attitudes and capabilities with eating. It supports their stage-appropriate development of positive eating attitudes and behaviors, and lays the foundation for lifelong eating habits that are healthful, composed, consistent, and rewarding.<sup>11</sup>

### Take a trusting approach

The nutrition educator/clinician's role is to collaborate with their audience in finding their own practical and rewarding ways of managing food, eating, and feeding.<sup>12 13</sup> "When the joy goes out of eating, nutrition suffers."<sup>14</sup> A shorthand way of distinguishing trust-based from control-based content is to examine intent: Is the intent of the material or intervention to cultivate and support positive eating attitudes and behaviors? That is, does programming support enjoyment of food, eating, and family meals; comfort with being around unfamiliar food; and going by feelings of hunger and fullness to know how much to eat? Or does programming try to get the individual to eat certain amounts and/or types of food? Even when the latter is subtle and indirect and gives lip service to enjoyment, it is still control paradigm.

- Reflect on your attitudes: Do you trust your target audience or clients to bring themselves along to the best of their ability with respect to their nutrition and food attitudes and behaviors? Or do you feel obligated to motivate them and/or try to *get* them and/or their children—even indirectly or covertly—to eat certain foods in certain amounts or achieve a particular BMI? The former is trust; the latter is control.
- Consider checking your understanding of ecSatter, sBEC, fdSatter, and sDOR with [ESI continuing education exams](#).
- Consider deepening your understanding and expertise of Satter-model principles and intervention with ESI [advanced training](#).
- Examine your resources and programming using the checklists below. Have you included Satter-model-consistent key messages? Have you avoided messages that are contradictory to the models?

### NUTRITION EDUCATION FOR ADULTS

ecSatter provides guidance for building positive attitudes and behaviors which in turn allows individuals to do well nutritionally. Eating competent individuals are matter-of-fact and reliable about getting enough to eat of food they find enjoyable. ecSatter dignifies eating, encourages making eating important, and supports being positive, comfortable and flexible with eating. According to ecSatter,<sup>4</sup> Competent eaters have:

- 1) Positive **attitudes** about eating and about food.
- 2) Skills and resources for managing the food **context**, including finances, and orchestrating family meals.
- 3) **Food acceptance** skills that allow taking a positive interest in food and therefore eating an

ever-increasing variety of the available food.

- 4) **Internal regulation** skills that allow instinctively consuming enough food to give energy and stamina and support stable body weight.

The goal with ecSatter- and fdSatter-based nutrition education is to enhance the individual's eating competence. *Period.* Based on that eating competence, the individuals' nutritional, psychosocial, and medical wellbeing mature on their own. At the same time, having enough to eat at regular meals and snacks, combined with the natural drive for order and variety, support moderation in consuming foods deemed "healthy" and moderation in consuming foods deemed "unhealthy," including ultra processed and other foods high in fat, sugar, salt.<sup>3</sup>

Both ecSatter and fdSatter maintain a positive tension between routine and trust:

- The routine of structured meals and snacks and giving time and attention to eating.
- The permission to eat preferred foods in satisfying amounts.

#### **ecSatter-based nutrition education for adults**

- ☐ Stresses the practical task of getting fed.
- ☐ Assesses and builds food-management skills that consider the values, resources, and capabilities of the individual.
- ☐ Works toward individually defined routines for eating that are intrinsically reinforcing.

#### **Attitudes**

- ☐ Endorses food and eating enjoyment.
- ☐ Emphasizes relaxation and comfort with eating.
- ☐ Endorses the individual's eating food that they *enjoy*, not what they *want to* or *should* enjoy.
- ☐ Emphasizes self-trust with respect to what and how much to eat.

#### **Context**

- ☐ Prioritizes structured sit-down meals and sit-down snacks as needed.
- ☐ Emphasizes having food the individual finds rewarding to plan, procure, prepare, and eat.
- ☐ Uses neutral language to discuss food: "low-calorie," "high-sugar," "low-fat," "high-fiber" as descriptors. Avoids value judgments such as "good" or "bad," or "healthy" or "unhealthy."
- ☐ Defines meals as sitting together sharing the same food. Starts where the individual is with respect to building the meal habit.
- ☐ Dignifies individuals' own food traditions and preferences. Joins with them in considering familiar, rewarding, and enjoyable food: food they prefer and find accessible.
- ☐ Teaches food groups only to provide categories to support individual meal- and snack-planning; gives permission for as individually determined helpings and helping sizes.
- ☐ Enhances mealtime importance by making food taste good: Use salt, sugar, fat, and other seasonings.
- ☐ Uses the Satter Hierarchy of Food Needs<sup>7</sup> to guide particular attention to the needs of



individuals experiencing food insecurity. Emphasizes including fat and sugar to get enough calories rather than following the low-fat, low-sugar, “healthy eating pattern.”

- ❑ Waits to be asked to offer strategic collaboration with respect to budgeting, planning, purchasing, storage, and cooking.

### **Food Acceptance**

- ❑ Gives strong permission to eat food the individual finds rewarding to plan, procure, prepare, and eat.
- ❑ Emphasizes food *seeking* rather than food *avoidance*.
- ❑ Endorses the individual’s own food traditions and preferences.
- ❑ Stresses trusting appetite to eat what appeals at any sit-down meal or snack.
- ❑ Frames all food positively; avoids making value judgments about *any* food.
- ❑ Trusts the Satter Hierarchy of Food Needs<sup>3</sup> to help individuals achieve nutritional quality based on genuine food enjoyment. People first need food security based on the worthiness of their own food, then they plan, then they take an interest in novel food.
- ❑ Emphasizes experiential programming: Support enjoyment of new foods with repeated neutral food exposure.
- ❑ Dignifies using fat, salt, and sugar to make food rewarding and satisfying.
- ❑ Depends on the structure and variety that go along with and grow out of eating competence to moderate fat, salt, and sugar intake.
- ❑ Identifies but doesn’t emphasize the nutritional value of preferred food.
- ❑ Is sparing with theoretical information (e.g. nutritional requirements, food composition); offers only in response to requests.

### **Internal Regulation**

- ❑ Gives strong permission to the individual to eat as much as they want: to eat until they are satisfied.
- ❑ Supports individuals in trusting their body to regulate what and how much to eat.
- ❑ Does experiential programming. Teaches positive discipline along with permission to eat (routine and trust) to support sensitivity to hunger, appetite, and satiety.
- ❑ Emphasizes getting enough to eat, including choosing regular food, not “diet” food.
- ❑ Stresses using sit-down snacks between meals to allow being hungry but not famished at mealtime.
- ❑ Stresses saving hunger and appetite for meal- and snack-time by avoiding munching and sipping (except for water) between times.
- ❑ Stresses letting body weight/BMI be what it will in response to genetics as well as to eating competence and sustainable activity.

### **Approaches to adult nutrition education/intervention that are *inconsistent* with ecSatter**

- ❑ Emphasizing the consumption of certain foods, such as fruits and vegetables, whole-grain or low-fat, low-sugar, low-salt food. Individuals are likely to become more interested in eating these foods as they move through the Hierarchy of Food Needs<sup>3</sup> and increasingly develop eating competence.

- ☐ Emphasizing avoidance of certain foods, such as sweets, high-fat foods, high-salt foods, or fast food. Restriction exaggerates food appeal and hinders eating based on hunger and appetite.
- ☐ Directly or indirectly teaching numbers of servings from food groups or portion sizes.
- ☐ Teaching target weights or target BMIs.
- ☐ Prescribing food-selection standards; applying external motivation to promote adhering to those standards.
- ☐ Introducing food rules or emphasizing “shoulds” rather than “wants.”
- ☐ Categorizing foods as good or bad; better and worse; healthy or unhealthy.
- ☐ Teaching the presumed health benefits or health consequence of eating certain foods.
- ☐ Characterizing certain individuals as incapable of regulating food intake and bodyweight.

### NUTRITION EDUCATION FOR PARENTS

sDOR implements *fdSatter*. It provides parents and other adults with feeding guidance; it does not target children with information or expectations about what and/or how much to eat. Instead, sDOR provides children with repeated neutral exposure to food.<sup>15-18</sup> Repeated *neutral* exposure is *not* the same as repeated *positive* exposure: The latter contains the element of positive reinforcement, such as praise or encouragement and is therefore inconsistent with sDOR. Being able to follow sDOR is grounded in 1) Parents’ trust in their own food acceptance and food regulation abilities; 2) Parents’ understanding of normal child development, including growth, and 3) Parents’ understanding of and trust in children’s behavioral, nutritional, psychosocial, oral-motor, and physical competence. sDOR encourages parents to maintain a positive tension between taking leadership with feeding and giving children autonomy with eating. Having enough to eat at regular meals and snacks, combined with children’s natural drive for mastery, support their nutritional status.<sup>3</sup> Including preferred food, including ultra processed and other foods high in fat, sugar, salt, moderates the appeal of those foods and makes it unnecessary for children to sneak to get them and binge when they do. sDOR is authoritative parenting as it relates to feeding. Throughout children’s growing-up years, authoritative parents are warm and supportive and maintain a balance between taking leadership with feeding on the one hand and giving children autonomy with eating on the other.<sup>19</sup> Briefly, here is the stage-appropriate application of sDOR:

- **Infants being nipple-fed.** The parent does the *what* of feeding, then feeds on demand. sDOR supports the infant in being calm and organized by understanding their sleep cycles and depending on information coming from them to determine how often, how much, at what tempo, and at what level of skill.<sup>20</sup>
- **Babies making the transition to family food.** Parents are still responsible for *what* the child is offered to eat, and they are becoming responsible for *when* and *where*. The child is still and always responsible for *how much* and *whether* they eat.<sup>21</sup>
- **Toddlers and preschoolers.** Parents depend on sDOR to stay out of feeding struggles with toddlers<sup>17</sup> and to keep from intruding on their eager-to-please preschooler’s eating.<sup>22</sup> From now on, parents are responsible for the *what*, *when*, and *where* of feeding and children continue to be responsible for the *how much* and *whether* of eating.<sup>17, 22</sup>



- **Preadolescents and adolescents.** Parents expect older children to arrive at meals on time and hungry. Parents trust older children to do their own food management at school and at friend's homes. Parents teach children independent living skills with food: to manage the *what*, *when*, and *where* for themselves. [23](#), [24](#)

Children whose parents follow sDOR have lower nutritional risk.<sup>2</sup> The goal with fdSatter/sDOR-based feeding is for children to grow up with positive eating attitudes and behaviors consistent with ecSatter. Period. It is not to get children to eat their vegetables or have BMIs that are within certain ranges. Positive, eating-competence-consistent eating attitudes and behaviors, in turn, support children's nutritional status and growth. ecSatter outcomes for children are:

- **Attitudes.** Children retain their positive feelings about food, their drive to eat, and their interest in eating.
- **Eating Context.** Children develop attitudes and skills that [allow](#) them to participate comfortably in family meals in ways that their parents expect.
- **Food Acceptance.** Children learn to enjoy food their parents and other valued adults enjoy as well as to be comfortable around unfamiliar food.
- **Internal Regulation.** Children eat as much or as little as they need to grow predictably in the way nature intended for them.

#### **ecSatter- and fdSatter-based nutrition education for parents**

- ☐ Emphasizes sDOR.
- ☐ Provides parent-focused materials and programs that address the parent's role in feeding. [25](#)
- ☐ Teaches child development as it relates to feeding: Gives accurate and concrete information identifying children's stages in eating and parents' tasks in developmentally supportive feeding.
- ☐ Teaches parents that children move themselves along to learn and grow when parents follow sDOR and thereby provide them with a positive feeding and food environment.

#### **Parent leadership**

- ☐ Teaches and supports parents in doing their tasks with feeding.
- ☐ Prioritizes regular and enjoyable family meals and sit-down snacks.
- ☐ Helps parents find their own ways of having rewarding, sustainable family meals.
- ☐ Stresses offering regular sit-down snacks with two or three food groups.
- ☐ Stresses avoiding between-times food and beverage handouts, except for water.
- ☐ Stresses being considerate without catering: Plan menus that don't limit menus to foods children readily accept but do include 1 or 2 foods family members generally eat.
- ☐ Recommends mealtime inclusion of high-fat condiments (butter, regular salad dressing, gravy) to support children's appetites and satisfy their energy needs.
- ☐ Encourages regular, unlimited availability at sit-down snacks of high-fat, high-sugar foods, such as chips, cookies and candy.
- ☐ Stresses allowing children to eat what and as much as they want from what parents offer.

### Child autonomy

- ☐ Based on parents' having done their tasks with feeding, teaches parents to trust their child to do their tasks with eating; troubleshoot interference.
- ☐ Helps parents understand normally erratic child food acceptance behaviors. Children eat many foods or a few, eat one or two foods and rarely some of everything offered. Embedded in all the variability is children's gradually—over weeks, months, or *years*—learning to enjoy the food parents eat.
- ☐ Helps parents understand normal child food regulation behaviors: Eating a little or a lot, eating more some meals and some days than others, having high or low energy needs. Embedded in all the variability is children's eating the amount they need to grow in the way that is right for them.
- ☐ Helps parents understand that children can be depended upon to grow in the way nature intended, even if weight is relatively high or low, provided weight follows a generally consistent growth trajectory.
- ☐ Raises parents' awareness of child's increasing eating competence: saying "yes please" and "no thank you," comfortably ignoring new food,
- ☐ Raises parents' awareness of how children provide themselves with repeated neutral exposure: allowing new food near their plate, then on it, then tasting and spitting out, then swallowing, then eating more—or not.

### Approaches to parent education that are *inconsistent* with ecSatter and/or fdSatter

- ☐ Expecting young children to deliberately choose to eat some foods, avoid others.
- ☐ Encouraging parents to covertly or overtly control what or how much their child eats.
- ☐ Encouraging parents to covertly or overtly try to manage their child's weight.
- ☐ Using euphemisms such as "good nutrition," "health" or "fitness" to influence parents' food provision and/or children's food acceptance or regulation.
- ☐ Encouraging parents to manipulate family menu-planning to achieve a defined weight outcome, e.g. loading menus with low-fat dairy or a lot of fruits and vegetables; avoiding foods high in fat or sugar.
- ☐ Covertly or overtly categorizing foods as "healthy" vs "unhealthy," *meals* as good vs bad (e.g. home-cooked vs fast-food).
- ☐ Covertly or overtly encouraging consumption of low-fat, low-sugar, low-sodium foods.
- ☐ Covertly or overtly encouraging or endorsing any means of attempting to manage what or how much children eat, including motivating, reasoning, forcing, bribing, coercing, nudging, applauding, rewarding, explaining, teaching, restricting, tricking, running out of food or conspicuously modeling the eating (or not-eating) certain amounts or types of food.
- ☐ Characterizing individual children or children with certain maladies, e.g. neurologically or developmentally atypical children, as being incapable of learning to enjoy a variety of food or being unable to regulate food intake and body weight.



## **NUTRITION EDUCATION FOR CHILDREN**

Children of all ages are entitled to be free from worry about eating, moving, and/or weight. At every age, sDOR supports children's nutrition education by guiding parents and other adults in providing structure with feeding and giving autonomy with eating: Children receive repeated and neutral exposure to foods. Being presented with a variety of food, meal after meal, day after day, absolutely avoiding overt or covert pressure, preserves children's natural inclination to achieve nutritional quality by learning to enjoy a variety of foods and to grow in a way that is right for them.

### **ecSatter- and fdSatter-based nutrition education**

- ☐ Maintain structure with feeding: Don't give food and beverage handouts (other than water) between meals and snack times.
- ☐ Provide children with regular and reliable access to a variety of food that is chosen by adults.
- ☐ Have trusted adults sit to eat with young children.
- ☐ Within the context of adult leadership with food management, give children autonomy with respect to determining what and how much to eat from what is offered, and even if they eat at all.
- ☐ Do menu planning that is considerate without catering: Pair familiar with unfamiliar food, enjoyed with not-yet-enjoyed foods. Having familiar foods at mealtime makes children braver about exploring unfamiliar food.
- ☐ Provide experiential learning opportunities that support children in being relaxed and curious about unfamiliar food and able to eat as much or as little as they are hungry for.
  - Give children repeated neutral exposure to unfamiliar food rather than persuading or motivating them to eat it.
  - Strongly and consistently reassure children there is enough to eat but that they don't have to eat anything they don't want to.
  - Give children a "way out" from eating: not take it, leave it on their plate, put it in an apron.
- ☐ Generate parent-education materials that support children's experiential learning.

### **Young children to age 12 years**

- ☐ Frame all food neutrally; avoid making value judgments about *any* food.
- ☐ Support children's instinctive ability to eat as much as they need by giving structured access to ample food.
- ☐ Let children serve themselves or reassure them they don't have to eat what is served by others.
- ☐ Let children learn about food experientially rather than teaching nutrition principles.
- ☐ Support children in learning about food and food groups neutrally in a staged fashion: identification, sorting, categorizing, history, culture, ecology.
- ☐ Teach children to manage unfamiliar food in unfamiliar places: how to say "yes, please," and "no, thank you," ignore unfamiliar food, use a tissue to take unwanted food out of their mouth. Reassure children "your body knows how much you need to eat."
- ☐ Address energy needs from the perspective of fueling the body.
- ☐ Emphasize individual differences related to food intake, body size and shape, and growth
- ☐ Emphasize that people come in a variety of sizes. Create an environment that is respectful and considerate of all body types to allow all children to feel positive about their body.



### **Children age 12 years and older**

- ☐ Continue to offer repeated neutral exposure to food.
  - Elaborate by studying food-related issues, such as cultural differences, production, transportation, and food in history.
  - Explore food in the context of other lessons such as language arts and social studies: how people talk about food, what role does food play in their lives, what societal capabilities and stresses revolve around food acquisition/shortage.
- ☐ Continue to frame all food positively; avoid making value judgments about any food.
- ☐ Teach foods and food groups neutrally: Rather than teaching what and/or how much to eat, focus on food composition and nutrient contribution, role of nutrients in the body.
- ☐ Teach how to apply food group information to meal and snack planning, e.g., a protein source, vegetable fruit or both, one or two complex carbohydrate source include breads and cereals, milk, fat.
- ☐ Avoid teaching portion sizes, numbers of servings from food groups, and/or fat, sugar, and/or salt avoidance.
- ☐ Endorse personal food preference.
- ☐ Do consciousness-raising with respect to their attitudes and behaviors toward eating new food. In a neutral fashion, teach how to experiment with new food.
- ☐ Within the context of meals and snacks, introduce the possibilities of considering nutritional contributions of foods in choosing what to eat, e.g. if soda, milk, and juice are equally appealing, consider choice based on nutrient content in the context of daily food intake.
- ☐ Support identity formation with respect to accepting their own size, shape, fatness or thinness.
  - Address diversity in size, shape, BMI, and physical capability.
  - Encourage exploration, awareness, and trust in their body's signals that support internally regulated food intake.
  - Explore and endorse individual differences with respect to energy needs.
  - Address their concerns about weight/striving for weight loss by exploring "what holds true for you" with respect to energy regulation and body weight. That exploration includes their own history of eating, activity, and weight, their eating competence, the likely long-term outcomes/consequences of forced change.
- ☐ Help them master the practical skills they will need to take care of themselves with food after they leave home.

### **Approaches to nutrition education that are *inconsistent* with ecSatter and/or fdSatter**

- ☐ Making young children responsible for choosing food for themselves.
- ☐ Categorizing foods as good or bad, healthy or unhealthy, better or worse.
- ☐ Directly or indirectly motivating children to choose certain foods by use of words such as "benefits," "healthy," "strong." Using "low-fat," or "low-sugar" as motivators rather than descriptors.
- ☐ Using words that decode as taking away permission to eat: "moderation," "self-control," "avoidance."



- ☐ Using indirect and value-laden good-food-bad-food classifications, such as “sometimes foods” and/or “red light/green light foods.”
- ☐ Telling or putting pressure on children of any age about what amounts or servings of food from any food group they *should* eat, including fruits and vegetables.
- ☐ Setting up good-food, bad-food dichotomies. Labeling foods as junk food.
- ☐ Teaching calorie prescriptions for food intake and physical activity and/or assigning calorie tracking for the purpose of controlling energy balance.
- ☐ Promoting weight management, restricting food intake, encouraging direct or indirect means of lowering body weight.
- ☐ Motivating children to eat “healthy” food with nutrition lessons: food requirements, planning “healthy” meals/snacks, counting calories, going by portion sizes, using food labels to categorize food as healthy/unhealthy, prevention of obesity and nutrition-related diseases.
- ☐ Teaching children to manage their intake by following sets of rules such as the Dietary Guidelines, MyPlate, Five-a-day, and go-slow-whoa foods.
- ☐ Challenging children to taste food, giving stickers and praise for eating fruits and vegetables, teaching teachers and/or peers leaders to reward or do exaggerated modeling of eating “healthy” food.
- ☐ Teaching parents strategies to get children to eat fruits and vegetables or other “healthy” food.
- ☐ Showing watchdog food documentaries: Those that search out and publicize scandalous information about food, food production, eating, or related topics.

## **GUIDELINES FOR CITATION/REPRODUCTION**

fdSatter, ecSatter, sDOR, sBEC, and *What is Normal Eating* must be cited in educational materials and articles, including blogs, newsletters, and social media. Here is how you can handle these citations:

### **The Satter Division of Responsibility in Feeding (sDOR)**

Spell out *Satter Division of Responsibility in Feeding* and abbreviate it as sDOR, both of which search on the web and bring up Satter-Model-consistent sites. *Division of Responsibility* or *DOR* bring up a variety of sites which may or may not be consistent with the Satter models. You may reformat and reproduce the *Satter Division of Responsibility in Feeding* on the ESI website if the wording is exactly as it is on the ESI website and you include the entire copyright and “for more information” statements.

Note that sDOR says “choose and prepare the food.” It does *not* say “choose and prepare *healthy* food.” Inserting the word “healthy” constitutes incorrect and unethical reproduction. Inserting the word “healthy” is counterproductive because it complicates family meals. Moreover, sDOR 2.6y validation studies show that children do well nutritionally when parents follow sDOR, with nothing said about choosing “healthy” food.<sup>2</sup>

### **Becoming Eating Competent (sBEC)**

You may reformat and reproduce the *Becoming Eating Competent* (sBEC) on the ESI website if the wording is exactly as it is on the ESI website and you include the entire copyright and “for more information” statements.



### **What is Normal Eating**

You may reformat and reproduce the *What is Normal Eating* handout on the ESI website if the wording is exactly as it is in on the ESI website, you include the entire copyright statement, and you reference *Secrets of Feeding a Healthy Eater* as the “for more information” statement.

### **GET PERMISSION TO USE ecSI 2.0 and sDOR.2-6y**

Follow the links below to apply for permission to use the Satter-model inventories in projects or activities involving clinical practice, research, or education.

[sDOR2-6y](#)

[ecSI 2.0](#)



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