

Eating Disorder Safe principles: Whole-of-community approaches to do no harm in relation to eating disorders, disordered eating and body image distress

Section 3

Eating Disorder Safe

How-To Guides:

Guidance for individuals and families

Individuals and families

Putting the Eating Disorder Safe principles into practice at the individual and family level could look different for every individual and every family. This How-To Guide is intended to give you some ideas, but you will know what works best for your own life, values and circumstances. Most of the suggestions here are free or low-cost, however they will generally require some time investment while you research, plan and put things into practice.

If the Eating Disorder Safe concept is new to you, we suggest picking one area at a time to focus on. Perhaps you could have a family meeting, and vote on which area feels most important or most achievable, and then work together to come up with your own action plan. Once you feel you have that area well integrated into your daily life, come back and choose another.

Remember, these are suggested strategies that you can use as an individual or family, but that doesn't mean that all the responsibility to make your day-to-day experience 'Eating Disorder Safe' rests with you. The other How-To Guides are targeted at workers, leaders and organisations who also have roles to play. You can refer them to this Guide if you think they need some assistance in understanding and acting on their roles.

If you do implement the Eating Disorder Safe principles in your own homelife, NEDC would love to hear about it! Submit your story to nationalstrategy@nedc.com.au.

Getting started with Eating Disorder Safe actions

Creating an Eating Disorder Safe environment can start at home. By making small changes in the way we talk about health, food, minds and bodies, we can foster a more supportive and positive space for everyone.

Individuals and families often have many competing priorities and may not know where to start, which is why we have suggested two “quick wins” to get you started. We suggest these two actions because they are easy to implement and can have a significant positive impact on your or your family's wellbeing.

Quick Wins:

1. Keep Negative Body Talk Out of the Home

Action: Make a household pact to avoid making negative comments about anyone's body, including your own.

Why? This helps to create an inclusive and supportive atmosphere, reducing stress and promoting self-esteem for all household members.

How? Check out [Butterfly's Body Kind Families](#) and the [Embrace Collective's Education Hub](#) for tips, worksheets, videos, podcasts and other resources to help you on your way.

2. Use Neutral Language to Describe Food

Action: Describe food by its taste, texture, or nutritional content rather than labelling it as "good" or "bad."

Why? This approach encourages a balanced and kinder relationship with food and reduces food-related anxiety.

How? Practice describing food neutrally during family meals, focusing on sensory experiences like taste and texture, or check out some food exploration resources from [the Embrace Hub](#).

Ready to take some more action? Turn the page to explore more ideas and strategies for creating a supportive and safe environment for everyone at home.

Eating Disorder Safe: Health

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| Principle | <p>Families are supported to experience and model positive relationships with food, bodies and movement from the earliest opportunity and across the lifespan.</p> |
| Putting it into practice | <p>Self-reflection: Where am I/are we at with this principle right now? Where would I/we like to be a month or a year from now?</p> <p>Learning: What concepts do I/we need to know more about? Who can I/we learn from?</p> <p>Using my/our influence: Who can I/we involve in these actions? Who will lead the actions we take?</p> |
| Suggested actions | <ul style="list-style-type: none"> • Learn about concepts such as responsive feeding, intuitive eating, body acceptance, body neutrality, body esteem, positive body image, or joyful movement. Seek perspectives from people or organisations with cultural relevance to you. • Explore ways to eat and move for health and wellbeing through planning activities, preparing meals and eating together. • Learn about the history of body positivity and its intersections with race and queerness. • Develop your media literacy in regards to these concepts – how do you know when you are reading an evidence-based or community-informed account, as opposed to an account which uses these terms to promote unsafe products or practices? • Make a personal or family plan to integrate some of these concepts into your daily life – keep it realistic and choose an action that feels achievable first. • Look for resources in your community that can help you get started and keep going, e.g. ‘come and try’ days, active ageing programs, library resources, etc. • Make a pact to keep negative body talk out of the home. • Group together with some other local families to create a ‘body inclusive playgroup.’ • Incorporate traditional food and movement practices into your routines to honour your cultural heritage and promote holistic health. • Seek guidance from community Elders on traditional ways of maintaining health and wellbeing. • Use storytelling to pass down knowledge and practices related to food, body image, and health. |

Eating Disorder Safe: Health

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| Principle | The unique relationships between eating, chronic illness, disability and experiences of healthcare are acknowledged and addressed. |
| Putting it into practice | <p>Self-reflection: Where am I/are we at with this principle right now? Where would I/we like to be a month or a year from now?</p> <p>Learning: What concepts do I/we need to know more about? Who can I/we learn from?</p> <p>Using my/our influence: Who can I/we involve in these actions? Who will lead the actions we take?</p> |
| Suggested actions | <ul style="list-style-type: none"> • Seek out materials that discuss adaptive eating strategies, nutritional needs for specific health conditions, and the intersection of disability and body image. • Create a plan to address the unique food needs related to chronic illnesses or disabilities within your household or family. This could include meal planning, and incorporating adaptive tools or methods for food preparation. • Look for “low spoon” cooking ideas online or borrow relevant cookbooks from the library, such as books which include adaptive cooking strategies. • Look for community resources such as community pantries, specialised dietary services, accessible fitness programs, or adaptive cooking classes. • Ask your GP for a Chronic Disease Management Plan or Eating Disorder Management Plan (if relevant) and seek subsidised support from a dietitian who understands your specific needs and preferences. • Discuss your food and eating needs with your NDIS Planner and request assistance from a dietitian who understands your specific needs and preferences. • Prepare for medical appointments by keeping a log of dietary challenges, successes, and questions to discuss with your healthcare team. Ensure these are addressed and any ongoing support is provided in ways that meet your needs and preferences. • Advocate for accessible and inclusive healthcare services that recognise and address the dietary needs of people with chronic illnesses and disabilities, such as through improvements to meal planning, catering and meal support. • Advocate for accessible and inclusive healthcare services that recognise and address body image with people with chronic illnesses and disabilities. • Encourage open and positive discussions about the challenges and needs related to eating, chronic illness, and disability within your family and social circles. • Create a supportive environment at home where everyone feels comfortable discussing their dietary needs and preferences without judgment. |

Eating Disorder Safe: Health

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| Principle | Communications use size-inclusive, non-stigmatising language and imagery in respect of health, food, minds and bodies. |
| Putting it into practice | <p>Self-reflection: Where am I/are we at with this principle right now? Where would I/we like to be a month or a year from now?</p> <p>Learning: What concepts do I/we need to know more about? Who can I/we learn from?</p> <p>Using my/our influence: Who can I/we involve in these actions? Who will lead the actions we take?</p> |
| Suggested actions | <ul style="list-style-type: none"> • Create a personal or family plan to use inclusive and respectful language when discussing health, food, minds, and bodies. • Agree to avoid using stigmatising language in the home. • Try to avoid bringing pieces of communication (e.g. magazines, brochures, pamphlets) into the home if they use stigmatising language or images. Send feedback to the publishers about your reasons for rejecting these messages. • Teach family members media literacy skills to critically evaluate and respond to stigmatising language and imagery. • Create family media projects, such as videos or blogs, that use size-inclusive and non-stigmatising language and imagery. • Participate in community art projects that promote positive and inclusive messages about health and body image. • Share and promote social media content that aligns with size-inclusive and non-stigmatising principles. |

Eating Disorder Safe: Health

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| Principle | People are supported to experience movement and exercise in ways that promote their overall wellbeing, including their emotions, social connections, and physical and mental health and wellbeing. |
| Putting it into practice | <p>Self-reflection: Where am I/are we at with this principle right now? Where would I/we like to be a month or a year from now?</p> <p>Learning: What concepts do I/we need to know more about? Who can I/we learn from?</p> <p>Using my/our influence: Who can I/we involve in these actions? Who will lead the actions we take?</p> |
| Suggested actions | <ul style="list-style-type: none"> • Research local options for organised movement groups that have a focus on wellbeing or skill development. This could include ‘walk and talk’ groups, community dance classes, yoga for mental health sessions or tai chi in the park. • Look out for ‘come and try’ days to experience new ways of moving and to get a feel for other movement communities in your area. • Make a family plan to include movement-based adventures in your weekly or monthly routine. This could include bushwalks, bike rides or other creative ways to get out and about together. Make a family roster so everyone gets a turn to choose an adventure. • Participate in your cultural practices such as dance and caring for Country, along with family and community. • Think of other ways to move which support your lifestyle or connect to your values. This could include gardening, joining a local environmental team to plant trees or pick up rubbish, metal detecting, or using active transport to get to work or school. • Explore movement through play. Incorporate playful activities like frisbee, backyard cricket, scavenger hunts, or dance parties at home. Note: play-based movement can be an option for individuals just as much as families. • Volunteer for active community projects. Engage in community projects that involve movement, such as helping out at local farms, community clean-ups, or assisting at charity runs and walks. |

Eating Disorder Safe: Food

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| Principle | Neutral language is used to describe food and its properties and food messaging is appropriate for its audience. |
| Putting it into practice | <p>Self-reflection: Where am I/are we at with this principle right now? Where would I/we like to be a month or a year from now?</p> <p>Learning: What concepts do I/we need to know more about? Who can I/we learn from?</p> <p>Using my/our influence: Who can I/we involve in these actions? Who will lead the actions we take?</p> |
| Suggested actions | <ul style="list-style-type: none">• Help your kids learn about food by focusing on their senses – how the food looks, smells, sounds, tastes and feels, both while eating it and then as it moves through the body. Introduce factual nutrition information incrementally, based on your child’s level of cognitive development.• Make a pact to avoid labeling foods as "good" or "bad" within the home and to focus on the qualities, properties and enjoyment of food.• Go on a "food adventure" where each family member picks a new, neutral way to describe and enjoy a different type of food.• Set aside time for family or household discussions about how to talk about food neutrally and why it matters.• Write short stories or poems about food using neutral language, and share them during family gatherings.• Get creative with ways to experience and enjoy food. Try eating in the yard (or have an indoor floor picnic if it’s raining), pick different cuisines to learn about, hold theme nights, try swapping dinner and breakfast foods to the other end of the day, make faces or artwork with your food and then eat your masterpiece, or come up with your own new ideas.• Seek out parent and child resources that can help with the above, such as online accounts from qualified professionals.• Create and display posters or infographics at home that promote neutral food language.• Practice role-playing scenarios with family members or friends to reinforce the use of neutral language when discussing food. Make this a regular activity or game, to help you build the habit.• Make an agreement with other families in your network to create a supportive environment where neutral food language is encouraged and practiced.• Host a community potluck where attendees are encouraged to use neutral language to describe their dishes. |

Eating Disorder Safe: Food

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| Principle | Dietary advice is given in a weight neutral, culturally and developmentally appropriate manner, by people with appropriate qualifications and experience according to their scope of practice. |
| Putting it into practice | <p>Self-reflection: Where am I/are we at with this principle right now? Where would I/we like to be a month or a year from now?</p> <p>Learning: What concepts do I/we need to know more about? Who can I/we learn from?</p> <p>Using my/our influence: Who can I/we involve in these actions? Who will lead the actions we take?</p> |
| Suggested actions | <ul style="list-style-type: none">• Research and identify qualified professionals who provide weight-neutral and culturally safe dietary advice.• Look for resources in your community that offer weight-neutral dietary advice, such as cooking classes or culturally specific dietary programs. If the services in your area don't offer weight-neutral and culturally safe options, ask them to consider developing some.• Share information and experiences within your friendship group about finding and working with qualified, weight-neutral health professionals.• Organise family dinners where everyone participates in cooking dishes from different cultures, focusing on enjoyment and balance.• Attend webinars hosted by dietitians and nutritionists who work from a weight-neutral perspective. Look for events that resonate with your cultural background and other specific needs and preferences.• Create a family recipe book with favourite recipes that reflect culture, heritage and the important social functions of meals made and shared with love.• Share family or community stories about traditional food practices and how they contribute to overall health and well-being. |

Eating Disorder Safe: Food

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| Principle | Food security is addressed to support safe relationships with food and eating at individual and population levels. |
| Putting it into practice | <p>Self-reflection: Where am I/are we at with this principle right now? Where would I/we like to be a month or a year from now?</p> <p>Learning: What concepts do I/we need to know more about? Who can I/we learn from?</p> <p>Using my/our influence: Who can I/we involve in these actions? Who will lead the actions we take?</p> |
| Suggested actions | <ul style="list-style-type: none">• Firstly, know that your experience of food insecurity is not your fault, and that wider system changes are also needed. The rest of the tips for putting this principle into practice are made with that in mind.• Understand that getting enough food for you and your family is a good enough goal. Read about the Satter Hierarchy of Food Needs to learn more about ways to approach nutrition when resources are scarce.• Consider looking for food relief options, if you aren't already. Different services have different criteria (e.g. local area residents, concession card holders, etc). Ask Izzy is a good place to start your search.• Where possible, incorporate your traditional food practices into your routines to honour your heritage and promote spiritual health. Seek advice from Elders on how you might do this together with other community members.• Organise a meal-share or a crop-swap with your friends, neighbours or community to help everyone get access to nutritious food.• Map out local food resources such as food banks, markets, bargain basements, suppliers that offer free or discounted food at the end of the day, community pantries and community kitchens, and share this information with others.• If you are not currently facing food insecurity, consider ways that you or your family may be able to help others and support the health of your wider community, such as via volunteering, charitable donations, assisting community activities like the ones listed above, or system advocacy. |

Eating Disorder Safe: Food

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| Principle | Diet culture and its far-reaching consequences are understood, reduced and ultimately eliminated, with actions based on contemporary evidence. |
| Putting it into practice | <p>Self-reflection: Where am I/are we at with this principle right now? Where would I/we like to be a month or a year from now?</p> <p>Learning: What concepts do I/we need to know more about? Who can I/we learn from?</p> <p>Using my/our influence: Who can I/we involve in these actions? Who will lead the actions we take?</p> |
| Suggested actions | <ul style="list-style-type: none">• Create a personal or family plan to reject diet culture, such as by focusing on health rather than weight, avoiding appearance-based comments, and focusing on each person's strengths and interests. Keep it realistic and choose actions that feel achievable first.• Do a diet-culture detox: unfollow unhelpful accounts on social media, choose magazines that do not promote diets or body ideals, remove books with diet-related messaging (check the kids' books, too).• Start seeking new accounts, media and books, either that celebrate body diversity or that deal with topics which aren't weight, beauty or body related at all. Share your findings with friends and family.• Group together with other community members to support each other in rejecting diet culture and promoting positive, evidence-based approaches to health and well-being.• Use social media platforms to spread evidence-based information about diet culture and its harms.• Start conversations with your friends and family about the unhelpful messaging that you can now identify when rewatching nostalgic TV shows and movies. |

Eating Disorder Safe: Mind

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| Principle | Mental health stigma and its harms in relation to health, food, mind and body are of concern and must be eliminated. |
| Putting it into practice | <p>Self-reflection: Where am I/are we at with this principle right now? Where would I/we like to be a month or a year from now?</p> <p>Learning: What concepts do I/we need to know more about? Who can I/we learn from?</p> <p>Using my/our influence: Who can I/we involve in these actions? Who will lead the actions we take?</p> |
| Suggested actions | <ul style="list-style-type: none"> • Learn about mental health stigma and its effects. Seek perspectives both from people or organisations with cultural relevance to you as well as from a range of other diverse experiences. • Hold a family or friends film night and discuss the themes together. • Join a book group with a mental health focus, or suggest a relevant title to a book group you are already part of. • Agree to avoid stigmatising language and behaviours within the home and to promote open and supportive discussions about mental health. • Practice mindfulness, meditation or a suitable alternative as a household or family to improve mental wellbeing and normalise the idea of taking steps to protect mental health. • Find out if your local library or community centre runs any mental health awareness events, or ask them to do so if they don't already. • Write letters, meet or have a yarn with local leaders, school officials, or employers advocating for mental health awareness programs. • Get involved in stigma-reduction campaigns as a voice of lived experience, an ally, or a skilled volunteer. Ensure the campaign has support mechanisms in place, and that your mental health is well supported before you start. • Encourage community leaders to participate in mental health first aid and stigma reduction training programs, including culturally safe and specific programs. |

Eating Disorder Safe: Mind

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| Principle | The bidirectional relationship between food, eating and mental health is recognised, within the context of individual, social, cultural and economic factors. |
| Putting it into practice | <p>Self-reflection: Where am I/are we at with this principle right now? Where would I/we like to be a month or a year from now?</p> <p>Learning: What concepts do I/we need to know more about? Who can I/we learn from?</p> <p>Using my/our influence: Who can I/we involve in these actions? Who will lead the actions we take?</p> |
| Suggested actions | <ul style="list-style-type: none"> • Take some time to reflect on your own relationship with food and eating. What are your needs, values and preferences? What gets in the way of them? Choose one achievable action to try. See if it helps you feel any better about food and eating. • Ask your GP for a Chronic Disease Management Plan, Mental Health Care Plan or Eating Disorder Management Plan (if relevant) and seek subsidised support from a dietitian and/or mental health professional who understands your specific needs and preferences. • Prepare for medical appointments by keeping a log of food and eating challenges, successes, and questions to discuss with your healthcare team. Ensure these are addressed and any ongoing support is provided in ways that meet your needs and preferences. • Advocate for accessible and inclusive healthcare services that recognise and address the food, eating and mental health, such as through improvements to meal planning, catering and meal support. • Encourage open and positive discussions about the challenges and needs related to food, eating and mental health within your family and social circles. • Create a supportive environment at home where everyone feels comfortable discussing their food needs and preferences without judgment. |

Eating Disorder Safe: Body

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| Principle | Settings where people live, learn, work, play and receive help are inclusive and welcoming for people of all sizes, shapes, weights, genders, sexualities, cultures, neurotypes and abilities. |
| Putting it into practice | <p>Self-reflection: Where am I/are we at with this principle right now? Where would I/we like to be a month or a year from now?</p> <p>Learning: What concepts do I/we need to know more about? Who can I/we learn from?</p> <p>Using my/our influence: Who can I/we involve in these actions? Who will lead the actions we take?</p> |
| Suggested actions | <ul style="list-style-type: none"> • Create a personal or family plan to promote inclusivity in everyday settings, such as using inclusive language and supporting inclusive initiatives. • Find ways to make the home environment feel welcoming and inclusive of all household members and visitors, such as through creative expression, quiet spaces, etc. • Encourage your kids to learn about diverse perspectives, backgrounds and abilities through their friendships at school or sport, as well as through books and media with a broad range of diverse representation. • Group together with other community members to advocate for inclusive practices in schools, workplaces, and community settings, ensuring everyone feels welcome and valued. This can be done by allies, rather than the people who are often excluded having to self-advocate; the people who are most affected by the issue should always be offered the opportunity to speak up or lead if they wish for this. • Conduct informal accessibility audits of local facilities and provide feedback to improve inclusivity. • Celebrate cultural and diversity awareness days to educate family members and friends about different cultures and perspectives. • Engage in traditional physical activities like dance or caring for Country, to promote family bonding and holistic health. |

Eating Disorder Safe: Body

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|---------------------------------|---|
| Principle | Neutral language is used to describe bodies at all ages and stages of development, all sizes, shapes, abilities and ethnicities. |
| Putting it into practice | <p>Self-reflection: Where am I/are we at with this principle right now? Where would I/we like to be a month or a year from now?</p> <p>Learning: What concepts do I/we need to know more about? Who can I/we learn from?</p> <p>Using my/our influence: Who can I/we involve in these actions? Who will lead the actions we take?</p> |
| Suggested actions | <ul style="list-style-type: none"> • Agree to avoid labelling bodies in ways that could be harmful or judgmental within the home, focusing instead on the unique qualities and strengths of each person or the things that bodies allow us to do. • Create and display positive affirmations around the house that focus on qualities other than appearance. • Engage in body-positive art projects where family members create art that celebrates diverse body types. • Identify and discuss role models who represent body positivity, body neutrality and diversity. Look for role models from within your culture or community. • Look for resources in your community that promote body neutrality and positive body image, such as body-positive events and workshops. • Group together with other local families to support each other in using neutral body language and promoting positive body image in the community. • Have regular family discussions about body image and the importance of using neutral language. |

Eating Disorder Safe: Body

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| Principle | Size, shape or weight are not used as a standalone measure of health or wellbeing, used as a measure of skill, aptitude or performance, or a barrier to education, employment or civic participation. |
| Putting it into practice | <p>Self-reflection: Where am I/are we at with this principle right now? Where would I/we like to be a month or a year from now?</p> <p>Learning: What concepts do I/we need to know more about? Who can I/we learn from?</p> <p>Using my/our influence: Who can I/we involve in these actions? Who will lead the actions we take?</p> |
| Suggested actions | <ul style="list-style-type: none"> • Make a pact to challenge weight-based discrimination and stereotypes within the home and to support each other's diverse abilities and strengths. • Advocate for weight-neutral, size-inclusive or fat-liberationist policies and practices in education, employment, and civic participation. • Participate in sports and physical activities for enjoyment and skill development rather than to try to look like an idealised image of a healthy or fit person. • Set health goals that focus on overall wellbeing, such as improved energy, strength, or mental health, rather than weight. • Encourage family members to pursue hobbies and skills that they enjoy or want to build skills in, regardless of their body size or shape. If they experience barriers to participation, ask them if they would like you to help advocate for them, and if so, how. |

Eating Disorder Safe: Body

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| Principle | Weight stigma and its consequences are of concern and must be eliminated. |
| Putting it into practice | <p>Self-reflection: Where am I/are we at with this principle right now? Where would I/we like to be a month or a year from now?</p> <p>Learning: What concepts do I/we need to know more about? Who can I/we learn from?</p> <p>Using my/our influence: Who can I/we involve in these actions? Who will lead the actions we take?</p> |
| Suggested actions | <ul style="list-style-type: none"> • Encourage positive self-talk and body acceptance within the family. Compliment qualities that are not related to appearance, such as kindness, creativity, and perseverance. • Actively question and challenge stereotypes or negative comments about weight and body size when they arise in conversations, media, or social settings. Encourage open discussions about the importance of diversity and acceptance. • Choose and promote media that showcases body diversity and positive representation of all body sizes. Let the publishers or broadcasters know why you are choosing this content over other materials. • Write opinion pieces or letters to the editor in local newspapers to raise awareness about weight stigma and to promote weight-neutral alternatives. • Advocate for policies in schools, workplaces, and community organisations that address and reduce weight stigma. • Make a pact to challenge weight-based discrimination and stereotypes within the home and to support each other's abilities and strengths. |

Eating Disorder Safe: Body

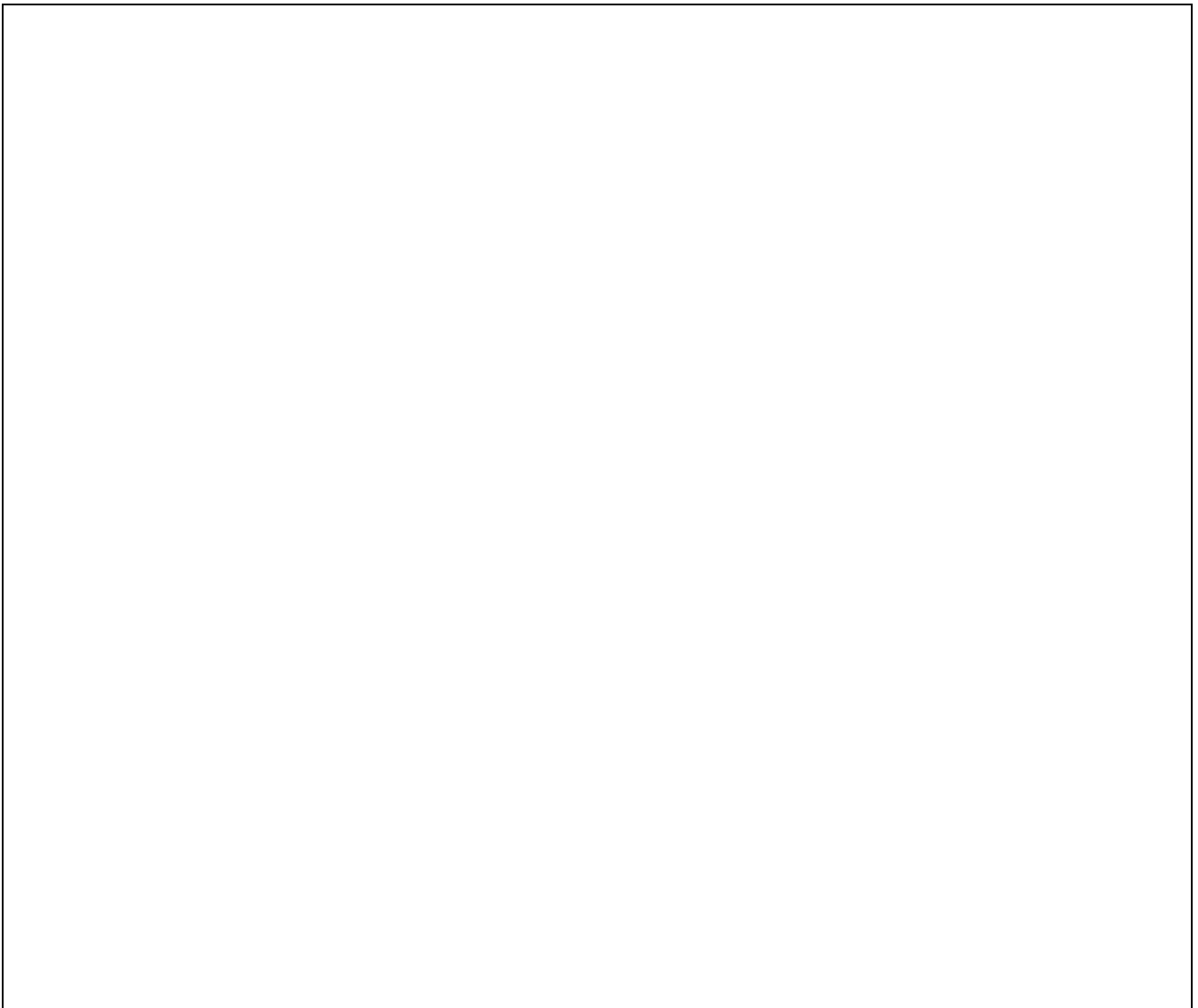
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| Principle | System-level drivers of eating disorder risk, for example institutional weight stigma, diet culture, medical and health professional weight bias, are addressed. |
| Putting it into practice | <p>Self-reflection: Where am I/are we at with this principle right now? Where would I/we like to be a month or a year from now?</p> <p>Learning: What concepts do I/we need to know more about? Who can I/we learn from?</p> <p>Using my/our influence: Who can I/we involve in these actions? Who will lead the actions we take?</p> |
| Suggested actions | <ul style="list-style-type: none"> • Make a pact or pledge to demonstrate through your actions and words that health and worth are not determined by body size. • Group together with other community members to advocate for systemic change, supporting initiatives that aim to reduce eating disorder risk at a community or institutional level. • Provide input at public hearings, school board meetings or similar forums about the need to address systemic drivers of eating disorders. • Seek out healthcare professionals who practice weight-neutral and inclusive care. You can switch providers if you encounter weight bias, and can provide feedback about your reasons for doing this if you feel able to do so. • Contribute to or support research efforts that aim to understand and mitigate the systemic drivers of eating disorder risk. Stay informed about new findings and share them with your community. |

Next steps

Now that you've worked through all the examples in this How-To Guide, and possibly come up with a few of your own, it's time to start planning for action. Use the [Reflection Activity](#), [Self-check Tool](#) and an [Action Plan template](#) to develop your plan and then start practising.

Remember that making changes and learning new habits can take time, and that making mistakes will be a part of this. This is OK. As an individual, household or family, you might choose an approach to handling mistakes as they occur, so that they can support your learning without adding a sense of shame or blame.

The rest of this page is blank for you to jot down any other ideas.



Reflection activity, self-check tool and action plan

Reflection Activity

This activity is designed to help you engage in self-reflection regarding your relationships with health, food, mind and body, using the Eating Disorder Safe principles as a framework. The intent is to help get you thinking before you start developing your [Action Plan](#).

You may choose to complete this activity on your own, with a trusted friend or colleague, or as a family.

Note: the intent of this activity is not to delve into deep feelings of distress in relation to food, eating or body image. There is no requirement to undertake this activity if it doesn't feel right for you. If you do try this activity and find that it brings up troubling thoughts or feelings, please seek support from your care team or via [one of these Helplines](#).

If you want a quicker way to gauge your current level of Eating Disorder Safe practice, you can jump to the [Self-Check Tool](#).

Materials Needed:

- Paper or journal
- Pens or pencils
- A comfortable space for discussion if working in pairs or a group

Instructions:

1. Create an environment where everyone can sit together without distractions, or where you feel able to focus.
2. Provide each person with a piece of paper and a pen or pencil.
3. Briefly explain the purpose for the activity, for example:
 - "Today we're going to spend time thinking about our current relationships with health, food, minds and bodies. This will help us understand where we are now and where we want to be in the future."
4. Choose an Eating Disorder Safe principle to focus on. Read the principle aloud.
5. Allow some time for each person to go through these self-reflection questions and make any notes:
 - Where am I/are we at with this principle right now?
 - Where would I/we like to be a month or a year from now?
 - What concepts do I/we need to know more about?
 - Who can I/we learn from?
 - Who can I/we involve in these actions?
 - Who could lead the actions we take?
6. If working in pairs or a group, have a discussion for everyone to share reflections (only as much as they want to). You might like to use these prompts:
 - "What stood out to you as you answered these questions?"
 - "Did you notice any common themes or differences in our reflections?"
 - "What are some realistic steps we can take to move from where we are now to where we want to be?"
7. Based on the discussion, come up with a list of priorities, and add them to your [Action Plan](#).

Eating Disorder Safe Self-check tool

Use the information you have read on the previous pages, as well as any notes you have made, to run through this quick self-check tool to see where you or your organisation are up to in becoming Eating Disorder Safe. This isn't intended as a negative judgement if you're only just starting out. Rather, the purpose of this self-check is to see which areas might need more of your attention when you develop your Action Plan.

You could choose to keep a record of your results, and then re-do the self-check periodically to gauge your progress against each of the principles. You could then update your Action Plan, as you or your organisation gradually increase your level of confidence and range of approaches to being Eating Disorder Safe.

Date completed: _____ **Completed by:** _____

| Principle | This is new to me/us | I/we do some of the suggested actions, or relevant equivalents | I/we do most of the suggested actions, or relevant equivalents |
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| Health | | | |
| Families are supported to experience and model positive relationships with food, bodies and movement from the earliest opportunity and across the lifespan. | | | |
| The unique relationships between eating, chronic illness, disability and experiences of healthcare are acknowledged and addressed. | | | |
| Communications use size-inclusive, non-stigmatising language and imagery in respect of health, food, minds and bodies. | | | |
| People are supported to experience movement and exercise in ways that promote their overall wellbeing, including their emotions, social connections, and physical and mental health. | | | |
| Food | | | |
| Neutral language is used to describe food and its properties and food messaging is appropriate for its audience. | | | |
| Dietary advice is given in a weight neutral, culturally and developmentally appropriate manner, by people with appropriate qualifications and experience according to their scope of practice. | | | |

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| Food security is addressed to support safe relationships with food and eating at individual and population levels. | | | |
| Diet culture and its far-reaching consequences are understood, reduced and ultimately eliminated, with actions based on contemporary evidence. | | | |
| Mind | | | |
| Mental health stigma and its harms in relation to health, food, mind and body are of concern and must be eliminated. | | | |
| The bidirectional relationship between food, eating and mental health is recognised, within the context of individual, social, cultural and economic factors. | | | |
| Body | | | |
| Settings where people live, learn, work, play and receive help are inclusive and welcoming for people of all sizes, shapes, weights, genders, sexualities, cultures, neurotypes and abilities. | | | |
| Neutral language is used to describe bodies at all ages and stages of development, all sizes, shapes, abilities and ethnicities. | | | |
| Size, shape or weight are not used as a standalone measure of health or wellbeing, used as a measure of skill, aptitude or performance, or a barrier to education, employment or civic participation. | | | |
| Weight stigma and its consequences are of concern and must be eliminated. | | | |
| System-level drivers of eating disorder risk, for example institutional weight stigma, diet culture, medical and health professional weight bias, are addressed. | | | |
| Harm Minimisation (where relevant) | | | |
| Alternatives to weight-focused activities and outcomes are prioritised as far as possible (e.g., other health, quality of life, performance, and wellbeing metrics). | | | |
| Recognising and responding to eating disorder warning signs and symptoms in all people and bodies is a responsibility of all people working in high-risk settings. | | | |
| Weight stigma has no place in the healthcare setting, no matter the condition being treated. | | | |
| Eating disorder risk is a consideration when making decisions around a person's health, care, learning, work or sports participation. | | | |

Eating Disorder Safe Action Plan

Once you have read through the guidance material most relevant to your role and completed the self-check tool, this action plan template can help you define and prioritise the steps that you or your organisation will take to put the Eating Disorder Safe principles into practice.

We suggest you choose a number of principles to work on that is feasible within your setting and context. A family or an individual worker might choose to work on one principle at a time, whereas a large organisation might take a holistic approach to implementing all of the Eating Disorder Safe principles together.

If you would like advice on aligning your Eating Disorder Safe Action Plan within your other strategic or operational planning cycles, please contact info@nedc.com.au.

Date of plan: _____ **Plan prepared by:** _____ **Endorsed by:** _____

Our Eating Disorder Safe priorities

E.g. Focus on putting the Health principles into practice at home; Develop an ED Safe service charter; Address all weight stigma principles in our new policy; etc.

| What actions will we take? | Who is responsible? | What help or resources do they need? | When will this be done? |
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| What barriers might we encounter? | How will we address them? | Who is responsible? | What help or resources do they need? |
|--|---------------------------|---------------------|--------------------------------------|
| E.g. Barriers might include feelings of resistance to change, financial barriers, time barriers, competing priorities, or lack of people-power. | | | |
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| How will we know it's working? |
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| E.g. Our family will feel less anxious about staying healthy; We will get positive client feedback about the ways that we support them to feel safe; Our policy will include tangible measures on weight stigma reduction; etc. |
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| When will we check-in on our progress? | |
| Once we've achieved this priority, what do we think we will focus on next? | |