



Pediatric Weight Management Through Ellyn Satter's Division of Responsibility in Feeding

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Conflict Disclosure Information

I have no financial or personal relationships to disclose.

Learning Objectives

- Understanding The Division of Responsibility (DOR) in Feeding
- How conventional nutrition approaches to pediatric weight management interfere with DOR and can be counterproductive
- How to encourage families to achieve Eating Competence

Outline

- Ellyn Satter Institute (ESI) and their approach to the prevention and treatment of childhood overweight and obesity.
- ESI Feeding Dynamics model/Division of Responsibility.
- Conventional approaches to pediatric weight management, how they interfere with DOR and backfire.
- ESI Eating Competence model.

The Ellyn Satter Institute

ESI is dedicated to improving quality of life. People are healthier in all ways when they eat and feed with practicality and enjoyment, based on the evidence-based, clinically tested, and highly effective Satter Feeding Dynamics Model (fdSatter) and Satter Eating Competence Model (ecSatter).

“Even children showing the most extreme eating behaviours and weights moderate when their grownups do.”



Ellyn Satter, MS, RD, LCSW BCD

- Registered dietitian and family therapist (U.S.A.).
- Internationally recognized expert on eating and feeding.
- 50 years of experience.
- Evidence based and clinically tested models.

“Feed and parent well, accept your child’s size and shape, and avoid interference.”



ESI Prevention and Treatment of Childhood Overweight and Obesity

Step 1: Feed based on the Division of Responsibility (DOR)

Step 2: Conventional treatment destroys the utility of the DOR

Step 3: Read more

Step 4: Get help if you need it

Step 5: Consider coaching from ESI faculty members

Step 1: Feed based on DOR

- More on Ellyn's feeding dynamics model in a bit
- Reassure parents by considering causes of obesity:
 - Misinterpretation of normal eating and growth
 - Restrained feeding – direct, indirect or inadvertent food restriction
 - Mistakes in feeding – lack of structure and interference
 - Stress – lack of structure and interference
- Realistic expectations.
- Be prepared to feed well for the long-haul.

The Division of Responsibility in Feeding

Parents/Caregivers:

- **What** food is served
- **When** meals and snacks are served
- **Where** the family eats

Children:

- **How much** they want to eat
- **Whether** or not they'll eat at all

- Kitchen is closed b/w meals and snacks except for water.
- Parents can say how much dessert. Serve it with the meal.

Feeding Dynamics Model (fdSatter)

- When parents feed according to the Division of Responsibility, children gradually accumulate Eating Competence attitudes and behaviours.
- What does trying the DOR feel like for parents in our program?



DOR Shifts the Focus

- Emphasize *providing*, not *depriving*.
- *Competency* rather than *deficiency*.
- *Trust* rather than *control*.
- Focus on the *feeding relationship* rather than *nutrient intake*.



Feeding & Parenting Checklist

- Having regular and reliable sit-down family meals and sit-down snacks. Same meal for everyone.
- Including a variety of good-tasting, wholesome food.
- Regularly including “forbidden” foods at meal and snack time so your child doesn’t sneak around and overeat on them.
- Trusting your child to decide *what* and *how much* to eat from the food you provide.

Feeding & Parenting Checklist

- Feeling good about the child you have, not the one you thought you might have.
- Maintaining a division of responsibility with activity. Parents provide *structure, safety* and *opportunities*. Children choose *how much* and *whether* to move and the *manner* of moving.
- Limiting television.

Age Appropriate DOR

Age	Parent	Child
0–6 mo.	What	When, where, how much, how fast
5–9 mo.	What, partly when & where Family meals	When, where, how much, how fast
7–15 mo.	What, when, where Considerate not cater Lots of new food chances	How much, whether
11–36 mo.	What, when, where Don't feed for emotions	How much, whether

Age Appropriate DOR

Age	Parent	Child
3-8yrs	What, when, where Table manners No grazing	How much, whether
9-12yrs	What, when, where After-school snacking rules	How much, whether Contribute to meal planning
12-17yrs	What, when, where Keep family meals a priority Teach simple meal planning	How much, whether Manage snack schedule

Trouble Shooting the DOR

If children continue to be food-preoccupied, anxious, and urgent about eating:

- Previously food restricted children will eat more and be more demanding about food. Stay the course while they recover the ability to regulate.
- Either structure is eroding or pressure is creeping in.
- Restraint is unfortunately such a part of our relationship with food that restrictive practices are hard to shake.

Step 2: Conventional treatment destroys the utility of DOR

- Any method that targets the child rather than the parents contradicts sDOR.
- Children will feel hurt, get scared, and eat too much if you...
 - Hold back on food/try to control portion sizes
 - Restrict high-fat, high-sugar food (“forbidden” foods)
 - Push low-calorie food (“eat veggies before dessert”) Feed children differently from other family members
 - Give “the look” when kids seem to eat a lot

Step 2: Conventional treatment destroys the utility of DOR

- Target/cutoff BMI
- Emphasizing food selection
- Encouraging fruits and vegetables
- Encouraging low-calorie foods
- Restricting high-calorie foods
- Limiting portion sizes
- Using recommended feeding practices as weight-loss strategies



Step 3: Read More

Eating Competence Model (ecSatter)

4 Components:

- Eating attitudes
- Food acceptance
- Regulation of food intake
- Management of the eating context

Step 3: Eating Attitudes (ecSatter)

- Build relationships
- Enhance the dignity and importance of eating
- Emphasize providing, not depriving
- Address encoded messages
- Address feelings

Satter, E. Eating Competence: Nutrition Education with the Satter Eating Competence Model.
J Nutr Educ Behav. 2007;39:S189-S194



Step 3: Food Acceptance (ecSatter)

- Trust people to learn and grow
- Don't get pushy with target food
- Teach food acceptance skills
- Address picky eating



Step 3: Regulation of food intake (ecSatter)

- Coach internal regulation
- Encourage sensitivity to eating rhythms
- Support self-awareness and choice
- Give strong permission to eat *enough*
- Identify and discard restrained eating
- Address disinhibition
- Address weight management



Step 3: Eating Context (ecSatter)

- Stress family meals
- Remember your capabilities
- Define meals achievably
- Join with individuals where they are
- Teach strategic menu planning



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Eating Competence

Eating Competent People

- Have better diets
- Have the same or lower BMI
- Have better physical self acceptance
- Are more active
- Sleep better
- Have better metabolic health
- Do better with feeding their children

Eating Competent Children

- Feel good about eating.
- Naturally eat as much as they need and grown in the way that is right for them.
- Learn to eat the food their parents eat.
- Enjoy family meals and learn to behave well at mealtimes.

What about Nutrition?

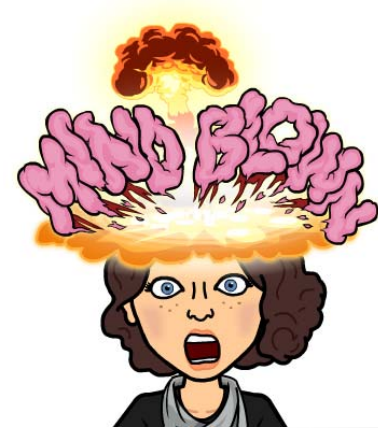
- Nutrition excellence is an integral component of ecSatter.
- Dietary quality is an experientially evolving process that builds on successfully providing enough to eat of rewarding food.

Hierarchy of Food Needs

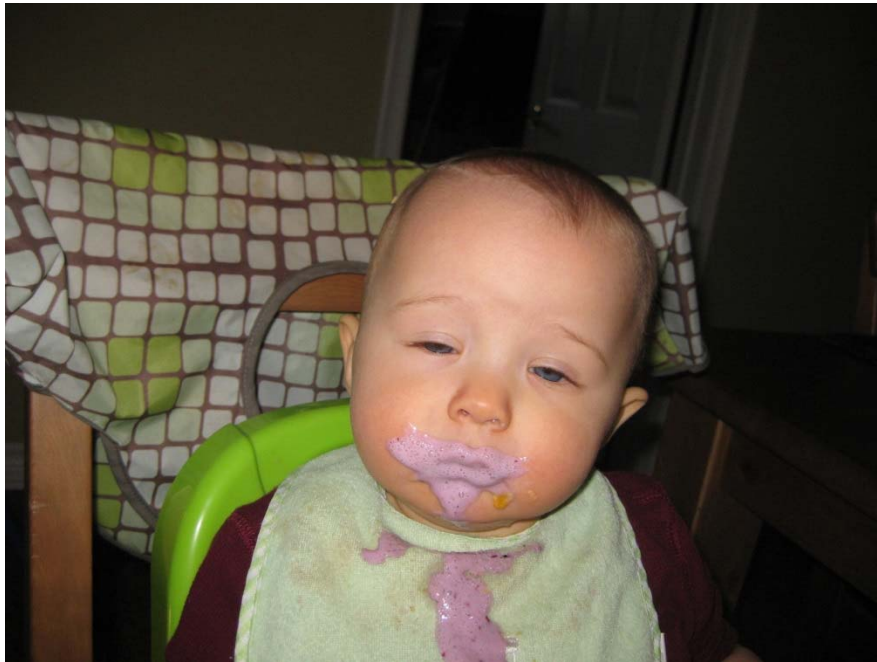


Halloween and DOR

- A learning opportunity for kids
- Treat candy the way you do other sweets/treats.
- Keep interference to a minimum.
- Oct 31: trick-or-treat, gloat, eat as much as they want.
- Nov 1 – eat as much as they want.
- Nov 2 onward - Put it away and relegate it to meal- and snack-time (a couple of pieces for dessert at meals and as much as they want at snacks).
- Failure to follow these rules and parents take control of stash.



An essential part of both eating competence and the division of responsibility in feeding is reassuring yourself and your family that you will be fed. After that, let yourself and other family members decide what and how much to eat from what is on the table.



Thank you!

Questions?

References

- Your Child's Weight; Helping Without Harming Birth Through Adolescence, Ellyn Satter MS, RD, LCSW, BCD
- www.ellynsatterinstitute.org
- Ihuoma U. Eneli, Peggy A. Crum, Tracy L. Tylka. The Trust Model: A Different Feeding Paradigm for Managing Childhood Obesity. *Obesity* 2008; 16, 2197-2204.
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