

The Food Plan

The Food Plan is a significant tool in working a recovery program for an Eating Disorder. Regardless of the fellowship one belongs to, the Food Plan is a crucial element. Many people consult Registered Dieticians to work out the amount of food necessary per day for their bodies to operate efficiently. Registered dieticians are trained to take into account gender, age, life circumstance, food allergies, balanced caloric intake and output, as well as any special needs one may have such as diabetes, Graves Disease [hypothyroidism], high blood pressure. Structured food plans empower people with eating disorders and enable them to abstain from their substances of choice.

Most Food Plans suggest the following:

- 1) Avoid all individual binge or trigger foods. Trigger foods can be anything that is flavor intensive [sweet, salty, sour] or substances such as flour, sugar, caffeine, salt, or fat. Many recovering individuals recommend avoiding "look-alike" foods, as these can become trigger foods even if they are sugar-free or fat-free.
- 2) Variety in food choices is crucial [choosing different fruits, starches, protein, etc.]. Limiting variety turns the food plan into a diet and a rigid, depriving plan of eating.
- 3) Keep the food plan simple.
- 4) Plan meals no longer than four to six hours apart. Individuals who are hyperglycemic will need to eat more often than this.
- 5) Write your food down the night before and call it in to a food sponsor. Many people will make an outreach call to their food sponsor or another program contact if they find that they must alter a food choice that was selected the night before.
- 6) Weigh yourself every three to four **months**. Many people do this during an appointment with their nutritionist. If they do this at home or at the health club, many people will discuss it first with their sponsor or will call their sponsor immediately afterwards to check in and process the number as needed.