Creating a healthier relationship with food

A healthy relationship with food fuels our physical, emotional and mental wellbeing. Take a moment to think about your relationship with food. Is it a good one?

Not sure? Here's a quick check. Below, choose which statement in each row sounds more like you:

Column A	Column B
□ I usually eat when I'm hungry	☐ I tend to eat when I'm not hungry or don't let myself eat even if I'm hungry
☐ I usually stop eating when I'm full	☐ I tend to eat past the feeling of being full or not eat enough to feel full
☐ I feel good about myself when I eat	☐ I often criticize myself for eating or what I'm eating
☐ I eat what I enjoy and enjoy what I eat	☐ I restrict what I eat or feel out of control when I eat
☐ I usually eat a variety of nutritious foods and enjoy trying new foods	☐ I only eat certain foods and generally prefer not to try new foods
☐ I feel comfortable eating with others or by myself	☐ I prefer to eat alone or in secret, and tend to avoid eating with others
☐ I tend to eat foods high in calories and low in nutrients in moderation	☐ I see foods high in calories and low in nutrients as "bad," and feel badly about myself if I eat them
☐ I might eat too much on special occasions, and I am OK with that	☐ I feel guilt, shame or embarrassment when I eat or after I eat
☐ I find ways to make myself feel better when I'm sad, angry, stressed, bored or lonely that do not involve eating or drinking	☐ I eat and/or drink to comfort or calm myself when I'm sad, angry, stressed, bored or lonely
☐ I generally feel good about myself and how I look	☐ I worry a lot about my weight and how I look, and often try to diet
☐ I typically eat nutritious foods, move my body and get enough sleep	☐ I experience fatigue, dizziness, digestive issues, and/or other physical ailments



What a healthy relationship looks like

All of the statements in Column A are signs of a healthy relationship with food. Eating enriches their body and mental health. They also have a balanced approach to food. They are comfortable knowing sometimes they may eat too much or too little, but usually eat according to their hunger, appetite and nutritional needs.

But, if you're like many people, chances are at least a few of the statements in Column B felt familiar. And, as you probably already surmised, all of the statements in Column B are signs your relationship with food could be improved.

Assessing your relationship

To get a better understanding of your relationship with food, consider journaling for a week or two to uncover potential patterns. Each time you eat or feel hungry, jot down:

- Where you were and what you were doing
- How you were feeling in the moment and why
- What you ate or why you didn't eat
- · How you felt afterward

Only use this exercise as a way to objectively review your relationship with food. Once you know the triggers, it tends to be easier to change your behavior. For example, if you find:

- You tend to eat to soothe your emotions. Think about other things you can do such as going for a walk, texting a friend, taking a few deep breaths the next time you're overcome with emotion. Also consider ways to reduce your stress in the moment and long term.
- You're so busy you end up skipping meals throughout the day, but usually feel tired and cranky. Consider prepping or buying nutritious meals and snacks in advance so you have them on hand.
- When you're not hungry, you eat mindlessly out of boredom or habit when doing a passive activity, like watching TV. Next time you're looking for something to do, skip the food in favor of another activity you enjoy. And, if you do want a snack while you're watching TV, avoid bringing the bag of chips or pint of ice cream with you. Instead, serve yourself a portion and don't get a refill.
- You feel pressured to eat or not eat a certain way in specific situations. The next time you're in that friend group or family gathering, do your best to focus on and honor your own needs. Maybe it means eating before you show up, politely saying no thank you, or splitting a meal. It might also mean limiting your time spent in those situations.

Those are just a few examples. Many people – including children and adolescents – have some tension(s) in their relationship with food. And, assuming they have access to enough food, it usually involves restricting or bingeing, such as:

- Relying on food to soothe or comfort you during difficult times, like when you are upset, stressed, sad, lonely or something else.
- Putting yourself on yo-yo and/or fad diets or exercise regimes. These are often used as "quick fixes" to lose weight or gain muscle mass or somehow transform your physique.
- Creating a reward/punishment system that ties your physical activity or actions with what you can
 or cannot eat.
- Dividing foods into "good" or "bad," and shaming yourself or feeling badly if you eat a "bad" food.
- Eating only certain foods, while being unwilling to try new foods.

All of these behaviors can be loosely described as "disordered eating." And they also can be signs of eating disorders.

Tips for caregivers

Parents and caregivers often worry about whether their child is getting enough food and nutrients, especially when a child or adolescent seems to be particularly choosy about what they will or won't eat.

First, consider your child's developmental stage. For example, it's natural for toddlers to be particularly picky, but tend to grow out of it as they mature. And research has shown that picky eating at this stage doesn't usually have any long-term health impacts. If the child is growing and maturing, chances are they will be OK.

Similarly, a pre-teen or adolescent may be trying to assert their independence as a natural part of maturing. They also may be responding to the changes their body is going through as it develops.

Also, consider what may be influencing their decision-making:

- Could they feel pressured to eat or not eat certain foods by you or someone else?
- Maybe your child is a slow eater and feels pressured to finish faster?
- Are they actually hungry when you sit down to eat? Consider cutting snacks ahead of meal times or giving them the meal as a part of their snacks.
- Are they getting food rewards for good behavior? If so, your child may begin to associate the treats as goodness and other foods as badness.
- Do you have regular meal times? And are they enjoyable or stressful typically? If not, consider creating a routine and/or ways to make the time something to look forward to and enjoy.
- Do they have a heightened sense of smell or do not like certain textures or flavors? If so, consider giving these foods in smaller doses or other forms, or offering them other foods with similar nutrients.
- Are they afraid of something, like choking or trying new things?

In any case, a simple guideline to follow is if the child or adolescent is active and growing, then they're probably getting enough nutritious foods to eat.²

If not, then there may be an underlying medical or mental health concern, such as an eating disorder. Consult with a mental health or medical professional.

Eating disorders

Eating disorders affect an estimated 8% of women and 2% of men globally – and potentially more since they are often undiagnosed or misdiagnosed.³ And an estimated 1 in 20 people with eating disorders die as a result of complications or by suicide.⁴

While eating disorders often develop in adolescence and young adulthood, eating disorders can occur at any age, including very young children. Warning signs include:

- · Dieting or following strict rules about food and exercise
- · Stunted growth and development
- Disordered eating habits, such as eating a lot of food very fast, cutting food into small pieces and eating very slowly, lying about how much you've eaten, or avoiding eating with others
- · Performance decline at work, school, sports or other activities
- · Problems with relationships and in social life
- Mental health disorders or symptoms, including depression, anxiety, suicide ideation, low selfesteem, perfectionism
- Associated medical conditions and/or health complications, such as heart problems, bone loss, diabetes, hypertension, chronic fatigue, gastrointestinal issues, among others
- Alcohol and substance use disorders

And, like mental illnesses in general, eating disorders do not discriminate. People with eating disorders come from all backgrounds. They also come in all sizes and shapes – a person living with an eating disorder may gain weight, lose weight, or remain physically like how they looked before the disorder developed. Some people have more than eating disorder, including at the same time or by transitioning from one to another.

Common eating disorders include:

- **Anorexia nervosa,** in which a person intensely fears weight gain and tries to control their weight by severely limiting food intake, overexercising or both.
- **Binge eating disorder,** in which a person overeats excessively and feels out of control. They usually do so secretly, and feel ashamed and embarrassed about it.
- **Bulimia nervosa**, in which a person binge eats, then severely limits what they eat and/or takes drastic measures such as vomiting, using laxatives or excessive exercise to avoid gaining weight.
- Avoidant restrictive food intake disorder (ARFID) in which a person 1.) has no interest in eating, 2.) avoids foods based on texture, appearance, color or smell, and/or 3.) is worried about what will happen if they eat, such as being afraid of choking, vomiting or constipation.

Recovery from an eating disorder is challenging and can take weeks, months or, in some cases, years. But it is possible, and many people achieve it, especially with early intervention. You can use this brief **screening tool** to see if you or someone in your care may be struggling with an eating disorder. Also consider seeking professional help.

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¹ University of Bristol. **Should we worry about picky eating?** Accessed November 27, 2023.

² NHS. **Fussy eaters.** Accessed November 27, 2023.

³ The American Journal of Clinical Nutrition. **Prevalence of eating disorders over the 2000–2018 period: a systematic literature review.** Accessed November 28, 2023.

⁴ National Eating Disorders Association (NEDA). **Eating disorder myths.** Accessed November 28, 2023.