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Family Experience with Eating Disorders Scale: Establishing Predictive Validity and Evaluating the Clinical Utility of its Use in Treatment

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Oral Presentation O8.2

**FAMILY EXPERIENCE WITH EATING DISORDERS SCALE:
ESTABLISHING PREDICTIVE VALIDITY AND EVALUATING THE CLINICAL UTILITY
OF ITS USE IN TREATMENT**

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The family plays a significant role in the development and maintenance of eating disorders, and may be equally influential in recovery. Identifying specific familial variables that place individuals at risk for developing an eating disorder may also be useful to engage the family in treatment and to enhance treatment outcomes. The Family Experience with Eating Disorders Scale (FEEDS) was developed because of the psychometric deficits in existing general family assessment instruments and because family dynamics specific to eating disorders were not captured in available measures. The 53-item FEEDS assesses family dynamics specific to eating disorders, including relational dynamics, interaction skills, and modeling of weight, shape, and eating. This presentation will examine additional psychometric testing of the FEEDS to assure its appropriateness for use in clinical practice. Emphasis will be placed on the unique challenges of conducting research in a clinical setting using an instrument previously used only for research purposes including issues with employing clinicians as data collectors. A client version of the FEEDS was developed for this study to test the degree of congruence in parent-child perception of family dynamics. Moreover, a scoring rubric was created for current clinical use based on previous normed data comparing parental responses between families whose child has either an eating disorder, a non-eating disorder psychiatric disorder, or no mental health condition. The degree of predictive validity pre and post treatment and at 4 session intervals will be examined. Additionally, data will be presented on the level of satisfaction with the use of the FEEDS in establishing and evaluating treatment goals. The outcome of this study may have clinical and research implications and may consequently guide the direction of therapy when familial factors are identified at the beginning of treatment and incorporated into the plan of care.