

World Eating Disorder Healthcare Rights

An AED Global Blueprint for promoting Excellence in Care through Patient-Carer-Professional Partnerships

ACCESS TO QUALITY CARE

All patients have the right to immediate care for medical and/or psychiatric instability, followed by timely and non-discriminatory access to appropriate specialty care.

RESPECT

All patients, caregivers, and family members have the right to be treated with respect throughout the assessment, planning and treatment process. Patients and carers should never be judged or stigmatized based on symptoms, behaviors or past treatment history.

INFORMED CONSENT

When making healthcare decisions, patients and caregivers have the right to full disclosure by healthcare professionals about treatment best-practices, risks, costs, expected service outcomes, other treatment options, and the training and expertise of their clinicians.

PARTICIPATION

Families and other designated carers have a right to participate in treatment as advocates for the best interests of their loved-ones. Caregiving responsibilities and degrees of participation will necessarily vary depending on the age, mental state and diagnosis of the patient, as well as the caregiver's skills, availability, personal health, resources and other circumstances.

COMMUNICATION

All patients and carers have the right to establish regular and ongoing communications through clearly defined channels. Caregivers and family members have the right to communicate their observations and concerns to professionals and to receive information when the patient's medical stability and/or psychiatric safety is threatened or at risk.

PRIVACY

All patients and carers have a right to expect their health professionals to understand, communicate, and respect the applicable privacy or age-of-consent regulations that govern the communication of health and treatment information, as well as the circumstances and conditions that may override privacy concerns or transfer authority regarding treatment decisions.

SUPPORT

All caregivers have a right to receive information, resources and support services to help them understand and carry out the expectations and responsibilities of their roles as partners in treatment.

Guiding Principles

Eating disorders are not lifestyle choices and do not discriminate by age, race, gender, sexual orientation, body size, weight, or ethnicity.

All care partners are obligated to act in the best interests of the patient.

3 Eating disorders are treatable and full recovery is possible.

Definitions

Caregiver or Carer:

The individual(s) who directly care for the needs of a patient and hold the responsibility of advocating for the patient's healthcare rights. This is often a parent or legal guardian, spouse, or other family member, but may also be a trusted friend, partner or family member 'of choice' for an adult patient.

Specialty Care:

Specialty care for eating disorders is treatment administered by professionals with eating disorder specific training and experience, and should be comprehensive, empirically-informed, safe, and leading to recovery.

Care Partners:

A team of caregivers and health professionals working together to implement a patient's treatment plan.