

Understanding Eating Behaviour during Illness

When the path falls away: How five women learned to live well with food hypersensitivities

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Introduction: Among adults the prevalence of food allergies and intolerances, also known as food hypersensitivities (FHSs), is on the rise. Health care providers (HCPs), including dietitians, lack training in the diagnosis and management of FHSs. Increasing HCPs competencies can start with an understanding of the problem from the perspective of those who live with FHSs.

Objective: The purpose of this research was to give voice to the experience of those living with FHSs and ask how they learned to live well with this condition.

Methods: A narrative inquiry approach was used. Five women were recruited through posters advertising the study in a rural northern city in British Columbia. Participants were between 34 and 49 and perceived themselves as living well with FHSs. Data collection included an information gathering questionnaire, individual semi-structured interviews, and a drawing which participants illustrated to assist storytelling. Interviews were audio-recorded and transcribed verbatim. Thematic analysis was conducted on the transcriptions. Participants reviewed themes and provided feedback on interpretation of data.

Results: The onset of FHSs brought uncertainty into the lives of participants. They moved towards wellbeing through self-directed, experimental, and transformative learning. Additionally, participants wellbeing was supported by the context of their lives, in particular, determinants of health like education and social support. Main barriers to wellbeing included anxiety and food insecurity.

Conclusions: Participants expressed a desire for person-centred health care to be heard by HCP, and have access to FHS specialists including dietitians, mental health professionals, pharmacists, and physician specialists.

Significance to the Field of Dietetics: HCPs, including dietitians, would benefit from professional development activities which focus on: (a) the diagnosis, treatment, and management of FHSs; (b) knowledge of adult learning processes; and, (c) person-centred care including the social determinants of health and interprofessional collaboration.