



When Parents Collapse: Rethinking the Burden of FBT Through a Psychodynamic Lens

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Family-Based Treatment (FBT), or the Maudsley approach, is the most strongly evidenced intervention for adolescent anorexia nervosa and restrictive eating disorders. Yet a meaningful gap exists between the model as studied and its implementation in practice — particularly in how it conceptualizes and supports parental functioning.

In its traditional form, FBT tasks parents as the primary agents of nutritional rehabilitation. Parents are expected to supervise every meal and snack, intuitively navigate their child's food refusal, and sustain this demanding role largely without formal nutritional guidance, parent coaching, or structured peer support. The implicit assumption is that parental competence and cohesion can be mobilized on demand — yet for many families, the actual starting point is exhaustion, self-doubt, marital strain, and profound anxiety about failing their child.

This workshop uses the 2025 film *If I Had Legs I'd Kick You* as a clinical lens. The film follows Linda, a psychotherapist navigating her young daughter's unexplained pediatric feeding disorder — characterized by severe food selectivity and dependence on a feeding tube, consistent with a presentation of ARFID — largely without a co-parent, formal nutritional support, or adequate institutional backing. The film depicts with clinical accuracy what parental collapse looks like: the despair of watching a child fail to meet weight goals, the shame of being reprimanded by treatment teams, and the institutional responses that compound rather than relieve parental distress.

Drawing on psychodynamic frameworks of family and parental functioning, this workshop presents a modified FBT model that integrates formalized nutritional counseling, parent coaching, peer-led support groups, and psychodynamic consultation to clinical teams — repositioning parental anxiety not as resistance, but as clinical communication.

First, several scenes from *If I Had Legs I'd Kick You* will be screened — including Linda's direct confrontation with the treatment team after her daughter fails to meet her weight target, as well as her private moments of collapse and overwhelm when no institutional support is present. Participants will reflect in pairs: What is this mother communicating? What might a psychodynamically-informed clinician recognize that a model focused purely on behavioral compliance might miss? Pairs will share observations with the wider group.

Second, the presenter will introduce a composite clinical vignette of a family in FBT whose parental functioning deteriorated progressively across treatment — mapping the accumulation of parental anxiety, spousal conflict, and shame onto the specific demands of the traditional model. Small groups will identify the point at which the treatment system failed the family and what a modified approach might have changed.

Third, participants will be introduced to the four-component modified FBT framework and will work in pairs to adapt each element — nutritional support structures, parent coaching, support group formats, psychodynamic consultation — to one of several clinical scenarios: a single parent, a family with high parental psychopathology, a family with medical comorbidity, or a family with significant cultural barriers to the model.

The workshop will close with facilitated group discussion on institutional and systemic barriers to implementing a more relationally informed approach, and how the gap between the evidence base and clinical lived reality might be meaningfully narrowed.