

Break Free from ED

An Active Guide to Recovering from Your Eating Disorder

Module I

What Are Eating Disorders?

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If you are restricting your food intake, using self-induced vomiting, over-exercising, laxatives or diuretics for weight-control, or have lost weight recently, it is important that you talk to your medical practitioner and get a full medical check-up, as there are many physical complications that can arise as a result.

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Introduction

Welcome! This workbook has been developed by clinical psychologists who specialise in the treatment of eating disorders. You can use this workbook as a self-help guide to recovery from an eating disorder or you may wish to work through the modules with a mental health professional. Families and other supports may also benefit from the workbook and may be able to help you in your recovery journey.

This set of modules is designed to help you...

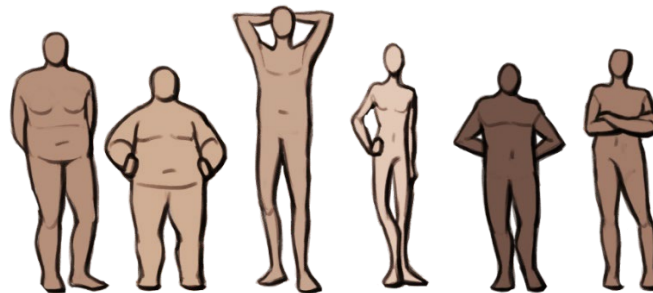
- understand eating disorders and what keeps them going
- normalise your eating behaviours
- reduce other eating disorder behaviours, e.g. binge-eating, vomiting, laxative misuse, driven exercise
- tolerate distress
- improve body image
- explore whether the beliefs you hold about your weight, shape and eating are accurate and helpful
- make a plan to keep positive changes going and prevent relapse

It is important that you download or print off the **Appendix – ‘Getting Educated about Eating Disorders’**. This Appendix contains important information for you to read alongside the content of the modules. Throughout the modules you will see this symbol indicating which page of the Appendix you need to turn to.



Eating Disorders: Myths and Facts

Let's start by getting on the same page about eating disorders and debunk some of the myths surrounding these illnesses. Eating disorders affect people of all genders, ages, races, ethnicities, sexual orientations, and socio-economic backgrounds. People with eating disorders come in all different shapes and sizes, and many people with eating disorders fall within or above the typical weight range. This means you can't tell if someone has an eating disorder simply by looking at them.




Eating disorders are not lifestyle choices, 'phases' that young people grow out of or 'diets gone too far'. They are serious mental illnesses that can have a severe impact on physical health, relationships, work, mood, and quality of life. Eating disorders carry an increased risk of medical complications and suicide. Both genetics and environment play important roles in the development of eating disorders, and they often occur alongside a range of other mental health difficulties.

It is not all doom and gloom when it comes to eating disorders. Full recovery from an eating disorder is **absolutely possible**. Early detection and treatment are important, but full recovery is possible at any age and no matter how long you have been struggling with your eating disorder.

Do I Have an Eating Disorder?

It is nearly impossible to get through a whole day without hearing some sort of dietary or exercise advice from a friend, colleague, or the media. We are constantly hearing messages telling us what is **'right'** and **'wrong'** when it comes to what types of food to eat, when to eat, how much to eat, how we should be exercising, and so on! This makes it difficult to know what **'normal'** eating and exercise really look like.

When thinking about our eating, we need to consider how often and how much we eat, what kinds of foods we eat, and our reason for eating (or not eating!) as well as the impact of our rules about eating and exercise on our mood, concentration, relationships and other important areas of life. Turn to your education pack to look at the different types of eating disorder diagnoses. 

After you have read about the eating disorder diagnoses, you can get a better idea of whether you might have symptoms of an eating disorder by filling out the following table.

	Never	Sometimes	Often	Very Often
I try to eat as little as possible, even if I am hungry				
I constantly think about eating, weight and/or shape				
I try to follow rules about what I should eat, when I should eat, and how much I should eat				
I feel distressed by my appearance				
Others tell me they are concerned about my eating or my weight				
I feel out of control around food				
I feel guilty when I eat something I think I shouldn't				
I eat unusually large amounts of food in a short period of time				
I make myself vomit or use laxatives to control my weight				
I exercise even when I am feeling tired, have an injury, have other important things to do, or just don't feel like it				
I try to avoid looking at my body e.g. in mirrors or by wearing baggy clothes				
I frequently check my appearance in mirrors, photos, or comparing to others				

If you answered *Often* or *Very Often* to many of the above items, you are in the right place. If these thoughts and behaviours are impacting your physical health, mental health, and/or quality of life, you may have an eating disorder.

Some of the key symptoms of eating disorders include:

- dietary restriction
- binge-eating
- self-induced vomiting, laxative or diuretic misuse
- driven or compulsive exercise
- placing a high value on control of eating, weight or shape



Take a moment to think about the ways in which eating disorder symptoms are affecting your life. Consider the following areas...

Physical health:

(e.g. Are you always tired? Do you feel cold all the time? Do you get bloated often, or feel dizzy?)

Relationships:

(e.g. Are your eating disorder behaviours leading to tension or disagreements with others? Do you find it hard to go to social events that involve food?)

School/study/career:

(e.g. Are you finding it hard to concentrate? It is hard to keep up with your assignments? Are you prioritising exercise over work commitments?)

Mood:

(e.g. Do you notice your moods can change quickly? Are you more anxious, irritable, sad or numb?)

Quality of life:

(e.g. Are your eating disorder behaviours getting in the way of you reaching valued goals in other areas of your life such as socialising, work, study, hobbies? Are you living your life the way you want to?)


Taking your Physical Health Seriously

Eating disorders are associated with serious, even life-threatening health complications. It is very important that all individuals engaging in any kind of disordered eating **regularly consult with a medical practitioner** to monitor and manage potential health risks and avoid more serious and irreversible effects.

If you are experiencing any of the following, please see a medical practitioner **immediately**:

- Blood in your vomit
- Dizziness and/or fainting
- Chest pain or heart palpitations
- Rapid weight changes
- Suicidal thoughts
- Any other symptoms that you are concerned about



Turn to  to learn more about the risks associated with eating disorders.

Even if you are not sure whether you're ready to make changes yet, arranging an appointment to talk to a medical practitioner is an important first step. Why not give them a call now to book an appointment?

My regular medical practitioner is: _____

My review with my medical practitioner is booked for: _____

How Did I Get Here?

People with eating disorders and their loved ones often wonder how and why the disorder developed and can often blame themselves. While it is common for eating disorders to develop after a period of inadequate nutritional intake (both intentional and through stress/illness), we know from research that there is **no single cause of eating disorders**. In fact, it is likely caused by a combination of many factors, including genetics and a person's environment.



On average, about half the risk of developing an eating disorder comes from **genetic influence**, but this risk differs from person to person. People with higher heritability need only a slightly stressful environment for an eating disorder to start, while in a protected environment, may not go on to develop an eating disorder.

Unfortunately, our society is a potentially triggering environment, with images of unachievable bodies and inaccurate and conflicting messages about diets and exercise ever present, especially on our social media. Once activated, the brain experiences changes that can keep someone stuck in their eating disorder (we will discuss this in more detail in Module 2).




 provides more information on the neurobiology of eating disorders.

FACT: Research shows that people who read this handout show improvement in their symptoms!

Recovery is Possible!

Research tells us that full recovery from an eating disorder is possible. With adequate re-nourishment and learning, the brain and body can return to healthy functioning and unhelpful genes can be ‘turned down’ or even off! Adequate nutrition and supportive environments will promote thriving across all life domains.

In this workbook we are going to focus on strategies that come from one of the leading evidence-based treatments, **cognitive-behavioural therapy for eating disorders (CBT-ED)**. **Evidence-based** means that CBT-ED has been shown to be effective in reducing eating disorder symptoms in scientific research. The focus of CBT-ED is on the **‘here and now’** and modules involve working to change the behaviours and thoughts (cognitions) that keep eating disorders going. CBT-ED is not the only evidence-based treatment for eating disorders – however, no treatment has been shown to be *more effective* than CBT-ED for adults. For young people, family-based treatment (FBT) has the strongest evidence base. 

For some people, self-help might offer just the right amount of support to recover. For others, it might not be enough, and it may be necessary to work alongside a mental health professional.

Ready, Set, Action!

There has been a lot of research exploring the factors that influence whether or not someone is likely to recover from an eating disorder. Interestingly, most of the factors we predict to be important, like age, gender, diagnosis, duration of illness, or weight, **do not** significantly impact rates of recovery!

The single most consistent predictor of overcoming an eating disorder is actually how quickly you can get started on making **early behavioural changes**. This means giving the modules a go, testing out the strategies, and making changes to your eating. You already know what it feels like to do what you’re doing now, why not try doing something different?

Before you get started, we encourage you to consider whether this is the right time and whether there are people you can ask for support as you work towards recovery.

Many people with eating disorders tend to focus on what they have not done well rather than focussing on progress and this can lead to setbacks. We also know that just tracking your progress leads to improved outcomes. From Module 4 onwards, you will see our **‘Progress Tracker’**, where you can record the frequency of your symptoms from week to week. Research tells us that change is not linear, symptoms do not improve neatly each week. Some weeks, your symptoms may increase, and during others, they will decrease as you practise and gain confidence with your new strategies. We encourage you to keep at it, as progress usually becomes smoother over time!



A Word on Distress

It is completely normal to feel apprehensive or anxious about the idea of making changes to your eating disorder behaviours. While distress can be very uncomfortable, we know that it is safe to experience these feelings and they are likely to reduce over time. However, some people experience distress quite intensely and may use things like alcohol, drugs, or self-harm to try to manage their distress. Using behaviours like this to 'numb' or avoid emotions gets in the way of learning how to accept and reduce distress and will prevent you from getting the most benefit from this workbook. These behaviours can also be quite dangerous. If you find that tolerating intense feelings of distress is a problem for you, then we encourage you to work through the modules alongside a mental health practitioner. We also encourage you to read our **'Facing Your Feelings'** modules, a short, 4-session guide to sitting with, accepting and improving distress.

What to Expect from this Workbook

When using self-help materials, some people might skip sections or complete things in a different order. The modules in this workbook have been designed to be completed in the order they appear. Research tells us that eating disorder symptoms can change over time, so we encourage you to read through all the modules even if some don't seem to apply directly to you.

The following modules make up this workbook:

- Module 1: What Are Eating Disorders?
- Module 2: What Keeps Eating Disorders Going?
- Module 3: Understanding the Number on the Scale
- Module 4: Understanding Your Eating
- Module 5: Food and Energy
- Module 6: Eating for Recovery: Part 1
- Module 7: Eating for Recovery: Part 2
- Module 8: Binge Eating
- Module 9: Purging
- Module 10: Driven Exercise
- Module 11: Body Image 1: Body Avoidance
- Module 12: Body Image 2: Body Checking
- Module 13: Core Beliefs
- Module 14: Maintaining Gains and Dealing with Setbacks
- APPENDIX: Getting Educated about Eating Disorders

Some of the content of these modules may be challenging at times, and we encourage you to keep going until you reach the end so you can get the most benefit. Whether you have some, many, or all the symptoms of an eating disorder, this workbook can help!

Module Summary

- It is normal to experience some concern about your eating, weight and shape.
- When these concerns become extreme, eating disorder symptoms can develop.
- Eating disorders impact your physical health, your psychological wellbeing, your relationships and overall quality of life.
- Recovery is possible! Recovery can only start by doing things differently, even when you are feeling anxious. You can start by working through these modules!
- Don't forget to print off the 'Getting Educated about Eating Disorders' package as we will be referring to it throughout the modules.

Coming up...What Keeps Eating Disorders Going?

About the Modules

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These are some of the professional references used to create the modules in this information package.

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IMAGES

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