



# Overcoming Disordered Eating

## Information Pack B

### *In Charge...Mindset Matters*

#### Module 2

### **Challenging Unhelpful Thinking**

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This is the second module of Information Pack B, which provides information and strategies to help you start changing the *thoughts* associated with your disordered eating and weight control habits. We recommend that you do not proceed with this Information Pack unless you have worked through Information Pack A, which offers strategies to change your disordered *behaviours*. The Information Packs have been designed to be read in order. We suggest that you work through all the modules in this Information Pack in order.

*If you do think you might suffer from an eating disorder, it is important that you talk to your General Practitioner, as there are many physical complications that can arise from being at an unhealthy low weight or from losing weight very quickly, or from purging. We advise you to seek professional help with working on an eating disorder.*

*If you use any extreme weight control behaviours – even rarely – you should also see your General Practitioner for a full medical check-up, as your health might be compromised. Such extreme measures include:*

- extreme food restriction/fasting (and/or rapid weight loss)
- purging (self-induced vomiting, misuse of laxatives or diuretics)
- extreme exercise

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## Introduction

In Module 1 we looked at how you over-evaluated your ability to control your eating, weight and shape. In this module we will be helping you identify and challenge the thinking that keeps your disordered eating going – not just your over-evaluation of body shape and weight, but the thoughts that directly trigger binge eating, restricting, purging.

## The Thinking-Feeling Connection

It is common for people with eating disorders to say: “I feel so bad when I eat one piece of cake that I binge” or “Losing 5 kg. will make me feel good” or “My dad made me feel guilty when he asked where the leftover pizza went”. We assume our feelings and behaviours are automatic, and are generated by situations or other people. But if we examine our feelings more closely, we can see that they are linked to the way we think. First, let’s look at some of the kinds of thoughts we have.

### Automatic Thoughts

We all have thoughts, beliefs, and assumptions which are mostly out of awareness. It’s a bit like riding a bike or driving a car. We don’t think in detail about how to ride or drive we just do it. We are not conscious of the processes involved, unless we really focus on what we’re doing. Likewise, there is so much going on in our thought processes that much of our thinking is habitual and automatic. We will be referring to these as **Automatic Thoughts**. Automatic thoughts play a very important part in our emotional well-being. Let’s have a closer look at automatic thoughts.

There are three kinds of automatic thoughts:

**Neutral thoughts**, e.g., “I think I will go shopping”

**Positive thoughts**, e.g., “This is something I can do really well”

**Negative thoughts**, e.g., “I’m such a fat pig”

Automatic thoughts often reflect worries and concerns, however they can be about anything at all – anything we’ve seen, heard or learned. It is the negative automatic thoughts that can cause us emotional distress, especially when they occur frequently. People with disordered eating and body image concerns frequently think negatively about themselves, and these thoughts often relate to their shape, weight and their ability to control their eating.

We are not used to slowing down our thoughts, however it is really useful to be able to take a step back and take a ‘helicopter view’ of your thinking. In fact, this is an important skill that will help you challenge your disordered eating. Are you aware of any of your own negative automatic thoughts? See if you can jot some of them down.

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### How thoughts influence feelings and behaviours

We think all of the time, and our thoughts influence the way we feel and how we respond to other people and to what happens around us. However, because we are not usually aware of our thoughts, we may not realise how much they are influencing our feelings and our behaviours. When we react to a situation, it’s not usually the actual situation that makes us feel the way we do, it’s the way we *perceive*, or *think about* the situation. Let’s look at two examples:



After 3 months, Rob lost 5 kg. by going to the gym three times a week (Activating event, or situation). He felt proud and good about himself (Consequence).

After 3 months, Rick lost 5 kg. by going to the gym three times a week (Activating event, or situation). He felt unhappy and decided to go for a 30 km. bike ride at the weekend to burn up more energy (Consequence).

Here we have exactly the same situation, so why have Rob and Rick reacted so differently? The explanation lies in their thinking. Rob and Rick are thinking about the situation in very different ways.

Rob might be thinking something like, “that is a great result”, “I worked really hard so it is nice to get rewarded”, “I fell so much fitter, “5kg in a month is a good result”” (Beliefs, or thoughts).

Rick, a guy with an eating disorder, might be thinking something like, “I’m such a failure” “I’m not buff enough”, “I should have spent longer at the gym”, “I don’t deserve to go out”, “I should have lost 10kg” (Beliefs, or thoughts)

Do you see how different ways of thinking might affect how someone feels? How do you think that Rob’s thinking affects how he feels? How does Rick’s thinking affect how he feels? They may be focused on their feelings and completely unaware of their thoughts, but their feelings are strongly affected by their thoughts.

## Unhelpful thinking styles

People with eating disorders often default to Automatic Thinking that is made up of unhelpful thinking styles, particularly in relation to eating, weight and shape. Here are some unhelpful thinking styles:

**All-or-nothing thinking, or black-and-white thinking:** This involves only seeing one extreme or the other. Things are seen as good or bad, right or wrong – there are no shades of grey. E.g., “I’ve broken a dietary rule – I’ve blown it. I ate one biscuit so I may as well eat 10”.

**Mental Filter:** This involves ‘filtering in’ and ‘filtering out’ process – a kind of tunnel vision, with a focus on one aspect of a situation and ignoring the rest. E.g., “I’ve gained 2 kg – everyone thinks I’m fat” (ignoring the fact she was asked out on a date last week and her friends were praising a recent photo of her).

**Jumping to conclusion:** We do this when we assume we know what someone else is thinking (mind reading) and when we make assumptions about what will happen in the future (predictive thinking). E.g., “She probably thinks I’m fat and lazy as my weight has gone up 400 grams” or “If I eat more than 1200 calories a day my weight will keep going up forever”.

**Catastrophising:** This occurs when we blow things out of proportion and view the situation as terrible, awful horrible, even when the reality is that the problem itself is quite small. E.g., “If I don’t stay thin, nobody will ever find me attractive and all my friends will reject me and I’ll be depressed forever”.

**Shoulding & Musting:** People with eating disorders often put unreasonable pressure on themselves. Some of these statements are not unhelpful (e.g., “I shouldn’t drink and drive”) but people with disordered eating and body image often create unrealistic expectations. E.g., “I should never eat carbohydrates”.

**Overgeneralisation:** This is when you take one instance and impose it on all current and future situations. A clue is when you start using “You always...” or “I never...”. E.g., “I always binge when I eat bread”.

**Labelling:** People with disordered eating are often very harsh on themselves, calling themselves nasty names. E.g., “I’m a pig for eating breakfast”.



**Emotional reasoning:** This is when you base your view of yourself on the way you're feeling. E.g., "I feel disgusting so I must have gained weight" or "I feel guilty for eating that muffin – I know my boyfriend will dump me".

**Magnification & minimisation:** This style involves magnifying positive attributes of other people and minimising you own. E.g., "She said I was handsome, but that doesn't count, as she's nice to everyone".

Unhelpful thinking such as biased expectations, negative self-evaluations, and unhelpful thinking styles affect your attitudes about eating, body shape and weight, and your feelings. We all think in these ways from time to time, however if you find yourself using these thinking styles *frequently* you might find that it is contributing to your experiencing negative feelings, which may in turn keep the eating disorder going. In what unhelpful ways do you think about yourself and the world in relation to your eating disorder?

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### What am I feeling?

It is often difficult to know exactly what we are feeling, and sometimes it can be hard to put it into words. The list below has some words that describe feelings, and this might be a useful starting point in helping you understand the connection between thoughts and feelings.

Unhappy	Annoyed	Angry	Frightened
Depressed	Happy	Tense	Anxious
Uneasy	Panicky	Calm	Scared
Exhilarated	Joyful	Keyed-up	Cheerful
Enraged	Excited	Irritated	Frustrated
Nervous	Sad	Euphoric	Tired
Flat	Uneasy	Discouraged	Mad



This is only a short list but it gives you an idea about the kind of words we could use to describe feelings.

### Feelings are not Thoughts

When we first try to distinguish thoughts from feelings, it can be easy to confuse them. We might be used to talking about thoughts and feelings as being part of the same experience, but it is more helpful to separate them and remember that *feelings are not thoughts*. For example, you might hear someone saying something like, "I feel like I'm going to overeat" when they're actually *thinking*, "I am going to overeat" and *feeling* terrified. It stands to reason that if negative thoughts lead to negative feelings, we should be able to modify the way we think to improve the way we feel! Let's see how that can be done.





## ABC Analysis

In order to minimise unhelpful thinking, it is useful to become more aware of when we have negative thoughts. We've mentioned how much of our thought processes are automatic – so we need to work at becoming more conscious in 'real time'. One way to do this is to do what we call an 'ABC Analysis'.

First we need to identify the 'A', the **A**ctivating Event – that is, a situation that triggered your feeling unhappy or distressed. Next it is usually easiest to identify the 'C' – that is, the **C**onsequences (how you felt and what you did). Lastly, we need to identify the 'B' – that is, the **B**eliefs or thoughts that form the link between the **A**ctivating Event and the **C**onsequences. Doing the ABC analysis is an important first step towards challenging your thinking related to the way you over-evaluate eating, weight and shape. We do this by completing a Thought Diary. Here we have an example of the ABC analysis in a Thought Diary.

### Thought Diary (Example)

<p><b>A Activating Event</b> This may include an actual event or situation, a thought, mental picture or physical trigger</p> <p><i>My weight has gone up by 500 g</i></p>	<p><b>B Beliefs</b></p> <ol style="list-style-type: none"> <li>1. List all self-statements that link A to C. Ask yourself: "What was I thinking?" "What thoughts were going through my head?"</li> <li>2. Find the most distressing (hot) thought and underline it.</li> <li>3. Rate how much you believe this thought (0 to 100)</li> </ol> <p><u><i>If I hadn't eaten the chips I wouldn't have gained weight</i></u>      95%</p> <p><i>I'm a fat pig</i></p> <p><i>I must eat less than 1000 calories a day</i></p> <p><i>I'm going to be huge!</i></p>
<p><b>C Consequences</b></p> <ol style="list-style-type: none"> <li>1. Write down words describing how you feel.</li> <li>2. Underline the one that is most associated with the Activating event (A)</li> <li>3. Rate the intensity of those feeling (0 to 100)</li> </ol> <p><i>Feel stressed</i></p> <p><u><i>Anxious (90%)</i></u></p> <p><i>Disgusted</i></p> <p>4. Jot down any physical sensations you experienced or actions carried out.</p> <p><i>My heart is racing</i></p> <p><i>I haven't eaten since I weighed myself</i></p>	<p><b>Unhelpful thinking Styles</b></p> <p>Do you recognise any unhelpful thinking styles you used? (Mental filter; jumping to conclusions; catastrophising, black &amp; white thinking; shoulding &amp; musting; overgeneralisation; labelling; emotional reasoning; minimising &amp; magnifying)</p> <p><i>Jumping to conclusions</i></p> <p><i>Labelling</i></p> <p><i>Shoulding and musting</i></p>

Can you think of a situation when you recently felt distressed or unhappy? Try to think of a situation that was related to your overevaluation of control over shape, weight or eating. It will be helpful to work out your own ABC connection. Just complete the Thought Diary below, writing a few words to describe the situation (**A**ctivating Event), your thoughts (**B**eliefs) and what you felt and did (**C**onsequences).





## ‘D’ - for Detective work and Disputation

We have established that it is our thoughts, and often unhelpful thinking styles, that influence our how we feel and how we behave (the Thought-Feeling connection). It is now time to challenge those pesky old thoughts.

Imagine that your thoughts are being investigated and you are a **detective** in court, being asked to produce evidence for or against those thoughts. Like any good detective, you will need to sort out the facts. You will need to consider the following:

- What evidence is there that my thoughts are true?
- How do I know they are true?
- What evidence is there that they are not true?
- Are there any other facts I’ve overlooked?

Now you need to take the role of a lawyer, asking questions to **dispute** or challenge those thoughts. A useful line of questioning includes looking at other ways of thinking about the situation.

- How might someone else think about this situation?
- How might I view the situation if I didn’t have disordered eating and body image?
- What other explanations could there be?
- Am I overlooking something?

Detective work and disputation are about being objective, and analysing and evaluating our thoughts, rather than accepting them as true and believing them without question.

On Page 5 we provided an example of a Thought Diary, using the ABC analysis. Bellow we continue with that example to work through the next steps of a Thought Diary, incorporating Detective work and Disputation.

### D. Detective Work & Disputation

**Detective work:** Now refer to the hot thought and ask, “What is the factual evidence for and against my hot thought?”

My HOT Thought	
<i>It was the chips I ate last night that caused the weight gain</i>	
Factual evidence FOR my hot thought	Factual evidence AGAINST my hot thought
<i>I didn't eat chips last week &amp; I didn't gain Chips are high in fat You're told not to eat chips when you diet</i>	<i>I have learned in therapy that a change in weight does not mean a change in body mass - weight fluctuates for lots of reasons Most of my friends eat chips and they don't worry about, or talk about, weight gain from eating chips on one occasion I have learned in therapy that just one portion of any food can't make you gain weight In reality there is no such thing as bad food just 'occasional foods' that are OK to eat sometimes</i>

**Disputation:** Use these questions to help you:

- What other ways are there of viewing the situation?
- How might someone else view the situation?
- Realistically, what is the likelihood of it happening?
- Does it really help me to think this way?
- If I didn’t have disordered eating, how might I think?
- What would you tell a friend?

*Chips are 'occasional foods' & it's OK to eat them occasionally  
Other people eat chips without worrying, and they focus on enjoying the food, not their weight  
It's not helpful - it just makes me upset  
I wouldn't even be thinking about it!  
I'd tell her to enjoy them and not be so overly concerned*



## ‘E’ for End Result

Now you are ready to ask yourself: “How can I revise my Hot Thought to take into account all the evidence I have listed? You need to weigh up all the evidence, and write out an alternative explanation. This becomes your new, balanced, helpful thought.

Then ask yourself: “How do I feel now?” Take another look at the most intense emotion you underlined in section C, and re-rate its intensity now. You may well be surprised at how much less distressing it is now. Then, thinking about all the evidence you’ve written down, re-rate how much you believe your Hot Thought. Again, it may be much lower than before you started the exercise.

This last step is crucial. The ultimate aim of doing Thought Diaries is for you to **Develop Balanced and Helpful Thoughts**. With practice, you will learn to challenge your thoughts so that eventually you will be able to go through the process in your head, without needing a Thought Diary. But for now, it is important that you work through the steps, using this tool.

Here is the completion of the example we have been working on.

### E. End Result

**Balanced Thoughts:** After looking at all the evidence for and against your hot thought, and having considered the disputation questions, replace the hot thought with helpful balanced thought(s).

*Chips are high in fats and too many of them could cause weight gain, but I only had a few so they probably didn't cause me to put on weight. Potatoes are complex carbohydrate, which is good for you.*

**Re-rate the Emotion:** re-rate the emotion you underlined in C (0-100) \_\_\_\_\_ 50 \_\_\_\_\_

**Re-rate the Hot Thought:** Read through Detective Work & Disputation.  
Now re-rate it (0-100) \_\_\_\_\_ 60 \_\_\_\_\_

Now, over the page, complete the Thought Diary you started on Page 6. You will need to practice challenging your thoughts many times before the process becomes easier and more automatic. Good luck!







### D. Detective Work & Disputation

**Detective work:** Now refer to the hot thought and ask yourself, “What is the factual evidence for and against my hot thought?”

<b>My HOT Thought</b>	
<b>Factual evidence FOR my hot thought</b>	<b>Factual evidence AGAINST my hot thought</b>

**Disputation:** Use these questions to help you:

- What other ways are there of viewing the situation?
- How might someone else view the situation?
- Realistically, what is the likelihood of it happening?
- Does it really help me to think this way?
- If I didn't have disordered eating, how might I view the situation?
- What might I tell a friend?

### E. End Result

**Balanced Thoughts:** After looking at all the evidence for and against your hot thought, and having considered the disputation questions, replace the hot thought with helpful balanced thought(s).

**Re-rate the Emotion:** re-rate the emotion you underlined in C (0-100) \_\_\_\_\_

**Re-rate the Hot Thought:** Read through Detective Work & Disputation.  
Now re-rate it (0-100) \_\_\_\_\_



## Module Summary

- Although we may think that how we feel is influenced by external events and other people, our thoughts play a large role in how we feel and behave. We have certain Automatic Thoughts that we aren't aware of, which influence the way we feel. There are many unhelpful thinking styles.
- Thoughts and feelings are connected, but they are not the same.
- It is useful to challenge our thinking conducting an ABC analysis: an **A**ctivating Event, the **B**eliefs and **C**onsequences (how we feel and behave).
- The next step is to engage in **D**etective work and **D**isputation, to develop healthy, balanced thoughts.
- We need to practice using Thought Diaries, in order to challenge the thinking that maintains our over-evaluation of eating, weight and shape and the thoughts that directly trigger binge eating, restricting, purging.

## What I Have Learned in this Module

Think about what you have learned in this module and any useful bits of information, tips or strategies that you want to remember. Write them down below so you can refer to them later.

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Think about how you might use the information you have just learned. Write down some ways in which you could make use of this information.

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*Coming Up...*

In Module 3 (Challenging Dietary Rules) we will revisit your dietary rules and offer some strategies for loosening them up



## About This Module

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### BACKGROUND AND REFERENCES

The concepts and strategies in this module have been developed from evidence-based psychological treatment of eating disorders, primarily Cognitive Behaviour Therapy (CBT). This can be found in the following:

- Fairburn, C. G. (1995) *Overcoming Binge Eating*. New York: The Guilford Press
- Fairburn, C. G., Cooper, Z., & Shafran, R. (2003) Cognitive behaviour therapy for eating disorders: a “transdiagnostic” theory and treatment. *Behaviour Research and Therapy* 41, pp 509-528
- Fairburn, C. G. (2008) *Cognitive Behavior Therapy and Eating Disorders*. New York: The Guilford Press

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