

Eating Disorder Intuitive Therapy (EDIT)[™]

EDIT[™] Certified Training Manual

Developed and Presented by “Dr. Dorie” McCubbrey, MEd, PhD, LPC, CEDS

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info@EDITcertified.com • www.EDITcertified.com

About Dr. Dorie

- PhD – Biomedical Engineering (University of Michigan)
- MEd – Clinical Counseling (University of Akron)
- LPC – Licensed Professional Counselor (Colorado)
- LAC – Licensed Addiction Counselor (Colorado)
- CEDS – Certified Eating Disorder Specialist (IAEDP)
- Bestselling Author – Two Books; currently writing Third Book
- Media Features – ABC News, US News & World Report
- Former Board Member – National Speakers Association
- Volunteer – Several Eating Disorder Non-Profit Organizations
- Member & Approved Supervisor – IAEDP
- Owner & Clinical Director – Positive Pathways Counseling
- Creator – Eating Disorder Intuitive Therapy (EDIT)™
- Founder and President – EDIT™ Training Institute LLC



Dr. Dorie's True Self



- loves animals – especially cats – and still dresses as one on Halloween!
- enjoys gardening – perennials, herbs, tomatoes, peppers, greens... and her favorite, cucumbers!
- started dieting at age 10... developed anorexia by age 11... “gained weight” but still struggled with chronic dieting, bulimia and binge eating disorder until age 27
- started therapy in her 20’s... and learned 5 messages of recovery from her 3 companion animals
- these 5 messages came to be called EDIT™ – which she often shouted from mountain tops with her dog Shakti
- feels most connected with her intuitive wisdom when she’s in nature, and loves hiking in the mountains of Colorado
- currently has two companion animals – her very unique cat Shiva, and her special puppy Atman!
- leopard print is her “favorite color” – which she wears as a symbol of her recovery and being seen as her True Self!

History of EDIT™

Dr. Dorie's Recovery Journey + 20 Years of Clinical Work

1994 - “messengers on the path”... (Dorie's own journey of recovery)

1995 - founding of Positive Pathways (in Northeast Ohio)

1998 - first book published: *Dr. Dorie's Don't Diet Book*

1999 - relocation of Positive Pathways to Colorado

2003 - second book published: *How Much Does Your Soul Weigh*

2005 - approached by Wellness Professionals to be “trained in her method”

2008 - began supervising and training Counselor Interns

2012 - renamed “her method” – **Eating Disorder Intuitive Therapy (EDIT)™**

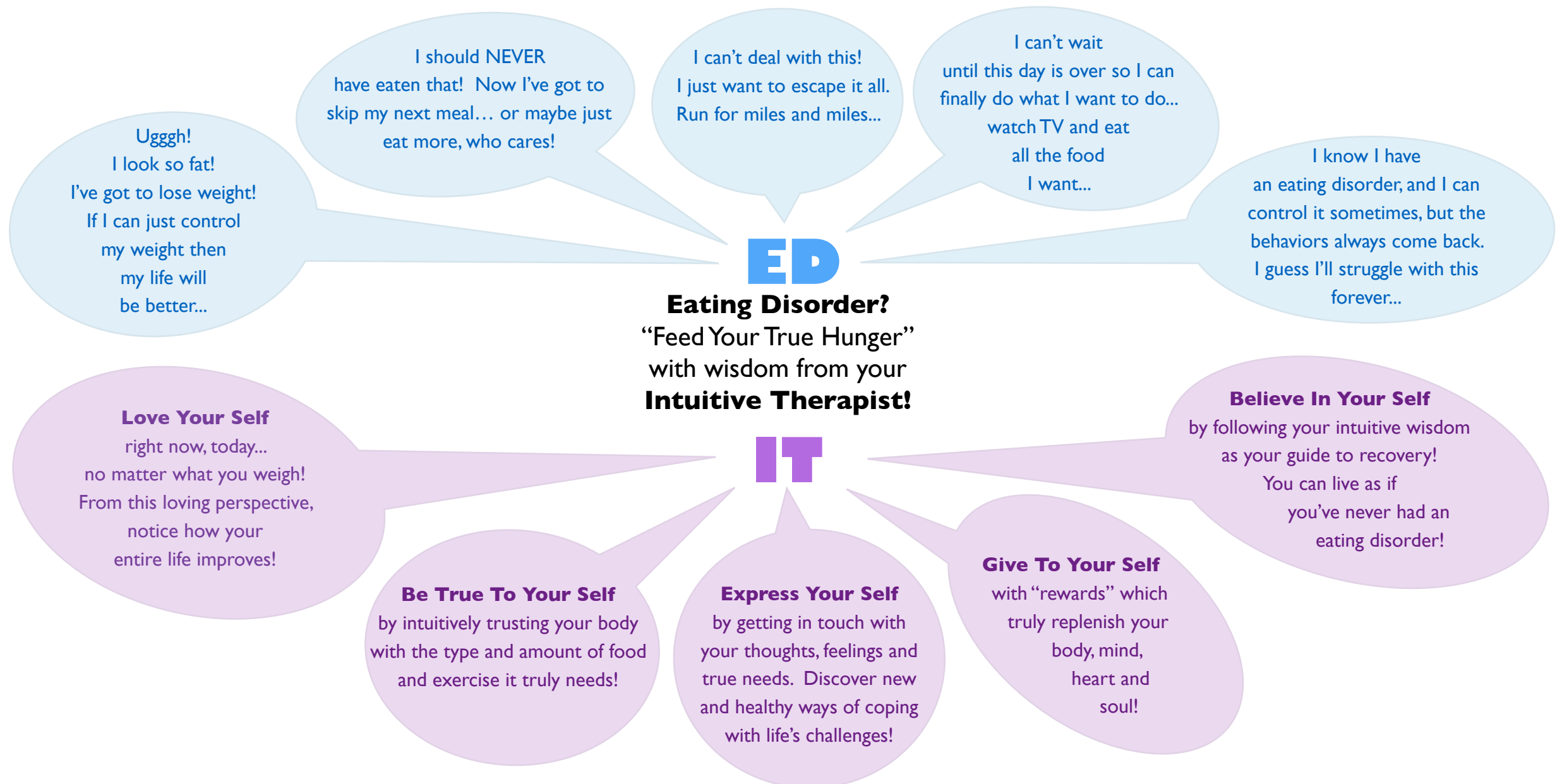
2013 - developed **EDIT™ Worksheets** and the **EDIT™ Certified** training program

2015 - launch of the **EDITcertified.com** website and the **EDIT™ Certified** retreat

LEARN MORE ABOUT THE RETREAT: [EDITcertified.com/edit-retreat](https://editcertified.com/edit-retreat)

What is EDIT™?

Feeding the Eating Disorder Mind with “Thought ED-ITs”



What is EDIT™?

Release of the “false self” and Recovery of the “True Self”

from ED... (false self)

“feeling fat”
general self-criticism
outer-directed/people-pleasing
diets/weight loss focus
disconnected from feelings
using food to change mood
self-sacrificing/selfless
minimal self-care



Love Your Self
Be True To Your Self
Express Your Self
Give To Your Self
Believe In Your Self

...to IT (True Self)

Nurturing Body Image
Self-Compassion
Inner-Guided/Intuitive
Intuitive Eating/Exercise
Aware of Feelings/Needs
Healthy Coping Strategies
Giving to Enhance Self
Intuitive Self-Care

What is EDIT™?

Comprehensive Outpatient Eating Disorder Treatment

EDIT™ has roots in:

CBT / DBT / ACT
Voice Dialogue
Jungian
Transpersonal
Intuitive Eating
Mindfulness
...and many more



Love Your Self
Be True To Your Self
Express Your Self
Give To Your Self
Believe In Your Self

EDIT™ techniques address:

Values/Identity
Body Image
Nutrition/Fitness
Coping Skills
Core Issues
Holistic Self-Care
Relapse Prevention

Ideal Clients for EDIT™

- Anorexia Nervosa - rule out medical risks
- Bulimia Nervosa - assess symptom severity
- Binge Eating Disorder - generally most ideal
- Food Addiction and Others - case-specific

*KNOW WHEN TO REFER TO A HIGHER LEVEL OF CARE
OR DESIGN A CUSTOMIZED INTENSIVE OUTPATIENT PROGRAM (IOP)*

- **DSM-5™ Diagnostic Criteria: Anorexia Nervosa**

- A. Restriction of energy intake relative to requirements, leading to a significantly low body weight in context of age, sex, developmental trajectory, and physical health. *Significantly low body weight* is defined as a weight that is less than minimally normal or, for children and adolescents, less than that minimally expected.
- B. Intense fear of gaining weight or of becoming fat, or persistent behavior that interferes with weight gain, even though at a significantly low weight.
- C. Disturbance in the way in which one's body weight or shape is experienced, undue influence of body weight or shape on self-evaluation, or persistent lack or recognition of the seriousness of the current low body weight.
 - **Restricting type:** During the last 3 months, the individual has not engaged in recurrent episodes of binge eating or purging behavior (i.e., self-induced vomiting or the misuse of laxatives, diuretics, or enemas). This subtype describes presentations in which weight loss is accomplished primarily through dieting, fasting, and/or excessive exercise.
 - **Binge-eating/purging type:** During the last 3 months, the individual has engaged in recurrent episodes of binge eating or purging behavior (i.e., self-induced vomiting or the misuse of laxatives, diuretics or enemas).

- Dr. Dorie's Diagnostic Notes:
 - differentiate Anorexia Nervosa (purging type) from Bulimia Nervosa
 - rule of thumb for “significantly low body weight” in adults:
 - women: 100 lbs for every 5 feet, and 3 lbs for every 1 inch
i.e., height is 5'4” and weight is 112 lbs or below
 - men: 100 lbs for every 5 feet, and 5 lbs for every 1 inch
i.e., height is 5'8” and weight is 140 lbs or below
 - pay attention to Criteria B & C – this is the client's “voice of ED”
 - note some clients may have the “Anorexia mind” but are within or about a normal weight range – see **Atypical Anorexia Nervosa**

- **DSM-5™ Diagnostic Criteria: Bulimia Nervosa**

- A. Recurrent episodes of binge eating. An episode of binge eating is characterized by both of the following:
 - 1. Eating, in a discrete period of time (e.g., within any 2-hour period), an amount of food that is definitely larger than what most individuals would eat in a similar period of time under similar circumstances.
 - 2. A sense of lack of control over eating during the episode (e.g., a feeling that one cannot stop eating or control what or how much one is eating).
- B. Recurrent inappropriate compensatory behaviors in order to prevent weight gain, such as self-induced vomiting; misuse of laxatives, diuretics, or other medications; fasting; or excessive exercise.
- C. The binge eating and inappropriate compensatory mechanisms both occur, on average, at least once a week for 3 months.
- D. Self-evaluation is unduly influenced by body shape and weight.
- E. The disturbance does not occur during episodes of anorexia nervosa.
 - The minimum severity is based on the frequency of inappropriate compensatory behaviors: **mild** (an average of 1-3 episodes per week); **moderate** (4-7 episodes per week); **severe** (8-13 episodes); **extreme** (an average of 14 or more episodes per week)

- Dr. Dorie's Diagnostic Notes:
 - differentiate Bulimia Nervosa from Anorexia Nervosa (purging type)
 - differentiate Bulimia Nervosa (mild) from Binge-Eating Disorder
 - note all of the “inappropriate compensatory behaviors in Criteria B:
 - *self-induced vomiting (sometimes can occur involuntarily)*
 - *misuse of laxatives, diuretics, or other medications (watch for diet pills, cleansing teas)*
 - *fasting (watch for meal-skipping, juice cleanses, or abstinence meal plans)*
 - *excessive exercise (using exercise to burn calories, or only able to eat after exercising)*
 - pay attention to Criteria D – this is the client's “voice of ED”
 - note if client purges but does not binge eat – see **Purging Disorder**

- **DSM-5™ Diagnostic Criteria: Binge-Eating Disorder**
 - A. Recurrent episodes of binge eating. An episode of binge eating is characterized by both of the following:
 - 1. Eating, in a discrete period of time (e.g., within any 2-hour period), an amount of food that is definitely larger than what most individuals would eat in a similar period of time under similar circumstances.
 - 2. A sense of lack of control over eating during the episode (e.g., a feeling that one cannot stop eating or control what or how much one is eating).
 - B. The binge eating episodes are associated with three or more of the following:
 - 1. Eating much more rapidly than normal.
 - 2. Eating until feeling uncomfortably full.
 - 3. Eating large amounts of food when not feeling physically hungry.
 - 4. Eating alone because of feeling embarrassed by how much one is eating.
 - 5. Feeling disgusted with oneself, depressed, or very guilty afterward.
 - C. Marked distress regarding binge eating is present.
 - D. The binge eating occurs, on average, at least once a week for 3 months.
 - E. The binge eating is not associated with the recurrent use of inappropriate compensatory behavior as in bulimia nervosa and does not occur exclusively during the course of bulimia nervosa or anorexia nervosa.

- Dr. Dorie's Diagnostic Notes:
 - differentiate Binge-Eating Disorder from Bulimia Nervosa
 - note Criteria E: *inappropriate compensatory behaviors are not used* recurrently after binge eating, including *fasting* or *excessive exercise*
 - pay attention to Criteria B – this is the client's “voice of ED”
 - note if client uses the term “Food Addiction” to describe their behavior
 - many clients who self-label as “Food Addicts” believe they are addicted to specific foods
 - educate clients about Binge-Eating Disorder as a behavioral addiction (not to food itself)
 - focus on “intuitive structure” as a means to move away from abstinence meal plans
 - note if client does not binge frequently enough to meet the full criteria for Binge-Eating Disorder, or binge eats only at night – see **Night Eating Syndrome** etc.

- **DSM-5™ Diagnostic Criteria:**
Other Specified Feeding or Eating Disorder

1. **Atypical Anorexia Nervosa:** All of the criteria for anorexia nervosa are met, except that despite significant weight loss, the individual's weight is within or above the normal range
2. **Bulimia Nervosa (of low frequency and/or limited duration):** All of the criteria for bulimia nervosa are met, except that the binge eating and inappropriate compensatory behaviors occur, on average, less than once a week and/or for less than 3 months.
3. **Binge-Eating Disorder (of low frequency and/or limited duration):** All of the criteria for binge-eating disorder are met, except that the binge eating occurs, on average, less than once a week and/or for less than 3 months.
4. **Purging Disorder:** Recurrent purging behavior to influence weight or shape (e.g., self-induced vomiting; misuse of laxatives, diuretics or other medications) in the absence of binge eating.
5. **Night Eating Syndrome:** Recurrent episodes of binge eating, as manifested by eating after awakening from sleep or by excessive food consumption after the evening meal. There is awareness and recall of the eating. The night eating is not better explained by external influences such as changes in the individual's sleep-wake cycle or by local social norms. The night eating causes significant distress and/or impairment in functioning. The disordered pattern of eating is not better explained by binge eating disorder or another mental disorder, including substance abuse, and is not attributable to another medical disorder or to an effect of medication.

- Dr. Dorie's Overall Diagnostic Notes:
 - assign a diagnosis so that you can plan appropriate treatment
 - share the diagnosis with your client, but help them see this as a way to define their *behavior* but not *who they are*
 - recognize that clients may “switch eating disorders” throughout their recovery – i.e., from Anorexia nervosa to Bulimia Nervosa, or from Bulimia Nervosa to Binge-Eating Disorder – re-assess diagnosis often
 - also recognize that clients may have co-occurring disorders – especially Mood Disorders (i.e., Depressive Disorders and/or Anxiety Disorders), Substance Use Disorders and/or Personality Disorders
 - know the benefits and risks of pharmaceuticals, supplements and herbal remedies for the treatment of various physical, mental and emotional symptoms – refer clients to psychiatrists, physicians, naturopaths, etc.

EDIT™ Key Assumptions

- Eating Disorders (EDs) begin with diets
- ED behaviors are coping mechanisms
- ED behaviors are compulsive/controlled
- ED behaviors are a “false self” identity
- Recovery requires saying NO to diets
- Recovery replaces ED with healthy coping skills
- Recovery involves conscious choice
- Recovery is reclaiming one’s “True Self”

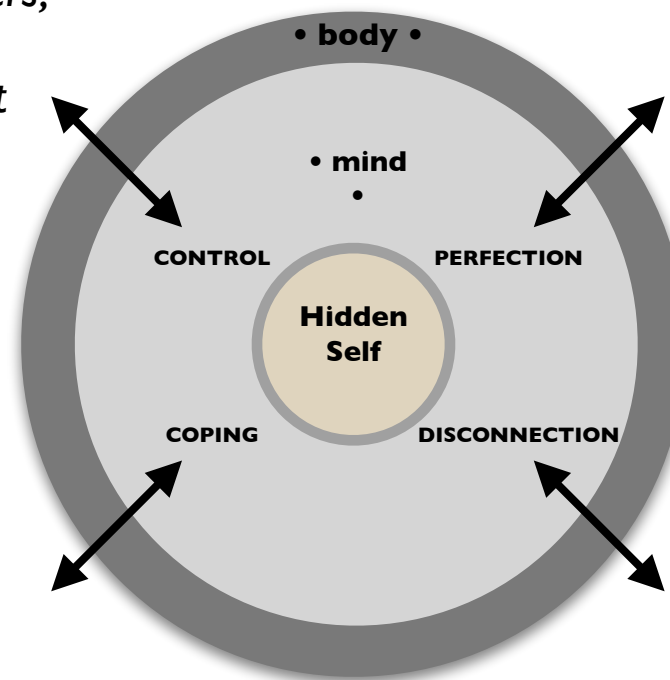
RECOVERY WISDOM IS REVEALED THROUGH THE INTUITIVE THERAPIST (IT)

What is the “false self”?

Eating Disorders (ED) arise from the “false self”

The ED mind looks to society's standards and opinions of others, then attempts to control the body with rigid demands about eating, exercise and weight

The ED body is like a shell, which is molded and shaped in attempts to achieve worldly ideals, while criticized by the ED mind, “not good enough!!!”



ED behaviors are used as a means of coping with perceived imperfection, possible past traumas, and false-self incongruence

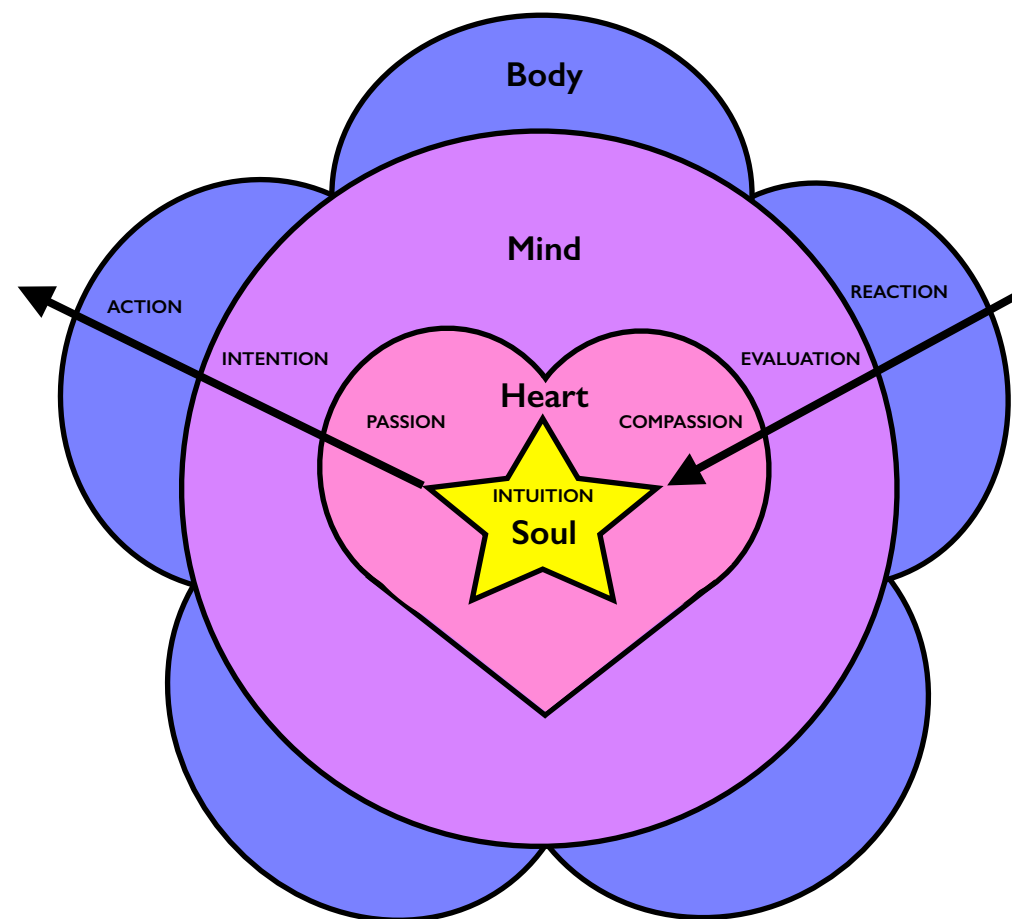
The ED mind ignores feedback from the body, avoids awareness of emotions, and imposes ED behaviors which create social isolation

What is the “True Self”?

The Intuitive Therapist (IT) recovers the “True Self”

*The INTUITIVE THERAPIST (IT)
offers “Self-Help” to facilitate full expression of the TRUE SELF,
based on the Inner Wisdom of the “Soul-Heart-Mind”
to guide the Body in the world*

*To interact in the world,
the True Self is inner-guided,
from Soul (INTUITION)
to Heart (PASSION)
to Mind (INTENTION)
to Body (ACTION)*



*In response to world events,
the True Self “goes within,”
from Body (REACTION)
to Mind (EVALUATION)
to Heart (COMPASSION)
to Soul (INTUITION)*

The EDIT™ Practitioner

- Practitioner models the voice of the Intuitive Therapist (IT) for the client
- 3C's: Compassionate, Credible, Congruent
- Client-Centered and Solution-Focused
- Practitioner guides the client to become their own Intuitive Therapist (IT)

EDIT™ PRACTITIONERS MAY BE COUNSELORS, DIETITIANS, LIFE COACHES, ETC. – AND NEED TO FOLLOW ADDITIONAL GUIDELINES FOR THEIR PROFESSION

Holistic Recovery

“lasting freedom involves
healing and reintegrating the
four parts of the Self – physical,
intellectual, emotional, spiritual”

- p. 94, Dr. Dorie's Don't Diet Book



Intuitive Recovery

“Intuition is...
our inner wisdom, sixth sense, a
hunch or gut feeling...”

*Our intuition is
the voice of our soul.”*

- p. 49, *How Much Does Your Soul Weigh?*



The EDIT™ Worksheets

- Table of Contents and Guidelines for Use
- EDIT™ Overview: 2-page client handout
- EDIT™ Assessment: 2-page intake form
- EDIT™ Principles: 55 total worksheets
- EDIT™ Resources: reading list and websites
- EDIT™ Certified Test: to be EDIT™ Certified
- Peppy's Message: a conclusion just for YOU!

*FAMILIARIZE YOURSELF WITH ALL OF THE EDIT™ WORKSHEETS
SO YOU CAN QUICKLY ACCESS THE ONES YOU NEED*

- Table of Contents is on page I of the EDIT™ Worksheets pdf file
- Use for easy location of specific worksheets and their page number in the pdf file

EDIT™ Worksheets

Table of Contents



Front Matter

p1: Table of Contents
p2: Introduction
p3: EDIT™ Overview (front side)
p4: EDIT™ Overview (back side)
p5: EDIT™ Assessment (Part I)
p6: EDIT™ Assessment (Part II)

EDIT™ Principle #1: Love Your Self

Self-Image: pp 7-13
p7: ED-IT Dialogue
p8: Thought ED-IT
p9: The Four Aspects of the True Self
p10: Roles, Talents, Interests & Beliefs
p11: My Values
p12: My Credo
p13: Affirmations
Body Image: pp 14-18
p14: Body ED-IT
p15: Challenging Body Ideals
p16: In The Mirror
p17: Finding Your Freedom Point
p18: Letter to/from Your Body

EDIT™ Principle #2: Be True To Your Self

Intuitive Living: pp 19-20
p19: Accessing Intuition
p20: Intuitive Messages
Intuitive Eating: pp 21-31
p21: The Three Reasons WHY We Eat
p22: Beginner Food Journal
p23: Nutrition Wisdom
p24: My Menu
p25: Challenging Food Rules
p26: Making Peace With Food
p27: Hunger & Fullness Gauge
p28: Intuitive Mindful Meal Process
p29: Advanced Food Journal
p30: Craving Control
p31: Intuitive Eating Flowchart
Intuitive Exercise: pp 32-35
p32: Challenging Fitness Rules
p33: Fitness Wisdom
p34: Intuitive Workout Process
p35: Walking Meditation

EDIT™ Principle #3: Express Your Self

Awareness: pp 36-38
p36: Feelings Check-In
p37: Thoughts + Feelings Check-In
p38: Thoughts + Feelings + Needs
Coping: pp 39-42
p39: The 5-Rs
p40: Interventions
p41: Intuitive Therapist Session
p42: A Letter of Hope
Healing: pp 43-46
p43: Symptoms As Messengers
p44: Unsent Letter
p45: The Mask

EDIT™ Principle #4: Give To Your Self

Self-Care Routine: pp 47-50
p47: Morning Routine
p48: Evening Routine
p49: Ways to Care for My Self
p50: Recovery Is My #1 Priority
Self-Care Practice: pp 51-53
p51: My TO-DO List
p52: Nurture Your Inner Child
p53: Gratitude List

EDIT™ Principle #5: Believe In Your Self

Recovery: pp 54-58
p54: Winning the War Within
p55: ED-IT Identities
p56: ED-IT Integration
p57: My Future Life
p58: Goodbye Letter
Success: pp 59-61
p59: Key Insights
p60: Key Strategies
p61: Relapse Prevention

Back Matter

p62: EDIT™ Resources
p63: EDIT™ Certified Test
p64: Peppy's Message

- EDIT™ Worksheets are for your personal use
- Single worksheets may be printed or emailed to clients
- Please DO NOT email the entire pdf file

EDIT™ Worksheets

Introduction



ABOUT THE CREATOR OF EDIT™ – “Dr. Dorie” McCubbrey

Eating Disorder Intuitive Therapy (EDIT)™ is the “complete recovery” treatment approach developed by “Dr. Dorie” McCubbrey, MEd, PhD, LPC, CEDS – it was initially created in 1995, following her own journey of recovery from Anorexia, Bulimia, and Binge Eating Disorder. Dr. Dorie has been a specialist in the treatment of eating disorders for more than 20 years, during which time she has further refined her EDIT™ theory and techniques. She began teaching others her methods in 2003, and in 2013 the EDIT™ Certified training program was launched, providing a standardized credentialing process for health professionals who are interested in obtaining a thorough knowledge and clinical skills to work with eating disorders.

Dr. Dorie holds a Master’s Degree in Counseling from the University of Akron, and a Doctorate in Biomedical Engineering from the University of Michigan. This unique combination of credentials allows her to address the complex psychological issues which underlie eating disorders, as well as physical issues including nutrition, intuitive eating, fitness and body image. She is a Licensed Professional Counselor and a Certified Eating Disorder Specialist (CEDS) – a credential awarded by the International Association of Eating Disorder Professionals (iaedp).

Dr. Dorie is the best-selling author of *Dr. Dorie’s Don’t Diet Book* (Positive Pathways Press, 1998), *How Much Does Your Soul Weigh* (HarperCollins, 2003), plus numerous workbooks, CDs and videos about eating disorders and weight issues. Her expert commentary has been featured in magazines including *Glamour*, *Shape* and *Natural Health*. She has also been interviewed on national television shows including the FOX News Channel. She is currently finishing work on her third book, which illustrates the application of the EDIT™ treatment approach.

Dr. Dorie’s outpatient counseling practice, Positive Pathways, is located in Denver, Colorado. At this location, she trains and supervises EDIT™ Certified Counselors and EDIT™ Counselor Interns, and she also continues to provide treatment for clients in recovery from Anorexia, Bulimia, Binge Eating Disorder, Food Addiction, Obesity and other issues with food and weight. She provides traditional outpatient therapy using the EDIT™ method, and also develops customized I-on-I Intensive Outpatient Programs (IOPs) as an alternative to group IOPs offered at most treatment centers. www.PositivePathways.com

Dr. Dorie is a nationally known retreat leader and keynote speaker, and a former board member of the National Speakers Association (NSA). She currently provides EDIT™ Certified programs in the Denver, Colorado area, and is also available for on-site training. Her interactive programs empower participants through role plays and direct application of clinical skills. EDITcertified.com/edit-certification

GUIDELINES FOR USE OF THE EDIT™ WORKSHEETS:

These worksheets are designed for use by EDIT™ Certified practitioners – or other Wellness Professionals who are in process of becoming EDIT™ Certified. If you are an individual in recovery from an eating disorder, you are welcome to use these worksheets as “Self-Help,” but be aware that this is not a substitute for treatment with an EDIT™ Certified practitioner or other professional.

To find an EDIT™ Certified practitioner, refer to: EDITcertified.com/edit-certified-directory

By using these worksheets, you agree to accept responsibility to evaluate and to use at your own risk and discretion the advice given herein. You further agree to release Dr. Dorie McCubbrey from any liability which may arise from utilization of these worksheets.

NOTE THAT THESE WORKSHEETS ARE PROTECTED BY INTERNATIONAL COPYRIGHT LAW. PURCHASE OF THESE WORKSHEETS ALLOWS A SINGLE USER TO PRINT AND UTILIZE THESE WORKSHEETS FOR THEIR CLIENTS, OR FOR THEIR OWN SELF-HELP. SINGLE WORKSHEETS MAY ALSO BE EMAILED FOR CLIENT USE. IT IS AN INFRINGEMENT OF THESE COPYRIGHT TERMS TO SHARE THIS ENTIRE PDF FILE WITH ANOTHER PARTY.

To purchase EDIT™ Worksheets & other resources, please visit: EDITcertified.com/edit-resources

- Use the two-sided EDIT™ Overview worksheets to educate your client
- Discuss the voices of ED and IT
- Review how EDIT™ guides the process of complete recovery

Don't Diet – EDIT™!

Complete Recovery from Eating Disorders is Possible
“Dr. Dorie” McCubbrey, MEd, PhD, LPC, CEDS



Eating Disorder Intuitive Therapy (EDIT)™ was developed by “Dr. Dorie” McCubbrey, MEd, PhD, LPC, CEDS as a result of her own recovery from anorexia, bulimia, binge eating disorder and obesity. Diets can lead to eating disorders and weight problems – the EDIT™ solution can lead to complete recovery and an ongoing journey of freedom! EDIT™ is an exploration of five principles, which can be illustrated as a dialogue between the voice of the Eating Disorder (ED) and the healing wisdom of the Intuitive Therapist (IT) within us all. Initially, you may only hear the voice of ED. Your EDIT™ Certified practitioner models the voice of the IT until you can hear IT within yourself:



The blue text bubbles show what the voice of ED might sound like. What does your voice of ED say?
The purple text bubbles give examples of the voice of IT. Notice the specific examples for each of the five principles of EDIT™.
What is your voice of IT saying? Is your voice of ED “talking back” to IT? What does the dialogue sound like?

EDIT™ Treatment Goals: the Five Principles of EDIT™

from ED...

“feeling fat”
general self-criticism
outer-directed/people-pleasing
diets/weight loss focus
disconnected from feelings
using food to change mood
self-sacrificing/selfless
minimal self-care
attempts to control ED
tendency to relapse

Love Your Self

Be True To Your Self

Express Your Self

Give To Your Self

Believe In Your Self

...to IT

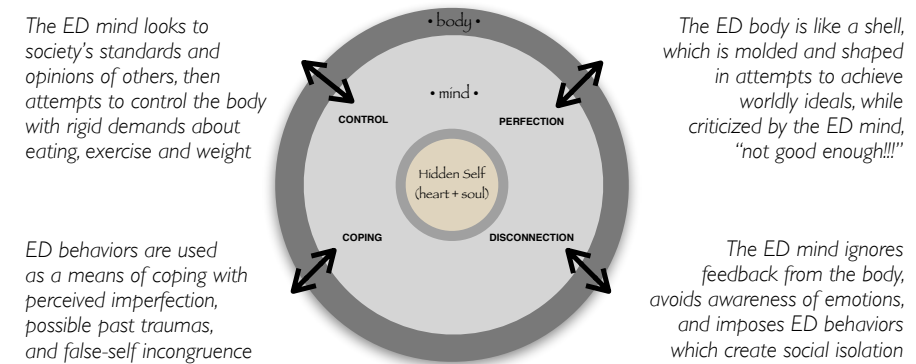
Nurturing Body Image
Self-Compassion
Inner-Guided/Intuitive
Intuitive Eating/Exercise
Aware of Feelings/Needs
Healthy Coping Strategies
Giving to Enhance Self
Intuitive Self-Care
Freedom from ED Behaviors
Complete Recovery

- Print this worksheet double-sided, if possible
- Discuss ED and the “false self”
- Explore IT and the “True Self”

EDIT™ Treatment Process: from false self to True Self

Eating Disorders (ED) arise from the “false self”

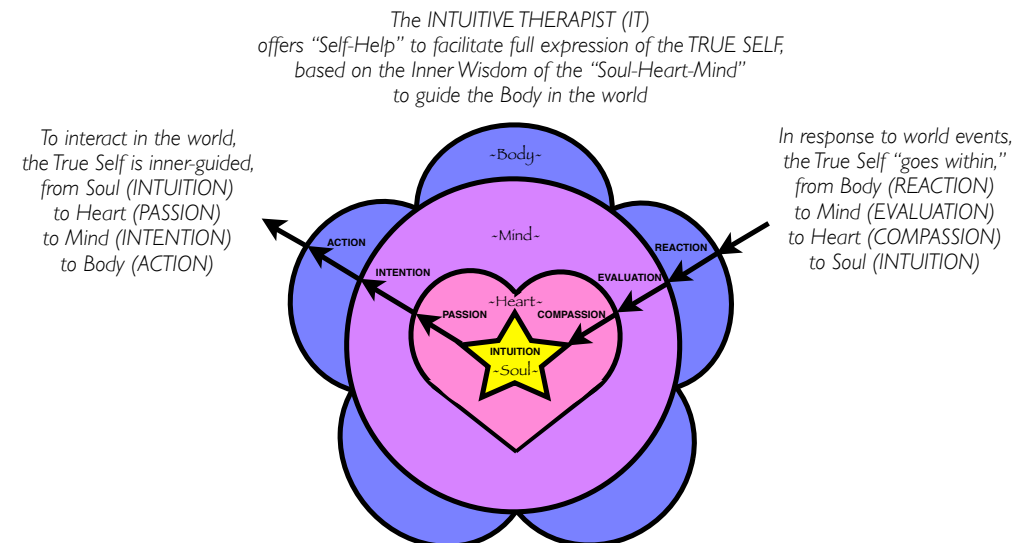
Although eating disorders are complex issues, this model of the “false self” explains a basic premise about how eating disorders can originate. In this model, the “false self” perceives the body as its identity – and the mind looks to other’s opinions and society’s standards to determine how the body should look, and what the body should do. Key elements of the personality (“heart & soul”) are hidden deep within, as the mind of “false self” judges these as unacceptable to the outside world. Eating Disorders (ED) arise when excessive emphasis is placed on controlling eating, exercise and weight, with elusive attempts to achieve perfection. There is a sense of disconnection (physical, emotional, social) – the ED mind overrides any painful messages from the body, while also avoiding emotions (heartfelt feelings are hidden within), and the individual becomes isolated. ED behaviors also become a way of coping – with the inability to achieve outer-imposed ideals, with past traumas (painful emotions are buried deep within), and with the overall incongruence of being a “false self” (heartfelt passions and soulful yearnings are also hidden within). Thus, the core issues of ED are CONTROL, PERFECTION, DISCONNECTION, COPING.



What do you relate to about the “false self” and ED? Based on this model, how can you be free of ED?

The Intuitive Therapist (IT) recovers the “True Self”

This model illustrates the concept of the INTUITIVE THERAPIST (IT), which guides the process of remembering, reclaiming and revealing the TRUE SELF. This process is also called RECOVERY, defined as “a return to a normal state of mind and health.” This “normal” state is the TRUE SELF – an interconnected “Soul-Heart-Mind-Body” – which interacts in the world but is not driven by it. The SOUL is one’s “core essence,” and is the source of INTUITION – one’s “sixth sense,” an “inner knowing,” a “gut feeling.” The HEART links emotions with intuition, and relays this to the MIND, which sets “soulful-heartfelt” intentions for the BODY. The INTUITIVE THERAPIST (IT) is the inner-guided “Soul-Heart-Mind,” which facilitates actions of the Body, to create full expression of the TRUE SELF from the inside-out. IT compassionately guides the restoration of the holistic integrity of the True Self, by healing the separation from formerly hidden parts, while honoring all parts as valuable and essential. In this process of recovery of the True Self, the “false self” (and the voice of ED) fade into the “nothingness from which they came.” In this way, complete recovery from eating disorders is possible!



What are your reflections about this model of the TRUE SELF and how RECOVERY occurs?

- Give the EDIT™ Assessment during client's intake and conclusion session
- Self-rating of the client's current ED behaviors
- Use to assist in making the client's ED diagnosis

EDIT™ Assessment

Part I:

Self-Rating of Current Eating Disorder Behaviors



Answer YES or NO to the following questions based on your habits and attitudes TODAY.
Make notes about any of the questions that affected you in the PAST.

- | | | |
|--|-----|----|
| 1. I use diet pills, metabolism-boosting pills, or other weight-loss aids. | YES | NO |
| 2. I have been on and off more diets than I can count. | YES | NO |
| 3. I am very aware of my intake of fat, carbohydrate and/or calories. | YES | NO |
| 4. I have recently lost and/or gained more than 30 pounds. | YES | NO |
| 5. My mood improves when I feel in control of my weight/eating. | YES | NO |
| 6. I feel guilty if I eat too much or if I eat foods I think I shouldn't. | YES | NO |
| 7. There are certain foods I try to never eat (i.e., fried foods, desserts). | YES | NO |
| 8. I hide food or lie to others about how much I actually eat. | YES | NO |
| 9. I sometimes feel unable to stop eating once I start. | YES | NO |
| 10. There are things I hate about the shape and/or size of my body. | YES | NO |
| 11. I use food as a comfort or an escape from my problems. | YES | NO |
| 12. I often skip meals and sometimes go an entire day without eating. | YES | NO |
| 13. My eating and/or exercise patterns are making me somewhat isolated. | YES | NO |
| 14. I have a difficult time identifying or handling my feelings. | YES | NO |
| 15. I spend a great deal of time planning meals and thinking about food. | YES | NO |
| 16. I avoid social situations because I'm ashamed of my eating / weight. | YES | NO |
| 17. I worry about gaining weight or becoming fat. | YES | NO |
| 18. I just don't feel right unless I exercise every day. | YES | NO |
| 19. I sometimes vomit after meals or use laxatives to control my weight. | YES | NO |
| 20. Once I reach my goal weight, then I'll feel good about myself. | YES | NO |

For interpretation of this assessment, including an eating disorder diagnosis, consult an EDIT™ Certified practitioner.

- Give the EDIT™ Assessment during client's intake and conclusion session
- Self-rating of the client's current ED recovery practices
- Use for client's treatment planning and action steps

EDIT™ Assessment

Part II:

Self-Rating of Eating Disorder Recovery Practices



Using the scale below, use an X to rate where you are generally, NOW:

-10=VERY NEGATIVE / LOW, 0=NEUTRAL, +10=VERY POSITIVE / HIGH

Body Image (overall perceptions about how I look):

-10 ----- 0 ----- +10

Self-Esteem (sense of identity and satisfaction with who I am):

-10 ----- 0 ----- +10

Self-Direction (ability to be "inner-guided" versus "people-pleasing"):

-10 ----- 0 ----- +10

Intuitive Eating Abilities (use of intuition versus "food rules" to guide meal choices):

-10 ----- 0 ----- +10

Intuitive Exercise Abilities (use of intuition versus "fitness rules" to guide workout choices):

-10 ----- 0 ----- +10

Emotional Awareness (ability to identify thoughts/feelings/needs):

-10 ----- 0 ----- +10

Coping Skills (knowledge and use of non-eating-disordered coping strategies):

-10 ----- 0 ----- +10

Healing of Core Issues (general attitudes about life experiences, including any past traumas):

-10 ----- 0 ----- +10

Physical Self-Care (nurturing of the body, attendance to medical needs):

-10 ----- 0 ----- +10

Intellectual Self-Care (nurturing of the mind, education and career satisfaction):

-10 ----- 0 ----- +10

Emotional Self-Care (nurturing of the heart, social connections and support networks):

-10 ----- 0 ----- +10

Spiritual Self-Care (nurturing of the soul, Higher Power connection, sense of meaning):

-10 ----- 0 ----- +10

Future Perspective (general attitudes about what the future holds for me):

-10 ----- 0 ----- +10

Relapse Prevention (awareness and use of strategies for complete recovery):

-10 ----- 0 ----- +10

For interpretation of this assessment, including a recovery treatment plan, consult an EDIT™ Certified practitioner.

- Recommended reading for your clients – and for you!
- Books are listed in order of most recent publication
- Use as reinforcement of the EDIT™ Principles and recovery process

EDIT™ Resources

Recommended Reading • Helpful Websites
Enjoy Your Journey of Complete Recovery



RECOMMENDED READING:

Overall EDIT™ Principles:

How Much Does Your Soul Weigh, by Dorie McCubbrey (HarperCollins, 2003)
Dr. Dorie's Don't Diet Book, by Dorie McCubbrey (Positive Pathways Press, 1998)

EDIT™ Principle #1 – Love Your Self:

Self-Love Diet, by Michelle Minero (Phoenix Century Press, 2013)
Health at Every Size, by Linda Bacon (BenBella Books, 2010)
The Gifts of Imperfection, by Bréne Brown (Hazelden, 2010)
The Body Image Workbook, by Thomas Cash (New Harbinger Publications, 2008)
Body Wars, by Margo Maine (Gürze Books, 1999)
Transforming Body Image, by Marcia Germaine (The Crossing Press, 1985)
You Can Heal Your Life, by Louise Hay (Hay House, 1984)

EDIT™ Principle #2 – Be True To Your Self:

Making Peace with your Plate, by Cruze & Andrus (Central Recovery Press, 2013)
Intuitive Eating, by Tribole & Resch (St. Martin's Griffin, 2012)
Eating Mindfully, by Susan Albers (New Harbinger Publications, 2012)
Eating the Moment, by Pavel Somov (New Harbinger Publications, 2008)
The Rules of "Normal" Eating, by Karen Koenig (Gürze Books, 2005)

EDIT™ Principle #3 – Express Your Self:

Telling Ed No! by Cheryl Kerrigan (Gürze Books, 2011)
50 Ways to Soothe Yourself Without Food, by Susan Albers (New Harbinger Publications, 2009)
Breaking Free from Emotional Eating, by Geneen Roth (Plume, 2003)
Journal to the Self, by Kathleen Adams (Grand Central Publishing, 1990)

EDIT™ Principle #4 – Give To Your Self:

The Art of Extreme Self-Care, by Cheryl Richardson (Hay House, 2009)
The Woman's Comfort Book, by Jennifer Loudon (HarperOne, 2005)

EDIT™ Principle #5 – Believe In Your Self:

8 Keys to Recovery from an Eating Disorder, by Costin & Grabb (WW Norton & Company, 2011)
Life Without Ed, by Jenni Schaefer (McGraw-Hill, 2003)
Eating in the Light of the Moon, by Anita Johnston (Gürze Books, 2000)
No Enemies Within, by Dawna Markova (Conari Press, 1994)

HELPFUL WEBSITES:

Eating Disorder Intuitive Therapy (EDIT)™: www.EDITcertified.com
Positive Pathways of Recovery: www.PositivePathways.com
National Eating Disorders Association: NationalEatingDisorders.org
Eating Disorder Foundation: www.EatingDisorderFoundation.org
Eating Disorder Hope: www.EatingDisorderHope.com
Eating Disorder Referral: www.EDreferral.com

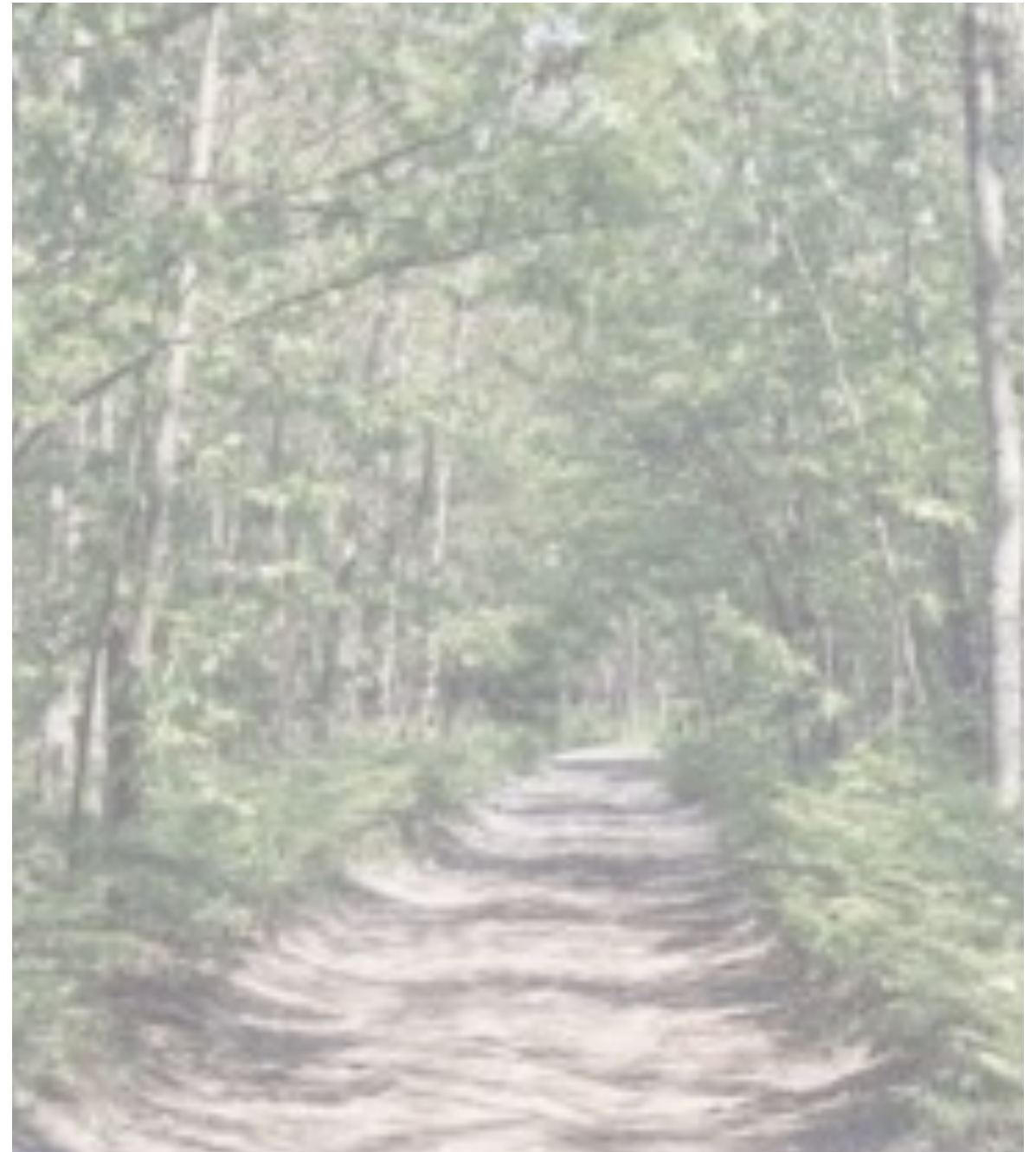
The EDIT™ Principles

- Five principles which address the essential areas of eating disorder recovery, including...
- Values/Identity, Body Image, Nutrition/Fitness, Coping Skills, Core Issues, Self-Care, Relapse Prevention
- Dr. Dorie learned these principles on her own journey of recovery, as “messages” from her companion animals

*FOR THE ENTIRE STORY ABOUT DR. DORIE'S “MESSENGERS ON THE PATH,”
READ HER BOOK “HOW MUCH DOES YOUR SOUL WEIGH” pp 167-173*

The EDIT™ Principles

Love Your Self
Be True To Your Self
Express Your Self
Give To Your Self
Believe In Your Self



*Dr. Dorie took this photo on a hike across the state of Michigan in 1989.
It was the inspiration for the name of her business, Positive Pathways!*

Love Your Self

- Peppy's Message: *"I Love You!"*
- Accepting Body Image
- Identity Beyond the Body
- Authentic Values



- Explain “voices” of ED vs. IT
- Role play with client so they can witness you modeling the voice of IT
- Complete text bubbles to guide client to begin their own ED-IT dialogue

Love Your Self

Self-Image #1:
ED-IT Dialogue



Are you aware of a critical thought you've had recently – maybe one you're thinking *right now*? That's the voice of your Eating Disorder (ED), which is like an “inner critic.” You also have an “inner guide” which speaks with compassion – that's the voice of your Intuitive Therapist (IT). It might seem like ED is the only voice you can hear in your mind, but as recovery progresses, you'll be able to turn up the volume of IT. Your EDIT™ Certified practitioner can model the voice of IT for you until you can hear IT clearly within your Self!

ED's critical thought (exactly as you say it to yourself):

IT's compassionate reply (“another possibility is...”):

ED's argument (what you'd say back to IT):

IT's nonjudgmental observation (“that's interesting...”):

ED's retort (what you think about this “other voice”):

IT's curious query (“what would happen if...”):

If you “get stuck,” ask a friend or your EDIT™ Certified practitioner for help!

- Identify client's "Top 10" criticisms
- Guide client to re-write from the IT's perspective
- IT might say something like:
"Your body is strong"
or, *"You are more than your body"*

Love Your Self

Self-Image #2:
Thought ED-IT



Call your attention to the "critical chatter" that the voice of your Eating Disorder (ED) commonly says. These might be judgments about your eating, exercise, or other behaviors and life choices. These "false self" statements are weighing you down! See if you can "lighten up" with a True Self perspective from your Intuitive Therapist (IT):

ED's critical thoughts ("false self")	IT's compassionate thoughts ("True Self")
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.
7.	7.
8.	8.
9.	9.
10.	10.

If you "get stuck," ask a friend or your EDIT™ Certified practitioner for help!

- Explain the Four Aspects of the True Self
- Guide client to list qualities for each of the Four Aspects

Love Your Self

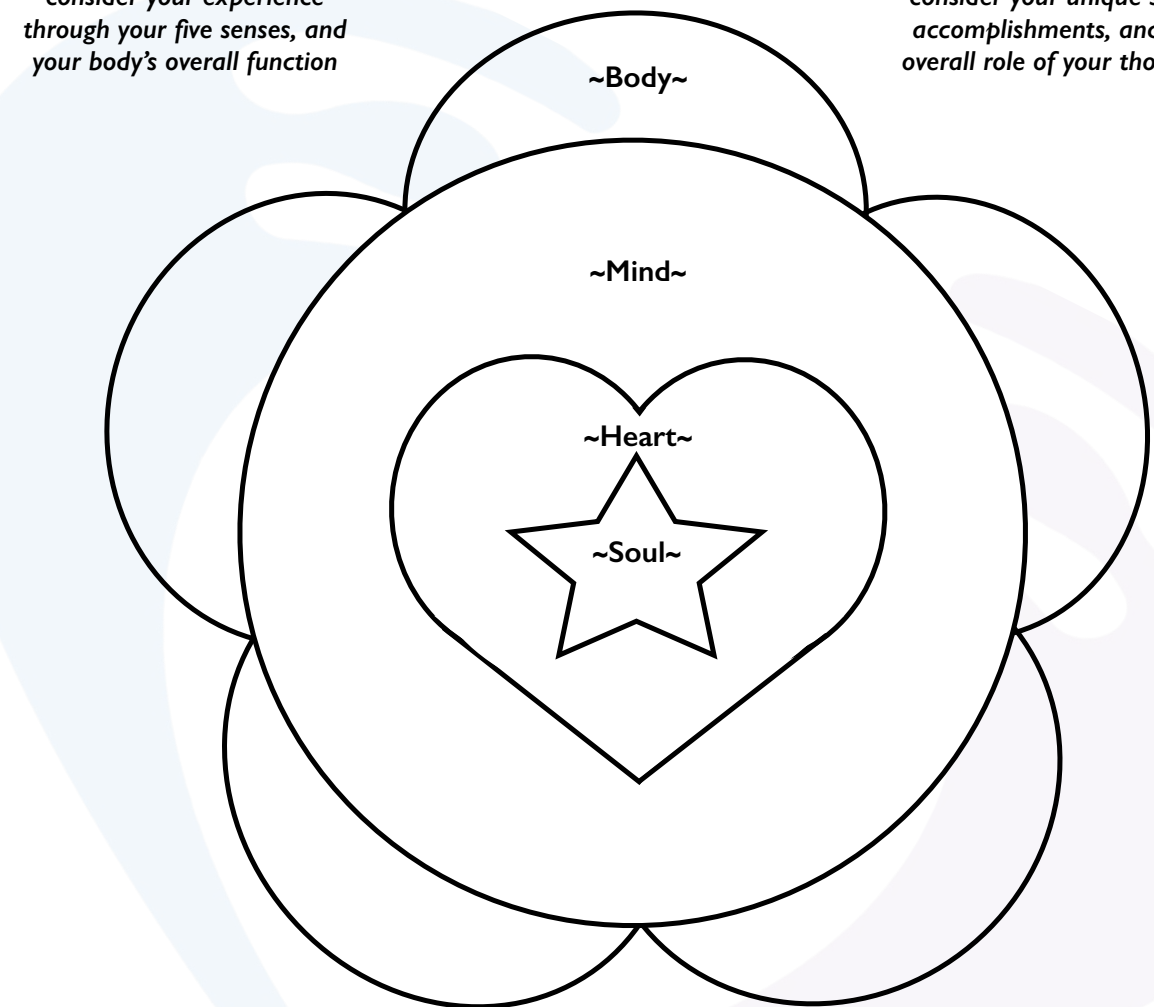
Self-Image #3: The Four Aspects of the “True Self”



Your Eating Disorder (ED) is not who you really are – and ED’s focus on your body as your identity is a “false self.” You are more than your body! Your “True Self” has four main categories – Body, Mind, Heart, Soul. What do each of these mean to you? Access the “Inner Wisdom” of your Intuitive Therapist (IT) – and consider IT’s source:

BODY - PHYSICAL
consider your experience
through your five senses, and
your body’s overall function

MIND - MENTAL
consider your unique skills,
accomplishments, and the
overall role of your thoughts



HEART - EMOTIONAL
consider your personality, your
passions, and your capacity to
feel a range of emotions

SOUL - SPIRITUAL
consider your core essence,
your “sixth sense,” and how
you use your intuitive abilities

- Surface views and roles of “self”
- Deeper views and meanings of “Self”
- Validate the revealing of “True Self”

Love Your Self

Self-Image #4: Roles, Talents, Interests & Beliefs



Have you ever asked the question, “WHO AM I?” There are many ways to define your identity – let’s explore a few specific areas. Let go of any judgments of what you think you “should answer,” and reply authentically as your True Self:

1. HISTORY (name, birth date, age, race, gender, home town):
2. FAMILY ROLES (daughter, sister, wife, mother – son, brother, husband, father):
3. ACADEMIC/CAREER ROLES (favorite classes, majors, degrees, job/volunteering activities):
4. SOCIAL ROLES (social activities, social interests, what you really like to do with others):
5. ROLE MODELS (influential people, admired qualities in others):
6. MEDIA INTERESTS (favorite TV shows, movies, magazines, blogs, books, music):
7. FAVORITE THINGS (meaningful possessions, specific items you “can’t live without”):
8. FAVORITE PLACES (where you feel most content, special trips you’ve taken):
9. FAVORITE ACTIVITIES (hobbies, crafts, sports, what you enjoy on a “day off”):
10. OVERALL STRENGTHS (best personality traits, assets, talents, unique skills):
11. BIG DREAMS (key elements of what you’d like to experience in your future):
12. WORDS TO LIVE BY (favorite quotes, slogans, mantras, mottos):
13. SOMETHING REALLY SPECIAL ABOUT ME (MY TRUE SELF):

Read your responses as if you’re reading about someone you’re meeting for the first time.
What are your overall reflections about this “new person”?

- Ask client to scan the list of values, to identify their current “Top 10”
- Reflect about the factors which influence the client’s current values
- Repeat this worksheet as recovery progresses

Love Your Self

Self-Image #5: My Values



Scan the items in the two-column lists below, and consider what is currently most important in your life. Circle your TOP TEN VALUES, and then RANK 1-10 according to what you MOST VALUE NOW:

Adventure	Marriage/Partnership
Animals/Pets	Material Possessions
Art/Creative Expression	Music - Playing or Listening
Autonomy/Independence	Nature/Preservation
Beauty/Fashion/Image	Nutrition/Cooking
Career/Vocation	Organization/Structure
Children	Personal Growth/Self-Actualization
Eating Disorder Recovery	Philanthropy
Education/Credentials	Recreation/Play
Entertainment/Parties	Relaxation/Rest
Ethnicity/Cultural Heritage	Responsibilities/Getting Things Done
Etiquette/Respect	Safety/Protection
Exercise/Fitness	Social Status/Recognition
Family	Spirituality/Religion
Friendships	Technology/Conveniences
Health - Mental/Emotional	Travel
Health - Physical	Volunteering/Being of Service
Hobbies	Wealth/Financial Security
Ideal Weight/Size	Well-Being/Self-Care
Intimacy	Other:

Reflect about WHY these values are important to you — WHEN did they first become important, and WHO may have influenced you? Has your Eating Disorder (ED) influenced any of your values? Can you access your own Intuitive Therapist (IT) to discover your true values? What do you think will happen to your values as your recovery unfolds?

- A CREDO is a set of guiding principles
- What is the CREDO that the client strives towards?
- What happens to the client's CREDO when they are in the mind of ED vs IT?

Love Your Self

Self-Image #6: My Credo



Consider your own CREDO – the values that you strive towards, the qualities that you admire or try to live by, and the beliefs which you'd like to be your guiding influences for your recovery and the life you truly desire. Review the lists below, and CIRCLE YOUR TOP 10 and then RANK 1-10 to clarify what you truly believe:

Acceptance	Joyfulness
Authenticity	Justice
Compassion	Love
Confidence	Loyalty
Connection	Obedience
Creativity	Oneness
Faith	Openness
Forgiveness	Peace
Freedom	Reverence
Gratitude	Salvation
Helpfulness	Serenity
Honesty	Strength
Hope	Surrender
Humility	Trust
Independence	Truth
Imagination	Understanding
Inspiration	Willingness
Integrity	Wisdom
Intuition	Other:

Reflect about your CREDO – and the voice of your Eating Disorder (ED) versus the wisdom of your Intuitive Therapist (IT). How can the awareness of your CREDO help to guide your recovery, and a facilitate shift from ED to IT?

- Emphasize listing statements for all aspects of Self
- Write statements in present tense
- ACT AS IF – guide client to visualize their affirmations as their reality

Love Your Self

Self-Image #7: Affirmations



Write 50 PRESENT-TENSE POSITIVE STATEMENTS about your True Self.
Consider all aspects of your True Self – Body, Mind, Heart, Soul.
Keep adding to this list until you have all 50!

- | | |
|-----|-----|
| 1. | 26. |
| 2. | 27. |
| 3. | 28. |
| 4. | 29. |
| 5. | 30. |
| 6. | 31. |
| 7. | 32. |
| 8. | 33. |
| 9. | 34. |
| 10. | 35. |
| 11. | 36. |
| 12. | 37. |
| 13. | 38. |
| 14. | 39. |
| 15. | 40. |
| 16. | 41. |
| 17. | 42. |
| 18. | 43. |
| 19. | 44. |
| 20. | 45. |
| 21. | 46. |
| 22. | 47. |
| 23. | 48. |
| 24. | 49. |
| 25. | 50. |

As you're writing your affirmations, notice how many you have for each area of your True Self (Body-Mind-Heart-Soul) and consider which areas you'd like to add more? Be sure your affirmations are written in the PRESENT TENSE - why do you think this is important? Once you have all 50 AFFIRMATIONS, how can you use this list support your recovery?

- ED's perspective is about the body's external image
- IT's perspective is about the body's purpose and the Self as more than a body
- Guide client to re-write from the IT's perspective

Love Your Self

Body Image #1: Body ED-IT



Your *body image* has nothing to do with the actual size, shape or features of your body – your *body image* is your *thoughts* about these things. Notice the “critical chatter” that the voice of your Eating Disorder (ED) uses to judge your body. Improve your body image by seeing your body’s “True Beauty” from the compassionate perspective of your Intuitive Therapist (IT), by considering your body’s unique purpose and ability to function, *exactly as it is now*:

ED's critical thoughts ("Negative Body Image")	IT's compassionate thoughts ("True Beauty")
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.
7.	7.
8.	8.
9.	9.
10.	10.

If you “get stuck,” ask a friend or your EDIT™ Certified practitioner for help!

- Identify client's concept of their "body ideal"
- Note the role of media/ads in this elusive ideal
- Reinforce a new "body ideal" based on acceptance of current body and True Beauty

Love Your Self

Body Image #2: Challenging Body Ideals



You likely have a "body ideal" – an image of how you think your body should look. Have you ever questioned where this "body ideal" came from, how striving for it affects you, and whether you want to continue to hold it for yourself?

1. How would you describe your "body ideal"? Note as many details as you can:
2. How long have you had this "body ideal," and how has your ideal changed over time?
3. Is there a specific person who is your "body ideal model" – a friend, family member, or a celebrity?
4. How has the media influenced your "body ideal" – are there specific images from TV or magazines you like?
5. Find some images from a magazine or the internet which reflect your ideal – how do you compare?
6. Reflect about how striving for your "body ideal" has influenced you – do you ever feel "good enough"?
7. Sit in a public place and watch people go by – how do they compare to your ideal?
8. Continue watching people – and find one feature about each person which you appreciate:
9. Look in the mirror at your own image – and find one feature which you appreciate:
10. What would happen to your "body ideal" if you didn't have anyone to compare yourself to?
11. Look in the mirror again, free of the influence of your "body ideal." What do you see?
12. Create a new "body ideal" which represents your "True Beauty" – how would you like to describe this?
13. Design your own advertisement for "True Beauty" – what images and words would you like to use?

Pause to notice the difference between the "body ideal" held by your Eating Disorder (ED) vs. Intuitive Therapist (IT).

- Best if done in session
- Try a version of this during a Body Image Workshop
- Emphasize the mirror technique

Love Your Self

Body Image #3: In The Mirror



When you look in the mirror, what do you see? Are you viewing your body through the critical lens of your Eating Disorder (ED), or can you regard your reflection with the eyes of compassion of your Intuitive Therapist (IT)? To discover how to ED-IT your perspective, you'll need a partner to do this activity with you:

STEP 1 – Look in the mirror and notice your TOP 5 DISLIKES (or, imagine your image and what you dislike):

- 1.
- 2.
- 3.
- 4.
- 5.

STEP 2 – Write your DISLIKES on 5 pieces of paper, stating them as you do to yourself (“You look... My legs are...”)

STEP 3 – Ask your activity partner to read your DISLIKES out loud to you. How do you feel?

STEP 4 – Say your DISLIKES to the other person, as if you really dislike these things about them. How do you feel?

STEP 5 – Rewrite your DISLIKES from a compassionate perspective, as if you're writing them about your activity partner. Consider the overall function of the body and role of specific body parts, rather than their shape or size.

- 1.
- 2.
- 3.
- 4.
- 5.

STEP 6 – Read these compassionate statements back to your partner. How do you feel?

STEP 7 – Ask your partner to read these to you. Really try to experience their meaning. How do you feel?

STEP 7 – Write these compassionate statements on Post-Its, and place them on a mirror in your home. Pause to look in the mirror, and then read your compassionate statements out loud. How do you feel?

STEP 8 – Continue to look in the mirror, and identify your TOP 5 LIKES. Write these on Post-Its, and add these to your mirror. Add one more, which states, “I LOVE YOU.” Say all of your notes out loud. How do you feel?

As a follow-up to this activity, try reading your Post-Its out loud to yourself every day – for at least 3 weeks!

- Is client's "ideal weight" realistic?
- Explain concept of the weight "Freedom Point"
- Reinforce the intuitive aspects of reaching one's Freedom Point

Love Your Self

Body Image #4: Finding Your Freedom Point



You've probably heard of an "ideal weight" – which is usually a number from a chart, based on your height and a few other factors. But is this "ideal weight" truly ideal for you? Let's explore your "Freedom Point" weight:

STEP 1 - Recall your highest weight. How old were you, and what were your eating/exercise habits?

STEP 2 - Recall your lowest weight. How old were you, and what were your eating/exercise habits?

STEP 3 - Consider apathy. If you were sedentary and binged every day, what might you weigh?

STEP 4 - Consider obsession. If you were extremely rigid with eating and exercise, what might you weigh?

STEP 5 - Reflect about the weight your body seems to "prefer" – what you tend to weigh when you're not trying to control your eating or exercise, nor are you rebelling with complacency. This is the weight which may be your "Freedom Point" – a weight your body can naturally maintain, free of eating disorders. Your actual Freedom Point weight may be slightly higher/lower than what your body has preferred in the past.

STEP 6 - How does it feel to consider allowing your body to find its new Freedom Point? Are you willing to trust the process? Why or why not?

STEP 7 - Use the diagram below and record the various weights which reflect extremes, and your possible Freedom Point. This can give you a realistic "ideal weight" to consider on your journey of recovery.



- Client writes to their body, stating their current thoughts and feelings
- Emphasize “telling it like it is” (as ED)
- Validate client’s ability to access a response from their IT
- Repeat at later stages of recovery

Love Your Self

Body Image #5: Letter to/from Your Body



You’ve probably had many different thoughts and feelings about your body over the years... what are you thinking and feeling *right now*? Take a moment to write this in a letter to your body. Use the format below to allow your body to write a message back to you. After the letter is complete, write on the reverse side of the page (or in your journal) about the experience, and/or share insights with your EDIT™ Certified practitioner.

OK body... This is what I’m really thinking and feeling about you right now...

As I reflect about everything we’ve been through over the years, these are a few other things I want to say to you...

(PAUSE... CLOSE YOUR EYES... OPEN YOUR EYES... WRITE A REPLY FROM YOUR BODY)

Dear (write your name here): _____

Here’s my reflection for you...

Be True To Your Self

- Peppy's Message:
"What are you doing?"
- Intuitive Eating
- Intuitive Exercise
- Intuitive Living



Intuitive Living

- Academics, Career Plan, Volunteering
 - *Choose a path with a meaningful purpose*
- Friendships, Family, Intimate Relationships
 - *Choose connections with authenticity*
- Hobbies, Interests, Life Goals
 - *Choose pursuits with an inherent passion*

- Discuss with client: what is INTUITION?
- How does client use intuition to guide decisions?
- How can client trust their intuition?
- Use as a segue to Intuitive Eating and Intuitive Exercise

Be True To Your Self

Intuitive Living #1: Accessing Intuition



Reflect about the choices you have made over the course of your life. Without judging it as “good or bad,” gently notice when you took actions based on society’s standards or opinions of others (“outer-guided”) versus when you took action based on your own intuitive wisdom (“inner-guided”):

List 3 MAJOR DECISIONS you made which were OUTER-GUIDED, and note why you trusted the advice of others (because they were an “expert,” to get someone’s approval, etc.) and note the overall outcome:

1.

2.

3.

List 3 MAJOR DECISIONS you made which were INNER-GUIDED, and note why you trusted your intuition (because you “had a gut feeling,” you kept “feeling drawn” towards something, etc.) and note the overall outcome:

1.

2.

3.

Pause to read your above responses, and reflect about being “outer-guided” versus “inner-guided.” Take note of any specific situations where you are more likely to “abandon your intuition” versus “access your intuition.” What steps can you take to continue to “turn up the volume” of your intuition?

- INTERNAL vs. EXTERNAL intuitive messages
- Guide client to pay attention to both types of intuitive wisdom
- Use as a segue to Intuitive Eating and Intuitive Exercise

Be True To Your Self

Intuitive Living #2: Intuitive Messages



As you move forward on your path of recovery by enhancing your intuitive abilities, you might begin to notice “Intuitive Messages” coming to you from many different sources, guiding you about the next step to take, or giving you validation about the steps you are taking. INTERNAL messages are what are most often referred to as “Intuitive,” but EXTERNAL sources (something you hear, read, see, etc.) can offer messages which resonate with your “Intuitive Knowing.” Pause to take note of some of these messages:

What INTERNAL MESSAGES have you recently received – gut feeling, inspiration, vision, etc.?

- 1.
- 2.
- 3.
- 4.
- 5.

What EXTERNAL MESSAGES have you recently received – coincidence, synchronicity, sign, etc.?

- 1.
- 2.
- 3.
- 4.
- 5.

Pause to read your recent Intuitive Messages. How are these messages are guiding you with Intuitive Living?

Intuitive Eating

- “Un-diet”— undo damage of diet mentality
 - *Challenge food rules and nutrition myths*
- Relearn how to eat based on body’s true needs
 - *WHEN, WHY, WHAT and HOW*
- Use “Intuitive Structure” for gradual changes
 - *Ultimate goal: ability to enjoy ALL foods*

- Give an overview of the three reasons we eat
- Discuss the “insatiable” extremes
- Emphasize that it’s OK to eat for all three reasons

Be True To Your Self

Intuitive Eating #1: The Three Reasons WHY We Eat



The reasons why we eat can be categorized into three main areas. Let’s explore each:

1. HUNGER – this is your body’s PHYSICAL NEED for food (to satisfy energy requirements, support nutritional needs, sustain the body’s life). What are ways you recognize hunger in your body?

An INSATIABLE HUNGER (need for large amounts of food, or a need to eat very often) can be triggered after periods of fasting, extreme dieting, or ANOREXIA. Has this happened to you? Describe the details::

2. APPETITE – this is a PHYSICAL DESIRE for food, based on TASTE or SENSES (smell of food, seeing an advertisement for food, etc). Describe your appetite for food, and how this differs from hunger:

An INSATIABLE APPETITE (desire for large amounts of food, or to eat very often) can occur in response to eating specific foods, sometimes called “trigger foods.” The theory is that the “pleasure center” of the brain is stimulated by these “trigger foods,” similar to what occurs in people with alcohol/drug addiction. Hence, the term FOOD ADDICTION is often used to describe this extreme craving. Do you seem to have some “trigger foods”? List them here, and what typically happens when you eat these:

3. COMFORT – this is an EMOTIONAL DESIRE for food, based on MOOD (depression, anxiety, etc). Eating creates various biochemical changes in the body, which can have an effect on emotions. Do you have “comfort foods,” which you occasionally eat as a means of self-soothing? Describe:

An INSATIABLE COMFORT CRAVING (desire for large amounts of food, or to eat very often) can occur when the food-mood behavior is used as a means of COPING with emotions on a regular basis, especially as a means of coping with past traumas. This type of behavior is linked to BINGE EATING DISORDER and BULIMIA. Do you use food as a means of coping? How often? What are your emotional triggers?

- This journal is designed to enhance intuitive awareness
- Explain the DO's and DONT's of this type journal
- Use caution with Anorexia or chronic dieters

Be True To Your Self

Intuitive Eating #2: Beginner Food Journal



If you've kept track of what you eat in the past, it has likely been a part of a weight loss plan or diet. This type of Food Journal is designed to help you UN-DIET, by undoing the damage dieting has done. As an initial step in being an INTUITIVE EATER, begin by simply observing your current eating patterns. Use the guidelines in each column to record your observations. No measuring quantities, no calorie-counting, and most importantly, no judgment!!!

Today's Date: _____

WHEN (time?)	WHERE/WHO (location? alone?)	WHAT (type of food? general amount?)	WHY (hunger? appetite? comfort?)	HOW (pace? process?)

INTUITIVE INSIGHTS: gently notice any patterns and overall feelings (BODY-MIND-HEART-SOUL)

- Be the voice of IT with education about nutrition
- Emphasize: “food is nutrients”
- The body has built-in nutrition meters and calorie-counters... trust intuition!

Be True To Your Self

Intuitive Eating #3: Nutrition Wisdom



What is food? All food is PROTEIN, CARBOHYDRATE, FAT, VITAMINS, MINERALS, WATER. And your body needs all of these nutrients. So whether you eat an apple or apple pie, your body will break down and utilize the nutrients in the foods you consume. You don't need to try to control this process. What a miracle the body is!

1. PROTEIN: essential for growth and repair of all tissues (bones, muscles, tendons, ligaments, arteries, cells); necessary for proper hormone and enzyme function; regulation of fluids and electrolytes; minimum protein requirements for an average body size are about 50 grams daily (more in times of illness or stress)

ANIMAL SOURCES

chicken breast
deli meat
bacon

PESCE-LACTO-OVO SOURCES

fish, shrimp, clams
milk, cheese, yogurt
eggs

VEGAN SOURCES

nuts, seeds
legumes
lentils

Protein sources I like: _____

2. CARBOHYDRATE: preferred source of fuel for muscles and essential for brain; function all carbohydrates are broken down into glucose and used for energy; body converts protein into glucose in absence of sufficient carbohydrate; a minimum of 50-100 grams of carbohydrate is needed daily, but 200 grams or more is preferred

STARCHES

grains: corn, wheat, rice
bread products, cereals
potatoes, legumes

SUGARS

milk sugar (lactose)
fruit sugar (fructose)
table sugar (sucrose), corn syrup

VEGETABLES

leafy greens
root vegetables (carrots, beets)
peppers, broccoli, tomatoes, cucumbers

Carbohydrate sources I like: _____

3. FATS: provide essential fatty acids and a source of energy for the body; dietary fats allow for the absorption of fat-soluble vitamins (A, D, E, K); fatty acids are used in the body to maintain cell structure, protect organs, regulate immune system and blood pressure; fat intake below 25 grams daily compromises the body's essential functions

PLANT SOURCES

many plants have some fat
coconuts, avocados
nuts, seeds

ANIMAL SOURCES

dairy: cheese, eggs, butter, milk fat
meats: skins, cuts of meat
fish: salmon, shrimp

OILS

cooking oils
salad dressings
fried foods

Fat sources I like: _____

4. VITAMINS, MINERALS: these “micronutrients” have a very specific role in the body; refer to a good nutrition manual or ask your EDIT™ Certified practitioner for resources to learn more!
5. WATER: the body needs 48-64 ounces of fluid each day – don't wait until you're “thirsty,” stay hydrated!

The voice of your Eating Disorder (ED) likely has many myths and misconceptions about nutrition. What is the TRUTH about nutrition? Your Intuitive Therapist (IT) knows! Ask your EDIT™ Certified practitioner how you can turn up the volume of your intuitive wisdom about nutrition. Note the specific nutrition questions you have in the space below:

- Develop initial structure to guide client with “meal plan”
- Start with client’s SAFE foods
- Use nutrition knowledge to guide client with meal selections

Be True To Your Self

Intuitive Eating #4: My Menu



Refer to NUTRITION WISDOM and reflect about the different types of food that you really enjoy and which help you feel your best. Next, make a list of a variety of complete meal ideas for Breakfast, Lunch, Dinner and Snacks – consider the foods that you usually have on hand or can access easily. The idea here isn’t to become rigid with a meal plan, but rather to have several selections you can choose from as an INTUITIVE EATER.

*When you notice a PHYSICAL NEED to eat, pause to scan MY MENU
and then decide which of your menu selections will best satisfy your body’s needs!*

BREAKFAST OPTIONS	LUNCH OPTIONS
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.

DINNER OPTIONS	SNACK OPTIONS
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.

Consult with your EDIT™ Certified practitioner for NUTRITION WISDOM review and menu suggestions.
Consider a creative project to make MY MENU into something special!

- What is client's ED voice saying?
- Encourage and validate the revealing of "food rules"
- Assist client to develop IT wisdom for each rule

Be True To Your Self

Intuitive Eating #5: Challenging Food Rules



The voice of your Eating Disorder (ED) probably has more "food rules" than you can count – pause for a moment to notice all of the do's/don'ts, goods/bads, shoulds/shouldn'ts that ED chatters on about when you're eating (or planning your next meal). These food rules are in the way of your needs for a variety of foods which truly satisfy all of the reasons why you eat. The inner wisdom of your Intuitive Therapist (IT) knows "food freedom"!

ED's critical thoughts ("Food Rules")	IT's inner wisdom ("Food Freedom")
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.
7.	7.
8.	8.
9.	9.
10.	10.

If you "get stuck," ask a friend or your EDIT™ Certified practitioner for help!

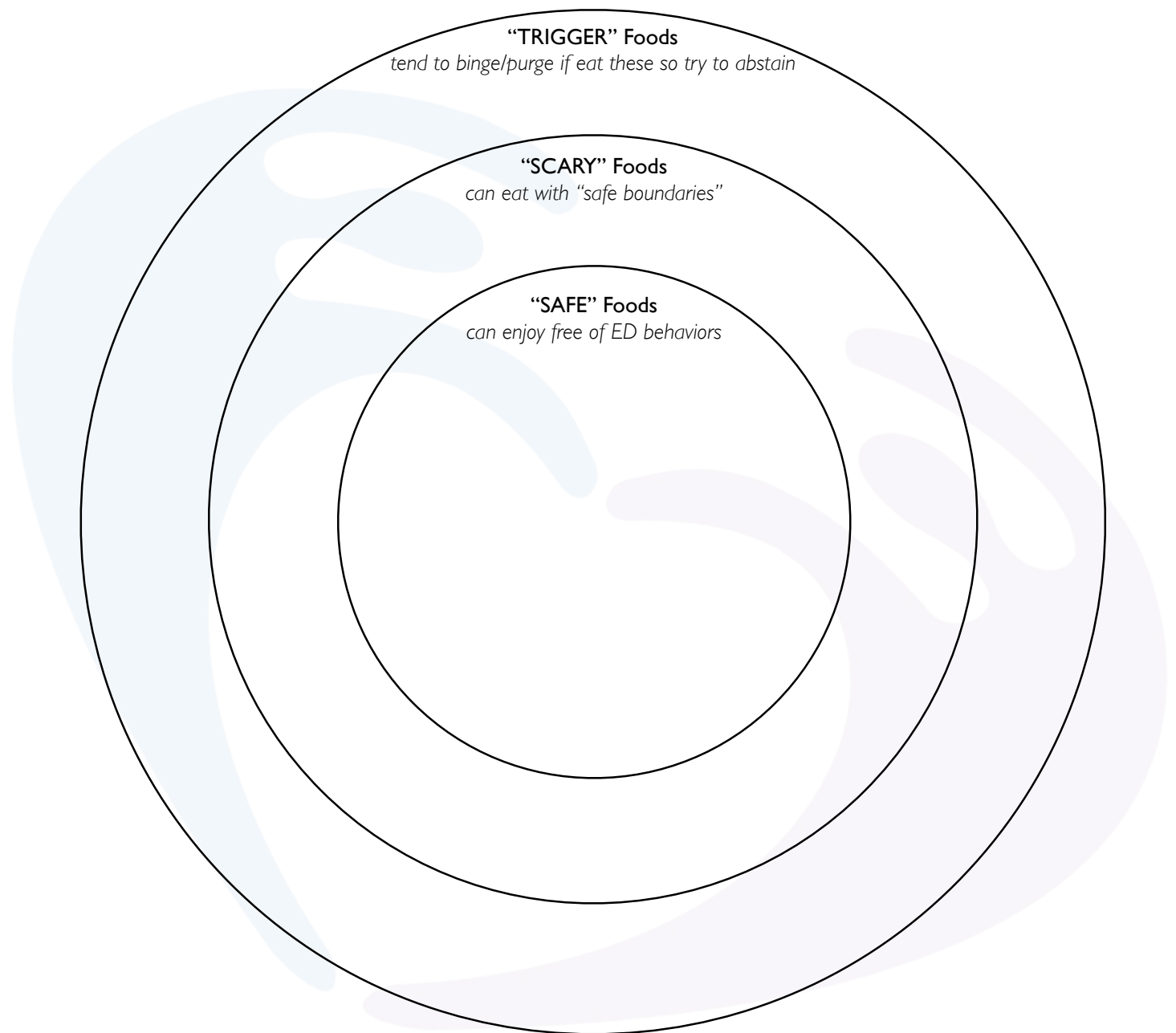
- Learn the client's attitudes towards specific foods
- Guide client to set boundaries with "trigger foods" and to make peace with "scary foods"
- Support client to gradually make all foods "safe foods"

Be True To Your Self

Intuitive Eating #6: Making Peace With Food



List your current SAFE foods in the inner circle. Next, list the foods which are SCARY but which you can eat with specific boundaries (list your boundary, i.e., "measure portion"). Finally, list your TRIGGER foods.



How can you set boundaries with your TRIGGER foods, and move them into the middle circle?
How can your SCARY foods become SAFE foods, so that ALL FOOD is in your inner circle?

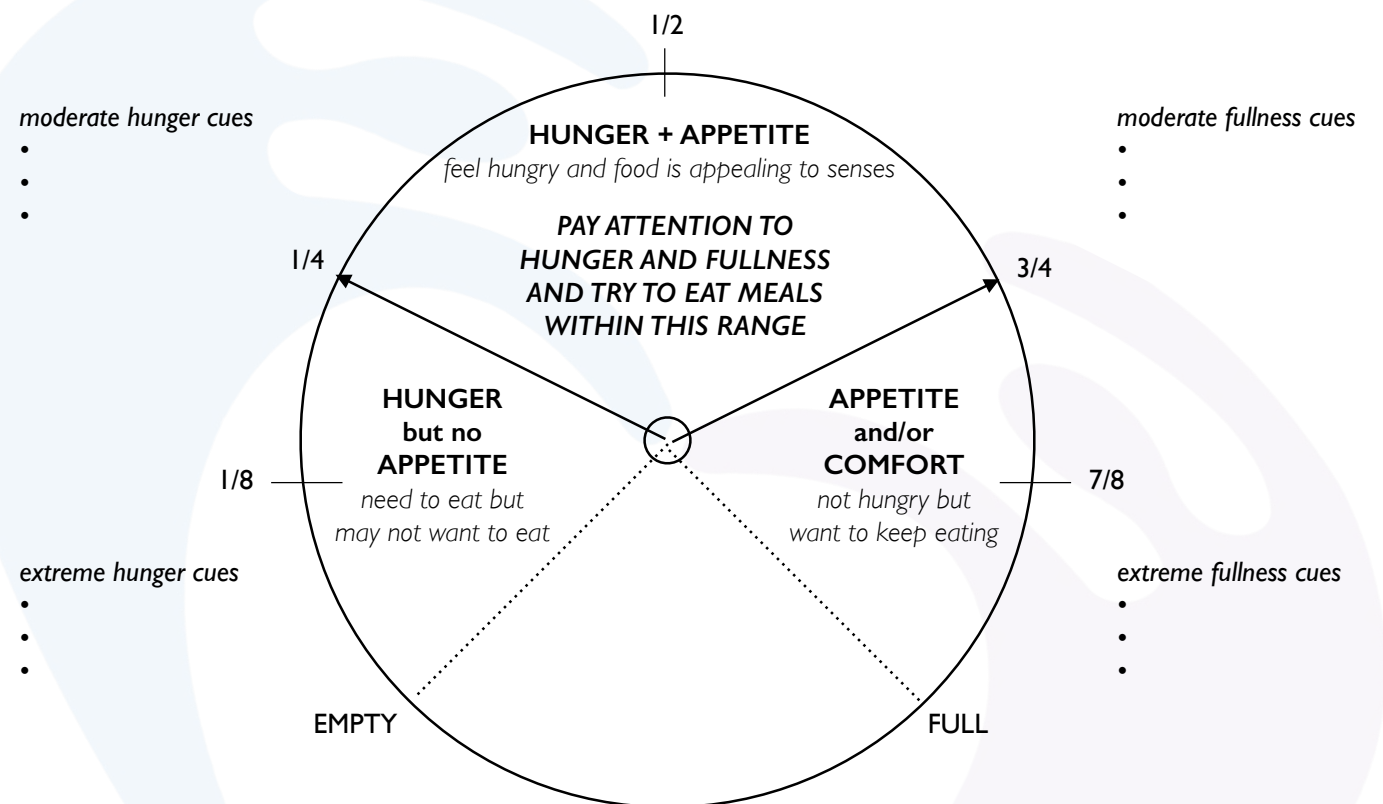
- Educate client about using gage and “ideal range” to eat meals
- Guide client to identify their various hunger and fullness cues
- Develop targeted action steps

Be True To Your Self

Intuitive Eating #7: Hunger & Fullness Gauge



Imagine the fuel gauge on the dashboard of your car – and how you pay attention to this gauge to decide when you need to fill your tank with more fuel. Now, imagine that your body has its own fuel gauge — related to your body’s need for nutrients from food. However, unlike your car (which you might only need to add fuel to once a week), your body burns its fuel stores and needs more fuel several times each day! Notice the different points on the Hunger & Fullness Gauge below, as it progresses from EMPTY to FULL. Note your hunger and fullness cues.



How can you compassionately encourage yourself to recognize and act on your hunger and fullness cues, so that you can start and stop your meals within the target range of 1/4 to 3/4 of your fuel level? List action steps:

- 1.
- 2.
- 3.

- Consider doing a meal session with your client
- Teach client the *Beginner's Mind* technique
- Normalize the eating experience with everyday conversation

Be True To Your Self

Intuitive Eating #8: Intuitive Mindful Meal Process



Relearn how to be an INTUITIVE EATER as you pause to enjoy this meal process!

STEP 1 - Note WHEN you're beginning your meal (TIME) _____ and your thoughts about eating now?

STEP 2 - Note WHY you're eating (Hunger, Appetite, Comfort) _____ and your thoughts about this?

STEP 3 - Note your HUNGER & FULLNESS GAUGE _____ and your thoughts about this level?

STEP 4 - Note WHAT you want to eat (type, amount), using MY MENU or a check-in with your INTUITION:

STEP 5 - Fully experience your first bite of food, using the mindfulness technique of BEGINNER'S MIND – notice the color, shape, temperature, texture, scent, and other sensory information, and then take a taste. Be very curious, as if you've never tasted this food before. Record some notes about your first few bites. Pause to reflect about HOW would you like to proceed with the rest of your meal — setting an intention about your meal pace and process?

STEP 6 - Pause mid-way through your meal, and note your reflections. HOW would you like to proceed?

STEP 7 - As you conclude your meal, note TIME _____ GAUGE LEVEL _____ and your thoughts about these?

STEP 8 – Additional notes about your overall Intuitive Mindful Meal Process experience:

What action steps would you like to take to enhance your Intuitive Eating abilities?

- 1.
- 2.
- 3.

- Use with clients who need some “intuitive structure”
- Also use to enhance intuitive eating abilities
- Mindfulness vs. “Soulfulness”

Be True To Your Self

Intuitive Eating #9: Advanced Food Journal



As a more advanced step in being an INTUITIVE EATER, you can use a Food Journal to help you mindfully and soulfully pause to check in with your intuitive needs before, during and after your meals. This type of journal can help reinforce overall intuitive abilities, mindfulness and soulfulness during your meals – and in your everyday life!

Today's Date: _____

INTUITIVE INTENTIONS
WHEN-WHY-WHAT...do I really need?
(describe details BEFORE eating!!!)

INTUITIVE ACTIONS
HOW am I honoring my needs?
(note meal process - any food substitutions or 5Rs)

INTUITIVE INSIGHTS
WHAT... do I think/feel/need now?
(transition AFTER meal time)

--	--	--

SOULFULNESS: note observations and feelings from the inside-out (SOUL-HEART-MIND-BODY)

- Use for food cravings after a meal or in between meals
- Ideal for clients with “Food Addiction”
- Use caution for clients with restrictive tendencies

Be True To Your Self

Intuitive Eating #10: Craving Control



Congratulations for completing this worksheet instead of impulsively indulging your craving for food!

STEP 1 – WHAT specific food are you craving right now? Describe it in detail, including the quantity:

STEP 2 – WHY do you want to eat right now? Does your craving seem PHYSIOLOGICAL (a trigger related to your BODY: low blood sugar levels, really wanting the taste of something, seeking the overall sensory pleasure of eating)? Or is your craving PSYCHOLOGICAL (a trigger related to your MENTAL/EMOTIONAL state: can't stop thinking about food, attached to a specific food ritual (habit), seeking a food-mood effect (“self-medicating”), using food as a means to avoid feeling (“numbing”)? Describe:

STEP 3 – Pause to reflect about how you will FEEL AFTER indulging your craving. Really take yourself into the imagined experience, and notice how you'll feel IMMEDIATELY after you finish eating, 5 MINUTES after eating, a few HOURS after eating, and the NEXT DAY. Consider the positive/negative consequences:

STEP 4 – Try an ALTERNATIVE PLAN to address your true needs. For a PHYSIOLOGICAL craving, consider making a FOOD SUBSTITUTE which will support your BODY. For a PSYCHOLOGICAL craving, refer to your list of 5R's or try other healthy MENTAL/EMOTIONAL strategies. (Ask your EDIT™ Certified practitioner for help – make a list of 3-5 strategies to try when your next craving hits). What PLAN can you use NOW?

STEP 5 – These first 4 steps should have taken you at least 10 minutes to complete – way to delay the impulse to indulge your craving! You are now creating new craving control habits! Do you still want to indulge your craving? If so, make it a CONSCIOUS CHOICE to slow down and enjoy the food you crave! Note the final outcome and reflections:

- Use to guide clients with eating awareness and impulse control
- Introduce the concept of using non-food options (5R discussed in next section)
- WHY client eats becomes a choice!

Be True To Your Self

Intuitive Eating #1 I: Intuitive Eating Flowchart



It's OK to eat for ANY of the three reasons – HUNGER, APPETITE, COMFORT...
but WHY do you eat, most of the time?

Would it be helpful if you ate MORE OFTEN because you are experiencing HUNGER...
and LESS OFTEN due to APPETITE/ADDICTION or COMFORT/COPING?

What would happen if you paused to
CHECK IN BEFORE YOU EAT?

Stop
Think
Observe
Proceed

WHY am I thinking about food and eating right now?

APPETITE
(physical desire)
ADDICTION

HUNGER
(physical need)

COMFORT
(emotional desire)
COPING

- HOW intense is my food craving? Rate on a scale from 0 to 10
- WHAT type and amount of food will satisfy my craving? Is this APPETITE (a little would taste good), or the voice of ADDICTION (too much is not enough)?
- HOW do I choose to handle this craving? I have OPTIONS!
 1. Enjoy a reasonable portion
 2. Substitute non-addictive food
 3. Use non-food substitute (5R)
- WHY is my choice important? IMAGINE how I'll feel in 5 MINUTES, a few HOURS, and tomorrow!

- HOW intense is my hunger? Rate with HUNGER GAUGE
- WHAT type and amount of food will satisfy my hunger? Refer to MY MENU for ideas!
- WHERE would I like to enjoy my meal? WHO would I like to eat with? Consider options to best support recovery!
- HOW would I like my meal process to be – perhaps with more SOULFULNESS as I eat? Consider a FOOD JOURNAL or INTUITIVE MEAL PROCESS

- HOW do I FEEL? Label the emotion. HOW intense is it? Rate 0 to 10
- WHAT type and amount of food will help me deal with my mood? Is this COMFORT (a little would feel good), or eating disorder COPING (too much is not enough)?
- HOW do I choose to handle this craving? I have OPTIONS!
 1. Enjoy a reasonable portion
 2. Substitute non-comfort food
 3. Use non-food substitute (5R)
- WHY is my choice important? IMAGINE how I'll feel in 5 MINUTES, a few HOURS, and tomorrow!

HOW can you use this flowchart to support your recovery? Consider posting it as a reminder!

Intuitive Exercise

- “Couch Potato” or “Gold Medalist” ?
 - *Challenge exercise rules and fitness myths*
- Check-in with body’s true needs for exercise
 - *WHEN, WHY, WHAT and HOW*
- Use “Intuitive Structure” for gradual changes
 - *Ultimate goal: re-creation of recreation*

- What is client’s ED voice saying?
- Encourage and validate the revealing of “fitness rules”
- Assist client to access IT wisdom for each rule

Be True To Your Self

Intuitive Exercise #1:
Challenging Fitness Rules



The voice of your Eating Disorder (ED) probably has more “fitness rules” than you can count – pause for a moment to notice all of the do’s/don’ts, goods/bads, shoulds/shouldn’ts that ED chatters on about when you’re exercising (or planning your next workout). These fitness rules are in the way of your needs for a variety of types of movement of your body – and rest. The inner wisdom of your Intuitive Therapist (IT) knows “fitness freedom”!

ED’s critical thoughts (“Fitness Rules”)	IT’s inner wisdom (“Fitness Freedom”)
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.
7.	7.
8.	8.
9.	9.
10.	10.

If you “get stuck,” ask a friend or your EDIT™ Certified practitioner for help!

- Be the voice of IT with education about fitness
- Emphasize: “True Health”
- The body has built-in fitness feedback... trust intuition!

Be True To Your Self

Intuitive Exercise #2: Fitness Wisdom



There are different types of exercise activities which can help enhance your overall fitness – when done in appropriate amounts. Avoiding exercise because it seems too hard or you feel embarrassed means that you are depriving your body of the movement it truly needs. Too much exercise, especially one specific type of workout (i.e., running) can cause overuse injuries. “Forcing yourself” to do workouts that you don’t enjoy can also be damaging to your physical and mental health. True fitness is finding a balance of these main types of exercise – while having fun!

1. **CARDIOVASCULAR EXERCISE:** the heart is a muscle, and cardiovascular exercise is designed to strengthen the heart and make it more efficient at pumping blood throughout the body; heart rate during exercise is generally kept high (70-80% of estimated maximum for age); target 20 min, 3x/week)

OUTDOOR ACTIVITIES

walking, hiking, running
bike riding (road, trails)
seasonal (swim, ski)

GROUP SPORTS

classes (step, zumba, jazzercise)
teams (soccer, softball, basketball)
group cardio (spinning, circuits)

INDOOR OPTIONS

elliptical machine, arc trainer
treadmill, stationary bicycle
exercise DVDs

Cardio-Fitness activities I like: _____

2. **STRENGTH TRAINING:** triggers growth of the skeletal muscles of the body, for maintenance of healthy muscle mass and injury prevention; specific muscles or muscle groups are targeted, using weight lifting or pushing against the body’s resistance; target a total body workout 2x/week (non-sequential days)

INDIVIDUAL WORKOUT

machines for specific muscle groups
hand-held weights, free weights
exercise DVDs

GROUP WORKOUTS

partner (rotate using machines)
classes (using weights or machines)
yoga, pilates (certain types for strengths)

PERSONAL TRAINER

customized workout design
coaching during workout
variety for maximum benefit

Strength-Fitness activities I like: _____

3. **BALANCE & FLEXIBILITY:** the core muscles of the body are essential for balance, and strengthening these can help prevent injury; static stretching of the skeletal muscles allows for muscle lengthening and maintenance of flexibility; target a total body balance and flexibility routine 3x/week)

INDIVIDUAL MOVEMENT

floor mat stretching
pilates machines
yoga DVDs

GROUP CLASSES

yoga
tai chi
balance balls

PERSONAL TRAINER

customized workout design
assisted stretching
pilates

Balance-Flexibility activities I like: _____

4. **REST & RELAXATION:** days off from exercise are essential for the body to rebuild muscle tissue and restore itself; take a day off from exercise at least 1x/week, and add some relaxation activities on additional days to relieve stress and enhance your body’s healing (meditation, aromatherapy, bathing)

The voice of your Eating Disorder (ED) likely has many myths and misconceptions about fitness. What is the TRUTH about fitness? Your Intuitive Therapist (IT) knows! Ask your EDIT™ Certified practitioner how you can turn up the volume of your intuitive wisdom about fitness. Note the specific fitness questions you have in the space below:

- Consider taking a walk with your client to illustrate
- Emphasize the importance of the body's feedback
- Can also illustrate the *Walking Meditation*

Be True To Your Self

Intuitive Exercise #3: Intuitive Workout Process



Relearn now to be an INTUITIVE EXERCISER as you pause to enjoy this workout process!

STEP 1 - Note WHEN you're beginning your workout (time) _____ and your thoughts about exercising now?

STEP 2 - Note WHY you're exercising (ED vs IT) _____ and your thoughts about exercising for this reason?

STEP 3 - Note your ENERGY LEVEL (0-10) _____ and your thoughts about exercising at this level? What other messages are you receiving from your Self (Body-Mind-Heart-Soul) as you prepare to exercise?

STEP 4 - Note WHAT exercise you want to do (type, amount), checking in with your INTUITIVE WISDOM:

STEP 5 - Pause after a few minutes, and reflect about your workout process. HOW are you doing (Body-Mind-Heart-Soul)? Notice the messages you are receiving. HOW would you like to proceed?

STEP 6 - Pause mid-way through your workout, and reflect. HOW are you doing (Body-Mind-Heart-Soul)? HOW would you like to proceed?

STEP 7 - As you conclude your workout, note time _____ energy level _____ and your thoughts about these? What other messages are you receiving from your True Self (SOUL-HEART-MIND-BODY)?

What action steps would you like to take to enhance your Intuitive Eating abilities?

- 1.
- 2.
- 3.

- Consider taking a walk with your client to illustrate
- Guide client to access their five senses
- What's different about a workout vs. working-out?

Be True To Your Self

Intuitive Exercise #4: Walking Meditation



Enjoy some REST & RELAXATION as a healthy part of being an INTUITIVE EXERCISER!

STEP 1 - Plan a short and simple walking route (in your yard, around the block, through a park). Describe:

STEP 2 - As you prepare to begin your walk, pause to notice the messages you are receiving from your whole Self (SOUL-HEART-MIND-BODY), especially noting any tension in your body or ED thoughts:

STEP 3 - Close your eyes and take a few deep breaths, and allow your Self to begin to relax. Take as much time as you need to allow your awareness to begin to shift to your Intuitive Therapist, noting IT's wisdom:

STEP 4 - As you walk, pause to notice your surroundings, tapping into all of your Physical Senses. Take a mental note of what you SEE, HEAR, SMELL, TOUCH and TASTE (if you choose to touch your tongue to something during your walk). Hold your awareness of this sensory information during your walk and make notes later.

STEP 5 - After stimulating your senses, gently notice any other messages you are receiving from your whole Self (SOUL-HEART-MIND-BODY), especially noting any relaxation in your body or IT feedback. Hold your Self-awareness during your walk and make notes later.

STEP 6 - As you conclude your Walking Meditation, take notes about your overall experience:

Pause to reflect about how Walking Meditation could be a regular part of your recovery?

Express Your Self

- Misty's Message: Seizures (*"nervous breakdown"*)
- Awareness: Thoughts-Feelings-Needs
- Healthy Coping Skills: for *Pleasure & Distraction*
- Core Issue Healing: for *Pain Avoidance & Resolution*



- Explain the 4 main feelings categories
- Assist client to label their current feeling
- Discuss how recovery involves learning how to *feel our feelings*

Express Your Self

Awareness #1: Feelings Check-In



Your Eating Disorder (ED) thoughts and behaviors can be a way of coping with challenging emotions – and an important step in recovery is getting in touch with what you are feeling. The next time that you have an ED thought, use that as a cue to check in with your emotions. Allow the Intuitive Therapist (IT) within you to gently notice your ED thought, and then be curious, “Hmmm, that’s interesting that ED just showed up. I wonder what I’m feeling right now?” You can also do a check-in at certain times throughout your day. Use the list below to identify an overall emotion category, and then a specific feeling. Add your own unique feelings in each column:

GLAD	SAD	MAD	AFRAID
1. excited	1. depressed	1. stressed	1. worried
2. hopeful	2. hopeless	2. hostile	2. helpless
3. joyful	3. disappointed	3. outraged	3. overwhelmed
4. elated	4. disheartened	4. agitated	4. confused
5. content	5. grief	5. hurt	5. anxious
6. peaceful	6. gloomy	6. frustrated	6. intimidated
7. confident	7. apathetic	7. jealous	7. insecure
8. passionate	8. lonely	8. irate	8. inadequate
9. inspired	9. bored	9. vindictive	9. embarrassed
10. grateful	10. remorseful	10. resentful	10. ashamed

Which emotions do you experience most often? Which seem to trigger ED as a means of coping?

- Teach client the link between Thoughts-Feelings
- MSU: Making Stuff Up!
- Emphasize that *all feelings are OK* but sometimes we can change our emotional state

Express Your Self

Awareness #2: Thoughts + Feelings Check-In



The range of emotions that are experienced throughout the day can be triggered by specific events, and thoughts about those events. For example, if the event is a rainy day, someone might think, “Oh no! I don’t have my umbrella, so now I’m going to get soaking wet!” – and they might feel frustrated. But then they might think, “I guess this means I don’t have to water my garden today!” – and they might feel content. You can’t change an event, but you can change your thoughts about an event, which can change how you feel. Your Eating Disorder (ED) thoughts and behaviors can distract you from challenging emotions, but your Intuitive Therapist (IT) can guide you to explore your thoughts and feelings, which can help you to shift into a more helpful emotional state:

STEP 1 – What are you FEELING right now? (name one specific emotion) _____

STEP 2 – What is the EVENT that has triggered this feeling? (describe place, people, what happened):

STEP 3 – What are the THOUGHTS you had as a result of the event? (observations, your Self-Talk):

STEP 4 – What EVIDENCE supports your thoughts and conclusions about the event?

STEP 5 – What OTHER EVIDENCE counters your thoughts and conclusions about the event?

STEP 6 – Based on the other evidence, what OTHER THOUGHTS do you now have about the situation?

STEP 7 – With this new thought in mind, what are you FEELING right now? _____

STEP 8 – Write your THOUGHTS and FEELINGS about the experience of completing this worksheet:

- Use client's “Top 10” emotions
- Identify the role of ED behaviors
- Determine a way to meet the true need (without ED)

Express Your Self

Awareness #3:

Thoughts + Feelings + Needs Check-In



You’ve turned to your Eating Disorder (ED) as a means of coping with challenging emotions. But what if there are other ways to meet your needs? Let your Intuitive Therapist (IT) guide to to explore your true needs:

“I feel _____ because _____ and I need _____.”
identify your emotion *identify triggering event and your thoughts about the event* *healthy coping strategy*

When I feel...	I use my ED behaviors to...	What I really need is...
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.
5.	5.	5.
6.	6.	6.
7.	7.	7.
8.	8.	8.
9.	9.	9.
10.	10.	10.

- Explain the 5 categories
- Add at least 5 ideas in each
- Post list at home where it's visible
- Use phone to take a photo of the list so image can easily be referred to

Express Your Self

Coping #1:
The 5-Rs



List alternatives for ED behaviors in each of the 5-R categories below.
Refer to this list instead of using ED behaviors for coping!

Recreation
(uplifting fun activities)

Relaxation
(stress relief strategies)

Reward
(special treats which fill you from within)

Responsibility
(distract with these household tasks)

Recovery
(techniques to help you review, reflect, resolve... and be in recovery!)

- Review a recent example with client
- Use a second worksheet if client has more than one ED behavior
- Develop specific strategies at each of the 10 steps

Express Your Self

Coping #2: Interventions



ED behaviors typically build in a sequence, starting with the initial trigger followed by specific thoughts, feelings, and actions which ultimately lead up to engaging in the full ED behavior (I=initial trigger, IO=full behavior). Identifying your specific sequence allows for you to find specific interventions at each step. With practice, you can catch your sequence building, and implement effective interventions. You can replace ED with IT!

ED Behavior Sequence

IT Intervention Strategies

1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.
7.	7.
8.	8.
9.	9.
10.	10.

How can you enhance your Intervention Strategies? Ask your EDIT™ Certified practitioner for help!

- Alternative to basic journalling
- Key is to conclude entry with IT's wisdom
- Best if this is hand-written

Express Your Self

Coping #3: Intuitive Therapist Session



In a traditional therapy session, you might “spill your guts” to your therapist, and then look to him/her for feedback and support. Your EDIT™ Certified practitioner can offer Intuitive Wisdom for you – and through his/her example, you'll begin to access your own Intuitive Therapist (IT) within you for guidance. Use this journal check-in as a way to express the “raw” thoughts and feelings of your Eating Disorder (ED) voice, – and then shift into your soulful center, where you'll discover guidance from your own Intuitive Therapist (IT) within you:

Dear Intuitive Therapist (or, write the name of your IT here): _____

Here's my check-in... This is what I'm really thinking and feeling right now...

(PAUSE... CLOSE YOUR EYES... OPEN YOUR EYES... WRITE A REPLY FROM IT)

Dear (write your name here): _____

Here's my Intuitive Wisdom for you...

- Write this letter from IT at a time when emotions are hopeful
- Suggest placing copies of this letter in strategic locations
- Read letter as an alternative to ED

Express Your Self

Coping #4: A Letter of Hope



Use this format to write a letter from your Intuitive Therapist (IT), which you can read anytime you might need extra encouragement to stay on your path of recovery – you are worth it, and here's why!

Dear _____
(your name)

You have come so far on your journey of recovery! (recall "how bad it once was" and note overall progress):

Notice all of the positive outcomes you are experiencing! (note specific benefits of recovery):

If ED tries to lure you back, remember this... (note a specific strategy, and/or write a powerful message):

In closing, I'd like to say...

(your IT's name)

- Guide client how to learn from their ED behaviors
- Facilitate a shift from shame (ED) to curiosity (IT)
- Use in session then assign as homework

Express Your Self

Healing #1: Symptoms as Messengers



If you engage in ED behaviors, take this opportunity to learn what ED might be here to teach you. Remember your foundation of Self-Love as you complete this worksheet with compassion!

STEP 1 – Describe the ED event, specifically noting the type of ED BEHAVIOR you used, and its intensity:

STEP 2 – Identify any possible TRIGGERS for the ED event. Recall where you were, who you were with, and what you were doing right before the ED event:

STEP 3 – Recall your THOUGHTS and FEELINGS leading up to the ED event. Note whether you were aware of having these thoughts and feelings at the time, or if your awareness is only after the fact:

STEP 4 – Reflect about how the ED event began. Did it seem like you had NO CONTROL over it – suddenly you were engaged in ED behaviors? Or did you have CONTROL – did you plan it? Describe:

STEP 5 – If you had a DO-OVER, what would you do differently to PREVENT the ED event? Consider actions you could take based on what you described in STEPS 2-4 above.

STEP 6 – What is your overall MESSAGE from ED? What might ED be here to teach you?

- Validate that it's OK to have intense emotions towards people we “should love”
- Hand-writing the letter can help client get in touch with raw emotions
- Emphasize how client can help themselves

Express Your Self

Healing #2: Unsent Letter



Use this format to write a letter (which you won't give to the person), as a means of getting in touch with your
THOUGHTS-FEELINGS-NEEDS

Dear _____
(name of person you have a conflict with)

I feel _____ because: (list the range of emotions you feel, and the triggering events – let it all out!)

You can help me by: (note your ideal requests, even if this person might never be able to give these to you)

I will help myself by: (now that you know what would really help – as listed above – how can you give this to yourself?)

In closing, I'd like to say...

(your name)

- Explain overall concept of “the mask”
- Review questions for reflection with client in session
- Emphasize the “gold in the shadow”

Express Your Self

Healing #3: The Mask



Have you ever noticed that you wear a “mask” sometimes — projecting who you think you should be on the outside, while hiding what you don’t want others to see on the inside? Use the diagram to illustrate your mask:



REFLECTION #1: What aspects of your “ideal self” are actually your “false self” — qualities that you wish you didn’t have to try to show and/or dislike having to display? *Cross these out in the diagram above.*

REFLECTION #2: What aspects of your “shadow self” are actually your “True Self” — qualities that you wish you didn’t have to hide and/or like being able to display? *Circle these in the diagram above.*

REFLECTION #3: What happens when you wear your mask? What would it be like to be seen without your mask?

- Emphasize the completion of this list without stopping
- As core beliefs are revealed, guide client to challenge their accuracy
- Most Common Core Belief:
I'm not good enough

Express Your Self

Healing #4: Core Beliefs



You've already become aware of the link between your thoughts and feelings – and your feelings can be clues to your “core beliefs.” It's likely that you've been carrying these core beliefs in your subconscious thoughts for many years, so they have been repeated and reinforced in your own mind. However, many core beliefs are not true – and once you uncover them, you can begin to challenge them from the perspective of your Intuitive Therapist (IT).

For awareness of your CORE BELIEFS, pick a FEELING and make a list of WHY you feel this way.

Keep writing until you fill this entire page, and use the back as necessary.

Don't pause to re-read what you've written, just keep writing!

It's OK if you have duplication in what you write.

I FEEL _____	BECAUSE:
1.	26.
2.	27.
3.	28.
4.	29.
5.	30.
6.	31.
7.	32.
8.	33.
9.	34.
10.	35.
11.	36.
12.	37.
13.	38.
14.	39.
15.	40.
16.	41.
17.	42.
18.	43.
19.	44.
20.	45.
21.	46.
22.	47.
23.	48.
24.	49.
25.	50.

After you've finished, go back through your responses. What CORE BELIEFS emerge – and ask your IT, are they true?

Give To Your Self

- Misty's Message: Rest (*"Intuitive Self-Care"*)
- Purpose of Self-Care — *feed your true hunger*
- Holistic Self-Care — *soul-heart-mind-body*
- Routines of Self-Care — *daily, weekly, ongoing*



- Suggest as a part of client's morning routine
- Creates a habit of checking in with Self-Care needs
- Client can email daily check-ins for accountability

Give To Your Self

Self-Care Routine #1: Morning Check-In



Date _____ Time _____

Sleep and Physical Details:

Waking Time _____ Hours of Sleep _____ Sleep Quality (0=poor, 10=excellent) _____

Dream Recall:

Predominant Body Sensation _____ Details: _____

Morning Mood (rate on a scale 0=no symptoms to 10=extreme symptoms):

Anxiety _____ Describe: _____

Depression _____ Describe: _____

ED or Other Cravings _____ Describe: _____

Predominant Emotion _____ Details: _____

Thoughts/Feelings/Needs (from ED Observations to IT Insights – use back as needed):

Daily Intentions:

- 1.
- 2.
- 3.

- Suggest as a part of client's evening routine
- Creates a habit of checking in with Self-Care needs
- Client can email daily check-ins for accountability

Give To Your Self

Self-Care Routine #2: Evening Check-In



Date _____ Time _____

Nutrition, Fitness and Physical Details:

Meals _____ # Snacks _____ Intuitive Eating Practices (0=none, 10=always) _____

Nutrition Notes (feedback from your body about food choices):

Exercise Type _____ Duration _____ Intuitive Exercise Practices (0=none, 10=always) _____

Fitness Feedback (notes from your body about exercise type/amount):

Predominant Body Sensation _____ Details:

Evening Mood (rate on a scale 0=no symptoms to 10=extreme symptoms):

Anxiety _____ Describe:

Depression _____ Describe:

ED Behaviors _____ Describe:

Current Cravings _____ Describe:

Predominant Emotion _____ Details:

Thoughts/Feelings/Needs (from ED Observations to IT Insights – use back as needed):

Daily Gratitudes:

- 1.
- 2.
- 3.

- Review the four aspects of Self
- Guide client to identify Self-Care for each aspect
- Note how some Self-Care choices can access two, three or all four aspects of the Self

Give To Your Self

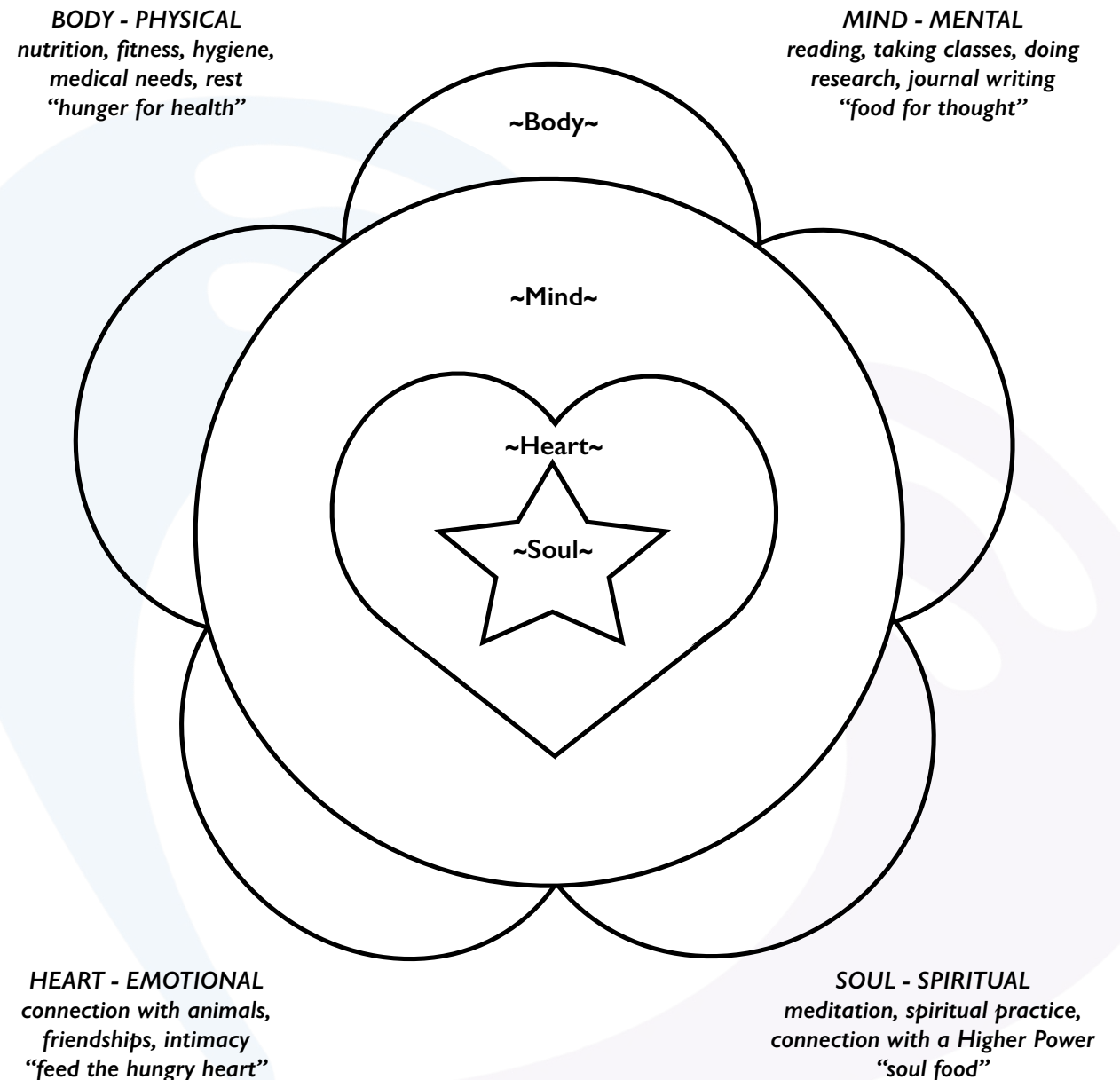
Self-Care Routine #3: Ways to Care for My Self



Consider your “True Self” in its four main categories – Body, Mind, Heart, Soul.
List Self-Care ideas for each:

BODY - PHYSICAL
nutrition, fitness, hygiene,
medical needs, rest
“hunger for health”

MIND - MENTAL
reading, taking classes, doing
research, journal writing
“food for thought”



- Review Self-Care ideas for all four aspects of the Self
- Discuss the concept of intuitive intentions (versus “shoulds”)
- Create intentions for WHEN/HOW to implement Self-Care practices

Give To Your Self

Self-Care Routine #4: Recovery Is My #1 Priority!



SELF-CARE is a proactive practice – when you are “filled from within,” you can more effectively give to others throughout your day, and be better prepared to handle any challenges which come your way.

Reflect about the four aspects of your Self (SOUL-HEART-MIND-BODY) and what SELF-CARE means for each:

SOUL
HEART
MIND
BODY

Now that you know WHAT you intend for Self-Care, consider WHEN/HOW you'll implement it:

DAILY SELF-CARE INTENTIONS:

WAKING
MORNING
BREAKFAST
LUNCHTIME
AFTERNOON
DINNERTIME
EVENING
BEDTIME

WEEKLY SELF-CARE INTENTIONS:

SUNDAY
MONDAY
TUESDAY
WEDNESDAY
THURSDAY
FRIDAY
SATURDAY

LONG-TERM SELF-CARE INTENTIONS:

MONTHLY
QUARTERLY
YEARLY

- Use for clients who struggle with “too much to do”
- Discuss HAVE-TOs vs. WANT-TOs

Give To Your Self

Self-Care Practice #1: My TO DO List



Does it seem like you have a TO DO LIST which is a mile long,
filled with HAVE-TO's which deplete you, rather than WANT-TO's which fulfill you?
Let's RE-DO your TO-DO's!

STEP 1 – List your TOP 10 TO DO's. Do you really HAVE TO do all of these? Can you DELETE or DELEGATE any? If so, cross these out or make notes about asking for help. With the items which remain, how can you approach these so that you WANT TO do the item? Consider how it can fulfill you (Body-Heart-Mind-Soul):

HAVE TO DO's	Delete? Delegate? Or, why I WANT TO do it!
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.
7.	7.
8.	8.
9.	9.
10.	10.

STEP 2 – Make a new list of TOP 10 WANT TO DO's! Consider items that you say you'll Give To Your Self, but never make time for. Next, write HOW TO's so that your WANT TO's will happen!

WANT TO DO's	HOW TO DO IT – what I need to succeed!
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.
7.	7.
8.	8.
9.	9.
10.	10.

- Use for clients who state that “*Self-Care is selfish*”
- Guide client to connect with their Inner Child and to use Self-Care as “re-parenting”
- Discuss the link between intuition and the Inner Child

Give To Your Self

Self-Care Practice #2: Nurture Your Inner Child



Does Self-Care seem “selfish”? Have you noticed that there’s always something you “should be doing” instead of what’s on your Self-Care list? Do you tend to give to others first, and then Give To Your Self only “if you have enough time”? You can give to others more effectively and complete tasks more authentically when you Give To Your Self first! Here are some questions for reflection, to guide you to follow through on your Self-Care intentions:

Take a few minutes to reflect about yourself as a child. Recall some positive memories, and note how old you were at the time. Make a list of these different ages and memories:

Pick your favorite memory from your list above. Now, close your eyes and imagine that child re-living his/her favorite experience. Open your eyes, and write what he/she would say to you about it (write from the voice of your Inner Child):

Now that you feel a connection with your Inner Child – reflect about your Self-Care intentions. Imagine that when you Give To Your Self, you give to your Inner Child. How does he/she feel in anticipation of being nurtured? How does he/she feel if you “don’t have time” for your Self-Care?

*Ask your Inner Child if there is anything that he/she wants or needs **right now**? As a nurturing “parent,” how would you like to respond to this request from your Inner Child?*

How can you use your connection with your Inner Child to guide you to Give To Your Self more effectively?

- Emphasize adding items for all four aspects of Self
- Discuss how expressing gratitude is a means to Give To Your Self
- Suggest reading the gratitude list as one of the 5R strategies

Give To Your Self

Self-Care Practice #3: Gratitude List



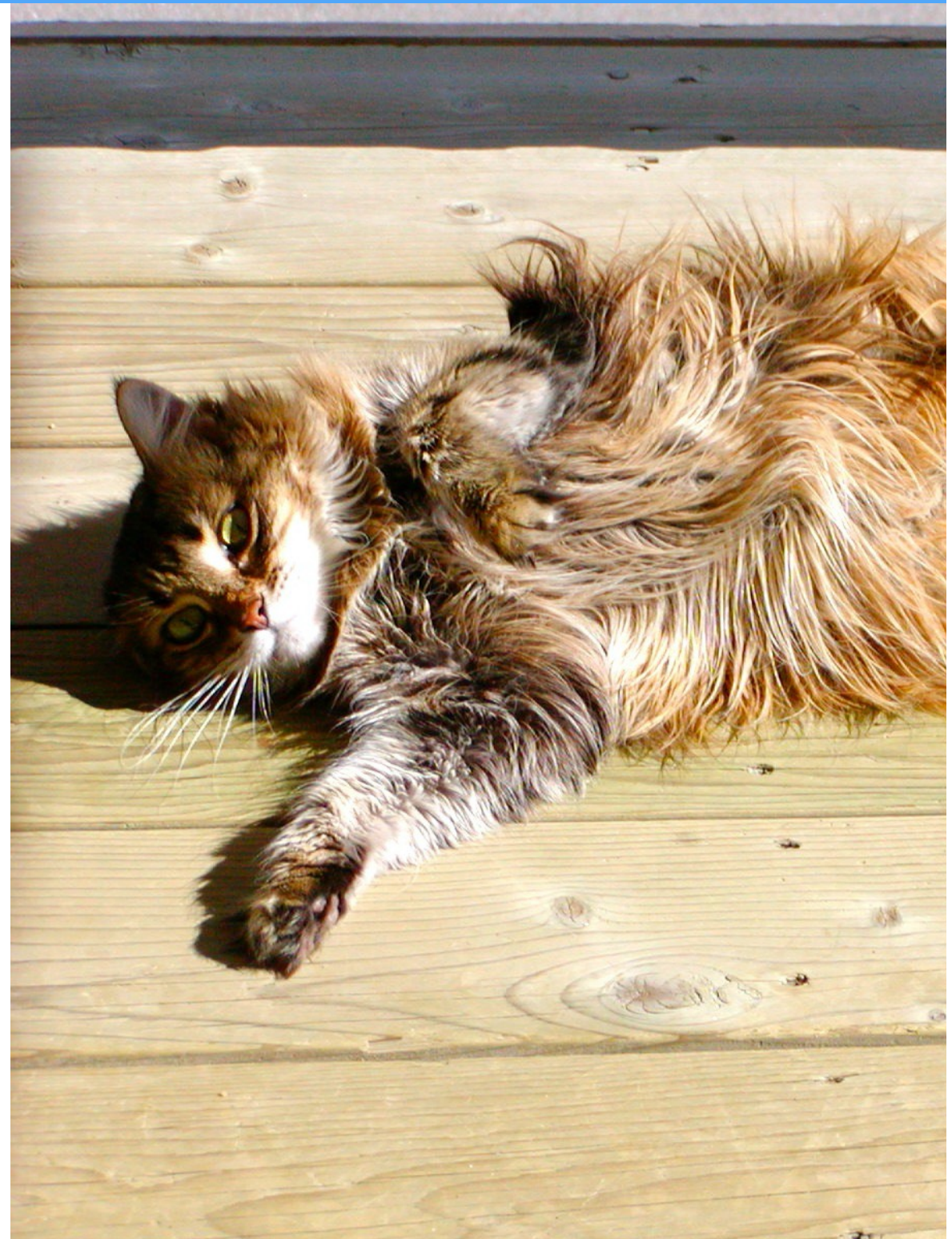
Write 50 GRATITUDES about your Self and your life, – consider all aspects of your True Self – Body, Mind, Heart, Soul.
You can write this list a few at a time (consider writing 5 GRATITUDES for the next 10 DAYS).
Keep adding to this list until you have all 50!

- | | |
|-----|-----|
| 1. | 26. |
| 2. | 27. |
| 3. | 28. |
| 4. | 29. |
| 5. | 30. |
| 6. | 31. |
| 7. | 32. |
| 8. | 33. |
| 9. | 34. |
| 10. | 35. |
| 11. | 36. |
| 12. | 37. |
| 13. | 38. |
| 14. | 39. |
| 15. | 40. |
| 16. | 41. |
| 17. | 42. |
| 18. | 43. |
| 19. | 44. |
| 20. | 45. |
| 21. | 46. |
| 22. | 47. |
| 23. | 48. |
| 24. | 49. |
| 25. | 50. |

As you're writing your gratitudes, notice how many you have for specific areas of your life (career, family, etc) as well as each aspect of your True Self (Body-Mind-Heart-Soul). Consider which areas/aspects you'd like to add more, to enhance life balance? Once you have all 50 GRATITUDES, how can you use this list support your recovery?

Believe In Your Self

- Miler's Message: Faith (*"Inner Knowing"*)
- Trust in the Process
- Hopeful Future
- Relapse Prevention



- Use when client feels conflicted about recovery
- Top 2 corners reveal client's TRUST in recovery
- Bottom 2 corners reveal client's FEARS about recovery

Believe In Your Self

Recovery #1: Winning the War Within



Sometimes it can seem like you have a “war within” – between the positives and negatives of recovery. Sometimes you might feel committed to recovery, while other times you’re not so sure. It’s important to honor all of your thoughts and feelings about recovery, without judgment. Make notes on the “4-Corner Grid” illustration below:

<p>NEGATIVES of ED (consequences of quitting recovery)</p>	<p>POSITIVES of IT (benefits of staying in recovery)</p>
<p>POSITIVES of ED (benefits of quitting recovery)</p>	<p>NEGATIVES of IT (consequences of staying in recovery)</p>

In which corners of the grid did you write the most? Which corners seem most compelling? What is causing your “war within,” and how can recovery win? Ask your EDIT™ Certified practitioner for help to enhance the wisdom expressed on the top half of the grid, and to address any concerns revealed in the bottom half of the grid. Note your observations and action steps:

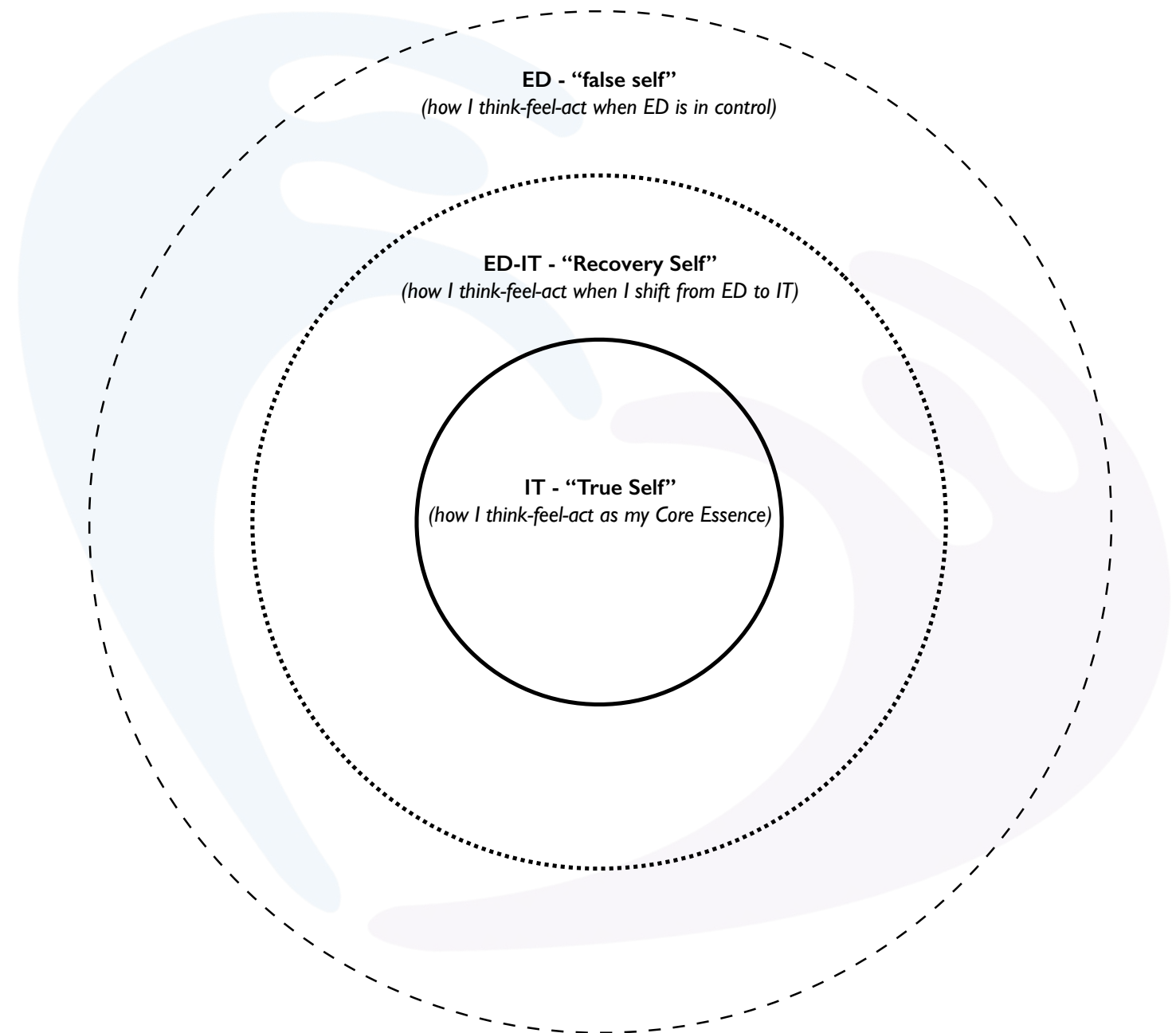
- Emphasize ED as a “false self”
- Guide client to remember their “life before ED” as they complete the inner circle of their “True Self”
- Note the ED-IT “Recovery Self” as an safe transition


Believe In Your Self

Recovery #2: ED-IT Identities



When Eating Disorder (ED) thoughts and behaviors are “happening all the time,” it might seem like ED is your identity. But ED is not who you are! List your ED behaviors in the outside circle – this is your “false self,” because you are not ED! Next, get in touch with your “True Self” as you consider what your life was like before ED – in the inner circle, note the behaviors and beliefs you’ve always had, which define your “Core Essence.” Finally, reflect about your “Recovery Self” by listing what you notice when you begin to access the wisdom of your Intuitive Therapist (IT), and you shift from ED to IT. Which ED-IT identities do you relate to the most right now?





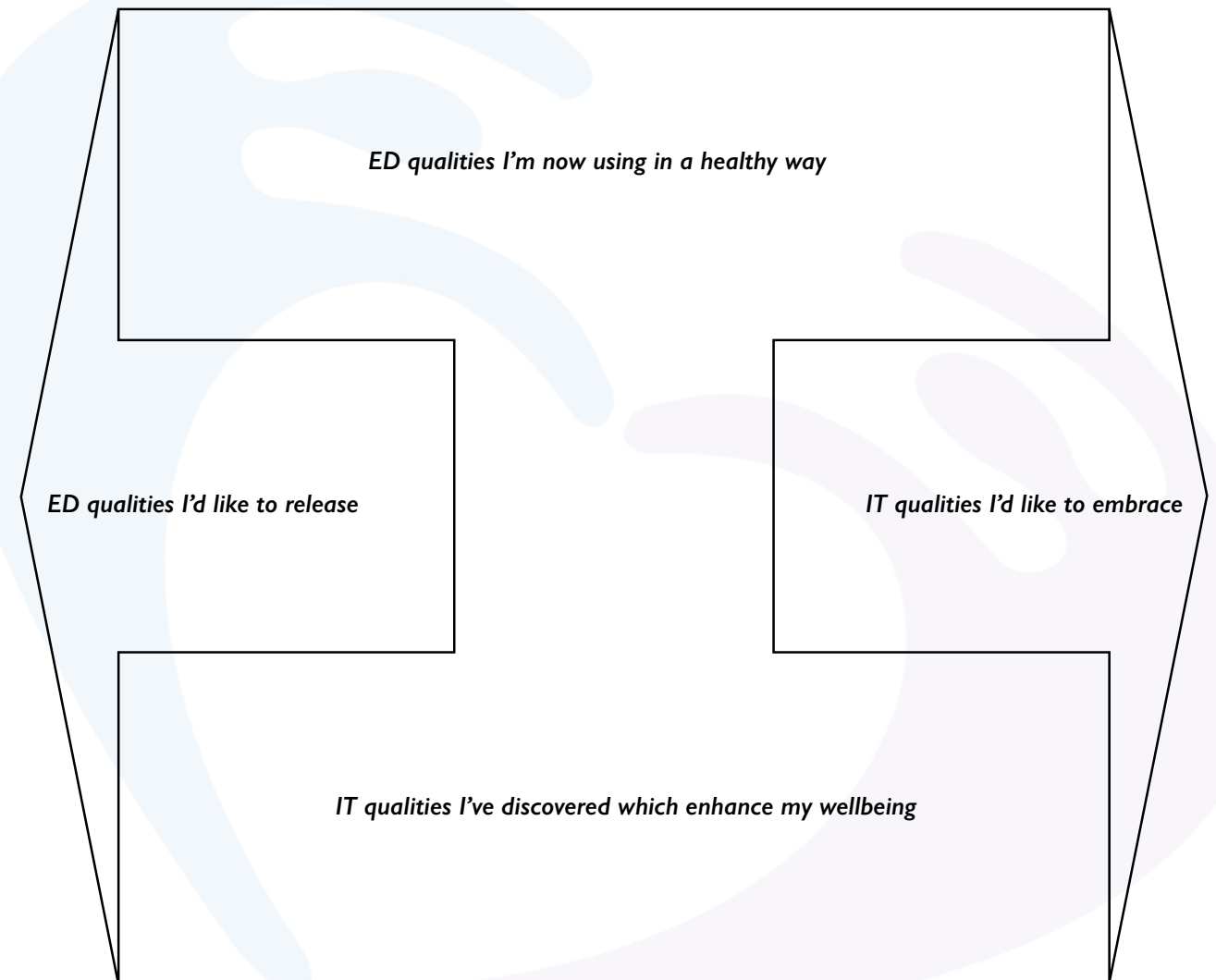
- Guide client to identify ED qualities they are ready to release
- In the  shape, note ED qualities which have been transformed and new IT qualities
- Conclude with future IT qualities


Believe In Your Self

Recovery #3: ED-IT Integration



Your Eating Disorder (ED) has served a purpose — and what if the purpose of recovery isn't to “get rid of ED,” but rather to transform the qualities of ED into a helpful form, and to gently release any qualities which do not serve you? Write the unhelpful ED qualities you'd like to release in the left arrow shape in the diagram below, and note the helpful qualities in the top of the  shape. Recovery also involves the addition of new practices which you've learned from the wisdom of your own Intuitive Therapist (IT). List these enhancements in bottom of the  shape. Also note IT qualities you'd like to add in the near future, listing these in the right arrow shape:



Do you notice an overlap between ED and IT qualities in the  part of the diagram?
This is your ED-IT Integration — how your “two voices” are becoming One!

- Use in session and guide client with a future visualization
- Emphasize that the client can imagine their new life to be safe and inviting
- Discuss client's intentions based on their vision

Believe In Your Self

Recovery #4: My Future Life



What will your life be like – without your Eating Disorder (ED)? As much as you might feel ready to be free of your ED thoughts and behaviors, you might also feel afraid of the unknown, and what your new life of freedom will be like. These fears can trigger a return to ED as something that's "safe and familiar." How can you create a new sense of safety and make your new life more inviting, as you embrace the wisdom of your own Intuitive Therapist (IT) for this visualization? Consider these questions for reflection, to explore your future life:

Imagine a "best case scenario" for your future – as if anything you truly desire can be your reality. Describe your FUTURE VISION in as much detail as possible (note WHERE you are, WHO is in your life, and WHAT you notice about your new life of freedom)...

Now, describe a TYPICAL DAY in your new life...

Note your FEELINGS about your future life, as if you are living it NOW...

What needs to be RELEASED to enjoy your vision?

What needs to be EMBRACED to enjoy your vision?

What is the KEY MESSAGE your Intuitive Therapist (IT) wants you to know about your future life?

- Use as client is nearing conclusion of treatment
- Assign as homework and invite client to share with you
- Take note of the message from ED back to the client!

Believe In Your Self

Recovery #5: Goodbye Letter



Are you ready to say goodbye to your Eating Disorder (ED)? Use the format below to write a letter to ED – and to allow ED to write back to you. Share insights from this letter with your EDIT™ Certified practitioner!

Dear ED,

I'm ready to say goodbye to you, because...

As I reflect about everything we've been through over the years, these are a few other things I want to say to you...

(PAUSE... CLOSE YOUR EYES... OPEN YOUR EYES... WRITE A REPLY FROM ED)

Dear (write your name here): _____

I want you to know...

- Use as client is nearing conclusion of treatment
- Guide client to identify their key insights
- Discuss re-reading this list to anchor the meaning of recovery

Believe In Your Self

Success #1: Key Insights



It's helpful to anchor your success as you move forward on your journey of recovery. Take a few minutes to reflect about your key insights about your Eating Disorder (ED) – why do you think ED showed up in your life, and what messages have you learned from ED? As your recovery has progressed, what insights do you have about your Intuitive Therapist (IT) – how does IT offer its guidance to you, and what are some of IT's words of wisdom? Finally, what insights do you have about your Self – body, heart, mind, soul?

KEY INSIGHTS about ED:

-
-
-
-
-

KEY INSIGHTS about IT:

-
-
-
-
-

KEY INSIGHTS about my SELF:

-
-
-
-
-

How can you use this worksheet to support your ongoing success?

- Use as client is nearing conclusion of treatment
- Guide client to identify three strategies for each of the five principles
- Discuss re-reading this list to anchor the practices of ongoing recovery

Believe In Your Self

Success #2: Key Strategies



It's helpful to validate the strategies which you've learned on your journey of recovery. What strategies have been most effective to help you shift from ED to IT? List three strategies for each of the five principles of EDIT™ as a reminder to practice these principles in your everyday life. In this way, complete recovery is possible!

I LOVE MY SELF!

•
•
•

I AM TRUE TO MY SELF!

•
•
•

I EXPRESS MY SELF!

•
•
•

I GIVE TO MY SELF!

•
•
•

I BELIEVE IN MY SELF!

•
•
•

How can you use this worksheet to support your ongoing success?

- Use as client is nearing conclusion of treatment
- Guide client to identify the signs of recovery vs. relapse
- Emphasize action steps to take at YELLOW LIGHT

Believe In Your Self

Success #3: Relapse Prevention



Complete recovery and freedom from ED behaviors is possible... but relapse is possible, too!
Know the signs that you're doing well in recovery, and pay attention to warning signs to prevent relapse.

GREEN LIGHT (signs all is well)	YELLOW LIGHT (early warning signs)	RED LIGHT (signs of relapse)

What steps will you take if you get YELLOW LIGHT or RED LIGHT warning signs?

EDIT™ Client Sessions

Putting It All Together: things to keep in mind as your client progresses from their initial session to conclusion of treatment

- **Initial Session:** ask client to take the EDIT™ Assessment; educate about EDIT™ with the EDIT™ Overview (print 2-sided if possible) – establishes your credibility
- **Initial Homework:** provide an “action plan” from the five EDIT™ Principles; assign 2-3 worksheets to complete before next session – enhances client commitment
- **Follow-Up Sessions:** check in with your client about their week; review homework; use ED-IT dialogues in session; assign new worksheets
- **Progress Assessment:** ask client to re-take EDIT™ Assessment as a qualitative measure of progress; offer your feedback and ask client to self-validate
- **Conclusion Session:** ask client to re-take EDIT™ Assessment; review client’s overall progress; discuss *Believe In Your Self* and emphasize relapse prevention

EDIT™ Case Studies

*Four “classic” eating disorder case studies are explored on the following pages.
These abbreviations and page numbers from the EDIT™ Worksheets pdf file are used:*

- Love Your Self: **LYS (pp 7-18)**
- Be True To Your Self: **BT2YS (pp 19-35)**
- Express Your Self: **EYS (pp 36-46)**
- Give To Your Self: **G2YS (pp 47-53)**
- Believe In Your Self: **BIYS (pp 54-61)**

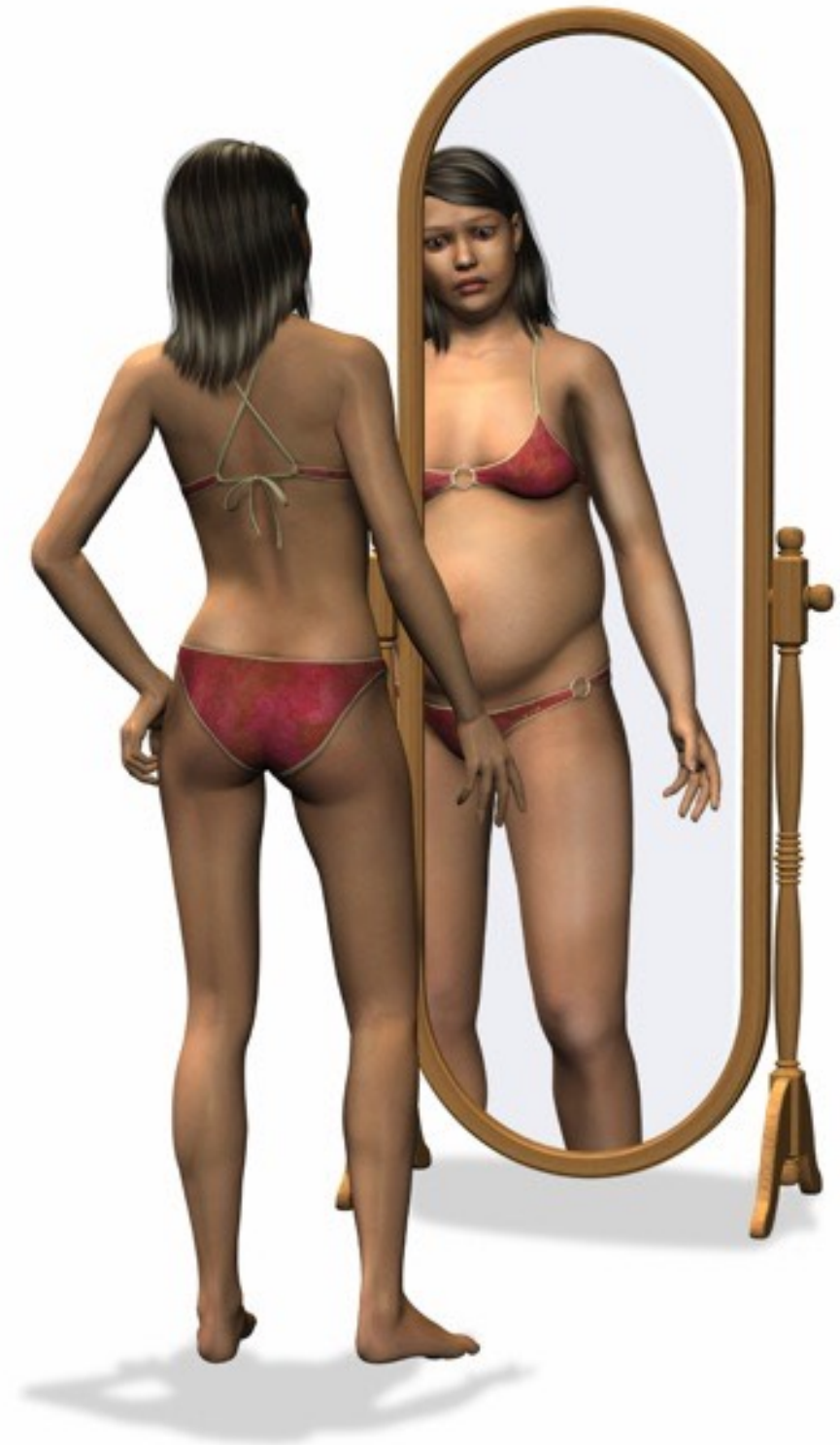
*ALSO NOTE the **EDIT™ OVERVIEW** (pp 3-4) **EDIT™ ASSESSMENT** (pp 5-6) & **EDIT™ RESOURCES** (p 62)*

Case Study: “Ana”

Anorexia Nervosa:

primary focus is healing distorted body image, challenging “food rules,” developing emotional awareness, healthy coping skills, routines of Self-Care, and addressing core issues

- LYS: pages 7, 9, 10, 11, 12, 14, 15, 16
- BT2YS: pages 21, 23, 24, 25, 26, 27, 35
- EYS: pages 36, 37, 38, 39, 41, 43, 45
- G2YS: pages 47, 48, 49, 50, 53
- BIYS: pages 54, 55, 56, 57, 58, 59, 60, 61

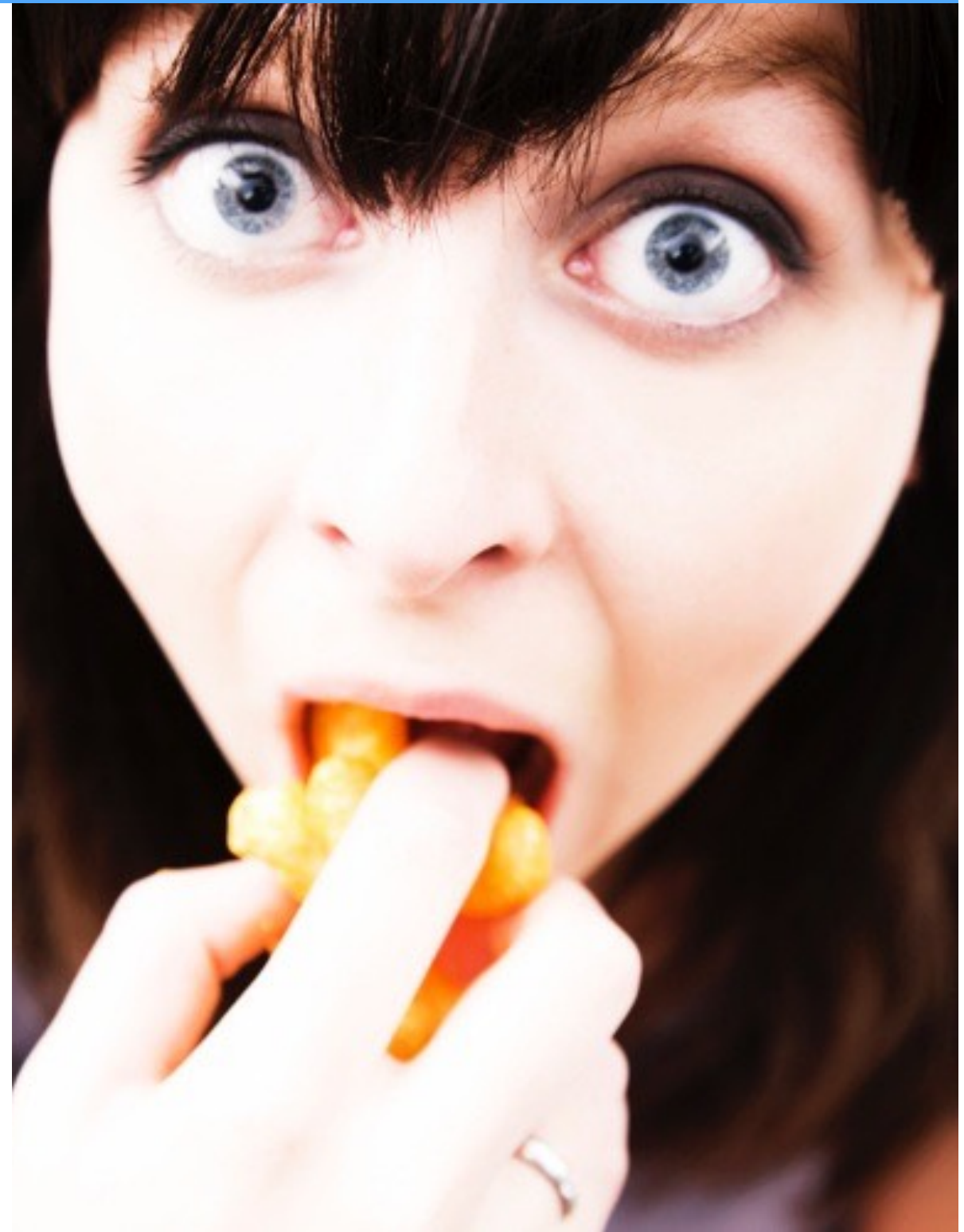


Case Study: “Mia”

Bulimia Nervosa:

*primary focus is developing a sense of Self
“beyond the mirror,” challenging “food rules,”
learning intuitive eating skills, using healthy
coping skills, Self-Care, and addressing core issues*

- LYS: pages 7, 9, 10, 11, 12, 14, 15, 16, 17, 18
- BT2YS: pages 21, 23, 24, 25, 26, 27, 28, 30, 31, 35
- EYS: pages 36, 37, 38, 39, 40, 41, 42, 43, 45
- G2YS: pages 47, 48, 49, 50, 53
- BIYS: pages 54, 55, 56, 57, 58, 59, 60, 61



Case Study: “Bedi”

*Binge-Eating Disorder:
primary focus is healing critical self-talk,
learning intuitive eating skills, using healthy
coping skills, routines of Self-Care, and
addressing core issues*

- LYS: pages 7, 8, 9, 13, 14, 15, 16, 17, 18
- BT2YS: pages 21, 22, 24, 27, 28, 29, 30, 31, 35
- EYS: pages 36, 37, 38, 39, 40, 41, 42, 43, 46
- G2YS: pages 47, 48, 49, 50, 53
- BIYS: pages 54, 55, 56, 57, 58, 59, 60, 61



Case Study: “Fadi”

*Food Addiction:
primary focus is challenging “food rules,”
using “intuitive structure” to replace meal
plans, using healthy coping skills, routines of
Self-Care, and addressing core issues*

- LYS: pages 7, 8, 9, 13, 14, 15, 16, 17, 18
- BT2YS: pages 21, 23, 24, 25, 26, 27, 28, 30, 31, 35
- EYS: pages 36, 37, 38, 39, 40, 41, 42, 43, 46
- G2YS: pages 47, 48, 49, 50, 53
- BIYS: pages 54, 55, 56, 57, 58, 59, 60, 61



EDIT™ Client Sessions

Additional suggestions for working with specific ED behaviors and underlying issues:

- Exercise Addiction: *add* **BT2YS 32, 33, 34, 35**
- Chronic Dieters: *omit* **BT2YS 22, 29**
- Perfectionists: *add* **G2YS 51, 52** *emphasize* **49, 50**
- Inner Critics: *emphasize* **LYS 7, 8, 13, 14, 15, 18**

*ALSO NOTE the final worksheet – **PEPPY'S MESSAGE** (p 64) – great for ALL CLIENTS*

- Share with clients to inspire with the hope of complete recovery
- Encourage clients to consider their own means of creative expression: journal writing, poetry, art making, music playing, dance!

Peppy's Message

"In The Mirror" – a Poem by Dr. Dorie



I wrote this poem at the end stages of my eating disorder recovery. At that time, I had a parakeet named Peppy. I left his cage door open so he could fly freely around my apartment, but he preferred to sit in his cage and gaze at his reflection in the mirror. He would peck his beak at his image, as if he was kissing himself. He'd coo and sing to his reflection, and would actually say these words: "I Love You!" Over and over and over he sang, "I Love You! I Love You! I Love You!"

Meanwhile, I *hated* the image I saw in the mirror. In fact, I tried to avoid looking in the mirror at all. Then I began to wonder – "What if Peppy has a message for me? What if he's trying to tell me to look in the mirror and love what I see?" So I began this daunting task. At first, I focused on parts of my body that I could "like." Next, I was able to take in my entire reflection, wearing outfits that I liked, and feel "pretty good" about myself.

Finally, as I was getting out of the shower one day, I stopped and looked at my entire naked body in the mirror. I truly paused, and regarded my reflection with... *love*. I looked in the mirror, and said out loud, "I Love You!" Tears streamed down my face as I reached this place of peace with my body, and unconditional love for my entire being.

The day after I reached this place of peace, Peppy died. It was as if his purpose in my life was complete, to deliver the message, "Love Your Self" to me. For many years after this, I held Peppy's message as my own. After becoming a counselor, I realized that Peppy's message is for all of my clients, too...

And Peppy's message is for YOU.

When I look in the mirror
what do I see?
Is it my own reflection
looking back at me?
Do I see someone
I wish I was not?
Do I focus on things
I haven't got?
Or, can I feel complete
and give a smile or two?
Can I look at myself
and say, I Love You!
For it is with this Self
I must face the day
And I know Self-Acceptance
is the only way
I can't live for tomorrow
I've got to live now
And I intend to use my life
as best I know how
So when I look in the mirror
what do I see?
I see a vision of my Self
Being
All that I can be

EDIT™ Certified

Congratulations on completing this EDIT™ Training!
To become EDIT™ Certified, complete these steps:

- take the EDIT™ Certified Test (now available ONLINE in your Level I course)
- upon course completion, you'll get your EDIT™ Certified Badge
- you can also post your profile in the EDIT™ Certified Directory

Enhance your learning with these additional options:

- advance to higher levels of EDIT™ Certified from your course dashboard

LEARN MORE: www.EDITcertified.com/eating-disorder-certification

Eating Disorder Intuitive Therapy (EDIT)[™]

EDIT[™] Certified Training Manual

Developed and Presented by “Dr. Dorie” McCubbrey, MEd, PhD, LPC, CEDS

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