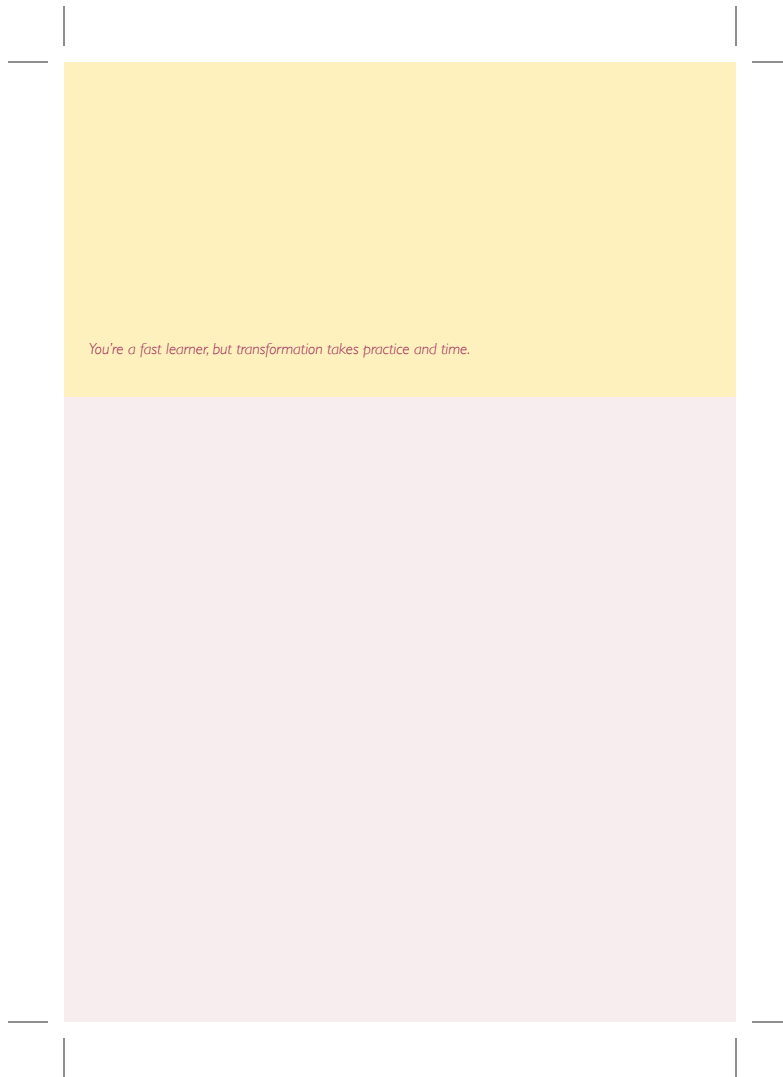


Print PDF front and back then, cut each 3x5 page out
Any light pink sections are to be cut down and discarded to
make smaller pages

But there are moments, walking,
when I catch a glimpse of myself in the window glass,
say, the window of the corner video store,
and I'm gripped by a cherish so deep for my own blowing hair,
chapped face, and unbuttoned coat that I'm speechless:

I am living. I remember you.

**an
apology**



I owe
you

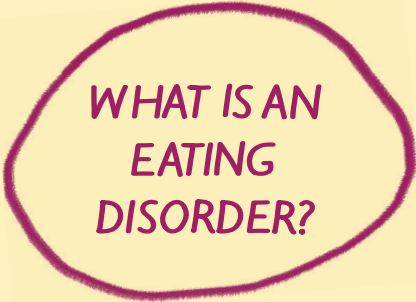
an
apology

This book is property of:

Recovery is not just about letting go of it.
We chose to heal relationships;
with ourselves, with our bodies,
with the world. You deserve to feel the joy
and passion in life that was taken away
from you by the voice that lingers.

I hope you tell it to go away. I hope this
helps you take it out of your ear. I think
this is a part of you. Maybe forever,
maybe just for now, but it is just that;
a part. Parts can be fixed
or replaced
or put towards a better function.

Recovery is possible and is worth it.
Lift the weight off your head and let it
hang on loosely.



WHAT IS AN EATING DISORDER?

Eating disorders are serious but treatable mental and physical illnesses that can affect people of all genders, ages, races, religions, ethnicities, sexual orientations, body shapes, and weights.

National surveys estimate that 20 million women and 10 million men in America will have an eating disorder at some point in their lives.

While no one knows for sure what causes eating disorders, a growing consensus suggests that it is a range of biological, psychological, and sociocultural factors.

Delete your Tracker

delete

cancel

whichever it is. It has masked as our friend for too long. When was the last time we were happy filling out an app that told us that is too much for today?

date:

It took me a long time
to accept this. Do not
be ashamed if it is hard
to let go. Maybe leave
it dormant. Let it feel
alone for a little while
before we say our
goodbye.

FINDING
YOUR
"TRUE-SELF"



WHO ARE YOU?

** define your identity,
without your eating disorder*

Birthday?

Gender?

Where you call home?

Favorite places?

Favorite things?

Favorite activities?

Something special about me?

Big dreams?

Small dreams?

Personal montras?



*WHAT CAN THEY
LOOK LIKE?*

ANOREXIA NERVOSA

- Dramatic weight loss
- Constantly cold or wearing layers for warmth
- Preoccupation with weight, food, calories, and dieting
- Resists or is unable to maintain a body weight appropriate for them
- Maintains an excessive, rigid exercise regime

AVOIDANT RESTRICTIVE FOOD INTAKE DISORDER (ARFID)

- Dramatic weight loss
- Limited range of preferred foods that becomes narrower over time
- Fears of choking or vomiting
- No body image disturbance or fear of weight gain

BINGE EATING DISORDER

- Secret recurring episodes of binge eating
- Feels lack of control over ability to stop eating
- Feelings of disgust, depression, or guilt after overeating
- Steals or hoards food in strange places
- Creates lifestyle schedules or rituals to make time for binge sessions
- Evidence includes a disappearance of large amounts of food in a short time period
- Empty wrappers and containers indicating consumption of large amounts of food

BULIMIA NERVOSA

- Evidences includes disappearance of large amounts of food in short periods of time
- Empty wrappers and containers indicating consumption of large amounts of food
- Evidence of purging behaviors, include frequent bathroom trips after meals, signs of vomiting, presence of laxatives or diuretics
- Drinks excessive amounts of water or non-caloric beverages
- Excessive amounts of mouthwash, mints, and gum
- Calluses on the back of the hands from self- induced vomiting
- Dental problems from vomiting, and tooth sensitivity

Evidence includes a disappearance of large amounts of food in a short time period
empty wrappers and containers indicating consumption

DIABULIMIA

- Increasing neglect of diabetes management
- Secrecy about diabetes management; discomfort testing/injecting in front of others
- Fear that “insulin makes me fat”
- Restricting certain food or food groups to lower insulin dosages
- A1c of 9.0 or higher on a continuous basis

ORTHOREXIA

- Cutting out an increasing number of food groups (all sugar, all carbs, all dairy, all meat, all animal products)
- An increase in concern about the health of ingredients; an inability to eat anything but a narrow group of foods that are deemed 'healthy'
- Spending hours per day thinking about what food might be served at upcoming events
- Body image concerns may or may not be present

OTHERWISE SPECIFIED FEEDING OR EATING DISORDER (OSFED)

Because OSFED encompasses a wide variety of eating disordered behaviors, any or all of the following symptoms may be present in people with OSFED.

- *Frequent episodes of consuming very large amount of food followed by behaviors to prevent weight gain, such as self-induced vomiting*
- *Evidence of binge eating*
- *Self-esteem overly related to body image*
- *Dieting behavior*
- *Expresses a need to “burn off” calories taken in*
- *Evidence of purging behaviors*

PICA

- *The persistent eating, over a period of at least one month, of substances that are not food*
- *May include paper, soap, cloth, hair, string, wool, soil, chalk, talcum powder, paint, gum, metal, pebbles, charcoal, ash, clay, starch, or ice*

RUMINATION DISORDER

- *Repeated regurgitation of food for a period of at least one month. Food may be re-chewed, re-swallowed, or spit out*
- *If occurring in the presence of another mental disorder (e.g., intellectual developmental disorder), it is severe enough to warrant independent clinical attention*

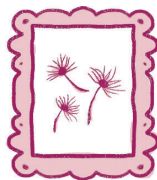
COMPULSIVE EXERCISE

- *Exercise that significantly interferes with important activities, occurs at inappropriate times or in inappropriate settings*
- *Occurs when the individual exercises despite injury or other medical complications*
- *Intense anxiety, depression and/or distress if unable to exercise*
- *Exercise takes place despite injury or fatigue*

EXCESSIVE EXERCISE

- *Intentional dieting or food restriction*
- *Constant soreness, strain, and pain*
- *Overuse injuries*
- *Fatigue*
- *Reduced appetite and weight loss*
- *Irritability and agitation*
- *Disturbed sleep*

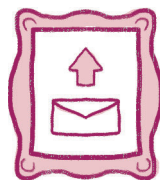
Write yourself a thank you letter.
Your body does so much for you,
show it your appreciation.




Write your body an apology.
Acknowledge the damage you have been through.
Be honest and understanding

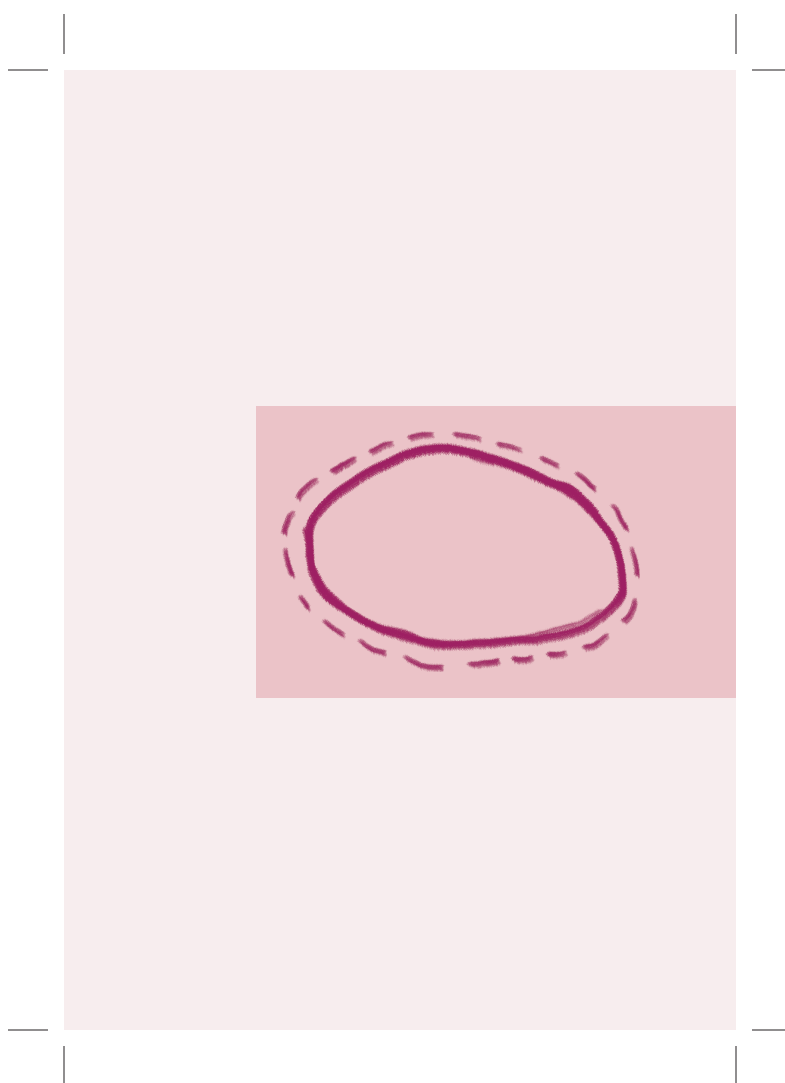


Write your ED a goodbye.
Say your farewells. Leave this behind.
Somewhere,
anywhere.



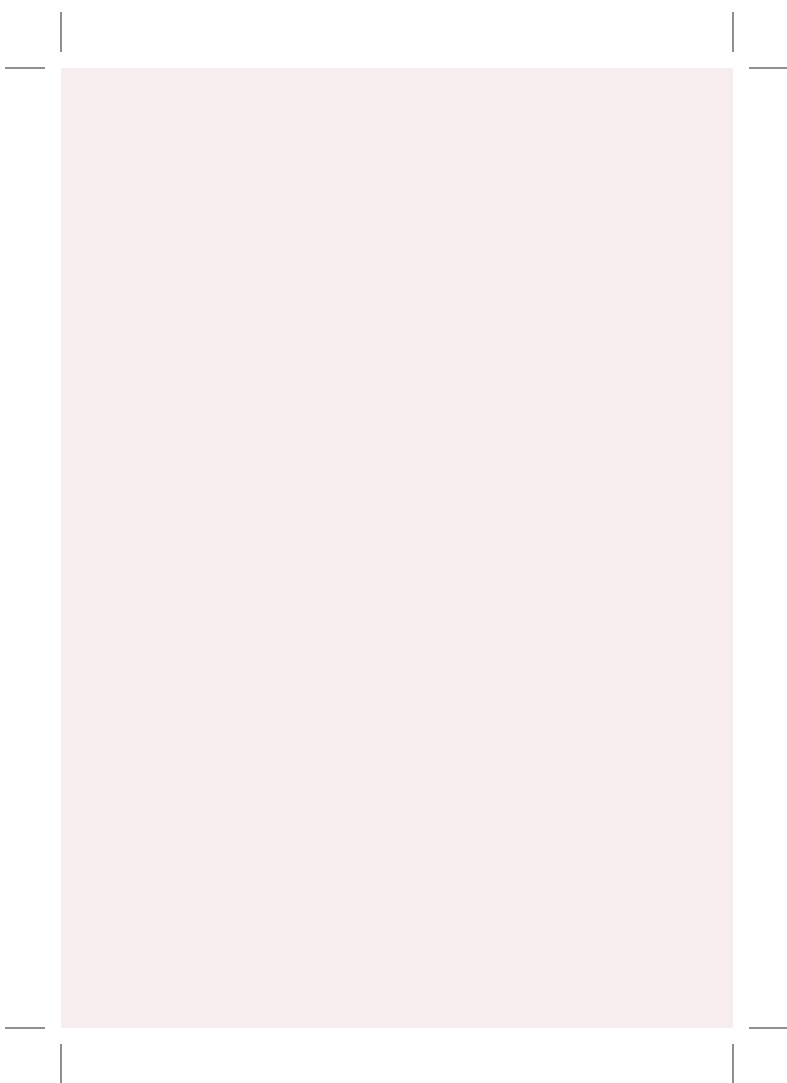


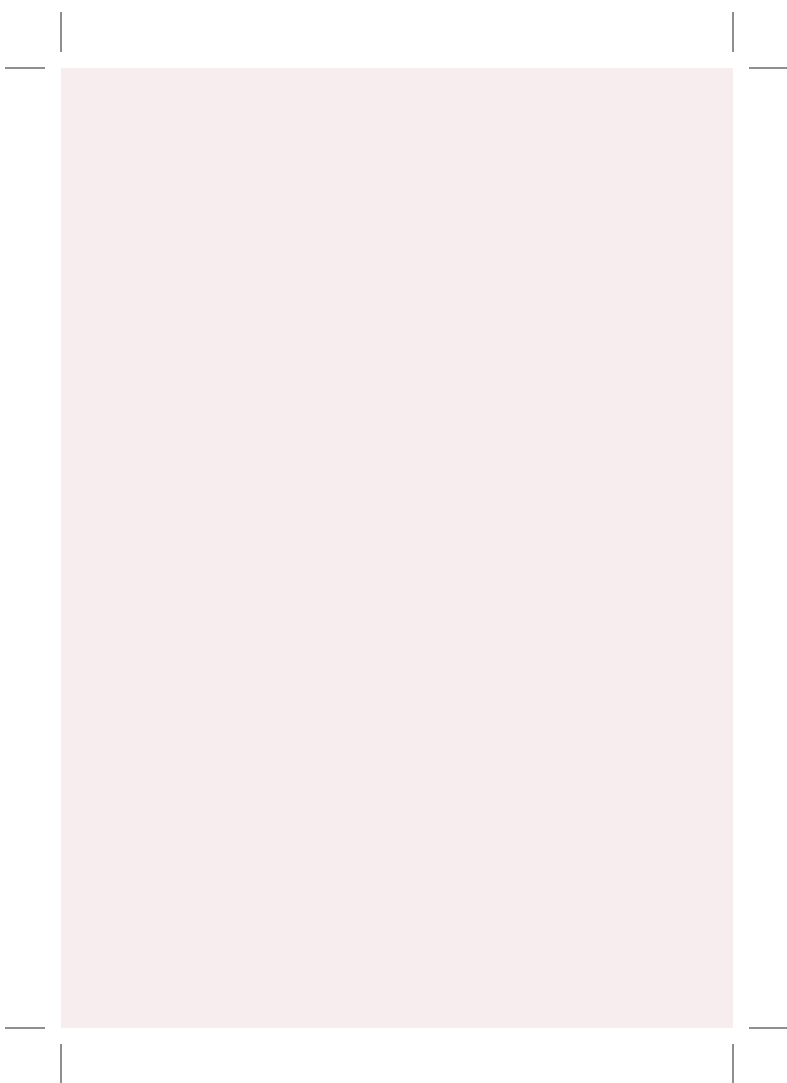
WRITE SOMETHING
SPECIAL ABOUT
YOU














What is your ED telling you right now?
Let out the voice of your ED.



Now answer those thoughts as
your true self?
Be gentle. Be kind



HOW TO: WORK THROUGH TRIGGERS

☐ 5-4-3-2-1 Grounding
5 things you see,
4 you hear,
3 you feel,
2 smells,
1 strength about you

☐ Sing your thoughts

☐ Write down mantras
now decorate them

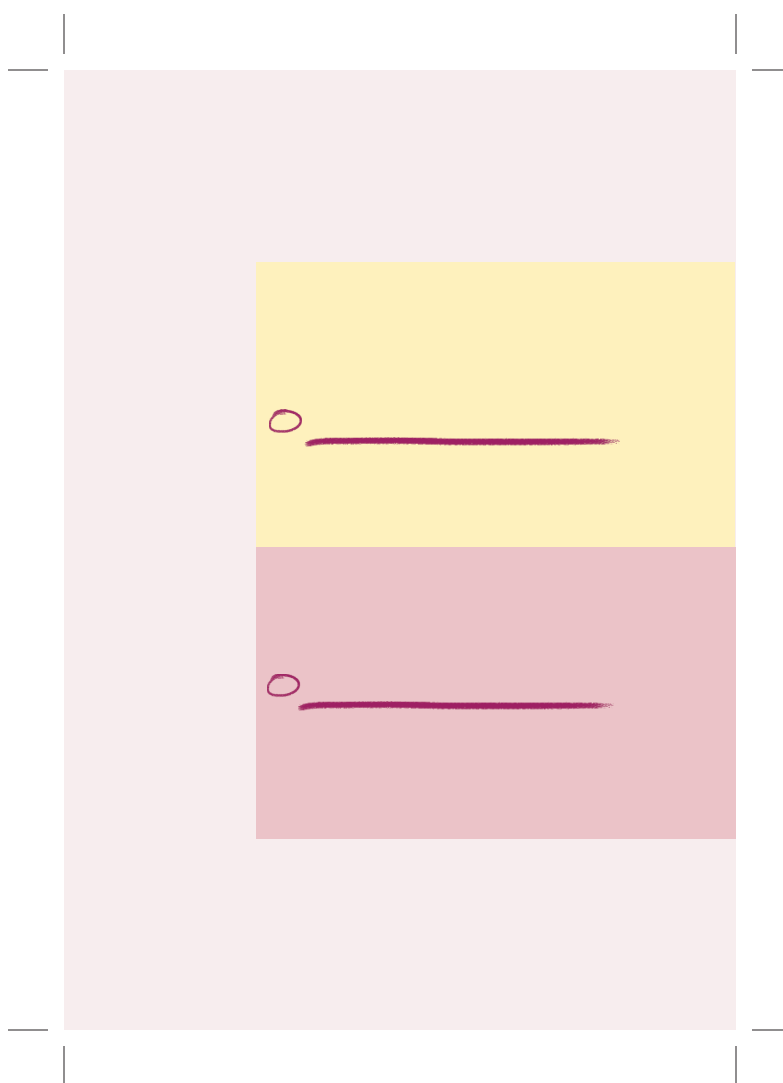
☐ Listen to music you love

☐ Journal your
feelings or thoughts



☐ Scream into your pillow

☐ Take a stroll outside



SOURCES

What the Living Do by Marie Howe

NEDA

<https://www.nationaleatingdisorders.org/>

EDIT™

<https://editcertified.com/wp-content/uploads/2020/10/EDIT-3.5-Worksheets.pdf>



I AM SORRY