

Diary of potential triggers to using unhealthy eating behaviours

Day: _____

Date: _____

Every time you feel like overeating, bingeing, taking laxatives, restricting, being sick, etc., please complete this diary.

Then decide whether you want to use that behaviour, and make a note of the outcome.

Look at what you can learn, before going into your next therapy session.

Time	What did I last eat? When?	Context/trigger <i>(Where was I? Who was about? What was I doing?)</i>	What eating behaviour(s) did I feel like using?	What thoughts/ core beliefs can you identify that might be relevant?	What emotions are you experiencing that you might be trying to block out?	What do I want to do? (safety behaviour) What am I going to do, having thought about why?