

SPACE TO BREATHE

Rebuilding Identity Beyond an Eating Disorder

Compassionate Support Guide
Body Image · Self-Perception · Recovery



SUPPORT HUB



A fuller, practical guide to identity, body image, self-perception and recovery

Read in any order. You can write, talk, draw or simply reflect. Pause if an activity becomes distressing. This guide complements, but does not replace, professional eating-disorder care.

How to use this guide

An eating disorder can affect much more than eating. It may shape routines, relationships, decisions, confidence, the way you experience your body, and the language you use about yourself. It can become difficult to remember who you are outside of its demands.

This guide offers a place to explore that experience without pressure to have everything figured out. Recovery is not linear. Identity can change as you grow, and there is no single “correct” self to return to.

Choose one activity or question at a time. You may write, draw, think quietly, or talk with a trusted person. Skip anything that feels unhelpful.

Before you begin: If an exercise increases distress, stop and return to something grounding. This resource is supportive education, not a replacement for individual treatment, nutritional care or medical advice.

A gentle starting point

- What would I like this guide to help me understand or reconnect with?
- What might help me feel supported while I use it?

1 | You are more than the disorder

An eating disorder may take up time and attention, but it is not the whole story of who you are. Your identity also includes experiences, relationships, humour, creativity, beliefs, curiosity, skills and hopes.

It is understandable if some of those parts feel unfamiliar or out of reach. The aim is not to force a positive description of yourself, but to begin noticing what else exists alongside the disorder.

Try beginning with “I am someone who...” rather than “I should be...”

- When do I feel most like myself, even briefly?
- What is one thing about me that has nothing to do with food or appearance?

2 | My identity map

Imagine your identity as a map with several connected areas, not a single label. Some areas may be strong, some faint, and some still undiscovered.

Explore six areas: relationships, interests, values, strengths, meaningful memories and future possibilities. You do not need an answer for every area.

An identity map can include contradictions. You can be uncertain and hopeful, cautious and adventurous, tired and determined.

People or connections that matter to me

Interests, activities or curiosities I have

Values or qualities I care about

Something I might like to explore

3 | Finding my values

Values are directions that matter to us, not standards we have to meet perfectly. They can guide choices even when motivation or confidence is low.

Examples include kindness, honesty, learning, independence, connection, creativity, humour, fairness, stability and curiosity. Choose what feels meaningful to you, not what others expect.

A value is not a test. “Connection” might mean sending one message; “creativity” might mean listening to music or making something.

Three values I would like to make more room for

- How might one of those values show up in a small everyday action?
- What gets in the way, and what support could help?

4 | Strengths beyond survival

Strengths are not always dramatic. Asking for help, adapting to a difficult day, caring about someone, recognising a limit or trying again can all reflect personal qualities.

Some strengths may have been used mainly to manage distress. You can begin to notice how they might support other parts of your life.

You do not need to feel strong to have strengths.

A difficult moment I have navigated and what it says about me

A quality a trusted person might recognise in me

A strength I would like to use for something enjoyable

5 | Body image and body neutrality

Body image is the way you think, feel and relate to your body. These experiences can change from day to day and may be influenced by stress, comparison, comments, trauma and eating-disorder thoughts.

Body neutrality offers an alternative to demanding body confidence or constant positivity. You can practise treating your body with respect without needing to like how it looks.

Body-neutral language might sound like: “My body deserves care even when my feelings about it are complicated.”

- What messages about bodies have influenced me?
- How do I notice when comparison or checking affects my mood?
- What would respectful care for my body look like today?

6 | Separating thoughts from identity

Eating-disorder thoughts can sound authoritative or familiar. Having a thought does not make it a fact, and it does not mean the thought represents your values.

Rather than arguing with every thought, it can help to name it as a thought, notice its impact, and consider whether responding to it would move you towards or away from what matters.

If this exercise becomes overwhelming, pause. You do not have to challenge every thought alone.

A difficult message my mind sometimes gives me

- How could I describe it as “I am having the thought that...”?
- What would a more compassionate or values-led response sound like?

7 | Relationships and belonging

An eating disorder can affect social connection. You may feel misunderstood, withdraw from activities or find it difficult to explain what support is useful.

Belonging does not require telling everyone everything. You can choose who you trust, what you share and what boundaries you need.

Support may sound like: “Please spend time with me without focusing on my appearance or what I eat.”

- Who helps me feel accepted as a whole person?
- What kind of support feels useful, and what does not?

One boundary or request I could communicate

8 | Reconnecting with interests

When life has narrowed around eating-disorder routines, enjoyment may feel distant. Interest often returns gradually, and it does not have to feel exciting at first.

Think about low-pressure possibilities: music, nature, a hobby, a favourite subject, making something, learning, games, community or rest.

Aim for exploration, not achievement. Five minutes of curiosity counts.

Something I used to enjoy or feel curious about

A new or forgotten interest I could try without pressure

One tiny step that would make it accessible

9 | Meeting change with compassion

Recovery can bring grief, uncertainty and mixed feelings, even when change is wanted. You may miss familiar routines while also wanting a wider life. These experiences can coexist.

There is no deadline for knowing who you are. You can build identity through repeated, small choices, with support and without needing to prove progress.

Progress is not measured by how positive you feel. Making room for complexity is meaningful too.

- What feels difficult about change right now?
- What might become possible with more space in my life?
- What would I say to a friend feeling the same way?

10 | A letter to myself

Try writing to yourself as you would to someone you care about. You might acknowledge what has been difficult, recognise qualities that have endured, and give yourself permission to keep discovering who you are.

There is no need to promise a perfect future. Keep the letter realistic, gentle and in your own voice.

Possible opening: "I know this has taken a lot of space in your life. I also know there is more to you..."

- Dear me, here is what I want you to know...

11 | My next small steps

Choose steps that are personally meaningful, manageable and supported. A small step might involve reconnecting with someone, exploring an interest, reducing comparison, asking for support or taking a moment to notice a value.

If a step feels too large, make it smaller. If you need treatment support, you deserve help alongside these reflections.

Return to this page whenever you need. Your next step can change.

One part of myself I want to reconnect with

A small action I can try this week

- What could get in the way, and how could I respond kindly?

Someone or something that could support me

12 | My reflection summary

This page brings together the parts of the guide that feel most important to you. You can keep it private, revisit it or share it with someone supporting your recovery.

- I am more than...
- Qualities and values I want to remember
- Things that help me feel connected to myself
- The support I need from others
- One gentle intention I am taking forward

13 | Understanding the identity gap

When an eating disorder has organised daily life for a long time, the question “Who am I without it?” may feel frightening rather than hopeful. Familiar routines can offer predictability, even when they cause harm. Losing a familiar role can create a genuine sense of grief.

You do not need to replace the eating disorder with a polished new identity. Try thinking of identity as something you practise rather than something you must discover all at once. Small moments of choice, connection and curiosity can gradually make your world larger.

Example: “I am not sure what I enjoy yet, but I can try sitting in the garden for five minutes.”

- Where do I notice the eating disorder taking up space in my day?
- What part of my life would I like to have a little more room?
- What feelings come up when I imagine that change?

14 | Roles, labels and expectations

People may describe you as a patient, a parent, a partner, a student, a colleague, a carer or a person in recovery. Roles can be meaningful, but none needs to describe all of you. Labels can help people access care and understanding; they do not define your worth.

Notice the difference between a role you choose and a role you feel pressured to perform. It is possible to value caring for others while also needing care yourself.

You can say “I am a person living with an eating disorder” without making that your only story.

Roles I hold in my life

Roles that feel meaningful or energising

Expectations I would like to loosen

15 | A kinder relationship with appearance

Appearance-focused thoughts can become automatic, especially during stress. Body checking, comparison and seeking reassurance may briefly ease uncertainty while keeping attention fixed on

appearance. This is not a personal failure; it is a pattern that can be explored with appropriate support.

A gentler alternative is to widen attention towards the present moment, your environment, your relationships and the activities you value. Avoid setting appearance goals in this exercise. The aim is to create space for living.

Try: “I am noticing a difficult body-image moment. I can still choose a caring next action.”

Situations that intensify appearance-related thoughts

A non-appearance focus I could gently return to

Words I would prefer others to use when supporting me

16 | When food and identity overlap

Food may be connected to family, culture, faith, sensory preferences, celebrations, safety, memories and autonomy. An eating disorder can complicate these connections, and it is important not to assume everyone experiences food in the same way.

For people with ARFID, sensory differences, fear of adverse consequences and low interest in eating can be central. The goal is not to pressure yourself into a particular relationship with food, but to recognise that your identity also contains many interests, relationships and values beyond eating. Any food-related changes should be guided by your own treatment needs, especially where nutrition or medical safety is a concern.

- What meanings or memories do I associate with food?
- What would I like people to understand about my experience?
- How can I experience belonging without food becoming the only focus?

17 | The voice of shame and self-criticism

Shame often says “There is something wrong with me,” whereas guilt may concern a particular action. Both can feel powerful, but neither is a reliable measure of your worth. Harsh self-talk can make it harder to ask for help or recognise progress.

Compassion is not the same as agreeing with every thought or pretending things are easy. It means responding to difficulty with understanding, honesty and care. You can acknowledge distress and still believe that you deserve support.

A believable compassionate response may be modest: “This is hard, and I am allowed to get help.”

A critical phrase I often hear in my mind

- What might this phrase be trying to protect me from?

A kinder response that feels believable to me

18 | Identity and neurodivergence

Autism, ADHD and other neurodivergent experiences can shape sensory needs, communication,

routines, energy and a sense of belonging. These differences are not faults to erase. Understanding your needs may be part of rebuilding a more authentic identity.

It can be especially important to separate eating-disorder rules from genuine sensory needs and preferences. The two may coexist. Support works best when it respects communication style, accessibility, predictability and individual autonomy.

There is no single “normal” way to eat, communicate, rest or belong. Personalised professional support can help distinguish overlapping needs.

- What helps me feel understood and accommodated?
- What sensory or communication needs deserve respect?
- Where have I felt pressure to mask or hide part of myself?

19 | Grief for time, opportunities and experiences

You may feel sadness or anger about time spent unwell, missed experiences or relationships that changed. Grief does not mean you are failing at recovery. You can appreciate your efforts and still mourn what has been difficult.

Try not to turn grief into another task to complete. You can give it words, share it with someone safe, or simply acknowledge its presence. A meaningful future does not require denying the past. Both can be true: “I wish things had been different” and “My life can still hold meaning.”

Something I feel I have lost or missed

What I wish someone understood about that loss

A possibility I might still want to make room for

20 | Boundaries, autonomy and support

Recovery can involve other people, but you remain a person with preferences and boundaries. Helpful support is collaborative rather than controlling. You can ask people to avoid comments about weight, appearance, portions or what you “should” be doing.

Boundaries are not punishments. They are ways of explaining what makes connection safer and more respectful. Some conversations are easier in writing, especially when you feel overwhelmed. Example: “I appreciate your concern. It helps me more when we talk about how I am feeling rather than how I look.”

A comment or behaviour that makes things harder

What I would prefer instead

A sentence I could use to communicate that boundary

21 | Meaningful activities and the energy budget

Trying new activities while managing an eating disorder can be tiring. Meaningful does not have to mean productive, social or ambitious. Rest, play and quiet connection can all express your values.

Think about your available energy and access needs. Make an activity easier rather than deciding

you have failed. A brief, adapted version still counts.

Example: If going to an art class is too much, looking at colours or making a small sketch at home can be a first step.

Activities that restore me or spark curiosity

- What makes an activity difficult to access?
- How could I adapt one activity to fit my energy today?

22 | Responding to setbacks without losing yourself

Difficult days do not erase the parts of you that have grown. Eating-disorder symptoms and distress may fluctuate. It can help to plan how you will respond when old patterns become louder, rather than expecting to avoid every difficult moment.

A compassionate plan includes noticing warning signs, reaching out early and returning to the support that is appropriate for you. If symptoms are worsening, involve your treatment team or GP rather than relying on self-help alone.

A setback is information about what support you need, not a verdict on your character.

Early signs that I need more support

People and services I can contact

A grounding activity that is safe and realistic for me

23 | Reclaiming my story

You may have been described through symptoms, diagnoses or other people's concerns. Your experience matters, and you have the right to decide how much of your story to share. There is no obligation to turn suffering into a lesson or a success story.

Try writing about a moment when you felt connected to something beyond the eating disorder. It can be ordinary: laughing with a friend, noticing the weather or finishing a small task. These moments are part of your story too.

Your story can remain unfinished. You do not owe anyone a neat ending.

A moment that reminds me I am a whole person

What I would like my story to include besides illness

24 | My personal identity compass

Use this final activity to bring together the parts of yourself you want to remember. Think of a compass with four directions: what matters, what helps, who supports you, and what you want to explore.

The compass is not a recovery scorecard. It is a reminder you can return to when your sense of self feels small or uncertain.

Keep your compass somewhere accessible. You can change any answer as you change.

NORTH — values I want to move towards

EAST — interests or possibilities I want to explore

SOUTH — things that ground or support me

WEST — people and communities where I belong

When you need more support

This guide is a reflective resource and is not a substitute for eating-disorder assessment, therapy or medical care. If eating, physical symptoms or emotional distress are affecting your wellbeing, speak with your GP or eating-disorder care team. You do not need to wait until things feel severe to ask for help.

In the UK, the eating-disorder charity Beat offers information and support at beateatingdisorders.org.uk. For urgent medical concerns use NHS 111; in an immediate emergency call 999.

Remember: You do not have to earn support through symptoms, appearance or a particular diagnosis. You deserve to be heard and taken seriously.

A closing reflection

- What is one thing I want to carry with me from this guide?

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