YOUR ANSWERS. YOUR PERSPECTIVE.

Eating-disorders

Personal everyday reflection

A wholly fictional example. The values illustrate a report and say nothing about you.

ANSWERED: 22 / 22 | 4 PROFILE AREAS

1

Thoughts about eating

You describe thoughts and decisions around eating as persistently occupying attention. In your account, the subject remains present outside meals or after a decision has been made.

2

Flexibility around meals

You describe personal rules or fixed routines as creating pressure around eating. A practical change may then occupy your thoughts longer than the meal itself. Some responses differ substantially from this direction.

3

Individual responses matter

Flexibility around meals: Scored responses range from 2 to 5/5 (items 10 & 11).

Your first small step

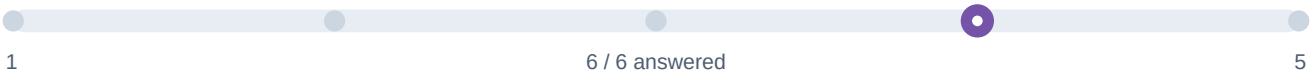
What kind of pressure around meals would you like to discuss in a supportive conversation? You do not need to change or test a rule in order to do so.

02 / YOUR REPORT

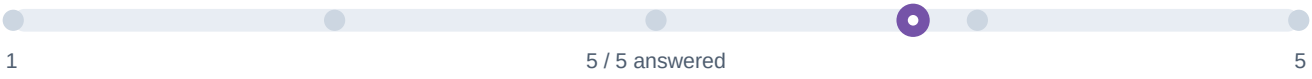
Your profile at a glance

Each dot shows an area response average on a scale of 1 to 5. Only your own responses are compared.

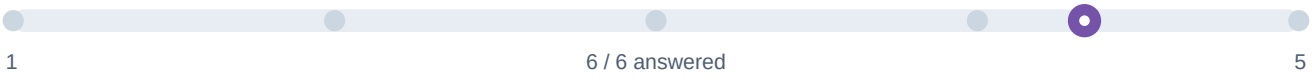
Thoughts about eating 4.0 / 5



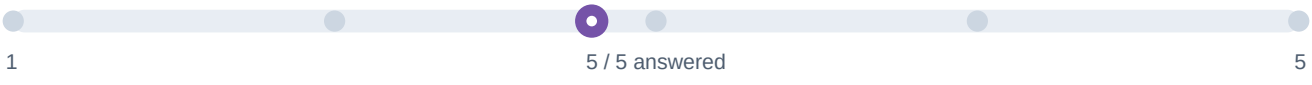
Flexibility around meals 3.8 / 5



Body and self-evaluation 4.3 / 5



Contact and support 2.8 / 5



How to read the chart

1 = low, 3 = midpoint, 5 = high agreement in the scored direction. Higher is not automatically better. The midpoint is not the average of other people; small differences are not necessarily meaningful.

No area value is shown if fewer than 80% of its items are answered. This is a display rule for incomplete data, not a performance or health threshold.

03 / YOUR REPORT

Connecting your responses

Observations from your responses, not fixed characteristics.

The report describes thoughts, rules, body evaluation and contact around eating. It does not establish an eating disorder or assess nutritional status or medical risks.

Your result in words

Thoughts about eating: You describe thoughts and decisions around eating as persistently occupying attention. In your account, the subject remains present outside meals or after a decision has been made.

Flexibility around meals: You describe personal rules or fixed routines as creating pressure around eating. A practical change may then occupy your thoughts longer than the meal itself.

Flexibility around meals: take a closer look

The average combines different responses. These two items show why one number alone does not capture your whole perspective:

Item 10: When a meal turned out differently from planned, I could usually find an option that suited me. | Mostly true

Item 11: The thought of not following one of my own eating rules occupied me longer than the practical situation itself. | Very true

Consider a possible everyday situation

What kind of pressure around meals would you like to discuss in a supportive conversation? You do not need to change or test a rule in order to do so.

04 / YOUR REPORT

Thoughts about eating

Trace your responses and connect them with everyday situations.

This area concerns how much mental space eating takes up in daily life. An interest in food or cooking is not automatically treated as problematic.

Your response value **4.0 / 5**



1 6 / 6 answered 5

What this means in practice

You describe thoughts and decisions around eating as persistently occupying attention. In your account, the subject remains present outside meals or after a decision has been made.

Scale direction: less reported preoccupation / more reported preoccupation.

Two concrete responses

Item 3: I mentally revisited an eating decision even after it had been made.

Your response: Partly true

Item 5: Thoughts about eating made it harder to stay attentive in a conversation.

Your response: Very true

A prompt for further reflection

Without recording quantities, note when thoughts about eating push aside other important topics. What would you prefer to focus on in that moment?

When does this fit me - and when does it not?

05 / YOUR REPORT

Flexibility around meals

Trace your responses and connect them with everyday situations.

These statements concern pressure from personal rules and unexpected changes. They do not refer to medically necessary dietary rules or practical restrictions.

Your response value **3.8 / 5**



1 5 / 5 answered 5

What this means in practice

You describe personal rules or fixed routines as creating pressure around eating. A practical change may then occupy your thoughts longer than the meal itself.

Your individual responses differ substantially. The interpretation describes their average direction only; it does not apply to every statement. The following responses show both sides.

Scale direction: less reported pressure from rules / more reported pressure from rules.

Two concrete responses

Item 10: When a meal turned out differently from planned, I could usually find an option that suited me.

Your response: Mostly true (reverse-scored in the calculation)

Item 11: The thought of not following one of my own eating rules occupied me longer than the practical situation itself.

Your response: Very true

A prompt for further reflection

What kind of pressure around meals would you like to discuss in a supportive conversation? You do not need to change or test a rule in order to do so.

06 / YOUR REPORT

Body and self-evaluation

Trace your responses and connect them with everyday situations.

This area describes how thoughts about your body influence how you evaluate yourself. It does not assess a body shape or prescribe goals for changing it.

Your response value **4.3 / 5**



1 6 / 6 answered 5

What this means in practice

You describe body perception or comparison as strongly affecting mood and self-evaluation. Other aspects of your day or yourself may temporarily become less visible as a result.

Scale direction: less reported evaluative pressure / more reported evaluative pressure.

Two concrete responses

Item 16: I judged an entire day by how satisfied I felt with my body.

Your response: Partly true

Item 15: I could usually see my worth as a person independently of my appearance.

Your response: Not at all true (reverse-scored in the calculation)

A prompt for further reflection

What quality or activity matters to you independently of your appearance? You can record it as a conversation note without evaluating your body.

When does this fit me - and when does it not?

07 / YOUR REPORT

Contact and support

Trace your responses and connect them with everyday situations.

This area concerns the space eating and body-related thoughts take up in social life. The statements assess neither your relationships nor readiness for treatment.

Your response value **2.8 / 5**

1 — 5 / 5 answered — 5

What this means in practice

Your answers fall between “fewer reported barriers” and “more reported barriers”. This can reflect differing experiences or tentative agreement. The particular statements you endorse or reject are more informative here than the average alone.

Scale direction: fewer reported barriers / more reported barriers.

Two concrete responses

Item 18: I missed out on contact I wanted because eating would have been involved.

Your response: Mostly untrue

Item 20: I found it difficult to put distress around eating into words.

Your response: Mostly true

A prompt for further reflection

What response from another person would help: listening, avoiding appearance-related comments or accompanying you to advice? Express one wish without feeling you need to justify it.

When does this fit me - and when does it not?

08 / YOUR REPORT

Your values clearly explained

Thoughts about eating

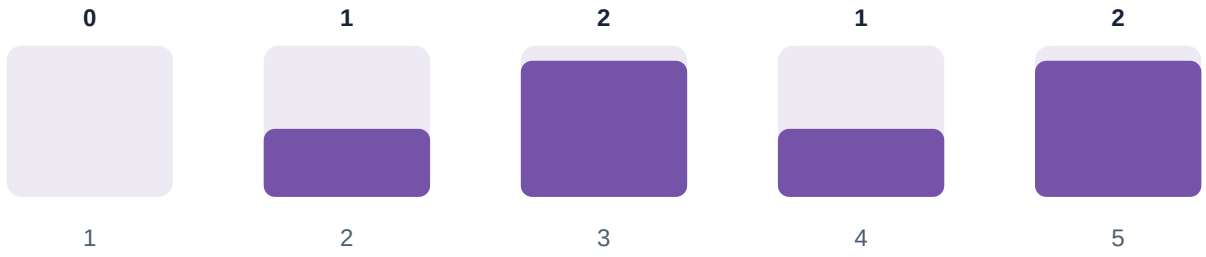
Response positions are counted from 1 to 5. The sum is divided by the number of answered statements in this area.

For reverse-scored statements, 1 becomes 5, 2 becomes 4 and vice versa; 3 stays 3. This aligns values with the stated scale direction. Your selected response remains unchanged in the appendix.

Calculated from your actual responses

4 + 5 + 3 + 4 + 5 + 3 = 24. 24 / 6 = 4.0 / 5.

The distribution of your selected responses



The columns count your selected response positions 1 to 5 before any reverse scoring. The same average can come from very different responses.

For the wording, response averages below 2.5 are described as lower agreement, above 3.5 as higher agreement, and those between as middle agreement. These are editorial response-scale bands, not scientifically validated cutoffs. Identical averages can arise from different responses.

A profile without a ranking

We assign no population rank or fixed type. The scales describe responses to particular statements. Choose your own priorities; a high or low value does not require change.

09 / YOUR REPORT

Your own next step

An optional everyday idea, without a performance target.

1

Today: note one situation

Starting point: Flexibility around meals. Choose a response in this area and note when it last fitted. A counterexample is just as useful.

2

This week: explore a perspective

What kind of pressure around meals would you like to discuss in a supportive conversation? You do not need to change or test a rule in order to do so.

3

Afterwards: decide for yourself

What fits you and what does not? Record one insight and decide whether to keep anything. You do not need a higher score or another purchase.

My situation and what matters to me:

My optional idea and a suitable time:

What I would like to take from this:

10 / YOUR REPORT

Method and limitations

What the report is based on

These original statements have not been clinically validated and are not a substitute for SCOFF or other established instruments. Averages describe agreement, not an eating-disorder diagnosis, severity or a safe nutritional status. Eating disorders can occur in different body shapes; body measurements are not assessed here. This reflection provides no dieting, weight or compensatory-behaviour advice. If eating or your relationship with your body is distressing, support can be helpful independently of a score.

Your responses are summarised according to the fixed rules explained here. Examples refer to the item numbers shown. No automated detection or assessment of a medical condition takes place.

Keeping the limitations in mind

Screening and self-reflection do not replace a medical or psychological assessment. Original reflection questions are not clinically validated. Each test page explains its method and limitations.

A profile does not cover every aspect of a person. It is a snapshot of your responses. Important relationship, career or other life decisions should not depend on it alone.

If you would like support

If symptoms are affecting you, seek support from a qualified health professional. In immediate danger, contact your local emergency services or nearest emergency department. Help information is available without an email address or payment.

Open general support information

Questionnaire version: 2026-10-29.27 | Report format: 2026-10-29.28

APPENDIX / YOUR REPORT

Your responses in full

Every scored response remains traceable. Skipped items are explicitly identified.

1 **Thoughts about eating distracted me even when a meal was not approaching.**
Thoughts about eating | Mostly true

2 **Deciding what I would eat took up more time than I wanted.**
Thoughts about eating | Very true

3 **I mentally revisited an eating decision even after it had been made.**
Thoughts about eating | Partly true

4 **Between meals, I could usually turn my attention to other interests.**
Thoughts about eating | Mostly untrue | reverse-scored

5 **Thoughts about eating made it harder to stay attentive in a conversation.**
Thoughts about eating | Very true

6 **Long after a meal had ended, I remained preoccupied with whether I had done everything correctly.**
Thoughts about eating | Partly true

7 **My own rules made choosing a meal difficult even when suitable options were available.**
Flexibility around meals | Partly true

8 **An unexpected change around eating caused more unease than I wanted.**
Flexibility around meals | Very true

9 **I needed a very specific routine around eating to avoid feeling under pressure.**
Flexibility around meals | Mostly true

10 **When a meal turned out differently from planned, I could usually find an option that suited me.**
Flexibility around meals | Mostly true | reverse-scored

11 **The thought of not following one of my own eating rules occupied me longer than the practical situation itself.**
Flexibility around meals | Very true

12 **My mood depended strongly on how I perceived my body that day.**
Body and self-evaluation | Very true

13 **Comparing my body with others took attention away from what I was doing.**
Body and self-evaluation | Mostly true

Your responses in full / CONTINUED

14 **A comment about appearance stayed on my mind longer than I wanted.**
Body and self-evaluation | Very true

15 **I could usually see my worth as a person independently of my appearance.**
Body and self-evaluation | Not at all true | reverse-scored

16 **I judged an entire day by how satisfied I felt with my body.**
Body and self-evaluation | Partly true

17 **Even on a day when I felt unsure about my body, I could appreciate things about myself unrelated to appearance.**
Body and self-evaluation | Mostly untrue | reverse-scored

18 **I missed out on contact I wanted because eating would have been involved.**
Contact and support | Mostly untrue

19 **When eating with others, I focused more on how I appeared than on the conversation.**
Contact and support | Partly true

20 **I found it difficult to put distress around eating into words.**
Contact and support | Mostly true

21 **I could tell an appropriate person which comments about eating or appearance were not helpful to me.**
Contact and support | Partly true | reverse-scored

22 **Fear of being judged kept me from asking a question about my experience.**
Contact and support | Mostly untrue