Standardized Scored Eating Disorder Assessment

This assessment aims to provide a standardized evaluation of eating behaviors, body image, and attitudes towards food. Please respond honestly to each statement, and assign a score from 0 to 4 based on how often the statement applies to you. Your total score will give you an insight into the potential presence and severity of eating disorder-related concerns.

- **Eating Habits (0-12 points)**
- I have regular and balanced meals. [0 1 2 3 4]
- I occasionally skip meals due to time constraints or lack of appetite. [0 1 2 3 4]
- I often struggle with overeating or undereating. [0 1 2 3 4]
- **Body Image (0-12 points)**
- I am generally satisfied with my body image. [0 1 2 3 4]
- I sometimes feel pressured to change my body's appearance. [0 1 2 3 4]
- I frequently feel unsatisfied with my body image and experience intense pressure for change. [0 1 2 3 4]
- **Attitudes Towards Food (0-12 points)**
- I have a healthy relationship with food and rarely feel guilty after eating. [0 1 2 3 4]
- I occasionally feel guilty after eating certain foods or engage in restrictive eating. [0 1 2 3 4]
- I often struggle with guilt, extreme dieting, or obsessive thoughts about calories. [0 1 2 3 4]
- **Seeking Help (0-4 points)**
- I have actively sought and received help for eating-related concerns. [0 1 2 3 4]
- I am open to seeking help but haven't taken action yet. [0 1 2 3 4]
- I am uncertain about seeking help or haven't considered it seriously. [0 1 2 3 4]
- **Scoring:**

Sum up your scores from each section to get your total score.

- **Interpretation:**
- 0-12: Mild concerns
- 13-24: Moderate concerns
- 25-36: Significant concerns
- 37-48: Severe concerns

Please note that this assessment is intended for informational purposes only and does not replace professional medical advice. If your score raises concerns, it's important to consult with a healthcare provider or mental health professional for further evaluation and guidance.