

*The ADE for Clinician Facilitation*

# Athletic Disordered Eating

The ADE Scale is a clinical tool used to assess changes in disordered eating and body image concerns in athletic population groups - including current and former athletes.



## Athletic Disordered Eating

Sport and movement have the capacity to improve body image and our food relationships. However, current and former athletes are said to have eating disorders in 3x the numbers compared to the general population. Not only does **early detection of disordered eating prevent eating disorders, but it also improves performance and overall wellbeing.**



### Describing disordered eating for your athletes and coaches...

Our relationship with food occurs along a continuum. On one side we have intuitive eating and body appreciation. This is when we feel good about what our bodies can do, and we have a great ability to eat flexibly, enjoy foods and listen to our body's needs. A positive relationship with food and your body is key to enjoying your sport for the long haul and performing at your best. On the other side of the continuum, we have eating disorders which are really challenging mental illnesses' that are never your fault, but you wouldn't wish them on your worst enemy. Before an eating disorder develops, disordered eating describes the thoughts and actions that snowball into an eating disorder. Understanding our food relationship and challenging it to be better is an amazing tool to develop performance and wellbeing. Never be afraid to ask for help if something doesn't feel right with your food or body relationship.

### The Continuum of **Disordered Eating and Body Image Concern**

Helpful behaviours  
and thoughts

Unhelpful behaviours  
and thoughts

Intuitive Eating and  
Body Appreciation

Disordered  
Eating

Eating  
Disorders

# The ADE Scale

# Athletic Disordered Eating

**Instructions:** This tool is designed for use in current and former athletes to screen for disordered eating indication. Complete the following items 1-17 in response to how you are feeling and behaving in your current state by ticking the boxes next to the item and the response.

- 1- I find spontaneous eating decisions challenging
- 2- I think about the calories/kilojoules I am burning when I train or exercise
- 3- I avoid social situations if there will be foods I don't feel comfortable eating
- 4- I overeat when I am allowed to eat freely i.e. off-season or a buffet
- 5- To change my body I cut back on foods or ingredients
- 6- I look to control my food when I want more out of my body
- 7- I carefully plan and think about what I eat
- 8- I am dissatisfied with my body shape or size
- 9- My performance or mood is influenced by how I feel about my body
- 10- I fear fat gain or muscle loss
- 11- I compare my body to other athletes or my former self
- 12- I feel bad when an athlete has a better looking body than mine
- 13- I will do extra exercise to influence my body weight or shape
- 14- I am motivated to train harder to influence my body shape or weight
- 15- Once I start eating I find it hard to stop
- 16- There are certain foods I can't control myself around
- 17- If I haven't exercised that day I will limit my food

	Never	Rarely	Sometimes	Often	Always
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99					
100					
Total Score =					



# Scoring the ADE and Subscales

## Athletic Disordered Eating

ADE  
Total Score =

### Subscale 1

#### Food and Energy Control

##### Item Score

1	
2	
3	
7	
17	
Total	

### Subscale 2

#### Bingeing

##### Item Score

4	
15	
16	
Total	

### Subscale 3

#### Body Control

##### Item Score

5	
6	
13	
14	
Total	

### Subscale 4

#### Body Disconnect

##### Item Score

8	
9	
10	
11	
12	
Total	

**Scoring:** Upon completion the **total score** will indicate the likelihood of disordered eating **Subscales:** can be used for more specific information. To compare between subscales divide the subscale score by the number of items.

**Food and Energy Control:** is disordered eating specifically relating to dietary control, food rules, restriction and food obsession or preoccupation. A score of 10 or more indicates food and energy control as a component of disordered eating.

**Bingeing:** is a perceived amount of food that feels too much where discomfort, shame, guilt or negative affect are experienced. A score of 6 or more indicates bingeing is a significant component of disordered eating.

**Body Control:** is where an individual cognitively or behaviourally control their body shape or size through exercise or other energy control. A score of 11 or more indicates having body control relating to disordered eating.

**Body Disconnect:** is where an individual is dissatisfied with their body shape, weight or composition and encompasses fat phobia or internalisation of a specific body ideal. A score of 14 or more indicates having body discontent relating to disordered eating.

## Athletic Disordered Eating

### Clinical Disordered Eating Discussion Prompts for Specific Population Groups

These specific questions have been developed from items that had a preference for certain population groups. They can be utilised in clinical setting as part of an assessment of disordered eating and can be used within the specified population groups, or outside of the groups.

### Disordered Eating Cognitions vs Behaviours

The responses to the items of the ADE on the previous page can be utilised to determine whether the disordered eating an individual engages in is occurring in a cognitive or a behavioural predominance. To compare between cognitive and behavioural aspects of disordered eating, divide the total cognitive score by 9 and the behavioural score by 8.

#### For Current and Former Female Athletes

- Is guilt an experience you associate with eating?
- Is eating ever a stressful experience for you?
- Describe how overeating would make you feel?
- When it comes to making food choices, what is that experience like for you?
- How would you describe how you speak to your body?
- Do certain sporting environments influence the way you feel about your body?

#### For Current and Former Male Athletes

- How much would you agree or disagree with the statement that all foods have a place in your diet?
- Would you say that to perform at your best, you feel the need to avoid certain foods?
- Is there an ideal physique that you aim for? Describe why that is and what it's like.

#### Former Athletes

- Would you be able to say you are proud of your body and what it can do?
- How does the thought of gaining weight make you feel?
- How would you feel if your clothing size changed?

### Cognitive Score

#### Item Score

1	<input type="text"/>
2	<input type="text"/>
7	<input type="text"/>
8	<input type="text"/>
9	<input type="text"/>
10	<input type="text"/>
11	<input type="text"/>
12	<input type="text"/>
14	<input type="text"/>
Total	<input type="text"/>

### Behavioural Score

#### Item Score

3	<input type="text"/>
4	<input type="text"/>
5	<input type="text"/>
6	<input type="text"/>
13	<input type="text"/>
15	<input type="text"/>
16	<input type="text"/>
17	<input type="text"/>
Total	<input type="text"/>

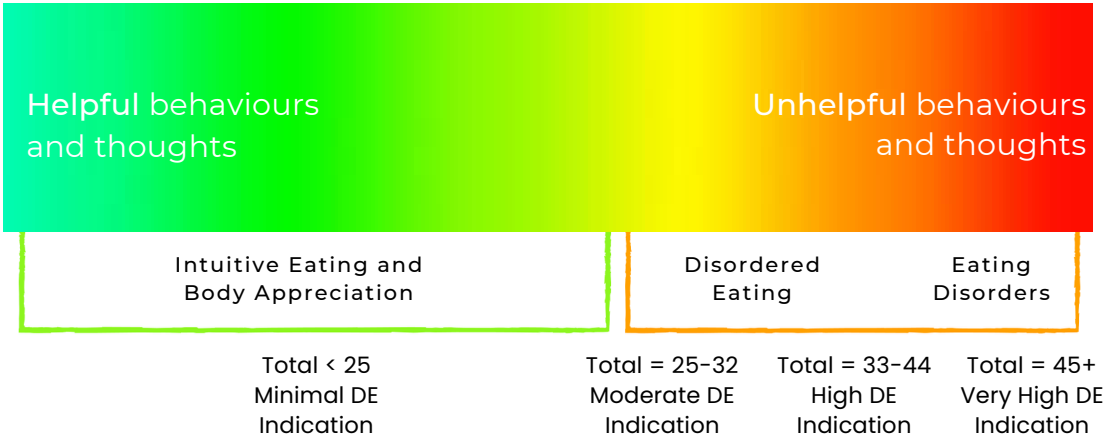
# Total Score Interpretation & Resources

## Athletic Disordered Eating

This result is best interpreted and supported by an eating disorder-trained health professional. It is always recommended that you seek support from a health professional when interpreting the result.

### The Continuum of Disordered Eating and Body Image Concern

If this brings up anything at all, don't hesitate to talk about it with a trusted adult or reach out to a health professional trained in eating disorders. When disordered eating is concerned, there is no such thing as not being "sick enough" to receive the help that you need. Everyone is worthy of support no matter how big or small the problem.



**Changes in Scores:** It is normal to move up and down the continuum of disordered eating across your life. A total score that changes by 7 (whether it is an increase or a decrease) indicates a clinically significant change in your relationship with food. A change in the following subscale scores is indicative of clinically significant change too: subscale 1 = 4, subscale 2 = 3, subscale 3 = 3, subscale 4 = 2. Discuss how you can move your food and body relationship towards intuitive eating and body acceptance with your trained health professional.

### SEEKING HELP AND MORE INFORMATION

- Association for Size Diversity and Health (USA)
- Australia and New Zealand Academy of Eating Disorders (AUS, NZ)
- Beating Eating Disorders (UK)
- Butterfly Foundation (AUS)
- Connect.ed: Australian Eating Disorder Providers (AUS)
- Eating Disorders Victoria (AUS)
- Inside Out Institute (AUS)
- McCallum Place, Victory Program (USA)
- National Eating Disorder Association (USA)
- National Eating Disorders Collaboration (AUS)

**This scale was developed and validated as per the following reference:**  
Buckley, G. L., Lassemillante, A.-C. M., Cooke, M. B., & Belski, R. (2024). The Development and Validation of a Disordered Eating Screening Tool for Current and Former Athletes: The Athletic Disordered Eating (ADE) Screening Tool. *Nutrients*, 16(16), 2758. <https://doi.org/10.3390/nu16162758>