



Loosening a rule you live by

Spot an unhelpful rule, see what it costs you, and try a roomier version.

Most of us live by rules we never chose. The rigid ones promise to keep a harsh belief about ourselves covered. Nobody can keep them every day, though, and while we're busy keeping them we never find out whether we needed them.

How to spot a rule

- Listen for must, should, have to, always and never.
- Finish the sentence "If I..., then...". The end is often an assumption.
- Notice when a small slip brings a flood of guilt, panic or shame.
- Look at what you avoid so that you don't break the rule.
- Check what you criticise yourself for. It usually points at a rule.

Rules people often carry

About food and bodies

- "If I eat after 8pm, I've failed."
- "I must be slim to be liked."
- "I have to earn my food."
- "Once I've blown it, the whole day's ruined."

About everything else

- "I must never let anyone down."
- "If I make a mistake, people will think I'm useless."
- "If people saw the real me, they'd leave."

How a rigid rule keeps self-esteem low

A harsh belief

"I'm not good enough."
Often left by earlier experiences.

A rule to cover it

"I must be slim to be liked." Keeping it feels safe.

Life tests the rule

A party, a photo, a meal.
You avoid, hide or try harder.

You never find out

Whether you needed the rule. The belief stays, and low mood makes it feel truer.

CBT works on two links in this chain: the rule itself, and the safety moves (avoiding, hiding, trying harder), which small experiments put to the test. Based on Melanie Fennell's cognitive model of low self-esteem.

One rule, worked through (an example, not a real person)

The rule	"If I eat after 8pm, I've failed."
When it switches on	Late home and hungry. I go to bed hungry, or I eat and feel like a failure all evening.
Where it came from	A diet club years ago, where the evening was "the danger zone".
What it does for me	It feels like control, and it draws a line under the day.
What it costs me	Hungry nights, huge breakfasts, feeling like a failure most weeknights, and saying no to dinner with friends.
A roomier version	"I'd like to eat at regular times, and that can include something in the evening. When I eat says nothing about who I am."
My experiment	On three evenings this week, a planned snack if I'm up past 8pm. I predict I'll lose control. I'll write down what really happens.

Whatever happens is useful. And expect the old rule to get loud again sometimes, especially when you're tired or stressed. Old rules do that, and it doesn't mean the work has failed.

Before you try a food experiment: if you're in treatment, check it with your therapist first. If you're underweight, or you've been eating very little for a while, don't use experiments to change how much you eat without medical support.

1 The rule, in the words it uses in my head

Pick one that's causing you trouble now, not the oldest or biggest. Look for must, should, always, never, or "if..., then...".

2 When it switches on

What's happening, what I feel, and what I do or avoid.

3 Where I learned it

Did it help back then? Does that situation still exist?

4 What it does for me

What is it protecting me from?

5 What it costs me

Time, food, sleep, friendships, fun, peace of mind.

6 A roomier version

Swap must and never for "I'd like", "usually" or "it's OK if". Would I say it to a friend I love? Copy it onto a card or your lock screen.

7 A small experiment

What I'll do

What I predict will happen

What actually happened

If this is hard, talk to someone

Worried about your eating? Talk to a doctor, or call the eating disorder helpline for your country. **United States:** ANAD, 1-888-375-7767, 9am to 9pm Central, Monday to Friday. **United Kingdom:** Beat, 0808 801 0677 (England), 0808 801 0432 (Scotland), 0808 801 0433 (Wales), 0808 801 0434 (Northern Ireland), 3pm to 8pm, Monday to Friday.

Ireland: Bodywhys, (01) 2107906. **Australia:** Butterfly Foundation, 1800 33 4673. Anywhere else, most countries run a free, confidential eating disorder helpline. You don't need a diagnosis to call any of them, and none of them is an emergency service.

Struggling to cope, or thinking about suicide? **United States:** call or text 988, the Suicide & Crisis Lifeline, any time. **United Kingdom and Ireland:** Samaritans, 116 123, free, any time. **Australia:** Lifeline, 13 11 14. For urgent mental health help in England, Scotland or Wales, call 111 or ask your GP or doctor. In an emergency, call 911 (US), 999 (UK), 112 or 999 (Ireland) or 000 (Australia).

The research behind this worksheet, with every source: healthcount.app/blog/improve-self-esteem-rules-and-assumptions. Main sources: Fennell 1997 and Rimes et al. 2023 (Behavioural and Cognitive Psychotherapy); Waite et al. 2012 and McManus et al. 2012 (Journal of Behavior Therapy and Experimental Psychiatry); Kolubinski et al. 2018 (Psychiatry Research); Murphy et al. 2010 (Psychiatric Clinics of North America).

Information, not therapy. It can't diagnose or treat any condition, and if you're in treatment, your care team's plan comes first. Partly inspired by the Centre for Clinical Interventions' Improving Self-Esteem module "Adjusting Rules and Assumptions" (cci.health.wa.gov.au), which draws on Melanie Fennell's cognitive model of low self-esteem. This worksheet is original and isn't endorsed by CCI.

healthcount.app/blog/improve-self-esteem-rules-and-assumptions · Information, not medical advice. Speak to your doctor about your own situation.

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