

# Reflections With “ED”



LA VENTANA

TREATMENT PROGRAMS

**Narrations, Stories & Experiences  
about eating disorders from the  
Staff at La Ventana  
Introduction**

Steve Zamarripa – Chairman & Founder

In the hope of encouraging someone to seek treatment with their eating disorder I asked the staff at La Ventana to share their experiences and thoughts with you, the reader. The staff responded with enthusiasm and has shared their lives and struggles in this book. They have poured their souls into their chapters while sharing their life experiences and years of working in the treatment field. I am eternally grateful to the staff at La Ventana and I say with pride and admiration that I feel honored and privileged to be working with such compassionate and intelligent people. Eating Disorders are difficult to recover from and sometimes take years of treatment. The people who work in the field to help others with eating disorders are truly exceptional and one cannot find a group of people more caring and giving in any other profession. I have met so many wonderful people over the past three years and I always say it's the loving souls in this industry that keep me moving forward to open La Ventana treatment centers in places where help is needed. La Ventana has become a family of professionals and although we have our

disagreements and struggles with each other we all realize that at the end of the day we have made a difference in someone's life and that simply feels good. This book may make you cry, may make you laugh, may make you think, but I hope it encourages you to seek treatment if you need it or help someone who you know or love seek treatment if they need it. I want to share one more time my thanks and gratitude with the La Ventana Staff as each person contributes to the recovery of those seeking help at our treatment center. I applaud the staff in their work and want to say "keep doing what you are doing because it's working." Thank you to everyone who has helped build La Ventana.

# Chapter I

Thank you, ED

When I made a promise to write this article I couldn't have imagine having such a hard time figuring out the way I was going to do it. First, I thought it should be easy, because I know how ED affected my life and who I am today, and because I am "over" it, and because I've helped so many others to get to know it and to get it over with. Then, I started going through my history with ED from the very beginning, and I realized that I've heard more compelling, horrifying and amazing stories from my clients, so my story in comparison to theirs began to feel boring to me. Then I thought, I'll make it fun and write it from my ED's perspective. I got curious about how my ED would tell you my life story, with his (or hers?) rationales and explanations of certain events from his overly protective point of view. I got started. Hi, you can call me ED if you like. And I want you to hear MY side of the story. I've been passed on to my most resent host through generations. It can be figured from old family photos dating back to 1900, where I can see myself already doing wonderful job protecting female members of the family with extra layers of fat that made them less vulnerable to the hardships of their time, such as war, hunger, political terror and other life phenomena alike. I remember being loved and resented by those ladies, but never forgotten or abandoned. They must have known somehow that I am their protector, and that I am their caring friend, and not an enemy, and that's why they never even attempted to let me go, ever! When they had children, they'd clone a

better version of me for themselves to keep, and give the old me to their daughters as the greatest gift of all! It began just like that with this last one.

After writing a couple of pages I realized that it will not work. My writings were giving out sort of a wrong message. All my ED wanted to talk about was how caring and protecting of my sensitive body and mind it's been, and how brilliantly it conducted my reactions to major events of my life. In ED's version, my beloved family members appeared to be monsters and ED was the knight in shining armor rescuing me from every perceived possibility of danger by offering me safety and love that is the binge, and providing extra layers of protection that is the obesity. I didn't want to make ED look like a hero and decided to come up with a different approach.

I've decided to just tell it like it is, and then immediately realized that it will not work either. There is too much personal and world history to explain, and if I exercise chronological detail approach, the whole idea of writing about my relationship with ED might get lost in the trenches. At this point I began to suspect that it could just be me resisting writing about my ED and about my past, and maybe I am reluctant to go back there again and have the memories trigger those old feelings. Feelings I kept running away from with ED's help. Feelings, that ED took care of for me. I just got a thought that I actually never thank ED for it. Well, there is another idea; I'll write a thank you letter to my ED and that will be the article! Eureka! NOT. I discovered that as soon as I've started thanking ED for his services, I began feeling resentment. I began having thoughts about possibilities I didn't allow myself to experience because of ED, and logically because I was so

overweight most of my life. I began feeling angry with ED and all of a sudden my gratitude for being who I am today went out the window. Contemplating possibilities of what I could have been if it was not for ED made me feel sorry for myself not living the future I could have had. From thanking ED I went to blaming ED and realized that this approach was not working either. I couldn't find the balance, I kept struggling, it was not happening as easy as I imagined it to be. Well, maybe I am not exactly "over" my ED, maybe it is impossible to get rid of ED once you got it. Maybe ED changes ammunition from food to just feeling insecure in my ability to write and enjoy the process? Maybe I've always felt insecure, and since I no longer rely on food for security, I am feeling that feeling, and to avoid having it I jump from one beginning to the next, risking to miss submission deadline and clearly sabotaging myself. Maybe that is the new form my ED is taking on now. If that's so – I should give it a different name, because this one is not controlling my eating habits any longer. It has been 13 years since I changed my mind about myself, my body, and how I take care of both. Well, maybe my story should be about recovery? No, it should be about me and ED. I seem to be having a hard time separating the two of us. Then, maybe I should make this article a dialogue between ED and myself. Sort of like a play. Hmm... I got interested in this new idea and started writing

ME: For the longest time I thought that I was born into a happy family, and that everyone was fine except for me. Now, with an education and experience I have, I can so clearly see who and how contributed to my acquisition of ED.

ED: Oh. Please, have some respect! I've been there generations before you were born. I've set the stage up for your arrival, they didn't do anything wrong, they loved you! They fed you best food they could get, and they insisted that you finish your plate, because they often didn't have enough food when they were children, because of the war and other hardships of their times. OK! I admit! In the past, some of your family members couldn't afford me, because there were shortages of food in the country, and I had nothing to work with. But your Grandma still gained a lot of weight. She thought extra weight meant extra wealth and health. In her mind, rich people were fat and she wanted to be very rich in the eyes of others.

ME: Yes, I don't remember Grandma ever commenting on my body. Grandma cooked for me and often with me. She could bake absolutely amazing things, and I loved spending time with her in the kitchen. Mom, however, was a different story. Mom was always overweight and on the diet that didn't work. She was a beautiful heavily full figured woman who told me that I was not as beautiful as she was at my age, that I was fat and she was skinny at my age, and on and on. There were periods of time when she and I, both were going from one diet to another with very little success.

ED: She couldn't resist wanting to see you having a better life then she did. She knew the rules. Thinner people are liked better then fat ones. She hated to see her daughter being liked less. Everything she ever told you was to inspire you to change, really, and not to hurt your feelings.

ME: Yeah, like telling me that I can eat all I want only if I go and purge it afterwards. I don't know if she ever did it herself. She told me about other young girls she knew

about who did it and were successful at maintaining both, their appetite and their slender figures at the same time.

ED: I remember. You were 15. You made me so happy when you went with my binge/purge strategy. You were happier too then; no diets, eat all you want. I remember you being much happier, then, suddenly, you quit after about six months of good practice.

ME: Well, first of all, maybe I realized that I didn't lose weight doing it anyway, so there was no point to continue. Maybe I stopped to annoy my mother. Maybe I stopped because something in me screamed: "That's not normal!" when I came to a sink to wash up, and whatever food was in me at that moment just came out uncontrollably. Maybe you just freaked me out too much.

ED: Maybe it was your hormones freaking you out. You were a teen. Your Mother told you years later that she couldn't deal with you when you were a teen. She didn't know how. And I tell you, she was honestly, doing the best she could for you, always.

ME: I know it now, and I wish I knew then how not to believe her statements about me, and how to just be happy with myself.

ED: Well, she couldn't teach you that, because she had no teachers on this subject either.

Here, I realized that now I paint my family members way too negative and my ED is the one defending them all, explaining to me why they said what they said, did what they did, and how it was all for my benefit in the long run.

I got tired and frustrated with ED and with myself to a point where I was ready to quit this whole thing. Then, it hit me. All of it – Is just me. We are kind of



inseparable, and it doesn't matter how many years I've been in recovery, ED is always with me. It takes on different forms now and it is now way less aggressive in its manifestations. ED knows that I am well aware of its strategies and plans. It hides most of the time, but occasionally it shows up in one way or another. Like it just did with writing this reflection. So, I guess that fat insecure little girl is still within me. The only difference is that; I used to hate that little girl, and now I love her and I accept her completely. And I am free, even though I can still tell you where in my mind and body ED is hiding. Poor, boring, insecure, unhappy ED, who is still hoping for me to have a slip, so it can get its job back and re-claim its power. Wow! How come I never thought of writing a speech for ED's retirement party? Oh, my imagination never stops, I could go on and on about different angles from which I see ED's reflecting my life back to me. I'll stop and just give you a brief summary of my life's story.

Born in Russia during severe Socialism, never new grandparents from my Father's side because they were prosecuted and executed during Stalin's terror which took place way before my birth. Loved my Grandma from my Mother's side, who were my primary caregiver while parents were at work, who would lovingly make me finish everything on the plate, because no food should ever be wasted, because she knew what it's like to have no food at all. I had a wonderful Father, who's only fault was inability to say "no" to Mom. My mother was very critical of me and everything I did. (I don't really look at her criticism this way now, but I use to think that way about her for a long time). I heard Mom give negative comments on my body parts daily, that included my nose even. I remember her suggesting a

nose job for me during my late teens. Mom controlled me and my life. I was a fat girl, big girl, and pretty miserable girl most of the time. To counter balance that, I went to study Theater Arts in one of the best schools in the country at the age of 16. Lived at home (lots of criticism), spent as much time as I could on campus (lots of peer pressure, criticism from teaches, started smoking to fit in socially, felt like I was the biggest talentless fatso Russia ever produced, ect.) Despite all of that I actually began feeling better in my own skin by the end of the fourth year of college. After graduation, I did what I was supposed to, work as an actress in film and theater productions. At 21 I got married for the first time. Mom found the guy she thought would be right for me, and convinced me to marry him. He was tall, blond, blue eyed and handsome fellow, who had other motivation for marring me, than just marring me. I thought it was the best I could ever get. Suffered through a year and a half of make believe relationship. Divorced, and felt like I could fly right after it was finalized.

Then, I took part in a Theater company, where I along with a few very talented people, co-wrote plays. I played leading roles in those productions and got rave reviews from critics and my beloved audience. I even got an award for one of those roles as The Best Young Actress of the season. Our company was invited to do European tours, and I had a blast traveling Europe and being sort of a star. Oops! I forgot to tell you, that the one play that won us all kinds of recognition and praise were a controversial political satire-farce, which was not completely, accepted by the sensory board and other Government agencies. That play is actually responsible for me ending up in the US. Escaping

political persecution I arrived to United States on August 1<sup>st</sup> 1991, I had \$200 in my pocket and no English. God bless the USA that granted me Political Asylum five years later! For those five years I had no certainty about my status and my overall situation, but I had an abundance of food available to me everywhere, something I've never experienced before. I ate away my uncertainty along with depression and nostalgia, a lot! I gained at least another 40 pounds on top of the extra 50 I already had. Two years after my arrival I reunited with my second husband here. I was bigger, but he didn't mind. He simply started drinking. Every day. He is still a highly functioning alcoholic. We've divorced after nine years together. I should mention that I was the one who initiated it right after I've lost all the weight. I looked great, felt great, and got divorced – Great! I am getting ahead of myself. Just stay with me. Going through this whole change of continents, language and the way of thinking was and still is an amazing experience. I did all I could to learn the language and to survive financially. I took every job that was offered me. I've been a house cleaner and a babysitter, I delivered pizzas and bathed dogs, I worked retail from jewelry to cars, I was a tour guide and a travel agent, event decorator and a limo driver, accountant and an office manager. Throughout all this years, however, I kept one occupation steadily. Every weekend I'd work as a front woman for a Russian cover band, entertaining Russian communities in many cities of this great country. I've done a lot of weddings, birthdays and anniversaries. I still get invited to do a couple of sets, occasionally. I like helping people have fun and I like being on stage. I've been consistent with singing throughout my whole life. Did I mention that my Mom was a renowned vocal

coach? All my childhood, Mom's students, young pop stars of the USSR, sang around me. I sang along. Singing is a huge part of my life.

Ok. Now, the important part of this work; I turned 30, and I had an epiphany right before my birthday party started. I was changing my clothes in front of a wall sized mirror (not on porpoise) and caught a glimpse of my reflection in which I looked to myself as a tired woman way over forty. In my mind I heard very clear the following; you are thirty, you look much-much older, now imagine what you are going to look like when you are that much older, if you keep treating your body the way you have? That moment changed everything. For the first time, I've decided to change my life and not my diet. I don't know how much exactly I've lost in the following 9 month, because I got rid of the scale in the house a few years prior, once it started going over 200. In a year I went from size 22 to 10, that much I know. I felt great, looked great, life was beautiful and I felt tremendous need to share with others what I now knew about ED. That need started my new journey – learning a helping profession, going to college, getting a degree. I've been fortunate to train and work with the most influential professionals in the field. I love what I do. And I thank my ED for sticking around long enough to take me to the threshold of my own tolerance of myself. Thank you for making me so sick of myself that I had no other choice, but heal. Thank you ED, for giving me this intimate knowledge, that I so much enjoy passing on to those who can benefit from it.

## Chapter II

### Michael's Shadow

I lay in bed listening to my stomach growl. The cravings start creeping over me, slowly at first, then urgently grabbing my attention. Visions of hamburgers and milkshakes appear out of nowhere, offering to quell the growing ache inside. The house is quiet and dark as I creep into the hall and make my way to the kitchen. Nothing turns up in the pantry except her bran flakes and fat-free melba toast. I dig farther back and come up with a package of powdered skim milk. Frantic, I try the refrigerator. The smell of leftover boiled squash and cold green beans wash over me as I stare into the vast empty space. The freezer proves equally disappointing and laughs as I continue my desperate search. Frozen broccoli, tofu, and vegetable broth look out at me with menace, and just as I am turning to give up, I spot the word Haagen-Dazs. Pulling out the carton from behind the soup I tear off the top, grab a spoon and head to the safety of the bathroom, where no one will catch me. I must be very careful not to eat too much, because she will notice. Once, she found crumbs in the bathroom and demanded an explanation. Dragging me from bed and pointing them out she asked if I wanted to get fat. I made a silent note to be more careful in the future. I replace the lid on the ice cream and return it to her hiding place, not before smoothing the top to reflect an untouched carton. Climbing back in bed I have merely been teased by the promise of satiation. I fall asleep knowing I will need to steal one of my classmate's

lunches tomorrow. I am 13, and this has become my life since my mother stopped eating.

Anorexia took over my sweet mother's life in response to a terrible heartbreak that ripped through our family leaving no one untouched. At the age of eight my brother was diagnosed with a rare form of cancer and proceeded to die a slow and painful death. My sister, close in age to her brother and attached at the hip since birth, buried a huge part of herself when we laid him to rest at the tender age of 11. My sister became distant, withdrawn and terribly lonely, unable to seek comfort from her grief stricken parents. My father, angry at the loss of his first and only son, unleashed his rage on his family and God, becoming an unyielding and controlling parent. My mother, immeasurably devastated by this incomprehensible loss, could not find the strength to care for her two remaining children. She began to control the only thing in life that she could – her food intake.

And then there was me. Upon my brother's diagnosis it was decided my sister could not grow up without a sibling. Thus, I was conceived not as a joyful new addition to a growing family; rather, the purpose of my existence was strictly substitution. I entered this world with impossible shoes to fill, instantly desperate to make my family happy. My early years were filled with the lack of understanding for a family steeped in sadness. I had the strong foundation for a co-dependent existence, trying to discern and meet the needs of those around me to no avail. I was born into a broken family of whom I could not fix, no matter how hard I tried. Rather than focus on an angry husband and needy children, my mother turned her early stages of grief to the poetic word and dropped her darkness on the page.

Poems of heartache, immense sadness, depression and empty chasms echoing with pain filled her portfolio as the click of her typewriter resonated throughout the house. Only now, since the birth of my own son, can I fully understand the depths to which she was taken. When this failed to ease her pain and the page sank beneath the weight of its content, she declared war on food. Quickly gathering momentum, this battle seemed to do the trick. No longer was the focus on despair, anguish, grief and loss – a new enemy had been identified and her sole purpose was to seek and destroy the opponent. Balanced meals were replaced with diet Pepsi and chewing gum, and bland food with odd combinations graced our dinner table each night. Suddenly, no one in the family was getting enough to eat and my father found a new outlet for his anger. Screaming matches over food became customary, and it was the boiled egg whites swimming in sugar free ketchup that sent him over the edge. This particular fight ended with baked potatoes being hurled through the air, solemnly marking the moment I realized my family was not entirely sane.

Restricting her food intake was not the only face of my mother's eating disorder. There were times when I would come home from school and find the freezer bursting with every type of bread imaginable. Inexplicably, the next day it would be gone. At one point I found eight boxes of cookies in the very back of the pantry. Certain I had struck gold, I happily ate two cookies. When I returned the next evening to my newfound provisions my discovery was gone with only a few telltale crumbs remaining. At age 10, I could not imagine the whereabouts of the missing food, nor could I understand the continuous fights about the mounting

grocery store bills. These phases, however, would not last long and the return of the empty fridge and strange food groupings would soon prevail. Other times she would restrict her intake all day, then allow herself ¼ cup of vanilla ice cream with six chocolate chips on top at night. This she would eat alone in the dining room, citing the need for solitude so she could enjoy her reward for starving herself all day. My sister and I were remanded to the family room during these times and knew better than to interfere. Try as we did, we could never turn up the container with the remaining ice cream or the bag with the other 234 chocolate chips. At school, I was known as the freak who had a can of dry tuna with mustard for lunch. I longed for a mother who put Twinkies or Animal Crackers in my lunchbox, or made me Bologna sandwiches on white bread like the other kids. When I was in my last month of sixth grade, a school assembly was called to determine who was taking food from people's lunch bags. Apparently, it was becoming quite a problem, as the culprit struck during recess when the lunches were left in the classroom unguarded. Slinking down in my seat, I thought of all that awaited me during those raids. Pringles Potato Chips, Gold Fish Crackers, Oatmeal Cookies and Pudding Cups called to me during class, and eagerly accompanied me to the girls' bathroom stall where I would have only a few minutes to eat the evidence. It was in this bathroom that I discovered peanut butter and jelly. I could hardly believe the joy of tasting this amazing concoction, wanting to savor every bite. This was not an option, however, as I needed to eat quickly for fear of being caught. By the time I reached Middle School I was an expert at taking what was not mine,



having learned to jump at opportunities that presented the possibility of relief.

My sister, 7 years my senior, finally escaped the madhouse and was off to college, exploring life beyond the sorrow. While I was happy she had gotten out of the whirlpool, I was equally miserable at having been left behind to deflect the fallout. The fights between my parents escalated to new highs, with airborne fruit and long silent treatments. Caught in the middle, I continued to sneak food where I could, and it was at this junction a new importance was gained with my fare. In contrast with previous years of just trying to stay nourished, I now recognized the calm, soothing feeling that washed over me as I ate, offering temporary respite from the reality of my life.

My mother was finally hospitalized as her hair fell out, her skin turned pale blue and clothes could no longer hide her emaciation. Her heart had begun to function irregularly due to malnutrition, and no one in her life could turn the other way and continue to feign ignorance. Thus began treatment, but this word meant little more than containment for 30 days at a time.

Once home, she continued to swim in her disease, gathering momentum from a crumbling marriage and a daughter whose weight she tried desperately to control. Although my grandfather's nickname for me was 'Toothpick' due to my lean frame, I was required to weigh in every morning and let the scale define my day. In order to keep track of my self worth, a graph was placed on the refrigerator to shout my status for all who entered our home. When the graph lines went toward the floor it meant I was to have a good day, being allowed to openly consume my meals with relatively little scrutiny. When the graph lines pointed toward the

ceiling as I progressed in adolescence, the day would be clouded in misery, with poached egg whites and cottage cheese answering a growling stomach. At friends' houses I would scan the refrigerator door to find the maps their mothers had made for charting achievements and disappointments. Instead, I found pictures of recent vacations, family snapshots and reminders to pick up milk and walk the dog. I stopped inviting friends over once I realized, yet again, I did not belong to a sound family unit. When my grandparents came once a year to visit, armed with a dozen donuts they would turn the chart over and plead with my mother to let me have one. "She's a growing girl, Marilyn," the plea began, "if she turns sideways you can't see her!" Watching them dip the forbidden indulgence into deep colored coffee, my mother would always reply, "She can't – she's watching her weight" as she patted my hand without a glance. My grandfather would wink at me and leave the biggest donut on my pillow.

I inched my way towards the great escape, longing to be released from the prison of graphs and restriction. I finally made it and moved out in the pursuit of a college education, where life would surely offer more. Had I thought my problems were over, I was to think again. In the blink of an eye, the sweet relief of freedom brought on a whole new set of problems that would take more than a decade to overcome.

Suddenly, food was everywhere with no one to monitor me. Having spent years being hungry, frustrated and lonely, the idea of having access to food at all times was inconceivable. Places like Taco Bell and McDonalds were discovered for the first time, and I had no idea such goodness existed. Without my mother to

constantly monitor my input, I binged my way through college, skipping classes and packing on the pounds like a bear getting ready for winter. The cafeteria ladies in the dormitory became my favorite people, doling out meals without judgment and saying nothing when I returned for more. As my class work and waistline suffered, nothing seemed to quell the newly found beast who had finally been given freedom, and truly, I did not care. When the regular stores could no longer clothe me and I had to venture into the Plus size stores, I did not care. I began to isolate, thinking only of when my next meal would be and of what it would consist. But this joy began to dwindle as I realized the emptiness was not being filled by food. No amount of cookies or candy bars could fill the gaping hole of growing up in such a lonely house. I caught a glimpse of my five foot three, 200 pound frame in the mirror one day and wondered who was looking back. I did not like the answer and finally had enough. Thus began the journey of reconciling the experiences from my youth, understanding the family into which I was born, and learning what it meant to eat when I was hungry and stop when I was full. I gradually learned how to behave normally around food and discovered how to identify and ask for what I truly needed, which was not food. This took eleven years and a team of therapists, and did not occur before I tried several years of dieting, which led to bingeing, which led to purging, which led to guilt, which fed my low self esteem, which made me eat, which made me diet, which made me..... I gradually gave back those extra 95 pounds in a healthy way, leaving behind the use of food for comfort and embracing a long list of things that brought me joy on a daily basis.

The result of this journey is my passion for raising the level of education, awareness and understanding about eating disorders. They are deadly tornados that rip through families, leaving no one untouched. To this day, I believe strongly that had our family been given the opportunity for help while my mother kept the revolving door of treatment in motion, we would have made it out of the insanity. What we needed was a place that understood our plight as a family, that empathized sincerely with our struggle to put my mother's pieces back together, that taught us how to care for ourselves while her ship was going down. We needed a place where my mother could seek refuge after her inpatient containment. A place where she could safely learn how to pick up her own pieces, with people all around to catch her gently if she fell, help her back up, and redirect her towards her life once again. We needed gentle, compassionate, empathetic, firm, and educational support where we could find others struggling just like us. What we needed was La Ventana....

## Chapter III

### My Experience, Strength and Hope

#### Experience

My earliest and fondest memories are with food. I liked cookies so much that by the age of three my grandfather named my favorite stuffed dog Cookie, so when I'd ask for a cookie he'd bring me the stuffed dog. I was born into a large Italian/Hungarian family where every family gathering or celebration consisted of lots of food and alcohol.

My biological father left my mother and me when I was two so I didn't remember him. Immediately my mother married again and had two more children, one each year. I got lost in the crowd. But I knew I was my grandfather's favorite because he'd take me to the ice cream store where my grandmother worked. I learned sugar foods meant love; food was the replacement for the hugs, attention and closeness I so desperately needed from a very young age.

My step father would drink alcohol and spend all his working wages at the bars. So by the time I was between six to nine there would be consistent screaming, crying and fighting between my parents. I can remember lying awake at night; listening, terrified he'd come into my room and start hitting me. Lack of sleep made it hard to concentrate at school and I was always hyper vigilant when I'd come home. Since my mother didn't work while raising three kids and my step father would spend all his money on booze there was very little food so we lived off hot dogs and beans a lot. So I would hide 'goodies' in my room that I'd get at my grandparents house.

My happiest times would be the holidays at my great aunts house, lots of relatives and cousins running around. There was always lots of food. Pasta's, breads and desserts....I was in heaven. I couldn't believe all the food they had and how little we had at home. Back in my house furniture would be thrown through the front window, doors kicked in.....I still can see one memory in my mind's eye when my step father came home from work one night, mom had fixed what little dinner we had and it was sitting out on the kitchen table. I was standing in the door way as I watched him throw all the dishes off the table onto the floor screamed at her how awful it was. It was the first time I would dissociate from my body and found myself watching from the ceiling.

When my grandparents convinced my mom to leave my step father and move in with them, we'd move 3-4 times that year until my grandparents found a house big enough for all of us. I almost failed 4<sup>th</sup> grade because I felt so out of place in the nice school and friendly neighborhood. My step father would come by to visit and my mother would cry a lot. At one point I heard my grandmother say to my mom, 'She has the right to know he is not her real father.' Because up to then I did not know that he was my step father. From that point on I would fantasize that my real father would come and take me out of the chaos. Still there was always food to comfort me.

I was never over weight as a child, an average size as I look back at the pictures but always thought I was fat. I have lots of pictures of me in dance recital costumes. Then one day my mother picked me up from dance class and said I wouldn't be going back there anymore, I believed it was because I wasn't good enough but she just didn't have the money.

I never fit in with the cool girls, always felt less than. Seventh grade was the worst year of my life (I thought at

the time). I started to develop breasts and hips, all the other girls would throw insults at me, called me names like slut and whore, etc. I didn't even know what those names meant. I didn't get much education from my mother on life stuff (sex education, etc.); she was too busy dating around to pay much attention to me. With no parental supervision it wasn't long before I did start getting attention from boys for my body. I was sexually active by the age of thirteen. My need for love and affection would now get met through men, they'd say I was pretty, sexy etc. and I learned my body gave me power. When other teens were going to school, sports activities or staying at friends houses, I'd be off with some older guy, out to nice dinners, riding in his car, doing drugs, receiving gifts all of course for sexual favors in return.

By the age of fifteen I met a twenty one year old military man that swept me off my feet. My mother never said anything, I think she wanted to date him; she would try to compete with me, wanted to pretend she was my sister not my mother when we were out together. Needless to say with no sex education or parental guidance I got pregnant, we got married, I'd drop out of school and off I'd go at sixteen to a military base to be a wife and mother. I didn't know how to cook so we'd eat out at fast food places a lot and with the stresses I felt I'd gain forty five pounds through that pregnancy. I gave birth to a beautiful baby boy at sixteen and had no idea how to be a parent. I was divorced by eighteen due to the fact I had chosen someone who drank too much and was a compulsive gambler. Now as a single parent I needed to go to work to support myself and my son. My first job was at a donut shop.....I was in heaven again. However, now I would want to date so my weight needed to come off. So I started dieting and diets would consume my life from this point forward until I'd find

recovery. I tried low fat diets, grapefruit diet, the cabbage diet, fasting etc.

I'd take handfuls of diet pills and end up so shaky I thought I was having a heart attack. I would take so many laxatives I'd have to crawl to the bathroom in the middle of the night due to the cramps. I was afraid to go out because I might have an 'accident'. I'd restrict as long as I could during the day and end up bingeing at night until I'd get 'sick'. All of this made my mood swings horrible, I'd be happy and nice one minute, then crying or raging the next.

I got back to my average body size and while working in a restaurant (which of course I'd binged at) I met another military guy. We dated, broke up, dated again and I'd binge, purge, and restrict to get through it all. I never felt my body was good enough. I always wanted to be someone other than me, a movie star or other women, always comparing my insides to their outsides. I would get my eating under control for a while and it would get bad again but I never thought I had a problem. We'd finally be married when I was twenty and I'd follow him (with my son in tow) to another state to live. By now I could cook and cooked all the time. We'd have lots of parties where there was always food and booze; this was now my social life.

At age twenty three I would have my second son, stopped all eating disorder behaviors (which I didn't know were eating disorder behaviors) while I was pregnant. Life was good until long deployments and separations would make me a single parent most of the time. I was lonely, in a state where I didn't know anyone and had very few friends; food would become my friend again. Through it all I was the T-ball or soccer mom going to games to watch my eldest play with my little one with me. I'd binge at the concession stand to avoid all my feelings but if you had asked me back then I



would have denied I was stuffing my feelings down with food. I was depressed, would get angry and lose my temper with my children during sugar binges (which I will forever regret). I was so obsessed with food I feel like I missed out of years of mine and my children's lives due to thinking about food, where to get it, how to get rid of it, twenty four seven, three hundred and sixty days per year.

When I look back at some of the crazy things I did with food, I can't believe I was that person today. I have stolen food from stores and others, eaten out of the trash and eaten food still frozen. I would go from one fast food drive through to another to get my favorite foods "fries at McDonalds, hamburger at Burger King, and of course a diet Pepsi at Taco Bell. I never thought anything was wrong with my eating habits but felt out of control with the food and not able to stop when I wanted too.

When my second son was a year old the family got transferred to southern California. We liked camping and I would get so excited to cook up the 'camping food', we'd eat and drink the whole time. Then I'd be too embarrassed to get in a bathing suit or shorts.

I've worked outside the home since age sixteen, part-time while my second son was young. I always needed to have my own money so I could buy food whenever I needed it. There was always this deep fear that there would not be enough food. I'd replace every food item each week as we used it. I'd hide wrappers in my car so the kids wouldn't see what I had - or I might have to share it. I'd buy goodies for the kid's lunches and eat it all or buy the Halloween candy weeks ahead of time and have to replace the bags before trick or treat.

My second marriage would start falling apart when my kids were sixteen and eight. We tried marriage counseling but while I ate he was drinking all the time

and we just grew further apart. By now I was severely depressed and out of control with my bingeing and purging behaviors. I wanted to die; I would plan how I was going to drive my car off the road into the ocean. But I've always been the 'responsible' one and I couldn't do that to my kids but on some days I thought they'd be better off without me. I knew something was wrong and something HAD to change. I just didn't want to keep feeling horrible. There had to be more to life. I went back to see the therapist, we'd seen for marriage counseling, and started to work with her on myself. She told me to read the book 'It will never happen to me' by Claudia Black. After throwing it across the room six times, out of frustration, I finally finished it. It opened my eyes to the fact that being brought up in a violent, alcoholic dysfunctional family system, growing up to fast, etc. had affected how I 'reacted' to life instead of acting in my best interest. I started going to Adult Children of Alcoholic's meetings and worked with my therapist on my family of origin issues. I also got involved in Al-Anon but all the time still eating, not knowing I had an eating disorder. Since I was of average size no one ever questioned my food issues. As I learned about my pattern of repeating my mother's life by marrying two alcoholics I started looking at my people pleasing codependent behaviors. I had always thought if I took care of everyone and everything else someone would take care of me. This was an unspoken belief which kept my needs unmet and me resentful. As I started to get better my second husband drank more and we would divorce when my oldest son was in the Navy and youngest was twelve years old.

### Strength

From this point on I would have many women sponsor's and mentors in my life to support and teach me the things my mother never did. I met a woman who taught

me to respect my body and not to give it to anyone who didn't respect it for the gift that it is. She helped me stop calling my body parts by negative, down grading names and speak to my body with gentleness.

I worked a long time with my therapist who helped me heal from my past experiences, which the above is only a small sample of the drama and trauma. I started to come back from the deep black hole of depression I was in and she gave me hope. She challenged me to not be a victim and cared enough about me to never give up on me. The work with my therapist was never easy. I would leave her office crying or mad, would think about the things she had said all week, most of the time going back to her with the realization she had been right. I trusted her like I had never trusted anyone, because most of my life there was no one to trust.

My A.C.A. sponsor taught me what unconditional love and acceptance of another person looks like. She walked me through writing the 12 STEPS and I learned more about myself through that process than I had ever known before. With her support (& my therapist's) I went back and got my G.E.D. so I could begin college. They would say to me 'no matter what your age it is never too late to go back to school and God willing, you will be 50 someday, with a degree or without a degree it's your choice. No one in my family had ever gone to college and I thought I wasn't smart enough to make it. But while at college it was discovered I have a learning disability that I had just compensated for all my life. My dyslexia now had a name, which was a relief and today I can laugh at myself when I write things backwards. But through all this emotional process, even while seeing many changes, I still ate compulsively, was still obsessed about my weight and didn't realize that the food was the substance I was using to numb out some of the feelings I was working so hard to have. I had tried

drugs and alcohol to numb out my feelings but nothing ever worked for me like food.

I went to a 12 STEP conference and randomly sat in on an Overeater Anonymous meeting, because by now I think I knew I had a few issues with food, ‘smiles’. I got so mad in that meeting and didn’t think I was like them. So I would go out, for another year, and try to eat like a normal person, because I could control my bingeing and purging myself. Or so I thought. Back then I didn’t know anything about treatment centers nor did I have any funds to cover that.

Finally I had to admit to myself I could not stop compulsively eating on my own. I went back to the meeting rooms of O.A. on a regular basis. When I was open to listening, it was amazing to hear people talk about doing the same things I did with food and thinking the same obsessive thoughts. But what was different is they were talking about how the food had been used to control their feelings. I continued to go to meetings still trying to control my sugar intake then would end up bingeing again. During the first year of recovery with food, the best I could do was committing to not purge, in any form, since that was the most deadly behavior I was doing at the time. However, I stopped purging with the support of my sponsor but I kept eating. I would get 29 days, 58 days, 6 months abstinent and relapse over and over for the first four years. But the people in the 12 step rooms kept telling me to ‘keep coming back no matter what’ and I did. They had a freedom from food I couldn’t get on my own. I still did not want to acceptance that I had an eating disorder, just needed to lose weight, and then I finally proved it to myself. With numerous relapses finally came some accepted and with that the process of recovery began getting easier.

I picked a sponsor in O.A. who has taken me through the STEPS around food and called me out on my stuff for 19

years now. People often wonder what it means to ‘work the 12 STEPS’. For me that has been writing them out, my sponsor would give me questions to answer based on each STEP, I would read my answers to her and discuss the new insights or the distorted thinking patterns that have not worked well in my adult life. The STEP’s have helped change me from the inside out, taught me what honesty and integrity really means and allowed me to find peace within I never had.

Some people think once they are in recovery they will not have problems, pain or challenges and everything will be ‘fine’. The support groups and my sponsor have walked me through some very painful experiences in the last 19 years. Like my teenage son deciding to live with his dad, the ending of my first real love in recovery, meeting by biological father, changing jobs, and health challenges. I could not have gotten through any of it alone. Today I know life is too hard to try and do alone and I walk with support through everything every experience I have and everything I do.

Along with the real pain and sadness I have felt in recovery, because when you are not over eating you really ‘feel’, that same support has been there when I received my A.A., B.A. and Master’s Degree. I worked full time to pay for my schooling so it took me a while and there where many times along the way I wanted to quit. While others were relaxing on their week-ends I’d be studying. My sponsor would say ‘can you read one chapter today or write one paper’? One day at a time and one class at a time, I will be forever grateful to my O.A. sponsor for pushing me through and she has become my lifelong friend. My support has listened to my excitement of buying my first house and starting my first treatment program. The real miracle is to being able to look myself in the eyes with no guilt and shame anymore. I have so much joy in my current relationships

with my grown children, who now have a mother who can be attentive to their needs, be present emotionally and physically for them and other loved ones without being in the food.

Asking for help in recovery was a new concept. I was always strong and independent, I didn't need any ones help, I had been through so much and gotten through it. However, I just could not stop compulsively bingeing and purging on my own. What I learned is that it takes more strength to ask for help and life is much easier that way. I learned by looking back at my past how my eating disorder developed and I needed it as a survival tool. But when the eating disorder controlled me and my adult life it did not serve me anymore and I've learned so many new coping tools for dealing with whatever life brings my way. I used to call myself a survivor but what I've actually done is escaped the family dysfunction today and can make my own path.

Hope

Some people ask me why I still identify as a 'recovering' compulsive overeater and bulimic even though I do not act out in those behaviors. For me, I have the freedom of the obsession from food 95% of the time, which is great since I used to think about food 24/7 365 days per years for twenty five years of my life. But the other 5% of the time, when I'm overly tired, when painfully challenges appear in my life, as they will, or I am not connected to my higher power spiritually, those thoughts about acting out with food come back in, reminding me I still have an eating disorder, temping me to return to use an old coping skill I still remember so well.

Today I know what to do; I call my sponsor, go to more meetings, write out my feelings, and write down my food for a while, as I did for 3 years in early recovery. Go back to basics and get back on track right away. I try

and live my life by the principals of the 12 STEPS and it works for me.

How about when I have a ‘fat’ day’, which is interesting to me how one day I can be fine with my body image and the next be negative. What I’ve learned is when I am feeling insecure or like I’m ‘not enough’ I will want to focus on what is wrong with certain parts of my body or be critical with my weight, though it may not have changed at all. I am not a thin woman, never have been, I have curves and I like them today. I am so grateful my body works as well as it does for all the abuse I did to it. I don’t get on a scale, so I won’t focus on my weight, because I cannot be defined by some number on the scale. For me no matter what direction the numbers on the scale would go it can set me up for negative thinking and my serenity is too precious to me today to let a piece of metal dictate what kind of a day I’m going to have. But recovering is not just about food behaviors, weight or body image, for me it is about growing in my maturity, continuing to learn new coping skills, being present in my relationships, staying honest, never losing my integrity and connecting more spiritually, until the day I die.

I work with eating disorder clients on a daily bases today and have worked at all levels of care in treatment centers. I take this disease very seriously because I have known people who have died of their eating disorders, lives that were cut short due to the power of this disorder. When you are young you think you are indestructible and it will never happen to me, but it can. But in the sadness of seeing people die of their eating disorders I have also witnessed many miracles, people I thought might not make it and those who have worked hard for their recovery. The hardest thing you will ever have to do in recovery is be ‘honest’, first to you about yourself, then to your Higher Power and third to another

human being. If you can do that recovery can be yours. Is it easy, no, but it is simple, as simple as you make it. Is it worth it and are you worth having it, ABSOLUTLY! When I compare myself to others today I don't compare myself based on their outside appearance I compare myself by the peace and serenity I feel and live most days today and I would not change that for all the money or lose of weight there is. I didn't have the gift of going to a treatment center when I was suffering all those years, back then there was only inpatient hospitals, individual therapy and O.A. For two of those three options I will be forever grateful. I have learned much on my road of recovery, like to be grateful for what I have, love myself and be of service to others. I try to do that every day and God has given me the task of using my Experience, Strength and Hope to help others that still suffer from eating disorders and I know that I am following my path and have found my purpose in life.



## Chapter IV

### My Crazy, Imperfect, Wonderful Recovery

I am a Licensed Clinical Social Worker and have been privileged to work with people struggling with Eating Disorders for many years. I deeply understand their struggles as I have been in my own process of recovery for more than 23 years.

My first ED memory was when I was about 11 years old and it occurred to me one day in 6<sup>th</sup> grade that it would be a good idea to throw my lunch away in the schoolyard trash can. I was a tall girl of normal weight, but felt I was too big and wanted to “fix” myself by dieting and making myself “petite”. I have no idea where those thoughts came from as no one in my family was overweight or eating disordered. However that type of thinking started, it gradually evolved into a binge-diet cycle that came to dominate my years in Jr. High, High School and throughout my 20’s. Nobody talked about eating disorders in the 70’s and I thought I was the only one who felt, thought and acted this way which was further proof to me that I needed fixing. As my eating disorder spun out of control, my days and nights became consumed with secretive behaviors and thoughts of food, weight, dieting and schemes of how I could “fix” myself. During this time I had many friends and a loving family, got married, completed my first degree and was working in a field that I dearly loved. I had a life that may have seemed to be working on the outside, but inside I was depressed, isolated and desperate. I was exhausted physically, emotionally and

spiritually and each day I felt like I died a little emotional death.

Through a series of events I started attending OA meetings when I was 30 years old and for the first time realized I was not the only one caught up in this struggle. I had found my tribe! Slowly and imperfectly I started on my road to recovery. Along the way I have had my starts and stops, relapses, derailments and tons of despair and frustration, but the one thing I did do “perfectly” was I never left OA or completely abandoned my recovery process. In other words, I kept on keeping on! Recovery truly is an endurance sport.

Now, 23 years later when I look back on my recovery process several critical aspects stand out for me: Recovery is by far the hardest thing I’ve ever done. I don’t want to send out a discouraging message, but I think it is important to truly see recovery for what it is: HARD WORK. Recovery from any type of addiction has been called “a Hero’s journey” and we have to honor ourselves for being on it. For every one of us that stays in recovery, there are many, many more that never try, give up and/or die physically or psychically in the process. Many of us (me included at times) beat ourselves up when we don’t “get it” good enough or fast enough. We beat ourselves up for relapsing, lapsing, losing our way and think that it’s because there is something wrong with us. We beat ourselves up for needing more treatment or more support. We compare ourselves to others and wonder why they seem to be getting it so much better or more quickly than us. The truth is ITS HARD BECAUSE ITS HARD – not because there is anything wrong with us and each of us has to figure out our own way and learn to accept our time

line for recovery. We need to honor ourselves and give ourselves pats on the back (or “warm fuzzies” as my sponsor likes to call them) when we pick ourselves up yet again, learn the lesson and check back in to our recovery.

I couldn't do it alone. I sure wanted to! I kicked and screamed with this one. I liked my isolation, I liked doing it my way and I had a world of shame that wanted to keep you out. Unfortunately, it kept my disease flourishing and today my recovery is directly proportionate to how honest and accountable I am. I need to check in with people I trust to be there for me. I need to talk about about who I am, what I am feeling and, yes, what I am eating. I know today that the reason my road to recovery has been such a long one was because it took years of healing before I could really open myself up this way. I have a recovery team that includes my step sponsor, a food sponsor, a therapist and a RD – yes, I practice what I preach. I talk to them even when (especially when) I don't want to and it has made all of the difference.

This disease is physical, mental and spiritual and I have to be spiritually connected to live in recovery. I tried to give ED up for myself but that wasn't enough to get me through the lowest times. I tried to give ED up for the people in my life, but that wasn't enough either. I needed something bigger than that to hold on to. The good news is that we all get to discover what that means for each one of us – whether we believe in god, a higher power, nature, a passion or purpose in life. I was always a spiritual person so for me it was a matter of learning how to utilize my spirituality for my recovery. When I work with someone who does not have a spiritual belief system they can use, I have them

keep a “spiritual notebook” and start noting when they feel connected or passionate or inspired so that they can slowly develop that place within themselves. With spirituality, one size doesn’t have to fit all!

I am powerless over this disease, but am powerful and responsible for what I do about it. I don’t know why I started manifesting this disease at such a young age or why it has been something I have had to struggle with for much of my life. I cannot change the fact that sometimes my disease gets kicked up. But I have learned what tools work for me and it is my responsibility to pick them up when the disease feels like it is getting activated. That is very empowering. It takes a while to figure out what tools work for you and can be a struggle to learn to pick them up when you feel you are slipping into your “ED Head”, but all of those who I look up to and who have long-term recovery and wonderful purposeful lives know what tools work for them and are very clear that sometimes they have to pick up more of them or pick them up often.

It is worth repeating that this recovery process is not for wimps and is the hardest thing I have ever done, but it’s also the most wonderful thing I have ever done. To live in recovery, I have to face things that I might not have faced if I could have gotten away with it. I have had to take good care of myself, my relationships and my life. That is an unexpected byproduct of this process and has given me a life that I love and that I am deeply grateful for. I am deeply grateful for my crazy, imperfect, wonderful recovery. Good luck on your Hero’s journey!

# Chapter V

## As A Parent

It was one of those moments that becomes seared in your memory, like where you were on 9/11 or when the space shuttle exploded. I saw it clearly. I could not pretend it was something else. My darling daughter had moved her food under the lettuce leaf of her lunch plate, uneaten. I felt my heart stop or sink or whatever it does when your stress level spikes so high you can't breathe. She was 15 and I knew that there was no other explanation for her behavior besides anorexia . I didn't know it then, but I had already lost the girl I love with all of my heart. Who she was before the anorexia was already gone, and the journey in and out of hell had just begun.

We, the loved ones of those with eating disorders don't choose this path. It chooses us and participation is mandatory—like with death and taxes. It took me a long time to accept the fact that I was stuck with this experience-like it or not. And I would recommend that others take their time as well. For the family and friends of those with eating disorders, certain amounts of denial have protective effects. And in E.D. world, we all need some shelter from the insidious effects of the disease.

I first met E.D. when I was working as a psychotherapist intern in a residential facility. The setting was Malibu, with a beautiful ocean view and clients who were safely tucked away in well-appointed rooms with 24 hr.

supervision. I didn't know it then, but this was an easy way to encounter psychiatric disorders. It was much less stressful to meet with clients whose families had enough financial resources to provide such lovely care. I don't know that being by the beach eased the clients' suffering, but it did wonders for me. I worried less about my patients when I left work at night. I knew that they were safe for now, well-treated, and kept busy with activities that were good distractions from their disorders.

If you are a parent of a child with an eating disorder, I know you would give all that you have for that kind of peace of mind, if you could afford it. But most (99%) of us can't afford that kind of care for our children and we have to live with a level of stress even I (the trained professional) was unprepared for. If you have a loved one with an eating disorder, you need a higher level of self care.

Self care means different things to each of us and I am not here to tell anyone what to do. I will advise that whatever healthy means you have available to you to lower your stress and increase your experience of happiness—do more of these activities more often than you ever have before. Do not lose yourself in the treatment and support of your family member with E.D. (eating disorder). This will prolong their treatment and can give you more problems than you have now. When I first met "E.D." (as the disorder is referred to by patients and treatment professionals) my self care involved leaving my work and my clients at the "office," the residential facility where they were cared for by someone else 24 hrs. a day.

As I was saying about Malibu... we didn't normally treat eating disorders there, but occasionally they would accompany other, more acute problems. My first encounter with E.D. came in the form of a woman in her 30's from the eastern seaboard who was a newly recovering alcoholic. I was treating her for substance abuse and the longer she went without drinking the more 'E.D.' showed itself in her anorexia.

I learned quickly that "E.D." is to be respected, for no member of the 24 hr a day treatment staff in the facility was able to make a dent in this woman's restricting of food. As soon as she was safe to travel, we referred her back home for eating disorder treatment. We, who could treat psychosis, alcoholism, even heroin addiction, were out of our depth when it came to eating disorders. "E.D." is a tyrant, a ruthless taskmaster that will rollover most well-meaning mental health practitioners. I knew then that I did NOT want to be a therapist to clients with eating disorders. Give me a psychotic alcoholic any day, but save me from the eating disordered clients—they're too hard to treat! Little did I know that in a few years I'd be living with one!

But like I said, this path chooses you. And I was no longer working at the upscale psychiatric home by the sea when my sweet girl moved her food under that lettuce leaf. I was happily ensconced in a community health clinic on my way to that cozy little private practice I was hoping for. And so when my heart stopped (or whatever that was that stopped me from breathing) at lunch at the restaurant by the lake that

day it was because I knew in that instant what I was up against. It was “E.D.” and ‘it’ was in my house and ‘it’ had my daughter and there was nothing I could do about it.

At whatever point as parents and family members you grasp how profoundly an eating disorder overwhelms the child/sister/brother/friend/spouse/partner you once knew, your heart breaks and a type of grief so deep and so profound that it cannot be explained or described begins to leak into and through you. It becomes a constant and unwelcome companion that rests in you where your hopes and dreams for your child (sibling, spouse, friend, partner) used to be. No need to rush into this experience. It will find you.

All parents of children with neurological problems (which is what underlies an eating disorder) know this grief. But no one talks about it. It is too sad and too frightening for most people to want to hear about. So we parents, friends and loved ones don’t speak about it. In my experience, we keep to ourselves, hoping that our loved ones will be able to get well enough to have a life and wondering how much will be left in our bank accounts when (and if) that happens.

What’s different about an eating disorder (as opposed to autism, a stroke, or obsessive-compulsive disorder) is that an eating disorder looks too much like a choice to people who don’t have one. As parents, friends and loved ones we know that most of the people we know are thinking things like, “It’s a phase, nothing to worry about.” and “Geez. eat a sandwich!” and “Those parents should just put their foot down. They spoil that



girl.” Or “What a waste of food, just stop throwing up—it’s disgusting.” We know what they’re thinking because we’ve thought these things ourselves, until someone explained (or more likely, we did our own research to find) the underlying biological/medical conditions of the disorder. Meanwhile, we learn not to speak our grief to others, but it’s there all the same. If I’d known then what I know now, I would have added my own counseling to process this grief to the long list of things I was trying to care for when my daughter was first hospitalized.

But when you are a family bearing the burden of a loved one with a neurological disorder you have more practical issues to attend to than grief. It has taken me years to be able to cry the tears for the girl my daughter might have been without anorexia. I am learning that grief runs its own course (great, something else I can’t control) and I’ll have to wait to see how long it takes to cover the losses—to my personal life, my professional life, my family life. We’ve lost a daughter, a sister, a job, an income, our savings, our peace of mind and perhaps most difficult of all, (at least for now), our family has lost the ability to feel optimistic about our collective future. We are forced by “E.D.” to wonder and worry about our daughter’s long-term prospects. Will she recover? How long until the next relapse? Will she be able to handle the stress of college, employment, relationships without relapsing? Or, in the moment of any family gathering comes the concern, is she ok? Or, more precisely, where is she?

I call it the “empty chair” problem. Even when she’s here, she’s not here. She’s somewhere inside herself,

arguing with “E.D.” She’s made progress, but it’s not the same as before. She can tolerate meals together—both at home and in restaurants—but she doesn’t like them much and we all know it. Holidays, birthdays, graduations...it doesn’t matter what the event or how important it might be to her or the family—where we used to have her presence, we now have our questions: Will she come? Will she engage with us? How long will she stay? And when a family has an empty chair at their “table”, they have to live with that loss, in varying degrees, every day.

I resisted the idea that I needed a higher level of care with nearly as much fierceness as I was determined to see my daughter well. This is a common phenomenon in the families of those who suffer with eating disorders. Our resistance is our defense against the idea that the rest of our family/life will ‘fall apart’ or get worse if we stop to feel our feelings. I can assure you that nothing gets worse when you feel your feelings and in fact, you begin to feel less stressed as a result—one good thing in a ‘series of unfortunate events,’ you might say.

Here’s the thing—even though I am focusing on the grief involved for the loved ones of those with E.D., I know it’s not the same as your kid/sibling/friend/spouse/partner dying. Which is why it is easy to overlook this idea of grief and try and keep a positive outlook for yourself, your loved one with the “E.D.” and the rest of your family. If you’re like me, you’ll spend most of your time keeping your game face on and trying to make the best of things. There is no need to stop this is a necessary and effective strategy.

What I want to share with you, as a parent of a daughter with “E.D.”, is that in addition to making the best of things and moving on with our lives as best as we can, facing the empty chair, the loss of the daughter we used to know, has been an important part of our family’s and our daughter’s recovery process.

In the beginning, filled with hope and good intentions, we kept trying to “help” our daughter ‘get well.’ What we meant by ‘get well’ was ‘get back to the girl we used to know.’ Our original expectations for her were in place and we looked on her treatment as a temporary pause from our collective routines. When she got out of the hospital, she’d be fine again and we could go on with our lives, right?

Well, no. And no one at the treatment facility prepared us for what was ahead. (Sadly, parent education was virtually non-existent at this facility.) Eating disorders do not usually resolve after one treatment. And people with “E.D.” do not ‘get well,’ they recover—which is a process that occurs over a long period of time (5-7 years is one estimate). And, the symptoms of eating disorders follow a “relapse and remit” pattern, sometimes over the lifetime of the patient. This means that some sufferers will live with the potential for relapse of the “E.D.” (in varying degrees and forms) for the rest of their lives, and so will their families and friends.

Shifting our perspective from waiting for our daughter to ‘get well’ to supporting her recovery was helped greatly by our family facing our losses (of what used to be), our fears (of what could happen next), our anger (over the sometimes impossible burdens of the

expense, time and stress) and our grief (over what could have been).

If you are new in the process, this might seem impossible, but I am here to report that the fear, stress and anger will dissolve along the way. And that this will happen much more quickly if you avail yourself of a good counselor/pastor/therapist/doctor/friend, that is, someone with the wisdom and experience to handle something this overwhelming. Later, as the sadness subsides, you will be able (as we have) to begin to feel grateful that your loved one with “E.D.” is still with you at all and to feel happy for her/him when she/he makes any progress-either with “E.D.” or on the job, in relationships or at school.

As it turns out, unconditional acceptance, gratitude and the support, reassurance and encouragement of small steps forward away from the disorder are some of the most effective elements of the recovery process. In facing and resolving (for the most part) our own stress, anger, fear, sadness and grief we have been able to provide these things to our daughter, which has (we are told) been of great help to her.

While the process of treatment and recovery can be a long one, treatment does work and recovery does happen. (Latest research suggests that 75-90% of those with anorexia and bulimia will recover. Johnson, Lund & Yates: American Journal of Psychiatry, 2003; Keel and Mitchell: American Journal of Psychiatry, 1997.) The process is simple, but not at all easy and life provides challenges and stressors other than “E.D.” that can delay recovery. It is not necessary or advisable to give

up hope. Even at the worst moments, the potential for recovery exists.

A word of advice: there may be times when your loved one with “E.D.” will not want treatment and you will be powerless to do anything about it. These may be the toughest times, get yourself the right support for you. Increase the amount of time you spend doing the things that you love. Focus on what is right in your life—count your blessings, make gratitude lists, refocus yourself on the positive when your worries begin to surface. For the majority of us, these times will pass and our loved ones with eating disorders will seek recovery (in one form or another) eventually.

I am frequently asked, “What do I DO?” by the parents and loved ones of those with eating disorders. And so I will leave you with what has worked for me— give yourself a higher level of self care—find ways in which to resolve your own stress so that you can feel peace within yourself on a consistent basis.

Work diligently on becoming a source of peace to those around you because this is what works to facilitate recovery and healing for everyone. When you have a loved one with an eating disorder this is your job. This is what you can do.

With Blessings for your family’s full recovery,  
Sincerely,  
DB

The author is a psychotherapist with La Ventana .

## Chapter VI

### “Inside Out”

Every woman from 15 to 65 who has the courage or desperation to walk into treatment carries a wounded child within. Sometime the child is well hidden and guarded and our job is to coax her gently out of the closet and sometimes she is glaringly obvious and desperately seeking recognition in ways that can scare people away. It is my recognition of this child that has drawn me to working with eating disorder sufferers when I have no such history with food myself or even in my family. Prior to this specialism I was practicing play therapy with children. At first glance they seem so different, yet they both involve connecting with a child and going on a mysterious journey into the unknown within to find and strengthen a self and ultimately to set it free. Discovering and accepting my own inner child allows me to go there with others and while the travel is challenging and often incomplete I relish the opportunity to be a part of someone else's flight to freedom. So I have written about my observations and made interpretations based on the

teachings I've received and reading I've done on attachment theory, inner child work, trauma and eating disorder development and treatment. The clients I've worked with have been my best teachers.

### Eating Disorder Development

I'll start by talking about how the eating disorder develops with support from our surrounding culture and sometimes as a response to one or more traumatic experiences. (There are other factors too that bear mentioning like the genetic component but my focus here is on environmental factors). Eating disorders are a perplexing illness full of apparent contradictions and paradoxes. "It's not about the food" is one of our treatment mantras and yet the most vital component of treatment is at least attempting to follow a meal-plan. What follows are some ideas about how the behavior with food follows logically from a dysfunctional emotional development or stunted emotional development. What all three illnesses; anorexia, bulimia and compulsive overeating have in common is that they are manifestations of problems with attachment and boundaries, ie relationships and having effective limits within it. What I mean by that is

that somewhere along the line in one of their primary relationships during childhood they have not been able to get what they needed emotionally. They have lost touch with their innate right to own and express their feelings and ask for their needs to be met. They have either closed down and given up attempting to get their needs met because they no longer feel they deserve it, they have been unable to ask for it effectively or their support system had problems of its own that could not address the needs of a highly sensitive individual. (I mean that as a compliment being a sensitive soul myself!) Many or most of us did not get all of our emotional needs met as children. It's common and in the nature of parenting that we miss the mark at times, but some children are more sensitive than others and some are more demanding.

Parents too have their own issues and history that can make it hard for them to be there for their child emotionally. Many of the issues that surround eating disorder development are intergenerational and may even be related to belief systems that were appropriate in other historical times during war or The Depression for example, but that are no longer helpful in the current



generation. Parenting is a delicate balance, but this is not about assigning blame, but about raising awareness in sufferer and family members to highlight these unspoken but sometimes damaging beliefs because we are all responsible for maintaining them. Most of them are familiar because they are cultural messages too that we may receive despite our best efforts not to. The socialization process in many cultures is harsh and often involves, for women especially, internalizing all sorts of messages that can become highly destructive to the self. However when taken to the extreme they start to look like a list of emotional symptoms of an eating disorder. Here are some common examples;

#### COMMON MESSAGES IN CULTURE & FAMILY POSSIBLE TRANSLATIONS

It's good to please others, care for others, be selfless/Christian Self-neglect  
"Control" your anger Hold anger inside  
Be strong  
Don't break down,  
Don't fall apart  
Move on with your life,  
Don't feel sorry for yourself  
Hide or stuff grief

Don't be a "loser"  
Be "successful"  
Focus on outcome not effort, end  
and not journey  
Be attractive/pretty/sexy/beautiful Focus on  
appearance not who you  
are or how you feel  
Be "good" Avoid conflict by acting to please  
others  
Be popular Please others instead of self  
Don't eat too much  
Don't get fat like me  
Stay thin like me

These messages can be a powerful influence over a vulnerable person. When they are reinforced instead of contradicted at home, as they are in the wider culture, someone who is highly sensitive can really take them to heart. One of the things that makes someone highly sensitive and vulnerable is a history of trauma and when that combines with the cultural and familial messages and genetic factors the development of an eating disorder is more likely. However there are some very specific ways that the nature of the trauma feeds into the eating disorder behaviors. The next portion of this piece is about how they can support each others existence.

## Boundaries and Trauma History

Those who suffer with eating disorders are regularly and repeatedly violating the natural physical limits of a human body. The human body requires nourishment from food on a regular basis to function well and to starve it regularly is to stop it functioning normally and push it to its limits of survival. It is an abuse of neglect that if done to a child or even a pet is punishable by law in this country. The human body also provides hunger cues which are physical signs that inform us when we need to eat, when we are full and when we need to stop. The illness of eating disorders confuses and distorts and eventually abandons those signals in order to support its existence. To eat without consciousness and continue eating until the body is in pain with discomfort of being overly full is another serious violation of a body that has an innate right to survive. It's just another way of abusing it physically. Again this would be punishable by law if done to a child. Finally, a most aggressive assault on the body is the purge, whether it be by self-induced vomiting, exercise to the point of pain and excessive weight loss, diet pill or laxative abuse or even eating foods that are known to cause major

diarrhea and/or stomach upset. They all assault the body. They are all aggressive, harmful, life threatening and again abusive violations of the body. In a human body that is well cared for, loving and humane boundaries would protect the self from using these ways to manage painful emotions that arise from life stressors, but those who suffer from eating disorders are missing those limits.

It is well documented that eating disorder sufferers frequently have a history of trauma in their lives and I've often observed that the self-inflicted boundary violations with food are in fact either repeats of earlier violations that occurred in the person's life or strong rebellions against them. For example a client who was neglected as a child in a physical and emotional way learned that she did not deserve food regularly and continues the self-neglect with her anorexia. Another client with the same history overeats compulsively on a regular basis as a defense against starving and becomes overweight to the point of severe health risk or early death. A client who was physically abused as a child now abuses herself by bingeing so that she repeats the regular assault on her body and physical pain that causes.

Another client sexually abused as a child may use food to punish herself, as children usually feel responsible for the abuse they endure, by bingeing until she hurts. After being taught to keep quiet about the abuse she may begin throwing up as a way of expressing the anger, disgust, guilt and shame she feels about the assault. (In the same way that those of us without eating disorders experience emotions of disgust that prompt us to say, "it makes me sick when I see .....

The eating disorder serves many functions in the cases referred to above and works on several levels. On a deep unconscious level it may literally reenact an early trauma as described above. It may also be the only way the trauma can be expressed or "talked about" through the eating disorder behaviors instead of the person's voice. Again this is usually although not always on an unconscious level. Finally the behaviors act as a way of providing temporary emotional relief from the feelings by starving or bingeing to the point where no emotions can be felt, (unfortunately this includes the more enjoyable emotions too like excitement, joy and sexual pleasure). The binge works by stuffing feelings with food until the chemical

change in the brain and feeling of fullness have taken away any contact with emotion. Starving the body creates a “spaced out” feeling and stops or hinders normal brain functioning, (it’s hard to feel emotion when your body is in survival mode). In this case the sufferer may have some awareness of this process, but to differing degrees for different clients and it is one of the first pieces of education given during recovery.

Boundary violations in childhood are often so strongly internalized that they are repeated in many other areas of the sufferer’s life. Similar patterns of what they do with food can be found in what they do with money, sex, and most common of all communications. For example they restrict their food intake and they also restrict their spending of money, regardless of whether they financially need to. Often those with anorexia have said to me “it’s hard to buy myself things that are not completely essential, that I don’t really need. I can’t buy for pleasure or things I just like”. Often they resist spending money on food too on the grounds that they really can’t afford to and this helps to justify the self-starving. Someone who is stuck in a cycle of extremes by restricting their food intake and then

bingeing and/or purging with food may do the same thing with money by overspending, feeling guilty and self-hatred afterwards and then not allowing themselves to buy anything and being unnecessarily restrictive in their shopping to compensate.

It is common for eating disorder sufferers, especially those with bulimia, to develop other addictions. This is another example of the lack of learning of appropriate limits, a missing ability to find moderation in anything when “middle ground” as a concept is entirely unfamiliar. So it follows that spending, sex, street drugs, prescription drugs, alcohol, gambling, stealing, exercise, unhealthy or abusive relationships are commonly carried out to their extremes one way or another or alternating between the them.

Another problem area for boundaries and where we see extremes is in the style of communication that accompanies an eating disorder. These problems are not limited to those with eating disorders but are very common among them for the same reasons as above. They often mimic the symptoms that manifest with food. For example someone who restricts their intake of

food may also restrict their communications in one of a number of ways.

They may literally and completely restrict their voice to the point where they

have quiet shy voices that mumble and trail off into disappearance and have

to be given massive amounts of support and safety to even speak of

anything. These people usually avoid social interactions and seek to

disappear or hide in our treatment groups just as they do in the world. They keep real people at bay and lean

only on their eating disorder for support

until it hurts them to the point of forced treatment or death.

There are also those who can speak, but only share things of no

consequence, or who focus on saying the “right” thing, “talking a good talk”

as we say in the business, but not really showing up authentically. These

perfectionists push others away by alienating themselves from reality.

Others cannot compete, feel inadequate around them and are unable to really

feel connected to them since they are not really genuinely revealing

themselves. This pattern needs to be challenged, to raise the persons

awareness of it so that they have are making a conscious choice to do it or

not in the recovery process.



At the other extreme there are those who can't stop using their voice driven by anxiety and fear of the feelings or thoughts that come up when they stop. They tend to monopolize conversations. Sometimes they share stories, sometimes lots of unnecessary details, sometimes they entertain, or they dramatize everything, but either way these communication bingers push others away with their communication style because they don't allow a real exchange between two people. They are one way only and others quickly get bored or feel that something's missing. Again this needs to be challenged to raise awareness of the process and how it keeps them isolated from their peers.

### Finding your Voice

Eating disorders have been described by some as "the silent scream" and our job in recovery is to give volume to that scream. This piece of work is vital for recovery. Finding and developing your voice is an individual process, different for all, as is so much of the treatment and recovery experience. It means learning to speak your truth and express your feelings. Meaning what you say and saying what you mean. Having your inside

thoughts, feelings and instincts be congruent with what you present to people on the outside, within the limits of appropriateness. It means holding your head up with dignity because you have nothing to hide or fear and when you do have fears you can talk about them. It is often a gradual process, but sometimes it can start suddenly after the internal pressure of holding back your voice builds to a point of bursting and the dam gives way. Then a voice is suddenly discovered in a beautiful moment of clarity. This might be prompted by the first experience of treatment when you finally experience the safety you needed to speak out or when you are challenged or supported by a peer or therapist in a new way and suddenly realize something important like “I have a right to feel angry and it’s appropriate”. This can be the beginning of someone quite literally giving themselves permission to have their feelings, to let go of the guilt they’ve experienced for having them, for not being OK with things around them, for disagreeing, and the list goes on. Often we need someone else to give us permission to feel before we can give it to ourselves and this is an important part of the treatment process.

Finding your voice is partially about giving voice to the child within and allowing that child to express thoughts and feelings that have previously gone unexpressed, from the child's perspective. A lot of people address their childhood issues with their adult mind, rationally and logically understanding that "they did the best they could at the time with what they had" or "it's in the past now – I've dealt with it" and these are adult coping tools to help manage the feelings that are useful perspectives at times. Essentially though they minimize and deny the feelings of the child and if the child has never had the chance to express them then these denials will aggravate the feelings underneath and can even create another wounding if the child's feelings were already denied or minimized by an adult. Sometimes "I've dealt with it already" really means "I survived it and continue to avoid it". In treatment we start to explore these possibilities first in writing, then verbally with a therapist in individual or group sessions.

Feedback given in sessions is often about allowing, honoring and respecting whatever the feelings may be, but also challenging the distorted

thoughts that prolong the agony of the feelings. Practical guidance is offered to support managing the feelings outside the safety of the therapeutic environment. We recommend using the support of peers through the phone, texts, and emails or journaling and artwork to continue practicing expression of feelings that are triggered by treatment. This is how you strengthen your voice; by repeatedly practicing being open and honest in your relationships. It's a tough process. It means daring to be in conflict and learning how that which seems to threaten the relationship actually strengthens it and helps it to grow when you can stick around long enough to work through it. It means not running away but doing the hard work of sitting with the discomfort of not knowing and taking risks.

One of the hardest places to find your voice is with family and close friends or partners. As soon as possible in treatment and with much guidance we encourage expanding your recovery support system to include family and friends. We suggest using family groups and sessions to get very specific about the ways that they can support your recovery versus enable the eating disorder. The most important way you can support recovery and challenge

the eating disorder is by staying away from making comments regarding food, weight or appearance to yourself, your loved one or anyone else and focusing on personal qualities instead. This is surprisingly hard to do but essential as it is the same job we are asking the person recovering from the eating disorder to do. Aside from this there are no strict set of rules we can give families and friends about what works and doesn't work because it can change depending on the person and how far along they are in their recovery. What works with one person may not for another and what works at one time may be triggering at another. The main solution then is to be asking your loved one with an eating disorder "How can I support your recovery?" and doing your best to find your own open and honest voice to continue communicating with them where possible. Examine your own boundaries and limits and check them out with your loved one. Find out if they experience you as too intrusive, neglectful, what bugs them and what they like. Challenge the isolation of the eating disorder by being vocal yourself and asking questions, but be respectful of their responses. It's so easy to fuel the eating disorder behavior without realizing it simply by not

understanding enough about how it works so educate yourself as much as possible.

Having an eating disorder specialist to mediate family discussions can be vital when communications have broken down to the point of none or aggressive conflict. Above all get support for yourself too from a therapist or support group, especially one that is focused on eating disorder recovery.

This is often a massive relief for the eating disorder sufferer who carries guilt for the strain on family members even if it's not apparent. More importantly for you your voice may need strengthening too in order to withstand the challenges and demands made by your loved one.

Recovery from an eating disorder requires turning the inside out, first of all learning to recognize the thoughts, feelings, and instincts inside and then having enough to safety to allow them to be voiced, the verbal "purge". Valuing the internal self enough to give it space is challenging when you are degraded by the voice of the eating disorder regularly so it requires massive amounts of support and a feeling of safety to learn to express freely what

you think, feel, need, and want without shame and guilt. At first the shame and guilt will be there because there are some significant rules that are being broken by releasing these aspects of the self. Eating disorder rules, maybe family values too are challenged repeatedly in many different ways until we get the message across that they don't make sense anymore, until it becomes obvious that they must be cast aside as the pain that believing in them causes is so great. The inside must not be allowed to remain hidden as that encourages and supports increasing guilt and shame and keeps the sufferer imprisoned by their isolation. The more you can be honest and "keep it real" the more relief you will find from your pain as your peers accept you for who you really are. It is a testing process of trial and error and so crucial that therapists can stay sensitive to this sometimes slowly and shyly emerging self in their responses. This means being gentle and positive about every little move towards recovery, which at first may simply be showing up in group despite not wanting to, or honestly sharing how they don't want to be in treatment.

When you've found your voice you no longer need to use food to say

the things you need or want to say. When you have the found the courage to speak up you no longer need to stuff feelings, negate them, or purge them with food. When you have learned how to ask for your needs to be met and have found people who can meet them around you don't need to use your body weight to disappear or become invisible. When you have practiced setting appropriate limits with people and survived the experience of emotional intimacy you can feel safer with others and no longer need to use your eating disorder to isolate. When you have learned to start loving yourself and can therefore receive love from others you no longer need to self-soothe and comfort with food. When you have forged a new identity by rediscovering your strengths and skills you no longer need to be your eating disorder. When you have a sense of control back in your life you no longer need to control the food. Life is short. The time to start your recovery, or to start getting serious about your recovery, is right now.

By Sarah Flores



## Chapter VII

I grew up in a family where food was used to sooth our feelings. Alcoholism was everywhere and it touched not only my father but my uncles, cousins, and many of the neighbors on the block I grew up on. I remember being afraid of many things as a child and fear was part of growing up. Survival techniques were established in my personality and I have carried them with me throughout my life.

I remember watching my mother deal with her pain by eating and would run to the refrigerator for empathy and comfort. She was not a drinker but learned early in her marriage to mask her pain and fear with food. Vegetables or fruits were not the comfort foods my mother sought but food that filled you up and gave you that feeling of security. Breads, cheeses, tortillas, fast food, and sweets were the key. She passed these habits on to her family.

During the 1960's and 1970's there were not many programs for individuals and families that were living with alcoholism and most of us learned to deal with the disease with the tools God gave us. Survival was the tool I knew and I survived. I would seek quite places to hide, the closet, under the bed, outside in the fields, anywhere but home. I would avoid confronting the alcoholic for fear of disrupting the little peace that existed. I would leave the house to play and stay away as long as possible. I avoided inviting friends over. I sought out other families to spend the night at so I

could feel good inside. I would pray to God while my father would drive drunk and often close my eyes in the car while reciting the Catholic rituals from religious school. Of course the alcoholic often seeks food after a day of boozing so I would find myself at Fosters Freeze after football practice eating a huge hamburger as my father spilled most of his meal all over himself. The hamburger gave me comfort and my mother taught me that was the way to deal with my feelings.

My mother taught me that she could eat to hide her feelings. She was a wonderful woman, full of life, full of energy, and could light up a room when she entered it. She had many friends and our family social network was tied around her personality. She gave much love to her children and family and was someone that everyone wanted to be around. She laughed, smiled, cheered, and was a mentor for fun when I grew up. Snacking became a way of life with my mother and she used this food to “get through the day.” Anger, fear, hopelessness, and rage are feelings that need to be expressed and dealt with. They need to be confronted and not kept inside. They are feelings that will pile up inside you and create disease, tumors, anxiety, depression, and can make you an unhealthy person. The fear and anger in my mother did build up and instead of confronting her feelings and the alcoholic she lived with she simply ate food and obtained that instant gratification. She ate food to hide these feelings. She ate food to suppress these feelings. She ate food to quiet these feelings. She ate food to feel.

My father eventually stopped drinking and went on to live a sober life for many years. My mother never

learned to express her feelings and carried these survival tools with her for the remaining years of her life. She continued to suppress her anger and used food to comfort these feelings all her life. These feelings bottled up and when mixed with the comfort foods she used to survive they eventually attacked her body and she died. She died much too young. She died with so much life ahead of her. She died and left many people who loved her behind.

I have learned that when people say “it’s not about the food” when describing eating disorders they are correct. It is the underlying issues within a person that need to be dealt with and the food is just a tool that someone can control to hide the pain inside. Trauma, hurt, shame, embarrassment, fear, guilt, loneliness, sexual abuse, abandonment, etc. are all issues inside people who are affected by eating disorders and the sad thing is that there is help out there if one seeks it out but so many people do not seek the help they need. When my mother was suffering in the 1950’s, 60’s, 70’s and later there were not many treatment centers like there are today. If you are reading this book I plead with you to just pick up the phone and ask for help. Go on the internet and search for help and you will find it. Don’t be afraid.

I am now a father of three and I often look at my children and wonder what their life would be like had their grandmother lived and given them love as they grew. Grandmothers are God’s gift to children as they are allowed to spoil them rotten without the consequences of having to parent or discipline. My children will never know their grandmother. They will never hear her laugh, see her smile, or spend the

afternoon with her. My children were “cheated” and it breaks my heart that they never knew my mother and never will. Again, if you are reading this and think about someday becoming a mother or father or grandparent then reach out for help and don’t end up like my mother. Deal with the issues inside of you and express what is bothering you.

The thing many people don’t realize is that eating disorders affect so many people in multiple ways and for numerous years. The eating disorder can be with us for a lifetime and we might only listen to our bodies scream for help when we are old and bedridden. It causes many deaths and is such a silent disease that people may keep it hidden from others for years while the voice of “ED” whispers in their brains how to keep living in the disease. ED has gotten them this far in life so why change.

One day I realized that I wanted to help other people like my mother who were suffering with eating disorders. I wanted to help them to live long and healthy lives so they could spend time with their grandchildren. I wanted to help them live healthy lives so they could become mothers themselves. I wanted to help them get through college without losing precious years to eating disorder diseases. I wanted to reach out and touch those affected with eating disorders but I did not know how to. So I simply reached out to the world and God sent people who also wanted to help. The universe sent these wonderful people to help establish an eating disorder facility called La Ventana and we are all working towards the goal of fighting eating disorders and helping people of all ages move towards a healthy life.

## Chapter VIII

Kidnapped: Eating Disorders and Infertility

By Anonymous

April, 2010

From the ages of 15 – 19, I had a severe case of bulimia for which I should have been hospitalized. Doctors and nurses didn't know what to look for in those days and I was an excellent secret-keeper, so no one knew. Now I wish someone had known, someone who could have talked to me about the consequences of what I was doing to my body. In the dark days of the eating disorder, I had too much self-hatred to stop bingeing and purging. Yet I can't help but wonder if I would have asked for help had I known I was threatening the life of my unborn son or daughter. I am 46 and unable to have biological children. Only now am I coming to find out how my infertility relates to the bulimia.

The day the doctor told me I could not give birth with my own eggs, I crumpled in the hallway of my apartment, crying. I was 42 years old. The sobs came from a place that stretched behind me and before me in time; I was a small spot on an extended, horizontal line of grief. My father died of cancer when I was thirty; I had my own brief bout with cancer the same year; my first marriage to a man who was (at the time) the love of my life ended in divorce four years later; and I have mourned four dearly loved grandparents. Not being able to have a biological child has been more difficult than any of these other serious losses.

There is something abstract and therefore overwhelming about grieving what never was. (Perhaps

that is why there are few, if any, mourning rituals for infertility). I wonder about the possibilities of a life that will never be. I regret not knowing the unique intimacy that comes of a shared biology and daily existence. I think about my grandchildren, and their children, and theirs, all stopping with me. My dad lived and had a full life. When he died, I was sad, but the grieving felt finite. Mourning someone who never got the chance to exist feels infinite.

I was already 41 when I had my first and only miscarriage. (That was the closest I would come to having a baby with my own eggs.) I miscarried very early in the pregnancy, but it was still a huge disappointment. That was when I began to look for help in earnest. Like most people, I thought infertility was a physical problem, so sought physical answers. I first went to an OB/GYN, who referred me to a fertility specialist. Despite being in my early forties, both the OB/GYN and the fertility specialist told me to consider using an egg donor (i.e. I should abandon trying to get pregnant with my own eggs.) Statistics were better in the world of alternative medicine, which had good results for women my age using their own eggs, so I began a course of weekly acupuncture treatments that lasted 2 ½ years, and included swallowing cups full of herbs whose names I could not pronounce on a daily basis. During this time, I consulted with both a homoeopathist and a professional midwife who specializes in conception.<sup>1</sup> The midwife in turn referred me to a

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<sup>1</sup> While other practitioners were effective with one aspect of infertility or another, the homoeopathist was the most effective at treating the factors together as a whole.

chiropractic neurologist, whom I saw weekly for 18 months. These treatments cost \$25,000 over three years.

None of this resulted in a pregnancy, but I did become healthy again (I had had some persistent health problems following my years as a psychotherapy intern). The chiropractic neurologist in particular helped me piece together more of the puzzle about how bulimia had jeopardized my chances of having a baby. Reproductive health is based on hormones, which in turn are affected by what happens in your gut and stomach (according to both the Chinese and Western medical models). After all the pies, cookies, and ice cream I consumed and purged, time and again, my stomach had gotten damaged, as indicated by chronic abdominal pain in my twenties. When I began to seek treatment for digestive problems in my thirties, I received a variety of diagnoses: adrenal exhaustion; leaky gut syndrome; lack of digestive acids (for which I currently take stomach-acid-replacement pills at every meal); and an open flap in my intestines. The chiropractic neurologist explained how these problems could lead to infertility. If food is not digested, tiny pieces of it are released directly into your blood stream and the rest of your body. The body recognizes this as foreign matter, attacking the undigested food as a toxin. If this persists, the body starts to attack its own glands, including the glands that control hormones such as the thyroid and pituitary. Once hormones are not working properly in concert, the regular production of healthy eggs is interrupted, decreasing fertility.

While I know of no study on leaky gut syndrome as it relates to bulimia and infertility (let this be a call for one), conventional medical research confirms a

correlation between eating disorders and infertility. In a 2008 study at a reproductive health clinic in Massachusetts, "Seventeen participants (20.7%) met criteria for a past or current eating disorder, which is five times higher than the U.S. lifetime prevalence rate."<sup>2</sup> In other words, patients with eating disorders were over-represented at the clinic, compared to the number of people with eating disorders in the general population. In addition, a Hungarian study on the hormonal effects of bulimia shows that "...unsatisfactory nutrition (binges and "crash diet") in bulimia nervosa results in hormonal dysfunction, menstrual disturbances and infertility..."<sup>3</sup> Findings are similar for anorexia; infertility problems associated with compulsive overeating have yet to be studied.<sup>4</sup> My own experience confirms this research. I have ten friends who had diagnosable eating disorders. Of these,

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<sup>2</sup> Freizinger M., Franko D.L., Dacey M., Okun B., Domar A.D. (1993)

The prevalence of eating disorders in infertile women.

Retrieved March 30, 2010 from  
<http://www.ncbi.nlm.nih.gov/pubmed/>.

<sup>3</sup> Resch M., Szendei G., Haász P.

Bulimia from a gynecological view: hormonal changes.

*J Obstet Gynaecol.* November, 2004 (8), 907-10.

Retrieved March 30, 2010 from  
<http://www.ncbi.nlm.nih.gov/pubmed/>.

<sup>4</sup> For more information on eating disorders and infertility, go to <http://www.ncbi.nlm.nih.gov/pubmed/>.



nine wanted to get pregnant. Seven could not without medical intervention. Of the seven who tried to get pregnant with medical intervention (mostly western or a combination of western and eastern medicine), only one carried a child to term using her own eggs. The one who got pregnant without medical intervention had a severe case of morning sickness that pervaded her entire pregnancy and prevented her from carrying a second child. (She chose adoption instead). This is a condition known as Hypermesis Gravidum, whose link to eating disorders is currently being studied.<sup>5</sup> Researchers often attribute eating disorder-related infertility to low body weight.<sup>6</sup> I did not have low body

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<sup>5</sup> For more information on Hypermesis Gravidum, please see <http://www.springerlink.com/content/rbtw069whvpgq7xk/>).

<sup>6</sup> Here are three studies linking low body weight with infertility:

1) Usdan L.S., Khaodhlar L., Apovian C.M.

The endocrinopathies of anorexia nervosa.

*Endocr Pract.* November, 2008 (8), 1055-63.

2) “Chronic undernutrition leads to main long-term medical complications of eating disorders: linear growth in adolescents with anorexia nervosa, infertility, and osteoporosis.” From the following study:

Nicolas, I.

Long-term evolution and complications of eating

weight for any extended period of time, however, and neither did three of my infertile friends. There had to be another cause of our problems, and there was: age. I didn't start trying to have a baby until I was 40. That's old in reproductive years, and is thought to be the biggest factor in infertility by both the medical community and the general population. Out of my nine friends who had an eating disorder and wanted to have a baby, seven started after the age of 35 – eight if you count me. Starting late, while it has physical consequences, is an emotional choice. In understanding my infertility, it had become clear that the emotional factors were just as influential as the physical ones – perhaps more. This suggests that just as eating disorders are mental illnesses with physical consequences, infertility (in women with an eating disorder history) is an emotional problem with physical consequences.

The truth is, I was afraid to have a baby. The fear goes back to the summer I started menstruating, before my eating disorder began. My best friend moved to London and I visited her there. When I got home, my dad's clothes and shoes were no longer in the closet. He had

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disorders.

*Rev Prat.* January, 2008, 58(2), 151-5.

3) Article by G. William Bates, MD: “Abnormal Body Weight: A Preventable Cause of Infertility”. “Body weight disorders is [sic] one of the first potential causes of reproductive failure in both men and women.” Pulled on March 30, 2010 from [http://www.protectyourfertility.org/docs/bodyweight\\_infertility.doc](http://www.protectyourfertility.org/docs/bodyweight_infertility.doc)

moved out while I was gone. With no place for my grief to go (I was strongly discouraged from crying), I turned it on myself, concluding that my dad had left because I became a woman. I wanted to return to a time when he liked me, before I got my period. I didn't have the eating disorder yet, but already I hated my body, blaming my reproductive parts in particular for the current problems in my life.

From then on, I felt I had to fix what had gone wrong. When I was 13, I began bingeing, using food to comfort myself after my parents divorce. At 14, I dieted in the hope that making myself attractive would bring him back. I lost weight. Then, at the age of 15, hungry from restricting, I started overeating again. After an especially large eating session, I could not bear the thought of gaining weight and I vomited for the first time. Thus began the cycle of bingeing and purging. Six months later, I stopped menstruating.

I mentioned the amenorrhea to my dad. He told my mom and she took me to an OB/GYN who prescribed estrogen. I took it for a few months but I was inconsistent with the medication. I really did not want to get my period.<sup>7</sup>

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<sup>7</sup> I have concluded that prescribing estrogen was not helpful for me since it did not address the underlying eating disorder. A Hungarian study concurs: "The authors question the necessity for immediate estrogen replacement; they consider the reversibility of the hormonal status by early treatment of eating disorders is more appropriate."

From Resch M., Szendei G., Haász P.

When my menstruation returned at age 23, I started thanking God every month that I had not gotten pregnant until, at age 40, I began trying to have a baby. At that point I abruptly switched to getting angry with God every month when my period came. While I believe that a woman should have sovereignty over her own body, I was overly controlling when it came to my reproductive system and my period. Why?

Like my eating disorder, a controlling attitude toward my reproduction was a way to manage my fear – and I had many fears. I feared my husbands, both of whom would get angry or leave at times, and with whom I was not skilled at setting boundaries. I kept telling myself, “It’s good enough, there is plenty of love in the house, just have the child,” but I couldn’t relax or fully commit to either relationship. I also dreaded that I would do to a child what had been done to me, and I couldn’t tolerate the thought that I might hurt another. Another fear I had was fear of conflict. I deplored the constant, bitter fighting in my family and I didn’t have confidence that my spouses and I could create a home free of emotional violence. Real as these hesitations were, however, they were not the true root of my ambivalence. I would not discover that until later, when all my attempts to improve myself, others, and my circumstances fell away.

The efforts to improve myself had begun early. I learned to read at three. I excelled in school. When these accomplishments didn’t bring my parents toward me or make them into emotionally reliable people, I turned to

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*J Obstet Gynaecol.* November, 2004 (8), 907-10.

Bulimia from a gynecological view: hormonal changes.

food for comfort. Then I gained weight and felt people's disapproval so I focused on making myself attractive, which resulted in my eating disorder. Next I tried moving faster than my inner pain by attending four colleges in four years. As a senior, I met my first husband, and I thought our relationship would keep me from the sadness. When it didn't, I sought another man. I really thought this second marriage would – and should – take away my grief. It didn't.

Having a child became my last hope. I would nurture the child so that our connection would be safe, reliable and conscious at every level. This pining for a child caused both anticipation and anxiety as I continued to seek alternative fertility treatments.

After three years of trying and no births, the conception counselor referred me for an IVF attempt with my own eggs.<sup>8</sup> At 43, it was hard to find a doctor who would work with me. I found one, but despite \$10,000 worth of infertility drugs and all our best efforts, I did not produce any eggs to retrieve and the IVF was called off. At that point, I decided my best option was to adopt an embryo. This is becoming more common as women who seek fertility treatments have embryos left over after IVF cycles. I posted a profile on a website that matches donors with recipients. Only one person contacted me, but it seemed meant-to-be. We had a lot in common – she had grown up one of the towns where

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<sup>8</sup> IVF stands for “In Vitro Fertilization”. It is the process of using medication to stimulate the production of a woman's eggs, then retrieving the eggs and uniting them with sperm in a Petri dish to make an embryo, which is then inserted in the woman's uterus.

I attended college and we knew some of the same people. I used to jog by her house. Also there had been signs. I went to synagogue the day after meeting her and the Torah portion was about Moses seeking help from his tribe in order to fulfill his destiny. On my way home, I saw a stork for the first and only time on the bay near my house. Ten minutes after seeing the stork, I had the windows open to air out the first floor when a bird flew into the dining room. It was not a white dove, but still - this seemed like an annunciation.

I called the potential donor a few days later on my way to work, planning to tell her that it was a "Yes" for me - I wanted to take possession of the embryos. During that phone call, she told me she had decided to give them to somebody else.

The next day, after a night of lying awake in the clutches of anxiety ("I've just turned 46. Time is slipping by. Maybe motherhood won't happen for me!!!), I ate a healthy meal and got in the car to drive to my evening job. I had a headache due to crying fatigue and the Ambien pill that didn't work. Driving over the Golden Gate Bridge, I felt like I might throw up. A black aloneness rose on the nausea, lining my arms underneath the skin like a layer of tar as I gripped the wheel. "There is no one there for me," were the words in my head, and "It is always the same thing." Now that my last hope had fallen through, there was a part of me that felt fundamentally the same as I had in childhood - there was no other human being to rely on, and there never would be.

Sick as it was to wish that a baby would take away my pain, it is very common. This was, in fact, what my parents had unconsciously done to me, and what had given rise to my eating disorder. Abandoned by their

parents emotionally, when my parents were confronted with my human needs, their own wounds were activated. My mom reacted with anger; my dad, by withdrawing. As a kid, all I knew was that I had made my mom angry and my dad leave. I truly felt there was something wrong with me. This was when the self-hatred began that later became my eating disorder. The self-hatred, however, was secondary. First there was sadness, a pure and simple despair because the people on whom I depended left, rejected or (emotionally) attacked me. Sue Johnson, PhD, who researches attachment, writes, "...Isolation, separation, or disconnection from an attachment figure is inherently traumatizing,"<sup>9</sup> This means that insecure relationships are not slightly depressing or uncomfortable, but experienced as life-threatening. I had been avoiding that life-threatening sadness since I learned how to hold my breath to stop from crying. Now here it was again, rising in my arms like a bad dream as I drove through the Presidio. All the things I had done in order to avoid the grief and make myself lovable had fallen away, some by my own hard work and some by circumstance. There was no hope left, just this grief and me.

In that moment, it became clear that the bulimia had always been an expression of this feeling of intense loneliness. Throwing up was a way that I could mourn with my whole body, crying out with all my limbs. A

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<sup>9</sup> From "Attachment Theory": A Guide for Couple Therapy" (2003) by Susan M. Johnson, Ph.D., reprinted from Johnson and Whiffen (Eds.), *Attachment Processes in Couple and Family Therapy*, (p. 106). New York: Guilford Press.

deep and unconscious part of me had been convinced that if parenthood were to prevent me from pursuing any of the things I used to escape the pain, I would not survive. Yet the moment also contained a personal triumph. Upsetting though it was to feel like the ship of motherhood had sailed without me, I felt mature and liberated, understanding that I had been working up to that moment for a long time. I needed my training as a psychotherapist to help me name the unmet attachment needs; I required the extensive support community who truly was there for me; I had to dismantle my defenses and compulsions over many years. Everything that came before - right up to the egg roll from lunch that gave me food poisoning - had coalesced so I could feel the nausea and this grief directly. It became so clear that night: I had been scared to have a baby because I feared this feeling, and I didn't have to be scared anymore.

In the weeks following the loss of the embryos, I felt relieved. I had been controlling others, the environment, and myself for forty-two years. I had been furious at my husband for not being a salve on my wounds, and angry with God for giving them to me. I was looking forward to seeing how my marriage could transform now that I was no longer trying to make my husband into a buffer for the pain. I was curious what would happen in my life now that my energy was liberated from the impossible task of changing the world. I felt open to what might be next, no longer bound by the need to protect myself from feeling that layer of grief. I saw how these experiences would make me a better mom.

I tried to stay out of the grip of regret, yet there were some things I couldn't help but wonder. I recovered



from bulimia without formal treatment. I wonder, had I received early help from trained professionals and my amenorrhea been arrested, whether my reproductive system might have been healthier. I ponder that a treatment team might have helped me stop bingeing and purging sooner, preventing the leaky gut syndrome which has been linked to my infertility. I wonder if treatment would have helped me identify and express the attachment wounds so I could have halted those exhaustive efforts to improve myself. I imagine how things might have been different if someone could have explained why I hurt so much and felt like an abused child, even though there was no physical violence in our house. I also think treatment would have helped me develop the skill of setting boundaries in relationships so I would not have feared other human beings and commitment. Most of all, I question whether professional help would have helped me contact the grief earlier on, perhaps when my reproductive system was still young enough to be viable or responsive to interventions.

Along the lines of wondering how treatment would have helped me, I have made a list of things I learned that, I hope, will help you or someone you care about. Eating disorders have devastating physical consequences that can ruin your chances to have children. If you have an eating disorder, get help as soon as you can.

Human beings experience the lack of a secure connection with other humans as traumatizing. A break in the connection, repeated over time, feels intolerable and causes tremendous grief. Untreated grief leads to compensatory behaviors such as eating disorders and

the avoidance of both positive and negative life events (such as starting a family).

Working through the grief requires both (internal) ego strength and (external) community support.

There is no person, place or thing outside of oneself that can take away the pain. Peace comes from expressing feelings and facing grief.

If you avoid grief and feelings, you will avoid other important things in your life (such as having children).

The same emotional factors that lead to eating disorders can later lead to infertility. Therefore, it is crucial to address both physical and psychological factors when treating infertility in women with an eating disorder history.

Best wishes in your recovery.

# Chapter IX

## Magic Mirror

The staff here at La Ventana were asked, if we were willing, to reflect back into our lives and write a chapter about the experiences we went through in dealing with our own, family members or maybe a close friend's Eating Disorder. These reflections are being drawn up to the surfaces once again in an effort to share our strength, hopes and experiences with those who are still struggling.

Looking back into our past, we all want to think about the good things in our lives. However, it is always the bad things that seem to pop up in our heads, time and time again? The staff here will all struggle with this, it will be a challenge, and yet it will provide us with much needed and wanted growth into our current and ongoing recovery. As we all travel once again through our past lives, we truly hope, as you read our struggles with ED, your lives will change.

Well, here I am back into the past, a place I really do not want to be, but yet a place that I know, I need to be for now, because there are people out there, who are suffering, just as I did, who need to hear my story. They need to know, just as I needed to know, we are not in this disease alone. I hope our stories will be helpful in providing you with the courage you need to reach out

for support and the wisdom you need to get, so that you understand you are not in this disease alone.

I was a lucky person in life, a wife and mother who stayed at home to take care of her children. My plan is to reflect back into what I thought was a normal day, in the life I lead. A day that I did not even realize was my disease. I thought what was happening with me was normal and every mother and wife was going through the same stuff. A day became a month, a month became a year became a habit.

Well, the day always began with, what I wanted and that was to sit back and wait, yes wait for my children to wake up naturally, from sleeping all night long. Which often was highly impossible, because by 6 a.m., this house we called a home was starting to fill up with children, lots of lovely children. My children grew up with other wonderful children. They explored the adventures of life together, in our family home, which was now a day care for the next eight to nine hours.

Once my own children got up, it was a bee line straight to the kitchen, to prepare breakfast for everyone. One of the older children would pick out a story and read the story while the rest of us would prepare the morning meal. Believe it or not, all the children would eat, even if they had eaten at their own homes earlier that morning. So of course, there was always leftover food. Let me tell you this, the left over food, never went down the kitchen sink, nor did it go into the trash and it

was not about to end up in the refrigerator, where most families would place their leftover's for later. The leftover's and the food the children did not finish always landed onto my plate, whether it was placed there by me or by the children, because that's what happened with extra, leftover food in this house. When I was growing up, my family was very poor, so when food was place on your plate you ate it and you ate it all. There was no such thing of "wasting food." So, being the good daughter I thought I needed to be, I followed my parents golden rule "if it is on your plate you're to eat it and eat it all". Yes, this "golden rule" now followed me right into my adult life. And of course, I needed to be the good mom, the good teacher and set the right example by finishing everything on my plate.

Once all the children had finished eating and the food was gone we all cleaned the kitchen and then moved right into our learning time. This was held in the kitchen because that was where all the little chairs and tables were at. So while teaching in the kitchen, it was easy to grab a bite of this and a bite of that. Most of the time I thought the children did not even notice, but later in life I found out differently. One of the boys I took care of the six years invited me to his graduation from Junior High. It was there that the two of us sat and giggled about our past history together. It was there at his graduation dinner that he told "to this day I can still picture you in your kitchen talking with us with your mouth full." Wow, what an eye opener, especially since

I was sitting there with him and his family, at their dinner table, about to celebrate his accomplishments with great smelling homemade food.

Wrapping up learning time with three different educational songs, I prepared the mid morning snack, while the kids sang. You know that old saying one for you two for me, well that's how it went, one for your plate and two for my mouth. By the time the songs were done the children had their snacks in front of them. And this person was full to the rim, but that did not stop me from doing everything I had to do, in setting the right example, because you know the children watched my every move. You got it folks, I prepared a snack for me too, I was not going to be left out. Besides I had to let the children see me eat that snack. Yeah, right! And of course, I had to finish off all the left over's the children did not eat. I had become, "the human garbage can."

Now the time has come, to pile all of the children in the car, so we could get out of the house, to get some fresh air and to have so old fashion play time. We went down to the market, where there was an indoor play ground. We lived in Alaska and most of the year there was snow on the ground. So Playing outside was not an option. The children would spend a couple of hours running around this play area. Going up and down the slides, swings and playing kick ball, in hopes to burn off some of the energy they all had from being cooped up. For me, I could just sit back and relax. Relaxing! What is

relaxing without a bag of chips in one hand and soda in the other hand? Yet this made my day, it made my every day worth wild to sit there and watch these children run, jump, scream and yell and have absolutely no care in the world, but to have fun. Once I finished that large bag of chips and a six pack of soda, I knew it was time, once again, to pile all the children, back into the car and head home for lunch.

Lunch time was the “bestest” of all; we would all form a line to prepare lunch, one child would take the bread out of the bag, the next child would place the main item on the bread; you know the meat or the peanut butter, the third child places the cheese or the jelly on the bread. I think you’ve got the picture now, we all had a job and everyone preformed their job well. Even the parents would talk about how much their children, would enjoy making meals with them as a family unit at their own homes. Thanking me, time and time again, they were so happy , because their children, they said “never made a mess or left a mess.” The parents just did not see the messes, they were there you just had to be quick to see the mess. That’s right, the messes did not stay on their little hands for long, nor did the mess stay on the counters, the messes did not even hit floor, those children would hustle and grab that food and place in their little mouths, so quickly you did not even know it was happening . These little guys were taught from the world’s best “licker upper.” That was me and I was very proud to know the children were staying

organized even at their own homes. The material I was teaching these children had made it to their parent's homes. I was a teacher, and the parents were happy with my services. You cannot have a business better than that; I was turning away children from my day care, because my families were so thrilled with their children's eating habits and their cleanliness around meals, they were referring their friends to me left and right. Lunch was always a joy because the children always ate all their food. They were hungry mostly because they had worn themselves out at the play ground. When we prepared the lunch we always made at least one extra sandwich. We would cut it into four pieces, just in case someone, (yeah, that someone was me) wanted more. Once in awhile, one of the children would want more but that was seldom. One day one of the older children placed the extra sandwich on my plate and said "well that is where it always ends up so why not start with it there." Everybody laugh and went right on eating.

After lunch was over, came the highlight of my day came "nap time." Everyone would run to their little cots, and settle in, by early afternoon and usually everyone was asleep within 30 minutes. They were taught early that once you ate, it was then time to follow that natural feeling process, and that was to sleep. They thought that sleeping would just provide them with the privilege of doing something special for that afternoon, because when they got up there was



always a surprise adventure. They never gave me a hard time about sleeping and besides their little bellies were to full and they were going to fall asleep anyway.

While they slept my chores needed to be done, that is washing clothes, cleaning the bathrooms, mopping the floors and getting everything set up for dinner. So that it will be all prepared by the time hubby came home. But wait, I forgot to tell you, during this time I had to prepare the afternoon snack. So the entire time I walked around my house cleaning, I was shoving more and more food into this mouth of mine. I did not see that I was doing anything wrong, this had become a habit. I honestly did not even realize I was doing all this. It just came natural, you know like putting on clothes before you walked outside.

The children slowly began to wake up and most of them were up about 15 minutes after the first one got up. We all went to the kitchen and had snack which was usually light. We were only looking at a couple more hours and their parents would be there to pick them up and they had to eat dinner.

The afternoon activity was always in the garage. This activity would focus around their creatively. It would involve paint, or dye whipped cream for fruit painting, or noodles and dried beans and beads or yarn. Anything and everything I could find to do an art project with we used. The best art project of all was the projects we did with food. They really enjoyed this because the tool was

the food; the picture was the outcome to take home. Once the outcome was completed they got to eat the tools. Most of the time they were not wanting to eat the tools because they had already had snacks. They were not being told they had to eat this because it was not a meal or a snack. But that was okay by me it was more for me to enjoy.

We would end the day sitting all curled up on the couches in the living room listening to books on tape, with a big bag of chips or cookies on the coffee table. Most of the time these item did not even get touched by the kids. But how do you do things with family or friends without food around. We never watch T.V. or listened to music, or just visited with family or friends without food being the center of attention. That is what I grew up with, I did not know any different. So what I knew and felt comfortable with is what happened in my home.

It is now around 6pm at night, the hubby is home and dinner is on the table. Finally, we get to sit as a family unit and enjoy the company of each other, “you betcha” its around the food table. As we sat and talked about our day, the meal went by so quickly and I was not ready to end the conversation. Adult talk, I truly longed for this. To talk with big words, to use more than one sentence to explore a topic, and to hear someone respond back to me with more than a one word answer. But the food was gone and he was going to get up and go into the other room. I popped up to pull the desert

out of the refrigerator, just in time for him to sit back down. I continued to talk with him as I slowly served him the apple pie with ice cream. That's great I've got him for at least another 30 minutes. Then the end came, I had to clean the kitchen with my children's help. Back to being the mom, we finished up in the kitchen. But there was left over food and it was not on my plate. I had not even thought about the food on the table until he left. There I was in "wonderland" looking at my children, but wanting to be an adult. As we cleaned and talked I nibbled on all the leftover's until they were all gone. I was not even thinking about what I was eating, I wanted real adult time.

It's bath time my oldest would yell as he ran down the hallway to get the basket full of toys for the bath. I started the bath and then got their PJ's for bed and then I guided them into the tub. We would play games with all the toys and by the time we would pull the last toy out of the basket and hour had gone by. As I dried off the boys and dressed them for bed, I thought about my life without them. I could not even picture it. They were my life and my life was filled with love for them.

Off the bed we went. They would say a prayer and then pick out a story and I would read until they fell asleep. I would kiss them good night and then rush off hoping he was still awake. Looking into the family room he was still watching T.V. I flew into the kitchen to prepare a late night snack, just to get back into the family room and found him fast asleep. As I sat there with the pop

corn in one hand and a soda in the other hand, I watched T.V. alone. After finishing the late evening snack off to bed I went. I stopped in to look in on my children. The thoughts again were “you guys are my world, my life and my love. I am a lucky person, I am a mother.”

The night was close to being over. I was alone in my bedroom changing in to my night gown. As I change I glanced into the full length mirror that enclosed the entire closet. Who is that person? I closed my eyes and opened them again and the person was gone. As I took a deep breath of relief, I thought that person was huge. I wonder why that image came into my head. Oh well, it was gone no worries be happy move on.

That was the beginning of this image that would come to me at night. The mirror became known for a while as the “magic mirror.” Or at least in my head it was. I would see this person, in that mirror, I did not even know. I could not understand it. What is that lady trying to tell me? But the lady never stayed very long. But as every day went by and the night came I did start to notice she was staying longer and longer. But soon would go away.

Every day I would get up, plan the day with the children. Be the care provider, the mother and the wife each day. Each day I did not understand why I was so unhappy. I had everything a person could want. Remember I was a lucky person. I got to stay home with my children. I was

a teacher, a care provider, and a mother all wrapped up in one. Oh I shipped I am a wife. Or was I?

One morning I walked up to the woman in the mirror and got really close. I never looked at the mirror in the daytime only at night. I don't know what got into to me. I could not believe it the lady did not go away. I stood there in shock. Yet I kept moving closer and closer to the mirror until I could touch it. Then I just stopped and stared. I could not believe my eyes. This was no magic mirror that lady standing there was me.

This is when I realized I had a problem. I reached out for help and slowly lost the weight. Then once I lost all the weight you would of thought that the woman in the mirror was thin. But no so stay fat for a long time. Then just as the fat woman stayed in the mirror the very thin woman stayed in the mirror.

Now I realized that the problem was not the weight, it was the feelings. Now it was time to deal with the feelings

## Chapter X

Sitting in the face of an eating disorder is no easy or simple task. The symptoms, behaviors, and voice associated with an eating disorder can be ruthless, dark, self sabotaging, and exhausting. Yet, in some strange way such voices and behaviors can also be familiar, safe, and protective. The complexities of such a mind-body, heart and soul dis-ease are difficult to put into words and often difficult to articulate in a comprehensive linear fashion. To cure such a dis-ease requires patience, strength, and courage. When I sit with a person in recovery, I am continually reminded time and time again of my humbleness as a human being and my purpose for living.

I suppose it comes to no surprise as to how I ended up in the field of psychology and specializing in treating individuals diagnosed with an eating disorder. I grew up in an environment that taught me that in life you either sink or swim. So, at a very young age I chose to swim and for awhile that's all I did until one day much later on in my life I learned that I also needed to take the time to breathe and rest. It was during middle school that I first heard and witnessed the damaging effects of Anorexia Nervosa and it was in high school that I was first introduced to the secretive releases of Bulimia

Nervosa. It appeared that for some time eating disorders were all around me. Whether it was a family member, friends, or myself dabbling in disordered eating, I could not escape the illusion of perfection.

Witnessing a very close family member struggle with substance abuse and with an eating disorder as well as my own disordered eating has given me great wisdom and insight into the dark abyss of pain, addiction, and self-destructive behavior. Going through my own recovery as taught me to accept, surrender, and trust the process of the unknown. I have learned from my family member's experience, my personal experience, as well as my patience that recovery is a subjective experience and one that deserves to be shared, embraced, and acknowledged. I feel that we can learn and grow in great depths from recovery and that such stories deserve to have a voice and be heard. Thus, I often ponder over the meaning of "recovery", or what it is like to be "recovered" from something.

Throughout the years of my practice, I have sat and witnessed individuals, families, and couples recover from some form of "hardship" in one's life whether it be a loss of a relationship or loved one, loss of a dream a physical and/or mental illness, or perhaps a life transition. Regardless of the situation, I am always

struck by one's subjective experience or subjective journey and the amazing gift that may emerge from recovery. I have learned both personally and professionally, that recovery is a learning process that fosters much insight, growth, and authenticity. As humbling as it may be, I have also learned that I as a therapist cannot fix the person in recovery or the family, but rather can empower and support that individual to find recovery from within themselves. Simply put, to be a vehicle of personal growth.

Working with individuals recovering from an eating disorder has given me deep heartfelt insight into the world of recovery. Although there might be some common themes that emerge during the recovery process, it is truly one's authentic voice that unfolds and blossoms from the depth of one's soul. In an attempt to capture the essence of the complexity of an eating disorder and the recovery process, I would like to share writings from patients who have been courageous enough to let me into their inner world. In their vulnerability and struggle is also their strength that has allowed them to break down the walls of denial and embrace their authentic voice. I would like to share with you the gift of emotional truth that has given me a deeper understanding of the all encompassing complexity of recovering from an eating disorder.



The first story I would like to share was written by a twenty-year old female recovering from Anorexia Nervosa. She wrote to me about a personal experience she had one night that took place while at church. Even in the mist of her eating disorder voice she was able to take in the gift of song. She titled her story “Amazing Grace”. And here it is....

### **Amazing Grace**

Wow. My day started off pretty bad. I woke up hating my body, nothing new. During my entire shift at work I was either worried that I was gaining weight, or the fact that my boss was going to fire me. My perfectionist voice has been really loud today. Well, my boss has not fired me yet, but I am still waiting, I know it is coming soon. It is really unfair. The ED voice was really loud today and playing mind games with me. I am losing a lot of trust in my meal plan. I could not focus on school, so I took a nap hoping that the ED voice would leave me alone. Plus, I have a cold and feel crappy. When I got to church, everything changed. I usually feel kind of suffocated and foggy in my head and usually really tired. I often feel like I am going to have a panic attack, but when the worship music started, it just brought tears to my eyes. I haven't cried in so long and it felt great. I just felt this feeling throughout my whole body, I can't describe it. It was as though I could feel the music in my body. I kind of had a panic attack, but it

was a good panic attack. I felt like I could finally just breathe. It was amazing! I felt this song, God, and the Holy Spirit working thru me, which has only happened to me a few times. I just felt so free.

I have been hearing about so many people dying on the news, and it just struck me that life can be over just like that- in the blink of an eye. It made me fear my own death, but then I wasn't afraid. I was like; if I die so will my eating disorder. I'd be free from it. I do not want to die; I want to fight for my life, which the eating disorder is slowly taking away from me. It is such a huge struggle. I want to give it up so badly, but there is a part of me that is still clinging on to it. I feel bad that I have been restricting. I know, I have no excuse. All I can say is that recovery is really really hard. Gaining weight is the most scary thing in the world...or at least one of the most scary.

I have been saying this...I think there is something deeper about this eating disorder than weight and food, and I really want to figure out what it is. I feel very conflicting emotions about recovery. I'm still so terrified, but I want to move past that fear. Even right now as I am writing this, I am obsessing about my weight in the back of my head, but I feel kind of good after tonight. I hope that feeling stays with me

tomorrow, but the eating disorder doesn't want me to recover. I am just trying to take recovery one day at a time. I don't know what tomorrow will bring. I am feeling horrible and amazing at the same time...that feels so weird. I feel like there are two of me. Sorry this is so long, but tonight was, just... wow.

A common phenomenon I often hear from clients in recovery is their inner struggle or conflict between the ED voice and the voice or part of them that desires to heal. The manifestation of an eating disorder can be quite complex. Another young woman who I had worked with for one year realized in her recovery that she used food as a child to self-soothe and cope with the trauma that took place in her home. Granted there was a family hx of alcoholism, depression, and anxiety. As a teenager she then went on numerous diets to fit in and as she could never be "good enough" or "feel thin enough" the dieting turned into restricting that then evolved into an illness called Anorexia Nervosa. By the time I saw this young woman at the age of nineteen, she had been discharged from an IOP program and was slipping back into her eating disorder, relapsing quickly. Prior to IOP treatment, she had transitioned from a residential treatment program, to PHP and then to IOP within just a few months. She often termed recovery a "full time job".

Gina's shared experience at church and writing about it proved to be a significant transition in her recovery because it was at this point that she began to not only see but feel her life force...her music from within and desire to live even in the face of fear. As our work together continued, she was able to come to terms that further treatment was necessary to heal at a deeper level. As the perpetual student that I am, Gina continues to teach me that there is "no one right way to do recovery" and that once we find our music from within we can then begin to dance in our life. Not the life that we "should be living" but rather our authentic life with our authentic voice and dance moves.

### **Honoring My Recovery Voice with You.**

I would like to share a letter that one of my patients wrote about her recovery process with Anorexia Nervosa. How this letter came to be. As a therapist I am always trying to find creative ways to connect with my patients and be a vehicle of growth. A letter I am about to share came about when I was stuck. I had been working with a 23 year old female who was very entrenched with her eating disorder and wanted nothing to do with recovery or therapy. In one of the sessions I recall thinking I better come up with

something quick. Then I thought about another patient of mine whose life story was similar to this young woman's. I asked her if she would be open to talking with someone close in age that might be able to understand her better and to my surprise said yes. The letter I am about to read is from one patient to another patient or one human being to another human being. I feel that this letter captures the subjective snapshot of one person's enduring journey of recovery.

The letter is titled "Honoring My Recovery Voice with You".

I would just like to offer some support in your recovery process and I hope you will accept it. I have been in recovery for anorexia since I was 16 years old; I am now 24 years old. My younger sister has gone through the same thing. I realize that it is very hard to accept help, and you think you can do it all on your own, but you can't. As I reflect upon my experience, I am very glad that I listened to my recovery voice, my wise voice of self-love and wisdom. My recovery has proven to be quite the journey. I was hospitalized twice during my senior year of high school and almost died, but that wasn't enough to get my attention. My denial was that strong and overtook my mind to make a rational decision. I didn't think I was that bad. I think every anorexic struggles with denial and I think every eating disorder is serious even if it doesn't require medical

attention. The consequences could be deadly. Well, I was ready to begin my senior year when I was hospitalized for severe medical reasons due to my eating disorder. It was in the hospital that I was informed, more like forced, to go into residential treatment. I did not want recovery at that time. I didn't even understand what recovery was and told all of my therapists that they were wasting their time "because I was going to go right back into my eating disorder and nobody could stop me". I was in denial for so long. But then something shifted during my recovery, something unexpected and very meaningful. The few months I spent in residential helped to clear my mind and finally something clicked deep from within---I remember thinking "it is possible to recover". When I finally discharged from residential I had missed much of my senior year that I could not graduate with my class and this was very hard for me. I had worked so hard in high school and was geared for an Ivy League college education, but all of that got taken away from me. Eating disorders only give temporary happiness and things do get taken away from you. I can say my life got a lot worse when I was in my eating disorder. Getting help early on is the best. Residential treatment gave me a grounded foundation in recovery but it did not "fix" me. It at least got the concept of recovery in my head and got me grounded.

As it turned out, once I was discharged from residential I still had a long road ahead of me in my recovery process. I had no idea what I was getting myself into. I went into inpatient and outpatient many more times before I felt like I was physically and mentally grounded and more clear. I even threw out my scale. I had a nine year relationship with this scale I thought it was my friend. Throwing out my scale was just one significant step in my recovery process. I know you probably think I am crazy, if I were reading this letter when I was struggling, I would think I was crazy too. It's really taken me a long time to come as far as I have. It really takes a lot of time, energy, commitment, and effort to heal, I am not going to lie about recovery.

I am a very compassionate person who cares deeply for others, and I really want to help you with your recovery. It is SO hard to take the first few steps, but I must say I have learned so much more about myself and life by going through treatment. Recovery requires enormous strength and courage and there were many times I wanted to quite or slip back into my old coping pattern. In fact to be honest there were times I did slip, that is part of the recovery process. It helps to be around supportive people and individual therapy alone is not enough in the beginning to help someone recover.

So, I am encouraging you to seek further help, although it may be the scariest option right now. I am not a fully recovered person right now, but I am close. I must say that I have learned so much more about myself and life by going through treatment. I'm in such a better place physically and mentally than I was years ago. It is really an amazing experience, it is hard to describe. I have made so many friends in recovery too, who are very supportive. Recovery can be applied to almost all areas of your life. It is really a once in a life time experience and I have gained much insight and knowledge that most people will never have. I know that being in your eating disorder can feel safe and even like you are in control, but you really are not. It is an illusion. Recovery takes time, but it is worth it.

I do not regret going to residential during my senior year because I know it helped me for the better and is slowly giving me back a lot of lost years of my life. Even though I don't know you, I still really care about you and don't want you to be struggling anymore. The eating disorder thoughts are horrible, I know.

Before I end this letter I want to tell you that your eating disorder has nothing to do with food or weight, although it may seem like it now. It took me so long to learn that. Eating disorders are a mental illness that are



used to cover up other issues in our lives that we do not want to face. I am sure that you are a beautiful girl, a smart girl who has so much potential. Our society puts so much pressure on us. I wish I could tell you more and if you need more support in your recovery process I would be happy to write you again. Something I have learned along the way...“It’s much better on the other side”.

As the two letters convey, there is nothing simple about recovering from an eating disorder whether it is anorexia nervosa, bulimia or even eating disorder NOS. The complexity of an eating disorder is profound and takes time to recover. To treat the complexity of an eating disorder I feel it takes a comprehensive treatment model that incorporates addressing the psychological, physical, and mental stability and growth of an individual. The complexity of an eating disorder not only effects the individual in recovery but also family, friends, and partners. I feel that recovery is about empowering your inner light, your authentic voice that is just screaming to get out and reveal itself. Recovery like life itself, is about dancing to the inner music of one’s soul and heart and realizing how blessed we are to be alive.

As I sign off, I leave you all with this poem....

**Authenticity is life**  
**it is breath**  
**it is the step beyond survival**  
**I am not a liar anymore**  
**and I stand,**  
**clear in my own image**  
**that I am life**

**\*Thank you**

## Chapter XI

I vividly remember when I first told my family that I had an eating disorder. They stared at me with tearful eyes and listened while I opened up about something I had intended to keep eternally as my own. At 18, I was no longer able to smile. I was depressed, anxious and extremely fatigued. I hated myself and I thought I was hopeless; I thought life was hopeless. My disordered eating began when I was 10 and as I grew older, my ED had also matured. Before that initial conversation, I remember being scared, ashamed and having this overwhelming sense of guilt; How could I do this to my family? How did I get to be this way? How am I going to get better? Will I *ever* get better? Do I really want to change?

I have been in recovery for 3 years now. Looking back, it seems like it was another lifetime; where I am now, versus where I was then, contrast so profoundly that I almost feel detached from that part of myself, and maybe I am to some degree. People often personify their eating disorder, and refer to it as Ed; a manifestation of all facets of one's eating disorder combined in one entity, one ruler, one being within themselves that is responsible and should be held accountable; a face to the darkness within. Ed is no longer within me, ruling my life, and ruining my dreams, but it was not easy to abandon my eating disorder, and it

certainly did not happen quickly. I feel very fortunate to have found recovery. I know that many of my brothers and sisters in recovery are still fighting, some have been successful, others have not, and some have passed on from this life. Unfortunately, we cannot always foresee who will develop an eating disorder, or what will happen once someone does. We can make predictions and educated guesses, but ultimately, there is an uncertainty, and I find that to be the scariest part of all. I was blessed to have a family who supported me wholeheartedly, and treatment teams who guided me towards self-discovery and understanding. And I have been lucky to have met some truly amazing people in the treatment centers I was in, who are now my dearest friends. I recognize that these people were my pillars of strength throughout my battle, and not everyone is as fortunate as I am to have had such love, care and support from the people around them.

At first, I had an outpatient treatment team. I had started to improve and I wanted so desperately to be with my peers enjoying college and living on my own. I began college the following semester and ended up having to withdraw after two months. I wasn't ready, my ED was getting worse and I was in a lot of pain. After returning home and enduring a plethora of tests, I came to find out that I have two chronic disorders that I will have it for the rest of my life. These new diagnosis felt cruel and unfair and I reverted back to my ED

behaviors to cope, which only exacerbated the pain. Things felt like they couldn't get much worse, but later that spring, my mother was diagnosed with Stage 2 Breast Cancer. The world seemed to shatter into smaller pieces and I was terrified she was going to die. I felt like there was nothing I could control and I had no way to express my sorrow, except through my ED. As she began chemotherapy and radiation, I continued to secretly deteriorate.

Amidst my mother's treatment, my therapist recommended a more intensive treatment for my ED. My mother lost her hair and grew weak and tired, but amazingly went into remission after less than a year of treatment. I, however, became lost a world of self-hate and despair. Soon enough I was in my first treatment facility. I had no idea what to expect from treatment and my first night I was extremely anxious and overwhelmed. Initially I was a bit resistant to treatment. It was immensely challenging to let my ED go but as the days progressed I decided to be more open to the idea of healing, and then healing began to unfold. Life started to seem livable and despite the chronic pain and my mother's health, I felt that I had the tools to handle these stressors appropriately, without reverting to my ED.

I reenrolled in college and started studying psychology and studio art. I completed two years at

a university 2 hours away from my home, returning frequently to visit my family and see my treatment team. But my final semester in my 2<sup>nd</sup> year my health started to diminish and my chronic pain became worse. I went home every weekend to get medical tests and started to lose hope that I would ever physically feel well. I decided to transfer to a college closer to my home and began my 3<sup>rd</sup> year of college at a local university. All the medical tests lead to dead ends, and I had numerous surgeries and treatments in hopes for some relief that never came. I began feeling depressed and hopeless again.

On the morning of December 26<sup>th</sup>, my mother woke up after a violent night of sickness with pain so intense that my father took her to urgent care. My father returned home to take us kids to the hospital where he told us that my mom was in the Intensive Care Unit, that her brain was bleeding and that she had Acute Myeloid Leukemia. The chemotherapy from her breast cancer treatment had a .05% chance of causing leukemia and my mother happened to be in that small percentage. The doctors told us that she might not make it. After intense intervention and a week in the ICU she was moved to the oncology ward, where she stayed for the next 8 months. My family was lost and each of us struggled to accept our new reality.

I withdrew from school so that I could spend more time with my mom. Seeing her day after day lying in a hospital bed struggling to live is something I would never wish upon anyone. It was hard to find hope. I was in constant physical and emotional turmoil and I did not know if my mother was going to live to see my brother graduate high school, or to celebrate her next birthday, or to kiss my father on their anniversary. Life was unlivable and so I dealt with it the only way I thought I knew how. I wanted to be strong for my mother and my family but I couldn't help but feel hopeless and so my eating disorder resurfaced with a vengeance. My outpatient therapist told me that I had to go back to an intensive treatment right away and I knew she was right. Soon enough I was in another treatment facility, luckily in close proximity to my mother's hospital and near to my home.

This was a new facility, and I was much more heavily involved in my ED than before. I knew I needed to be at this treatment center, but my heart was broken for my mother and my family. My boyfriend and I had recently parted ways and my friends seemed like ghosts of the past; I felt alone and scared. My first day of treatment I was able to connect with a fellow patient, who happened to be my roommate. To this day she is one of my dearest friends and I am thankful that she and I were able to cross paths; we continue to support one another in our recovery and with anything else we may be faced with. As I started to actively participate in

groups, I started to trust my team. I started to believe in them because at this point I could not trust myself. They were able to help me process my feelings, to connect with others, and to start to accept that I was in pain. Each group was different, and each brought out different emotions and feelings that I was not able to recognize on my own. I started to feel hope.

After some weeks in this program, my insurance said they would no longer cover me. I was devastated that I had to leave because I was not ready to be on my own, but we could not afford the treatment cost. I was fortunate enough to be able to return to the original treatment facility I had attended over a year ago, and started there after a week of leaving the most recent facility. Again, I was resistant to treatment; fighting this battle was exhausting. I felt like Sisyphus; no end to this eternal output of work and struggle. But then one day at morning group, we were asked, 'What good has your eating disorder done for you? How has your eating disorder truly helped you and how will it help you in the future?' and at that moment it dawned on me; it hasn't truly helped me, and it won't help me ever. It made me lose my voice; it made me lose my strength; it made my body weak and tired; it kept me from my friends and family; it stole my happiness and kept me from accepting my emotions and asking for help. The light had been turned on, and I decided to let go of



my eating disorder; I did not want or need him anymore.

Although, there was a moment of clarity and self realization, it took much more than a moment's time for me to break free. I had to nurture and protect my recovery. I continued to struggle, but I had a new found determination to move on and let go. Now, 3 years later, I no longer am victim to my eating disorder. I listen and care for myself, and yet I continue to seek out support. While I am proud of myself for deciding to find recovery, I know very well that contesting an eating disorder is best done on many fronts. Without the support of my family and my treatment teams, I would not be writing this today; I would be writing a very different story with a very grim ending. My therapist was an advocate for my recovery and helped protect me from my own self destruction, by providing me with a network of supports and positive coping skills. My family continued to love me, and nurture me through my struggle and provided me with courage and determination. I could not have done this on my own, and I am eternally grateful for those who have provided me with the tools to build my lifeboat. Working at La Ventana has made this point even more abundantly clear for me. Recovery is possible. Recovery is available. The choice is ours to make, and once we decide to make that choice, it is up to us to follow through. The path is long and there will

be road blocks but we owe it to ourselves to try, and to keep trying.

I am very lucky to be where I am today. Years ago my life seemed unbearable and I possessed no optimism about the future; I was stuck. Now, I enjoy life. I appreciate my health and my happiness, I am true to my emotions and I seek support when I need it. I work in a field where young men and women come every day to fight the same battle I had fought some years ago. Each person that comes to La Ventana is different, and each has a different story to tell about how they came to be in treatment. But I have hope and faith that everyone that comes and seeks help can rewrite their future in their own authentic voice, without an eating disorder dictating their next moves. I am proud to work in this field; it constantly reminds me that although life may be unpredictable, we can take control of ourselves. I see light every day in the faces that come in to La Ventana and I am inspired by them. We all deserve a chance to thrive.

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## Chapter XII

### *ROLE OF RD WITH EATING DISORDER PATIENTS*

Is there really a need to educate eating disordered patients about nutritional balance and healthy eating habits? Don't they know this already? Haven't they read books about dieting, and haven't they been counseled about the importance of good eating habits by physicians and therapists? Frequently, they do know. However, in my experience their nutritional knowledge is mostly related to how they can diet to lose weight in order to feel better about themselves and to give them a sense of control.

***In order to control our weight, we all need to learn to listen to our body's signals: to eat when we are hungry and stop when we are full.***

The catch is that most of us don't pay attention to our bodies. We don't sleep enough, we don't eat enough, we eat too much, we exercise too little, we exercise too much, we do not stop when our bodies tell us we have enough. When we take this to an extreme- to people suffering from anorexia ,bulimia, or a binge-eating disorder- they either deny or tune out their hunger or experience it as a

bad feeling. ***For them hunger means being out of control.***

I know this, not only as a dietician, but from personal experience. As a teenager, I was overweight, I know how it feels to be fat at 15, as well as all the little tricks kids use, such as hiding food. It was my own miserable childhood experience- until my parents took me to a nutritionist- that motivated me to enter this field.

Today as a dietician, my goal is to get my patients to be able to eat three to five times a day without worrying about their weight, to eat meals when they are hungry, stop when they are full, and to trust food.

They must learn to free themselves of food obsessions and accept themselves at normal body weights. This is not easy for my patients. Taking a risk with food means taking a risk with life

My patients are people who may otherwise wind up on the hospital emergency floor or worse. ***If***

***they are Anorexics, their goal is to be thin ,thinner ,or thinnest*** .Most of these young girls do not see themselves as starved because they do eat, and often very healthy foods such as salads. But, just as a car with the best tires and oil cannot run without gas, no amount of healthy foods can make up for inadequate calories. Anorexics are hard to spot. Electrocardiograms may not show the heart weakening that occurs, and blood tests are often normal or only mildly off. An anorexic's pulse is an easier determinant of whether or not we are working with an anorexic.

***Bulimics are the reverse side of the coin. In order to avoid the scary sensation of hunger, they eat continuously and than purge themselves when they are too full.*** They eat to fill an emptiness. But after eating to fullness, they are still left with these empty feelings= plus worry about their weight= so they purge themselves to get rid of both. While their ultimate fear is to gain weight, the ultimate consequence may be cardiac arrest.

***But aren't eating disorders-anorexia, bulimia, overweight children- always symptoms of***

***underlying emotional problems?*** That's a question I am frequently asked. Yes, they are, and these emotional problems definitely have to be acknowledged and resolved for the patient to recover. But eating behaviour does not magically change when the emotional problems are resolved. This is where the dietician plays an important role as the most qualified person to address food and weight related behavioural change and to educate.

Also patients often feel safer seeing a dietician than other medical professionals because the dietician can help them reach their goal of staying thin- but in a healthy way.

But the dietician cannot do it alone. Nor can a psychotherapist or a psychiatrist or medical doctor.

My client must first be under the supervision of a medical doctor. The physician monitors the medical problems. Next I work with a psychologist or psychiatrist who help the patient understand what needs their symptoms are serving. Then, I do the cognitive and behavioral work on the reality of eating. In a way, I very often feel like a dentist because I have to drill in the hard reality that the patients have to increase- or decrease for an obese

patient- their calorie intake. This is very painful for an anorexic or a bulimic or an obese patient. They may not like me at first as I teach them to pay attention to their own hunger cues, to eat when they are hungry, stop when they are full. However, once they realize that increasing or decreasing their food intake also increases the quality of their lives, they start trusting me. Some of them even begin to like me as they exchange bingeing, purging, starving, over-exercising, laxatives, diuretics, and diet pills for healthier behaviors.

I am in touch with the members of the team as needed.

In my office, any question the patient asks has to be answered, and every patient needs a treatment plan suited to his or her needs.

The number of sessions depend on the need of the patient and the severity of the eating disorder

The first session I take a personal, family and nutritional history. Then I discuss with the patient how we can resolve her food related problems. At this point , patients are usually interested and eager to cooperate, but as I explain that their

starvation regime has lowered their metabolism and how many calories they need to maintain their body's needs- metabolism, growth and repair body temperature, heart and lung function= they also become fearful.

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