

My Eating Disorder, My Best Friend, My Stalker, My Killer

By Shulie Klots

I can't change my life, I can't stop the pain. My life is so out of control, nothing is ever going to change. If I can't direct my life at least I can control my food. So starts my journey into the world of eating disorders.

Food is everywhere and so readily accessible. Secretly manipulating my food intake creates a sense of mastery, control and reward. I feel empowered as I influence my comfort levels and purge/starve my pain. It starts off as a diet, a path to 'beauty', 'acceptance' 'acknowledgement' and 'perfection'. Controlled eating became my new best friend, always available, my constant companion and solace. My new best friend quickly turned into a nightmarish dance between starving and eating/purging.

Caring friends or family members initially comment on the weight loss- you look fantastic, but soon my new best friend wants more of my time, not just the forages into the kitchen and bathroom, but all of me. My new best friend stalks me, following my every action and listening to every conversation. I stop talking to my other friends, it makes my new best friend jealous. I feel as though my friends and family will never understand me or love me the way my new best friend does. They will never be there for me, only my new best friend always is.

My family and friends slip into the background. They demand that I explain my actions, what's wrong with me? Am I trying to be a supermodel? Why don't I just stop this foolishness and eat? Can't they see how trapped I feel? My new best friend has completely taken over, I am her slave and blindly follow. Only my new best friend truly loves me, only with her can I find

my solace. Doctors, nurses and therapists they just don't understand. They can't see the burning pain inside, the loneliness, the frightening imperfections. Only my new best friend can truly emphasize and comprehend the isolation, torment, frustration and neglect. I screamed out for help, and no one heard me- but my new best friend. My new best friend is my protector, my redeemer, my killer.

As friends, family members, neighbors, community members, we watch helplessly as they suffer. Their anguish propels us to help, we, scream, blame and cajole our loved one to stop the cycle. Why can't you just stop this madness and just eat! We feel lost, as they are slipping away, how can we stem the tide? What are we really seeing, and how do we have the power to stop it?

Dr. Vincent J. Felitti, a leading expert on childhood trauma, authored the Adverse Childhood Experiences (ACE) Study, a long-term, in-depth, analysis of over 17,000 adults. Defying conventional theories, this study revealed the powerful relationship between our emotional experiences as children and our physical and mental health as adults. The ACE study demonstrated how humans transform childhood traumatic emotional experiences into organic disease later in life. Dr. Felittit revolutionized addictive behavior etiology as the body's self-medicating strategies.

Addressing the maladaptive behaviors or addictions, without treating the underlying trauma, only strengthens the body's self-medicating practices. Conceptually, the person is turning to the alcohol, nicotine, risky behaviors as a salve for their emotional pain and trauma. Attempting to stop the addiction either perpetuates the cycle or causes the individual to find a different solvent and/or medication. The successful model of combating addictions is a two prong approach, remedying the underlying trauma while addressing the addiction.

An eating disorder is an all-consuming and deadly addiction. The brain craves and drives the emotional mastery and reward cycle. Just as an alcoholic may feel locked into their addiction, so too does the person suffering from an eating disorder. We have to recognize an eating disorder as an addiction, a deathly coping mechanism.

We have to acknowledge that our loved one's behaviors are stemming from emotional trauma. Their pain isolates and traps them, they feel unlovable, un-wanted, and flawed. We can learn how to be there for them, how to love them and accept them for who they are. We can express and acknowledge their challenges and fears. We can learn the art of listening and just being there. We can create the circle of support they so desperately need and don't know how to create or reach out to. We can teach them how lovable and trustworthy they are, so they learn to love and trust themselves.

About Shulie:

As an educator, she noted the dramatic decline in preadolescent and teenage girls self-perception, stress management and the rise in maladaptive coping mechanisms. Seeing the need for preventive therapeutic programs, Shulie returned to graduate school and is currently pursuing a masters in psychology at Bellevue University.

References:

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