STOP THE STIGMA

Over 200 stories of lived experience

Change what you know about Eating Disorders

Developed by Christie Begnell of @meandmyed.art
I’m a 25-year-old Australian artist and founder of the social project, ‘Me and My ED’. What I’m doing with ‘Me and My ED’ is based on the notion that there is no shame in having an Eating Disorder, and that this illness occurs at every weight. The medical model too often sees people fall between the cracks because they simply don’t ‘look’ like they have an Eating Disorder (ED). When in reality, ED’s are mental illnesses and weight loss/gain is a side effect of disordered behaviours.

The reason why I started my work, and why I’m so passionate about it today, is because I’ve been one of those people who fall between the cracks. I faced immense amounts of discrimination, exclusion and downright bullying from medical and health professionals because my weight wasn’t ‘typical’ of an Eating Disorder. All this did was feed my ED and convince me that I needed to lose more weight and engage in even more dangerous behaviours so that I would finally be taken seriously. There’s something very wrong with that, yet it happens every single day, all over the world; all because Eating Disorders are so misunderstood.

In the ideal world, stigmas wouldn’t exist. People would understand that an Eating Disorder is a serious mental illness that requires both medical and psychological intervention. They would understand the risks of dieting, and that while yes, not all people who diet develop an Eating Disorder, that there ARE people in this world who will. People would not envy those with ED’s because they would know how horrific and traumatic living with one is, and they would understand that people living with ED’s often come from backgrounds of abuse, neglect or trauma. In the ideal world, people would respect that a person who sits in the obese BMI criteria is just as likely to have an Eating Disorder than a person sitting in the underweight criteria, and that the sole purpose of this illness is not to lose weight and become more attractive. This is what I hope for society, but unfortunately it is not our current reality, and the people who are paying for it, are the ones already suffering.
That’s why ‘Stop the Stigma’ came to be. I wanted to create a platform in which the power was given back to those living with Eating Disorders, and for them to tell the world just how hurt they are. I want people reading this to realise that simple phrases like “you look so well”, or “you’re just on a diet” can cause enormous amounts of distress for a person, and although there may be good intention behind it, these phrases can often lead to a person relapsing.

But ‘Stop the Stigma’ hasn’t been created to scare you. It’s aim is to educate, raise awareness and start conversation. For the everyday person with no prior experience with ED’s, ‘Stop the Stigma’ is here to show you what life can be like when living with an illness that experiences a lot of discrimination. For the therapists and carers, ‘Stop the Stigma’ is here to equip you with stories of lived experience and hopefully some tools and resources you can use when caring for your loved ones. For those who have shared their stories, or are living with an ED, ‘Stop the Stigma’ is here to show you that you are not alone. There are millions of people across the globe living with an Eating Disorder and experiencing the same amount of stigma and discrimination as you, and despite it all, they find ways to cope and power on through recovery.

As you read through this program, I hope you learn something new. Whether it be learning about a new type of Eating Disorder, or even finding out about an organisation that you can turn to for help, I can only hope that ‘Stop the Stigma’ gives you the confidence and understanding you need to either help someone or seek out the help you desperately need.

If you would like to learn more about ‘Me and My ED’, you can visit my website at meandmyed.com or you can send me an e-mail at christie@meandmyed.com

Photo taken during one of my education workshops, featuring the images of some of the participants in ‘Stop the Stigma’
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Only models get Eating Disorders. If you regain all the weight you're cured. It's just about attention seeking. They have fat.
ONLY GIRLS GET EATING DISORDERS
Cis gender males, trans men and those who are non-binary, experience Eating Disorders with just as much severity as women do.

Statistics supplied by NEDA suggest that
- As many as 10 million men will suffer from an Eating Disorder in the USA (Wade, Keski-Rahkonen, & Hudson, 2011).
- Males make up as much as 1 in 4 people living with Anorexia and Bulimia, and more than 1 in 3 people living with Binge Eating Disorder (Hudson et. al, 2007).
- Eating Disordered behaviours (including binging, purging, fasting, etc) occur in males at the same rate as females (Mond, 2014).

That’s a lot of people, yet it’s expected that those numbers are even higher, as many will never seek treatment.

Eating Disorders are largely viewed as a female issue, leaving men to either suffer in silence, or outwardly identify as having one and face possible emasculation. For those who identify as non-binary and for trans men, it can also shape the way their gender is perceived. This stigma causes isolation, feelings of shame, and treatment avoidance on top of their existent illness.

Eating Disorders may present differently in men.

A very common and often overlooked symptom is excessive exercise. As per the DSM V, one of the criteria across Anorexia, Bulimia and OSFED (Otherwise Specified Feeding or Eating Disorder) is a disturbance of the way one’s body is perceived, and an excessive valuation on weight and body size. While Eating Disorders present uniquely in each individual, men may present more frequently with behaviours such as spending excessive amounts of time in the gym or working out and use of dietary supplements. Muscle dysmorphia is a type of body dysmorphia, in which a person perceives their muscles to be too large or too small, despite their actual appearance. With 90% of teenage boys admitting to exercising with the goal of ‘bulking up’ (Eisenberg, 2012), it’s not hard to see how body dissatisfaction and body dysmorphia can be so prevalent in male populations.

Although some may present to services with a preoccupation with muscle size, that is not to say that all men will. It is important to remember that every individual with an Eating Disorder has their own, unique experience and treatment should be based off that person’s needs and wants, while taking into consideration their background and strengths.

Eating Disorders are mental illnesses and they are gender neutral.
Jakob, Unknown

I identify as a male. I’ve been struggling with my Eating Disorder since I was ten. I actually don’t know how it all started and I’m still figuring it out. But I started eating less and less, I just wanted to become a bit smaller. Since I’m a trans male, people didn’t view me as a male at this time as I wasn’t out to anyone. I started eating less and less to a point where I was fasting for several days and still training two hours per day. At some point, I came out to my best friend. She said “yeah I’d pretty much figured out that already, y’now other people already view you as a male ‘cause you pass so well?”. So I actually think that this was one of the big reasons no one noticed my Anorexia. At this time I also started getting bullied because I’m transgender. That made me hate myself even more and my ED got even worse. At one of my dance practices I passed out because I hadn’t eaten anything that day. When I finally had summer break I told my mom that I was bullied. She was super supportive and we found a new school that I started go to.

This summer, mom also found out about my self harm. That’s when I started seeing my therapist and finally got diagnosed with Anorexia and depression. But they didn’t really take my Eating Disorder seriously, so I just wanted to prove to her how ill I actually was. I’ve recently switched therapists and this one is much better. I’m still struggling with the ‘proving thing’ though.

Today I am recovering although it’s very hard I’m still trying. I’m really hoping for males to get more representation about their Eating Disorders. Eating disorders can affect ANY gender. Remove the taboo and talk about males with Eating Disorders because we exist and we are valid.

“They didn’t really take my Eating Disorder seriously, so I just wanted to prove to her how ill I actually was”
Gabriel, 15, USA
My general experience came from the lack of comprehension for my situation. My Eating Disorder and Dysphoria were so heavily intertwined that it was hard to understand for some people. Since my whole experience is quite unique, the recovery process and community really excludes me. Most motivational quotes seem to go along the lines of "accept your curves and your figure" when a curvy figure was exactly what I was getting rid of. Accepting my body isn’t a viable option since trying to do that lead to a major depressive disorder. My recovery isn’t mapped out like most people’s and it keeps me stuck in a limbo when everybody is saying to do something that just won’t work.

Ryan, 22, UK
I lived with my ED for 5 years before I received a diagnosis. I knew something was wrong from day one, but I convinced myself that I was fine. "Guys don’t get Eating Disorders" I would tell myself over and over again. This was confirmed several times when I reached out for help from doctors. When they finally told me I had Bulimia, it was like a weight lifted off my shoulders. Finally, I was being taken seriously. The only problem I face now is that support systems for men with EDs in my town are non-existent. Online communities exist, but they’re still not enough.
Anonymous, 19, Australia
I’ve had disordered eating since I was 15 and a full blown Eating Disorder and anorexia since around July last year. I am still living with it today and aiming towards recovery. Having an Eating Disorder as a trans man is an interesting and under-represented struggle. Growing up I had all of the societal pressures on me that cisgender women have to go through. Pressure to be thin, perfect and sexually appealing for men was bred into me by everyone. Since starting to openly identify as a trans man, my struggles with that haven’t magically gone away. It’s still my basic setting and I have a lot of internalised misogyny because of it (towards myself, not others). A struggle that isn’t openly talked about is that of once starting to gain weight in areas deemed “feminine” by society. That would lead to a lot of gender dysphoria and I would be thrown backwards in recovery. Obviously I’m not speaking for every trans experience with Eating Disorders, but I am speaking for myself.

Obviously there is a greater disproportion of women with Eating Disorders compared to those of other genders and that needs to be addressed and tackled. But this does not discredit the large amount of men (both trans and cis and non-binary genders) stories, struggles and recoveries.

Harry, 29, UK
I never considered I might have an Eating Disorder, because I was doing what all my friends were doing. We’d spend a couple of afternoons a week in the gym and trade information about what we should and shouldn’t be eating. Granted, I did take it to the next level, but I never thought anything bad of it. I went from a couple of afternoons, to every day for at least 3 hours lifting weights and doing cardio. Being in recovery has been hard because I’ve had to distance myself from my friends. They don’t understand that I can’t be in a gym as it triggers me, and they always comment on how I’ve lost a lot of muscle and am ‘rounding out’. Eating Disorders in men are never discussed. To everyone at the gym, and my friends, I was a hero. Working out and controlling what I ate so strictly. What they thought was strength, was just mental torture, and now that I’m having to be strong and recover, they all think I’m weak.
YOU CAN'T HAVE AN EATING DISORDER IF YOU'RE NOT UNDERWEIGHT
Only a very small percentage of people with Eating Disorders are underweight

According to the DSM-V, there are eight different Feeding and Eating Disorders. Of the eight, only Anorexia Nervosa has a weight criterion; in which a person must be underweight to meet the diagnosis. In Australia, only 3% of people diagnosed with an Eating Disorder have Anorexia Nervosa (Butterfly Foundation, 2012), with similar statistics worldwide. This means that there are a lot of people sitting within a broad range of weights and BMI’s outside the underweight criterion.

There are dangers with this stigma.

*It creates a sense of denial*
"If I don’t weigh x kg/lb, I must not be sick".
People living with Eating Disorders at higher weights that are exposed to this stigma, struggle to believe that they could possibly be unwell. They believe that in order to gain access to treatment or help, they must lose enough weight to ‘look’ like they have an Eating Disorder. This is dangerous because it prolongs the time a person may take to seek help, and it encourages the person to continue engaging in dangerous ED behaviours that put their lives at risk (i.e. severe caloric restriction through fasting and binge/purging and exercising past the point of exhaustion).

*It causes exclusion*
"You don’t look like you have an Eating Disorder, therefore I can’t help you"
This happens. A lot.
Doctors, nurses, counsellors, psychologists, dietitians… Medical and health professionals are turning away so many people with Eating Disorders because they do not present underweight. Within the medical model, this is understandable. If the Eating Disorder is not causing observable physical harm, then there is no reason for them to be hospitalised.
HOWEVER, Eating Disorders should NOT be exclusively viewed within the medical model. They are mental illnesses, and they are a complex disease that effect the person, their social network and the environments they engage with. Stating that a person does not qualify for treatment, purely based on the fact that their weight does not read a "magic number", neglects all of the other areas in that person’s life that this illness has destroyed. People deserve psychological intervention regardless of their weight.
Anonymous, 19, Belgium
Not being believed because I wasn’t underweight. Not being admitted to hospital because I was physically still doing pretty ok. Not being taken seriously by friends and family for years because I wasn’t looking ill and was good at hiding it. People don’t believe me when I say I have troubles eating because I’m at a healthy weight.

Anonymous, Spain
When I was in high school my mum went to talk to my teachers (because it was difficult for me to talk about it), to explain to them I needed to skip some lessons because I had doctor appointments (since I was in treatment from an Eating Disorder). Then she told me my teachers told her that it was ok, but that I did not look as if I had an Eating Disorder. That really hurt me and made me want to keep losing weight. Also, some relatives told me I was doing it for attention or because I was selfish.

Anonymous, 22, USA
Although I was underweight, I felt I wasn’t underweight enough. I don’t think it was ever from anyone specific but more so what common knowledge of an Eating Disorder was. I didn’t take my illness serious until I was forced into treatment. Had the stereotype of being emaciated not existed maybe I would have wanted to try and escape from my Eating Disorder, because I wouldn’t have felt like I didn’t deserve the help.

Maya, 16, Sweden
My mom used to tell me every single morning how fat my belly was and how no one was ever going to love me. I know she thought that I was too fat to have an Eating Disorder, so I thought I would prove it to her if I became thinner.

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Joh, 28, Australia
Never believed, not understood... it tears you apart. Finally getting the balls to speak up only to get brought down by either not being taken seriously because you not a stick figure, or basically being not believed because you 'just want attention'.

Clara, 16, Austria
I assume that I have had an ED for almost all my teenage life, but no one ever suspected anything because I was at a normal weight. It was only when I was underweight a year ago people thought: 'Oh, there might be something wrong'. My mom for example, would never take anything I told her seriously. I asked for help, but she wouldn't listen, because 'EDs are only for people that are underweight'.

Crystal, 14, UK
Because I wasn't stick thin, my Eating Disorder wasn't and still hasn't been realized. No-one suspected me to struggle from an Eating Disorder because I was/am a 'healthy' (and slightly over at times from binging) weight. Not even my therapist or psychiatrist thought to ask and still haven't, going as far to comment to my face that if I don't sort my depression out it 'may cause an Eating Disorder'.

Olivia, 16, USA
I thought because I wasn't severely underweight, I didn't need help. I did not think I was *sick enough* to need help. I kept pushing myself to eat less and less because I didn't realize how unhealthy it was. I thought just because I didn't meet the criteria to be considered Anorexic, I didn't have an Eating Disorder. Eventually, I was encouraged to tell someone about the trouble I was having with food. They immediately denied that I could have an Eating Disorder because I looked fine and they would see me eat.
Anonymous, 21, Germany

I am not and never have been underweight so I don’t look like I have an Eating Disorder. So usually people tend to compliment me for losing so much weight and that I look much happier. If I would let it slip that my eating habit got out of control they would either not believe me or shrug and not see it as problematic because physically I’m healthy. Also, because of that I do (still) can’t really wrap my head around me having an Eating Disorder. After all, everyone is into diets right?! And all women worry about their bodies.

Anonymous, 22, USA

I was typically always on the heavier side as a teen and even now. I was bullied by both my friends and the women in my family. I was not what was considered beautiful. I was tall, overweight, but muscular. No matter how restrictive I was or how much I exercised I was always heavier than my peers. I restricted what I ate. I would vomit after eating as often as I could. I tried to talk to my mom about it, she’s a nurse. And the response was that I was acting this way because I was too lazy to lose the weight and wanted attention and that I was overweight so I clearly didn’t have an Eating Disorder. My mother decided that the answer to this was that I needed a personal trainer at 15 because no one would love me if I was overweight.

Kendall, 26, Australia

It was far easier for my family to attribute an Eating Disorder diagnosis to my body of bones than to the one that seemed to eat non-stop. It makes more sense to them for Eating Disorder to equal thin and starving, and in a way, that’s what I taught them. The shift was confusing. Treatment team wise, it’s sometimes hard to convey how much you’re struggling when you’re not ridiculously underweight. When even seemingly dramatic drops in weight still have you steady in a healthy BMI. I’ve found a lot more shame in trying to seek help at higher weights, as if I’m sure the doctor won’t believe I could even have a problem. It often leads into a certainty that I’m unworthy of treatment altogether.

Katharine, 22, UK

Despite having a very unhealthy relationship with food from my young teens and often binging/purging in cycles and then that worsening at university and having prolonged periods of starvation, I was never ‘extremely’ underweight (which I saw as a personal failure). I got thin, but never ‘worrisingly’ thin. The level of thin I got just got me lots of compliments and so encouraged me to starve myself more. Getting medical help for an ‘Eating Disorder’ was next to impossible as every doctor brushed it off as just ‘a symptom of depression’. It was hard never feeling that my struggle was validated.
Abigail, Canada
I’ve been told by multiple people that I do not “look like that kind of girl”, and that I “looked healthier back then (referring to the 4 years I suffered most with my Eating Disorder)”. This has affected me most, due to the fact that I’ve regained weight. People have even gone as far as to tell me I didn’t have an Eating Disorder simply because I ate enough in front of them. I would be encouraged to continue working out, which I did for at least 2 hours every day. Even after coming out with my ED, people didn’t think the two went hand in hand.

Stacey, 19, UK
I have had friends and family mention in comments when they see me struggle with a meal or if we mention the topic that now I’ve put on weight, I should just ‘ignore the voices and tell them to go away’, when it’s so much harder that they can ever imagine. Yes, in their eyes I’m a healthy girl again but just because I look healthier doesn’t mean I don’t analyse every bite I’m taking or feel stupid amounts of guilt after I eat. Physically I’m alive, but mentally I’m far from it.

I have never been to the brink of hospitalisation because my weight was not to that point, but it was low enough for my family and friends to not even want to hug me because they could only feel my shoulder blades or my spine, or look at me and only see a sunken in face. Enough to have family members crying because they’re worried I may one day end up 6 feet under because I keep doing this. I may not have been emaciated but that doesn’t meant I didn’t or still don’t struggle with food now. It doesn’t mean that I don’t need help, it doesn’t mean I don’t have an Eating Disorder. It means that not all illnesses are always visible. It means I’m in a psychological battle with myself and Ana, whom I feel like I don’t even have control over, let alone those around me. Because of that stereotype, why I began to get too skinny I didn’t realise it, because I always thought I’m not skinny enough to have an Eating Disorder, which even to this day I still believe.

Paige, 20, USA
I didn’t think that being 15-17 and weighing 65-70 pounds was that bad because it wasn’t hurting me in horrible ways. Everyone would always say that ED’s were only real if you were so small that it was killing you. So I never viewed mine as anything horrible.
ANOREXIA AND BULIMIA ARE THE ONLY EATING DISORDERS
According to the DSM-V, there are **EIGHT**
Feeding and Eating Disorders

Anorexia Nervosa and Bulimia Nervosa only make up two of eight diagnosable Feeding and Eating Disorders. The other six can be summarised as the following:

**Pica**
Eating of non-nutritive substances such as dirt, metal, ice, hair and chalk. It is present for at least 1 month, is not associated with expected developmental or cultural practices, and may not necessarily be linked to other mental disorders such as ‘Autism Spectrum Disorder’, ‘Schizophrenia’, or medical conditions such as pregnancy.

**Rumination Disorder**
Repeated regurgitation of food that may be re-chewed, re-swallowed or spat out. This behaviour is present for at least 1 month and is not linked to medical conditions such as ‘GERD’ or ‘Pyloric Stenosis’, or mental disorders such as ‘Anorexia Nervosa’, ‘Bulimia Nervosa’, ‘Binge-Eating Disorder’, or ‘Autism Spectrum Disorder’.

**Avoidant/Restrictive Food Intake Disorder**
The presence of restriction of food intake that causes significant weight loss, malnutrition, dependence on nutritional supplements or marked psychosocial dysfunction. It is not associated with a disturbance in body weight or body shape, and does not occur due to cultural practices, medical or mental disorders.

**Binge-Eating Disorder**
Recurrent episodes of Binge Eating (eating a ‘larger than normal’ amount of food in a short period of time) with the presence of feelings of ‘lack of control’. Episodes are associated with eating rapidly, eating until feeling uncomfortably full, eating large amounts of food despite not feeling hungry, eating alone due to feelings of embarrassment and shame, and feelings of disgust after the episode. Episodes occur at least once a week for 3 months, and do not occur in the presence of Anorexia or Bulimia Nervosa.

**Other Specified Feeding or Eating Disorder (OSFED)**
The presence of symptoms of Feeding and Eating Disorders, without meeting the full criteria for one. It can be further categorised into the following:
- **Atypical Anorexia**: All criteria for Anorexia met except for significant weight loss/being underweight.
- **Bulimia Nervosa (of low frequency/limited duration)**
- **Binge Eating Disorder (of low frequency/limited duration)**
- **Purging Disorder**: Recurrent purging in attempt to control body weight, in the absence of binge eating.
- **Night eating syndrome**: Eating after awakening from sleep or eating a large amount of food after the evening meal. It causes significant distress and does not occur in the presence of Binge Eating Disorder.

**Unspecified Feeding or Eating Disorder**
Diagnosis of this disorder is usually made by a doctor who does not have sufficient information from the person regarding their symptoms. It indicates that a person is experiencing clinically significant distress and dysfunction due to their symptoms, however has not been allocated a diagnosis within the Feeding and Eating Disorder family.
Other Eating Disorders that have not yet been classified in the DSM-V exist, and they are just as dangerous.

**Orthorexia Nervosa**
Orthorexia Nervosa is not currently recognised by the Diagnostic and Statistical Manual (DSM) for Mental Disorders as an Eating Disorder, however as research is evolving and more and more people are presenting with this specific set of symptoms, it is becoming accepted as a serious illness. It is characterized by;

- An unhealthy fixation on righteous eating. This includes ‘clean eating’ and ‘raw diets’.
- A ‘health obsession’, in which a person may be excessively worried about being healthy and ‘pure’.
- Exclusion of several food groups including sugar, carbs, gluten, fats, salt, dairy, and processed foods
- In some cases, an addiction to exercise is also reported. A person feels the strong compulsion to exercise regardless of how exhausted they feel, and may exercise upwards of 2 hours a day. The severity of the exercise addiction is observed when a person becomes unable to exercise and experiences feelings of guilt and high levels of anxiety.

**Diabulimia**
Although not specified in the DSM-V, Diabulimia is a serious Eating Disorder with severe medical complications. It is a form of Bulimia seen in people with type 1 diabetes, Diabulimia is the restriction of medicated insulin in order to lose weight. As insulin is thought of as a ‘fat storage hormone’, people who miss doses of their insulin can theoretically lose weight. As you may imagine, there are significant complications that arise from this, as the body is put into a state of hyperglycaemia.

It is estimated that almost 1/3 of young women with type 1 diabetes will demonstrate behaviours of Diabulimia at some stage through their lives. That’s too many.
Jessica, 16, Wales

I have an ED where rather than trying to lose weight I try to put weight on, and this ED is very over looked in society. My friends and family always told it would be a passing phase but it never was, and I would continue to force feed myself each day eating double my body weight. I’m a really small girl, and it wasn’t healthy but I continued to do it until I had the “figure” that every teenage girl desired; you know, to look like Kim Kardashian! I was determined to eat and eat until I gained weight I didn’t even need and my friends and family thought nothing of it because I was not Anorexic! They had no concern, so I had no one to help me out of it- it got to a point where I would be pushing food down my throat because my body was intolerant and wouldn’t take it. I would do this at school as well and I wonder why my friends didn’t notice. Eventually I had a check up with the doctor and I let out what was going on in my head all my thoughts and feelings- he told it “to get over it” “it’s just a phase” and that “it wasn’t a real ED”. It was the worst moment. I had got my self fully prepared to tell him everything and he like everyone else told me it wasn’t real.

Samantha Ann, 23, USA

I had a terrible pregnancy with a complication called Hyperemesis Gravidarum that forced me to deal with severe nausea and vomiting my entire pregnancy, so I developed an unhealthy relationship with food. I saw everything in terms of how good or bad it would be to throw up and I hated - yes literally hated - eating. Even after the HG subsided, I was scared to eat much so I stuck to a very restrictive diet. Since I wasn’t starvning myself or purging, I was told that this was just a phase and I would snap out of it. It was fine for me to spend 2 weeks eating nothing but ice chips and bananas because “at least I was able to eat” again. While battling this, I had several people pointing a finger at me trying to call me out for having bulimia or being “pregorexic”. They claimed that I was acting so sick for attention and this was just my response to having an unplanned pregnancy. Because of the harsh criticism I received in my pregnancy, it made it even harder for me to seek treatment when I realized I was suffering from EDNOS or speak up about my experience. These people who were supposed to be friends or family had created such a blanket of shame and pain over my life.”
Amber Pearce, 16, UK
Last year I was victim to a range of jokes about my weight, being called a Skeleton, a pencil, and the one that hurt most, ugly. As being described as a pencil was not what my friends told me boys wanted. So I started to force feed myself. I would eat extra dinner and lunch- when my mum was asleep, I crept downstairs and ate anything I could see, past the point of being full and most of the time to the extent of being sick. Every night I would do this. I told myself that I was ugly and I started to believe it.
I was becoming more and more ill as I would be eating almost double my body weight on the daily. But I was convinced it was healthy and that I could stop whenever I wanted to. I dropped my place from the netball team and binged in my spare time-thinking back on it now cutting out all exercise wasn’t the best thing to do-but at the time it would stop all the horrible comments and make me "happy". This went on for almost a year and with my friends still convinced I would stop anytime soon, I had no support at school - as they kept telling me it wasn’t serious or real; it was all in my head.

"...they kept telling me it wasn’t serious or real; it was all in my head".

Anonymous, 17, Canada
I went to the emergency room because I thought I had appendicitis.
The nurse asked me if I had any pre-existing conditions that could be related and my mom mentioned my ED. The nurse said "oh so do you starve or throw up?" And when I explained that I had OSFED, she said "so...do you eat regular meals?" I said yes and she said "ok so you don’t have an Eating Disorder"
Liz, 17, USA
I did struggle with Anorexia and while I thought I was in recovery I developed Orthorexia, which is a disorder involving an unhealthy obsession with health and fitness. I’ve forced myself to cut out so many food groups like dairy, carbs, and sugar. I basically live off fruit, vegetables, and very lean meat. I can’t go a day without going to the gym for at least 2 hours or until I’m so tired I literally have to drag myself out on my hands and knees. I can’t sleep at night until I have planned out all my meals and exercises for the next day and I no longer eat out or let others cook for me. But every time I try and get help they tell me I’m “fine.”

Anja, 26, UK
My Eating Disorder had a lot of links with my difficulties managing and coping with having Type 1 diabetes, and the bullying that came with the weight gain when I started insulin treatment and hit puberty. I just happened to be carrying one or two pounds of ‘puppy fat’, but once I made the link with insulin and weight gain, I started manipulating my doses dangerously and restricting my food. Though I’m fully recovered from the insulin manipulating side of my Eating Disorder (unofficial term ‘diabulimia’), Anorexia is harder to get over. Diabulimia was so little-known, and so dangerous, that I was only once questioned about it by a diabetes doctor when my blood results came back revealing my terrible blood glucose control and rapid weight loss, but his opening question was: ‘You’re not one of these girls who does stupid things like skip insulin to lose weight are you?’
At that point I already felt pre-judged, and as a result never opened up to a medical professional about it. These days, my blood glucose control is excellent and I’m trying to use my experience publicly in national newspapers and my own writing to raise awareness to both sufferers and medical professionals.

Maya, 16, Sweden
When I told people I needed help with my Eating Disorder, no one believed me because I wasn’t throwing up after eating. I had Orthorexia. No one thought about the pain and the voices inside my head saying everything is not “healthy”. That’s why it took me a long time to realize that working out for 6 hours and just drinking water is not normal.
EATING DISORDERS ARE A CRY FOR ATTENTION
Many people with Eating Disorders are actually ashamed of their illness and subsequently choose to hide their behaviours in fear of being caught out.

Living with an illness as stigmatized as an Eating Disorder, it’s not hard to understand why someone might choose to live with one in silence. Stigmas come from places of misunderstanding and misinterpretation.

One may interpret behaviours such as refusing family meals or intentional weight loss as a cry for attention. This is understandable, as reoccurrence of these behaviours causes extra attention and concern to be given to the unwell person. Although it is dangerous to interpret these behaviours as simple ‘cries for attention’, as there are likely multiple reasons why somebody has developed an Eating Disorder in the first place, and doing so neglects the real, underlying causes.

The negative perception of attention seeking in our society is another problem. Humans require love, validation and acceptance by others. For the case of a lot of people with Eating Disorders, these needs are not being met. They might find that losing weight causes extra attention to be given to them, and if they have been starved of this for a long time, the Eating Disorder begins to serve a purpose.

It’s important that we recognise that a person needs love, and that their Eating Disorder might be helping them achieve that. That is not a bad thing, nor does it say anything bad about their character. It simply means that that person for some reason has been deprived of a simple human need, and they require extra care and support. It’s also important that we don’t assume what purpose an Eating Disorder plays for a person. Allocating ‘attention seeking’ to a person is likely to cause them to feel ashamed of their illness and isolate even further. We want to allow for open and honest discussions around our disorders, and shaming a person for having one does not allow for that to happen.
Olivia, 15, USA
The first time I was in treatment, I was thirteen years old. For two months, I was away from home for the first time ever. The loss of my family took a huge mental and physical toll on me, and the physical pain I experienced from anxiety was passed off as “exaggeration, attention-seeking, behavior.” I became reluctant to share medical issues I dealt with for fear of being spoken of again, and even yelled at by nursing staff.

Anonymous, 17, USA
Whenever I wouldn’t eat and just drink water people would tell me that I’m asking for help when in reality I didn’t eat because I didn’t like myself.

Billie, 21, New Zealand
When I made what I thought was the right decision to start telling people, I was suddenly treated as an attention seeking little girl. My community mental health team didn’t take me seriously and assumed it was a way for me to get more attention.
I overheard someone say ‘she’s just doing it for a bit of attention, she will get over it and start eating eventually’. Some people even took it to the point where they thought I was lying about not managing to eat. All this time I was becoming more and more unwell mentally and physically.

Crystal, 14, UK
People were bullying me because my mental health issues were seen as ‘fake,’ ‘exaggerated,’ or ‘attention seeking’ simply because I would be smiley around people, even though I felt like I was dying inside.

Vivian, 30, Guatemala
Many times I have felt ashamed of my ED. I did not know how to act in front of people. I grew apart from people and I used to think that nobody would understand me and stay with me, even though they wanted to help me. Now I am fighting my ED and I don’t feel ashamed anymore.
Linda, 18, Italy
I’m not looking for pity or attention or anything else. I want to disappear, which is the opposite, isn’t it? We’re not selfish, not at all. We don’t want to be watched by everyone. I also don’t say I’m fat to get compliments; I feel fat. Fat is not a size, it’s a feeling. I’m unwell and I probably can’t see the reality.

Izzi, 15, USA
I’ve been told that the only reason I was restricting was for attention, to have other people notice, that I didn’t look anorexic. My family believes I restrict only because of anxiety triggered by other things, and that I don’t have an Eating Disorder. My Eating Disorder is not taken seriously because I just don’t experience or show the ‘normal’ symptoms.

Meleke, 17, Germany
Before I told people about my ED, I feared that they would think that I was doing this for attention. My best friend still doesn’t understand that this is an addiction.

Rae, 22, USA
I’ve experienced multiple instances of discrimination, though the one below was the most harmful to me. When my Eating Disorder was at it’s worst I was signed with a modeling agency and taking multiple jobs for print and runway. When I started to become more vocal about my struggles after my modeling career ended, I had a lot of individuals kind of say something along the lines of “oh you were a model? Well of course you had an Eating Disorder then” which was horribly invalidating for my experiences. These comments to me almost made it seem like I was asking for an Eating Disorder by choosing to model, almost like victim blaming for having an Eating Disorder. Another instance, I was speaking openly about my struggles and in a fairly vulnerable state. An individual fairly close to me, outright to my face told me I only participated in those behaviors because I’m a needy girl, I just wanted attention, and that really it was all an act.

Erin, 24, Australia
Throughout my entire illness, hearing this from someone so close to me is the most painful. To me, having the ‘perfect body’ was something that I did for me, and not anybody else. That’s what the illness is. It’s personal. That’s why I find it so hard to openly talk about it with anyone, even with family and my partner. I believe this stereotype has seriously stopped me from trying to communicate my inner distorted thoughts in fear that people won’t take me seriously. This is the first time I have ever opened up about it.
Lian, 22, Germany
My mother used to tell me that I do this just for attention which was really cruel but still, she never took me serious or helped me to get professional help. So although I haven’t had contact with her at all now for several months, I still fear my doctor, and the therapists I saw for a trial session could think like this, too. That I only want attention (actually I only wanted for my mother to leave me alone) or that I am not sick because my weight is more than healthy.

Elaina, 15, USA
I always felt really invalidated by my parents, especially my dad. I would go through restricting periods and then binging and purging periods. During my binging periods he would always say that I wasn’t actually sick. Even when I ended up in the hospital, he still said that I was not sick and I was doing everything for attention.

Anonymous, 20, Spain
At first, my dad thought that it was a cry for attention, and that hurt me, but then I saw that it was unconsciously because he did not want to see the reality of my illness.

Ruth, 21, Mexico
I have never talked to anyone about my illness. I’m just too afraid of being judged, because at first look I don’t really look like I have an Eating Disorder. It seems like no one would understand and they will laugh. I’m overweight and people can’t understand the idea of a fat girl with an ED. The one time I tried to tell a Psychologist about it, she didn’t believe me.

Faith, 16, Belgium
I really feel like they won’t take me serious anymore, and the voice in my head just says me that they don’t care. That it’s okay to lose weight, that I don’t matter and maybe I will if I’d weigh less. It’s not really a discrimination that is directly from my ED, but I’m depressed and I have a bad situation at my home. So they basically say that it’s normal to have an Eating Disorder then, but I think that’s pure bullshit. Someone with a ‘perfect’ home can have an Eating Disorder as well. You don’t always need a reason to have one.
Anonymous, USA
No one took me seriously and just thought I was sensitive and just wanted everyone’s attention. I felt like I got bullied into believing that I was stupid and not worthwhile. It really took a toll on me. I felt like I didn’t know who my friends were anymore, and on top of that I was thinking about switching schools.

*I just felt so misunderstood and not heard.*

Rachel, 21, USA
My mom and other girls constantly say

"He should like you for who you are",
"You are beautiful no matter what he thinks",
"boys want something to grab onto, not a twig"

Why on earth is my worth now dependent on both my weight and what boys think of me?! This is insanely present in the media as well. Songs about girls or written by girls tend to follow the theme of boys thinking you are sexy because x,y,z or girl empowerment songs about being beautiful and better than whatever that boy thought of you. Until we change this, I don’t think this stereotype will die. We need to start telling girls (and boys!) how brave, determined, or compassionate they are rather than how good looking they are.
ONCE YOU'VE REGAINED THE WEIGHT, YOU'RE CURED
If the answer was this simple, there would be a lot of people out of jobs.

In the case of Eating Disorders, any weight gained or restored is terrifying and is likely to cause the person higher levels of distress than when they were ‘smaller’.

Why?

Well a key feature of Eating Disorders is ‘a marked disturbance in body weight or shape’ with an overvaluation of body size. In the case of many with Eating Disorders, their comfort and safety lie within a smaller number on the scale. While that may seem trivial to those on the outside, it makes perfect sense to an Eating Disorder. Whatever the function of that ED may be, a smaller body can bring about feelings of success, control, power and pride. When that body returns to its ‘pre-ED’ size, or slightly below/above, those feelings are replaced with shame, disgust, anxiety and feeling out of control.

While weight restoration is an important and non-negotiable part of recovery, it is not the cure. A good recovery should be comprised of:

- **Medical intervention** (fixing the effects of malnutrition or prescription of psychiatric medication)
- **Psychological intervention** (individual and group therapy/support)
- **Dietary intervention** (use of a tailored meal plan to the individual as written by qualified dietitian, supervised meals and support in eating fear foods)
- **Social intervention** (support with studying or employment, assistance in accessing payments to aid in treatment, socialisation and engagement in meaningful activities)

Weights should be monitored by a treating psychiatrist, and extra support should be given to each person throughout the weight restoration process. There is no such thing as an easy fix to Eating Disorders, as each illness is unique to the person with one.
Milla Paloma, 19, UK
When I regained the weight through treatment and came back to school, it was as if everyone expected me to be back to normal again. No one understood how hard having a normal meal still was, how hard it was to have my snacks, that it took so much effort and motivation on my part to keep doing what I needed to do when no one was there forcing me and watching me. I remember feeling like no one even cared. People couldn’t see that being at a normal weight really doesn’t make a difference to how much you’re struggling, all it means is that your anorexic head is left with a body that it absolutely despises.

Rachel, 21, USA
This stereotype had me believing that if I gained the weight back, I’d be ok. Flash forward to X lbs of weight gain and no improvement in my mental health. I was beyond frustrated... Why wasn’t I better?! I gained all this weight and I still had terrible negative self talk.

My family figured I was good. My friends thought I was good too. I constantly got (and still get) comments such as, "you look so healthy", "you look so much better", "I'm glad you got over that". All I heard was trigger after trigger.

Amanda, 30, Australia
I had given birth to my daughter about 5 months prior and was of normal weight, but experiencing body dysmorphia and psychosis. When I told the psych in the ER that I had been diagnosed with Anorexia, they looked me up and down and exclaimed that they were surprised I was ever diagnosed and that I must be well now.
Anonymous, Austria

I regained my weight and I’m now a normal weight. My thoughts are just as loud as before, but now nobody can see my ED anymore. People I love tell me hurtful things like “You are so ungrateful...”, “I thought you were over it, don’t be such a dumb and selfish person” etc. They sometimes become really personal and all of their statements bring me down and lower my self esteem. They don’t take my ED seriously and say I’m spoiled, that there are more people who have much bigger problems than me, and that I shouldn’t overvalue my “vanity”. They’re of the opinion that it’s “all my imagination”, but do people also tell their small children that there is no monster under their bed? Of course there is no monster, but everybody has little fears, like spiders or darkness. They should try to tell themselves that it’s just their imagination, and they will see that this isn’t helping in any way.

Lisa, 19, Belgium

One year ago, I started to vomit blood & sol decided to stop purging. The thing is, It’s easier to say than do. The first week that followed my decision to recover, I gained X kilos. I felt happy because I hadn’t purged for a while. Then, I saw myself in the mirror. I saw my recovery on my belly, my thighs, my arms. I felt miserable. I then started to purge again because It was (for me) the only way I could lose weight. Every single time I’m trying to recover, I have bad days and I purge. So, no! Gaining weight isn’t the sign that you’re cured...At all!

Becca, 23, USA

No matter what weight I have been at from my lowest to my highest, I realize now that I am not happy with who I am, which I realize now is an internal struggle that I need to work on and that it goes even deeper than my physical looks and what others think of me.
Anonymous, USA
Once I regained all the weight needed to be "healthy", that is when I started struggling the most. When I had weight to gain, I was able to justify eating and recovering. Once I reached a healthy weight, however, I felt that it was no longer acceptable to struggle, though I was. When I had been in treatment, the focus had been gaining and once I reached that weight I did not know what to do. I was never told what to do once I had a healthy body but still had a sick mind. I thought that just because I appeared healthy, I should be cured, yet I wasn’t.

Kelly, 32, Canada
Everyone assumes that if you really wanted to get better, you could do so easily. Since recovering, I’ve had lots of rude comments, mostly from medical professionals: either not believing I’ve recovered, or saying things like, "well clearly you’re not anorexic anymore!"

Ana, 25, Brazil
I’ve been getting treatment for Bulimia for two years now, and since I’ve regained weight, my family think that I’m cured, and have stopped following the recommendations my nutritionist and psychiatrist gave them. They [family] ask our housekeeper to make desserts, invite me to eat pizza, and buy me candies. When I tell them that I can’t have it near me because it would be a trigger, they think that I’m trying to be on a diet again and that’s why I don’t want to eat all that stuff, but that’s not it. I don’t want to eat it because if I do, I’ll fall into ‘all or nothing’ thinking and will start to eat everything. I have to keep reminding them that just because I’ve regained weight and the situation is more under control now, it doesn’t mean that I’m cured, and that they can forget about helping me. I’m not on a diet, I’m not victimizing myself, I’m just not cured yet

Nadine, 18, Holland
When I told my classmates that had to go inpatient, someone in my class said: “Huh, Eating Disorder? But you look totally healthy?”, and that hurt me. When I was gaining weight with my last treatment, I felt so horrible, so depressed, but everyone was like: “But you look so much better, you’re doing so well now!” & “Oh, but I thought you were better now"
Weight gain is NOT the cure for an Eating Disorder.

Caroline, 17, USA
My mom definitely thought I was cured once my weight was better. Little did she know I was purging and actually really needed help. My therapist was not suspecting anything (most likely because I was a healthy weight). Eventually I told her, but by that time I was already so far into the cycle of behaviors that it was really hard to get out of it. I’ve had people who were close friends to me at one point tell me things like "you’re not anorexic anymore," which is obviously not true. I still have anorexia, even though I’ve gained weight back.
YOU CAN
CHOOSE TO EAT
NORMALLY
AGAIN.
EATING
DISORDERS
ARE A CHOICE,
AND YOU
CAN JUST SNAP
OUT OF THEM
There is extensive scientific research that disproves this stigma. Eating Disorders are not a choice. They are a serious, life threatening, mental illness.

So often with ED’s we hear “oh they just want to be thin”, “they need to get over themselves and snap out of it”. What’s dangerous about that style of thinking is that it is victim blaming, and assumes that somebody can just switch off an illness. I know a lot of people who’d love to just “snap out” of diabetes, but how simple do you think that is?

Evidence shows that 50-80% of people with disordered eating have a genetic predisposition, and the offspring of someone with an Eating Disorder are 6-10 times more likely to engage in disordered eating. Although scientists have not yet been able to identify a specific gene for Eating Disorders, some suggest that maybe the link lies within three personality traits; perfectionism, emotional dysregulation/impulsivity and neuroticism.

If our diagnosis of an Eating Disorder is the equivalent to being shot with a gun,

| Trauma, abuse, neglect, bullying, unstable upbringing, thin diet, isolation |

Genetics load the gun and the environment pulls the trigger

@meandmyED.art

There is a strong genetic link to Eating Disorders, but an equally strong link to the environment. An episode or multiple episodes of overwhelming amounts of distress can be enough to trigger a mental illness. This might include break ups, family conflict, deaths, loss, exposure to a traumatic event, or bullying. That’s not to say that difficult times will always lead to the development of a mental illness, but some people may be genetically susceptible to a particular mental illness or be exposed to a lot of trauma at a young age, so that their coping skills and sense of self do not develop appropriately.
**Stacey, 19, UK**

For you, its only food, for me its a nightmare of thoughts about more calories going into my body, my weight, how much weight will i put on, and yes, I myself get to the point of thinking 'why can't I do just the simple thing and just eat it.. its food'.. the struggle between knowing its food but at the same time knowing it will put weight on myself is terrifying.

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**Rae, 22, USA**

I felt a lot of discrimination about this when talking about my eating disorder with my last partner. He would often invalidate my eating disorder saying things similar to "just get over it" "I thought you were cured so why can't you handle me talking about counting calories?" "restricting food intake is just a diet choice" Although it is a little bit different than this myth I think it goes along the same lines, having this idea that I wasn't over my eating disorder' because I was still weary of calorie counting, weighing myself, any kind of comments about my weight in general, etc. Basically deducing my eating disorder into a isolated incident rather than a lifelong identity and struggle. Almost like he thought I could have just snapped out of the 'eating disorder mindset' and then be back to 'normal'. I have realized after many years that struggling with these issues does not just end after treatment, it is something that I will fight against my whole life and although it does get easier, there are some things that I may never be able to engage in because they are triggers for me! My partner at the time definitely did not share this view and had an expectation that I was 'cured'.

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**Eliza, 15, USA**

People always just say "why can’t you eat normally" or "Why are you so healthy" and get offended when I can't eat a cake that someone has baked.

You can't just choose to eat normally after going through help, you can't just turn off your brain.

This is something I always struggled with. I never thought I was "sick enough" to be treated and it caused a relapse which set me back and stole part of my life.

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**Billie, 21, NZ**

If people had not been so ignorant to think this was a cry for attention, I may have avoided being held down in hospital beds whilst tubes were forced into my nose. I may have avoided the embarrassment and shame of being watched in the shower and while I used the toilet. I may have not lost months of my life to a treatment facility only to still be consumed by my eating disorder. I could have been living a normal life of a 21 year old by now. I could be in love or studying or traveling the world, but because I wasn't taken seriously at the start of all this it has become so deeply embedded that I know even if I recover, my life will never be the same.
Mar Acien, 18, Spain
Many people don't understand why I don't eat or why I can't, but don't judge me by my illness. Sometimes they make me think that I'm bad or something like that, because for them it's unthinkable. When I knew I was sick, I tried to control my mind and heal me, but I couldn't. It was like being powerless. I felt like I had no control of my life, the illness had the control.

Krista, 25, USA
Last year I finally started to come to grips that I really did have an issue and thought bringing it up with my step-mother might help or make me feel better. One day we were on the subject for some reason and I just said it... "I used to do that a lot in high school." to gauge her response. She replied with "Good thing you don't anymore, can you imagine how much food I cooked that you wasted?", and I have never brought it up again.

How can people talk about Bulimia like it's fun or cool or any easy way to watch your calories. One of my close friends jokes all the time "Oh I'll just throw up" if she eats too much. Because she has no clue what it's like not being able to think about anything else. To feel like you're going to go crazy unless you do it. Or having your teeth start decaying because of it and not caring at all. It's completely suffocating and she will just laugh like she just said the funniest thing.

Anonymous, Australia
EDs aren’t something we can switch off. Not even for one meal can we pretend we are okay because later that day all the guilt and feelings will come rushing back. EDs aren't a joke or a way to get attention, they are a mental illness which take often years to recover from.
Holly, 22, Australia

When it first came up, and the school and my parents found out, it was pretty much brushed under the rug because I wasn’t underweight. Thus it’s been almost 7 years and I’m still not recovered. I was told countless times to suck it up and just eat from my family. They didn’t seem to get the paralysing fear that it entailed. As an extension of this I was told that ‘I’m too smart for Anorexia, I know the health risks involved and should just stop’.

Natalia, 17 UK

I have been struggling with food relationships all my life, being told that until I’m thin, bony and severely underweight, I’m not needing help, that there isn’t an issue... Even from people that were super close to me, hearing a best friend say to you "it’s just a phase, you’ll get over it... I used to be like that" even though I hadn’t eaten in days, is so painful and crushing. As a result, I am, until this day, still in denial that I am unwell. I believe that this is normal, despite almost being hospitalised, having blood work done every 2 weeks and being home rather than getting an education like any other 17 year old for the past 5 months. I still believe I’m ok.

Sophie, 24, Australia

‘Sophie, you’re way too smart to have an Eating Disorder.’

These were the words of my best friend, the only person who confronted me directly about what I was doing to myself. She was right; I was too smart to get an eating disorder. I knew that model-thinness was a photoshopped fantasy, I was aware of the dangers of consistently vomiting and restricting food. As far as the models went, they never really concerned me. I didn’t feel pressured by media, social or otherwise. But if I felt full, I’d rather throw up and suffer the burning in my throat, knowing it would be bad in the long run. And after I’d started obsessively counting calories, depriving my brain of the sustenance it needed for clear, rational thought, I completely lost sight of what was good or bad for me. Everyone can see the outside effects – ribs and hip-bones sticking out, the clothes hanging off you. It’s scary.

so I understand those around me were scared to find out what was going on inside. My mind was completely taken over with thoughts of food, exercise and the stubborn resolve not to care what others thought of me, even though I knew they knew something was wrong. But I didn’t have an eating disorder. I was too smart for that. Maybe that’s why no one really tried to speak to me about it. My mum would casually comment that I need “some fat,” or buy full-fat ingredients, saying she “couldn’t find the other kind.” My best friend, whose parents were pig farmers, would cook bacon or pork ribs in their own fat and angrily explain that “it’s the only way to cook it,” and yell “just eat it!” As if I could eat these things. As if I could just snap out of the stomach-churning, mindless, shake-inducing fear of food.
EATING DISORDERS ARE A RICH, WHITE GIRL PROBLEM
Eating Disorders are present in countries all over the world and develop regardless of a person’s socio-economic status.

Eating Disorders affect up to 70 million people worldwide (The Renfrew Center Foundation for Eating Disorders, 2002). While Eating Disorders may only be discussed in western culture, and presented in magazines as worryingly thin celebrities, they affect men and women across the globe.

Recent studies have shown that the prevalence of Eating Disorders is on the rise in Asian countries such as Japan, China, Malaysia and the Philippines (Smink et. al, 2012). Studies of university students found that up to 22.75% of students had an Eating Disorder in Pakistan (Memon et. al, 2012), up to 21.2% in Turkey (Sanlier et. al, 2008), and 4% in India (Balhara et. al, 2012). One study found that 37.6% of university students in Bangladesh were at high risk of developing an Eating Disorder (Pengpid et. al, 2015).

Exposure to western culture and the thin ideal increases a person’s risk of developing an Eating Disorder, however this is not the only cause. Other factors that have been identified within Asian and Middle Eastern cultures are lack of religiosity, familial conflict, high levels of stress, substance use and low body appreciation (Pengpid et. al, 2015).

When the world assumes that only white, rich women develop Eating Disorders, anybody who does not identify as one is marginalized and face multiple barriers to accessing treatment. Representation matters, and if we’re going to be having open conversations about Eating Disorders in the public eye, we need to include everybody in that, despite their gender, age or colour.
Anusha, 14, India/Dubai

I'm a heavier girl, so it was always 'she eats a lot and never works out', it was never 'maybe she's just a kid struggling with her mind'. The word 'disorder' somehow puts everyone off. By mistake, if I do tell someone I have an ED, their first instinct is to look for any 'signs' of me starving or losing weight since 'disorder' is a serious word and someone can't 'suffer' from a disorder unless they show major physical signs of it, and since they can't spot any, it'll just be like 'Stop overreacting and goddamn eat less, that's it'.

Sophie, 16, Dubai

One of my friends used to eat my snacks, and once asked me when I was going to "get over my Eating Disorder because it was too boring for her to deal with". I was also told by a member of school staff that I was a "liability" to the school. Many people that I have told replied with comments like "you don't look it at all!" Or "are you sure?" I never became skeletal, my BMI reached an underweight criteria, but I never looked on the verge of death. This stigma needs to be broken as my heart beat was dangerously low and I couldn't stand up without feeling dizzy and almost fainting.

Riya, 15, India

The people where I live are hardly informed about what it’s like to be anorexic. Me starving myself was taken as a desperate bid to lose weight and gain the approval of my peers. My treatment? Monitored meals and healthier diet plans. This is when I began purging. People commented on how well I was recovering. Eventually the monitoring and diet plans stopped, but I had already become dependent on the feeling of purging. This would lead to almost an entire year of purging. I had times when I purged 7-8 times a day, every day of the week.
Anonymous, 24, Brazil

"Hey, you don’t need this, I think you are beautiful this way, you can stop doing this (ED behaviours)".
"Men like how you look".

They thought that I stopped eating to please them?
My parents said stuff like this too, *you are freaking out about your body, stop being so vain.*

Anonymous, 17, Saudi Arabia

In her eyes she doesn’t mean any harm, but since I was 12, my mom would point out the largest body part I have: my hips.
She would constantly look at them with disgust and claim I did something for them to grow so wide and would constantly try and shame me into losing weight. But when I did join the gym or when I did follow a diet she would try and sabotage it because she would be afraid for me; I lost my sister to a disease that showed up as a result of her rapid weight loss. At 12, no boy wanted to be seen with me as it would result in immediate humiliation and mockery. I was told no one liked me because I was fat and ugly.
I’d be called fat, elephant, "dubba" (fat in Arabic) by men passing by in cars. I’ve had classmates drive by me numerous times at night just to call me fat when I was 15. I’m afraid of going to beauty salons because the one time I did in my home country, the lady constantly brought up my weight, and not even in hopes of helping me, she just kept telling herself how fat I am with this look of sadness.

Anonymous, 17, Canada

When I first told my psychiatrist I was concerned about potentially having an Eating Disorder, he said "oh all young white girls (aside note: I am agender) crash diet and throw up sometimes. You’ll grow out of it."
Every other medical professional except my current GP has said that because I am not underweight, it’s not a huge concern.

"Oh all young, white girls crash diet and throw up sometimes.
You’ll grow out of it."
Yanz, 26, Trinidad and Tobago

I’m a black girl and I grew up mainly around white girls and women who were much thinner than I am, just because frankly I’m a “thick” black woman. On the one hand when I was at the worst point of my ED I was living in Paris, where women are very thin kinda by definition and people were basically praising me for losing weight even when it got pretty bad. When I came on vacation to Trinidad everyone would be doing the opposite, telling me I looked like I hadn’t eaten in a while and I looked too “small” and that people here prefer a “little meat on your bones”…I digress. Eating Disorders I think are not spoken about the same way I think in non white communities and so I knew I had a problem, but I guess that even for myself I didn’t understand what it really was. I felt like all it was was that I wanted to fit in because maybe I felt stressed about being black in a mainly white environment; but I live in Trinidad now and it’s still a problem. Eating disorders are an issue no matter what you look like and I think that because normally they are shown and centered around white people, people in non white communities don’t have the same outlets or that same access to help. Or maybe they don’t have the same ability to talk about it. I found that when I tried to express what I was feeling people here wouldn’t understand. It was a little bit like I was speaking a foreign language,

“this isn’t something that happens to us”

I think even for my mother, who I must admit was and is extremely supportive, she was shocked that it “could happen to me” as well. One day I decided to explain my scars from self harm to my boyfriend and why I had it and explain everything. After being very understanding and trying to ask questions, he looked at me and said

“but that is kinda the definition of first world problems”.

And I think what he was really saying was “that is a rich white girl disease”.

STOP THE STIGMA. 43
Margalit, 22, Israel
I was born and raised in Israel where war is a constant threat. Because of that, mental health is not stigmatized the way it might be in other countries. Israelis understand that everyone is going to struggle mentally in one way or another... Health care is also free, so when I was hospitalized for my ED i was in the hospital for a very long time (over a year) because frankly, three months of treatment wouldn't have helped me much. I'm so thankful for the doctors I had and the support from my community. I know that isn't the case for everyone, I so badly wish it was. Right now I'm living in the States, I moved here recently and let me tell you, culture shock is very real. Unfortunately so far I haven't had one good experience with mental health care. In the states I've been treated like an object not a person, like a case file.. I haven't been turned away from treatment here but to be honest, with the way doctors have already treated me (even mental health professionals) I'm not sure I'd ever want to deal with treatment in America.

Anonymous, 14, South Korea
When my loved ones found out about my problem, they just kept saying to "exercise and eat whatever you want" but I couldn't tell them, I couldn’t explain how I couldn’t. I would just like to scream "Of course I want to be able to eat anything and exercise without having to worry about my weight or calories but ITS SO HARD". Each meal I eat, I'm always thinking about "how many calories is this? How many calories have I consumed today?".
EATING DISORDERS ARE ALL ABOUT CONTROL
While feelings of control may be linked to a person’s Eating Disorder, they are not the only cause.

It's commonly believed that an Eating Disorder develops because a person needs to feel in control. Often people who have ED’s have lived or are living in toxic environments in which they have very little control over. Controlling one’s weight and intake can be a way to regain that sense of control and reliability within their life. However, it is wrong to assume that everybody who has an ED is a ‘control freak’, or that control is the core function of their illness.

Causes can range from neglect to abuse, poor social supports, pre-existing and untreated mental illnesses, growing up and living in toxic environments, substance use, emotional crises, genetics, poor self-esteem and maladaptive coping skills. Everybody’s illness will be unique to them, and control may not have anything to do with their ED.
**Riya, 15, India**
The idea of disappointing everybody really messed with me. My Eating Disorder was about punishing myself. It was about the fact that I would never be good enough, or smart enough or thin enough.

*I would just never be enough.*

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**Morgan, 20, USA**
People say it’s just a form of control, I just need to exercise and eat healthier than I am to be able to fix this. However, body dysmorphia has nothing to do with health, it has to do with me hating how I look all the time, it does not matter how skinny I get, or how fat I get. I will always dislike my body and think I can make it better.

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**Kasia, 18, Poland**
I heard a lot of comments about how skinny I look and even if people who said them were just worried, I found their words very inappropriate and rude (things such as “you look disgusting” or “you don’t look like a woman” etc.). Some people said that my problems with food were completely irrelevant and that I had “no reason to do this”, ignoring the influence of difficult family background on my mental health. Most of my family members and friends have also thought that my attempt to control my own body and eating schedule was solely about losing weight and becoming thinner, which I believe is a common stereotype about Eating Disorders among young people.

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**Olivia, 16, USA**
I was often told that my Eating Disorder was a “control issue” and that I just needed to work on the “deeper meaning” in order for it to go away. What no one seemed to understand was that for me it wasn’t a control issue; there was no deeper meaning that was causing me to starve myself. They don’t have to come from some underlying issue and they aren’t a reaction to some traumatic past event. It is a mental illness that can creep up on you and be its own issue within itself.
EATING DISORDERS AREN'T SERIOUS IF YOU'RE NOT EMACIATED
Eating Disorders can cause death at any weight and not all people who develop one will lose weight.

The physical effects of an Eating Disorder can include:
- Dehydration
- Headaches
- Constipation
- Low blood pressure
- Low heart rate
- Fainting
- Anaemia
- Lowered immunity
- Loss of bone density
- Infertility/Loss of libido
- Hair loss
- Damage/tearing of gastrointestinal system (due to purging)
- Acid reflux
- Gum disease
- Tooth damage
- Dangerous electrolyte imbalance
- Heart failure
- Kidney failure
- Seizures

On top of the physical effects, the self-harm and suicide rate is increased significantly for somebody with an Eating Disorder.

It’s important to remember that while somebody might not look unwell on the outside, their illness is damaging their body on the inside and their mental state puts them at higher risk for engagement in life threatening activities.
My, 19, Sweden
This is my own stereotype. It makes me always think that I’m not “sick enough” to seek help, "I’m just a weak person who can’t endure a little bit of hunger”. I still have control over my eating and therefore I don’t have an Eating Disorder. My body doesn’t look like the stereotyped pictures of someone with an ED. The day my body looks like that, I will seek help but not before.

Milla, 19, UK
Another experience was when I had an assessment with the NHS as I was needing prolonged care, and private care was becoming very expensive. When they assessed me they diagnosed me with EDNOS, even though my diagnosis was anorexia, and it was just because I had already been forced to gain weight in the other hospital I was at. Even after having been in hospital for severe anorexia for 6 months, my new bmi meant I was diagnosed with EDNOS and therefore couldn’t access any of the treatment that I needed and so my parents had to continue paying for private care, which as many know, is overly expensive.

Morgan, 23, USA
Because I’ve mostly been average and at times even overweight, my bulimia has been an issue that has not been taken as seriously as, for an example, friends I have who have sought the same treatment being underweight with anorexia. Their illnesses were always taken with much more immediacy and concern than my issues with bulimia as an average and even overweight person. I feel that because of my weight, my bulimia was often just seen as a diet.
Amelia, 14, Australia

When my Anorexia first started and I was at a point where it would have been a whole lot easier to turn it around, I told my mother I wanted to see a doctor about it. So we went to see a doctor and I got weighed and my BMI was still healthy, so the doctor told me that there was no way I could have any food problems as I was in the healthy weight range. When my Eating Disorder was at its worst my mother wanted to put me into a clinic but not one would accept me because I was just in the healthy weight range, it was close to impossible for me to get any help because my BMI was seen as just on healthy. Many times I have felt like I can't speak about my Eating Disorder because my weight is so close to normal that I am terrified I won't be taken seriously, after not being taken seriously by doctors and other professionals I got extremely self conscious about talking about my eating.

Ella, 18, UK

My experience having an ED has been really difficult, it still is today. Countless medical "professionals" have turned me away when I raised concerns with unhealthy thoughts and vomiting seemingly without a cause. When I raised the subject with my mother, she just told me to "eat up." and to stop being "so dramatic" all of the time. My friends however were so much more understanding, as well as my very supportive girlfriend. Even now when I've gone to so many different GP's and psychiatrists, I've just been told that I don't look unwell, and I'm in the "obese" category so I can't have an ED. I have been discriminated purely on my body shape, and weight. That I'm not a human being with feelings, and getting told that I'm "obese" has just added to my ED. Making the thoughts I could suppress louder and louder, making it difficult to even see food.
EVERYONE WITH AN EATING DISORDER IS A LIAR
Lies told by people with Eating Disorders are often told in attempt to hide behaviours and protect themselves from real or imagined dangers.

Those with Eating Disorders tend to carry a lot of shame around with them. They are ashamed of their illness, of their behaviours, and of themselves. Any healthy person would struggle to feel proud of chewing and spitting up an entire cake, so there is no exception here. Past guilts build up into overwhelming feelings of inadequacy and low self-worth; often a process that kick starts an Eating Disorder in the first place. It is this shame, and these guilts that drive a lot of the lies told by someone with an Eating Disorder.

Manipulative behaviour and lying can also be driven by fear. As for the case for many ED’s, an overpowering fear of weight gain is present. If a person believes that by being honest with their loved ones of carers, they will be forced to face their fears and gain weight, they are likely to avoid conversation around their illness, lie about their consumption and behaviours, become resistant to treatment and withdraw from treatment all together.

While this behaviour is frustrating as a carer or healthcare professional, it’s important to both understand and appreciate why a person may be lying in the first place. Labelling all people with Eating Disorders as ‘liars’ is only going to amplify the shame they are already feeling and cause them to further withdraw from treatment.
Rosie, 27, Australia
I feel as though some people in my life may doubt my recovery due to the fact that I have continued to lose weight since beginning to openly discuss my issue, and I know the topic is still discussed behind my back. I do still have slip ups and am not 100% better but I’m doing my best and for the most part am eating and exercising normally and not purging, but I know some people don’t believe me. It makes it harder to do my best knowing people I love think I’m still lying to them.

Tanya, 17, Belarus
Some of my friends cannot speak seriously on this topic. Some say that I just like to create psychological diseases of my own. My weight has always been “normal” according to social and healthy measure systems. So, if I am not overweight, what am I talking about? I was told to stop being stupid, to look around and realize that other people have real problems and can live normally. Sometimes I feel so terrible that I’d prefer to die. There are days when I think only about food and my weight.

Only food.
Only weight.
Can you imagine?

Do you still think it can be just a person’s deliberate choice to have Eating Disorder?
HAVING ANOREXIA IS WORTH IT IF YOU GET A DESIRABLE BODY
Eating Disorders cause significant distress and are not an “enviable” body type

Eating Disorders are not verbs. They are not actions we can engage in to achieve a thin body or make ourselves feel confident in a bikini. Eating Disorders are serious, life threatening mental illnesses and they need to stop being glamorised by mainstream media.

There is a long-standing conversation in existence about the relationship between media and development of ED’s. While dieting and the media do not necessarily cause Eating Disorders, there is a strong link between exposure to body ideals, the way they are presented to us, and body dissatisfaction. Objectification of bodies occurs everywhere. Brands use male and female bodies to sell their products, and fitness communities focus on bodies from the neck down to sell their diets and exercise programs. When we are exposed to objectification, we are effectively taught to turn that objectification in on ourselves. We start to view ourselves as nothing more than the body we live in, and this leads to decreased self-worth, insecurity and an overwhelming pressure to change the way we look; all risk factors for the development of an ED.

Once that ED has developed, life is not as glamorous as the media would make us believe. We carry around shame, fear, anger, sadness, heartbreak, loneliness, frustration, and desperation. We withdraw from what used to make us happy and spend hours at the gym, thousands of dollars on food and diet pills, and spend every waking moment counting calories. There is nothing fun about an Eating Disorder, and it is wrong to desire to have one.
Ruth, 21, Mexico
I have heard girls saying how much they want to have an ED or even say to everyone that they have one, like it was something to be proud of. That makes me really mad. I don’t judge anyone if they do have one, but if they really knew the hell that is living with an ED, I bet they’d think twice before saying things like that.

Solange, 30, Venezuela
I am 30 years old and I now suffer from gastritis, gastric ulcers, reflux and with the problem still in my mind. I am married now and my husband has known about my ED from the beginning. We have 8 years together and he has tried to help me with his great love but I have been unable to overcome this disorder. I feel it is like a parasite that lives in me. I learned how to hide the problem from my family. They did not ask me more about it.

However, since we moved to Panama my problems have increased along with my fears of hurting myself. We have been here for 2.5 years and I have not gone to the doctor for control, and this worries me because I fear I have worsened to the point that I could get a cancer, since I have relapsed three times with the severe stomach pain and the medicine in this country is very expensive.

Kimberley, 22, UK
I have been called psychotic by a stranger in a street when I was at a very low BMI. I was very fragile walking alone to the local shop, it was nighttime so I felt very vulnerable but I knew the walk wasn’t far. I heard the mumble of a man’s voice from the distance but I thought he was talking on the phone. When I got closer I heard him say “You might as well just kill yourself, that’s what you’re doing. Fucking psycho” It hurt me because I looked so unwell and I wondered how any decent human being could pull somebody down when they looked like they had little to stand on.

Linda, 18, Italy
I had a very low BMI and people kept telling me that I was stunning and asked me how to get my body. Starve yourself to death, collapse every two steps and kill every part of you, that’s the answer; how great? I’m still ill, even if I look healthy. Anorexia, Bulimia or EDNOS aren’t about sizes or weights: they’re illnesses. They run so deeply in your mind, but who cares when you can’t see it?
**Giulia, 18, Italy**

Most of people think that you have to feel ugly for someone to start having a ED, so they say to you to feel beautiful, because you are beautiful and you do not have to allow some one destroying your life. They want to help you, but this is not the help you need. An ED is a complex mental illness that is born from an absence of respect to ourselves, that is born from negative thoughts like "I am not worthy", "I'm not important", "I'm nobody"...

It is not an attraction problem.

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**Phoebe, 19, UK**

In one restrictive period of mine I reached a new lowest weight and it didn’t look good on me. My partner openly found me unattractive and didn’t want to ‘fuck a skeleton’, to be blunt. But I couldn’t stop because my ED is about so much more than appearance.

_They’re how we cope and deal with our emotions and instability and that’s a heavy burden, so we project it all onto our bodies and say that’s what needs fixing for us to be happy._

And people also forget that not all EDs mean thinness, certainly for me I don’t think my ED has ever made me more attractive. If EDs were about being attractive we wouldn’t do things to our bodies that make them less “acceptable” by society, we’d just go be super good to ourselves. But they’re about emotions. If my partner found the “damage” I’ve done to myself attractive, or liked vomit breath, then maybe you’d have an argument.

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**Louise, 25, Belgium**

We were preparing for our wedding and building our home. My husband is a military nurse so he is not so often at home. After the wedding, eating and weight wise I gained weight. My husband wants me to gain more weight so I'm at a healthy BMI to have a baby. My illness has nothing to do with the way I look, but I have to gain weight to live the life I want.
CHILDREN CAN'T GET EATING DISORDERS
Eating Disorders do not discriminate. They can develop in early childhood and go unnoticed for years

When the widespread view is that Eating Disorders are caused by a desire to become thin and popular, it is easy to understand why we might neglect to identify them in childhood. Childhood in western culture is seen as a time for exploration, play and learning. It is not associated with a fear of weight gain or dieting behaviours, yet unfortunately many young boys and girls are exhibiting these symptoms. Children as young as five years old have been given the diagnosis of an Eating Disorder, and the age of onset is decreasing (Favaro et. al, 2009).

Identifying behaviours in a child can be difficult. What may be attributed to picky eating or even developmental delays, may well be the beginnings of an Eating or Feeding Disorder. ARFID (Avoidant/Restrictive Food Intake Disorder) differs from Anorexia Nervosa as it encompasses food avoidance and restriction, failure to gain expected weight, but does not involved a fear of weight gain. Anorexia and Bulimia both involve a fear of weight gain or ‘becoming fat’. Paediatricians and GP’s should be trained in identifying Eating Disorder in children under the age of 12, as early identification and treatment is linked to better long- term outcomes.

Treatment for children with Eating Disorders includes heavy involvement of the family and/or the child’s primary carers. Maudsley Family Based Therapy was devised in the 1970’s and has been used as the gold standard for ED treatment in children and adolescents since (Treasure et. al, 2015). The Maudsley approach works in three stages; weight restoration, returning control over eating to the child/adolescent, and establishing a healthy identity for the child/adolescent. Therapists work with the family and the child to educate and support throughout each of the three stages. Maudsley therapy is effective as it works within the family environment, keeps the child/adolescent out of hospital, and involves constant monitoring and assistance to ensure the child/adolescent is eating according to their meal plan.

Although not well understood, it’s important to recognise that Eating Disorders do occur in childhood, and treatment is available for the child and their family.
Anonymous, 24, Canada

In elementary school I was the recipient of negative body comments mainly from the opposite gender as early as third grade (around eight years old). I believe that was a triggering factor for me paired with my mother’s history of Anorexia throughout her adolescence and early adulthood. Evidence that I was destined to have an ED, come from a story my mother tells me. When I was three and my mother was pregnant with my sister, I would wipe my snot on her plate to make her eat less because I thought she was “getting fat.” In fourth grade, our class was being measured and weighed as we were learning about BMIs and I felt what I now know as an anxiety attack leading up to myself having to be measured on the chart. My BMI was fourth highest in the class and I stopped eating the lunches my mom had packed for me. In seventh grade gym class, we were holding hands in a circle and had to pass through a hula hoop without breaking hands and a boy said out loud, “It’s not gonna pass by Cassie*, it’s gonna get stuck.”

*Name has been changed to keep participant anonymous

Kalani, 22, Hawaii

My habits started as early as the 4th grade. I was told that I was too young to have an Eating Disorder and that I didn’t know what it was. My mom struggled with an Eating Disorder as well, but was my biggest support that I had through it all and still is to this day. You can’t put an age or weight on an Eating Disorder, people come in all shapes and sizes. You have no idea the everyday thoughts and fears one has. Your ED doesn’t make you, you. You are so much more, you are beautiful.
Izzi, 15, USA
I was told I was too young to hate myself, I didn’t understand what I was doing. I also had limited access to treatment because I didn’t have a conventional Eating Disorder. I was kicked out of a partial hospitalization treatment because just didn’t have a ‘regular’ Eating Disorder and they couldn’t help me.

Ronnie, 14, UK
I am constantly told I don’t need an ovary scan to check that I’m okay and fertile (even though I have not had my period for a long time) because I am ‘too young’. Lots of people thought when I went back to school I was okay (because I was a healthy weight) when really I was relapsing pretty bad. People kept offering me food, which they hadn’t done when I was underweight.

Anonymous, 13, Sweden
Some people (friends, mostly) didn’t really believe that it was serious or that I needed help until my heart rate went so low that I was almost hospitalized. It’s easy to assume that because someone’s young/ hasn’t had a severe ED for so long that it isn’t actually “that” bad. My eating was also dismissed quite often as normal because a lot of girls my age don’t eat very much at school, even if they’re eating enough at home. One of the reasons I started eating less in the first place was because it felt strange to eat a real portion when all the other girls didn’t. Young girls shouldn’t feel pressured to eat less, we should be encouraged to eat enough because we’re growing and we need it!

Anonymous, 25, Unknown
When I was aged 7-12 I was very thin by nature and the comments of those around me, always noticing that I was the smallest (shortest and thinnest) really made that become my identity. At ballet the other girls would be shamed occasionally for their body size and also in recitals I would always be put in the front as the larger girls would be put in the back. This really made me feel special for being so petite, I felt more important and proud of my size, my size and stature became my identity and led to a huge breakdown when I went through puberty and my body changed.
Madeline, 15, USA

Whenever I was younger, my parents would always poke fun at my “tuft” of a tummy and “big belly.” It wasn’t until I was 8 years old that it dramatically started to affect my life. I had just started competitive gymnastics, and I was at a practice right before our next competition. We were all doing warm ups on the balance beam when my coach came over to me. “Suck your stomach in,” she said. As I did that, she replied “Wow! Much nicer. Keep it like that.” It was now implanted in my head that I looked tonnes better with my stomach sucked in. I figured, words similar to those came from my family, and now my mentors, so they have to be right, right?

Emma, 24, Canada

As a chubby girl who often suffered from emotional abuse from my dad, my relationship with food and my body has been skewed from as long as I can remember. I specifically remember being 11 years old, entering grade 6, and being completely disgusted with the fact that my hips were growing wider with puberty. I sized up my jeans and my father told me we would be eating healthier this week. Any time I engaged in dieting behaviours, my father would provide me with positive attention and if I stopped exercising or ate junk, I was bullied by him. I only received positive attention when I was behaving perfectly or actively trying to look perfect. Because of this reason, and because I was never underweight or even at the low end of normal weight, no one has ever thought my weight loss attempts were risky or unhealthy. I was applauded for my efforts to lose weight and when I asked for help, doctors and therapists didn’t believe me. They just told me to keep doing whatever I was doing because I was getting results. Looking back, I’m so sad for little 11 year old me and the difficult journey she was about to take with her body. She was so depressed and unconfident and unhappy. No one that young deserved that. She deserved support and love.
Anonymous, 18, UK

When I moved to boarding school at age 12 I faced more bullying. I was weight restored and was temporarily recovered, but once my roommate at the time found out that I had been previously diagnosed with Anorexia, she was not happy. She confronted me about it and said that she didn’t want to go to school with a “freak” and that she was worried that I was “toxic” and would “infect her”. Whether it was ignorance or not, it was crushing to hear after I had worked and was working so hard on recovery. Her comments absolutely crushed my self esteem and I relapsed almost immediately. This relapse resulted in me having to leave boarding school on medical leave for 6 months.

Allison, 18, USA

I developed Anorexia when I was 9, and began receiving treatment at 12. Over the years many doctors and treatment professionals have made extremely rude comments. I have had a mental health professional tell me I did not look thin enough to have Anorexia, as well as a hospital worker telling me the same thing. I have also had “professionals” tell me I needed to be punished so I could learn my lesson and just eat. Someone at a therapeutic boarding school I was at told me it was unfortunate that getting an NG tube wasn’t more physically painful than it is because I deserved the pain of getting it in and that if I was punished with physical pain it would make me “choose to eat.”
TREATMENT FOR AN EATING DISORDER IS QUICK AND EASY, AND EVERYONE WITH A MEDICAL OR HEALTH DEGREE KNOW HOW TO IDENTIFY AND TREAT THEM
Unfortunately, there are a lot of medical and health professionals who do not know how to correctly identify and treat an Eating Disorder.

As discussed earlier, it takes a whole team of people to treat an Eating Disorder. While many people will attempt to recover themselves in fear that they will be judged if they seek help, these attempts are not always successful. The denial and strong beliefs of being in control mean a person is not always going to be in the right mental state to tackle the Eating Disorder themselves. Hence, the need for trained professionals and social supports to jump on board and aid in that fight.

Unfortunately, as Eating Disorders are still so stigmatized and misunderstood, not all health professionals or family members are going to know how to identify, react to, or treat an ED. Reading through ‘Stop the Stigma’ you may notice recurrent stories of doctors, nurses and therapists making hurtful, uneducated comments and how damaging these can be to the person with the ED. Many people with an ED describe hearing an ‘Eating Disorder voice’. This voice is often punitive, controlling, angry and very loud in that person’s head and is what drives them to engage in disordered behaviours. Many report hearing the phrases
‘You’re not sick enough’
‘You’re not thin enough’
‘Nobody will take you seriously because you’re fat’
To have that voice in your head every day can be soul destroying, so when a person finally reaches out and asks for help, they are being incredibly brave and strong for going against that voice. The problem then arises when they approach a professional who does not know how to deal with an Eating Disorder and they are told they either don’t have an Eating Disorder because they’re in a healthy weight range, or their condition is not real and they’re just going through a phrase. As you might imagine, hearing something like that from somebody who is supposed to help, makes that Eating Disorder voice even louder, and will likely prevent that person from seeking help again for a very long time.

This isn’t to say that all professionals are uneducated. In fact, there are many incredible doctors, nurses, therapists, counsellors and dietitians out there ready to help.
Olivia, 15, USA
Since I began treatment, my family has struggled endlessly with the insurance company covering our expenses. Several weeks into PHP (Partial Hospitalization Program) I was doing fairly well, but I was definitely not in a place in which I was ready to discharge. However, because I was almost fully weight restored, my insurance company stopped paying for my treatment.

Anonymous, 20, Finland
Countless times I have been told that I don’t have an Eating Disorder, because I hadn’t lost “enough” weight. While being inpatient, I was denied help for my Eating Disorder (appointments with a dietitian for example), because I wasn’t thin enough. Nobody cared if I didn’t eat or skipped meals or walked for hours. My parents had to fight with the doctors so I could get snacks on top of only two (!!!) obligatory meals. Many of them (psychologists) didn’t talk about the Eating Disorder, because I looked ‘normal’ to them. On countless medical reports it’s written that I’m “normal looking” for someone with an ED. It has made me fall into a deeper self hate, “I have failed at this too”. If they only knew what was going on outside of that room where I met him/her for 45 minutes once a week.

Anonymous, UK
The worst part was that gaining weight on our twice a week weigh ins dictated whether we were given anytime with the dietitian or extra support, and weight gain was seen as an indication that you were coping and not using behaviours, whereas the opposite was true. There was no support during the weight gain process, it was just about gaining with no psychological support. After discharge there was no support in place; no therapy, and no staff showed concern about me during my treatment and in follow ups because my weight was ‘healthy’. The two and a half years since leaving inpatient and being a healthy weight, have been some of the most difficult times in my life, I wouldn’t wish this pain on anyone. Living in a healthy body with an unhealthy mind and trying to push on regardless is indescribably traumatic and painful.
Anja, 28, Bolivia
At the age of 7 I was forced by my doctor to write an eating diary. My way of eating wasn’t right obviously, but nobody told me what right or wrong was, and what was normal. Even now I have no idea what normal portions look like. Portions and normal content of meals differ by restaurants and people. Scientific definitions about normal, healthy food differ day by day. Eating habits differ from culture to culture. So what is normal eating? I’ve binged since I can remember. This is normal for me. I’ve starved since I can remember. This is normal for me. I’ve been throwing up since I was 17. Over 11 years now. This became normal for me. But I just have to eat ‘normal’?

Anonymous, 25
When I was 15 I was hospitalized for the first time for my mental health. I was hospitalized for what was later diagnosed as PTSD and at that time the mental health ward and Eating Disorder ward were on the same floor for youth. When I was 15 my ED was just starting to really shape up into the monster it became, and after being in the hospital for a few weeks I finally grew the courage to tell my one to one nurse I thought I maybe had a problem with food and body image.

Immediately the nurse told me that it’s totally normal to feel fat when you are surrounded by the skinny ED girls and everyone felt fat around them.

This comment was enough to prevent me from ever seeking help for my ED again until I was 19. The other thing I’ll note also is at age 19 when I was in treatment and they discovered my secret (ED) I was unable to be diagnosed with Anorexia because I was 1 lb too heavy. Instead I was diagnosed with EDNOS, and this really messed me up because it proved to me that I wasn’t ‘sick enough or skinny enough’ to be taken seriously in my ED mind.

Anonymous, UK
I am currently training to be a doctor, but I cannot seek help for my mental health as this will go on my record and influence my future career.
Natalie, 26, UK
I found that medical professionals (particularly older GPs) would almost eye-roll when I finally plucked up the courage to ask for help, because as far as they were concerned, I was underweight but didn’t need to be hospitalised. As my family doctor said with an impatient smile, ‘Just eat a big sandwich and go for a walk in the garden.’ Another doctor (a psychologist of all people) got my referral, saw I wasn’t ‘underweight enough’ and just said, ‘Well, you’ll probably just always be like this. Best thing to do is just go away and accept it, and avoid going to uni if stress is what makes you worse.’ (I did go to uni despite this by the way, and with a lot of hard work, earned top marks in my Master’s degree).

Anonymous, 24, Canada
I felt it odd that I was put on a waiting list that was six months long for the ED program I was to be enrolled in (which was the closest specialized facility, and was over an hour away). My mother was concerned that I was going to be dead in that time, either by the ED or by my suicidality. After hearing I was suicidal, I was enrolled within two weeks. I feel as though a precedent shouldn’t be set by how likely one is to kill themselves. It kind of fed into my illness in that sense.

Liv, 19, USA
When I was a sophomore in high school, I dated this guy who knew about my Eating Disorder. One night I was texting him about it; I felt “fat” and I was trying to tell him about the guilt I felt for eating. He got very mad at me and told me to, “get off my fat ass if I felt this way.” He also told me he didn’t have time to talk about this anymore. I went to my guidance counselor in senior year, and told her I was scared of relapsing back into my vicious cycles of binging. I also said my Anorexia was making me restrict different foods more and more. She proceeded to tell me I didn’t have Anorexia, but a “good sense of self-control”. I felt so ignored. I was hurting, and I left her office feeling worse than when I came.
Alex, 29, UK
For many years I have gone to see GP’s who either don’t get it, or are not interested unless you are physically in need of a hospital admission. On many occasions, I have been sent away to get effectively worse, so that I can be ‘worthy’ or ‘validated’ enough to receive help.

Phoebe, 19, UK
I told my key worker I lost X kg and I was scared I was going to die because of how ill I felt all the time, having panic attacks over cake and she said “Congratulations!” very happily and told me I should be proud. Another duty worker took me seriously, until I told him my BMI was 23 and he then switched to telling me all I had to do now was maintain a healthy weight, not only dismissing my eating issues but acting as if my weight was a problem, when my weight has never been a problem. My relationship with food has been, I have been lucky enough to move treatment teams to one that takes my ED seriously, but it’s still really scared me from reaching out for help.

Amanda, 30, Australia
A psych asked me how much I exercised (which wasn’t much) and he laughed in my face and said I was the laziest anorexic he had ever met. This was 10 years ago, but I can still hear those words circling around in my head to this day. It made me feel I wasn’t ‘sick enough’ because I didn’t exercise as much as others and henceforth didn’t deserve treatment.

Holly, 22, Australia
I was in the ER for self-harm and the nurse had taken my history which included Anorexia, she then went on to tell me that my dietician was lying to me and I didn’t need to eat carbs. The doctor also thought ‘gee wiz your scars are bigger than mine!’ was an appropriate icebreaker when he was about to stitch me up.
Katinka, 17, Holland
When I went into a mental health institute for help, the first thing they said to me when I was on the scale without clothes on, was “happily, your not that underweight. It could be worse”. Once I reached my set point weight, they said to me that they couldn’t help me anymore.

Bethan, 16, UK
I originally got referred to a UK mental health service for children called CAMHS. I was considered a healthy weight so I was put on a waiting list for the service, which was around a 6 month wait. My mum phoned CAMHS saying that I lost half my body weight in a year, and I needed to be seen to straight away. So I was quickly seen to, but the support was shocking. At first they wouldn’t give me help as I wasn’t following a meal plan properly, then it got to a point where I got to a such a low weight I was on death’s door. It was only then that I was admitted into a hospital, because I was finally seen as ill enough. The whole experience made me feel like I wasn’t sick enough, and that I was a joke and a fraud. That I was a laughing matter in the medical field claiming that I was Anorexic, which just gave me permission to lose more and more weight.

SAH, 24, UK
I have been denied treatment on 6 occasions. All of these 6 occasions have been after months of building up the courage and confidence to go back to the doctor. Loved ones don’t want to pay attention to it because it’s hard and the fact that I’m not dangerously underweight means it is easy for people to not notice or ignore it.
Chloe, 19, UK
I was denied treatment many times because my weight/BMI wasn’t low enough. It wasn’t until I ended up in hospital close to death and being fed though an NG tube, that my team realised how ill I was. I didn’t realise how ill I was or that I even had an Eating Disorder until it was nearly the end for me. Anorexia nearly cost me my life. There should be no age limit to access treatment, and there needs to be more early intervention programs.

Nadine, 18, Holland
I had a therapist who was new and I had no connection with her. When I finally dared to tell her, she said to me she wasn’t here to become friends.

I never cried so hard in my life.

Millie, 15, UK
My GP told me that I just had to eat normally and I'd be completely fine. Her exact words to me were "eat a packet of crisps (chips for Americans) every night, you’ll be fine!" I was obviously quite shaken- I mean I can’t even eat half a crisp never mind a full bag.

Anonymous, USA
One instance that stands out the most was my experience with an EMT. While en route to the hospital, she asked my medical history. While I am never sure if that question includes mental health issues, I decided to share them. When I told her I had Anorexia, she told me that I was so lucky and that she wished she had the same will power as me because she needed to lose some weight. It was quite clear that she had no idea that Eating Disorders are life threatening illnesses and not just a young girl starving herself out of vanity.
ONCE YOU DEVELOP AN EATING DISORDER YOU ARE SURROUNDED BY LOVING AND CARING PEOPLE WHO WANT TO HELP YOU.
Eating Disorders are so misunderstood that it’s common for friends and family to react negatively to their loved one’s diagnosis.

Watching someone you love live with an Eating Disorder is not an easy thing to do. Common emotional experiences for carers and loved ones include:
- Anger
- Sadness
- Frustration
- Helplessness
- Confused
- Impatient
- Scared
- Exhausted
- Disappointed
- Guilty

There might be times when carers will blame themselves for their loved one’s illness. There might be times when they feel like giving up. This is all normal. It’s incredibly difficult to help somebody out of an illness you don’t quite understand and burn out happens for everybody. Though carers may naturally prioritise the care for their loved one, it is just as important that they take care of themselves. You can’t pour from an empty cup. There is a reason why it takes a team of people to treat an Eating Disorder; not one person can do it on their own.

It is a common misconception that when a person is unwell, they will be surrounded by loving and caring people. For those who have come from toxic families or abuse/neglect in the home, this is not the case. Some may believe that if they become more physically unwell, they will receive the love and attention they need. While being unwell may cause some people to pay more attention to you, that attention may be negative or be given in the wrong way. As Eating Disorders are so misunderstood, this is often the case; instead of receiving love, many receive invalidation, dismissal and even bullying.
Anonymous, 16, Canada
When I expressed to my mom that I was eating so few calories and restricting, she did not do anything to help me; she even said that it was good I was watching my weight. So I continued with my disordered eating and exercising habits. Men were very objectifying to me. I had developed very early and so as a child I was used for men’s pleasure, and some encouraged my restricting and exercising. Others, when I was a little older and working on recovering as best as I could without proper treatment, would honk and catcall me on the streets, telling me to eat something.

Anonymous, 18, Argentina
"Well, obviously you'll never have Anorexia" (because people think that Anorexia is a body type).
My therapist told me that there was no point in treating me. My family commented on how much weight I was losing/gaining and how much/how little I was eating. My mom simply ignored me every time I cried because I thought I looked fat. When I developed my Eating Disorder and started losing weight, mom told me I was looking prettier and that she was proud of me. She said "fat girls can’t be beautiful".

Victoria, 18, Australia
I've been told:
- I only get admitted to hospital because of my heart and that my weight has never been the issue
- That my dad’s abuse isn't an issue, it’s my fault, I’ve had excuses made for him
- I shouldn’t be in hospital because my weight is fine
- I need to take more responsibility and grow up
- when I was 17 I was told I needed to grow up before I turned 18.
- The Greek side of my family aren’t allowed to know about my Eating Disorder.
Gabriel, 15, USA
My general experience came from the lack of comprehension for my situation. My Eating Disorder and Dysphoria were so heavily intertwined that it was hard to understand for some people. Since my whole experience is quite unique, the recovery process and community really excludes me. Most motivational quotes seem to go along the lines of "accept your curves and your figure", when a curvy figure was exactly what I was getting rid of. Accepting my body isn’t a viable option since trying to do that lead to a major depressive disorder. My recovery isn’t mapped out like most people's and it keeps me stuck in a limbo when everybody is saying to do something that just won’t work.

Kelly, 32, Canada
One friend referred to me exclusively as "bulimic bitch" for a while. My mother told me that I couldn’t possibly have a problem and, if anything, I was the cause of HER problems. A family member accused me of faking an Eating Disorder so I could "get a vacation", AKA go to treatment in another country. It was hard to get diagnosed early on, too. Doctors just wrote off my extreme weight loss as "a part of puberty", and my mother's insistence that I was fine only compounded that.

Liz, 17, USA
I suffer from Orthorexia and insurance companies don’t take EDs seriously unless they’re life threatening; so they don’t cover treatment or therapy, and my family isn’t the richest. On top of that the only member of my family that knows is my mom and she doesn’t quite understand my situation. When she finds me crying or in distress over it, she just tells me to stop thinking so much and take another anxiety pill. She has tried to help in the past but coming from a family with such a passion for food, it’s hard for her to wrap her mind around the idea of being scared of it.
**Anonymous, Australia**

When I was initially hospitalised, I had a lot of people who I thought were friends, stop all communication with me and tell others that I just wanted attention. It broke my heart. I was at university at the time and when I was released from hospital and had to transition back to my normal university life on campus, it was extremely hard. There were so many rumours going around about where I had been and why I had been away for so long. I was ostracised and quite literally forced to move off campus. I could no longer live on campus and had to find a private rental where I wasn’t going to be made feel uncomfortable or ignored.

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**Anonymous, 19, UK**

I was told my BMI wasn’t low enough to be admitted for Anorexia despite the fact I was passing out often, my blood pressure was dangerously low and heart rate dangerously high. My dad told me to ‘stop talking about your problems with everyone, they’re your problem not theirs. They aren’t bothered. You’re just attention seeking’ (when I had been admitted inpatient). I was told ‘to get myself together’ when I was having breakdowns everyday due to PTSD at work, and that I’d be ‘let go’ if I had time off sick because ‘it’s not like I have cancer’.

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**Anonymous, 24, Canada**

What I heard:
‘Just stop doing it’
‘That’s gross’
‘I don’t know how anyone could do that, it’s disgusting’
“You’re not that fat”.

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**Anonymous, 18, USA**

I had a parent criticize me for eating too much, body shame me, and encourage me to adopt an unhealthy mentality towards food and my body.
Sarah, 24, USA
It’s really hard to open up about my Eating Disorder to people I date, especially because I’m gay. Girls I date praise me for being so thin and having so much restraint when it comes to food, and will say that they think I look great if I say I’m in recovery. They all also will talk about how they hate their bodies and want to lose weight a lot, and all that diet talk is very triggering. I also find it’s harder to get them to understand why certain things they do are triggering. My grandmother, my mother, my sister, and some aunts and cousins all struggle with Anorexia and I’m the only one who’s sought treatment and admits to it. I’ve relapsed a few times and it’s always really hard seeing them because they all still have very disordered eating and will mention my weight and comment on my appearance and how much I eat when I’m around them.

Anonymous, 34, USA
My Eating Disorder began because my partner at the time threatened to leave me if I ever got fat. Throughout the years I developed an unhealthy relationship with food. I would either go to extremes to restrict myself or I would gorge myself to the point of being sick. A few years ago, my doctor told me that I was too heavy and my BMI was too high. I was in the process of trying to change my relationship with food by ignoring the negative thoughts in my head and eating better. Instead of talking to me or listening to what I was struggling with, he immediately prescribed me a weight loss drug.

Emma, 32, UK
Lots of people invalidate my issues with food because I’m small. “What do you need to be worried about?”
Or “You obviously don’t need to worry about food” or “You look fine”.
“Just relax, just carry on as you are”.
It always surprises me that most people don’t even think what type of an effect this would have on people.

Issy, 19, USA
I am and was often told that I’m naturally lucky that I am so thin. This hurts me a lot as I put my body through so much unnatural, harmful and painful experiences to “achieve” this body. Whenever I eat more or eat unhealthy foods, my roommate comments that I’m so lucky I don’t get fat. She doesn’t know that it might be the only thing I eat all day. It also makes me scared to gain weight because I feel like my thin body is ideal.
Ana, 23, Spain
I have always been a "curvy girl" we could say, especially because I have big breasts, also the way my body structure is, does not match with someone who could be really thin. When I was really struggling with Anorexia, I reached a low BMI. Anyways, nowadays two of my closest friends know about all of this and, when we talk about this matter, they keep telling me that I wasn't that thin, so I feel just like they are in someway challenging the person I was then, telling she what I always "knew": that I was never thin enough, that I looked terrible and my body was disgusting. This makes me really sad and also makes me think again if the path I chose (recovering) is worth.

Millie, 15, UK
I have had friends that have forced food upon me in order to *cure* the disorder. Urging me to eat a block of chocolate because "I won't get better if I don't".

Caroline, 17, USA
When I was in the hospital for various mental health issues, I told one of the staff that I had an Eating Disorder and I was wondering if they were going to put me in the ED program. The response I got was unbelievable. She looked me up and down, clearly looking at my body, and said "you have an Eating Disorder?" in a confused and very judgemental way, as if she didn't believe me. I was mortified. I never really told anybody about it, but it's stuck with me ever since. I've also had people (mostly strangers, but it still hurts) tell me things like "no wonder you hate your body with all the weight you've gained." or "you don't have body dysmorphia, you're just chubby."
Solang, 30, Venezuela
My mom was the one who discovered my problem because she heard me vomiting in the bathroom. Her reaction was "I'll make you eat the vomit from the toilet" and did not allow me to close the bathroom's door. She thought that the best way to help me was to be tough and like police by watching me. Just to get things clear, my mom is not a bad mother, it was just because of her ignorance about this topic she actually was unable to provide a proper help, since she thought what I was doing was only to draw attention.

Anonymous, Australia
She (friend) has been making little comments all year about me being "so thin" (I am just at the healthy weight for my age and height), but not in an 'I’m really concerned about you way; it’s more like she’s just being aggressive about it to make me feel bad. I decided to end our personal friendship as I realised that day how toxic she is to me and my recovery. Skinny shaming is just as bad as any other sort of shaming, whether that be: fat shaming, or discrimination against someone for their sex, or race, because ultimately an Eating Disorder is not something you can control.

Lian, 22, Germany
The stereotype of weight upsets me most, some "friends" of mine told me I am fine because I am not underweight, and could manage three bites of burger and fries on my birthday. The guilt or that I stopped although I wasn’t full doesn’t matter, as the sister from one of these "friends" is way worse than me, and would never even touch a burger although she is "healthy" now. Seriously, how can she consider her sister healthy when she can’t enjoy life? She told me guilt is normal after eating "bad food" and everybody should do sport to compensate such "sins".
Unknown
I have experienced discrimination in the workplace from a former employer. I was hesitant to disclose my previous experiences with Anorexia with him until I felt comfortable. After about 12 months, I decided that the time was right, I disclosed my history. From that time onwards, he bullied me and made me feel weak on a daily basis. He would tell me I wasn’t good enough and was never going to make it in the legal industry. It got so bad that I relapsed. He then ended my employment. He knew that I would never take any legal action against him because I didn’t want people in the small town we were living in knowing my history. While I am not ashamed of my past, I realise that there is a huge stigma surrounding mental illness in my town and I know I am not yet strong enough to break through that stigma. So I left.

Célia, 23, France
First of all, at the beginning, my friends told me, “you just have to try to eat a slice of black chocolate”, “I can cook you something, you will like it”, “you can eat it, it will not make you bigger”, “Why don’t you just eat normally?”. I couldn’t explain myself because it’s something incomprehensible, that I don’t understand myself. So they were disappointed and lost patience. They gave up on me.
Anonymous, Brazil
I was a very chubby child from age 8 to 14, and my cousins and friends used to make jokes about it, but I tried not to take them seriously. After some time, my mom started to say that I was a little fat and I needed to lose weight and all of these things. Sometimes she said things like “you are eating too much”, when I wasn’t, so I stopped eating and started doing physical exercise.

Shannon, 23, USA
I would faint several times a week, and I injured myself from the falls. Still, this wasn’t enough for me to discontinue my behaviours. I didn’t know where to turn for help. I lost all my friends, my boyfriend, and I was suspended from university. My parents did not and still do not understand my ED. My parents have always been critical of my appearance and weight and still don’t realize how triggering their words and actions are. They would monitor my food intake, as if that were going to be the cure.

Anonymous, 19, USA
One of the few times I actually opened up to a friend about my Eating Disorders, she came back at me with “it’s just a diet, just eat more, I mean I try and diet too, but then I end up caving, so I technically could have one too, but I think mental illnesses are just stupid”. That stereotype made me feel as though I wasn’t “sick enough” to have an ED, as though I wasn’t “skinny enough” to be Anorexic, so I pushed myself to eat less and less.

Something that really bugs me is when people mention “you’re all skin and bones” because they obviously notice, and even though to them, it’s not a good thing, we take it as a compliment. Example: every time my uncle sees me, he tells me to “get some meat on those bones”. I know it’s a figure of speech, but to me it’s a reward, that my starving myself has paid off to me know as “boney”.

STOP THE STIGMA. 82
Anonymous, 15, India
When I was younger, I was given special attention, because I was pretty skinny. Then I gained weight due to some reasons and since then I have been treated differently. People close to me taunt me, saying that they’re "just kidding". For them it’s all about me eating trash whole day, when they can’t realize that I have a friggin Eating Disorder, and it’s all because of them. Of course, ‘only underweight and pretty girls get them’, how can I have it? Being bigger is almost considered as Voldemort, i.e. "He who must not be named". It’s a body type, not a freaking monster.

My body is like every other body.
Just because I have more of it that doesn't mean it's going to end the world.

Roxy, 23, Venezuela
The biggest problem with my issue started when I was 10, when my dad make me feel ashamed of my body. He yelled at me while I was eating something “That’s why you look like this, look at your legs, look at your belly, you are awful”. Even if he bought and cooked me that food. When I started crying, my mom said he was right, and I had to do something about it.

At 11 we discovered I had a life condition in my thyroid called Hypothyroidism that makes me gain weight very easily and hardly lose it. At 16 I broke up with my first boyfriend and was very sad, and then the insults became more painful. That killed me. I started to feel depressed, so I skipped breakfast and dinner for a year, I just locked myself in my room and cried until I felt sleep. Then everybody started to notice I was skinnier, and they gave me compliments. Even my dad started to call me his little girl in public.
WORDS OF ADVICE FOR PROFESSIONALS, CARERS AND FAMILIES
A message from me

I believe there are two basic things everybody can do when it comes to Eating Disorders.

*Listen and Validate.*

Even if you feel out of your depths and are not sure where to start, it doesn’t take much to sit, listen to a person talk about their concerns and reassure them that they are doing the right thing. As I mentioned earlier, it takes a lot of bravery to seek help. With a voice in their head screaming for them to keep everything hidden, coming to you and talking takes a lot of strength and vulnerability. Encourage this. Thank them. Ask more questions. Ask ‘what can I do to help you?’. If you feel like you’re not qualified to help them, tell them this. There is no shame in not knowing all the answers. That’s why we have specialists in the field and organisations who know how to help.

Sometimes your loved ones might not want answers. All they may need is a hug and a little bit of reassurance. Living with an Eating Disorder is hard. A little bit of love can go a long way.

In saying that, caring for a loved one with an Eating Disorder is hard work too. Whether you’re a professional in the field, a parent or a friend, ED’s are exhausting. Sometimes it can feel like you’re living with an Eating Disorder; never forget there is a real, frightened and hurt human being underneath that. Like I said earlier, you can’t pour out of an empty cup. You need to prioritize yourself and your needs. Share some of the load. Let others help you. Take a break when you need to. If I could only give you one piece of advice, it would be to find and attend a peer support group. If your community does not have one, start your own, or even just start to network with other carers online. It’s so important to have other people in your life that are going through the same thing. They can offer you guidance, advice, or even just a shoulder to cry on. Watching your child, your sibling or your friend engage in behaviours that are killing them is heart breaking and can leave you feeling helpless. Just knowing that you’re not alone in this can make a world of difference.

For professionals in the field, the same advice goes for you. Never feel like you are the sole carer for this person, or that the outcomes of their health rest purely on your shoulders. You are not responsible for what they choose to do. All you can do is use your knowledge, training and experience to help them to the best of your ability. If you have any resources left at the end of the day, try and educate your peers. The more openly we talk about Eating Disorders and the realities of them in the workplace, the less misunderstood they become. Especially in areas where you are likely to be their first point of contact (emergency rooms, doctor’s offices, mental health triage centres, etc.). Having a positive experience when first reaching out for help is likely to encourage that person to continue reaching out and be more compliant in treatment.

At the end of the day, nobody expects you to be an expert. For those of us with an Eating Disorder, all we can ask is that you respect us and acknowledge that what we’re going through is hard, and that you’ll do your best to help us through this.
Caroline, 17, USA

Educate yourself.

Eating disorders are mental disorders.
They're in your brain, and have nothing to do with your weight.
Not all Eating Disorders make you lose weight, and
not all Eating Disorder behaviors make you lose weight.

Sophie, 24, Australia

Force is not the answer. Making someone feel stupid or ashamed or pointing out their abnormality will not work. EDs are stubborn, aggressive and all-encompassing. To insult the eating habits of someone with an ED is to insult the person themselves. The best thing you can do is be kind and show you care.

Gently ask how we are, and try to make sure we're aware of the extremes we're taking, without being patronising or authoritative. Conversely, passivity is not the answer either. Subtle hints, casually talking about an article you read on anorexia is aggravating and more likely to strengthen the resolve of the affected person to eat how they want, because you:

a) don’t really understand and
b) are too much a coward to ask straight out.

Just be kind. We're not kind to ourselves. We need someone else to be.

Anonymous, Columbia

This is going to be a battle with my mind at least for a long time, it will be like learning everything from the beginning again. You need to leave all the judgments behind, which is extremely hard, because it's something that has been stuck in your mind for years and these are judgments you have established as facts. It's not only about the body, it's about learning how to live with a sick mind that is tricking you all the time. Even when you recover all the fat you lost and you have a “routine” of eating how you are supposed to be eating, you still need to push yourself to recover every day and fight against all the things your head is saying.

It's learning how to accept that maybe there are some things you don’t want to do but maybe they are the best for you.
Abby, 14, USA
I think I would want them to know that I struggled, that I cried, that this wasn't for a summer bod or a crush, that I did way more to myself than count calories, that counting calories isn't freaking cool and neither are eating disorders, I would want them to know that I struggled just as much as the girl who weighed ten pounds less than me. I would want them to know that it's my brain that's sick, heaven forbid you can't look at me and tell. I would want them to know that despite everything they have told me, or denied me, I am still going to recover. I would tell them that telling me I'm not sick "enough" sucked, a lot, but that I decided being healthy and happy and loving would be so much better than killing myself.

Anonymous, 17, Canada
Ignore stigma.
Every illness had stigma once.
Stigma is what happens when ignorance meets realities that need an open mind.
There will always be ignorant people in the world and the best ways to combat that is to take care of yourself and educate people about stereotypes.

Kendall, 26, Australia
The expectation to 'just eat' always blows my mind. People can't fathom the terror that's involved. How you can't just sit down at a meal and eat it. My reason? I just can't. The whole concept terrified me, I would rather die than eat. How do you explain that to people?
Anonymous, 14, South Korea
Just because I look happy and energetic does not mean that I cannot have an Eating Disorder. I am happy and energetic because I found out I lost a few more kilos or because I didn’t eat more than 1200kcal a day. Don’t say “oh you can never have an ED. People with Eating Disorders are weak and don’t have energy.” But no, I can be happy for different reasons and I do not need to be sad or weak to prove that I have an ED.

Madeline, 15, USA
I just want to say that not everyone with an ED is depressed. Not everyone with an ED has suicidal thoughts, or is crazy, or has to go to a psych ward every so often. Not everyone with an ED hates their body, just like not everyone with an ED has malnutrition. There’s a huge stigma and stereotype of ED meaning strictly Anorexia, concentration camp, no food, etc. When in reality, that’s just a small fraction of it.

Khristine, Canada
I would say that I’m supposed to be loved no matter what and a little compassion goes a long way.

Claire, 16, Australia
EDs are MENTAL ILLNESSES and we need medical/psychological help. Simply eating doesn’t help the root of the illness.

Alex, 29, UK
I would want you to tell the person that they are enough. To validate them, and guide them in listening to his/her body to find what they need. I would want you to talk to them about being hopeful and that recovery is possible, sometimes we have to sit with the uncomfortable feelings, and that they are not alone.
WORDS OF ADVICE FOR THOSE LIVING WITH AN EATING DISORDER
Recovery is hard.
It was probably the hardest thing I ever had to do.
I cried, I screamed, I yelled, I threw things, I pushed people away and pulled them back in. I made excuses, I avoided my meals, I stood in a car park at 1am and threw muffins at my car. For a vast majority of the time, my recovery was anything but pretty. I stopped wearing mascara because I knew I’d be crying that day. I had to donate my entire wardrobe, and shop for a new one, only to do the exact same thing months later. My body put on more weight than I could have ever imagined, and I cried every single day because of it. I wasn’t composed. I wasn’t elegant. I was a big, slobby, snotty mess, and because of it, I’m where I am today.

Recovery is worth it.
In between my melt downs I learnt to be vulnerable. I learnt that it was okay to show people I was hurting and to let them help me. I fell in love; with my studies, my friends, the random acts of kindness I was noticing more and more. I opened myself to new experiences. I travelled, I worked, I started dating again. I met my soul mate. I stood within a circle of candles, messy hair, no shoes and my pyjamas on, when he got down on one knee. My body healed. I found energy and much to my delight I rediscovered positive emotion. I laughed, I jumped in excitement, I cried tears of happiness as I heard my unborn babies heart beating for the first time. I set myself goals, I watched myself achieve them, and I set some more. Everything I wanted out of life started becoming a reality and I found myself outside my Eating Disorder.

You’re not alone.
In fact, it’s estimated that there are roughly 7 million in the US, 1.6 million in the UK and 1 million people in Australia going through the same thing as you. If you factor into how many other countries there are on this planet, and how many people never seek treatment, there really is a lot of people in this world living with an Eating Disorder.

If anything, I hope these stories showed you that. That you could read somebody else’s experience and think “wow, I can really relate to that”. There is so much power in knowing you’re not alone in your fight because this illness isolates us. Yes, there are stigmas, and yes there are people who will have no idea how to cope with your illness, but don’t let that stop you from seeking help.
You deserve help regardless of your age, gender, colour, height or weight. Despite the weight criteria for Anorexia, you don’t need to be knocking on deaths door to be taken seriously. You never need to be ‘sick enough’. To even have that thought indicates that something’s not right. A healthy person would never wish to be more visibly unwell in order to gain a doctor’s validation. A healthy person would want to be healthy.

Please know that recovery is not, nor will ever be a linear process. You will slip up, you will have relapses, you will wonder why you’re even trying to get better. If we didn’t have those experiences, we’d never learn about our triggers. Slip ups are normal because they allow us to go back into ourselves with all that we’ve learnt and discover something new. While it might feel like recovery is cyclic as you bounce from ‘really great’ to ‘really bad’, if you’re giving it your all, you’ll spiral in the right direction. I’ll never sit here and tell you to just eat your damn breakfast (as much as I’d love to), because let’s be honest, if recovery was as simple as eating a bowl of cereal each day, we wouldn’t be here. All I want you to know is that even though that bowl of cereal might feel like your Everest, there are Sherpas all around you, waiting to show you the way to the top, and the more you climb that mountain, the stronger you’ll become.

You are amazing.
You are strong.
You are worthy in every way possible.

You’ve already come so far, you can get through the rest of this.
Lian, 22, Germany
Go out and seek help! No matter your weight, no matter how long or short you suffer, because Eating Disorders are dangerous at any weight and every day spent with this sh*t is one day too much. It’s hard as hell to admit it, to go to a doctor and therapist and speak about it, but it’s more hell to spend your life like this. You’re not alone with this and deserve to be happy and healthy. Recovery is so damn worth it and you won’t become fat. And even if you would become “fat” there is nothing wrong with it. It’s not your fault or your choice and you don’t deserve a life spent in misery. And if there is ever someone who tries to tell you different no matter who, family, friends, professionals, idiots on social media, tell them “Go f*ck yourself”. Always easier said then done but it will help a bit.

Sophie, 24, Australia
Ask yourself what it is you value most in yourself. Your sense of humour? Your intelligence? Your boundless creativity? (I guarantee it’s not your thigh-gap, or how your bones look.) Beat this thing for that. You won’t find humour in food anxiety. Your brain function will decline if your brain isn’t nourished. Your preoccupation with food won’t provide you with any other creative inspiration. By starving yourself you starve whatever it is you value most. To get back on track, ask yourself what you value most in yourself, hold on tight to that, and fight, fight, FIGHT.

Caroline, 17, USA
You are valid. Your Eating Disorder is valid. Whether you are fat, thin, or average weight. Whether you’ve been underweight before or not. Whether you’re 12 or 60 years old. Whether you’re male, female, nonbinary, black, white, or anywhere in between. You are valid.
**Amelia, 14, Australia**

Your Eating Disorder is valid, no matter your size, your race, your gender or your social standing. You deserve help and you deserve to live life to the fullest, and you deserve to have a good relationship with food. It might take time to get better and you might think you are alone in this struggle but you aren't and there will always be someone willing to guide you through this rough time. Your Eating Disorder doesn't define you and it isn't you, and you have the power to conquer it, good luck.

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**Amanda, 30, Australia**

No matter what your ED tells you, it is all lies. Not once in all the years I've been ill has my ED kept any of its promises to me. It has just made my life worse and caused more suffering. It'll be hard when your head screams at you, but ED is a liar; the best liar. Never believe the lies, and in time it's voice will quieten down and you'll be able to break free.

**Unknown, 22, USA**

That Eating Disorder voice will one day stop screaming, and become a soft whisper. Your body will forgive you. No weight will give you what you are striving for. Eating disorder's don't strive for perfection, they only strive for death. Also, you are loved, even when you feel that you aren't.
Rae, 22, USA
There is no way for me to show you how amazing it feels to live life again, but I can tell you there is no better feeling than walking through your day being able to live every moment to its fullest. There is no better feeling than having a good relationship with your body, your food, and with others in your life! You can only take my word for it, but I promise you recovery is worth it. YOU ARE WORTH IT! Recovery is not easy, truthfully it kinda sucks in the beginning, but it does get easier and you begin to realize how precious and amazing life truly is. Just keep pushing and keep telling yourself that you are worth this!

Anna, 15, Germany
It’s okay to tell friends about it because they can be the best help you can get. And please try to love your body (I try very hard and sometimes I could love it and other times I hate it)

Abby, 14, USA
I would tell them that they are more. More than a size, more than a figure. I would tell them all of the things I love about their personalities, and I would tell them over and over and over that they do not need hunger or purging to feel beautiful. The beauty is already inside of them and that all they need is to allow themselves to see it. I would tell them that the fight is hard, and truly it never really stops. But that they have the power to look at their wonderful self and love them, practice makes perfect I would say. I would let them know that even saying one kind thing to your body a day makes a world of difference!
**Ana, 23, Spain**

If you realized you have an ED (because denying is the easiest thing to do, I know), don't be afraid to look for help. You don't have to tell everyone, because it's your choice, but at least, find someone who you think can be a comprehensive person and ask him/her to help you look for someone who can give you a helping hand to get out of your hole (an specialist, a psychologist, a psychiatrist or a doctor).

**Lisa, 19, Belgium**

I would tell them that they're stronger than they think they are and that even if they're sick, there is always this little thing inside of you that motivates you to recover. Even if it's too hidden by the need to be skinny, it's still there and you have to work it out because IT IS worth it and most important YOU ARE worth it! We may not know each other but I keep thinking and praying for all of you. Stay strong and safe.

**Célia, 23, France**

We are fighters, we are strong. We live with suffer, with obsession, with trouble. It's always up and downs, like in a roller-coaster, but one endless. It's so exhausting because each day is a battle against ourselves, but we never give up. We stumble, we fall but we get up and we go back to fight. Don't let anyone else doubt you, of your abilities, of your qualities, and your beauty. You deserve to be happy, and absolutely not to drag that burden. Believe in yourself, you are valuable.

There is a beautiful life waiting for you. Continue to try, accept your failures, accept stretched out hands. Note and celebrate each little victory, it's a step towards healing. You will be proud of you. Life deserves to be lived. We can recover!

**Lisa-Marie, 19, Austria**

This is an illness. Maybe it's not as visible as a broken bone, but it's there. And even if you can't see it, the person just told you it's there. You are not the one to decide whether it is or it's not.
WHERE TO FROM HERE?
International or Web-Based:

- Academy for Eating Disorders (AED) http://www.aedweb.org/
- Global Foundation for Eating Disorders (GFED) http://gfed.org/
- International Association of Eating Disorder Professionals (IAEDP) http://www.iaedp.com/
- Mirror-Mirror http://www.mirror-mirror.org/
- MAED Advocacy (Mothers Against Eating Disorders) https://www.facebook.com/groups/maedadvocacy/

Australia

- Bridges Association Incorporated http://www.bridges.net.au/
- Centre for Eating and Dieting Disorders http://ceed.org.au/
- The Eating Disorders Association Inc (Queensland) http://eda.org.au/
- Eating Disorders Association of South Australia http://www.edasa.org.au/
- The Victorian Centre of Excellence in Eating Disorders (CEED) http://ceed.org.au/

Austria

- Österreichische Gesellschaft für Essstörungen (ÖGES)/Austrian Society on Eating Disorders (ASED) http://www.oges.or.at/

Brazil

- Grupo de Apoio e Tratamento dos Distúrbios Alimentares http://www.gatda.psc.br/

Canada

- Bulimia Anorexia Nervosa Association (Windsor, ON) http://www.bana.ca/
- Danielle’s Place (Burlington, ON) http://www.daniellesplace.org/
- Eating Disorder Support Network of Alberta (EDSNA) http://www.edsna.ca/
- Family Services of the North Shore (Vancouver, BC) http://familyservices.bc.ca/
- Hope’s Garden (London, ON) http://www.hopesgarden.org/
- Hopewell (Ottawa, ON) http://www.hopewell.ca/
- Kelty Mental Health Resource Centre - Eating Disorders http://keltyeatingdisorders.ca/
- Looking Glass Foundation ** (Vancouver, BC) http://www.lookingglassbc.com/
- National Eating Disorder Information Centre http://www.nedic.ca/
- Sheena’s Place (Toronto, ON) http://www.sheenasplace.org/
- Calgary Silver Linings Foundation ** (Calgary, AB) http://silverliningsfoundation.ca/
For further information regarding services near you, please visit:

**Czech Republic**

**Germany**
- German Society on Eating Disorders [http://www.dgess.de/](http://www.dgess.de/)

**Hong Kong**

**Ireland**
- Bodywhys [http://www.bodywhys.ie/](http://www.bodywhys.ie/)
- ED Contact ** [http://www.edcontact.com/](http://www.edcontact.com/)

**Italy**
- Associazione Italiana Disturbi dell’Alimentazione e del Peso [http://www.positivypress.net/AIDAP](http://www.positivypress.net/AIDAP)

**Mexico**
- Ellen West Foundation against Anorexia and Bulimia [http://clinicaellenwest.com/](http://clinicaellenwest.com/)

**New Zealand**
- Eating Difficulties Education Network (EDEN)

**Portugal**
- Associacao dos Familiares e Amigos dos Anorecticos e Bulimicos ** [http://afaab.org/](http://afaab.org/)

**Spain**

**Sweden**
- Nordic Eating Disorders Society (combines Swedish, Danish and Norwegian societies) [http://www.neds.nu/](http://www.neds.nu/)

**Switzerland**
For further information regarding services near you, please visit:

The Netherlands
- Nederlandse Academie voor Eetstoornissen [http://www.naeweb.nl/]
- Stichting Anorexia en Boulimia Nervosa [http://www.sabn.nl/]

United Kingdom
- Anorexia and Bulimia Care [http://www.anorexiabulimiacare.org.uk/]
- Anorexia Carers ** [http://www.anorexiacarers.co.uk/]
- beat (Beating Eating Disorders) [http://www.b-eat.co.uk/]
- Boys Get Anorexia, too ** [http://www.boyanorexia.com/]
- King’s College London Eating Disorders Research Group [http://www.kcl.ac.uk/iop/depts/ps/research/eatingdisorders/index.aspx]
- First Steps Derbyshire [http://www.firststepsderby.co.uk/]
- Grainne Smith’s Working Together Care ** [http://www.workingtogethercare.com/]
- Men Get Eating Disorders Too (MGEDT) [http://mengetedtoo.co.uk/]
- North East Eating Disorders Support (NEEDS) [http://www.needs-scotland.org/]

United States
- A Chance to Heal ** [http://achancetoheal.org/]
- Alliance for Eating Disorders Awareness [http://www.allianceforeatingdisorders.com/]
- Andrea’s Voice** [http://andreasvoice.org/]
- Anorexia Nervosa and Related Eating Disorders (ANRED) [http://www.anred.com/]
- Association of Professionals Treating Eating Disorders (APTED) [http://www.aptedsf.com/]
- Binge Eating Disorder Association (BEDA) [http://bedaonline.com/]
- Bulemia.com [http://www.bulimia.com/]
- Bulemia Nervosa Resourse Guide [http://www.bulimiaguide.org/]
- Caring Online [http://www.caringonline.com/]
- Eating Disorder Foundation (Denver, CO) [http://www.eatingdisorderfoundation.org/]
- Eating Disorder Network of Maryland [http://www.ednmaryland.org/Welcome.html]
- Eating Disorder Referral and Information Center [http://www.ederreferral.com/]
- Eating Disorders and Education Network Network (EDEN) [http://www.edenclub.org/index.html]
- Eating Disorders Coalition [http://www.eatingdisorderscoalition.org/]
- Eating Disorders Coalition of Tennessee [http://www.edct.net/]
- Eating Disorders Information Network (EDIN) [http://www.mymind.org/]
- Eating Disorders Resource Center (EDRC) [http://www.edrcsv.org/]
- Eating Disorder Recovery Support, Inc. (EDRS) (Petaluma, CA) [http://www.edrs.net/]
- Eating Disorders Treatment Accountability Council (EDTAC) [http://www.eatingdisorderstreatmentreviews.org/]
- Eating For Life Alliance [http://www.eatingforlife.org/]
- T.H.E. Center for Disordered Eating (North Carolina) [http://www.therecternc.org]
- The Elisa Project ** (Dallas, TX) [http://www.theelisaproject.org/]
- The Emily Program Foundation ** (St. Paul, MN) [http://www.emilyprogramfoundation.org/]
- Featherweight ** [http://www.featherweightinc.com/]
- Finding Balance (Franklin, TN) [http://www.findingbalance.com/]
- The Gail R. Schoenbach F.R.E.E.D. Foundation (For Recovery & Elimination of Eating Disorders) [http://www.freedfoundation.org/]
- Hope Network, LLC ** [www.eatingdisorderfamilysupport.com/]

STOP THE STIGMA. 99
For further information regarding services near you, please visit:

- Maudsley Parents ** http://www.maudsleyparents.org/
- MentorConnect http://www.mentorconnect-ed.org/
- Mirror Mirror Eating Disorder Information http://www.mirror-mirror.org/
- Missouri Eating Disorders Association http://moeatingdisorders.org/
- Multiservice Eating Disorders Association (MEDA) (Newton, MA) http://www.medainc.org/
- The National Association for Males With Eating Disorders (NAMED) http://namedinc.org/
- National Eating Disorders Association (NEDA) http://www.nationaleatingdisorders.org/
- Ophelia’s Place, Inc. ** http://opheliasplace.org/
- Perfect Illusions: Eating Disorders & the Family (PBS Show) http://www.pbs.org/perfectillusions/index.html
- Project Maria http://projectmaria.org/
- Reaching Out Against Eating Disorders http://www.roaed.org/
- Residential Eating Disorders Consortium (REDC) http://www.residentialeatingdisorders.org/

List as retrieved from
www.feast-ed.org/?page=WorldAdvocacyOrgs
02/03/2018

F.E.A.S.T are an incredible organisation run by carers for carers with the aim of education, support, networking and providing updated information regarding Evidence Based treatments.

PLEASE NOTE: F.E.A.S.T. is not able to evaluate the philosophical approach, quality, legal status, or organizational structure of the advocacy groups on this page. Information or opinions shared through these groups may not be evidence-based or in accordance with F.E.A.S.T.’s Principles.

** Parent-led or focused organization.
‘Me and My ED’ uses over 60 illustrations to explore the inner workings of one of the world’s most misunderstood illnesses, Eating Disorders. Written for all ages, health professionals, carers and sufferers, ‘Me and My ED’ allows readers to understand why someone may develop an Eating Disorder and how its functions go far beyond a means of losing weight.

‘Me and My ED’ reads as a story book and is told from the perspective of someone who suffers from an Eating Disorder. Characters, Christie, and her personified Eating Disorder, Ana, share a complex and enmeshed relationship that serve as a fundamental, yet horrific period in Christie’s life.

It is believed that weight loss is the disease itself, however it is merely a side effect of a mental illness. ‘Me and My ED’ is the first of its kind to illustrate what occurs in the mind of somebody with an Eating Disorder. Professionals across the globe are also using this book to engage their clients and help them better understand their illnesses.

You can purchase your copy at meandmyed.com/me-and-my-ed-book/
References


Solange, 30, Venezuela

The sun rises every morning, you rise and think:
what will happen tomorrow?
How will you live if you do not allow yourself to live?
How can you dream if you do not believe in yourself?
Little girl of little faith ... How can you continue like this?
Look at the sun that shines and it's for you,
Hope you give him a smile and be thankful for living.
Hold my hand and feel, the blood that flows in you,
While I hold your hand tight,
So that with the pain you allow yourself to feel,
That it is not pain that I teach you,
But how alive your soul is,
Trapped in the cage of your fears,
And shouts that he wants to live.
Only girls get Eating Disorders. Eating Disorders are a rich, white girl problem. They are a first world problem, people need to get over themselves. You can't have an Eating Disorder if you have fat. Only models get Eating Disorders. If you regain all the weight you're cured. It's just about attention seeking. They are for stupid girls. Doctors know everything. Anorexia is just a diet and Bulimia is gross. Overweight people don't have Eating Disorders, but they should have Anorexia. Bulimia is for people who lack the self control required for Anorexia. Eating Disorders are a choice. Girls only get them so they can look more attractive. Eating Disorders are just about control. You don't need help if you're not emaciated. Having Anorexia is worth it if you get a desirable body. Children can't get Eating Disorders. Treatment for an Eating Disorder is quick and easy, and everybody with a medical or health degree know how to identify and treat them. Only girls get Eating Disorders. Eating Disorders are a rich, white girl problem. They are a first world problem, people need to get over themselves. You can't have an Eating Disorder if you have fat. Only models get Eating Disorders. If you regain all the weight you're cured. It's just about attention seeking. They are for stupid girls. Doctors know everything. Anorexia is just a diet and Bulimia is gross. Overweight people don't have Eating Disorders, but they should have Anorexia. Bulimia is for people who lack the self control required for Anorexia. Eating Disorders are a choice. Girls only get them so they can look more attractive. Eating Disorders are just about control. You don't need help if you're not emaciated. Having Anorexia is worth it if you get a desirable body. Children can't get Eating Disorders. Treatment for an Eating Disorder is quick and easy, and everybody with a medical or health degree know how to identify and treat them. Only girls get Eating Disorders. Eating Disorders are a rich, white girl problem. They are a first world problem, people need to get over themselves. You can't have an Eating Disorder if you have fat. Only models get Eating Disorders. If you regain all the weight you're cured. It's just about attention seeking. They