Ames Tribune

Bulimia through the eyes of love

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Chelsea and I were driving back to Iowa on Jan. 1, 2012, after ringing in the new year with two of my best friends in Chicago. It was fun seeing them, but what Chelsea said to me as we left the city was something I'd been waiting to hear for a long time.

She wanted me to talk to my mother, who has a nursing background, about finding her some help.

I was so proud of her. Chelsea and I had been together for just more than a year at that point, but she had been struggling with bulimia for longer than that. I was one of only a handful of people who knew and had been begging her to let me help her find treatment options.

We met as interns at the Student Press Law Center in Arlington, Va. Fresh out of college, with a struggling job market, we had taken the positions to get our foot in the door in the nation's capital. We became friends, then, after a few false starts, it grew into something more. We stayed there after the internship and continued to date. One day, Chelsea and I were hanging out in her apartment when she told me about her eating disorder.

She told me how, despite being what seemed to be a happy and healthy, confident young woman with an adorable, infectious laugh, she had struggled almost immediately after coming to D.C. and had become one of the 24 million people in the United States who suffer from an eating disorder, according to the National Association of Anorexia Nervosa and Associated Disorders Inc.

Chelsea was good at hiding it. She lived with three other girls in a one-bedroom, one-bathroom apartment, she worked with me and four other interns, but nobody knew. Nobody knew that to cope with being away from home and friends, dealing with stress and insecurities, she had started to binge and purge.

I didn't know a lot about eating disorders then. She didn't "look" like she had an eating disorder, but I later found out people rarely look like they have an eating disorder. And that perception is a dangerous one. It can send someone who is struggling deeper into their disease.

I just wanted to her to be happy, which I constantly told her. I didn't want to push her. From the little I did know about addiction, I knew treatment wouldn't work unless she wanted to do it. So for months, Chelsea continued to purge and we would talk. We would talk about why she did it, I would tell her I loved her and that I wanted her to come to me the next time she thought about doing it. I eventually worked in the idea of treatment into our conversations. But she wasn't there yet. She knew she had a problem, but she didn't think it was bad enough to get treatment.

I felt so helpless. I didn't understand. We loved each other and had a great relationship. She was absolutely beautiful, a point I always tried to drive home. But she still lacked self-confidence. A voice told her she wasn't good enough. A voice told her that this is what she had to do, this was the way it was. She needed an escape, and this made her feel better. So, I tried, in vain sometimes, to tell her how special she was, how she made me feel and how much people loved her.

But sometimes that voice won. I knew I wouldn't be able to get her out of this. I did my best, but I knew she needed professional help. So I hoped, I prayed, I cried that she would come to the same conclusion. It was an uphill battle; only one in 10 people with an eating disorder actually get treatment, according to the national association.

And on that first day in 2012, she made that first step. It was no doubt one of the hardest she's had to make and the first on a long and challenging journey, but she did it. She started seeing a counselor who specializes in eating disorders.

Recovery isn't instant. It's tough, it's long and complicated. I've sat next to her as she described to her counselor the reasons for her binges and her insecurities. I watched her take on a second job to pay her medical bills because her insurance didn't cover her trips to a dietitian. But Chelsea has met all those roadblocks and drives right through them.

I've seen her finally come out of her shell and stop listening to the voice in her head that tells her she's not good enough and instead listen to everything else that tells her she is.

And as I write this, she's finally realizing she is the woman I always knew she was.

Monday

6:30 p.m.: Screening of "Miss Representation," a 2011 Sundance Film Festival documentary, 101 Carver Hall. The film looks at the lack of positive portrayals of women in the media, through statistics, media clips and interviews with Condoleezza Rice, Nancy Pelosi and Katie Couric. According to the film, the collective message of media -- the most persuasive force shaping cultural norms -- is that a woman's value lies in her youth, beauty and sexuality. The screening will be followed by a question-and-answer panel discussion.

Tuesday

2 to 4 p.m.: Wellness resource fair and group fitness sessions, State Gym. "Rock Your Body" party includes Zumba, meditation, yoga and mindful yoga sessions.

Wednesday

6 to 8 p.m.: Open house/body image art gallery, Margaret Sloss Women's Center. This art being displayed is by ISU students.

Thursday

7 p.m.: "The Thin Line: Breaking the Silence on Eating Disorders," Great Hall, ISU Memorial Union. Live theater begins the conversation about eating disorders and reducing the stigma surrounding this mental illness. It illustrates the pain of one girl's struggle and her loved ones' resolve to understand and help, revealing the devastating impact eating disorders have on all involved. Immediately following the play, members of the eating disorder treatment team will discuss how to access services at ISU and lead a question-and-answer session. A reception will follow.

Activities are presented by Eating Disorder Coalition of Iowa, ISU Student Counseling Services, Program for Women in Science and Engineering, ISU Committee on Lectures, graduate students of education and clinical psychology, Division of Student Affairs, Student Athlete Affairs, Collegiate Panhellenic Council, College of Human Sciences, departments of Kinesiology and Food Science and Human Nutrition.

Michelle Roling, of Adel, is a certified eating disorder specialist and co-founder of the Eating Disorder Coalition of Iowa.

Q Why are people struggling so reluctant to seek help?

A Less than a third of the people who struggle with eating disorders actually seek out any kind of services. And I really feel like there are multiple reasons for that. One is that there is a belief that they're alone, that everyone else kind of has it figured out, and that there won't be support for it, and there's so much shame involved in the struggle. There's a lot of loneliness and embarrassment. People who are struggling really are embarrassed. As well as in Iowa, we really lack adequate resources to meet the needs of all the people who are struggling. And so, part of the struggle is finding a good treatment team.

Q What should friends and family be mindful of when they're trying to get someone to take that step and get help?

A I think that it's important for friends and family to be compassionate. And to simply be an ear, to listen to other people's struggles. To not assume that they understand just because maybe they have had some weight issues or some body image struggles. Everyone's situation is different and unique, and we need to simply be an ear to listen to each person's story. To recognize that recovery takes a long time, and if the individual could just stop what they were doing, they would have already done that. That it really does take a whole treatment team of support to get someone through recovery.

O What advice do you have for someone looking for treatment?

A We're really excited about the Eating Disorder Coalition of Iowa, that it now has a presence and the ability to be a resource to Iowans who are seeking treatment or looking for support or input on where to go for treatment. The thing that I would say first off, is there is always hope, it is never too late to start a recovery, no

matter how long you've been struggling. To hold on to hope and to know that there are people out there who

want to support you and just encouraging them to pick up the phone and to go online and scout the Eating

Disorder Coalition of Iowa.

Q What other types of treatment do you suggest to patients in addition to counseling?

A Dietitian, a qualified dietitian. Close work with their primary care physician to monitor the physical pieces.

If they are an individual with a strong spirituality, incorporating their faith or their worship in some way. For some individuals, it's helpful to utilize a psychiatrist. and for some individuals, it's helpful to work with a

personal trainer who is trained in health at every size or mindfulness kinds of activities.

Q What would you say to someone thinking about getting treatment?

A It takes a lot of courage to make that first contact. To listen to their inner voice, no matter how quiet it is,

telling them that they deserve to be healthy and to be well. To know that there is someone there, a professional, who wants to walk with them on their recovery journey and to give them support when they don't feel like

they can do that themselves.

Q Anything else?

A I would just like to kind of remind everyone that no one is immune to the development of an eating disorder.

They hit both genders, all races, all socioeconomic and truly all age groups. From, you know, age 6 and up.

We need to be compassionate and accepting of all body sizes and shapes and embrace our uniqueness.

More information

Eating Disorder Coalition of Iowa: www.edciowa.com

Michelle Roling: michelle@? michelleroling.com