

Results from the www.scienceofeds.org ED survey #1

Please note that some responses have been edited to correct minor spelling and grammar mistakes (but most haven't been because I'm lazy) and to remove any information that may identify the participant. Responses such as "N/A" have also been removed. Content MAY be triggering (#'s are mentioned) so read at your own discretion. (Please stop reading if you find it triggering in any way.)

1. Are you in recovery right now? Why or why not?

I am not due to fear of weight gain.

No, I'm in therapy and working towards maybe getting into recovery... but it really scares me.

No, because I want to lose weight.

No. I'm not strong enough to tell someone or to help myself.

Not in recovery. I am my ED, and can't imagine being this thin without it.

No. I don't feel like I'm sick enough to deserve recovery or help.

No, I do not currently have the financial resources to afford more than weekly therapy.

I am not in recovery because I do not have access to an appropriate level of care and have not been able to interrupt my behaviors on my own.

No, because I tried to recover and relapsed a year and some months ago, and I don't want to have to go through that again. I can't recover by myself, so I'm going to wait until I need a doctor to step in and help me.

I am not. I have a tumor on my thyroid that messes with my metabolism and my mood. I feel very unstable most days and sometimes death feels imminent. I don't want to put energy into recovery before I've finished radiation therapy and have a stable/completely removed thyroid. I'm afraid of my physical health declining because of the cancer and hitting rock bottom, ruining all my progress. So why even try right now?

I am not. It's extremely difficult for me ever to remember why I'm recovering in the first place, so I continue to starve.

No because I lack the support to do so and the thought of recovery is worse than anything else. I've been this way for so long, changing seems useless now.

Not currently. Stopped going to therapy after 4 months due to the biggest relapse since my ED started 5 years ago.

No, I don't even think I have an eating disorder, I'm not going to self-diagnose. But I do a lot of things that can associate with one and I experience many health issues from it.

No. About 6 months ago, after years of relapse, I found ground when I finally realised the reason why I was falling into my ED hole each time.

I honestly oscillate between wanting to get better and wanting to die on a day to day basis unfortunately. I think the main reason for my lack of dedication to recovery is due to the anxiety relief my disorder provides me.

Is there an in between... ? I want to lose weight, I don't want my brain to get all crazy anxious though, so... No.

Because I have multiple mental health diagnoses and continued ambivalence about my eating disorder, I hesitate to think of myself as in recovery or not. At this point I use overt eating disorder behaviors (restricting/binging/purging) way less than I used to, still engage in most extraneous eating disorder-related behaviors (body checking, comparisons, avoidance, etc.) as much as before, and still struggle with weight-related and size/shape-related negative body image. I think a big reason I am not working to change my lingering eating disorder symptoms at this point is that other aspects of my mental health are causing more urgent problems lately.

I am in recovery but on my own.

Yes.

Yes! Because I want my life back.

Yes, I am currently in an outpatient setting but am struggling greatly due to lack of support.

Yes, and because I am being forced into such by family/friends.

Yes, from relapsing on and off unknowingly.

Yes, pretty much. Why? Because... I want to live, and to have a life again, eventually, someday.

Yes. Because I know I can't have the life I want and deserve with an eating disorder.

Yes, because my eating disorder eventually made me so medically unstable that I really had to pick life or death over the course of a weekend. I wanted to kill myself, but I didn't want to die before finishing a degree/moving out of my parents'. Part of my behaviors were out of guilt of not accomplishing anything, so I wanted to do something to make my mom feel like raising me was worth *some* of her effort/hardships before I kill myself/allow my disorder to kill me. After a while of recovery efforts, relapsing became harder and harder to do, physically. I'm now at a point where I feel as though I don't really have a choice but to keep at it.

Yes. Because, simply, I want to live. I'm tired of making my parents cry and frankly it's about time I start fighting.

Partly by accident, but yes. I only actively engaged with treatment because I was accepted on to a funded training course, which I took as 'new start'. I had felt that I couldn't recover because the idea of weight gain etc. was too horrible, and seemed pointless. If I hadn't been accepted, I had planned to commit suicide instead. The relief that I felt when I found out that I wouldn't have to end my life is what helps me know now, and when I'm struggling, that I do want to recover.

Yes. Because I told my boyfriend and it worried him enough to make me are a doctor. And I don't appreciate living in restricted hell.

Yes, because my health deteriorated so much during the course of my eating disorder when it was 'active' that I couldn't even comfortably stand for more than a minute or so (and still have great difficulty with it).

Yes. Because I pushed my ED as far as I could and lost almost everything, and it has nothing to offer me anymore. My 7-year relationship was about to fall apart and I want a life with friends, love,

happiness and food more than I need anorexia.

Yes because in some ways I find my life worth living. I have a lot I want to do with my life and I can't do them with an eating disorder. For the days I don't want it, I have a husband who loves me. I can't have both a husband and an eating disorder without trying to recover.

Yes, I would consider myself in recovery. My life is full of non-eating-disorder-related goodness.

Yes, because I don't have time to constantly be sick from laxative abuse. And my boyfriend and my mom would murder me if I relapsed again.

YES, I AM! Because I was tired of hating myself for eating. I was sick of the guilt and shame that came with every bite, so I decided to put an end to it.

I am in recovery because I know that I can't live my life controlled by my eating disorder, and wake up aged 40 realising I never achieved anything because my life was wasted avoiding chocolate.

Yes, because I am working towards a life of peace with food. I work with a therapist to set goals and make change so I can live a life free from calorie counting and enjoy all foods.

Technically yes. I've told my therapist but I'm still having a really hard time. I'm in recovery because I'm sick of being sick and I'm sick of worrying my partner.

Yes, because I recognise how I was before was part of an illness and that I cannot carry on being that way, I want to be free of the constraints my eating disorder and other mental health problems have placed onto me. In all honesty, recovery feels like the only option; even if I'm only managing to do the minimal, even if I'm 'stuck', I have to do it, have to try.

I am in recovery because I've finally come to two realizations: 1) I'm not actually ready to die yet, and 2) My career deserves more than I can give it when I'm sick.

Yes because I was unable to manage my eating disorder without severely impacting my quality of life. I was destroying my relationships, completely disconnected and disengaged due to depression and anxiety and all the ED related fears.

Yes, I no longer use any behaviors, and have been able to reach and maintain a healthy weight for almost a year.

Kind of: it's better than it was, and I've made the mental shift that I want to get better.

Not formally, I haven't come to anyone with my bulimia but I'm doing my best to stop it.

Yes but it is in a standstill. I'm not very motivated.

I guess I'm in recovery -- it's hard to be in day treatment and not consider yourself working on recovery. But at the same time, I don't really feel altogether motivated to change (hell, most of the time I don't even believe I have an eating disorder). I'm in treatment because it was that or more or less imminent death; I feel like I can't completely consider myself in recovery because I want and miss my ED.

I guess you could say I'm working at recovery, but am nowhere near recovered. I am in outpatient treatment, rarely acting on behaviors, but my intentions and thoughts are severely disordered. Ambivalence is a good description on how I feel about recovering.

I feel I am in pseudo-recovery; I eat well and my weight is normal, but I still feel huge every day and would rather not be eating. I have a lot of food rules that really control my life, and my self-image is the main determinant of how my day is going to go.

I'm unsure whether I would classify myself as in recovery. I do challenge myself to some degree, usually following prompting from my boyfriend or nurse therapist, but I usually stay within my comfort zone.

Sort of. I was and I wasn't and now I'm not trying to recover nor am I trying to relapse. Basically I'm trying to both sustain an unhealthy weight and no longer have an eating disorder, which never works.

Somewhere between relapse and recovery. I want to recover but don't have very much support or access to new/different coping mechanisms so I'm trying to do it on my own.

I am somewhere between recovery and relapse. That is to say I rarely engage in behaviours but am not necessarily making positive progress against my ED. I don't feel as though I have the resources (time, mental and emotional resources) to recover fully at this point.

Sort of. I have a health care team monitoring me and attend groups but I'm not doing well with recovering

2. (For those in recovery) What is the biggest challenge you are facing right now in recovery?

Disappointing myself.

Gaining weight, not freaking out and being able to *not* own a scale.

Having to take time off school and fear of weight gain.

Keeping away from destructive eating behaviours. Battling the demons in my head every day.

Lack of support.

Learning to be able to accept that I need to eat.

Making my own food. Stopping my thoughts about food/ the glorious scale.

My biggest challenge in recovery was accepting weight gain and changes in my body.

Not obsessing about food.

Seeing how disgustingly fat I've become.

The biggest challenge is not to binge when I'm in need of "comfort".

Weight fluctuations unrelated to disordered behaviors.

Letting go of secrets (diet pills, purging, anything).

Eating in a way that goes against my beliefs/makes me feel bad mentally. I followed the Primal Blueprint in the last year my disorder. I do believe a whole foods/non-processed diet is the most beneficial for my emotional health, but because I am anorexic I cannot follow any kind of food group "restrictive" diet without the "switch" being thrown and getting highs from the restriction, thus having a propensity to go unnaturally low carb for more of the high. But, when I eat processed food, to make socializing/cooking/etc. simple, my ADHD symptoms get horrible and I am far more depressed. I have a hard time coping with this. Second hardest is just maintaining the will to live, thus a will to eat food.

Believing that you deserve to eat, and that eating just one 'bad' item won't make you fat or ruin your progress.

Force of habit; having to keep remembering about my other triggers (being tired, working through lunch).

It's two-fold. I also have severe emetophobia (fear of vomiting) which means any teeny tiny instance of possible sick-feeling terrifies the hell out of me. . . and thus the usual gastric distress that goes along with the physiological recovery from AN is like a thousand times worse. And those gastric problems - stomach upset, gas, constipation, etc. - and not being able to eat more than about seven different foods and such just make it so damn hard to do the one thing I need to do, which is eat.

I've found that once I get into a routine (nothing strict, just approximate meal times and eating frequently enough) eating enough wasn't too difficult, and my difficulties have arisen more with body image, which I never felt like I struggled with too much when I was actively engaged in eating disordered behaviours. I feel awful about my body to the point where I often think that ill health is worth feeling more at ease in my own skin. This is complicated by the fact that I'm trans, and a large part of the reason I began to engage in disorder behaviours was to try to repress puberty and lessen my dysphoria.

I am fighting to let go of my eating disorder while still fighting to hold on. It is exhausting, frustrating, and confusing to have so many conflicting motives, desires, and thoughts. No matter what choices I make, I feel both proud of myself and horribly guilty.

Feeling fundamentally flawed ("I'll never get over this"), feeling worthless, feeling unable to cope with all of the emotions/memories/etc. recovery brings up.

Finding food that doesn't make me sick. As a result my house is stocked with like, 4 different types of bland cereal.

The only support group or eating disorder group therapy is eating disorders anonymous which isn't therapist led or started with any direction and since it's at an inpatient facility it often centers around very specific unhelpful topics for anyone outside of it, like fear of a meal plan being made. For someone outside, we want to talk about things like continuing recovery and interpersonal relationships. In general, finances makes therapy and alternative treatment options difficult. Thankfully I had my refund check from school but now that I used it all, I can't afford to continue therapy as much as would be liked, but thankfully I'm healthy enough to where it's ok.

Going from 'getting by in life with an eating disorder' to 'possibly doing very well without an ED'. I've reached a level where I can function, physically and mentally, and I struggle to see how my life would be any different if I stopped purging etc. altogether. I've fully accepted that I need to eat enough to stay healthy and do not try to restrict, but find this impossible without careful planning.

Dealing with physical gaining and learning not to channel emotional stress into restrictive behaviors.

It's really hard for me because I'm still overweight (250lbs). It took years for someone to even believe me, and I still have every doctor and human being telling me I need to lose weight to be "happy" or "healthy".

Coping with the past and my emotions without turning to other forms of self-harm, and I guess, perhaps adjusting to the fact that actually I am beginning to be ok with being a higher weight. I feel fairly ok with it and that in itself is hard to adjust it/ I find myself doubting and questioning the fact I feel OK. I feel like I shouldn't feel OK!

Trying to learn how to eat intuitively/somewhat 'normally' after almost a decade of restricting and bizarre food rituals.

Perfectionism. I've found that when I throw myself into my studies it is all I want to focus on, and my mind goes to places that seem very familiar to me (in a bad way). It is not easy to avoid over-exercising in particular when I am trying to quell my anxiety and perfectionism. There is also a very fine line between using exercise in a positive way and over-doing it, for me, while exercise can of course be a good way to mitigate anxiety and perfectionism, I struggle to not over-rely on it. This is much harder than continuing to eat because I know for sure that not eating will make me feel crummy whereas it is easy to convince myself that exercise could never make me feel crummy.

Body image is a bitch. It's so hard to have to physically face yourself and see your body go through changes.

Facing the emotional baggage that caused or perpetuated the ED and finding the courage to ask for help.

Growing out of my clothes and my "high" BMI. My eating disorder constantly tells me I was never thin enough and should shrink back down to the underweight category and be able to fit my size 4 clothes again.

Sticking to a meal plan/schedule. If I stray from it, even for a day, I feel the ED-related thoughts tend to increase.

The largest challenge I face is complacency. I am a highly functional anorexic and the automaticity of my eating disorder behaviors make it difficult to realize how much ED impacts my life and my relationships with others.

3. (For those currently *not* in recovery) What is the biggest challenge you are facing right now in getting to a place where you can begin (or resume) recovery?

Access to more treatment when I am not severely ill.

Ambivalence is my biggest obstacle to recovery.

Becoming comfortable enough with my body to recover.

Convincing myself that I deserve happiness.

Financial barriers to treatment.

Finishing school and finding time to devote to getting better.

Losing my identity and my best friend... if that makes sense.

Motivation to try harder on my own .

My own mind; I do not wish to recover. Ever.

Not wanting to gain weight.

Accepting that I deserve health, accepting that my self-worth is not intertwined with my weight.

I don't have anyone outside of the eating disorder/mental health bubble to talk to.

The fear of being fat again.

Because your body goes through such trauma, you get sick very easily, which can put you on hold with exercise - something that keeps you sane when recovering. That's the hardest, getting on a roll then getting sick.

I don't like the weight I am at. I feel I cannot stay at this weight and be okay. It feels like it will be wrong. Forever. At the same time, I know losing and at a lower weight will still probably suck and feel wrong.

The biggest challenge, since I've tried to "recover", would be having the proper control with my food intake and going along with what I plan. I would have a great and healthy meal plan for the day and lose complete control right when I start eating.

I am still struggling with the thought of gaining weight, which would mean regaining womanly curves and all that bullshit.

Well, I don't exactly want to recover at the moment. But, I definitely want to be recovered by the time I graduate from college, and I have a feeling it's going to be a long battle. The way things are going right now, I'll probably have all sorts of health complications, and I'm so stuck in the anorexia-type mindset that I can't even begin to imagine thinking like a "normal" person, and having a "normal" relationship with food.

Finding motivation to change. I feel like my "routine" works for me; I do well at university, I have a boyfriend etc. It's like some part of me tries to convince me that recovery won't make me feel any better, I'll still feel depressed because that's just who I am.

No motivation to recover. Perhaps denial as well. The usual "I'm not sick enough" thing. No one in my family or friends circle seems to think I need help either.

Coming to terms with gaining weight and the fact that my body will not healthily maintain at the size I consider ideal.

I make progress and feel better about myself and just when everything is okay I get a craving to binge and purge. Binging and purging make me feel like I have control over my body and what I do or don't gain. I know that isn't true though.

No one knows the truth how bad my eating disorder has gotten, and I don't want to tell them. I

also don't think I deserve recovery.

The fact that I will be accepting myself for what my body is naturally is what is stopping me from returning to recovery.

Getting full treatment on my tumor. I go to an out-of-state college and can't regularly go to the hospital. I also don't feel comfortable talking to any counselors or the health center on my campus, even though my boyfriend works there and assures me it's safe. Social anxiety is a huge factor in my choice to not recover.

4. (For those who have been/are in recovery) Was there something you thought would be very challenging but turned out to be fairly *easy* (or easier than you had expected)?

Facing my body. The first few months of changes which involved restoring an adequate amount of body fat for a female body was REALLY fucking hard, but once I accepted the fact that I need more than 5% body fat to function, the rest of the gain didn't bother me. My shape changed drastically in the first couple months and now I'm the same shape regardless of gain, which I was not expecting and has made it really easy to cope with.

After I decided to start the path to recovery it was easier than I thought to stay true to that decision and not want to go back.

I think that it's all been easier than I expected. . . or actually, I expected for the weight gain to be the hard part, and the psychological part to be easier and it has turned out to be the other way around. I've also found that eating 'fear' foods, although not easy, gets easier with time and is never as bad as I imagine, even the first time.

It was all as hard as I thought.

Not really it has all be hard.

Not really. Everything about recovery was overwhelmingly difficult for me, to be honest.

Everything I've experienced is challenging

No, it all sucked. . . and if it was "easy" at first, it then gave me guilt and anxiety over it being easy (making it not easy).

It's fairly easy for me to be happy. I never thought I could wake up and look in the mirror and say, "I am good, today is good, everything is good." I never thought I could be happy, and I am. I'm so grateful.

Previously (not this time around): Eating in treatment. Getting external permission to eat made is SO MUCH EASIER than I thought it would be.

Eating! I love food: shopping for it, cooking it, eating it. Being 'officially' in recovery gave me permission to do these things, which my eating disorder took away from me. Once I had this permission, eating became a lot easier.

Once I decided I really wanted recovery, it still took me years to actually force myself to eat more, because I was so terrified of the negative emotions. Once I did it, I realised it wasn't really as bad as

I thought. Scary and anxiety-provoking, yes, but not horrific.

Eating over 2000 calories a day. The encouraging recovery blogs on Tumblr who say you should eat 2500+ a day really motivate me to get the calories in and my metabolism sped up again so I can maintain my weight while eating lots of delicious food. Also accepting myself and my body; I no longer have a desire to be thin.

Eating out in restaurants, strangely. Maybe I just got used to it?

Once the initial shock of eating more was over, it was easier to keep eating regularly than I thought it would be.

Gaining weight has been too easy.

Following a weight gain meal plan without bingeing.

Getting emotional and financial support from my parents to seek treatment as an adult was easier than I expected it to be. We've all changed a lot since I first started dealing with my eating disorder as a teenager.

Grocery shopping.

Journaling.

Not purging was surprisingly easy. Digesting food, however, was difficult.

Well, initially in treatment I was there for anorexia, and started my recovery. I made a lot of behavioral changes and was doing really well, but ended up relapsing into purging disorder. I don't really consider myself in recovery from anorexia at this point, although I recognize that I have a very stereotypical anorexia personality, i.e. very controlled rigid inflexible perfectionistic, but it did think if I was to stop purging or even lessen it, it would be really challenging to not swing to the anorexia spectrum again. It turned out that by working in my purging, I wasn't tempted much to start restricting again and obsess over the scale. I thought I would entirely reverse but instead it's been consistent.

Stop weighing myself every time I went to the bathroom!

Giving up my scale at home. I really thought I'd lose my mind not being able to weigh myself, and only getting weighed when I see my doctor (usually every two weeks). . . but after the first couple of days, it barely even bothered me at all and I'm glad I did it.

Being honest with treatment providers.

Talking about it once I opened up.

I thought opening up to others in recovery (in groups, online. . .) would be hard and triggering but it's turned out to be the best part of recovery.

Discussing my struggles with a psychologist was not as challenging as I had anticipated. He was very understanding and non-judgmental.

Telling my partner! I thought it would be stressful to tell them because I've never had a partner who was understanding/not terrible but she's been fantastic and very supportive.

I guess the only thing that wasn't as challenging as I thought it would be was being completely

honest in treatment.

Yes, telling those close to me about my recovery and what I am doing to sustain it. I was anxious but they were and are so supportive.

Scaling back to a healthy level of exercise was easier than expected and almost a welcome change.

Tackling some fear foods

Fear foods! I just need to get the food in front of me and venture to eat a bite. They truly aren't dangerous. (If a bagel bites you back you know something's wrong.)

I thought fear foods would be more difficult to challenge. I had always heard of people crying when faced with whatever food they feared, and while I certainly got anxiety and struggled at times, it wasn't that emotional.

Eating foods I previously thought were scary - I always figured I would struggle with specific fear foods but have found that I have little anxiety relating to any food in particular.

Before residential treatment (even during and after for a while) I didn't think it would be possible to consistently eat foods that I didn't consider "safe". By forcing myself to be exposed to them, though, it became easier each time.

I thought facing fear foods would be more challenging, but I found that I was able to eat almost anything. However, my intake has become significantly more restrictive in this relapse, so re-introducing "real" foods may be more challenging in the future.

5. (For those who have been/are in recovery) What has been the *most challenging* part of recovery? Is there something you thought would be much easier than it turned out to be?

Admitting and accepting the fact that I do have an eating disorder.

Allowing others to hold me accountable.

Beginning it, and not lapsing during times of stress or bad body image.

Changing the way I think about myself, my body, and eating.

Dispelling fear foods, that never really went away.

Eating so much in one day. It's a lot more difficult than I anticipated.

Gaining weight and not relapsing was hard.

Giving up throwing up is just not something I will ever do.

Loving myself and working through tough times.

Most challenging is trying to eat more consistently, it's just overwhelming.

Reinventing a new life.

Removing yourself from the environment.

The most challenging part is knowing you're gaining weight and being unhappy in your body.

I thought I'd just be able to stop.

As I mentioned above, the whole "oops your digestive system forgot how to function" thing. So many foods I used to love, if I try to eat them now, it's like my stomach thinks I'm eating wood chips or poison or something. I had no idea about the extent of atrophy of your basic bodily functions. No one talks about that.

To eat junk food without feeling the need (or the duty) to restrict or burn it all in my workouts.

To start was very challenging. After a few days/weeks without purging I really wanted to show myself that I can do better and better, after every relapse.

Stopping exercise was much harder, and continues to be more of a struggle. Then again, I did expect that.

I thought gaining weight would be easier than it has turned out to be. The fear of the scale holds me back from eating enough to gain weight.

Not attributing recovery with weight. I always struggle to remind myself that my physical weight is not necessarily an absolute indication of how well I am. I can be in a good place physically and still be sick in my head.

I thought the actual eating would be a lot easier like 'oh you'll finally get to eat all the foods you used to love again' but I haven't hit the point where I can actually enjoy food yet, even the things I used to love I'm still having to force down.

The most challenging part is letting the bad thoughts pass. They come and they are there and they are difficult to ignore, but I'm learning to recognize them as valid and deal with them in a healthy way!

Gaining and accepting weight gain. Breaking out of really rigid patterns. Eating and gaining was too easy.

I thought committing myself to recovery and sticking to it would be easier. I'm normally so motivated and such a hard worker, so I thought once I decided I wanted to get better I'd just be able to stick to it and move forward. I wasn't anticipating relapse.

When I first started working on recovery, I naively thought that it would be easy to keep going with it. I didn't expect to never relapse, but I never thought I might have a relapse that would have my disorder get worse than it ever had been.

Actually stopping purging. With going back to treatment I really expected it to be very mapped out with DBT skills and a trajectory that made sense. DBT skills had really helped me to change my anorexia behaviors, but I never found anything to really stop my purging like I'd expected it to. More or less I found ways to be more aware of when the feelings were building up and how to try to prevent it, but once I want to purge, I never really found anything fool proof that really consistently helped.

Feeling confident about my body was the hardest thing I've ever tried to do. No matter what I did, the only thing I could think about was my stomach jiggling and my thighs rubbing up against each

other.

Gaining weight is the most challenging because of thoughts/feelings it brings up regarding my body and past sexual abuse. The more weight I have, the more aware I am of my body.

Simply eating more was a lot more challenging than I thought. In the beginning, every meal was an inner war because I was certainly hungry, but I was still pretty desperate to die (starving to death was something I was drawn to as if a survival instinct. It was like I was in a 'mode' to do it) so the feeling of having adequate calories in my system really threw me off. There was a lot of sobbing between bites. After that, reversing the digestive distress/gastroparesis took a LONG time and was a lot more painful than I expected. My tolerance of starch/sugar was so low that a single bite of pita or sip of milk had enough carbs to give me stabbing cramps and fever.

The rapid physical changes which occur, the feeling that 'no one understands' the immense challenge of what is such a mundane task for most: eating.

I think the most challenging part has been not using other forms of self-harm, not replacing restriction and weight loss with another way of harming myself. It's also been difficult to acknowledge parts of my eating disorder that are still a problem now I'm a healthy weight, I kind of think 'I'm a healthier weight now, so I can't have a problem' which leads to me not talking about or seeking help for problems I still have, or minimizing them. It's also been really hard to get my head around the fact that a minimal healthy weight may not be a weight that enables me to reach the place I want to be, and that my healthy weight may be higher than the minimum. For a long time I was adamant that I would get to the magical BMI number that takes me into healthy but would not step over it, at all, and I'm beginning to learn and accept that to have the healthy relationship with food I want, and to psychologically recover, I have to go higher. Another hard thing is seeing on the online community, people discussing 'real' recovery and feeling inadequate because of this.

The most challenging part for me was dealing with the intense emotions that came with resuming normal eating. I hadn't expected that to happen at all, so it was a challenge.

Everywhere you turn there are women with undiagnosed disorders. Giving up snacks and sugar for Lent, exercising until they get to minus calories, these people really trigger me and they are everywhere.

My mother. She's on a health kick right now and she doesn't seem to understand the whole "please don't tell me about calories" thing.

Nearly everything about recovery has been more difficult than I expected it to be. With this relapse, things went downhill so quickly that I assumed I could also turn them around quickly. I was pretty deep in denial when I started treatment. I am amazed by how hard my eating disorder fights back every time I make progress in recovery. It is absolutely relentless.

There are still some behaviors that I struggle with daily. For example, I have to use certain utensils when I'm eating at home. If someone else in my family sets the dinner table and they give me the "wrong" fork, I feel like I have to get the one I'm comfortable with.

The recovery process involves constantly working to maintain it, and sometimes that can be exhausting. For all of the days that I feel happier and healthier, there are just as many when I feel pretty awful.

Feeling comfortable in my body at a healthy weight. Appearance-wise, I can tolerate my weight/shape, but I am constantly aware of how bulky and heavy and lumpy I feel when I make any movement, still, after 2 years of being at this weight. Eating enough to maintain my weight. Stopping (binging-)purging. I was told many times that if I was weight restored and eating well that I wouldn't need/want to do this anymore. It happens a less, but very easily escalates to pre-recovery rates if I'm not careful. In nearly 3 years, I have only reduced the number binge/purge episodes per week by about 40%.

6. What are characteristics of good eating disorder clinicians?

Compassionate, understanding.

Empathetic active listeners, kind, but willing to challenge when necessary.

Honesty. Trust. Just being 'human'. Understanding, but challenging. Humour.

Listens, non-dismissive, but knows how to challenge the ED's bullshit.

Not patronizing, patient, non-antagonistic.

Passion.

Patience!

Patience, understanding of intersectional issues, confrontational when necessary.

Someone who isn't condescending.

Someone who notices that I actually have a problem even though I am normal weight.

They let you re-enter recovery at your own pace and don't force anything on you.

Understanding. Patience, I don't know.

Understanding. Not condescending.

Empathy, understanding, personal history, willingness to challenge patients.

Patience, no bullshit, good sense of humor.

Listening and treating you as an individual. Being human, and realising that you are too. Losing their temper, getting annoyed, laughing with you: treating me as a person with ED, not as ED. (He's literally pulled his hair out on occasion...)

Understand how complex body issues can be. For me, size, weight, gender, medical history, work history, abuse, sexuality, and more all end up coming up in eating disorder treatment, and I need providers who can honor the intersections and help me parse out what's going on and how it started and what I want to do about it. And compassion and patience and steadfast nonjudgmentalness make all the difference.

They've got to take a personal interest in my life with absolute sincerity, genuineness, unconditional acceptance, empathy, and no judgment. I really appreciated the way that over time my therapist has shared disclosures with me that have helped me to relate and connect what I was saying. Following that, the therapist needs to be willing to change directions and try an alternative. No one modality works for everyone and often times due to the complexity of eating disorders, we need multiple approaches. I needed to do acupuncture for my depression and I needed a very experiential model to process and express my emotions while actually connecting my emotions with my experience. I needed a cognitive approach to address distortions and thinking patterns.

Not patronizing, not boxing people in, not demeaning, not deciding that someone is sick and can't improve, good at listening, not making 100 triggering comments...

Compassion. Understanding. FLEXIBILITY - if you work with me, I will be far more willing to work with you. Continuity of care - in Canada, a huge issue.

Empathy, lack of judgement, an ability to both listen and support without necessarily giving advice or instruction. Also, a certain amount of personal experience can be a huge plus -- it doesn't have to be with an eating disorder, but having experience with some of the other issues that coincide (comparison, low self-worth, perfectionism) can be enormously helpful.

Approaching the person properly, based on their age, gender identity, etc. Recognizing the patient's individuality and tailoring treatment based on what works best for them, not based on what a textbook says ought to work. Being understanding and not dismissive of the patient's fears.

I don't have experience with eating disorder clinicians, but I would assume that being understanding and not standoffish would be good characteristics.

Accepting. Good communication skills. Well educated on eating disorders. Patient. Firm. Unwilling to give up on someone no matter the circumstances.

They need to be kind of firm and pushy but in a *loving* way I guess like its always easier for me when there's a real rooted feeling of them actually caring about me.

Caring (actually caring, rather than just pretending to care) and non-paternalistic are the traits that jump out at me right away. One that recognizes that not everything is about the eating disorder. Sometimes anxiety is just anxiety.

1) Ones that do not focus on weight, especially as an indicator of how well you feel mentally. Ones that can read between the lines and recognise what you are trying to say but the ED won't let you say. 3) Ones that do not assume things about you based on your diagnostic label (e.g., that if you have AN-BP that you are either 'an anorexic that sometimes gets too hungry') (i.e., whose binges are small and subjective) or a 'bulimic who happens to be underweight (i.e., who binges a lot and purges a lot)', and so end up only treating a symptom. 4) not specific to ED clinicians, but ones that remember what you tell them from week to week so can spot patterns and make links.

Competent and experienced, non-judgmental. Treating me like a person rather than a patient. Someone that can come up with ideas when one thing doesn't work.

People who don't judge. My ED has a huge amount of shame attached, and I am avoidant and isolative as a result. The best clinicians I've encountered are those who don't feed the shame I already have by listening and accepting what I have to say.

Empathetic, being non-critical, never belittling the struggles you are having or labelling them

illogical/silly etc.

I haven't worked with any, but I'd say controlling how fast/much you gain or setting maximum calories is completely counter-productive.

I would like a place with a relatively high degree of free will. I'm frightened of being controlled or force fed, it would send me into a panic. I want to feel safe and loved, not judged.

Not pushy but challenge you when you need it. Do not "tell you what you need to do" per se, but allow you to come to the realization of what you need to do yourself.

Knowing that the ED voice wants us to think it is in control but still pushing the idea of challenging those ED voices with my own. Helping me to realize I need to separate the ED thoughts from my own.

TRUST/not lying. The ability to learn what their patients like and don't like and DO NOT PUSH ideas your patient does not find helpful to their recovery. If a patient does not feel as though a diagnosis fits them, BLOODY RECONSIDER WHAT YOU'RE SAYING. Don't say triggering things about your own lifestyle. Don't freaking try to sell your product (book, for example) to me. Especially if it isn't even for my eating disorder.

I believe that working with eating disordered clients is all about striking a balance between compassion and toughness. I appreciate therapists who can make me feel understood, validated, and valued... while still calling me out on my bullshit.

A good balance of nurturing but tough. They need to be able to be a hardass with the "Ed" part and soft with the patients true self as the patient learns to discern the difference and gain an identity. I also think it's important for clinicians to be authentic, sharing parts of their life and why they are passionate about helping.

I have minimal experience, but I had 3 separate therapists tell me I was lying because I have depression and I just want attention and fat people can't have ED's. So anyone who doesn't do that is perfect.

Nothing. Eating Disorder clinics in general create feelings of obsessiveness among patients by following the fundamental protocols which they deem necessary.

Complete understanding that eating disorders are not physical illnesses and making patients see reality.

Understanding, compassionate, honest. I think some of the best therapists I've had have been unforgivingly blunt. . . sometimes you need to be called out on your own bullshit.

Someone who is trained in treating ED, and who will push (when necessary) and listen without judgment.

No bullshit! Be straightforward and honest about what I can expect in recovery or what behaviors of mine are disordered.

7. What is the most helpful thing a physician/therapist/healthcare worker ever said to you?

Consider this a trial period. You can always go back to your eating disorder if you hate it.

Fear doesn't leave on its own. You have to open the door and escort it out.

I understand.

What are your long-term goals?

You exercise as much as an Olympian and hold a job, you don't need to do everything so much.

It's okay to not be okay. you'll get there one day.

I'll get back to you when a health professional actually says something helpful to me!

It is going to get worse before it gets better but it will get better if you try.

Life is not black and white. True happiness lies in the grays.

Nobody really says anything to me about it.

Reach out in your lowest point.

That I am not my eating disorder.

Try journaling what you feel each day.

You are wrong.

Everyone eats and everyone eats 3 meals or the equivalent. You are not the exception and you won't balloon.

My GP had no experience of eating disorders and was usually just very honest. I told her how many calories I was eating and how much exercise I was doing and she shook her head and exclaimed, "I don't know how you move!". It didn't last, but it did help me realise that what I was doing was quite extreme / not normal.

Don't say "diet". Even if it's not about you, don't say "diet". At most say "healthy lifestyle", because that's what we're aiming for. "Diets" are about weight loss, a healthy lifestyle is about what's best for you.

I believe you. Anyone can be sick. It takes a strong person to be healthy. He said this when he officially diagnosed me. I've never been so relieved in my whole life.

When you look into the mirror in five years, who do you want to see looking back at you? Start becoming that person today.

Heart doctor: She cried and shared with me how her close friend from college died of anorexia and she prayed and wanted me to get help and get better more than anything because I have so much to live for. Primary physician: He normalized my struggles and shared that a girl in his church had struggled with it and he often saw how painful and difficult it was and that it wasn't my fault for it. He said he wanted me to go to treatment and get better and take care of myself because I deserved it. Knowing that I am a Christian, he expressed that while many in the church don't understand and often say the wrong thing, he knew that God loved me and wanted to see me well. Nurse: she asked me what it was like to have an eating disorder. She was genuine and I appreciated her honesty in saying she has a close friend with bulimia and didn't understand it. I appreciated that she didn't make assumptions about me or who I was. Acupuncturist: He normalized everything I said and did and accepted where I was at. He explained the biological implications and ways that my physical body made sense for shutting itself down. He always explains everything really well and answers my questions without frustration and hesitation. He often tells me he believes in me and my recovery and thinks in time I'm going to look back and see just how far I'm really coming. Therapist: Tough question, I feel like there's been a lot over time and it's just compiled into an understanding that she sincerely cares about me. Recently she had told me that I'm extremely intelligent and she knows that whether I admit it or not, I'm very creative and have a lot of capability. I tend to agree with Yalom in this though, it's the positive supportive statements she's made over time. For example, the way that when I felt like I came to the end point of where I'd ever get in my recovery, she supported me by exclaiming that we would try whatever alternative we had to. We would try equine first and if that didn't work we would move on to EMDR and then couples therapy and then something else and whatever we had to because she believed I could do this.

I don't think I can come up with any one thing in particular, but I've been seeing the same psychiatrist for a few years and the fact that I can express my ambivalence and desire NOT to recover has been so helpful because previously I would just lie to please the person. The fact that he has just been there for me to see, week in and out, no matter whether I am getting better or worse has been so meaningful and helped restore my faith in life and people. He never shows surprise, shock, or disgust at the strange things I think, whether these are food-related, weight-related or otherwise. Instead of being shocked/surprised when I tell him something embarrassing about my current life or from my past (e.g., abuse) I can tell he is just sad, which is immensely validating and reparative. In sum, having a person in my life who cares and is an unshakable constant has been very healing. This doctor has seen me through several hospitalizations and a serious suicide attempt and I feel strongly that I wouldn't be alive and where I am today (which, granted, is not perfect) without him.

My therapist in day treatment told me that I needed to start getting pissed off at my eating disorder. I did, and I greatly credit that advice to why I'm still alive.

It's not a like, deep or poignant statement, but being told that it wasn't just the calorie number that mattered but what kind of food I ate that would make a difference - explaining that I needed to eat more protein in order to help combat the gastric problems, which I had no idea about and which did help a lot. (Not easy as a vegetarian, since long before the ED, but still was able to help.)

Probably an analogy of sorts, about being like a child learning to swim, armed with rubber bands, dipping her toes in but then panicking and being too afraid to jump, even with the inflatables. Or a frequent joke where she will say, "And you haven't gained 3 stone" when I challenge something, or before a challenge she will say, "let's see next week if you have gained 3 stone" - it makes me laugh, and makes me see the reality I suppose, though I imagine this wouldn't work well with all patients.

What you're going through isn't normal and if you continue you won't have the opportunity to see

what being a "normal" teenager is like.

Nothing specifically. I worked with a therapist and requested we do not talk about eating disorder issues. We worked on CBT/DBT for anxiety difficulties and coping mechanisms for distress, and those helped a LOT. Like, I was able to continue my education and got my first job, and would not have been able to without these.

My therapist helped me to realize that many of the negative emotions I feel toward other people in my life are really misdirected. When I feel angry or irritable at someone, I'm usually really feeling angry and irritable at my eating disorder.

That binge eating and compulsive overeating disorders are just as much eating disorders and as serious as bulimia and anorexia. I felt for years that I didn't have an ED because binge eating is different from bulimia and anorexia. I've learnt since being in recovery support groups with others who have them, that we all share many similarities and they are all different sides of the same coin.

You can't live as a functional anorexic forever. You will recover, you will start bingeing, or you will die from starvation. If you don't choose recovery, your body will choose one of the other options for you.

I haven't gotten to talk with my psychologist yet, and all my physician has told me is that she "wishes I'd gain weight."

A therapist I adored once told me she wasn't going to sit back and watch me die, which was helpful to help me understand how much I actually needed more help. In treatment the ED specialist always told me I deserved more, it took a long time to really hear it though.

It's a disease, just like diabetes. Just like diabetes, you have to keep to therapy. Sounds weird but treating it like any other disease really helped me accept that I was/am a patient and that I need help, just like people with diabetes need insulin. Gave me some validity for taking up NHS services when I thought I was fine.

Albert Pujols strikes out 2 out of 3 times. If he had given up, where would he be now? No one remembers you for your mistakes; they remember you for your triumphs.

I don't remember the exact wording, but one of my former therapists helped me prepare to tell my parents.

I'm not mad at you. I really believe that you were doing the absolute best you could in that moment.

8. What is the most helpful thing a family member, friend, or partner ever said to you? (That is, someone who is not an ED professional.)

I hate your disease, but I'm never giving up on YOU.

I love you.

I really appreciate the effort you have put forth this past semester to be well.

I'll always be there for you, and you'll always be there for me.

If you can beat this, you can do anything.

You are good enough.

You're the strongest person I know, I'm so proud of you.

No matter how you see yourself, I will always love exactly how you look.

If we hadn't found out, I don't think you would've made the next 10 days.

I love you.

My boyfriend told me that he wants me to be able to not freak out when we go out to dinner.

Partner: "I don't know what to say, but I'll hold you however long you want."

That no matter what I look like I'm still going to be loved by them.

That they have faith in me.

You are beautiful no matter what weight you are. I will always love you.

You worked really hard to get your period back.

You're the inspiration for all your clients.

My mum and dad saying they love me is the most helpful thing.

I'm not sure of anything for this, just probably normal comments that would be said to anyone, rather than specifically because I am ill. Reminding me they care, that I'm their best friend, messages that they miss me, will always be there. Normal comments.

"Just because I don't understand doesn't mean I don't love you. I will always be here, and I am always proud of you" - My Dad

I don't know how "helpful" it was, but it made a big difference in finally feeling like someone understood and for me to expand on their understanding "I think I understand more now. I would sometimes say you'd have to put a gun to my head to get me to do something. It is like you have a gun to your head all the time." That was like "Wow, he gets it" followed by thinking about said metaphor and thinking "Yeah, it is like having a gun to your head, but the gun isn't loaded. It just has blanks. It threatens you, you go against it, it fires you freak out, realize you're not shot, calm down. You can learn to just keep going despite it. It always tells you the next one is real though."

My boyfriend, a pre-med student who works in the health center told me that he felt as though everyone in my life (roommate, friends, academic advisers) "already tells me what to do" and that "he doesn't want to be one more person trying to control me" that he'd rather "be there so I had someone to listen to but wouldn't give advice". I think that's all I've ever wanted is someone to care and listen, without judgement.

One thing comes to mind. My best friend told me that she felt like she lost her best friend when I relapsed. I was pretty deep in my eating disorder at the time, and that simple sentence reminded me that I was not the only victim of my disease.

Nothing comes to mind. We don't talk about it. It's never spoken of. My mom forced me to eat, and that was that.

You're stronger than you let yourself believe and I have faith in you, even if you don't yourself.

"Go away crazy brain, I want to talk to the real you". My partner and my friends say similar things on occasion: it's always reminded me that there's still "me" there; and I've been so scared of being nothing without my ED.

Honestly, it's just my mom telling me that no matter how long recovery takes, no matter how many slips or relapses I have, no matter what I need from her, she will be there by my side, supporting me in whatever way I need, for however long.

That it is okay to talk about it. Even if she doesn't get it, my partner has made it very clear that she won't judge me and that it's okay to vent to her.

I said I wasn't going to kill myself and my pastor said "but you are." Sometimes you need a slap in the face to bring you back to reality.

My mother, who also struggles with mental illness and chronic pain, told me to just get through the morning by getting out of bed and putting on pants - the rest of the day will follow.

When I was struggling to increase my eating and weight-restore and freaking out about tiny details of meals and needing it all to be 'perfect' and ritualised, my boyfriend said 'Eventually eating is something you're going to do 5 or 6 times a day for the rest of your life. Eventually you're going to have to get used to it. And one meal is just a drop in the ocean. You have a million chances to eat; it's not possible to mess it up'. It really helped me put eating into perspective at a time when each meal seemed like the end of the world.

A fellow patient described the ED unit rules as like road markings and the highway code. i.e. they are clearly visible, but whether or not we followed them or cut corners was ultimately up to us.

My husband has always told me that he will never leave me or stop loving me for being sick with this disease. The girls I went through treatment with are still very close friends and they've often told me that they are still here for me; they've seen me at my worst and they'll continue to love me through reaching to be my best.

Calling me out on my disordered shit when I need a reminder that it is actually disordered and not normal to think these things that I do.

I was telling my boyfriend that a part of me doesn't want to gain weight, and he said that that just seemed insane to him. It was a bit of shock because no one has actually said to me, "Your thinking is crazy and not real" which I think was helpful to hear.

I love you for you, regardless of how you look and when your illness drags you down, I want you to remember that. - My husband, we've been together 14 years.

So many people looked at my ED as something I should be able to control, so it took me by surprise when my first partner while in recovery told me how sorry he was that I had been so sick. The lack of blame was comforting.

My favorite blogger on Tumblr, who's recovered from her eating disorder, described weight loss/gain as "nothing more than a change in your relationship with gravity."

9. Was there anything that have been told during recovery/treatment (from family, friends, partner, or clinicians) that was really UNHELPFUL (but was probably said with good intentions)?

Just eat the food.

"Just eat". "Well at least it (my ED) is not serious".

"Well you're probably only about 15 pounds overweight!" -my mother

"You're looking so much better with a little meat on your bones!"

"You're really skinny!" so you can "Eat X/eat more/wear this/etc."

"You're too smart for this" "You look great"

Don't worry, you don't look like you have anorexia (this was at BMI <16)

A lot of girls would kill to be as thin as you.

About eating healthy or my family on diet

I was told by a doctor that I am in the top 77% of weight for girls my age. That was triggering.

If you're not hungry, don't eat (the ice cream)

If your stomach is flat you're not fat

My mom: "I'd rather not have an anorexic daughter."

That I wasn't eating because I was too tired to cook, so I just needed to eat convenience foods.

You just need to try harder.

You look so much healthier with the weight gain

You should do yoga

"I don't believe you can do this" said by a dietitian. Also when dietitians have treated me like I know nothing about food/nutrition/the body despite me telling them that I do. My nurse therapist telling me that if I'm not making progress while I am seeing her then there's nothing else she can do for me.

"You're looking so healthy!" "boys like curvy girls!" "you just need to eat healthy and exercise" "I've just started this diet and I really want to lose 5kgs. How did you lose so much weight? Can you help me?"

Thankfully my doctors have been excellent and they haven't said anything unhelpful or hurtful. From non-professionals it's the usual crap. . . probably the worst thing was, when I told my brother that he couldn't force me into a treatment program because I am an adult, he said "You haven't behaved like one." Like my ED was something childish, like refusing to clean my room or something. Just another example of someone viewing an ED as something you choose to engage in, rather than a disease you suffer from.

I've been called disgusting, told that I need an exorcist, blamed for pulling apart a family that I have nothing to do with, called unwomanly and ugly-- most things are not under good intentions.

"I think you're the perfect size!" [meant to be comforting, but said while I was at a relatively low weight due to relapse]

Yes, my therapist told me that awful quote "a moment in your lips, forever in your hips" after she told me I was looking so skinny, and after I confessed I was doing a crazy diet. That haunted me for years, because I was supposed to trust her!! Note: She did not know about my eating disorder, I've never spoke with her about anything food related, but STILL.

When I came home from treatment I relapsed. My weight dropped pretty significantly and my mom would occasionally fly off the handle about it. She would always bring up the amount of money my family spent on treatment and essentially was implying that I didn't give a shit.

"You're skinny, you are crazy if you think you're fat/hate your body. People would love to have your body."

I talked with one counselor at my last college and all she would do was ask about ED-related stuff. I told her at the start that my problem was symptoms of social anxiety, and my behaviors- at the time -were in response to that. But she really wanted to focus on "Everyone is beautiful" and "What would you say if your friend called themselves fat" and "How much did you eat today?" and it was absolutely not helpful at all.

We just want you to understand you're beautiful. How could anyone like you have an eating disorder and be suicidal?

In an effort to remind me to stay vigilant, a therapist repeatedly referred to me as "chronic." All it did was make me believe that I would never recover.

My dad told me I looked so much healthier once I reached that "minimal healthy BMI," and I relapsed within a week.

You don't look starving, you're not skinny and going to lots of appointments is too much hassle. You don't need to go to the doctor.

I hated hearing how much "healthier" I looked in early recovery! It doesn't bother me as much now that I'm fully weight restored. In my second week of intensive treatment, it seemed a bit ridiculous.

Psychiatrist: "But you look really good. Like some anorexics you want to take them homes and feed them a bucket of chicken wings but you look really good thin. Like I don't want to take you home and feed you a ton." I was very underweight. Nurse: "Have you tried weight watchers?" Mom: "But you look so good. So thin. Are you sure you need a hospital program?" A therapist: "You're a distraction to the group. I don't think you take recovery serious and your hopelessness is affecting their ability to recover." I was very depressed and sarcastic in group. We all laughed together but I think it could have been handled better. A therapist: "I saw you walking in campus and you looked like absolute hell" She also said, "Fine, be like all the other eating disordered people who just run away when there's a conflict," "So if you don't have any problems then why are you here?" "I don't think you even want to recover" and "People with eating disorders don't get better with a directive approach so I'm not doing that"-- this being right after I asked her to be more directive because it would help me open up more. Needless to say, that therapist and I didn't work out. Friends: "You've gained weight but you look good."

From a clinician: "I'm disappointed that you haven't normalized your behavior." Partner: "Actually, normal people probably wouldn't eat that." Friend: "You don't look like you've lost a lot of weight" (When I was at a BMI of ~15)

I had a therapist who knew I have bulimia and had anorexia in the past try and tell me how to lose weight to be happier. that was messed up. I cried for hours.

All you have to do is eat and not throw up. . . what I said back, 'if it was that easy I would have done it by now!'

Anything about weight, not needing to gain weight, you look fine at the weight you are at: at any weight. When underweight makes you feel guilty to gain, at a "normal" weight makes you feel like you shouldn't have a problem. Any stupid comments about food. "You don't look like you have an eating disorder"

1) "When are you going back to work?" From my GP who assumes that I can't work as a doctor with an eating disorder, or that I'm not competent to do so. 2) Another GP trying to do an in-depth assessment of my "support network" and making it quite clear that she was sympathetic about my (perceived) lack of network. A) it wasn't her place to do that, especially not in a 10 minute consultation with no time to follow-up or resolve the conversation. B) I don't have to have a social network that fits with her standards to be secure.

Loads of people have told me how good I look and how I look a 'healthy skinny'. To me, a 'healthy skinny' is a layer of fat all over and any fat is too much fat.

1. You'll never get fully better; anorexia is just something you're going to have to manage. 2. As long as you get to the minimum healthy BMI that's fine; you don't need to gain anymore or try harder to eat. 3. Everyone worries about weight and counts calories; that's not something you have to try to change. 4. Why don't you do [specific exercise type]; that will make you feel better. 5. [When weight-restored but still really sick] You look fine, I don't think you need to see a therapist/dietitian/I don't think you have an eating problem anymore/etc. 6. Don't worry, we won't let you get fat (like getting 'fat' was the worst thing in the world and all the clinicians would be watching and judging me if I gained more than they thought was necessary) 7. Oh so many more! but I don't want to spam.

I hear from treatment people and friends: just let it go. If I knew how to do that I wouldn't be in this position.

My best friend told me she was "offended" by what I was doing because she is raising a baby who has had to overcome a tremendous amount of obstacles in his short life and I was just "choosing" to throw mine away.

I've encountered a lot of clinicians who seem to have food baggage of their own--once, after I had told a therapist about a binge after which I had not purged (in attempt to cause less harm physically), she later referred to the incident as "pigging out." This same therapist consistently encouraged restrictive behavior by suggesting that intakes in the low-normal range (1000-1200 calories) qualified as overeating.

I think, before the professional I see now, I saw a nurse who said she wouldn't let me go over a minimal healthy BMI, and although it helped me at that time, it has caused problems now.

My liaison nurse: 'No one would guess you have an eating disorder just by looking at you. You just look like a cute little girl' (I was 25, my BMI was 15, and I was worrying that my boss / co-workers would guess why I was off sick so often). Friend: 'You're looking well - positively glowing!' (since when has a phrase reserved for pregnant women ever been appropriate to use towards someone with an ED?!) Psychiatrist: 'Are you suicidal? Because if you' don't want to die, then you'd better stop making yourself throw up' (I wasn't at that time)

My boyfriend is bad about things like "Are you sure you should eat that?" "That's a lot of food!" and whatever. Now he's on this wretched crash diet and only eats one meal a day, and he's all "I'm losing so much weight!" in the same breath as, "Have you eaten today?" But even then, it's so rare it's like he doesn't even know I have a problem still.

The first therapist I saw when I tried to recover several years ago asked me, after seeing my answers to the clinic's intake questions, how I could drink alcohol if I had an eating disorder. Needless to say, that added another thing to the "unsafe" list in my mind.

When I started to lose weight after years of over eating, someone said I looked so much better now, and was beginning to look 'human shaped'.

10. What role has your family (or friends, or partner) had when it comes to your eating disorder? Has it been positive, negative, neutral? How so?

Family has been positive.

I got really upset and defensive when my ex-boyfriend tried to help. Secrets keep people sick.

It balances out to neutral. In the end, the decisions are mine and I'm not easily influenced.

It was varied. My family has more or less given up.

My friends have tried to make me eat and I refused. My family has done nothing.

Negative. I've totally isolated myself because I've felt abandoned by everyone.

Positive and negative. Being able to express bad days helped but seeing them eat little didn't.

Positive my dad and boyfriend have really tried to be understanding.

Positive!

They don't know.

Well many people know/strongly suspect I have one but do nothing.

Totally positive, they totally support me and love me despite my eating disorder.

Negative. Nobody knows about my ED, but my sister feels my urge to stay fit and healthy and triggers me every time she sees the opportunity (by making junk food or teasing me or saying I'm a freak or anorexia just because I rather not to eat a hamburger). My mom's motto is: stop eating that, eat less, you all eat like pigs, you will get fat, you are all bones! you are so skinny! you don't need to eat more than a fruit, yeah, that'd be enough! I bought this diet book, take a look. DIET, omg I'm so fat, but so are you, you need to stop eating this, I'm going to have French fries for dinner, want

some? (LIKE WHAAAAAAT? she makes no sense to me)

Most people don't know - only a few close friends. They've all been pretty accepting and offering me hugs and support on really bad days and let me vent to them and just get out all the excess emotion that used to build up until I self-harmed. Talking it out has really helped me and I have not self-harmed in 3 months and, before that one night of relapse, it had been 5 months.

My family is inhumanly rude and unhelpful, prolonging the tendencies. My friends have been understanding but will me to recover. My boyfriend is very supportive and often convinces me that once I recover, I won't have to worry about how I look.

Sadly I do not get along with my parents so they are more of a hindrance than help. That being said, they support me financially & without their assistance I would have been unable to afford the level of care I received. My friends were immensely helpful & motivated me to recover so I could feel more "whole" and participate more in social situations (especially those involving meals).

Family - Majorly positive; friends (on Tumblr) - Majorly positive. They have all (family and friends) helped me when I've regressed to come to my senses. They are caring and understanding and do what I need no matter how odd it is.

They don't acknowledge the eating disorder, but occasionally try to substitute higher calorie foods than what I eat when I eat with them (e.g. adding cheese to things or buying full-fat versions of things).

My family has had mostly negative roles. They tend to dismiss my struggles and are very triggering in their behavior and talk about food and their bodies.

I have many family and friends that check up on me, but I block them out because I know I'm not making great steps to get better.

I've touched on this a lot, but I've had both - my parents let me move back in with them (which meant they had to move to a bigger apartment) and have told me I can be here with them for as long as I need, and have done their best to make me feel better and help me not hate myself for what my life has become and for everything I've lost. My brothers were frustrating at first but eventually learned a bit more and are better now, though not all that present. My friends have been hit or miss - a couple of the closer ones have been loving and supportive, a few others just don't seem to get it (one, who lives in the same town, asked if I wanted to come to her gym with her. . . like yeeeeeeeah, an exercise regimen is a great idea for someone in AN recovery).

Only very few of my friends know about it but only one really seems to care and tries to help. One of the other pretends to care when she really doesn't and it's very obvious. My family don't even know what an ED is, but I've told them to stop commenting on my eating habits but they don't care. Obviously they don't understand and apparently think I'm getting too thin which medically I'm of average weight.

My family doesn't know, but they can get a bit suspicious about it sometimes, which scares me. My friends are pretty much used to it, and my boyfriend plays a really positive role. He tells me on a pretty regular basis that I would look perfect no matter what my weight, and all that other stereotypical stuff, and he's just generally really supportive of my ED.

My family has been integral. They have supported me, pushed me, fed me, held me. The friends I made in treatment have been my lifeline - I have heard horror stories about relationships made in treatment being triggering and toxic but the women I met have held me up and encourage me every

day. Also, my horse has been a life saver.

My friends have played a great positive role in my recovery, for they are the ones who offered me their unconditional love and support (unlike my family).

Parents: mostly negative. They don't get it and haven't been helpful. They're very in denial and defensive. We did a family session his summer and my mom has made real effort in respecting my boundaries. She has also made efforts in ways she knows how to support me, like sending money for therapy at random. My husband: positive negative and neutral. Initially he was negative because we fought all day every day until treatment and then he became more neutral negative because we didn't talk about it until I was at a healthier place. Then more positive because he would help me meal plan and eat with me and play games to distract me. Then neutral as we faded away from disorder talk. At relapse it was negative and neutral. Initially he freaked out and cared and we fought a bit and eventually stopped talking about it. We don't know how to communicate about purging. At this point, we just don't.

On the whole, negative. My broken family contributed to my ED by creating fractures in our relationships and enabling my isolation.

My friends downplayed the seriousness of my illness and essentially told me not to seek help after I confided in them about my ED behaviors and cognitions. They perpetuated my illness by frequently commenting positively on my low weight and acting like I was being attention-seeking for thinking that something was wrong. My family was too uncomfortable to say anything about my restrictive behavior and allowed me to become very ill without intervening.

Family haven't really helped. They paid for private treatment at an ED clinic, but when I wasn't 'cured' they did lose faith. I have also had a lot of people blame me. It must be my fault- can't I just stop eating? I've heard this shared by friends in recovery who have Anorexia, that people have said can't they 'just' start eating?

Family, eh... Kind of supportive in saying I need to help, but completely frustrating with the stupid things they say, and lack of desire to understand or be educated about EDs. Friends, can be helpful, though can say stupid things.

Unless I'm hospitalized, my family looks the other way. Can't acknowledge what they don't want to see.

Probably negative. My mom has BED and I've had ED buddies and friends who encouraged bad behavior, a boyfriend with orthorexia who made a lot of judgements. Definitely negative.

Relatively neutral. I renegotiated many relationships in recovery, so some people came to play less of a role in my life while other more so. I needed to break up with my boyfriend at the time in order to stop leaning on him for support, and that was very necessary. In recovery he has become a friend and is quite good at listening without judging. My dad has played a somewhat negative role as he exercises a lot and (I think inadvertently) places a lot of expectations on me, particularly academically. This is more so by observing the way he reacts to my brother, who is less academically inclined, and his over-celebration of my achievements, which leads me to think that if I were to do less well (scholastically) he would be disappointed in me.

My family was often very triggering, but they did provide the financial support for me to take time off from school without working and receive treatment. Most friends did not know how to be supportive, and some used my mental illnesses to dismiss me as dramatic or write all my problems

off as due to "hating myself" or "hating my body."

My family has played a fairly neutral role. My mom tries to be helpful but she's not very good at it and my dad doesn't actually know about this

Partner & friends: really supportive. Able to see the difference between "me" and "me with ED". Most importantly, letting "real me" lose my temper, get cross, and behave like a real human being. My parents don't know: they think that mental health disorders are "over-diagnosed". Most surreal conversation: having a discussion with my Dad about the new DSM criteria "over-diagnosing" people having just been started on fluoxetine.

Mainly neutral/negative. Some friends have truly stood by me. My family does not really know what to do /is frustrated. They probably do not intend it but it comes across like apathy / frustration for the most part.

My mother spent my whole life telling me to love myself, then turned around and would talk about how ugly and fat she was. I was taught that every body is beautiful except for your own. My stepfather was very emotionally abusive. He would force me to eat because I "can't just live off cigarettes and coffee", but then yell at me for eating and being fat. My boyfriend is neither good nor bad for me, we don't talk about it ever.

Positive - they've been understanding, and I think they're proud to see the progress I have made despite the horrible times that came first. I suppose my recovery is as enjoyable for them as it is me.

Father positive. He was the inspiration and motivator for me to get healthy again. Mother negative. She was the depressive manipulator that supported alone time.

I have only told 2 people about my disorder. I don't speak to one of them anymore, and the other was concerned and was there for me but we don't speak much either.

My parents have been good supporters being available to talk to and supporting my therapy. Some family members have negatively affected my eating disorder focusing on diets and calories.

I think I answered this on your blog before, but: My mom and step-dad have been completely supportive through the whole recovery process, though they aren't active in it outside of paying for our groceries. My mom has anorexia and many disordered habits, but thankfully she never impressed these on my when I was young like I know a lot of other people have experienced. She used to be a body-builder and trainer, and when I first started restricting and asking her for workout plan/diet plan help, she was extremely reluctant and only told me tips on how to lift weights (gain). I am very thankful for this. She and my step-dad were very concerned every time my disordered habits got stronger, but they never did any intervening outside of offering to go out for dinner/dessert and stuff like that. I actually think it was better this way, because I am very sensitive to people controlling me, so had they asked me to or made me see a clinician or anything I would have bitten their heads off and probably resolved to restrict even harder to get back at them. I really needed to decide all things involved with my behaviors, disorder, and recovery for myself. Again, they are both very emotionally supportive, just not involved, and I think that has had an extremely positive effect.

Negative - they don't recognise disordered behaviour and didn't believe there was anything wrong with me. I lost my period for half a year because of malnourishment, yet they didn't think there was anything wrong and they only would have if I was dying in a hospital bed.

Family have been positive, apart from when I was first diagnosed and they were told to do the Maudsley with me. That was quite awful, neither my parents or myself could deal with it. Now though, I can talk to my mum, and she can be quite reassuring.

My family = neutral. My boyfriend is very positive, even if he doesn't know about the ED, he's always able to calm me down.

My family either completely ignored it or were pushy (expected me to recover in a week). My partner was incredibly supportive, listened to my issues, tried to support me as best he could and made an effort to understand me. Friends completely ignored the issue, which left me feeling angry and isolated.

My partner has been mostly positive (very supportive up until quite late in my ED and his withdrawal of support/burnt-out-ness spurred me on to recovery to save our relationship). My mother has tried her best to help and been very supportive but her own eating issues have got in the way. My friends haven't made things worse but haven't been that interested/supportive either (not that I blame them. It's a very alienating illness).

My boyfriend is a silent enabler of my eating disorder, as he does not mention my behaviors. He and I pretty much pretend that my eating disorder does not exist, although he has recently begun to mention my weight and tell me that I "need to eat." My parents only ask vaguely about my health.

I have, as far as possible, kept my eating disorder a secret from family and friends. It is worse now that I'm a healthy weight as I have to pretend that I am fine / completely recovered. When I'm with friends who knew me when I was underweight, it is never mentioned, so I feel like it, or I, am the elephant in the room.

I would say that friends and family have been neutral, with a few friends and one partner being very helpful. My family couldn't really process my eating disorder. It was easier for them to ignore it than deal with it. Most friends acted like I should be able to stop being sick and like it was my fault.

My parents' help is mostly financial. I could not have stayed in treatment as long as I did without their help, and I am incredibly grateful. But my best friend is the one who really keeps me accountable. She isn't afraid to ask me questions even when she knows the answer won't be good.

11 . Do you have any opinions/experiences relating to eating disorders that you think are "unpopular" OR are not part of mainstream discourse (regardless of whether the discourse is online, within academia, or in treatment/clinical spaces)? If so, what are they?

I cannot stand Demi Lovato. I don't believe full recovery is possible.

I truly believe that 100% recovery from an ED is not possible.

Media blames super thin models, etc. and it has absolutely nothing to do with all of that.

No, I don't think so. Maybe chewing junk food then spitting it so I won't get fat.

No; "luckily" I have an ED that's fairly well-known (AN-B/P).

I really hate the idea that recovery is wonderful and rosy and sunshine and rainbows. That's not to say I don't think people should recover, I just think that there's a lot of misinformation and naiveté surrounding it. As far as I can tell, recovery really sucks for the most part. It's everything you don't want to do and everything you don't want to deal with and it fucking HURTS. Eventually (hopefully) it does get easier and wonderful and whatever, but initially it's not the paradise its painted as.

The whole idea that a "full recovery" means never thinking about or questioning food/exercise. I think that there are standards to which people in recovery are held that are unrealistic and that go against the gain in popular health promotion discourses. To expect that someone who has had an eating disorder will suddenly be able to forget how many calories are in a muffin is, frankly, ridiculous. To say that we are settling for "less than" if we do anything that could be taken as indicative of "remnants of" an eating disorder (for example, continuing to follow a meal plan or refusing a donut when it is offered at some random time) is extraordinarily belittling.

Compulsive overeating and binge eating are just as dangerous and widespread as bulimia and anorexia. But they have much less treatment available and have less recognition.

Eating disorder 'prevention' campaigns may be dangerous, especially if they mention behaviours / methods / techniques. I began restricting before I knew what EDs were, but I'm sure I wouldn't have tried purging if I hadn't heard about it as a method of weight control. Exercise (and I mean fairly strenuous / intensive exercise) has been a really positive tool in helping me eat more and feel more positively towards my body. I enjoy seeing what it can do, and am willing to eat enough / more so that I have the energy and strength to exercise. It also gives me more definite hunger cues.

The Maudsley way of parents just essentially forcing food down their kids just made me hate food more, it needed to be paired with strong aid on the mental health side of the disorder to actually be successful rather than just focusing on the refeeding part.

Probably that anybody with an ED is sickly thin. As stated before, I'm of average weight and do many things that can be associated with an ED, but although people don't need to know every little thing about an ED, it should still be known that you can look like any normal person but on the inside, what you're going through would be diverse.

I'm currently following the Minne Maud Guidelines and I think that approach is not agreed with by most clinicians. I agree with set-point theory and health at every size. I, once again, support the Primal Blueprint, and I think a lot of sugar and stuff can have some negative impacts on recovery despite the good. . . I think the Kartini Method follows this. But, I do think allowing yourself to eat anything and everything is THE most important step to separating food from anxiety. So I am half-half about it. Lastly, I think people are too harsh in response to people who label themselves pro-ana/mia and their blogs. I think a lot of pro-ana people do have a disorder, they are just on the first side of it. I was very into pro-ana blogging in the beginning and the "this is a lifestyle" ideology because it simply just felt like we were good dieters with strict body image standards for ourselves. It comes back to the control thing. Had anyone come at me telling me I was a poser and terrible person for reblogging photos of fashion models and diet tips, I would have been livid. I think it's definitely possible to be "actually" anorexic, and like it. It took me a few years to stop liking it. (I do agree the blogging communities are harmful, though. I just don't agree that these people are faking illness.)

I was never really on board the "recovery" train, per se. I never used the word, because it felt too committal for me. Even now I rarely use the word recovery. Something about it seem inauthentic to me.

I don't believe that calorie counting is inherently disordered. I've been out of intensive treatment for a couple months and I still follow a calorie-based meal plan. I definitely don't look like a "normal" eater yet, but if calorie counting helps me maintain my weight and health long enough to retrain my brain so that I can eat intuitively without restricting, I am okay with looking weird for now! It's tricky and controversial because for me and many others, calorie counting can be disordered too.

Eating disorders can't really be prevented. Eating disorder memoirs cause more harm than good.

There's a lot of focus on the dramatic end of the spectrum; I wonder how many people there are out there with enough ED-NOS to significantly impact on their health & life, but who remain functional and below the radar.

I had anorexia and I did not have depression. I think there's a tendency to overlap and medicate regardless. I think that's incredibly unhelpful. I spent a year on Prozac for no reason, and if you read the book anatomy of an epidemic, he would argue that's why I relapsed into an actual depression shortly after coming off of it. I told the treatment center I was not depressed, but they'd agreed and told me I was. Coming from the position of being in a master's program for therapy, I appreciate a postmodern not knowing stance; I knew myself better than they did. I knew I wasn't depressed. Also, I had friends while I was anorexic. I was in a sorority and very involved. I lived with my best friends and had a great boyfriend and later fiancé. I think part of that had to do with me not being depressed, just eating disordered. Eating disorder symptoms often overlap with depression. I'm sure there's more but I can't think of them at the moment!

As I hang out in recovery communities online (Tumblr, twitter, etc.) I see over and over rhetoric along the lines of "accept your body as it is!"/"love your body!"... as someone with severe gender-related body dysphoria, those well-intentioned but oversimplified statements of encouragement make me feel 1) rebellious, 2) invisible, 3) too complicated to fit in, and 4) renewed jealousy towards people who do not experience gender-related body dysphoria... I wish there was more acknowledgement in the eating disorder/recovery communities (and in trans* communities!) of the experiences of trans* folks w eds. along those lines, almost any given list of "facts about eating disorders!" or "breaking down the myths about eating disorders!" that is see coming from orgs that are trying to do education/outreach feature an item along the lines of "did you know men get eating disorders too?! it's true! here are the statistics. don't forget that men suffer too!"... obviously the general population does still need to learn about the true demographic breakdown of people w eating disorders, but the way this kind of rhetoric frames it completely leaves out nonbinary-identified people. if we're already bursting a myth, can't we do it more accurately? (ex) "it's not just young women who get eating disorders - people of all genders can develop eating disorders at any stage of life!" or something like that. OKAY sorry for all the rambling I think I have one more thing for this question though - well, at least one, lol - don't know if I'll say it well though. I guess as someone who has 1) spent a lot of time engaging w books/websites/etc. for the explicit purpose of triggering myself and 2) spent many years actively accepting my eating disorder and the behaviors as the best possible coping skills at that point in my life, I am disturbed at (especially the most vitriolic) backlash against people who id as pro-ana or otherwise very deliberately choose to continue their eating disorder behaviors... it is absolutely crucial to be able to prevent people who do not wish to engage with those people/their online content from having to do so, but there is adequate technology to accomplish that (programs that block users, filter out trigger warning tags, etc.)... I will have to write out my thoughts on this more eloquently sometime, but hopefully I have gotten a basic idea across. it is a relief to have a chance to write anything about any of this; thanks for this question <3

I have never weighed under 215 pounds, or less than a size 18 since I have been bulimic. Ever. Not even for a single minute. I have been "fat" the entire course of my disorder.

Eating disorder behaviors can be so ingrained in everyday life that patients don't realize they are abnormal.

I actually kind of like having anorexia, and I don't want to recover any time soon. I'm not sure if that would be considered an unpopular viewpoint or not, though.

I think at the start skipping meals was a choice. It wasn't my choice to want to skip them. But I made the choice to miss lunch. But it all spun out of control.

Laxative abuse could be researched more. I abuse laxatives and feel there is not much literature on it.

Oh, so many.. mostly about the recovery community on Tumblr.

I think that eating disorders are a natural response to a growing rate of obesity-- perhaps the human collective thought attempting to balance out, and I think that eating disorders can be regulated.

I don't think "full recovery" is necessarily possible for everyone, nor do I think it's really. . .important? Like. . . sure, we should all be aiming for strong recovery, but for some of us. . . maybe we'll never get back to our "before" and maybe that's okay. Maybe it's about getting to "good enough" where you can live a decent life and have a job and friends and be content, even if by certain markers you're not totally recovered. I think insisting on "full recovery" can end up being demoralizing if you feel like you can't get there, and then that just makes it worse.

The media plays a very superficial role in the development of an eating disorder (so it does play a role, but there are always so many more biopsychosocial variables at play). Focusing on the media is trivializing and insulting. Unfortunately, it is possible to be very high-functioning with a serious eating disorder. The weight criteria for anorexia nervosa (that is weighs less than is healthy for height/weight) is valid. That being said, strict BMI cut-offs should not be used (though they are needed for research purposes). Clinical judgement should guide treatment not strict BMI cut-offs. This needs to be emphasized more in the medical community.

I don't agree with BMI/weight goals a lot of the time. I don't agree with their being a certain way to recover, nor do I like this '3000 calorie' Minnie Maud recovery I see online. I don't also like when professional judge how you are doing by weight because in my experience my weight can go up despite restricting, or go down even though I've been doing really well. One professional would suspend my sessions at the start if she weighed me and I hadn't gained a certain amount or if I had lost, and this angered me on the weeks I had done really well and wasn't believed.

I don't think so. I don't like that you're not allowed to bring fashion magazines into eating disorder spaces because I like to look at dresses in waiting rooms, but that is sort of a frivolous opinion

Despite/throughout 9 years of anorexia, I have always loved food and hated restricting and disliked exercising and hated feeling hungry, which I did a LOT. I feel like in the recovery world it's not really acceptable to say that; instead you have to complain about how you're "SO FULL" on your meal plan, and choose Ensure instead of real food, and say you never get hungry, and/or you love feeling hungry, and you just love exercising so much that you could never give it up. This type of thing has made me feel like I'm a greedy freak among my anorexic peers! Secondly, I know there is a push for people not to dictate or criticise others' recovery process; like, not to say 'everyone can fully recover' when in reality people's circumstances are different, and not to denigrate people for allegedly 'settling' in recovery or not reaching a certain standard of recovery, while still doing the best they can with the resources they have. I completely agree with that, but at the same time I think it is harmful and irresponsible (and unethical, if it is a clinician) to spread around this idea that no one can ever fully recover. (I have a close family member who is FULLY recovered from AN so I know that this isn't a blanket rule; previously, I believed it was, and it made me feel hopeless and like there was no point trying in recovery). Just as no one should be shamed for not reaching a certain standard of recovery, nor should anyone be encouraged to limit themselves or to believe that they are permanently doomed.

I have bulimia and I wish I had anorexia instead. It makes me feel guilty to think that, but bulimia is weaker, in my opinion.

I think there's an impression that all anorectic peoples main fear is being fat and that's not it for me. I consider myself as being very body positive and accepting. I'm less accepting for myself, but I can imagine worse things than being fat. Fat-phobia is not a primary part of my disease. Sometimes, I think eating disorders are contagious. I've seen friends emulate my eating habits and online I certainly think it can be contagious and I'm guilty of perpetuating so much harm in that case. But I still think it's true.

I hate how all of the "society" "fashion models" airy fairy, body image, self-esteem things are associated with EDs. I also think that people self-diagnose too much, or like celebrities that come out as having an ED for like a few months and 'recover'.

Specialists and clinicians need to be trained very specifically on how to properly treat LGBT* individuals. Given the much higher rates of mental illness and suicide we have, they should be able to help us with our specific issues, or at the very least have an understanding of them.

12. Use this space to share anything else you'd like me to know. Feel free to provide question ideas/suggestions!

*Please note: I removed comments that were solely thanking me or providing positive feedback regarding the blog. I **really** appreciate them but I didn't want to include them here.*

Eating disorders are EXTREMELY prevalent in the trans male community.

If you're not in recovery you're dying.

Positive affirmations have helped me in more ways than any other coping skill!!

Kind of random, but I just feel like clinicians don't really know what to do with me. It's like, I've had this for almost 4 years and haven't really had a proper programme of treatment like CBT or DBT etc. I feel like there's no way for me to get better.

I hope, one day, more people like me will reach out for help and someone will believe them. EDs can happen to anyone, even plus-sized people like me! I just wish so much that one day there will be help for those who struggle with healthy weight loss during recovery!

This may sound a little stupid, but one of the small factors that exacerbated my disorder was anime-related body image. There is lots of literature about the fashion industry/generational shifts in ideal beauty and stuff affection body image, including Disney princesses, but I've seen little to nothing about body image issues associated with animation outside of Disney, especially anime. Don't know, it'd just be interesting to know if anyone else mentions Sailor-Moon-thigh-envy in their responses. Second- I think you may have posted a few things about this connection -I'm asexual. I was bisexual growing up, and lesbian at the beginning of my last/most intense bout of active anorexia. Maybe mid-way through I acknowledged I was asexual, but GreyAromatic, female preference. In recovery I still identify as asexual, so far. I'm not sure if my sexuality troubles (I was sexually active at times but generally had celibate ideology and I had a hard time coping with my 'hypocrisy') contributed to my disorder, or if the hormone disruption from my disorder contributed to the asexuality. Love your blog!

I love what you do. I wish there was more conversation about the physical body system recovery. It takes a lot for the adrenal, nervous, digestive system to return to normal. We talk about it, but we don't talk about the why/how.

I'm really tired, so I'm sorry if this is incoherent! :(Also, I have OCD and anxiety issues, so feel free to use that information for... whatever you might need to use that information for. I know things like that can be related to eating disorders sometimes.

Services are appalling: the actual clinical care I've had is fantastic, but the administrative side is grim or non-existent. Nobody has the least interest in supporting you through recovery: the onus is on you to chase appointments when they're cancelled. Things could be a lot better if you could concentrate your energies on getting better & recovery, rather than battling with appointments.

I need to know how to reach to a professional for help without my family knowing. Like a therapist or something. Just someone to talk to encourage me and hold me accountable. My family is just not people I want to get involved with this; though I know that people will tell me they are the ones I need to talk to for support etc. I just want one stranger to talk to about everything and see in person and counsel me (a therapist.)

It would be interesting to see how many people have experiences diagnostic crossover, from what to what, and what they attribute as the causes for any changes in behaviours / if they think changes in behaviours are accompanied by different cognitions. In AN-R, AN-BP an BN, my ED cognitions have been pretty similar.

I vacillate in my own mind between feeling like I am "non-fat phobic" and "fat phobic" as in, in my rational mind I do not care. On the other hand, I am absolutely horrified of the idea of being "fat".

Any information sharing about people's experience of EDs will help those that suffer from them feel less alone.

Coverage for dietetic services for eating disorders is not always sufficient. They are important pieces of recovery that are often left out due to lack of coverage.