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When 6 is Bigger Than 10: Unmasking Anorexia Through Externalisation

By Hugh Fox

We were in my office and Bernie was telling me that she was very fat. I saw an attractive engaging girl of 15 who was painfully thin with skin stretched tight over her cheek bones and her temples. What, I wondered, did she see?

Bernie had first been referred to our service aged 10 years following a diagnosis of Type 1 Diabetes. She was struggling with giving herself the necessary injections. Bernie lived with her paternal grandmother and her step-grandfather, her mother having died when she was around eight years old. Also living with her was her younger brother. Her father lived nearby and was in frequent contact, visiting the household on a daily basis to eat his evening meal.

She was seen on and off by our service over the intervening five years, but whilst some things got better in relation to the diabetes other things got worse, and in 2005 she was referred for a third time. The Consultant Paediatrician wrote, “We are deeply concerned about Bernadette’s diabetic control She has lost a considerable amount of weight”. And the diabetic nurse said that she was on the verge of hospitalisation for ketoacidosis and that social services were to be involved on the basis that she was a child in need. Her relationship with her father had “broken down” and she (the nurse) was deeply concerned about the relationship with her father.

Family work was thought to be the most helpful approach, but this did not last long, with Bernie voting to end the sessions. However, she was soon in touch again asking to be seen on her own, and it was in this context that Bernie was telling me that she needed to lose weight as she was so fat. Bernie had lost 2 ½ stones in 6 months but she said she needed to lose more. The diabetic nurse had told her to talk to me about weight because she (the nurse) “doesn’t want me going anorexic”, but Bernie told me that this was not a worry as she was so big.

With little encouragement Bernie told me about the food regimes she was subject to and the schedules of exercise that she was undergoing in her attempts to reduce her weight. She had cut down on fat and on sugar, she checked all the food packets to see what was in them, she had cut down on chocolate and junk food, and was eating mostly tinned fruit, potato and pasta. She had started walking everywhere, she went to the gym at least three times a week.

I said that these were exactly the sort of behaviours that anorexia encouraged in people. Did she think that it was possible that it was anorexia that was getting her to starve herself and exercise herself in this way?

Bernie thought it might be, but went back to telling me that she needed to lose weight. It was true her family said that she was too thin, and the diabetic nurse was worried about her weight, but she knew she was fat. Bernie knew her weight and her height,

and on the computer I looked up her BMI. It was 17.4, and the website said that 18.6 was the bottom end of what was considered healthy.

Bernie agreed that this was not good, but said that she still wanted to lose weight. I asked her about her grandmother's worries and she said that for her grandmother she would be prepared to try and put some weight on. She told me that she went running with her friend Ruby, and that Ruby is size 14 and two inches taller than Bernie. Bernie said that she could tell that Ruby is bigger than her, but then Ruby, she said, needed to lose weight.

There followed some dialogue which proved crucial in helping Bernie see how anorexia was tricking her:

Hugh: Does anorexia have you worrying that you will get as big as Ruby?

Bernie: Yes, it tells me that the way I eat I might get as big as her.

Hugh: Well, what size are you?

Bernie: Size 6.

Hugh: Size 6. What is the smallest size there is?

Bernie: Size 6.

Hugh: Oh. So when anorexia tells you that you might get as big as Ruby, what exactly does it say to you?

Bernie: It makes me think that size 6 is still a big size.

Hugh: Anorexia gets you to think that?

Bernie: Anorexia makes me think that. (Pause) ... I am bigger than a size 10.

Hugh: Is anorexia making you think right now that you are bigger than a size 10?

Bernie: Yes.

Hugh: How does it get you to think that?

Bernie: When I see people who are size 8 or size 10, I still look bigger than them.

Hugh: Anorexia gets you to think that a person who is size 6 is bigger than a person who is size 10?

Bernie: Yes. I am bigger than a person who is size 10.

Hugh: Is that possible, that a person who is size 6 can be bigger than a person who is size 10?

Bernie: Yea (Pause) A size 6 can't be bigger than a size 10.

Hugh: Is that anorexia tricking you then?

Bernie: Yes.

At this point Bernie has made a full realisation that anorexia is lying to her and we go on to discuss this and how anorexia gets her to throw food away or give it to the dog. Bernie tells me that anorexia tells her she'll get fat and that she never eats all her food. I decide to explore with Bernie what anorexia's plans for her may be:

Hugh: Does anorexia promise you that if you lose weight you'll feel better?

Bernie: Yes.

Hugh: And do you feel better?

Bernie: Yea, I feel better till the next meal time, and then I think, if I eat any more I'll put it back on.

Hugh: Does anorexia tell you that you need to lose more weight and then you'll feel better?

Bernie: Yea.

Hugh: Do you think it will ever give up telling you to lose more weight?

Bernie: No. It'll always want me to lose more weight.

Hugh: So what do you think it's ultimate plan is?

Bernie: To kill me.

Hugh: Is that ok with you?

Bernie: I don't want to die.

Hugh: If anorexia was a person, what kind of person would you say it was?

Bernie: I'd batter 'em 'cos it would kill me.

Hugh: How would you feel about such a person?

Bernie: I'd hate them.

Hugh: Would you think that they were your friend?

Bernie: It wouldn't be a friend.

I then encouraged Bernie to vocalise anger towards anorexia, and went on to systematically explore further how anorexia was affecting her life. She told me she was not like her old self. She was no longer a bubbly outgoing person who enjoyed life. She no longer had the energy she used to have, and she rarely went out any more. She was not eating as much and she was more angry than she used to be, and this anger expressed itself towards everyone, even those she cared for dearly. Bernie concluded that she hated anorexia and that she didn't want to be like this anymore. And this opened the space for me to invite her to develop an anti-anorexia plan.

Bernie decided to :

Do less exercise, specifically to do less running.

Refuse to listen to anorexia as much, specifically not to look at the contents lists on packets.

Eat as much as she could.

Enjoy herself

We agreed that I would write her a letter about the session and that she would pin it on her bedroom wall and read it every day.

Here is the letter that I wrote:

Dear Bernie

Here is the letter that I said I would write you.

We had a good conversation today, and you told me that the diabetic nurse had told you to talk to me about weight.

You told me that you had lost two and a half stone over 6 months. Other people were worried, but you said at first that you were not worried.

As our chat went on you began to wonder whether anorexia was playing a part in your life. In particular you wondered how it could be that you believed that a size 6 person could be bigger than a size 10 person, and we decided that it must be that anorexia had tricked you into thinking this.

I heard that anorexia had been having you cutting down on food, checking the ingredients on the products, and exercising a lot. Anorexia has been getting you to do this by alternatively threatening you that you may get to be very big and by promising you that losing weight will make you feel better. And in fact each time you have lost weight you have felt better, but only until the next meal, when anorexia has demanded that you starved yourself further and lose more weight.

When you thought about it carefully you said that anorexia has stolen your bubblyness, it's robbed you of your energy, and made you spend the energy you do have on exercise, it's stopped you going out as much, it's made you angry with everyone and it's deprived you of enjoying yourself.

You concluded that anorexia would never be satisfied, would always command you to lose more weight, and would not be happy until you are dead.

You said that you hated anorexia for this and that you felt angry. I shared with you my outrage at how anorexia has been luring you to your death. Anorexia makes me so angry, the way it tricks innocent young women into self starvation.

You said you don't want it to be like this anymore. You thought it would be good to put on the weight needed to bring your Body Mass Index into the normal range, and you are planning to:

- *Run less*
- *Eat as much as you can*
- *Not look at labels on products*
- *Not listen so much to anorexia*
- *Enjoy yourself*

Bernie, I talked with you about how hard it can be to free of anorexia's deadly grip, and I am half expecting that anorexia will give you a hard time for talking with me so honestly. I will look forward to meeting with you next week and hearing how you have got on.

In the meantime, we agreed that you would pin this letter up in your room and read it at least once³ a day to help you remember that anorexia is not your friend.

*With best wishes for success against anorexia.
Hugh Fox*

I met with Bernie a week later. She had made some small weight gain, and she had been enacting her plan. This had not always been easy, but when anorexia had spoken to her she had often been able to recognise its voice and to know that it "was not a true friend". Perhaps most important she had started going out more with her friends and enjoying herself.

That was the beginning of this work, and now, three and half months later, and a number of crises in her life later, Bernie is continuing to slowly put on weight. We have also talked about her relationship with her father and she has taken positive steps to change how things are between them. When I last saw her Bernie was about to go out to the cinema with him, and she told me this was the first time they had been out together in ages. She was full of joy at this.

I am sure that there will be more work to do and I am sure that Bernie will get her life back how she would like it. But this article is intended to show the vital role of externalisation in the unmasking of anorexia, and how through the unmasking of anorexia a collaborative anti-anorexia relationship can be built.