

I have been working with clients since 1994. However, in the early-to-mid 1970s I was anorexic. Reading the research recently published by BACP (*therapy today*, October 2005; *CPR*, September 2005), I feel compelled to set down my own experience, not only of anorexia – but, more importantly, how I cured myself.

To explain a few details: I had been a happy child in England until my parents took us out to South Africa in 1963. By the time I was 11 years old I was overweight and bullied on a daily basis. My teenage years were mainly miserable, and I left school with no qualifications at 16. The reason for me needing to leave school suddenly was because I had been told that in PT we would have to exercise without shirts and I was so ashamed of my body,

and the humiliation that would follow, that I left a few days into the new school year.

I then grew my hair. With longer hair my features balanced out and I began to look attractive. But I still felt imprisoned in my bulky body and hid under baggy clothes. When I was 18, I went back to finish my schooling at a 'cram college'. By this time, even still 20 pounds overweight, I was handsome and had begun to feel more confident. I began exercising – first running down hills and walking up them, later running all the way. I also started to cut out carbohydrates and bought books on keeping fit and cutting calories.

#### **Game playing**

By the time I was 19 I was 20 pounds underweight. And for the first time I was happy. I had discovered the

anorexic secret – rather than the inner and outer body having no relationship, I could control my intake. More, I could prove my newfound control by undertaking various temptations. For example, at work there were often cakes for birthdays. I would go round asking people which slice they would prefer and cut it for them, being meticulous to wipe even the crumbs off the knife and onto their plate: I was above such temptation.

I played other games. One was deciding to take off another five to 10 pounds, as indicated by the scales, and working out how much I could increase my exercise to accomplish this. I would sit bolt upright at work so I would use as many calories as possible even sitting down, and I visited the local swimming pool religiously, even through the winter.

# A DIY cure for anorexia

The most important thing is to allow clients to have an internal rather than external locus of control

by Matthew Campling

Coming home at night I would exercise again, finally falling asleep from exhaustion.

Still the weight came off – although the lighter you are, the harder it becomes. By the time I was 20 and a half I weighed 42 kilos – about 90 pounds – so I was about 50 pounds underweight for my height (5'8"). There were moments, at this point, when I knew I was ill, but that was too frightening to think about for long – I knew I couldn't eat, couldn't put on weight, because the anorexic self, which had started off as a friend, had become a tyrant.

At this point, due to pressure at work and a difficult environment at home, I had a minor breakdown. One morning I sat in my office and couldn't stop crying. I was sent home on indefinite sick leave. But what would happen now? There was no information on anorexia in Durban, South Africa, in the mid-70s – and, in a way, that was my salvation. Rather than getting onto the carousel of medical opinion and chemical control, I had no one to help me but myself.

### The DIY cure

The best way to describe what then happened was that I split myself into two selves: the anorexic self and the healthy self. The healthy self knew I was in great danger, that if I didn't find a way to get healthy I would become seriously ill. I had an insight into the anorexic self, the tyrant, which I had not read in any papers on the subject: the anorexic self was terrified.

The tyrant wasn't so much a bully as in mortal fear. Because if I got well, then the anorexic self would die. It being impossible to

contemplate our own demise, the anorexic self was prepared to starve me to death rather than give up control. Also, the anorexic self did not know how to help, only to control and deny.

But the healthy self had an idea. Exercise had become very important to me over the last few years. The healthy self made a pact with the anorexic: in order to exercise, which the anorexic self liked, I would need to eat. Rather than the method which I have heard expressed by eating experts that 'normal eating patterns must be resumed' the anorexic self allowed the healthy self a certain amount of control. But all the while, the healthy self was pursuing its own agenda: to put a few more pounds on my frame.

The process took several months. I remember one time I ate heartily at a cheese fondue – bread and cheese – and, weighing myself the next morning, was horrified to see I had gained five pounds. Then I had to drop the healthier food and compensate with a lot more exercise.

But overall, I began to gain weight. I was still living a strange life: I would get up at five in the morning and walk to the swimming pool at the local university and swim before anyone else arrived. Then I would come home to a healthy breakfast – a fruit parfait – consisting of ingredients which, individually, were healthy and didn't perturb the anorexic self.

I remember the morning when I completed a length at the pool and flipped over to come back. My long hair was in my eyes and it reflected the rising sun. I

swam with droplets reflecting the sun in my eyes – golden light bursting in my face. I laughed as I swam – partly for the beauty of the moment, partly because I now had the energy to laugh.

Within four months I had gained about 20 pounds. I was still thin, so the anorexic self was happy enough; but I had enough energy to get through the day, and I was eating well enough to more fully regain my mental and emotional health.

After I recovered, I came out as a gay man – and in the new life that followed, I was so happy and excited about being alive with the possibility of love and happiness that I just stopped being governed and ruled by food, either too much or too little.

### So what works?

Over the years – I am now 51 – I have done a lot of thinking into the causes, and the possibilities of recovery. And what has remained with me over time was the insight I had into the reality of the mind. That we are not a single, indivisible whole, but there are parts of us that can become affected, and parts that remain separate and therefore able to be an internal healer. When I read research which looks at how to treat the 'illness' with drugs I am horrified, and it's that which has caused me to write this.

What worked for me – and I offer it to others – was to be given the time, independence and a certain amount of support from my



# 'To seek to control from outside is to fundamentally misunderstand what needs to happen'

mother, to allow me to find my own way around the illness. Clearly any outsider cannot understand as well as the person who has the illness. Also, the idea of an external control – drugs, medical intervention etc – runs absolutely contrary to the nature of the illness, and its possible cure.

To seek to control from outside is to fundamentally misunderstand what needs to happen. What needs to happen is support, not control.

When I began looking at becoming a therapist I was attracted to a particular discipline that emphasises the importance of the internal rather than external locus of evaluation: Rogerian client-centred therapy.

Specifically because of my anorexic experience, I believed that this is the best way to put the client in a place where healing can take place. I believe that, for many situations, attempting from outside to get clients to eat 'normally', making deals, or any other external control or intervention is as helpful as giving someone with a seafood allergy paella.

A few years ago, I was the agony uncle for a prominent gay men's magazine. Since research indicates that a higher proportion than the average of gay men have had, or are living with, an eating disorder, I wrote about my experience, which was positively received.

When I was taking my first counselling qualification I attended a three-day eating disorder workshop. I hoped that the 'expert' leading it would be interested in my first-person experience. However, it was she who perturbed me with her ironclad rule of not working with anorexics 'unless they promise to eat normally'.

My experience, and now reading about efforts to work with the illness in *therapy today*, leads me to ask: is there anyone interested in talking to me about exploring a client-centred support and recovery programme?

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