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**Body and Bulimia Revisited:
Reflections on “A Secret Life”¹**

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Abstract

In 1996, the author published “A Secret Life in a Culture of Thinness: Reflections on Body, Food, and Bulimia” (Tillmann-Healy, 1996), an account of her struggle with bingeing and purging from ages 15 to 25. She came to understand bulimia as a communicative act, expressing fear, anxiety, and grief. From 25 to 35, her recovery from bulimia involved learning to “purge” emotion through other forms of communication (e.g., dialogue, writing, and teaching). At 35, separation and divorce pose the greatest challenge to the author’s 10-year recovery, yet she does not return to bulimic expression. This article invites readers to sense and feel pathways in, through, and out of unhealthy relationships with our bodies and ourselves.

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For the first time in 10 years, I reached over the knot—the tangled voices of disembodied authorities and of soundless screams. I touched the knot, and started disentangling it, trying to differentiate voices from each other, and from the ringing in my ears. I can hardly wait till I/we start weaving a new fabric with the loosened threads.

Takayo Mukai (1989), “A Call for Our Language: Anorexia from Within”

Transference

I gesture for her to take the seat next to mine. “I want to thank you for the Interpersonal Communication class,” Shannon² says in her usual hushed voice.

“Thank *you*. Your paper on your mother’s descent into schizophrenia was unforgettable. I’d love to see you in another course sometime, maybe Gender and Sexualities or Critical Media Studies.”

Shannon casts Liz Taylor azure eyes to the dark veneer covering the round table in my office. “I’m, ah, transferring next term.”

“*Oh*,” I say, unable to hide my surprise and disappointment. “Are you leaving to be closer to your mom?”

Shannon wraps a raven ringlet around her right index finger. “Actually, she seems to have stabilized.”

“Do you mind telling me why then? You’re exactly the kind of student this college needs: bright, dedicated, concerned about others and about the world.”

“Academically, I have no complaints,” she explains. “The professors here are encouraging and challenging. But ... everything else...” Her voice trails off.

“Everything ... as in--”

² Students’ names and other identifying details have been changed.

“You know, the focus on appearance, the competition for boys’ attention.” Shannon leans forward. “You wouldn’t believe the lengths to which girls go.”

You wouldn’t believe how fully and how often I embodied those lengths. Clearing the thought from my throat I say, “Tell me anyway.”

“This is no exaggeration: almost every girl on my floor either vomits or takes laxatives.” She crinkles her nose. “I dread having to use the common bathroom.”

Her words transport me to 1990, my first-year college dorm, and events that provided the basis for a scene in “A Secret Life” (Tillmann-Healy, 1996, pp. 93-94):

Common Bathroom

I chew the last Dorito and take a swig of Diet Coke. Without bothering to lock up, I head down the hall to the common bath, the worst feature of dormitory living. When Gloria from the west wing exits, the swinging door nearly hits me in the face. “Sorry,” she says with a sniffle. Her red eyes, filled with tears, give her away.

“You okay?” I ask.

“Never better,” she responds, and I don’t push.

I move to the corner stall and lift the toilet seat. Fresh vomit sprays cover the rim. “You’re getting indiscreet, Gloria,” I say softly. I lean over and push my finger down my throat. The Doritos and Diet Coke come up stubbornly in thick clumps. “Bad idea,” I scold myself.

The swinging door opens again, so I pull out my finger, quietly put the seat back, and sit on the toilet, waiting. Someone enters the stall two down from me. She slides the lock into place. Instead of the expected bathroom sounds, I hear the toilet seat being lifted, then a flush. Over the whirl of suction, I can make out gagging and splashing. I take a peek under the divider and recognize the black suede boots that Carrie wore to history class this morning. I flush and move to the sink.

As I wash my hands, Carrie’s toilet flushes again, and she emerges sheepishly from the stall. “I didn’t know anyone was here,” she says as our eyes meet in the mirror. “No one can know about this. Do you understand?”

“I understand,” I tell her. We lock gazes for a few seconds before Carrie quietly goes off to her room.

I refocus on my student. Would it help Shannon to know of my ferocious self-destruction? Might it open her to further despair? A familiar voice: *Don’t let her see. Protect her from the ugliness of who you have been.*

I transition to problem-solving mode. “Have you reported this to your resident advisor?”

“Dr. T.,” she says, her voice breaking, “my RA does it too.”

Revisiting the Literature

Eating disorders are complex conditions that arise from a combination of long-standing behavioral, emotional, psychological, interpersonal, and social factors.

Contributing Factors & Prevention (n.d.)

I feel like an omelette reading the cookbook.

Paula Saukko (1996), “Anorexia Nervosa: Rereading the Stories That Became Me”

In *Wasted: A Memoir of Anorexia and Bulimia*, Marya Hornbacher (1998) asks, “why; why this glitch, what flipped this switch, why so many of us? Why so easy a choice, this? Why now?”

Accounts such as *Wasted* as well as medical, psychological, feminist, and historical literatures on eating disorders add text and image to what I experience as a three-dimensional collage, ever spinning and expanding.

Bulimia comes from the Greek *bouelima*, from bous (ox) and limos (hunger). I remember first encountering this etymology in 1995 and feeling an immediate stab of shame. Ox signified large, lumbering. Then I absorbed limos: not only literal hunger, a body pleading for nourishment, but also existential, emotional, and relational longing, a hunger for meaning, expression, and connection. Russell coined the term “bulimia nervosa” in 1979. His article, published in *Psychological Medicine*, referred to bulimia as “an ominous variant” of anorexia nervosa. In 1980, the Diagnostic and Statistical Manual of Mental Disorders (DSM) included bulimia for the first time but as a syndrome distinct from anorexia.

According to Morag (2006, p. 149), bulimia has “almost no history.” Reviews of medical and psychiatric case studies have uncovered few examples prior to 1970 of persons whose

patterns of thinking and behavior fit current diagnostic standards for bulimia (Russell, 2004).

Among these standards are “recurrent episodes of binge eating,” “a sense of lack of control over eating,” “recurrent inappropriate compensatory behavior in order to prevent weight gain, such as self-induced vomiting; misuse of laxatives, diuretics, enemas, or other medications; fasting; or excessive exercise,” and “self-evaluation...unduly influenced by body shape and weight.”

Psychological conditions associated with eating disorders include low self-esteem, body dissatisfaction, anxiety, and depression; personality variables such as perfectionism also correlate with eating disorders (see Polivy & Herman, 2002, for a review).

Risk for developing an eating disorder peaks in late adolescence, when many enter college. Among college women surveyed by Grieve, Wann, Henson, and Ford (2006), 8% reported a history of purging, 6% laxative use, and 14% diuretic use. According to Boskind-White and White (2000, p. 219), pioneering researchers who have studied eating disorders since the 1970s, at least one in five college women engages in regular bingeing and purging.

Other analyses read bulimia not as an individual mental or behavioral disorder but as a cultural disorder, an expected consequence of consumer capitalism and sexism (Bordo, 1993; Wolf, 1992). Such authors ask: In a society saturated by corporate media, whose self-evaluation isn't “unduly influenced by body shape and weight”? Who doesn't experience “body dissatisfaction”?

Related critiques (e.g., Lock, Epston, & Maisel, 2004; Lock, Epston, Maisel, & de Faria, 2005) focus on discursive constructions of eating disorders. According to Burns (2004), medical, psychological, and popular discourses often present an anorexic/bulimic binary, the anorexic signifying self control, discipline, and persistence, the bulimic signifying indulgence and greed. Burns provides interview excerpts in which a woman who has struggled with an eating disorder

refers to anorexics as “the successes” (p. 276), and a psychiatrist who has treated women with eating disorders deems bulimics “failed” anorexics (p. 277), a hierarchy also evident on Pro-Ana (pro-anorexia) and Pro-Mia (pro-bulimia) websites.³

* * *

In 1996, I systematically explored and storied my lived experience of bulimia. In the process, I learned to begin interpreting bulimia’s collage without flattening its dimensions. “A Secret Life” did not—*could* not—fully settle the question “Why bulimia?” However, its scenes, poems, and reflections do make meaning from fragments of memory and offer readers insight into this inner world.

Ten years after its publication, I endured losses deeper than any I ever had experienced, yet I did not invite bulimia back into my life. As I write and revise “Body and Bulimia Revisited,” a voice whispers, “*Why not bulimia this time?*”

Making Space

I settle into my usual seat on the far right of her brown leather sofa. Notepad and pen ready, my therapist peers over the top of her reading glasses.

“My father was drafted for Vietnam,” I tell her. “He saw me for the first time at six weeks old, when he finished basic training. We moved into a cockroach-infested apartment in Salinas waiting for my dad to be shipped over. The army paid so little that our family qualified for food stamps. I remember my mother telling me that they couldn’t afford a crib, so I slept in a dresser drawer.” I add what I intend to be a throwaway line: “My brush with ‘hard times.’”

³ These websites seek to depathologize eating disorders, a strategy also undertaken by feminist critics, including myself. However, instead of offering tools to help others resist sexism and inequality, Pro-Ana/Pro-Mia groups coopt counterculture rhetoric and reframe bulimia and especially anorexia as acceptable and even admirable lifestyle choices.

Dr. C. finds and holds my gaze. “You’re having hard times *now*: your marriage—”

“I suppose,” I say, shifting quickly, “but think of what most people in the world confront: lifelong poverty, political unrest, violence. My own mother came from the rural poor. No indoor plumbing, ragged clothes, seldom enough to eat, physical and sexual abuse, alcoholism, divorce, foster care--”

“Ah,” she interrupts, “you’re the daughter of a holocaust survivor.”

Her statement hangs in the humid spring air. “I ... I can’t rightfully claim *that* identity.”

“But you carry your mother’s pain. I see it in your face; it breaks through in your voice. When did you first learn of her history?”

I gaze out the south bank of windows. A soft rain drips from the Spanish moss covering a family of live oaks. “I can’t recall *not* knowing her history; its contours outlined the landscape of my childhood.” I pause, looking up and away.

“Where did you go just now?” asks Dr. C.

“I heard myself say ‘*my* childhood.’ I have two brothers, one 14 months older, one seven years younger. My younger brother said recently, ‘Everything I know about Mom’s childhood, I learned from you.’”

“The emotional historian,” she observes.

I turn this over. “A friend told me of being raped at 13 by two men. They brutalized Heidi, penetrating her orally, vaginally, anally. She had been a virgin. When I hear ... ” I catch my breath. “When I hear stories like this, a place inside me expands. My body and spirit make space for grief. It feels natural, reflexive. I’ve always felt at home in other people’s pain.”

“Right,” says Dr. C., nodding. “And where did you make space for *your* pain?”

With no hesitation I say, “Bulimia.”

It is the first time in months of sessions I have spoken this word.

Empty

New Year's Eve 2005 my husband and I celebrated our 10th wedding anniversary. He bought 10 gifts for the occasion, one a silver bangle inscribed with *Amor Vincit Omnia*, Latin for "love conquers all." I am wearing it as I follow him into the basement, where he retrieves our largest suitcase, purchased for my doctoral graduation trip to Paris in 1999. "You're really doing this?" I say.

In a trio of clichés: "I need space. I don't know who I am. I can't find myself here."

Unwilling to watch him pack, too ground down to plead yet again: "Don't give up. Tell me what you need," I retreat to the home of my friends Kathryn and Deena. By the time I arrive, Deena has made up the spare bed. "You're *not* going back to that big empty house," she insists.

"Thanks," I say, "but I need to face my future."

Two hours later, I pull into the drive. Our 1927 colonial is dark, the alarm set, his car gone. I force a call to my parents, waking them from a sound sleep. The news breaks not like a train wreck on the way to work some Tuesday (did I mention that today is Tuesday?). No, more like the sudden passing of a relative whose health had seemed to stabilize amid a chronic illness: not completely unanticipated in the long-term sense (my husband and I had been in marriage counseling for nine months, after all) but a loss no one saw coming today (just last weekend, my parents, husband, and I were casino hopping in Vegas, after all).

Sandal soles echo against oak floors. I ponder his statement: "I can't find myself here." *Everywhere* are signifiers of him, me, us. Sunroom walls that sucked a gallon of primer and five coats—*five*—of a red so unexpectedly glossy and pink that we buried it a few months later

beneath two gallons of primer and two coats of a suitably sedate slate. The hand-woven Pakistani rug that beckoned like Gabriel from deep within the 10th pile of the 20th store we visited.

Photographs of our smiling families, our shared friends, our 13 conjoined years. The Feng Shui symbols of love and marriage I placed at Christmastime in the back right corners of each room—prayers of a lapsed Catholic.

I ascend the stairs and open the linen closet. From its top shelf I retrieve the quilt my mother gave me when I left for college in 1989: yellow with red hearts. I toss aside the lavender and bronze “comforter” purchased a month ago, Act I of a planned remodel of our master bedroom. Enclosing myself in the quilt, I lay perfectly still on my side, a reference both to body and bed.

Wednesday passes somehow but leaves few traces. The *New York Times* yellows on the pavers, mail sits ignored in the box. Did I see anyone? Speak to anyone? I’m sure my parents called, probably three or four times. I don’t shower. A bath ... maybe. I don’t read; I *can’t* read. TV? Perhaps the hypnotic renovation voyeurism of the Home and Garden channel: resuscitation to restoration in 30 minutes. If only marriage...

The clearest memory: I retreat to the bedroom. The clock reads 12:26 AM. As I close my eyes, I realize for the first time that I have put nothing in my stomach since lunch on Tuesday. Thirty-six hours without so much as a piece of toast or cup of coffee.

Perhaps this strikes you as perfectly expected. Who among us hasn’t worked through a day’s meals, endured the throes of food poisoning, suffered hours of uncertainty in a hospital waiting room? So perhaps only those who wrench themselves from the grip of an eating disorder will understand, will feel the significance of this. You see, *we do not “forget” to eat*--not for 36 hours.

“You’re Too Thin”

I shrink: five pounds in the first 10 days. I remember to eat, but everything tastes bland and heavy. I subsist on breakfast food (each meal a new beginning?): cereal mostly but also fruit and occasionally eggs with cheese.

Two weeks after my husband moves out, I take a pre-planned research trip to Minnesota, where my parents live. Kneading crust for the second rhubarb custard pie of my visit, my mother says, “Sweetheart, you’re too thin.” I wait for her to ask, *What are you doing to yourself?* but we conspire to confine that to subtext.

Throughout my life, my body has ranged from three-sport-athlete toned to perhaps 10 pounds “overweight” by cultural standards. *Never*, not at birth in 1971 (eight pounds, 15 ounces) and not once since, have I been described as “too thin.”

“You’re Entering Another Dimension”

My body continues closing in toward its core, shedding weight and defenses. The mirror reflects someone less and less familiar: more angular face, smaller breasts. By mid-June, every pair of jeans, regardless of original cut, is now “low-rise.” One pair I can slide off without unbuttoning.

I find an olive skirt with cargo pockets at Banana Republic. Grabbing both an 8 (my usual size) and a 6, I head for the dressing room. Buttoned and zipped, the 8 falls past my waist and halfway down my butt. Even the 6 balloons out at the hips.

“How’s that workin’ for ya?” calls the attendant from outside.

Passing articles over the door, I request, “Could you please bring me a 4?”

She returns a minute later. “Here’s the 2 as well.” This strikes me as patently absurd.

As I unclip the larger from its hanger, an old voice says, *Size 4: impressive.*

An expensive “achievement,” I silently retort.

I step in and zip up; the skirt descends to the base of my pelvic bone. There must be some mistake. I give the garment a half turn on my hips to check the tag: size 4.

I take hold of the 2—a size I never have worn, not even in middle school. There is no possible way. I slide the skirt slowly. It moves—easily—across my lower body, not a point of resistance from legs to waist. It fastens—comfortably—coming to rest a half inch below my navel.

Hesitantly, I open the door. The attendant beams. “Is that the 2?” I nod as she pulls at the belt loop below the small of my back. “Hey, you’ve got some room here.” She flips through the rack behind her. “Here ... try the 0!”

You’re entering another dimension, I think as I take the hanger and close the door. Casting aside the 2, I behold the smaller signifier: tiny waist, straight hipless cut. *Like a little girl.* Bending down, I step into the ring and begin the ascent: calves, quads, glutes, hips (some wiggling needed), waist. I draw in my breath, feeding the button through the hole. Pulling the skirt taut with my left hand, I zip with my right. Tight, to be sure, *but it fits.* I shudder. I am falling toward zero, toward nothing—a purchase I refuse to make.

Genderfucking the Gym

Coined by Christopher Lonc in 1974 (cited in Bornstein, 1995), “genderfucking” involves challenging the binary constructions of sex (male-female) and gender (masculine-feminine) and the conflation of sex and gender (where male=masculine only and female=feminine only). Recognizing that all humans possess qualities and enact behaviors their cultures define as

masculine and feminine, genderfucking seeks to reveal gender identity and roles as fluid rather than fixed. To genderfuck is to perform gender in creative and subversive ways.

* * *

In 2002, I began weight training with my husband. The experience expanded and strengthened my body and my consciousness. The day he moved out in 2006, I stopped lifting. The loss of muscle mass and the physical intensity of grieving brought me to my lowest weight in 20 years.

Unwilling to descend further, I not only return to the gym at the college where I teach, I *genderfuck* it. Two rituals I come to find particularly delicious.

Ritual one: I saunter toward a man bench-pressing more weight than he can handle. He has to be using dumbbells; the straight bar would be dangerous, but free weights can be (and occasionally are in this situation) cast aside with thuds. Between his exaggerated bellows of “Uuuuuungh!” I say, raising my voice from its natural alto to mezzo soprano, “May I give you a spot?” No man ever has taken me up on this offer.

Ritual two: the leg press. This works best when the male in question pushes 180, two 45-pound plates on each side of the machine—perfectly sufficient to build strength and improve tone for the dieter, the health buff, even the varsity athlete. My strategy is to hover nearby and wait for him to finish the last set. After he rises but before he leaves the scene, I conspicuously add one 45-pound plate to each side. (I actually can push *eight* 45s, but as my personal trainer friend says, “Now that’s just showing off.”)

Fucking with “Genderfucking”

I view our bodies as a site of struggle, where we must work to keep our daily practices in the service of resistance to gender domination, not in the service of docility and gender normalization.

Susan Bordo, *Unbearable Weight: Feminism, Western Culture, and the Body*

Stepping back, I wonder about the subversive potential of “Genderfucking,” which I wrote with my female students in mind. On one hand, I appreciate the story’s playful resistance to gender norms: the female-dominated cardio machines for “burning off” (note the violence) “excess” flesh and the almost exclusively male bars, weights, and plates used to build and bulk.

On the other, does reporting my ability to push 360 pounds simply replace one high-maintenance “body project” (Brumberg, 1997), thinness, with another, muscularity? Does the story privilege hard over soft, strong over vulnerable, and therefore masculine over feminine? Does my body in this scene become yet another instrument provoking women’s body anxiety and shame (see Wolf, 1992)?

My character in this scene also can be read as vying with others, specifically those younger and male, reinforcing masculine competition over feminine compassion. What of these men’s stories? How many of them shoot steroids and/or exercise compulsively, both recognized forms of bulimia? How might I employ my knowledge, experience, and body (especially in a highly-gendered and body-conscious context like a gym) to facilitate health and gender equality and to undermine self-destruction and oppression for both women and men? As a start, I retire these rituals.

Falling Out, Growing Back

It’s everywhere: clinging to my sheets and pillowcase; clogging the shower drain; pooling about the bathroom sink, rug, floor; hanging like fine icicles from my summer tanks and T’s. Single

strands, knotted masses, overflowing combs and brushes, clumps mixed with dust beneath my bed.

“My hair is falling out,” I say to Christine Kiesinger, my friend since 1993.

Without a gasp or flinch, she sets down her fork. We sit in silence at the Greek Corner’s best outdoor table, gazing at a tranquil Lake Ivanhoe. Christine’s chocolate eyes find mine. “Did I tell you that my sister finally extricated herself from that destructive relationship?”

Nibbling at the salad we share I reply, “Earlier this year, wasn’t it?”

“Right. Julie has been losing her hair too.”

I exhale. “My GP said it’s not an uncommon response in women, 90 days—three cycles—after a trauma.” Knowing Julie’s struggles with body and food I ask, “Is your sister eating enough? How’s her protein intake?”

“She seems healthy physically, but you can imagine how this affects someone who makes her living--”

“As the owner of a salon,” I finish. “And, like you, Julie has beautiful hair: thick, strong, glossy. I’ve always hated mine: easily tangled, slow growing. It will take years to reach my current length.

“Say, your sister probably knows this, but tell her that my stylist recommended a supplement called Silica.”

“Julie started using a shampoo for cancer patients.”

Christine’s statement opens a scrapbook of memories related to the death of our mutual friend and fellow USF alum, Jennifer Pickman. I respond, “In graduate school, you and I watched Jenn lose her hair twice during recurrences of Hodgkin’s. You might remember this: she wrote a paper for Art Bochner’s narrative class about her personal relationship with and the

cultural significance of hair. In one section, Jenn talked about disclosing to family and friends that her cancer had returned. She reported that the first question asked was just as likely to be, ‘Will you lose your hair?’ as ‘What’s your prognosis?’

“Jennifer’s death in 1997 contextualizes my more recent losses, including the loss of my hair. She wanted to live more than anyone I ever have known. We entered graduate school the same semester, lived under the same roof for two years, took classes together, co-authored papers. Jenn and I talked about cancer almost every day; given our coursework on relationships and emotions, we spoke regularly about death—*but never her death*. As you remember, she ‘did not go gently.’ Her last words—a wail from her body I still can hear: ‘Please, no! God help me!’ The doctors had just told her there was nothing more they could do. She was so distraught that they sedated Jenn into her final morphine-induced coma.”

Christine touches my forearm as I continue, “Jennifer cherished life. She would trade places with me on my worst day. Knowing that helped me pry myself from bulimia’s grasp.

“Ten years ago, I would have freaked out about losing my hair. I feel frustrated, yes. It’s another loss, another layer to the injury. But remembering Jenn helps me see this not as tragedy but as irony—even comedy. If you’re shedding an old self, why not start at the top? Her hair fell to the bottom of the list of losses suffered by her and by those who loved her.

“In two months, I lost my marriage, my lover, my best friend, my future plans, an extended family, and my home. Those losses must be accepted and grieved. My hair will grow back.”

Brown-Eyed Girl

It is Sunday night, October 15, 2006, three days before the final divorce hearing. His cell number appears on my caller ID. Neck tightening, I pick up on the fourth ring: “Hey.”

“Hey!” he replies brightly. “Our work team spent some downtime in Manhattan. I have a gift for you. May I bring it over?”

“Um ... sure,” I say. “Can you come now?”

He appears at the door less than 10 minutes later. We do an awkward post-apocalyptic dance: Kiss? Nah. Hug? Hmm. Touch? Where? Someplace safe. Shoulder?

Handing me a plastic shopping bag, he smiles. I pull out a bundle wrapped in white tissue. Tearing it away, I find a Pashmina and silk shawl: its texture smooth and delicate, its colors (lavender and black) my favorites. “Lovely,” I say.

I embrace him, not clumsily, but with a sweet yet stinging familiarity. Laying my head upon his chest—his center, *my* center for 13 years—I take in his scent and listen to him breathe. Everything around me—and *in* me—softens.

Then, a muffled but discernible voice: “Oh, our hearts a-thumpin’ and you...” He quick draws his ringing Razr™ from the back pocket of his pants, the motion jostling me into my own space. “Jesus,” he mutters as Van Morrison continues to bellow from the Motorola mike: “My brown-eyed girl. You my--”

He tries to explain: “I, uh, changed my ring tone.”

“To ‘Brown-Eyed Girl’?”

Our couple’s counselor once said, “Before posing a provocative question, ask yourself: do I really want to know? Will the answer help me?”

Had I been thinking therapeutically, I would have withheld what came next: “Is that your *general* ring tone, or might it be attached to someone in particular?”

“I ... met ... someone,” he says, each word spreading my ribs. Then I catch a slight grin of ... what? Infatuation?

“Good for you,” I tell him, shaking my head, “and nice work taking back that song. Why give up Van Morrison just because that happens to be the *Song* my *Fa-ther* and I *Danced* to at our *Wed-ding*?”

He winces. Could he have forgotten? “I’m sorry,” he says. “Despite how it looks, I don’t mean to keep hurting you.”

Flatly I reply, “See you at the courthouse.” I close the door behind him and hear my husband descend the steps and shuffle across the sidewalk. Locks click. Door opens, shuts. Engine turns. Car backs away. Fender scrapes brick. Reverse ... to first ... to second ... to third gear. Silence.

I look down and note that I am left, quite literally, holding the bag.

What do you say when grief shows up at your door bearing a gift? What to make of this shawl: the warmth of grief’s embrace? The beauty of grief’s tapestry? The safety of grief’s object?⁴

My breathing short and shallow, I begin to pace. Van Morrison sings in my ear: “Hey, where did we go, days when the rains came?” I stride to the bedroom, chucking the bag to the back of my closet as I pass, then move to the bathroom. Tap on hot, I squeeze cleanser into my left palm. When steam rises, I work the cream into a bubbling lather. It meets my face not in the

⁴ A nod to the film *The Safety of Objects*, produced by Berwin and Vachon (2001).

prescribed gentle circles but at frantic, aggressive angles. “Come on,” I growl at the tap, trying to move it further to the left. I rub, rub, rub my eyes.

At last, I reach for a towel, pat my face dry, and gaze into the mirror. My eyes—my *brown* eyes—instantly fill with tears. The wound at my core cracks through its scab. I clutch the edge of the vanity, steadying myself for a deep, heaving sob. Liquid pours from my eyes and nose, into my mouth, and down my throat. I try to swallow but choke and cough. My stomach flips. As I spit into the sink, I realize how familiar this feels: the setting, the position of my body, the grief. The Grief. How very little effort it would take to vomit.

But instead of calling up the contents of my stomach, I call up the grief, and I do what I could not at age 15 or at 25: I let the grief out. *I Let It Out. Out. OUT.*

Moans of an injured dog emerge from my body, low wailing sounds I never have heard myself—or anyone—make. I shudder but do not attempt to stifle them. My knees buckle, and I lower myself to the floor, near the toilet. I press firmly on the closed lid as my body convulses again and again and again.

Exhausted, satiated, grief covers the wound at my core, leads me to my bed, and strokes my hair until I fall asleep.

A few weeks later, I dress for an important professional meeting, the culmination of five years’ work. After donning and discarding a spate of skirts and shirts, I decide upon Ann Taylor sheath, black. I even forego my usual Birkes for black pantyhose and pumps. Feeling monochromatic, I remember the bag at the back of my closet. I strut across the room, slide open the door, and reach for glistening white plastic. With the flair of reclamation (and a bit of fuck-you indignation), I toss purple Pashmina and silk across my shoulder. As I catch my reflection in

the bedroom's full-length mirror, my body releases a love song's refrain: "You, *MY* brown-eyed girl."

Practical Applications and Pathways Out

Reading, Writing, Reflecting

In 1994, I took a seminar in Narrative Inquiry from Art Bochner, my graduate advisor. He assigned "Writing it Down: Sisters, Food, Eating, and Our Bodies," a paper co-authored by Christine and Julie Kiesinger (1992). In these women—intelligent, talented, and creative yet anxious and self-destructive—I saw reflections of myself. In my course journal, I storied a series of memories triggered by their work. I printed a copy for Art and gave him permission to share my snapshots with Christine, who was working on an interview study of women with eating disorders for her PhD dissertation (Kiesinger, 1995).

Thus began a still-ongoing personal and academic collaboration between Christine and me. Each of us has written autobiographically about her struggles with bulimia, has interviewed and written biographically about the other's experience, and has read and responded to the other's texts (see Tillmann-Healy & Kiesinger, 2001). In addition, we have collaborated with Carolyn Ellis on a methodological piece called "Interactive Interviewing" (Ellis, Kiesinger, & Tillmann-Healy, 1997).

Each phase of this work adds new layers to our accounts. We continue delving beneath surface meanings of bulimia (as, for example, a means of achieving or maintaining thinness) and exploring its dialectical tensions: between fullness and emptiness, control and chaos, expression and secrecy, vulnerability and cruelty (see Henry, 1973).

A binge not only can fill the body but also the spirit with nourishment and comfort; (over)eating in Western cultures is a common means of self-soothing. A bulimic purge releases not only food but also rage and pain.

Between 1994 and 1996, I began filling myself not by overeating but with compassionate introspection, empathic connections to others' struggles, and a commitment to cultural change. I learned to unleash emotion publicly through prose and poetry rather than privately and self-destructively through my body.

I ended "A Secret Life" with a hopeful episode in which I decide not to purge a holiday meal. Once the piece was published, I felt accountable to that ending, as if it were a promise between readers—especially students—and me.

Grieving

In 2006, I entered individual therapy for the first time and developed a more complex view of my family history. I still would describe the environment in which I grew up as I did in 1996: "a stable and loving home" (Tillmann-Healy, 1996, p. 79), but I now understand more deeply the impact of bearing witness to my mother's childhood traumas. From an early age, I internalized her anxiety, fear, and grief and began trying to protect others from my own, a dynamic Boskind-White and White (2000) have observed in their work with clients who binge and purge.

Compared to my mother's early experience, my life concerns felt trivial. The subtext of my self-talk: Get over yourself; others struggle with so much worse. As Boskind-White and White do, I reject simplistic and mother-blaming explanations. At the same time, I believe that bulimia became a primary means of expressing intense emotion I experienced but to which I did not feel entitled. Even the behaviors themselves came to feel like privileges I had not earned. When I

learned of Christine Kiesinger's childhood experiences of abuse, for example, my reflexive response was: What reasons could I offer to explain MY bulimia? What empty spaces?

One important reason I did not return to bulimic behaviors when my marriage unraveled is that I had learned to hold life's complexity: that, yes, I have many privileges (e.g., educational, economic, and racial), and it is my obligation to use those in service of liberation, equality, and justice, but grief is not a zero-sum game. In counseling and on my own, I was engaged in narrative reframing (see, e.g., Kiesinger, 2002; Lock et al., 2004, 2005). This involves recognizing the limitations of old ways of understanding and narrating experience. Lock et al. (2004) regard anorexia and bulimia as having "voices." When I told myself, *It's not that bad. Move on*, bulimia responded, *Stop. I feel your hurt. Let me comfort you*. Moving beyond bulimia meant learning to utilize other discursive resources to develop an effective counternarrative (Lock et al., 2004). In the newer story, I honor others' struggles, bear witness to others' traumas, and combat others' oppression—without dismissing my own. I see that being able to face, to cope with, and to communicate my loss and grief render me better able to support others.

Awakening, Politicizing

Most women in our culture...are "disordered" when it comes to issues of self-worth, self-entitlement, self-nourishment, and comfort with their own bodies; eating disorders, far from being "bizarre" and anomalous, are utterly continuous with a dominant element of the experience of being female in this culture.

Susan Bordo, *Unbearable Weight: Feminism, Western Culture, and the Body*

Starving people are notorious for a lack of organizational enthusiasm.

Naomi Wolf, *The Beauty Myth: How Images of Beauty are Used Against Women*

Of course, bulimia was not the only available means of coping with unexpressed grief. Why bingeing and purging rather than creative expression (in which I also engaged), athletic accomplishment (which I also achieved), or even addiction?

My choices to engage in bulimic behaviors were made in a particular cultural context, one that values women and girls less than men and boys (the commands: “close your mouth”; “take up less space”); one that privileges (especially for women and girls) a narrowly-defined and unattainable physical attractiveness above qualities such as kindness, intelligence, and creativity; one that exposes us to, on average, 5000 advertisements a day in which faces, bodies, and lives—our own and others’—become commodities to be bought and sold.

I cannot overstate my debt to feminism in illuminating pathways out of bulimia. Historical accounts note two important shifts around 1920: passage of the 19th amendment to the U.S. Constitution and the transition from external controls on women’s bodies, such as corseting, to internal controls, such as food restriction (Brumberg, 1997). I cannot dismiss as coincidence that “soft, rounded hips and thighs and bellies were perceived as desirable and sensual without question until women got the vote” (Wolf, 1992). Boskind-White and White (2000, p. 259), psychotherapists who have treated clients with eating disorders across four decades, view feminist consciousness-raising as the foundation of their work. According to their analysis, the number of women who once participated in consciousness-raising groups parallels the number of women who now die each year of eating disorders.

Cultural analyses (see, e.g., Bordo, 1993; Hesse-Biber, 1997) helped me understand how body dissatisfaction fuels consumer capitalism. As Naomi Wolf (1992, p. 96) argues, “a woman who does not feel damaged cannot be relied on to spend money for her ‘repair’.” Like Abra Fortune Chernik (1995, p. 80), “I digested the connection between a nation of starving, self-

obsessed women and the continued success of the patriarchy.” I became convinced that continued performance of bulimic behaviors constituted a form of collusion with sexism, hyper-consumerism, and environmental destruction.

My intention is neither to blame those struggling with an eating disorder nor to provoke further guilt for not “measuring up.” Instead, I seek to deindividualize our responses and to join forces in destabilizing hegemonic cultural standards. This approach calls us to ask: whose interests (economic, political, social) are served by the constant (re)production of discontent? Who pays what kind of price? What alternatives exist?

Lifting

As mentioned, in 2002, I embarked on moderate strength training two to three times a week, a strategy Boskind-White and White (2000) recommend to clients attempting to overcome eating disorders. Though bingeing and vomiting had been absent from my life for six years, I approached this endeavor with trepidation. I knew compulsive exercisers (both women and men) and understood this as a manifestation of bulimia. I also wondered if working out at a college gym amid 18- to 22-year-old women would trigger body dissatisfaction. Moreover, weight lifting is structured around body parts, and I no longer wanted to experience my body as, in Mukai’s (1989, p. 633) words, “a set of fragments.” In contrast, I discovered that the experience promoted an integrated strengthening of body and spirit.

I maintain awareness of how my performance of self at the gym may impact the “audience,” especially young women. On one hand, the vast majority of my female students are much closer to the cultural ideal in terms of age (I was born in 1971), and most weigh less than I do. On the other, my presence at the gym communicates that I value exercise, something

associated with both good health (which mentors should model for their protégées) and with obsession (which we should strive to help them resist). I considered joining a private health club but determined that my mindful presence at our campus gym could benefit students. In my professional life, I tend to offer a conventionally feminine presentation. At the gym, I consciously downplay that, opting for loose pants, removing make-up, and tying back my hair. No woman can be unmarked in public life, but when students see me for the first time at the gym (arguably a more backstage region than the classroom), they tend to deliver expressions I read as, *Oh my gosh, you're a human being too*. Again, I neither wish to overemphasize physical transformation (especially in the absence of personal, relational, and cultural change) nor to prescribe yet another program for disciplining our bodies. At the same time, strength training has “lifted weight” from my shoulders, my mind, my being. My embodied and emotional selves feel solid, centered.

The dissolution of my marriage, the most physically taxing experience of my life, jarred me out of all routines, including exercise. In the context of my life 15 years ago, the resultant 20-pound weight loss would have felt like an accomplishment. Some people I encountered (e.g., the dressing room attendant) responded to it as such. But in the maturing context of my life (as teacher, writer, and person learning to grieve), moving forward required reconnecting with my body. For me, that involved returning to strength training and eventually to my prior weight.

Teaching

Years ago, I came back from winter break, and a student (probably the same size or one larger than I) commented that I looked “healthy.” Off the cuff, I said that the holidays had rendered me “soft.” I saw the word penetrate her being and tried to recover with something like, “But life’s

too short not to enjoy my mother's Christmas cookies." Afterward, I vowed to monitor more carefully the ways I talk about body, both in and out of the classroom.

I close this piece by acknowledging my students. I hear their struggles and their stories in class, in their writing, and in my office. I have watched some of the smartest young women I have encountered leave school to enter residential treatment for an eating disorder. Experiences with students like Shannon (who transferred from the college where I teach because of revulsion to the culture of bulimia in her dorm) have affirmed my sense that it is my professional and ethical duty to provide analytical tools (e.g., feminist theory and political economy) to aid them in resisting and subverting our culture of thinness; to model "taking up space" intellectually and physically; to assign readings and facilitate dialogues on lived, embodied experience; to create safe spaces for academic and emotional risk taking; and to offer opportunities to explore and express loss and grief.

Lifting Weight

Mandy enrolls in my junior-level Gender and Sexualities course during her first year of college. She *prepares*: internalizing the reading, poring over her writing's content, structure, and editing. Sepia eyes flash as Mandy thinks aloud, exploring winding, then intersecting, pathways of ideas. Her enthusiasm stretches past 3:15 PM, the official end of class. She ignores her peers' leave-taking cues to pose another question, then stays after to continue the conversation along the walk to my next meeting.

One unseasonably warm February day, Mandy sheds her usual hooded sweatshirt, exposing a sleeveless top and low-rise jeans. It is the first time I fully note her frame: average height (perhaps five foot four), frail arms, absent waist and hips, flat, nearly concave buttocks.

I begin seeing Mandy at the gym. Today she walks the treadmill briskly, swinging her arms high. Seeing me, she pulls down headphones just long enough to rapid fire: “I loved your response to Jason. Our culture *does* conflate sex, gender, and sexual orientation. I thought of so many examples!”

Five minute warm-up complete, I depart cardio camp and head for the weights. Unless the women’s soccer or softball team is in training, I am likely the only woman amid the dumbbells. My routine involves compound sets: three exercises per body part, three sets per exercise, 15-20 reps per set. I push my body (with, for example, walking lunges) but not to the point of fainting.

Back, chest, bi. I begin with assisted pull-ups, where the kneeling user offsets body weight with 10-pound plates (seven, in my case). Wide grip and deliberate pace stretch and tone the upper back. Set complete, I switch to assisted dips, lowering myself slowly, until forearms, elbows, and shoulders form 90-degree angles. Wondering how my next task came to be called “preacher curls,” I add 15 pounds to the bar. Four seconds to raise, four to lower; repeat 20 times. I follow each three-set rotation with a quick drink and minute of stretching. Lying back into hurdler position, I see Mandy transition from walk to jog.

Dead lifts: feet shoulder-width apart, knees bent, overhand grip. Feeling a twinge of strain in my low back, I stop at 15 reps. From across the gym, I note Mandy’s face, now flush, as she again increases her speed. I place 20-pound dumbbells on either side of my next station. I hook my feet, lower myself onto the decline bench, and press the set. At the dumbbell racks, I exchange 20s for 10s. Back against the wall and side grips, I concentrate on each hammer curl’s bicep squeeze. During my last rotation of this group, Mandy dismounts the treadmill and begins Pilates-style ab work.

My third group of exercises involves a seated row (for back), dumbbell flies (chest), and cable bicep curls. It takes 20 minutes to repeat this rotation three times. Mandy is still working abs as I move from bench to cable area for the final time.

I gather my keys and faculty ID. As I stride across the gym, Mandy steps on a scale near the exit. I don't dare peer over her shoulder, but I would put her weight at between 85 and 90 pounds. In what looks like disgust, she shakes her head, zeros out the device, and begins an aggressive nautilus rotation.

Over the past decade, I have balanced a scale exactly 10 times: at my annual visits to the gynecologist. At this moment, in this place filled with younger, tighter bodies, I make both an exception and, I hope, a statement. Mandy is two stations down, on the leg curl, when I initiate contact with the scale. I shed neither shoes nor Walkman. A wall of mirrors reflects the newly defined contours of my shoulders. Moving the bottom slide to 100, I flex my right bicep and grin. Now the top slide: 10, 20, 30, 40. At 45, the lever quivers toward the middle; 46, 47, suspension.

An old voice, *147: shit!*

A newer voice, *You're 5'6". Muscle weighs more than fat.*

Today's voice, *Your student is starving, abusing her body—herself—for not being perfect. Help her expand.*

Something truly unprecedented: I step off, leaving the weight registered on the scale. "Take care of yourself, Mandy," I say, meeting her smile in the mirror.

"See you in class, Dr. T."

I leave the gym hoping that this young woman, my brilliant student, will take in and make meaning from the weight of my body as deeply and skillfully as she has the weight of my words.

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