



Dr. Judi Hollis

Experience, Strength, and Hope For People Struggling with Food Obsession

Accepting the Challenge



Q: Since we can't abstain from eating, how does someone accept ideas of flexibility with food plans?

A: The most common threads are honesty and accountability. In early recovery, we struggle to accept that the smaller portions we are expected to eat will sustain us—they seem so much less than we think are adequate. The rigid food plans recommended in treatment centers omit most sugars and refined carbohydrates. Initially, this kind of eating is recommended in order to get the Newcomer's attention. When we go through the process of weighing and measuring our healthy portions, we see how much excess we had been previously consuming. This was true for me.

To my relief, this rigidity is not recommended as a lifetime food plan. That gets worked out with the step-by-step guidance of a sponsor. Over long periods, as the person changes, their attitudes and obsession with food also changes so they can handle some flexibility.

For myself and others, it has been difficult to accept that we can relax a bit. Most of us are initially scared of that relaxation but, without trying it, we end up white-knuckling it. So, with guided practice, we find if we slip into old habits of overeating, we are able to ease back to the baseline of rigidity for a while. We eventually approach some kind of normalcy. These ideas are not to be tried at home alone, but only in consultation with another recovering person.

Q: When you started losing weight, did you feel recovered?

A: It is very easy to accept the good news of recovery and relish the compliments and admiration of others, but there are also



some losses. Eventually the accolades and congratulations will diminish. Your old and new friends will just start expecting you to be in your new body. Sometimes that will feel like loss and abandonment. If not addressed and accepted, this could result in regaining lost weight. Men who are accustomed to having a commanding larger presence have to accept fitting in with the crowd in a normal body. They need to seek an internal power which is actually what true recovery is all about.

Q: How did you adjust to your new body image?

A: We are often so accustomed to seeing a certain image in the mirror it's very difficult to accept positive body changes. After coming down from wearing size eighteen to size ten, I spent two years buying size twelve pants and taking them to the tailor for alterations. I had difficulty accepting myself as a size ten person. I grew up in the Marilyn Monroe era and she wore size twelve. In those days, size ten was considered skinny, and that was something I couldn't accept. It was suggested I try on a size ten and I started shaking. Accompanied by a helpful, supportive friend, I tried on the tens and haven't looked back. The fit of my jeans continues to be more honest than the view from my eyes or the talk from my head.

Q: Do you think unconditional self-love and acceptance is important before true recovery can begin—regardless of size?

A: Loving yourself is not a requirement for getting started. Action is! I recommend getting busy doing *something* and then later evaluate your feelings about yourself. If we waited until we felt good about ourselves, many of us would never begin. Taking action in one area (diet, exercise, mindful eating, loving kindness) will influence all the other areas.

Love and acceptance of self comes from practicing new behaviors that make us admire our actions. The deeper feeling of being comfortable in your own skin and loving yourself (flaws and all) comes much later.

© 2015 Dr. Judi Hollis is a Licensed Family Therapist, author of several books and educational materials, motivational speaker, radio and television expert. Judi would love to hear from you! You can ask Judi questions and access her materials, at www.judihollis.com or call 1-800-8-FNOLIGH