Reclaiming the Body: Anorexia and Bulimia in the Jewish Community

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“To save one life is to save the world.”

The Talmud

"My filthy habit" kicked in again!" A tearful Naomi sank into the couch in my office. “I must be crazy!” It was the day after the second Seder and she had been free from binging and purging for several months. "The first Seder was a total pig out so I decided I’d stick to salad and vegetables last night,” she said. But when she saw the pot roast and roast potatoes, the chicken and kugle, she lost control. Although she ate only a mouthful of each, within moments, she excused herself from the table, slipped into the bathroom where she proceeded to throw everything up. “I couldn’t help it,” she said ruefully, “I felt so fat.”

Naomi, a 31 year old Jewish mother of six-year old twin girls, has struggled with food, weight and her body since early childhood when she was labeled “chubby.” As an overweight teen, she began dieting; by college, the relentless pursuit of thinness had spun into a full blown anorexia nervosa. In response to feeling starved, she began binging. Next came vomiting. Before long she was bulimic.

Naomi is not alone in her unhealthy relationship with food, eating and her body. From being overweight to being anorexic and then bulimic, Naomi has spent most of her life battling with food and her body. While most women do not have life threatening eating disorders, the majority of females spend a lifetime feeling guilty about what they eat and agonizing over their bodies.

We are born hungry and forever, until we take our last breath, we must learn to nourish our hungers, appetites and desires, our mind body and soul. How what has began as a sacred right--feeding ourselves--become, for so many women, a dreaded taboo?

I am a clinical psychologist who has spent over thirty years working with people—mostly women—who have struggled with eating and body image disorders. These complex conditions arise from a combination of behavioral, biological, genetic, emotional and socio-cultural factors. While they are exacerbated by our culture’s obsession with weight loss, an eating disorder is always about more than an obsession with dieting and one’s body. Starving, chronic dieting, binging, excessive exercising and
being preoccupied with “fat” thoughts are the tip of an emotional iceberg. My work is always about helping people identify and nourish the unmet emotional, psychological and spiritual hungers masked and expressed in these behaviors.

As many as 10 million females and 1 million males fight a daily battle with anorexia and bulimia, life threatening eating disorder whose complications claim the lives of 5-10% of sufferers each year. At any given time, 10 percent or more adolescent girls and adult women report disordered eating—behaviors characterized by excessive dieting and exercising which, although not diagnosable eating disorders, cause seriously impaired life styles. Once thought to effect predominately teenage girls, anorexia and bulimia occur throughout the lifecycle and affect males as well as females. In addition to anorexia and bulimia, more than 25 million people struggle with binge eating disorder, often a precursor to obesity.

In the psychotherapy session that followed, Naomi and I explored her binge-purge. The middle of five children, Naomi grew up feeling invisible, sandwiched between an older sister, known as “The Bra Brain,” and a younger sister who was the prettiest and most popular girl in the class.

“My mom’s Seder table brought up my old feelings of envy, competition and inadequacy,” she realized. Feeling shamed, silenced and invisible, she turned to her tools of survival: binging and purging. Unable to control unacceptable thoughts and feelings, Naomi used food to soothe herself. Later, she distracted herself by throwing up. For Naomi, binging and purging were her tools of emotional survival. Learning to identify, accept and talk about her shameful feelings rather than stuff them down her mouth or deposit them in the toilet was the beginning of her healing journey.

No one theory explains the development of eating and body image disorders. While the cultural emphasis on thinness undeniably damages all women, only a small percentage develop diagnosable eating problems. These disorders serve different functions for different people at different stages. They generally help one avoid dealing with unacceptable feelings, moods and thoughts by keeping obsessive “fat thoughts” and food related behaviors in the forefront of one’s consciousness. They can be triggered by peer and family issues as well as a host of traumatic events, including emotional, physical and sexual abuse. While they occur throughout the lifecycle, onset is most often in adolescence when teens and young adults are faced with a host of new physiological changes, cognitive demands and social and emotional pressures. Ultimately these disorders have more to do with coping with one’s thoughts and feelings than with one’s body.

Jewish vulnerabilities

As a psychotherapist I try to help each person unlock the mysterious needs hidden behind their eating problem. Learning how to truly nourish oneself is the goal of therapy. While women from all countries and cultures develop eating disorders, Jewish women face unique challenges and vulnerabilities:

Genetic predisposition

Like all Americans, Jews are exposed to pervasive media images pressuring women to achieve an unachievable standard of thinness. On a daily basis we are bombarded with unrealistic images of the
female body in newspapers, television and magazine. These images promote eating and body image disorders. Feeling fat is the norm for the majority of American women when compared to images of ultra thin models who are tall blond lean and lanky. For most females, and especially Jewish women whose genes predispose them to being short, stocky and dark, making peace with one’s body is especially challenging.

The role of food and mealtime in Jewish life

“My binges began with the Hanukah latkas.”

“It was the Yom Kippur fast that led to my anorexia.”

The central role food plays in Jewish life creates a compounded vulnerability for Jewish women. From fasting on Yom Kippur to over-eating on Shabbat and Passover, a cornerstone of Jewish identity has always been rituals that involve family meals. For Jews, food has always had multiple meanings of survival and resilience. Not only do unique Jewish dishes celebrate the cycles of life, but mealtime itself tells the story of Jews as a persecuted, migratory people. Often forced by pogroms to leave their homes on a moment’s notice, only what could be carried on one’s back was taken. Often a pair of candlesticks and a tablecloth were all that remained of their vanished lives and became the centerpiece of a new home and life. Mealtime was symbolic of resiliency in the face of persecution. Even today, for many Jews, saying a blessing over bread and wine evokes memories of loss, hope and simultaneously celebrates the continuity of life itself.

The Orthodox Community

Women in the certain sects of the Orthodox community face special risks. Strictly prescribed roles often define their lives. They are under great pressure to marry early, and arranged marriages, immediate childbearing and large families are the norm. For example, Orna was a young woman who was pushed to start husband hunting at 17; feeling unready for marriage, the search triggered a deadly diet. For young girls who are unprepared to start families, anorexia is a way to delay puberty, put off child bearing and gain control of their bodies when their lives are out of their control.

Because many psychological problems such as addictions, alcoholism and eating disorders carry a stigma, often anorexics and their families keep their problems secret and avoid identifying the problem or seeking psychotherapy until the problems are dangerously severe. One particularly upsetting experience with an Orthodox family stands out. Rifka, a 24 year old married woman with five small children arrived at my office in a state of severe emaciation. She’d come in at the urging of her mother, who suspected bulimia. Upon consultation, Rifkin admitted to being bulimic and dated the onset of her bulimia to an unhappy marriage. She wanted to divorce her husband, but feared her parents would carry out their threat to disown her if she divorced. Although I attempted to educate her parents about the serious medical and emotional problems associated with her eating disorder, her mother stood firm: divorce was taboo. “There are some things worse than bulimia,” her mother stated flatly as she left my office, “and divorce is one.”
Issues of Identity: Dieting as a ritual of female identity

People develop a personal identity based on both a need for uniqueness and group affiliation (i.e. familial, ethnic, religious and occupational.) Many Jews struggle with the tension between assimilating with mainstream American culture and retaining a sense of Jewish identity. This tension can be played out with food and/or with dieting. For example, dieting can have multiple ways of strengthening one’s personal identity. Consider eighteen year old Rebecca, who developed anorexia. It took many months of therapy before we were able to uncover the roots, hidden in her past. Eventually Rebecca became aware that the origins of her feelings of “being unworthy to live” came from an unconscious identification with her maternal grandmother, lost in the Holocaust.

Throughout time and across cultures, rituals help negotiate life’s transitions and strengthen one’s sense of identity. Unfortunately, in contrast to rituals celebrating the male lifecycle, (circumcision, bar mitzvah), few rituals in Judaism celebrate the seasons of a woman’s life. In mainstream culture, especially at adolescence, dieting is one of the few rituals that bond women an, in a destructive way, it has become a ritual of female identity: wherever women gather, there is inevitably talk about weight loss. For Jewish women, excessive dieting may reflect a need to rebel against one’s Jewish heritage and genetic endowment as well as separate from a family that centers itself on food and eating.

Rituals of Renewal: How Jewish Practices can heal

I am probably more of a practicing therapist than a practicing Jew, yet I am steeped in many Jewish traditions that have enriched my life, and what enters my life, enters my work. Both Judaism and psychotherapy embrace the concepts of courage, compassion and empathy as fundamental building blocks of growth. I bring many Jewish concepts into my work as a way of bonding with clients.

The Metaphor of the Mishkan

People with eating disorders are disconnected from themselves, others and the universe. They need a safe place to reconnect and heal. When I begin therapy, I overtly invite each person into a mishkan, a “sacred dwelling place,” where we can work together to reclaim the parts of themselves lost to the relentless pursuit of thinness. In addition, people with eating disorders benefit from being reminded that their bodies are sacred. Healing involves reclaiming one’s body as a mishkan, a sacred dwelling place.

The Mi Shebairach

This prayer for healing in Debbie Friedman's contemporary rendition reminds us, “Help us find the courage to make our lives a blessing.” Many people who suffer from eating disorders benefit from being using these healing words as daily affirmations. “I eat to fill the hole in my soul,” were the words of Maya, a thirty-two year old woman who introduced herself to me as spiritually bankrupt. Integrating meaningful spiritual concepts to sufferers can be a source of great spiritual nourishment.
Rosh Chodesh

In the past few decades, a growing number of Jewish women have focused on developing rituals honoring the feminine. One example is the revival of the ancient new moon ceremony, Rosh Chodesh. From Talmudic times, Jewish tradition designated Rosh Chodesh as a special holiday when women gathered to feast, celebrate, and pray. Today Rosh Chodesh groups create new rituals as well as recovered neglected ones. Some groups celebrate biblical women such as Judith and Miriam, others invent new rituals to celebrate unique aspects of women’s lives, such as pregnancy, labor, and childbirth as well as to grieve losses such as miscarriages. New groups are tailored for girls and teens, hoping to foster Jewish identity and boost self-esteem at a time when stick thin models make many young girls feel bad about their bodies.

Holy Sparks.

The kabbalah teaches us to search for our shattered sparks, the parts of us we have lost. This concept is particularly useful for my work with people struggling with eating disorders. For example, Rena, a former patient had been bulimic at twenty-one. She recalled a despairing moment of her life. In a session where she had asked me, “Will I ever get better? Do you think I can recover?” A quote from Rabbi Nachman of Breslov touched her deeply: “As long as a tiny flame remains, a great fire can be rekindled.” I reminded her and gently drew her attention to many of her inner resources. The mystics believed that we will attain wholeness by finding our holy sparks. This concept is akin to a strength-based approach that guides my work as a psychotherapist.

Storytelling

One of my tools as a psychotherapist is also at the heart of Judaism. I encourage my patients to think about and tell the stories of their lives. Jews have a deep respect for storytelling. Each year Jews read the Torah from cover to cover, always certain that each rereading will offer new meanings. Passover, the holiday most celebrated by Jews worldwide, is based on the retelling of the story of freedom. Like Judaism, psychotherapy is based on the principle that each time a person tells his or her story, new meanings are revealed. Certainly this has great relevance to eating disorders, for binging and starving always contain a hidden story.

Forgiveness.

One of the final steps of recovery often involves asking for forgiveness from oneself. I often initiate the practice of selichot (petitions for forgiveness) into my work. Although this practice of asking for forgiveness from those we have harmed usually occurs between Rosh Hashanah and Yom Kippur, it can be practiced anytime. This practice teaches that if one asks three times for forgiveness from someone one has harmed, forgiveness must be granted. It reminds us not to hold grudges, that anger destroys. People with eating disorders tend to be perfectionists and often have great difficulty forgiving themselves. The ritual of selichot can be used to encourage self-forgiveness.
Conclusion

The world breaks everyone and afterwards, some of us are strong in the broken places.”

Ernest Hemingway

The idealization of thinness damages all of us. It is about being who you are supposed to be instead of being who you are. Judaism and psychotherapy teach people to celebrate life, value the present moment, and honor what is holy/whole. Healing involves helping patients know that who they are is enough. I remind my patients of an old Hassidic tale. Before his death Rabbi Zusya said, “In the coming world, they will not ask me “Why were you not Moses? They will ask me, “Why were you not Zusya.” The aim of psychotherapy is to try to help our patients become strong in the broken places. The unexpected gift of being a therapist is that when my patients grow, I grow. This is the essence of tikun olum: we are all always repairing a communal brokenness.

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