Warning message: (00:00)
This podcast series will share personal moments of connection and deeply felt experiences. If anything you hear has a triggering effect, please reach out to someone who can help keep you safe. Or, remember you can find lifeline at any time on 13 11 14

Tanya: (00:19)
you know, I was absolutely terrified of myself. I didn't trust myself. I didn't trust what I was thinking. I didn't trust what I was feeling and so insanely scared by what I was thinking and feeling.

Beverley: (00:36)
Welcome to lifelines, holding onto hope, a podcast in which people who have attempted suicide share the stories. For years Tanya has struggled with Anorexia, the mental disorder that takes the lives of more young women than any other. Today with her friends Ali and then Meagan, she explains why empathy, kindness, and compassion have been so important to her survival.

Tanya: (01:03)
I was very fortunate to be quite an all rounder as a young person. I loved school. I really loved learning and that's something that that continues. So I performed quite well at school, highly at school. I loved Sport and movement of my body. And so I was, I was very fortunate in performing highly in, in artistic kind of activities. I was scholar. I was invited to attend university as a scholar. I was provided so many different opportunities. I, yeah, I was an achieving young person. And to be honest, I think that's what made it even harder to reconcile that I could be so unwell and still achieving in so many aspects of my life. And when I reflect and think back about why didn't I put my hand up or why didn't I reach out sooner? It's so hard to even consider that something was so wrong when so many aspects of my life we're going so right.

Tanya: (02:14)
I was a, a very small child. I've always been a small human. Um, and so I was a very small child. It wasn't anything that I did in, in front of people. I think even back then I was aware that I would, it was more that I would hurt people's feelings if I throw away my food, particularly because I was aware that mum and dad put in a lot of effort into those sorts of things. So I'm in an attempt to not get into trouble or to hurt anyone's feelings then I would do that quite secretifly.

Beverley: (02:43)
Here's Ali on her first impressions of Tanya.
Ali: (02:47)
I suppose the first time I came to sort of realize that there was something slightly different about Tanya was when it's, especially when it came to food and preferences for eating, which I guess more so than anything else, I just picked up one because I'm slightly that way myself in that, um, if you had say a packet of marshmallows, I will only eat the pink ones purely out of a little bit of OCD I suppose on my side. So when I noticed that Tanya was sort of a little bit similar in doing that, I sort of thought, Huh, okay. He's a little bit of a kindred spirit as well that can identify with my own side of things. But it also, I suppose let me realize that perhaps there was something a little bit different about Tanya that perhaps, she too had a slightly different set of needs or a slightly different approach to looking at things that perhaps other people wouldn't normally notice or would just pass off as being picky or avoiding certain things. But it actually, there are oftentimes some sort of like, underlying I suppose, um, need to go a certain direction for a certain thing and it's not all, it's not often something that makes it very difficult or very obvious for other people. But I think, I think when you've grown up with it and notice it in yourself, you tend to identify with it a little bit in others.

Tanya: (04:15)
My eating disorder was never about my weight or my shape. I think contrary to popular opinion, it was definitely nothing around vanity. My eating disorder, if anything was a way in which I coped with the world. It was a means to get through. It was therefore never about a number, it was more just attempting to make my world make more sense. And I began measuring that sense by the numbers that dropped. Um, and that became a measure of, of how well I was controlling what seems so out of control. My experience became harder in high school, mostly out of self awareness. When I was in high school, it became much more obvious that I was different to other people and I became very self conscious and aware of that. And so because of that, I became more isolated and more entrenched in, in my illness. I think on some level I didn't really believe that I had a problem.

Tanya: (05:37)
Well, some times at night time, I mean I, Google is a wonderful thing and I was aware of maybe some of the behaviors that I was doing and I’d googled it and, and thought that maybe there was something there that wasn't right, that, but in the light of day, I just didn't feel as though anything that I was doing was wrong. I think in an attempt to just control or even make myself feel better, that was my main concern. And that meant that my behaviors became much more acceptable to myself because that was what made me get through the day. And in many ways they were what were comforting. I identify as being someone who achieves highly at life. Um, in many respects, in many regards, that is what made it even harder for me to understand that I was suffering
from a mental illness. My understanding of people who suffered from mental illness was that it was potentially individuals who are disadvantaged in some way. And in no way was I disadvantaged.

Tanya: (06:54)
I was provided the most amazing opportunity to study abroad. Um, to study part of my degree in Denmark. It was exciting to move away from, from Australia to experience a new country, to spend about eight months overseas. And I was, I was looking forward to that adventure and I in many ways ran away to Denmark in the hope that running away from where I was living, what I was experiencing, where I was finding the most, or having the most hurt and pain that I would get better. I quickly learned that when you run away to another country, you take yourself with you. And so I took myself and I took my experiences and I took my illness with me. And unfortunately I think being in a another country that didn’t speak the language that I spoke away from the networks of support that I did have here in Australia, then I became more isolated.

Tanya: (08:04)
I became more disconnected. I became more depressed and more and entrapped in my eating disorder. I would have, I would have been 18 or 19? Yeah, I wasn’t able to attend my classes. I was engaging in a lot of eating disorder behaviors. I was quite unwell. I knew that I was going to fail some subjects. I knew that I, I really needed some help and I didn’t really know what to do. Uh, to be honest, I, I reached out to some networks of support online, some communities, um, online communities. And they basically said that I needed to reach out in real time. The only thing that I knew to do was to contact the services that I knew and they were back in Australia. And so it was around about 3:00 AM or some ridiculous hour in the morning. I put some money onto my Skype account and, um, I called a help line and I didn’t say anything.

Tanya: (09:07)
Um, I just cried. Um, and the person on the other side of the phone, just basically said that they were there and they were listening. And they I knew that I was there. They could probably obviously hear that I was sobbing, but I couldn’t articulate what I was experiencing. Um, and so the following night I did the same and this time a wonderful person on the other side of the line, um, gave me an email address in which to to send, um, my concerns to. And it was through some email correspondence then with that service that I was able to articulate and for the first time really actually articulate what was going on for me.

Ali: (09:53)
And then when she came back from Denmark she actually moved back in with us for a little while. And I think that's when I noticed that perhaps the little idiosyncrasies, um, of food choices and things had become a lot more obvious and it was, it was just starting to become clear that perhaps she was now not in control of these little quirks in her nature, but then they were starting to control her. And that it was about that time that she had a relapse and did have to go into the Royal Brisbane Hospital for some treatment for a short amount of time as an inpatient. Um, and I think at that point, that was when I realized how much it affects, or can affect the people around her.

Tanya: (10:42)
I reached out to my GP, I walked in, I sat down and I sat in silence. Again, I've never been great at articulating or sharing my experience. And I then had to say that I was asked to go to see her and that this is what people had told me to say. And that then commenced the relationship with the GP who then reached out to services to try and to support me more intensively.

Ali: (11:10)
I mean it was quite confronting to go to an environment such as, um, like a mental treatment unit where you do have to go through special checks and special rules to be able to keep in contact with someone. That comes down to a point I think of you make a decision or I made a decision of what was more important, that little bit of discomfort or losing that person from your life. And I chose to, um, wanting to keep Tanya in my life and so I was willing to put up with that to make sure that that connection stayed and was almost like a life line, I suppose, back to the real world.

Tanya: (11:47)
You know I was absolutely terrified of myself. I didn't trust myself. I didn't trust what I was thinking. I didn't trust what I was feeling and so insanely scared by what I was thinking and feeling. And so if I was so terrified, I couldn't imagine what somebody else would be feeling if I shared that. And I think that's too, why I closed down was if I couldn't make sense of it, how could anybody else? So when I was in the depths of, of my eating, of my eating disorder, I, I began poly harming. So I began using medication to induce pain or discomfort or illness. And in many ways that became a tangible pain that I could make sense of. Um, and in other ways that also served to make me so unwell that then I didn't need to eat and that that was a way in which I could, could support my eating disorder. So I'd always, I'd always experienced depression. In many ways my depression came before my eating disorder and my eating disorder was a way to manage my depression.

Tanya: (13:29)
But my depression also got worse when my eating disorder got worse. And
particularly when I was under nourished, my depression was at its highest. Um, I lost a lot to mental illness. Um, I lost my identity to my illness and when that occurred and it felt like I had lost everything, suicide seems like a really viable option because I couldn't necessarily see what I was trying to live for. And also I didn't want to burden everybody in my life that I felt like I was burdening. Um, yeah, in many ways suicide became my compassionate option, um, as a way in which I could escape the daily hourly and minutely hell that I was, I was experiencing. And so suicide became and suicidal thoughts became an indicator of how much distress I was in.

lifeline: (14:44)
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Tanya: (14:56)
Sometimes I wasn't tethered to life, but oh, there's two things say always prompted me to try and stay. The two things that kept me most connected even for a short time was my family, not wanting to hurt my family, not wanting to put them through that pain. And also the idea of wanting to change someone else's experience so that they didn't go through what I was experiencing. That if I could in some way speak out or change something about the system or support someone to have a different journey than I had had, then that was a reason to, to stay. I didn't see hopefulness beyond my illness, but I saw hopefulness in my illness of trying to, to make a difference to someone else.

Ali: (15:56)
The second time that I learned about what she'd gone through, and that was when she called me from hospital and said, uh, um, I have to tell you something. And it's sort of like, okay, that's okay. You can tell me what it'd be you need to, and um, she said, oh, I'm back in hospital again because I decided that the only outcome I had was to try and do something stupid. And I said, Do you mean that you went as far as almost trying to take your own life again? And she said yes. Basically that's where it's coming to. So And that's, it's hard to hear that as a support person because it really, um, you sort of then have to sort of reevaluate for yourself and sort of go, okay, well, it's not a failure. We never, well I never like to look at it as though that's a failure for anybody. It's just, it's a change in your thought patterns to like, okay, we need to sort of approach this slightly different way now and sort of can go back and sort of go, okay, we need to start rebuilding. Basically

Tanya: (17:01)
I stepped into the advocacy and the support space in mental health because of some truly remarkable people who believed in me. I remember I'd been
becoming well and getting increasingly well and back into life. Um, and someone tapped me on the shoulder and said, you should apply for this mentoring program.

Beverley: (17:28)
And his Tanya's friend Megan.

Meegan: (17:28)
So Tanya and I got to know each other through a peer mentoring program through a non government organization in Queensland. Both of us were volunteering as mentors, having a lived experience with mental illness and then our friendship I guess developed from there.

Tanya: (17:47)
I think the biggest thing that has helped me is connection. I think mental illness, depression, anxiety, eating disorders, they breed disconnection. Um, it's almost natural to isolate. Um, and I've learnt that whilst disconnection and sometimes isolation is almost a default for, for me, connection is the antidote to that. And so even whilst trying to pull away, I know that I have to fight to reach out. And so connection for me has been the biggest thing to support me and remains the biggest support.

Meegan: (18:33)
Having been friends with Tanya for long enough, I feel like I can get a sense of when there's a genuine pulling away from self care versus when there's a I'm pulling away even though I really need connection right now. So I know sometimes that can feel imposing, but I, I've found that it's really important to, to make the call and to show up and just be there anyway. And in another situation, um, I will make it a non negotiable that Tanya and I have meals together because I know that nutrition or just eating for any human being is an essential part of staying well. And we'll be together at meal times very naturally. So time will pass that were together and it becomes dinner or it becomes breakfast. And rather than making it a difficult conversation around what are we going to eat, what are we going to do, what do you want, how do you feel? Often it's something I'll just take into my own hands knowing her general preferences around food and we will just make a meal together and I'll just put it on the table and it, it won't necessarily be a push or a big discussion, but it's sometimes it's just a little bit of a nudge in the right direction. And also I know that Tanya knows that I, no matter what she says, I'm going to be there to support her through that moment even if she tries and tries and tries again to kind of get out of that moment as well. So meals are definitely something that we do on a regular basis as well.

Tanya: (20:07)
Helping people has helped me. As a mentor, as a Newbie Mentor, I thought that I had to have all of this wisdom and knowledge to share with someone else. And what I quickly learned, particularly in mentoring and particularly in peer work, it’s not about holding knowledge for someone else, but it’s about discovering and finding knowledge together. And so I didn’t need to know everything. Um, and through that experience, I have grown. The people that I’ve worked with or supported have supported me. I’ve had to work on perfectionism and relationships and continue to challenge connection, which I sometimes withdraw from and be reminded constantly of the things that are helpful in recovery. And if I’m saying that they’re helpful, then I should be doing them. Um, and it's always a reminder that those are the things that I too need to prioritize in order to stay well.

Meegan: (21:11)
I think when we’re sitting with someone with an eating disorder, we overthink it too much and we think they’ve got these rules and they’ve got these fears and if I give them this or if I give them that, then that’s gonna that’s gonna make everything too difficult. But if you think about breakfast or lunch and dinner, so many of us have this really innate understanding of, well, okay, you know, I might give someone a sandwich or I might give someone just a, a bowl of Spaghetti Bolognese. And I simplify it as much as that and go back to what would I feed someone else if they didn’t have an eating disorder in this situation. And I would think it would be completely normal because I guess recovery from an eating disorder, um, requires trying to normalize our relationship with food. And if we keep getting in arguments with the eating disorder, we will just wrap ourselves up in, in challenges. And so I think it’s just coming back to the basics and trusting, trusting my, my judgment around what is normal, has made things a lot easier.

Tanya: (22:14)
Sometimes. Sometimes I haven't been able to reach out to the people closest to me. Sometimes like I don't feel like I can reach out to my family or my friends because I worry that I'll hurt them and because I'll worry that I'll burden them. Generally that’s when I’m feeling in my lowest. It's when I most need to reach out that I find it the hardest. Um, and so when I am at my lowest, reaching out to lifeline, reaching out to an independent listening ear, um, is invaluable. Just to know that somebody's there that somebody is listening to, to give that pause is sometimes the pause that I need so that I can take the breath so that I can change the actions that I want to take.

Ali: (23:14)
It became really evident to me, um, in when having dealt with Tanya going into such a regimented, a regimented treatment facility in where you have people around you 24 hours a day, watching what you eat, when you eat, how
long you ate for the type of foods you eat, all of that sort of thing. And then at the end of say, four weeks, six weeks, two months, however long you need to be in there, all of a sudden it's almost like you're released from the cage and sort of gone, okay, fly free and there you go. It's sort of, I suppose really highlighted to me that it, it is very difficult I think for some people to keep on track with that support afterwards in that there's, I know there's a, there is a lot of support networks out there for people, um, with therapists and eating disorder groups and um, counselors and group homes and that sort of thing. But I think people are actually quite clever in avoiding any of that support if they don't sort of emotionally feel they need it.

Tanya : (24:24)
I think we're so quick to label feelings as good or bad. And for me I've had to really unlearn that. That feelings are feelings, um, and for me, feelings are sign posts, giving me an indication of maybe what's going on beneath, um, and to, to trust that, but also to find value in the bad feelings that actually they're there for a reason too. I know that I was very quick to, as a young person to not feel bad feelings, but actually they're just as important sign posts as the good feelings. And so I've had to really re label my experience of good and bad. That actually sadness isn’t a bad thing and it’s OK to feel sad. It’s okay to be depressed. That they are part of the content, the continuum of feelings and emotions and you can't have one without the other. Too often, part of my coping has been to numb. And to be honest, I think oftentimes my eating disorder has served as a way of numbing. That if I'm nutritionally deprived, then I feel less, but I've also learnt that when you numb, you don’t also get the warm fuzzy feelings of life either. That it's harder to feel the warmth of connection if you don't allow yourself to feel, that you don't truly understand the warmth of connection without also feeling the cold of loneliness. And by having comfort in all of those feelings you can value and appreciate them all.

Ali: (26:05)
in regards to the sort of anxiety that goes around most conditions probably for mental illness or that sort of thing. You really need to find a grounding point and that's usually, it may not be a family member, it may not be a close friend. It could be a therapist or it could, it could be anyone, but I think you need to find that connection with someone. Whether it's someone that's really close to you or someone you can just identify with. To be able to have that person, I suppose or that contact to be able to still keep a grounding to things that are happening around you and keep checking in, keep making contact, keep making a link to everything else that was happening. Then, I mean it just made it so much easier to sort of then try and deal with it in your own mind and sort of go, okay, this is overwhelming, but we can get through this and I've got someone out there who will be there for me and will not judge me when I come out of this, um, at the other end and will still be around and still treat me
as, as a real person and an individual rather than something that’s strange and Quirky and um, a lot of people get scared by, I think sometimes

Tanya: (27:26)
I think finding the places where I can connect and be my whole self, good parts, bad parts all parts is, is invaluable. Connection to nature. I, particularly when I’m really depressed, I will not get out of bed. I will not shower, I will not eat, I will not function. I will not open the windows. But the act of stepping outside and seeing the sunshine or the rain, but being connected to nature is sometimes really grounding and really refreshing. And so when I want to hide away in the darkness, I know that that's when I need to go plant my fate in the sand or go and stand up on a mountain or just go outside and feel the sun on my face. So connection and that doesn't have to be to people all the time. That can be to places and to things. I have two cats. Um, and, and so that connection is really important to me because they will know when I'm feeling low and so the connection to another warm body, something to pat is so invaluable.

Meegan: (28:44)
I would say that being persistent is really, really important. I would say that holding someone always in positive regard is important. Even though sometimes people do things that make you frustrated in that moment, knowing that it’s not coming from a place of malice, it's coming from a place of fear or pain. I, I would encourage people to not be the only one in their support team. So to share that because for a lot of people's journeys it can be a long time. And being able to have a lot of people in that person's support group helps all of us. Uh, and the other one I guess is being both firm and fair at the same time. So standing there beside someone, but also kind of bringing them back to what you know that they need to do in their journey as well. And I think that is something that feels uncomfortable at first is to actually come back to some of those really core points that feel, I guess awful or mean to say. But there are so many ways to do that with kindness and empathy and compassion that don’t then let that relationship be negatively affected after doing that.

Tanya: (30:02)
I think when we're in the depths of illness, it’s hard to hold hope for ourselves, but by holding hope for a different experience or for the promise of where someone can go or where someone can be by holding onto that, until we can hold onto that for ourselves, that empowers us to eventually reach out and take it. And so I think no matter how long someone’s suffered or someone's experienced illness or distress, never underestimate the power that holding on to hope has to empower us to hold onto it too.

Meegan: (30:47)
So when we went camping at the start of the year, this year, Tanya has a history in dance and acrobatics. And so Tanya is there on the beach with a group of my friends teaching us how to do human pyramids and do these lift things. So there’s, you know, a bunch of, a bunch of adults are being taught by Tanya as if we were a part of her gymnastics class of four year olds. And it was just so nice to have Tanya there just being the center of that. And it just made us all laugh. We were all covered in sand and, and are falling over each other by the end.

Tanya: (31:26) My favorite memory of this year so far has been the trip to the beach for New Years. And some of the most enjoyable moments of that trip. Not only were the star gazing on the beach at night time, but were the human pyramids, the trying to coordinate cartwheels and take a photo and time that and trying to try to coordinate group, a group pyramid that that inevitably resulted in the largest human being on top of that pyramid was, was definitely the highlight.

Meegan: (32:06) Yeah. And I think it was just, cause I know that you are also really struggling at that point in time as well. Like in that was, I mean obviously I want Tanya to be there just because I want Tanya to be there. But I was also acutely aware that it was a difficult time of year for a lot of people and that she was having a difficult time. So I know it was really a big step to kind of come away for that many days with a bunch of people that you don’t know. And yeah, watching seeing you put yourself in that place of discomfort and then actually a nice time was just so good, so good. And then it’s carried on. Like meeting that group of people has then allowed Tanya to kind of make connections with those people in different situations.

Tanya: (32:53) I definitely didn't want to go camping because of how I was feeling. It was how am I going to surround myself with humans and be a happy human, um, when I wasn't anywhere near that. That place meant that there was many occasions that I typed that I'm not going message and then deleted it. Um, and I think too, I was, I was so acutely suicidal before going camping that that was what was most helpful was to be surrounded by other humans and appreciating just the stars and the sand and giggles and water and, and all those things that I didn't want to be a part of.

Meegan: (33:39) Mm. I may have also called my friend who lives near here and said, oh, that's, you're conveniently located near Tanya, so you can pick her up on the way. Uh, awesome. See you guys on Saturday.
Tanya: (33:50)
No choice. I was coming. Yeah.

Beverley: (34:00)
Thank you for listening to holding onto hope. Lifeline Australia is grateful to all our interviewees. Who share their stories in the hope of inspiring others. We also acknowledge all of you who provide support to people in crisis and those on their journey to recovery. If you found this podcast helpful or inspiring, please share it, rate it, write a review, or subscribe wherever you download your favorite podcasts. If this story has affected you and you require crisis support, please contact lifeline on 13 11 14 you can do this at anytime or visit lifeline.org.au to access web chat every night from 7:00 PM to midnight. If it's inspired you to be a lifeline volunteer or to donate, please visit lifeline.org.au. With thanks to Wahoo! Creative for interviews, editing and production, and the voice of lived experience, which is essential in the development of our work.