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Dana: [00:00:00] Hi, everybody. Welcome back to the "Body Trust" podcast. I'm Dana, and I'm so excited today to be here with Sirius. Hey, everybody. Hilary. Hi there. And our dear colleague and friend, Anna Sweeney. Hi Hello.

Thrilled,

Anna: thrilled to be here.

Dana: Yes. Anna has... We have had Anna on our list of guests for a while, and, uh, we've been on sabbatical, and we're starting to record some fresh new episodes, and Anna is our first guest back on the pod. So we're so excited to have Anna here. You may follow Anna on Instagram. If you do not, I would recommend that you go there right now and look up Anna Sweeney.

Dietician Anna is their Instagram handle. And I love this little quick [00:01:00] bio you say, "No BS nutrition for eating disorder recovery and chronic illness. Not diet culture, not toxic positivity, just the truth your body already knows." So we are here with Anna to talk about all of the wisdom that they share in their, on their Instagram.

I find myself every day wanting to reshare your posts. So we're gonna talk about some of my favorites, because I think our listeners will benefit from hearing what you have to say about some of these posts. I'm also curious about the responses you get- Mm ... to your posts, because one of the things Anna does on her Instagram is really pushes back against wellness grifters and wellness influencers, and all the snake oil they sell to people.

And Anna also lives with a chronic illness and w- talks a lot about body [00:02:00] grief, and we'll be talking about that as well today. And so please welcome Anna.

Anna: Yay. I'm so excited to be here, and so honored to restart your recording chapters.

Dana: Yes. It's so great. We've missed being together, and we, we love having a guest to throw in the mix here.

Sirius: Mm-hmm. Mm-hmm. Mm.

Dana: We met Anna, I believe it was at a MEDA conference, which is an eating disorder organization based in the Boston metro area, and we walked into, like, the social, and you were there. I think you were le- exiting as we were coming in, if- Mm-hmm ... I can practically see the moment. And we chatted for a few minutes, and then I think we just kept running into each other and following each other on Instagram and social media, so.

So yeah, I thought maybe we could start by having you talk a little bit about yourself, share, [00:03:00] and share what brought you to do the work you're doing.

Anna: Sure. So I I am an, a one-trick pony eating disorder practitioner, and maybe one trick is not quite fair. Um, but I've been in the field for 18 years, and all of those years have been dedicated to learning about being in space with humans navigating the challenge of having a body and being an eating, a fed person with a body, and that's been the root since the very beginning.

I got into-- I became interested in n-nutrition, specifically dietetics, specifically on the [00:04:00] heels of, Actually, my, my sister had an eating disorder that developed after I was diagnosed with multiple sclerosis when I was 15 And I did not in any way understand why my sister was engaging in an eating disorder, a series of eating disorder behaviors that made no sense to me.

My layers of unacknowledged body privilege made it so that I, I, I had no reason to have an understanding of anything. And then I got sick, but I was 15, and so I, I was a child and wasn't thinking about long-term anything. [00:05:00] And for a year, my family was really, really scared about my disease, what it would mean for me and the future, and my parents went through hell.

My whole family took an MBSR course with Jon Kabat-Zinn. Like, we did intensive work to try to help me and help my family's system. But for that year, my sister, who was also a creature who needed care and attention, was not tended to, and so, you know, the well-child experience took hold. And whether Katie would have developed an eating disorder or not, [00:06:00] my disease and the-- what happened after I was diagnosed certainly laid a pretty perfect you know, floor plan for Katie to develop an eating disorder as a strategy.

And when I went to school, I took my first nutrition class. I really liked it. I had a dream of being a sports broadcast journalist. That was my original thought. I was going to be one of those women on the football field interviewing athletes after some head injury, I am sure. And

Fortunately, unfortunately, that didn't happen. I took my first nutrition class, I loved it, and then I knew right away that I wanted to be an eating disorder dietician so that I could tell my sister [00:07:00] that people got better, and so that I could help her to get better, which I did not do because siblings.

That's not how eating disorder healing works, turns out. But 18-year-old Anna Was I mean, right place, right time. I got very lucky to find a career that I love so, so dearly, and it happened t- that my sister has since, like, recovered all of the way, and recovery does happen. And so my initial desire to tell Katie that people d- get better is still true, and she is all the way better, and [00:08:00] I love that truth.

I will talk a little bit more about myself, and then I'm going to shush. I finished school and started my career at an eating disorder program where I learned that I knew absolutely nothing, that my undergraduate education prepared me zero for any of the things that I was going to do. And I f- I mean, I was so privileged to have access to practitioners who gave a shit about the work that they were doing, and I happened to fall in with a group of practitioners who care a lot about the work that we do.

And Dana, you mentioned the three of us meeting at MEDA, the Multi-Service Eating Disorder Receiv- [00:09:00] Association, was my... You know, is a big part of my lifeblood. It's a big part of my origin story, and it's really cool to see that organization and all of us as practitioners you know, to really grow up as practitioners and be witnessed by other practitioners who are doing the growing up by our sides.

Because in real life, I didn't learn anything about anything I was going to do when I was in college or graduate school, and I didn't learn anything in my first jobs that I ha-- Like, I've unlearned more than I have ever been instructed, and what a [00:10:00] privilege that is to have the ability to say, "Shoot, I didn't know anything.

I'm very har- sorry for the harm that I have caused," knowing that- You know, there are repairs that are impossible. There are repa- there are repairs that have been possible, and that is the nature of, that is the nature of this work. I have loved every single minute of being an eating disorder dietician.

I don't know what year Dietician Anna became something, but I do know that I I have, like, a two-star review on healthprofessionals.com or something like that, and someone said [00:11:00] something about my having been a really good

dietician at a residential eating disorder treatment facility and then becoming Dietician Anna.

Sad. Like, 'cause I, I run my own business. I respond to my own emails. I have so many unanswered, um, you know, voicemails from a million years ago. So my... If you saw my r- my online scores, you would feel concerned about the kind of human that I am. I don't ha- I don't have auxiliary support people to, and never have, to return phone calls.

So, oops. Decent dietician. Terrible... Working on it, but terrible businessperson. And I feel really, I feel really lucky that Instagram exists, and who the hell knows [00:12:00] how long it will exist for, but it has been a total pleasure to be able to have this, you know, this art project experience. And I was saying earlier to Dana and Hillary, I don't have, I don't have real function of my hands in the ways that I used to.

I am a very creative person, and my disability, and this is the part that I actually didn't, didn't say. Part of why I... And I didn't say this either. Um, I graduated college in three years. I didn't take any time off. I stacked everything up, all the while saying, "I wanna do this before I can't do this," never thinking in real...

I mean, I was 19 years old. I [00:13:00] never thought, even though I know what MS looks like as it, like- Conceptually, I understood it. I did not imagine for a moment that I would be a 40-year-old woman with progressive multiple sclerosis and Very, very, very, a very humbling disability that affects most every part of me, and I, I feel very fortunate that the parts of my brain that allow me to think and to communicate and to emote, those are intact I, my neurologist has started to speak about my, my disease [00:14:00] as though I, like I have a pretty significant spinal cord injury.

And It's pretty true. But I didn't, I didn't really, even though I said I wanna do this before, I can't do this, blah, blah, blah, blah, blah. And I did have to stop working at a residential facility because my body stopped being able to get into places, and that pisses me off so, so much for so many reasons. And I'm-- I hate that COVID happened.

I hate that I lost access to my gym, my ability to be-

Sirius: Mm-hmm ...

Anna: physically active in ways that compared to a previous version of myself, it's like this is, this is like lame physical activity. And mostly I was saying that

in jest, but like that's, that's like such a jerky [00:15:00] thing to be minimizing the significance of any sort of movement.

But I was probably saying things, but it's a little bit of like what happened with the high heels and talking shit about my body. Like when I went into the gym and I was like, "Ugh, I know this is just so... It's just pathetic, and everybody is so inspired," and I hate that the most. I hate that. Mm-hmm.

I'm immune suppressed. I have a debilitating disease and I have not had COVID. I have been probably outside of my home

I, I think it would be

I think it would be excessive to say that I have been outside of my home on more than [00:16:00] 100, maybe 150 individual different, like, reasons to be out of my house, not related to medical experiences since March of 2020. Mm. That... Ooh But I'm so grateful that I get to do this really great work that I love, and that virtual care is real care, and that mirror neurons on computers happen, and my clients yawn, and then I yawn, and we are, like, in space together, and I miss my office, and I really want a hug, and

Bodies are hard Mm-hmm. Mm-hmm

And she will wax poetic forever. So please say [00:17:00] something.

Sirius: And I, you, you said so many things that I would like to follow up on. There are lots of threads there. But I, I will be honest, the, the one that is sort of in my mind and heart today is, you know, what you were talking about around your sister- Mm

and how your illness impacted the whole family unit. And I you know, we, we've talked a little bit about sort of being a part of the sandwich generation where we have elders that are eldering and, um, many of us have youth that we are responsible for on one level or another. Um, but there is something about when illness sort of comes into the conversation with our families and how that, like, really changes the dynamic.

And I'm just wondering if you could just say more about that or if there's sort of guidance or tips or, or whatever for the rest of us who... I, you know, I, I, [00:18:00] even though this is something I have experience with my own family, like, I know more is coming and it will be different the next time. And

so yeah, just whatever, whatever thoughts you have would be, I think, helpful to so many people right now.

Anna: So I'm going to follow up with that, Sirius, because I am also in this sandwich generation where y- my elders are not the, are, are not unaffected by the impact of having cells. So this is like we're all ... Cells mostly are just doing what they're supposed to do and then sometimes they mess up and it becomes something scary and it becomes something hard.

And I am in this space where I am, and I will actually just be, I will just be frank. My father is having a hard time with the fact that his [00:19:00] body is slowing down and does a lot of lamenting About how frustrated he is about the need to go more slowly, and the need to take his time, and the need for patience, and the need for s- rest and recuperation.

And it's so interesting because... And like my father is r- you know, smart, really. We are very close. Mm-hmm. And he says these things to me, and I'm like, "But you are complaining to me right now about..." And it's... The point of this is it is hard to have a body. We are all made up of cells. [00:20:00] Mostly cells do good things, and sometimes they stop behaving as they once were supposed to We have to get really real about the fact that Cells will stray.

Things will get hard. It was not my fault that Katie got sick. It is not my dad's fault that he is having a hard time. I think we owe ourselves so much grace in just acknowledging it is hard to have a body, and bodies will continuously You know, dash our expectations and make us question everything. And this is one of the things about the [00:21:00] wellness industry that makes me so

Can I swear here? Yes.

Sirius: Mm-hmm.

Anna: It's one of the things about the wellness industry that makes me so fucking irritated, because there are people that are pursuing, like, life that never ends

What are, what, where are your Hmm. Morals, values, like what actually is important here? Longevity? Shit. No. No. And I'm not answering your question, Sirius. I apologize. But we're just, we are just, we are just humaning together. And I think it's-- this is an even trickier time with GLP-1s everywhere impacting [00:22:00] everyone, so important to acknowledge the challenge of

having a body and how do we show up compassionately for ourselves and for the people that we love, and even the people that we do not care for at all

Hilary: Ah.

Sirius: I, I think that really works as a non-answer for me.

Anna: Me

Hilary: too. Yep. Sounds about right.

Dana: Yeah.

Hilary: Mm-hmm.

Dana: Mm-hmm. There, there's this ... One of the words I'm thinking about is the, the reckoning, you know? That, the reckoning that happens when we're diagnosed with a chronic illness, the reckoning that happens when we have a, something happen with our health and our ability changes, and the coming to terms with that in a society that likes to pretend like we're all gonna stay able-bodied and ne- we're never gonna get [00:23:00] sick.

And it's like, no.

One of the things in our communication when we were scheduling this is, you said, I'd like to talk about what it's been like finding room for body gratitude in a body that is doing a whole bunch of stuff that I do not feel grateful for."

Sirius: Mm. "

Dana: And witnessing humans around me who have done all of the things to be healthy and well experience body change with a hell of a lot less grace than I am."

Sirius: Mm.

Anna: So I think the body gratitude part for me, and it's, it's so interesting, Dana, and I love the language, I love the use of the, you know, the reckoning This became a part of my life

So much, like, earlier than I could have... I, I, my reckoning was not... I, I [00:24:00] feel really privileged in the ways in which I've experienced this disease because it has come for me, and it's come for me in a time of life where

Like I, I can, I can do this. I don't like this, but I am grounded enough to be present and be appreciative for, you know, like a finger stretch and for having the ability to take a deep breath and things that would have made me just roll my eyes in the before and You know, factually, I've [00:25:00] been, I've been very, very, very privileged.

My, you know, my life has been very privileged. My parents have been excellent caretakers and have done a wonderful job raising the two of us me and my sister And as my parents are aging, I will say they have done... You know, they do all of the things. They do everything that they're supposed to. They eat very, very well.

They have a garden in their yard. My parents it is, it is in- like, it's incredible, it's laughable how how poignantly my parents' life experiences have [00:26:00] set them up to be like... You know, doctors would love everything that they do in terms of taking care of themselves. They do all of the health-promoting things, and they take care of their bodies.

And they both have dealt with very significant medical things that if they lived, if we lived in a place, like if we lived in South Dakota where I grew up, I don't know that my mom would have had her genome sequenced. I don't know that she would be receiving the care that she is. I don't know that my dad would have had as many cardiac procedures as he's had.

Hmm. Hmm. I, I don't know anything. I just know that these two people who have done all of the things, and this is [00:27:00] not, not-- I was gonna say I'm not trying to give shit to RFK, but I absolutely am. They are doing like we're all immunized, of course. But they, they do all of the things. They do all of the things that, you know, the world shouts that everyone is supposed to.

And they do not appreciate perfect health. It's all a bunch of bullshit. We all have a bunch of cells, and mostly they're going to do everything beautifully, and it's going to be great. And for a number of humans, that will mean that people experience relative health for the entirety of their lives. And more so, people won't

And then we add layers [00:28:00] of like who gets blamed for what happens to them. Mm-hmm. Mm-hmm.

And, you know, the body privilege that my parents have. My dad had a physical a couple of weeks ago, and his doctor told him to lose 10 pounds, and when he told me that, I looked at him and said, "How?" Like, "How? Why? How? How?" It's like s- I want to pull out my hair kind of maddening, 'cause he's not particularly interested in what I have to say about- Mm-hmm,

Sirius: Mm-hmm,

Anna: Mm-hmm

Sirius: um, you know,

Anna: flapping back at his doctor. But s- tell a 73-year-old active person to l- just like, "Just lose 10 pounds. If you could just do that." Like how? How the... How is he supposed to do that, and live in his life, and do all of the things that he [00:29:00] wants to do? And why? Like stop it. Be a better doctor.

Hilary: Yeah.

Yeah.

Anna: But I, I think about this all the time. I think about the number of people that I've known with MS, the number ... I, I fired a neurologist who wanted me to talk about nutrition to people with MS about ... Oh, she said something about people needing to be smaller, and these are like, like lose weight with MS. Like, what the f- what are you saying?

So you're telling me that you want me to sit, and at that time I was using a walker, and I can still walk, but I don't do any adventurous walking. And by, when I can, when I say I can still walk, I shuffle very slowly using a walker. I think this was even [00:30:00] pre the BEDA conference in New York where I knew I was in the right place 'cause I said "fuck" in the middle of my presentation and the room erupted and it was like, these are my people. But my neurologist said, "I want you to talk about nutrition so that, you know, other people with MS can lose weight," as though my, you know, my thin privilege is generational as thin privilege goes.

Mm-hmm. Um, it is not because I am fit that I am small. Atrophy is a thing, and

What horribly insensitive, insulting thing to say to a person with progressive multiple sclerosis. "I want you to teach other people with progressive [00:31:00]

MS how to feed themselves"? And the only reason that any person would ask me to do that is because of my size.

Sirius: Mm-hmm.

Anna: Bec- my, my degree, that's important, but I am a thin person.

That's the only reason in the world that she would make that ask of me. I fired her.

Dana: Yeah, like the assumption that you're, you must be doing something right.

Anna: Well, I'm doing a lot right, and my myelin is not. Yeah. Yeah.

Hilary: Mm-hmm. That Mm-hmm. And to ask people to put this energy in to weight loss without an acknowledgement of the energy it takes to [00:32:00] keep going is just so detached from the lived ex- experience of the people sitting in front of you

Anna: What a cruel thing to say to a person that is already living with a hard that, and again, I have had MS for most of my life.

Most of my life has been Anna has MS. And so most of the adults that I have known have had multiple sclerosis for less time than I have. And that is weird, and that is true And

The presumption, I mean, multiple sclerosis is not a nutritional disease. It's one of the reasons that like all of [00:33:00] the anti-inflammatory bullshit diets to clear, to cure neurological conditions are so infuriating and also so, so, so, so, so tempting.

Sirius: Mm-hmm. I've

Anna: been there.

Sirius: Yeah

Anna: It's just, it's, it's cruel.

It's hard to have a condition like this. It is no one's fault. If you have cells that do things that you would like them to not do-

Sirius: Mm-hmm ...

Anna: gosh, I hope that you are really generous with yourself and gentle, because it is hard. It's just, it's, it's just hard.

Hilary: Yeah.

Dana: -- we've had this no more waiting course for a long time, and part of it for many years was showing up to a p- participants [00:34:00] had an option to come to a call with us.

And over the years, as we ran this course, there were always like, there was like three to four questions that one of the three or four would always come up, almost always, and I would say almost always in the call, somebody brought forth living with a chronic illness or chronic condition. And this, and, and the betrayal people feel, that they feel betrayed by the body.

And like, body trust isn't for me because I have this chronic condition, or I can't do body trust because I have this disease and this con- So we talk a lot about feeling betrayed by the body, and I wonder, I imagine that's something that you've felt and experienced and had to wade through potentially, and maybe still have to wade through it.

But I wonder what, what gems you might... Like, how do you, [00:35:00] how have you dealt with that feeling and when you've worked with clients who feel that way of, like, what has helped you through that?

Anna: So I, I think about body experiencing just so differently than I did in the before, really, as we all do think about, you know, body experience.

This is, this is a relationship. We are in these bodies, and we have feelings about these bodies, and of course we have feelings about these bodies. And Yeah. When something comes knocking on the door and is scary and scares the hell out of your doctors and scares your family and scares the people around you, or maybe they don't-- you don't share what is scary and you live in a [00:36:00] body that feels disappointing or feels frightening with and without a diagnosis, being in a body is hard, it's complicated. I have found, like there have been so many chapters of body grief that I have waded through, and it's hilar- it today, as my 40-year-old person can say, it's hilarious that you lost any time to loving

high heels. And it took me, it took me years of not... I wasn't able to safely wear heels for years before I stopped buying beautiful shoes that were not wearable outside of like [00:37:00] hobbling to like a table at a restaurant and getting back into my car and taking my shoes off.

And I didn't get rid of them for many years after that. And I will, I will share here I've gotten rid of, like, all of my nice shoes because I have a friend who has the same size shoe that I do, and I, I like, I like shoes. I've given away every pair of nice footwear that I have to be appreciated by a human who I love, who I know also likes nice footwear because my feet are not the same as they once were.

But my first body grievance was about not being able to wear high heels because of what, like, the meaning that I made of [00:38:00] being a healed person, wanting to be really grown up, wanted to look the part.

Sirius: Mm-hmm.

Anna: And I mean, today, I, I don't give a tiny shit about... I, I miss high heels. I think they're beautiful things, and also, like, cannot believe I lost a lot of time and a lot of money to footwear.

And I used to, you know, I hid my cane in my office, and then I hid my walkers in my office, and then came to a place where I stopped. And I stopped probably around the time that I stopped being able to work in a program because I couldn't safely get into or out of the building that I had spent years kind of, like, living in [00:39:00] And something about that was just like, "Okay, I'm, I'm fucking done.

I'm not, I'm not hiding my body for anybody else's sake anymore." And that's not to say that I don't... I mean, I feel saddened about my body. I feel sad that there are things happening to her that I cannot stop.

Sirius: Mm-hmm.

Anna: It doesn't ma- I can meditate, and I ca- I don't pray, but I can meditate, and I can ask the world for positive energy and My myelin

You know, things that's invasive. So when not appropriately medicated consumes itself. It [00:40:00] doesn't matter, doesn't matter what I do. Mm-hmm. I can beat myself up and be very unkind. I can speak negatively of

my body. I can think negatively about my body. I can announce my body in space before I arrive. I can protect myself.

Do-- I did this working in programs. I would say, "Oh, my stupid leg, my b-whatever."

Sirius: Mm-hmm ...

Anna: I would ask my clients to walk down the stairs in front of me so they didn't see me walking or walk, you know, walk ahead of me so you don't see me walking. I, I was embarrassed, and I wanted them to be protected from Feeling [00:41:00] judgment about me or-

Sirius: Mm-hmm

Anna: I wanted to protect myself by saying something before someone else did, just so they knew that I knew that I had a limp. Like I was aware, just so you know, my stupid leg. And it wasn't until a client in a program said, "You know, Anna, when... It's, like, really uncomfortable. When you talk shit about your body, makes me feel badly about mine."

And I was gobsmacked- Mm ... because I, again, I am a relatively... Right, and then for sure, y- like the privilege of youth, the privilege of being thin, and the privilege of being an attractive person, and, you know, financial pr- e- ev- all of, all of the [00:42:00] privilege And I didn't count myself in as someone that a person would compare themselves to because I was diseased, because I was disabled.

Be- so my, my experience of being in my body was so different from that of the people around me that I engaged in shit talk in front of people who needed the exact opposite sort of modeling. I had no idea that I was you know, doing harm

By doing this thing that I thought was protecting me. And that's when I, then I made a shit talk jar, and I changed the way that I talked about myself and talked about my body, and it changed the way that I feel about [00:43:00] her. And it took a lot of time and a lot of practice. And when the shit talk jar started, this is back in the days when we actually had dollars, like

Sirius: bill.

Anna: And I donated, like, almost 500 bucks to Meta over a very long period of time. But I started with, if I said something out loud, I stopped it. I would put a

dollar or 50, whatever amount of money in the jar. And with practice, I started adding money if I caught myself thinking something unkind about my body.

And, you know, with months and months and months of practice and neuroplasticity and, you know, a desire to not hurt the people that I so deeply [00:44:00] cared about, I changed the way that I talked about my body, and I changed the way that I conceptualize my body in space. And I feel

I'm unendingly grateful to that human who said, "You know, Anna- Mm It, it's not helpful for me when you do this, 'cause I don't know, I don't know how else I might have stopped. But what a gift to have a person say, "This thing that you're doing, Anna, th- like, this is not, this is not the move."

Hilary: Mm-hmm.

Dana: Yeah. Yeah.

Hilary: Boy, I wish that lesson alone could permeate the culture

Especially in this time when we're seeing-- I mean, it's always been happening, right? It's [00:45:00] always been happening, but especially in this time where we're seeing this freedom to talk about one's GLP-1 journey as if people shouldn't be impacted. Mm-hmm. I just, you know... I mean, we've always had this from influencers.

We've always had this, but right now I'm like, "Oh, please protect each other." How much I want folks to be-- understand how much that harms people.

Sirius: I just saw a headline and I, I did not read it, I think probably 'cause it was behind a paywall. But a a therapist or maybe a psychiatrist was talking about how a lot of their patients that they're seeing now, s- particularly young women, are walking in very much forwarding their diagnoses, like, as their laundry list of, like, "Here's all the things that are essentially wrong with me."

And I [00:46:00] think I-- it was either, you know, maybe it was, like, the first quote or something that was available to the person sort of talked about, "I, I learned this information about them almost before I learned their names." And I, I was, I was struck by that headline and sort of put it on the list like, "Oh, I'll follow up with that soon."

But I, I think there's something here around that as well that the, the world that we're living in right now, we are very quick to forefront, "Here are all the things

that are wrong with me so that you can't use them against me, so that you're aware that I'm aware, so that you can't use it to harm me," and to, to show, to show some level of self-awareness.

And I, I really question that last one, but I, I think there's an attempt to try to do that. And, and you know, I think it's connected to some of what you're talking about, Anna, but then when you bring it into the realm of, like, GLP-1s and weight loss, we've had a long cultural history of being very, very [00:47:00] upfront and direct about talking about that.

So then when you combine it with n- now I wanna talk about all of the things that are, quote unquote, "wrong with me" or different about me or explain why I'm the way I am sort of things, boy, it's... And I, I, yeah, I don't, I don't know about that. I don't, I don't know that I know enough to judge it yet, but I do have some questions

Anna: I, I share your questions and I feel as though I mean, I feel really grateful that there is an increasing awareness of you know, degrees of marginalization and speaking about neurodiversity and speaking about-

Sirius: Mm-hmm ...

Anna: chronic things and speaking about identities [00:48:00] and

I don't know how much... I mean, it certainly is a kind of a TikTok generation moment where folks are and I, you, you a- all might have different feelings about it, but there is a like kind of the identity of being

Different. And that's-- it is, it is important, and I'm glad that it's, uh, you know, possible for people to speak about what is happening. And it does feel like there is some, some degree of social currency around having a, a list of, you know, a list of hard, if that is like I have da, da, da, da, da, and my name is Anna.

Yeah, I, I, it, that feels [00:49:00] hard. Mm-hmm.

Hilary: I mean, I worry, and I don't think this happens all the time, but I worry that with this phenomenon comes an absence of, like, really situating these labels and the way diagnoses come to be, particularly in mental health in context that is, you know, the context of dominant culture, which is not as scientific as we'd like to believe, right?

Like, I think if we make things sound like pathology, if we make things sound like science, we hope they are that, and so much of this isn't, you know, or 'cause, 'cause of power, because of white supremacy, because of patriarchy, and also capitalism. Like all, you know, the three we never get away from here.

You know, we don't wanna lose that context. And while I think people can consider this for themselves and that [00:50:00] context, I worry about this trend and what that will mean in terms of, like, further suppressing-

Sirius: Mm-hmm ...

Hilary: um, our awareness around that

Anna: So we'll just be here as worried humans

Hilary: Exactly. Doing what we've always done, which I appreciate, you know, always and more than ever today and, and in this time, I think. I also appreciate, Anna, that after all these years of you doing one-on-one eating disorder work, that you've brought some of your wisdom and made, like, a course, an Anna course- Mm-hmm

um, that's sorely needed in the world and that folks can have access to. Do you wanna talk a little bit about that or tell, tell the world, the Body Trust world about it a bit? Sure. Okay.

Anna: So I've been talking about, you know, [00:51:00] making a thing for a very, very, very, very, very long time, and Chronically Nourished is finally here.

W- what is not surprising to me and probably maybe disappointing to others is that not a hell of a lot of it is actually about nutrition because nonfiction nutrition, like the stuff that is actually nutrition, like the nutrition science part of nutrition that I learned about and have since forgotten most of, but it's fine it's boring, right?

It is not sexy. It does not make you want to scream. It doesn't make you anxious. It doesn't make you feel overwhelmed. Nonfiction nutrition Is not about eating, you know, well [00:52:00] or, I don't know, well, good, whatever. Like, take your judgmental word and throw it away. Eating foods that you enjoy, so good for you.

Eating foods that are accessible, the best. Eating in safety, what a privilege. And mostly for people with chronically complicated relationships with food and

body, food probably can't do that. Whatever the that is, probably can't. So like the o- when my disease got really scary, and by my disease I mean my disability progressed in ways that scared me, I went on my first and only diet and [00:53:00] I tried...

You know, there was a medical doctor who had MS and she cured herself from how she healed herself from multiple sclerosis and that was on the cover of her book when it was first published. I was so pissed and then she keynoted at the American Dietetic Association conference and I was so pissed because there were so many dieticians that were talking about all of this produce and organ meats and I- like other yucky, yuck- like not cool stuff.

But they left her keynote talk feeling really empowered to talk to people with progressive degenerative diseases but like with confidence. And then fast-forward a few years and my disease changed and I thought, like, what [00:54:00] I, I-- this is the thing that I haven't done. I haven't done this thing so I'll do this thing and for the first time in my entire life I was not an intuitive eater.

I didn't enjoy any part of food or eating and I did not get better and I felt terribly guilty for not being consistent enough, not being dogged enough, not being, I don't know, devoted to the concept adequately

And then I got real and I stopped trying to fuck with my food to change ... I mean, my disease is non-nutritional. If you have other stuff happening in your [00:55:00] life and it happens to be related to nutrition, I hope that you are getting care and attention, you know, that is appropriate for you and your body But I am so...

Like the point of Chronically Nourished is the stopping of the process of, like, we just outsource body wisdom all the time. Chronically Nourished is about the end of outsourcing body wisdom because I don't care. I don't know. I hope that the doctor woman who wrote the book about her, you know, miraculous MS recovery, I wish her well.

I'm jealous that it was so effective for her and [00:56:00] I'm I mean, I am an anti-diet dietitian. I know that diets don't work, and I fell into you know, the wellness grift hole. And I am protected in the ways that I am protected. I have- I am very protected. And I was desperate, and it, it didn't work. And so Chronically Nourished, again, a little bit about nutrition, a lot about body relationship, a lot about body experiencing, a lot about social comparison.

It, I mean, it's a much, it's a way bigger course than just, just the food. And I would've loved to have been given access to it But I mean, I would, I would want [00:57:00] it right now. I would've loved to have had it when the book was published

Sirius: Mm-hmm

Hilary: Yeah.

Dana: Sounds like you have a book.

Sirius: Mm-hmm.

Anna: Well, I can't type like that.

There are ways.

Dana: There are ways. I- And yeah, that's a whole other thing.

Anna: It's a, it's a whole other thing. Right now, I just, I love-- Yeah, dictation is great. I'm-- I love social media. It's my art project. Come hang out with me on Instagram. I respond to everything myself, so it's slow, but, like, come hang out with me.

Yeah, it's Maybe a book. Probably not Yeah.

Dana: When I look at your Instagram, so often what I'm looking at is... Oh, and now it's, like, taken me off of your page Um, like I love this. This is your one pinned [00:58:00] post. This is back from the days when those boards were really popular and everyone was writing the content on the boards.

But you know, being a person who eats, this is the soapbox I'm g- Being a person who eats does not make you qualified to tell other people how to eat. If that doesn't sum up wellness grifters, wellness influencers. Mm. Gold. Mm-hmm.

Anna: And the first line of that content is, "I'm a registered dietitian, and I don't tell my clients how to eat."

Sirius: Mm-hmm.

Dana: Yeah. Mm. Yeah.

Sirius: Mm.

Dana: I'm gonna link to some of my favorite posts in the show notes- Yeah ... 'cause there's, there's too many. One of my favorite ones recently was about root cause. And, um, let me find it.

Here's the-- here's just how the post starts. [00:59:00] "Root cause gets used to sell everything; supplements, cleanses, \$400 lab panels, coaching packages. The phrase sounds like it's precision. It's actually quite the opposite." Mm. Uh, while root cau- real root causes exist, they're rarely singular, and they're rarely for sale.

Right.

So

Anna: I happened to do a little Google Trend search. I don't know if you ever do that, if you look at Google Trends over time. Yeah. But you can look at- Mm-hmm ... from 20-- I think it's 2004 when Google started tracking, like patterns of looking at things, and interest over time for root cause- I mean, now it's a gajillion percent exponentially off the charts.

There was a movie in nine- in 2019-- 18 about dental things. This man had [01:00:00] dental caries, and his chronic fatigue and anxiety were related to cavities and poor oral health

Root cause doesn't mean shit. Like, it doesn't, it doesn't mean anything. And the desire to, you know, get to the root of the problem, I, I, I get it. I appreciate it, but it is entirely made up. This is such a goop bullshit reaction, right? Like Gwyneth Paltrow wrote about, and I don't know. This is not about her.

I don't care. But it is just like Silicon Valley, I'm gonna live forever baloney. And It, it i- [01:01:00] it's, it's not a medical anything. You don't need to get to the root of a thing. There are people who have chronic inflammatory conditions that when you learn, in fact, that that person had, say, celiac disease and they eliminate gluten from their lives, their immune system stops behaving in the way that it did because they were exposed to the root cause, which was gluten, and celiac disease before that.

But anything else, it's all made up baloney. We can't be put into siphons of like, this is the one thing that happened because we are breathing air, we are drinking water, we are living on this planet, and somebody is making money- Mm-hmm ... looking for root causes It's all not science. It's all [01:02:00] maddening

Sirius: Yeah. I have to say f- when I think about root causes and thinking about them from a different perspective- Mm-hmm ... someone who is interested in culture and history and where we are and why we're, why we're where we are and someone who's sort of looking at that lens, the, I think the conversation about root causes it gets a little more complicated there, but I think honestly ends up in the same space.

Because while it is deeply important to understand the root causes of why we're dealing with the health systems that we are and why we're dealing with the climate crises that we are, like, all of those things matter. But the reality is that there are really, really excellent people who have done the work for us, if we care, if A, if we cared to look, and B, having known and, and [01:03:00] these things are knowable, what are we going to do about that?

Like, it's, it's fine to keep, you know, trying to understand why we're here, but what are, how is that going to help us move on to something better, different next? And I think that's where we often get so trapped, is trying to understand the root causes when I think about some of our societal problems, when we know what those are actually.

We, we know. Mm-hmm. So, so what are we gonna do about it now?

Mm-hmm.

And, and it, and it feels like a little bit of a trap. It feels like a little bit of a red herring, um, similar to the ways in which we're constantly trying to search for the data. Similarly for the, the, for the ways that we're trying to,

Hilary: Release the Epstein files.

Sirius: Thank you. Yes. Yes. That. Yes. That. Yeah, that. Yeah, exactly that. Exactly that.

Hilary: Right.

Sirius: Like, yeah, sure, sure. We should, we should have the files, but also, we know enough to act now.

Hilary: Right.

Sirius: It's

Hilary: true.

Dana: Mm-hmm. Mm-hmm. Yeah.

Hilary: Yeah.

Dana: Mm-hmm. Yeah. Sometimes you [01:04:00] know the root cause, but you, you know, people don't wanna look at that shit.

But we're not talking about that, right? Very that.

Anna: They're very- Like, the root cause, white

Dana: supremacy. Yes. Yes.

Anna: Yes. Mm-hmm. Mm-hmm. Yes. Yeah. Yes. Mm-hmm. And yes. Like, serious. That is the root cause. If there is a root cause for any of the maladies anywhere, it is that. It is- Mm-hmm. Mm-hmm ... it is white supremacy, and That, like, yes.

Yes. It is patriarchy. I just finished, I just reread Ain't I a Woman? And Like, bell h- bell hooks said this a real long time ago. And you just said something about the Epstein files, and I wrote today on Instagram about the [01:05:00] Freshman 15, and that was 1987. And then the, it, it felt a little bit like, oh, the timing around that. And then Donald Trump was walking into dressing rooms, and then we were in the aughts where Very thin was like the thing, and here we are and it's GLP-1 2026 and the same body aesthetic.

Like this is, this is not, this is not stopping, and we are

That's the root cause. So many things, and I am sure that there are root cause treatments

That are so much bigger than anything [01:06:00] pharmaceutical could ever touch, but you can't- if you can't sell it, it's not gonna be a treatment because capitalism and patriarchy and this has been a full swing conversation, and I feel

emboldened and not less depressed because this is the first time I've ever had our president's name come out of my mouth as part of a podcast.

Sirius: Mm-hmm. You're welcome. Yeah. About

Anna: right. Thank you, serious. That's the only... I mean, thank you. Thank you. Mm-hmm. Yeah.

Dana: Yuniior, Yuniior sure thinks he knows the root causes of things, right? Oh my gosh. One, oh, there's so much. We could talk to you for four more hours. I

Anna: would love that very much.

Dana: I appreciated this thing from [01:07:00] Jameela Jamil w- this week or last week.

Heroin chic was less danger... You just used the word heroin chic. It made me think of this. Heroin chic was less dangerous than this current timeline because at least we were a- all openly admitting with the name that it was dangerous and negative. Heroin chic, right? The same aesthetic now is being repackaged as an indicator of cleanliness and health.

Yeah. Mm-hmm. Not calling it heroin chic these days.

Anna: Mm-mm.

Hilary: Right. Hmm.

Anna: This is a clinical trial that has no one observing. There is no one paying attention to the what is happening when people are introducing these peptides into their systems and buying them on the internet and buying them down the st-whatever.

Like, this is still a clinical trial, and we have, we [01:08:00] are just saying the... I mean, we've been saying the quiet part out loud for a very long time. Yes. But this is... I'm not as eloquent as Jameela, but, uk Yeah.

Hilary: Yeah, I think that's really important to call that what it is and the way you're doing that, Anna. Like, I really appreciate this language you're bringing around like this is a clinical trial. What's happening with GLP-1s for weight loss

is a clinical trial that we're all witnessing in real time, and no one is really taking the data

Anna: Yeah And the root cause is that we don't give a shit

Hilary: That is the root cause, yep

Anna: Becau- because of the root cause, we don't give a shit '

Hilary: Cause we don't have to Mm-hmm Don't have to Mm-hmm.

Anna: And so much, I mean, s- what a time to have a body

Hilary: What a time to have a [01:09:00] body

Sirius: Mm-hmm. Oof And there are so many other co-occurring experiments going on Mm-hmm What happens if we use up all the Earth's water?

Hmm, let's find out. What happens if we stop caring about the sanctity of human life? Hmm

Anna: Hmm

Sirius: Let's find out. Did j- I just, yeah, yeah, just so many, so many other experiments where it's like, well, who's, who's ... We, well, maybe we know who's benefiting, but any of the other sort of like, who's doing it? Who's watching it?

Where's the control group? I don't know

Anna: Who needs that? What are you talking, serious- are you serious serious- ... about control groups and research? What? I re- I, I remember what was it? Was it Clinton was in office, and they were ... I obviously had had MS, and they were talking about embryonic stem cells and, like, m- making that not a thing

Sirius: Mm [01:10:00]

Anna: And here we are in this post Roe v.

Wade chapter of what the fuck life. And

Hilary: Mm-hmm.

Dana: Yeah. Mm-hmm

Anna: I don't...

Dana: It's absurd. Mm-hmm.

Hilary: Mm-hmm. Absolutely absurd. Mm-hmm.

Dana: The word of the year- Mm-hmm ... absurd. Or two words, horrific and absurd.

Hilary: Mm-hmm.

Anna: And the reason for Intentional community because using up the world's resources as though they actually are you know, not able to in fact be used up

It's a really scary, really scary thing, and we are focusing on [01:11:00] a lot of the wrong stuff. And again, it's hard to human

Dana: Yeah. Yeah Well, it has been so wonderful to be in community with you and spend this time, this FaceTime together. It's been such a booster.

Anna: Oh,

Dana: so

Sirius: good.

Dana: So good. It's been

Anna: such a

Dana: pleasure.

I'm still waving

Anna: at you in the halls

Dana: at Meta. "It's so good to see you. We need to chat."

Anna: Like, in the wheelchair, going, going, going, and you guys knew instantly to kneel down to get, like, at my level. That was one of the first ways that I was like, "Oh, these are, these people know how to be with disabled people," because you're not standing beside me while I'm sitting in my chair.

You, like, be on the floor or whatever. Be at my level so that we can take a picture together. Thank you so much.

Sirius: Mm-hmm. Mm-hmm.

Anna: The shit [01:12:00] that I didn't know until I was in a wheelchair- Right ... until, like, in public. But anyway, you've been my people since forever, and I am so honored to be in community with you.

And Cerys, it was a pleasure to meet you. Yes. Yes. This has been so much fun.

Sirius: Yes.

Dana: So good.

Anna: So good.

Dana: We will make sure that we leave in the show notes a link to your Chronically Nourished program, as well as your Instagram, and I'm gonna pick a handful of my favorite Instagram posts, including the Freshman 15 one, 'cause I think that's really important given that many of my friends have just been dropping their kids off at college for their freshman year.

And yes, we're so happy to have this time with you, so thank you.

Anna: Absolutely. This was such a blast.

Dana: If you think someone would benefit from hearing what Anna has shared with us today, please share the podcast We [01:13:00] can't do this without you, and we're so happy that you're here. Until next time, take care