

EUROBESITY

People First Day 2021

magazine

**LIVED EXPERIENCE
PERSPECTIVE**
Dominique Durrer

**IMAGE
BANK
LAUNCH**

UNDERSTANDING STIGMA
CHRISTINA FLEETWOOD AND DAVID MATSCHECK

EASO
ECPO



WELCOME



Dear Readers,

Welcome to the special issue of ECPO magazine dedicated to the people behind our new image bank. Yes, we now have a European Image bank of people from across Europe!

I am so incredibly proud of the campaign launch today and this great work coming true is amazing. What you are about to read are stories of the beautiful people who have put in so much work, these are the models for this image bank and their own journey.

Every single story and every single image are so precious to me, the positivity and beauty of the pictures is so impressive and diverse. Each captivating in its own way.

Personally, I know that it takes courage and strength to take part in such a project, and therefore gratitude is what is on my mind.

Being a part of momentous changes is always exciting, so congratulations Europe! We now have our own image bank with the people who are proud to see positive changes when it comes to photographs in news and coverage of the people living with obesity.

Thank you to all involved AND greetings from Iceland.

Solveig Sigurdardottir
ECPO President.

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Cover photo: Henry Scholz / Stefan Nagott
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Vicki Mooney
Executive Director, ECPO



In July 2019 the executive and board members of ECPO sat in meeting room in Reykjavik, Iceland for our 3-day strategic planning for the organisation. I was overwhelmed by the sheer experience and wealth of knowledge that surrounded me in the form of my colleagues and friends in the room. I felt out of my dept, imposter syndrome was hovering all around me as I tried to navigate through a strategic meeting for people with obesity across Europe.

There was one conversation which focused on the humongous task of addressing the soul-destroying images we see in the media when reporting regarding obesity. I looked around at my colleagues who were sat around the table and each of us had the same thought. We need a European Image Bank of people living with obesity that is not stigmatising, and we need to make it available and known to editors, journalists, and picture editors everywhere. What a huge daunting project to take on... It brought a favourite quote of mine to the forefront 'If your dreams do not scare you, they are not big enough'. This giant project most definitely scared me. And little did we know it would be made more challenging by the Covid-19 pandemic.

Yet, here we are, 2 years later and we have dreamt big! I am honoured to say that we have a launch to Europe's image bank for people living with obesity.

In the last number of months people who have obesity, photographers, presidents of patient associations and the ECPO team have made this dream a reality.

Nearly 100 models, 12 patient organisations, 16 photographers and almost 1000 images to choose from. The images span across from the pharmacy setting in Slovakia and our empowered walking advocates in Czech Republic, up to our beautiful friends dancing in the sunset in Sweden! We headed down to our cover model and funky photographer Stefan Nagott- taken by photographer Henry Scholz in Germany. We skip across to stunning Celine walking in her bathing suit with her husband in Switzerland and head down to Italy where Francesca takes us into her daily life. We jump across to Fede walking his dogs in sunny Spain and visit Alex and his loving family in Portugal. But that wasn't enough variety! In the UK our colleagues spent the day with the photographer laughing, shopping, and sharing their daily lives. And in the very west of Europe we open the flood gates to images in the clinical, family and outdoor setting from the Irish team.

I invite you to read and share the stories from these outstanding models for this campaign in the pages to follow.

And join us on social media using #ECPOmedia2021 for the latest images, live events and resources.

EDITORIAL

LIVED EXPERIENCE PERSPECTIVE

STIGMA



Dominique Durrer



On social networks, characterised by the massive publication of photos, the individual is in visual contact with a variety of bodies whose appearance triggers an emotion in them.

The aesthetics of a slim body, an indisputable value in our society today, is on display everywhere and constitutes the “gold standard” for pleasing, seducing and succeeding professionally, guaranteeing excellent health, success and power. However, the way we look at our bodies is closely linked to the prejudices held against people who are considered to be overweight or with obesity.

These prejudices include cowardice, lack of willpower, lack of success, lack of intelligence, lack of discipline and non-compliance with weight loss treatments.

The fat body is often represented by a person who gorges themselves, giving the image of responsibility for his obesity. It therefore becomes the antithesis of our society’s representation of happiness, success and health. This is of course false because we know that obesity is a disease and weight is not under voluntary control!

In television advertisements, on social networks and even in certain television series, the promotion of a negative body image

and the stigmatisation of obesity is common and particularly prevalent.

However, within the representations of one’s own body, the concept of body image occupies a central place in thinking about this “perceived body”.

Body image can be linked to all the feelings, attitudes, memories and experiences that an individual has accumulated about their own body and which have become more or less integrated into a global perception. The problems raised by the issue of body dissatisfaction has led to socio-psychological research, which has focused on the relationship between body dissatisfaction and psychological well-being and self-esteem in particular.

Self-esteem is a major concept for understanding the psychological experience of individuals. It refers to the attitude, more or less favourable, that each individual has towards themselves, the respect they have for themselves, the feelings they have of their own value as a person. Then it is a key indicator of psychological well-being, particularly in our culture.

By portraying the image of a perfect body, the media contributes to the lowering of self-esteem for many people. It also influences young adolescents, sometimes leading to eating disorders in response to the beauty standards set by our society.



Social networks also contribute to the emphasis on self-image and one’s own physique.

Appearance is becoming more and more important in our lives. Profile pictures and Instagram® accounts are there to put oneself forward and have one’s appearance judged by others in order to obtain a certain number of



“likes”. This can be described as an “epidemic of narcissism”, while most people lie about their size or appearance.

All this contributes once again to the stigmatisation of individuals who do not conform to the current standard of beauty. This divide is visible from a very young age in children.

From the age of 3, a child will prefer a normal weight peer and will reject a child with overweight or obesity.

It is worth noting that, according to some studies, in adulthood, individuals would rather suffer difficult life events such as divorce, becoming blind or disabled, being unable to have a child or even losing a year of their life than living with obesity, which illustrates the extent of the social devaluation associated with weight and the pressure that individuals feel to not be part of the stigmatised group. Furthermore, the internalisation of body prejudice has serious consequences.

When a person believes that body prejudices are true and applies them or to their own situation, for example by telling themselves that they are lazy and should make more effort to control their weight, they can be said to have internalised these prejudices. Internalizing body stigma is associated with even more body dissatisfaction, depressive symptoms, anxiety, and lower self-esteem, as well as with increased eating disorders, an increased degree of obesity, and cardio-metabolic complications.

The prevailing view that people are responsible for their weight, despite the abundant scientific evidence of the complex and multifactorial causes of obesity, is one reason why weight stigma persists. The lack of legislation is also a factor in the persistence of weight discrimination.

In the media, a more positive portrayal of people with obesity has been proposed to challenge stereotypes of body weight. The Rudd Center for Food Policy and Obesity (Prof. Rebecca Puhl) and The Obesity Society have developed guidelines for the appropriate portrayal of people with obesity in the media, including the avoidance of images that focus solely on the excess weight of people, isolating certain parts of their bodies. Specifically, the images chosen should include men and women of all ages, with different appearances and in different careers, activities and lifestyles.

In this context, ECPO has decided to create the first Non-Stigmatising Image bank in

Europe. It will help to reduce the negative impact of the representation of the bodies with overweight or obesity on people who suffer from it.

This action is the first of its kind and will certainly change the image of people living

with obesity in Europe.

Now, reaching, communicating and influencing advertising agencies, social networks and the general public will be our future challenge.



HOW TO PREPARE FOR A MEDICAL CONSULTATION



BEFORE THE CONSULTATION:

Gather information about the HCP's attitude; select your caregiver according to his/her reputation for respect towards people living with obesity if possible.

PREPARE A LIST OF SPECIFIC QUESTIONS YOU WANT ANSWERS TO:

- What is important for ME today — especially if the weight is not the reason I'm coming in ?
- What do I need help with?
- What do I want to ask the doctor?
- What does the doctor need to know about me in order to help me?
- What do I need to hear from the doctor?
- What do I **not** need to hear from the doctor?
- What do I **not** want to talk about?
- Do I have specific accessibility needs around equipment so the doctor can examine me?

IF YOU DO WANT TO CONSULT THE DOCTOR ABOUT YOUR WEIGHT OR YOUR OBESITY START BY WRITING DOWN YOUR FEELINGS ABOUT YOUR WEIGHT:

- Next write down your ideas about what might have contributed to your weight gain.
- Then record your fears regarding obesity.
- Lastly, write down your expectations for the visit.
- You can bring a family member or friend along who can advocate for you.

DURING THE INTERVIEW:

As a patient, you have the right to refuse to answer and or initiate conversation about certain subjects and that includes Obesity – if this is not of your own will.

- As a patient you also have the right to refuse to answer stigmatising and/ or provocative questions and to question the legitimacy of inappropriate conversation or interrogation.
- Never let anyone disrespect you!

As a patient, you have the right to make a decision about everything that impacts you either psychologically or physically.

You can therefore refuse to answer embarrassing or inappropriate questions and to refuse medical examinations or investigations which you find inappropriate or make you uncomfortable.

You also have the right to ask for explanations and the implications of treatments or examinations recommended by a doctor for any pathologies.

YOUR HEALTHCARE PRACTITIONER SHOULD HAVE SUITABLE EQUIPMENT AND APPROACHES. IN PARTICULAR YOU CAN LOOK FOR:

- A scale that measures weight up to 200 kg.
- A blood pressure monitor with cuffs of an appropriate size to fit your arm.
- Examination table is wide enough to accommodate you.
- Chairs suitable to accommodate larger bodies in the waiting area, and preferably some without armrests.
- A discreet area for patient weighing.
- A warm and caring atmosphere.

AFTER THE CONSULTATION:

If you feel you have been stigmatised and discriminated against by a doctor or another healthcare professional, you should above all not feel guilty.

Stigma exists in the healthcare field; this is generally due to preconceived ideas and a lack of training. Indeed some health professionals do not understand the science of obesity and believe the patient to be personally responsible for his or her obesity.

Make a note of denigrating comments such as: *"You have no willpower, you should take care of yourself and lose weight. You just have to eat less and move more, it's easy!"*

Also note instances where an HCP ignores the reason for your consultation and focuses on weight. If you come in to a consultation for knee pain and leave with an appointment to see a dietician, one would assume that your experience of pain was not taken seriously at face value.



MEET OUR MODELS

Ben Whelan



My name is Ben Whelan and live in Dublin.

I have lived with overweight and Obesity for as long as I can remember. In school I was always the heaviest in my class with my classmates advising people to “run or he will sit on you”

I walked to school and progressed to cycling as I got older. I went on cycling trips with the youth club as a teenager and when I started work, I cycled across the city most days.

In my mid-twenties I was diagnosed with Spondylosis, and the hospital doctors told me that it was more than likely that I had been born with the condition, but that I should lose weight as that would help.

That was the start of my love hate relationship with the medical profession.

It seemed every time I went to the doctor for any illness, it was blamed on my weight.

I brought my infant daughter to the doctor one night and was told that I was clinically obese and needed to lose weight. He was not even my doctor. I once broke my arm in a fall in work and the doctors tried to blame that on my weight.

Luckily, I had reasonable health, with the exception of my lifelong asthma. This led to doctor's visits when colds turned to chest infections requiring steroids and antibiotics, though I was rarely out of work sick.

I spent my life on one diet or another. I would lose weight, gain more and lose again. It was a never ending cycle. I even tried a course of hypnosis, as I was assured that the problem was my fault and that this would cure it. Naturally the cycle continued unbroken.

In 2006 my father was hospitalised following a brain tumour and I struggled with the walk from the car park to the ward a couple of times a week, arriving at his bedside needing to sit and draw breath. At this time I was diagnosed with osteoarthritis bilaterally in hips, knees and ankles and told that there was nothing that could be done as I was only forty seven and much too young for surgery. I was told to lose weight as that would cure the aches and pains. After my father died and I had time on my hands I joined the gym. I went three or four times a week and lost twenty-five Kilos in a year. Then I put thirty-five back on over the next few years.

The back pain never improved, in fact it got worse. Again, my doctor told me to lose weight and that would cure all, so I went away and tried again. I tolerated the pain believing

that it was down to the spondylosis that I had lived with for so long.

Despite going to a chiropractor for some time the pain was still intense, and in early 2012 it was so severe I returned to my doctor, who finally referred me for a scan which showed a trapped sciatic nerve, along with problems with vertebrae and multiple discs. This led to physiotherapy, osteopathy, acupuncture, more hypnotherapy and finally to the pain clinic. I was prescribed a cocktail of medication for pain and inflammation which controlled it somewhat. I asked the consultant whether I could expect the pain to abate I was told off-handedly that “it is degenerative you know”

In 2015 I had to attend a consultant for another condition and was told “I could not attempt the procedure because of your weight. This is normally keyhole surgery, and I would not be able to see what is happening because of all the fat and if I did a conventional surgery, you would bleed out on the table.”

I finally had a consultation with an Irish bariatric surgeon, and I had a sleeve gastrectomy in 2016. This has led to weight loss, but more importantly to a better quality of life.

It is not a magic bullet that cures all.

In order to maintain my weight, I must do a certain level of exercise. I am back in the gym three days a week, and able to walk without a stick but I cannot stand straight and walk with a rolling gait. I cannot stand for any length of time without a stick, which has led to problems with queueing during the pandemic.

My “Fitbit” registered over six million steps in 2020 yet in that year I gained 6kgs.

Questioning my Doctor after weight loss I was told “that the damage had been done”.

Next step for me is to investigate the continuing pains in my left knee which can buckle without warning, this may be due to the amount of wear and tear caused by walking.

For years I was told to exercise more and eat less, I did that but still have ongoing problems.

I can't help wondering, what if?

Would my life have been different if I had a better experience with the Irish medical system?



If I had not been continually told that my weight was solely my responsibility, had been listened to over the years when I complained about the back pain and had found people who understood Obesity, would I have been forced to retire abruptly at 52?

Could I have lived relatively pain free during the time when my children were young and could have done with a father who was not constantly tired because of lack of sleep due to pain.

This life experience is what has led me to become an advocate with ICPO.

I hope to help others by sharing my experiences, to encourage them to speak up when people tell them that Obesity is their own fault.

To help people in general, and healthcare professionals, to understand that Obesity is a chronic relapsing disease that deserves to be treated as such, and not a personal choice as it is often portrayed, then I will feel that I have achieved a small victory.

MEET OUR MODELS

Elsa Ruffieux



My name is Elsa Ruffieux, I am 30 years old and I have suffered from obesity since childhood.

I am an early childhood educator.

I got a taste for physical activity two years ago, since I joined Eurobesitas. I love Zumba and adapted gymnastics.

Recently, for 6 months I could not do any physical activity due to an accident, but the good thing was, that I was able to follow my Zumba classes via a live app and see others, which kept me motivated.

My biggest goal is to be able to wear my wedding dress next year. But what motivates me on a daily basis, is to keep this goal in mind and to do everything in my power to achieve my dream.

Another positive point is my status within my Eurobesitas Association. I have several responsibilities which I have accepted with pleasure and desire. Being already a member of the Committee, being in charge of commu-

nication and representing the Canton of Valais motivates me even more, because i feel I can express myself, ask questions, have an active listening ear, and above all benevolence.

I am lucky enough to have an exercise bike which I use regularly and I have increased the frequency i use this. I do this while listening to my favourite music, and I feel better after these sessions.

What is important for me is to be well supported so that I can achieve goals that are achievable.

The fact that I live 7 minutes' walk from the station, and that the Migros is less than 5 minutes' walk away, allows me to walk regularly.

Cleaning is also a good physical activity for me. Between ironing, hanging out the washing, cleaning the windows and vacuuming, I end up sweating and above all feeling the well-being of having a clean flat, it's super pleasant !!

My connected bracelet (Fitbit) helps me a lot on a daily basis, by it recording that i take an average of 7,000 steps per day, and I also

check my heart rate.

I set myself little challenges.

Here's an example:

Leave 6 minutes before the train arrives, walk to pick up my partner at work, which is the equivalent of 2.4km, and it took 32 minutes, when I usually take 50 minutes. I feel a huge sense of pride when I get to his work.

One of the things that is important for me is that my self-esteem and self-confidence increase at that moment.

In general, I feel that iam a self-stigmatizing person. How good it feels to say to myself: "I am proud of myself Well done!"

Finally, an activity that I like to share with my friends is discovering the Bisse in the canton of Valais.

I think that physical activity should not be done under constraint and it should not be the choice of a health professional but of the patient. Thus, it will be lived with desire and pleasure.

Do my best, so that I can do physical activity every day, that is my motto.



MEET OUR MODELS

Alexandre Kulcinskaia



We all have a story. In my story, most of the pages were written in large print. Because obesity has always been with me.

As early as 5 years old, I was overweight, but at that time, when my parents took me to an appointment, the doctor didn't think my weight was relevant and told us that "with growth I would lose weight".

That's not what happened, and at the age of 16 I already weighed 164 kg.

I continued to increase in weight and reached 254 kg, but I never understood why.

My parents also didn't know how to deal with the situation and had more to think about.

My father was an alcoholic, and violent, so my mother lived in suffering, trying to protect us, which made her put other problems in the background, such as my obesity.

I was bullied, but I don't keep those memories and I never let myself be saddened by it, because hardship doesn't always make us bitter. I always found the right escape in communication and humor.

With my obesity, I broke some chairs, tore my clothes, and got stuck, but I always managed to laugh.

Meanwhile I met the woman in my life, who fell in love with me, regardless of my weight and since then we started to smile together.

The only time I couldn't smile was when the doctor told me that as my obesity worsened, I might not reach 40 years old.

We wanted to be parents, but because of obesity I suffered from azoospermia.

Recently, after having a gastric bypass, and still weighing 140kg, I continue my journey to control my weight, but I no longer have other diseases associated with obesity, and thankfully, we managed to become the parents of a

boy and a girl that have brightened our smiles even more.

On my way, APCOI – (Portuguese Association Against Childhood Obesity) suddenly appeared, when we opened our sewing shop in front of the association's office.

Now that I know their work, I'm sure my story could have been very different if I had come across APCOI during my childhood.

They do brilliant work, that neither oppress nor repress... they teach, and they educate.

It was very gratifying to be able to collaborate with the association, through my work.

My wife and I sewed various props for puppets that APCOI take from school to school.

We all have a story.

My story with obesity is not over yet, but I chose that it would be a happy story, and I must say that I still managed to do so, and I intend to keep it that way.



MEET OUR MODELS

Davie Roberts



Davie Roberts is from Cambuslang in Scotland. He has lived with Obesity from around the time that he retired from the RAF. On leaving the forces, he found that his exercise and healthier lifestyle became more relaxed and sporadic, as a result his BMI increased to 36 in only a few years.

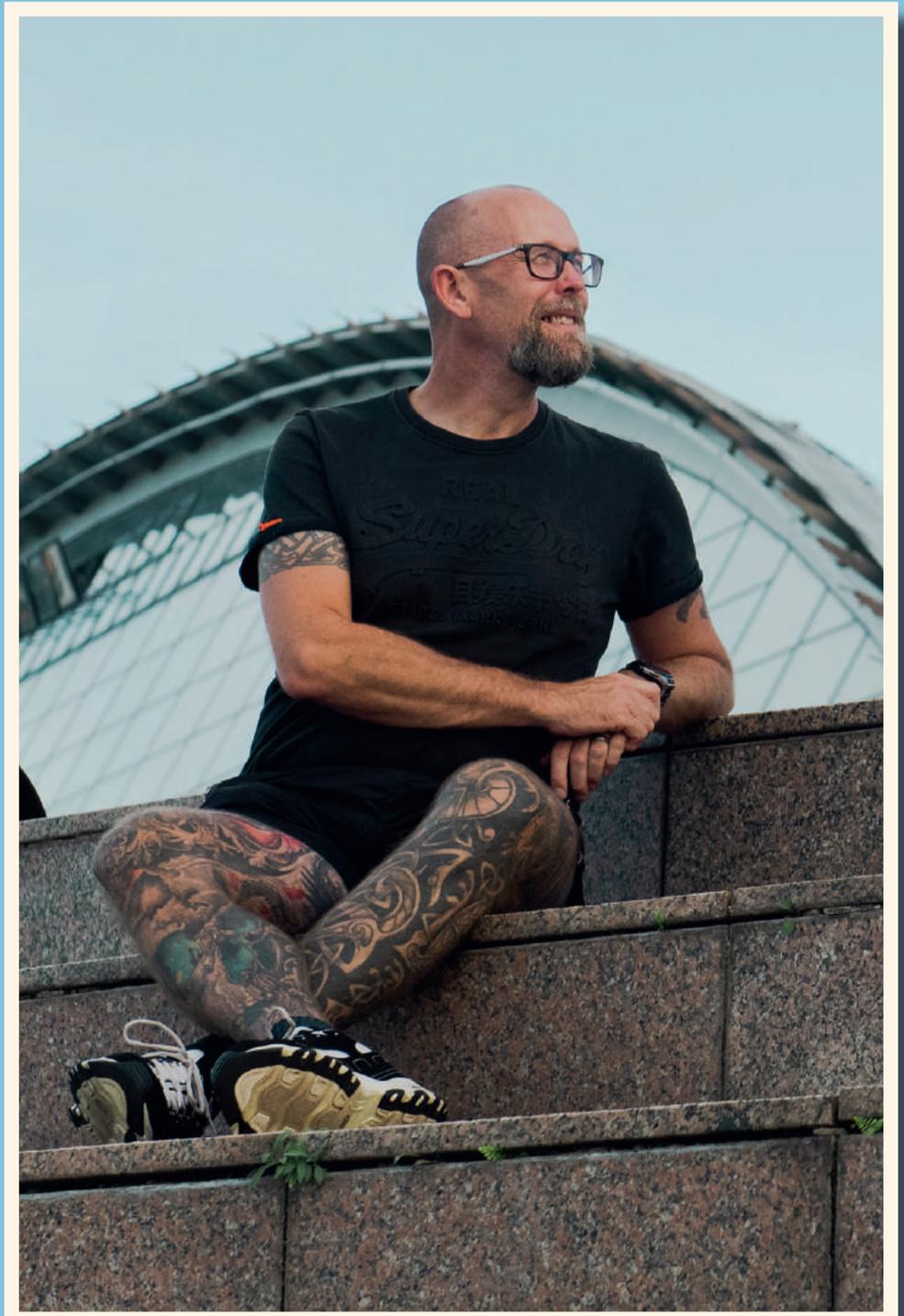
Initially Davie lost weight by increasing his activity and eating a more balanced diet, this was a success initially but quite short lived if he didn't track his food intake every day.

This started the "yoyo" effect dieting where he would gain weight and lose it, then inevitably gain back more in what seemed like the blink of an eye!

In order to try to live a more active lifestyle, Davie cycles around 20 miles most days and uses an APP on his smartphone to track his food intake. He's thankful that for the moment, his weight has decreased but knows that if he doesn't maintain this regime daily, his weight increases dramatically in a very short space in time.

Davie is currently living with overweight and feels that in order to maintain or decrease his weight, he must use the tools at his disposal every single day.

He knows this will be a constant in his life which he must work hard to control.



MEET OUR MODELS

Marisa Oliveira Marques



At the age of 12 I went to live in an institution for young people, because my parents didn't have the economic or mental health conditions to take care of me, but I recognize that it was the best thing that could have happened to me.

There, I received all the education and love that I didn't have at home.

I always had the dream of getting married and building a family and maybe that's why I fell in love very early with my first husband and father of the greatest love of my life, my son Sandro. I had been married for eight years, but I was no longer happy.

I was never the priority in my life, others were always more important. It took me a while to understand that I can only love others properly if I first love myself too.

I always knew that compulsive eating was my way of filling spaces that were still empty inside me.

My weight reached 140kg at this time.

Obesity is a disease that, like so many others, requires courage to make the decision to seek treatment. In 2014 I was able to take the step and got operated on. But my gastric bypass did not go well and forced me to stay in hospital for 4 months.

I was isolated, I even lost the will to live. But it is said that when we hit the bottom we can choose to stay there or gain balance to go up.

That experience and my training as a social worker gave me the vision I needed to get to work to help other people in the individual process of accepting obesity as a disease, and the various reasons that can give rise to it, until the postoperative period.

So I took the opportunity and founded APOBARI - Portuguese Bariatric Association to facilitate the link between patients and surgical teams and through partnerships to reduce costs of operations in private hospitals.

Since 2015, more than 7000 people have been supported through the association that changed their lives forever, or as I prefer to say, thousands of caterpillars who received help to transform into butterflies.



MEET OUR MODELS

Morgan Emile Gabriel



Hi, my name is Morgan. I am 34 years old. I was born in Mexico City on the 20th of September 1986.

For the first eighteen years of my life, I never worried about my diet. The choices were always made for me.

After finishing high school, I found myself in a new world. I had started studying in a new city, and I was now responsible for my diet. Suddenly the easiest and cheapest way to eat was fast food. I was chipper and less

time-consuming. That started a new reality in which food became the first thing I thought of in the morning and the last thing before sleeping.

Every morning I woke up and said, today is the day for me to eat the salad for lunch, and every time lunchtime arrived, I went for the burger.

That behaviour went on for more than 15 years. Suddenly I had a BMI of 35, I could not play with my daughter, and every second of my day was taken up with, and to do with food.

I decided it was time to ask for help, to look for support, and I asked my doctor if I could get help. His diagnosis was that I had obesity, and we can do an evidence-based treatment for you. It is not your fault.

That started a complete change in my mindset; suddenly, I was no longer this person who could not follow a diet and had no will, I was a person with a diagnosis and a path to follow.



MEET OUR MODELS

Fede Luis



I was born in a small city in Spain called Santander in 1983.

During my first 12 years, I lived a happy childhood.

After four years of practicing high-performance swimming, and not qualifying for a national championship in 1995, disappointment led me to quit.

At that time, my diet was high in calories, and once physical activity had been abandoned, no one advised modifying my caloric intake, which led me to gain a high amount of weight. It was impossible to maintain a heal-

thy diet, and the only thing I achieved was to increase my weight.

After 20 years, in 2014, one morning, while getting dressed to go to work, I had to wake up my father to put my shoes on. My size prevented me from bending over to tie my own shoelaces! At that point, I decided to seek help from a healthcare professional.

After a year of traveling through health centers, I managed an appointment with a doctor that understood obesity and its importance as a chronic disease. Thanks to him, I

understood that my problem was not a will matter but a disease that needed medical attention.

The following action plan was proposed to me: To reduce my weight. The next step was an operation.

Success story: After eight years of daily cognitive work, I have maintained a body mass index that does not generate comorbidities associated with my chronic disease.



MEET OUR MODELS

Alfonso Vitale



From an early age, having an absent father, Alfonso had a tendency to get fat, but by the time he was in his twenties he was able to maintain normal body weight thanks to healthy eating and regular physical activity. He really loved running.

“I was in a bad way when I couldn’t go running to let off steam.”

Then, at 22, after suffering an injury playing handball, he was left with severe groin pain for almost a year. Frustrated and

forced into inactivity, he began to pile pounds upon pounds, losing them then regaining them, and more whenever he came across any negative event, whether personal or professional in his life. A far from easy life, in the course of which he has never stopped trying to save himself, even managing, (while working) to graduate in political science.

“... I used to relieve my nervousness with food, which is the nicest inexpensive thing we have to hand ... I tried to fill a hole in my stomach to make up for a void of affection ...”

Will I be ready to change my life?

After four admissions to the obesity treatment clinic in Piancavallo in an attempt to lose weight, now it’s time to see whether he is ready to have surgery “it all starts with declaring a will to change”.

Am I going to be ready?

In the meantime, I’ve joined the self-help group of the “Amici Obesi” Association to hear at first-hand about the advantages and disadvantages of having the operation.



Why is it important to change stigmatizing images of people with obesity?

CHRISTINA FLEETWOOD AND DAVID MATSCHECK



We have made big steps forward in recent years as we have learned more about weight bias and stigma.

We talk much more than we ever did before about the negative attitudes which are pervasive in society towards people with obesity and the destructive effects these attitudes have on our lives.

That stigma is everywhere we go, all through our lives, and we are working more and more actively for change, this includes media and social media.

When we see images of people with obesity in films, on our TV, in social media or advertising, and when these images show these people as gorging themselves with food, as acting silly or stupid, or as not being able to move properly, never playing sports or doing other physical things, what do these images tell us about those who are living with obesity? about ourselves? and what do they tell other people about us?

We know the answer...

They are like a slap in the face! They are telling us that the stigma is right. That we should feel badly about ourselves, because our weight is our own fault. That we lack will-power and are in all kinds of ways just not normal. They are telling everybody around us the same things: That people with obesity and



big bodies deserve to be treated badly, to be bullied and laughed at, and to be kept outside of the normal society.

We know that none of this is true...

We are people like everybody else and just as able to participate in society. We just have a disease which has the symptom that we tend to gain weight because our bodies don't burn fat the way other people's bodies do, but as long as media perpetuates the stigma, it will be an uphill battle to convince both ourselves and the society around us of the reality of obesity as a disease.

This is why it is so vitally important to change the way images of people with obesity are presented.

Media need to portray us as the normal people we are, doing the normal things that people do in the usual ways. Sometimes this will include accommodating our larger bodies, but there's nothing strange about that.

This is why ECPO's new image bank is so important. It offers images which show us as the beautiful, intelligent and capable people we are. Images that show the reality of people living with obesity as fully deserving members of our society. Images that are including and empowering, not excluding and stigmatizing!



Christina and David

HOW CAN WE FACE EXTERNALIZED AND INTERNALIZED STIGMA

“As a person living with obesity, no matter where you go, you are confronted by weight bias and weight stigma.”



 Weight bias is defined as negative attitudes toward and beliefs about others because of their weight. Weight stigma refers to social stereotypes and misconceptions about people with obesity. Weight stigmatization and weight-based discrimination occur when we treat individuals unfairly because of their weight and/or size. This is called **externalized weight stigma** (social or structural stigma).

 **Internalized stigma:** How does stigma become internalized? As a person living with obesity, no matter where you go, you are confronted by weight bias and weight stigma. You can't avoid believing what the stigma is telling you about yourself, at least to some extent, even when it isn't true. This most often results in self-blame or shame, as well as stress and vulnerability.



Stigma has an impact on the stress level of stigmatized people living with obesity.



Words are important, they profoundly affect the perception we have of ourselves.



Close and trusted friends and family members play an important role in supporting you. If you face stigma from your family or friends, you can also find support in peer-to-peer support groups within patient associations.



Repairing self-esteem is also extremely important.



Forgive yourself, from the bottom of your heart.



Be aware of your positive qualities. List your accomplishments.



Learn to listen to your needs, welcome your desires, respect them, and they will be respected by others.



Create the contact with others.



There are Associations of Patients living with Obesity. These associations offer the opportunity to re-establish social links, to express oneself with others who understand without judgement and to participate in group activities including: adapted physical activity, useful and playful courses and other forms of social interaction. These activities, in a “protected environment”, will help you to get out of social isolation and learn to live again in a society where you may have felt rejected. This is an essential step in regaining well-being, self-affirmation and self-esteem.

MEET OUR MODELS

Jacky Nesbitt



My name is Jacky, I am now 57 years old, I have lived with obesity every day of my life. This may seem a strange statement from someone who weighs 8st 10lb (55.5 kl or 122lb).

I had weight loss surgery in 2006 after many years of trying to get control of my weight through diet, exercise, medication and more diets, lots of diets, but it always ended the same way with me putting on everything I lost and more, so the decision was made to have a gastric band which I had the day after my 42nd birthday.

I was very fortunate that the band worked for me and my life style. I worked hard with it and helped by me being stubborn, I have had 15 years of being a healthy weight.

So fast forward to today, and I am often asked why I still say I'm living with obesity.

I wake up in the morning and the first thought in my head is what am I planning to eat today, I eat lunch while planning dinner, I fall asleep planning tomorrows "treat".

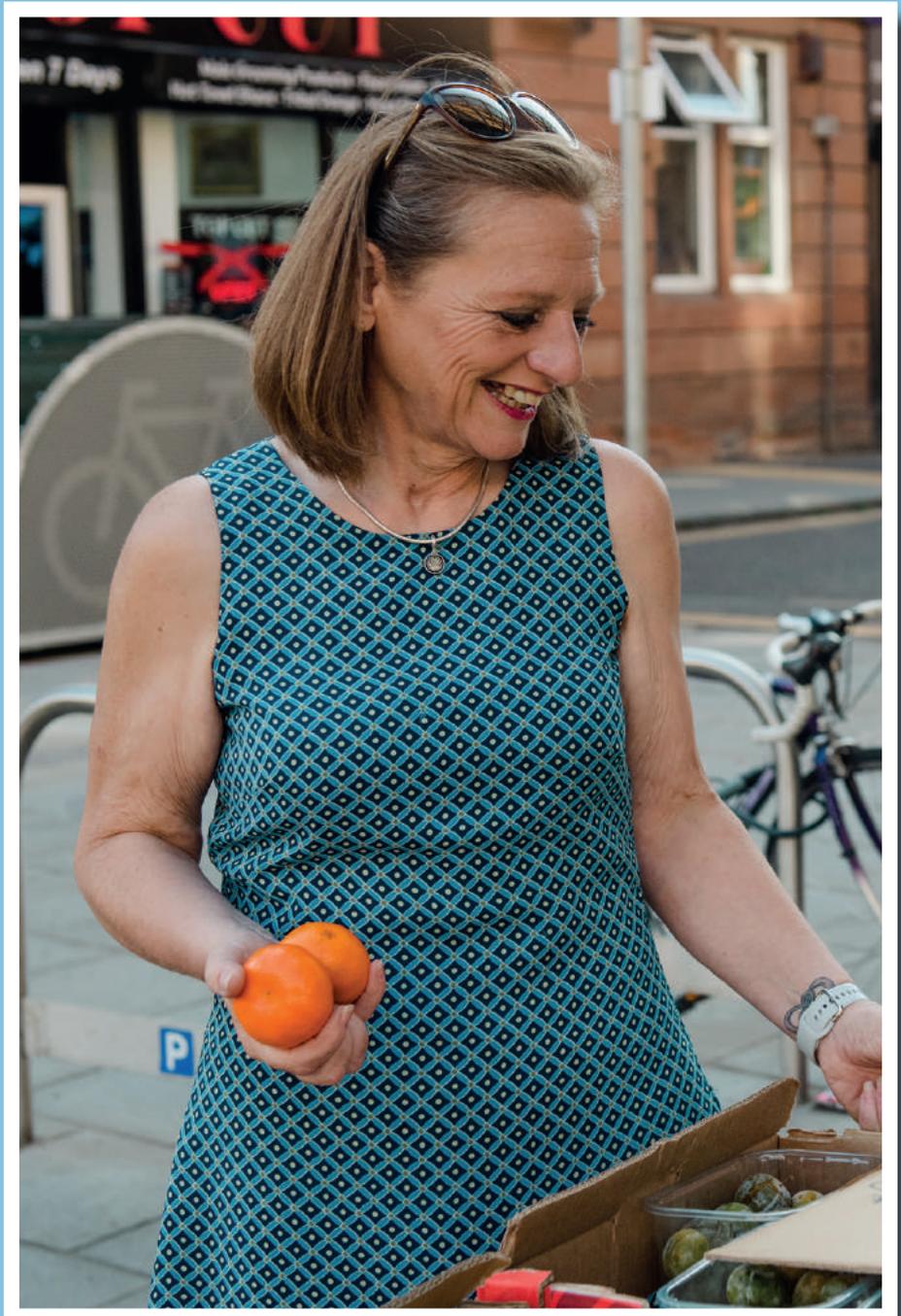
I have a constant battle between head and heart, my head knows I don't need more food but my heart dupes me into thinking I do.

Fortunately I have found a happy place which works for me, I eat the same foods most days so I don't have to think about food as much which can be repetitive and dull, but it is so much better than spending every waking moment thinking about food.

I Work hard doing long shifts in a career that I would not have been able to do before my surgery. I enjoy water sports that I would not have been fit enough to do, I ride motorcycles that I would not have the confidence to ride. I enjoy life as it is now, and will be forever grateful for the improvement given to me by my surgery.

Obesity never lets you forget it is the boss, even when living my best life I always hear that voice in the back of my mind reminding me that I couldn't do this alone, and that surgery is not a lifelong solution.

The fear is always there that one day it will not work anymore, and I will go back to living in a body that I have no control over.



MEET OUR MODELS

Laura Mustapha



My name is Laura Christin Mustapha and I suffer from obesity!

I was born in 1990, as the third of 7 children.

I come from a broken family, which ultimately led to my mother giving me up for adoption. Fortunately, my adoptive mother was my grandmother.

For the first 8 years of my life, I was doing really well. I had everything in abundance; toys, clothes, my mother's undivided love, attention and food, but that's when the real disaster began.

Because as grannies can be, she often rewarded me with food or sweets. Another pudding here, another chocolate bar there, and before I knew it, at the age of 5 I was on a bus for a weight loss cure. The first of 6 cures.

When I was 8 years old, my beloved mum died. Just like that. From one moment to the next. I was alone, abandoned and sad.

I came back to my biological mother, had 6 siblings from one moment to the next, and had to share pretty much everything.

My biological mother was completely overwhelmed, so violence in all forms was unfortunately the order of the day. She did not protect us from attacks by the father of my youngest siblings.

When she wanted to reward us, it was usually with sweets or soft drinks. The number on the scale went up and up. From grade 5, I switched from the sheltered primary school to the chaotic middle school. It was horror. Because in addition to all the teasing about my weight, there were now attacks because of my skin colour.

I come from Saxony and unfortunately racism is still the order of the day there. My father is from Mozambique, he was a guest worker here. I still don't know how I was able to endure all the pain and the psychological and physical injuries.

At that time, I probably had already started to compensate with food. Wherever there was food, I ate it.

At 16, normal household scales could not hold me.

Going to the doctor was always accompanied by shame, every

time, my weight was in the foreground. Everyone always had good advice and the more they picked on me, the more I retreated and closed myself in.

By the time I was 21, I had certainly broken the 200 kg mark, but I still took part in life as best I could. Wherever I went, I was the attraction. The fat black girl who apparently wasn't too embarrassed to show herself in public. Photos, ridicule and scorn were always shown to me.

On the outside I was always the strong woman who didn't let anything get to her. But inside I was broken. I started to eat a lot of food and then vomit it all up again. For more than 4 years I tried to forget or undo everything that had happened to me in my childhood and youth.

I moved to Frankfurt at the age of 24 and hoped to break the cycle. Away from old habits and racism. Into a big city, with more anonymity, and being just one of many. I thought it was my last chance to live normally. But reality slammed me right in the face. Here too, I stood out with 250 kg by now. I'm an occupational therapist and at work chairs collapsed under me, colleagues laughed at me behind my back, people distanced themselves from me on the train. I felt worthless, unloved and hated.

I stopped going to the doctor a long time ago, it was always only because of my weight anyway.

But then there was an unexpected change. I met a man who didn't seem to mind my weight. He said he loved me and wanted a future with me, which for a long time I didn't take it seriously, again, just someone who wants to make fun of me. But I went along with it, be-

cause looking back, I can say that love is what I was missing all along.

So things got serious between us. We talked about children. But it was clear to me that I could never have a child with such a high weight.

I started researching surgical procedures and came across the Sana Klinik Offenbach, where I registered in the April and had my first appointment on May 3rd 2017.

The first time I had been on the scales in 15 years was a shock - 267.7 kg! I cried and cursed. "Why did I let it get this far, why didn't anyone stop me?"

Somehow, though, my story has a little happy ending, because the man who gave me his love at just under 270 kg still loves me, more than ever.

In 2020, thanks to the gastric bypass, I reached my lowest weight of 115 kg. In February 2019, my biggest wish came true, I became a mother to a beautiful daughter, and the miracle continues, because on June 29 2021 my son saw the light of day.

Through therapy, I realised that it's not my fault. It's not my fault that I was passed around as a baby, it's not my fault that my grandmother was too good to me with food and it's not my fault that my biological mother could hardly show us her love apart from with food.

I can't help the physical violence or the sexual abuse I experienced as a child at the hands of my youngest siblings' father. As a young adult, I couldn't deal with the events that happened in my childhood and continued with what I was used to.

How was I supposed to know what was right, wrong, normal or abnormal!!!!?

I am so glad that I found and pulled the lifeline myself. Yet there are so many people suffering from obesity who don't know how to approach their disease.

I want holistic therapy for people living with obesity, help where it is needed and not superficial advice from a doctor who doesn't know how to start to help. I want to be seen as a human being and not as a number on the scale. Because first and foremost I am a human being!

That is everything!



MEET OUR MODELS

Deirdre Murphy



As a young child I was extremely active and quite thin. When my hormones started to change during my teenage years it was clear that I had PCOS (Polycystic ovarian syndrome). My weight gradually increased during my teenage years, but I didn't notice it myself.

When I was 16 years old, my mum and sister asked me to join them in the local slimming group and I lost a good bit of weight quite easily. I stuck to the diet and took my exercise very seriously. However, a year later the weight I lost was back on. I was shocked when I discovered I had put it all back on, it

never occurred to me that I would gain the weight back. This was the start of my dieting journey where I would lose weight and put it and more back on again.

Over the years my weight increased and by my mid 30's my health started to be impacted by this. The PCOS caused fertility issues and I had sleep apnoea. Life started to become a struggle and running around after my young child became increasingly difficult.

My husband also lives with obesity, and his health complications got to such a dangerous level that we started to investigate bariatric surgery in the hopes it would save his life. It was only during his consultation for gastric bypass that I realised that I also needed this surgery. We were both facing increasing

health complications due to our obesity, and we were terrified we would leave our young son with no parents. We took the decision to both have gastric bypass in late 2017.

Our lives have changed immensely since that decision. Both of us are off all medication, we no longer need a CPAP machine, and we can move around easier. We are no longer limited in our activity, and we were finally able to play on the floor with our son without the fear of not being able to get back up. We also had another baby, which we had concluded would never happen.

Our worries for the future are now for our children, will they inherit obesity from us, and will we be able to help them navigate this disease, and help them live life to the fullest?



MEET OUR MODELS

Céline Gremaud



My name is Céline and I am 32 years old.

I live in Vevey, Switzerland, where I was born and raised.

I am a craft and sewing teacher at the compulsory school and I love to pass on my creativity to the students that I see progressing and growing.

I am passionate about music, I play the guitar, the ukulele and a bit of piano. But above all I sing, write and compose my own songs which help me to express my emotions.

I also take Hip Hop, Dancehall and girly dance classes. I love dancing because it makes me feel strong and feminine.

I often go for walks in the countryside, amongst nature to help recharge my batteries. I pick wild plants to cook with or to make my own medicines and beauty products.

I swim in the lake whenever the weather is nice because it allows me to reconnect with nature and my body. I also enjoy spending time with my family and friends, especially playing board games together.

When I was a teenager, I was bullied at school. I was nicknamed FUB, which means “fat, ugly bitch”. They spat on me, insulted me, threw stones at me, hit me...

The worst thing was is that I thought it was true, and that they were right to hurt me when I just had an out of the ordinary physique, but I was not, in any way, overweight.

I couldn't stand my body anymore, which I thought was the cause of my suffering. So I started to feel ashamed of what I was eating and wanted to eat less. Of course this triggered eating disorders. I would binge eat, which only made me feel more ashamed of myself and my body and made me gain weight. I then started dieting and this naturally triggered resistance reactions in my body and for every long and painful diet I went on, I gained back more weight than I had lost. This created a relentless sense of failure which again contributed to my low self-esteem.

At the age of 20 I decided to

start a therapy to understand where my weight problem came from. Through this therapy I realised that I had to accept myself as I was and love myself in order to take care of myself. So I tried to improve my self-confidence, first through books and therapy, and then through a self-acceptance and food modification programme.

I realised that I needed to be less demanding with myself and that only forbidden foods were a problem. So I learned to stop feeling guilty about my food and to neutralise all foods.

Very quickly, this allowed me to get out of

my eating disorders. I also learned to reclaim the word “fat” and use it as a qualifying adjective and nothing else. I realised that by using it and accepting that being fat did not make me a bad person, I would never let anyone use these weapons against me again.

Then I came across the path of the Eurobesitas association, which offered me the chance to play my own role in “Courage”, a short film aimed at training and raising awareness in the medical world about overweight and patients with obesity. The filming allowed me to take these wounds out of my body and to overcome them. In addition, the

many messages of support and love I received were like an electroshock.

I realised that I was a good person, and that I had contributed to changing mentalities.

Afterwards, I was asked to appear on several television programmes to talk about it. Thanks to this, I sharpened my eye on the subject and started to discuss it with those around me. I hope to trigger some thoughts in people. So many little seeds that I hope will grow and make new seeds. I dream of a world where everyone is accepted and valued for who they are and I am happy and grateful to be able to contribute to building that world.

Today, I feel good as I am. I have realised that I am a strong woman and that I have value, regardless of my weight fluctuations. I realised that it was up to the world to change, not me. It is the chairs that need to get bigger, the infrastructure that needs to adapt, the looks that need to soften.

I am convinced that by understanding who I am, I can pass on to others a different vision of overweight and thus better accept this difference.

I didn't choose to be fat, and that shouldn't stop me from living and thriving. It is an integral part of my being and I have the right to be myself and to be respected for it no matter what.



MEET OUR MODELS

Monica Giusto



A healthy dose of selfishness helps you live better with yourself and others. I've spent my whole life sharing my "fleshy" body which, to be honest, I've always liked. I've never even come to be so overweight that I couldn't live a normal life, a degree, a home, a family and two children.

Then, four years ago, I hit my top weight, noticing that I was having some trouble moving around and above all, after having check-up, I found out that I had high blood sugar.

My beloved body was sending me some kind of signal, saying "Watch out, Monica, you may have reached the limit."

So on my own, I've started to get myself back under control, to eat better.

Food is my antidepressant! What I have been doing in recent years, is trying to understand why I eat. Eventually I found that food is an antidepressant for me. On the other hand, always smiling, always positive, always ready to help others, as I like to be, is not always easy. My wrong way of dealing with these times has always been to open the fridge and maybe eat a few leftovers, and this is what I am trying to stop doing, so I can feel better about myself.

A psychologist long ago told me: "the way you have of always wanting to take care of others, to always be there for everyone, means you need to have enough physical strength to do it and so you translate that physical strength even into having a pretty imposing physique; if you weighed 40 kilos, you would not have the physical strength to help all those you have made up your mind to help". These words were a revelation to me.

I have always been ready and willing to help others and that's how I like to be. "You are always such a sunny person" is the refrain I hear from people. YES, I am sunny, but being that way does not stop me having my own gloomy thoughts or problems too. So I am also trying to learn to return to sender some things that I'm not obliged to put up with, because maybe they are not my problems and it isn't fair that I should always take them on myself ... that way I can live better and not eat that extra biscuit, that slice of

bread, that potato which then obviously harms no one but me.

This is what I have been trying, striving to do for years, working hard on myself; it isn't always easy because those around you always expect you to be available, they take it for granted and then, when you are no longer

there, it's "but you were always so happy, so willing.... whatever has happened now?" It isn't that I'm not like that anymore, I'm like that in a different way because I've had to, and must learn to be available first and foremost to myself, to be kinder to myself and then to others as well.



MEET OUR MODELS

Yvonne Byrne



My earliest memory of being aware of weight was when I was twelve years old. I was making my confirmation in four months' time and my Mam & Grandmother took me into town on a shopping trip for my special dress. A beautiful dress was chosen, matching coat, hat, shoes, bag, gloves. When I got home, I was told the dress chosen was the biggest size in the shop for me and "I better fit into it in four months' time".

I think that was the first "diet" I was ever put on. For a time before the big day every single meal, snack or treat was always a referral to "the dress" and not to get any fatter.

From teenage years to adult hood every new diet was my challenge. I was always successful at the start and lost a lot and followed on by putting it back on with an extra stone or two for good measure!

I always noticed if I announced I was on a diet and I chose to have one biscuit with a cup of tea, I'd be quickly asked but what about your diet? I took to secretly eating then. I would put back the one biscuit and then buy a packet and eat in secret making sure to hide the packaging.

I took the leap and got married and had a beautiful son. However, after post-natal depression and a miscarriage 3 years later, I just gave up on thinking about myself.

I did not realise how much weight was piling on until one day I realised I could not do the things I wanted to do. I suddenly noticed that when I went out, the seats did not fit the same, aircraft seatbelts no longer fitted, and I noticed I had isolated myself from the outside world as I was just too embarrassed to get involved. I would be out of breath when I walked, I felt judged when I was in public.

I had a bad fall and it resulted in me dislocating my shoulder and tearing my rotator cuff. When I fell, I knew I could not get up from the ground. A crowd came around me and as I realised the embarrassment of it all - I asked them to make way for me to get into a doorway and I literally "bummed" my way across the pavement. I was afraid if anyone tried lift me, I would hurt them!

I went to the hospital and had the shoulder put back into place, but I could not move the left arm. It took a year before I was given an MRI to check on the real damage. I found out later that they believed I would not have fitted into the MRI scanner.

A second year passed before I had an ope-

ration, and the rotator cuff could not be fixed.

The tear was too retracted into the arm to be put back together again. After 3 months of physiotherapy I was told there was no point in continuing, I was just moving bone on bone and would give myself more damage with arthritis in the future.

I was discharged, and I felt devastated. This was my new life. I could not do a lot of things without help. Something as simple as putting your hair in a ponytail could not even be done with one arm!

Two years ago, I came into contact with the ICPO (Irish Coalition for People Living

with Obesity). The knowledge, courage and confidence I received from this group is just unbelievable. They gave me the will to live again. I have gone on to have a gastric bypass and through one of our "movement" groups that meet up online, I have started the chair exercises and I have discovered that this is also helping my shoulder and arm. Even though these are simple slow movements I can now dress myself on my own.

I could never even close a bra at the back because the arm would not move that way.

It does now! I am doing things I could not do for years. I have a new lease of life.



MEET OUR MODELS

Bianca Lenhard-Burkart



Hey, my name is Bianca, I am 46 years old and I have obesity!

Currently, my 109 kilos are distributed on 1.80 m of height.

That I can make this statement without great charm, it took a lot.

Almost six years ago, I would have blushed when asked about my weight and embarrassedly mumbled my weight indistinctly “around 158kg”,but maybe it was 160kg.

But why did I feel so embarrassed? Why couldn't I just say “I weigh 158kg!”?

I had fat! That can't be overlooked, when you are size 3-4XL, you don't disappear in the crowd.

In these times certain prejudices are connected with obesity, which certainly everyone of us have heard.

But one did not want to be part of these prejudices. So one does not say the bad word “weight over 100kg” of course. Maybe the counterpart doesn't recognize it?

A stupid thought, but many fat people want to make themselves invisible, “just don't attract attention!” is the motto. In retrospect, I must say, all these thoughts and hopes are simply nonsense. Whether fat or thin, I am a human being and I want to be noticed because of me and not because of my figure.

How did the overweight and cracked self-confidence come about?

I could make it easy on myself and say my parents, upbringing, genes are to blame. Or I have heavy bones, but I like to eat because it simply tastes good to me, I don't know when to stop, I'm not full until the third plate is eaten, eating makes you happy...and much more.

But it is a mixture of everything and as I have learned in the past years, a disease is also to blame for the fact that I am not slim and trim: The disease obesity!

Ridiculed for many years (obesity is not a disease, just eat less), in recent years the issue is coming more and more to the attention of the population, because the disease obesity is on the rise. Worldwide, people are getting

fatter and fatter!

What problems / impairments are created by the disease?

First of all, you are more or less exposed to bullying. It starts at school, when classmates don't want to sit next to you.

In your teens it was often the verbal remarks of other students when you walked through the school building and ends with the discrimination in job interviews or in the allocation of apprenticeships or jobs.

Mostly I overheard the statements skillfully or pretended that it did not upset me at all, but inwardly it worked naturally in one.

In the search for a training position, I was invited to the final round with seven other candidates. I had written the third-best aptitude test and had high hopes of getting one of the coveted five apprenticeships. Unfortunately, I was one of the two applicants who were not taken, and that's when it first became clear to me that my appearance could also be a problem in the profession.

Later, too, I sometimes noticed the shocked reactions of the recruiters when they saw me in the flesh.

In everyday life, one encounters problems that normal-weight people don't see. In res-

taurants, you look for locations with chairs without backrests or you look for sturdy furniture. Very bad are plastic chairs in outdoor restaurants or beer benches. The thought of the chair collapsing underneath you makes you invent the best excuses not to sit there.

It gets embarrassing on the plane when the stewardess yells throughout the plane: We need a seat belt extension for seat 13B.

As if it wasn't bad enough that your seat neighbour on the plane dramatically rolls his eyes when he realizes that you will be sitting crammed together, next to each other for the next few hours, and that there is no escape for either of us.

Doctors still treat you as a second-class patient, and yet they should know better. But often the complaints, for which one has an appointment with the physician, are not really treated or their cause in the reason gone, but more or less obesity is diagnosed as a trigger of the complaints overall.

YES, overweight favors various diseases, but with the diagnosis of overweight the cause of the complaints is not recognized let alone a helpful treatment.

Furthermore, there are weight restrictions for treatment chairs at gynecologists, dentists,



radiologists and gastroenterologists, and you can imagine how embarrassing it is when you are told before or during treatment that they can't do the treatment because you are too heavy.

What diseases did obesity cause me?

In my mid-20s I had constant back pain and an orthopedist diagnosed osteoarthritis in the lumbar region, which was so advanced due to the excess weight that one could think I was already over 60.

Apart from the administration of

painkillers and the prescription of rehabilitation sports, no further treatment took place.

At some point, the pain subsided and the subject was off the table.

At 27, I was diagnosed with high blood pressure. In the same context, I was predicted metabolic syndrome and diabetes for years to come. That was a shock. Shortly thereafter, I was diagnosed with PCO syndrome. Insulin resistance was also diagnosed.

The sword of Damocles "diabetes" came closer and closer. There, I thought for the first time about a stomach operation, but my

family doctor was of the opinion that I would be too thin for it and I can manage it in other ways to lose weight.

When the LOGI method did not bring any great success, I was offered the Reductil treatment and of course I agreed. Yes, there was success, but as soon as the treatment ended, the yoyo effect came and I had more weight than before.

The older I got, the more my weight increased and I became more and more immobile and sluggish. After only a few steps I had back pain or was short of breath. I had given up sports for professional reasons and my condition was in the basement. The quality of life decreased more and more and I withdrew more and more. Meetings with friends or at my home were okay, but in public, I avoided meetings.

The closer my 40th birthday approached and the desire to have children remained unfulfilled, the more the desire for a change rose.

At the beginning of December 2014, I dared to pick up the phone and made an appointment at the Obesity Center in Heidelberg. The first appointment then took place two weeks after my birthday in mid-February 2015.

After this conversation and the visit to the support group in early March, the path was clear for me, I wanted to take the step and start a new life through a stomach reduction.

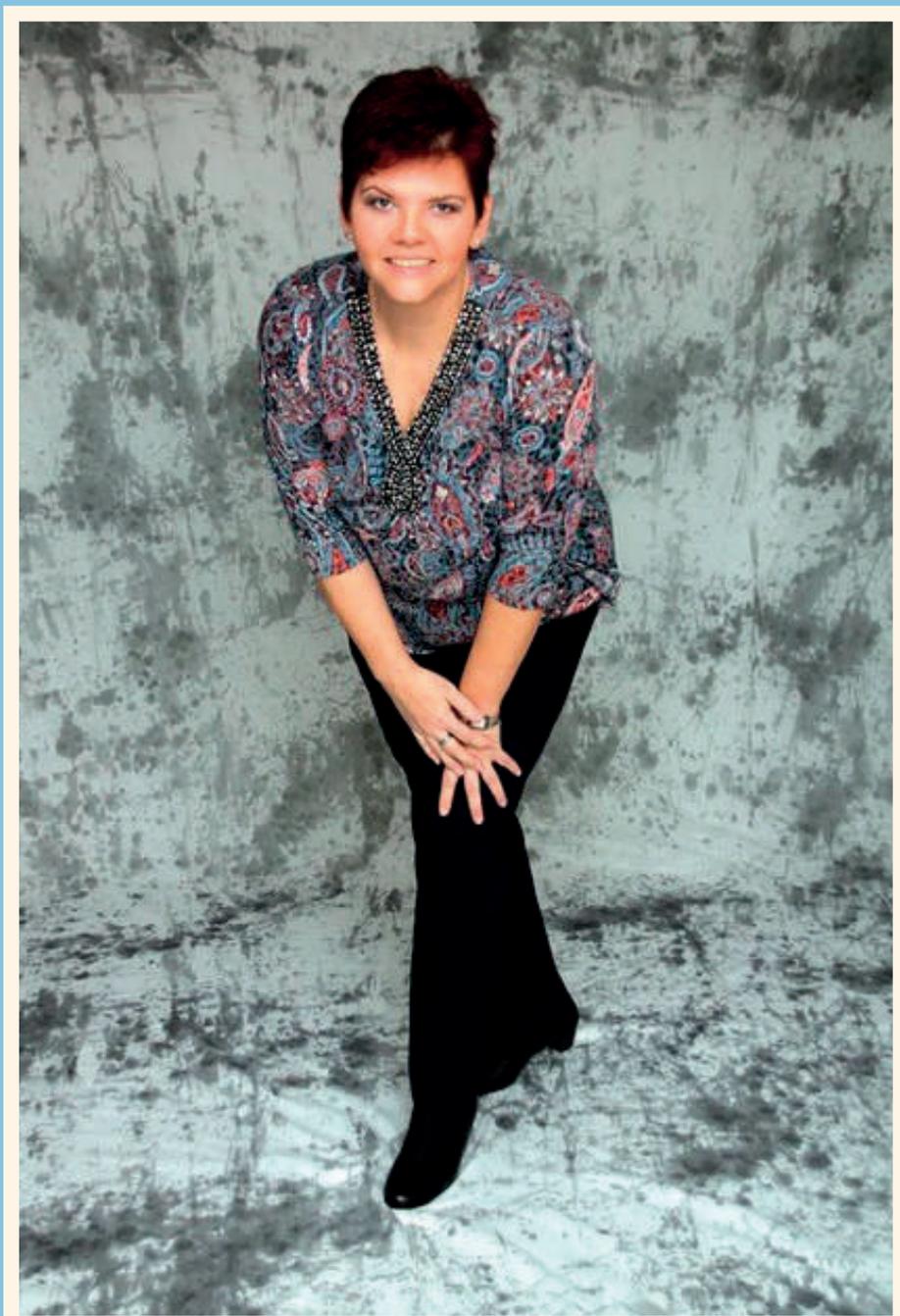
In preparation for the bariatric surgery, I was examined from head to toe for the first time, I dealt psychologically with my fatness and in communicating with affected people in the support group, I realised I am not alone. We have all had similar experiences and yet all we wanted was a "normal life".

The operation gave me a new life. I have lost about 50 kilos and my quality of life has increased many times over. I no longer have to take blood pressure medication and diabetes medication. I am mobile again, I do sports, I can sit on any chair without fearing that it will collapse under me, I don't need a seat belt extension on airplanes anymore, and I can go to doctors' examinations without fear, and in amusement parks I can ride any ride again. It's an indescribably great feeling that I wouldn't want to miss.

Despite the weight loss, I still have a BMI of 32 and am therefore obese. But I'm not hiding anymore, because I know I've been much worse and many people just have no idea what it means to have obesity.

With the new self-confidence I can now counteract stupid comments and maybe do some educational work.

Obesity is a disease and people living with obesity are not just weak-willed and lazy people.



MEET OUR MODELS

Francesca Migliaccio



A life heavier than me (My mum wanted me to be perfect)

“How did I get to one hundred and seventy kilos”

As a little girl I was a normal, slightly overweight person but my mum wanted me to be perfect so she immediately put me on a diet, fuelling my deep insecurity”.

Let's say life has NOT spared me anything, there have been traumas which perhaps have left too great a mark on me, such as the death of a brother, abuse by a family “friend” suffered at the age of twelve, which I was not brave enough to tell anyone about. I remember we are talking about many years ago.

Then I hid in a loveless marriage, and even there I was traumatised because my husband was not a good person. Fortunately, I managed to cut myself free from that marriage and then there was a succession of bad choices, which only increased my insecurities with so many people constantly treading all over me, as if I were unconsciously choosing people who would tread over me, as if I chose them on purpose.

Then my mum fell ill and I lost any inhibitions with regard to food, that's how I got to that point.

My turnaround ... by halves

I had surgery ten years ago, and I'm still very happy about it because it turned around my relationship with food, so that I no longer do certain things.

These days I still pay very careful attention to my tiny stomach even though I haven't solved my problem.

Everyone should know that the operation works if you do your bit, it's fifty percent the operation, fifty percent your own commitment. It's very important to understand this before going ahead.

I don't always put in my fifty per cent!

But I'm not giving up

You have to talk to people, you have to ask people around you for help, you have to ask professional people.

I'm under the care of a psychiatrist who is finally the right person, the right person for me after I'd tried so many.

He drew out everything there was to draw out, and so, even though I'm moving into my sixties, I go on my way convinced that sooner or later I will reach the finish line!







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