



Calling on experience

Alex Corkran uses her personal story of anorexia to warn young people of its dangers and to act as a bridge to help those who might already have the illness. But does her approach work? By Mary O'Hara

The teenagers peering into the auditorium at Wexley College in Wrexham are noisy and boisterous, but not for long. Within minutes, they sit looking straight ahead in staid silence. Listening to Alex Corkran talk about living with an eating disorder. The talk is one of hundreds that she has given to young people at schools around the country.

Corkran, 31, describes herself as an "anorexic survivor", but has also lived with bulimia. She is recounting how she battled for years with her eating disorders, rarely telling the assembled youngsters her life story. Now she went from being an average child, with a good home and loving parents, to a troubled young adult spending long spells on psychiatric wards and in treatment centres. How it took a long time to accept she had a problem, and that her attempts to take control of her life by denying herself food was in fact a symptom of illness. She tells of the doctors' ban on illness causes, her family, about the shock of almost suffering a heart attack at the age of 16, and of the long, hard road to recovery.

Facing the audience, she describes the damage the disease had inflicted by the time she was in her early 20s. "I was a 21-year-old, old woman," she says. "The physical effects were really taking their toll on my body. I was shuffling on feet that were black and swollen because my circulation was packing up. And I was freezing cold all the time. I had to have blankets all of the time. My bones were brittle, my teeth were eroded, my hair was falling out, and my skin was like paper. I was diagnosed at night being kept awake by hunger."

The room is silent for an hour as Corkran explains that eating disorders "are not about weight" and that they are a "serious mental illness". She tells them how the "one-up" debate surrounding models' weight played in the media, merely seduces people from what is real and often fatal psychiatric problems.

While Corkran's talks are personal, she says they are primarily about providing information that young people - her audience are mixed sex, and usually between 15 and 21 - can understand. "Stories are easier than facts and figures," she says.

However Corkran doesn't just tell her story. Over thirty years she has been involved in her role as a role model in both giving advice, mentoring, and often acting as a consultant between troubled students and the professionals, such as counsellors, who can offer help in the longer term. If parents ask for help, Corkran tries to advise and support them too. She has even accompanied children to treatment centres abroad to seek out treatment if it is unavailable in the UK.

Point of identification

She says: "A lot of the time when I speak to young people and I tell my story I will receive emails, phone calls, text messages saying 'This is about me and when you told your story you were talking about me.' They come up to me after the talks and they know they can confide in me. It's that point of identification that is the most important thing. I see the presentation as just the first page of the first chapter for one people who are opening a can of worms potentially, and to be there to follow up is absolutely crucial."

Jan Williamson, a teacher at Wexley College who has invited Corkran to speak a number of times, says contact with her can encourage students who might not otherwise come forward and ask for help. "What Alex does is good because there is the personal involvement in the issue," he explains. "As a teacher, you may know there are problems but feel unable to help."

Essentially, Corkran says, she is filling a gap in a system which often young people don't receive the treatment they need. As someone whose family was able to pay for at least some of the treatment and counselling she received, Corkran says she is lucky and feels strongly about helping those who are not so fortunate.

"For many families, the financial strain of putting someone into an effective treatment programme is too much and rules out a lot of options in terms of some fantastic help that's available," she says. "To have to send someone to different types of treatment, rather than simply the NICE offering psychiatric hospitals and eating disorder units, is important."

The problem with access to treatment



Alex Corkran, who is not a professional counsellor, insists she knows her limitations but says she might be the first step for youngsters seeking assistance. Photo: Frank Brown

Words of wisdom

Following the success of her own talks in schools, Alex Corkran set up a company, Springback, employing eight speakers with first-hand experience of issues ranging from binge drinking to living with disability after an accident.

Event James, one of its speakers, is no stranger to sharing his personal experience. During the final stages of the 20 years he spent in prison, and since his release in 2004, he has written for the Guardian and other publications and spoken extensively on the reality of being in jail.

James says he appreciates that Corkran is essential when talking to young people about sensitive subjects, particularly when the role - as in the case with Corkran - goes beyond the one-hour talks of the other Springback speakers. But he says the approach appears to work and that feedback suggests it is the "authenticity" of personal perspective that students, families and schools relate to. Corkran's first-person approach is effective, he says, in a way that most impersonal talks from people in official positions might not be, because a connection can be made with the students.

It is an issue that first - formerly the Eating Disorders Association - has been campaigning on. Its chief executive, Susan Ringwood, says that, regardless of how much publicity eating disorders attract in the press and elsewhere, many people - young and old - are often left scrambling around for treatment. "There are centres of excellence, but services are patchy and only about half of the professional help needed is available," she says.

It does not help, she adds, that people with eating disorders do not see their actions as a disorder and often work hard at concealing their condition, and that even when they try to seek help many are met with ignorance. "A lot of people don't

understand how complex eating disorders are, there is even a lack of understanding among professionals," Ringwood says. "I was speaking to a woman only yesterday whose daughter was losing weight rapidly, as she took her to see her GP. She was told her daughter was 'tiring' with anorexia, as if somehow it was a choice. This is a serious illness."

Ringwood is full of praise for Corkran, saying she can plug gaps in frontline provision by offering much needed insight and early guidance to young people. But she has concerns about this kind of personal approach. "The only provision we would have of involving people like Alex [in working with people with eating disorders] is that sometimes the personal experience can complicate the message," she says. "Someone might look at her and think 'It doesn't look so bad. It didn't do to you much harm.' I know how careful she is with it, but there is a risk of getting down to trying to solve people's problems."

Amateurish

Corkran, who is not a registered therapist or professional counsellor, acknowledges that her approach could be interpreted as amateurish, but insists she knows her limitations and is in no way trying to substitute for professional help in the field. "It is just sometimes that very first step towards somebody avoiding one of these problems, or getting help," she says.

What matters, Corkran insists, is that young people are given some help in situations where it might not otherwise be available. At the very least, she hopes people are inspired by her story. "There is no such thing as a free lunch," she says. "I was once told that I was hopeless and that I was not going to get well, but with very effective treatment, things changed and I've got a life today."

www.springback.org.uk

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