



THE (DIS)EMBODIED SELF IN ANOREXIA NERVOSA

REBECCA J. LESTER

Department of Anthropology, 0532, University of California at San Diego, 9500 Gilman Drive, La Jolla, San Diego, CA, U.S.A.

Abstract—This paper deconstructs the debate that has been raging for over a decade between proponents of the feminist cultural model of eating disorders and supporters of the traditional medical model of illness and treatment, bringing the level of analysis one step deeper—to the question of the constructions of “the self” employed in these discourses and the implications of these constructions for the successful understanding and treatment of anorexia nervosa. The paper argues that while feminist theorizing has largely dislodged the current representations of anorexia nervosa from the clamps of myopic medical discourses devoid of detailed cultural analysis, it has in fact produced similar theoretical dichotomies and blind spots that preclude the successful theorizing of an embodied self and its particular articulation in anorexia nervosa. It is proposed here that Foucault’s [(1986) *The Care of the Self. The History of Sexuality*, Vol. 3. Vintage, New York] notion of “technologies of the self” can provide us with a useful tool for bridging the split between the “inside” and “outside” produced and reified in both the medical model and the feminist cultural formulation of anorexia; a framework is suggested for the implementation of this interpretative position, based on a reconceptualization of the particular ritualistic behaviors associated in anorexia as articulating the core issues of the illness—a reconfiguration and repositioning of the “inside” and the “outside” as a means of tailoring the self along a particular line of “attitude”. The essay is based on eight months of fieldwork counseling in an eating disorders treatment center. Copyright © 1997 Elsevier Science Ltd

Key words—anorexia nervosa, addiction and recovery, culture and psychiatry, philosophies of the self

Susie Orbach (1986) writes,

The anorexic woman has shaped for herself a particularly extreme, intense and rebellious relationship with the various struggles facing women... Her invisibility screams out. In controlling her food so very stringently she caricatures the messages beamed at all women.

Joan Jacob Brumberg (1989) lashes back,

If the anorectic’s food refusal is political in any way, it is a severely limited and infantile form of politics, directed primarily at parents (and self) and without any sense of allegiance to a larger collectivity. Anorectics, not known for their sisterhood, are notoriously preoccupied with the self.

Orbach and Brumberg here articulate two sides of a debate that has been raging for over a decade between proponents of the feminist cultural model of eating disorders and supporters of the traditional medical model of illness and treatment. In this paper, I deconstruct this debate itself, bringing the level of analysis one step deeper—to the question of the construction of “the self” employed in these discourses and the implications of these constructions for the successful understanding and treatment of anorexia nervosa.* I will argue that, while feminist theorizing has largely dislodged the current constructions of anorexia from the clamps of myopic medical discourses devoid of detailed cultural analysis, it

has produced similar theoretical dichotomies and blind spots that preclude the successful theorizing of an embodied self and its particular articulation in anorexia nervosa. I propose that Foucault’s (Foucault, 1986) notion of “technologies of the self” can provide us with a useful tool for bridging the split between the “inside” and “outside” produced and reified in both the medical model and the feminist cultural formulation of anorexia, and will suggest a framework for this interpretative position, based on a reconceptualization of the particular ritualistic behaviors associated in anorexia as articulating the core issues of the illness—a reconfiguration and repositioning of the “inside” and the “outside” as a means of tailoring the self along a particular line of “attitude”.

LOSING PATIENCE/PATIENTS: THE MEDICAL MODEL AND THE “ENIGMA” OF ANOREXIA NERVOSA

In *Conversations with Anorexics*, Hilde Bruch (1988), perhaps the most admired and respected expert on anorexia nervosa in American medical history, chides an anorexic patient for her “childish thinking and resistance” when the client expresses her anxiety about her developing female body. “Why not accept normal healthy womanhood?” Bruch (p. 121) asks. “What do you really have to give up in order to get well?” The answer to this question touches the very heart of the anorexic’s

*This paper is based on eight months of research in 1992–1993 at a major eating disorders treatment center in San Diego, CA.

struggle. What, indeed, must she give up to get "well"? More to the point, what is the model of health and "wellness" that finds expression in the medical model, and what cultural assumptions about the "healthy self" does it articulate and reinforce?

Bruch, who gained international notoriety for her works *Eating Disorders* (Bruch, 1973) and *The Golden Cage* (Bruch, 1979), can be seen as a champion of what, unfortunately, has been the main vein of psychiatric thinking on eating disorders for the past two decades. As Bruch's challenge to her patient makes painfully clear, traditional psychiatric treatment of anorexia nervosa has not only disregarded but treated as superficial and immaterial what is in fact the crux of the illness: what it means to inhabit a woman's body in our culture. "Manipulative", "immature" and "spoiled", the anorexic is constructed as having a "distorted" view of reality (Bruch, 1988, p. 130). Her thinking is "illogical", her behaviors designed to "get attention", her feelings of rage at those who are trying to force her body to take a female shape "inappropriate" (pp. 125–139). In one case, Bruch dismisses out of hand the anorexic's own understanding of her illness as originating from her negative associations with female bodies and her inability to reconcile feelings of independence, assertiveness and self-determination with the reality of being female as being characteristic of the "illogical conclusions" often found in anorexic women (p. 126).

This resistance to acknowledging the cultural features and political implications of the anorexic's "hunger strike" (Orbach, 1986) has taken a disturbing turn in recent years. The movement of the psychiatry profession away from "the talking cure" and towards psychopharmaceutical management has been applauded by eating disorders professionals, who have long sought a biological cause for the illness. In recent years, anorexia nervosa has been variously attributed to serotonergic hypothalamus disorders (Grignaschi *et al.*, 1993; Merola *et al.*, 1994; Leibowitz, 1990, 1992; Broocks *et al.*, 1990), sensory disturbances and cognitive malfunctions (Berry *et al.*, 1995; Brewerton *et al.*, 1992; Palazidou *et al.*, 1990; Everill *et al.*, 1995; Butow *et al.*, 1993), brain tumors (Chipkevitch, 1994), and even seasonal changes or lack of enough sunlight (Hardin *et al.*, 1991; Forarni *et al.*, 1994; Brewerton *et al.*, 1994). The most common treatment response is pharmaceutical management with large doses of antidepressants, while millions of research dollars are being spent on trying to understand the "mystery" of why these "biological defects" appear, nine times out of ten, in women (American Psychological Association, 1987). Here, the experience of the self is completely eclipsed, locking out any productive cultural analysis. The anorexic body is nothing more than a machine in need of repair, and any

subjective perceptions of the self housed in the faulty body are invariably "distortions", products of the incorrect processing of data from an external reality and not to be trusted. Not surprisingly, this leads quickly to the construction of the anorexic woman as manipulative, secretive and deceitful.

WHAT'S THE MATTER? THE FEMINIST CRITIQUE AND THE PROBLEM OF THE DISEMBODIED SELF

Feminism's main critique of the medical model is that it edifies the individual as a bounded and fixed entity—a privileged site of experience—which implicitly carries the gender and class characteristics of the dominant group. In traditional psychotherapy, they claim, abstract theories of the self are employed—a largely disembodied self, which is held to be outside of time, outside of space, outside of culture and outside of gender, while, in fact, adhering to distinctly gendered, classed and raced criteria of health and normality (Kaplan, 1983; Martin, 1987; Orbach, 1978; Caplan, 1985; Broverman *et al.*, 1970; Chesler, 1972; Gilligan, 1982; Nowacki and Poe, 1973).

Many feminist scholars have deconstructed the presumption of a "disembodied self" as not only impossible but dangerous:

As an object, the self has been variously claimed and normally left in a neutered "natural" state, the sex of which is a barely concealed masculine one. And until very recently, when selves got spoken they were also taken as a-gendered although of course they were distinctly male (Probyn, 1993, p. 2).

De Lauretis makes a similar point in her discussion of technologies of gender, noting that theories which propose to be "gender-blind" (in the sense that they are theories of the self which do not specify a particular gender) indeed function as technologies of gender, as they ignore the differential constitution of female versus male subjectivities:

Hence the paradox... in order to combat the social technology that produces sexuality and sexual oppression, these theories (and their respective politics) will deny gender. But to deny gender, first of all, is to deny the social relations of gender that constitute and validate the sexual oppression of women; and second, to deny gender is to remain "in ideology", an ideology which (not coincidentally if, of course, not intentionally) is manifestly self-serving to the male-gendered subject (de Lauretis, 1987, p. 15).

In other words, theories of the self which claim to be gender-neutral are not—and cannot be so. This makes them particularly dangerous: although they appear to counter traditional gender assumptions, they instead inadvertently reinscribe them in a more covert way. We can, indeed, see this at work in Bruch's interactions with her anorexic patients, where the anorexic women's own assertions that their illness springs from the conflicts of *gendered* selves are turned back on them and used as evidence of their "childlike" and "illogical" (i.e. "female")

reasoning, as compared to the "scientific" and "logical" reasoning of the (male) medical establishment.

It should be noted here that psychoanalytic theory does introduce the question of gender and the body into the analysis of illnesses such as anorexia nervosa. But the psychoanalytic framework has significant limitations when it comes to understanding the realities of embodiment and the experience of the gendered self as culturally elaborated phenomena. It often fails to situate its categories of analysis within a dynamic sociocultural setting, appealing, instead, to constructions which dangerously approach the "eternal" or "essential" feminine, again leaving us with a fixed and stable "self" divorced from historical or cultural analysis.

THE GHOST IN THE MACHINE: CULTURAL ELABORATIONS OF THE CARTESIAN TRADITION

Feminist analysis locates the inadequacies of these two branches of the medical model—the medicalization of anorexia as a purely biological dysfunction on the one hand, and the employment of abstract self theories on the other—in the reification of the Cartesian duality of mind and body, which infuses Western culture and is continually produced and socially embodied in its institutions. The body in Western philosophy is the non-self, the base material which grounds the self to the worldly plane of existence. It is constructed as animal, appetite, deceiver, and jailer of the self, undermining the best strivings of the self. The self is the soul, the spirit, the mind, the noble strivings, the highest, the closest to God, whereas the body is the lowest, the depraved, the obstacle to self-realization (Bordo, 1993). The medical model of anorexia reifies this duality by positing a disembodied self, and then attending to either this ephemeral entity or to the malfunctioning form that houses it.*

The feminist response has been to deconstruct the Cartesian mind-body axis itself within the framework of detailed cultural analysis, and to claim a space for the theorizing of an embodied self. Anorexic behaviors are read as an impassioned and complicated form of social protest, the anorexic body that of a "political prisoner" (Wolf, 1991, p. 208). "Pathology", they claim, is an inappropriate classification, since the dysfunction is not to be found in the psyches of individual women, but at the very core of American culture. The anorexic, far from being the victim of a "bizarre" psychopathology, expresses through her emaciated body, her hunger, her self-deprivation and self-hatred that she

has learned all too well what our culture expects of its women. By embodying these "female" traits and carrying them to their logical extremes, the withered, silent, frightened, withdrawn, self-hating, slowly disappearing anorexic cruelly parodies our culture's image of the "ideal woman", revealing that what our culture demands of us is nothing less than our self-eradication. Feminist analysis has reinvigorated the theorizing of anorexia nervosa, giving voice at last to the frustration and anger many women have long felt—that the medical establishment just doesn't get it. The feminist critique threw open doors for us, liberated us from the feelings of isolation and shame we were taught we should feel about our "sick" thoughts and behaviors. The causes of our destruction are not personal madness but cultural lunacy. We are not crazy—we are merely women trying to survive in a crazy world.

THE BLACK BOX: THE PROBLEM OF THE SELF

But with the first rush of excitement beginning to wane, we must turn a more critical eye to the feminist critique. In its enthusiasm to deconstruct the notion of the "individual" in traditional medical discourse and the institutional reproduction of the culture-blind mind-body axis, feminist theorizing on anorexia has, in fact, produced a parallel split, and one with similar consequences—the split between culture and the individual. Although the feminist project began as an attempt to theorize an embodied self in the analysis of anorexia nervosa, what has come about is a substituting of the medical model's *individual body* with feminism's *cultural body*, the medical model's *disembodied self* with feminism's *de-selfed body*. The body in the feminist cultural analysis of eating disorders is a sight of contestation—cultural discourses are written on the docile body, merge together and work their mysterious alchemy with no direct or predictable linkage to the internal processes of the person. The debilitating illness of anorexia nervosa is read as a text—a symbolic struggle played out in the "language" of the body—to the degree to which we begin to wonder if we are talking about real women at all. While a self is always implied in these analyses, it is left largely unexamined as a sort of black box where cultural forces somehow collide and interact to produce unpredictable constellations of behavior.

So we are once again left with a split that needs to be bridged. In both models we are left with the questions: How does the "outside" get "inside"? And how might the "inside" inform, challenge, or otherwise inflect the experience of the "outside"? We are even led, perhaps, to question the utility of the inside/outside distinction itself. I suggest that Foucault's (Foucault, 1986) notion of self technologies provides us with a potential base for theorizing an embodied self and its particular articulation in anorexia nervosa.

*When antidepressants are used in conjunction with psychotherapy, this is usually done in an effort to control the physical impulses of the body so that treatment of the psyche can proceed unhindered by the patient's faulty physicality.

TECHNOLOGIES OF THE SELF

In the third volume of *The History of Sexuality* (Foucault, 1986) Foucault turns away from a concern with apparatuses of domination, which did their work on bodies, and towards operations that looked inwards—operations we perform on ourselves. Specifically, a “technology of the self” is an art of existence, a theoretical project, an ensemble of meaningful practices worked on the body which both constitute and transform the self. It is “the relation of the self with self and the forming of oneself as subject” (Probyn, 1993, p. 121). But more than merely a collection of practices, the self is an “attitude”, a way of thinking, feeling and relating to contemporary society. It is the conscious and deliberate shaping of the self according to a particular philosophy of living and through a given set of culturally meaningful bodily practices.

Although Foucault does not specifically address the question of gender, his theory of self technologies provides a potential space for the theorizing of both a gendered and an embodied self. But first we must attend to the question of “self-subjectification” and the construction of the subject through culturally produced technologies of both gender and the body. Here, I will concentrate on two of the many feminist theorists who have written on this subject, as I believe a brief analysis of the complementary perspectives of de Lauretis and Probyn will illuminate the principle issues of concern in the construction of subjectivity as central to the successful theorizing of anorexia nervosa.

BECOMING WOMEN: GENDER AND (SELF-) SUBJECTIFICATION

By deconstructing what have largely been held to be foundational concepts in feminist discourse—gender and the Body*—de Lauretis (1987) and Probyn (1993) both problematize feminism’s complicity in the continued (re)production of gender ideologies and the beliefs, attitudes, and power relations implicated in them. Through their deconstruction and examination of the use of concepts and representations within feminist discourse itself, both Probyn and de Lauretis seek to open up new spaces of inquiry, articulation, and theorizing for feminist thinkers. While both are, I believe, successful, I will suggest that de Lauretis stops short—that a key problematic skillfully illuminated by de Lauretis is nonetheless left unresolved in her work, but that

Probyn’s work offers a possible avenue for the reconceptualization of the ideas laid out by de Lauretis. But taken together, these works—formulated on different levels of analysis (de Lauretis on gender, and Probyn on the perhaps more fundamental question of the Body)—complement each other, and together highlight the importance of considering the process of subjectification as both socially reciprocal and dynamic.

De Lauretis’ (de Lauretis, 1987) conceptualization of gender rests on the notion that gender is, first and foremost, a representation. It is a semiotic link which places individuals into certain (preexisting) categories of relations, with these categories themselves being positioned in hierarchical relation to one another. The *process* by which individuals are classified is as much the work of gender as is the relationships between the categories of “male” and “female”.

Considering Althusser’s (1971) notion of the subjective working of ideology, de Lauretis turns to the question of how gender becomes part of an individual’s *self*-representation, as well as her representation as a member of a certain category; i.e. how gender constitutes its subjects as women and men. Drawing from feminist film theory (the notion of the cinematic apparatus), and employing a Foucauldian-informed perspective of the workings of power, de Lauretis borrows the notion of spectatorship—the ways in which gendered individuals are solicited and structured in the process of viewing a film—and applies this to discourses about gender. In other words, she argues that the work of gender is to constitute us as certain types of “spectators”, who will then only buy tickets and attend its own “productions”.

The process of “gender-izing” is, for de Lauretis, a dynamic one, always in flux, and the construction of gender is going on “as busily today as it did in earlier times” (p. 3). This holds exciting implications for the question of subjectification within technologies of gender. If the technologies are in constant flux, the process of subjectification is also ongoing, and we are forever engaged in the act of “becoming”. The gendered subject is never simply “gendered” in any fixed or stable way in this model, as the very parameters of gender may be pushed, stretched, and even broken, demanding a reformulation of our understanding of subjectivity.

But despite de Lauretis’ elegant and sophisticated argument, she leaves an essential question unanswered. While she problematizes the process of subjectification, she skirts around it, and does not give a satisfactory answer to the question (which she herself identifies) of how the process of *self*-representation of gender actually occurs. With a nod to Foucauldian theory as useful for looking at how Truth is constructed and the idea that ideology is “implanted” in individuals, de Lauretis faults Foucault (1986) for ignoring gender (and thus, im-

*I will use the term “Body” with a capital letter to refer to the *representation* of the Body as a theoretical concept within discourse, and will use the term “body” to refer to the actual, real, masses of flesh, bones, and blood we walk around in, and which are positioned in historical and social relation to other such “bodies”. [This distinction is similar to that made by de Lauretis (1987) between “Woman” and “woman”].

PLICITLY, contributing to the masculinist production of it), and for failing to take up the issue of how gendered subjects are differently constituted. But she too fails to offer a satisfactory conceptualization of the constitution of gendered subjects. Her appeal to feminist film theory falls short, as the notion of "spectatorship" and the construction of gender through the spectator's engagement with the "performance" is predicated on a subject who is already gendered, and whose subjectivity is engaged accordingly (de Lauretis, 1987, pp. 13–14).

It is here that Probyn's work (Probyn, 1991) provides a valuable complement to de Lauretis'. The central problematic for Probyn—like that of de Lauretis—is the deconstruction and examination of a concept largely held to be foundational to feminist theory and discourse: the Body. Probyn rejects the conceptualization of the Body as "a privileged site... a supposedly evident and stable platform from which we can unproblematically speak" (Probyn, 1991, p. 111). The Body is not a source of Truth, she maintains (as it is often positioned within feminist—and other—discourse), but like other representations (such as notions of gender or the "feminine") is constructed within and around dominant discourses—and other representations—and the power relations they produce. However, neither is the Body *wholly* a conceptual construct, as it is formulated within much of postmodernist discourse (see Butler, 1990)—a "screen" that reflects power configurations or a decentralized and dehistoricized "body without organs" (Kroker and Kroker, 1987). The concept of the Body does indeed refer, however incongruently, to the real, tangible, fleshy bodies in which we live. As such, the Body, Probyn argues, must always be viewed as, at best, a "compromised concept" (Probyn, 1991, p. 116).

Probyn illuminates the tension produced by and in the "doubleness" of the body as both a concept that may be used within theory and discourse (the Body), and the tangible, biological thing in which we live and operate our daily lives (our bodies). But rather than holding the body to be "unrepresentable" (as does much of postmodern theory), Probyn argues that this tension may indeed be used to carve out new platforms of enunciation within feminist discourse. By rethinking the doubleness of the body—which is "constituted in the doubleness of the body and self" (Probyn, 1991, p. 119)—Probyn hopes to both illuminate and refigure the traditional posi-

tioning of the "inside" (self) and "outside" (body). Through this reconfiguration, she maintains, micro-pockets of change may be affected and new enunciative positions forged.

Up to this point, Probyn's work proceeds along similar lines as de Lauretis'. Both argue that the deconstruction of a concept (a representation), and a reexamination of the troubled relationship of this representation to the real, historical women (for de Lauretis) and material bodies (for Probyn) it presumes to represent, can allow us to reposition or *twist* this relationship between historically and socially positioned objects and the representations of those "objects". But, whereas de Lauretis leaves us wondering how such a repositioning could, indeed, produce real, lasting change, Probyn offers a model for understanding the process of subjectification.

In likening the doubleness of the Body to the doubleness of the body and self, Probyn opens the way for considering how operations on the body (the "outside") affect—and, in turn, are affected *by*—the self (the "inside"). She elaborates this idea in a later work (Probyn, 1993), taking Deleuze's (1986, 1990) notion of "the pleat" or "the fold" as a point of departure in considering the ways in which the line between the "outside" and the "inside" may be bent and shaped, and suggesting that Foucault's formulation of self-technologies holds particular promise for the theorizing of subjectification within a dynamic social context. It is in the reconfiguring of the relationship between the "inside" (self) and the "outside" (body) that changes in the process and product of subjectification may be made.

More importantly, Probyn suggests that we have a hand in this reconfiguring, as the process of subjectification proceeds largely from practices we perform on ourselves. Redirecting Foucault's (Foucault, 1986) formulation of the operation of *objectification*, in which the line of power remains *outside* (pressed against the body), Probyn describes the process of subjectification as one in which "the line of the outside is folded, and refolded against the inside along a series of 'optional' practices involved in the relation of self to self and to selves" (Probyn, 1993, p. 129). Here, Probyn reintroduces the possibility of agency* (limited, though it may be, within the bounds of available discourses and the "spaces" they present) by suggesting that subjects can indeed transform themselves—consciously and deliberately—through the constant perception and reevaluation of the relationship between the "inside" and the "outside" and how this positions us in relation to others, particularly to other women. The body becomes a site upon which the line of subjectification is turned and where these pleatings of the self can occur, and operations performed on the body

*It should be noted that de Lauretis too brings the notion of agency into her argument by suggesting that women are "both in and out of gender" (de Lauretis, 1987, p. 10) "and may use this tension to read the 'space off' of the dominant discourses and affect change" (p. 26). However, while de Lauretis' notion of agency is not localized—i.e. it is women, *in general*, who are addressed—Probyn's discussion allows for the possibility of a more "personalized" agency, located in individual subjects.

become particularly powerful practices in the realization of self-tailoring.

This bending and folding of the line of the self through the application of meaningful practices allows for an individuated construction of the "inside" and "outside" which permits us to talk about individual experience without reifying the individual as a privileged or stable site of knowledge. Specifically, it provides us with a model for talking about the relationship between the inside and outside—the mind and the body, the individual and the cultural arena—in a way which does not concretize the boundaries between these categories, but allows for their fluidity and flexibility. Indeed, since the line of the inside/outside will be bent and folded differently for each person, this model opens a space for talking about the interactions between individual psychology and the larger social arena without reifying the categories of analysis. By highlighting the body as the primary site of the operation of practices which constitute technologies of the self, it also gives us a model for theorizing an embodied self in anorexia nervosa which attends both to individual psychological experience and distress and the historical and cultural context in which the body is situated and anorexic practices gain meaning.

INSIDE, OUTSIDE, UPSIDE DOWN: THE (DIS)EMBODIED SELF IN ANOREXIA NERVOSA

Sometimes I feel as if I'm made of glass—like I'm transparent. And everyone can see *right into* my insides. It makes me want to scream, "Get out! Get out of me!" (recovering anorexic, personal communication).

Both the medical model and the feminist cultural model construct anorexia nervosa as a Cartesian problem. In the medical model the self and body are treated as characteristically different entities, and fall under the hubrises of different "experts" for their care and maintenance. Feminist theorists contend that this Cartesianism is embraced by anorexic women, who carry its mind-body antagonism to its logical extreme. Bordo (1993) even goes so far as to claim that this dichotomy "regulates the anorexic's very sense of embodiment" (p. 15), a position which would, at first, seem to be well supported. Many anorexic women do indeed talk explicitly of wanting to forget they have a body, to literally make their bodies disappear. "Please dear God, help me", writes one anguished anorexic. "I want to get out of my body, I want to get out!" (Woods, 1981, p. 200).

But this flight from corporeality should not be reduced to a simple self-body dichotomy. The body the anorexic woman wants to destroy, to "break out" from, is a *female* body. This body is the enemy, to be controlled, punished, disciplined,

"starved out". "I grab my breasts", writes Aimée Liu, "pinching them until they hurt. If only I could eliminate them, cut them off if need be, to become as flat-chested as a child again" (Liu, 1979, p. 79). A feeling of hatred and disgust for the femininity of one's own body is all-consuming for the anorexic woman. "I always feared being compared to a female body", says one of Bruch's anorexic patients. "I want to avoid curves—I always avoided looking like a woman... I do not want to have the kind of body females have" (Bruch, 1988, p. 120). And Chernin (1992) writes of her own painful experience of anorexia: "I had observed the fact that the emotions which prompted [my anorexia] were a bitter contempt for the feminine nature of my own bod."

Many anorexics speak of this denial of corporeality as a "male" way of thinking, where the conquering of the body represents the conquering and destroying of their own "weak and detestable" femininity. One of Bruch's patients, for example, talks about her feeling that there is a "little man" inside her who protests violently when she does anything for her own comfort. This is common among anorexics, many of whom talk of having an "other self"—their "masculine counterpart"—which is the censor, the monitor, the punisher of their "female" desires (Liu, 1979; Szekely, 1988; Levenkron, 1981; Lawrence, 1988; Messinger, 1986; O'Neill, 1982; Chernin, 1981, 1985). One of Bruch's conversations with Annette, an anorexic woman in her late teens, is particularly revealing:

Talk about bodies frequently resulted in Annette comparing female to male bodies and finding female bodies inferior. She spoke about wanting to be equal to a man, wanting to have the same stamina, "and I want to stay slender because I want to look more like a man..." Over time it became more and more apparent that somewhere Annette had a concept of being an independent, self-assertive individual with a definite feeling of self, but she could not reconcile this with her concept of being female, which was that of a nearly slavish creature (Bruch, 1988, p. 125).

Denial of the body is both a philosophical attitude and painful daily practice, which makes them feel stronger, more in control, less vulnerable.

This is evidence, feminist theorists claim, of the profoundly misogynistic nature of the philosophical underpinnings of Western culture and its institutions. Women are taught that the mind—the male—is to be valued, while the body—the female—is to be hated and, if at all possible, to be destroyed. "If a woman can be made to say, 'I hate my fat thighs'", says Wolf, "it is a way she has been made to hate femaleness" (Wolf, 1991, p. 197). Anorexic women, this position holds, are not individually ill—they have merely been good students of culture, have taken to heart this ideology, and are enacting it with enthusiastic fervor. Feeling detached from her body (which, as a woman, she has been conditioned to view as a commodity), the

anorexic revels in this separation, distancing herself more and more from her "femaleness" and embracing the disembodied, detached, logical, intellectual, morally and spiritually superior "male" self that her culture reveres.

But I would argue that anorexia nervosa does *not* arise from the conviction that "I am not my body", as both the medical and feminist cultural models contend. Rather, I suggest that the anorexic woman's exaggerated denial that her "self" is in any way linked to her "body" reveals the ultimate "goal" of her behaviors, *not* the root cause of them. It seems, rather, that anorexia springs from the all-too-painful realization that I *am* my body—in this culture, my body *does* define who I am, what opportunities will be opened or closed to me, what my experiences will be, how others respond to me. And my *female* body carries with it its own strong and clear signals to others about who I am and how I am to be treated.

It is no wonder, then, that the anorexic woman, who is often gifted with exceptional intellectual and creative abilities, wants to deny her body, to deny that she *is* her body. It is better to think of her female body as a prison, holding back her otherwise brilliant and shining "male" self. She—her inner self—is not the soft, round, fleshy female body she carries around with her—her "true" self transcends the physical and the hatred, the sexual tension, and anxiety her body arouses in others. She is above, outside, removed from any judgments passed on this flesh-that-is-not-her. The tenacity with which she holds onto this belief, and the rage and destruction she directs at her body and its "betrayers" of femaleness (breasts, hips, stomach), do not tell me that the anorexic woman is alienated or detached from her body at all. In fact they tell me the very opposite—that she is painfully aware that she, culturally speaking, *is* her female body and all this conveys—nothing more—and is trying desperately to deny this realization and what it means for her self-development. She doesn't want to believe that nature has played such a cruel trick on her (Bruch, 1988, p. 121).

It is interesting that, in this very central regard, the feminist cultural model actually *mutes* the anorexic woman by rejecting—or, at the very least, ignoring—any causal link between her external, culturally significant behaviors and her individual psychological configurations. The "reading" of the illness of anorexia speaks only to the cultural "text", leaving us empty-handed for understanding the deeper import of the disease etiology for the individually distressed self. Instead of illuminating our arena of theory, this perspective actually casts a dark shadow over the very heart of the illness, a shadow which renders its theorizing on the cultural level tenuous, as it obscures the basic assumptions of subjectivity

and the embodied self which provide the basis for the elements of analysis. But if we turn the idea of the anorexic's denial of body on its head, and read this instead as a violent reaction *against* the knowledge that, in our culture, a woman *is* first and foremost her body, we can arrive, I believe, at a much more productive analysis, which gives room to theorizing an embodied self in anorexia.

ILLNESS AND SELF-STYLIZATION IN ANOREXIA NERVOSA

In anorexia nervosa, the symptomatology of the illness becomes a highly sophisticated language for communicating inner distress. The "bizarre" behaviors associated with the illness speak to the anorexic woman's intimate understanding that, socially, her "self" will always be connected with her devalued female body no matter what lengths she will go to to try to deny this fact and the pain and rage it carries. "Dread is driving me mad", writes Ellen West. "The consciousness that ultimately I will lose everything: all courage, all rebelliousness, all drive for doing; that it—my little world—will make me flabby, flabby, and fainthearted and beggarly" (Binswanger, 1958, p. 243). In fact, it is only within the framework of a close connection between self and body that the interpretation of the symbolic messages enfolded in anorexic behaviors become at all meaningful. The anorexic's rituals—her food compulsions, her exercise routines, her militaristic regimenting of every aspect of her life, every movement and action of her body—have a goal, a purpose, which only peripherally has to do with being thin to be thin, and has everything to do with changing and modifying the self, while at the same time communicating the "attitude" of the self.

Returning to the model of technologies of the self, we will remember that these technologies consist of two principle elements: *theory*, which articulates the attitude of self one wishes to employ, and *practice*, consisting of operations, usually directed at the body, which change and shape the self along the trajectory of the desired attitude. Rather than focusing on the anorexic woman's incessant drive to lose weight as the core of the illness, I suggest that the primary obsession in anorexia nervosa is this transformation of the self, which can best be achieved at this particular historical moment through a certain set of bodily practices which lead only in later stages of the illness to a compulsively single-minded focus on the body. To understand this, we must first look at the "theory" of anorexia—the "self" which is being pursued—and then examine closely the "practice"—how the behaviors associated with

anorexia serve to bring about this self-transformation.

THE "THEORY" OF ANOREXIA: THE CULTURAL CONSTRUCTION OF THINNESS AND THE ATTITUDE OF THE SELF

Feminist theorists emphasize the thin female body as a particularly powerful medium for communicating the "attitude" of the self.* A woman who is thin is seen as smarter, better, more "together" and less vulnerable. Slenderness communicates competence, self-control and intelligence. It reflects a self which can "rise above" a need to eat—an ascetic, morally refined person not subject to the "female" excesses of appetite and sloppy overindulgence. It represents transcendence of domestic femininity, an ability to compete in a "man's world" by keeping one's "female nature" under wraps. It communicates self-restraint, containment of impulse, a triumph of the will over the body. A thin body communicates absolute purity, hyper-intellectuality, and transcendence of the flesh. Fat, on the other hand, proclaims a taint of matter and flesh, wantonness, mental stupor and mental decay. Female curvaceousness—large breasts, in particular—is equated with wide-eyed, giggly vapidness (Bordo, 1993). Fat is lazy, vulnerable, emotional, overindulgent, sexual, needy, and unmistakably female.

Anorexic women often consciously embrace this symbolism, which, far from being a creation of their private pathologies, is an integral part of American cultural imagery. Thinness comes to represent the hard-won triumph of the self over the flesh—"proof" that the self and the body can be dislodged from one another, and that her female body can be discarded as the anchor weight harnessing her otherwise brilliant self to a mundane and restricted existence. As Kim Chernin writes:

I reverted to a fantasy about my body's transformation from this state of imperfection to a consummate loveliness, the flesh trimmed away, stomach flat, thighs like those of the adolescent runner on the back slopes of the fire trail, a boy of fifteen or sixteen, running along there one evening in a pair of red trunks, stripped to the waist, gleaming with sweat and suntan oil, his muscles stretching and relaxing as if he'd been sent out there to model for me a vision of everything I was not and could never be (Chernin, 1992, pp. 65–66).

For the anorexic woman, thinness is liberation.

THE "PRACTICE" OF ANOREXIA: BODY BOUNDARIES AND THE REDEFINITION OF THE SELF

The practices labeled as so "strange" and "bizarre" in medical texts and popular culture alike

take on a new hue when viewed as deliberate behaviors designed to bring about a transformation of self, rather than as hiccups of an obsessive-compulsive mind. Turning to the question of the "practice" of anorexia, I have elsewhere (Lester, 1995) elaborated a framework for examining women's self-starvation, which integrates individual psychology and cultural context through an examination of metaphor and symbolic elaboration, which I believe helps to bridge the split between the "inside" and the "outside" reproduced in both the medical and feminist cultural models.

In brief,† I suggest that the body, as the material vehicle of the psychological self, becomes a metaphor for the self, and the two are often conflated. Specifically, the boundaries of the body may come to symbolize the boundaries of the psychological "self"—who "I" am in relation to "you". Food, as a substance which traverses the boundary between "me" and "not me"—and which is often invested with cultural and social significance surrounding concerns about dependency, nurturance and growth—may be symbolically elaborated and used to negotiate and reestablish the boundaries of the self in response to culturally constructed concerns about gender, sexuality, autonomy, and identity.

The particular elaboration of this process, I suggest, together with the subjective experience of the women engaged in voluntary self-starvation, takes its meaning from the cultural environment in which it is located. For the contemporary anorexic woman, I suggest that control over the boundaries of one's body and the "identifiers of womanhood" (breasts, hips, and menstrual periods, all of which are eradicated through the process of self-starvation) have become meaningful symbols in a cultural context in which discourses of "individualism" and certain hyper-valued constructions of the self are bound up with deep-seated, gendered categories of representation and analysis.

Specifically, through the ritualization and control of food, I suggest that the anorexic can affect a redefinition—a repositioning—of the relationship between the "inside" and the "outside", making these practices particularly appropriate in her project of self-tailoring, and highlighting the dynamic interplay between individual psychology and cultural meaning.

At the psychological level, an anorexic's refusal of food allows her to solidify her physical boundaries, her ideal to permit no substances to enter or leave her body (Lester, 1995; Sugarman *et al.*, 1982; Spignesi, 1983; Robertson, 1992). She will be totally, completely self-contained, a closed system. This then becomes a means for the woman who is experiencing conflict in the area of boundaries or inside/outside definition to reclaim—or to discover—her own agency. Through a solidification of the body boundary through fasting (and the accom-

*I am particularly indebted to Bordo's analysis (Bordo, 1993) in the construction of this part of the argument.

†See Lester (1995) for a full discussion of this framework.

panying physiological conditions such as amenorrhea) the anorexic woman may literally *redefine* the boundaries of her self. The body boundary may then be crossed *only on her authority*, and under extremely controlled and ritualized circumstances.

The anorexic's hardened body has become a defense against invasion from the outside. She has mastered her hunger, her impulses, her needs. She has proven that her body is of no consequence, and that her mind is more powerful than her female flesh. This is perhaps most deliciously vindicated when her discipline causes her body to stop menstruating and her breasts and hips disappear. "You make of your own body your very own kingdom", writes one woman, "where you are the tyrant, the absolute dictator" (Bruch, 1979, p. 65).

Her ritualized eating and fear of food attest to the anorexic's anxiety about not being able to seal herself up completely, and to the central significance of these boundary issues for her self-project. Like other transitional substances (Douglas, 1966), food (which moves between "me" and "not me") harbors enormously powerful symbolic potential, and the movement of food across the boundary from the "outside" to the "inside" provokes almost unbearable anxiety in anorexic women. Indeed, many express the terror that eating one unplanned or uncontrolled bite will "open the floodgates" and control of the body's boundaries will be lost. In response, the anorexic engages in elaborate rituals surrounding the "dangerous" moment when the inside/outside separation is compromised as a means of mediating this anxiety and retaining as much control as possible over the event, revealing the centrality of the concern for rigidly controlling the definition of the inside/outside relationship in the etiology of the illness. Here, the ritual may be viewed as a means of reconciling transitional substances with the established order of categories, an activity which both "makes visible external signs of internal states" and controls the danger of anomalous substances by allowing for their transition from one state to the other to occur in a closely controlled setting (Douglas, 1966, p. 69).

The anorexic's refusal of food (a substance usually associated with women) also makes her feel "different" from other women—stronger, less vulnerable, more logical, spiritually superior, pure, purged of contaminating femaleness. "My soul seemed to grow as my body waned", one recovering anorexic recalls. "I felt like one of those early Christian saints who starved themselves in the desert sun. I felt invulnerable, clean and hard as the bones etched into my silhouette" (Woods, 1981, p. 242). As these bodily practices intensify, her self is tailored along the "attitude" she strives for. The changing shape of her body communicates to those

around her the magnitude of the change which is taking place within her.

ANOREXIA AND THE PARADOX OF LIBERATION

But thinness in American culture is overdetermined and carries multiple significances. Women cannot simply make thinness mean whatever they want it to mean. In a paradoxical reversal, we find that, on a cultural level, the slender female body communicates almost the opposite of its significance on the psychological level—conformity to sexual stereotypes, vanity, superficiality, a need for acceptance and approval, vulnerability, delicacy and fragility, and a desire to take up as little physical (read: social) space as possible or, in the anorexic's case, to disappear all together.

The anorexic woman thus finds herself in a paradoxical situation—thinness, the very path of her liberation, is that which further enslaves her. It is my belief that the two models of thinness are *not* reconciled in the minds of anorexics, but indeed exist *simultaneously* for them. While it seems that the first set of significances of thinness is more immediately present for anorexic women, we cannot ignore or discount these other coexistent significances of thinness or their impact on the anorexic's self-project. The tailoring of the self along the first line of attitude proceeds nicely for a while—months, or even years. But the goal of the project becomes progressively blurred and frayed and frustrated as the second set of significances comes into play. The anorexic woman finds she's playing a losing game, that her magic solution has betrayed her. "It is like the pot of gold at the end of the rainbow, only there is no pot of gold", writes one young woman (Bruch, 1988, p. 134). She soon becomes entrapped in a web of paradox, from which there seems to be no escape but death.

It is at this juncture that I believe the anorexic largely abandons the internal focus of her self-project—the *theory*—and becomes progressively more and more obsessed with the externally visible *practices* aimed at the body. It is usually only after she has entered this final stage of the illness that the anorexic allows herself to consider psychiatric treatment. "I'm tired of living this way", confesses one woman who has presented herself to Bruch for treatment.

I'm tired of not wanting to do anything about it... I have been stuck at this level for the past two years... If you help me I'll come. I do not know how often, because I don't like it—but I have to talk to someone (Bruch, 1988, p. 92).

By this point, conscious awareness of the original goal of the self-project has been lost in a mire of obsessions and apparently "irrational" fears. The anorexic herself doesn't know what is driving her or why she can't seem to "just eat like everyone else". She knows she is too thin and that she could easily

die from her illness. She is told she is stubborn and vain and childish and selfish. She is told that she must give up her "irrational" need for control and self-determination if she wants to get well. In fact, she is told that it is this rebelliousness and "neurotic" need for control which made her ill in the first place. Finding herself looking death in the face, the anorexic often capitulates and accepts defeat. One young woman reports:

How much, how much I enjoy the streamlinedness of it, the simplicity. I really care about that. But I couldn't stay alive. My "less is more" sort of thing, and also wishing to feel the consciousness of my body. So the coupling of a variety of things made me arrive at this very, very streamlined diet in which there clearly wasn't sufficient nutrition to sustain life (Bruch, 1988, p. 109).

Her self-project has failed miserably, although she herself may not become aware of the significance of this for years to come, if ever. One young anorexic I worked with wrote the following poem about the illness which had come to haunt her:

Through the beaded curtain enters the eagle, eager to do his bidding. Slowly eroding at self, beak and talons siphon. Nail it shut. So where is justice?

Her illness is an "eagle", a bird of prey which has entered through a beaded curtain—a divider of space, a boundary, which looks solid, but proves unable to protect her. The eagle comes to "siphon" and "erode" her self, sucking from her her life force, her energy, her essence. Her desperation is revealed in the phrase "nail it shut": she feels that she is as good as dead, that she is little more than a living corpse, and all that remains is to "nail shut" the lid of her coffin. "So where is justice?" she asks. "Where is justice?" It is perhaps no wonder that eating disorders have one of the highest relapse rates of any psychological illness (Kennedy and Garfinkel, 1992).

CONCLUSION

It is apparent that the successful treatment of anorexia nervosa demands a more sophisticated understanding and theorizing of the embodied self as a fluid and dynamic entity which may be shaped and tailored through the engagement of meaningful cultural practices. Anorexia is not only, or even principally, an illness of the material body, although the anorexic's painfully emaciated and deteriorating form quickly becomes the most salient feature of the illness, and is sensationalized in both the medical and popular literature. By reading the anorexic's struggle as an elaborate and sophisticated self-technology which has gone awry, we can, I believe, minimize the risks of either appealing to an abstracted, disembodied self, or effacing the experiences and sufferings of individual women. At the same time, we can move towards a clearer understanding of anorexia as the

distress of a self embodied in a very real, historically significant way.

REFERENCES

- American Psychological Association (APA) (1987) *Diagnostic and Statistical Manual of Mental Disorders: DSM-III-R*, 3rd. ed., revised. APA, Washington.
- Althusser, L. (1971) Ideology and ideological state apparatuses (notes toward an investigation). In *Lenin and Philosophy and Other Essays*, trans. Ben Brewster, pp. 127–186. New Left Books, London.
- Berry, F. M., Fried, S. and Edelman, E. L. (1995) Abnormal oral sensory perception in patients with a history of anorexia nervosa and the relationship between physiological and psychological improvement in this disease. *Psychotherapy and Psychosomatics* 63(1), 32–37.
- Binswanger, L. (1958) The case of Ellen West. In *Existence*, ed. R. May, pp. 237–364. Simon and Schuster, New York.
- Bordo, S. (1993) *Unbearable Weight: Feminism, Western Culture, and the Body*. University of California Press, Berkeley.
- Brewerton, T. D. et al. (1992) CSF beta-endorphin and dynorphin in bulimia nervosa. *American Journal of Psychiatry* 149(8), 1886–1890.
- Brewerton, T. D. et al. (1994) Findings from the seasonal pattern assessment questionnaire in patients with eating disorders and control subjects: effects of diagnosis and location. *Psychiatry Research* 52(1), 71–84.
- Broocks, A., Liu, J. and Pirke, K. M. (1990) Semistarvation-induced hyperactivity compensates for decreased norepinephrine and dopamine turnover in the mediobas hypothalamus of the rat. *Journal of Neural Transmission* 79(1–2), 113–124.
- Broverman, I. et al. (1970) Sex role stereotypes and clinical judgements of mental health. *Journal of Consulting and Clinical Psychology* 34(1), 1–7.
- Bruch, H. (1973) *Eating Disorders*. Basic Books, New York.
- Bruch, H. (1979) *The Golden Cage: The Enigma of Anorexia Nervosa*. Vintage, New York.
- Bruch, H. (1988) *Conversations with Anorexics*, eds D. Czyzewski and M. A. Suhr. Basic, New York.
- Brumberg, J. J. (1989) *Fasting Girls: The History of Anorexia Nervosa*. Harvard University Press, Cambridge, MA.
- Butler, J. (1990) *Gender Trouble: Feminism and the Subversion of Identity*. Routledge, New York.
- Butow, P., Beumont, P. and Touyz, S. (1993) Cognitive processes in dieting disorders. *International Journal of Eating Disorders* 14(3), 319–329.
- Caplan, P. J. (1985) *The Myth of Women's Masochism*. Dutton, New York.
- Chernin, K. (1981) *The Obsession: Reflections on the Tyranny of Slenderness*. Perennial Library, New York.
- Chernin, K. (1985) *The Hungry Self: Women, Eating and Identity*. Times, New York.
- Chernin, K. (1992) Confessions of an eater. In *Cooking, Eating, Thinking: Transformative Philosophies of Food*, eds D. Curtin and L. Heldke, pp. 56–67. Indiana University Press, Bloomington.
- Chesler, P. (1972) *Women and Madness*. Harcourt Brace Jovanovich, San Diego.
- Chipkevitch, E. (1994) Brain tumors and anorexia nervosa syndrome. *Brain Development* 16(3), 175–179.
- Deleuze, G. (1986) *Foucault*. Minuit, Paris.
- Deleuze, G. (1990) *Pourparlers*. Minuit, Paris.
- Douglas, M. (1966) *Purity and Danger*. Routledge, Chapman and Hall, New York.
- Everill, J., Water, G. and Macdonald, W. (1995) Dissociation in bulimic and non-eating-disordered

- women. *International Journal of Eating Disorders* 17(2), 127–134.
- Forarni, V. M. et al. (1994) Seasonal patterns in eating disorders subgroups. *Comprehensive Psychiatry* 35(6), 450–456.
- Foucault, M. (1986) *The Care of the Self. The History of Sexuality*, Vol. 3. Vintage, New York.
- Gilligan, C. (1982) *In a Different Voice: Psychological Theory and Woman's Development*. Harvard University Press, Cambridge, MA.
- Grignaschi, G., Mantelli, B. and Samanin, R. (1993) The hypophagic effect of restraint stress in rats can be mediated by 5-HT₂ receptors in the paraventricular nucleus of the hypothalamus. *Neuroscience Letters* 152(1–2), 103–106.
- Hardin, T. A. et al. (1991) Evaluation of seasonality in six clinical populations and two normal populations. *Journal of Psychiatric Research* 25(3), 75–87.
- Kaplan, M. A. (1983) Woman's view of DSM III. *American Psychologist* 38(7), 786–792.
- Kennedy, S. H. and Garfinkel, P. E. (1992) Advances in diagnosis and treatment of anorexia nervosa and bulimia nervosa. *Canadian Journal of Psychiatry* 37(5), 309–315.
- Kroker, A. and Kroker, M. (eds) (1987) *Body Invaders: Panic Sex in America*. Oxford University Press, Toronto.
- de Lauretis, T. (1987) *Technologies of Gender: Essays on Theory, Film and Fiction*. Indiana University Press, Bloomington.
- Lawrence, M. (1988) *The Anorexic Experience*. Women's Press, London.
- Leibowitz, S. F. (1990) The role of serotonin in eating disorders. *Drugs* 39(3), 33–48.
- Leibowitz, S. F. (1992) Neurochemical–neuroendocrine systems in the brain controlling macronutrient intake and metabolism. *Trends in Neurosciences* 15(12), 491–497.
- Lester, R. J. (1995) Embodied voices: women's food asceticism and the negotiation of identity. *Ethos* 23(2), 187–222.
- Levenkron, S. (1981) *The Best Little Girl in the World*. Warner, New York.
- Liu, A. (1979) *Solitaire*. Harper and Row, New York.
- Martin, E. (1987) *The Woman in the Body: A Cultural Analysis of Reproduction*. Beacon, Boston.
- Merola, B. et al. (1994) Hypothalamic–pituitary–adrenal axis in neropsuchiatric disorders. *Annals of the New York Academy of Sciences* 7(41), 263–270.
- Messinger, L. (1986) *Biting the Hand that Feeds Me: Days of Binging, Purging and Recovery*. Arena, Norato, CA.
- Nowacki, C. M. and Poe, C. A. (1973) The concept of mental health as related to sex or person perceived. *Journal of Consulting and Clinical Psychology* 40, 160.
- O'Neill, C. B. (1982) *Starving for Attention*. Continuum, New York.
- Orbach, S. (1978) *Fat is a Feminist Issue*. Berkeley Group, New York.
- Orbach, S. (1986) *Hunger Strike*. Norton, New York.
- Palazidou, E., Robinson, P. and Lishman, W. A. (1990) Neuroradiological and neuropsychological assessment in anorexia nervosa. *Psychological Medicine* 20(3), 521–527.
- Probyn, E. (1991) This body which is not one: technologizing an embodied self. *Hypatia* 6(3), 111–124.
- Probyn, E. (1993) *Sexing the Self: Gendered Positions in Cultural Studies*. Routledge, New York.
- Robertson, M. (1992) *Starving in the Silences: An Exploration of Anorexia Nervosa*. New York University Press, Washington Square, NY.
- Spignesi, A. (1983) *Starving Women: A Psychology of Anorexia Nervosa*. Spring, Dallas.
- Sugarman, A., Quinlan, D. and Devinis, L. (1982) Ego boundary disturbance in anorexia nervosa: preliminary findings. *Journal of Personality Assessment* 46(5), 455–461.
- Szekely, E. A. (1988) *Never Too Thin*. Women's Press, Toronto.
- Wolf, N. (1991) *The Beauty Myth: How Images of Beauty are Used Against Women*. Morrow, New York.
- Woods, J. (1981) I was starving myself to death. *Mademoiselle* 87(5) (May).