

Anorexia as Parody: Postmodern Feminism and the Paradoxes of Anorexia

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Abstract

While Anorexia captures the imagination and passion of scholars from a variety of disciplines, its contradictory nature is still puzzling. Is it an extreme acceptance of and conformity with the cultural dictate of thinness, or rather a rebel against femininity and feminine gender roles, consisting of erasing the feminine body altogether? Is it a grandiose display of self-control or a total loss of it? Is the anorexic woman a victim or an autonomous agent? Instead of trying to resolve these contradictions, I suggest we endorse them as a key to understanding anorexia, shedding light on the nature of anorexia, both as a mental disorder and a cultural phenomenon. Following Judith Butler's theory of performativity I propose looking at anorexia as a *parody* of femininity. By taking the feminine model to the extreme, the anorexic shows us that there is nothing 'natural' or 'authentic' about femininity. Rather, it is a performance, a fiction requiring endless efforts to maintain. At the same time, the anorexic impedes her ability to undertake feminine gender roles, showing us once again that our gender norms and expectations may be anything but natural. In a reality of contradictory expectations, then, anorexia proves to be the ultimate answer to society's demands.

Key Words: Anorexia, eating disorders, feminism, gender, illness narratives, mental health, women.

1. Introduction: Anorexia and the Promise of Interdisciplinarity

Anorexia nervosa has in recent years become a common and widely known phenomenon, the subject of public debates as well as of scientific researches. It is also a fruitful subject for feminist theorists and scholars. The rich discussions of its social and cultural meanings reveal that anorexia challenges the conventional conceptions of mental disorders, and potentially implies that the line between normative, acceptable behaviour and mental disorder is thinner than perhaps we would like to believe. Anorexia undermines traditional categories of liberal thought such as autonomy and rationality, and sheds new light on the link between body and mind and between individuality and social construction. In that sense, then, I believe it is an inspiring subject for an interdisciplinary discussion, and an almost inevitable topic in a volume that offers such an interdisciplinary perspective. Furthermore, I believe that an integrated approach, bringing together careful attention to subjective experiences of anorexics and acknowledgement of their

broader cultural context, is essential in understanding and addressing contemporary anorexia.

In this chapter, after a brief diagnostic and historical review of anorexia, I will attempt to weave together personal narratives of anorexic women, psychological orientation and postmodern feminist perspective, in order to suggest a new reading of anorexia within culture. Such endeavour is in fact two-fold: it is aimed at better understanding anorexia, possibly toward designing a better treatment model; and it wishes to explore what anorexia can tell us about the culture that facilitates it.

2. Anorexia Nervosa: Facts and Figures

Anorexia nervosa is classified as an eating disorder in the *Diagnostic and Statistical Manual of Mental Disorders* (DSM) and is diagnosed through four criteria: (a) refusal to maintain body weight at or above a minimally normal weight for age and height; (b) intense fear of gaining weight or becoming fat, even though underweight; (c) disturbance in the way in which one's body weight or shape is experienced and undue influence of body weight or shape on self-evaluation; and (d) in postmenarcheal females, the absence of at least three consecutive menstrual cycles (amenorrhoea).¹ Behaviourally speaking, it is characterised by excessive preoccupation with food consumption (or rather, restriction thereof) and compensatory behaviour (i.e., self-induced vomiting, use of diuretics or laxatives and intense physical activity). Along with the psychological and behavioural implications, anorexia entails severe and often life-threatening physiological symptoms resulting from the state of starvation and drastic underweight (including, among others, serious threats of hypothermia, heart failure, dehydration and life-threatening electrolytic imbalance).²

Anorexia is prevalent almost exclusively among women (90-95% of the cases), particularly, though not exclusively, in developed countries. Current figures estimate its prevalence as 0.5-1.0% among late adolescent or adult women, with higher rates among risk populations.³ While traditionally the 'typical' anorexic was depicted as a white adolescent or young adult from the middle and upper classes, in the last couple of decades anorexia is found in a wider range of age, race and socio-economical status.⁴ It is also worth mentioning that both the average onset age of anorexia and the average weight of anorexics have decreased compared to previous generations.⁵

Historically speaking, the first reported case of anorexia nervosa in medical literature is dated as early as 1694, and it was recognised and clinically termed by medical professionals in the 1870s.⁶ References to symptoms of anorexia appear anecdotally in Freud's writings and in early psychoanalytical literature throughout the first decades of the 20th century; but anorexia as such was not given a systematic psychological thought until the 1960s and 1970s. Bio-medical and psychological explanations continued to dominate the eating disorders discourse up until the 1980s and the 1990s, when socio-cultural accounts and analyses were

increasingly suggested. Instead of searching for a neurological or genetic origin or locate the root of anorexia in an individual pathology, theorists who adopted a socio-cultural model emphasised the link of anorexia to social construction of gender norms and expectations. Not surprisingly, the central and most influential voices within this approach are the voices of feminist writers.⁷

3. Feminist Perspectives: Anorexia and Culture

Feminist scholars of all strands and disciplines were among the first to point out the link between anorexia and culture. They sought to abandon the traditional medical and psychological explanations that saw anorexia as an individual pathology, and to shift attention to the broader cultural context of patriarchal society. While some, particularly in the earlier accounts of the 1970s, highlighted the obedience to ideals of feminine slenderness,⁸ others were reluctant to understand anorexia *only* in terms of hyper-conformity with cultural norms. Thus, they offered a rich variety of ways to read anorexia as signifying gender relations, women's subordination and cultural dictations of femininity.⁹

As research deepened and widened, theories became increasingly sophisticated, acknowledging not only the overt outcome of anorexia (thinness, control, loss of feminine appearance or physical functions) but its contradictory message. Writers like Susie Orbach in psychology, Morag MacSween in sociology and Susan Bordo in the humanities shared an understanding of anorexia as expressive of contradictory values and ambiguous gender norms. Orbach, for example, named anorexia 'a metaphor for our age,' and described it as 'an extremely graphic picture of the internal experience of contemporary femininity,' living out the 'contrariness of contemporary cultural dictates.'¹⁰ MacSween proposed that anorexia was an attempt to reconcile the traditional role of women as vulnerable, nurturing and receptive with more modern expectations of asserting independence, autonomy and self-fulfilment; or in other words, 'to resolve at the level of the body the contradictory demands of individuality and femininity'.¹¹ Bordo suggested that anorexia was a 'crystallisation of culture,' reflecting conflicting demands that women were confronting; and warned that '[p]aradoxically...these pathologies of female 'protest'...actually function as if in collusion with the cultural conditions that produced them'.¹² Other scholars have observed the contradiction between self-production and self-construction, anti-consumption and mass consumer culture, or selfhood and sainthood.¹³

However, most scholarly accounts tend to focus on a single aspect of such contradiction and fail to see the contradiction itself as a core element, pertaining to and characterising the whole anorexic being. I would therefore like to offer a more holistic view, arguing for the fundamental role of contradictions in anorexia. I propose to address the contradictory nature of anorexia through the lenses of postmodern/post-structural feminism. Specifically, I use Judith Butler's performative theory of gender and propose a novel reading of anorexia as parody.

Not only that such a framework allows us a more complex understanding of anorexia, I believe it also acknowledges more appropriately the role of the body as the site and weapon of feminine conflicts.

While in this chapter I focus on the symbolic reading and do not offer clinical implications, I nevertheless believe that such a move is both possible and essential. Such move would be significant also in the broader context of applying third-wave feminism in general, and Butler's theory in particular, to more 'practical' or 'material' realms. Andrea Daley's research, presented at the 2nd ID Net Madness Conference, offers another way of putting Butler's theory to practice, and use it to facilitate our understanding of power mechanisms in mental health practices.¹⁴

4. From Conflict to Paradox

For me, one of anorexia's most intriguing features is precisely linked to the contradictions it entails. Anorexia is ever illusive and puzzling: does it reflect hyper-conformity with 'the tyranny of slenderness'¹⁵ or a rebel against feminine gender roles? Do anorexic women seek the perfect feminine body or erase it all together? Is anorexia about unbelievable self-control or the total loss of control? About independence or over-dependence, needing nothing or needing too much?

Studying personal narratives of anorexic women, as well as working with anorexic patients, these contradictions are both salient and challenging. Furthermore, they touch what I believe to be core issues of mental illness and therapy: autonomy and dependence, power and weakness, subjectivity and subversion. The anorexic contradictions – which I term *paradoxes* – play a key role in my understanding of anorexia and in the theoretical framework I suggest in the following sections.

It is therefore worth pausing and explaining here my choice to conceptualise these contradictions as *paradoxes*. As opposed to the widely used and more 'psychological' term *conflict*, the immediate association of paradox is rather with philosophy and logic. It is thus important to discuss the difference between paradox and conflict, and the possible implications, clinical as well as theoretical, of using one over the other.¹⁶

Addressing conflicts in psychotherapy is as old as psychoanalysis itself, with the heart of Freudian theory lying in the conflict between the different structures of the psyche. The term 'mental conflict' typically serves to denote a struggle between mental forces or constructions.¹⁷ Traditionally it is described in psychoanalytic theory as resulting from a contradiction between instinctual wishes of biological origin and the actual realisation of those wishes, prohibited by perceived moral or cultural dictates.

In our specific context, initial formulations of anorexia were as a woman's conflict between erotic or aggressive wishes and her defence against them.¹⁸ Later on, a greater array of 'conflicts' was suggested, primarily the conflict between childhood and adolescence, emphasised by Hilde Bruch and Arthur Crisp, to name

just a few.¹⁹ More recently, psychiatrist and psychotherapist Kathryn Zerbe called for acknowledging anorexia and bulimia as ‘disguises of overt or subtle conflict’ and using this understanding as an integral part of treatment.²⁰

No matter how the said conflict is formulated, a common assumption entailed by the very term is that such contradictions must be settled. The success of therapy is measured by working the conflict through and resolving it by choosing one ‘side’ over another (typically the ‘normative’, ‘adult’, ‘age- or gender- appropriate’ side).

As opposed to conflicts, paradoxes are under-researched in the psychoanalytic literature. However, in insisting on using this term, I follow the legacy of D. W. Winnicott, who saw the value of paradox for individual creativity and spontaneity, as well as its potential for psychoanalytical enquiry.²¹ As psychoanalyst Emmanuel Ghent puts it: ‘[a] paradox must be accepted on its own terms, without resolution, and, at the same time, valued as a pointer to a new level of comprehension.’²² Both argued for endorsing paradoxes as an inherent part of the human mind, and therefore as an inherent part of therapy.

By choosing the term paradox instead of conflict, I want to suggest that rather than resolving the contradictions, we should embrace them as a key in understanding both the individual patient and the nature of anorexia. I believe that acknowledging the particular paradoxes of the individual woman and striving for a balance rather than a resolution, have major therapeutic significance. In other words, the cultural and the psychological perspective do not compete, but rather complement each other in understanding eating disorders.

5. Anorexic Paradoxes

As I already mentioned, the contradictory nature of the anorexic symptoms and communications often appears in modern literature on anorexia, be it medical, psychological, sociological or self-narrative. As Maria Hornbacher, recovered from anorexia and bulimia, writes in her memoir:

It is, at the most basic level, a bundle of deadly contradictions: a desire for power that stripes you of all power. A gesture of strength that divests you of all strength. A wish to prove that you need nothing, that you have no human hungers, which turn on itself and becomes a searing need for the hunger itself. It is an attempt to find an identity, but ultimately it strips you of any sense of yourself...²³

In this section I want to highlight some of the major paradoxes that I find in anorexia. Undoubtedly, there are numerous other paradoxes that were found or are yet to be found in anorexia. The paradoxes that I chose to present, besides being illustrative of the general argument of an inherent contradiction, are interesting as

they correlate to – and indeed challenge – the central binaries of Western society: feminine/masculine; power/subordination; and body/mind.²⁴

Methodologically, my main source is self-narratives of anorexics, along with feminist and psychological theory. Self-narratives not only provide me with ample and rich material, but also give voice to the subjective and too often unheard experience of the anorexics themselves. Similar choice is made in this volume by Renana Elran, who explores madness narratives of people with schizophrenia and offers the concept of metaphor as an intermediate ground for interdisciplinary approach. Elran also points out the resemblance between self-narrative and therapy, as both offer a way to conceptualise, to communicate and to come to terms with an often agonising experience. From a different perspective, Katarzyna Szmigiero also emphasises and elaborates on the therapeutic value of madness narratives, particularly for women. By that, she also resonates with my feminist agenda of giving voice to women. Both papers offer an inspiring interdisciplinary perspective and illustrate the potential of such perspective for understanding and approaching mental illnesses or disorders.

A. The Paradox of Femininity

The most acknowledged and commented upon is what I call the *paradox of femininity* in anorexia. Many theorists, for the most part the more sociological and feminist oriented writers of the 1980s and 1990s, identified the contradicting outcomes of the anorexic symptom, a ‘contradictory sexual symbolism.’²⁵ On the one hand, as radical feminism persists, in her pursuit of thinness, the anorexic conforms to cultural norms of female attractiveness; she takes the ideal of the slim and tender woman to the extreme.²⁶

In this context, reading self-narratives of anorexics, many of them recall looking up to their – dieting or thin – mother as an ideal role model. The mother’s thinness is associated with the desirable and ultimate femininity: ‘[s]he was – and still is – my ultimate definition of what a woman should be: tall, thin, chic, sophisticated.’²⁷ Pursuing thinness thus becomes a symbol of becoming a ‘real’ woman: ‘I felt a kinship with my mother, as if losing weight were a rite of passage into the world of adult femininity.’²⁸

On the other hand, anorexia suppresses any physical trace of femininity, including menstruation, and by this it embodies a total rejection of the feminine identity, both on the child-adult and on the male-female axes.²⁹ Francesca Lia Block describes her anorexia as ‘becoming a child again’ and ‘starving my adult body back into the body of a child.’³⁰ And more explicitly, writer Sheila MacLeod tells us that:

I didn’t want my periods to start again. That I had managed to stop them was a major achievement on my part. Instead of

growing up I had, as it were, grown down, and thus reversed a natural biological process. I was no longer a woman.³¹

Macleod also alludes to this contradiction when distinguishing anorexia from ‘mere dieting’. Although both send the same overt message of the wish to be thin, they differ in the underlying one – while dieting is indeed about being more sexually attractive, anorexia is about rejecting the burdens of mature womanhood.³² Another illustration of this rejection, aimed at cultural expectations no less than at bodily functions, is expressed by Priscilla Becker, saying:

I hated ... anything at all I came to associate with women: vulnerability, tenderness, manicure, compliance, shopping, Diet Coke, mollifying, heels, apologising, deferment, flirting, dresses, asking permission, chit-chat, jealousy, nurturing, pleasing, breasts, neediness, laughter.³³

While the gender paradox is the most salient, and indeed is the focus of this paper, I nevertheless want to highlight some other, more neglected, paradoxes that I identify in anorexia. As we shall quickly see, these paradoxes are themselves linked to the traditional Western binary (and hierarchy) of male/female.

B. The Paradox of Control

Anorexia is traditionally understood as an attempt to regain control, whether against internal desires (hunger, appetite, sexuality, emotional needs),³⁴ against intrusive mothers³⁵ against authoritative families,³⁶ or against society itself. In any event, control is the aim and achievement for many anorexic women, and the quest for control is indeed salient in many of their personal accounts:

Certainly I’m powerful in that I’m in control, it is a control thing, and it’s me that controlling it, my eating and my limit and all the rest, it’s me in control of that and maybe in the end ... it’s about the only damn thing that you can be in control of in your life... I do feel good at the control that I have... I depend on it, it’s a control, it’s a way of controlling things, it’s a power...(Linda)³⁷

Having been at the mercy of circumstances all my life...the discovery that I could alter my physical self and make people *see me differently* was momentous. I’d never experienced power like that.³⁸

Yet at the same time, anorexia is also a total loss of control, as there is no sense of choice or power in the anorexic symptom:

I never feel in any danger of bingeing, and I adhere rigidly to my restricted eating pattern. But this 'control' is an illusion, because in fact my 'willpower' only operates in a negative and masochistic way, and I feel powerless to reverse it. I'm 'programmed' (Polly).³⁹

By that stage, as I think any anorexic would understand, you're not in control, you can't make decisions... your anorexia is in control of you, you're not in control of it... to try and stop doing it is totally impossible for me (Linda).⁴⁰

The loss of control becomes most dramatic when the anorexic patient is confined to a hospital or a treatment facility and (in extreme cases) loses her legal rights over her body.

Along the same lines we wonder whether anorexia is an assertion of independence – of other people; of bodily needs; of desires – or of over-dependence and neediness. Is it a display of power, both mental and physical, (as they can indeed survive for months in their *musselman-like* state) or a total weakness? Priscilla Becker accurately formulates this very paradox when she speaks of her communication to others: '...the underfed form speaks, although softly, a confused and confusing opposition of signals: *I have no needs; take care of me.*'⁴¹ Interestingly, this contradiction is also evident in therapists' perception of their anorexic patients, as Orbach points out: 'on the one hand they describe the anorectic as weak and childish, and on the other hand they experience her as a crafty, strong and unyielding opponent.'⁴²

C. Body and Mind

No less confusing is the *body/mind division* in anorexia. For a start, there is a blur; anorexia is classified as mental disorder, yet is played out on the body. But exactly what kind of relation between body and mind does anorexia entail? On the one hand, anorexics often describe their symptom as the victory of mental will power over the bodily needs, namely, hunger.

You do deny the most *amazing* hunger. You'd be starved out of your brain, but you wouldn't eat... you were desperately trying to resist it – that was the main thing – resist it, overcome, willpower – you had to have willpower to fight it and control it. (Christine)⁴³

[Eating] became a war, in which one side had to lose: my body or my mind. For a while my mind got the better of me. I learned how to curb my hunger and turn my feelings on and off at will.

But eventually my body rose up and took back what it thought it deserved.⁴⁴

Body here is perceived as the ‘evil’, the ‘enemy’, whose needs and desires are to be constricted, not to say abolished. In various accounts of anorexia, then, it is perceived as diminishing the body altogether, staying only with ‘mind’ or ‘soul’.⁴⁵

Yet anorexics also express the opposite view; namely, that the ‘mind’, or ‘emotions’ are weak and evil, and the only thing that can be controlled, hence relied upon, is their body:

My body could do anything – it could walk forever and not get tired. My mind was tricky but my body was honest. It knew exactly what to do and I knew exactly what I should do. I felt very powerful on the account of my body. My only weakness was my mind.⁴⁶

Femininity and masculinity, power and weakness, body and mind – I believe that none of these paradoxes is to be resolved. Instead of trying to eliminate one of the opposites, the task is to hold (to *contain*, in the therapeutic jargon) those seemingly irreconcilable forces. Furthermore, the potential of exploring these paradoxes goes far beyond this or that particular paradox. Interesting as each of them may be, the point worth exploration is the very existence of multiple paradoxes, which suggests that the notion of paradox is much more fundamental to anorexia than any one of its particular embodiments. It is for this task – exploring anorexia’s paradoxical nature as an essential feature – that I turn to Judith Butler’s performative theory of gender.

6. Gender as Parody: Judith Butler’s Theory of Performativity

In her seminal book *Gender Trouble* Judith Butler, poststructuralist feminist philosopher, introduces the idea of gender as performance. That is, gender is produced through a repeating set of practices; our bodily gestures, our choices of fashion and style, even our decision what restroom we enter – these are all performative practices that create our gender performance over and over again. ‘Gender,’ says Butler, ‘is always a doing’.⁴⁷

Yet Butler’s emphasis here is on the inversion of cause and effect: It is performance that produces identity, rather than the other way around. What we view as a solid, essential identity that generates certain performance is in fact the *result* of this performance:

The effect of gender is produced through the stylisation of the body, and, hence, must be understood as the mundane in which bodily gestures, movements and styles of various kinds constitute

the illusion of an abiding gendered self. This formulation moves the conception of gender off the ground of a substantial model of identity to one that requires a conception of gender as a constituted *social temporality*.⁴⁸

It is this temporality, this ever-maintained construction, which attracts Butler as a site for possible change. If there is an endless repetition necessary in order to perpetuate the effect of gender, it also implies a potential discontinuity, a possible break from or at least variation of that cycle of repetitive performance. It is at this point, inspired by phenomenon of drag queens, that she proposes the notion of *parody*. Through parodic repetitions, slight variations of the familiar performance, we can contest these very practices that constitute identity, and expose that what is perceived as real, authentic and original is itself constructed.⁴⁹

For Butler, the drag queen show – an entire performance aimed at resembling the feminine outlook – illustrates and at the same time exposes the endless practices necessary to maintain a feminine performance. It allows us, in a sense, a glance behind the scenes of femininity. In its extremity it sheds light on the daily practice of women, which we perceive as a natural, essential, gender-produced practice. However, there's more to the drag queens than just 'exposing'. The show's success depends on maintaining a delicate balance between resemblance and difference. The whole idea is that we know the queens are not 'real' women, yet to be effective they must be 'close enough'. It is in the gap between difference and resemblance that parody takes place.

Yet Butler goes even further in locating the root of parody. She identifies an inherent contradiction at the essence of drags (which, as we shall quickly see, resonates our own observations about the paradoxes of anorexia). Butler goes back to Esther Newton, an American Anthropologist who studied the drag phenomenon, and cites her observation that

At its most complex, [drag] is a *double inversion*... Drag says 'my 'outside' appearance is feminine, but my essence 'inside' [the body] is masculine'. *At the same time it symbolises the opposite inversion*; 'my appearance 'outside' [my body, my gender] is masculine, but my essence 'inside' [myself] is feminine.⁵⁰

It is precisely this 'double inversion', this inherent contradiction between the two messages, which makes for an effective parody. In its elusiveness it shows us that we cannot point to an original, to any essential truth about gender. It serves, in Butler's words, to 'displace the entire enactment of gender significations from the discourse of truth and falsity' and therefore successfully mocks the notion of true

gender.⁵¹ Parody does not mock any original; it ridicules the *very idea* of an original.

7. Anorexia as Parody

The concept of gender as performance and the suggestion that what we perceive as a given identity is in fact a product of repetitive practices pave the way to another perspective of anorexia. Perhaps anorexia, too, is a kind of performance, that is, not a given, fixed, internal disorder (=identity) but rather a set of performative practices that constitute what is thought to be an identity. Deciphering its parodic meanings may then shed light both on anorexia itself and the culture in which it thrives.

For a start, it is easy to see now how the perspective of parody applies here. By taking to extreme the common practices of dieting, monitoring food intake and working out, the anorexic woman, just like the drag queen, produces a distorted – hence parodic – version of the traditional feminine model. Just as the drag queen allows us to identify those performative characteristics of women that we used to perceive as natural and authentic, so does the anorexic. She shows us that there is nothing original or authentic in the model of the slim woman, which we viewed and cherished as the desired ‘real’ woman. On the contrary, this model is a performance, a fiction, produced by many efforts and pain. Our so-called ‘natural’ and ‘true’ idea of a woman is nothing but falsity. In this sense, it shows how ‘*woman*’ itself is a term of process, a becoming, a constructing that cannot rightfully be said to originate or to end. As an ongoing discursive practice, it is open to intervention and resignification.⁵²

Furthermore, the anorexic parody is unique in showing us the danger of this falsity. As radical feminism was quick to realise, it shows us very vividly the implications of an oppressive gender regime. The anorexic woman is the perfect woman. She is thin, famished, silent (or rather silenced). She has no desires of her own. But she illustrates the deadly consequences of this dictate. In her body she signifies, as Orbach writes, ‘an indictment’.⁵³

At a deeper level, I want to examine closely the ‘double inversion’ that Newton and Butler identify in drags, and suggest a parallel double inversion in anorexia. In drags, we saw the double inversion between the ‘outside’ appearance and the ‘inside’ essence. In anorexia, I think, it is the double inversion between the ‘outside’ appearance and the ‘inside’ role the anorexic woman chooses to undertake.

Paraphrasing Newton’s citation on drags, we can say that the anorexic woman says ‘I am feminine on the outside [since I am thin like a ‘real’ woman should be], but I cannot perform woman’s roles on the inside [since I do not menstruate, for instance].’ But at the same time we can say just the opposite, that ‘I am a woman on the inside [my body] but I look like a boy on the outside’.

In very much the same manner we can go on and examine each and every one of the paradoxes presented above. If we look at the paradox of power, the anorexic can say ‘I am totally in control on the outside [since I can limit my food intake/my appetite/my desire], but I am totally out of control inside [I feel like it is no longer my decision, like it is out of my hands]. At the same time, the opposite can be said, namely, ‘I am very weak on the outside [since I am so thin], but I am powerful from within.’

Similarly, the body/mind division is doubly challenged. It is the body that is powerful and omnipotent while the mind, namely emotions and desires, must be oppressed; and at the same time it is the spirit, the immense willpower that overcomes the physical needs of the famished body.

The conclusion Butler draws from this double inversion, is that not only ‘appearance is an illusion’, but that its dual nature shows that the truth/falsity discourse is alien to gender significations. Analogically, we can say that in anorexia, this double inversion shows not only that there is no relation whatsoever between the body performance and the social role one undertakes, but that both components – body and mind – are equally constructed, and none of them is natural or authentic. In a sense, this observation goes back to one of Butler’s most basic notions in *Gender Trouble*, the notion that not only gender, but sex itself is a social construct.

Seeing body and mind as equally inauthentic suggest a radical shift from the clear distinction between mind/body in modern Western philosophy. Yet it is also contrasted to those strands in feminist philosophy reclaiming the equal role of the body in shaping human subjectivity and ethics (most notably, French feminist writers like Luce Irigaray, Monique Wittig and Helene Cixous). In contrary to those strands, parody deprives body and mind alike of any epistemic value and undermines the very notion of truth.

8. Docile Bodies?

The notion of performance also offers another way to understand the role of the body and dynamic relations between social norms and the anorexic body. In Foucault’s theory of power and knowledge, the body plays a key role as the site on which cultural power is operated, coercion is exercised, and discipline is carried out.⁵⁴ Indeed, Butler is quick to draw the analogy. Alluding to *Discipline and Punish*, she discusses the role of the body in the context of prisoners:

In the context of prisoners...the strategy has been not to enforce a repression of their desires, *but to compel their bodies to signify the prohibitive law as their very essence, style and necessity.* That law is not literally internalised, but incorporated, with the consequence that bodies are produced which signify that law on and through that body... In effect, the law is at once fully

manifest and fully latent, for *it never appears as external to the bodies it subjects and subjectivates*.⁵⁵

Such an account explains how the anorexic body becomes the stage on which the social norm (=the law) is performed, 'the inscribed surface of events'.⁵⁶ It also explains how we tend to forget this manipulation and view this display as something natural; how we never view this 'as external to the body'. Anorexia is not simply an *expression* of the gender norms imposed by society, but it is their *embodiment*; it is the *performance* of these norms.

In that sense, then, I feel we can say something deeper about the role of the body in the feminist struggle for change. It is not only that the body is the stage and site of women's oppression, as so many feminist writers recognised.⁵⁷ It is not only that there is no longer such thing as a natural body in the postmodern era, but a surface image, since the 'body in the postmodern condition has already disappeared, and what we experience as the body is only a fantastic simulacrum of body rhetorics'.⁵⁸ The notion of performance suggests that the body is more than a surface image on which power or rhetoric are inscribed. The body is also an active *performer*, hence can be an agent in its own change.

Helen Malson suggests another paradox in this regard, the paradox of the bodies that *appear to disappear*. She summarises this paradox as follows: '[anorexia] is about *looking* thin. But it is also at the same time about '*not* wanting to be seen' and *literally* fading away.'⁵⁹ While Malson ultimately attributes this to the impossibility of living in a body-as-image, the product of our media-saturated, postmodern society, the notion of parody allows us to read something else into this paradox. In being in/visible anorexic bodies challenge the regulative power of the gaze, so crucial in Foucault's conceptualisation of power. Performing an *anti*-performance, presenting a spectacle of invisibility, they mock the very power of visibility. The seemingly hyper-docile bodies are, apparently, not that docile. This is parody in its deepest sense.

But we are walking a thin line here, since parody also implies that if we fail to understand the deep meaning of anorexia as a cultural symptom, if we miss the parodic perspective it offers on gender and culture, then they only serve to perpetuate and reproduce the same gender norms that generated it in the first place. This is indeed the risk of parody.

9. Conclusion

To conclude, by the notion of parody I hoped to show that the paradoxical quality of anorexia is neither accidental nor reducible into particular paradoxes. Rather, it is an essential element lying at the heart of this enigmatic phenomenon. Understanding these paradoxes, however confusing, as acting-out a fundamental experience rather than expressive of distorted individual minds, we open the way to a better understanding and treatment of anorexia. By tolerating multiplicity,

contradiction and constant tension, the notion of parody allows for a richer conceptualisation of anorexia, both as a mental disorder and a cultural phenomenon. Understanding anorexia as parody highlights the incoherence underlying so-called femininity and exposes the tolls it demands. It illuminates the obedience and the protest, the despair and the strengths; and it offers a possible, albeit complicated and risky, way for change.

However, while acknowledging the power we cannot ignore the pain. It is therefore now a challenge to transform those insights into a therapeutic approach that would reflect the multiplicity of meanings that anorexia embodies.

Notes

¹ *Diagnostic and Statistical Manual of Mental Disorders*, 4th ed. (DSM-IV) American Psychiatric Association, Washington, DC, 2000, pp. 583-584.

² *Ibid.*, pp. 586-587.

³ Thus, some researches estimated 20% prevalence in some American campuses, see J. Brumberg, *Fasting Girls*, Vintage Books, New York, 2000, p. 15. See also <http://www.aedweb.org/eating_disorders/prevalence.cfm>.

⁴ See, for instance, S. Orbach, *Hunger Strike: The Anorectic's Struggle as a Metaphor for Our Age*, W. W. Norton & Co., New York and London, 1986, pp. 13 & 18; and more recently, S. Bordo, 'Not Just a White Girl's Thing', *Critical Feminist Approaches to Eating Dis/Orders*, Routledge, New York and London, 2009, pp. 46-59; M. Nasser & H. Malson, 'Beyond Western Dis/Orders,' in *Ibid.*, pp. 74-86. For an account from a patient's perspective, see K. Taylor, 'Introduction', *Going Hungry*, K. Taylor (ed), Anchor Books, New York, 2008 p. xii: '[t]o begin with, the other patients defied all the stereotypes. Very few were young, rich white girls. ... I met anorexics who were middle-aged, who were mothers, who were African American, Latino, Orthodox Jewish, even male.'

⁵ N. Wolf, *The Beauty Myth*, Anchor Books, New York, 1991, p. 183.

⁶ Brumberg, *op. cit.*, p. 6.

⁷ For an elaborated review on anorexia in the 1980s see Brumberg, *Ibid.*, pp. 11-42, and especially pp. 35-36.

⁸ M. Boskind-Lohdahl, 'Cinderella's Step-Sisters: A Feminist Perspective on Anorexia Nervosa and Bulimia', *Signs*, Vol. 2, pp. 342-356. See also H. Malson, 'Appearing to Disappear: Postmodern Femininities and Self-Starved Subjectivities', *Critical Feminist Approaches to Eating Dis/Orders*, H. Malson & M. Burns (eds), Routledge, London and New York, 2009, pp. 132-145.

⁹ Two major and influential examples are M. Lawrence, *The Anorexic Experience*, The Women's Press, London, 1984; K. Chernin, *The Hungry Self: Women, Eating and Identity*, Times Books, New York, 1985.

¹⁰ S. Orbach, *Hunger Strike*, W. W. Norton & Co., New York and London, 1986, p. 29.

¹¹ M. Macsween, *Anorexic Bodies*, Routledge, London and New York, 1995, pp. 239 & 255.

¹² S. Bordo, 'Anorexia Nervosa: Psychopathology as the Crystallisation of Culture,' *Feminism and Foucault: Reflection of Resistance*, I. Diamond & L. Quinby (eds), Northeastern University Press, Boston, MA, 1988, pp. 87-116, at p. 105.

¹³ Malson, op. cit.

¹⁴ A. Daley, 'The Reconfiguration of Lesbian/Queer Sexuality by Mental Health Service Provider Responses to Self-Disclosures', Paper presented at Madness: Probing the Boundaries, Oxford, September 2009; available at <<http://www.interdisciplinary.net/wp-content/uploads/2009/08/daleypaper2.pdf>>.

¹⁵ I am referring here to the title of the classic piece by K. Chernin, *The Obsession: Reflections on the Tyranny of Slenderness*, Harper and Row, New York, 1981.

¹⁶ I am grateful to Renana Elran for urging me to develop this point.

¹⁷ B.E. Moore & B.D. Fine, *Psychoanalytic Terms and Concepts*, The American Psychoanalytic Association and Yale University Press, New Haven, 1990.

¹⁸ J.V. Waller, M.R. Kaufman & F. Deutsch, 'Anorexia Nervosa: A Psychosomatic Entity', *Psychosomatic Medicine*, Vol. 2, 1940, pp. 3-16; J.H. Masserman, 'Psychodynamisms in Anorexia Nervosa and Neurotic Vomiting', *Psychoanalytic Quarterly*, Vol. 10, 1941, pp. 211-242.

¹⁹ While Bruch was more concerned with the 'separation' aspect of this conflict, namely, the conflict of the adolescent about gaining independence and leaving the family of origin, Crisp emphasised the wish to stop the biological changes and the rising sexual desire. See MacSween, op. cit., pp. 45-48; see also K. Zerbe, 'Psychodynamic Management of Eating Disorders', *Clinical Manual of Eating Disorders*, American Psychiatric Publishing, Arlington, VA, 2007, pp. 307-334.

²⁰ Ibid., pp. 318-319.

²¹ D.W. Winnicott, *The Maturation Process and the Facilitating Environment*, International University Press, New York, 1965, pp. 179-192.

²² E. Ghent, 'Paradox and Process', *Psychoanalytic Dialogues*, Vol. 2, 1992, p. 135. Another recent writer who explored the meaning of paradoxes in psychotherapy, albeit available only in Hebrew, is H. Yerushalmi, *Crisis and Growth*, Tel Aviv, HaKibbutz HaMeuchad, 1992.

²³ M. Hornbacher, *Wasted: A Memoir of Anorexia and Bulimia*, Harper Perennial, New York, 1999, p. 7.

²⁴ In fact, the very term of paradox (and for that matter, conflict as well) assumes a binary thinking, a presumption of mutually excluding opposites. If it wasn't for this presumption, we wouldn't be concerned about contradictions to begin with. Interestingly, Susan Bordo highlights somewhat parallel elements, but chooses to refer to them as 'axes'. It is perhaps for this choice that she fails to fully acknowledge their inherent contradiction. See Bordo, op. cit., pp. 93-104.

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- ²⁵ B.S. Turner, *The Body and Society*, Oxford, Blackwell, 1984, p. 185.
- ²⁶ S. Orbach, *Fat is a Feminist Issue*, Berkley Books, New York, 1978; Wolf, loc. cit.
- ²⁷ L. Graham, 'Black-and-White Thinking', *Going Hungry*, pp. 89-110. Similar recollections can be found in the stories of E. Kadetsky, F. du Plessix Gray & J. Egan, all in the same volume.
- ²⁸ J. Egan, 'Daughters of the Diet Revolution', *Going Hungry*, pp. 45-54.
- ²⁹ For example, see A.H. Crisp, *Anorexia Nervosa: Let Me Be*, The Academic Press, London, 1980.
- ³⁰ F.L. Block, 'Now the Faeries Caught Me', *Going Hungry*, pp. 196-206.
- ³¹ S. MacLeod, *The Art of Starvation*, Virago, London, 1981, p. 77 (interestingly enough, under a section named 'euphoria').
- ³² *Ibid.*, p. 59.
- ³³ P. Becker, 'Big Little', *Going Hungry*, pp. 129-148.
- ³⁴ Orbach says '[H]er food denial is driven by the need to control her body, which is, for her, a symbol of emotional needs.'
- ³⁵ Bruch, loc. cit; Lawrence, loc. cit.
- ³⁶ S. Minuchin, B.L. Rosman & L. Baker, *Psychosomatic Families: Anorexia Nervosa in Context*, Harvard University Press, Cambridge, MA, 1978.
- ³⁷ MacSween, op. cit., p. 103.
- ³⁸ Egan, op. cit., p. 52 (emphasis original).
- ³⁹ MacSween, op. cit., p. 242.
- ⁴⁰ *Ibid.*, p. 103.
- ⁴¹ Becker, op. cit., p. 145.
- ⁴² Orbach, *Hunger Strike*, p. 25. This conflict indeed impact therapists' reactions and feelings towards their anorexic patients, namely, counter-transference. See review in G. Rathner, 'A Plea against Compulsory Treatment of Anorexia Nervosa', *Treating Eating Disorders: Ethical, Legal and Personal Issues*, W. Vandereycken & P. Beumont (eds), New York University Press, New York, 1998, pp. 189-190.
- ⁴³ MacSween, op. cit., p. 101 (emphasis original).
- ⁴⁴ Graham, op. cit., p. 93.
- ⁴⁵ For instance, see M. Palazzoli, cited by MacSween, op. cit., p. 46. For an analysis that links this 'metaphysics' to the Western ideas of Plato, Augustine and Descartes, see Bordo, op. cit., pp. 92-95.
- ⁴⁶ MacSween, op. cit., p. 241.
- ⁴⁷ J. Butler, *Gender Trouble*, Routledge, London and New York, 1999, p. 33.
- ⁴⁸ *Ibid.*, p. 179 (emphasis original).
- ⁴⁹ *Ibid.*, pp. 186-87.
- ⁵⁰ E. Newton, *Mother Camp: Female Impersonators in America*, University of Chicago Press, Chicago and London, 1972, p. 103 (emphasis added).

⁵¹ Butler, op. cit., p. 174.

⁵² Ibid., p. 43.

⁵³ Orbach, *Hunger Strike*, p. 30.

⁵⁴ M. Foucault, *Discipline and Punish*, trans. A. Sheridan, Vintage Books, New York, 1995, pp. 135-169. The chapter's title is 'Docile Bodies', a title which I now choose to call into question.

⁵⁵ Butler, op. cit., p. 171 (emphasis added).

⁵⁶ M. Foucault, 'Nietzsche, Genealogy, History', *The Foucault Reader*, P. Rabinow (ed), Pantheon, New York, 1984, p. 83.

⁵⁷ Malson, op. cit., p. 139.

⁵⁸ Ibid., citing A. Kroker & M. Kroker, 'Thesis on the Disappearing Body in the Hypermodern Condition', *Panic Sex in America*, A. Kroker & M. Kroker (eds), St. Martin's Press, New York, 1987, p. 23.

⁵⁹ Malson, op. cit., p. 141.

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