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Between Feminism and Anorexia: An Autoethnography

Abstract:

Critical feminist work on eating disorders has grown substantially since its establishment in the 1980s, and has increasingly incorporated the use of anorexic stories, voices and experiences. Yet rarely do such accounts offer the anorexic a space to respond to the now established *feminist* conceptions of the problem which structure the books or articles in which they appear. Anorexic, or recovered anorexic, voices are used by the researcher to *interpret* the role played by gender, even whilst the subjects are invited to respond to and critique, medical and popular discourses on the disorder. This lack of dialogue is all the more striking in the context of the feminist aim to fight ‘back against the tendency to silence anorexic women’s’ own interpretations of their starving, treatment and construction (Saukko, 2008: 34). As someone who suffered from anorexia for 20 years, this article offers an autoethnographic account of my experience of encountering the feminist literature on anorexia in a bid to speak back, or enter into a dialogue between feminist politics and eating disorder experience.

Key Words: Anorexia; Feminism; Autoethnography; Subjectivity; Sexuality; Starvation.

I am sure that I became an academic because I developed anorexia in 1990 when I was 14 years old, something which would dominate my life for the next two decades. Yet although my eating disorder played a crucial role in steering me toward academia, and ‘enabled’ my academic achievements and swift ascent up the career ladder, I had always chosen to keep the two spheres separate in terms of the discourse that I produce as a tutor and a scholar. I was aware that there existed a large body of feminist research on anorexia, but despite identifying as a feminist since my undergraduate days, and adopting a feminist approach in many aspects of my research and teaching, I saw this as an academic terrain that I simply *would (or could) not touch*.

Due to the visibility of particular canonical works (i.e. Bordo, 1993), I understood that feminists preferred cultural rather than biological or psychiatric explanations of eating disorders. I imagined (not entirely correctly it turned out) that the media was presented as a prime causal factor here, and I felt insulted by explanations of anorexia as an excessive imitation of the slender ideal, which tend to frame anorexics as vulnerable readers of mass media images (Burke, 2006; Saukko, 2008). As a feminist academic who made a living out of deconstructing the myths and ideologies of media images, how could *I* be so susceptible to these discourses, or unable to extricate myself from their all-encompassing power? I was

generally suspicious of the value of this research, which I had decided must be wanting in its explanatory power.

Second, I didn't want to read (and perhaps subsequently write) about abstract theorisations of what I experienced as the monotonous grind of my everyday hell. Submitting to a highly disciplined and tortuous academic writing regime – part of the demands of my anorexia - also offered seconds, and occasionally minutes of respite from the all-encompassing world of food: to read and write *about* anorexia would thus have been the ultimate punishment. Furthermore, the voice of the anorexic subject is often discredited as being disordered and deluded – or ‘outside of the true’ (Saukko, 2008: 6) – hardly connotations associated with academic insight and authority. Reading or writing about anorexia thus felt both impossible and undesirable.

In early 2014, and five years into my recovery, I realised that I no longer felt this way, and my greater personal distance from anorexia, and continued interest in Star and Celebrity Studies, led to me research an article on the child star/ singer Lena Zavaroni (who suffered from anorexia for 20 years). I had decided that my article was going to take a traditionally academic form, but as I wanted to invoke aspects of personal experience, I began to read about autoethnography, and the ways in which it offered a challenge to more orthodox forms of qualitative research (Allen-Collinson, 2013). At the same time, I was reading the abundant feminist literature on anorexia which, in seeking to consciously depart from and contest psychiatric constructions, sought to politicise the problem and explore it in relation to the socially constructed nature of female identity. In analysing the discursive construction of Zavaroni in the 1970s-1990s, I found the feminist arguments to be analytically revealing and politically compelling. Yet as I read on, I retained a personal ambivalence about how these Second Wave accounts co-opted anorexic subjectivity as a metaphor for the subordinate

position of ‘woman’, as well as the political *certainty* with which anorexia was interpreted and appropriated.

Although the field of feminist work on eating disorders has grown substantially since this time – a growth which has incorporated the increasing use of anorexic stories and experiences (Malson, 1998; Saukko, 2008; Jones and Malson, 2013) - rarely do such accounts offer the anorexic a space to respond to the now established *feminist* conceptions of the problem which structure the books or articles in which they appear. Rather, anorexic, or recovered anorexic, voices are used by the researcher to *interpret* the role played by gender, even whilst the subjects are invited to respond to medical and popular discourses on the disorder (MacSween, 1995, Malson, 1998). (These may certainly overlap with, but cannot be reduced to, the arguments made by the feminist work). This lack of dialogue, or opportunity to speak back, is all the more striking in the context of the feminist emphasis on the importance of fighting ‘back against the tendency to silence anorexic women’s’ own interpretations of their starving, treatment and construction (Saukko, 2008: 34).

As Bev Skeggs notes in a wider context, many concepts in feminist theory emerge ‘from partial experiential descriptions... being becomes knowing becomes being’ (1997: 20), and this is true of some of the early feminist work on anorexia in which the author laid claim to personal experience of an eating disorder (MacLeod, 1983; Chernin, 1983; Wolf, 1991). Yet it is this process, in which ‘being becomes knowing’, that requires interrogation here, and there is of course a long history of debate in which the feminist ‘sisterhood’ has been critiqued for treating ‘woman’ as unitary and speaking as one. That is not to suggest that it was primarily anger and antagonism that prompted me to produce this article: my experience of reading the early feminist literature in particular was marked by an undulating move between scepticism, anger, humiliation and – without a doubt – an increasing sense of recognition. I would stare at the page with muscles taut and frozen, feeling a slow creeping

blush as I recognised *myself* on the page. As this suggests, and as my subsequent analysis bears out, my experience here can be seen to speak to the political nature of emotion on a number of different levels. According to Sara Ahmed (2004), and particularly pertinent to my emphasis on the body here, emotion's relationship to the body functions to align or exclude us with normative discourses and communities. Much of my interest in this article focuses on how or whether I seem to 'fit' – both in terms of normative ideologies of femininity, and in relation to the community of feminist scholarship in the field – and my exploration of these relationships often found expression through anger, excitement, humiliation and shame.

But this experience of feeling angry and ambivalent, yet *also* recognising myself in the pages of this feminist research, was also deeply unsettling in terms of how I understood my relationship with anorexia given that I thought I had found, some time ago, 'my story' about why I had developed it and endured it for so long. As Carolyn Ellis suggests, autoethnography 'requires that we observe ourselves observing, that we interrogate what we think and believe....' (2013: 10). Within the context of autoethnography, reflection on the process and experience of writing creates what has become known as a 'writing story' (Wall, 2008: 40). But this article is to some extent a 'reading story', detailing my experience of encountering the feminist work on anorexia from the perspective of autobiographical experience. This in turn led me to reflect on my experience of anorexia, how I conceived of its aetiology, its political implications, and especially its relationship with female subjectivity.

Storying the Self

Since its growth across disciplines in the last 15 years, autoethnography has been put to many personal, cultural and intellectual uses. The one I am interested in here is using my experience to engage with existing literature on a topic of personal significance – in the hope of furthering understanding in that field (Wall, 2008: 39). As Sarah Wall explains, such

approaches can offer ‘two-way’ conversation with the literature, in so far as, ‘challeng[ing] received wisdom of the field also challenged and changed me’ (2008: 48). As my earlier reference to reassessing my ‘story’ might suggest, writing an autoethnography is not without personal risk, and April Chatham-Carpenter has written about how her experience of writing an autoethnography about anorexia – the compulsion to ‘get it right’ and publish the ‘perfect’ story – reignited her relationship with the eating disorder (2010: 4). Friends and family expressed a continuum of reactions to my new choice of topic, ranging across surprise, affirmation and concern (‘I just want to ask, is it appropriate to bring a book called *The Art of Starvation* away on holiday?’), and this work also represented my full re-entry back into academic research after recovery: its punishing role as part of my anorexia meant that I was wary about its relationship with the recovered ‘me’. Although doing an autoethnography did not prompt a return to anorexic thoughts and practices, I experienced a similar compulsion to Chatham-Carpenter to *get it done right and get it done now*, regardless of the expanse of study leave that lay before me.

It became clear that this idea of a unified (‘correct’) story was very much at odds with poststructuralist conceptions of the self which helped to give rise to autoethnographic work in the first place. Indeed, the self (or selves) in autoethnographic accounts are necessarily ‘installation[s] in the text... artefact[s] of textual practice and authorial choice’ (Gannon, 2013: 232). With regard to my use of sources, I have reconstructed memories, as well as used pieces of personal writing that I produced during my time in a residential clinic for treatment in 2009. (These pieces, and many others, now appear in a large scrapbook of material which I have preserved). I also wrote a lot about my experience of anorexia before entering the clinic, sometimes just for myself and sometimes for use in therapy. Yet these writings were sometimes presented back to me as *part* of my ‘illness’, and its obsessive, over-active and manic tendencies. As explained at the end of this article, I am now inclined to reject these

interpretations of my anorexic discourse, so writing openly and publicly about my experience of anorexia – *authoring* it - has a particular personal and political power. Furthermore, whilst I admire the creative examples of storying the self that I have seen in existing autoethnographies (ranging across images, installations, poetry and prose) (e.g. Kiesinger, 1998; Muncey, 2005), I just want to write this in way that comes naturally to me, which means combining an academic framework with personal experience.

Feminism and Anorexia: ‘Our Obsession’

Although feminists acknowledge that anorexia is the result of multi-dimensional factors, they are united in insisting on the cultural and political importance of gender – an argument that has played an important role in wresting interpretations of anorexia away from the often pathologising discourses of (male) medicine. Whilst there are differences between the early feminist accounts (see Hepworth, 1999; MacSween, 1995), the early authors, writing just after Second Wave feminism and in a culture that was apparently witnessing a considerable rise in eating disorders, linked the problem to the consequences of the Women’s Movement, and the resulting contradictions and pressures surrounding the female role. Both Kim Chernin and Susie Orbach invoked the centrality of the mother-daughter relationship here (see also Bruch, 1978), variously identifying the anorexic’s guilt about leaving a repressed, unfulfilled mother at home; abject fear of assuming a traditional, domestic, maternal role and corporeal and social flight from the objectification and suppression associated with female identity in patriarchal society. Desire was also particularly central, and anorexia was seen as the ‘solution’ to a culture in which, despite a process of socialisation intended to curtail the woman’s needs, she continued to feel ‘her own needs and desires intensely’ (Orbach, 1986: xvii). Encouraged to play ‘midwife to the aspirations of others’ (Ibid: 59) whilst at the same time becoming an autonomous, ‘liberated’ being in her own right, anorexia was seen as a bid

to ‘negotiate conflicted desire’ through the use of body and food as a metaphor (Orbach, 1986: xiv).

The feminist authors situated anorexia as a logical manifestation of a wider culture which foregrounded dieting and calorimetry as a normal preoccupation for women, and a number of feminist writers, including the later significant contributions of Naomi Wolf (1991) and Susan Bordo (1993), saw the promotion of the increasingly slender female body as a form of political weapon against the female sex and dieting as ‘the most potent political sedative in women’s history’ (Wolf, 1991: 187). Yet the anorexic was not only figured as a victim of a patriarchal backlash, as some feminist writers argued for the political significance of anorexia as ambivalent and contradictory (Lawrence, 1984; Orbach, 1986). Thinness and starvation were seen as rendering femininity small, weak and fragile, whilst at the same time, starvation was interpreted as a form of corporeal resistance - the rejection of feminine subjectivity through an escape into a childlike, boyish or defeminised form (Bordo, 1993).

Diagnosed in 1990, four years after Orbach’s *Hunger Strike* for example, I came towards the end of the generation that the early authors were talking about. It is thus the early literature that was of particular significance to me in my encounter with the feminist research.

Nevertheless, it is important to acknowledge that the feminist re-reading of eating disorders (which now encompasses bulimia and obesity) has expanded massively since this early period (see Malson and Burns, 2009), and the emphasis on poststructuralist and discursive approaches has led to an even greater emphasis on the contradictory, ambivalent and shifting meanings embedded in anorexic ‘bodies and practices’ (Malson and Burns, 2009: 4).

Furthermore, in building on the early scholarship, feminist analysis has been crucial in interrogating how the construction and treatment of anorexia is used to endorse and reject ‘normal’/‘abnormal’ ways of being a woman, and this in turn has involved a critique of medical discourses as not only disempowering, but constructed and historically specific (see

Malson, 1998; Hepworth, 1999; Saukko, 2008). The intersectional and fractured nature of ‘woman’ here has also been made apparent, with authors questioning the prioritisation of white middle-class subjects in both medical and early feminist work on anorexia (Bordo, 2009), and feminist work more generally seeking to include the heterogeneous voices of eating disorder subjects within their research.

Given the context of this article, it is important to note that it is not unusual in feminist writing on the subject for the author to lay claim to personal experience of an eating disorder. This was particularly so in the early period (Chernin, 1983; 1985; MacLeod, 1983; Probyn, 1988), which reflects the powerful Second Wave strategy of inserting apparently private narratives into the public sphere in order to foreground their status as an arena of political oppression and struggle (Houston Grey, 2011: 3). In this regard, some of the early feminist interventions were at the very least autobiographical, and they offered powerful and politically evocative interpretations of how eating could be politicised in relation to gendered subjectivities.

Yet such work not only seemed to assume a commonality of experience between *all* women (Chernin refers to it as ‘our obsession’ (1983)), but it sought to firmly etch (‘it must be seen that...; ‘it is so clear that...’) the political meanings of anorexia onto the anorexic body, even whilst some of the contradictions outlined above were observed. Furthermore, although the accounts were both passionate *and* compassionate, there was nevertheless the sense in which a deluded existence is replaced by a ‘higher level of consciousness’, so that the eating disordered identity is rejected for a shared and ‘more authentic’ mode of political (feminist) being (Houston Grey, 2010: 3). Susan Bordo’s highly influential work further entrenched this implicit duality by suggesting that ‘the anorectic, of course, is unaware that she is making a political statement’, so we must not see her practices ‘as reflecting any social or political understanding at all’ (1993: 159). This sentence was key, I think, to my developing anger

surrounding the feminist work, as it created a space in which it was (and is) difficult to speak *back*: after all, anyone who did not feel that their gender offered the central explanation of their eating disorder – at least as presented in the feminist accounts - would surely risk being accused of ‘false consciousness’. In this regard, it is interesting that the work on anorexia (and bulimia) which preceded or emerged as part of the autoethnographic turn (Mukai, 1989; Tillman, 2009; Chatham-Carpenter, 2010) does not explicitly engage with the feminist work, nor position gender as clearly central. An exception here is Saukko’s (brilliant and moving) autoethnographic account of her treatment for anorexia in 1970s Helsinki, but even this focuses more on her response to the psychiatric and medical diagnostic discourses than the feminist research itself.

Beginnings

I was diagnosed with anorexia in 1990 when I was 14 years old. During the next two decades I always had anorexia, although there were times of management and times of crisis. At 33 I was willingly admitted to a residential clinic for treatment, a context which I perceive as being instrumental in my recovery. Eight months after leaving, and possibly prompted by panic that I had wasted (away) my life and needed to match up (and catch up) with what was seen as appropriate (‘normal’) for my life stage, I decided to have a child. Two months later I was pregnant, and I am now a single parent to a donor-conceived daughter (Tabitha), born in April 2011.

In line with common psychiatric perceptions of anorexia (Bruch, 1978, Crisp, 1980), I was not fat before developing an eating disorder. At nearly 5’8 and 10 stone, the most striking thing about me was probably my height. At 14 I went on an activity holiday with my school, where the weather was perishing and the food inedible: I still harbour an image of grisly charred pork coated in breadcrumbs which mingled with the juice from the vegetables to

make a soggy paste on the plate. Unlike my older brother, I wasn't very sporty: I remember the indoor abseiling and the (terrifying) cycling round the velodrome – my feet strapped to the pedals – and our instructor, Gerry, who was always telling me that I had let the team down. When I returned home I weighed myself on the pair of bathroom scales that I would come to know so well - rust creeping up the side of the white enamel, and smudges of talcum powder on the grainy black surface of the footplate. I watched the red needle lurch and waver over the stark black numbers and settle at just over 9 stone 7 LB. *Less. I liked being less.* Under a year later, I had lost 4 stone. On the way down, and after returning from a holiday in Ibiza with a deep tan, my form teacher told me *you look great*. In the months that followed I just remember my friends' stares, and my huge staring eyes, suddenly too big for my face, staring back at them, as I huddled in a teacher's office, suddenly terrified to go out at break. Packed lunches were thrown away down Woodlands Walk, and drinks poured into my Dad's plant pots in the spare room. Some of the red fruit cordial seeped through the ceiling, and day by day, my vision blurred. Sat in the Matron's office at school, I was handed a sheet of paper which detailed a checklist of criteria for the diagnosis of anorexia nervosa. My ears ringing, my skin prickling and a deep blush creeping up my cold face I whispered: *This is what I have.*

Contrary to the emphasis on media culture being increasingly saturated by narratives of eating disorders in the 1980s and 1990s (Bray, 2005; Burke, 2006), I recall the strangeness and the *lack* of recognition: my school, for example, seemed to have little experience or knowledge of anorexia; my older brother got teased about his 'weird' sister, and some of my Mum's friends found it inexplicable that she didn't just make me eat. Unlike Wolf (1991), I did not know anyone else with the problem: there was no communal retching in the toilets, and anorexia was not experienced as a generational malaise in the context of sisterly recognition. My friends deserted me just as quickly as I deserted them. Wolf notes how 'It

[was]... dead easy to become anorexic' (Wolf, 1991: 201). I strongly disagree. The physical and mental process of making starvation my 'normal' way of life was lonely and excruciating.

In the early 1990s, I was aware that I was being conceptualised as a 'textbook anorexic'. The diagnostic narratives used to explain my eating problems echoed the paradigm popularised by American psychiatrist Hilde Bruch (1978) in the post-war period - a paradigm which still informs understandings of anorexia today (Saukko, 2008: 38). I was seen as a white middle-class girl with perfectionist tendencies who was terrified of not living up to parental expectations, and who thus used anorexia as a strategy of control and/or rebellion. My diagnostic narrative equally echoed Bruch's model of a proto-typical anorexic family in other ways: the emphasis on an 'over-involved' mother versus a distant father, who was largely absent from family affairs (Saukko, 2008: 29). Before reading the feminist work, I had always been more inclined to use psychiatric explanations in understanding the aetiology of my anorexia, even though, as discussed below, I often found these explanations somewhat restrictive and offensive. The role of gender in how my anorexia was constructed by the available medical discourses, as well as in my own changing assessment of why I became anorexic, is more complex.

Starving for Sexuality

It is difficult to say when or how I took on certain narratives over others, but from a relatively early stage I was certainly aware of my congruence with the psychiatric narrative which positioned anorexia as a retreat into childhood from the physical and social/ psychological consequences of adolescence (MacSween, 1995: 25). For example, Professor Arthur Crisp, one of the leading psychiatric authorities on anorexia in Britain in the 1990s, positioned anorexia as a maturation crisis (which was usually negotiated by the 'normal' adolescent

without trouble) (ibid: 29). The idea of retreating from adult womanhood has also been central to feminist approaches to anorexia, and in part because of this commonality, some feminists have argued that it is misleading to draw watertight divisions between the psychiatric and feminist discourses: in both arenas, the anorexic is represented as lacking in individuality and autonomy and as operating outside of expected gender ‘norms’ (Hepworth, 1999, Saukko, 2008). Yet it was the explanatory framework, and the political purpose of each approach, which differed here. Crisp’s psychiatric discourse (Crisp, 1980), which simply traced what he saw as a biologically determined path, never explained *why* girls/ women were the primary sufferers, and *why* they might wish to take flight from corporeality as they faced sexual maturity (MacSween, 1995: 31). For the feminist writers, however, the contradictions, ambiguities and restrictions of adult femininity were themselves seen as their own prison house, over which anorexia became a more preferable refuge.

My understanding of how I fitted into this narrative of retreat, which I only knew about from psychiatric discourse, was more to do with sexuality than gender *per se*. My most vivid touchstone here is a (pre-anorexic) memory of kissing a boy at a party when I was 13. There is a forbidden feeling about the gathering – perhaps the parents of the house are away – and I’m in a kitchen strewn with cider and lager bottles and an open pizza box with the contents ground into the floor. Leaning on a worktop I’m suddenly kissing a boy, his tongue insistently pushing open my mouth and exploring it. I am there, yet not there (rising above, and observing myself doing it), and I have an overwhelming desire to burst out of patio door which I have kept firmly within my sight. I am viscerally shocked at the slimy texture of his tongue and I freeze, repulsed by the taste of lager which mingles with his sense of insistence, entitlement and right. A cumulative range of similar experiences, and the extent which I had to force myself to scream at boy band pop concerts with my friends, led me to ask: ‘*What is wrong with me?*’ I did not connect this to the onset of my eating problems at the time, but it

was not that long after (5 years or so perhaps) that I certainly *did* understand my anorexia as effectively a male repellent, my mechanism for avoiding the ‘natural’ expectations of femininity as *heterosexual*.

I buried very deeply, I think, the idea that I might be lesbian: this was the early 1990s, and I knew of few ‘real’ or media reference points which might enable me to imagine alternative ways of being a woman that did not pivot upon heterosexuality. It was not until 2007-8, some 15 years later, that I tried (and failed) to articulate these feelings in counselling, although in 2009, on the day I went into the clinic, I sent letters to my Mum, Dad and brother explaining why I thought I had become anorexic (perhaps learning, from therapeutic discourse, that I should ‘unburden’ myself before treatment). Just prior to this time I had frantically searched the internet for information about the relationship between anorexia and lesbianism, but learnt very little, only finding that lesbians were apparently more protected from eating disorders due to an assumed greater distance from cultural beauty ideals and traditional sex roles (Jones and Malson, 2013: 63). I remember clearly how the tears pricked my eyes and dripped onto the keyboard, mingling with the dust and debris between the keys. This quest for knowledge had made me feel doubly ‘deviant’, both as woman *and* anorexic. A little while later, and in reading the collection *Testimonies: Lesbian and Bisexual Coming Out Stories* (Holmes and Tust, 1988), I leapt eagerly upon a particular narrative by Nona Caspers which made a passing reference to how:

Boys liked me, but I didn’t seem to care about them. I retreated into starvation and obsessive exercise. I whittled away my female flesh, my anger, my fears, my sexuality. My goal in life was to be able to wear my 12-year old brother’s Levi’s. I did. I was 16 (Caspers, 1988: 6).

I cut this out and circled it in orange pen, and it now appears on the first page of my scrapbook. I saw myself as traditionally ‘girly’ and ‘feminine’, and didn’t feel (and clearly wasn’t) ‘protected’ from anorexia. Indeed, in the excerpt above, it was anorexia that was used as a means of *denying* the possibility of lesbian identity and desire. *Was this me?* Although the relationship between lesbianism and anorexia remains considerably underresearched, it is largely since my original search that empirical analyses have begun to appear (Feldman and Meyer, 2007; Jones and Malson, 2013: 63), exploring how anorexia can indeed offer an attempt to eradicate lesbian subjectivity and desire, whilst presenting a ‘way of “looking straight” by taking to extremes the thin, heterosexual, female ideal (Jones and Malson, 2013: 68). Both psychiatric and feminist work has historically assumed, albeit in different ways, that the woman is ‘caught’ in anorexia trying to negotiate a path to mature female heterosexuality (a perspective often influenced by Freudian psychoanalysis (see Hepworth, 1999: 49)). In this regard, the feminist discourse has tended to reproduce normative discourses on girls/ women which have often ended up confirming the very structures they set out to critique, leaving little space for the anorexic for whom heteronormativity, and not heterosexual femininity, is potentially the key source of oppression.

The extent to which feminist (and medical) work on anorexia has excluded the experience of sexual minorities is important here. But what is most significant in relation to the feminist work is that whilst I did not feel powerful (but rather ‘freakish’, subordinated and marginalised), I *did* understand my starving in politicised terms, as the product of (heteronormative) power in society. I used to think that if only sexual orientation didn’t matter, then I would not be anorexic. In reality, of course, things have not turned out to be so simple. Whilst explaining my perception of why I became anorexic, and receiving the acceptance of my friends and family, was certainly important to my recovery, I remain unsure

about categorising my sexuality, and don't presently, in the spirit of queer theory, locate myself in any binaristic sexual identity (Rahman and Jackson, 2010: 127).

Earlier in the article I referred to the suggestion that the autoethnographic experience may also challenge and change the author, requiring them to reconfigure or reappraise certain perceptions of self-identity (Wall, 2013). In reading the early feminist literature on anorexia in particular, it took me a while to get started (I was after all, predisposed to be suspicious of its value), but as the minutes of reading turned into hours, I saw myself reflected on page after page, particularly in the books that were initially the greatest source of scepticism and anger (Chernin, 1985; Orbach, 1986). Separating this narrative - which focuses on the construction of the feminine in patriarchal culture - from the narrative on lesbian identity, is by no means to imply that lesbian women, and lesbian feminism, have not had to historically negotiate many aspects of patriarchal power (see Wilton, 1995). Rather, it is only to state that, having in part settled on the potential use value of one discursive narrative, I entertained another, and began to consider if my experience of anorexia emerged at the confluence between the two.

Eating Desire

Chernin argued that anorexia 'must be placed in relation to [a]... fateful encounter between a mother whose life has not been fulfilled and a daughter now presented with the opportunity for fulfilment' (1985: 43). For the anorexic, it is the 'image of a fat mother hiding at home.... that dominates her imaginary life' (Ibid: 45), given that, with every bite, she fears that 'she may become what her mother has been' (42) (see also Orbach, 1986). But she also fears leaving her mother - with her lifetime 'of broken dreams and disillusion' - behind (42).

When I first read these claims I was angry: not only did they sail perilously close to 'mother

blaming' (see Hepworth, 1999: 50), but they also appeared to insult my Mum (who was neither fat nor hiding), as well as my incredibly close relationship with her. Yet whilst I objected to Chernin's particular use of maternal imagery here, I knew, again from an early stage, that not wanting to be like my Mum, or in a *marriage* like my Mum, was clearly part of the story of my anorexia. Yet I had interpreted this as a resistance to being in a heterosexual relationship, as opposed to a particular generational version of what this might mean (for female identity and subjectivity).

In reading the literature, I noted that my Mum's trajectory fitted Bruch's paradigm of the anorexic's mother who gave up any sense of a career once married (1978: 26). Yet I paused on this fit and thought back to my Mum's oft-told story about her ambition to join the Women's Royal Navy Service (WRNS) at 18. My Mum was larger as a teenager than in later life, and at 5'6 and 12.5 stone, she was turned down as a 'health risk', and told that she was simply too large to join. A year later she began work in the Civil Service: she met my Dad at 19, married at 22, and gave up paid employment with the birth of my brother. This story inadvertently offered me an image of fat as the source of stasis, humiliation and (domestic) entrapment. But its purpose for my Mum seemed rather different: its oft-told nature has offered (or preserved) the fantasy of a different life in which she might have pursued her own ambitions and desires. Do I feel guilty as part of the source of this re-routing of female ambition, and the attendant self-sacrifice that domesticity and motherhood was seen to require? *Yes, I probably do.* I tell myself that she would likely have ended up married with a family even if she had joined the Navy. And yet, one of my daughter's middle-names is 'Wren'.

I recognise in the literature too the emphasis on how the mother's own socialisation effects the mother-to-daughter transmission of how (or whether) to express female desire (Orbach, 1986, Lawrence, 1984). My Mum was *not* forever 'weight conscious and preoccupied with

dieting' (Bruch, 1978: 59), constantly worrying about her own shape and mine. But it was always just the case, for as long as I can remember, that her relationship with food was rendered almost invisible. She always ate, but would feed herself last, ending up with the singed or smaller portion in a mangled heap on her plate.

The apparently unfeminine nature of appetite, and its relationship with discourses of female desire, was central to early (and some later) feminist work on anorexia, with the ultimate goal of anorexia seen as the occupation of a body that was 'desireless and inviolate' (MacSween, 1995: 194). As discussed above in relation to my own narrative(s), this attempt to construct a desireless body could just as easily be read as a bid to resist and erase "unacceptable" sexual impulses (Jones and Malson, 2013: 68) which are not defined in heterosexual terms. But in reading this early feminist work in relation to my own recollections, as well as in relation to my personal writings on my anorexia, I was struck by my apparent disgust towards female desire in its own right. One of my earliest memories from childhood sees me attending my brother's first year class at school (so I must have been around 3) and being offered a slice of fruit from a plastic plate of apples, bananas and oranges. I took a piece of apple and a piece of banana, but was (gently I am sure) scolded by the teacher that the appropriate quotient was *one* piece rather than two. Perhaps I have held onto this memory as it harbours my first experience of embarrassment or shame. Some years later I was playing in my best friend's garden and asked her Mum if she still bought the 'chocolate and banana ice lollies' that we had enjoyed so many times before. 'Yes', she said with a smile. 'Did you ask because you want one?'. I shook my head, and felt embarrassed and ashamed, somehow *caught* in the act of desiring (food). Still today when I buy my lunch at work and I am told to 'enjoy' I flinch, and momentarily want to return the food, and reject the implied correlation between self-indulgence and desire. As this suggests, whilst shame might be experienced as intimately

personal, it is deeply social and thus political (Ahmed, 2004), involving a ‘view of the self by the self’ from the perspective of imagined and real social norms (Sender, 2012: 83).

Indeed, in re-reading what I wrote about the experience of eating two weeks into my stay at the clinic, I am struck by the jumble of discourses and metaphors which move across bodily purity, penetration and medicalization in a bid to convey the visceral and affective ‘invasion’ of food:

I am crying about the food thudding, glugging, sliding and seeping down, while I am most worried about when it is done, in there, irreversibly inside, and I must sit (not stand) and own it, hold it, shelter it and ‘care’ for it, like it is now part of my body. I must harbour the still warm mess in my stomach. I imagine it being hurried round my body, gleefully, gratefully like emergency aid, whilst I also imagine it just sitting there, like an irretrievable stone, dropped down a well that is so much more menacing now it can’t be seen (13 June 2009).

I can see here how my imagined construction fits the paradigm of the ‘barrier body’, with the aim of maintain the body as both desireless and needless (MacSween, 1995: 209). Yet it is also crucial that I ‘call out’ out the performative pretence in this excerpt that I was not, at the same time, utterly *desperate* for this food (*all* the time).

In seeking to describe what a ‘normal’ day had been like for me prior to entering the clinic, I focused on the ever-present experience of simply ‘waiting to eat’:

Every day is long and difficult journey (or perhaps more appropriately an endurance test of slog) which is *only* about getting through time until food, and this journey follows a route on a map that only knows one shape. If food and drink are like beautiful flashes of light or beacons in a desert - a dry, hard and arid

terrain - then I drag myself through the day to get from one beacon to the next.

And I hate it (18 July 2009).

I clearly gestured here toward the rules and regulations which structured what I could eat and when, and some feminist authors (Orbach, 1986; MacSween, 1995) have foregrounded the extent to which the anorexic rituals and routines surrounding eating seek to ‘reduce... the possibility that [female] appetite will break [the]... order’ (MacSween, 1995: 207). For me, it is difficult to reconcile *all those years, and all that waiting* (sat in Starbucks on a Sunday afternoon with aching limbs, crying silently because it was still 4 hours until food), with a strategy that now seems so flawed and self-defeating. Yet I can simultaneously see the logic of this perspective, and I recognise aspects of myself within it.

The specificity of how my desiring body was specifically imagined in feminine terms is elucidated further by what I wrote during my first full day at the clinic. Rather than typed, like most entries, this record is scribbled in angry, messy writing and sprawls across the page:

When I sit there [at the dinner table] being made to eat, I’m feel that I am being grown in a greenhouse. I imagine hot, pink, blotchy sweaty flesh, growing and pulsating in the humidity inside. I imagine leaving the greenhouse in the weeks or months to come, rosy-cheeked with a swinging blonde ponytail, and round buttocks covered in clinging jeans. Who is this woman? *I hate her.*

Six weeks later it was indeed the horror of trying to put on my old jeans, which would no longer button up at the front, that led me to protest against my treatment and ask to leave. I didn’t leave, but it was three years before I would wear jeans again. Orbach argues that fat in women represents the ‘*exposure* of need [original emphasis]’ and desire (1986: 91): here, I hadn’t only been caught wanting the ice lolly, I’d eaten it (and with a diet of 3,000 calories a day, rather more). Yet the girl/ woman I imagined above was not fat, but rather just a

‘normal’ size, conforming to the idea that ‘the phobia for the anorexic is *herself* at normal (average) adolescent body weight [original emphasis]’ (MacSween, 1995: 27). That said, I did not want to remove other iconic signs of femaleness, as in Aimee Liu’s oft-cited autobiographical account of anorexia, in which she wanted to cut off her breasts (Liu, 1979: 99): indeed, I was utterly flat-chested even before starvation, and felt decidedly concerned that I would not ‘measure up’ as suitably feminine for a boy. But in re-reading my writings from this time, I certainly recognise this discourse of abhorrence toward the fleshy female form, or what I called ‘the heavy feeling of flesh beginning to cover my body like a winter layer, and the desire to twist it, punish it, or slice it clean away with a knife’ (12 July 2009).

Wolf argues that if a woman says ‘I hate my fat thighs’, she has, in a way, been made ‘to hate femaleness’ (1991: 197). *Now I feel angry again. I don’t want to hate ‘femaleness’, and I love being a woman.* The anorexic appears here as the ‘agent provocateur of patriarchy’ threatening to ‘destroy [feminism] from within’ (Houston Grey, 2011: 2), whereas elsewhere in the feminist literature she is a vulnerable social subject who hears cultural messages about femininity in ‘quadrophonic sound’ (Orbach, 1986: 95), as well as an (unconsciously) resistant warrior for the feminist cause. As I reach the end of this piece I am still left wondering: *was I ever all or any of these things?* Suddenly however, in reaching the end of my labour for this piece, I am struck by the reality that perhaps there are other things that are ultimately more important. I’m drawn back to a powerful passage in Saukko’s book – I open it slowly - in which she cites an encounter with an anorexic student who explains: ‘I used to be able to see the sky and think it’s beautiful.... and now I just think about food’ (2008: 19). My eyes (like Saukko’s) swim my tears. Whoever I was and whoever I am, I know that I’m one of the lucky ones. *I can see the sky.*

Conclusion

Susan Sontag drew attention to the metaphorical appropriation of ‘illness’ *as* political some time ago (1978), and in 1988, Elspeth Probyn cautioned feminist authors in the field that ‘instead of exploiting the anorexic as metaphor, I suggest we look closely at the specificity of her situation’ (1988: 210). As I have explored throughout this article, work has increasingly sought to take a closer ‘look’ at anorexic experiences, and has usefully incorporated a great deal of empirical material in this regard. At the same time, my own personally ambivalent relationship with this work speaks, I think, to this complex question of metaphorical ‘exploitation’ (which in turn also relates to, but cannot be reduced to, long-standing debates about how feminism represents the subjective experience of ‘woman’). Despite the extent to which feminist work on eating disorders has become an established and sophisticated field of study, there remains a clear need for the feminist discourse itself to engage in a dialogue with girls and women who have experience of eating disordered subjectivities, especially given the political aim to ‘give voice’ in this regard. The implicit dichotomy between enlightened feminist researcher and politically unaware anorexic (Bordo, 1993) is deeply problematic, and based on my own experience here, doesn’t do justice to the complex subjectivities that anorexia may entail.

But as stated at the start of this article, and as hopefully made clear throughout, my relationship with this work is not only, nor primarily, antagonistic: rather, it exists in a constantly moving space between disconcertion and recognition. It is also crucial to state here that this work has strengthened - and made me aware of - my long-standing ambivalence toward medical and psychiatric discourses on the anorexic subject. In this regard, the feminist work’s emphasis on the medical and psychiatric discourses as historically contingent constructions (Malson, 1998; Hepworth, 1999; Saukko, 2008), has helped me to strengthen my critiques of these discourses and my right to voice them. I no longer (ever) refer to my

experience of anorexia as an ‘illness’, and have increasingly grappled – in writing about the subject – with how to ‘name’ it in such a way that does not automatically confirm medical norms. At the same time, and in contrast to feminist critiques of in-patient treatment (Orbach, 1986), it is crucial to say here that my experience in the clinic was not only overwhelmingly positive (and successful), but one of the best times of my life. Yet when I look back over what I wrote in that period, it is not the psychiatric and medical interventions that I found helpful, but rather the wonderful simplicities of female company, community, laughter and empathy – a place to *be* - which I see as providing the foundation for my recovery. In this regard, my encounter with the feminist work has enabled me to engage in a political reappraisal of other aspects of my own anorexic past.

When I was 15, my first counsellor gave me a copy of what I now realise was Orbach’s *Fat is a Feminist Issue* (1978). I recall its cover – bright blue and pink – and how it sat unopened on my shelf for weeks or maybe months until she asked for it back. The term ‘feminism’ meant very little to me: the book seemed too ‘grown up’, and I didn’t really know what it was about. Looking back, I wonder why she gave it to me, as the feminist discourses did not appear to otherwise inform my encounters with her. Yet my biggest unanswered question is: what if I had opened it? Encountering the feminist scholarship on anorexia has taken me on an enraging, challenging, empowering and deeply personal ride. But do I wish I had read it? *Yes. I very much wish I had.*

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