

Anorexia Nervosa, Societal Causes and Solutions

Introduction

Anorexia nervosa is a phenomenon that has developed into an epidemic in the last 20 years. It is self-starvation, sometimes to death. Eight million women have it in the US alone. Millions more in Europe are suffering. The disease hardly exists in other places. It is a disease of the white and well-to-do female. A simplistic, naive question would be, “Why don’t they just eat?” This paper will answer the question by exploring how and why intelligent young women starve themselves and will attempt to look deeper at the more fundamental causes of anorexia and suggest some long-term solutions. It will briefly describe some of the current therapies for anorexia; yet in spite of these therapies, 52%-80% of anorexics never recover and 5%-9% die. (Levenkron, Pg 12).

Four Stages of the Disease

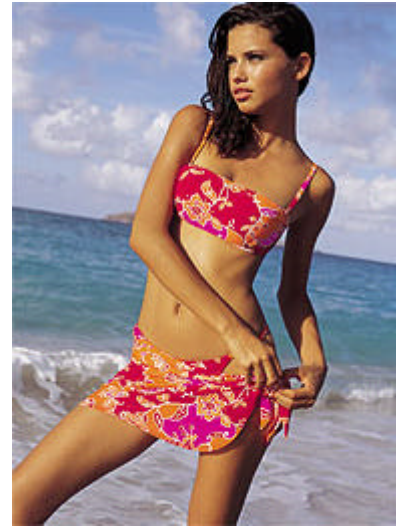
Levenkron identified four stages of anorexia:

Stage One: The Achievement Stage: The anorexic diets and strives to be thin, but is **more successful** than most dieters. Because she is successful at it, she is praised by her peers and caregivers for her looks, her perseverance, and her willpower. There exists the seeds of an obsession. She is probably close to her original goal weight at the end of this stage. Another difference between a stage one anorexic and a normal dieter is in her world-view. The anorexic does not feel as safe in the world. She is a perfectionist who needs to control her environment in order to feel safe.

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- Stage Two: The Security-Compulsive Stage: The anorexic enters Stage Two when she no longer has a goal weight, but rather a weight-loss-per-week goal -- an important transition point in the disease. Exercise may be a part of her compulsion. She has a new preoccupation with measuring herself which is combined with a distorted self-image. No amount of weight loss makes her thin enough. She actually feels fatter the more weight she loses. Somewhere in stage two or three she becomes terrified of gaining weight. This fear can be greater than her fear of death. She is constantly hungry and obsessed with food. As her body shrinks, her skin develops folds since it can't shrink as fast as the tissues underneath. She interprets the folds as fat. The anorexic has less time for friends or family as she detaches from others.
- Stage Three: The Assertive Stage: At this point the anorexia has been noticed and disapproved of by her friends and family. She is defiant -- at war with them. She does not give their advice any credence, believing that they are jealous of her and are trying to make her fail. Her behavior startles her family who is used to her being very polite and compliant. She has the sense that her disease gives her power since she can now use food as a bargaining chip as she negotiates with her parents for other privileges.
- Stage Four: The Pseudo-Identity Stage: She has now become "the anorexic" to herself, her family and friends. Her identity gives her comfort based on a self-righteousness that is seen in religious fanatics. She likes the notoriety and is deeply convinced that she is right. (Levenkron, Pg 34).

Causes

Anorexia is a multidimensional problem; it can't be blamed on a single factor. It isn't just the fashion industry and its marketing methods; although there would be fewer anorexics without the marketing images such as the skinny young woman in the picture on this page. It isn't just the male-dominated culture and its effect on intelligent young women; although the anger and frustration of these women is turned in on

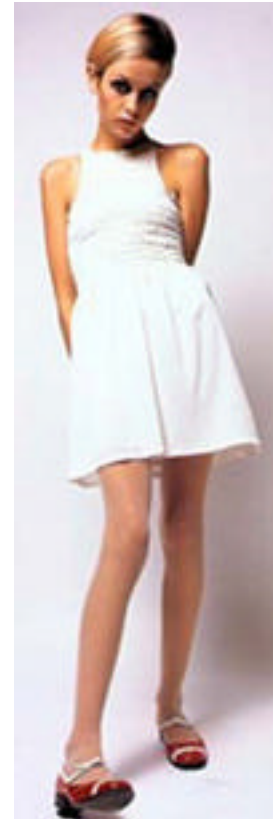


themselves in anorexia. It isn't just the spoiled nature of these affluent young women who have more time than poor women to worry about their appearances. It is all of these reasons and more.

The underlying causes of anorexia are societal in nature. "Anorexia nervosa is about the influence of the fashion industry's role in shaping women's bodies, about women hating their bodies, and about family dysfunctional dynamics . . . Perhaps above all, anorexia nervosa is about the competition among women for physical perfection, whatever that may mean." (Levenkron, Pg 13). Poor women and non-European women in America and Europe are less affected. Heterosexual men are rarely affected, and, if so, contract the disease for different reasons. Homosexual men are four times more likely to be anorexic than heterosexual men. (Ellison)

Pubescent girls are desperately trying to establish an identity that works for them. They are often doing it in a vacuum. Their female caregivers are almost always the product of a society in which women are second-class citizens. How can they help the

child become a fully functioning adult when they are unsure of their own roles as adult women? Levenkron goes on to say, “The child who has never successfully developed a healthy dependence in her early years has nowhere to go emotionally for fulfillment of her need to develop a sense of identity but to the larger culture and its messages to girls and women. Most of those messages are about being thin and ridding oneself of unnecessary and unwanted fat. She, of all her peers, becomes the ultimate devotee of this cultural message. Glance at any issue of a women's service magazine; look at the figures of popular models, and the female television and film stars, and you'll see quite slender women with prematurely lined faces, indicating that their weight is unhealthily low.” (Levenkron, Pg 21).



“When women become less valued by men, and femininity becomes less valued by women, the competition among women for the best, superior body replaces the competition for attracting men. The original drive for seductive femininity for mating purposes has been twisted by societal elements into a feminine drive for unfeminine physical superiority among women, leaving seduction and men out of the picture. The drive for "physical success," even in its new, twisted form, bony or muscular, still retains the power and energy of nature's drive for seductive femininity.” (Levenkron, Pg 77)

There is even a religious aspect to anorexia. Asceticism was seen as a virtue in medieval times and perhaps religious masochism is a factor in the self-hatred of some of the anorexic girls of today. “Shorn of her fourteenth century piety, St. Catherine talks the

language of modern anorexics. Mere penance is not good enough. She must rely on a 'holy hatred of herself' -- equivalent to the low self-esteem of today's sufferers -- in order to achieve 'perfection.' A 'desire' to please God is accompanied by 'hunger' in which the spiritual overcomes the physical, mirroring the asexuality of late twentieth century self-starvers." (Ellison)

While on the surface it seems ridiculous that an intelligent young woman would starve herself, given a childhood that lacks sufficient trust, a culture that marginalizes women, and a media bombardment that promotes unhealthy thinness and, simultaneously, dietary disaster from fatty and processed foods, a degree of confusion is understandable, as is a degree of anger. Young women have a right to be angry and, for some angry people, it is too easy to turn their anger on themselves.

Current Treatment

Anorexia requires immediate intervention by a professional. The harm done is rapid and sometimes irreversible, even fatal. If a girl is able to avoid treatment for three years, she may never have children. She may weaken her heart so as to have a major heart attack such as the one that killed Karen Carpenter.

Psychotherapy may be individual or group, outpatient or inpatient depending on many factors which must be evaluated by the family and the doctor. Family therapy is often needed.

There are many self-help groups that have sprung up around the U.S. and Europe and excellent web-sites provide information. These are only useful once a woman has decided to be a part of the solution.

Medications are often part of some stage of the treatment for anorexia. Some are habit-forming. Some anorexics transfer their food problems to their medications. Therefore medications must be used under close supervision. Medications currently used include

Symptom	Drug Type	Examples
Depression	Serotonin Reuptake Inhibitors (SSRI)	Prozac, Zoloft, Paxil, Effexor, Celexa
Depression	Phenylpiperazine	Serzone
Anxiety, panic attacks	Benxodiazepines (habit forming)	Klonopin, Xanax, Ativan, Valium, Buspar
Obsessiveness	SSRI	Luvox, Anafranil

There is no consensus regarding how to prevent anorexia. All of the above treatments soften the effects of the disease, but don't cure it or prevent it. As stated before, more than half and perhaps as much as 80% of these girls never recover. With that in mind prevention deserves more attention than it is getting.

How Can Society Reverse the Trend?

What changes need to be made on a societal level to reverse the trend? An easy question to answer at a superficial level, but the answer is not easy to put into practice. Given that a fundamental problem is that society does not value women, and that these sensitive and intelligent girls sense that they are not valued, we can glimpse a distant solution: **Society needs to value healthy women who are contributing to society in healthy ways. Thus society must be changed first, then a generation of men and women must grow up with that mindset, then lastly, those same men and women must raise a new generation of girls. And how, one might sarcastically ask, do we change society?**

Well -- societies do change! We have created, or evolved into, a society based on aggressiveness and competition. In such a society, women can either stay out of the way or adopt masculine traits. We have changed into an information society and are now less of a manufacturing or agricultural society. These seem like more massive changes than simply adding a healthy respect for half of our population.

Our competitive and aggressive society benefits neither men nor women. The majority of men are, along with women, the losers. Men have developed various ego-enhancing toys to numb their minds and spirits, but most men are just as marginalized as the women. It is these men, confused and dispirited, who comprise the vast majority of the fathers of young girls. The men who are the “winners” in our culture are using money and power for their sense of self-worth. Neither group of men can be relied upon to change society.

Women take the first steps to solve this problem. Men will never solve it because they don't understand it – and can't understand it. As a male I can understand the words that women say to me but I can't feel what it is like to be a women in a society with a male context¹. Males can't understand what a male context is because it doesn't affect them negatively. For them it's invisible like rose-tinted glasses that are only noticeable for a few minutes after putting them on. Men, especially white men in the U.S. and Europe are born into the male context. They would only notice it if it were removed.

A very interesting video that describes the effect of living in the white male context, from the point of view of non-white males as well as white males, is *The Color of Fear*. In the film several men spend a weekend in an encounter group discussing racism in the U.S.

¹ I'm not sure what a male context is either. It seems to be something you get when a society gives males all the power and lets them make all the rules for several hundred years.

Two of the men are white and the rest are of various non-European races. Of interest to this discussion of anorexia is the difficulty that white men have in understanding the problems of non-whites and, by extrapolation, women in a country run by white males. In the film neither white male was racist, but clearly had great difficulty understanding the problem. One particular white man was saying, in effect, “Isn’t everything OK the way it is? Can’t we just love each other without changing the status quo?”

I believe that the white male power structure in our society, without strong opposition from women, will say that anorexics should just “deal with it.” The male power structure would prefer a pill, or a method of psychotherapy because that would (1) make them some money since they control much of those industries, and (2) solve the problem without men having to change their world-view. The culture of the future cannot have a white male context. It can’t even have a male context.



Another reason why women must solve the problem, or at least define the solution, is that there is a male bias in the history of psychotherapy. Freud measured everyone with a male standard and thought that women were imperfect men. Other male scientists continued to develop theories of human development that were founded on Freud’s error. (Borysenko, Pg 24). This misunderstanding seems to pervade our culture in both males and less enlightened females.

An effective childhood creates a sense of trust and hope. “The girl who doesn’t get anorexia nervosa as a child has developed a healthy use of dependency and trusts her parents to moderate the extreme impulses that all adolescents experience. She is not to be

seduced by the bizarre messages our culture sends out to adolescents in terms of dress styles, sexual behavior, and other demands in the area of antisocial characteristics and unrealistic roles for women.” (Levenkron, Pg 22).

What would a world-view be like in which human society advances at a rate that keeps aggressive men happy yet has the quality relationships that seem to be at the center of a woman’s approach to life? “Affiliation and relatedness become the ground out of which a healthy sense of self grows – not in distinction to others, but as part of a worldview in which relationship is the crucible in which autonomy, creativity, compassion, and wisdom are forged.” (Borysenko, Pg 25).

Can we continue to force young women to conform to a male world-view, what Borysenko describes as *self-in-isolation*? Borysenko insists that this will not be comfortable for women -- that women exist and flourish through *self-in-relation*. “What is meant by self-in-relation? We don’t exist any other way. We exist in the context of other people, other beings and environments. The key concept is one of interdependence, and understanding that relationship provides a context in which all participants can grow and become empowered, the emergent whole evolving into more than the sum of its parts.” (Borysenko, Pg 26). Our society must begin to respect the differences between men and women, boys and girls and their needs during different phases of their lives. “. . . autonomy and independence are indeed intrinsic to male development, but little girls develop a different, and just as important, quality, that of relationality.” (Borysenko, Pg 25).

Families are part of the long-term solution. Every author in the bibliography of this paper has emphasized that restoring effective and functional families is needed if our

culture is to produce happy and well-adjusted girls. However, the effect of the family is primarily in the child's earliest years since peers are the major influence on adolescent girls. (Pipher, Pg 82).

Our future culture must be child-centered. A great deal of attention must be paid to very young children. "The child's basic relationship to the world is in place at the ripe old age of eighteen months ..." (Borysenko, Pg 18). There is no time to lose. "When small children develop a sense of trust, and later a sense of intimacy or closeness to others, and a sense of self or identity, they are not vulnerable to becoming "creatures of the culture" in its most extreme form as exemplified by the media: magazines, movies, and so on. But individuals who are seduced by popular trends allow these trends to define much of their identity." (Levenkron, Pg 20)

Families have been mutating in the last 200 years; some of the changes have been improvements but many have been destructive. Particularly in the last thirty years the family seems to be continually redefining itself in negative ways. As a culture we are not making the best choices for our families and by extension our children, male and female. This trend much be reversed. We could learn from several Native American tribes who had a simple method of making choices – they chose what would have the greatest benefit to the next seven generations.

Conclusion

There are no simple answers to anorexia. The problem is woven into the fabric of our culture. The power structure will not happily stand by while the fabric is unraveled. "Long term plans for helping adolescent girls involve deep-seated and complicated cultural changes – rebuilding a sense of community in our neighborhoods, fighting addictions,

changing our schools, promoting gender equality and curtailing violence. The best [solution] is a culture in which there is the structure and security of the fifties and the tolerance for diversity and autonomy of the 1990s.” (Pipher, Pg 293).

I believe that we do not have to choose between helping young women or helping young men. I believe that once we improve our culture so that young women are happy, safe and productive, we will find that we have solved some of the problems of young men simultaneously. The problems of young men today don't normally manifest themselves in anorexia, but they are manifested in other ways – equally destructive. Young boys and girls growing up in an environment of “self-in-relation” will be better prepared to be the parents of a future generation of girls with self confidence and self-worth.

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