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Finding Ourselves in Discourse:
Anorexia Nervosa and Negotiation

Elspeth C. Probyn

A Thesis
in
The Department
of
Media Studies

Presented in Partial Fulfillment of the Requirements
for the Degree of Master of Arts at
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ABSTRACT

Finding Ourselves in Discourse: Anorexia Nervosa and Negotiation

Elsbeth C. Probyn

In this thesis anorexia nervosa is examined from the perspective of discourse analysis. The modern concept of anorexia as a simple consequence of media messages is deconstructed. An historical instance of anorexia from the late nineteenth-century illustrates the complexity of discursive positioning. This historical case provides the basis for a consideration of the competing claims made by the discourses of the Church and the medical establishment. The concept of "articulation" is used to examine the power of discourses to determine "meaning" for individuals.

The modern discourse on anorexia is analyzed for its "articulation" of the discourses of the family, female sexuality, and the medical. A consideration of contemporary anorexic cases allows for the author's formulation of the notion of "negotiation". It is argued that this theoretical conception extends the analytical possibilities of the most recently published work of the late Michel Foucault. It is contended that individuals "negotiate" signification on the basis of their historical and material experience of discourses.

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For what its worth, I dedicate this thesis to M. F. A..

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CHAPTER I

ANOREXIA NERVOSA: A CONTEMPORARY CONDITION WITH A HISTORY

Flesh comes to us out of history; so does the repression and taboo that governs our experience of flesh.

Angela Carter (1978:11).

All is mirror;
Your image persecutes you.
Octavio Paz (1973).

Consider the reflected image of an emaciated girl driving herself ever onward to the goal of perfect weightlessness, a disembodied self. See the images of bits of body that float in the airwaves around you, thin perfect parts which must surely fit together. (Indeed you match them together: the lips, the legs, the torsos and breasts, and another's look feels closer than your own.) Think of denying the mediation between flesh and representation, of emptying your self and living representation. Consider the young woman caught between billboard and magazine and her body, who takes the images of the ad machine deep within her. Feel her deny her shape, deny the temporal spinning out of menstruation as she starves herself into stasis. And from within this stasis hear her silently voice no to family, society and

sexuality.

Recently in both the popular press and in scholarly publications there has been much talk about an illness, or a condition which is said to be on the rise. The illness capturing such attention is anorexia nervosa, a condition characterized by selfstarvation on the part of predominantly young women. As the Canadian Pediatric Society reported earlier this year, "Anorexia nervosa is reaching epidemic levels among Canadian teenagers and is even starting to affect adolescents as young as twelve" (The Gazette, 17/9/1985). This illness is certainly real. It is also becoming a current metaphor for our post-industrial era, in that anorexia is seen to express the contradiction of individuals starving themselves in the midst of an affluent society geared to the ideal of thin bodies. Bryan Turner writes that, "if hysteria in the pre-modern period was an illness of scarcity . . . anorexia in the twentieth century is an illness of abundance" (Turner, 1985: 93). Turner describes this situation as "paradoxical" (ibid.), and thus limits any consideration of anorexia to our "affluent" times. While abundance of food may certainly be of importance when considering why thin is important in our society, this explanation does not go far enough in examining the phenomenon of anorexia. In other words, describing anorexia as a paradox of our times is rather too easy, as is the very

nature of paradoxes. This logic merely places anorexia in opposition to a "common sense", or "natural", notion of the type of bodies an affluent society requires.

Another use of anorexia as a metaphor is contained within certain post-modernist discourses. While the preferred condition to be taken up and decontextualized (and thus emptied of meaning) has been schizophrenia (Jameson, 1984), we are beginning to see the appearance of anorexia in the pages of art magazines. Within this discourse, anorexia is closely associated with the "look", which is indeed physiologically extremely thin. However, the "look" as a sign is separated from the material conditions which produce the anorexic. Kate Davy has pointed to how the "look" exists in itself; a signifier with no grounding:

By its very nature a look has something to do with the condition of being essentially a gift: any look is constructed to transform its wearer into a more attractive object of desire, or gift. The look itself, then, is all about men--they construct it and they buy it (1985: 24).

The "look", then, according to Davy has little to do with the wearer. The women who exhibit it are blank screens to be projected upon. Within this post-modernist discourse, the anorexic can be held up to substantiate the argument that individual embodied subjects no longer exist: we are screens, and the anorexic has merely taken the representation of the 'look' upon herself. From the perspective of this scenario, the anorexic is the "object" par excellence, a completely

"natural" inhabitant of the "media-scape". However, not everyone living in this society is anorexic. Against the ahistorical post-modern analysis of anorexia, I would argue that we must look at the specificity of anorexia within an historical moment.

Furthermore, in examining the particular discourses that variously capture the body at different historical junctures, we are in a position to analyze how individuals negotiate meaning in a highly mediated society.

Anorexia is an illness and thus by definition, societal. To quote Turner:

'disease' refers to all living species, whereas 'illness' exists only in society . . . illness can be regarded as deviant behaviour, but it is heavily structured by cultural categories which legitimate or normalize deviance as a medical condition (Turner, 1984: 182).

Anorexia, then, is culturally defined, and exists as a polysemous response to cultural and social conditions. The use of anorexia as a flip metaphor reveals on its underside a coming together of the most fundamental elements which structure our social existence. In this paper I will consider anorexia as a nexus of institutional discourses, as a site wherein we see the coming together of major structuring knowledges: school, family, sexuality, and the media discourse of the female body. Moreover, we will see that anorexia is not solely a modern illness, but rather a particular articulation which predates the era of Twiggy by

some hundreds of years. The demand to place anorexia in its historical context is not mere quibbling. Tracing back instances of anorexia will allow us to consider the shifting social discourses that played, and continue to play, upon the female body.

In order to better understand the phenomenon of anorexia, as well as our own lived condition as subjects in society, we must abandon the idea of anorexia nervosa as an isolated epidemic of modern society. As Petr Skrabanek has pointed out, "some authors write under the impression that anorexia nervosa is a recent social phenomenon related to modern affluence and obsessive slimming among young girls" (1983: 109). The factors of affluence and peer pressure are certainly of importance. Indeed, these aspects constitute the core of the modern medical discourse on anorexia, and as such will be considered in more depth in my second chapter. Here I will briefly outline what we miss by concentrating first and foremost on the cultural dictates of female slenderness within our present society. An over-privileging of these factors tends to present a rather ahistorical and even acultural view of anorexia. By focusing too narrowly on a certain mode of causality which depicts the anorexic as starving herself in emulation of today's media image of the ideal woman (of the "look"), we tend to mask that societal norms and dictates are reproduced in a number of realms.

This is not to say categorically that the contemporary bombardment of unrealistic representations of the female form: that the fragmented and androgenous body, are not powerful triggers for anorexia. Indeed part of my fascination with anorexia is that it is a dis-ordering of societal relations, and hence shows up the power of the images and discourses within which we quotidianly live.

As Sheila MacLeod has said "anorexia nervosa involves a denial of reality which depends upon an acceptance of a split between self and body" (1981: 88). If we take MacLeod at her word, we should look closely at this anorexic "denial of reality", and more particularly at her acceptance of another "hyper-reality". I contend that this will lead us to explore the possibility of an anorexic agency within the discourses which place the female body. In other words, in becoming anorexic, these women exhibit a certain form of agency, and can not be reduced to a state of mere discursive effects. To understand this requires going beyond merely discussing the relationship between anorexia and the mediated image of woman. At the very least, we are forced to think about how that image may be reproduced within several social discourses. This in turn will bring us to consider how certain discourses come to articulate and place the female body.

By looking beyond our own time and space at historical instances of anorexia we may pull out other discourses that

structure female sensibility. This is to say that a genealogy of instances of anorexia may help to reconstruct an idea of the different discourses that the anorexic may be denying: that her act becomes a rupture in the social fabric allowing us to consider its construction. At the same time, I hope that an historical approach to this subject will aid in better understanding the strategies that individuals may embody in negotiating the given demands of their society. Therefore, I shall attempt to sketch out a framework that can encompass the complexities of how social structures work upon the individual at any given historical moment, as well as the subtleties of how individuals act on and negotiate these discourses. In looking beyond the notion that anorexia is a uniquely contemporary condition, I hope to unveil the substance of this particular articulation. This is not to dismiss the fact that anorexia represents important current social issues, but rather to undertake a project that Jeffry Weeks has outlined as "understand[ing] 'the present' as a particular constellation of historical forces" (1981: 21). Following Weeks I would agree that "what is needed is a history of the historical present as a site of definition, regulation and resistance" (ibid.). This is to hear and act on Foucault's challenge to investigate "the complex relationships between the economic, the social, the familial and the sexual in their singular emergence" (ibid.).

In examining the history of anorexia nervosa we are immediately confronted with the emergence of the medical discourse. The ever increasing power of the medical discourse during the nineteenth-century, over that of the Church, coincides with the first "epidemic" of anorexia. In this instance, the rivalling discourses can be most clearly seen in their different attempts at defining, diagnosing, and naming a condition called "anorexia". As Paula Treichler has cogently said, "diagnosis stands in the middle of an equation which translates a phenomenological perception of the human body into a finite set of signs called 'symptoms'" (1984: 69). Treichler here points to the power of the medical discourse (and discourse in general); from an infinite possibility of combinations we have the arbitrary fixing of meaning. In other words, by what criteria are we to name that which falls within the category of anorexia and that which doesn't?

The very appellation of "anorexia" does not overly help, in that it is itself a misnomer for the condition. (It is widely recognized that anorexics do not suffer from a loss of appetite.) The modern name for the condition is first attributed to Sir William Gull in England, although Dr. Charles Laseque in France was not far behind when he independently published his article "De l'anorexie hysterique" in 1873. Gull is credited with first drawing

attention to the condition in 1868, when at a meeting of the British Medical Association he distinguished a state of severe emaciation ("hysteric aepsia") as being symptomatic of something other than tubercular or mesenteric diseases. The specifications that both Gull and Laseque outlined, have to a great extent formed the perimeters of modern diagnosis. While Gull noted that "the subjects of affection were usually female, chiefly between the ages of 16 and 23, Laseque entered into more detail:

The typical picture was that of a young girl between 15 and 20 years of age who suffered some emotion which she avowed or concealed. Generally, it related to some real or imaginary marital project, to violence done to some feeling or some more or less conscious desire; at other times the causes were hidden (Bliss, 1960: 14).

Laseque further mentions that her abstinence from food was accompanied by great activity and that the patient was highly content with her condition. This latter aside, that his patient was "content with her condition", is of interest to my conjecture of agency, and will be taken up later. Also of note is his observation that the families of these young women had "only two possible approaches--entreaties and threats"; and that this attention only served to aggravate the condition (ibid.). In other words, we begin to see that this condition is bound up within the family, and the sufferer's relation to her societal definition, in particular to, "some real or imaginary marital project".

As mentioned, Gull's and Laseque's labelling of

anorexia was important in that they defined more precisely an area of investigation, and indeed allowed for the emergence of anorexia nervosa as a modern clinical entity. However, they were certainly not the first to be intrigued by accounts of young girls starving to death in the absence of any pathology. Their importance, especially that of Laseque's, lies in the attempt to classify this condition within the general discourse of medicine of the time. We should not forget that in the pre-Freudian late nineteenth century, the discourse of medicine had already largely taken up the female body; what Foucault calls the "hysterization of the female body" had considerably been accomplished. In France, the impulse to a psychiatric classification had yielded tomes by Charcot and Gilles de la Tourette among others. Thus we should understand the projects of Gull and Laseque as examples of defining and classifying the body within the general appropriation of the female body-as-hysterical. In the second chapter we will consider how modern practitioners have taken up the legacy of Gull and Laseque in the diagnosis and therapy of anorexia.

At this point I would like to consider earlier instances of anorexia and their implications in this study of the "history of the historical present" of the discourses which work to constitute the anorexic body. In other words, through an examination of the historical instances of

anorexia before Gull and Laseque's definitions were in place, we may consider how the site of anorexia was simultaneously taken up by other discourses. This may also allow us to reconstruct the shifting scene of predominant and developing discourses before a system of medical classification was firmly rooted.

Skrabanek has pointed out that "food-avoidance among young girls due to psychological causes (as opposed to religious fasting or anorexia due to a somatic disease) has a venerable history" (1983: 109). He further distinguishes the history of the disorder into three main periods:

- 1) the fifth to thirteenth centuries-- food-avoidance interpreted as possession by the devil or as a divine miracle;
- 2) the sixteenth to eighteenth centuries- a supernatural cause is still the chief explanation, but anorexia nervosa is now reported mainly in the medical literature as 'anorexia mirabilis', 'inedia prodigiosa', etc.; and
- 3) the nineteenth to twentieth centuries-- the evolution of the modern concept of anorexia nervosa, as a form of hysterical behaviour (ibid.).

Skrabanek's contention that anorexia is not a purely modern occurrence is important in its delination of the interpretations that have surrounded anorexia. However, I feel that there are limitations to thus classifying the history of this condition, and that in so doing he misses the historical movement of discourses. History does not proceed in chunks, nor does the classification of phenomena as nebulous as anorexia flow this cleanly. In order to consider

the shifting of historical discourses, how they come into being and ascendancy, we must look to the period when several discourses were more or less equally at play. Therefore in this chapter I shall examine that period when the ecclesiastical terminology for this condition (*anorexia mirabilis*) was taken up in the medical journals of the day, that is from the eighteenth century to the mid nineteenth century. Skrabanek recounts that "in the sixteenth century, when the printing of books became widespread in Europe, many accounts of fasting girls were recorded, mainly by medical men" (1983: 111). However, it is not until at least the latter part of the eighteenth century that we can begin to clearly see an attempt on the part of the medical profession to appropriate the body from the Church's domain. Therefore I shall focus this discussion on the later part of this period.

In the sixteenth century accounts of fasting girls we find little distinction made between those who ate little, and those who claimed to eat nothing at all. In other words, at this time we have yet to see the emergence of differentiated discourses claiming the fasting body; *anorexia* had not yet become an "illness" with one fixed cultural meaning. Moreover, at this time the Church interpreted "fasting girls" as it wished: as divine or demonic. Thus, if we briefly turn to the case of the "Holy Maid of Kent", we

may see the difficulties inherent in studying these very early examples. This young woman was said to live only on the host, and in the mid sixteenth-century was executed at the age of twenty eight. It is reported that her death was probably for political reasons (Schadewaldt, in Skrabanek, 1983: 114). At this time it was common to put starving girls to death if it was discovered that they did in fact partake of some nourishment. This was due to the fact that their starvation was conceived of as miraculous and hence their 'cheating' was fairly simply seen as a transgression against the divine. However, as with the case of "the maid from Kent" we may suppose that the Church was able to condemn individuals to death for various transgressions and yet subsume them under the general category of fraudulent "puellae inedia miraculosa". In other words, the conflation of perhaps many various transgressions into that of "inedia miraculosa" renders it difficult to see anything but the discourse of the Church.

Another reason for concentrating on the late eighteenth and early nineteenth centuries is that at this time in Europe we can begin to see the defined emergence of the medico-legal discourse. Foucault has to an extent documented its solidification in the nineteenth century through cases such as those of Herculine Barbin (a nineteenth century hermaphrodite), and Pierre Riviere (a young man who committed

a multiple paracide in 1835). However Foucault and others have merely opened up this historical moment, and the late eighteenth and early nineteenth centuries remain intriguing for their shifting scene of discourses. We may understand this time as being particularly characterized as a period when ". . . traditional medicine, folklore, legends and superstitions weave[d] their elusive way into medical and para-medical discourse on sexuality" (Bouce, 1982: 30). Thus Paul-Gabriel Bouce who examines popular publications of the time, such as Aristotle's Compleat Masterpiece in Three Parts; Displaying the Secrets of Nature in the Generation of Man, contends that in these handbooks on sex we may see "the dividing line between 'beliefs' and 'myths' [which] is often blurred by constant symplectic interpenetration" (ibid.). He points out that we cannot read the history of this time (nor of any other) in a linear manner: that medical "beliefs" do not easily supplant myths. (Bouce characterizes this tension as "the often violent collusion--and also collision--of the most secret impulses of the individual psyche with the imperative pressures of our social existence" [ibid.].) Put simply, one cannot read off the surface of history, but rather, we must consider the contradictions that are thrown up when several discourses simultaneously place individual practices: sexual or otherwise. As Robert Castel has said of the case of Pierre Riviere, we must look to how the

discourses of "the law and medicine each tried to appropriate Riviere's act . . . with regard to [producing] knowledge" (in Foucault, 1975: 252). In a similar fashion, we shall see that accounts of anorexia from this period reveal the flux of the competing discourses which attempt to place, and hence produce knowledge of, the starving female body.

In his forward to I, Pierre Riviere, Having Slaughtereed My Mother, My Sister, and My Brother . . ., Foucault explains the reasons for choosing to collect and publish documents concerning the arrest and trial of a young man who committed paricide in the nineteenth century. This obscure case of murder which took place in a small village in France, interests Foucault not only because it overtly deals with madness (the genealogy of which he traces in Madness and Civilisation [1965]) but also because this individual case allows us to see "a battle among discourses and through discourses" (1975: x). Foucault furthermore points to how through an examination of the documents of the doctors, lawyers, and Riviere himself, we may:

draw a map, so to speak, of these combats, to reconstruct these confrontations and battles, to rediscover the interaction of these discourses as weapons of attack and defense in the relations of power and knowledge (1975: xi).

Foucault also sees this particular mode of research into untangling the discourses which constitute such cases, as a larger epistemological project:

They give us a key to the relations of power, domination, and conflict within which discourses emerge and function, and hence provide material for a potential analysis of discourse (even of scientific discourses) which may be both tactical and political, and therefore strategic (ibid.: xii).

This approach is of much importance, for it gives us a cogent epistemological outline in analysing the power and movement of discourse in producing knowledge. I would also argue, however, that Foucault's project needs to be 'pushed' to include greater sensitivity to the aspect of individual agency in the positioning by discourse. My point should become clear as we examine a case which in some ways corresponds with Foucault's Pierre Riviere. This case of an obscure "starving girl" may equally allow us to untangle certain discourses as they struggle to appropriate a young girl's body.

i. Sarah Jacob: the Welsh fasting girl

In February 1869 Rev. Evan Jones, the vicar of Llanfihangel-ar-arth, wrote a letter to the newspaper of South Wales, The Welshman, wherein he described what he termed as a "strange case" :

Sarah Jacob, a little girl of twelve years of age, and daughter of Mr. Evan Jacob, Lletherneudd, in this parish, has not partaken of a single grain of any kind of food whatever during the last sixteen months. . . . Medical men persist in saying that the thing is quite impossible, but all the nearest neighbours, who are thoroughly acquainted with the circumstances of the case entertain no doubt whatever on the subject, and I am myself of the same opinion (Cule, 1967: 10).

The vicar ends his letter by suggesting that the "medical men" might find it worth their while to investigate "this strange case", and thus the battle begins. To briefly summarize the case, in 1866 Sara Jacob began her practice of starvation and her fasting ended on the 17th of December, 1869, with her death. Now the occurrence of fasting or starving young girls was, as previously mentioned, not rare. However, what renders Sarah's case of particular interest is that she died under the noses of practitioners from England's best medical institution, Guy's Hospital. The scenario is made even more intriguing by the fact that the doctors and nurses from Guy's did not intervene in arresting a death which apparently stemmed directly from simple starvation.

Let us now look more closely at the events leading up to her death. Apparently Sarah was taken sick in the early winter of 1867 and from that time remained in bed and gradually restricted her diet until by October of the same year she "was said to be taking nothing daily but a little apple, about the size of a pill, in a teaspoon" (ibid., 1967: 15). Shortly thereafter, she ceased eating and her parents claimed that she took no food whatsoever between the 10th of October 1867 and the 17th of December 1869. This state of affairs might have gone unnoticed if it had not been the parents' conviction that this was indeed a miracle, and that

their daughter was supported by "Y Doctor Mawr" (a Welsh appellation for 'god'). The aforementioned vicar was brought in to witness this occurrence. Strangely enough, the Rev. Evans remained rather sceptical until, after many visits, he too became convinced, and named her a miracle. Interestingly, it was Sarah's "perversity" of being dressed in ribbons and wreaths, not suspicion as to the authenticity of her fast, which delayed his acknowledgement of this "miracle". After the vicar's letter people from all over Wales and England came to the miracle of the fasting girl. Sarah seems to have responded well to these visitors who found her:

Lying amongst the pillows, her hair brushed back and held in place on top with a comb, flat on the sides Eugenie style, it was dressed with ribbons and sometimes crowned with a wreath. . . . more ribbons on the wrists, a blue one for the right and a black and white for the left. A victorine around her neck, a silk shawl over her shoulders, a small crucifix attached to a necklace and a testament in a small gloved hand (ibid.: 19).

In addition to her finery, Sarah's bed was strewn with "prayer books, hymn books, testaments, picture books and her own compositions", and thus she lay "reading aloud an open Welsh book propped behind by two others on her body" (ibid.). While John Cule, whose documentation I am using, does not make much of Sarah's appearance, I feel that this aspect merits our attention. How are we to read Sarah's behaviour? As mentioned, although the vicar came to be convinced of her status as a miracle, he did not think that the "Almighty" was

overly pleased by her garb. Moreover, it should be emphasized that the labelling of Sarah-as-miracle came from the Church of England, whereas the Jacob family was nonconformist, belonging as did the majority of the Welsh farming peasantry to the Congregational Chapel. Now, neither of these religions are given to much pomp in their worship, but of the two, the Church of England certainly offers more space for pagentry. It would seem possible that Sarah was attracted by the minimally more "colourful" church, and indeed the vicar states that she had attended the Church of England Sunday School, and that she had been "a precocious intelligent child capable of expressing her wishes, and so far as she could, of having them fully carried out" (ibid.: 12). If we consider for a moment the harshness of Sarah's environment: both spiritual and physical, ("the family farm house being a small and rude building of one storey . . . with the cattle in one end and the humans in the other" [ibid.: 11]) we may see that this "precocious" child may have actively sought out the more exotic English church. While I do not want to place too much emphasis on the consciousness of Sarah's affinity with one church over the other, it can be said that she did take up the rhetorical appeals of the Church of England. It should be remembered that the Church of England is a "high" church and that its rhetoric emanates from a ground which celebrates the suffering of the flesh to

a much greater extent than the "low" nonconformists. Indeed, as Sarah's mother later said to the vicar, "were not Men of God likely to be impressed with such mortification of the flesh, particularly in one so young?" (ibid.: 17). Thus, even before Sarah was discursively placed by the Church as a miracle she had also placed herself strategically close to that institution. The onset of the fast seemed to yeild two-fold; first, it afforded her a reason for staying quite literally at the heart of her family's attention (her bed became the central point in the cramped farmhouse), and secondly, the on-going starvation placed her in a position to be taken up by the Church (of her choice).

Unfortunately for Sarah, at this historical moment the Church's discourse did not pass unchallenged. In February 1869 the editor of The Lancet reprinted the vicar's letter to The Welshman. This started a rather vituperative exchange between clergy and medecine, with many caught undecided within the two. Thus Dr. H.H. Davies of Llandyssil, who had examined her as closely as possible, (the family refused to allow anyone to fully strip Sarah) wrote to the Croniel Cymru that he was "really and truely perplexed, well knowing that nothing is impossible in the sight of the Creator and Preserver of all mankind" (ibid.: 21). This was followed by a letter by the vicar to The Lancet referring to medecine as "universally acknowledged to be the most uncertain and

immature of all sciences". Not suprisingly the editor of The Lancet quickly replied that they found him "credulous for believing that a girl had existed so long without a particle of food or fluid of any kind" (The Lancet, May 1st, 1869: 624). In an interesting twist they also demanded of the vicar "how it is that he, in common with all Protestants, pooh-poohs the idea of miracles as related by the Romish Church in past ages?" (ibid.).

The upshot of this heated debate was that a rigorous testing of the case was to be held. There had earlier been an attempt at a surveillance of Sarah's fasting, but it was held to be invalid because the watchers were friends and neighbours who tended to doze off in their vigil. However this time Sarah was to be surveyed by:

. . .three reliable nurses from Guy's Hospital to watch the girl who has lately been the cause of so much curiosity in the public mind, and thus, once and for all, expose the imposition in which she has so long encouraged (British Medical Journal, 6, November, 1869).

Thus on Thursday, 9th December, 1869, the four nurses (an extra Welsk. speaking nurse was added) arrived and started their watch. It is important to note that this was to be only a watch and not an attempt at healing. This constitutes a rather amazing juncture, as the medical discourse quite literally takes over the ground of the Church, with its stated goal being not welfare but rather surveillance. Sarah's body becomes therefore the surface upon which to

inscribe the medical discourse and to delimit the realm of the possible. They were there to prove what the editor of The Lancet had earlier stated, that "if one knew the weight of a candle, and the rate of its consumption in burning, it would be easy to say how long it would continue to burn" (1869: 624). And so the watch lasted a little over a week until what the medical practitioners had expected to occur, did and the causality of their argument was proved to be right. By whatever means Sarah Jacob had previously sustained herself, within the sterilized environment enforced by her medical guards, she starved to death just as surely as the abovementioned candle would burn out.

Certainly this was a sad if predictable ending, but what are we to make of this case? Are we to ascribe blame as the ensuing trial attempted indecisably to do? Is this merely another example of the progression of rationality clearing away superstitions, of finally bringing to an end "the age of miracles [which] did not seem to be done with in nineteenth century Wales"? (Cule, 1967: 9) Is this only the replacement of one discourse with another with an unfortunate death caught within their sliding? These questions could probably all be answered in either the affirmative or the negative depending on which side of the discourse one stands. However, let us briefly consider the case from the silent standpoint of Sarah and try to consider what kept her placed

within the acting out of the medical discourse.

I have tried to pull out what she might have found within the Church's naming of her as a miracle, and have hazarded that there may indeed have been enough offered to her within that discourse. By this I do not mean overt reasons; but rather that the hegemonic pull of the Church's discourse was strong enough for her to invest herself in it. In other words, the substance of the Church's discourse contained her act and gave it meaning while affording her some small pleasure. By this I do not intend merely the joy a young girl might reap from dressing-up, but a deeper pleasure that emanates from being wholly emeshed within a discourse. While I shall later return to this case, at this point I would like to briefly consider Sarah's positioning within the discourse of the Church.

If one were to follow some fairly current theories of subject positioning, we would have to conclude that she was merely "hailed" by one dominant discourse and then another. Or, if we were to apply contemporary notions of anorexia, we might say that the Church fulfilled the same function as the fashion industry which somehow compels young women to fiendishly emulate the dictates of emaciated models. Or again, through a Foucauldean reading we would see that the discourse of the Church inscribed her as a miracle, and our interest would be focused on how the rival discourse of

medicine appropriated her body. While these points may be valid, and in the following chapters I shall more fully discuss them, I feel such readings would ignore the ambiguity of what it may be to be positioned within discourses. As we have seen, the Church, far from immediately placing Sarah within its realm, was rather sceptical. As for the "mirror" theory: while Sarah may have taken up the rhetorical appeals of the Church of England, the causality of seeing her fast as emulation again empoverishes her act. It also would ignore the contradictions that she lived: reading aloud from prayer books while garlanded like Ophelia. All this is not to say that she was not inscribed within the discourse of the Church, but that this inscription is problematic. Indeed, the inscription of individuals is a highly complex process, in which contradictions between and within various discourses are played out.

To understand the relationship of Sarah's death to the discourses of her time requires careful study. We have to take into account that there was some agency on Sarah's part that kept her within that discourse, and also realise that her position was given by the discourse of the family. Sarah's act of fasting cannot be easily categorized as mere inscription or positioning. It was an ambiguous act that allowed her to some extent to incorporate and give meaning to the contradictions that she lived. Furthermore, being

defined as a miracle encapsulated and redefined those contradictions while nonetheless producing others. In simple terms, a precocious young girl born into a large and poor Welsh farming family was able to negotiate and articulate her existence into a privileged and pivotal point within the discourses of the family, the Church, the country of Wales, medicine, and after her death, the law.

Thusfar I have tried to show that anorexia is not merely a simple condition which exemplifies the contradictions of our times. I have indicated the necessity of considering how the anorexic body has historically been defined and inscribed. Furthermore, I have intimated that anorexia can be taken as a practice or a strategy for negotiating discourses. Indeed, I would suggest that the anorexic is negotiating many discourses and that her denial is in fact polysemous. I would further contend that such research into anorexia allows us to consider more closely the movement of discourses as well as individual inscriptions within them. In exploring the possibility of agency within the positioning by discourse, we also deeply question how individuals come to have meaning, and a sense of self. In other words, these concerns raised about inscription and positioning do not only touch anorexics, but should bring to the fore how we all are shot through with definitions. The anorexic body, simultaneously talked about and yet silent, as

an instance of this, reveals the middle ground between the representational claims (and discourses) of a society, and the social, cultural, and economic practices which support them (Treichler, 1984: 69). In considering the anorexic we are confronted by the dense multi-sanctioned nature of discourses, and moreover must consider how individuals invest in and negotiate these inscriptions. As the case of Sarah Jacob illustrates, we are inscribed variously and multiply. The Church, the Law, the Economy, and Medicine all make claims upon the body, as they attempt to constitute its meaning. In our times it is the Medico-Legal which has most successfully claimed the anorexic body, and it is to this discourse that I shall now turn. I will consider how the contemporary medical discourse inscribes the anorexic body, and also examine its complicity with other discourses. I shall argue that this discourse is not monolithic and that different lines within it position the anorexic in various ways. However, we will consider how in its different forms and multiple inscriptions of the anorexic, the medical discourse nonetheless reproduces the dominant discourses of the family, sexuality, and the female form.

REFERENCES FOR CHAPTER I

- Bliss, E. L., and C. H. Hardin Branch. Anorexia Nervosa: its History, Psychology, and Biology. New York: Hoeder, 1960.
- British Medical Journal. November 6, 1869.
- Bouce, Jean-Gabriel. "Some sexual beliefs and myths in eighteenth-Century Britain." Paul-Gabriel Bouce. ed. Sexuality in Britain. Manchester: Manchester University Press, 1982.
- Boskin-Lodahl, M.. "Cinderella's step-sisters: A feminist perspective on anorexia nervosa and bulimia. Signs: Journal of women in Culture and Society, 2: 342-356, 1976.
- Carter, Angela. The Sadeian Woman and the Ideology of Pornography. New York: Harper Colophon, 1978.
- Chernin, Kim. The Obsession: Reflections on the Tyranny of Slenderness. New York: Harper Colophon Books, 1981.
- Cule, J.. Wreath on the Crown. The story of Sarah Jacob, the Welsh fasting girl. Llandysul: Gomerian Press, 1967.
- Davy, Kate. "Buying and Selling the Look." Parachute, 40: 20-24, 1985.
- Foucault, Michel, ed. I, Pierre Riviere, Having Slaughtered My Mother, My Sister and My Brother . . . translated by F. Jellinck. New York: Pantheon, 1975.
- Foucault, Michel, ed. Herculine Barbin. Being the Recently Discovered Memoires of a Nineteenth-Century French Hermaphrodite. translated by Richard McDougall. Brighton: The Harvester Press, 1980.
- Jameson, Fredric. "Pleasure: A Political Issue." Formations of Pleasure, London: Routledge & Kegan Paul, 1984.

MacLeod, Sheila. The Art of Starvation. London: Virago, 1981.

Paz, Octavio. Early Poems 1935-1955. Bloomington: Indiana University Press, 1973. Also cited in Arthur Kroker, "Modern Power in Reverse Image: The Paradigm Shift of Foucault and Parsons." in The Structural Allegory. ed. John Fekete, Minneapolis: University of Minnesota Press, 1984.

Skrabaneck, Petr. "Notes toward the history of anorexia nervosa". Janus, 52: 109-128, 1983.

Treichler, Paula, A.. "Escaping the Sentence: Diagnosis and Discourse in 'The Yellow Wallpaper'". Tulsa Studies in Women's Literature, 3: 61-77, 1984.

Turner, Bryan, S.. The Body and Society: Explorations in Social Theory. Oxford: Basil Blackwell, 1984.

Weeks, Jeffrey. Sex, Politics and Society. London: Longman, 1981.

CHAPTER II

ANOREXIA NERVOSA AND THE SUPERIMPOSED SUBJECT

[s]he who's concieved in a cage will weep for a cage.
Horrrified, I understood how much I love
that cage, where they hide me behind a screen . . .
Yevgeny Yevtushenko (1971: 173).

What is the nature of the entity that must
already exist in some prior form in order to
recognise himself in the interpellation?
Julien Henriques (1984: 97).

In the previous chapter I presented the historical underpinning of anorexia nervosa in order to point to both the significance of the naming of this condition, and by way of a nineteenth century case of anorexia to illustrate the appropriation of the anorexic body by different discourses. In discussing the case of Sarah Jacob I looked at how the discourses of the Church and medicine vied for the body of the starving girl, eventually killing her in their struggle for supremacy. However, I also ventured that Sarah placed herself within the reach of several discourses by her act of fasting. While I do not want to argue that her action was wholly conscious, and thereby merely sado-masochistic, I do think that an important point arises from her example. Her

case illustrates that anorexia cannot be neatly defined as a modern condition caused by affluence. Indeed, what we saw in her instance was the ambiguity of anorexia: the multiple meanings produced by her starvation and in the movement of discourses attempting to claim her body. In other words, while Sarah's act shows up the shifting discourses of the time, we must also acknowledge that it placed her in a privileged position within the discourses of the family, medicine, and the Church. In the fourth chapter of this paper, I shall more closely consider how anorexia may be an embodied strategy; thus supposing an element of agency. However, for the moment I wish merely to open up current interpretations of anorexia in order to consider more clearly how the contemporary medical discourse positions anorexics. Moreover, this will allow us to look at how the medical discourse articulates and defines an essence of the family, and female sexuality.

As discussed in the previous chapter, it is around the mid nineteenth-century and with the work of Gull and Laseque that anorexia enters the realm of the medical. It is also the time that medical science becomes entrenched within the public sphere. However, we should not understand the solidification of the medical as a simple arbitrary fact of the "progression" of a discipline, but rather as a discursive staking out of territory. The establishment of the

discourses of medicine and science coincided with other emergent discourses of the nineteenth century: urbanisation, industrialisation, economics, sociobiology, etc., which thus produced new "meanings" for Western European society. These articulated discourses redefined the structure of society and changed the discursive arrangements of the social order. The family is a prime example of a discursive site altered by the emergence of these discourses, and is best seen in the ordering affects of the medical discourse. The credibility of the medical is largely dependent on how, as a discourse, it repositioned the family; the family came to be both within the public gaze, and a private institution. The family, then, with the medical discourse, became an articulating agent between the public and private. Of course, the distinction of public and private did not arise in the nineteenth century, but it was to a certain extent redefined by the emergence of the medico-legal discourse. Moreover, it was in the name of the family: a unit to be cared for by the medical discourse, that the State entered the private sphere. Not surprisingly, it is at this time that we encounter "illnesses" such as anorexia and "hysterical conditions" in general, which are defined as very private affairs requiring the intervention of the medical. The fact that the "sufferers" of these ailments were mainly women: and thus the members responsible for the wellbeing of the family, made it

all the more imperative that their illnesses be brought under the public scrutiny of the medical discourse.

So while we may say that anorexia was made evident by nineteenth century medicine, we should also consider how and why this condition and others were taken up by the medical discourse. The answer in part lies in how the medical penetrates and articulates both the private and public spheres. In using Stuart Hall's sense of articulation (1985: 91), I wish to indicate two things. First, the medical discourse both articulates or utters a phenomenon as an illness, and thereby creates it within public discourse as such. Second, we find that the medical discourse takes up conditions previously considered private matters and articulates or connects them to the public sphere. At the same time that the medico-legal discourse depends on the discursive entities of the public and private in articulating certain conditions such as anorexia, it reproduces and legitimizes the conditions for the maintenance of the public/private dichotomy. Indeed, the emergence of an identifiable "social" in nineteenth-century Europe coincides with (and is co-dependant on) the solidification of a medico-legal discourse. As Gilles Deleuze, points out in his introduction to Jacques Donzelot's The Policing of Families:

. . . the state is a hybrid domaine . . . [which] leads to a new hybrid form of the public and the private, and itself produces a repartition, a novel interlacing of interventions and withdrawals of the

state... (1979: x).

It is precisely this process of hybridization: the discursive shifting and rearticulation of institutions, that we saw in the case of Sarah Jacob. When the medical discourse in the guise of the spectators from Guy's Hospital enters into Sarah's bedroom, we are witnessing not only the emergence of the dominance of the medical discourse over that of the Church, but also the interpenetration and articulation of the public gaze upon the private family. Within the discourse of the Church Sarah's act was essentially regarded as a private act of communication between "Y Doctor Mawr" and one of his vessels. We should note that the Church pays little heed to the family; the parents' actions as regards their starving daughter are of little concern. This, however, changes radically when the medical practitioners are in place, and the family is scrutinized as closely as Sarah herself. Thus public institutions become the regulators of the private sphere. Moreover, the shifting positioning of the family becomes clear after Sarah's death at the ensuing trial. The trial was to ascertain the guilty party in Sarah's death, and in its distribution of culpability we may understand the redefinition of family and of children within the public glare. It was deemed that the family was more responsible for her death than the nurses from Guy's because children were private possessions. Moreover, the mother was

held particularly guilty as by her nature she should be more responsible for her offspring. Thus we may see the emergence of what Barrett and McIntosh term as:

the underlying assumption that children are a private possession. Though they are to join society and be its future members, they are produced by and for their parents (1982: 50).

This is to say that the family can never be entirely private, holding as it does society's "future". Thus the private and public spheres are "joined" by that hybrid institution, the family. At this point we can begin to trace the solidification of the modern discourse of the family and the emergent typification of the roles to be played within that institution. As Selvini Palazzoli sees it, "the raising of offspring amplifies two common phenomena in Western culture, the obsessive primacy afforded the well-being of the child and the subordination of the rights of the parents" (1985: 201). In other words, we see that children are private possessions to be regulated by public strictures, with the mother and the family as the articulation between the private and public spheres.

Thus the dichotomized roles of the modern family come to be delineated. The movement towards the solidification of the roles of parents and children corresponds with the sanctioning of the family as a private domain by the medico-legal discourse. However, the lines that have supported the family in this position are complex, the proof being that

institution's endurance. In pointing to the family's persistence I do not mean that it has steadfastly stayed the same in the face of all odds. Rather I wish to underline the kaleidoscopic power of the family-as-institution; or how the family is continually re-centred within various discourses. (We have only to think of the contest for the family now waged by such differing concerns as the ultra-right, certain strains of feminism, and of course liberalism, to see how articulations of the family become central pivotal points within disparate discourses.) While it would be beyond this paper's scope to historically chart all the interwoven lines which have sustained the family, the contemporary anorexic does give us an image of the ideal family gone astray. We shall see that one of the common assumptions concerning anorexia today, is that of the perfect daughter within a well-ordered family. As such the contemporary description and treatment of anorexia is a privileged site by which to consider the nuances of the discursive construction of private and public realms. The anorexic provides us with a rupture into the nexus which is the ideal Western family. As Barrett and McIntosh remind us:

the contemporary family . . . is the focal point of a set of ideologies that resonate throughout society. The imagery of idealized family permeates the fabric of social existence and provides a highly significant, dominant and unifying, complex of social meaning (ibid.: 29).

One ideology which runs through and sustains the contemporary

family is that it is self-sufficient, and that problems are to be regulated within its confines. However, the anorexic who is outwardly "well-behaved" and conforms to her role within the family, disturbs the sanctity of the contained family; her radical starvation eventually brings in the outside in the form of the medical. In that the popular imagery of the anorexic has her placed within the upper-middle class we can readily see that the starving "golden girl" (as in Hilde Bruch's The Golden Cage) does indeed rip apart the facade of happy families. Susan Brownmiller is among several who have commented on the perfect-ed image of anorexia:

The typical anorectic [sic] usually comes from a privileged background and she is often described as an overachieving perfectionist whose obsessive pursuit of thinness has crossed the line into self-destruction (1984: 49).

Here Brownmiller expresses the popular discourse on anorexia, and she also articulates some of the ideologies that sustain it. Thus we have the conception of anorexia as constituted by a "privileged background", and "an overachieving perfectionist". There is, however, more to it than this. If we understand the deep significance of the family in Western society that Barrett and McIntosh point to, it becomes evident that anorexia cannot be regarded as an isolatable medical problem. Therefore it is my contention that anorexia not only lays bare the discursive construction of the family and the articulation between the medical and

the family, but that it also illuminates the lines between female sexuality, the family and the medico-legal. In so doing anorexia troubles the very "complex of social meaning".

At this point we should examine the two medical approaches to anorexia which have been largely responsible in bringing anorexia to the public's notice. In turning to the work of Hilde Bruch and that of family therapists, I will focus on how their conception of anorexia articulates the anorexic to the discourses of the family and female sexuality. Let us first consider the work of Bruch, who is recognized as one of the clinical pioneers in the recent research on anorexia. Her work is of importance here not only because of its longevity, she has studied the field for more than thirty-five years, but also in regard to the interest and influence she has brought to the clinical study of anorexia. Furthermore, Bruch's definition, to a large degree, has come to be the popular conception of anorexia. Thus her designation of anorexia as "the golden girl disease" is the public discourse (if one can call it that) on anorexia, and resonates through the popular media and is especially found in "women's magazines". Bruch identified three characteristics which are now accepted as fairly standard features of anorexia:

first, severe disturbances in the body image, the way they see themselves; second, misinterpretations of internal and external stimuli, with inaccuracy in the way hunger is experienced as the most pronounced symptom; and third, a

paralyzing sense of ineffectiveness, the conviction of being helpless to change their lives (1978: x).

Bruch goes on to say that "it is against this background of feeling helpless vis-a-vis life's problems that the frantic preoccupation with controlling the body and its demands must be understood" (ibid.). It should be pointed out here that Bruch is talking about pre-illness features. When we consider that probably the majority of Western teenagers have experienced these feelings at some time, it is clear that the criteria are a little vague. In a similar manner Bruch states:

I am inclined to relate it to the enormous emphasis that Fashion places on slimness. A mother or older sister may communicate through her admonitions or behaviour the urgency to stay slim . . . magazines and movies carry the same message, but the most persistent is television, drumming it in, day in day out, that one can be loved respected only when slender (1978: viii).

So what is Bruch saying here? First, we can see that her description of anorexic symptoms not only point to what may be considered as sentiments generally associated with youth and adolescence, but also that the emphasis is placed squarely upon the individual. In much the same manner as the current popular writings on "normal" youth, we hear in Bruch an assumption that the individuals are somehow at fault. The work of Lawrence Grossberg on youth and popular culture has repeatedly pointed to, and opened up "the elitism of the current denunciations of the new youth" (1986: 14). From a clinical perspective, Bernice L. Rosman et al. have stated

that "most of the studies of anorectics [sic] have been undertaken from a particular vantage point: that the pathology of anorexia is localized within the identified patient" (1977: 341). Although I do not wish to suggest that the work Grossberg and Rosman have much in common, there is an interesting resonance that suggests that the overprivileging of the individual as victim or dupe is not limited to medical discourse.

If we now turn to Bruch's second assumption of the equation between fashion and media and anorexia, we hear an even stronger construction of the anorexic individual as empty repository for media and cultural dictates. It seems that in much the same way as the moral panics over television violence centre on a directly causal relationship between television's content and children, we have the fashion industry linked immediately to anorexia. Bruch's mention of the mother or older sister is an intriguing and problematic qualification of this equation. In her depiction of the family as an amplifying transmitter of media values, we may hear the rattle of Lazarsfeld's "two-step flow of communication" model. While I do not want to enter into a discussion of Katz and Lazarsfeld's Personal Influence, I should briefly mention that although their work in the 50's helped to problematize the nature of media influence, they were unable to rid themselves of the apriori conception of

the empty dope/dupe-like nature of the individual viewer.

In shifting back to Bruch, let us consider the contradictions that lie in her articulation of media, family, and the individual anorexic. As mentioned, and to give Bruch the benefit of the reading, she does gesture to outside factors in her analysis of anorexia. However, these exterior elements are conceived of as contained entities which both catalyze and amplify the inherently individual pathology. There is no sense of how these factors (or what I call the discourses of the family, media, female sexuality, etc.) interpenetrate at the site of the body. In other words, the idea that these discourses are merely discrete external variables precludes any consideration of how they are individually experienced. It is therefore hardly surprising that Bruch's work pioneered the notion of anorexia as an upper-middle class, white women's disease; this classification is dependent on, or is given substance by an articulation of class and a set of phenomenological experiences. These experiences: lack of control, misinterpretation of their bodies, etc., are rendered problematic and thus symptomatic in their linkage with a specific discourse of class. Condensed together these categories produce knowledge of the anorexic body. As Kenneth Burke has said "'knowledge' may be a 'short-hand term' for a situation or set of circumstances implying how such a claim relates to other claims" (Crabble,

1982: 250). In this way the "knowledge" that anorexia is an upper-middle class condition implies other claims: that certain classes are more "naturally" concerned with perfection, and with their bodies than others. This normalized articulation of class and anorexia then stands without any real exploration of the connection between the two claims. In other words, Bruch (and others) have constructed anorexia as a discursive entity which signifies wealth, "having it all", and an over-zealous striving for perfection. The material grounds of anorexia--women's frustration with their daily conditions of existence--are thus lost, glossed over, and rendered invisible. The discursive ordering of anorexia as an upper-middle class condition implodes into ahistorical meaninglessness, and effectively cuts off any exploration of how anorexics experience their very different social conditions. Put simply, Bruch constructs a model of anorexia detached from a social aetiology; the "girl in the golden cage" is wired to the outside world with the family as backdrop.

Current research reveals that there is little empirical substance in the reification of anorexia as an uppercrust condition. Susie Orbach and other therapists such as M. Fichter, and Selvini Palazzoli are finding "that the pattern of symptoms covers a rich variety of experience" (Orbach, 1986: 18). Orbach states that her patients range from "those

who are academically inclined to those who are prostitutes" (ibid.). Fichter et al., conducted a transcultural study of Greek adolescent girls living in Greece and immigrant Greek girls living in Germany. They found that while the girls in Greece had stronger feelings about their weight and appearance, there was a much higher prevalence of anorexia among the immigrant girls (1983). While Selvini Palazzoli has correlated anorexia with affluence, this was mainly documented in the immediate post-war situation in Italy and is hardly congruous with Bruch's notion of a stable North American upper-middle class ("hospitalizations for anorexia started in 1948, concurrent with the explosion of the Italian miracle", Selvini Palazzoli, 1985: 199). Thus, this literature strongly suggests that there are other material factors at work, such as periods of intense cultural transition. Moreover, the political ramifications of condensing anorexia, as Bruch does, to a small select group are readily apparent; among other things, in very real ways it reproduces a conception of sequestered sensitive femininity. This is strongly reminiscent of nineteenth century notions of hysteria which served to contain the multiple contradictions lived by Victorian women within the aegis of frailty. Much like hysteria, anorexia also cuts across class lines. On an epistemological level, the construction of anorexia as contained within a discursively bound social

category serves to reproduce the conditions of powerlessness for anorexic and non-anorexic women alike, as it ignores the specificity of women's practices.

At this point I would like to consider Bruch's suggestion that "the mother or older sister may communicate the urgency to stay slim". While this is slightly more subtle than Peter Dally's contention that "the mothers of many anorexics were frustrated and hence overly ambitious for their daughters" (1969: 24), both comments similarly resonate. However, Bruch takes the family as a natural given, with normalized roles and lines of influence between the anorexic and her mother. So therefore within Bruch's logic the mother merely serves to pass on society's messages: mother as transmitter of patriarchal values. Dally's comment, however, crudely focuses upon the family. In his system the roles within the family, and especially the sexual division of labour within it, are more actively in play. Indeed, it is very difficult not to read his observation of the mothers' deviance as a deep act of transgression against patriarchal order, which brings the supreme retribution of losing the daughter. As Ann Ferguson has pointed out "sexuality in a male-dominated society involves danger" (1984: 10); ambitiousness being a sign of male sexuality apparently not to be taken up by women. While I could expand on Dally, a seemingly more interesting, and certainly more

nuanced perspective dealing overtly with the anorexic in a familial context is that of family therapy.

Let us therefore examine the other current mainstream clinical practice in dealing with anorexia; this is to move from Bruch's "intrapsychic" conception to a "psychosomatogenic" family model. The founding practitioners of this mode of interpreting anorexia in North America are Rosman, Salvador Minuchin and Lester Baker. On the surface it is hard to disagree with these authors when they state that they "are attempting to describe the multiple determination of symptoms, the multiplicity of symptoms, and the symptoms carried by different members" (1978: 51). The reservations voiced about Bruch's dismissal of the family should be assuaged by the assertion that:

we approached anorexia nervosa from a different point of view--namely, that of locating the problem right in the system of familial relationships in which the patient is engaged (Rosman et al., 1977: 342).

Furthermore, we are told that the family therapy model "implies a recognition that the behavior of individuals is shaped by the social context in which they exist" (ibid.: 344). This description of their approach to anorexia seems to push towards a perspective which could encompass the complex of discourses that work upon the female body, not to mention an inkling of the experience of those who "carry the symptoms". However, it soon becomes clear that the anorexic is to be found confined within the discourse of the family.

That she may be unhappy therein is not overlooked and indeed seems to a central point of entry by Minuchin et al. into the deeper problems of the particular family system. While it is important to note that these therapists have moved away from a point of view of the anorexic as individually pathological, there is an equal danger in reifying individual roles within the family system. To illustrate this hesitation let us consider this description of "the conceptual model of the psychomatogenic family":

There was not . . . an anorectic 'type' of family. What was proposed was a model for a type of family whose organization predisposed or supported somatic symptoms as an expression of emotional distress; further, that the somatic bearer was not merely the recipient or expressor of emotional stress in the family but, in a dysfunctional kind of way, was the reliever of such stress (ibid.: 342).

To unpack this quote, we can first identify that there is an obvious pull away from establishing a set of symptoms that can be said, as such, to be "anorexic". However, this attempt to work around the diagnostic process is followed by another grouping of organizational structures which are indeed the "symptoms" of the anorexic family. To put the rest of this quotation into other words: we may understand that the organization of a certain type of family lends itself to somatic (nervous symptoms manifested in bodily) disorders which express discontent within and among family members. In so doing the sufferer relieves the stress within the family. At this point it is important to remember

that this model is applied to all manner of problematic situations, and not just anorexia.

So how are we to read this approach? On the surface it does seem to acknowledge that the anorexic is not in a vacuum, and there is also an attempt to break out of a linear cause and effect mode of seeing the anorexic. However, in this model the anorexic's act completely disappears into the category of "dysfunctional": albeit a dysfunctional role that helps to keep the system going. To quote Rosman et al once more:

a specific family model of psychosomatic illness in children was developed which identified . . . the 'economic' principle which powered the symptom-maintaining system--the involvement of the child as a detourer of parental conflict who thereby protects the system (1977: 344).

It should perhaps also be mentioned that when the anorexic is stabilized ("in hospital patients are placed on a behavioral paradigm in which participation in activities is made contingent on weight gain" [ibid.: 345]), the problems within the family which occasioned the anorexic's dysfunctional response are attended to. The political implications of this approach are somewhat astounding and may be rendered more evident if we substitute another example in the place of the anorexic. If we consider the case of incest, would we be able to countenance the notion that the abused child represents a dysfunctional role that "relieves" the stress of the identified family? Furthermore, would a sanctioned

strategy be one of placing the child in a punitive position while the "other" problems of the family were seen to? While my example may strike as overly pushed, I wish merely to open up how this clinical approach articulates the problematic discourse of the family to the anorexic.

Obviously it is beyond the scope, nor is it the object, of this paper to enter into a detailed critique of family therapy. It is a relatively well-established discipline that extends into, and is the partial legacy of many intellectual domains: most notably the work of Bateson, Watzlawick, Beavin and Jackson. As a therapeutic model it claims many, apparently easy and rapid, successes. However, it is not on the grounds of its self-purported gains, but rather from an epistemological perspective that I wish to outline my critique. While there are some significant elements which differentiate family therapy from mainstream psychology, at this point I would like to quote Henriques et al. on the relationship of psychology to society:

Psychology is productive: it does not simply bias or distort or incarcerate helpless individuals in oppressive institutions. It regulates, classifies and administers . . . (1984: 1).

This critique offers us an interesting perspective on family therapy, in that the latter focuses upon the site of the family, and more particularly, is concerned with re-establishing the equilibrium of the family's self-regulation. However, in concentrating upon the family, family therapy

tends to gloss over the fact that this unit is probably the most ideologically "normalized" entity in our society. As a previous quotation from Barrett and McIntosh pointed out, the family has been "naturalized", articulated with other discourses, and rendered the model for our society. What I wish to emphasize here, is that the discourse of the family is an ideological construct, which fixes particular meanings for individuals. While family therapy can not sincerely be accused of totally isolating the anorexic from society, it does over-privilege and reify the family. This is not to say that the family context is not involved in anorexia, it certainly is, but rather that the anorexic and the discourse of the family are condensed together in an unproblematic way. This is to say that within the domain of family therapy the discourse of the family is taken as a universal structuring organism which then naturally orders relations within specific family units. On the part of most family therapists there is, of course, no active plan to reproduce "the ideal family", and it would be quite false to accuse them of consciously replicating a caricature of the all-American suburban unit. Equally, we can not say that there is some conspiracy in the public sphere to ensure that the family is arranged in such a manner as to make for easy regulation. The family in today's society is marked by its hybrid nature, so that while it doesn't exist in a vacuum neither is it an

empty form to be filled. What family therapy cannot contend with is that the roles within the family are over-determined constructs. By this I do not mean that these roles are inherent to the family unit, but that they are determined by the discursive structure of society. To say that the anorexic embodies the "dysfunctional" role, is to reduce her actions to being "symptomatic" of imbalance within the context of the family. It equally constructs the family as unproblematic. In conceptualizing the family in terms of systems, family therapy is unable to think of the anorexic's actions as signifying something outside of the family unit. If we understand that the family and its roles are articulated with other discourses, we may be able to focus more clearly upon what the anorexic is saying. We may also consider that the anorexic makes meaning of her actions across these articulated discourses, and is not confined to understanding herself as dysfunctional within one structure. This is to say that her practice makes sense across and in relation to her position in other discourses. Thus she finds herself articulated by her sex, her class, and her family. It is this discursive web that the anorexic negotiates.

I would now like to recall the quotations with which I opened this chapter. Yevtushenko evokes the experience of being born into captivity. In a poetic fashion this resonates with an Althusserian conception of being "always-

already" positioned by discourses (although politically the two are somewhat dissimilar). From a quite different perspective, one could envision the family therapy conception of anorexia as being similarly structured within the cage, or the system, of the family. In a twist which would be extremely foreign to family therapy, the poet points to how the inhabitant comes to love the cage. One of the vital absences in the family therapy mode of seeing anorexia is the anorexic; the young woman who has taken up anorexia is merely the object in the role. Even if we bracket family therapy's larger blindspot of the discursive interpenetrations of the family, we find no account of how the anorexic might place herself within the family. There is no notion of why it is anorexia, as opposed to other so-called deviant strategies, that she uses as a way of making sense of her situation. In a sense this is what Henriques brings up when he questions Althusser's formulation of the over-determined positioning of the subject. With the example of the starving Welsh girl I intimated that there might be some small pleasure in being hailed by discourse, or "recognised in the interpellation". While Henriques does not go quite this far in Changing the Subject, I think that it is between the some "prior form and the interpellation" which must be problematized. Interpreting anorexia requires that we look beyond both the reified family system, and Bruch's amaterial construction of what she calls

the "enigma" of anorexia. While indeed anorexia is an ambiguous act, its very enigmatic nature demands more exploration. In opening up anorexia we see not only the power of discourses to position, but we must also acknowledge that the negotiation of these interpellations and the individual significations that this may hold.

In turning next to theoretical rather than clinical work I wish to explore the limits of discourse, and the power and limitations of discourse analysis. With the site of anorexia in mind, I will examine the discursive structures which place women in our society. Furthermore, my concern will be to question what a Foucauldian analysis can tell us about how signification is generated across, and in the negotiation of, discourse. This is clearly not to say that signification can be experienced in any pure form devoid of any reference to historical and material practices. Our knowledge and experience is bound up and through actual and historical discourses, in conjunction with our particular material contexts. Moreover, I would contend that the anorexic illustrates that differing knowledges and signifying practices are produced in the negotiation of these discourses. The anorexic's act in many ways ruptures the lines of signification which fix meaning in our society. More painfully, or obviously, caught in the nexus of discourse as she is, the anorexic compels us to question

deeply the discursive structures which seem to position women so successfully. Moreover, the true ambiguity of the anorexic is that she consciously, or not, makes sense of herself across discourse.

REFERENCES FOR CHAPTER II

- Barrett, Michele and Mary McIntosh. The Anti-social Family. London: Verso, 1982.
- Brownmiller, Susan. Femininity. New York: Simon and Schuster, 1984.
- Bruch, Hilde. The Golden Cage; The Enigma of Anorexia Nervosa. Cambridge: Harvard University Press, 1978.
- Crabble, Richard. "Knowledge-As-Status: On Argument and Epistemology". Communication Monographs vol. 44, no. 4, 1982.
- Dally, Peter. Anorexia Nervosa. London: W. Heinemann Medical Books, 1969.
- Donzelot, Jacques. The Policing of Families. Foreword by Gilles Deleuze. Translated by Robert Hurley. New York: Pantheon Books, 1979.
- Ferguson, Ann. "The Sex Debate within the Women's Movement: A Socialist-Feminist View". Against the Current, September, 1984.
- Fichter, M. M., et al. "The Epidemiology of Anorexia Nervosa: A Comparison of Greek adolescents living in Germany and Greek adolescents living in Greece". in P. L. Darby, et al., eds. Anorexia Nervosa: Recent Developments in Research. New York: Alan R. Liss, 1983.
- Grossberg, Lawrence. "Dancing While the Troops are Marching". Civilization vol. I, no. I, 1986.
- Hall, Stuart. "Signification, Representation, Ideology: Althusser and the Post-Structuralist Debates". Critical Studies in Mass Communication vol. 2, no. 2, 1985.
- Henriques, Julian, et al.. Changing the Subject: Psychology, Social Regulation and Subjectivity. London: Methuen, 1984.

- Minuchin, S., Bernice L. Rosman, and Lester Baker.
Psychosomatic Families: Anorexia Nervosa in Context.
Cambridge: Harvard University Press, 1978.
- Orbach, Susie. "Accepting the Symptom: A Feminist
Psychoanalytic Treatment of Anorexia Nervosa". in David
M. Garner and Paul E. Garfinkel. Handbook of
Psychotherapy for Anorexia Nervosa and Bulimia. New
York: The Guilford Press, 1985.
- Orbach, Susie. Hunger Strike: The Anorectic's Struggle as a
Metaphor for our Age. New York: W. W. Norton & Company,
1986.
- Rosman, Bernice, et al. "A Family Approach to Anorexia
Nervosa: Study, Treatment, and Outcome." In Robert
Vigersky, Anorexia Nervosa. New York: Raven Press,
1978.
- Selvini Palazzoli, Mara. Self-Starvation: From Individual to
Family Therapy in the Treatment of Anorexia Nervosa.
translated by Arnold Pomerans. New York: Jason Aronson,
1978.
- Selvini Palazzoli, Mara. "Anorexia Nervosa; A Syndrome of
the Affluent Society". translated by V. F. DiNicola.
Transcultural Psychiatric Research Review 22, 1985.
- Yevtushenko, Yevgeny. Stolen Apples. Garden City:
Doubleday, 1971.

CHAPTER III

FINDING OURSELVES AMONG DISCOURSES

I think of a person as being divided into any number of parts, but as chiefly being divided into two parts: the experiencer and the experienced . . . and the experiencer is decidedly imprisoned by the experience
Julia Strachey (1978: 29).

In the previous chapters the notion of anorexia as an encapsulated contemporary condition has been deconstructed. Furthermore, the epistemological underpinnings of some of the major current clinical interpretations of anorexia have been unpacked. My contention in examining these conceptions and theories was to show how they work to contain the anorexic's act within one discourse, and how this results naturally in a one-dimensional reading of anorexia. By this I mean that anorexia's significance is generated within and bounded by the perimeters of one body of knowledge. Thus, within the various discourses we have looked at, the anorexic becomes subsumed in the following ways: a post-modern reading sees her as the screen of representation; Bruch's intrapsychic model closes her down, and ignores any active will she might have in her act of starvation; family therapy focuses so closely upon that unit as to leave no room for the

articulation of the family with other discourses; and the popular press worries about the epidemic of anorexia, which furthermore is constructed as purely contemporary. My point here is that the anorexic is all of these things: and more. These discursive structurings of anorexia preclude a recognition of the various meanings that this practice may have. By this I mean to indicate both the significance that anorexia has societally--as a remembrance that our everyday practices are never purely natural, but have been historically and discursively structured as such--and for the anorexic. Without romanticizing her actions, we can nonetheless concede that for her, anorexia has more than just one meaning. After all, this is a lucid and painful act on her part. In this chapter I will work through theoretically what precisely it might mean to find oneself confronted by discourse; or how the anorexic creates meaning for herself through and across those discourses.

In considering the anorexic's act, we are first led to question the notion of discourse as a totalized power. This conception of discourse as the uniform representation of State power is, in part, the legacy of the Frankfurt School. However, this pivotal (if blinkered) theoretical moment was given new, and different, blood when the work of Louis Althusser was published in English in the early 1970's. Althusser's essay "Ideology and Ideological State Apparatuses"

(1971) was certainly one of the more influential pieces in British marxist-structuralist thought. While it is not the object of this paper to engage directly with this (already past) debate, my argument requires some recognition of how Althusserian thought conceives of subject positioning. Here I can only take a small instance of one essay, and I wish to strongly emphasize that this is in no way to be constructed as metonymous of his very intricate argument. What is of importance to my present discussion, is Althusser's conception of the positioning of subjects by State institutions or "apparatuses". Thus when Althusser states that " the subject acts insofar as he is acted by ideology . . ." (1971: 169), we may understand that ideology "hails" subjects ineluctably, that the apparatus permits no individual aberration. However, as we have seen, anorexia can not be understood solely as an interpellation by the institutions of the family; in simpler terms, anorexia is not a reaction to one discourse or another. My contention is that anorexia occurs at a nexus of discourses, and this in turn leads me to say that it is a practice that makes sense across many discourses.

This is, of course, not unique to anorexia; as subjects in society, to some degree, we all experience ourselves through and across several discourses. Moreover, as with anorexics, there is also always the tension of institutions

to centre our subjectivity within a coherent set of dominant discourse. "Lifestyle" advertising is a prime example of a discourse which tends to draw us into an essence of ourselves. However, we would hesitate before saying that the discourse of the media actually does centre, or position us irrevocably within it. In our day to day lives, we are rarely challenged in our belief that that we are indeed more than mere numbers, or the sum of being numbered within varying institutions. We thus carry the assumption of being differentiated individuals quite easily, comforted as we are by the knowledge that there is an underlying "self"¹. This self I would take as an anterior underpinning, which may be illusory but exists inasmuch as it allows us to live with some notion of an identity over time. The self may also be understood as a nexus of subjectivities which is the result of individual negotiation. This is therefore to say that the self is not an a priori universal given, but exists in a particular and shifting articulation of our different subjectivities. Moreover, selves, as diffuse nexus of articulated subjectivities, negotiate discourses to differing degrees and in varying ways.

The lifestyle beer ad will hail us in another manner than will the discourse of an institution. A slight brush with any State apparatus, be it the police, the unemployment office, welfare workers, hospital or psychiatric wards,

schools, etc., will remind us that within these discourses there is little room for multiple or contradictory subjectivities. Within each of these discourses there is (what I will call for lack of a more elegant phrase) the pull, or the tension of discourse to centre us. This tension within institutions reveals their underlying ideology of the unitary subject: the discursive construction by these institutions of a true subject. However, anorexia cuts across this pull towards a one-dimensional construct of the self. The anorexic's act is an extreme and complicated response to the centring tensions of discourses. When she starves herself she may be responding to the cultural dictates of slenderness, so we might consider that she is placing herself within the discourse of the media's ideal woman. At the same time, however, she also stops menstruating, thus withdrawing herself from the physical realm of womanhood. Her obsession with exercise would seem to place her within the current discourse of fitness, but at the same time this preoccupation leads to death. Equally, her condition within the family seems to bring about an increased awareness of the prescribed roles of that institution, as it simultaneously shows up the cracks within it. In these ways and others, by disturbing and problematizing the notion of a discursively fixed self, her actions compel us look more closely at the relation of the

self and subjectivities to discourse.

In our society sexual identity serves to fix our subjectivities. However, Michel Foucault repeatedly brought to the fore the question of whether "we need a true sex?" (1980: vii). I would now like to turn to his later writings in order to consider how it came to be that at birth we are now encapsulated within a "true sex". This, I feel, will allow us to think about how a conception of a naturalized sex identity articulates with the idea of a self. In working through the problematic relationship of subjectivities, signification, and discourses I will look to what Foucault terms the "techniques of production, techniques of signification or communication, and the techniques of domination", and how these interconnect with "the technologies of the self" (1985: 367). In a posthumously published essay, "Sexuality and Solitude", Foucault briefly enters into an "autocritique" which makes me yearn "the death of the father". Drawing from the material of his second volume of Histoire de la Sexualite Foucault here explores the nether regions of the self which are thrown into highlight by the movement of differing dogmas, and discourses, over the areas of sex and sexuality. By way of example, he compares the texts of Artemidorous, a pagan philosopher of the third century, with Augustine's City of God. What Foucault brings out is that the early Christian teachings did not see the

self as illusion, but rather that within this discourse "one has to get free of any attachment to this self, not because the self is an illusion, but because the self is much too real (ibid: 368).

I am primarily concerned with two important implications of this statement. First, from a hermeneutical perspective, Foucault here nuances the Christian abnegation of the human body; the too "real self", the body with its pleasures and foibles, is seen to be a very real part of the "self". One might say that this hardly differs from the sinful post-Fall body of The Old Testament, however the the Augustinian "self" here obviously includes both body and soul. Thus the abstract soul is seen to be interpenetrated with the body. There is also a sense that the self exists anterior to the discourse of dogma: or rather, that there is " an indefinite spiral of truth and reality in the self" (ibid.: 368). Thus the "truth obligations" of dogma, and the reality in the self " have always kept a relative autonomy" (ibid.). While we no longer live with "dogma", it can be said that our "truth obligations" are contained in discourse, especially that of sexuality. Hence, we may consider that the "self" and discourse are on different planes. These planes obviously interconnect, but in a more random fashion than an Althusserian "interpellation" would suggest. The point, then, is to examine the constellation of discursive

planes and the self. It is my contention that the anorexic provides us with a privileged site, from which to consider the articulation of discourses to the self.

The second implication, which may help to clarify the above, directly concerns Foucault's project itself. The "self" can no longer be accounted for as simply a product of discourse: its experience within discourse must now be considered. Thus, in taking up anorexia, I wish to examine the differentiated pull of discourse. I would suggest that the anorexic compels us to problematize the notion of an undifferentiated, purely discursive self. The simple fact that we all live with many of the same discourses that the anorexic inhabits, and yet negotiate them quite differently, should lead us to question the relation of discourse to self. Furthermore, as the case of Sarah Jacob illustrated, this negotiation of discourse is not entirely passive. This point of articulation between discourse and self relates closely to Foucault's formulation of the "technologies of the self" which I will more fully explore later in this chapter.

Before entering in more detail into these "technologies", I would like to turn to a slightly earlier work of his which will allow us to consider more closely the question of a true sex and its relation to discourse. In that it would be fair to say that most of us take our sex as inextricably involved with a sense of self, (and here I do not mean that we

experience our sex unamiguously) the construction of sex through discourse may illuminate a further connection to the self. In Herculine Barbin Foucault presents us with "a document drawn from that strange history of our 'true sex'" (1980: xi). As previously mentioned, Foucault has here collected the memoirs of a young nineteenth century hermaphrodite, and the medico-legal documents which assigned to her a sex both during and after her life. Foucault was drawn to this case largely because he identifies the years from 1860 to 1870 as being a period when the most intense investigations were carried out "not only to establish the true sex of hermaphrodites but also to identify, classify, and characterize the different types of perversion" (ibid.).

Although we may question whether discourses appear this cleanly, it does seem that from the Middle Ages up to the late nineteenth century, neither canon nor civil law required that hermaphrodites immediately assume a single sex. Although at the time of baptism, the father or the godfather decided as to which sex was to be retained, the individual was free to chose his or her adult sex (le nom without le non du Pere?). Individuals were only penalized if, as adults they then again changed their minds. During the nineteenth century the medico-legal discourses began to more stringently identify a single sex. As Foucault states:

Biological theories of sexuality, juridical conceptions of the individual, forms of administrative control in

modern nations, led little by little to rejecting the idea of two sexes in a single body, and consequently to limiting the free choice of indeterminate individuals. Henceforth everybody was to have one and only one sex. Everybody was to have his or her primary, profound, determined and determining sexual identity . . . (ibid.: viii).

In much the same way that the anorexic body was appropriated within the rising discourse of medicine, we see here the curtailment of the hermaphrodite. Indeed the body and sex of Alexina, as the young hermaphrodite was known, provides us with a clear example of an embodied nexus of discourses. She was raised within the confines of the Church, and committed suicide after she was disabused of her lived sexuality, and told of the "truth" of her sexual identity. As a newspaper of the day said about the mis-naming of her sex, "this error is even more prolonged because a pious and modest upbringing keeps you in the most honorable ignorance" (ibid.: 146). To sketch out the details of this life, Alexina was given to a convent orphanage at a young age due to the reduced circumstances caused by the death of her father. She was then sent to a Church boarding school where she received a teaching diploma. The young woman left and went to teach in a small country school. The reassessment of Alexina's sex came about because of two reasons: one, she suffered from bouts of great pain which, when examined were found to be caused by the descent of one of her testicles, and second, her love-making with Sara, the other teacher, was revealed.

After many examinations it was discovered that Alexina's anatomy included a vagina-like opening along with a small penis. The scandal caused by these discoveries precluded that the Church school board would allow her to teach again, so Alexina worked in the railway yards until she was fired. Unable to find a job and grieving over her lost love for Sara she killed herself. She left behind her memoirs which ended with these words:

What strange blindness was it that made me hold on to this absurd role until the end? I would be unable to explain it to myself. Perhaps it was the thirst for the unknown, which is so natural to man (ibid.: 115).

There are so many lines woven together that in part constitute this individual's "absurd role" that one is hesitant to disturb and take up this rather tragic life. Perhaps the least painful way is to ignore the phenomenological import of her life, and chart, as Foucault did, the discourses which enclosed and defined her. Indeed, Foucault's treatment of Herculine Barbin is a good example of what some critics have pointed to, namely that what he does here is "prioritise a description of a process which is purely one of events" (Agulhon et al., 1981: 4). In fact the very physical outlay of Foucault's book seems to attest to his reluctance to go beyond the lines of discourse that held Alexina in place: after a brief introductory essay in which he says that he "would be inclined to call the story banal were it not for two or three things" (1980: xi) we have her

memoirs. This is followed by a collection of documents representing the discourses at work.

Before entering into a more extensive critique of Foucault's epistemology, let us consider the lines of discourse which were at work upon Alexina's body. Auguste Tardieu presided over the autopsy, and later incorporated the case into his Question medico-legale de l'identite dans les rapports avec les vices de conformation des organes sexuels (1874):

[This] extraordinary case . . . furnishes the most cruel and painful example of the fatal consequences that can proceed from an error committed at the time of birth in the establishment of civil status . . . the victim, after spending twenty years in the clothing of a sex that was not his own, at the mercy of a passion that was unconscious of itself until the explosion of his senses finally alerted him about the nature of it, had his true sex recognized and at the same time became really aware of his physical disability, whereupon, disgusted with his life, he put an end to it by committing suicide (1980: 122).

In this quotation we can quite clearly see the establishment of several "truths" about Alexina's sex. First, we may understand that the "truth" of her sex lies in both biology and in the fundamental "passions" which stem from her biological true sex. Woven into Tardieu's description of Alexina's erupting sexuality is a conception of male desire as more potent and wild than that of women. However, I think that we should also consider that the idea of an unnamed desiring sex would be deeply worrying to the nineteenth century (and contemporary) medical mind. Second, there is

also a hidden equation of a true sex and a true self. This is the source of a conundrum that Tardieu can not explore, caught as he is within the medical discourse of the time: why did Alexina kill herself when she was reconciled with true sex? In part what we see here is a conflict between the discursive construction of a "real" (or natural) self and the lived social self that Alexina had known for twenty years. In other words, what is revealed here is the fundamental contradiction between a supposedly natural sex that is biologically grounded, and a social sex which has been rendered naturalized through discourse. We should remember that the discursive formulation of Alexina-as-woman was carried out within the gaze of both the Church and the ecclesiastic schoolboard of the French middle class "provinces", and not in some Rousseauen wilderness. However, in the establishment of her sex the medical discourse proved itself to be the stronger in constructing and determining for Alexina what her true self was. It is interesting here to note the similarities and differences between Alexina and Sarah. Coincidentally, they died within a year of each other, both could be said to have committed suicide, and both suffered directly from the intervention of the medical discourse. However, I would argue that Sarah negotiated the discourses of this time more actively than was the case with Alexina. This may be explained in part, by the more overt

claims the medical put upon Alexina's sexuality and her self.

We can sense the tension between the social and the biological discourses that variously claimed Alexina, when she wonders why she held on "to an absurd role up to the end". Tardieu posits that it was "disgust at her physical disabilities" which lead to her death. While I do not want to enter into a diagnosis of this suicide, it does seem that the discursive pull of her "true" sex against her own sense of self was profoundly disturbing. By this I mean to indicate that the medical discourse appropriated her, leaving no space in which to negotiate this newly produced knowledge.

In a sense, Alexina was "put into discourse", into one discourse which effectively silenced all others. By this I mean that in naming her first as an hermaphrodite and then a man, the medical discourse produced knowledge which appropriated her previous subjectivities. Moreover, the knowledge of her true medical sex penetrated the silences that she had inhabited prior to her construction as man. The passions and desires that she experienced for Sara, the other school teacher, are now also put into discourse, and these hitherto innocent (or unnamed) pleasures come to be said in distaste. As Alexina simply decribed the medical investigation, " it displeased me to see him initiate himself into my deepest secrets" (1980: 78). In many ways, the case of Alexina shows us an extreme example of what Foucault calls

in The History of Sexuality, "an instance of discursive production" (1980b: 12). The "simple medical fact" of being discursively placed by her biologically true sex reverberates, appropriating silences within herself.

In spite of Foucault's interpretation, we should also consider that Alexina nonetheless possessed a sense of self which articulated with her medically fixed sex identity. This is to say that the fluid nexus which constituted her everyday self had to contend with and negotiate the new knowledge produced by the medical discourse. I take this latter production of knowledge to be part of what Foucault would term the "apparatus of sexuality". (1980c: 194). Moreover, this case can be seen as an instance of the shifting nature of the apparatus: the diffuse establishment of "the said as much as the unsaid" (ibid.). My reading of this case also points to how the sexual "naming" of Alexina interconnected with other discourses, and that the consequences of the medical discourse's intervention were multi-leveled. This leads me to contend that along with an examination of the "apparatus of sexuality" we must also consider what Foucault terms "a regime of practices". In a fairly recent interview, he referred to his work as being analyses of practices, and not merely of "'institutions', 'theories', or 'ideology'". We therefore should consider his project as investigations of :

'regime[s] of practices'--practices being understood here as places where what is said and what is done, rules imposed and reasons given, the planned and the taken for granted meet and interconnect . . . [furthermore, these] . . . types of practice are not just governed by institutions, prescribed by ideologies, guided by pragmatic circumstances--whatever role these elements may actually play--but possess up to a point their own specific regularities, logic, strategy, self-evidence and 'reason' (1981: 5).

While I do not want to enter into an exhaustive debate on Foucauldian terminology (which given the example of Power/Knowledge and other interviews, is a rather slippery task), I do think that an exploration of the connections between "apparatus" and "regime of practice" is important to the theoretical consideration of how anorexics are placed by the apparatus. This working through of Foucault's terms can also be seen as a first step towards an explanation of what I mean by "negotiation". This is not to say that Foucault is beyond critique for occasionally failing to work through his theoretical constructs within the body of his own research, as he notably neglects to do in Herculine Barbin. Indeed, in that work, he establishes a line of inquiry which remains firmly within the realm of the discursive, and his gaze upon the complex nexus of Alexina reduces the interconnections to a single plane of effects. Within Foucault's reading, the memoirs serve as a closure, and the placement of her text seems to end all discussion of how she may have negotiated the rather brutal naming that she underwent.

For Foucault, this obscure text invites a mere reading

"off the surface". I would suggest, however, that it offers more than that. Her memoirs serve as a rich instance of the articulation of the apparatus of sexuality with a particular regime of practice. In other words, her text allows us to see the lines of connection which articulate several discourses: of male sexuality as distinct from that of women, of the Church and the regulatory boundaries of the school, not to mention how the medical discourse interpenetrated this discursive field. Moreover, even as the case of Alexina shows up the elements of this apparatus, her love can be seen as an expression of herself which is, to an extent captured within these various discourses. However, it should also be understood as an act of signification which creates both discursive and non-(or extra-) discursive spaces within the apparatus. While this act of love between two individuals: one a young woman, the other sexed as woman but gendered as male, is articulated to other discursive structures, it is not wholly contained within discourse. By this I mean that her love-making with the young teacher occurred within the apparatus of sexuality, but it was also quite literally an act which was unnamed by that apparatus. On a very literal level, these lovers may have been aware of, and discursively positioned within a discourse of romantic love, but their act took place within a gap where Alexina's sexual identity was not just ambiguous, but absent. This aspect of the story of

Alexina, represents an instance which interconnects with the apparatus, and provides a glimpse of one plane interpenetrating another. In other words, what we may see here is the articulation of apparatus and practice, and within that moment we may be able to trace the emergence of a space that is not wholly confined and positioned within discourse.

It is this aspect of the extra-discursive that Foucault misses when he ascribes Alexina to the discursive shifting of sex. This attention to the "putting into discourse" of hermaphrodites is of course of interest from an archeological point of view, in that it gives us further material to consider the historical construction of sex. Her story produces knowledge which can be used to erode the "common-sense" understanding of sex as naturally and biologically given. Herculine Barbin makes it evident that the social sexing of individuals is an historical discursive construct, and the medical documents of the time should be read as flags staking out the permissible. The political importance of this type of deconstruction should not be overlooked as we find ourselves now confronted with the repeal of laws protecting sexual preference. Moreover, it is imperative that we show that heterosexuality, as well as the subserviant position of women within that institution, have been "normalized" through discourse. This type of investigation

is especially needed at a time when the right in North America has strengthened its attack on women's political gains, and on sexual practices, by drawing upon an ideology of "natural" sexual identity.

The exigencies of feminist politics, should not, however, lead us to be content with a short-sighted analysis. In considering this historical case of sexual construction, we should see that there is more at work than just the structuring of a sexuality through discourse. As I shall argue, an insistence on the discursive rendering of sex camouflages the deeper "emancipatory" spaces that this nineteenth century tale reveals. We must go beyond Foucault and consider the relation between the epistemology of signifying practices and instances of embodied negotiations. It is this direction that we must explore if we are to understand the anorexic's act as more than a discursive position. At this point, I think it would be helpful to explore more fully Foucault's theorization of the apparatus, and how this entity articulates with his idea of the "technologies of the self". I think that we may best first approach this concept through a theoretical examination of how an "apparatus" interconnects with a "regime of practices".

Foucault means many things by "apparatus"; he uses the term in a number of related ways. Its meaning, however, can

be grasped from the following, relatively cogent, description:

a thoroughly heterogeneous ensemble consisting of discourses, institutions, architectural forms, regulatory decisions, laws, administrative measures, scientific statements, philosophical, moral and philanthropic propositions . . .the said as much as the unsaid (1980c: 194).

Thus, the character of the apparatus is best understood if we think of it in play or in motion; the ways in which these conceptual entities shift and allow for openings. Thus, one should conceive of all the elements which Foucault brings out in his description, as being interwoven and interpenetrated. Although he does not spell out this aspect of the apparatus in any single space, we can piece together from his responses that:

The apparatus itself is the system of relations that can be established between these elements . . .what I am trying to identify in this apparatus is precisely the nature of the connection that can exist between these heterogeneous elements . . . this is what the apparatus consists in: strategies of relations of force supporting, and supported by, types of knowledge (ibid.: 194 & 196).

Here we can see that what Foucault emphasizes in his description of the apparatus, is the relations that exist between and among discourses, or institutions. Indeed, what becomes clear is that the apparatus operates on many planes. The apparatus is constituted through the way in which it constructs itself as subject and object: both producing knowledge and maintained by those knowledges. Furthermore, it is to "the nature of the connection" that Foucault draws

our attention. Thus, the apparatus exists in that it allows certain connections between discourse to be formulated. In a sense, it is only an arrangement that permits a certain constellation of discourses--which then reproduce the conditions of the apparatus. It is this essential aspect of the apparatus which coincides with what, following Hall, I have indicated by the term "articulation". As Martin Allor has pointed out in reference to the apparatus:

More particularly, the apparatus, the social machine, is constituted in the ways in which discourses work over the instrumental machine itself and articulate its mode of insertion into people's lives (1986: 136).

Allor here brings out an important reading of the apparatus which Foucault occasionally overlooks in his insistence upon the way in which the apparatus connects with "the technologies of domination". While "the discourses, the institutions", etc., are indeed an integral part of the apparatus, and do constitute "the technologies of domination", the movement of the apparatus upon and through individuals is complex.

Thus in the case of the apparatus of sexuality, it is hard to conceive of the apparatus as only a system of "technologies of domination". The example of the anorexic shows us that while the apparatus is always present, it is not limited to one set of effects. The apparatus is certainly the ground for the production of a dominant meaning of sexuality, but other readings are possible within that

field. This is because the apparatus is not homogeneous, and thus this articulation of discourses can be negotiated. In this way the anorexic can produce alternative meanings of the discourse of sexuality; she can negotiate the preferred reading of that discourse, and place herself in a position of some control. We should, therefore, refute the idea that the apparatus solely consists of technologies of domination which capture us within a discursive plane. We should not suppose that the significance of sex experienced by individuals is only produced discursively. Indeed, as the case of Alexina demonstrates, we can not say that the apparatus worked solely at the level of her discursive construction by the medical discourse. What we can see, however, is that the medical discourse, as an element of the apparatus, allowed for articulations or connections to be made. This in turn is what Foucault refers to as the "strategies of relations of force" which "support and are supported by types of knowledge". I would contend that these "strategies" may also be conceived of as negotiations which simultaneously produce the conditions for the possibility of practices of signification.

The contradictions within and between discourses and the negotiations carried out against and across them, constitute a site for the possible emergence of what Foucault has hinted at: namely that there are "forms of understanding which the

subject creates about himself" (1985: 367). To consider such a site is certainly to shift the emphasis away from a conception of the apparatus as characterized by the technologies of domination. Note, however, that a notion of specific negotiations of these technologies does not slide into a simple concept of individual free-will. Any negotiating practice, or individual signifying practice, remains specific to the context in which it is materially and historically grounded. It is precisely this important aspect that anorexia brings to the fore; her negotiation of discourse is context-specific, no matter how common the discourses are. What we must look at is how the negotiation of "common", or societal discourses is articulated into a practice, such as anorexia, which radically shifts the meaning of discourse. This is to consider the articulation of discourses to the particular entity of the self. In the next chapter I shall work through these theoretical assumptions in reference to the specific grounded context of anorexia.

At this point, I would like to briefly draw out some key points from the Foucauldian "regime of practices". This should also illustrate the difference between "negotiation" and Foucault's "practices" which:

analyse programmes of conduct which have both prescriptive effects regarding what is to be done (effects of 'jurisdiction'), and codifying effects regarding what is to be known (effects of 'veridiction')

(1981: 5).

First and foremost, this conception only obliquely touches upon how individuals live these "regimes of practices".

Moreover, I wish to emphasize that the concept of "negotiation" requires a recognition of the lived relation of individuals within the "regime of practices". The concept of the "technologies of the self" that Foucault formulated before his death, seems to point to an acceptance of the individual. Let us now mine this concept for its relevance to the conception of a negotiating individual. Therefore, for Foucault:

in all societies there is another type of technique: techniques which permit individuals to affect, by their own means, a certain number of operations on their own bodies, their souls . . . in a manner so as to transform themselves, modify themselves, and to attain a certain state of perfection, happiness . . . (1935: 367).

As this level of analysis was not fully developed and worked through in the work published before his death, it seems best to take what he says here as a gesture of projection.

So, what is Foucault pointing to here? There is, of course, a definite movement in a direction which could speak of individuals and their subjectivities. However, in that "this self-technology implies a set of truth obligations" (ibid.), can we equate this concept to one that recognizes practices of negotiation? I would contend that the idea of negotiation is important because it is grounded in the specificity of how discourses variously affect different individuals. This in

turn implies that we look at the significant and lived practices that arise from negotiation. It would seem that Foucault is still working on the level of discourse and the discursive construction of subjects: albeit individuated ones. Moreover, we would need to consider in what manner "truth obligations" are articulated to the apparatus. What is of interest here is the possible connection of "self-techniques" to a model of the self as a negotiating agent within the apparatus. Furthermore, from the perspective of the self as the fluctuating nexus of discourse, we will have to consider whether "truth obligations" are produced in the articulation of self and apparatus. By this I mean that what Foucault qualifies as "learning what is the truth, discovering the truth, being enlightened by the truth, [and] telling the truth", may have important implications when we look more closely at embodied examples of the self-negotiation of the apparatus.

Thus far I have sketched out the theoretical terrain across which any discussion of the self and discourse should pass. In closely examining certain Foucauldean terms, I have brought out some reservations and possible implications for an analysis of the lived experience of discourse. We have seen that Foucault's theorization of the apparatus remains a rich concept, and we have also considered the planes upon which it is seen to operate. In exploring one of Foucault's

"discoveries", I contended that the construction of a sexually gendered self is neither solely contingent on biological or discursive fixing. I would further suggest that, while the knowledges produced by these discursive positionings are important, we can not explain away ourselves this cleanly. In the following chapter I shall work these theoretical conceptions through the specific context of anorexia, and consider what the anorexic tells us of the self negotiation of discourse.

NOTES TO CHAPTER III

1 To briefly expand on the term "self": first, I do not mean to indicate by this concept that there is an anterior unitary self, which is somehow the "real" key to our experiences. Second, I am not referring to the psychoanalytic "I". I understand the "self" to be a nexus of subjectivities which are articulated together in particular, individual constellations.

REFERENCES FOR CHAPTER III

- Agulhon, Maurice, et al. "Questions of method: an interview with Michel Foucault." I&C no.8, Spring 1981.
- Allor, Martin. "Repositioning the Computer Apparatus: Transcoding and Social Practice." In Humanism in a Technological Age, edited by Marla S. Lowenthal and William O. Gilsdorf. Montreal: Loyola College, Concordia University, 1986.
- Althusser, Louis. Lenin and Philosophy and Other Essays. Translated by Ben Brewster. New York: Monthly Review Press, 1971.
- Foucault, Michel, ed. Herculine Barbin: Being the Recently Discovered Memoirs of a Nineteenth Century Hermaphrodite. Translated by Richard McDoougall. Brighton: The Harvester Press, 1980a.
- Foucault, Michel. The History of Sexuality Volume 1: An Introduction. Translated by Robert Hurley. New York: Vintage, 1980b.
- Foucault, Michel. Power/Knowledge. Edited by Colin Gordon. New York: Pantheon, 1980c.
- Foucault, Michel. "Sexuality and Solitude." In On Signs. Edited by Marshall Blonsky. Baltimore: The John Hopkins University Press, 1985.
- Strachey, Julia. An Integrated Man. Hammondsworth: Penguin, 1978.

CHAPTER IV

ANOREXIA NERVOSA: SUBJECTIVITIES AND SELVES IN NEGOTIATION

Yet today the subject apprehends himself 'elsewhere',
and 'subjectivity' can return at another place on the
spiral: deconstructed, taken apart, shifted, without
anchorage: why should I not speak of 'myself' since
this 'my' is no longer 'the self'

Roland Barthes (1977: 168).

She must learn to speak/ starting with I/ starting with
We/ starting as the infant does/ with her own true
hunger/ and pleasure/ and rage

Marge Piercy (in Chernin, 1981: 45).

In the last chapter I explored the theoretical
problematic of a discursively constructed sex. From this
perspective, I also examined how we may theoretically account
for a lived sense of self. Using the historical example of
a nineteenth-century hermaphrodite, I argued that individuals
are not wholly captured within discourse. In taking up some
of the theoretical concepts from the later writings of
Foucault, I considered how discourses may be individually
negotiated. Moreover, I intimated that this negotiation may
produce the possibility of signifying practices, which enable
individuals to make sense across discourses. By this I mean
that we are not simply positioned by any one discourse, but

rather that, to an extent, we make our own sense from a multitude of discourses. The example of Alexina served to illustrate that even the fundamental discursive gendering of individuals is negotiable. While her case also showed us the power of institutions in defining the conditions of life, we can still say that Alexina chose to hold on to a female sensibility even when certified as male. In this way, we can consider that she was not totally encapsulated within the discourses of femininity, but rather that in living her difference, she knew herself across, or at variance to these discourses. In turn, this leads us to consider a "sense of self" as an active articulated nexus of discourses. This articulated, or negotiated, aspect of the self breaks with a notion of the self as passively positioned discursive subjectivities. The major shift involved here, is that the negotiation of discourse allows for individual signifying practices as strategies which enable the self to make sense of his/her world. It is precisely this aspect of negotiation that the anorexic show us. To clarify the theoretical discussion of these points, I would now like to turn to the anorexic's act.

Susie Orbach, a feminist therapist who works with anorexics, has repeatedly pointed to how women use their bodies to negotiate the social conflicts that they inhabit. In Fat is a Feminist Issue, and Fat is a Feminist Issue II

(1978, 1982), she explores how women may use "fat" to extradiate themselves from the social sexual arena. In her recent book Hunger Strike (1986), Orbach draws on her clinical encounters with anorexics to examine anorexia as another instance of negotiation. If, for Orbach, fat represents a way for women to escape the sexual gaze, then anorexia can be seen as a two-fold formulation of this strategy: first, in being thin the anorexic seems to conform to our society's requisite for attractiveness, but second, she subverts this dictate by her radical starvation. I have argued throughout this paper that anorexia is a polysemous, or multi-planed response to societal discourses. Orbach formulates anorexia as a paradox, or as "a metaphor for our age" (the subtitle of Hunger Strike), and her understanding of anorexia is far more nuanced than those quoted earlier (cf., Turner, 1985). However, Orbach's reading of anorexia seems to overly privilege the anorexic's act as a response to the "feminine" without really problematizing what the latter might be:

A dominant motif for the anorectic . . . is thinness as ultra-feminine and, at the same time, thinness as a rejection of femininity. In other words, two exaggerated and oppositional responses each representing an attempt to negotiate an individual's identity, operate simultaneously (1986: 85).

While Orbach here points to how identities, or selves, are negotiated, there is a sense of binarism--of femininity or not--that belies the notion of negotiation. This staking

out of polarities inherent to the formulation of paradoxes implies that meaning can only be generated in opposition. I would contend that signification occurs at the conjunction of several discourses. As I argued in the previous chapter, the term "negotiation" should be understood as similar to Stuart Hall's sense of "articulation". There is, however, a small, but significant, difference: Hall's concept of articulation should be understood as "connections" upon a discursive plane, whereas "negotiation" indicates the individual formulation of connections between discourses. However, we may initially consider both the articulation and negotiation of discourses as producing and re-producing meaning on several planes. For example, in the nineteenth-century the articulation of the family with the emerging discourses of sexuality and medicine, produced new lines of meaning both within the family and in society in general. The effects of the articulation of these discourses are apparent in the way that individuals came to be differently positioned and regulated. However, this articulation of discourses also had concrete affects on the lived experience of the family that are not readily evident in the governing language of the day. The repositioning of the family, for instance, came about through the new articulation of the discourses of the time, and not through any one discursive statement. It is here within the shift from the effects of the discursive, to the

affect on the individual that one may see the negotiation of discourses. The term negotiation reflects how individuals deal with the affects of discourses, as well as their placement in relation to them.

Anorexia is an instance of the embodied negotiation of articulated discourses. In this manner, the practice reveals the attempt of discourses (of sexuality, of "femininity", of the family) to claim the body. It is also more fundamentally indicative of an individual negotiation and articulation (connecting of discourses). This, I would argue, allows the anorexic to re-make sense of discourses within a particular context. This is to say more than Orbach. Her claim that anorexia is characterized by "two exaggerated and oppositional responses" is to close down anorexia to a reflex situated within the poles of either a "preferred" cultural response or an "oppositional" reaction. Rather, in considering the anorexic's act as a negotiation of a particular articulation of discourses, we should understand her act as a signifying practice which she uses to make sense of the discourses in which she lives. Anorexia, therefore, is not an oppositional moment to be understood in contrast to discourses, but rather, it is a complex negotiation of discourse. As Orbach says of one of the anorexics that she treated:

Audrey herself realized that this cute exterior with a punch was an image she wanted to express because she

felt that it gave her a lot of manoeuvrability. She could look one way and be another (1986: 85).

Orbach stresses the fact that "Audrey" was a nurse and therefore involved in a traditional female role ("she was a perfect busy little caretaker and nurturer" *ibid.*). While her positioning by this role is important, there are other key points raised in this quotation. Most noteworthy is the way in which this anorexic interpreted her own behaviour: that her actions allowed her "manoeuverability". The acknowledgement here of a desire to "look one way and be another" seems to point to a manifest way of negotiating discourses. While one could see this as a simple negotiation of one discourse: the "look", the "feminine", I would argue that there is more than that in play here. These words point to the fact that the discourse of femininity is not monolithic. To say that this young woman is simply "opting out" of the feminine would miss the sense of her "manoeuvring". I should emphasize here that I do not want to undertake a therapeutic analysis of anorexics in this paper. I do want to examine the discourse and acts of anorexics. Thus, in "reading" these voices I wish to bring out the complexity of the discourses that these women are struggling with. Furthermore, these accounts will enable us to trace out the negotiations of self and subjectivities in anorexia.

In listening to accounts of anorexic experiences, we find tropes that resonate through women's experience in general.

While the anorexic response may strike as exaggerated, or merely more overt, they remind us of the discursive ramifications of events that are often taken as "natural". One of the most obvious occurrences that all women must deal with, is menstruation. While this is a physical and biological "fact", it is also the object of a discourse which is powerfully articulated with many other discourses in our society. Menarche, or the onset of menstruation, is symbolically and quite literally the site of the social sexing and gendering of women. The commencement of puberty in women is, of course, differently interpreted in various cultures. In some it is an occasion for celebration, in others "not only was menstrual blood unclean, she herself was and made everything she touched unclean, and the object itself would transmit this" (Culpepper, 1979: 141). In Western cultures the significance of menstruation is marked by its silence and the absence of any societal recognition. However, the discourse of menstruation articulates with the discourse of sexuality, and profoundly affects women's sense of their selves. It should, therefore, not be surprising that most anorexics speak of menstruation in relation to the wider difficulties of being inscribed as women. As we shall see, this simple biological occurrence is a site of tremendous negotiation that focuses and renders problematic the relationships within the family (and especially between

mother and daughter), among peers, the school, and within society in general.

As we examine instances of anorexia we see an articulation of the self with emergent discourses; construction and maintenance of a sense of self among the discourses of the family, sexuality, and teenage femininity. On the whole these accounts would sound commonplace to many Western women:

She learned about menstruation when she was 13 from her mother, who was embarrassed and not very informative. She was ashamed and embarrassed about menstruating, and described her periods as 'messy', 'dirty', 'disgusting', and 'inconvenient' (Abraham and Llewellyn-Jones, 1984: 31).

Brenda started menstruating when she was aged 14, which she described as 'unpleasant and a nuisance'. Her menstrual periods ceased when her weight was low which pleased her (ibid.: 35).

The taboo surrounding menstruation has clothed this event in a strange unspoken "normalcy". The idea that menstruation is a mediated experience, or a discursive construction is not immediately self-evident. And yet the discursive links that are continually made between menstruation and the unclean should be obvious to anyone who has watched television advertisements for "feminine hygiene products". Within these advertisements we are typically shown a condensation of the unclean with the pure--menstrual napkins and butterflies--thus reinforcing the cultural dichotomy of woman as whore or virgin. (Moreover, in Canada, the proposals for the, yet to

be tabled, Pornography Bill include depictions of menstruation as within the category of "heavily degrading" pornography). However, the anorexic has grasped the connections between this hidden discourse and the more overt articulations with what it means to be sexed as woman:

Jean first menstruated when she was eleven. She was unprepared for the event . . . The nurse at school explained to her that she had started her period so early because she was a 'big girl'. She resolved to become a smaller one and made sure that her period did not reappear for thirteen more years (Orbach, 1986: 152).

This quotation reveals a number of discourses at work: first, the unspoken nature of menstruation is evident, as is the potential power of this discourse to structure and define female existence. Second, we may see the articulation of this discourse with one of maturity. In this way menstruation, sexual maturity, and femininity are articulated together at the site of menarche. Moreover, the young girl seems conscious of this articulation, and lacking "the emotional vocabulary to cope with the event" (ibid.), she negotiates this nexus with her body. As Orbach puts it, "by reducing her food intake below the weight at which she would menstruate, she saw to it that she never got her period again" (ibid.: 65). However, we should not too quickly categorize her action as an undifferentiated rejection of femininity. While it certainly had the result of physically avoiding menstruation, her starvation cuts into the

complexity of the articulation of discourses that define what it is to be placed as woman in society.

To stay with the example of "Jean", let us examine the other discourses she negotiated with her anorexic practice. Her family situation was quite regulated, however Jean:

elevated the rigidity of family meals to an extreme . . . [and] made a point of getting up earlier than anyone else in the family, of keeping her room tidier than all the others, of requiring less food than anyone else (ibid.).

Initially this account presents a picture of the perfect daughter. And as I mentioned earlier, the anorexic does indeed show up the tensions within the family by her seemingly complete acquiescence to that institution. However, what we can also see in this example is an exaggerated reproduction of the typical role of women within the family. While Orbach sees this quite rightly as a "protest [that] in a way reflected family form", I think that she misses an important point when she extrapolates to:

A differentiated self was thus impossible, she could only mimic what she had absorbed as a way of providing herself with some protection in the attempted separation (ibid.: 66).

In that this taking up of the family is strongly articulated to the guilt that she felt in having menstruated "out of sequence", it would seem that Jean's starvation intimately links the family with her menstruation. However, it is not just a "mimicking" of the family form that we see, but a subversion of the articulated discourse of family and

sexuality. Indeed, it would seem that Jean had recognized that the subjectivity that the family held out to her, was interconnected with the one that she might become through menstruation. By starving herself, and simultaneously constructing the persona of a perfect family member, Jean could negotiate, or differentiate, what it meant to be a woman within the family. In this way, she maintained her role within the family, and therefore retained some sense of who she was. At the same time her practice of starvation ensured that she would not be caught within what she thought were the consequences of the family discourse. These perceived consequences were strongly tied in with the emergent discourse of sexuality, prompted by the commencement of her periods.

It would appear that this connection of discourses is a unifying element common to most anorexic cases. On one level these anorexic accounts highlight the articulation of many "natural" assumptions. In Jean's case, we can see that her equation of menstruation and family resulted in (for her) the awful certainty of being confined like her mother to the role of child-bearer and household disciplinarian. While this scenario is socially scripted, and probably experienced by many teenaged women, Jean's case is indicative of how anorexics deal with this situation. Instead of totally rejecting the familial situation that she found oppressive

(as might be the case of a more outward rebellion or opposition), of her own volition she regulated herself more stringently within the institution of the family. Thus we may consider that she understood the discursive equation of her sexuality and the family as leading into the eventual result of being confined to her mother's position. Put in a different manner, we can also see her positioning by these discourses as producing a tightly bound subjectivity. However, we can understand that she broke this equation by eliminating her own possible sexuality. In this way she broke with the articulation that her sexuality imposed upon her role in the family. Thus, she was able to differentiate between her subject positioning by the family and that produced by the discursive positioning of "sexuality". While she remained within the discourse of the family, by bodily refusing to be positioned by her sex, she was able to circumscribe a painful articulation. Furthermore, as the 'perfect' daughter, she could hold on to some sense of herself, even as she created new meanings about what that might be. In other words, she used her body to negotiate those discourses which impinged too painfully upon her sense of self.

As I have suggested, anorexia represents a complex negotiation of a nexus of discourses. The anorexic finds herself within an articulation of discursive elements, the equation of which she experiences as both frightening and

disgusting. Her anorexia therefore becomes a practice which can deconstruct, and thus preclude, the inevitable outcome of these discourses. As Ellen West, an anorexic made famous by the existential psychoanalyst Ludwig Binswanger, put it:

Something in me rebels against becoming fat. Rebels against becoming healthy, becoming a simple, robust woman, as corresponds to my true nature It drives me to despair that with all my big words I cannot get myself further. I am fighting against uncanny powers which are stronger than I. I cannot seize and grasp them . . . (Binswanger in R. May, 1959: 259).

Here Ellen West is elaborating on a previous equation that she had formulated as:

- 1) slender=spiritual (soft, blond, Aryan), fat=Jewish bourgeois;
- 2) eating=getting fertilized and pregnant (Selvini Palazzoli, 1978; 136).

In this case we can quite clearly see the articulation of "fat and eating" with the discourse of comfortable Jewish motherhood. Ellen obviously has taken this latter discursive construction as a part of herself, "as corresponding to her true nature". As she further states, "I am perishing in the struggle against my nature. Fate wanted to have me fat and strong, but I want to be thin and delicate" (Binswanger, 1959: 265). Ellen West was a Jew growing up in the historical context of pre-World War II Europe. Thus we should understand that the negotiation of her "nature" and self is more structured by the discourses of race, religion, and class than fashion. By this I mean that the discourses

of race held a particular primacy at this time, and thus probably outweigh the fashion discourse of the 1930s in their affect upon Ellen. Moreover, in equating the discourse of slenderness with that of the "Aryan" race, Ellen's starvation confronts a fundamental discourse within the nexus of her self. In other words, we can grasp that Ellen's sense of her "true nature" was formulated by an articulation of the discourses of sex, class, and race. These discourses can then be said to constitute (in part) her sense of self. As with the case of Jean, we can also see that these discourses produced subjectivities which were tightly articulated together. In choosing a practice which outwardly figured a relentless striving towards "getting thinner and thinner" (ibid.: 264), Ellen was able to break into this discursive equation. By negotiating with her body, she could substantially alter the way in which she was discursively placed by her sex. Furthermore, in refusing the subjectivity that her sex offered her, she can negotiate the meanings of the other discourses that "hail" her. In so doing, she also disrupted the affects of the other discursive elements. In negotiating the biological determinism of the sexual discourse, Ellen also differentiated the power of the discourses of race and class to determine her as a "bourgeois hausfrau". Moreover, by rejecting the determinism of reproduction, Ellen undermined the articulation of her self

to those discourses. Instead of the "robust matron" that she was positioned to be, she attempted to place herself outside of the discourses that "restricted [her] untamed, desperate, defiant self" (ibid.: 287). Her negotiation therefore, strives to create a meaning for herself along these lines. In one of her early poems, we hear this desire to be recreated: "Creator, creator/ Take me back!/ Create me a second time/ And create me better!" (ibid.: 247). In this way, I would contend, Ellen conceives of her starvation as a practice which will enable her to create her own significance. Furthermore, this practice indeed rearranges the constellation of discourses which encapsulate her. In so doing, she negotiates meaning for herself.

Sheila MacLeod has described how as an anorexic she felt that being fat (or rather not being anorexic) would position her:

To be fat is to retreat, not only into my own past but that of my immediate family and the whole network of family relations with both the living and the dead. I was swallowed up in this network, while at the same time being fattened up for the kill (1981: 147).

MacLeod strongly underlines the need that she felt to be outside of other people and the discursive relations of the family. In order to achieve some sense of her self, and to negotiate the discourses in which she found herself, she took up anorexia:

I needed desperately to be myself alone and a part of neither of the other people. Anorexia

nervosa had been my strategy, my only weapon
The initial choice was an unconscious one, but the
justifications which followed it were both conscious
and determined (ibid.: 159).

As she herself clearly points out, anorexia was to be used as
"a final act of defiance against the too-closely-impinging
world which threatened to engulf or annihilate me" (ibid.:
160). While it seems that MacLeod is rather caught up in the
bravado of her own narrative and thus tends to overly
romanticize her act, we may gain some insights from her
description. It is readily evident that MacLeod felt the
need to make sense of, and for, herself. Her "choice" of
anorexia as a strategy therefore allowed her first to create
some distance from the "impinging" world. Also, this
practice carried "justifications" which enabled her to remake
her position within the articulation of her family and her
marriage, and thus escape being "swallowed" by these
institutions. It is also quite evident that she sees her
"strategy" in opposition to the equation that she defines as:

[The unbreakable] cycle of being swallowed, spat out
(rejected), fattened up, and swallowed again
If I am fat, as defined above, I run the risk of being
devoured by other people, or by the society in which
we all exist (ibid.: 147).

What we may identify here is the image of a seamless
articulation: of discourses positioning the self within a
non-stop cycle. In this depiction the discursive resonance
of "fat" ensures that the other discourses remain articulated
together, forever reproducing the same meaning. For MacLeod,

this "meaning" about herself is the idea of being eternally pre-determined by forces (discourses) outside of her control. Thus it is not so much which discourses are placing her, but the fact of being discursively "hailed". With other anorexics it is the content of the positioning itself; for Jean it was the actual positioning by her sex within the "natural" equation of herself as wife/mother that was unbearable. However, in either case, the anorexic removes the pivotal discursive conjunction of "fat" in order to break into a particular articulation of her subjectivities, and secure new meaning for, and about, herself. By starving herself, she negotiates the discursive articulation within which she lives.

At this point I would like to draw together the differing lines that we have seen in the previous examples. Initially, we can state that these anorexics saw their starvation as a remedy to their unhappiness. What makes this "solution" different from many possible others, is that in some sense it directly responds to their situation; it is a tactic formulated and bound within a particular context. By this I mean that anorexia is used to respond to, in an immediate fashion, the subjectivities produced by the discursive construction of what it means to be a young woman in our society. Moreover, we have seen that the anorexic "solution" works on many planes. Whether consciously or not, these

young women have recognized that their unhappiness does not stem from one source. Thus for the anorexic, menstruation, per se, is not the problem; neither is their situation within the family a contained problematic site; nor is their preoccupation with thinness simple consequence of peer or media pressure. What we do see, however, is that the articulation of these discourses place women (and especially teenaged women) in an, at times, untenable position. As we have heard over and over, the articulation of their sexuality to the discourses of family, or motherhood, is deeply frightening to the women cited and others. Moreover, the reasons that have surfaced as to why this articulation is difficult, have pointed to the restriction of meanings that are possible within these discursive equations. What we find again and again, is that these discourses position women, but in the particular articulations we have seen, these discursive arrangements leave no room for the negotiation of subjectivities. The anorexic, however, has formulated a strategy which necessarily alters the discursive articulation within which she feels fixed. In negotiating--in a radical, embodied way--the underpinnings of the discourse of sexuality, she also modifies the affects of the apparatus upon her. While she can not be "outside" of the apparatus, she can mitigate its ordering affects. In other words, the anorexic can not exist outside, or in opposition to the

apparatus, but she can make meaning of herself from a position of variance. As I have argued throughout this paper, the anorexic negotiates an articulation of discourses, and this negotiation produces different signifying affects. In rupturing the "common-sense" assumptions of the discourses which "centre" women, the anorexic uncovers alternative sets of meanings about the (female) body in society.

REFERENCES FOR CHAPTER IV

- Abraham, Suzanne and Derek Llewellyn-Jones. Eating Disorders: The Facts. Oxford: Oxford University Press, 1984.
- Barthes, Roland. Roland Barthes by Roland Barthes. Translated by Richard Howard. New York: Hill and Wang, 1977.
- Binswanger, Ludwig. The Case of Ellen West. In Existence, R. May et al. New York: Basic Books, 1959.
- Culpepper, Emily, C. "Exploring Menstrual Attitudes." In Women Look at Biology Looking at Women. eds., Ruth Hubbard et al. Cambridge: Schenkman, 1979.
- MacLeod, Sheila. The Art of Starvation. London: V'rago, 1981.
- Orbach, Susie. Hunger Strike: The Anorectic's Struggle as a Metaphor for Our Age. New York: W. W. Norton & Company, 1986.
- Selvini Palazzoli, Mara. Self-Starvation. New York: Jason Aronson, 1978.

CONCLUSION

At the outset of this paper, I contended that current descriptions of anorexia nervosa tend to see this condition as a simple consequence of, or a direct reaction to, our society's representations of women's bodies. My aim has been to problematize this notion, and to suggest that there is more to anorexia than this. Indeed, the ways in which we all negotiate mediated messages can not be said to be this simple. The example of anorexia brings out the complexities of the discourses that we encounter in our daily lives. The anorexic's more extreme response to these discourses requires that we examine closely the connections between discourse, self, and everyday practice.

One aspect of the popular interpretation of anorexia, holds that it is a condition unique to late-capitalist Western society. The rationale of this argument plays out as follows: there is something inherently quite different in the discursive arrangement of our times; media representations effect us in a direct and ominous manner; women are especially susceptible to this menace (. . . due to their "weaker nature"?); and so on. All this led me to research

the history of anorexia, and I did indeed find many instances of women in differing situations who died of starvation. I chose the case of Sarah Jacob for several reasons: she was not involved in a religious fasting; for the overt rivalry of the Church and medicine in their claiming of her; because of the historical emergence of the Medical in a geographically remote area; and most importantly, because her act seemed to afford her some pleasure in a rather bleak country that I know well. Sarah's case illustrated how the act of starvation could be used to negotiate several discourses. Moreover, this example allowed an initial consideration of the complexity of how discourses shift, and variously claim individuals.

This led me to more closely examine how the discourses of the family, female sexuality, and the medical come to be articulated together. This articulation generates "meanings" which seem to enclose young women in difficult and sometimes painful roles. It is precisely this nexus that the anorexic is trying to negotiate. Her actions can thus be understood as a way of breaking into the discursive equation which positions her according to her sex.

Having so far sketched out some of the issues I think that anorexia raises, I will now in conclusion draw together what the various aspects of this thesis might mean for a feminist theory of communication. First, I think that it is

important to look closely at how practices generate signification. By this, I mean how everyday practices of negotiation allow us to formulate our own meanings from the discourses that we inhabit. Our practices are worthwhile objects of study, and demand to be taken seriously. Second, the way that we theoretically approach a study of negotiating practices requires that we think through and establish an epistemology that can handle the nuances involved. As my experience and research into anorexia has shown, many studies get lost in their epistemological assumptions, and hence cover over key aspects in the rush for concrete assertions. For instance, this is also unfortunately evident in some studies on women's romantic fiction reading practices. Being sensitive to everyday negotiations of meaning must be combined with an epistemology capable of tracing through from the site of the particular practice to the historical and material discursive forces.

In this study, I have tried to follow what Angela MacRobbie has recently pointed to, "a different working practice or methodology that emphasizes establishing loose sets of relations, capillary actions and movements, spilling out among and between different fields" (1984: 142). To my mind, this necessarily includes "allowing, and looking, for the ambiguous"--an approach that seeks and recognises the intertextuality of our practices. Furthermore, this is to

constantly work against the containment of these practices, whether it be in theoretical discourses, medical practices, or the everyday and night appropriation of the media. By looking closely at our practices, our everyday strategies, we may find areas that are bounded by discourse, shot through with lines, but yet not wholly colonized. It is the ambiguity of these areas between discourse and ourselves that we must explore.

REFERENCES FOR CONCLUSION

MacRobbie, Angela. "Dance and Social Fantasy." In Gender and Generation, eds. Angela MacRobbie and Mica Nava. London: MacMillan, 1984.