

1987

Anorexia Nervosa, Bulimia, and Obesity in Young Adult Literature

Andrea Kupferschmid Ralston

Let us know how access to this document benefits you

Copyright ©1987 Andrea Kupferschmid Ralston

Follow this and additional works at: <https://scholarworks.uni.edu/grp>

Anorexia Nervosa, Bulimia, and Obesity in Young Adult Literature

Find Additional Related Research in UNI ScholarWorks

To find related research in UNI ScholarWorks, go to the collection of [School Library Studies Graduate Research Papers](#) written by students in the [Division of School Library Studies](#), Department of Curriculum and Instruction, College of Education, at the University of Northern Iowa.

ANOREXIA NERVOSA, BULIMIA, AND OBESITY
IN YOUNG ADULT LITERATURE

A Research Paper
Presented to the
Faculty of the Library Science Department

In Partial Fulfillment
of the Requirements for the Degree
Master of Arts

Andrea Kupferschmid Ralston

July 8, 1987

Read and approved by

Leah Hiland

Elizabeth Martin

Accepted by Department

Elizabeth Martin

July 13, 1987

Abstract

Anorexia Nervosa, Bulimia, and Obesity in Young Adult Literature: An annotated bibliography was compiled in order to augment health and home economics curriculum units on anorexia nervosa, bulimia, and obesity. The literature review revealed the prominence of eating disorders among the teenage population, and underscored the importance of educating adolescents about the dangers inherent in being a victim of anorexia nervosa, bulimia, or obesity. The books were identified by using selection tools and the card catalogs in two specified library collections. A total of 50 books are included. They are divided into three categories: 27 fiction books published between 1976 and 1986, 11 fiction books published prior to 1976, and 12 nonfiction books published between 1976 and 1986. Only the fiction books published between 1976 and 1986 were analyzed for testing of the hypotheses. Six of the seven hypotheses were accepted. Each annotation includes a complete bibliographic citation, as well as a plot summary, character descriptions, information relevant to the eating disorder, and a suggested grade level.

Table of Contents

Chapter	Page
1. Introduction	1
Purpose of Study	3
Problem Statement	3
Hypotheses	4
Definitions	5
Assumptions	6
Limitations	7
2. The Literature Review	8
3. Methodology	22
4. Anorexia Nervosa, Bulimia, and Obesity - Bibliography	26
Fiction Published Between 1976 and 1986 . .	26
Fiction Published Prior to 1976	43
Nonfiction Published Between 1976 and 1986	49
5. Conclusions and Summary	56
Bibliography	67

CHAPTER 1

The Introduction

Weight-related jargon such as diet, exercise, obesity, anorexia nervosa, thin and fat inundate the society in which we live. Phrases such as "you can never to be too rich or too thin" and "thin is in" are part of our cultural milieu. Every few weeks, it seems as if a new diet becomes popular throughout the country. Exercise spas have opened all across the United States, and dietetic products fill countless aisles in grocery stores. High couture fashion designers ignore outfitting women larger than a size 10. Rotund persons face a future of stereotyping both in the workplace and socially.

The researcher feels that the obsession with weight control in this country has reached great proportions. McNab (1983) observed that "in today's society, there appears to be an eating disorder continuum of obesity or fatness on one end and extreme thinness on the other" (p. 427). Many people are not satisfied with their physical appearances, yet the extreme ends of the eating disorder continuum would not seem to provide solace to these individuals.

Obesity seems to be perpetuated in the family unit where parents pass poor eating habits on to their children. Sedentary television viewing also contributes to obesity, because sitting does not burn calories rapidly.

Anorexia nervosa and bulimia are eating disorders carried to the extreme. Anorexia nervosa is particularly dangerous because it can lead to death by self-starvation. The mass media is seen by some researchers as the reason why a number of young females glamorize anorexia nervosa to the extent that they willfully contract this disorder. Thin models pervade billboards, magazines, television, and the like. U.S. News & World Report ("Anorexia: The 'Starving . . .'" 1982) reported the following:

Studies by Craig Johnson, director of an eating disorder project at Michael Reese Hospital in Chicago, found that women pictured in magazine centerfolds have gotten significantly thinner in the last 20 years. In the Miss America contest, he found, winners have been an average 10 percent thinner than other contestants in the last several years. (p. 48)

The researcher feels that the diseases at either end of the eating disorder continuum are particularly likely to affect female adolescents. Young adults are under physical and psychological stress due to the expectations of society. Educational psychologists recognize adolescence as the time when young adults break away from the family unit and build a separate identity. Some adolescents are better equipped to handle this emerging independence than others. Those individuals who have an eating disorder face the aforementioned, as well as other, problems during adolescence.

Adolescents who suffer from eating disorders face the possibility of carrying their diseases into adulthood unless

a health care professional intervenes and appropriate treatment is given. The researcher feels that prevention before the occurrence of an eating disorder is preferential to intervention after an individual has an eating disorder. The school is the natural environment in which to promote awareness about eating disorders.

Purpose of Study

The purpose of this research study is to identify fiction books published from 1976 through 1986 that focus on anorexia nervosa, bulimia, or obesity in the adolescent. The researcher has compiled an annotated bibliography of these works. The annotated bibliography is intended to be used with home economics and health curriculum units that teach middle school and high school students about eating disorders. The researcher feels that scant attention is given to addressing the topic of eating disorders, given the lack of space afforded to anorexia nervosa, bulimia, and obesity in publishers' textbooks. The intent of this research study is to provide teachers with alternative sources to suggest to young adults needing more than what is currently available in textbooks. The researcher has made no attempt to evaluate fiction books included in the annotated bibliography.

Problem Statement

Are there fiction books that can be found, with young adults as the intended audience, that focus on anorexia

nervosa, bulimia, or obesity as a dilemma that is facing at least one character in each book?

Hypotheses

The hypotheses that follow refer to fiction books written for young adults which focus on anorexia nervosa, bulimia, or obesity.

1. The majority of characters who are victims of anorexia nervosa, bulimia, or obesity will be adolescent females.

2. The majority of characters who are victims of anorexia nervosa or bulimia will be from homes which can be identified socioeconomically somewhere between middle class and upper class.

3. The majority of characters who are victims of anorexia nervosa, bulimia, or obesity will exhibit one or more of the following characteristics: (a) low self-esteem, (b) mistaken body-image, and (c) emotional instability.

4. The majority of characters who are victims of anorexia nervosa, bulimia, or obesity will suffer socially from not being actively involved in a peer group.

5. The majority of characters who are victims of anorexia nervosa or bulimia will have mothers who are portrayed as "Super-Moms," and fathers who are portrayed as being engrossed in going up career ladders.

6. The majority of novels will focus on the problem of adolescent obesity.

7. An annotated bibliography of at least 50 fiction titles can be prepared to augment middle school and high school health and home economics curriculum units on eating disorders.

Definitions

Anorexia nervosa is defined by Wesley and Ruddy (1983) as "a complex disorder which combines the physical symptoms of severe malnutrition with psychological problems which prevent the victim from realizing how thin or emaciated her body is" (p. 119). Romeo (1983) found that the weight loss experienced by victims of anorexia nervosa is "at least 25% of the original body weight" (p. 18).

Bulimia is defined by Carr (1984) as a disorder where one "gorges and then induces vomiting to purge herself" (p. 80). The researcher recognizes and agrees with research findings that suggest that anorexia nervosa and bulimia affect females almost exclusively.

Obesity is defined by Wharton and Crocker (1984) "as having a body weight that is greater than 20% to 25% above ideal weight for height" (p. 12).

Adolescence is defined as the period between the onset of puberty and 18 years of age.

Young adults is defined as those individuals currently in adolescence.

Books written for young adults is defined as fiction intended for an adolescent audience that have been compiled

by the researcher through the use of two existing collections.

Assumptions

It is assumed that the topics of anorexia nervosa, bulimia, and obesity are acceptable for study at the middle school and high school level. Students are usually taught about these eating disorders in home economics and health curriculum units beginning in 7th grade and continuing through 12th grade.

The school is the natural environment in which to teach young adults about eating disorders; school is a mainstay in students' lives during the tumultuous adolescent period. Wesley and Ruddy (1981) stated that "a factual study of this dangerous phenomenon [anorexia nervosa] ideally fits into the nutrition and/or grooming units of home economics" (p. 119). Carr (1984) stated the following:

Preventing anorexia and bulimia begins with nutritional education - lifelong lessons that cannot be started too early. Teachers can also help children recognize our culture's overemphasis on thinness, particularly for girls. But the best prevention of all for any child is a strong self-concept and a respect for individuality, qualities that a teacher can reinforce every day. (p. 80)

Zakus, Chin, Cooper, Makovsky, and Merrill (1981) stated that:

Schools are a normal, educational and social environment for adolescents. An obesity treatment program in a school can have a significant impact on students by virtue of its intensive nature, peer group involvement and association with normal daily living tasks at a time when lifelong habits are being formed.

In addition, maintenance of weight loss requires a long-term perspective. Many years of continuing assistance and follow-up can be available to obese children if a weight control program is incorporated into a total school system. (p. 664)

It is also assumed that fiction books, which focus on anorexia nervosa, bulimia, or obesity in the adolescent, have been written since 1976. It is assumed that young adults are reading these books.

A final assumption is the professional expertise of the librarians who have selected titles for purchase for the two existing collections which have been used in this research study. These individuals are educated professionals who have been taught proper selection techniques, and use such techniques in the workplace.

Limitations

This study is limited to fiction books, with young adults as the intended audience, that focus on anorexia nervosa, bulimia, or obesity as a dilemma that is facing at least one character in each book. The number of books have been limited to those identified by the researcher in two existing collections, or that were available for the researcher to obtain through interlibrary loan. Novels included in this research study are limited to those published between 1976 and 1986. All books listed in the annotated bibliography will be limited to 7th grade to 12th grade, or 12 years to 18 eighteen years, recommended reading level.

CHAPTER 2

The Literature Review

The review of the literature for this research study focuses on the various characteristics and treatments of anorexia nervosa, bulimia, and obesity. The researcher found a lack of published research studies on how these eating disorders are portrayed in young adult literature. Perhaps it can be speculated that this void is due in part to the recent surge of nationwide attention focusing on the problem of anorexia nervosa and bulimia among females. Anorexia nervosa and bulimia were rarely heard of before the late 1970's. The anorexia-related death of pop singer Karen Carpenter in 1983 brought public attention to this disease. The researcher hopes that more research will be published concerning the portrayal of eating disorders in young adult literature.

The researcher relied on generic research and opinion articles for the majority of this literature review. The majority of this literature review focuses on: (a) definitions of anorexia nervosa, bulimia, and obesity; (b) those adolescents seen to be at greater risk for developing eating disorders; (c) behaviors characteristic of individuals having eating disorders; (d) physical ramifications due to having eating disorders; and (e) various treatments tried with individuals having eating disorders. The last part of the literature review will

briefly examine how eating disorders are treated in school textbooks.

Eating disorders exist almost exclusively in developed countries. The availability of food seems to be the major factor in determining which nations, or regions within nations, are likely to report cases of eating disorders. Science Digest ("Starving Amid Plenty," 1981) found that "anorexia nervosa is on a marked rise in the United States, Europe and rapidly Westernizing countries such as Japan. Anorexia is rare in the ghetto or in countries in which survival is a struggle" (p. 56).

Socioeconomic class also indicates those adolescents likely to become victims of anorexia nervosa; however, this is not agreed upon by all researchers. Most research identifies adolescent victims of anorexia nervosa and bulimia as coming from middle- to upper-class families. Peters, Butterfield, Swassing, and McKay (1984) found:

Research has developed a fairly clear picture of the anorectic family. Generally anorectics came from middle or upper-class families which appear financially and socially successful. The mothers have been characterized as inappropriately intrusive "Super-Moms" who have attempted to do everything for their child. In their attempts, however, they have often missed seeing what the child actually needed, because they superimposed their own values and desires on the youngster. The fathers have been characterized as emotionally distant and frequently absent from the home due to their work. These fathers have typically placed a strong emphasis on scholastic and athletic competition. (p. 188)

A different point of view is stated by Pratt (1985) who found that "until recently, anorexia and bulimia were thought to be limited to upper-class whites. But now we know that those were just the people who could afford treatment" (p. 72).

The researcher found that incidences of bulimia are more likely to spread across income lines than incidences of anorexia nervosa. Bulimia is more difficult to diagnose, however, because many of its victims are secretive about purging behaviors. Many bulimics retain a normal body weight. Perhaps the passage of time will give way to concrete statistics about the connection between anorexia nervosa and bulimia, and socioeconomic status.

Anorexia nervosa and bulimia occur almost exclusively among females. Romeo (1983) found that "anorexia nervosa is a mental disorder which affects women in 95% of the cases" (p. 17). Romeo (1983) also found that "adolescence, between 12 and 18 years, is considered to be the high-risk age range" (p. 18). Males do become obese, but they very rarely become anorexic. Research and opinion articles do not provide a consensus about why this end of the eating disorder continuum affects mostly females.

Some researchers use Freudian psychology to explain anorexia nervosa among adolescent females. This psychosexual explanation purports that adolescent females deny their emerging sexuality by starving themselves so that they

once again have a childlike appearance. Sex between children is not condoned in our society, so victims of anorexia nervosa subconsciously repress emerging sexuality by altering outward appearance.

Most researchers attribute anorexia nervosa and bulimia to both psychological and physiological causes. It is not known for certain if one cause precipitates the other, or in what order the causes appear. Landau (1983) found the following:

The anorectic is on an endless diet. A normal dieter will go through a period of self-denial and will then experience relief when at last he or she reaches the weight goal. But the anorectic persists and the longer she continues her starvation regime, the more abnormal and deranged her thinking patterns may become. (p. 45)

Victims of anorexia nervosa and bulimia are not rational in their thinking. Bulimics may consume thousands of calories at one sitting, only to vomit everything as soon as they can find a secret place. Seligmann, Zabarsky, Witherspoon, Rotenberk, and Schmidt (1983) found that "some patients [bulimics] have tried to swallow spoons or electric cords to induce vomiting" (p. 60). Some anorectics have reported a fear of licking postage stamps; they claim the calories contained in postage stamp glue will make them obese. Other anorectics take an hour to eat one soda cracker or a single raisin. Landau (1983) found the following:

Time after time in the midst of their illness, anorectics will express the feeling that not eating

affords them a supreme sense of superiority. Being thin makes them feel important and worthwhile if only for a short time. It's as though the young woman experiences a temporary and extremely distorted sense of competence. (p. 28)

Adolescent females do not become anorectics or bulimics overnight. The beginnings of an eating disorder may start with something as innocuous as a parent suggesting that a daughter lose a few pounds, or an adolescent not making the cheerleading squad; that may be all it takes. There is no rule as to how anorexia nervosa or bulimia begins, but there are some danger signs to look for. U.S. News & World Report ("Anorexia: The 'Starving . . .'" 1982) found the following:

Anorexia often is hard to spot because its victims quickly become adept at hiding weight loss by wearing bulky sweaters and baggy pants. Experts list these danger signals from youngsters that parents should be alert to: (1) Constant talk about food, collecting of recipes, counting of calories--but avoidance of eating when anyone else is present; (2) Development of rituals around eating, such as organizing the food on the plate, cutting it into little bits, dawdling over dinner and eating little; (3) Consumption of diet sodas to the exclusion of all other drinks, sometimes to the point of drinking a case daily; (4) Going far beyond ordinary in exercise, such as refusing to eat unless they have run five miles or more and done hundreds of sit-ups before mealtime; (5) Increasing social isolation, withdrawing from friends and family to concentrate on fasting; and (6) Cessation of menstruation. (p. 48)

Bulimics fight the urge to binge every hour of every day. They try to keep themselves as occupied as possible so as to not think about food. If a bulimic does binge, she must purge herself as soon as possible. The bulimic

perceives this vomiting as a cleansing of sorts, and accepts this binge and purge behavior as something that must be endured in order to cope with daily stress. Landau (1983) found that "these binges occur because of food cravings that are rooted in psychological causes; they are not responses to genuine hunger" (p. 61). Landau (1983) also found the following:

In no way can a bulimic lead an anxiety-free life. She is not comfortable with bingeing and throwing up, yet she continuously feels that she must engage in such behavior. The psychological profile of a bulimic usually reveals low self-esteem. The victim lacks a deep sense of confidence and worth, and although she may exhibit a facade of cheerfulness, she actually harbors serious doubts about her capabilities and effectiveness as a human being. (p. 67)

Anorectics and bulimics habitually consume excessive quantities of diuretics and laxatives. Research has found that these young women associate a comforting sense of emptiness with the effects of laxative consumption. Landau (1983) reported that "one bulimic claimed that she took between thirty and forty laxative tablets a day because she wasn't certain that throwing up alone would get it all out of her body" (p. 74). Another habit shared by bulimics and anorectics is exercising to the point of exhaustion. Researchers have reported case studies in which the victims of anorexia nervosa and bulimia swam hundreds of laps per day, or jogged so many miles each day.

Anorexia nervosa victims do not have accurate body images of themselves. The anorectic sees herself as being

fat even if she looks like a flesh-clad skeleton to others.

Nolan (1977) found the following:

The key element in the disease, the one from which most of the other symptoms and signs stem, is what is called "distorted body image." These young women, who appear to our eyes emaciated, do not think of themselves as thin. If asked, they will describe themselves as fat. (p. 72)

The physical problems associated with adolescent anorexia nervosa and bulimia are staggering. Seligmann et al. (1983) found the following:

Obsessive dieting and purging, in combination or separately, take a terrible physical toll. Bulimics develop ulcers, hernias, and a dependence on laxatives, and many lose most of their tooth enamel from the acid in vomit. Anorexics nearly always stop menstruating. Their bodies--starved for calories--eventually start feeding on the protein in the muscles. When the heart muscle weakens, it can lead to irregularities in rhythm or even congestive heart failure. Both anorexia and bulimia can destroy the body's delicate balance of electrolytes, particularly potassium, and this can also cause serious cardiac abnormalities. (p. 60)

Karen Carpenter's death in 1983 was officially attributed to cardiac arrest, although the underlying cause of her death was anorexia nervosa.

The treatment of anorexia nervosa is usually a two-fold process. Both the mental and the physical aspects of the disease must be attended to by a professional. Researchers have found that the physical part of the problem must often be treated first, because it presents a life-threatening situation. In such instances, the victim is usually force-fed through a stomach tube or by an intravenous line (IV). This method is only desirable until the situation is

nonlife-threatening, because it does not treat the whole problem. Anorectics are very resourceful and can often remove a stomach tube or an IV when left alone for any period of time.

Many researchers agree that some sort of behavior modification program is most successful in treating the anorectic. A system of rewards and punishments is agreed upon by both the patient and the doctor. A contract is often drawn up to add legitimacy to the agreement. The system is established in order to coax the victim into eating progressively larger quantities of food. At the same time, the individual is also undergoing individual and group therapy. Nolan (1977) found the following:

A vital element in treatment is to reassure her that you--her doctor or her parent--will not let her get fat. Patients with anorexia nervosa have a terrible fear that once they start to eat they will overeat and become the repulsively obese people they already imagine themselves to be. If they can be convinced that someone who cares is watching and will warn them if they go above their ideal weight, then they can often be persuaded to resume eating. (p. 75)

Bulimia is most often treated using psychotherapy. This therapy is designed to assist bulimics in developing strategies, other than bingeing and purging, to cope with daily stress.

Researchers do not agree whether or not bulimics and anorectics can ever be completely cured. Some researchers insist that individuals who have an eating disorder can never be cured, just as individuals are always considered to

be alcoholics, even if they have not had a drink in years. Some anorectics and bulimics do recover, with varying degrees of success, through the course of time. Chng (1983) found that "an individual is deemed fully recovered if the following criteria are achieved: development of good, regular eating habits; gain in weight; improvement in general physical and emotional status; and improvement in interpersonal relationships" (p. 25).

As is the case with anorexia nervosa and bulimia, obesity occurs primarily in developed countries where there is an adequate food supply. Obesity is not a problem in nations where starving people struggle daily for survival. Price and Allensworth (1980) found the following:

Obesity is the most frequent nutritional disorder of children in developed countries. Furthermore, overweight infants tend to become overweight children and more than 80% of overweight children become overweight adults. It has been estimated that the odds against an obese child becoming a normal weight adult are 4:1 at age twelve and raise to 28:1 if the weight has not been reduced by the end of adolescence. Also, there is evidence that the incidence of obesity in advanced countries is rising in both children and adults. (p. 4)

No reason has been identified as the primary cause of adolescent obesity. It is obvious, however, that there is a relationship between consumption of food and obesity. Price and Allensworth (1980) found that "in the most simplistic explanation, obesity is caused by the consumption of more calories than the body uses, and for every 3,500 excess calories one pound of fat is formed" (p. 4). Other

researchers suggest more elusive causes of obesity. Wisdom (1981) found that "obesity is rarely due to one single cause. Several related factors can include the following: poor habits of eating--both overeating and poor nutrition; genetic and family patterns of fat distribution; environmental influences; metabolic sluggishness; and psychogenic effects" (p. 19). Obesity is considered by the majority of researchers to have both physiological and psychological origins.

As is the case with anorexia nervosa and bulimia, some researchers use Freudian psychology to explain adolescent obesity. This psycho-sexual explanation suggests that adolescents, especially adolescent females, deny their emerging sexuality by overeating.

Adolescent victims of obesity come from all socioeconomic backgrounds, although the majority of obese adolescents are females. Wharton and Crocker (1984) found that "children who enter adolescence with obesity are likely to remain obese, especially girls. Females are also more likely than males to be consistently overweight from adolescence to adulthood" (p. 13). Wharton and Crocker (1984) also found that "only children and the youngest children in families are more likely to be overweight than other children. The risk of obesity is increased among single-parent families and children whose parents are separated or divorced" (p. 14).

Victims of adolescent obesity usually do not find acceptance among peers, teachers, and parents. The negative stereotyping of obese persons is common in our culture. Obesity is the opposite of what is idolized in our society, namely thin, well-toned bodies. Wharton and Crocker (1984) found that "as a group, obese children [includes adolescents] perform less well academically than their normal weight peers, even when matched for intellectual ability" (p. 13).

Obese young adults perceive themselves as being overweight, but not obese. Adolescents who suffer from obesity are likely to undergo psychological trauma because of interaction, or lack of interaction, with peers and adults. Heston (1983) found that "the obese tend to have greater body image distortions, poorer self-concepts, and more emotional disturbances. Social problems arise from the harassment, poor peer acceptance, and discrimination from significant others which the obese frequently encounter" (p. 45).

The researcher found a lack of consensus among published research concerning the physical ramifications of adolescent obesity. Some researchers do not acknowledge mortality among obese adolescents, while others warn of mortality, regardless of age, among all obese individuals. It is generally agreed that the precursors of disorders and diseases among obese adults are frequently found in obese

children and adolescents. DeWolfe and Jack (1984) found that "the strong tendency of overweight adolescents to remain overweight as adults predisposes them to disorders such as diabetes, mellitus, hypertension, and coronary heart disease" (p. 347).

As is the case with anorexia nervosa and bulimia, the treatment of adolescent obesity usually includes a combination of behavior modification and therapy. Both the mental and the physical aspects of obesity must be treated by a professional. Zakus et al. (1981) found that "there appears to be an indication that behavioral techniques combined with dietary management and physical activity may be the most effective treatment method. This type of multicomponent program emphasizes treating obesity by changing a number of critical factors, including eating, exercise and habit patterns" (p. 663).

The researcher examined sample publishers' textbooks and school curriculum guides to determine how eating disorders are treated in the curriculum. The researcher found that home economics and health textbooks begin discussing eating disorders in grade 7 and continue to do so through grade 12. Obesity is more frequently, and more extensively, treated in textbooks than either anorexia nervosa or bulimia. The authors and editors of some of these textbooks tend to treat anorexia nervosa and bulimia with a sort of tokenism. For instance, McGraw-Hill devotes

five pages to discussing obesity in one of their secondary level home economics textbooks (c. 1985), and incorporates one column regarding anorexia nervosa and bulimia within the five page discussion of obesity. McGraw-Hill does elaborate on the seriousness of anorexia nervosa and bulimia, and urges students who believe they may have either of these eating disorders to seek professional help. Ginn devotes two pages to discussing obesity in one of their secondary level home economics textbooks (c. 1983), and covers the topic of anorexia nervosa to a lesser extent by devoting a seven sentence paragraph to this issue. Within this paragraph, Ginn states a one sentence definition of anorexia nervosa, and states a one sentence treatment for this disease that touts psychiatric help, while ignoring the possible physical needs of the victim. Other textbooks make no mention of either anorexia nervosa or bulimia. The researcher hopes that increasing public consciousness about eating disorders will be reflected in future editions of home economics and health textbooks. These texts need to devote more space to eating disorders.

The researcher feels there are numerous similarities between anorexia nervosa, bulimia, and obesity. The research cited in this literature review makes note of many of these shared commonalities. Examples of similarities among these eating disorders are low self-esteem, mistaken body-image, emotional instability, and treatment. The

researcher also feels that all three of these eating disorders can ultimately lead to death among adolescents. The apparent lack of information available in textbooks, and the rising incidences of these eating disorders are disturbing.

The researcher feels it is important to realize that authors are writing fiction books which focus on anorexia nervosa, bulimia, and obesity. The need for an annotated bibliography of these books is evident.

CHAPTER 3

Methodology

The product of the research for this study is an annotated bibliography. The researcher compiled a primary bibliography that consists of fiction books published between 1976 and 1986 in which at least one of the characters in each book has an eating disorder. A second bibliography was compiled that consists of fiction books published prior to 1976 in which at least one of the characters in each book is obese. The researcher determined that little had been published prior to 1976 concerning anorexia nervosa or bulimia in young adult fiction books.

The researcher compiled a third bibliography that consists of nonfiction books published between 1976 and 1986 which focus on eating disorders among adolescents. Only nonfiction published between 1976 and 1986 has been included in this third bibliography. The researcher feels that nonfiction published prior to 1976 may contain obsolete information that ought to be omitted from this particular research study.

Those books that have perhaps a chapter or two devoted to eating disorders have been included in the nonfiction bibliography, as well as biographies and autobiographies. Books that focus primarily on diet, nutrition, exercise, or food preparation have not been included.

The researcher compiled a second and a third bibliography out of necessity. The researcher feels it is important to include at least 50 books in this study in order to make the research worthwhile in conjunction with health and home economics curriculum units.

The researcher used the University of Northern Iowa Youth Collection and the Cedar Falls High School Library for obtaining books to list in this research study. The University of Northern Iowa Youth Collection contains books primarily intended for elementary and middle school students. The Cedar Falls High School Library includes books intended for the older student, typically 15 to 18 years of age. The researcher feels that these two collections complement each other. They provided the majority of items in this annotated bibliography.

The researcher used the card catalog in both of these collections to identify specific titles included in this research study. Subject headings that yielded appropriate titles are: (a) anorexia nervosa--fiction, (b) bulimarexia--fiction, (c) weight control--fiction, and (d) reducing--fiction. Items were then located, and the researcher determined if the material was appropriate for inclusion in the annotated bibliography. The researcher also included titles obtained from two selection tools: Health, Illness and Disability (Bowker, 1983), and The Bookfinder (American Guidance Service, 1985).

The annotated bibliography includes only those books which were found and read by the researcher. Titles were obtained through interlibrary loan in some instances.

The researcher used a filing system consisting of 5 x 8 cards to organize the titles included in the bibliography. As the researcher read each book, the following information was recorded on each card: (a) author, (b) title, (c) place of publication, (d) publisher, (e) copyright date, (f) pagination, (g) suggested age or grade levels, and (h) appropriate information to be included in each annotation. Each annotation includes different types of information depending upon the focus of each book. At the very least, the researcher included a plot summary and character descriptions for each fiction book included in the bibliography, including information relevant to the eating disorders portrayed in each novel.

The annotated bibliography includes the information recorded on each 5 x 8 card. The researcher focused primarily on obtaining fiction books published between 1976 and 1986, but obtained books from the other two categories, fiction books published prior to 1976, and nonfiction books published between 1976 and 1986, out of necessity. Titles are listed alphabetically by author within each category.

A suggested age or grade level is included for each title. The researcher located suggested age or grade levels by using the levels given in book reviewing journals. Each

title was reviewed in a journal at the time of the book's publication. SLJ School Library Journal was the first source the researcher used in attempting to locate a suggested reading level for each book, followed by Booklist and then other reviewing journals. A 12 to 18 year old, or grade 7 through grade 12 reading level, was required for each title included in the annotated bibliography. If a title's suggested reading level overlaps either below or above the required age or grade levels, the title was still included in the bibliography. The researcher attempted to include as many titles as possible.

CHAPTER 4

Anorexia Nervosa, Bulimia, and Obesity
BibliographyFiction Published Between 1976 and 1986

Cavallaro, Ann. Blimp. New York: Lodestar, 1983. 166 pp.

Kim Lunde is a high school junior. She has a pretty face, and is also very intelligent. Kim's problem is her weight, all 186 pounds of it. Kim meets handsome Gary Bellmore at a school basketball game and the two become fast friends. Kim, however, wants to see their friendship blossom into romance. Gary has too many family problems, so he does not notice Kim's overtures. Gary's twin brother recently died in an automobile accident (Gary blames himself; he was behind the wheel), his mother is an alcoholic, and he has tried to commit suicide on a number of occasions to avoid coming to terms with these crises.

Kim begins to see a psychologist, Dr. Irma Wasserman, to help her face her obesity and do something about it. Kim begins to slowly lose weight, and at the same time understand the mental aspects of her obesity problem. She encourages Gary to at least see Dr. Wasserman once. Gary does so, and begins making regular appointments as he slowly unravels the subconscious sources of his severe depression. As Gary begins to recover mentally, he starts to see Kim as being more than just a friend. The two proclaim their love for each other, and presumably will both end up attending State U. together.

Kim's obesity problem is treated by two professionals in this story. Dr. Wasserman treats the mental aspect of Kim's problem, and then Dr. Wasserman consults with a physician she has sent Kim to so that Kim's weight can be monitored on a weekly basis. Kim loses weight gradually; she ends up at 120 pounds by the beginning of her senior year. The author does an excellent job showing how excess weight can be lost by adhering to a medically safe diet. Cavallaro also portrays Kim and Gary's psychotherapy in both a dignified and credible manner. The reader is shown that mental illness can affect almost anybody, and that seeking help for a mental problem is not shameful.

Grades 6-9

Cohen, Barbara. Fat Jack. New York: Atheneum, 1980. 182 pp.

Jack and Judy meet as adults and recall their painful senior year in high school. Back then, when Jack Muldoon transfers to Carbondale High in 1960 he is a 300 pound loner. Judy Goldstein is popular enough, but she is the brainy editor of the school newspaper, not the type of girl one of the popular boys would actually date. Judy befriends Jack, partly out of sympathy and partly because he is one of the few students who is her intellectual equal.

Mr. Sharf, the new school librarian, is persuaded to direct the senior class play. He chooses, Henry IV, Part I, and insists that Jack play the part of Falstaff. The play is a huge success, due solely to Jack's portrayal of Falstaff. Jack suddenly finds himself to be the most popular boy in the senior class. He has even lost some weight due to his activity in the play. Judy and Jack's friendship disintegrates. As Judy and Jack reminisce about the breakup of their friendship, they realize it is possible for two people to view the same sequence of events quite differently. Each had felt the other was to blame for their drifting apart. Each had felt betrayed.

Jack loses some weight during the course of the novel. This is accomplished rather effortlessly through the extra activity the play demands of Falstaff (Jack's character). The researcher is skeptical about the permanency of this weight loss; Jack will most likely gain back the weight once the play is over and he can gorge himself after school.

Grades 9-12.

Cohen, Barbara. The Innkeeper's Daughter. New York: Lothrop, Lee & Shepard, 1979. 159 pp.

Rachael Gold is a 16 year old from New Jersey who also wears a size 16. The story is set in 1948 post-war America. Rachael's mother is a widow. The only thing the father owned of consequence before he died was a 50 year old inn. The mother makes the inn fairly prosperous following the death of her husband. Mrs. Gold frequently attends auctions, and often comes back to the inn with bargains too tempting to resist. One Saturday Mrs. Gold purchases an enormous 8 foot painting of a Sir Baldwin MacClough which appears to be unsigned. Rachael loathes Sir Baldy, as she calls him.

Rachael is depressed because the boys in her high school are interested in girls who are slender and blonde, not fat, dark haired, intellectual girls like herself. Her mother comforts Rachael by telling her that boys will like her once she is in college.

On New Year's Eve a fire destroys the inn; the family is devastated. The only item the firemen are able to save is the painting of Sir Baldy. Rachael does some independent sleuthing and discovers a signature hidden beneath the picture frame, and that the painting is worth at least twenty thousand dollars. The family's future is secure.

Rachael does not lose any weight in this novel, but she does gain self-confidence when one of the inn's guests kisses her during the Christmas party. The relationship between Rachael and her mother is very open, yet occasionally strained. Mrs. Gold does not tolerate the self-doubts expressed by Rachael about her body; Mrs. Gold feels this self-pity ought to be redirected in the form of a diet. Rachael ignores this advice.

Grades 6 up

DeClements, Barthe. How Do You Lose Those Ninth Grade Blues? New York: Viking, 1983. 137 pp.

Elsie Edwards, a 15 year old high school freshman, is no longer as obese as she was in elementary school, but she cannot overcome the feelings of low self-esteem she has had for so many years. Elsie's first boyfriend, Craddock, is a handsome football hero for the varsity team. He tries to show Elsie affection, which she has never had from anyone, but Elsie has doubts about why Craddock is interested in her. Elsie and Craddock resolve their differences once Elsie realizes that Craddock's overtures are genuine. He gives her the self-confidence she desperately needs; Elsie even stands up for her rights against her tyrannical mother near the close of the novel.

Elsie Edwards has an extremely low opinion of herself. Her divorced parents give her no emotional support. At one point during the story, Elsie feels so alone that she downs a bag of cookies and a Coke. She momentarily slips back into her old coping mechanism--eating. The author has Elsie's father and Elsie's girlfriend's father treat women in general, and their wives in particular, abominably. Elsie's father refers to his old girlfriends as broads, and the girlfriend's father opposes his wife's promotion because it means she will make more money than he does.

Grades 6-9

Durkin, Barbara Wernecke. Oh, You Dundalk Girls, Can't You Dance the Polka? New York: William Morrow, 1984. 311 pp.

This novel is set in the 1950's and 1960's in Durkin, Maryland, a blue-collar working class town on the outskirts

of Baltimore. The story begins when Bebe Schmidt is in the first grade; she is fat and has a reputation for being the bully of her class. The novel closes with Bebe completing two years at the local community college and concurrently ending a passionate love affair. All sorts of tragedies occur in Bebe's life. Several of these tragedies are: one of Bebe's elementary school classmates is a victim of incest, Bebe's father dies of cancer, Bebe is nearly raped at the age of 13, and two of Bebe's classmates drown in the ocean on the evening of the senior high graduation ceremony.

Bebe's obesity is seriously addressed at only one point in the novel. When she is twelve years old, her family doctor puts Bebe on a 1,200 calories per day diet because her weight surpasses 200 pounds. Bebe loses around 60 pounds, but then regains all the weight she has lost. While she is attending community college, her lover professes her obese body to be highly desirable.

Grades 9-12

First, Julia. Look Who's Beautiful! New York: Franklin Watts, 1980. 122 pp.

Cornelia Griswold is a fat 13 year old who is in the eighth grade. Her parents are not very attentive to her needs now that she has gone from child to young adult. Cornelia has never felt a bond of affection between herself and her mother.

The eighth grade class takes a trip every April to signify the culmination of the grade school experience. Cornelia and her friends begin saving money in September to help defray expenses for the excursion. Cornelia, despite vehement objections, agrees to run errands for the elderly at a housing site in her neighborhood. She believes all the stereotypical remarks her mother has made concerning the elderly (e.g. they are decrepit, welfare-seeking burdens on society).

The first day on the job, Cornelia meets Mrs. Marsten. Within a matter of minutes, Mrs. Marsten shatters the misconceptions Cornelia has nurtured for so many years regarding the elderly. Mrs. Marsten is a vital, active 85 year old who shows Cornelia what caring for another human being is all about.

One day Cornelia is devastated to learn that Mrs. Marsten has been hospitalized with a broken hip. Cornelia reluctantly turns to her mother for emotional support during this crisis. Her mother consoles Cornelia as best she can. Cornelia drops out of her class trip to care for Mrs. Marsten following her discharge from the hospital. Cornelia's parents are very proud of Cornelia for giving up the trip, and the reader senses at this juncture that future

relations between Cornelia and her parents will be much more open and giving.

Cornelia's weight problem is not the major focus of the novel, but Cornelia's obesity does contribute to her unhappiness and is a matter of contention between Cornelia and her mother (a svelte size 8). Cornelia does lose a few pounds during the story, but ironically it is Mrs. Marsten, not Cornelia's parents, who notices the weight loss. Look Who's Beautiful is valuable in that it also addresses the issue of ageism.

Grades 5-7

Greenberg, Jan. The Pig-Out Blues. New York: Farrar, Straus, Giroux, 1982. 121 pp.

Jodie Firestone is a lonely 15 year old who also happens to be obese. Her mother is the quintessential bitch; mother either is nagging Jodie about her weight, or mother is out with her boyfriend (Jodie's father died in Vietnam) completely oblivious to Jodie's emotional needs.

Jodie's best friend is Heather Simms. Jodie is envious of the seemingly harmonious Simms family. She also has romantic fantasies about Heather's older brother, David, who is a couple of years ahead of Jodie in school. David is an artist.

Jodie's main interest, besides food, is drama. She is active in school plays, and decides to try for the role of Juliet in the upcoming Shakespearean production. She starves herself, and does reach a normal weight, but is so physically run down that she faints from hunger at her audition. For her efforts, Jodie wins the role of the fat nurse.

This fiasco upsets Jodie to the extent that she goes on a wild food binge. She gains back all the weight she lost and is as depressed as ever. David Simms also has an inner crisis and runs away to New York, pining away his days at the Metropolitan Museum of Art. Jodie senses this may be where he ran away to, and runs away herself in search of her beloved David. Jodie finds David and realizes that other people have problems too. She resolves to make a greater effort at getting along with her mother and to quit using food as a coping mechanism.

This novel's plot is farfetched, but the characters are believable and the dialogue is quick-witted. Jodie Firestone's weight fluctuates between 111 and the 120's in this story.

Grades 6-9

Greene, Constance C. Al(exandra) The Great. New York: Viking, 1982. 133 pp.

Al(exandra) the Great is the sequel to Your Old Pal, Al. In this book, it is the summer between the seventh and eighth grade for Al, who still has a weight problem, and the nameless narrator. Both girls live in the same New York City apartment building. Al is anxiously awaiting her upcoming trip to her father and stepmother's farm in Ohio. It is a steamy New York City summer and both girls are broke; the many ways they find to occupy themselves are amusing. For instance, one day they pose as daughters of oil barons and peruse the jewelry cases in Tiffanys.

Al's mother comes down with pneumonia and must be hospitalized. Al chooses to postpone her beloved trip to the farm in Ohio in order to care for her mother. Everyone close to Al realizes what a sacrifice she has made. Al's father and stepmother mail Al a T-shirt that says Al(exandra) The Great on it in order to show their support for her decision.

All the Al books focus on adolescent friendship and the growing up process. Al's weight is not the preeminent issue here. Al is an exceptional character; she is wonderfully funny, knowledgeable about a variety of things (e.g. chastity belts), and sensitive to the needs of others.

Grades 5-8

Greene, Constance C. Your Old Pal, Al. New York: Viking, 1979. 149 pp.

Your Old Pal, Al is the sequel to I Know You, Al. In this book, six months have passed since Al, who still has a weight problem, moved into the same apartment building in New York City as the nameless narrator. The two girls are both in the seventh grade class; they have become fast friends. In this book, however, that friendship is tested.

Al is irritable because her father and stepmother have not followed through on a promised invitation to spend several weeks of the upcoming summer with them on their farm. Al anxiously checks the mailbox everyday, hoping to find a letter from her father and stepmother confirming these plans. Al is also jealous because Polly, an old best friend of the narrator's, is going to stay with the narrator and her family for two weeks while Polly's parents are in Africa.

Al, Polly, and the narrator eventually get on each other's nerves to the point where the girls are not even speaking to one another. Then Al receives her long awaited letter. Al shares the contents of the letter, detailing her summer plans with her father and stepmother, with the

narrator and Polly. All is forgiven and the girls are on speaking terms once again. Al and the narrator discuss their rift and decide that all friendships endure trying times.

Al's weight problem is not the central focus of the novel. An occasional obligatory carrot stick is mentioned, however. At one point, Al is quite pleased and mentions that she has been trying to lose weight and has lost 4 pounds this month.

Grades 4-8

Hautzig, Deborah. Second Star to the Right. New York: Greenwillow, 1981. 151 pp.

The story is told by 14 year old Leslie Hiller. Leslie lives with her 8 year old brother, pianist father, and Jewish mother. Most of the mother's relatives died in concentration camps during WWII. Leslie's mother lives vicariously through Leslie in an apparent attempt to be a part of Leslie's teenage years. Leslie's hidden resentment toward her mother increases. Leslie feels her mother is showing too much interest in Leslie's school and social life. After a bout with the flu, Leslie loses a few pounds and discovers that her weight is something her mother cannot have an impact on.

Leslie's weight plummets from 125 pounds to 71 pounds. Leslie eventually becomes too weak to go to school. Her parents have her examined by several doctors before anorexia nervosa is finally diagnosed. Leslie is hospitalized and begins to drink juices. The story concludes with Leslie still at a dramatically low weight, but beginning to understand her subconscious animosity toward her mother. The book emphasizes the mental treatment of anorexia nervosa, suggesting that when the victim resolves internal conflict, eating will naturally follow.

Grades 7 up

Josephs, Rebecca. Early Disorder. New York: Farrar, Straus, Giroux, 1980. 186 pp.

Wilhelmina (Willa) Rahv is a 15 year old who is terrified of her impending womanhood. Willa idolizes her mother (she works out of the family home as a translator), and coexists with her father (he is a theater critic). Willa is a middle child. Her older sister, Anais, is an artiste; her younger brother, Jason, tells bad jokes and is spoiled.

Willa flounders as she tries to cope with being a child on some occasions, and a young woman on other occasions.

This emotional struggle causes Willa to go from being on a diet to totally abstaining from food. Willa's breasts disappear and her period ceases. Willa's parents take her to several doctors who diagnose anorexia nervosa before Willa consents to regularly visit one of them. Willa's weight has dropped from 114 pounds to 70 pounds. The doctor who is treating Willa extols the virtues of self-examination and encourages Willa to attack her fears of growing up.

Willa is never hospitalized during the course of the story. There are no indications she gains back even an ounce of what she has lost, even at the end of the novel when she is feeling better about herself. The reader is left feeling a little bit of hope, but a lot of despair, about Willa's future.

Grades 9 up

Krummel, Regina. Looking Good. New York: Michael Kesend, 1985. 170 pp.

This book is written in journal form. Ariadne (Ari) writes this journal, that chronicles her anorexia nervosa, with the intent of submitting it to her sophomore English teacher in order to fulfill a requirement. Ari shares some lucid thoughts with the reader, but much of what is written is incoherent rambling. Given Ari's emotional state, there is always the possibility that some or all of what she has written is fabricated to shock the reader (Ari admits the first chapter of her journal is all lies).

Ari and her mother fight throughout the book. Ari desperately wants her mother to show her love and affection, but Ari's caustic tongue, as well as her mother's position as a college professor, prevents this love from being expressed. Ari's father is a college president; he has little time to bother with his overwrought daughter. Ari and her father loathe each other; this is especially true after the father picks the bathroom lock while his daughter is showering and discovers Ari standing in the shower vomiting her day's food intake all over herself.

Ari becomes obsessed about watching her weight. At age 13, she is diagnosed as having anorexia nervosa. She goes into therapy for awhile, but drifts away from it due to lack of interest. Ari's first hospitalization is also unsuccessful.

At age 15, Ari takes up with a macho, sadistic biker who forces Ari to steal for him in return for love and tenderness. When Ari displeases the biker, he beats her up. He finally tires of her and she is dumped off in her parent's yard; at this point, she is an injured, doped up, stinking mess. The hospitalization that occurs at this point proves more successful than the first. Ari realizes

she must choose either life or death. She joins an anorexic survivors' group. This therapy with fellow anorexics seems to make Ari realize she is not a freak battling this disease alone. Both Ari's physical and mental needs are attended to during the second hospitalization, as opposed to simply the physical care she receives during her first hospitalization.

Grades 9-12

Levenkron, Steven. The Best Little Girl in the World. Chicago: Contemporary, 1978. 196 pp.

Francesca Dietrich begins this story as a 15 year old 98 pound ballerina. She is truly the best little girl in the world. Francesca's older sister causes her parents a lot of grief, but Francesca is the model daughter. Francesca's ballet instructor encourages Francesca to lose a few pounds; this incident seems to trigger the anorexia nervosa. Kessa is the name adopted by the anorexic Francesca. Kessa's weight plummets to 69 1/2 pounds before her doctors decide to take drastic measures. A surgeon inserts a catheter into Kessa's jugular vein just a couple inches from her heart. Glucose gradually enters her body through this tube; after several days Kessa is out of immediate danger. Kessa's male psychologist, Dr. Sandy Sherman, is a likeable character. He is always available when she needs him. Dr. Sherman eventually enables Kessa to realize that many of her problems stem from her not being able to demand parental attention and affection.

Levenkron's portrayal of Kessa is not pleasant, but is consistent with what actually occurs to someone with an extreme case of anorexia nervosa. Levenkron is an expert on anorexia nervosa and has treated anorexics since 1970.

Grades 9-12

Levenkron, Steven. Kessa. New York: Warner, 1986. 247 pp.

Kessa is the sequel to The Best Little Girl in the World. Kessa concentrates on the therapy Kessa Dietrich undergoes following her three month stay in the hospital. Dr. Sandy Sherman reappears in this novel in the role of Kessa's psychologist and most trusted friend. Kessa is now 16 years old and has returned to high school. She develops an interest in gymnastics, and her muscular body weighs a normal 110 pounds. Kessa is physically much better, but she is mentally ill-prepared to handle the world.

Kessa befriends another anorexic, Diedre, and attempts to help Diedre combat her own anorexia nervosa. Diedre ignores Kessa's warnings, and eventually dies of a heart

attack brought on by the anorexia nervosa. Kessa's own recovery is delayed temporarily by this incident. Kessa becomes friendly with another young woman in gymnastics, a Black from Harlem named Denise. Denise seems so secure and self-confident that Kessa is taken aback when she becomes aware of Denise's own self-doubts. Kessa becomes cognizant of the fact that no one is infallible. More importantly, Kessa realizes that you do not have to be perfect for others to like you, and for you to like yourself.

At the back of this book are names, addresses, and phone numbers of organizations that assist victims of anorexia nervosa and bulimia.

Grades 6 up

Lipsyte, Robert. One Fat Summer. New York: Harper & Row, 1977. 151 pp.

Bobby Marks, his older sister, and his parents begin their yearly ritual of vacationing at a New Jersey resort for the summer. Bobby is 14 years old and weighs at least 200 pounds (he always jumps off the scale when the needle passes 200). Bobby applies for a summer job that entails mowing the lawn at a spacious home belonging to a Jewish doctor. Bobby gets the job and works 9 to 3 Monday through Friday. Bobby thinks so little of himself that he allows the doctor to pay him half the advertised hourly wage. Bobby is also terrorized by a gang of teenage thugs. At one point during the story, these delinquents take Bobby to an island by the resort and leave him stranded there naked all night during a thunderstorm.

As the weeks pass by, Bobby notices that he is losing weight because of all the lawn mowing he is doing. By the close of the novel, his weight has dropped to a respectable 176 pounds. Most importantly, Bobby gains some self-esteem. He demands a raise from the doctor, and he fights with one of the hoodlums. Bobby also resolves to keep the weight off because he is happier now than he has ever been.

This novel is set in 1952, and the book is filled with references to Ike, Eddie Fisher, and Joe DiMaggio. The author presents a somber view of 1952, too; there is an anti-Black and anti-Semitic sentiment held among the WASPS in this resort town. Bobby loses weight because of the combined effect of rigorous exercise and lower food intake. Bobby has learned to eat only when he is really hungry.

Grades 8 up

Miles, Betty. Looking On. New York: Alfred A. Knopf, 1978. 187 pp.

Rosalie Hudnecker sees herself as a fat 14 year old without any real sense of belonging. Rosalie's mother has a seemingly tedious life supporting the two of them on a beauty operator's income. The elderly woman who lives next door decides to chop down the trees in her back yard and put a trailer there instead to rent to college students. A young, attractive married couple attending the local community college moves into the trailer. Rosalie begins spying on them. Rosalie goes over and visits the couple nearly every day; she alienates her friends and family because of this bizarre behavior.

Rosalie becomes disillusioned when she begins to realize the couple's life is far from perfect. Rosalie has lost several pounds so she will appear more attractive to the couple. When peers and her mother comment on her weight loss, Rosalie decides maybe her life is not so hopeless after all. Rosalie loses weight by eating less junk food and more fruits and vegetables.

Grades 6-9

Park, Barbara. Buddies. New York: Alfred A. Knopf, 1985. 135 pp.

Dinah Feeney is a 13 year old who decides to spend two weeks at Camp Miniwawa this summer in an effort to discover how one can become popular. At the bus stop en route to camp, 12 year old Fern Wadley stumbles into Dinah's life and will not go away. Fern is a fat nerd. Much to Dinah's dismay, they are both assigned to bunk in the same cabin. Fern Wadley epitomizes the classic nerd. One time Fern asks to borrow Dinah's barrette and proceeds to use it to clean under her toenails. In addition, Fern's eating habits are atrocious.

The other girls in the cabin are all for telling Fern to get lost, but Dinah does not want to be so blunt. Dinah tries to tactfully let Fern know she is no longer wanted, but Fern does not take the hint. Finally, in a fit of exasperation, Dinah looks Fern straight in the eye and pushes her into the water while the girls are canoeing. The other girls are relieved to finally rid themselves of Fern, but Dinah feels badly and apologizes. Fern does not accept Dinah's apology; both girls go home not speaking to one another. As Dinah reflects upon the experience, she realizes popularity is not so important after all. The main thrust of the novel is on peer pressure to go along with the

group. Fern's uniqueness is not accepted by the other girls, thus she is ostracized.

Grades 5-8

Perl, Lila. Fat Glenda's Summer Romance. New York: Clarion, 1986. 166 pp.

Fat Glenda's Summer Romance is the sequel to Hey, Remember Fat Glenda? This story takes place the summer following Glenda's year in the eighth grade. In this book, Glenda Waite is reunited with her seventh grade chum, Sara Mayberry. Glenda has shed some weight (she now weighs in the high 130's), but she is still self-conscious about her size and is cognizant of every morsel she eats. The Mayberry family lives in California, but when Mrs. Mayberry negotiates to manage the Thorn Ridge Inn in New England, the family packs up and travels east for the summer. In the process, Mrs. Mayberry contacts the Waite family in Long Island and makes the necessary arrangements for Glenda to spend the summer at the Thorn Ridge Inn.

Glenda and Sara are waitresses-in-training at the inn's dining room. It is here where Glenda meets Justin, the mysterious grand-nephew of the owner of the inn. Glenda and Justin become friends, but Justin suddenly disappears without any explanation. This, coupled with the tension between Glenda and Sara over the realization that their friendship has changed after the months of separation, leads Glenda back to her old habit of binging on food. Her waitress uniform begins splitting at the seams.

Justin returns to the inn the night of the Fourth of July fireworks show. He confides to Glenda that he had to leave in order to make a court appearance; he stole some stereo parts on a dare and was caught. Glenda then confides to Justin about her long fought battle over her weight. Glenda is ready to resume her dieting once again; this time she is doing it for Justin.

The author again, as she did in Hey, Remember Fat Glenda?, has Glenda become motivated to lose weight to please someone else. The mental facet of Glenda's eating disorder is apparent when she is feeling rejected by both Sara and Justin and begins eating with reckless abandon.

Grades 5-7

Perl, Lila. Hey, Remember Fat Glenda? New York: Clarion, 1981. 168 pp.

Glenda Waite is an eighth grader at Havenhurst Junior High. She jogged daily the summer prior to entering the eighth grade and lost 16 pounds in the process, but she

still has weight to lose. Glenda's parents are one-dimensional characters. The father is a wimpy sort and the mother is slightly neurotic (e.g. she begs Glenda to invite some friends over, but when Glenda complies and the girlfriends soil the eggshell white carpeting in the living room, the mother screams about how much it will cost to have the carpeting shampooed).

Glenda's English teacher, Mr. Hartley, is an ex-Broadway dancer. Glenda develops a schoolgirl crush on Mr. Hartley; he serves as an incentive for her to drop weight even more rapidly. Hartley uses Glenda, although she does not realize it until the close of the novel. When Glenda finally comes to this realization, she goes on an eating binge. This uncontrollable pre-Christmas cookie-eating binge is witnessed by Glenda's mother. Glenda continues to eat large quantities of food for weeks. Slowly, Glenda realizes when she is distraught over something, she binges. Glenda gains around 20 pounds during her weeks of binging; however, her acknowledging the source of the problem leads the reader to the conclusion that Glenda will have greater control over her eating impulses in the future. Glenda does not have high self-esteem; she only feels good about her weight loss when she is trying to please Mr. Hartley.

Grades 5-7

Rabinowich, Ellen. Underneath I'm Different. New York: Delacorte, 1983. 180 pp.

Amy Williams is a high school sophomore who is perceived by others, and perceives herself, to be fat. She stands 5'3" tall and wears a size 14. She has only one close friend, Cara, who has befriended Amy because her dowdiness does not threaten Cara's claim as the most beautiful girl in the school. Boys have generally ignored Amy. This holds true until that fateful day at Janet Lane's School of Ballet. Amy is performing pirouette after pirouette about the dance studio, when she suddenly loses her balance and falls clumsily into the pianist's lap. Ansel Pierce, the pianist, is overwhelmed with desire and passionately whispers to Amy how beautiful he thinks she is.

Amy soon discovers that Ansel is an artist. He is particularly fond of Ruben's paintings of voluptuous women. Amy offers to model for Ansel (although she wonders whether there is any connection between her plumpness and Ansel's infatuation with large women), and their friendship blossoms into romance. Amy soon begins to notice that Ansel is behaving oddly; she attributes this to his innate artist's erratic temperament. No one is more surprised than Amy when Ansel is placed in a mental institution because of depression. Amy keeps herself busy by working in her

mother's beauty salon. It is here that Amy realizes that slim, beautiful people have problems, too. The novel closes with a somewhat recovered Ansel bidding adieu to Amy; he is going to move to Paris and live with an eccentric Aunt. Amy loses weight during the course of the novel. It is not that Amy is consciously dieting; rather she explains her weight loss as being related to the fact that stuffing herself has lost its appeal.

Grades 6-8

Ruckman, Ivy. The Hunger Scream. New York: Walker, 1983.
188 pp.

This novel is unusual in that a Black teenager, Daniel, plays the part of best friend (maybe potential boyfriend) to the white 17 year old anorexia nervosa victim, Lily. Pressure comes from both sets of parents discouraging this potential romantic relationship. Lily Jamison is a popular high school cheerleader who decides to go on a diet when her weight reaches 129 pounds. Her weight has dropped to 78 pounds by the time of her forced hospitalization. Menstruation has ceased, and Lily is severely dehydrated due to excessive intake of Ex-lax.

Lily's therapist, Dr. Jessica Coburn, is a likeable character who helps Lily realize that her anorexia nervosa was a plea for attention and independence. Dr. Coburn invites Lily's family to therapy sessions, so that all the family members can learn how to communicate with each other. Dr. Coburn encourages Lily to show assertion when it comes to personal decisions. Lily's hospital therapy involves a privileges-for-pounds contract that rewards Lily for incremental weight gain. Lily gets her weight back to the 90's by the close of the story, but more importantly she has gained self-esteem.

Grades 8-12

Sachs, Marilyn. The Fat Girl. New York: E. P. Dutton, 1984. 168 pp.

Jeff Lyons is a handsome high school senior. He meets Norma Jenkins in ceramics class. Norma is tall and blonde; she looks like a fairy tale character. Ellen De Luca is also taking ceramics, but Ellen is a two-hundred-pound loner who consistently wears matronly polyester clothing. Jeff begins to date Norma because they look so good together.

Jeff's parents are divorced. The split was not amicable, and hard feelings still persist. Jeff's mother blames all her current problems - loneliness, being a single parent, managing a house and a career - on Jeff and his

sister Wanda. Jeff is so controlled and manipulated by his mother that he feels the need to do the same to another person. One day in ceramics class he comments to peers about how fat and disgusting Ellen is. Ellen overhears and begins to cry. Jeff consoles her and ends up making a pizza date to express his remorse. Jeff slowly begins to influence everything in Ellen's life: her clothing, make-up, gestures, and diet.

Ellen initially is grateful to Jeff. She had contemplated suicide before she met him; he gives her self-confidence. Ellen goes from being obese to being overweight during the course of the story. She develops friendships with peers and other males begin to find her attractive. Ellen slowly realizes she does not need Jeff as much as she once did. Conversely, Jeff has become more reliant on Ellen. Jeff and Ellen go to the Senior Prom together; it is here that Ellen tells Jeff she is through being manipulated by him. Ellen loses weight by going to Weight Watchers on a weekly basis, and although she is anxious to buy regular clothes, she recognizes that weight reduction is a slow and arduous process.

Grades 7-12

Shreve, Susan. The Revolution of Mary Leary. New York: Alfred A. Knopf, 1982. 185 pp.

Mary Leary is having a crisis the summer between her junior and senior year in high school. She feels emotionally suffocated by her devout Catholic mother, and is depressed about her own obesity. Mary's mother is involved with Life Chance (an anti-abortion group), and also sporadically attempts to ban books the mother feels are nihilistic in content (e.g. Lord of the Flies). Between Mary's mother constantly spouting the virtues of being a good Catholic, and the rest of Mary's family doing their best to give the impression of being good Catholics, Mary is at her wit's end and decides to run away from home.

Mary flees to the home of Dr. Sally Page. Like Mary's father, Dr. Sally Page is a professor at Georgetown University. She is anything but the proverbial Catholic, however. Dr. Page believes in giving young women choices concerning contraceptive methods; she also believes abortion is an acceptable option available to women. Mary realizes things are no more idyllic at the Page household than they were at her own home. Mary Leary comes to terms with her mother, and in the process comes to like herself. Just as Mary comes to the realization that it is acceptable for her family to be imperfect, she also comes to the realization

that her weight problem is something she can learn to live with.

Grades 9-12

Snyder, Ann. Goodbye, Paper Doll. New York: NAL, 1980. 155 pp.

Rosemary Norton is a 17 year old high school junior whose weight drops from 108 pounds to 86 pounds during the course of this story. Her parents are not aware that their daughter is suffering from anorexia nervosa; the mother is preoccupied worrying about her husband's extramarital affair. Rosemary's boyfriend is worried though. He is Jason Galanter, the son of famous photojournalist, Jason Galanter, Sr. Jason's grandmother, the Countess, is aware that Rosemary is troubled. The Countess acts as a surrogate mother to Rosemary.

Rosemary's weight continues to drop, and she is hospitalized only after she has gotten in a car crash and becomes unconscious. In the hospital she is under the care of both her family physician and a psychiatrist. Rosemary refuses to eat and yanks out her own IV. Only after she hears a television news special report that tells of Jason Galanter, Sr.' death at the hands of Middle East terrorists, does Rosemary decide she wants to get better in order to console Jason. She somberly removes her IV and requests food.

Goodbye, Paper Doll is too melodramatic and contrived to be believable. Anorexics do not get better for the sake of someone else. Their behavior is too entrenched for this to occur.

Grades 8 up

Stren, Patti. I Was A 15-Year-Old Blimp. New York: Harper & Row, 1985. 185 pp.

Gabby Finkelstein is a 150 pound self-proclaimed blimp. She has a sarcastic tongue and uses it whenever possible; her insults are usually directed toward her younger brother, Philip. Gabby's parents are concerned about Gabby's unhappiness over her weight problem.

Gabby's best friend, Nicole, encourages Gabby to vomit her meals during the week prior to the big school dance. Gabby becomes accustomed to this habit and develops bulimia. When Gabby's parents discover their daughter is a bulimic, they solicit the advice of a medical professional and end up sending Gabby to Camp Blossom (a fat camp) for the summer. Gabby slims down to 110 pounds, and decides she needs to see a therapist once she returns home because she still has

bulimic urges. At one point in the novel, Gabby's mother discusses with Gabby the specific health risks involved with bulimia. Gabby's mother and doctor advocate a low-calorie balanced diet that will result in a medically safe weight loss.

Grades 7-10

Talbot, Charlene Joy. The Great Rat Island Adventure. New York: Atheneum, 1977. 164 pp.

Joel Curtis is an obese 11 year old who makes a habit out of hiding contraband foods (e.g. candy bars and chips) in the apartment he shares with his mother. His parents are divorced. This summer his mother makes arrangements for Joel to spend two months with his father while she goes to Europe. The father is an ornithologist and he is spending the summer on an island that is off limits except to himself and a handful of graduate students.

Joel arrives on the island and quickly realizes his father has not changed since the divorce; the father's first love is his birds. Joel becomes increasingly bored with the endless bird watching on Great Rat Island. Then he meets Vicky. Vicky has run away from summer camp and is living by herself on Little Rat Island. Joel comes across Vicky while she is on Great Rat Island gathering bird eggs. The two become friends and Joel agrees to keep Vicky's existence on Little Rat Island a secret.

One day a hurricane warning is given for the area, and Joel secretly travels to Little Rat Island to make certain Vicky is all right. The two become trapped on Little Rat Island during the hurricane. They survive the storm because of Joel's resourcefulness. Joel's father is emotionally overwhelmed to learn his son is alive and well. There is some hope the relationship between father and son will grow stronger because of this event. Joel loses some weight while he is on the island. This weight loss can be attributed to Joel's increased activity, and the lack of junk food items at his disposal. Joel evolves into a self-sufficient young person during the course of this story.

Grades 4-7

Wiley, Margaret. The Bigger Book of Lydia. New York: Harper & Row, 1983. 215 pp.

Lydia is only 10 years old when her father dies. She is convinced his small size had something to do with his death. The entire Bitte family is diminutive in stature. Lydia begins writing the Bigger Book and fills it with hints on becoming bigger. Lydia works diligently on filling the

book, but eventually misplaces it and forgets about it. Several years pass.

A close friend of Lydia's mother has a niece, Michelle, who is about Lydia's age and also is anorexic. Michelle has been in three hospitals, and is described as being emaciated to the point of having a skeletal appearance. She comes to Kalamazoo and lives with the Bittes. Michelle and Lydia become confidants. Lydia begins to eat more to make up for the many meals Michelle refuses to touch. The two teenagers become physical opposites of sorts. Lydia complains about her additional weight and asks Michelle to begin to eat so that Lydia can rid herself of these subconscious food cravings. Michelle complies, and in a few months is well enough to go home. While Michelle is packing to go home, she discovers Lydia's old Bigger Book in a bureau drawer, and is persuaded by Lydia to keep the book as a symbol of their friendship.

The events in this book that lead Michelle to begin eating are dubious. Anorexics do not eat simply because another individual asks them to.

Grades 7 up

Fiction Published Prior to 1976

Blume, Judy. Blubber. New York: Bradbury, 1974. 153 pp.

Linda Fischer is an 11 year old fifth grader who is also obese. She is nicknamed Blubber by her taunting peers following an oral report on any mammal of Linda's choosing . . . she chose the whale. Linda's classmates are cruel to her, to the point of being sadistic. Jill Brenner, a member of the class who is also the narrator of the story, joins the others in making every school day as miserable as possible for Linda. For example, the students force Linda to show her underpants to the class, and to eat a chocolate covered ant. Jill, in a rare moment of compassion, comes to Linda's assistance only to find herself the next target of her peers' cruelty. Blubber succeeds in making the reader realize how an obese individual can be treated as a social outcast in a school setting.

Grades 4-7

Danziger, Paula. The Cat Ate My Gymsuit. New York: Delacorte, 1974. 147 pp.

Marcy Lewis is a 13 year old 9th grader who is also obese. She repeatedly refers to herself as being a baby

blimp. A new English teacher begins in the middle of the school year. Ms. Finney encourages her students to express their differences with pride, and to allow their unique qualities to come through. Ms. Finney shows her own uniqueness by refusing to say the Pledge of Allegiance in her room. This refusal leads to Ms. Finney's dismissal by the school's boorish principal, Mr. Stone.

Marcy and three classmates lead the fight for Ms. Finney's reinstatement. Marcy has never fought for her convictions before, and this struggle gives her some much needed self-esteem. Ms. Finney is reinstated by the Board of Education, but subsequently resigns. More importantly, Marcy begins to shed a few pounds and sees herself as having gone from a blimp to a helium balloon.

Marcy's father is domineering to the point of being obnoxious. He loathes Ms. Finney for the women's liberation and pinko ideas she is passing on to her students.

Grades 7-9

Gilbert, Nan. The Unchosen. New York: Harper & Row, 1963. 214 pp.

Ellen Frazer, Debbie Fuller, and Kay Nicholson are the best of friends. They are also on the outer fringes of their peer group at John Easton High in Oregon. They want desperately to fit in, but each girl has some physical trait that prevents her from belonging. Kay is tall and gangly, and both Debbie and Ellen are obese. The story is told by Ellen, and she has named their group The Unchosen.

During their senior year, the girls devise a scheme that will hopefully enable them to gain entrance to the social scene. Ellen and Debbie go on a sensible diet and begin to exercise regularly. The major portion of this scheme, however, involves the planning of a party to be held at Ellen's house. Ellen, Debbie, and Kay believe the boys who come to the soiree will feel obliged to return the favor and ask the girls out on dates.

The party is a huge success, much to the surprise of the hostesses, but the boys do not start asking the girls out on dates. As Ellen tells it, herself, Debbie, and Kay are buoyed by the party to the extent that they are willing to explore personal interests and risk rejection. By the close of the school year, The Unchosen have drifted apart.

Grades 8-10

Greene, Constance C. A Girl Called Al. New York: Viking, 1969. 127 pp.

This novel chronicles the beginning of the friendship between the nameless narrator and Al (short for Alexandra). Al and her mother have just moved from the West Coast to New York City. Al's parents are divorced, and the mother has accepted a position in a department store as a buyer of Better Dresses. Al and the narrator are both in the same seventh grade class, and they both live in the same apartment building. Al realizes she is fat, but she is not overly concerned about her weight because she is a self-proclaimed nonconformist. Al's mother, however, is concerned with appearances and she takes Al to a doctor to be put on a diet.

The narrator and Al strike up a friendship with the assistant superintendent of the building, Mr. Richards. Mr. Richards is one of the few adults who treats the girls seriously. The novel ends following Mr. Richard's death from a heart attack. The girls accept his death and fondly remember the good times they had with their friend. Al has lost some weight and has abandoned her pigtails for a trendier hair style. Al looks older to the narrator than she did at the beginning of the story; the narrator ponders whether they are both starting to grow up. Al loses the weight by eliminating junk food snacks.

Grades 6-8

Greene, Constance C. I Know You, Al. New York: Viking, 1975. 126 pp.

I Know You, Al is the sequel to A Girl Called Al. In this book, Al and the nameless narrator are still both in the same seventh grade class, and both girls live in the same apartment building in New York City. Al is 13 years old, and she lives with her mother. Her parents are divorced. Al is still fat, although not as obese as she was in A Girl Called Al.

In this book, Al is anxious about getting her first period. She is the only girl in the seventh grade who has not gotten her period yet. One day Al's father calls Al and invites her out for dinner. Al's father informs Al that he is getting remarried, and he asks that she come in a week for the wedding. Between choosing an outfit to wear to the ceremony, and coping with her mother's mixed sentiments about her father's wedding plans, Al survives the week. Al calls the narrator long distance to tell her friend about how great her new stepmother and stepbrothers are, and to inform the friend that Al got her first period right before the wedding.

Al's weight problem is not the central focus of the story, although it is mentioned on occasion. Al's mother keeps only raw vegetables on hand for snacks, and Al has a difficult time looking into a mirror or trying on clothes without making derogatory remarks about herself.

Grades 6-8

Hamilton, Virginia. The Planet of Junior Brown. New York: Macmillan, 1971. 210 pp.

Junior Brown and Buddy Clark are eighth grade boys who, for 2 1/2 months, have been hiding out in the school basement instead of attending classes. They have been hiding in a secret room that also houses a solar system designed by the janitor, Mr. Pool. Junior Brown is a 262 pound mama's boy. He is a potential concert pianist. Buddy Clark is a homeless street kid who helps younger homeless children develop coping mechanisms to deal with their plight.

After Mr. Pool is reprimanded for being unavailable while he is on duty (he is actually in the secret room), Mr. Pool becomes so frightened that he decides to dismantle the secret solar system. Junior Brown completely loses control of his faculties when he internalizes the fact that his secure, secret world is disappearing. Buddy realizes he must hide Junior with the younger homeless children in order to protect Junior from himself.

This novel is more concerned with mental illness than with Junior Brown's weight problem. Junior's mother takes him to Weight Watchers and tries to control his diet, but Junior ignores her efforts to control his eating habits. With the exception of controlling how much he eats, Junior Brown is a victim of his mother's possessiveness.

Grades 8-10

Holland, Isabelle. Heads You Win, Tails I Lose. Philadelphia: J. B. Lippincott, 1973. 159 pp.

Melissa Hammond is a 15 year old with a weight problem. Boys are not interested in her, all but a few female classmates ignore her, and her parents nag her about her weight when they are not fighting with each other. When Melissa earns a part in the school play, she begins to steal her mother's diet and sleeping pills. She desperately wants to be svelte for the production. Without realizing it at the time, Melissa becomes hooked on the speed in the pills and has to double the dosage to maintain the effect. Melissa is ecstatic because she is finally losing weight. One day in rehearsal she behaves abnormally and her secret

is discovered. Her father and mother are both shocked at this revelation, and her father decides to stay in his hopeless marriage for his daughter's sake. Melissa sees a nutritionist to learn about healthy ways to keep her weight off. She promises not to take any more pills.

Melissa is a sensitive teenager, especially about her weight. Her parents practically ignore her, and her father slaps her when she gains the self-confidence to question something he says. The parent-daughter relationship is strained, something other teens may be able to identify with.

Grades 7 up

Kerr, M. E. Dinky Hocker Shoots Smack! New York: Harper & Row, 1972. 198 pp.

Dinky (Susan) Hocker is a 14 year old who is also obese (note the absurdity of her name). She stands 5'4" and weighs 165 pounds. Dinky is intensely interested in bizarre happenings (e.g. The Elephant Man: A Study In Human Dignity by Ashley Montagu). Dinky's mentally ill cousin, Natalia, lives with the Hocker family. She is just about Dinky's age. When Natalia becomes nervous, she begins speaking in rhyme.

The story is told by Tucker Woolf, a normal 15 year old, who meets Dinky and her cousin after he advertises to find a new home for his cat. Tucker becomes smitten with Natalia, so he becomes a regular fixture at the Hocker household.

Dinky's parents are liberals who are concerned with community causes. Mrs. Hocker's latest project is counseling ex-drug addicts. Dinky perceives her mother's volunteer involvement as being detrimental to her own adolescent needs. When Dinky's mother receives the community's annual Good Samaritan award, Dinky is so angered that she spray paints "Dinky Hocker Shoots Smack" all over the community sidewalks, walls, etc. Dinky does not shoot smack, but she feels she must do this as a last resort to get her parents to notice her. Dinky's scheme works; her mother quits her volunteer job, and the family vacations in Europe in order to reunite itself.

Dinky Hocker loses a nominal amount of weight at one point during the story. Dinky accomplishes this by joining Weight Watchers. When she loses interest and quits, she gains back the weight she lost and more.

Grades 7 up

Mazer, Harry. The Dollar Man. New York: Delacorte, 1974.
204 pp.

Marcus Rosenbloom is a 13 year old seventh grader who is large for his age. He sees himself as being fat, and so do his peers at school. Marcus fantasizes constantly, mostly about his father. Marcus' father deserted his mother before Marcus was born. In his fantasies, Marcus sees his father as a mix between Superman and a secret agent.

Marcus becomes involved with a group of delinquents at school. When these boys frame Marcus over an incident involving marijuana, Marcus becomes obsessed with finding his father. During this time, Marcus loses weight without effort; he just does not have time to think about eating. When Marcus finally locates his father, he finds a rich, egocentric businessman who attempts to buy Marcus' affection. Marcus never gets the emotional attachment he wanted from his father, but Marcus goes home to his mother all the wiser.

Grades 6-10

Perl, Lila. That Crazy April. New York: Seabury, 1974.
188 pp.

Cress Richardson is an obese 11 year old. Her liberal parents are not like the parents of Cress' friends. Cress' mother is actively involved in the women's movement. Cress feels torn by the conflicting messages she is receiving from family and friends regarding the appropriate role of females in our society.

Cress is encouraged by her beautiful fashion model friend, Monique, to be a model in a bridal show. The persons running the bridal show decide Cress would make the perfect ringbearer. This, coupled with her clumsiness when marching down the aisle, brings Cress to tears.

She then decides to join her school's metal-sculpture club. The male teacher supervising the club will not allow Cress to join because she is a girl. When Cress' mother decides to formally protest this incident, Cress becomes so upset and embarrassed that she runs away.

The story ends with Cress packing a trunk to take to a camp that teaches young people how to rough it in the wilderness. It has been a couple of months since that crazy April, and the turbulent emotional ups and downs that came with that month. Even though Cress is obese, her weight is not the main issue in the novel.

Grades 5-8

Savitz, Harriet May. The Lionhearted. New York: John Day, 1975. 149 pp.

Rennie Jackson, Lee Snyder, and Bess are all high school students at Ridge High. Rennie is confined to a wheelchair; she became paralyzed two years ago following a motorcycle mishap. During the course of the story Rennie falls in love with Lee, a handsome senior whose father has recently died. Bess is an obese teenager who has a very low opinion of herself. Bess and Rennie become best friends.

Rennie's ability to cope and conquer barriers in a society where the handicapped are discriminated against comprise the bulk of this novel. It should be noted that The Lionhearted was written prior to the passage of public law 94:142; public buildings (e.g. the school) in this story are not accessible by those persons confined to a wheelchair. Bess is inspired to lose weight during the story out of admiration for Rennie's courage.

Grades 7-9

Nonfiction Published Between 1976 and 1986

Arnold, Caroline. Too Fat? Too Thin?: Do You Have a Choice? New York: William Morrow, 1984. 100 pp.

This book is an excellent source for those who want basic information about why some people are either too fat or too thin and other people are average in body size. Arnold reassures her readers that a certain percentage of body fat is necessary for human life. She also stresses that exercise, as well as proper nutrition, is essential to good health. Arnold states that there are definite limits to which one can push one's body size; she suggests that individuals establish realistic goals for their own body shape. A bibliography and an index are located at the back of the book.

Grades 7 up

Claypool, Jane, and Cheryl Diane Nelsen. Food Trips and Traps: Coping with Eating Disorders. New York: Franklin Watts, 1983. 90 pp.

Claypool and Nelsen discuss compulsive eating, bulimia, and anorexia nervosa. The authors make a distinction between food trips and food traps. Claypool and Nelsen contend that everyone is the victim of an occasional food trip. A food trip is an indulgence to a favorite food every

now and then. Claypool and Nelsen define a food trap as a situation where one's whole existence revolves around food. According to the authors, persons who are victims of eating disorders are locked into food traps. A list of research centers and institutions offering eating disorder therapy, as well as a bibliography and an index, is located at the end of the book.

Grades 8 up

Eagles, Douglas A. Your Weight. New York: Franklin Watts, 1982. 63 pp.

Eagles discusses the biological and social factors that affect weight. The book suggests that the obese teenager eat nutritionally sound foods in normal quantities, but eliminate sweets and increase exercise activity as a sensible means to control weight. The author encourages obese young people to seek out a support group, and endorses Weight Watchers as being an excellent resource of this sort. There is a glossary, a bibliography, and an index at the back of the book.

Grades 5-8

Landau, Elaine. Why Are They Starving Themselves?: Understanding Anorexia Nervosa and Bulimia. New York: Julian Messner, 1983. 110 pp.

Landau discusses both anorexia nervosa and bulimia in a fashion that is understandable to the layperson, yet has enough depth so the reader has a thorough knowledge of both eating disorders. A case study is offered to illustrate nearly every concept presented. Landau provides definitions for both bulimia and bulimarexia. She states that bulimia exists when women binge and purge yet remain around 5 pounds under or over their ideal weight. Landau says bulimarexia exists when women binge and purge but are extremely thin. The last chapter of the book discusses various treatments that are used on individuals suffering from anorexia nervosa or bulimia. A bibliography and an index follow this chapter.

Grades 8 up

Levenkron, Steven. Treating and Overcoming Anorexia Nervosa. New York: Scribner's, 1982. 205 pp.

Levenkron describes anorexia nervosa as occurring usually in one of three ways. Intake limiting is the most common form of anorexia nervosa and can be described as slow

starvation. Anorexia/bulimia is a less common form of anorexia nervosa and exists when the victim alternates between starving and bingeing. Levenkron identifies bulimarexia as the third form of anorexia nervosa (some researchers identify anorexia nervosa and bulimia as separate diseases, exclusive of one another). Bulimarexia exists when the victim routinely vomits food intake in order to minimize weight gain.

Levenkron is a psychotherapist who has treated anorexics since 1970 and is a leading expert on anorexia nervosa. He favors abandoning traditional psychotherapy when treating anorexics, and opts instead for nurturant-authoritative psychotherapy. This latter approach attempts to guide the anorexic in the shifting of primary loyalty from the imaginary mother (the disease) to the therapist. The therapist eventually assumes the role of the victim's mother and father for the duration of the therapy, usually two to five years. Levenkron stresses that the management of the anorexic involves a mental health practitioner and a medical doctor working as a team. The physician works to keep the patient alive, and the therapist tries to uncover what led to the anorexia nervosa in the first place. Levenkron uses case studies from his practice to serve as examples of how the disease can differ in severity. An index is located at the end of the book.

Grades 9-12

Liu, Aimee. Solitaire. New York: Harper & Row, 1979. 215 pp.

This book is an autobiographical account of Aimee Liu's case of anorexia nervosa. Liu tells of early childhood years spent in India as the daughter of a diplomat. Liu returns to the United States and enters kindergarten, but feels she never really belongs in the same group as her school classmates. Liu also becomes increasingly self-conscious of her parent's affluent lifestyle. Her parents expect Liu to be an obedient, well-mannered child, and she plays the role perfectly.

A casual remark about Liu's chubbiness, made by her grandmother when Aimee is only 9 years old, sets the groundwork for the beginning of the anorexia nervosa that is to ravage Aimee Liu's body from age 14 to age 19. Liu's weight during her fourteenth year drops from 130 to 90 pounds.

Liu's junior high and high school years are spent arguing with her parents about her extreme thinness, frenziedly exercising, and giving advice to girlfriends on how they too can become the master of their bodies. Liu fasts for days on end to keep her weight low, but she does

occasionally binge. Following a binge, Liu routinely forces herself to vomit. Liu's parents insist she visit a doctor to investigate the reason for her missed periods. Anorexia nervosa is never diagnosed (Liu had this disease in the 1960's and early 1970's, perhaps prior to anorexia nervosa being readily recognized by the medical community), and neither hospitalization nor therapy is ever considered.

While Liu is a freshman at Yale, she gradually begins to gain weight and to realize the bizarre hold her obsession with her weight has had over her for the past 5 years. She suspects that the move away from home and onto a college campus was the instrumental point in forcing her to abandon her little girl facade and opting instead for womanhood.

Grade 9-12

Lukes, Bonnie L. How to Be a Reasonably Thin Teenage Girl: Without Starving, Losing Your Friends or Running Away From Home. New York: Atheneum, 1986. 86 pp.

Lukes outlines the plan that has worked for years in keeping her own weight down. The author's intent is to teach the reader good eating habits (e.g. count your calories). Lukes warns her audience that they will not lose weight quickly by adhering to this plan, but the weight they do lose is more likely to be kept off than weight lost by crash dieting. Lukes warns the reader that it is indeed possible to be too thin; she warns of the dangers of contracting anorexia nervosa under these circumstances. An index is located at the back of the book.

Grades 7 up

O'Neill, Cherry Boone. Starving for Attention. New York: Continuum, 1982. 187 pp.

This book is in an autobiography written by Cherry Boone O'Neill (daughter of singer Pat Boone). It tells of O'Neill's ten year struggle with anorexia nervosa. Cherry Boone O'Neill is the eldest of Pat and Shirley Boone's four daughters. The strain of being both the firstborn and coping with the constant public scrutiny that comes from being involved with show business eventually prove to be too much for O'Neill.

After reaching a high weight of 140 pounds (she is 5'7") in her early teenage years, Cherry begins a strict diet and exercise regimen that eventually takes over every facet of her life and leads her to becoming anorexic. Cherry routinely steals laxatives, vomits what she does eat, and lies to her parents about her bizarre behavior. At her

lowest weight, prior to beginning psychotherapy, she weighs 82 pounds.

It is revealed in the book that Cherry is spanked by her father until age 18, and then spanked by her husband. The spankings are precipitated by O'Neill's lying to either her father or her husband about facets of her eating disorder. This type of physical submission was evidently expected in this Christian household.

As a last resort, Cherry and her husband attend psychotherapy sessions. This Christian therapist (he uses Scripture in his therapy sessions) immediately prescribes lithium carbonate for O'Neill to stabilize her mood swings. The medication works as intended and after six months of therapy, much of which is devoted to the importance of learning to love yourself, Cherry is deemed cured of anorexia nervosa.

Keeping in mind this book is peppered with both passages from the Bible and apparent signs from God, the author's personal thoughts regarding her battle with anorexia nervosa make for compelling reading. Boone family photographs are included in the book, as well as a listing of national organizations that assist anorexics.

Grades 9-12

Peavy, Linda, and Ursula Smith. Food, Nutrition, & You. New York: Scribner's, 1982. 197 pp.

This book is divided into four parts, the last fourth being particularly germane to this research study. The last quarter of the book discusses the adolescent growth spurt, adolescent obesity, sensible dieting for teenagers, particular hazards inherent to being a student athlete, and finally, several jolting comments about world famine. Anorexia nervosa is discussed briefly within the discussion of obesity.

The authors warn readers that crash dieting among teenagers may actually inhibit the fullest possible adolescent growth spurt. Peavy and Smith urge readers to eliminate sweets and eat nutritious foods in moderate amounts. The authors also suggest that obesity is due more to underexercise than to overeating. A bibliography and an index are located at the end of the book.

Grades 11-12

Sanchez, Gail Jones, and Mary Gerbino. Overeating: Let's Talk About It. Minneapolis: Dillon, 1986. 119 pp.

This book is divided into two major parts. In the first part, reasons for overeating are examined. Many

suggestions are given here on how to replace negative thinking with positive thinking; increasing the self-esteem of an obese youngster seems to be the key objective. In the second part of the book, the basics of diet, nutrition, exercise, and behavior changes are discussed. A glossary and an index are located at the back of the book. The cherubic faces in the illustrations throughout the book seem out of place given the recommended grade levels.

Grades 6 up

White, Marlene Boskind, and William C. White. Bulimarexia: The Binge/Purge Cycle. New York: W.W. Norton, 1983. 219 pp.

This book is written by a husband and wife team; both individuals are medical professionals. The authors concentrate on discussing various aspects of bulimia. The Drs. White apparently are not satisfied with the term bulimia; in this book they choose to coin a new term - bulimarexia. They feel their term most easily identifies those salient characteristics identified by the Drs. White, but not always recognized by the term bulimia.

The authors hint that they believe there is a strong correlation between the arrival of Twiggy on the scene as a world renown fashion model in the 1960's, and the increase in the incidence of eating disorders. The Drs. White carry this argument further and place much of the blame directly on the media for the escalating numbers of people, primarily women, having eating disorders.

The authors advocate group therapy over the more conventional one-to-one psychotherapy as the preferred method for treating bulimics. The authors have found the former to be more successful than the latter.

At the conclusion of the book, the authors list names and addresses of organizations that offer help to individuals having eating disorders. A bibliography and an index follow this listing.

Grades 9-12

Wibbelsman, Charles, and Kathy McCoy. The Teenage Body Book. New York: Pocket, 1978. 246 pp.

Wibbelsman is a medical doctor and McCoy is the former editor of 'Teen Magazine. The Teenage Body Book is their collaborative effort to answer questions teenagers commonly have regarding health-related issues. Diet and exercise are discussed, as well as compulsive eating and anorexia nervosa. The authors urge teens not to go below 1,200 calories per day in food intake; anything below this figure

may stunt the adolescent growth spurt. Wibbelsman and McCoy endorse Weight Watchers as being an excellent, and affordable, support group for those individuals desiring a medically sound approach to weight control.

Grades 9-12

CHAPTER 5

Conclusions and Summary

The researcher identified a total of 50 books for inclusion in this study. The researcher has included 27 fiction books published between 1976 and 1986. These are the books the researcher primarily set out to identify, as well as being the books on which the hypotheses were tested.

The researcher feels that because there is an apparent lack of available textbook information regarding eating disorders, it was appropriate to go beyond the initial 27 identified books and identify books that fell into two other categories. Eleven fiction books published prior to 1976 are included in this study, as well as 12 nonfiction books published between 1976 and 1986.

The initial 27 books were analyzed according to the seven hypotheses stated earlier in this study. A hypothesis was accepted if a majority of the books examined supported that hypothesis. The researcher established a majority as being greater than 50%.

The majority of the characters who are victims of anorexia nervosa, bulimia, or obesity are adolescent females. The researcher identified 23 of 27 (85.2%) characters as being adolescent females; thus, H1 was accepted. Three of the remaining characters are adolescent boys and the other is a preadolescent female.

The majority of characters who are victims of anorexia nervosa or bulimia are from homes which can be identified socioeconomically somewhere between middle class and upper class. The researcher identified 8 of 8 (100%) homes as being somewhere along the socioeconomic continuum between middle class and upper class; thus, H2 was accepted. The 19 books that have obese victims were excluded from analysis for this particular hypothesis. The researcher relied on excerpts from each book to find evidence supporting this hypothesis. For instance, many of the anorexic and bulimic characters swam laps regularly in backyard pools. Owning one's own pool has traditionally been a symbol of financial success. In addition, several of these female characters shop in prestigious stores (e.g. Saks), and wear designer clothing (e.g. Gucci). The researcher feels that authors have intentionally inserted such references in books to establish the fact that these are little rich girls. For example, in The Hunger Scream Lily (an anorexic) offers Daniel coffee to be enjoyed in the gazebo by the pool. Another example of socioeconomic status occurs in Early Disorder. Willa (an anorexic) decides that she will wear the mauve sweater her father brought her from Italy (he is a theater critic).

The majority of characters who are victims of anorexia nervosa, bulimia, or obesity exhibit one or more of the following characteristics: (a) low self-esteem, (b)

mistaken body-image, and (c) emotional instability. The researcher identified 26 of 27 (96.3%) characters as exhibiting one or more of these characteristics; thus, H3 was accepted. The book Buddies is the only novel where the obese character, Fern Wadley, does not exhibit any of these characteristics. Fern is a loner; she does not have the opportunity to convey these characteristics. For the other 26 books, the researcher relied on excerpts from each book to find evidence supporting this hypothesis. This was a difficult task for the researcher to accomplish, because the categories tended to overlap more than was anticipated. For instance, in Underneath I'm Different, Amy, a victim of obesity, states "after consuming a lunch that I'd nicknamed the Hippo's Special, for obvious reasons, I had felt so guilty and miserable that I ran into the girls' room to cry" (p.5). A case can be made that this character is exhibiting both low self-esteem and emotional instability. The same dilemma arises when an anorexic character tearfully states she is too fat; both mistaken body-image and emotional instability are being exhibited. The results for this hypothesis have not been broken down because of this unanticipated quandary.

The majority of characters who are victims of anorexia nervosa, bulimia, or obesity suffer socially from not being actively involved in a peer group. The researcher identified 17 of 27 (63.0%) characters as not being actively

involved in a peer group; thus, H4 was accepted. The victims are usually either treated cruelly by peers, or they experience moderate social success. These characters are too unlike the physical norm to experience popularity within a peer group. An example that epitomizes what the researcher was searching for when looking for excerpts to support this hypothesis comes from The Fat Girl. In this book, the character Jeff Lyons states:

I'd see her [obese Ellen] waddling along in the hall, the loose flesh on her arms jiggling as she walked. I always looked away, avoiding her eyes. I never said hello. Most people looked away when they saw her, the way you do when anybody deformed is in sight. She generally kept her eyes down too and walked by herself. Sometimes a kid would talk to her in that loud, hearty voice you keep for the handicapped - to show them that it doesn't make any difference to you. (p. 26)

The majority of characters who are victims of anorexia nervosa or bulimia have mothers who are portrayed as "Super-Moms," and fathers who are portrayed as being engrossed in going up career ladders. The researcher identified 7 of 8 (87.5%) characters as having both parents portrayed as such; thus, H5 was accepted. None of the examined anorexia nervosa or bulimia victims are from broken homes; 7 of 8 sets of parents exemplify the hypothesized portrayals. The 19 books that have obese victims were excluded from analysis for this particular hypothesis. In Early Disorder, Willa (an anorexic) states that her mother "does more in a day than most people do in a week. A real doer. So busy she

hardly has time to listen to us when we talk to her" (p. 13). In The Hunger Scream, Lily (an anorexic) states "my dad won't take off work [to come to a family counseling session], he never does" (p. 156).

The majority of the novels focus on the problem of adolescent obesity. The researcher identified 19 of 27 (70.4%) novels as focusing on the problem of adolescent obesity; thus, H6 was accepted. It was not feasible to categorize the examined books for this hypothesis any further than focusing on the weight of the victim. The difficulty arose in discerning whether an anorexic character is truly an anorexic or rather, a type of bulimic. Authors of nonfiction disagree among themselves about the definition of bulimia. This lack of a single, universally accepted definition means that a bulimic may be a starving anorexic who binges and purges on occasion, or a normal weight or obese individual who binges and purges on a regular basis.

An annotated bibliography of at least 50 fiction titles cannot be prepared to augment middle school and high school health and home economics curriculum units on eating disorders. The researcher identified 27 fiction books published between 1976 and 1986 that focus on anorexia nervosa, bulimia, or obesity as a dilemma that is facing at least one character in each book; thus, H7 was rejected.

The 27 fiction books published between 1976 and 1986 vary in overall quality. Steven Levenkron's The Best Little

Girl in the World and Kessa are noteworthy books from this category. Levenkron is a therapist who has treated anorexics; he uses this expertise to produce superior fiction works that focus on anorexia nervosa. Constance C. Greene's Your Old Pal, Al and Al(exandra) The Great are outrageously funny novels that focus on obese Al; she is a unique character. Robert Lipsyte's One Fat Summer is set in a resort town during the 1950's. Bobby Marks, the obese protagonist in this story, is a sensitive male who gains self-esteem and slims down during the course of the novel.

The 11 fiction books published prior to 1976 included in this study differ from the 27 fiction books published between 1976 and 1986 in several ways. A conflict that occurs repeatedly in the novels published prior to 1976, and only occasionally in the novels published between 1976 and 1986, is family unrest stemming from the mother's desire to join the work force, the father's opposition to such a notion, and the teenager's ambivalence toward the idea. The teenager does not want to alienate either parent, so the teenager does not form an allegiance one way or the other. The teenager usually, however, conveys these conflicting feelings to a peer.

The fiction published prior to 1976 contains a fair amount of outdated slang describing the once pervasive drug culture. Today's readers probably would recognize and be familiar with "pot" (describing marijuana), but it is

questionable whether a teenager would attach any meaning to "bennie" or "bad trip."

The females in some of the earlier fiction books are discriminated against in the school setting. The most common discrimination seems to be the stereotypical male chauvinist industrial arts teacher prohibiting a female from either attending his class or joining an extracurricular activity that he supervises. This is a moot point today, because Title IX mandates that girls be allowed to take any class and join most any school activity with the exception of contact sports.

The most noteworthy books from the fiction published prior to 1976 category are Constance C. Greene's A Girl Called Al and I Know You, Al, and M. E. Kerr's Dinky Hocker Shoots Smack! These books are all humorous, yet contain subtle messages regarding the inadequacies the obese characters feel compelled to hide.

The 12 nonfiction books published between 1976 and 1986 included in this study vary in the emphasis each places on a particular eating disorder(s). The two autobiographies, Aimee Liu's Solitaire and Cherry Boone O'Neill's Starving for Attention are excellent. These are retrospective accounts of anorexia nervosa by two women who have actually been the victims of this disease.

Summary

The researcher has compiled an annotated bibliography

comprised of 50 books, with young adults as the intended audience, that focuses on anorexia nervosa, bulimia, and obesity. Both fiction and nonfiction have been included in this study. The researcher initially believed that 50 fiction books published between 1976 and 1986 could be identified for inclusion in the study. This was not accomplished, so the researcher felt it necessary to identify books from two other categories for inclusion in the bibliography. Eleven fiction books published prior to 1976 were identified by the researcher and included in the bibliography. Twelve nonfiction books published between 1976 and 1986 were identified by the researcher and included in the bibliography. These books from the other two categories accompany the 27 fiction books published between 1976 and 1986 initially identified by the researcher for inclusion in the bibliography. Each category in the bibliography is arranged alphabetically by author.

This bibliography is intended to be used in conjunction with middle school and high school health and home economics curriculum units. The researcher identified these curriculum areas as being the most likely areas for the study of anorexia nervosa, bulimia, or obesity to occur. This identification was done through textbook examination. The textbook examination also revealed a general lack of available information concerning eating disorders. This dearth convinced the researcher that an annotated

bibliography focusing on eating disorders was a worthwhile endeavor.

The researcher reviewed generic opinion articles on eating disorders to gain some measure of insight and expertise on anorexia nervosa, bulimia, and obesity. Those most likely to be afflicted by eating disorders, common family characteristics, the medical ramifications of having an eating disorder, and possible treatment strategies are some of the aspects of eating disorders discussed in the literature review. The published research reiterates information found in secondary health and home economics textbooks that suggests that adolescent females are especially likely to become victims of anorexia nervosa and bulimia.

The books included in the bibliography were located at either the University of Northern Iowa Youth Collection or the Cedar Falls High School Library. The researcher used the card catalog in each collection, as well as two selection tools, to identify appropriate books. Interlibrary loan was used to obtain books mentioned in the selection tools but not available from either collection.

The researcher then read each book and recorded applicable information on 5 x 8 cards, including plot summaries, character descriptions, and information relevant to eating disorders. Suggested grade levels for each book were obtained by locating book reviews in SLJ School Library

Journal and Booklist. The books included in this bibliography represent a combination of the fiction and nonfiction available to middle school and high school students and educators on anorexia nervosa, bulimia, and obesity. The titles included in the bibliography represent only those books the researcher was able to identify, locate, and read; the listing is not comprehensive.

The researcher tested seven hypotheses relating to fiction books published between 1976 and 1986. Six of the seven hypotheses were accepted; acceptance was decided if 50% or more of the 27 fiction books published between 1976 and 1986 showed evidence of supporting a particular hypothesis. A majority of the 27 books had evidence that: (a) the victims of anorexia nervosa, bulimia, or obesity are adolescent females; (b) the victims of anorexia nervosa, bulimia, or obesity exhibit low self-esteem, mistaken body-image, and emotional instability; and (c) the victims of anorexia nervosa, bulimia, or obesity suffer socially from not being actively involved in a peer group. A majority of the 27 books had evidence that the victims of anorexia nervosa or bulimia are from homes that are identified socioeconomically somewhere between middle class and upper class, and that the victims of anorexia nervosa or bulimia have mothers who are portrayed as "Super-Moms," and fathers who are portrayed as being engrossed in going up career ladders. A majority of the 27 novels focused on the problem

of adolescent obesity. The only hypothesis rejected was the prediction that 50 fiction books can be prepared to augment middle school and high school health and home economics curriculum units on eating disorders.

BIBLIOGRAPHY

- "Anorexia: The 'Starving Disease' Epidemic." U.S. News & World Report 93 (30 August 1982): 47-8.
- Bruch, Hilde. The Golden Cage: The Enigma of Anorexia Nervosa. Cambridge, MA: Harvard University Press, 1978.
- Bruch, Hilde. Eating Disorders; Obesity, Anorexia Nervosa, and the Person Within. New York: Basic books, 1973.
- Carr, Patricia. "Anorexia Nervosa and Bulimia." Learning 13 (November/December 1984): 80-5.
- Chng, Chwee Lye. "Anorexia Nervosa: Why Do Some People Starve Themselves?" The Journal of School Health 53 (January 1983): 22-6.
- DeWolfe, Judith A., and Elizabeth Jack. "Weight Control in Adolescent Girls: A Comparison of the Effectiveness of Three Approaches to Follow-up." The Journal of School Health 54 (October 1984): 347-9.
- Heston, Melissa L. "Childhood Obesity: Implications for Physical Education." Physical Educator 40 (October 1983): 145-9.
- Landau, Elaine. Why Are They Starving Themselves? Understanding Anorexia Nervosa and Bulimia. New York: Julian Messner, 1983.
- McNab, Warren L. "Anorexia and the Adolescent." The Journal of School Health 53 (September 1983): 427-30.
- Nolan, William A. "Anorexia Nervosa: The Dieting Disease." McCall's 104 (June 1977): 72-7.
- Peters, Carole, et al. "Assessment and Treatment of Anorexia Nervosa and Bulimia in School Age Children." School Psychology Review 13 (Winter 1984): 183-91.
- Pratt, Jane. "Why Women Starve and Binge." McCall's 112 (April 1985): 72.
- Price, James H., and Diane D. Allensworth. "Guaranteed in Just Six Weeks . . ." Health Education 11 (November/December 1980): 4-9.
- Romeo, Felicia F. "Women, Anorexia Nervosa and Culture." Delta Kappa Gamma Bulletin 49-2 (Winter 1983): 17-22.

- Seligmann, Jean, et al. "A Deadly Feast and Famine." Newsweek 101 (7 March 1983): 59-60.
- "Starving Amid Plenty." Science Digest 89 (July 1981): 56.
- Wesley, Myrna M., and Sue Gibson Ruddy. "Anorexia Nervosa: An Obsession With Thinness." Forecast For Home Economics 27 (September 1981): 119-122.
- Wharton, Robert, and Ruth W. Crocker. "Adolescent Obesity." Children Today 13 (November/December 1984): 12-5.
- Wisdom, Ruth. "Think Thin, Teach Thin." School and Community 67 (February 1981): 18-9.
- Zakus, Gloria, et al. "Treating Adolescent Obesity: A Pilot Project in a School." The Journal of School Health 51 (December 1981): 663-6.