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„The Unpalatable Lightness of Being: A Feminist  
Reading of Anorexia Nervosa in The Edible Woman and  
Heartstones“

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In loving memory of K. and M.

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## 1.1. INTRODUCTION

Ideologies regarding health and food abound in the modern culture. While in some corners of the world eating one's fill is still an inaccessible luxury, more affluent countries, in particular Europe and North America, have seen a massive surge in food production over the past century. This has resulted in nourishment becoming widely available to the dwellers of the Western world and in food acquiring multiple additional meanings and connotations. While fast-food restaurant chains such as 'Heart Attack Grill' offer patrons 20.000-calorie burgers and have scantily-clad 'nurses' wheel them out as they finish the meal, biopedagogies of health teach responsible consumption, extol the lean body, and lament the 'obesity epidemic'. In addition to being a means of attaining a certain body shape, diet has become a means of self-expression and conveying a message, indicating the eater's religious or ethical beliefs, social class, or belonging to a sub-culture.

While the abovementioned are practices in which people engage voluntarily, the same cannot be said about food-related mental disorders from which a substantial share of the Western population suffers. Women and men of all ages find themselves in problematic relationships with food: they binge, purge, starve themselves, cannot eat certain foods or consume inedible objects.

Among eating disorders, anorexia nervosa is perhaps the most popular and mediatised one. It is vastly discussed in scholarly works and on talk shows, researched in universities and portrayed in films, and, of course, has become the subject of copious literary works. The shocking look of emaciated anorexic bodies produces an equivocal effect on onlookers, making some concerned, some morbidly curious, and some entranced and even inspired to follow, as shown by the disquieting phenomenon of 'pro-Ana' online communities.

While men can develop anorexia, this disorder is much more prevalent in women. According to feminist scholar Susan Bordo, such gendered propensity to anorexia is a by-product of a larger cultural psychopathology: a convergence of a toxic fashion industry, a patriarchal anxiety about women gaining more power and presence, and the Western tradition of viewing the body as inferior to the mind ("*Psychopathology as the Crystallization of Culture*" 228). In other words, while it often does begin as excessive dieting, the prerequisites for developing anorexia lie deeper than the

sufferers' vanity and desire to emulate fashion icons, originating instead in the society's attitude towards women and corporeality.

This interpretation is at the core of two fictional texts I analyse in the present thesis: *The Edible Woman*, the 1969 debut of the stellar Canadian novelist Margaret Atwood, and *Heartstones*, a relatively unknown British novella published in 1987 as part of Ruth Rendell's prolific literary heritage. Both texts feature young female protagonists who develop anorexia against the backdrop of challenging life experiences. Marian McAlpin, the main character in *The Edible Woman*, loses the ability to eat as she accepts the marriage proposal from her seemingly well-meaning suitor Peter and gets ready for what is deemed the most important change in a young woman's life at the time. Elvira Zoffany in *Heartstones* develops an aversion towards food after her mother dies of cancer, leaving her and her younger sister to cope with grief, their father's impending remarriage, and the onset of adolescence on their own.

I argue that their development of eating disorders is a response to the dire situation they find themselves in as young women. They lack prospects and healthy role models of femininity to help them navigate their newfound freedom, while oppressive ideologies inherited from the previous generations still attempt to gain power over them. While the factual circumstances of Marian and Elvira's lives differ, their common denominator is developing an aversion to food as they lose the will to grow up in women's bodies, surrounded by misogynistic environments and having to respond to the challenges of life in the late 20<sup>th</sup> century with its increasingly globalised, consumerist culture.

Around the time *The Edible Woman* was written, the second wave of feminism was just about gaining momentum, with opposing ideologies about women's rights tearing the Western world apart. Being a woman meant having equal rights with men on paper, but often not in reality. Studying and working, albeit available, did not give women the same opportunities as it did men. In addition to competing with men on unequal footing, women were still expected to be mothers, homemakers, and maintain their attractive looks. Unprepared for this new freedom with many strings attached, and surrounded by contradictory messages, they would often resort to exercising what little control they had. To many, it was over their bodies, which they aspired to tame through obsessive dieting.

Anorexia nervosa has been speculated to originate in the sufferer's excessive compliance with the culture's rules for women: to be thin, submissive, and curate their bodies to take as little space as possible. A disorder of paradoxes, anorexia is the deadliest of all mental diseases, producing such appalling effects on the human body that it has been described as a 'hunger strike', yet it originates from an innocuous desire to be 'good'. Although the anorectic woman is emaciated, she often sees herself as fat; her willpower and self-discipline, previously seen as commendable qualities, are now aiding in her destruction; she strives towards an ideal body only to become grotesque and frightening. In its inherent contradictions, anorexia nervosa mirrors the dubious values and impossible standards of the Western society regarding the body and the role of women.

Elvira and Marian represent this equivocal nature of the disorder not only in the treatment of their bodies, but also in the way they fashion their narratives. They can both be classified as unreliable or untrustworthy narrators, with both texts featuring breaks in narration style – such as the sudden switch to third-person narrative in *The Edible Woman* or a change from elaborate to simplified language in *Heartstones*. I argue that the lack of order in their narration styles symbolises the narrators' fragmented identities and attempts to dissociate from painful emotions. The texts also indirectly deal with the stigma against anorectics as deceitful and manipulative and show the struggle of the 'mad' narrator to be trusted by the readers.

The theoretical part of my analysis relies on works of feminist scholars of anorexia, primarily Bordo, Brumberg, Warin, and Hepworth, as well as authors researching narratives of and about mental and physical illness in general such as Showalter, Riessman, and Shohet. Valuable insights on the cultural symbolism of food and eating provided by texts of Adams and S. Brooke Cameron have also greatly informed my research, as did theoretical works on narrative analysis by Nünning, Booth, and Murphy. I apply the method of close reading, dwelling upon the material from Reichenbächer and Patterson and others.

While *The Edible Woman*, like other texts by Atwood, has been widely researched, this is not the case with *Heartstones*. Despite its masterful execution and topical relevance, the latter work has not garnered much critical attention up to date. The same can be said about the link between anorexia nervosa and unreliable narration, a relatively novel connection which I propose and explore in both texts. The present thesis is an



attempt to fill these lacunas and contribute towards the discussion about eating disorders which continue harrowing young women until present day. If society's heightened awareness to the issue can spare more young women the predicament of an unhealthy relationship with food, then the subject of eating disorders merits further investigation. And if literary works about anorexia showcase the ills of our society in general, then it is our mission to decipher these cues and work towards a more just and safe world, from which women – as well as everyone else – will benefit.

## 1.2. LITERATURE REVIEW. NARRATING ILLNESS

### THE IMPORTANCE OF ILLNESS NARRATIVES

As Virginia Woolf points out, despite its common occurrence and significant impact on human lives, illness is a challenging subject to write about. The reasons are manifold, ranging from our fear of disease and death, to lack of vocabulary to describe it, to the apprehension the public felt towards focussing on bodily matters instead of the spiritual realm ("On Being Ill" 32-34). Decades after the essay was published, this argument still stands true. A cornucopia of scholarly works dealing with the characteristic features of narrating illness display just how challenging it is – to portray something as concrete and immediate as disease through something as abstract as language.

However, human corporeality has definitely gained more spotlight in literature and popular culture since Woolf published her observations. The tendency of academia and mass culture to turn their focus towards the body has become especially salient since the 1990s (Sanchez-Grant 77), resulting in a wealth of works concerned with illness and other bodily experiences being published. Over the course of the 20<sup>th</sup> and early 21<sup>st</sup> centuries, the Western culture has come to terms with the idea that the body is as important as the mind, and interconnected with it, and illness and disability are part of daily life as deserving representation as any other. This shift has created room for the proliferation of illness narratives in the public discourse, both enabling larger audiences to relate to the issue and providing therapeutic value to the tellers of these stories.

For the latter, narrating illness aids in reclaiming control, which sufferers of diseases inevitably lose at some points during the onset of their disease and in their recovery journey. Catherine Kohler Riessman, a medical sociologist who went through chemotherapy and radiation cure from cancer herself, and journalled her experiences

throughout, recalls being glad to still have the ability to exercise her mind through journaling even while her body's activity was restricted (1062). Doctors prohibited Riessman to get out of bed – and, by virtue of her poor condition, she would not have been able to do much physically even if she ignored medical advice. It was through writing that she could still retain some agency. In particular, Riessman admits the importance of the power to choose which parts of her story to omit and which intimate details to confess (1062), re-structuring her story to her liking and re-claiming the privacy she had lost to examinations and other medical intrusions. For someone who has to put up with so many limitations, from their body's own sudden lack of capacity to the forced subjugation to medical authority, narrative can provide much-needed release and a potent tool to regain at least part of the power they have lost.

This aspect of taking back control ties into the social aspect to narratives, constituting another component of their healing potential. Narrative is a form of communication and there is always an implied audience, real or imagined, even in private accounts. In recollecting her reasons to journal, Riessman, for instance, admits: "I wanted a personal record that could be read to my children if things didn't turn out. I wanted a written record that I authored and controlled – a counter-narrative to the context-stripping medical record." (1062, emphasis in the original). By recounting their story, an individual is able to connect with others, and the power of choosing how to structure their narrative enables them to do so on an even keel.

With illness being a non-verbal and very immediate experience, the ability of illness narratives also helps make the sufferers more aware of their condition and process it analytically. In the words of Elinor Ochs and Lisa Capps, narrative is "an essential resource in the struggle to bring experience to conscious awareness" (Ochs and Capps, qtd. in Shohet 345). The author of a narrative moulds the formless mass of unintelligible events into a sequence, arranges it through causative and temporal links, and fleshes out a coherent story which they will tell themselves and others.

This story will, then, largely influence who they perceive themselves to be, since the teller of the story has the power to re-create one's own identity (or even multiple ones) as they construct themselves as the protagonist. Ochs and Capps state that narratives "have the potential to generate a multiplicity of partial selves" (qtd. in Shohet 345). Jerome Bruner also acknowledges this power of the narrative, writing: "The self is a

story” (qtd. in Clark 2). Thus, not only can we freely choose who we are in the stories we tell about ourselves – our very selves are, in essence, stories we tell.

For ill people, these selves are crucial to retain while struggling with “catastrophic interruptions or shifts in their lives, [navigating] the bewildering, impersonal context of medical diagnosis and treatment” (Clark 3). We can conclude that narrative has tremendous twofold healing potential in that it gives the ill a voice and a creative ability to recover control over their identities from the claws of disease while at the same time allowing others to hear and acknowledge their struggles.

The ways of expressing illness differ across media. Visual artists experiment with colours, lines, and angles in order to convey the fragility, powerlessness, out-of-orderness, and myriad other feelings arising when someone no longer has trust in their body. For instance, an author of a comic about Parkinson’s disease draws himself in shaky, jarred lines as a metaphor for losing grip over his life because of his condition (Krüger-Fürhoff 113). Verbal narrators can resort to certain stylistic choices and storytelling techniques, rendering the experience of illness both on the levels of story and discourse.

I have identified several overlapping axes along which researchers analyse illness narratives. Interestingly enough, these features are common both in fictional texts and in accounts based on real life events. These markers are: continuity of time, relationship between past and present (or ‘ill’ and ‘recovered’, or acting and narrating) selves, power dynamics, and coherence or ambiguity of the narrative.

One example of the analysis of such characteristics can be found in Merav Shohet’s *Narrating Anorexia: “Full” and “Struggling” Genres of Recovery*. Shohet, who interviewed women survivors of anorexia, pinpoints how their choice of language reflects their attitude towards recovery. She makes a distinction between the so-called ‘full recovery’ and ‘struggling to recover’ genres.

The full recovery, or FR narrative, is usually adopted by those who have completely overcome their illness and have a firm intention to steer clear of slipping into their old habits. The discursive markers of this style signify a complete rupture with the old anorexic self, affiliation with master psychoanalytic and feminist narratives of anorexia and recovery, emphasis on one’s agency, and a striving towards coherence and linearity in telling the story of their illness (Shohet 349). The struggling recovery, or SR,

narrative, on the other hand, is employed by still-symptomatic patients, riddled with ambivalent feelings towards recovery. Its distinctive features are linguistic markers of uncertainty, refusal to fully adopt the master narratives about the illness, seeing oneself as being treated rather than choosing to heal, a continuity of past and present selves, and a cyclical, non-linear temporal progression. (Shohet 349.) Telling illness is therefore characterised by specific, recurring narrative elements which are connected with the person's coping and recovery style.

As we can see, model 'fully recovered' patients in Shohet's corpus employ a linear narrative where time goes straight from past to present. This narrative is coherent and follows unwaveringly from illness to recovery. Her narrating self is separated from the acting self through time and change in worldview. While she does adopt the feminist discourse of empowerment, thus showing a more acute awareness of the power dynamics in a patriarchal world, she also unquestioningly accepts medical authority, ignoring the power imbalance between doctors and patients.

At the same time, the patients who struggle to recover tell stories in which the time progresses in a circular fashion, with sidesteps and hypothetical remarks. Their narratives are ambiguous rather than coherent, and they do not have clear-cut boundaries between their 'ill' and 'recovered' selves. They contemplate the possibility of a rebound. Finally, they are more sceptical about the authority of their doctors and psychotherapists, and cheerfully tell stories of deceiving the hospital staff in order to continue with the unwanted behaviour. Their meandering is at the same time an act of self-sabotage and a show of disobedience to the domineering clinicians and well-meaning associates.

Of course, in Shohet's study some narrative features clearly correlate with successful recovery, while others do not. According to Ochs and Capps, people turn to narrative because of two conflicting desires: to construct a stable story of their past, on the one hand, and to tell an authentic one, on the other hand (qtd. in Shohet 347). However, a traumatic experience tends to rupture a person's life to such an extent that talking about illness honestly seems to make a fully coherent storyline, with a clear happy ending, impossible. Compare the certainty with which the FR patient from Shohet's sample talks about never, ever going back to her anorexic past, to the manner in which reformed addicts, no matter how long their sobriety has lasted, still refer to themselves as 'recovering alcoholics' or 'recovering drug users' in twelve-step AA meetings. This

sentiment of always being followed by one's illness is also reflected in the following quote from Riessman: "[A] cancer patient is forever in 'remission'. I will always be 'at risk', for my past is inevitably inscribed onto my future" (1065). Such open ending, circularity of time and permeable boundaries between the past and present selves make Riessman's narrative authentic rather than coherent. Yet such narratives are not always what society wants to hear, as they show our real vulnerability before illness and go against the common consensus of seeking health, efficiency, and improvement no matter what.

### DISAPPOINTING PATIENTS, DISORDERED NARRATIVES

Upbeat stories of model patients, who learnt their lessons, diligently complied with doctors' prescriptions, and strived towards going back to their normal healthfulness as soon as possible, are much more palatable and desirable for the Western reader – even if they sound a tad disingenuous at times. Audre Lorde, a poet who suffered from cancer, recalls being told by a nurse to wear a prosthesis in place of her amputated breast during compulsory check-ups lest it damage "the morale of the [doctor's] office" (qtd. in Frank 4). Lorde had to eradicate all traces of illness from her appearance, showcasing once again that the right ending to a story of any illness is a happy one where the survivor returns to perfect health without lingering consequences.

Seeking health and recovery at all costs often comes at the price of complying with institutional discourses and refraining from criticising the healthcare system's dubious practices (Frank 3; Fernández-Morales 236-238). It is no wonder that some sufferers and survivors feel disempowered in their encounters with medical authority, and seek ways to maintain a delicate balance between receiving the help they need and defend their identity at the same time.

In this struggle, Frank divides them into two groups: tricksters and parrhesiasts, or truth-tellers. While the parrhesiast resists by openly speaking truth to power, the trickster slips in and out of identities and refuses to be limited by the definitions imposed from without (Frank 5). The downside of being truthful about one's discontent is that it is dangerous to speak against those who can deny you treatment and support. Therefore, resistance to "identity deprecation" (Frank 5) mostly comes in more subtle ways, and, as mentioned above, narrative is one of these means of self-assertion. It is remarkable how such trickster narratives resemble those featuring an unreliable narrator. This does not imply that any and all 'ill' narrators will be unreliable; however,

there is a bias against such narrators and a tendency towards portraying them as untrustworthy.

As we have already seen, even purely physical malaise, which leaves the patient's cognitive abilities and mood untouched, is often associated with stigma. A sick person is expected to take full responsibility for their lifestyle and healing – instead of, for example, blaming unfavourable environmental circumstances or lack of access to adequate healthcare due to coming from a disadvantaged background. They must conform with the institutional discourses regarding illness and recovery and agree with their doctors' choices. Otherwise, they may be denied medical treatment and support from their community. When it comes to mental illnesses, the stigma intensifies. Despite attempts at educating the public on the subject, many an archaic belief is still present in the mass consciousness about people who suffer from mental disorders: they are seen as lazy, broken, dangerous, scheming, or incapable. Clark writes that the stigma, added to the distress a mental illness already creates in the sufferer's life, is “anguish added to anguish” (Clark 1). Thus, writing narratives of mental illness, which at the same time give voice to the ill and educate the general public, becomes even more important, as it is also an opportunity to challenge the false representations of people with such conditions.

There is an observable phenomenon in fictional accounts of mental illnesses, or narratives featuring mentally ill characters, which may go contrary to this idea. It is the tendency to link mental illness to unreliable narration – that is, using the narrator's condition as a pretext for seeing them as untrustworthy and distorting the events they are relaying. On the one hand, it is true that people suffering from certain mental health disorders do experience a reality which is distorted to a degree. In these cases, using unreliable narration is a way of letting the reader relate to the narrator's reality and see the world through their eyes. On the other hand, quite often mental illness – real or feigned – is portrayed as disguising malicious intentions, shirking responsibility for evil and criminal acts, or serving as justification for continuing them. Here, the mentally ill unreliable narrator is not simply showing their perceived reality and struggling from their flawed understanding of the world; their unreliability is deliberate – they are not telling the truth, or conceal parts of it, because they have something to hide.

One example of such stigmatising media narratives has been analysed by Su Holmes in her work on media representations of British nurse Beverley Allitt. Allitt was charged

with murdering and causing severe bodily harm to numerous children she was entrusted with caring for (Holmes 2). Having, apparently, never shown any propensity towards disordered eating in the years preceding her trial, Allitt was diagnosed with anorexia nervosa during the lengthy court proceedings. This led to her being confined to Rampton Secure Hospital instead of a prison where she would serve the thirteen life sentences she was condemned to. The media immediately proceeded to frame Allitt's anorexia as a ruse used to soften her sentence and dwelled on the comparative luxuries she enjoyed at the hospital instead of serving in prison (Holmes 9).

The damage such claims do to victims of eating disorders is also hard to overestimate. People – especially women – who suffer from anorexia nervosa are caught between the devil and the deep blue sea, being accused, on the one hand, of having a 'fake' disease caused purely by their vanity, and, on the other hand, of being obstinate and manipulative in their resistance to treatment. Thus, people with mental disorders are often seen as intentionally provoking pity, sometimes in order to evade responsibility. In fiction, this stigmatising attitude may sometimes be reflected through the use of unreliable narration and vilifying the mentally ill character, portraying them as an antagonist either committing evil acts because of their mental disorder or using the said disorder to eschew justice.

In *The Purple Cloud* by M. P. Shiel, the protagonist, a man named Adam, writes an account of a post-apocalyptic world. However, the reader is never completely certain of the trustworthiness of his narrative. There is a tension between the character's rational mind and his beliefs in supernatural forces, which is reflected in the novel's style – on the one hand, very precise and factual, on the other hand, unnecessarily convoluted and replete with references to unexplainable mystical powers as reasons behind plot turns (Morgan 269). Morgan goes on to point out the racist commentaries the narrator makes throughout the novel, and argues that the narrator's madness and unreliability may act as a shield for the text's chauvinist undertones (Morgan 277). Since it is not entirely clear whether the main character's madness is real, it can be argued that its function here is similar to the perceived benefit behind Allitt's anorexia: to get away with things which would usually be considered unacceptable.

Viewed from a different perspective, the dubiousness of Adam's narrative opens multiple interpretations of the novel and allows to simultaneously classify it within two genres. If the reader is to believe Adam and take the existence of the supernatural

forces he describes as a phenomenon existing in the objective reality outside Adam's mind, then what she is reading will be a fantasy novel. If, however, the reader chooses to consider Adam mad, then *The Purple Cloud* is in fact a science fiction novel related by an unreliable narrator, whose mind has been clouded by prolonged isolation to the extent of experiencing hallucinations (273). Such generic plurality may reflect the inner confusion and distress of a mentally ill person, serving as a stylistic device to relay the lived experience of illness in the text. It shows the sufferer's metaphorical loss of firm ground underneath their feet, their loss of trust in reality – or attempts to reconcile irreconcilable facts and opinions, such as a scientist's rational worldview and the existence of paranormal forces, or one's very real emaciation and perceived fatness, as is the case in people with eating disorders.

In summary, illness, and particularly mental disorder, has its distinctive features when it comes to narrative. One should look for the uncanny and the illogical, the breaking the smooth fabric of a conventional narrative. Telling illness is at the same time reliving it and trying to come to terms with it, however, and we should view the corresponding narratives as exactly such. There are conventions about what ill people should think and act like. Insufficient desire to recover, or placing the responsibility for one's illness on factors outside oneself – factors that can and should be changed; or being unprepared to comply with society's behavioural standards may jeopardise the sick person's reputation and chances of survival. At the same time, illness is often postulated to be a free pass to lie, violate others, use up communal resources, and hide from justice, placing an additional burden of having to validate the gravity of one's suffering on the sick person's already overloaded shoulders.

## 2.1. THE ETIOLOGY OF ANOREXIA NERVOSA: A CLINICAL PERSPECTIVE

Although disordered eating has existed throughout much of human history, and attempts to study its causes date back to as early as the Antiquity, it has not been until fairly recently that they gained close attention of the medical community. This happened in the second half of the 20<sup>th</sup> century, with the growing numbers of sufferers of anorexia nervosa, especially among young women. Susan Bordo describes the slow realisation that this disorder was becoming increasingly prevalent dawning over her after years of teaching philosophy to undergraduate students in 1983: "I was not



prepared for the discovery that large numbers of my students were starving, bingeing, purging, and filled with self-hatred and desperation” (“Psychopathology as the Crystallization of Culture” 226). Indeed, this period saw a surge in numbers of young women waging a war against their appetite and waistline, with many taking their attempts to the extreme. Like hysteric symptoms among the patients of Salpêtrière decades earlier, starving and purging seemed to travel through the air, invading the minds of more and more young women.

Numerous studies have been dedicated to the causes of eating disorders and their rapid spread at this particular point in history. It is argued that anorexia nervosa, characterised by a preoccupation with one’s weight, severe undernourishment, and dysphoric self-image (American Psychiatric Association 338-339) has a number of causes ranging from genetic to environmental, and that the reasons victims are introduced to disordered eating are not the same as the reasons they continue with this behaviour even after becoming objectively malnourished.

The *Diagnostic and Statistical Manual of Mental Disorders* (DSM-5) issued by the American Psychiatric Association lists three criteria needed to be met for a person to be diagnosed with anorexia. The first is a significant restriction in energy intake to the extent of severe undernourishment. Secondly, a person with anorexia nervosa suffers from an intense fear of gaining weight and becoming fat. Lastly, anorexia manifests itself in disturbances in self-image, whereby the individual perceives themselves as larger than they are. Weight and body fat influence their self-esteem, and/or they refuse to acknowledge how low their body weight actually is (American Psychiatric Association 339-340). Unlike some other disorders such as pica or avoidant/restrictive eating disorder, anorexic behaviour is, therefore, not purely focussed on eating itself. Its core symptoms also include intense preoccupation with one’s weight and shape.

The causes of anorexia are diverse and usually heterogeneous, rooted as much in the individual’s genetic and personality traits as in their upbringing and sociocultural factors. Yet relatively little is known about the physiological etiology of the disorder, although there are speculations as to its possible neuroendocrine, genetic, and other biological causes. Some studies indicate the possible heritability of eating disorders and their tendency to aggregate in families, but it has been difficult to establish whether such clusters of disordered eating occurrences are to be attributed to genetic factors or dysfunctional family system (Polivy and Herman 202). It is also likely that family

members who are afflicted by the disorder share similar values, consume similar media, or follow the lead of the same group of peers – all of which are known non-physiological contributors to the development of such conditions.

Certain organic factors often correlate with eating disorders, but a purely causative link between them is yet to be established. There was research about anorexia developing in individuals with, for example, pituitary gland atrophy as early as in the 1910s, yet it turned out that the conditions were largely unrelated (Bemporad 412). Often there is confusion as to which came first. One example is the theory about the dysfunction of the hypothalamus, which had also been deemed a cause of anorexia: 1995 study concluded that the evidence linking the two was very weak, and as the patient changed her diet and received adequate nutrition, such hormonal changes tended to reverse, hinting at them possibly being the result of anorexia and not its cause (Polivy and Herman 203). Most potential biological causes of anorexia – hormonal disturbances, amenorrhoea, dermatological, neurological, gastro-intestinal and other pathologies – might as well be the effect of starvation (Malson 78). Therefore, until today, research has not been able to establish anorexia as an organic disease.

For the most part, it was the social and psychological factors which have gained the most clinical attention as potential culprits. It has come to researchers' attention now and again that anorexia is at the peak of its prevalence in affluent Westernised societies and largely non-existent in poorer countries untouched by Western influence (Bemporad 401). Moreover, similarly to hysteria, this disease predominantly afflicts young women of middle- and upper-class upbringing (Polivy and Herman 187). Men are, according to some studies, three to four times less likely to develop anorexia, and generally suffer from any type of eating disorder much more seldom than women (Keski-Rahkonen et al, qtd. by National Eating Disorders Association). There appears to be a noticeable rift between social groups when it comes to disordered eating. At least in part, it seems to be connected to the scarcity of food in poorer communities, which means there are fewer opportunities for developing a fixation on it. Moreover, non-Westernised communities are less exposed to consumer culture and the fashion industry with its thinness imperative, considered important contributing factors to the eating disorder epidemic.

As for the psychological causes of anorexia, there are three major schools of thought arising from social psychology, family systems theory, and psychoanalysis (Brumberg

28). None of the three theories has proven to be the ultimate answer ruling out the rest: it is more likely that anorexia nervosa develops due to a convergence of factors.

The first interpretation connects the onset of anorexia with living in a society preoccupied with women's weight. Of course, these concerns do not deny the possibility of anorexia simply being underdiagnosed in poorer countries due to lower access to medical care, and in men due to an established stereotype about it as a female disease. Yet it is true that, beginning with the late 20<sup>th</sup> century, fashion and mass media have increasingly spurred women to obsess about their body shape, putting increasingly leaner bodies on display and promoting ever-evolving diet products. Taught by the example of fashion icons who often subject themselves to strict diet regimens to stay underweight, ordinary women with jobs and family responsibilities are conditioned to strive for the same level of fitness. As Malson quotes from Elle, "The fashion industry is tirelessly voracious—frighteningly so for the girls who work at the sharp end. It's an industry that eats up trends and spits them out faster than a superbulimic" (Smither, qtd. in Malson 6). Female celebrities and models who gain weight – for example, as a result of pregnancy or a medical condition – and do not shed it fast enough suffer dire public relations consequences, from being bullied on the Web to losing their careers altogether. Such treatment of celebrities may leave a lasting imprint in the minds of the general populace. For example, a study by psychologists from McGill university has shown that each event of fat shaming in the media between 2004 and 2015 was followed by a surge in fat-averse attitudes among women who read about the scandals ("Celebrity Fat Shaming"). While isolated instances create a short-lived effect, repeated exposure to normalised hatred towards fat shapes our perception of our bodies for life. In the long run, following the thinness trend leads to weight obsession becoming a normal part of women's lives. Even in countries as advanced in promoting women's rights as Sweden, the topic schoolgirls most often discuss is fat (Ambjörnsson 110). With the beauty ideal weighing 23% less than the average woman (Ambjörnsson 114), the female part of the population is conditioned to think of their bodies as 'fat' from early years.

There is not really a clear distinction between healthy and unhealthy concern about one's body shape. Dieting is considered normal and even honourable, in tune as it is with the largely obesophobic Western values glorifying thinness and fitness. Contemporary dwellers of Western countries are surrounded with various metaphors

of 'fat' symbolising the gross, the excess, and the abject – so much so that this rhetoric spills over into other areas of life. For instance, the aesthetic of thinness has permeated the corporate world in the form of labelling overstuffed (and thus ineffective) organisations as “obese” (Tyler & Wilkinson 545). Fat is the symbol for ‘evil’, so it is only natural we all watch we do not gain too much of it. Yet questionnaires conducted with diagnosed anorexia patients, on the one hand, and women who simply diet, but do not have the other symptoms associated with the disease, on the other hand, demonstrate that these two groups show eerily similar results on many subscales: for example, they are just as dissatisfied with their bodies and control their food intake just as rigorously (Brumberg 30). The fat-phobic Western culture, with its fixation on thinness, provides a fertile ground for the development of eating disorders.

Yet, however enormous the pressure from the society at large, an individual who is raised in a loving and healthy family of origin will likely avoid developing a neurosis on the same scale as someone from a dysfunctional family background would. It has come to the attention of family systems therapists that adolescents in certain families are particularly prone to resorting to forms of somaticised rebellion, such as refusal to eat (Brumberg 29). Such environments, termed “psychosomatic families” by Salvador Minuchin in 1975, are conflict-averse, tend towards perfectionism, and embrace an authoritarian leadership style (Brumberg 29). Studies done after Minuchin confirmed that families of anorectics indeed want skills of conflict resolution, compensating instead with increased overprotectiveness, intrusiveness, and enmeshment (Cohen 127). Members of such family systems are reluctant to form extrafamilial bonds whilst neglecting boundaries between different subsystems of the family (Malson 86). It comes as no surprise that close relatives of anorectics also tend to lack the capacity of interpreting social situations and assessing other people’s emotional states, as shown in the 2019 study by Tapajóz et al. (695). They do not receive an opportunity to hone such skills as they refuse to socialise outside the family. Moreover, such chaotic familial no doubt cause feelings of anxiety and drive towards hypercontrol in some of their members. As the system is sealed within itself, no possibility for corrective intervention presents itself.

Indubitably, growing up in such an environment fosters alexithymia, or inability to feel and identify one’s emotions. Subsequent studies have shown a strong prevalence of alexithymia in anorectics as well as co-occurrence of anorexia and fear of intense

emotional states (cf. Peres et al. 6). In other words, never taught to recognise their inner states, patients with anorexia are often afraid of experiencing extreme emotions and unable to describe what they feel. Ruling their bodies with an iron fist seems an appropriate reaction to the helplessness in the face of one's own emotions.

Other personality traits manifest in adolescents who grow up in such environments are problems with forming a separate identity, distrust towards one's own perceptions and feelings, and overdependence on external validation (Malson 86). Systemic theory thus views anorexia as a "pseudo-solution" and postulates the real problem is the sufferer's inability to meet the requirements of adolescent development (Malson 86). Secluded from the society, a child born into a psychosomatic family does not receive a chance to unlearn the dysfunctional coping strategies ingrained in her from early years. Even as she grows up and separates from the family of origin, lack of social skills may hinder her from receiving support from extrafamilial bonds.

Similarly to systemic theory, psychoanalysis also views anorexia as an expression of a developmental crisis in adolescence. According to it, a girl may find solace in starvation, as she feels threatened by the onset of puberty and becoming a woman. Eating is thus seen as a threat of oral impregnation (Malson 87). In 1895, Freud laid the foundation of this approach as he wrote that anorexia is an expression of a young girl's fear of womanhood and heterosexuality. A somewhat similar theory, albeit more generalised and divorced from heteronormative sexuality, was proposed in 1973 as Hilde Bruch took his lead, suggesting that the origins of self-starvation lie in the afflicted person's inability to develop a clear identity. According to Bruch, a teenage self-starver tries, fervently, to gain the feeling of competence and being in control by reining in her body (Malson 37). This view almost completely ignores the role of the surroundings, instead searching for origins of anorexia nervosa mostly within the sufferer's psyche. However, it is possible that the crisis of adolescence be aggravated by a problematic family dynamic, peer pressure, or other external factors. If a parent is supposed to play a role in the development of the disorder, in the psychoanalytical paradigm it is the mother: some scholars have theorised that girls develop anorexia out of fear of surpassing their mothers and view eating as an act of symbolic matricide (Malson 37). Being cast in the role of nurturers as women predominantly are in the mass mentality, they become associated with food so much that in the end, by way of metonymy, they become food. Of course, from the feminist point of view, this position is problematic as

fathers bear equal responsibility for rearing their children. Yet, regarded as a descriptive theory and not a prescriptive set of rules on how mothers should behave, the psychoanalytic interpretation rings true in many heterosexual families, since feeding and nurturing are activities commonly associated with the mother.

The connection between anorexia nervosa and sexuality is also highlighted in the 1992 study by Degroot et al., who conducted a survey among women diagnosed with eating disorders and found out that almost a quarter of the participants had suffered sexual abuse (517). These women had higher levels of oral control, drive for thinness, feelings of personal ineffectiveness and, in some cases, body dissatisfaction (Degroot et al. 517). In light of the psychoanalytical interpretation of anorexia, starvation may be seen as a way of regaining control over one's body after its boundaries have been horrendously breached – up to a point of its complete annihilation, yet at one's own will. It would, of course, be a sweeping generalisation to propose that sexual violation always causes eating disorders, or that all women who suffer from disordered eating have been abused (Malson 85). Yet with women routinely suffering from everyday acts of harassment in the street, in the workplace, and at home, and with women's bodies being objectified in the media and in advertisements, feeling out of control over one's own sexuality is just as much of a disheartening norm for women as is 'feeling fat'. Starving oneself may then be a subversive message, conscious or unconscious, in women who feel reduced to their bodies.

Before continuing with the feminist analysis of the XX-XXI century eating disorder epidemic, let us scrutinise some earlier instances of women's self-starvation, and examine the cases in which this gruesome practice helped women gain subjectivity, freedom, recognition, and financial independence before the modern times. For, indeed, it is not a recent phenomenon.

## 2.2. THE CULTURAL SIGNIFICANCE OF WOMEN'S SELF-STARVATION THROUGHOUT HISTORY

While the reasons why people develop anorexia are manifold and, as the previous chapter shows, may range from genetic predisposition to problematic upbringing, it is nonetheless still true that this disease mostly affects women in affluent Westernised societies, which put a high premium on thinness, consumerism, and patriarchal values. Anorexia, therefore, is considered a culture-bound syndrome, a disease the symptoms

and signs of which reflect the norms and problems of the society (Bemporad 401). Various feminist theories and interpretations of the cultural significance of anorexia abound, taking their origins in psychoanalysis, social psychology, and cultural theories. Nevertheless, female self-starvation was not born in the XX century. Its long, convoluted history goes all the way back to the Antiquity. While there are distinct features of anorexia nervosa and researchers argue it mirrors a unique psychological experience of women in the 20<sup>th</sup> and 21<sup>st</sup> centuries (Brumberg 43), there were precedents in history when fasting was connected to the gender power imbalance women endured.

The practices of prolonged starvation entered Europe around the 4<sup>th</sup> century, after eastern beliefs such as Jainism infiltrated Rome and Greece, and gnostic sects became popular. They postulated a dualistic view of mind and body, whereby the soul was confined in a corporeal prison and thus separated from the divine world. Such teachings propagated contempt for the material world and its sinful pleasures, opting instead for deprivation and seclusion. It is possible that such trends were a reflection of the powerlessness individuals felt in the face of the decline of democracy; unable to exert influence over the public life, citizens turned to excessive control over their immediate surroundings (Bemporad 404). By virtue of the Roman law, women's authority was literally limited with themselves: unlike men, they were forbidden to wield power over any other person or participate in anyone else's affairs, which included a ban on acts like representing other people in court or even being legal guardians of their own children (Vuolanto 46). Therefore, it is no surprise that they would be particularly susceptible to turning to their bodies in an attempt to empower themselves.

So, influenced by an early Christian spiritual guru who preached asceticism, a young Roman girl died of malnutrition, becoming the first known documented case of death by self-starvation (Bemporad 404). This marked the first documented instance of death by self-induced starvation out of spiritual – and, one could argue, political reasons. Breaking with the Greek ideal of a sound mind in a sound body (Bemporad 404), the Roman Empire became the cradle of the ideology of mind-body dichotomy. This worldview would later firmly establish itself in the values of Western society and largely influence the development of our modern fascination with thinness and dieting as part of our collective effort to rein in the animal within ourselves.

The Middle Ages saw more stories of women starvers, one of the most prominent being Wilgefortis, also known as St. Liberta. Her father, who reigned in Portugal at the time, ordered that she marry a Saracene king. Unwilling to comply, Wilgefortis prayed to lose her beauty and refused all nourishment, until her body languished and grew hair all over. She was canonised as the patron saint of women who wanted liberation from difficulties connected to sexuality, childbirth, and being overpowered by others (Bemporad 406). Wilgefortis, as well as her successor St. Margaret – a Hungarian king’s daughter who supposedly committed the same feat some three hundred years later – turned to her body as a means of protest and asserting her power in a male-dominated world.

Legends about Wilgefortis keep underscoring the gendered nature of her transformation: according to most versions, she grew a beard like a man, thus assuming similarity to Christ and becoming an “all-encompassing, androgynous, and accessible [figure] of veneration” (Wallace 47). Not only is starvation seen here as a means to degrading one’s body, it is also considered capable of changing one’s gender. It is true that extreme under- and overeating renders female bodies androgynous in a variety of ways, from cessation of the menses and arrested development of secondary sex characteristics in anorectics, to hyperandrogenism often caused by obesity-related conditions.

Incidentally, fasting as a response to the fear of sexual maturing and heteronormative sexuality is also a major theme in the legend about Catherine of Siena, who remarkably began to refuse food after her beloved sister died in childbirth, potentially seeking to avoid the same fate as her parents urged her to marry (Bemporad 407). In cases like these, starvation became a means to define one’s own destiny, escape the domination of a man and the constraints of constant childbirth, achieve a unique relationship with God, and enjoy reverence of the public.

The Reformation brought about a drastic change in official attitudes towards fasting women. No longer were they considered pious and miraculous; quite the contrary, now starvation was an act of heresy, punishable by the church. However, stories of girls who claimed to have been miraculously freed from the need to eat continued to surge, attracting scrutiny from sceptics both from clerical and scientific domains. Many of such cases were accompanied by monetary gain, as the sufferer was demonstrated to the public for a fee. For example, in the 19<sup>th</sup> century, the starver Ann Moore was known to



earn a substantial sum, allowing her to support her children, whom she raised alone (Brumberg 57). As McMillan & Mitchell rightfully note, the money bestowed on Moore spoke of the collective acceptance of her behaviour, even if the church no longer favoured it (3). Such favourable reaction of the public to these women's asceticism was another case of "anorexic women [being] merely good students of culture" (Lester, qtd. in McMillan & Mitchell 6). Starvation was seen as a union of feminine modesty and striving for smallness, and "masculine traits of determination, strength, and logic" (Lester, qtd. in McMillan & Mitchell 6). However, anorexia was incompatible with one more imperative placed on women: to be fertile, bear and rear children (Lester, qtd. in McMillan & Mitchell 6). Reconciling the quest for extreme smallness with this task verged on the impossible, and the boundary between acceptable and lunatic ever so blurred – just as it often is today.

In the Victorian medicine, self-starvation was often considered a form of hysteria. However, the malaise was given a separate name, incidentally coined by two doctors living in different countries almost simultaneously. Dr. E C Laseque in France described the condition as "anorexie hysterique" in 1873, and Sir William Withey Gull used the term "anorexia nervosa" in England in 1874 (Hepworth 26). At the time, cases began to surge – possibly due to the increased financial wellbeing, technological progress, and the appearance of a new aesthetic which valued slim, ethereal women's bodies instead of the corpulent feminine ideal of earlier, hungrier times (Bemporad 410). Some hysterical women reported loss of appetite due to sensing a lump in their throat or stomach which prevented them from eating. Hysteria patients, almost exclusively female, usually came from middle and upper class, had few healthy outlets for their energy, and were, like almost all women of the time, confined to domestic life (Showalter 16, Hepworth 27). Those of them who fasted sometimes did so in an attempt to reinvigorate the religious practices of old times (Brumberg 73), although the reasons were manifold and varied from person to person, with others simply being concerned about their weight, sometimes out of parental pressure (Brumberg 165), or a fashion for female frailty widespread at the time (Brumberg 172). Neurologists and psychiatrists of the time were increasingly sceptical of the behaviour and condemned it publicly. In a misogynistic attempt to use it against the entire female sex, they underscored the female gender of the anorectics as proof that women were prone to mental instability (Brumberg 75, Hepworth 29) – a belief already common among the

medical profession. Forced hospitalisation and treatment were not frowned upon by specialists who would express worry about these young women endangering their “health and life” (Fenwick, qtd. in Brumberg 73) as the cheering public egged them on, thinking they were performing a miracle. The public fascination, according to Victorian medicine, only spurred the fasters’ self-destructive behaviour as they revelled in attention.

Yet at the same time, cases of women who claimed to sustain themselves on little to no food for prolonged periods of time made some physicians wonder whether women’s bodies functioned in a radically different way. The male body was seen as operating rationally, burning as much energy as it consumed with food (Brumberg 75). The male scientist wondered: what if the female body does not comply with the laws of scientific metabolism? Thus anorexia continued to be mystified even in the purportedly rational and enlightened realm of Victorian medicine. Moreover, in the case of the holy fasters, the female body became a battle site between male scientists and the equally male clerical tradition, each of which tried to impose their own interpretation on women’s embodied experience.

The early XX century saw the dawn of new treatments of anorexia. While the primary way of curing self-starvers in earlier centuries had been simply refeeding with high-calorie foods to restore weight, hormonal therapy was added to the regimen around World War I. Psychoanalytical sessions became another pillar of eating disorder treatment after Freud discovered the importance of childhood formative experiences in the development of neuroses. He posited that all appetites were symbolic of the libidinal desire and thus set out to search for past episodes causing the anorectics’ repugnance for food and sex (Brumberg 214). Following Freud’s lead, Pierre Janet also studied psychogenic factors in the onset of anorexia and made many revolutionary findings which laid the foundation to modern interpretations of the disease. Some of the important ideas pertaining to anorectics which he highlighted were: painful personal experiences leading to suicidal drive towards self-deterioration, concerns about eating particular foods, irrational fear of hurting one’s stomach by eating, and sexual anxieties and fear of maturing (Brumberg 215). Further investigations continued to prove that a multitude of sexual fears were simmering behind the anorectic’s composed façade, which propelled the scientific community to see psychosexual dysfunction as the core of anorexia. Thus, in the 20<sup>th</sup> century anorexia received psychiatric attention and was

dethroned from its previous position of a miraculous disease. At the same time, curing it became, in a way, synonymous with reconciling young female patients with their prescribed role of heterosexual womanhood.

After World War I, clinical attention gradually turned away from sexual developmental troubles and to the anorectics' desire to be thin instead. This was caused by a marked increase in patient complaints about their overly 'fat' bodies – a shift brought about by a change in societal values and heightened awareness to the pernicious effects of obesity. The woman, as the household cook and nourisher, was suddenly put in charge of her and her family members' weight: insufficient or excessive weight, be it in herself or her husband and children, signalled her incompetence as a housekeeper (Brumberg 236). As it became apparent that obesity-related diseases may even shorten lives, the stakes became higher, making waist circumference not merely an aesthetic issue, but a matter of life and death. A fat woman was seen as unable to provide herself and her loved ones with adequate nutrition due to ignorance, laziness, and lack of self-control. Thus thinness became synonymous with responsibility and prudence, while fatness came to be seen as a direct consequence of flawed character.

Incidentally, the tightening grip of the twentieth-century dieters over their bodies coincided with a time of bustling scientific and technological progress, bringing about drastic changes in the lives of contemporary citizens. Geopolitical instability and dramatically improved technology of warfare, new and foreign technologies permeating the most immediate aspects of life such as food and medicine, the challenges of globalisation, and re-organisation of power brought by the emancipation of the formerly oppressed social groups changed people's lives dramatically. At the same time, as Bordo writes, the body became "the remaining arena of control" ("Psychopathology as the Crystallization of Culture" 228) in these times of anxiety and uncertainty.

Dieting grew to be ubiquitous among the female part of the population, and it reached children and teenagers, too. It was not until the 1940s that a barrage of diet products and specifically targeted weight-loss tips poured at adolescent girls (Brumberg 251), making teenage dieting the unfortunate norm as we know it nowadays. However, even in the 1910s girls as young as eleven wrote letters to Dr. Lulu Hunt Peters, the author of a cult book on counting calories, and asked for weight loss advice (Jou 424). Calorie counting was added to weight control as another numeric measure in the overall trend of 'rationalising' healthcare and management of the body.

Early twentieth-century educators already lamented that teenage girls' mass dieting got in the way of learning the basics of healthy nutrition (Jou 426). The girls, indeed, resisted learning. The 1920s witnessed the advent of a new femininity ideal: a woman who aspired for independence, power, and control over her life. To be fat meant to be asexual, powerless, and a matron; thinness was the complete opposite (Brumberg 244). Paradoxical as it was, the slimness imperative came on from two opposite fronts: a good wife and mother could not be fat, but neither could a woman who chose a path of emancipation and concentrated on her career.

Thus began the age of what Brumberg aptly describes as "the new secular credo of physical denial: modern women suffered to be beautiful (thin) rather than pious" (242). While the society was no longer ruled by the Holy Scripture, in no way did the Christian ideals of female asceticism disappear. Their reverberations continued in twentieth-century women's magazines promoting transcendence of the flesh and self-discipline (Lelwica 5), even if this time it was for the sake of independence, beauty, and glamour. The emaciated emancipated woman was in control, first and foremost, of her body, and the promise of dieting was that achieving the same control over other spheres of life would, then, similarly be a piece of cake.

Of course, the motives and life circumstances of the medieval holy anorexic, the Victorian hysteric and the modern teenager differ. However, an overarching feature unites them: all three are usually women living in a patriarchal society with its omnipresent supervision and rules on how women's bodies should be governed. It could be argued that a unifying trait of many documented cases across ages is the potential for the sufferer to subvert society's expectations of her as a woman and gain more freedom, recognition, financial or marital independence, as well as an opportunity for self-expression.

It is also true that oftentimes, the female body has been a battle ground of conflicting scientific, clerical, and social ideologies, with anorexia serving as a container for projections on both extremes. The anorectic was labelled as proof of women's resilience, but also weakness of the stomach and nerves ascribed to the female gender; it showed their ostensible ability to transcend the flesh (and thus, by logic of Cartesian dualism, become pure mind uninhibited by the body), but also their irrationality and mental instability; it signified repressed sexuality and, at the same time, greediness for male attention as these women bared their bones in fashionable mini-

skirts. The clashing ideologies, in which the woman can never win because she is destined to be Othered, have been manifest in representation of female anorexia for a long time.

### 2.3. ARE EATING DISORDERS WOMEN'S REBELLION?

While all disease is in some way abject and terrifying to onlookers, there are, one could argue, several particularly shocking and subversive features unique to anorexia nervosa which lead to it sometimes being interpreted as an act of rebellion.

Firstly, in rich countries, where food is abundant, emaciated bodies are a reminder of the terror of not being able to eat. The memory of famines, real and induced by totalitarian governments, of poverty and of atrocities of the war is still relatively fresh in our memory as a society. Of all its lengthy history, the Western civilisation has only spent a tiny sliver in relatively secure times where starvation was uncommon. Bodies of malnourished anorectics may remind of the instability of this security, triggering memories of generational trauma the society does not want to unearth. The effect may be especially shocking in women's bodies, since it is considered the women's task to soothe others and please the eye. Instead of celebrating abundance, anorexic women show how short-lived it may be.

Secondly, skeletal frames demonstrate us the fragility of the human body. Just like other overt manifestations of disease, such as shaved heads or foregoing breast prostheses, anorexic bodies disrupt the public order: they are illness worn on one's sleeve.

Thirdly, the anorexic is seen as wilfully inflicting illness upon herself and therefore going against the bioethical order of the health imperative. Even though it is a disease which the sufferer indeed cannot control, its victims are also often portrayed as recalcitrant and hard to cure. They resist treatment while it is understood that they should aspire for health. Far from the usual agreeable countenance expected from women, who do the lion's share of emotional labour in most social settings, anorectics once again refuse to comply with the expectations of their gender.

Therefore, it is no wonder that the anorexic woman attracts attention. While the nineteenth- and twentieth-century sceptics pontificated about her behaviour being a dangerous stunt in desperation to be noticed, they usually left out the most important

question: *what* was she trying to draw attention to? The feminist interpretation of the disease attempted to answer this query, positing that anorectics tell the truth about the collective ills of the environment they live in. Anorexia, in a feminist understanding, is a method of pointing to the structural inequality and inadequacy of the existing social order in its treatment of women, and rebelling against it. It might seem as though the secondary gains female fasters achieved throughout history, as their starvation helped them become independent, dodge unhappy marriages, establish spiritual connections, and garner money and fame, only speak in favour of the theory that anorexia is a kind of a hunger strike. However, this argument is not without caveats, and many scholars voiced objections to it.

The feminist tradition of viewing madness, in general, as a political protest of sorts stems from times which predate the anorexia epidemic. As Showalter points out, the purported link between femininity and madness came into existence due to the predominance of Cartesian dualism, which presupposes a division of the world into the mind and body, the rational and the irrational, the cultured and the primitive. While men are associated with enlightenment, intellect, and logic, women belong to the plane of the natural, the chaotic, and the bodily (Showalter 3) – the space which, incidentally, insanity belonged to as it is stripped of rationality. This link between madness and femaleness, Showalter writes, was the reason why feminists appropriated the madwoman as the figure “emblematic” of the movement (Showalter 3). This figure, marginalised and confined to the – real or figurative – attics, cellars, and broom closets, occupied borderline areas both in space and public discourse. So did the repressed rage of gifted, articulate women, hungry for agency, whose drives had been stifled because they were not in line with requirements of bourgeois femininity. Madwomen, in this way, were walking reminders of the fact that not all was right in contemporary society.

Feminist and Marxist scholars picking apart the anamnesis and symptomatology of anorexia find ample proof that this disorder has emerged as a response to oppression. Celemajer points to “the aspiration towards autonomy and self-determination” (57) of anorexic women. She interprets the disorder as “starving the ‘feminine’ body [...] attempting to express those impulses forbidden by dominating that body which claims a monopoly on the expression and representation of [the woman’s] experience” (64). Hence, the anorectic feels constrained by the demands of performing her gender

(using Butlerian terminology), and perceives her body, which is gendered against her will, as a contesting voice to her own identity and voice which may or may not ring in harmony with the traditional womanly behaviour. Besides, Celemajer suggests that, as the foundation of anorexic behaviour is laid in pre-Oedipal developmental stage when a child is often fed in order to satisfy various other desires – for example, when she is merely lonely and needs to be held, but is not necessarily hungry – refusing food also means rejecting “the imposition of inappropriate representation of her needs” (65). The problem is, however, that one needs food to live. Following this explanation leads to the conclusion that the anorexic does not feel she needs to be alive, or does not find, among all of the nourishment her surroundings offer her, anything acceptable to her. Women who starve themselves thus assert their right to be heard, even if it comes at the expense of their lives.

Their pleas are strikingly similar to those of the 19<sup>th</sup>-century hysterics, whose fits and delusional episodes reflected the unsaid emotions of women craving food for thought and recognition, yet receiving the bland diet of bed rest and cold baths. According to Celemajer, women choose their bodies as mediums of expression due to the augmented value of slenderness and fitness in contemporary society (64) and the increased attention to women’s body shapes which came with it. Since the body is considered the female domain and woman is, according to Bordo, frequently “cast in the role of the body” (“Unbearable Weight” 5), it is understandable why it could render itself as suitable means of expression of women’s concerns.

In a similar way, Harriet Fraad interprets anorexia as rejection of “all ‘input’, hunger or desire for or dependence on others” (82). She claims anorexia is “a desire to be in total control of the female body and totally autonomous” (82), a “hunger strike” (85) against patriarchal restrictions. This echoes Celemajer’s argument about rejecting food as foreign input and distorted interpretation of the woman’s needs, but also alludes to the modern citizens’ food-related insecurities. As the process of food preparation is increasingly removed from the consumer, we have less control over what comes into our bodies. The control over the female body referenced in the quote above may mean both starving it to prevent it from menstruating, growing breasts and potentially becoming pregnant, as well as ensuring nothing of unknown origin (including food) enters it.

Fraad also considers the anorectic's gaunt figure a statement of refusal to be an object of male sexual desire (86) – another dimension of taking back control over one's body. Since in a patriarchal society the authority over women's sexuality is handed over to men, a fact manifesting itself in repeated instances of private and institutional sexual and reproductive abuse, women need drastic means of regaining it. Starving the sex object out of oneself is such a method.

Such scholarly arguments have been taken over and digested by popular media. Lager quotes magazines speaking of the anorectic as "waging a battle against her own body" (107). Images of women using their eating disorder to rebel against oppressive societal norms for their gender and race have been invoked by and large, starting with the 1980s (Lager 107-108). A disturbing image is therefore painted of starving women as a kind of modern Amazons who, having forsaken their womanly duty of being submissive and nurturing, had to mutilate their bodies to spite society.

Yet this is not the stance of the overwhelming majority, as most scholars do not consider anorexia a deliberate 'hunger strike'. Many point out that women with anorexia, if anything, comply with societal norms all too well (Girard 5, Orbach 145, McMillan & Mitchell 6, Griffin & Berry 43). The anorectic's usual perfectionism, applied to the culturally incentivised undertaking of weight loss, leads to it being accomplished exceptionally well. The popular media trend of using religiously charged language when referring to dieting and indulging in food (Griffin & Berry 47-49, Lelwica 6, Wolf 121) speaks in favour of this opinion. With successful dieting being glorified as an act of disciplining one's flesh, and palatable foods being described in moralising terms such as temptation and sin, it does not take much religious zeal on the readers' behalf to decipher the connotation such metaphors carry. Being able to diet means measuring up against a universal moral standard. It is unlikely that it could at the same time be an act of protest against the institutions instilling the standards, even though the end result of such extreme denial of one's anger, disagreement, and rebellious streak becomes constructed as a subversive act.

Young women starving themselves into an early grave in the silence and privacy of their homes are not the same as hunger strikes of political prisoners televised all over the globe – for one thing, because their self-destruction does not help them achieve any societal or political change. There are countless ways of effective rebellion against patriarchy, and bringing one's body to the brink of death is not one of them. One should



be wary of venerating starving women and celebrating them as modern martyrs of feminism, since their condition is dangerous and disempowering.

Anorexia is much more likely to be an expression of repressed, non-verbalised feelings which the sufferer has no other channel for. As Shoshana Felman puts it, “[m]adness is the impasse confronting those whom cultural conditioning has deprived of the very means of protest or self-affirmation” (qtd. in Showalter 5). Being a form of madness which directly impacts the victims’ livelihood, anorexia should in no way be endorsed, but seen as a scream for help in a culture hostile to women.

While there is a surface connection between dieting and empowerment for women, as represented in the culture of flappers (Brumberg, 244) and, later, women’s magazines suggesting an independent woman must be thin (Lelwica, 5), Susan Bordo and Naomi Wolf point out the co-occurrence of restraining women’s bodies for the sake of fashion with the successes of women’s movement. Late nineteenth century saw both the first wave of feminism and the popularisation of the ‘S-curve’ corset, so tight its wearers could barely sit, stoop, or move (Bordo, “Psychopathology as the Crystallization of Culture” 242). As women began to gain more freedom and power in the twentieth century, the beauty ideal shed pounds, making bodily perfection unattainable and thus counteracting the effect of their successes, by redirecting their energy away from fighting for their rights, and towards weight loss (Wolf 186). The pursuit of thinness sold to women is not a quest for health or strength. It is a mental and physical analogue of a hamster wheel in a cage, keeping them simultaneously busy and under control.

## 2.4. ANOREXIC NARRATORS AND THE PROBLEM OF AUTHENTICITY

From the excursion in the history of anorexia it becomes evident that, while the starvers of old times have become subjects of multiple stories, accounts written by such women are far from numerous. Sensationalised and put on par with saints and divine creatures, they did not actively create narratives of their own, offering their bodies as a topic for discussion and speculations, but not offering an alternative story.

Even as anorexia gained the attention of scientists in the Victorian era, the situation did not improve. Brumberg writes that physicians were by and large not interested in what anorexic patients had to say, and therefore accounts of how they felt about their illnesses are scarce (164). Usually, the demure anorexic was accompanied to the doctor’s office by her mother or other caregiver, who was the person primarily

questioned by the medical expert. It is possible, Brumberg writes, that the young patients found the doctors' presence and having to undress for examination so intimidating that it left them speechless (166). Yet even if they did have an alternative account of their illness, it was usually discounted as untrustworthy, and therefore ignored.

Anorexic patients were subjected to what Foucault calls the medical gaze: an act of selective observation whereby the identity of the patient and their perception are brushed off as irrelevant while the biomedical aspects brought to the fore. Therefore, the patient is no longer a sick individual, but a case, one in a series of occurrences of a disease (Foucault 119). Most of the clinicians' attention and recovery effort was aimed at the patients' lack of weight, not their thoughts and feelings (Brumberg 168). If the latter did receive any recognition, it was in a negative light as the illness was blamed at the patient's vanity and facetiousness that supposedly made them strive towards frailty as a romantic ideal (Brumberg 173). Anorexic patients were seen as unhelpful informants lacking in trustworthiness, mostly due to their gender and age, hence the strange omission of the psychological origins of their ailment and exclusive focus on its organic consequences.

Memoirs of eating disorder sufferers saw a surge in interest only in the late 20<sup>th</sup> century (Brien 5), and for the first time, the public has gained insight into the inner workings of the anorectic's mind. There is a traceable trend in these texts: with rare exceptions, they are written by young women from affluent backgrounds who had developed a drive for thinness in adolescence and since then successfully recovered from the disease (Brien 8). While certain passages about cravings, binges, purges, and self-esteem issues in these accounts are candid and revealing, the narrators nonetheless almost exclusively employ a 'full recovery' genre according to Shohet's classification (Shohet 349), which means speaking about their anorexic behaviours and thoughts as something pertaining to their past, ill selves, to which they now have no connection. Published accounts of anorexia sufferers who have not recovered are rare to come by: the usual format of such texts are recollections of the past, filtered and rendered by the presently healed narrator.

With the advent of talk therapy and trauma theory being brought to physicians' consciousness, accounts of the anorexic patients became an even murkier issue, since sufferers of eating disorders would often disclose a past of incest and other forms of

childhood abuse. Competing narratives and even lawsuits from disgruntled family members ensued after some of such texts being published (Brien 14). Some of the events recalled in the narratives were discredited as manifestations of false memory syndrome (Brien 14), defined as a condition whereby “a person’s identity and interpersonal relationships are centered around the memory of a traumatic experience that is objectively false but in which the person strongly believes” (Kaplan and Manicavasagar 344). Apparently, the self-proclaimed victims had been working with mental health counsellors specialising in recovery of repressed memories, who either helped them remember instances of mistreatment they had erased from their memory, or falsely suggested that these incidents took place. Proponents of the false memory theory strongly argued in favour of the latter version, forging another association between sufferers of eating disorders and untrustworthiness.

The origins of the false memory debate probably lie in Sigmund Freud’s change of course in the late 19<sup>th</sup> century. Having initially believed that hysterical patients were suffering from post-traumatic stress due to early childhood abuse, Freud then renounced his earlier convictions and posited instead that the memories of abuse were confabulated due to the analysands’ unconscious Oedipal desire (Hepworth 49). Without discounting the importance of the discovery of the unconscious this turn entailed, it is still possible that Freud’s motivation for revising his theory was at least in part similar to that of the false memory syndrome proponents. Seeing how many patients blamed their fathers, he might have been wary of inadvertently condemning innocent men. The public backlash he would indubitably receive after some of his patients’ stories were exposed might have been another consideration pushing him towards a more cautious approach.

The damage such approach caused, as in the case of revision of modern anorectics’ memoirs, was clear. Confessions of real victims of childhood sexual abuse might have been discounted by the sweeping generalisation that all such memories are to be contested. Moreover, an issue of double standards and preferential treatment arose. The word of the female victims was weighed against that of the male accused, and the latter concluded to be of more importance. Even though, according to Bordo, later research has shown that many patients in Freud’s time indeed had been abused (“Unbearable Weight” 46), the decision of predominantly male clinicians on whom to

trust, given women's constructed reputation of irrationality and mental instability, was reached without scruples.

What had happened to the hysteric happened to the anorectic decades later, as psychotherapy and counselling became predominantly female professions and an attempt was made to give the repressed memories a voice again. While the gravity of potentially false accusations is not to be overlooked, one cannot but agree with Park's criticism that the false memory theory not only suggested mistrusting the testimonies of the already frightened and traumatised abuse victims, but also discredited the "women's work" (7) of counsellors and psychologists. In addition, it compounded the already-existing stigma of anorectics as untrustworthy – if not out of malicious intent, then out of delusion.

Another cause for the prejudice against anorectics comes from health care workers' widespread, and erroneous, belief in their intentional avoidance of treatment. Since anorexia often begins as dieting – an intentional behaviour – the anorectic's condition is often misconstrued as self-inflicted. She is then vexed for what is perceived as disobeying the Western health philosophy, focussed on "the bedrock of rationality and progress, by which bodies and diseases are categorized, ordered, and treated (with the aim to assist or cure)." (Warin 81). Due to the nature of their condition, anorectics seek to aggravate their state, forming secret societies online, in hospitals, and in counselling meetings, comparing their weight loss and sharing dieting and purging tips (Warin 81). In the facility which the researcher visits, there is an air of hostility between the patients and the staff: weight is monitored and "cries of cheating and lying" (84) heard if there is continued loss over time. The staff monitor patients' rooms for hidden food or laxatives (Warin 84). This appears to be common practice, not just a single instance in one particular hospital: research has shown that representatives of the medical profession often hold judgemental stances towards patients with eating disorders. They tend to see such patients as vain attention seekers, weak-willed but stubborn, needy but resisting help, and taking up too much emotional resources (Cameron, Willis, and Richter 27). Nurses report frustration at having to spend large amounts of time watching anorexic adolescents while other young patients, whose conditions they perceive as more acute, await their attention (Ramjan 498). They extensively complain about anorectics being "manipulative", lying and scheming, and describe instances of these patients pitting hospital staff against one another, bullying

their peers, and displaying stubborn non-compliance with their treatment programmes (Ramjan 499). The label 'anorectic' tends to have a negative connotation: in some cases, it even led to perceiving patients as "criminals" and the ward as "prison" where they "[did] their time" and had to "eat to get out" (Ramjan 500).

Healthcare workers' opinion, too, often depends on the gender of the patients. Male anorectics are usually spared the same stigmatisation, since cases of male anorexia are considered atypical. It is often so due to the disease's construction as a female malady, not necessarily its lower prevalence among males (Hepworth 78). Male patients with symptoms of anorexia are more likely to be diagnosed as depressive or schizophrenic (Hepworth 79). The latter condition, for one thing, has been reported to arouse more sympathy than anorexia in some healthcare workers (cf. Cameron, Willis, and Richter 24). Due to the dualist logic common in the Western societies, men may more often be perceived as the dwellers of the rational domain and therefore immune to the irrational act of wilful damage to their own bodies. Since anorectics are misperceived as deliberately harming themselves, their condition is seen as incompatible with male rationality. Therefore, male diagnoses of anorexia are few and far between, giving little room for stereotypes to form.

In contrast, anorexic women's notoriety precedes them. "I knew about this whole thing because I'd been warned about getting sucked into the whole anorexia culture and the *girls* that didn't want to get better", says Estelle, an anorectic interviewed by Warin (83, emphasis mine). So strong is the distrust that, even despite being a model patient, the woman still has her room searched by the nurses who do not believe in her good will and "[think] there [is] something up" (72).

Revisiting Shohet's taxonomy of the "full" and "struggling" recovery narratives, I argue that the clean break with former identity employed and emphasised by 'fully recovered' anorectics aids them in proving that 'nothing is up' anymore. With the stigma and prejudice attached to being a female anorectic, it is hard to construct oneself as a reliable and trustworthy narrator while still embracing one's old identity. Hence there is an aura of secrecy around anorectics' lived experience, practices, and interpretations of their condition prior to recovery, which allows misinterpretations to flourish. Recovered anorectics, on the other hand, do their best to convince themselves – and those around them – that they have parted with their former identity for good, embracing the current clinical interpretations of their experience and shaping their

narrative according to the health philosophy where recovery and improvement are the ultimate objective.

In works of fiction, the recovered anorectic's stance has several overlapping characteristics with the definition of the reliable narrator as suggested by Terence Patrick Murphy. Murphy proposes this classification as an alternative to the original model developed by Wayne Booth. According to Booth, an unreliable narrator is a narrator whose norms and values differ from those of the so-called implied author of the text, while a reliable narrator's norms are in accord with the implied author's (Booth 159). However, the implied author concept, on which this definition is based, has been criticised as a fuzzy, unclear "anthropomorphized phantom" (Nünning 86), calling for a more precise classification. Thus, Murphy attempted to define reliability and trustworthiness using a set of traits he categorises as marked and unmarked.

The first trait of reliability, Murphy argues, is an "undisclosed, secure speaking location" (75). Speaking from the security of one's home signals the narrator's personal and financial independence, as well as distance from the events described. Speech, argues Murphy, is another hallmark of reliable narration. A reliable narrator speaks in plain, ordinary English, free both from vulgar and elevated turns of phrase, as well as from officious or poetic obscurities (75). The third marker is emotional distance from any other participant in the story. A reliable narrator, Murphy argues, "must refrain from forming any lasting relationships with any of the other characters" (75), to ensure they are free from bias. The fourth marker is "ethical maturity" (75). In the case of Nick Carraway from *The Great Gatsby*, his wartime experience is "a significant moral trial from which he has emerged changed and triumphant" (75), making him a wise man, capable of evaluating life and the people around him objectively. The fifth and final marker is the observer-narrator status in a "marked order narrative" (76). The narrator is both temporarily removed from the story and has proven their credibility, so that the reader can rest assured they do not corroborate past events. As long as the narrator's memory is solid, such retrospective look, according to Murphy, heightens their impartiality as it implies they have thoroughly analysed the situation.

This list is problematic due to the preference it shows towards the privileged: for example, a working-class or immigrant narrator, speaking non-standard English and living in precarious conditions, is not trustworthy as per this classification. For example, it overlooks the necessity of employing non-standard English in narratives such as

*Their Eyes Were Watching God* by Zora Neale Hurston, a text about Black Americans, which is written in Black American English, yet does not feature untrustworthy narration. Similarly, this classification equates mental illness with unreliability, since the ethical maturity and credibility of perception are easy to dispute in mentally ill narrators, yet they may still be telling the truth.

Similarly to Murphy, Shohet also highlights the linguistic differences between full and struggling recovery narratives. Struggling recovery is characterised with high prevalence of linguistic markers of uncertainty and signs of continuity between the days of their illness and the present (349). The speech of such narrators shows a high occurrence of hedges and experiential verbs and nouns such as “I feel” (as opposed to “I know” or “I am sure” used in the fully recovered narrative) (349). The use of continuous tenses and adverbs of continuity like “always” and “still” (349) imply that the narrator does not feel emotionally, temporally, or spatially detached from their marked condition, which suggests a similarity with Murphy’s unreliable narrator. Conversely, the clean separation from their past identity professed by fully recovered anorectics is similar to “a process of anagnorisis”, i.e. a great challenge or cathartic illumination, mentioned by Murphy (81) as a hallmark of narrative reliability. Fully recovered anorectics, according to Shohet, tend to embrace “a clinical master narrative of the disorder” (348) and thus see their conditions in the new light. They do not want anything to do with their previous irrational, stigmatised identity.

Yet the express certainty, clear chronological progression, and neat clinical explanations with which fully recovered anorectics tell stories of their past disease only mean their narratives are “stable”, as Ochs & Capps put it, but not necessarily “authentic” (qtd. in Shohet 347). These patients achieve this stability by embracing the master clinical narrative and tailoring their actual experience of illness to fit it, editing out the features so often mentioned in other illness narratives such as the non-linear and ruptured perception of time, fear of relapse, or loss of subjectivity both to the disease and to medical authorities. It is therefore not the rebellious parrhesiast or the trickster, as defined by Frank (5), but the docile patient, compliant with the medical authority, who bears more similarity to our definition of the reliable narrator. As a result, fictional anorexic narrators attempting to relate an authentic experience of their illness are likely to be considered untrustworthy, which may result in aggravating the existing stigma against anorectics.

As Gunther Martens puts it, linking “unreliability with character traits” has “proven very intuitive”, thus ““madmen” are discussed as unreliable narrators *by disposition* because of the deranged or perverted value system subtending their actions and the selective framing and representation of these actions” (79). Thus, there exists a danger of ascribing the abovementioned immoral value system to any narrator with symptoms of a mental illness such as anorexia purely based off these symptoms, resulting in automatic prejudice against such narrators. Of course, in the modern age of diversity and pluralism, this tendency is undergoing a welcome change as it becomes evident that “no generally accepted standard of normality exists which could serve as the basis for impartiality judgments” (Nünning 101). Yet, in the case of anorectics, there appears to be a dominant clinical narrative of their disease, against which their opinions are judged. If they want to be credible, they have to underscore the drastic change which happened to them in the course of their recovery so as to become more trustworthy storytellers.

Conversely, in fictional texts, deliberate switching between reliable and unreliable narration may aid to disrupt this convention and subvert the dominant ideology of rationality, questioning the need for coherence and ‘objectivity’ in narratives of subjective experiences.

### 3.1. GENDER ROLES IN *THE EDIBLE WOMAN*

In his long-winded analysis of Alice in Wonderland over dinner, Fish gives the following characterisation of Alice’s adventures: “One sexual role after another is presented to her but she seems unable to accept any of them” (194). This metaleptic interpretation serves as an insight into Marian’s own situation, as she sways between feminine and masculine roles (Brain 307) and explores different modes of femininity which she sees in other women around her. The following chapter will dwell upon the femininities and masculinities in *The Edible Woman*, represented by the characters with which Marian interacts.

Explicit characterisations of other participants in the plot often serve as implicit self-characterisations of the narrator (Nünning & Nünning 97). Thus, I hypothesise that the character traits Marian notices in others, as well as her choice of vocabulary while describing them, yield insight into her own character and understanding of her



prospects as a woman. Yet some characterisations in *The Edible Woman* are highly equivocal, making the reader turn to indirect clues to decipher them.

As becomes visible from Reichenbächer's genetic analysis of the novel, Atwood revised the text several times, meticulously adding ambiguity and multidimensionality to the characters with each round. In the final text, their motives and power imbalances are much more disguised than in the beginning drafts, as are Marian's own feelings. As Reichenbächer states, in the published version of the novel, "Marian's ignorance of the reasons of her own unhappiness makes the violent reactions of her body more plausible: it is the symptomatic expression of a rebellious subconscious" (64). Thus, the reader is sent on a psychoanalytical journey with the end goal to cut through layers of denial and come to the roots of Marian's ailment.

### AINSLEY, THE MONSTROUS NEW WOMAN

The first woman the reader meets through Marian's eyes is her flatmate Ainsley. Marian implicitly characterises Ainsley as idle, disorganised, and untrustworthy, smugly observing her hapless flatmate's ill-considered life choices and comparing them to her own, sensible ones. However, she also envies Ainsley's spontaneity and resourcefulness, which allow her flatmate to navigate the patriarchal society and even a certain amount of freedom over her choices.

On the surface, Ainsley is miserable. She dislikes her job and field of work, yet has no clear alternative plans. Her hopes for an opening in an art gallery do not reflect an ambition to work with art: all she wants is to "meet the artists" (11). This choice is indicative of her low self-worth and a perceived need to become the extension of others, which later manifests in her desire to conceive a child at all costs and, after that, to marry a man as she fears she will not raise the baby on her own.

Ainsley has a degree and is well read, as some of her remarks suggest. However, her knowledge is patchwork and lacks system. Despite voicing feminist ideas of empowerment, she makes misogynistic comments about Clara's dependency on Joe and fears raising a homosexual child. None of her psychoanalytic theories holds water – rather, they are inserted for the comical effect their apparent incongruity has on the reader.

In the very first scene, Ainsley is hungover, which makes Marian "feel so healthy" (11), yet also shines a light at the former woman's problematic alcohol use: she got drunk

on a Thursday in spite of having to wake up early the following morning. Marian also states that although the two pay equally for alcohol, they “split the cost but rarely the contents” (17). These facts reveal Ainsley is irresponsible and does not shy away from using other people – traits which become even more foregrounded as the plot progresses. Yet Ainsley’s regular use of alcohol, coupled with her low self-worth, indicates the desperation she tries to mask with her confident behaviour, and points towards the lack of healthy mechanisms of stress relief available to young working women.

Ainsley is messy, unlike her domestic and tidy flatmate. Marian describes Ainsley’s room as covered in “treacherous muskeg of used clothes with ashtrays scattered here and there on it like stepping-stones” (16). The choice of vocabulary indicates that to Marian, this room is not quite a human dwelling: she perceives this space as a swamp, a potentially dangerous space inhabited by chaos.

In addition to being an inept housekeeper, the night before the beginning of the novel’s events, trying to cook dinner while drunk, Ainsley had almost started a fire. Marian learns about it as the landlady complains about the smoke in the building (13). As Ainsley’s hunger almost causes their shared home to burn down, it foreshadows her future Machiavellian plans where she does not shy away from using other people to fulfil her desires. Ainsley’s potential to destroy the place which Marian sees as sacred due to her conservative upbringing reveals her as a threat and an embodiment of female hunger gone dangerous. It also shows Marian’s contempt for women whom she sees as chaotic and destructive, a tendency revealed in most of her interactions with other female characters of the novel.

There is a subtle tension between the two characters, as it is implied that women of the same age are always competing with each other. The conflict becomes evident as Marian contrasts her own competence to her flatmate’s lack of skill, showing the latter woman as infantile and incapable. On a morning when Ainsley is hungover, Marian is “even more stolid than usual” (11). Marian diligently eats breakfast while Ainsley watches “in nauseated silence” (12). The diets of the two flatmates are polar opposites: as Marian makes herself a balanced meal with satiety and nutritional value in mind (something to keep her full and an efficient worker until lunch), Ainsley oscillates between excesses and skips breakfast due to still being nauseous from the previous evening’s indulgence. Thus, Marian is portrayed as a dutiful follower of the post-war

conscientious nutrition trend as described by Brumberg (236): she exercises control over her diet and ensures that her body receives optimal nutrition, while Ainsley is neglectful of hers. Similarly, Marian also underscores that she never has more than one drink of alcohol (17) in contrast to her flatmate's unbridled consumption.

Their styles of communication with the outside world differ, too. Marian chooses discreet clothing while Ainsley "goes in for neon pink" (14), using this extremely bright shade of the traditionally women's colour to boast her aggressive femininity and sexuality. Moreover, Ainsley is outspoken and gives little thought to the opinions of others about her, while Marian keeps to herself and cares about appearances (14), with her subsequent developing anorexia becoming a way of somatising repressed feelings and opinions she would not dare to voice otherwise.

Despite seeing Ainsley as a rival and a threat, Marian at the same time admires her freedom and adaptability. She notes Ainsley is "a quick-change artist" (14), observing how fast her flatmate made her appearance look put together for work. While Marian feels trapped in her job and fears signing up for the Pension Plan, Ainsley's position is more temporary and thus less limiting.

Linked to Ainsley's ability to quickly change her looks is also her skill to "look innocent [...] when she wants to" (15), since "she has a pink-and-white blunt baby's face, a bump for a nose, and large blue eyes she can make as round as ping-pong balls" (15). With her infantile look and donning a pink gingham smock, Ainsley comes to impersonate what Bordo describes as a male "fantasy – an ideal femininity, from which all threatening elements have been purged" ("Unbearable Weight" 162). Yet the innocence is only a façade she uses to achieve her real goal of seducing Len and becoming pregnant with his child.

She thus subverts the traditional gender roles, which prescribe that the woman be a receptacle and wait passively to be impregnated. Instead, Ainsley chooses the active, masculine, and aggressive line of behaviour, taking what she wants without any consideration for others. As the plot culminates at Peter's party, she comes to embody the complete opposite of the girlish, submissive innocence she showed before. Marian recalls that "her hair coiled and shone, swirled around her head" (237), reminiscent of the mythical Medusa who turned men into stone. Her skin "glowed, irradiated with many hormones" (237), which is a stark contrast to her sallow look at the beginning of

the novel before she became pregnant, implying the predatory nature of her successful hunt for Len and equating female sexual desire and impregnation with cannibalism.

This is a common association in the novel, as women who are with child, or want to become pregnant, are seen as greedy and threatening, and Ainsley is no exception. Upon learning of her pregnancy, it is Len – who, ironically, had been a philanderer with a penchant for underage girls – who regresses to a child-like state, symbolically castrated by her. Caricaturing the misogynistic trope of women who use men for their benefit, the novel turns the real predator, an adult man who seduces adolescents, into prey.

In the earlier versions of the novel, Ainsley's nature is reflected in her name. Initially, Atwood names her Angela Tusch, which Reichenbächer interprets as a slur meaning *bad, mean person* (56). While this is correct, there is one more meaning overlooked in his analysis: namely, the proximity of "Tusch" to the German "Tausch", or "tauschen" – meaning "to change, to deceive". Using irony, the novel portrays Angela/Ainsley as a changeling, a demonic figure in the disguise of an angel, who appropriates traits of harmless, prudent, domestic femininity to achieve her scheming goal.

Yet despite her assertiveness, Ainsley often demonstrates that at the core of her personality she is dependent and lacks self-confidence. Her decision to have a child can be seen as a misguided attempt to take over control of her body, which, according to Margaret Sanger, is "for women the key to liberty" (qtd. in Sanchez-Grant 78). However, reiterating sexist maxims like "Every woman should have at least one baby" (40), she still agrees with society reducing her body to its reproductive function. All control she wants to preserve is over when, and how, she will fulfil the function imposed upon her by her gender, without ever questioning the necessity of it.

In Ainsley, Marian sees a case of empowerment not ultimately changing much in a woman's life, as despite all her attempts at becoming independent she still resorts to manipulating men and becoming someone's extension in order to feel valuable. Even though she acts like a rebel, Ainsley is still staying in line with societal expectations of women being passive, dependent, and incapable of leading a meaningful existence on their own. Her characterisation reflects Marian's scepticism about the women's movement and the ability of feminist ideas alone to bring about meaningful change for women in a world that still remains governed by men.

At the same time, Ainsley's embodiment of opposite male fantasies about womanhood and switching between innocence and monstrosity reveal Marian's inner misogyny and fear of the feminine. This pattern continues in her characterisation of another close female associate, Clara.

#### CLARA, THE VEGETABLE PREDATOR

Similarly to Ainsley, Clara Bates is chaotic, disorganised and unskilled in practical matters. However, unlike Ainsley, Marian describes Clara as being passive and lacking direction. While Ainsley's decisions may be questionable, Clara simply makes none, letting her life be managed by chance and by her preening husband. Clara also needs other people to be extensions of herself and channel her pent-up aggression. To Marian, Clara is all body and no mind, a cautionary tale about the chilling consequences of letting nature take over a woman.

Long-haired, translucent, and almost incorporeal in Marian's memories from their school years, Clara was "everyone's ideal [...] of perfume-advertisement femininity" (36) before getting entangled in domestic life. These reminiscences only serve as contrast with the woman's current pitiful appearance. Clara's character is an allegory of the bourgeois tradition of simultaneous idealisation and devaluation of women described by de Beauvoir (133), whereby men deprive the woman of agency and reduce her to a servant, yet treat her with reverence in exchange for her compliance. Seen through the eyes of Marian, the Clara she knew prior to her marriage was so beautiful that she hardly seemed real, just like the exquisite courtesy patriarchal societies profess to treat women with. Clara after her marriage becomes Marian's projection of the ugly other side of the heterosexual family – namely the powerless, miserable state of the woman in it.

Clara is visibly unhappy with the way her life went, but does not have the motivation to change anything and seems to fear making decisions. Though annoyed by her children, it is only after the third pregnancy that she vaguely contemplates going on a pill (34). This passivity makes Marian compare her friend to a plant. She observes the floral print on Clara's maternity smock moving with her breath, and it looks to her as though the leaves and petals have eerily taken a life of their own, making the will of the person behind the print irrelevant. Clara has blended with the vegetation, which effaced her identity and agency.

Yet Clara's biologicality has a shadow side, which Marian and Ainsley both note: namely, its chaotic and destructive nature. Like sprouts bursting through concrete walls and bringing buildings to a collapse, Clara possesses a blind ruinous force embodied in her calamitous children. They wreck toys and ruin parties, contaminate the outside world with their excrements and consume everyone's attention. Not feeling entitled to overt displays of her own aggression due to the constraints of the female role, Clara lets her children function as her extensions and wreak havoc on her behalf.

We see this paradox in the parallel Marian draws when she sees Clara's pregnant body. Clara, whose belly protrudes visibly because of her lean physique, looks to Marian like a "boa constrictor that has swallowed a watermelon" (31). Even though this parallel makes Clara look quite threatening, it also suggests that her position is unnatural. Boa constrictors are normally carnivorous: their diet consists of rodents and lizards. A dangerous predator who eats grass can be interpreted as a metaphor of aggression which is repressed in an unnatural way.

Moreover, the burden of Clara's belly also immobilises her, makes her languid, dormant, and therefore incapable of reining in the behaviour of her children. At the beginning of the scene, Marian and Ainsley see remnants of broken toys scattered around the yard. Clara's children urinate, defecate, spit out food, and wreak havoc all around themselves. Being unable to control them because of her own immobile position, Clara thus sanctions their chaotic aggression and, it can be argued, channels her own aggressive impulses – which she should repress because of her gender – through her children's destructive behaviour.

Thus, Marian considers Clara's fertility a dangerous, yet uncontrollable force, a mixture of self-harm and misdirected destruction aimed at the outside world. In the framework of mind-body dualism so present in anorexic patients, Clara is pure body, the epitome of nature as opposed to culture. Through her attitude to Clara, Marian shows her own fear of maturity and fulfilling her reproductive potential, which is, in the eyes of the contemporary society, a woman's ultimate goal in life.

Ainsley, prone to psychoanalysing everything around her, later confirms the idea that Clara's fertility is dangerous. However, arguably viewing Clara's intentions through her own projections, Ainsley sees Clara's immobility and helplessness as intentional. She claims Clara wants Joe to dote and take care of everything, revelling in the consumption of his energy, time, and effort.

Therefore, in her two closest friends, Marian sees two conflicting role models of femininity. However, they are not the only women she encounters in the novel. Her colleagues at Seymour Surveys, the landlady from downstairs, and other people she meets more or less briefly, despite not being main characters in the plot, give enough insight into the other facets of being a woman in the 1970s Canada.

#### THE LANDLADY FROM BELOW

The fact that this character has no name suggests her purely functional role in Marian's life, on the one hand, but also points to the fact that Marian does not know her true identity. Instead, she merely associates her with the role she fills, never deepening her knowledge of the landlady past the stage of superficial acquaintance.

Addressing this issue, Marian says she and Ainsley have something of a „mental block about [the landlady's name]“ (13). What they experience is an act of repression, a defensive mechanism employed with unpleasant thoughts or emotions which the sufferer then forgets (Vaillant 385), suggesting that they do not really want to get to know this person closer. While one explanation for this is their general apprehension towards her, and the general disregard of women's identities in the patriarchal society, there is textual evidence that Marian and Ainsley also fear the landlady. They make tongue-in-cheek remarks about her sneaking and creeping behind curtains, or burying corpses in the garden (13). She possesses an almost supernatural omniscience about everything that happens in her house, making her a powerful, sage, feared character.

Living down below (in a liminal space which symbolises the less explored realms of the unconscious) and having a special connection to nature, the landlady represents the traits of Baba Yaga as described by Clarissa Pinkola Estes: an older, wiser woman, the embodiment of the deep intuitive wisdom women tap into in themselves on their path of initiation (117). Such figures, terse and rough on the surface, are a powerful presence in the younger characters' lives, providing the youth with stability and wisdom in turbulent times. Yet Atwood's is a grotesque narrative, and so her witch is a caricature, too. Instead of embodying the ancient wisdom and crystal-clear vision of Baba Yaga's fiery-eyed skull, the landlady represents the outdated, fossilised views on how women should behave. She does not teach her own child bravery and curiosity, instead limiting her routes to the streets she deems safe, and sheltering her from any information which could make her 'corrupt'. The landlady symbolises Marian's unconscious disappointment with the outdated wisdom of the older generation, of

which she can make no use in resolving her existential crisis. Like many other older women in the novel, the landlady is not receptive to the new set of challenges women of Marian's age face, and her 'guidance' gives them nothing but exasperation.

The image of the landlady may also signify the changes which happen to the Western society with the rise of consumerism. Marian's inner crisis is in part caused by the confusion she experiences living in times of transition from the old mores to the new, postmodern world of consumer goods and technological progress. Even though this new world order, with its professed equal rights for women, promises to free her from the drudgery of domestic chores and constant childbearing, Marian does not really trust these promises, often associating the new values with deception, artifice, and mockery, and is wary of them contaminating every area of life. The landlady is a caricature of the real wise witch, because everything the new culture touches becomes a caricature of itself.

#### MRS. BOGUE AND THE QUICKSAND OF THE WOMEN'S WORKPLACE

Disappointed with the cursory wisdom of her domestic goddess, one would expect Marian to turn to another older woman in her life for guidance. Mrs. Bogue, her supervisor at work, would ideally be representing the positive qualities of the modern society: she would teach Marian how to foster her intelligence and creativity, embrace equal opportunities, and pursue professional fulfilment.

Yet instead, in the workplace, Marian feels taxed by futile assignments and petty co-worker feuds. She dreads being devoured by the job and suffers from stagnation. Mrs. Bogue is an embodiment of these qualities, which is signalled even through the symbolism of her name.

Merriam-Webster dictionary defines the verb *to bogue* as a dialectism for 'to move aimlessly and slowly' – similarly to the activity on the women's floor at Seymour Surveys. The surname is also homophonous with *bog*, meaning swamp, foreshadowing how bogged down Marian would soon feel as her supervisor commands she sign for the Pension Plan. And, finally, it bears a resemblance to the word *bogus*, meaning fake – just as, we learn from the novel's plot, women's possibilities in the world of work are.

Instead of showing Marian that she, as a woman, could have it all, Mrs. Bogue burdens her and her co-workers with the most tedious tasks and generally uses them as



disposable, cheap workforce. Realising she will never be given any tangible power in the male-dominated world of work, Mrs. Bogue holds to what little authority she holds and ensures other women do not get too many opportunities.

As far as Marian's department and company as a whole are concerned, Sarah Sceats makes an interesting remark, highlighting the way patriarchy and capitalism are intertwined in the novel – both finding their reflection in the metaphors of food and eating. “[Marian] is connected with food indirectly too, through her work in consumer research for a company whose hierarchical and static structure she describes as ‘layered like an ice-cream sandwich’, signalling both the (nutritionally) surplus quality of the firm and the impossibility of women's upward movement from the middle ‘gooey layer’ to the (male) executive level.” (95) This interpretation is in tune with another modern metaphor pertinent to the business world, namely that of “corporate anorexia” mentioned by Tyler and Wilkinson (3). Considering unnecessary workers the company flab, the surplus pounds it needs to shed in order to get into lean shape, highlights the Western civilisation's obsession with leanness, which in turn stems from its ingrained ideology of Cartesian mind-body dualism and perceived need to discipline one's flesh. Fat, a sign of unrestrained appetite, symbolises giving in too much to the desires of the body at the expense of rationality and clear, logical thinking. Providing too many unnecessary workplaces is therefore considered a weakness of the company, signalling its descent from male sensibility into female sentimentality and lack of discretion. This distinction already becomes visible at the level of texture. The lean body consists of firm bone and muscle, strong and resistant, while fat is mushy and shapeless. Similarly, Marian refers to the executive level as the “upper crust”, while women belong to the “gooey layer” in the middle. Not only does she thus refer to the impossibility of women's upward mobility, but also implies that women at Seymour Surveys are framed and – quite literally – put in their assigned place by the men surrounding them from above and below. The fact that Marian's three closest work companions receive the label of ‘office virgins’, for one thing, points towards this tendency: instead of their real names, Lucy, Emmy, and Millie are defined by their relation to men – or their absence thereof. They are, as Texmo puts it, “lying in wait for the men who will give them names and *raison d'être*” (67). Furthermore, the contrast of the “gooey layer” and the “upper crust” signifies here that women are considered to

be made of a decisively different matter, pliable and lacking integrity – almost like the fat in ‘overweight’ companies referenced in Tyler and Wilkinson’s work.

Women at Seymour Surveys are replaceable and disinterested in their jobs. Their married status shields most of them from the need to earn a living, causing a lackadaisical attitude to work and constant turnover. However, it might also be the fact that they are mostly given menial, unfulfilling tasks, unable to advance past the boundaries of the sandwich filling to the executive level, that causes their disengagement. For instance, in one of the scenes, Marian compares the women to kindergarteners as they doodle with crayons on the questionnaires. No man would agree to do this monotonous work; therefore, women are the necessary fat of the company. Yet they are not its vital organs and can be easily disposed of and replaced.

Comparing women to food, vegetation, and other inanimate objects and matters does not stop at the ice-cream sandwich metaphor. At the office party, Marian expresses her inner misogyny through feeling trapped in the “Sargasso sea of femininity”, repulsed by all the women surrounding her and fearing she might drown in their midst. By using words such as ‘jellied’, ‘roll of fat’, ‘bulge’, ‘porous’, ‘fluidity’, ‘flux’, she portrays women as organic mass without a core, the whole essence of whose lives is “taking things in, giving them out” (167). The Sargasso sea being the only sea on Earth without land boundaries once again signifies that, to Marian, women are shapeless, boundless, and in need of the disciplining presence of men. She also heavily objectifies her co-workers, referring to them as “objects viewed as outline and surface only” (167) and admitting their near invisibility amid office paraphernalia such as desks and telephones. In fact, these contemptuous musings are a reflection of Marian’s own innermost fears, as she repeatedly feels her body disobeying her. Not only does it reject food, it also acts without Marian’s conscious control, shedding tears upon hearing a terrifying story (70), aching to touch Duncan at the cinema (125), and even having pimples move around her face (217) almost like the proverbial uterus in ancient tractates on women’s anatomy. In all these situations, Marian is dissociated from her body and taken aback by its reaction. She feels framed by her feminine corporeality, viewing sexual (wanting to touch a man), hormonal (skin changes), and emotional (crying) manifestations of it as bothersome intrusions.

She also feels commodified in her interactions with Peter, who treats her like another exhibit in his collection and causes her fear and distress so great she even tries to

escape him in a psychotic episode (74). Her feelings are aggravated by her inability to share them. Like many women in abusive relationships, she is alone with her disquieting experiences and thus neither names her feelings nor reflects about their origin. Resorting to a simple explanation, she blames being a woman for her unhappiness. She sees the root of women's objectification in their being consumers, endlessly swallowing and excreting, and decides to stop being one.

Feeling detached from their collective femininity through her refusal to consume, Marian studies her co-workers like a curious botanist. Employing the same vegetative metaphors she previously used to describe Clara, she compares them to fruits, most of them "overripe" and some even "beginning to shrivel", "attached by stems at the tops of their heads to an invisible vine" (166). This can be read as a metaphor of struggle and competition between women, who, although symbolically united, nonetheless have to fight for the same resources. The ones who shrink and decay, instead of falling off the stem, continue feeding off the younger and greener ones.

Living as a woman thus becomes inextricable with cannibalism – an ideology Marian refuses to espouse. Her disapproval of feeding off those like her manifests in her body's rejection of fruit and vegetables shortly afterwards, as she drops a carrot, terrified of the screams she thinks it emits while being peeled (178). In a later scene, Marian observes a disturbing demonstration of a whimsical potato peeler in a shopping mall. Since slicing vegetables is, in the language of the novel, a symbolic act of violation of women's bodies, what she witnesses is a sort of public execution. As a man chops vegetables into eccentric shapes, exercising his power to mutilate them as both a capitalist and the representative of the dominant gender, the women in the audience watch, "their eyes shrewd and sceptical" (211). They are desensitised to the violence they see and complicit in it. This abhors Marian and makes her rejoice in her new looks which separate her from this crowd.

In the previous scene, Marian visited a beauty parlour which looked to her similarly eerie. She describes it as a mixture of a hospital and an assembly line where women like her were taken apart, strapped to chairs, worked on, and ornamented, and uses an array of loaded language associated with operations. Marian sees the beautician as "disturbingly nurse-like and efficient", leaning her head against the "operating table" for shampooing (209). Patrons become "patients", the hairdresser a "doctor", and his tools "instruments" and "medicines", and Marian thinks about the necessity of

administering anaesthetics during the procedure (209). Such metaphors imply the almost medical authority of beauty specialists in the patriarchal world where it is implied that women need to be 'fixed' if they are not conventionally beautiful. At the same time, these metaphors convey Marian's fear and disturbance at the thought of this yet another act of surrendering her body to other people to do what they want with it. She experiences dissociation yet again, referring to her own reflection as "the draped figure prisoned in the filigreed gold oval of the mirror" (209). Being trapped in a mirror might be a foreshadowing of Marian's future conjugal life, as according to some interpretations, Peter uses her as a mirror (Bromberg 15). It also stands for her feelings of entrapment in the current norms of feminine beauty. A patient and a prisoner, Marian is distressed at the thought of someone breaching the boundaries of her body and modify its appearance according to cultural requirements, but does not feel empowered to reject such treatment, choosing instead to escape her body while others manipulate it.

She finds her hairdo too frivolous and artificial, and perceives the stylist's suggestion she wear it more often as almost cynical, since it is obvious from the language of the scene that the prescriptions of the patriarchal world imply no *choice* to wear something. Marian strongly feels that the hairstyle, as well as other choices in life, is forced upon her. However, as soon as she leaves the salon and observes the scene with the vegetable cutter, she changes her mind. Marian hopes that by virtue of such hairdo and the meanings it conveys – luxury, fragility, the role of a soon-to-be trophy wife of an affluent lawyer – she is distanced from the crowd and may be spared the fate of these lower-middle-class women who are forced to look at something eerily resembling a public execution in order to fulfil their roles as dutiful homemakers. The inherent contradiction of the assumption that belonging to a higher socioeconomic class might ease the constraints of her gender role eludes her, and she momentarily forgets the distress she has just experienced, undergoing the altering procedures necessary to fit her into her own prescribed role, as she sees the predicament of others.

Incidentally, most interactions between women characters in the novel are tinged with hostility. While men display a certain solidarity – Peter being worried about his friends leaving the bachelor club, Duncan's flatmates taking care of each other, Len finding shelter at Clara and Joe's as he seeks refuge from the irate Ainsley – women treat each other with a palpable dislike and lack of compassion. Marian describes even her

close associates, such as Ainsley, Clara, and the office virgins, with contempt and in derogatory terms. She suggests, for example, that what kept her cohabitation with Ainsley going was not friendship, but “a *minimum* of that pale-mauve hostility you often find among young women” (16, emphasis mine). This makes developing intimacy almost impossible for a woman in the world of Atwood’s text, to Marian’s chagrin.

Being allowed into any space designated for women and becoming part of a group – be it at the office, the beauty parlour, or the mall – is strictly regulated and requires a sacrifice Marian is not ready to make. The quest for belonging she goes through in the course of the novel results, time and again, in her realisation that she cannot fit in by being authentic and vulnerable. Marian never receives truly attentive, sympathetic treatment from her individual friends, either: engrossed in their own lives, they pay only superficial interest to hers and never express genuine concern for her well-being when her issues begin. As shown in the dialogue at the party about a girl who stopped washing (165), it is apparently considered normal – albeit repellent – for women to lose their mind, and the society’s reaction is to patiently wait it out. Neither are Marian’s female friends concerned that she agrees to marry Peter whom she allegedly has not known for that long. At her office, a backstabbing culture proliferates, with women constantly scheming to overpower each other. It is also highly indicative of a distant and unattached family atmosphere that she never even thinks about confiding in them as she goes through a crisis.

In summary, being a woman means to Marian having to make a choice where none of the alternatives is satisfying. She is either being cut out or has to cut out – friendships, habits, the freedom to dress as she likes and earn her own money. Similarly to that of a restrictive dieter who turns down dinner invitations and never leaves their home without a lunchbox full of plain chicken breast, Marian’s life as a woman soon to marry becomes increasingly bland, riddled with prohibitions and limitations.

Such an unwelcome change invites rebellion. However, Marian is not of the rebellious kind. While her unconscious protests vehemently against being put into a straitjacket of her new married life, she remains pliable and consenting on the surface, repressing her feelings of adversity ever more diligently. One cannot but agree with Darlene Kelly, who views Marian’s loss of self and consecutive switch to third-person narration as an extreme augmentation of the passivity inherent in her character. At the beginning and during the course of the novel, Kelly notes, “Marian is a pawn, not of fate [...], but of

other people. In the hands of her fiancé, of her roommate, of her colleagues, of her friends, and of her acquaintances, she is completely passive and suggestible.” (Kelly 327) Although rigid when it comes to inconsequential things such as the choice of breakfast foods and fixating on the strict order of household chores, Marian experiences a great amount of internal confusion as far as more important decisions are concerned, relegating them to others when it is essential for her to stand up for herself. Polivy and Herman list the lack of an “organized” self-image as one of the important precursors for developing eating disorders (197). ‘Organized’ is a key qualifier, since Marian is introspective to a certain degree and does have some knowledge of herself. Yet her self-image is patchwork at best, which finds its reflection both in her haphazard behaviour and in frequent spells of dissociation. The reader is left to tease out the premises of Marian’s unconscious inner conflict from her drawings, bursts of emotion, involuntary body movements, and eating habits.

She is also an unreliable narrator, at first lamenting her helplessness before the disease, then admitting her return to eating and talking about herself in the first person was a choice. Her elusive and deceptive style reveal that an overt rebellion is futile. Speaking up is not enough, the narrator warns us, since an honest discussion of issues is not possible with the deniability surrounding women’s oppression. On the surface, women in Marian’s reality are indeed given all the possibilities: to work, to study, to forge friendships, to marry and have children when and with whom they want to. Yet their lives are filled with absurd and contradictory rules, following all of which will lead a woman to insanity.

#### VIOLENCE AND VOID: THE CONTRASTING MALE CHARACTERS

The characterisations of men surrounding Marian reveal themes of victimisation, loss of identity, and relationships being turned into acts of consumption. Her fear of becoming prey is first mentioned during an outing with Peter, Len and Ainsley, as the two men show off their masculinity in a conversation about hunting. Even though this scene is deeply ironic, as it is in fact the innocent-looking Ainsley who is harbouring predatory thoughts, the gusto with which Marian’s fiancé talks about chasing and capturing instils a feeling of sadness in the protagonist. Wary of disagreeing with him, she immediately dissociates from these emotions, identifying the tear she sheds upon hearing the exchange as something odd and not belonging to her.

Later in the evening, Marian undertakes a series of attempts to escape, her pity towards the victims turned into fear as she realises that Peter regards her as a trophy, too. Her unconscious feelings clash with her ideas about decorum and relationships between women and men, making her ignore the warning signals, stay and entertain the party, until she feels too overwhelmed and elopes. Her flight raises no eyebrows, strengthening the impression that women's irrational behaviour is treated as a customary part of daily life. Peter merely expresses his consternation in a passing remark that she should follow the example of demure Ainsley and act normal. Moreover, Marian's victim-like behaviour invigorates Peter so much that the scene ends in a marriage proposal. In a framing device, Marian's engagement to Peter ends the way it began: with her fleeing from him. Marian finally interprets the enthusiasm with which her fiancé wants to take "shots", i.e. photographs, of her as a violent streak, a desire to flatten and immobilise her, symbolically entrapping her in the image. His brutality, which she previously brushed off, now bothers her, implying character development and increased valuing of personal independence and safety.

In *Alice in Wonderland*, the text to which the novel heavily alludes, the theme of hunting is also salient as the protagonist chases a white rabbit, symbolising her quest for self-discovery and implying the importance of developing one's own inquisitive and aggressive sides for women. As Marian's disordered eating begins after her unsuccessful flight from Peter, I propose that one of her motives is to sharpen her senses through hunger, since it is common for anorectics to note increased resilience and mental acuity in the early phases of their condition, sometimes even referring to themselves as hunters (cf. Goolding 281). Being with Peter puts Marian on high alert, as she senses he is a threat to her, but cannot immediately explain why.

Incidentally, Peter's surname in the earlier iterations of the novel had been Voland, which Reichenbächer traces back to a Germanic word for 'devil' (55), the thief of souls. While Atwood has decided against naming this character in such an overtly labelling way, the photoshoot scene demonstrates his closeness to the ultimate Biblical villain. By capturing his fiancée on film, Peter wants to symbolically steal her soul, rob her of her subjectivity and substitute her real self with the strange woman in a red dress she does not associate herself with. Inebriated and frightened, Marian foresees her future with Peter in a series of ominous still images, each of which she has to access through a door like a room. Unlike in the original tale of Bluebeard, to which this episode

indubitably alludes, she does not find a closet full of mutilated cadavers. Instead, she is startled to realise she is missing from the pictures. Of course, between the lines, the chilling suspicion is easily read that it is her flesh broiling on the charcoal grill. However, while usually hunters seek trophies, Peter's – and patriarchy's – goal is not to put Marian's head on a wall, but to dismember, consume, and erase her, chopping her up and gulping her down like so much steak.

Hunting is seen in the novel as a male method of consumption: it is linear, with a clear goal of tracking down the prey and satiation in mind. It is shown as having clear boundaries, a beginning and an end. Perceiving gender as a binary, Marian sees female consumption as its opposite: ever-continuing, boundless, ouroboric. The disturbing verbal imagery she uses to describe Clara hints at her misogynistic fear of pregnancy as a ploy to augment one's power and even a form of cannibalism (since the foetus is in the stomach, where food usually belongs). Another clue in favour of Marian's unconscious association of motherhood with cannibalism and destructive forces is her description of women as incessant, undiscerning consumers as she describes "the continual flux between the outside and the inside, taking things in, giving them out, chewing, words, potato-chips, [...] hair, babies, milk..." (167). The ambiguity with which Marian does not differentiate between what comes in and what is given out points to the possibility that babies, just like words and milk, can be taken *in* as well as released *out*. Conversely, the same ambiguity concerns edible substances on Marian's list, implying that women can also produce – and be – food.

Marian thus sees both men and women as violent consumers. The former hunt for hunting's sake, the latter devour their surroundings with the goal of mindless multiplying. Feeling she has to choose one of the options, she is abhorred by both and stops consuming altogether, unwilling to be a predator or a gluttonous womb. This inner conflict is reflected in her drawings as she doodles a sequence of waxing and waning moon cycles, almost immediately after the change to third-person-narration, and then proceeds to draw an arrow. The cyclical nature of the moon characterises it as a symbol of femininity, while the arrow represents violence and linear, goal-oriented motion, symbolic of masculinity. Throughout the novel, Marian hears repeated accusations of rejecting her femininity. In truth, it is both the womanly and the manly way she rejects, which draws her to the androgynous Duncan as a mirror image of her unconscious desires.



Not only does Duncan refuse to embrace gender performativity, staying in the role of a child. He also appears to have no clear identity, which is reflected in the recurring theme of names and namelessness in their relationship. Only well into their acquaintance is it revealed that they never told each other their names. Duncan has no surname, either. In the earlier versions of the novel his full name was Duncan Fluevog, resembling to the adjective “flyweight”. Reichenbacher proposes that getting rid of the surname deprived this character of family origins and made him simultaneously generic and enigmatic (54). Having no surname also suits Duncan’s lack of interest in conventional relationships, marriage, and starting a family. He does not intend to impose his name on a woman, symbolically replacing her identity with his own, and stays at a safe distance instead, keeping his relationship with Marian purely functional. To him, Marian is only a distraction from writing term papers. Marian is not interested in intimacy with Duncan, either, unwilling to jeopardise her relationship with Peter, but also scared of the revelations Duncan’s prophetic wisdom may bring her.

Even though Duncan is as self-centred as most other male characters in the story, he seems to possess precocious knowledge, often articulating truths about Marian’s life she would not dare to admit to herself. For example, he understands the position of women in society better than other men do. In the laundromat scene, as he and Marian sit down and observe the clothes spin in the machines – a monotonous setting, the circular motion of which seems to put them both in a quasi-hypnotic state – he utters prophetically the story of the armadillo whom he had once seen at the zoo. It kept “going around in figure-eights, just around and around in the same path [...] They say all caged animals get that way when they’re caged, it’s a form of psychosis, and even if you set the animals free after they go like that they’ll just run around in the same pattern” (95). Duncan’s words are an insightful interpretation of the situation Marian, and many other women of her time, find themselves in. With growing freedoms being granted to them by society, they are still entrapped in the invisible constraints of their gender role, trying frantically to seize power in whichever way they can. Although Duncan talks about his favourite subject – himself, in fact his words are a significant interpretation of Marian’s situation, and the position of women at large. Despite growing freedoms being granted to women, the invisible constraints are not gone anywhere.

### 3.2. GENDER ROLES IN *HEARTSTONES*

For Elvira Zoffany, the narrator and protagonist of *Heartstones*, anorexia is a way to escape adult- and womanhood with their frightening consequences, but also a method of coping with grief and fear of death. Similarly to Marian, Elvira encounters role models of femininity in the novel, all of which leave her unimpressed and unwilling to follow their lead. However, due to the girl's excessively strict upbringing and her grief over the recent loss of her mother, her perceptions are often biased. Disappointed and desperate about losing a female parent, she internalises her father's misogyny and blames women's perceived inherent inferiority for the traumatic events she has to endure. At the same time, Elvira is unconsciously aware of the emotionally incestuous nature of her relationship with her father and the predatory advances of other men around her, making the withering of her body a protective mechanism against sexual assault or unwanted sexual desire. She equates femininity with corporeality and aspires to become bodiless in order to be, at last, invincible to her own emotions and bodily urges, and the menacing advances of the men surrounding her.

#### FEMININITY AS INFERIORITY AND THE FEAR OF MATURING

The woman whom Elvira describes first is the girls' grandmother, the closest they have to a maternal figure after their mother dies. She is described as warm, nurturing, and pronouncedly corporeal, as other characters associate her with pleasant smells and the joy of eating. Grandmother is fond of cooking, which Elvira sardonically exaggerates in her anorexic phase, saying she "usually expected people to drop down dead if they did not eat something at least every two hours" (9) and alludes to with gratitude after her recovery, mentioning the rich meals cooked by the older woman in a positive light. Grandmother wears twinsets "impregnated" (9) with freesia scent, the word choice hinting at the woman's maternal nature. Her simple and innocent nature is shown in her little speech errors – for example, when she mispronounces the word "anorectic" (58).

Yet this crisp naïveté also makes Grandmother gullible, such as when she believes Elvira's assurances about having eaten enough. And, as Elvira recalls finding Luke's body, she remembers the garden being flooded with the "sickly" (63) scent of white philadelphus, which Grandmother mistakes for orange blossoms. In the Victorian language of flowers, orange blossoms mean purity while white philadelphus, also known as mock orange, stands for counterfeit (Greenaway). To Elvira, who is well-versed in Victorian literature due to her fascination with Poe, not knowing one from

another may imply the older woman's infantilism and ignorance about the gravity of the atmosphere in her son's house. At the same time, the insight Grandmother shows about Spinny's condition, not wanting to leave the girls alone and feeling concerned about the medication her youngest grandchild has been given for years, shows that Grandmother might well suspect that the deaths in the Zoffany home were not accidental, but refuse to dig at the truth any further as she yearns to leave the past behind and protect her grandchildren.

In this, she is the opposite of Mary Leonard, who is portrayed as a curious, energetic woman, eager to get to know – and love – the family of her fiancé. While Grandmother is put-together, gentle, and asexual, showing her bodily existence in innocent tactile pleasures such as smells and tastes, Mary is rowdy and ostensibly libidinous. She wears red, a colour of aggressive sexuality, and has stubble on her legs – a sign of sexual maturity which Elvira perceives as gross. Mary's corporeality does not stop at food; instead, she reminds Elvira of her mother and unresolved Oedipal struggle, which leads to the girl seeing her as a threat.

It could not be more fitting that Mary's research interest are "building and masonry techniques" (29), while Elvira relies on descriptions of their house and the cathedral opposite to reflect the state of her feelings or give insight into her family life. The girl senses the woman wants to study her, and resists such attention. Of course, Mary's intention is not to demolish or damage the metaphorical walls Elvira erects inside herself to protect her tumultuous feelings. Rather, she approaches the girl – and the rest of the family – with the reverent curiosity of a scientist, careful not to disturb the order of things. Her caution is shown as she wakes up at night to the buzzing of a wasp and puts the insect into a cup, releasing it instead of killing it. In another instance, she shows respect for Spinny's opinions as she employs Socratic dialogue to help the girl with her history essay, instead of rewriting the text herself.

However, despite all her attempts at being non-intrusive, Mary's presence is still abrasive to the girl. She sings her mother's favourite operas and even brings a "music centre" with her. A paragon of innovation in the 1980s, this contraption is at odds not only with the silence reigning in the house, but also with the family's unspoken agreement to live in the past and reject modern technology. Elvira sees Mary as the embodiment of frivolity and libidinous excess, which abhors the girl.

Yet the fact that Mary's relationship with Luke has a purely platonic character hints at the possibility that the unbridled sexual desire Elvira ascribes to Mary is in fact a projection of her own repressed desires. Again, in an alexythimic fashion already traceable in *The Edible Woman*, Elvira's internal conflicts speak in symbols. The moon resurfaces as the symbol of femininity as it shines on Mary's face while Elvira watches her sleep, lighting up, unlike the bright midday sun, only some of her features – the ones the young girl wants to see. Incidentally, moonlight is, in itself, only a reflection of the Sun, just like the qualities Elvira attributes to Mary may be simply a reflection of her own personality.

If anorexia in young women is the result of disheartening prospects womanhood offers, one might expect to see a lack of suitable female role models in *Heartstones* similar to that in *The Edible Woman*. However, this is not the case, as Mary Leonard was an energetic, intellectual woman, who did not reject her corporeality yet did not plan to confine herself to the domestic sphere or fill the role of a decoration, either. She was a good role model for Elvira and Spinny to follow. Yet Mary's inquisitiveness and ambition lead to a cruel punishment, making Elvira only strengthen her already ingrained conviction that women's inferior role is justified and subjectivity and womanhood are mutually exclusive.

These opinions are reflected in Elvira's treatment of Rosemary and Sheila, 'the help'. These women are reduced to working hands and, in Elvira's eyes, devoid of subjectivity. The draconian rule of no music and minimal noise within the residence's walls implicitly means working-class people are not supposed to be heard in this household – they do not have a voice. Of course, Elvira's and Luke's ideas about the position of these people are out of date and at odds with reality. This becomes clear when Rosemary refuses to wear a white apron at Luke's reception, retaining autonomy over her clothing to Elvira's great annoyance. "You may be living in the eighteen hundreds, [...] but the rest of us aren't. The days of slavery are past" (25), she retorts, challenging Elvira's worldview and once again indicating the family's tendency to live in the past. Forbidding self-expression to working-class servants is also an exercise in futility, which becomes evident as Spinny absorbs elements of their speech. Yet, unlike her sister, Elvira and her father are recalcitrant in retaining their bourgeois arrogance, despite it being inappropriate for the time the events take place.

Elvira is no kinder to women of her own socioeconomic class, which becomes evident from her derogatory description of Mrs Cyprian: “She is one of those women who bedizen themselves. Every inch of her is decorated [down to her] sandals, so high she must perforce rock and prance in them like a mettlesome mare” (26). Like with Rosemary, who has “cow’s eyes” (21), Elvira uses denigrating livestock parallels and metaphors to show condescension towards other women. She considers Mrs Cyprian vacuous and flinches at her closeness, as though, like Rosemary’s clichéd turns of phrase, her conspicuous consumption may also be contagious. Her behaviour mimics many anorectics’ obsession with purity noticed by Warin (82), as they refuse certain foods, viewing them as pollutants.

Elvira’s revulsion at female biology also shows itself in the way she speaks of her mother, Anne. She despises her mother for telling her she had been an incontinent infant, and balks at the thought of having been born from a womb. She describes it as “a damp dark place, a warm well lined with weed and limpets and sea anemones” (9). Such image is a possible influence of studying Ancient Greek with her father, as the physicians of that era saw the female body as “moist” (Bonnard 8) and full of vessel-like organs, in which fluids could gather and congest (Bonnard 10). Like in *The Edible Woman*, where Marian sees women’s reproduction as chaotic, vegetation-like growth, Elvira also imagines her mother’s womb to be a place where creatures of all sorts proliferate – embryos, algae, and sea creatures alike, unchecked as it is hidden below sea level. Female reproductive system is contrasted to the male mind, which to Elvira is “a gilded dome, like a temple” (9) – the apotheosis of the cultural, the sterile, and the controlled. Scholars studying the text agree that Elvira’s anorexia is an attempt to reject her mother (cf. Leavy, qtd. in Beyer 81). The verb “spring” (9), with which Elvira chooses to describe the ideal birthing process, also implies her struggle with the impurity of female biology, as the freshness of a spring is contrasted to the stagnant water in a grotto. This comparison also infers what parts Elvira deems defining in members of each gender: while men’s most prominent feature are their minds, women are reduced to their wombs.

Being labelled impure and carnal, Anne was also discouraged from expressing herself, be it through playing classical music in the house or penning mystical stories about the residence’s ghosts (11). Himself spending hours writing a theological work which never saw completion, her husband harshly criticised Anne’s ideas with satirical quotes from

Fielding (11), thus teaming up with another man against a woman who tried to encroach upon the manly territory of creative writing. Post mortem, her tombstone said nothing but “beloved wife of Luke Zoffany, mother of Elvira and Despina”, followed by “an appropriate text from the Apocrypha” (17) – no doubt, of Luke’s choosing. Thus, Anne’s voice is substituted for Luke’s, as her personality is swapped for her role of a partner and childbearer.

Not willing to be a walking decoration, a pair of hands, or a womb, Elvira attempts to stop the advance of her puberty and avoid becoming a woman. What she does not realise, however, is that women are not born to be functions – they are made such by the patriarchal society and, sometimes, particular men. Such was the case with her mother and Luke.

### MALE, MEDICAL, MALICIOUS: THE PETRIFYING GAZE OF MEN

Elvira’s relationship to her father is extremely equivocal, and signs are scattered throughout the novella to highlight the disturbing nature of it. She associates the family house with Luke and their unique soulmate connection. Being a man of tradition and order, Luke takes great care of his belongings: “every book is behind glass, every sheet of paper neatly stacked, every note the topmost sheet of a pad, the pen he used laid at a perfect right angle across it” (12). Yet their house is full of “cracks and holes” (38), enough so that Elvira can spy after Mary Leonard through an opening in the floorboards, which implies a dangerously fragile construction. This highlights the contradiction between Elvira’s perception about the house – and her bond with her father – and reality. Although in her plentiful imagination the girl sees life at the Zoffany family residence as pure bliss, in fact the building is old and treacherous, threatening to kill the inattentive dupe who treads on the wrong spot. So is her relationship with her father: while she reveres him, she is also afraid of speaking her mind and asking simple things such as that he spend more time with her heartbroken little sister.

Later in the text, it is revealed that the house is not merely old and decrepit, but outright toxic, as the wasp man has been methodically filling it with poison for years. Potassium cyanide, one of the compounds used in the building, is absorbed by the human body through all routes, including the lungs, and causes significant harm both in the short and long term (Kulig & Ballantyne 5). For a mysterious reason, Luke does not want to call local authorities about the insect problem, instead using the questionable services of the wasp man. This can be interpreted as a metaphor for the poison in his own

character, which he lets loose on his family members, but carefully disguises from others. His sadistic inclinations and lack of empathy have been observed by Beyer in the episode where he frightens the girls with the ghost tale, which the author labels “mental cruelty” (80). However, critical attention is yet to be given to the even more chilling possibility of Luke also being *physically* cruel and deliberately employing poison in his house for the deleterious effect it may have on its inhabitants’ health. The story of a cat immured in the house’s walls may in this case not be true, but hint to a real danger walled up in the building.

Yet Elvira does not notice any of these. Starved for affection, she idealises her father and aspires to be an equal companion to him. Elvira is jealous of any other woman who approaches her father and tries to compare herself – and compete – with his wife-to-be, repeatedly putting herself on par with Mary. The paradox of this competition is that, while on the surface Elvira rejects her sexuality, the reader receives insight into the sexual nature of this contest through equivocal hints, word choice, and slips of the tongue. “These *mistresses*, no doubt, are Mary Leonard and myself” (34, emphasis mine), she thinks to herself when the other woman tries to initiate a humorous sung exchange with her sister. “Oh, she is no beauty” (34) is the thought she relishes after leaving Mary flustered with a successful verbal assault. Even though she is certain Luke likes Mary for her mind and not her body, she competes with the woman on both fronts, which reveals the Oedipal crisis the girl is still struggling with in the absence of her mother who would resolve it.

However, Luke’s most important reason to marry Mary is probably neither his interest in her as a sexual partner nor as an intellectual companion. Little does he reveal about his feelings for this woman, and when he does, they are almost always connected to himself. He is eager to possess such an exceptionally bright partner, famous for acquiring her doctorate as early as at twenty-five, and insinuates that her mind was “nearly equal to his own” (45). This shows that Luke’s feelings for Mary are rooted in a narcissistic desire to own her like a trophy which would strengthen his own ego. Similarly to his daughter, he also projects upon Mary qualities of his own personality, although in his case the projection is idealised, as he uses his fiancée as a mirror for his own intelligence and academic renown. This may explain the preferential treatment Mary receives from Luke during their courting, as this man encourages her intellectual quests and artistic self-expression through playing and singing music, having forbidden

the same things to his late wife. Whilst Elvira wants to do away with the woman as she reminds her of her own repressed sexuality, aggression, and corporeality, Luke showers her with love as he projects upon her his most prized personality traits. Symbolically, the inhabitants of the Zoffany house have almost no mirrors: these are not needed, as they use others to gaze at their own reflection.

While Luke sees in Mary a projected image of himself, then Elvira, a copy of her father in looks and character, is the second-best target for such egocentric affection. She admits to it herself, stating: “[Having us] is better than a wife, Spinny. [...] We’re half made out of him.” (8) Thus, Elvira is aware of the dubious nature of her relationship with her father, but does not admit to the dangers of such closeness as her own sexuality is repressed. Yet unconsciously, she might fear incest and therefore decide that “the safest body is the slightest body” (Gadow 298) in order to stop being an object of sexual desire for her father. While she desperately needs the man’s affection and acknowledgement to soothe her grief and support her in navigating the challenges of adolescence, she is intuitively aware that his self-serving nature might bring about dire consequences.

Yet he is not the only predatory man professing authority over her choices: in the early stages of Elvira’s narrative, Dr. Trewynne also represents both the medical gaze and the unwanted male attention. Unlike in *The Edible Woman*, where doctors and medical discourse have only a very moderate and mediated presence – they appear perhaps only as internalised voices in Marian’s head suggesting she take a vitamin pill or as the sources of book advice mediated through Ainsley – in *Heartstones* the heroine’s interaction with a doctor, and the gradual change in her attitude towards traditional medicine, are a prominent part of the narrative.

Elvira’s relationship with the medical discourse is also shown as a power struggle. She is arrogant and dismissive about Dr Trewynne’s knowledge, stating that he is in fact “a bachelor of medicine, not a true doctor at all” (26), prompting initial dislike in the reader due to her insolence and grandiosity. However, with Elvira being a pretty teenage girl, and the doctor suggesting they meet in his surgery “one of these fine evenings” (26) – that is, in private, when most patients and staff are already gone – his suggestions take on a more eerie undertone. So does his recommendation of a glass of Oloroso – a fortified wine, certainly a drink strong enough to inebriate and disarm an emaciated fourteen-year-old – as well as the fact that his eyes were “curiously fixed on” (28) Elvira



during the evening. It becomes clear that the doctor's attention is inappropriate and oversteps Elvira's boundaries, and her illness and rebellious age are seen as a pretence to silence her concerns about the doctor's male and medical gaze which are transforming her into an objectified body in multiple ways simultaneously. Not only is she, as Davenport puts it, seen "as a "case" or a "condition" rather than a human being" (311), but also as an object of sexual desire, as Dr. Trewynne's remarks suggest. The intensity of Elvira's distrust is highlighted by the fact that she has just recently had her mother pass away due to neglecting official medicine – an incident which would have otherwise prompted the girl to heed medical advice, had she not felt intense discomfort in Dr. Trewynne's presence.

#### TO BECOME STONE: INTERNALISED MISOGYNY AS REJECTION OF THE BODY

The distrust Elvira feels towards medical care, and the fear her own uncontrollable feelings instil in her, fuel her desire to become someone in no need of help. She perceives even well-meaning interventions from Mary and Grandmother as intrusive and sees them as unwanted scrutiny of her private world, threatening to discover a weakness in it which she is afraid of admitting to herself. Perhaps this is why she repeatedly draws parallels between herself and the cathedral she sees from the windows of their house. The ancient, majestic building represents immortality and superhuman resilience to her. These are the qualities she wants to cultivate in herself to shield herself from grief and uncertainty. The cathedral's great age and the many generations of humans it has seen pass away suggest its immunity to mortal suffering, while its religious significance makes Elvira feel connected to higher powers and reminds her of her own undying spirit. It is also male-coded, considering the domes' usual phallic shape, the verb 'to erect' most commonly used in collocation with buildings of such sort, the male gender of most priests, and the fact that Elvira describes the male mind as a "gilded dome like a temple" (9). Thus, through association with the building, Elvira finds a fantasy escape from the unruly emotions of adolescence and grief, and the discomfort of becoming a woman which she equates with becoming all body and no intellect.

She recalls the exaltation and empowerment from looking at the cathedral on the night she first met Mary Leonard: "[The cathedral's] towers [gave] an impression of [...] symmetry and balance, its niches supporting no less than four hundred and twenty-two figures of angels and archangels and apostles and saints, bathed in declining but

still radiant sunlight” (25). The elated, almost out-of-breath enumeration of all the figures present on the façade breaks Elvira’s usual thoughtful, pedantic manner of speech, revealing her intense enthusiasm for the architectural piece – an emotion she would normally consider unseemly. The symmetry and balance she sees in the building are qualities she wants to nurture in her own soul, as she purges it from the irregularity of embodied existence. However, a warning foreshadowing is already encoded in this observation: the sunlight, although still radiant – as her ‘plan’ to starve her vulnerability together with her physical body still seems feasible – is already declining, symbolising not only the changes lying ahead as she meets Mary Leonard, but also the wane of her own health and psychic defences.

In a while, it becomes evident that even the cathedral needs maintenance sometimes, to which Elvira reacts with despondency. She deplores the scaffolding’s “very disfiguring” (41) look as it obscures the entire façade from her. Not only is she deprived of her consolation; the truth about the cathedral’s fragility, in spite of its seeming timelessness, reminds her of the vulnerability of her own self, no matter how she tries to shield herself from the pain of grief and horror of her own mortality. It is around this time that her health begins to dwindle and she faints in Luke’s study. Similarly to Marian in *The Edible Woman*, who symbolically endows dolls and human-like pastries with parts of her personality, Elvira also sees her reflection in an inanimate object – a whole building decorated with human-like figures of saints.

Since anthropomorphic dolls and similar figures are often believed to contain transformed spirits of the deceased (Jivanyan 9), and since Christianity presupposes the existence of the other world where the souls of the dead exist indefinitely, Elvira may also perceive the cathedral as a connection to her mother. Even though it is not directly mentioned in the text, close reading reveals such a possibility. Elvira sees the building as imbued with “serenity” (41), a word often used to describe the feelings of a child in her mother’s arms, and observes that the six-winged seraphim in its niches looks “as if flying from the gates of heaven” (43), where her mother’s spirit resides. While she admits to feeling dizzy from the climb, Elvira’s long, detailed, enthusiastic description of the cathedral’s wonders suggests the place gives her energy and nourishes her in a different way than food ever could. As the mother is now only spirit, free from her impure body, Elvira feels it is finally safe to be close to her. Moments before Mary’s death, Elvira literally approaches heaven physically – where her mother,

presumably, observes her with a loving gaze – and enters a transcendent state mentally, similar to the holy anorexics from the Middle Ages.

So does Mary, with her “head raised heavenwards” (44), standing tiptoe and looking at the Twelve Disciples sitting to their last supper. It is emblematic that she dies in a symbolic act of voyeurism, trying to peek at the holy men in the moment of human weakness as they indulge in the base act of eating. Her death precisely at this point shows, once again, how Elvira perceives her as hungry and greedy. The accident also foreshadows the resolution of the girl’s personal crisis. Elvira sees Mary’s climb towards the sacred sculpture composition, with her scarlet dress symbolising her libidinous energy, as a metaphor for attempting to unite the corporeal and the transcendental in Elvira’s own personality. Yet the integration cannot happen, since her internalised misogynistic beliefs exclude the possibility of reaching transcendence while being a – still living – woman. So the body drops onto the stones, sacrificed to the male gods and punished for its insolence at the same time. It is a warning for Elvira that achieving perfection and ultimate self-containment as she sees them would also mean death to her body, because she judges herself by unrealistic and woman-hating patriarchal standards.

Mary is not the only woman mortally punished in *Heartstones*. In the next chapter, I will show the many connections between femininity and death in the novella, and how Elvira sees female hunger as something ultimately destructive.

### THE MONSTROUS FEMININE IN *HEARTSTONES*

In addition to being equated to inferiority and lack of subjectivity, femininity in *Heartstones* is sometimes presented as predatory and murderous. Among other ways, it is exemplified in the way Elvira talks about her menstruation. As she discloses that she does not have her menses, she describes them as accompanied with “horror, blood and filth and smell and pain” (19). The fact that she chooses to write about this secret immediately after mentioning cannibalism and relating Grandmother’s family of Luke’s great appetite in his teenage years suggests that she associates menstrual bleeding with death and murder. She is so afraid of it she even makes a spelling error which is traceable in different editions of the novella: “I have not come to the menarche. (This is the way I prefer to put it. Other terms I find *repellant*.)” (19, emphasis mine).

An explanation has been proposed that Elvira's dread of her menses and of her past incontinence as a baby stem from the lack of unconditional motherly love and absence of her mother as a "healthy female role model" (Connolly 62) to come to terms with her developing female body. While maternal support and teaching the girl healthy acceptance of her body could greatly aid in her transition to adulthood, one should be wary of placing the blame entirely on the mother's shoulders and ignoring the larger cultural background. Women's bodily excretions are generally treated with disdain and seen as abject, with excrement and menstrual blood carrying the most negative connotation (Creed "Horror and the Monstrous-Feminine: An Imaginary Abjection" 73, Kristeva 70). According to Kristeva, these two matters secreted by the human body are unique in being labelled as pollutants, unlike to other fluids such as tears or sweat. At the same time, they are both intertwined with the feminine and the maternal. Menstruation is the sign of the body's ability to bear offspring, while defecation is associated with sphinctereal training, which the subject undergoes in the period of a dyadic connection with their mother (Kristeva 71). These pollutants, as anything abject, symbolise the fragility of the symbolic order and social taboos it entails, including those of incest and murder, and thus create an association between the maternal, the womanly, and the homicidal.

Menstruation and murder are often conflated in literature and film, such as in the screen adaptation of Stephen King's *Carrie*, where the protagonist becomes murderous with the onset of puberty. In doing so, the female body is Othered with regard to the man's and constructed as the "monstrous feminine" (Dooley 63). Seeing the breast cancer as her mother's femininity killing her from within, on the one hand, and threatened by any and all signs of breaking the symbolic order since they might bring about the realisation of her father's incestuous drive, Elvira reacts to her body's excretions with a pre-symbolic fear manifest in her forgetting the rules of language, which causes the spelling error.

Moreover, Elvira suffers from survivor guilt, a condition whereby it is common to blame oneself for not having done enough to save the person who passed (Fimiani et al. 3). She fears she might have inadvertently taken part in the death of her mother. This is evident from the opening sentence of the text: "In those days I had never given a thought to poisoning and I can be sure of this, that I had nothing to do with our mother's death" (7). This attempt at reassuring herself may stem from a deep-seated fear

common in those who have lost a loved one: that her mother's death might have been her fault. Thus she tries to purge her body from the 'killer within', the monstrous feminine, and stop it menstruating, since she is afraid the two may be connected.

Spinny is Elvira's opposite. First of all, she was raised by their mother and thus lacks, according to the Kristevan theoretical framework, sufficient boundaries as she has not been exposed to the symbolic order impersonated by the father. She is infantile for her age and easily influenced by outsiders, her love easily won: "Her favours were cheap, were nothing" (30). In her unquenched hunger for affection, which is no doubt even stronger than Elvira's – as Spinny is not only younger, she had also been their mother's favourite child – the girl consumes every sliver of attention she might get from others. Desperate to blend in and conform to society, she craves a normal life and therefore abides by the traditional prescriptions for her gender, becoming a textbook image of docile femininity: sweet, gentle, indiscriminate, childlike in her mind but with a prematurely developed body and sexuality, and lacking self-control. In becoming so obviously feminine, hers is a body abject by default as described by Creed: "penetrable, changes shape, swells, gives birth, contracts, lactates, bleeds [...] threatens to collapse the boundary between human and animal, civilized and uncivilized" ("Lesbian bodies: Tribades, tomboys and tarts" 87). Elvira's younger sister comes to personify the same "sargasso-sea of femininity" (Atwood, 167) in which Marian feels she is about to suffocate. Spinny eats and becomes increasingly larger while her reason fades, until she develops murderous tendencies, echoing a trend pointed out by Morrissey and Seal to classify killer women in fiction as "mad", not "bad" (qtd. in Holmes 2). Spinny is the personification of her fantasies about uncontrolled femininity which, unrestrained by male control, becomes ouroboric, self-destructive, and cannibalistic.

Another reason why Spinny is presented as the opposite of reason is that she sees ghosts and looks for the cat's bones in the house walls. The cat, in the many shapes it takes in the text, is a crucial symbol of the girls' developing sexuality. Its image has undergone a drastic change in meaning from the traditional Gothic to the postmodern Gothic narrative. While the Victorian cat used to represent "a distortion of human nature, a demonic possession, an alien force residing in the unconscious, and repressed emotions such as guilt or sexuality" (Aktari 198), the feline characters in postmodern narratives symbolise humaneness, equality, and sexuality as a much

more nuanced, generally positive aspect of life, to which women are entitled as well as men (Aktari 198). However, the characters of *Heartstones* make a deliberate effort to live in the past, and so the cat is repeatedly vilified and banished. This stands for the family's general tendency to turn women's sexuality and bodily desire into the stuff of horror stories, Othering it as threatening and evil.

#### 4.1. THE ABJECTION OF FOOD IN *THE EDIBLE WOMAN* AND *HEARTSTONES*

It is believed that anorexia is a result of being overly concerned with one's weight and looks, and that it befalls women as a direct result of a weight loss diet gone too far. The pressure on women to be thin, combined with the many other dangers and disadvantages of womanhood in patriarchal society, is considered a crucial factor in the development of anorexia. As discussed in the previous chapters, both Marian and Elvira live in misogynistic environments where choices are limited and positive role models of femininity scarce. Their despondency does eventually bring them both to internalising the misogyny of their entourage and reject their bodies, to which gruesome end starvation proves an effective means. However, none of them in fact begin with a weight-loss diet.

Marian develops a strange disgust for certain foods, gradually narrowing down her menu to a scanty and ever-decreasing list of 'safe' sustenance. Although the coincidence of her involuntary fast beginning immediately after her engagement may macabrely mirror the mediatised and culturally acceptable 'wedding diet', never does Marian mention an intent to lose weight and become more conventionally attractive. Nor does Elvira, although she does observe the changes in her body with contentment. Instead, at the beginning of her diary she confesses: "Eating means very little to me and I would forget to do it unless there were someone there to remind me" (9). While there is little mention of Elvira's selectivity towards the foods she eats as she is more focussed on eating less overall, her comments on Spinny's alimentary choices also reveal a bias against certain foods as inferior to others.

Both the media and medical literature do view anorexia as inextricably linked to preoccupation with one's looks. Even the DSM-V lists fear of gaining weight and disturbance in perceiving one's weight as crucial diagnostic criteria (American Psychiatric Association 338-339). Yet, contrary to the popular belief, not all anorexic

patients begin as dieters, and not all of them continue their behaviour out of fear of becoming 'fat'.

Warin turns her attention to such discrepancies between the expected and the real causes of anorexia and intentions of anorexic patients as she recounts stories of such 'irregular' patients and how their own explanations of their behaviour were either not taken seriously by the hospital staff, or viewed as an exception proving the rule. For example, a woman who refused to eat certain foods after a herbalist had recommended such dietary restriction to her was seen by the nurses as "quite mad" (Warin 105), although she was by far not the only patient who perceived food itself, and not the prospect of gaining weight, as a problem and a threat. In fact, many anorexic people have their own, carefully guarded taxonomies of safe and unsafe, 'clean' and 'polluting' foods. These are, Warin presumes, kept secret because of the overall clandestine nature of anorexic rituals (106). While certain foods, such as bread, were seen as clean by some patients and unclean by others, there was a universal repulsion at red meat and fats among Warin's interviewees (108).

The historical proto-anorexics also often paid great attention to what, and not only how much, comes into their mouths. Medieval faster Mary of Oignes reportedly "vomited at the mere smell of meat" (Brumberg 41). Early modern maidens' diets symbolised their purity and otherworldliness as they ate "only delicate things" such as flower petals (Brumberg 47). Conversely, abhorrent non-food items were occasionally ingested as a sign of the eater's transgression of bodily limitations: for example, Angela of Fogligno ate the bodily secretions of the sick and dying (Brumberg 45). The Victorian era, known for its propensity to judge the expression of bodily needs by standards of morality, had a cornucopia of eating rules – especially for young women. Caregivers and cooks were advised against giving pubescent girls coffee, tea, and chocolate, for fear that these victuals might arouse aggression and premature sexual development in them (Brumberg 176). Throughout history of the Western civilisation, it has often been prescribed for women to avoid heavy or strongly flavoured foods, as enjoying these would show their carnality and sexual desire. Even the consumption of disgusting substances was, at times, more acceptable and successful in elevating a woman's status than gorging on fatty, sugary, or otherwise hearty foods.

The main characters in both texts observe the negative consequences which befall other women's bodies after indulging too much, be it in food or sexual pleasure –

incidentally, the end results even overlap visually, with pregnant Clara's big stomach reminding Marian of gluttony, and insatiable Spinny looking like a mature woman despite her young age. The latter is also frequently shown eating exactly the kind of foods women historically were not supposed to consume: meat, sugar, fried and processed goods.

For example, as the novella nears ending, Spinny finishes her already abundant meal with "a litre-size of raspberry ripple ice cream" (76). Ice cream has been extensively used as a symbol for sexuality and desirable male body in Anglophone literary texts due to the cone's phallic shape and the dessert being a "treat" (Zinn 157), unanimous with the slang word for a sexually attractive person. At the same time, its "childlike innocence" (Zinn 157) makes ice cream especially suitable for describing teenage sexuality with the complex interplay of innocence and desire which usually accompanies it.

It has a similar symbolism in *Heartstones*, reflecting the tension between the girls' nascent sexuality and their family's attempts at suppressing it. The crimson raspberry streaks in Spinny's ice cream of choice stand, firstly, for menstrual blood and sexual initiation. They intersperse the white cream, the colour of which stands for innocence and reminds of the confirmation dresses the sisters wore to the event hosted by their father at the beginning of the novella. Secondly, since it is alluded that Spinny might be the murderer, the red streaks violating the purity of the white background hint at the blood of her victims. As the text employs the trope of monstrous femininity, this detail only further underscores the conflation of women's sexual desire and blood thirst.

Ice-cream and other sweet treats unmistakably stand for rule-breaking and lust, and are often marketed in a sexualised fashion according to Bordo ("Unbearable Weight" 111). This unites them with another group of foodstuffs, which women have often been advised against indulging in women out of fear of their 'corruption'. Those are foods of foreign origin, such as coffee, tea, and chocolate, exotic fruit, and groceries of foreign brands.

Foods which transgress boundaries of categories, instead of fitting into a particular class, have often been labelled as impure or dangerous, notes Mary Douglas in her classification: for example, the Jewish Kosher tradition forbids consumption of pork as pigs have cleft hooves but do not ruminate, unlike all other animals in their order (qtd. in Warin 108). Similarly, foods coming from foreign cultures and countries have often



been faced with distrust, often stemming from xenophobic sentiments or rivalries between nations. The maxim 'you are what you eat' has driven many nations to refuse foods of their foes out of fear of becoming like them. Early Spanish settlers believed that they could "degenerate" into beardless Indians if they consumed crops native to the region (Earle 692), and the Victorian and Edwardian England's dislike of Germans was represented in constant mockery of the German sausage, which was considered adulterated and contaminated and believed to make the eater aggressive (Waddington 1017). The threat of Otherness contained in foreign foods has often been sexualised: from fear of emasculation through eating Native American crops to that of corrupting little girls by letting them taste the treats of the Victorian Other, who was imagined as voracious and markedly libidinous (Cameron & Olguin 66). Teenagers, who stood at the border between childhood and womanhood, were seen as already occupying a liminal position themselves and therefore under intensified threat of defilement.

The foods which Spinny consumes with vigour in *Heartstones* are often foreign. She indulges in Viennese Whirls, Sachertorte, Kinder chocolates, coffee, burgers and fries – all of which make her fat and, as Elvira hints, mad. As her older sister and father resist the globalising influence of the new world and keep technology, radio, and modern music at bay, Spinny ingests it with glee. Her bingeing can be read as a metaphor of the young generation made crazy by omnipresent, aggressive foreign cultural influences. These new influences are not dangerous because they come from a different culture, but because there seems to be no single culture they would clearly belong to. To Elvira and Luke, who value precision and tradition, they are chaotic and disorderly. For example, the specialist who prescribed a deadly cure to Elvira's and Spinny's mother is called a "naturopath", a word which Luke derides as "a bastard hybrid of Latin and Greek" (7). His disdain at the term is, in this case, not merely a sign of pedantry, but also a demonstration of his anxiety over the changing times and the impossibility to remain in the comfortable, familiar past.

Some of the food on Marian's plate is also symbolic of a culture she refuses. She perceives her job, her habits, her relationships and interactions with other people as artificial and reluctantly participates in them only because she does not see an alternative. The canned rice pudding and sugary cereal she flushes down with milk are symbolic of such artifice, providing only a semblance of the real thing and not satisfying in a way truly nourishing food or relationships could. She notes with frustration that

after a breakfast of cereal without the egg – a whole, natural, self-contained food of familiar origin – she would be hungry by lunchtime.

Another ‘dangerous’ food in both texts is meat. While not coded as a foreign food in the Western society – in fact, at times its consumption even symbolised the supremacy of the English over “rice-eating Hindoo and Chinese and the potato-eating Irish peasant” (qtd. in Adams 54) – meat is laden with cultural connotations that associate it with masculinity and make it forbidden to women. From the Kufa of Ethiopia enslaving women as punishment for breaking the chicken-eating taboo (Adams 50) to British housewives of the early 20<sup>th</sup> century feeding their husbands an obligatory “Sunday dish of meat” (Adams 52) while the rest of the family subsisted on less nourishing foods, meat has historically been constructed as a food reserved for men. Like tea and coffee, meat was also believed to overstimulate the sexuality of pubescent girls in the Victorian era (Brumberg 176). This food is associated with virility and strength, with hunting, aggression, dominance and privilege, male friendship and rebellion against the ‘feminising’ and ‘fun-policing’ health authorities. For example, in multiple television advertisements the consumption of fatty hamburgers is represented as a uniquely male activity from which women, and their preaching for health food, are exempt (Phillipov 387). When Spinny eats “three-quarters of a veal and ham pie big enough for six people” (76), her excessive meat-eating makes her the opposite of what is expected from a woman: instead of showing sensibility and self-control, she eats in a way which implies rebelliousness, greed, and a lack of concern for others.

While women are responsible for cooking in general, and for carving meat when it is scarce (Adams 52), preparing and providing meat dishes is still widely considered a male job. It is so in *The Edible Woman*, where Peter feeds Marian steak and is later seen next to a barbecue grill in her fantasy, cleaver in hand. Since meat should be available to everyone in times of prosperity and only to men in times of need, by treating a woman to a meal of meat, the man shares with her his riches and proves himself as an ample provider. Refusing such an offering can cause offense to his masculine role. Understanding this, Marian hides bits of her steak under salad leaves when she realises she cannot stomach it. Peter is already upset that she does not fulfil her feminine duty of cooking (63), and she is cautious about disclosing her newly acquired revulsion of traditionally men’s food.

Her repulsion at the steak suggests an additional interpretation of meat: namely, as a potentially contaminated food. Copious religious taboos connected to meat and classifications of animals into acceptable and abominable all over the world testify to the fact that not all meat is safe to eat. A deep-seated fear of accidentally ingesting the flesh of animals unfit for consumption is manifest in the urban legends of the “Kentucky Fried Rat” or dog meat in the curry (Harding 104). Tales of accidental cannibalism after eating a meat pie of unknown origin abide as well. Because of the difficulty in tracing cooked meat’s origin, it poses a danger of accidental physical or moral contamination for its consumer. It is also associated with aggression and death, making the eater wary of ingesting a product of violence.

Yet for Peter, meat plays such an important role in strengthening his virility that he even remarks a steak makes him feel “more human” (152), revealing at the same time the importance and the fragility of his masculinity: while it grants him dominance over others, it also needs to be constantly reinforced (by eating meat). It is over steak that Peter pontificates about childrearing and the necessity of physical punishment, establishing himself as the head of their future family. The complex entanglement of emotions that this produces in Marian makes her body involuntarily reject the food she suddenly empathises with.

As she puts it while musing over dinner preparation, her body “refused anything that had been, or (like oysters on the half-shell) might still be living” (178). Embracing an egalitarian view on the natural world, Marian equates animals and vegetables with humans instead of seeing them as inferior to her species, and does not want to engage in acts of abuse against her equals. She also fears contamination and remembers Peter mentioning a variation of the Kentucky fried rat urban legend (“a friend of his [...] got some [hamburger] analysed just for a joke and had discovered it contained ground-up mouse hairs”) (177) Mutton, lamb, and pork she will not eat, either, because of stories of parasites. Thus, not only does meat symbolise aggression and toxic masculinity, which repulse Marian; it is also poisonous in itself.

In an attempt to conceal her disease and avoid Peter’s prying, she hides her steak under the salad leaves. Thus she makes her food uninteresting to her fiancé, as vegetables are considered ‘feminine’ food. Associated with passivity, vegetables are “thought to have a tranquilizing, dulling, numbing effect” (Adams 61) on the eater. Therefore, “to eat a vegetable is to become a vegetable, and by extension, to become

womanlike” (Adams 61). Apparently, the performance of the male gender role relies as heavily on eating a primarily meat-based diet as that of the female gender role does on abstaining from animal protein.

Atwood uses hyperbole to take this association between women and vegetables to an extreme in *The Edible Woman*: here, vegetables are not simply women’s food – they are women. Marian repeatedly draws this parallel and ultimately refuses to eat produce as well, seeing the fruits as similar to women’s bodies. It is exemplified by the episode where she tries to peel a carrot for the salad. Holding the root by the leaves on top, she recoils as she suddenly sees it assume anthropomorphic features, and almost hears it scream. This episode refers to the myth of the mandrake, a liminal entity between plant and man believed to come into existence through the mixing of a hangman’s sperm and fat with soil (Carter 146). Believed to induce fertility, but also known for its soporific and narcotic properties, the mandrake-carrot may imply oral sexual violation and impersonate Marian’s unconscious fear of impregnation. The vegetable’s “crisp orange skin” (178) may also code it as a racial Other, invoking a fear of a foreign invasion in her body. Yet refusing to consume the sleep-inducing mandrake-carrot also indicates Marian’s awakening in the sense of becoming more alert to the inequality and misery of her position as a woman in the patriarchal world, and her fiancé’s violent streak.

In *Heartstones*, the association between vegetables and the female body is mentioned in the context of Anne’s infamous failed attempt to cure cancer. The cleanness and wholeness of the raw produce bore a tempting promise of making herself whole: Anne ingested foods in their primal form, not cooked and transformed into something else, wanting her body to stay similarly untouched – both by disease and by the surgeon’s hands. She despised the prospect of the operation as it implied violation of her body’s integrity and changing its shape, as she is quoted to have said she “would rather die than be mutilated” (7). Yet, according to Elvira’s interpretation, the cancer got angry at the proffered vegetarian treat and consumed Anne’s body with renewed eagerness, making it a misogynistic disease which refuses women’s food.

As Hegel views women as corresponding to plants and thus standing on a lower developmental level than animals and men (qtd. in Adams 61), eggs, as underdeveloped animals, belong to the women’s rank in this hierarchy. While the symbolism of this food is often used in Atwood’s prose as a sign of wholeness and

integrity, eggs may be unpredictable, sometimes concealing an embryo like the one which scared Len as a child. They are a metaphor for the arbitrariness of nature, as opposed to the sterilised artificiality of processed cereals and canned puddings. Len's egg incident shows how the feminine and unstable nature still lurks at the borders of the masculine, industrialised world of the novel, shoe-horning its way back in as soon as it finds an opening. It permeates food, coming back as parasites in factory-produced meat, or as the housefly found in the cereal bag by a disgruntled customer (28), posing as a raisin to delude the eater.

Marian's relationship with food mirrors her confusion as a woman in a transitioning world. She is wary of factory-made foods, seeing them as artificial and not nourishing, and experiences a similar distrust towards the values of the new world these foods represent. Similarly, Elvira fears imported foods, perceiving them as a threat to her values and integrity. Yet at the same time, both characters reject whole foods because of the unpredictable biologicality and femininity associated with them, symbolising a refusal to revert to the old, 'natural' ways of life. Many of their food aversions are gendered and symbolise repulsion at femininity, but unwillingness to accept the violent masculine way of life. With Marian's crisis unfolding against the backdrop of a marital conundrum and Elvira fearing passage into womanhood, their food fears are a non-verbal way of expressing the confusion they experience about their gender roles, values, and goals in life.

The final component of the anorectic's diet is hunger – as interviews with patients show that, instead of being a side effect of not eating, hunger is a presence rather than an absence, a separate nutrient having significance of its own. Sigal Gooldin quotes multiple interviewees reporting how feeling hungry made them feel more awake and mentally acute. Patients reported hunger made them feel "hyper", as if they "could do anything" (Gooldin 282), filling them with exhilaration at the thought of their resilience and ability to sustain on a bare minimum. Another quote sheds even more light on the reasoning behind anorexic women's quest for starvation: "*You* are sleepy and I'm awake, and my senses are sharp. I may be hungry but I'm using the feelings aroused by this hunger in order to become a better hunter in those sides of life that you will never get to know." (Lichtman, qtd. in Gooldin 281, emphasis in the original) The anorexic patient contrasts her heightened awareness to the sleepiness of eaters, caused by their indiscriminate consumption. She sees herself as precocious and

transcendent, being able to traverse into parts of reality ordinary people cannot access as their senses are dulled by food. Agile and active, she is a perfect superhuman hunter. Hunger is, therefore, experienced as a magic pill and a secret ingredient capable of taking oneself out of the victimised (womanly) role and turn into the predator.

Marian is afraid of being victimised and, as discussed earlier in this thesis, rejects the feminine role precisely for the passivity inherent in it. As she stops eating, she grows increasingly restless and aware. Hunger enables her to assume the position of an observer in her own life as well as in the lives of others, which is rendered both through her switch to third-person narration and her ruthless critique of the lives of women and men around her, which becomes sharper and more detailed as the plot proceeds. Her eating disorder is triggered by her unconscious realisation that her fiancé is trying to oppress her will, and by the end of the plot, made savant by the experience of hunger, she is able to put it into words: “You’ve been trying to destroy me, haven’t you” (271). Similarly to the anorectic quoted by Gooldin, who labels themselves as being able to enter sides of life unknown to non-anorectics, Marian also experiences facets of life she would not normally discover. She sees Duncan’s home and mixes with ‘the wrong crowd’ of his quirky flatmates, becomes a woman who has an affair, and is even mistaken for a prostitute in a dingy motel, all of which decorum would normally prohibit her from doing. Hunger propels her towards seeking alternative modes of existence to sheltered middle-class femininity, and while she deems none of them acceptable, the experience is enough for her to be able to vocalise her dislike of the life she has and reject the prospect of becoming Peter’s wife.

Similarly, Elvira echoes the wish to become a hunter as she notices lanugo on her skin: “I am furred like a lean cat” (52). Instead of being a passive site of uncontrollable growth or a monstrous glutton like her sister, she sees herself as transformed into an agile nocturnal predator who sees things undiscernible to the human eye and is capable of migrating between worlds, even if only in her mind. Not only does Elvira in her anorexic phase see food as “enemy” and “poison” (Beyer 77); she also perceives hunger as medicinal, capable of healing her from the pernicious effect of her surroundings, which she considers oppressive to her mental freedom.

## 5.1. THE ROLE OF DISORDERED NARRATION

The final chapter of my analysis will deal with the narrative structure of both texts and the connection between narration types, eating disorders, and gender inequality presented in the works. Unreliable narration is common in Atwood's texts, with a typical Atwood's narrator telling her story "in fragments, in seemingly disconnected bits and pieces, and in a disruptive style, which engages the reader" (Dizdar 382), mirroring her narrators' internal confusion and the disjointed state of their personalities. Beyer characterises Elvira from *Heartstones* as an unreliable narrator as well (83). I argue that, by employing this mode of narration, both texts draw attention to the larger issue of the lack of trust placed in women's thoughts, perceptions, and feelings. Moreover, vulnerable women whose self-perception is fragmented, such as sufferers of eating disorders, are granted even less credibility, and need to 'pass' as healthy to be heard and believed. At the same time, the texts show the unique, incisive perspective of mad characters on society and its shortcomings, which often goes ignored due to its unconventionality.

According to Murphy's speaking location criterion, both Marian and Elvira are unreliable narrators. While Murphy considers the home to be the most secure location (80), it cannot be said about the homes of these heroines. Taking Mallett's definition of home as a single-family owner-occupied place of comfort and belonging, connected to family, safety, and security (65), neither of the homes fulfils these criteria. While Elvira's family house is owned by her family and symbolises their affluence and respectability, it soon becomes clear that it is not a safe space for the protagonist, which she, however, refuses to leave. The house is invaded by ghosts and might be a burial site. Its structure is uncertain and morphology unclear, as one can see the inside of one room from another, and after years of dousing in cyanide, it is potentially dangerous to inhabit. Later, it becomes a place of death and, possibly, murder, from which Elvira is neither temporally nor spatially removed. The flat which Marian shares with Ainsley is not a true home to her, either: not only is it permeable from the outside, with the landlady's frequent inspections and Ainsley's guests invading Marian's room, it is also remarkably temporary, since the implication is that the young women will soon marry and move to more permanent locations. This home does not suggest that the narrator has "achieved personal freedom, mental stability and ethical rightness" (Murphy 75). The haphazard collection of furniture, the wobbly household chores

schedule, and the unfair sharing of expenses are all characteristic of lopsided, interim arrangements of a transitional stage in the characters' lives.

Neither of the characters is an observer-narrator distanced from the plot, as both heroines actively participate in the stories they tell. Yet, they attempt to achieve illusionary distance through their narrative styles. As Marian begins to narrate the events in the third person, she endeavours to distance herself from her body, and thus from the situation. Elvira transforms the immediacy of her family tragedies into forms of art as she fashions her early journal entries like a Gothic ghost story, using an exaggeratedly verbose style, and sometimes imagines scenes of her family's life as paintings. These strategies are similar to the tactics of alienation from one's body employed by real anorectics, both in speech as they refer to their bodies in the second person (Warin 76) and in their obsessive reliance on numerical measures of calories, weight, and circumference as qualifiers of their success and self-worth.

Both narratives feature a sharp stylistic break, which also functions as a demarcation line between different stages of the narrators' personality development. Murphy writes about the unreliable narrator's potential to become reliable after a cathartic experience (81), which is present in both texts on the surface. Yet the nature of these personality changes in both protagonists is questionable.

In the journal entries following her father's death and her own recovery from anorexia, Elvira changes not only her views and values, but also her style, renouncing the bookish, flowery language she previously used. She shows more understanding for the motives and considerations of those around her, has a humbler view of her own abilities, and begins to act more in line with the expectations of normal teenager behaviour, which includes adopting a more age-appropriate manner of speech. This change is supposed to add her credibility and imbue the reader with a sense of security regarding the purity of her intentions. For example, Beyer reads Elvira's narrative as indicative of her being a victim rather than a perpetrator (83). However, other factors make the reader doubt Elvira's earnestness. Claiming to be removed from her illness and criticising her past behaviour and convictions, she nonetheless refuses to sell the family house despite Spinny's deteriorating mental health and repeated pleas to relocate, thus symbolically holding on to the marked place rendering her the status of dubious narrator. Furthermore, Elvira's memories of the anorexic period are still fuzzy, further putting under question the veracity of her account. To name a few examples,



she is not sure who placed a penknife in her pocket around the time Mary died and suspects it may have been her own doing (46), later changing her mind and blaming Spinny (76); her memories of the night of Luke's supposed suicide, when she had blood on her hands (57), are also quite fragmented. Ample factual clues hint to the culpability of either sister. The only factor tipping the scales is that, at the end of the novella, one of them has an active binge eating disorder and is presented as visibly disturbed, while the other claims to have successfully recovered from her anorexia and separated herself from her 'sick' identity. Elvira's transformation into a docile patient encourages the reader to assume she is a truthful narrator; yet, as I have argued earlier, conformity to master narratives does not necessarily imply truthfulness and authenticity.

Marian goes mad and suddenly switches to third-person narration in the second part of the novel. Even though her self-destructive behaviour and dissociation from her body make the reader doubt her perspective, and in contrast to the anorexic phase portrayed as a period of delusion in memoirs of eating disorder sufferers, it is after the onset of Marian's disorder that she begins to realise important truths about her engagement and the society she lives in.

Having characterised herself as "stolid" (11) at the beginning of the novel, she now feels out of touch with her own body. She struggles to see the boundaries between herself and the world around, exemplified in her lack of bodily awareness while handling food: the vocabulary used in the salad preparation scene suggests that Marian does not recognise where her skin ends and the vegetables begin (Patterson). She also needs to rely on explicit labels to distinguish the foods she is buying while at the supermarket (Patterson), indicating an absence of an identity with pre-existing knowledge about the world. From having a self under threat of consumption by Peter, she regresses to having no identity whatsoever. While her behaviour is a response to a life crisis, this strategy can also be read as a proposed solution to the dominance of masculine individualism she sees in the modern society. As she distances herself from the 'I', Marian merges with the surroundings, probing and grasping other perspectives. Echoing the sentiment voiced by Virginia Woolf in *A Room of One's Own*, she rejects "the dominance of the letter 'I' and the aridity which, like the giant beech tree, it casts within its shade" (*A Room of One's Own* 108). Instead, Marian is now a 'she', both defining herself as primarily a woman and refusing to accept male egocentricity. She

realises that any attempt of hers to develop an 'I'-identity will only result in appropriating one patriarchal definition of herself or another. This can be seen in her aversion to cameras and mirrors, both of which try to confine her within an external image created by male. In Marks's words, "photography implies an intrusion into one's privacy, delivering a part of the self to the world in a representation that is beyond the control of the person photographed" (113). This is exactly what Peter does, attempting to turn Marian into a picture of herself, both flattening her and reducing her to her looks. It is the new-found fluidity of her identity which alerts her to it fully. The 'she'-identity, free from reservations of decorum and the perceived need to be reasonable, makes her more sensitive to the outside world, making her an observer and an omniscient narrator who is capable of seeing the future and the thoughts of the people around her. Yet Marian's story seems unbelievable and confusing, as it does not fit into masculine conventions of narrative. Ironically, her switch to 'she' shows the universality of her experience, turning her into *Jedefrau* – an embodiment of many women whose fears were not heeded even by themselves, by the 'I' usurping their inner world. Thus, for Marian, the experience of the disease erasing her subjectivity and rupturing her life, with subsequent slipping into insanity, actually becomes enlightening and motivates her to question the principles and values she had had prior to developing anorexia.

Whereas recuperation is usually considered a major break both in anorexia narratives and in narratives featuring shifts from madness to sanity, with the narrator's enlightenment being a turning point in how she sees the world, it is an afterthought in *The Edible Woman*. As Marian recovers from her eating disorder and begins to speak about herself in the first person again in Part Three, she acknowledges the latter change matter-of-factly, trivialising her dissociative experience, although she does admit that managing to eat steak was "miraculous" (280) to her. There is no reflection on the part of the character following her recovery and ending of her engagement. Even though her realisation of Peter's abusive nature seems to have been the crucial epiphany leading to her recovery, she lets Duncan question her point of view, and even begins to doubt it herself for a moment, showing her own lack of clear understanding of the situation. The novel's open ending lets the reader decide whose side they are on, with Marian still grasping the significance of her anorexic and dissociative episode and its consequences.

As Hasnain notes, the employment of 'mad' and unreliable narrative by women characters is a double-edged sword. On the one hand, it allows them to break away from the patriarchal conventions and create their own space in literature, where they are not obligated to narrate in the conventions of the dominant class. On the other hand, it serves the Othering of women and further labels them as untrustworthy and lying (71). This is true for both characters of the works analysed. Neither of the texts has a clearly defined villain and victim, opening instead possibilities of multiple interpretations precisely due to the narrators' disease and status of the unreliable narrator. Marian's suspicions about Peter's true nature and her fears regarding losing her identity as a married woman are, it seems, intentionally underplayed by her haphazard and distraught style of narration. Far from being a coherent argument, they are tangled in a web of innuendoes, visions, and symbols. The effect this achieves is reminiscent of the intangible nature of intuitive fears women often sense in situations where their perceptions are being discounted. So does Elvira's narrative raise the question of trust we as a society place in the testimonies of the disenfranchised, and the hurdles 'mad' narrators in fiction and reality have to overcome for their voices to be heard.

## 6. CONCLUSION

The analysis of the texts has shown that anorexia nervosa in both heroines has social and psychological causes, and is to a great extent rooted in gender inequality. Marian and Elvira are young women living in misogynistic environments which are undergoing a slow transition towards increased equality. The general impact of their surroundings and upbringing greatly compounds their current personal challenges of coming of age, dealing with grief, and making career-related and marital decisions. Both of them perceive a lack of agency and feel unfit to navigate them. While they recall not having led fulfilling lives prior to these struggles, they also find adapting to the new circumstances difficult, developing disordered eating patterns as a dysfunctional response to the changes.

A pronounced lack of positive role models of femininity is salient in both texts. Even the women who are aware of the structural inequality to some degree, and make attempts at emancipation, such as Ainsley or Mary, face a miserable fate of either having to conform to the demands of the patriarchal society in the end, or losing their

agency and, in Mary's case, even life. Whereas increased opportunities for women are present on paper, they are often, in fact, fictitious. In male characters, predatory traits are often disguised as romantic, friendly feelings, or concern for the women's wellbeing, causing distrust and anguish in the main characters. While the female heroines recall no memories of sexual assault as an underlying cause for their eating disorder, they both live in worlds which are fundamentally unsafe for women, with harassment and objectification being real and unsettling threats for each of them.

Both heroines experience internalised misogyny as a form of misplaced blame for their unfortunate circumstances. The language they employ while describing their women associates and female corporeality implies a reductive view of women as mere child-bearers, inferior to men in their biology and intellect, and more akin to livestock and plants than humans. Elvira admits to despising her own body for its ability to menstruate, openly stating her abhorrence at this process, which later reverberates in her conflating women's sexuality with murderousness. Marian experiences her body as estranged during a number of scenes, especially when confronted with her own strong emotions, sexual desire, or hormone-related conditions such as skin changes.

The fear of womanhood sensed by both heroines is manifest in their use of monstrous, abject metaphors and epithets while describing such states of women's bodies as menstruation and pregnancy, as well as in some of their phobias regarding particular foods. They both feel strongly sceptical about the changing values of the world around them, feeling lost at the prospect of becoming independent and detaching from their upbringing and, in Elvira's case, family of origin, yet slowly realising that continued conformity to the old, male-centric paradigm will ultimately bring about their demise and complete loss of agency.

The claims that patients with anorexia crave attention prove to be unfounded in both cases, as the heroines are secretive about their respective conditions. Nor is their disordered eating a rebellion, aimed at achieving social change or publicly problematizing the unfair treatment of women. Anorexia is their dysfunctional way of somaticizing the repressed feelings of confusion, anxiety, fear, repulsion, and grief. Their conditions begin as an ill-advised escape from the societal and familial constraints, and end up being a cage in themselves.

The antagonists' illnesses are manifest on the textual level both in *Heartstones* and in *The Edible Woman*: breaks, switches between first- and third-person narration and

conversational and elevated style underscore the estrangement people with anorexia feel from their bodies. Moreover, these changes, along with other markers, classify both of these characters – who are, simultaneously, narrators – as unreliable. The employment of this narration mode reflects the baffling complexity of experiencing mental illness and the confusion women feel in the patriarchal society, as their valid concerns are discounted instead of being addressed, and contradictory expectations are imposed upon them. Furthermore, it is used to raise the issue of female mental health sufferers' credibility and continued stigma in *Heartstones*, and propose abandoning individualism as a possible solution to the oppression of women in *The Edible Woman*.

With misconceptions about women who suffer from eating disorders still proliferating in popular and professional discourses even despite heightened visibility of these problems, re-reading their accounts through a feminist lens is of paramount importance. Mental illness, and anorexia nervosa in particular, continues to be romanticised as rebellion or stigmatised as a disease caused by excessive vanity, self-centredness, and need for attention. While its beginning is often innocuous, anorexia is not a fad diet. Neither is it a hunger strike, although its origins are rooted in structural inequality and oppression by the patriarchy. It is a misguided attempt to gain control for those robbed of their subjectivity; yet, the common response to it usually includes only further oppressing the anorectic with distrust, accusations of moral deficiency, and forced treatment. It is my hope that researching and writing on these issues may aid in lifting the fog surrounding them, and make room for the voices of those whose testimonies we, as a culture, have been so carefully ignoring.

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# ABSTRACT

## English

The present thesis deals with the representation of women with anorexia nervosa in two fictional texts: *Heartstones* by Ruth Rendell and *The Edible Woman* by Margaret Atwood. Firstly, the role of the Western culture's views on the body, health, and beauty ideals, as well as societal expectations placed on women and gender socialisation in the main characters' development of anorexia is examined using close reading, narrative analysis, feminist and psychoanalytic approaches. Furthermore, I explore the relationship between the heroines' mental illness and their narrative style of the texts. I conclude that the main characters' eating disorders are a direct result of the misogynistic environments they live in, manifest in the lack of choices and positive female role models presented to them. Their narration styles reflect the societal distrust towards, and stigma against, people with mental disorders, all the while offering insight into the traumatic and disempowering experience of mental illness.

## Deutsch

Die vorliegende Arbeit beschäftigt sich mit der Darstellung von Frauen mit Anorexia nervosa in zwei literarischen Texten: *Heartstones* von Ruth Rendell und *The Edible Woman* von Margaret Atwood. Zunächst wird die Rolle der Ansichten der westlichen Kultur über Körper, Gesundheit und Schönheitsideale sowie der gesellschaftlichen Erwartungen an Frauen und der geschlechtsspezifischen Sozialisation bei der Entwicklung der Magersucht der Hauptfiguren durch "close reading", Narrativanalyse, feministische und psychoanalytische Ansätze untersucht. Darüber hinaus erforsche ich die Beziehung zwischen der psychischen Erkrankung der Protagonistinnen und ihrem narrativen Stil in den Texten. Ich komme zu dem Ergebnis, dass die

Essstörungen der Protagonistinnen eine direkte Folge des frauenfeindlichen Umfelds sind, in dem sie leben und das sich in einem Mangel an Wahlmöglichkeiten und positiven weiblichen Vorbildern manifestiert, die ihnen präsentiert werden. Ihr narrativer Stil spiegelt das gesellschaftliche Misstrauen gegenüber und die Stigmatisierung von Menschen mit psychischen Störungen wider und bietet gleichzeitig einen Einblick in die traumatischen und entmachtenden Erfahrungen von psychischen Erkrankungen.