

**From Eating Disorders to Plastic Surgery:  
Society's Pressure to be "Ideal"**

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Synthesis Paper**

*“What an extraordinary sensation: anorexia, the most profound form of antagonism toward body and self, experienced as pride.”*

*– Caroline Knapp*

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All through time, society has put unspoken pressure on women to look a certain way, to be ideal, and women have consistently conformed to these “ideals”, going great lengths to achieve them. As uncomfortable as they may have been, fashions in the past such as corsets have made women skinnier than they were anatomically created. During the Renaissance, it was “unfashionable” for women to have anything but “silvery-blond hair”. In the 1950s, the Flapper was the ideal woman, and most other females wanted to look like her. More recently, models and beauty pageant contestants have become what our society considers “ideal” and they are what most women compare themselves to when they look in the mirror. The average weight of a model or beauty pageant contestant has dropped 25% below the average woman in the past 25 years. A mannequin in the window of a department store used to wear size 8 clothes, and now they are a size 2 (Knapp 30). Losing weight has become an obsession with many women; a thirst that will not be quenched until they can look like their idols. The pressure from society to be thin has pushed people so far as cosmetic plastic surgery, over-exercising, and resorting to eating disorders to be the way culture says they should be.

Women are constantly finding new ways to lose weight: exercising, dieting, starvation, purging, and surgery are just a few of the ways. Eating disorders such as Anorexia nervosa and Bulimia nervosa have to do with a “preoccupation with the control of body weight” (Bulimia Nervosa). William Gull coined the term “Anorexia nervosa” in 1873. He originally had named the disease “Apepsia hysterica (digestive problems of hysterical origin)” (MacSween 13). In Anorexic Bodies, MacSween quotes William Gull saying, “The want of appetite is due to a

morbid mental state... a want of mental equilibrium” (13). Bulimia is not the actual act of throwing up, it the act of bingeing, and the purging is separate. The bulimic doesn't have to be hungry to binge: “it is a compulsion, an addiction; a lust for food” (106). After bingeing the bulimic is so ashamed, and ends up purging, getting rid of what made them feel shameful. Bulimia is food controlling you; anorexia is you controlling the food. This is what anorexics feel is the main difference between the two.

“Up until the 1960s, anorexia and bulimia were still considered rare diseases,” notes MacSween (16). In a recent survey 30,000 women said that losing weight was a goal they wanted to obtain above any other goal that they had (Knapp 16). Women have focused their energy on losing weight, more in the past 40 years or so than any other time, because just recently they have had pop icons such as Cher, Madonna, and Britney Spears to look up to. Although women have not always been thin, per say, idols such as Marilyn Monroe, who was very curvaceous, have always been someone to aspire to be like. In her book, Appetites, Knapp states that one of the misconceptions of anorexia is that women who suffer from it actually believe that they are fat. She also says, “I knew I was stripped down, spare, angular, I knew I had pared away those bulges and curves, I knew I was winning the war, which was precisely how daily life felt, like a state of siege” (86).

Author Morag MacSween is a feminist and a sociologist. In her book Anorexic Bodies, she talks about four different aspects and explanations for anorexia and bulimia: biological, feminist, psychological, and social. She believes that there is always more than one side to a story, and she ventures to find it in this book. In her biological explanation of anorexia nervosa, she states that there are two stages (or feelings), which she borrows from scholars who are knowledgeable in the area of anorexia and bulimia. Stage 1 is that food is the only constant in

life. It is the only thing that can be controlled, as a person would like it to be controlled. Stage 2 is that starvation changes the way people think and because of that, the ability to “engage in complex thinking is progressively diminished” (35). Anorexics have a harder time than “normal” people being involved in a deep conversation, or answering questions, or anything to that liking.

In her feminist explanation of anorexia and bulimia, she borrows ideas from other psychologists and adapts them to her viewpoints, giving explanations for certain beliefs that these scientists and medical practitioners have. She believes that the reason women have eating disorders is “based on a women’s position in a patriarchal culture” (52). Women are expected to act a certain way, talk a certain way, play specific roles, or take specific jobs. They aren’t supposed to take the high-end jobs, and so women feel that they need to look a certain way to move up in the world. She quotes Kim Chernin saying that anorexia is the “hidden struggle for self development” (54). She believes that women replace freedom and their control over their own lives with an obsession with food. When women don’t want to deal with life itself, and they want someone to make their choices for them, they turn to this obsession to get them out of their uncomfortable situations.

Another theory that MacSween has, is that teenage girls use anorexia as a way to separate from their mothers, yet they are afraid to “outdo” their mother, and therefore they feel guilt if they do (56). This guilt is most probably linked to the fact that they feel that if they outdo their mother, than the mother might resent the daughter, and therefore not talk to her. The girl only wants to separate from her mother for a short while, and eventually would like to be friends with her mother again. If she outdoes her mother, then her mother might resent that, and not want to talk to her in the future.

Again, in her psychological explanation of anorexia and bulimia, she criticizes other experts in the field to make her point. She takes from Crisp, "... a distorted biological solution to an existential problem for an adolescent" (27). Girls feel that they look different on the outside than they actually do, and therefore seek to alter their image, and in the process end up hurting themselves. By changing their internal features, they feel as if that will also change their outer features. She doesn't agree with him that anorexia is a "phobic avoidance stance". It is the control of *weight* and *shape* that is central to their disease, not *eating* or *food*. They aren't obsessed with food and eating, they are obsessed with how they look on the outside, and if altering how their body is externally means changing their consumption of food, and not eating, then they are willing to do that to achieve what they believe is the "ideal".

MacSween quotes Crisp saying that the anorexic could have "major psychological developmental defects and an absence of other defense mechanisms". She could also have low self-esteem, she could be shy, or she could even be sexually insecure (30). This, she agrees with. These are just a few of the explanations for anorexia and bulimia. There are many more explanations, but these are the most prevalent. Low self-esteem could definitely lead to anorexia, because they might think that the reason they aren't "popular" or "pretty" is because of their bodyweight, and then they might seek to change that aspect of their life. "The anorexic" is referred to as a female, because the majority of anorexics are female adolescents and young adults. Eating disorders are the third most common chronic illness among females in the United States says Knapp in her book, Appetites (23).

MacSween has a social explanation for anorexia and bulimia too. She says, "the anorexic girl feels obligated to respond in a way that is generally considered socially desirable for males and females"(35). They feel like they are having a hard time keeping up with the obligations of

social life such as assertiveness, independence, intellectual “prowess”, and productivity while still following the “traditional female roles” such as passivity, dependence, helplessness, and being decorative (35). These social “roles” are what cause problems in society such as eating disorders. Women feel that they need to be everything at once, and it’s not okay to make mistakes or to not be “the typical female” at any time. They don’t understand that it’s okay to not be perfect, and its okay to not be socially acceptable at all times. Anorexics don’t like to eat at other people’s houses because it is “socially acceptable” to eat more than one course when you are at other people’s houses. They are afraid that they will let on that they have this “problem”, only they don’t believe that it is a problem. They always try their best to hide the disease, and so eating at other people’s houses is a very risky experience for them.

Most females who become anorexic KNOW the consequences and complications that it can cause in a person not just medically, but nutritionally and psychologically as well. They still decide that it is the best option for them, even though they understand what can go wrong, and what can happen. They are well read in the disease, but they choose to ignore the information that they have been given. In Steven Emmett’s book, Theory and Treatment of Anorexia Nervosa and Bulimia, he discusses some of the medical complications, nutritional aspects, and psychological problems that can be caused by eating disorders. Medically, there can be dental erosion from the gastric acid produced in purging, hormonal concentrations can be increased or decreased, there can be fluid and electrolyte complications as well as gastrointestinal, cardiovascular, hematological, immunologic, and dental complications (Emmett 5-6, 9, 11, 13, 15). With cardiovascular complications, there is a decreased max heart rate with exercise and decreased muscle mass on the skeleton (12).

As well as medical complications, there are also nutritional aspects of Anorexia nervosa and Bulimia to consider. The main nutritional point is that the refusal to eat is directly going against the anorexics appetite (20). Humans were given an appetite to tell them when they are hungry so that they can feed the body, and give it sustenance. To go against the pleas of the human body means that there is something wrong. In Theory and Treatment, Emmett says that Bulimia is actually a different form of Anorexia nervosa. He backs this up with the fact that Bulimia occurs in up to half of the patients who also suffer from Anorexia nervosa (21). There are other experts who argue that anorexia and bulimia are completely different diseases, and they stem from completely different psychological problems. Some of the symptoms which might occur in an anorexic are vomiting, laxative abuse, and diuretic abuse (all of which are more common in bulimics), as well as the loss of unusual amounts of weight. Bulimics abuse laxatives and diuretics because they are another way of purging and getting rid of whatever they consumed. "Unusual" amounts of weight are usually considered to be 25% or more. When weight loss nears 40-50% or 70lbs. the anorexic most probably won't survive, and "tube feeding or parenteral nutrition is required"(23, 24).

There are psychological effects of starvation and bingeing and purging and it could take several months before these thoughts decrease and eventually subside (28, 29). Although the anorexic remains as smart as they ever were, they tend to become obsessed with food. This obsession with food takes over their life, and they spend less and less time gaining knowledge from outside sources. They stop living, and just obsess. All that they know is food. In the conclusion of his book, Emmett says, "Women tend to live outside their bodies, judging them, evaluating them, looking at themselves to see whether they can mirror the received images of femininity" (131). He continues on to discuss how society sends images to women of how they

“should” look, and they tend to want to make themselves like these images that are being sent to them. The media presents this generation’s “ideal” in magazines, on TV, in the movies, on the computer, everywhere.

Interviews with college and high school students both backed up the fact that there is pressure from society to be a certain way, and people are succumbing to that pressure. When asked what she thought about society’s role in eating disorders, Becky, a student at Keene State College, states, “... there’s a pressure for it [but] do I think people need to be thin? No.” She also believes that women *do* feel that they have to resort to drastic measures, just to become the “ideal”. Another Keene State college student, Matt, says that there is definitely pressure, but he doesn’t think that anyone has to resort to those measures. He feels that people who do feel they have to fit this mold are dumb. Interestingly enough, in an interview with a high school male, his response is different than the college students. He says, “Well, I believe that society does hold specific guidelines, but eating disorders are for ‘wussys’. I think that girls are [deeper] than guys, so there is less of a need for a guy to fit [a] mold.” After questioning him further, he believes that men have a personality mold to fit, but not a physical mold. After high school, there is more competition between men, and therefore there is more pressure for men after high school. Professional baseball players take steroids to make themselves play better, men go to the gym to get stronger and be more “buff”, more and more men are becoming obsessed with fashion and their hair. Some men spend more time on their hair in the morning than a lot of women do.

Another problem that has become prevalent in society is an overuse of plastic surgery. More and more people are using it to make themselves perfect, and in some cases it goes wrong, and they are permanently scarred for life, taking them even further from the ideal that they were

seeking. On Maury Povich, a TV show, women go on and talk about the fact that they were disfigured by plastic surgery and it can never be reversed. Other women go on the show and talk about how they have already had 49 procedures and they aren't done yet. They say that they will keep going until they believe that they're perfect. There is one woman on the show who had over 10 breast augmentations and now she has a "GG" bra size. In 1999 alone, 140,000 more women in North America had breast augmentation than in 1992 (413% more than 1992). In addition to that, 381% more women had breast lifts, 139% more had eyelid surgery, 227% more had tummy tucks, 171% more had chemical peels, and 389% more had liposuction (Knapp 100). Cosmetic plastic surgery has grown considerably in the past 20 –30 years or so, becoming not so much of a novelty, as a commonplace procedure.

Reality TV shows such as "*The Swan*" seem to be a good idea on the outside, portraying the "patient" in the best light possible and giving the procedures more light, informing people of the complications and the effects. However, they do promote expectations of unrealistic proportions, only casting people who have the qualities that make for a good cosmetic plastic surgery patient. While this show, as well as others like it, is good for informing the public, they cannot be good for a person's morale. They take the contestant, tell them that they are ugly, but they can fix them, change them and make them 'beautiful', counsel them psychologically, and then at the end have a beauty contest like in "*The Swan*", where they tell all but one girl that she still isn't pretty enough. It first lifts the contestant's morale up, and then makes them come crashing back down to earth. It is difficult enough for the patients to deal with a single procedure, but when they have more than one procedure, it can have severe psychological effects.

*"I Want a Famous Face"* on MTV is a TV show that borders on hype, and really shows the "freaky side of medicine". In an interview with journalist Amanda Gardner, Dr. Darrick Antell, a New York plastic surgeon, states, "Good plastic surgery should not be extreme and it should not scream. It should whisper" (Gardner). "The programs – Fox's "The Swan," ABC's "Extreme Makeover" and MTV's "I Want a Famous Face" – go beyond reinforcing the idea that how you look is more important than what and who you are," says Randall Flanery Ph.D ("The Swan"). Flanery specializes in treating patients with eating disorders. He also states that he fears that these programs "will induce feelings of 'self-loathing' by some people who think their faces and bodies will never be good enough" ("The Swan"). These shows give to their viewers, a lot of the times families, a view of how pop culture has influenced the way people feel about themselves, and what they are willing to do to change what they don't like.

A lot of people like to exercise because it makes them feel good about themselves, and it gives them more self-esteem than some of their less active counterparts. However, too much of a good thing, can be bad. Over-exercising is just another way for the human to get rid of all their guilt and pain, a form of purging. Over-exercising is linked to eating disorders such as anorexia and bulimia. A lot of the time they use it as a form of punishment, because they ate more than the calories that they allotted themselves for the day. It becomes an addiction for the person, just like their eating disorder. Any given person who has an eating disorder **and** is addicted to exercise is in extreme danger "for developing medical problems"(Compulsive Exercising). According to an article in Daily Bruin, the Student Nutrition Awareness Campaign Web site says that 75 percent of college-age women and 43 percent of college-men are dissatisfied with their bodies. Some of those men and women feel that pressures from society added to this

dissatisfaction may be “just enough to push someone over the edge” (Chou). Most over-exercising is done in secret and “away from prying eyes” (Pale Reflections).

In someone who over-exercises, dehydration can occur if they aren't drinking enough liquids. Other dangers that over-exercisers are susceptible to are skeletal and muscular problems, shin splints, cartilage and ligament damage, and a higher chance of fracturing bones (Pale Reflections). Too much exercising can slow down the metabolism and actually do the opposite of what anyone trying to tone up or trim down is trying to do (Stedman). In women, the effects of over-exercise and a reduction in food intake can lead to “amenorrhea”, which is having less than three periods a year. This will eventually lead to a rapid loss in bone density, which can lead to osteoporosis. Over-exercising can also lead to odd sleep patterns, inability to concentrate, depression, minimized thyroid activity, irritability, and a “depressed immune system” (Stedman).

Television shows, magazines, movies, brochures, Internet advertisements and many other forms of visual communication focus on the thin, “perfect”, “beautiful” women in their promotions. Internet advertisements for dating or personal sites show only the thin girls in their pop-up ads. Brochures for travel resorts show beautiful women in tiny bathing suits on their cover, advertising relaxation and comfort. Female movie stars tend to be thin and pretty, while male movie stars tend to be handsome and buff, making it seem like people in everyday life should look like that too. In magazine advertisements, women are “perfect” or “ideal” and seem to make other women feel as if they want to, or should, look like them. In such reality television shows as “The Swan” and “Extreme Makeover”, women and men strive to look like something or someone they're not. They want to be thin and pretty, and they want to fit in. People shouldn't have to strive to be something that they're not in order to fit in. These are just a few

examples of how society and pop-culture have influenced the lives of people throughout time and have put pressure on men and women (especially) to be a certain way, to be “ideal”.

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