

"There is No Fat in Heaven": Religious Asceticism and the Meaning of Anorexia Nervosa



Caroline Giles Banks

Ethos, Vol. 24, No. 1 (Mar., 1996), 107-135.

Stable URL:

<http://links.jstor.org/sici?sici=0091-2131%28199603%2924%3A1%3C107%3A%22INFIH%3E2.0.CO%3B2-N>

Ethos is currently published by American Anthropological Association.

Your use of the JSTOR archive indicates your acceptance of JSTOR's Terms and Conditions of Use, available at <http://www.jstor.org/about/terms.html>. JSTOR's Terms and Conditions of Use provides, in part, that unless you have obtained prior permission, you may not download an entire issue of a journal or multiple copies of articles, and you may use content in the JSTOR archive only for your personal, non-commercial use.

Please contact the publisher regarding any further use of this work. Publisher contact information may be obtained at <http://www.jstor.org/journals/anthro.html>.

Each copy of any part of a JSTOR transmission must contain the same copyright notice that appears on the screen or printed page of such transmission.

JSTOR is an independent not-for-profit organization dedicated to creating and preserving a digital archive of scholarly journals. For more information regarding JSTOR, please contact jstor-info@jstor.org.

“There Is No Fat in Heaven”: Religious Asceticism and the Meaning of Anorexia Nervosa

CAROLINE GILES BANKS

Psychologists, psychiatrists, and psychoanalysts who have worked with contemporary women with anorexia nervosa have commented on their asceticism, meaning their self-denial, asexuality, heightened morality and idealism, and rejection of bodily death (Bemporad and Ratey 1985; Bruch 1978; Mogul 1980; Palazzoli 1974; Rampling 1985; Sabom 1985). While acknowledging an association between asceticism and anorexia nervosa, these researchers and clinicians have little to say about the cultural dimensions of anorectic asceticism. Their works, generally more psychological than anthropological in orientation, have not addressed the cultural symbols, idioms, and language through which the extreme asceticism, self-denial, and moral superiority of anorectics is subjectively expressed or encoded. This article, in asking through which cultural symbols the anorectic experiences and expresses her asceticism, intends to contribute to cultural studies on the phenomenology of the body (Bordo 1993; Csordas 1994a, 1994b) and to present a first step in building a psychological-cultural theory of asceticism.

This article presents a case study of an American woman, Margaret C.¹ It examines how Margaret expresses her self-starvation and bodily asceticism through the religious symbols and beliefs of her Christian fundamentalist background. Moreover, in analyzing Margaret's expressive language as well as her associations to two of her drawings, the article points to some of the motives that underlie her decision to control her body in such a severe manner. While the anorectic may not be aware of the motives for her self-starvation, nevertheless she gives meaning to her thinness and uses culture to do so (Swartz 1985). Through the case of Margaret C. I examine how some contemporary anorectics, namely those who come from conservative religious backgrounds, use concepts of the body and food and notions of asceticism that are a part of their religious tradition to give conscious meaning and expression to these underlying motives.²

The case of Margaret C. is evaluated and understood in the context of recent studies by historians and others that demonstrate associations between religious asceticism and voluntary starvation by women during the early Christian and medieval periods (Bell 1985; Brown 1988; Brumberg 1988; Bynum 1987; Lester 1995). Margaret's story points to continuities well into the 20th century of these longstanding associations between self-starvation and religiosity for women.

In considering the relations between systems of belief and subjective expressions of self-starvation, the case presented here, one of a larger study that includes other religious anorectics in the United States, intends to further our understanding of the psychological functions of religion and asceticism—subjects of longstanding interest to psychological anthropologists and psychoanalysts (A. Freud 1966[1937]; La Barre 1970, 1991; Menninger 1938; Obeyesekere 1981, 1990; Roheim 1971[1943]; Spiro 1965, 1987a, 1987b). And as Crapanzano (1980), Obeyesekere (1990), and others have noted, it is through case studies that the relations between culture as a symbolic meaning system and individual motivation can be further demonstrated and validated.

MARGARET C.

Upon our first meeting in the spring of 1986, Margaret told her life story as a "Christian miracle." Margaret was treated for anorexia

for several months in 1985 in a major hospital located in the upper Midwest. She was not expected to live. In her view, her recovery from near-death is "a miracle." Margaret believes that it is because of her "great faith" and "the prayers of her Christian family and many friends" that she survived. Margaret considers herself a "living Christian miracle" because some of the women with whom she was hospitalized died. She attributes their deaths to the fact that they were "not real Christians." Margaret spoke to me of one girl who died while she and Margaret were in the hospital. This woman "had no friends, no one praying for her, no church affiliation."

Margaret C. is a woman with chronic anorexia nervosa. In her mid-to-late fifties at the time of my work with her between 1986 and 1993, she has been anorectic since high school. Her condition is an integral part of her self-concept and lifestyle. She does not see her self-starvation as a disease but rather as her self-identity. Margaret is a lifelong member of the Covenant church, a conservative form of Protestant fundamentalism. In the Covenant church gender and family roles are highly differentiated and authoritarian, sexuality and drives are controlled by a strong antisexual morality, and members believe in the inerrancy and literalness of the Bible. Here I investigate Margaret's religious beliefs about food, the body, sex, and death in the subjective meaning and experience of her self-starvation.

MARGARET'S BIOGRAPHY

Margaret was born and raised in a large metropolitan city in the upper Midwest. Her father, now in his nineties, retired in the 1960s from a career with the railroad. Margaret's mother, a housewife who did not work outside of the home, died in the late 1980s. Margaret, a middle child, has an older sister who is married and lives with her family in another state, and a brother, three years younger than Margaret, who lives with his wife and children in the same city as Margaret and her father.

After graduating from a church-affiliated college and obtaining her teaching certificate, Margaret taught elementary school for approximately ten years until she was forced to "retire," apparently because of her anorexia. She then taught piano lessons privately for a number of years. Margaret is vague about how she presently supports herself, but it is apparent from our conversations that she receives a small pension from the school district in which she taught

and depends on her father for financial support. Margaret has never married and lives alone.

Margaret is evasive about her chronological age. She has never given me a direct answer—"somewhere this side of fifty and over forty"—when asked her age. I place her birth year as 1937 from dates on family photos.

Margaret sees herself as a young teenager or prepubescent girl of ten. I asked Margaret to draw a picture of herself (Figure 1). When I asked Margaret how old she is in the drawing, she replied, "I don't know. Indeterminate age . . . I don't know. I could be an adult and I could be a teenager. When I was a teenager I looked cute, really sharp." On another occasion Margaret said, "At heart I am a ten-year-old." Her appearance, her home (decorated with her childhood furniture and dozens of stuffed animals and dolls), and her mannerisms tend to support this self-assessment.

Virginity and purity, prominent features of Margaret's self-image in adolescence, characterize her self-image today. Margaret puts her asexuality in religious terms. She says she is "a Christian, moral, upright person," and it "would never occur to me to be with a man." Moreover, Margaret is fully aware that her extreme emaciation, while drawing the attention of others, is a deterrent against sexual advances by men and therefore serves to preserve her purity. Margaret's views on sex support clinical reports that sexual purity and abstinence are distinctive characteristics of anorexia nervosa (Bourke et al. 1985; Gordon et al. 1989; Rampling 1985; Woodman 1980).

Margaret paints a picture of a "perfect" childhood with no friction between herself and her two siblings.

Oh, I had the most wonderful childhood that anybody could ever have. It was absolutely, ummmm, what you would call perfect. Our family, we did so many things together, we always got along, and we did things, we took trips. . . . I remember we always had fun together, all of us. Our whole family, we always had a lot of fun.

Margaret's description of her parents is highly idealized.

Dad was always the authoritarian in our family, he was an old-fashioned father You know how a person can be very authoritative just in the way they say things. You just obey. Although they're not harsh, they're not mean, they're very loving, they're very kind, but you do it or else, you know. . . . He was a wonderful, wonderful Christian person all his life and he read the Bible to us and he did our Sunday School lessons with us every Saturday night. When we went to Sunday School every Sunday we all had perfect attendance records for, like, ten years.



Figure 1. Margaret C.'s drawing of herself.

Margaret portrays her mother as the perfect housewife.

My mother never worked. We had the most typical, all-American family that you could ever imagine. My mother was home all the time and when we came home from school she was there with the cookies and milk. . . . We had the most marvelous family life that it was almost unreal.

When Margaret was young, her mother was a recipe tester for the product development division of a major food company. This was a paid position and involved trying out certain recipes at home on one's family, noting their likes and dislikes, and reporting the results weekly to the company. According to Margaret:

It's a real honor to be chosen to do it. You have to be a very, very excellent cook and a typical housewife. You have to have a family of a certain amount [size] and a certain class. . . . Our family was even written up in a magazine a couple times because my mother tested recipes for [the company]. . . . The picture is the all-American family.

Yet Margaret described her mother as harsh.

She was sort of, I don't know, we really couldn't get around her either. I remember at the lake she'd punish us. She'd take those little willow sticks and whip our legs with them. Little, sharp, I remember her doing that, not very often. But my mother was so much fun, too. We had so much fun.

Fundamentalist family values, as expressed in religious tracts and other publications on the Christian family and child rearing, place a strong emphasis on authority, submission, conventionalism, control, and discipline. Wife and children are expected to submit to the authority of husband and father (MacArthur 1982). The husband is viewed as the head of the family, as Christ is viewed as head of the church. Divorce and working outside of the home are discouraged for women: women should be homemakers and mothers, not breadwinners (Dobson 1982). Child rearing should teach "respect for parents," and popular fundamentalist literature on the subject advocates use of physical punishment, the infliction of "minor pain" (Dobson 1970).

As we noted, sex roles are rigidly dichotomized in fundamentalist families (Balmer 1994). How this was accomplished for Margaret's family is revealed in some of her old family photos. When she was young, Margaret's family would have "parties" with other families from church. At these "parties" the children would frequently cross-dress. Margaret showed me photos of these "dress-up" parties "where the girls dressed up like boys and the boys like girls." At one of these parties her younger brother was "dressed up like a girl in a necklace and a little plaid dress." The boys had big bows in their hair. Margaret wore knickers.

I view these dress-up parties as examples of rituals of reversal in contemporary fundamentalist culture (Gluckman 1965; V. Turner

1969). The children were allowed to temporarily reverse gender roles through cross-dressing in a "party" atmosphere. The parties functioned, however, to dichotomize and strengthen traditional gender roles; presumably the children would not be permitted to cross-dress or assume other dimensions of the opposite gender on nonparty occasions.

Fundamentalist ideology encourages an unyielding focus on the family. I asked Margaret to draw a picture of "a family" (Figure 2). Without hesitation she drew a picture of herself with her parents



Figure 2. Margaret C.'s drawing of her family.

and two siblings when she was a girl. The setting is their summer cabin. Margaret drew five figures “sitting around the table by the water up at the cabin.” When asked to identify the various figures in the drawing, Margaret was hesitant about which of the two adult figures (placed at the two ends of the table) was her mother and which her father. The figure she says is her mother (on the left) “is sort of bigger,” although in reality her father is physically larger than her mother was. In her drawing Margaret’s mother is portrayed as the dominating and larger figure. This suggests that her mother played—and continues to play, even though deceased—a more significant part in her emotional and family life than her father. This confirms numerous studies that implicate mothers in particular in the genesis of anorexogenic families (Bruch 1973; Chernin 1985; Palazzoli 1974; Spignesi 1983).

In her drawing of a family two children sit on one side of the table; one opposes them on the other side. When discussing her drawing with me, Margaret could not distinguish between herself and her two siblings.

I don’t know. It would just always be, I didn’t have any idea where we were. But I assumed since there were five of us, two had to be on one side and one on the other. . . . I don’t know. I have no idea. I don’t remember anything like that. I don’t remember getting along or not getting along. I just remember the family as a unit.

Minuchin et al. (1978) propose that family enmeshment—meaning overlapping identities—is a characteristic of anorexogenic families. Margaret’s enmeshment in her family seems almost complete: she views her family “as a unit,” with individual identities blurred and indistinguishable. This continuing enmeshment of Margaret in her family system—to the extent that there are overlapping identities and lack of separation—is expressed by her in terms of the family’s shared Christian moral and religious values, that is, in terms of their being a good “Christian family.”

MARGARET’S ANOREXIA

Margaret’s self-starvation is chronic and severe. She exhibits all the signs and symptoms of anorexia nervosa listed in DSM-IV (American Psychiatric Association 1994): individual weighs less than 85 percent of the weight considered normal for that person’s age and height (Criterion A); intense fear of gaining weight or

becoming fat (Criterion B); distortion in the way body weight and shape is expressed (Criterion C); and in postmenarcheal females, amenorrhea (Criterion D).

Margaret says her anorexia started sometime in high school. She said it came on gradually: "It was not sudden, like a religious conversion." She cannot associate it with any particular event or circumstance, although she told me her mother thought it had to do with Margaret's involvement in school activities, such as participating in the school play.

On several occasions, soon after we first met, Margaret discussed with me her childhood memories of a family friend. This man, also a member of the Covenant church, would join Margaret's family for dinner on Sundays after church. Margaret said the man was emaciated and ate a small ration of food that he would bring with him. Upon further investigation I have learned that he was a participant in the Keys starvation studies carried out at the University of Minnesota hospitals in 1944. Many of the starvation study participants were "conscientious objectors," exempted from active service in World War II on religious grounds (Young and Scrimshaw 1971). Margaret remarked:

Oh, I'll never forget that, how skinny he got, skin and bones. And he'd come over for dinner and bring his little packet. . . . He was here at the university doing this and they had to live over there, but they could go out to church, and if they went out for dinner, they could take their own.

Margaret recalls that he talked about his starvation and participation in the research project in terms of his religious beliefs and convictions. It is clear from our conversations that this man had an early and strong impact on Margaret's association of religiosity and self-starvation.

Margaret is evasive about her present weight. She says she does not know her weight because she has "hidden her scale" at her father's home. She says that when she was hospitalized near death in 1985 she weighed "around 57 pounds." Margaret is 5'4" in height. Acceptable weight for persons this height who are over 35 is between 122 and 157 pounds (Metropolitan Insurance Co. 1983). While she admits she put on some weight when she was in treatment for eating disorders in 1985, she told me that she quickly lost the weight after her discharge from the program. Margaret's

emaciated body *always* prompts stares from others when she is in public.

In addition to her extreme emaciation, Margaret has amenorrhea and periods of hyperactivity. Margaret said that she has not had a monthly period since she was around 16, when her anorexia started: "For goodness sakes, that's the most, that's the one benefit I would say. . . . I mean, I would assume it would be a big bother. I mean other people complain about it [monthly period] all the time."

Margaret does not usually see herself as anorectic. On rare occasions during the many years I've known her she has referred to a past time "when she had anorexia," meaning the time when she was hospitalized in 1985. She generally tells me her health is good, although she takes medication for her heart and thyroid. Margaret says, "For me, it's a way of life, my whole self, really. That's why I can't think of it as a disease or anything, you know."

Margaret's eating habits are private and strictly controlled. Margaret eats in private, at home, and has not eaten in front of another person "in years." As a result it is difficult to ascertain Margaret's daily food intake or to know what kinds of foods she eats. When asked what she eats, Margaret's responses are, in all likelihood, fantasies of what she would like to eat.³

The only indication I have of Margaret's actual daily food consumption is from an analysis of her garbage for several 24-hour periods. Margaret does not keep any waste, trash, or garbage cans in her house or on her property. She puts the waste she generates in preparing her food in a paper bag that she dumps each evening in a dumpster in her neighborhood. On several occasions Margaret has given me her bag "to dispose of." One of these bags contained several crossword puzzles from a local newspaper, a sales slip for a ten-pound bag of oranges, one onion skin, grape stems, a banana peel, one egg shell, one empty can of green beans, and an empty bottle of mega multivitamins. I assume this is trash for one 24-hour period. Total calories for a meal consisting of one egg, an onion, fruit, and green beans would be less than 500.

Margaret views her behaviors and routines about food and her body as her private "ritual." The ritual is private in the sense that it is done alone in her home. I have never observed these behaviors. The following account of Margaret's eating routine is distilled from our many conversations.

Margaret eats only at night. She begins her one long meal after midnight, usually around 1:30 a.m., and continues eating until daybreak or sunrise. She eats only during the darkest parts of the night. Margaret told me that "dark is Satan and that light is good, it [light] is Jesus, like it says in the Bible." Associated with Margaret's ideas about light and dark are her ideas about cleanliness, purity, and dirt. An integral part of her eating ritual is a routine about bathing and cleanliness. Margaret takes at least three baths during her eating ritual.

I come in after doing what I have to do and I take a bath. Well, I get my dinner all set, take a bath, wash my hair every night, get absolutely spotlessly clean. Then I sit down and eat. . . . I have to be absolutely spotless and clean and then I eat half my meal, or most of it. . . . And then I take a bath half-way through my dinner so I feel all fresh again. Isn't that terrible, jump in the tub? . . . And then right before I hop into bed [I take a bath] just so I feel . . . immaculately fresh. I just jump in the shower a lot. Just in and out, you know. I'm probably full of soap all the time.

Another indication that Margaret views food and the act of eating as dirty or polluting—in addition to the fact that she eats only at night, in private, and bathes frequently while she eats—is that the food she chooses to eat is often "spoiled," "rotten," or "old." This is not a consequence of her economic situation—which can be described as middle class—but is a matter of choice. Margaret describes one shopping experience at a local grocery store:

If something on the shelf doesn't look too good I'll say, "Hey, Tim, this really looks rotten." And he'll say, "You know, you have a way of looking at something and it's rotten." And I said, "I know." And if I crave a melon I'll go there and I'll just stare at the melon. Tim, he's a riot. He'll come over, "What are you trying to do, get one to rot for you?" And I said, "Yeah, I bet I will, too, I bet I will." He said, "I just went through those melons, I just put them out, they're all perfect." Of course I found one with a great, huge soft spot or blemish or something. I do it every time, you know, and he marks it down or something like that.

Margaret understands her control over food and her body in terms of religious oppositions between good and bad, Christian and non-Christian, spirit and body, heaven and earth, light and dark, purity and defilement that are features of her Christian fundamentalist beliefs. Her self-starvation and thoughts about food and her body are given moral conviction through these religious beliefs.

Margaret divides all people into Christians and non-Christians: "The people who firmly believe in Jesus Christ as their own personal savior . . . who believe in the Bible," are "true" Christians.

In Margaret's mind, eating rich foods in large quantities is associated with non-Christians. For example, Margaret insists that we meet regularly in one of the Jewish delicatessens in town. On several occasions she remarked that she loves being around "Jewish people because they love to eat." One evening Margaret approached a large gathering of patrons at their table and said to them that she loved watching Jewish people eat such rich food. Margaret herself never eats in these or any public contexts.

In contrast to "Jews who love to eat," Margaret uses her faith and prayer to control her own consumption of food. For example, Margaret participated in a Bible study fellowship course through her church during the time I worked with her. She regularly did her Bible study, lessons, and homework while sitting in the small cafeteria of her local suburban grocery store. Here, I observed, she would watch others shop for and eat food while she studied scripture and prayed. Margaret controls her own desire to eat through prayer. She states, "I have it [my appetite] controlled, thank God, with the help of God I have it controlled."

Numerous sources point to asceticism as the cornerstone of American fundamentalist culture (Fitzgerald 1987; Hawley 1994; Hunter 1987; Lynd and Lynd 1929, 1937; Marsden 1980; Vidich and Bensman 1958; West 1945). Pertinent to the present discussion on religion and anorexia nervosa are Christian fundamentalist beliefs about the body and food. Many Christian "diet" books are published by fundamentalist church-affiliated presses (Ashcroft 1991; Baldinger 1994; Brestin and Johnston 1993; Chapien and Coyle 1979; Cook 1986; Liebengood 1994; Omartian 1984; Ortlund 1977; Smith 1990). They are aimed primarily at women and are readily available through church libraries and bookstores. These books advise women to get control of their bodies and flesh and to substitute the consumption of symbolic biblical images for real food: "Your flesh or selfish worldly mind, is something you can control. . . . Your flesh has nothing good about it *unless* it is under the dominant influence and power of the Holy Spirit" (Chapien and Coyle 1979:61).

The same book states that the Christian attitude toward food is one that "eats in the Spirit," not in the flesh, and that "feeds on the

Word" (Chapian and Coyle 1979:70). This book divides foods into "Kingdom Foods" (low-fat foods) and "World" or defiled foods (fattening foods), directly equating the spiritual realm and God's Kingdom with bodily thinness and lack of fat. Another Christian "diet" book equates dieting with a trip to The Promised Land (a land of freedom and "lightness") and provides women readers with meditations to help them find strength and self-discipline "by feasting on the fruit of The Spirit" (Cook 1986). The imagery in these books opposes body, food, and fat, on the one hand, to spirit and lightness, on the other. Moreover, the former is considered sinful and defiling; the latter beautiful, pure, and good.

Margaret's views about the physical body are shaped by her views about Heaven and eternal life. Margaret opposes the physical body with the pure spirit. The dichotomy that Margaret holds between the sinful body (flesh and fat) and the pure spirit is fully developed in Christian fundamentalist eschatology. An examination of fundamentalist beliefs in the "rapture" may begin to show how religious doctrine can provide motivation and expression for certain anorexics. Briefly, the rapture holds that bodies of believers in Christ on earth will some day be "translated" or transformed into spiritual, imperishable, and immortal bodies *without* first experiencing physical death. Those individuals who are "translated," it is believed, will be given bodies that will last forever and will be immortal. It is believed that they will never grow old or die and are sinless (Walvoord 1979:247–250). In short, the translation is a transformation from physical to purely spiritual bodies (Walvoord 1979:260). It is believed that at the time of the rapture the "living saints" will be taken from the earth up to Heaven ("Father's house") and will meet Christ "in the air" (Reiter et al. 1984). Margaret conveyed to me her belief that "there is no fat in Heaven." It is a place where bodies float in the air, light, "like marshmallows."

Margaret does not believe in bodily death.

I believe that a Christian person does not really die. They just sort of pass from this life into the other. God just sort of, I mean it says in the Bible, "You will never see death." And I believe that they just sort of go. . . . When [the Bible] says, "Thou shalt never see death," I believe it, and there are many passages in the Bible where it says that. And it says that a Christian person will not really die. They will just go to be with God. So that's what we believe.

Margaret believes that at death the body is translated into spirit, that it is gone: "This is why we don't go out and visit graves and so

on. You just feel that the person really isn't. . . . There isn't much point visiting a grave. There's nothing there."

Margaret's concept of the self poses the body and spirit in opposition. The real self, in her view, is located *not* in the body but in the spirit: "Well, the part of you that goes [to Heaven] is really yourself because the body is nothing. . . . Anybody who believes in the Bible would believe in that as a matter of fact."

Margaret talks about Heaven in familial imagery. She sees physical death and the rapture to Heaven as a means to rejoin her family, especially the idealized family of her childhood, and her mother. Margaret envisions a future in Heaven where she will be with her mother. She remarked that she told her mother:

"Mom, I don't want you to die because we'll miss you so much. But if you are the first one of us to go, God wants you to be up in Heaven first so you can get our house ready for us and we'll all be up there." And she smiled, you know. Because [the Bible] says, too, that families will be reunited with your loved ones up there.

Margaret pictures "all our friends and everybody knowing each other . . . living together forever and ever and ever." Margaret is certain that only true Christians,

people who firmly believe in Jesus Christ as their own personal savior, will go and I don't think the others will. I think people who go out and sin a lot and do things that they know God doesn't want them to do and that they shouldn't be doing, I don't think they'll go to Heaven.

In Margaret's view, purity and control over food and the body are prerequisites for getting to Heaven.

SUMMARY

Margaret views her parents in highly idealistic terms. They are described as "Christian," "fun," and "perfect." Yet they were authoritarian, strict, emotionally distant, and (perhaps) abusive. Her mother, especially, is portrayed as dominating and a strict disciplinarian. Her mother's job as a food-tester for a food company during Margaret's childhood made food and eating a focus of their family life. Enmeshment of identities within the family is evident. Margaret's drawing of her family—and her comments on it—suggests that she has had difficulty in separating from her family of origin and in establishing a separate identity. The ingroup orientation and authoritarianism of her family—ideals in American fundamentalist traditions—contributed, perhaps, to this difficulty.

Margaret's continuing enmeshment in her family is glossed by her in religious terms of their being a "perfect" and loving Christian family.

Viewed psychologically, Margaret's self-starvation seems motivated by desires to win the love and attention of her family, and to ultimately reunite with them in an environment or atmosphere that is genuinely loving. Margaret's anxieties about death and about getting to Heaven—where she believes she will reunite with her mother and family—contribute to her self-starvation and asceticism. She believes that if she is pure and virginal, controls her sexuality and her body, she will be "raptured" to Heaven, a place of bodily lightness—and no fat. Her self-starvation is an expression of her desire to literally meet these religious ideals. As briefly examined in this article, Margaret's beliefs and rituals about food and her body are phrased in terms of her fundamentalist religious convictions that lend, in turn, moral authority to her self-starvation.

RELIGION, ASCETICISM, AND ANOREXIA NERVOSA

As noted in the introduction, clinicians have commented on the fact that asceticism reaches extreme forms in anorexia nervosa (Mogul 1980; Palazzoli 1974; Rampling 1985; Sabom 1985; B. Turner 1984). Palazzoli comments on the ascetic element of anorexia nervosa that reflects a rigid belief in a split between the body and mind. This dualistic logic leads the anorectic to believe that "one has only to crush the one (the strong body) to enhance the other (the weak spirit), thus magically reversing their respective roles" (Palazzoli 1974:74). Sabom notes the anorectic's tendency to bifurcate the mind, body, and spirit and to reject the body (Sabom 1985). Bemporad and Ratey also refer to the self-denial and asceticism that are major characteristics of anorexia nervosa (Bemporad and Ratey 1985). They describe the anorectic's sense of moral superiority derived from endurance of painful abnegation and relinquishment of gratification of desires; self-control is praised, while any form of indulgence is disapproved. Mogul, a psychoanalyst, proposes that anorexia nervosa may be an extreme form of asceticism that becomes an end in itself (1980).

Rampling, Mogul, and others, in pointing to ascetic strains in contemporary anorexia nervosa, do not ask through what cultural beliefs and practices those ascetic characteristics are expressed by

anorectics themselves. They hint at or point to religion, without in-depth consideration or examination of contemporary cases. Instead they focus on examples of religious “anorectics” from the medieval period in the West (Rampling 1985) or point to similarities between anorexia nervosa and the asceticism of Hindu and Buddhist religions (Masson 1976; Mogul 1980). The case of Margaret C., presented here, illustrates how some contemporary anorectics express asceticism about the body through Christian concepts and understandings. Moreover, there appears to be a longstanding association between self-starvation by women and Christianity.

Bell (1985) and Bynum (1987) establish a connection between religious asceticism and voluntary starvation by women in Western Europe during the medieval and early modern periods. Bell observes that the majority of women canonized as saints by the Roman Catholic Church in Italy between the 13th century and the present had anorectic behavior patterns. Bell labels the type of starvation and refusal to eat typified by pious women during this period “holy” anorexia. He recognizes that the rationale for self-starvation and fasting was grounded in religious precepts and practices and, especially, the literature of radical, ascetic Christian religiosity. In her study of the food-related religious practices of European women during the same period, Bynum locates the food asceticism of women in the sexual division of labor and proposes that food was important to women religiously because it was important socially (1987:191–193).

These practices had roots in earlier Judeo-Christian traditions. Peter Brown (1988) has described the practice of permanent sexual renunciation—continence, celibacy, and lifelong virginity—that developed among men and women in the Mediterranean and Middle East between 50 A.D. and 450 A.D. While Brown is not primarily concerned with food asceticism, nevertheless he shows that fasting and renunciation of food were associated with sexual renunciation and virginity throughout this period of time. For some religious men and women fasting was the primary expression of their asceticism. According to Brown, by the middle of the fifth century continence, often accompanied by dietary restrictions and by fasting, was a common feature in Christian practice and continued to be developed in the Middle Ages.

While Bell and Bynum are primarily concerned with describing and interpreting food refusal and religious values in the medieval period, they ask whether fasting and starvation undertaken by women during the Middle Ages was anorexia nervosa. On the whole, they equivocate. Their ambivalence on whether food refusal in the medieval period was anorexia nervosa derives from uncertainty and unexamined assumptions about the role of culture in contemporary anorexia. It is either unclear to them *which* cultural values or symbols are involved in contemporary anorexia, or they assume, without investigation of specific cases of contemporary anorectics, that certain cultural dicta—such as “thinness” as an ideal for women—are always implicated in the disorder. In short, these historians agree that culture—and especially religion—inform food refusal during the lengthy medieval period. Yet they assume—without investigation of contemporary anorectic women themselves—that the cultural components of modern anorexia are qualitatively different from the cultural symbols and values that shaped earlier patterns of food refusal. They assume a break between the 20th century, which gives rise to anorexia nervosa, and preceding historical periods. For Bell the break is a contrast between “holy” and “nervous” anorexias. For Bynum the two are utterly different; in her view, medieval symbols and doctrines have no direct relevance to 20th-century patterns. For Brumberg, a historian of anorexia, it is a transition from “sainthood” to “patienthood” (1988). Religion and religious values are no longer thought by these scholars to play a part in food refusal.

These historians explain the break or hiatus between the medieval past and modern era by the processes of “medicalization” and “secularization.” They understand these processes to have been completed by the beginning of the 20th century, when anorexia nervosa was first recognized as a medical disorder.

Brumberg (1988) and Vandereycken and Van Deth (1994) trace the emergence of anorexia nervosa as a modern disease. Brumberg explains that all the current theories on anorexia that view the causes of anorexia as rooted in psychology, physiology, or in the middle-class family—*not* in religion—resulted from processes in the late 1800s in which physicians denounced the religious aspects of fasting in favor of somatics (Brumberg 1985). In the 1870s anorexia nervosa emerged as a new disease concept simultaneously in both England and Western Europe as a result of debates between

physicians and clergy over explanations of behavior (see Vandereycken and Van Deth 1994).

Brumberg notes that these processes of medicalization and secularization were carried out largely by the male medical profession, which ignored or overlooked questions of the subjective meaning of anorectic girls themselves. According to Brumberg, starvation was not usually seen by physicians as having symbolic meaning for the anorectic girl or her family (Brumberg 1988). Yet it is clear from Brumberg's own research on fasting girls who lived during the Victorian period that many of them did not concur with changing medical opinion about their starvation. While physicians were defining anorexia nervosa as a mental illness, as a new disease grounded in the nervous system, many "fasting girls" and "miraculous maids" in the late 1800s still told stories that were religious (Brumberg 1988:63). Brumberg views these "fasting girls" at the turn of the 20th century as speaking to antimodernist impulses and coming from traditions of Spiritualism, a religious movement that stressed transcendence of the spirit over the body and flesh.

Brumberg concurs with Bell and Bynum that, for hundreds of years in the West, food refusal had a religious component. These historians are also of the opinion that by the 20th century the related processes of secularization and medicalization of food refusal were complete and that religion no longer played a part in contemporary food refusal. None considers the subjective and cultural realms of contemporary anorectics, however.

It is an open question, in my view, whether the related processes of "secularization" and "medicalization" are complete on a *subjective* level for anorectics themselves even in the mid-to-late 20th century. As we see with Margaret, some contemporary anorectics—especially those from conservative fundamentalist traditions—continue to couch their eating behaviors in religious meanings. On the basis of the case material presented here—as well as published autobiographical accounts by some contemporary women with anorexia⁴—I propose that religious beliefs about food and the body continue to be important themes in the subjective experiences of some contemporary women who display the signs and symptoms of the condition. Through the life of Margaret C. we have explored the nature of the association between religion, asceticism, and contemporary anorexia nervosa in cultural and experiential detail.

CONCLUSION

The relations between Margaret's religious beliefs, asceticism, and self-starvation can be understood within the context of theories on religion and psychopathology proposed by Sigmund Freud and various psychological anthropologists influenced by Freud.

The study of culture and personality within the field of anthropology is, in part, a response to, and development of, questions posed by Sigmund Freud on religion and "neurosis" (1946[1913], 1955[1939], 1961a[1927], 1961b[1930], 1963[1907], 1964[1933]). In his works on religion Freud made an analogy between neurosis and religion. Through this analogy he was able to explore the psychological nature (and origin) of religion and, to a lesser extent, certain features of neurosis. Both neurosis and religion involve rituals as well as prohibitions that serve as defenses against various drives, impulses, and temptations (1964[1933]). These drives are infantile wishes for protection and, according to Freud, are grounded in the Oedipus complex (1961a[1927]).

Many of the major works in psychological anthropology have considered the psychological functions and nature of religion, the role of the unconscious in the formation and use of religious symbols, and the mental health of religious practitioners. Drawing on Freudian ideas about religion and psychopathology, some psychological anthropologists have viewed religion as a defense mechanism that can be an alternative to neurosis and psychosis in individuals (La Barre 1970, 1991; Obeyesekere 1981; Roheim 1971[1943]; Spiro 1959, 1965, 1987b). As a defense mechanism, religion is seen as defending against a variety of psychological anxieties and motivations. These anxieties, assumed to be largely unconscious to individuals, include object loss, dependency, hostility and aggression, stress and culture shock in conditions of acculturation, and Oedipal sexuality.

The relation between religion and anorexia nervosa can be understood within the previously mentioned contributions by psychological anthropologists on the role of religious beliefs in the subjective experiences of psychopathology. That subjective expressions of anorexia nervosa may be encoded in religious beliefs recognizes that (1) psychopathology is influenced by culture in its incidence, diagnosis, treatment, and—most important for our purposes here—in its subjective meaning; and (2) religious symbols

and belief systems address and engage the emotions and unconscious drives of individuals who are socialized into and actively participate in these religious beliefs. Each of these concerns can be explored in terms of the findings presented here on Margaret C.

I have proposed here and elsewhere that the complex relations between the religious and subjective dimensions of anorexia nervosa can be understood through the lens of asceticism (Banks 1990, 1992). Asceticism has psychological as well as religious-cultural dimensions. As we saw, clinical evidence on anorexia nervosa, as well as the case of Margaret C. presented here, points to the anorectic's belief in a split or dualism between the body and spirit or mind, asexuality, and heightened morality.

Through close examination of the role of religion in the subjective expressions of Margaret's starvation, we can begin to examine precisely which aspects of religion are implicated in contemporary experiences of anorexia nervosa. Specifically, Margaret uses concepts of food and the body and notions of asceticism that are part of her Christian fundamentalist tradition to give meaning to her condition. Asceticism is an integral and universal aspect of religion (Douglas 1970; Durkheim 1965[1915]; Foucault 1978, 1985; James 1982[1902]; Menninger 1938; Weber 1958[1904–05]). As explored by Durkheim, James, Foucault, and others, religious asceticism typically includes practices of food restriction, fasting, celibacy, and sexual continence.

Asceticism about food and the body have long been a feature of Western culture and Christianity. We briefly reviewed the connection between Christian asceticism and food refusal in the early Christian era, in the medieval period, and the controversy about the relation of religion to contemporary anorexia. Contrary to the opinions of the historians cited here, I believe that consideration of asceticism and renunciation of food and sex as continuing cultural ideals within Judeo-Christian traditions can answer why some contemporary anorectics use religion as the idiom through which they express and encode their self-starvation. As briefly explored in this article, asceticism about the body, sex, and food are normative ideals of the American religious fundamentalist subculture (Hawley 1994; Hunter 1987; Marsden 1980) and are elaborated for women in the many Christian "diet" books available to them.

The concept of "splitting" is useful in understanding the processes whereby Margaret's motivations for self-starvation are related to her religion. Splitting is a defense mechanism in which idealized aspects of the self are split off from devalued, persecutory, and "bad" aspects (Kernberg 1966, 1975, 1984; Lichtenberg and Slap 1973; Pruyser 1975; Ross and Dunn 1980). In splitting, contradictory ego states are alternatively activated and external objects are divided into "all good" and "all bad" ones. According to Kernberg, splitting is a mechanism characteristic of the first stages of development of the ego. It is used as a defense to protect positive or good internal objects and facilitates ego growth. But splitting can persist pathologically and affect ego identity and the self (Kernberg 1975).

As we noted, Margaret phrases the "good" and "bad" aspects of herself and others in the language of her fundamentalist Christian background. She understands her own control over food and her body in terms of religious oppositions between good and bad, Christian and non-Christian, spirit and body, Heaven and Earth, light and dark, purity and defilement. In her own mind Margaret is attempting to literally carry out the precepts of her religious convictions: she is good, pure, light, Christian, and controls her body. "Bad" aspects are projected onto non-Christians ("Jews who love to eat") or are repressed. This explains why Margaret's concept of her self is not as "an anorectic," as "sick," but rather as a "good Christian," a "living miracle."

Contributing to Margaret's anorexia are, in my view, obsessive-compulsive personality traits. Repetitive behaviors are integral aspects of the obsessive-compulsive personality. The essential feature of this personality style is a preoccupation with orderliness, perfectionism, and control (American Psychiatric Association 1994). Obsessive-compulsive personalities constantly strive for perfection and have strict and often unattainable standards in matters of morality, ethics, or values. As we noted, Margaret views her repetitive behaviors and routines about food and her body not as compulsions and obsessions, but as her "rituals." She phrases the unique features of her ritual in the language of her fundamentalist Christian background which opposes light and dark, purity and defilement, and spirit and body. We noted earlier that Freud drew an analogy between religion and psychopathology. Here we can be more specific, noting that Margaret uses the language and beliefs of her religion to give meaning to her repetitive behaviors.

Viewed psychologically, the motives underlying Margaret's self-starvation appear to be fear of death and dying, separation anxiety, and feelings of guilt over reproductive functions and sexuality. These motivations underlying her self-starvation are supported by psychoanalysts who understand asceticism as a defense against unconscious drives and anxieties over sexuality, aggression, separation, and narcissism (A. Freud 1937; Masson 1976; Menninger 1938; Mogul 1980). Margaret's enmeshment in her authoritarian family system may have contributed to her fears and anxieties. This lends support to Spiro's notion that the motives underlying religion are grounded in and produced by family structure and relations (Spiro 1987a, 1987b).

In summary, Margaret's religious beliefs that equate control over the body and food with goodness and the spiritual realm— notions developed in Christian "diet" books and in fundamentalist notions about the rapture—lend moral sanction and conviction to her self-starvation. In this respect the asceticism of anorexics is motivated, in part, by culture. This was, of course, Durkheim's position on asceticism and religion. Moreover, as we have seen, asceticism about food and the body also has psychological elements and is motivated by unconscious anxieties about separation, loss, and sexuality. In my view it is precisely in and through notions of asceticism about food and the body that are features of religion that the cultural *and* subjective/motivational elements of anorexia nervosa join. As we examined, Margaret uses notions of asceticism in her religious tradition to actively construct a sense of her self, not as "sick" but rather as "Christian" and "good." It is precisely the notions of asceticism about the body and food in Margaret's religious tradition, rather than her religious beliefs in general, that serve as a "defense" against her anxieties over separation, sex, and death. In short, asceticism works on the cultural level to demarcate "Christian" from "non-Christian," "good" from "bad," "spirit" from "body," and so on. On the individual level, asceticism works to construct a positive sense of "self."

More precisely, it is the religious-cultural ideal of spiritual "lightness," transformed into an ideal of bodily "thinness," that is carried to extremes by women with primary anorexia nervosa who come from religious fundamentalist traditions. To the extent that some contemporary anorexics such as Margaret C. come from traditions that advocate literal interpretations of religious tenets, these

anorectics highlight tensions and conflicts in the fundamentalist subculture between the sacred and profane and between the spirit and body. The power and assumed superiority of the spirit over the body links religious traditions of asceticism with subjective motivations to be "light," "thin," and "without desire."

CAROLINE GILES BANKS is a lecturer in Anthropology at the University of North Carolina at Charlotte.

NOTES

Acknowledgments. An abbreviated version of this article was presented at the 89th Annual Meeting of the American Anthropological Association, New Orleans, LA, November 1990. I would like to thank John Ingham, Robert Paul, and an anonymous reader for *Ethos* for their helpful criticisms and suggestions on an earlier draft of the manuscript. The author's research was supported, in part, by a 1988–89 University of Minnesota Graduate School Doctoral Dissertation Fellowship and by a 1994–95 NIMH postdoctoral fellowship in Culture and Mental Health Behavior, the Committee on Human Development, University of Chicago.

1. The name "Margaret C." is a pseudonym used to protect the identity of the woman whose story is presented in this article. I have made every effort to protect her anonymity.

Margaret's story was gathered as part of my doctoral dissertation research on the cultural dimensions of eating disorders (Banks 1990). My study included long-term work with several religious anorectics in both clinical and nonclinical settings. I have discussed the methodological and ethical challenges in working with anorectics in nonclinical settings elsewhere (Banks 1990, 1992). From the beginning Margaret was informed of the nature of my study and gave her permission for our numerous conversations to be taped. The quoted passages presented are verbatim transcriptions of some of these conversations.

2. Anorexia nervosa is of interest to anthropologists and ethnopsychiatrists because of the role of culture in the disorder. Ethnopsychiatry currently considers anorexia nervosa to be a culture-bound syndrome. See Banks (1992), Davis and Yager (1992), Kleinman (1988), Littlewood and Lipsedge (1987), Prince (1983), and Swartz (1985) for discussions of anorexia nervosa as a culture-bound syndrome. One question of interest that merits further empirical research concerns *which* aspects of culture are implicated in the disorder. Feminist scholars and others point to thinness as an ideal for women and to dieting (Bruch 1986; Chernin 1985; Garner et al. 1980; Orbach 1986) in eating disorders. Bryan Turner (1984) proposes that the ethos of unlimited consumption of late capitalism is involved. My own research on religious anorectics in the United States suggests that future research focus on religion in contemporary cases.

3. For example, Margaret told me that one night she planned to eat "two baked potatoes, broccoli, a small portion of tuna fish, a tossed salad, followed by an entire package of crackers with fruit, peanut butter, a melon, more crackers, then a luncheon meat sandwich, then eight bowls of ice cream with cereal and fruit on top"! She figured she ate "between 1,500 and 1,600 calories" at this or any of her big meals. I was struck by the possibility that this list of foods was a wish list and that the reality was quite different.

4. Although there has been little or no formal research by clinicians on religiosity in contemporary anorexia, some published reports suggest that religion does play a role in the lives of some contemporary anorectics. Wilbur and Colligan (1981) note the greater

religiosity of anorectics seen clinically. They compared 34 female patients in a clinical setting diagnosed as having anorexia nervosa with two control groups of nonorganically ill, nonpsychotic female psychiatric patients. Profiles on the MMPI indicated, among other things, that the anorectic patients had significantly higher scores on religious fundamentalism. Sykes et al. (1986) recently found a significant relationship between eating disorders and religion for 160 cases seen clinically. They state that the higher prevalence of eating disorders among patients of Jewish and Catholic religious backgrounds than the general population could be related, in part, "to the importance of food within these religious groups" (Sykes et al. 1986:28).

Clinical reports sometimes imply that religion shapes attitudes toward the body and food for some contemporary anorectics. Minuchin et al., although not directly addressing the religiosity of anorectics, reveal an association between religiosity and eating disorders in their data. *Psychosomatic Families* (Minuchin et al. 1978) is a compilation and analysis of four "anorexogenic" families. In one case, an anorectic from an Italian Catholic family, the girl's anorexia started during the Lenten season (1978:282). Minuchin et al. describe "anorexogenic" families as enmeshed: boundaries between family members are blurred and differentiation diffused. In one family mentioned in the text, overprotection and enmeshment of family members were exacerbated by their religious fundamentalism. We noted a similar pattern for Margaret's family.

The religious symbolism and language used by one anorectic girl cited in Hilde Bruch's *The Golden Cage* (1978) is striking and evokes the "holy" anorectics discussed by Bell and Bynum. This anorectic girl, aged 15, stated, "My body became the visual symbol of pure ascetic and aesthetics, of being sort of untouchable in terms of criticism. Everything became very intense and very intellectual, but absolutely untouchable" (1978:18). According to Bruch, this girl had read about the visionary experiences of people during the Middle Ages and thought that through her starvation she was molding herself into "that wonderful ascetic pure image" (1978:18).

In the past decade several recovering anorectics have published their autobiographies (Liu 1979; MacLeod 1982; O'Neill 1982). Some touch on the ethical, moral, and religious themes of their patterns of food refusal. For example, Liu refers to her food habits as "fasting" and states, "The spiritual significance of losing weight, of discipline, of sacrifice. . . . It strengthened the soul, so to speak" (1979:115). Also, "It's like, since there's so little of you physically, there has to be more spiritually and intellectually" (1979:138). Likewise, MacLeod discusses her early education in a Roman Catholic convent, her deep guilt and fear when her atheistic parents denied her request to be baptized ("to alieve the fear of going to hell"), and her feelings of "moral superiority" while anorectic. MacLeod notes the parallels between her anorexia and the fasting undertaken by religious mystics (1982:75).

REFERENCES CITED

American Psychiatric Association

1994 Diagnostic and Statistical Manual of Mental Disorders. 4th ed. Washington, DC: American Psychiatric Association.

Ashcroft, Mary Ellen

1991 *Temptations Women Face: Honest Talk about Jealousy, Anger, Sex, Money, Food, Pride*. Downers Grove, IL: InterVarsity Press.

Baldinger, Kathleen

1994 *The World's Oldest Health Plan: Health, Nutrition and Healing from the Bible*. Lancaster, PA: Starburst Publishers.

Balmer, Randell

1994 American Fundamentalism: The Ideal of Femininity. *In* Fundamentalism and Gender. John Hawley, ed. Pp. 47–62. New York: Oxford University Press.

Banks, Caroline

1990 There Is No Fat in Heaven: Religious Asceticism and the Meaning of Anorexia Nervosa. Ph.D. dissertation, Anthropology Department, University of Minnesota, Minneapolis.

1992 "Culture" in Culture-Bound Syndromes: The Case of Anorexia Nervosa. *Social Science and Medicine* 34(8):867–884.

Bell, Rudolph

1985 Holy Anorexia. Chicago: University of Chicago Press.

Bemporad, Jules, and John Ratey

1985 Intensive Psychotherapy of Former Anorexic Individuals. *American Journal of Psychotherapy* 39(4):454–466.

Bordo, Susan

1993 Unbearable Weight: Feminism, Western Culture, and the Body. Berkeley: University of California Press.

Bourke, M. P., G. Taylor, and A. H. Crisp

1985 Symbolic Functioning in Anorexia Nervosa. *Journal of Psychiatric Research* 19(2/3):273–278.

Brestin, Dee, and Peggy Johnston

1993 The Joy of Eating Right! Spiritual and Nutritional Principles for Weight Control. Wheaton, IL: Victor Books.

Brown, Peter

1988 The Body and Society: Men, Women and Sexual Renunciation in Early Christianity. New York: Columbia University Press.

Bruch, Hilde

1973 Eating Disorders: Obesity, Anorexia Nervosa, and the Person Within. New York: Basic Books.

1978 The Golden Cage: The Enigma of Anorexia Nervosa. Cambridge, MA: Harvard University Press.

1986 Anorexia Nervosa: The Therapeutic Task. *In* Handbook of Eating Disorders. Kelly D. Brownell and John P. Foreyt, eds. Pp. 328–332. New York: Basic Books.

Brumberg, Joan

1985 "Fasting Girls": Reflections on Writing the History of Anorexia Nervosa. *In* History and Research in Child Development. Alice Smuts and John Hagen, eds. Pp. 93–104. Monographs of the Society for Research in Child Development 50:4–5.

1988 Fasting Girls. The Emergence of Anorexia Nervosa as a Modern Disease. Cambridge, MA: Harvard University Press.

Bynum, Caroline

1987 Holy Feast and Holy Fast. The Religious Significance of Food to Medieval Women. Berkeley, Los Angeles, London: University of California Press.

Chapian, Marie, and Neva Coyle

1979 Free To Be Thin. Minneapolis, MN: Bethany House Publishers.

Chernin, Kim

1985 The Hungry Self. Women, Eating and Identity. New York: Times Books.

Cook, Shirley

1986 The Exodus Diet Plan. Old Tappan, NJ: Fleming H. Revell Co.

- Crapanzano, Vincent
 1980 *Tuhami, Portrait of a Moroccan*. Chicago: University of Chicago Press.
- Csordas, Thomas
 1994a *The Sacred Self: A Cultural Phenomenology of Charismatic Healing*. Berkeley: University of California Press.
 1994b *Embodiment and Experience. The Existential Ground of Culture and Self*. Cambridge: Cambridge University Press.
- Davis, Cindy, and Joel Yager
 1992 *Transcultural Aspects of Eating Disorders: A Critical Literature Review*. *Culture, Medicine and Psychiatry* 16:377–394.
- Dobson, James
 1970 *Dare To Discipline*. Wheaton, IL: Tyndale House Publishers.
 1982 *Dr. Dobson Answers Your Questions about Marriage and Sexuality*. Wheaton, IL: Tyndale House Publishers.
- Douglas, Mary
 1970 *Natural Symbols*. New York: Pantheon.
- Durkheim, Emile
 1965[1915] *The Elementary Forms of the Religious Life*. Joseph Swain, trans. New York: The Free Press.
- Fitzgerald, Frances
 1987 *Cities on a Hill. A Journey through Contemporary American Cultures*. New York: Simon and Schuster.
- Foucault, Michel
 1978 *The History of Sexuality I: An Introduction*. Richard Howard, trans. New York: Vintage.
 1985 *The History of Sexuality II: The Use of Pleasure*. Robert Hurley, trans. New York: Vintage.
- Freud, Anna
 1966[1937] *The Ego and the Mechanisms of Defense*. Revised ed. New York: International Universities Press.
- Freud, Sigmund
 1946[1913] *Totem and Taboo*. A. A. Brill, trans. New York: Vintage Books.
 1955[1939] *Moses and Monotheism*. Katherine Jones, trans. New York: Vintage Books.
 1961[1927] *The Future of an Illusion*. The Standard Edition, 21. New York and London: W. W. Norton and Co.
 1961[1930] *Civilization and Its Discontents*. The Standard Edition, 21. New York and London: W. W. Norton and Co.
 1963[1907] *Obsessive Acts and Religious Practices*. *In Character and Culture*. New York: Collier Books.
 1964[1933] *New Introductory Lectures on Psychoanalysis*. The Standard Edition, 22. London: Hogarth.
- Garner, D. M., P. E. Garfinkel, D. Schwartz, and M. Thompson
 1980 *Cultural Expectation of Thinness in Women*. *Psychological Reports* 47:483–491.
- Gluckman, Max
 1965 *Politics, Law and Ritual in Tribal Society*. Chicago: Aldine Publishing Co.
- Gordon, C., E. Beresin, and D. B. Herzog
 1989 *The Parents' Relationship and the Child's Illness in Anorexia Nervosa*. *In Psychoanalysis and Eating Disorders*. Jules Bemporad and David Herzog, eds. Pp. 29–42. New York: The Guilford Press.

- Hawley, John, ed.
 1994 *Fundamentalism and Gender*. New York and Oxford: Oxford University Press.
- Hunter, James
 1987 *Evangelicism: The Coming Generation*. Chicago and London: University of Chicago Press.
- James, William
 1982[1902] *The Varieties of Religious Experience*. Middlesex, UK: Penguin Books.
- Kernberg, Otto
 1966 *Structural Derivatives of Object Relationships*. *International Journal of Psycho-Analysis* 47:236–253.
 1975 *Borderline Conditions and Pathological Narcissism*. New York: Jason Aronson.
 1984 *Severe Personality Disorders*. New Haven, CT: Yale University Press.
- Kleinman, Arthur
 1988 *Rethinking Psychiatry. From Cultural Category to Personal Experience*. New York and London: The Free Press.
- La Barre, Weston
 1970 *The Ghost Dance. Origins of Religion*. Garden City, NY: Doubleday.
 1991 *Shadow of Childhood. Neoteny and the Biology of Religion*. Norman and London: University of Oklahoma Press.
- Lester, Rebecca J.
 1995 *Embodied Voices: Women's Food Asceticism and the Negotiation of Identity*. *Ethos* 23:187–222.
- Lichtenberg, Joseph, and Joseph Slap
 1973 *Notes on the Concept of Splitting and the Defense Mechanism of the Splitting of Representations*. *Journal of the American Psychoanalytic Association* 7(21):772–787.
- Liebengood, Judy
 1994 *Freedom from Eating Disorders: The Pathway to Victory*. Lafayette, LA: Prescott Press.
- Littlewood, Roland, and Maurice Lipsedge
 1987 *The Butterfly and the Serpent: Culture, Psychopathology and Biomedicine*. *Culture, Medicine and Psychiatry* 11(3):289–335.
- Liu, Aimee
 1979 *Solitaire*. New York: Harper and Row.
- Lynd, Robert S., and Helen M. Lynd
 1929 *Middletown. A Study in American Culture*. New York: Harcourt, Brace, and World.
 1937 *Middletown in Transition. A Study in Cultural Conflicts*. New York: Harcourt, Brace, and World.
- MacArthur, John
 1982 *The Family*. Chicago: Moody Press.
- MacLeod, Sheila
 1982 *The Art of Starvation*. New York: Schocken Books.
- Marsden, George
 1980 *Fundamentalism and American Culture. The Shaping of Twentieth Century Evangelicalism: 1870–1925*. Oxford: Oxford University Press.
- Masson, J. Moussaieff
 1976 *The Psychology of the Ascetic*. *Journal of Asian Studies* 35(4):611–625.

Menninger, Karl

1938 *Man against Himself*. New York: Harcourt, Brace, and World.

Metropolitan Insurance Co.

1983 *Metropolitan Height and Weight Tables*. New York: Metropolitan Insurance Co.

Minuchin, Salvador, Bernice Rosman, and Lester Baker

1978 *Psychosomatic Families: Anorexia Nervosa in Context*. Cambridge, MA: Harvard University Press.

Mogul, S. Louis

1980 Asceticism in Adolescence and Anorexia Nervosa. *The Psychoanalytic Study of the Child* 35:155–175.

Obeyesekere, Gananath

1981 *Medusa's Hair. An Essay on Personal Symbols and Religious Experience*. Chicago and London: University of Chicago Press.

1990 *The Work of Culture*. Chicago and London: University of Chicago Press.

Omartian, Stormie

1984 *Greater Health—God's Way*. Chatsworth, CA: Sparrow Press.

O'Neill, Cherry Boone

1982 *Starving for Attention*. New York: Continuum.

Orbach, Susie

1986 *Hunger Strike. The Anorectic's Struggle as a Metaphor for Our Age*. New York and London: W. W. Norton and Co.

Ortlund, Anne

1977 *Disciplines of the Beautiful Woman*. Waco, TX: Word Publishing.

Palazzoli, Mara S.

1974 *Self-Starvation. From Individual to Family Therapy in the Treatment of Anorexia Nervosa*. New York: Jason Aronson.

Prince, Raymond

1983 Is Anorexia Nervosa a Culture-Bound Syndrome? *Transcultural Psychiatric Research Review* 20:299–300.

Pruyser, Paul

1975 What Splits in "Splitting"? *Bulletin of the Menninger Clinic* 39(1):1–46.

Rampling, David

1985 Ascetic Ideals and Anorexia Nervosa. *Journal of Psychiatric Research* 19(2/3):89–94.

Reiter, Richard R., Paul Feinberg, Gleason Archer, and Douglas J. Moo

1984 *The Rapture: Pre-, Mid-, or Post-Tribulational?* Grand Rapids, MI: Academic Books.

Roheim, Géza

1971[1943] *The Origin and Function of Culture*. Garden City, NY: Doubleday.

Ross, John, and Peter Dunn

1980 Notes on the Genesis of Pathological Splitting. *International Journal of Psycho-Analysis* 61:335–349.

Sabom, Stephen

1985 The Gnostic World of Anorexia Nervosa. *Journal of Psychology and Theology* 13(4):243–254.

Smith, Pamela

1990 *The Food Trap: Breaking Its Hidden Control*. Lake Mary, FL: Creation House.

Spignesi, Angelyn

1983 *Starving Women: A Psychology of Anorexia Nervosa*. Dallas: Spring Publications.

Spiro, Melford

1959 *Cultural Heritage, Personal Tensions, and Mental Illness in a South Sea Culture*. In *Culture and Mental Health*. Cross-Cultural Studies. Marvin Opler, ed. Pp. 141–171. New York: MacMillan.

1965 *Religious Systems as Culturally Constituted Defense Mechanisms*. In *Context and Meaning in Cultural Anthropology*. Melford Spiro, ed. Pp. 100–113. New York: The Free Press.

1987a *Some Reflections on Family and Religion in East Asia*. In *Culture and Human Nature*. B. Kilborne and L. L. Langness, eds. Pp. 262–287. Chicago and London: University of Chicago Press.

1987b *Religion. Problems of Definition and Explanation*. In *Culture and Human Nature*. B. Kilborne and L. L. Langness, eds. Pp. 187–222. Chicago and London: University of Chicago Press.

Swartz, Leslie

1985 *Anorexia Nervosa as a Culture-Bound Syndrome*. *Social Science and Medicine*. 20(7):725–730.

Sykes, D., M. Gross, and S. Subishin

1986 *Preliminary Findings of Demographic Variables in Patients Suffering from Anorexia Nervosa and Bulimia*. *International Journal of Psychosomatics* 33(4):27–30.

Turner, Bryan S.

1984 *The Body and Society. Explorations in Social Theory*. Oxford and New York: Basil Blackwell.

Turner, Victor

1969 *The Ritual Process. Structure and Anti-Structure*. Ithaca, NY: Cornell University Press.

Vandereycken, Walter, and Ron Van Deth

1994 *From Fasting Saints to Anorexic Girls: The History of Self-Starvation*. Washington Square, NY: New York University Press.

Vidich, Arthur J. and Joseph Bensman

1958 *Small Town in Mass Society. Class, Power and Religion in a Rural Community*. Garden City, NY: Doubleday and Company.

Walvoord, John F.

1979 *The Rapture Question*. Grand Rapids, MI: Zondervan Publishing House.

Weber, Max

1958[1904–05] *The Protestant Ethic and the Spirit of Capitalism*. Talcott Parsons, trans. New York: Charles Scribner's Sons.

West, James

1945 *Plainville, U.S.A.* New York: Columbia University Press.

Wilbur, Christine, and Robert Colligan

1981 *Psychologic and Behavioral Correlates of Anorexia Nervosa*. *Journal of Developmental and Behavioral Pediatrics* 2(3):89–92.

Woodman, Marion

1980 *The Owl Was a Baker's Daughter. Obesity, Anorexia Nervosa, and the Repressed Feminine*. Toronto: Inner City Books.

Young, Vernon, and Nevin Scrimshaw

1971 *The Physiology of Starvation*. *Scientific American* 225(4):14–21.