

Perfect Girls, Starving Daughters

The Frightening New Normalcy
of Hating Your Body

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Extract

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1. Perfect Girls, Starving Daughters

There is a girl, right now, staring in a mirror in Los Angeles, scrutinizing her widening hips. There is a girl, right now, spinning like a hamster on speed in a gym on the fifth floor of a building in Boston, promising herself dinner if she goes two more miles. There is a girl, right now, trying to wedge herself into a dress two sizes too small in a Miami shopping mall, chastising herself for being so lazy and fat. There is a girl, right now, in a London bathroom, trying not to get any vomit on her aunt's toilet seat. There is a girl, right now, in Berlin, cutting a cube of cheese and an apple into barely visible pieces to eat for her dinner.

Our bodies are the places where our drive for perfection gets played out. Food is all around us, as are meals and the pressure that goes with them. Well-intentioned after-school specials teach us, from a very young age, how to purge our snacks. We are inundated with information about “good” and “bad” foods, the most effective workout regimens, the latest technological advancements in plastic surgery. We demand flawlessness in our appearance—the outer manifestation of our inner dictators.

To some degree, this makes sense. People in general like to look at a pretty face—which means they also like to be friends with a pretty face, do business with a pretty face, and marry a pretty face. Attractive people are desired and coddled in our society; they have an easier time getting jobs, finding boyfriends and girlfriends, getting parts in music videos, simply getting the average waiter's attention.

Even smart girls must be beautiful, even athletes must be feminine. Corporate CEOs, public intellectuals, and even accountants must be thin. Lorie, an eighteen-year-old from Portland, Maine, wrote, "Everyone wants to be skinny, because in life the skinny one gets the guy, the job, the love." A ten-year-old girl I interviewed in Santa Fe, New Mexico, broke it down for me even further: "It is better to be pretty, which means thin and mean, than to be ugly, which means fat and nice. That's just how it is."

The body is the perfect battleground for perfect-girl tendencies because it is tangible, measurable, obvious. It takes years to achieve a first in our degrees, but stepping on a scale can instantly tell us whether we have succeeded or failed.

The cruel irony is that although we become totally obsessed with the daily measures of how "good" or "bad" we are (refused dessert = good; didn't have time to go to the gym = bad), there is no finish line. This weight preoccupation will never lead us anywhere. It is a maniacal maze that always spits you out at the same point it sucked you up: wanting. We keep chasing after perfection as if it is an achievable goal, when really it is the most grand and painful of all mirages.

Beauty is the first impression of total success. Social psychologists call this the halo effect: We see one aspect of a person—such as her nice hair—and assume a host of other things about her—that she is wealthy, effective, and powerful. Looking good indicates control, dedication, grace. If you are beautiful, we learn, you are probably rich, lucky, and loved. You are probably sought after, seen, envied. You probably have ample opportunities for dates and promotions. Our generation does not generally equate beauty with stupidity the way our parents or grandparents sometimes did. Beautiful, to us, has come in savvy packages—Tyra Banks creating her own empire, Candace Bushnell writing her way into four-hundred-dollar Manolo Blahniks.

If you are beautiful, we have concluded, you can construct the perfect life—even if you are not brilliant, well educated, or courageous—because the world will offer itself up to you. By contrast, if you are overweight—even if you are brilliant, dynamic, funny, and dedicated—you have no chance at the perfect life. Thinness and beauty are the prerequisites for perfection, which to my generation appears to be the only road to happiness.

From a very young age, we see weight as something in our control. If we account for every calorie that we consume, if we plan our fitness schedule carefully and follow through, if we are exacting about our beauty regimen—designer makeup, trendy clothes—then, we con-

clude, we will be happy. And we can be beautiful if we are just committed enough—no matter our genetics, our bank account, or our personality—as we have learned from advertising and the American Dream ethos. This logic leads us to believe that, if we are unhappy, it is because of our weight and, in turn, our lack of willpower. We are our own roadblocks on this road to twenty-first-century female perfection and happiness.

The Jungian psychologist Marion Woodman has our number:

In an effort to be mature and independent . . . a woman tries to be more and more perfect because the only way she can alleviate her dependence on that judgmental voice is to be perfect enough to shut it up. Thus the opposites meet in a terrifying contradiction. As she runs as fast as she can for independence via perfection, she runs into her own starving self, totally dependent and crying out for food.

Was I just your average temperamental, overcommitted teenage girl in the middle of America? On some level, yes. I grew up in a middle-class household with a lawyer daddy, a homemaker/community volunteer/consulting therapist mummy, and a Nordic-looking, over-protective older brother (captain of the tennis, lacrosse, and basketball teams and maths genius). I rode my bike around the neighborhood, sold lemonade on the corner, and sneaked out of the house at midnight to toilet-paper big Victorian houses. The first time I told my boyfriend, who is from Bed-Stuy, Brooklyn, that I used to get to middle school by carpool, he scoffed: “I thought those only existed in television sitcoms!”

Colorado Springs, Colorado, was suburbia to the nth degree, home of strip malls, chain restaurant heaven, and Focus on the Family. *Normal* doesn't begin to describe how homogenous my hometown was.

Perfect Girls

But as in any American town with picket fences this white, something dark lurked underneath. Like *American Beauty*'s psychopathic real estate agent, the mothers I knew were often grinding their teeth and trying to outdo one another in landscaping and SUVs. The fathers—mostly doctors and lawyers—were socially accepted workaholics who attended big games and graduations still in their suits. The sons were

out on the field 24/7, dreaming of football glory. And the girls . . . were perfect.

Yet these perfect girls still feel we could always lose five more pounds. We get into good colleges but are angry if we don't get into every college we applied to. We are the captains of the basketball teams, the soccer stars, the swimming state champs with boxes full of blue ribbons. We win scholarships galore, science fairs and knowledge bowls, spelling bees and mock trial debates. We are the girls with anxiety disorders, filled appointment books, five-year plans.

We take ourselves very, very seriously. We are the peacemakers, the do-gooders, the givers, the savers. We are on time, overly prepared, well read, and witty, intellectually curious, always moving.

We are living contradictions. We are socially conscious, multiculti, and anticorporate, but we still shop at Gap. We listen to hip-hop, indie rock, and country on our iPods. We are the girls in hooker boots, wife beaters, and big earrings. We make documentary films, knit sweaters, and DJ. We are "social smokers," secretly happy that the cigarettes might speed up our metabolisms, hoping they won't kill us in the process.

We pride ourselves on getting as little sleep as possible and thrive on self-deprivation. We drink coffee, a lot of it. We are on birth control, Prozac, and multivitamins. We do strip aerobics, hot yoga, go five more minutes than the limit on any exercise machine at the gym.

We are relentless, judgmental with ourselves, and forgiving to others. We never want to be as passive-aggressive as our mothers, never want to marry men as uninspired as our fathers. We carry the old world of guilt—center of families, keeper of relationships, caretaker of friends—with the new world of control/ambition—rich, independent, powerful. We are the daughters of feminists who said "You can be anything" and we heard "You have to be everything."

We must get A's. We must make money. We must save the world. We must be thin. We must be unflappable. We must be beautiful. We are the anorexics, the bulimics, the overexercisers, the overeaters. We must be perfect. We must make it look effortless.

We grow hungrier and hungrier with no clue what we are hungry for. The holes inside of us grow bigger and bigger.

This quintessentially female brand of perfectionism goes on all over America, not just in suburban enclaves but in big cities, mountain towns, trailer parks. And perfect girls abound in Vancouver, Rio, Tokyo, and Sydney. Their compulsion to achieve constantly, to perform endlessly, to demand absolute perfection in every aspect of life is part

of a larger, undeniable trend in the women of my generation all over the world.

I satisfied my hunch that this was the case by consulting more than twenty-five experts in the fields of food, fitness, and psychology, interviewing twice as many girls and young women about their personal experiences (sometimes multiple times), and conducting focus groups with girls on the topic across the country. When I sent out an informal survey via e-mail to all the women I knew and asked them to forward it on to all the women they knew, I got more than one hundred echoing responses in my in-box. Here are just a few:

I am DEFINITELY a perfectionist. To the extreme. Everything I do has to be perfect—whether it be school, gymnastics, working out etc. I do not allow myself to be the slightest bit lazy. I think if I heard someone call me lazy, I would cry!

—Kristine, 22

Perfectionists were rampant at my all-women's high school, as were eating disorders. I think I can remember two women in my class who really didn't have body issues and I always admired them. I never had an eating disorder, but I definitely didn't get away without disordered ideas about food.

—Tara, 27

I have always been and always will be a perfectionist in almost everything I do. It creates a struggle within me to truly define or determine when I will be good enough.

—Melissa, 21

I do not consider myself a perfectionist, but others describe me that way. There is always room for self-improvement with my body, no matter how thin I am.

—Kelly, 28

People who know me call me an overachiever. I am hard on myself. My body fits into this mentality because I'm tall, long, lean, but that is the result of strict diet and lots of exercise.

—Kathleen, 28

I am quite a perfectionist. If I put on weight, I would be very upset. I would see it as a sign of failure on my part to control myself.

—Michelle, 24

Our bodies, our needs, our cravings, our sadness, our weakness, our stillness inevitably become our own worst enemies. It is the starving daughter within who must be shut down, muted, ignored . . . eventually killed off.

Starving Daughters

A starving daughter lies at the center of each perfect girl. The face we show to the world is one of beauty, maturity, determination, strength, willpower, and ultimately, accomplishment. But beneath the façade is a daughter—starving for attention and recognition, starving to justify her own existence.

The starving daughter within annoys us, slows us down, embarrasses us. She is the one who doubts our ability to handle a full-time job and full-time school. She gets scared, lonely, homesick. She drinks too much, cries too loud, is nostalgic and sappy. When neglected, she seeks comfort in cookies, coffee ice cream, warm bread—transgressions that make the perfect girl in us angry.

The starving daughter emerges in midnight confessions, a best friend's sudden tears, a flatmate buried in mountains of covers, shades drawn, eating ice cream in the middle of the day, and watching *Buffy* reruns in the dark.

Starving daughters are full of self-doubt. We don't want to worry so much about making other people happy but feel like we can never say thank you enough times, never show enough humility, never help enough, never feel enough shame. We feel guilty. We fear conflict. We are dramatic, sensitive, injured easily. We are clinging to all kinds of attachments that, in our minds, we know we should let go of, but in our bodies, we feel incapable of relinquishing. We are self-pitying, sad, even depressed.

We are tired of trying so hard all the time. We feel like giving up. We feel hopeless. We want love, acceptance, happy endings, and rest. We wish that we had faith, that we weren't ruled by our heads and could live in our hearts more often. We want to have daughters—little girls who will love us unconditionally. We steal small things, such as chocolate bars and bras—that make us feel special

for just a moment. We try to fill the black holes inside of us with forbidden foods. We never feel full. We always feel cold. We starve for a god.

We don't like to talk about this part of ourselves. Our whole lives, we have received so much affirmation for the perfect part that the starving-daughter part feels like an evil twin. Sometimes we can even convince ourselves that the sadness, self-doubts, and hunger don't exist, that we *like* to be this busy, that we *like* to eat small, unfulfilling portions or work out constantly.

For a while . . . but then the phone doesn't ring when we want it to or we get passed over for a job or a fellowship. Then the starving daughter makes herself known like an explosion. We collapse from exhaustion, or pick fights with our boyfriends or families, or sob inside the locked bathroom stall. Some girls experience their deep sadness in going on binges (food or alcohol), sleeping all day, sleeping around, buying a lot of clothes they don't need, ignoring professional or relational opportunities, dropping out of the race altogether. Some of my best friends have retreated inside themselves in this way, refused help, wasted away, or cloaked themselves in excess weight. We get mono and can't move for weeks. We hate losing control. We hate being "wimps." We fight these breakdowns, but the starving daughter emerges, young and scared and sick of our shit.

Young women struggle with this duality. The perfect girl in each drives forward, the starving daughter digs in her heels. The perfect girl wants excellence, the starving daughter calm and nurturance. The perfect girl takes on the world, the starving daughter shrinks from it. It is a power struggle between two forces, and at the center, almost every time, is an innocent body.

The Art of Diagnosis

The degree to which women channel their anxiety and ambition into their bodies varies. Some are subtle about the strain between their drive and vulnerability. They would rather pretend that they are above the inane calorie counting or messy bingeing and purging that other girls do. They would prefer to be skinnier but are not going to starve themselves to get there. That would be embarrassing.

Others go through peaks and valleys of obsession, spending months at a time churning through a cycle of destructive self-talk about how unsatisfied they are with their body size and shape, how lazy and weak, then rebounding when they get too busy or too in love

to think so much about their imperfections. Their body obsession is seasonal, tolerable, easily brushed under the rug.

I'm one of the girls who has been on the edge of an eating disorder but lucky or scared enough that I have not crossed the line. Yet since the age of about sixteen, I have felt as if I have a common cold. It's sometimes worse, sometimes better, and I always have this underlying fear that the cold could lead to a more serious, even deadly disease. Sometimes I feel worse about my body than others, but I can generally muffle the nasty bitch in my head who tells me that my butt is too big or my stomach too round. She doesn't scream the way she does at some of my friends who have full-blown, diagnosable eating disorders.

There are currently three eating disorders in the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-IV)—the big book that psychologists use to label what kind of crazy everyone is. They are anorexia nervosa (which made its DSM debut in 1980), bulimia nervosa (1987), and binge-eating disorder (1994).

Anorectics starve themselves until they are 15 percent or more below a normal body weight for their height and lose their periods. Even when they are skeletally thin, many of them still see themselves as fat—a phenomenon called “body dysmorphic disorder,” which scientists are just beginning to understand is associated with blood flow in the parietal cortex of the brain. The girls who develop anorexia are often poster girls for perfectionism: control freaks, straight-A students, big-time pleasers. Many are suspected of having a genetic predisposition as well, a component still being explored by clinicians and scientists. Anorexia nervosa is the most deadly psychological disease; 5 percent of those who have anorexia for up to ten years and 20 percent of those who battle the disease for twenty years eventually die as a result of it.

With both bulimia nervosa and binge-eating disorder, women eat large amounts of food, far more than they need, in one sitting. Bingeing is defined, in the DSM-IV, as eating an amount of food that is larger than what most people eat in a relatively short period of time, such as an hour or two. The size of a binge varies according to a woman's size, but the average is fifteen hundred calories. To be diagnosed as bulimic, one must vomit twice a week minimum.

Usually these women mistake emotional hunger for physical hunger. Women who suffer from bulimia take drastic and immediate measures to purge after a binge. Most commonly they make them-

selves throw up, but some use laxatives or extreme exercising to get the food (and the associated feelings of guilt, shame, sadness, and anger) out of their systems. Women with binge-eating disorder usually eat and wallow in their guilt, refraining from any of these alternatives.

Psychologists are beginning to realize that perfect girls don't like to be pigeonholed. A lot of young women suffer from combinations of these diseases depending on the time of life (or the time of day). Professionals often describe these women as suffering from bulimiarxia, though it is not an official diagnosis in the DSM-IV.

A grab-bag category called "eating disorder not otherwise specified" (EDNOS for short) does appear in the bible of psychological diagnosis and is applied to those who don't satisfy all the requirements outlined for the other diseases. Binge-eating disorder was distinguished from this category in 1994, when enough research indicated that it was a separate disease. Experts expect that the DSM-V may feature similar additions or, alternatively, a revision of the rigid restrictions on current diagnoses. For example, large numbers of young women binge and purge once a week and therefore don't "qualify" for a bulimia nervosa diagnosis. But clearly these women need the same intensity of attention as those who happen to purge once more. Many young women starve themselves but don't lose their periods, a requirement for the official diagnosis of anorexia nervosa. The very existence of the EDNOS option is a telling indication of the "art," as opposed to "science," of diagnosing eating disorders.

Those women who have a more extreme version of the common cold—i.e., a time-wasting, confidence-draining obsession, a binge and purge a month, a tendency to undereat—get lumped together in a category called "partial-syndrome eating disorder." They are not likely to see their neurosis as anything other than a nagging preoccupation. It's normal. In fact, you would be hard-pressed to find a woman who doesn't think more than she would like to about food and fitness. This is especially scary because repeated studies have proven that the gateway to a full-blown eating disorder is the simple trendy diet. "Oh, I'll just go on Atkins for a little while" quickly shifts into "If I'm not eating bread, I might as well cut out lunch altogether." In my informal e-mail survey of more than a hundred women, not one said that she was satisfied with how much she thought about her diet or her workout regimen every day. Each described too much obsession and too little action, the internal battle of the perfect girl with a militaristic agenda and the starving daughter who is too tired to satisfy her.

Another interesting tendency emerged in my survey. One of the early questions was “Have you ever had or do you now have a diagnosable eating disorder? Please elaborate, i.e.: When did it start? Are you still struggling with it? Please describe in as much detail as you are comfortable.” Over half the women answered “No, *but . . .*” and then went on to describe a time in their lives when they stopped eating, ran ten miles every day, started throwing up a few times a month, or sometimes, every once in a while, used laxatives. A few examples:

No, but I threw up food for a couple of days after I realized I had been gaining weight. I told my boyfriend (in tears) after blood came up, and he made sure I stopped.

—Jenna, 18

I never had a diagnosed eating disorder, but in seventh grade I attended an all-girls Catholic school and I stopped eating altogether. I guess I am still struggling with it because I still have a bad relationship with food.

—Debbie, 26

No, as a teenager I would crash diet, eat 800 calories a day, but I’m over that. 25% of the girls in my high school class had eating disorders and I didn’t want to be one of them.

—Lauren, 27

These women’s responses indicate that the way we have been socialized to think about food and fitness obsessions is to “otherize” them. It makes us feel safe to think that *those* girls, over *there*, the ones with the really serious problems and the really screwed-up families, are the ones who develop full-blown disorders. *They* are the ones who have to go the hospital and all that. *They* are the ones who need therapy. The rest of us are just dealing with the everyday “stuff” of being a girl in this society. We can live with it. (We don’t consider that we don’t *have* to.)

The media have contributed to this inaccurate notion that food and fitness obsessions are dangerous only when they reach a lethal level. Television shows and magazines show skin-and-bones shock photos of anorectic models, dramatize the glass jars filled with vomit hidden in bulimic girls’ closets, reenact their grotesque binges with actresses paid to look like wild animals. Unless we are seriously debilitated by our obsession—dropping out of school, fading away into

skeletal form, or throwing up after every single meal—the media make us feel as if we are okay. We aren't like *those* girls we've seen on TV. We're not *that* out of control.

The media have an obvious love-hate relationship with these disorders. Magazine editors know that publishing Kate Bosworth's latest diet sells copy, just as entertainment tabloid shows have proof that footage of skeletal women boosts ratings. The media moguls, however, don't like the idea of analyzing their own role in promulgating these images. In an analysis of the women's magazine coverage of eating disorders since 1980, the Drexel University communications professor Ronald Bishop found that "treating eating disorders as aberration allows the editor to deal with a serious problem while at the same time sustaining a discourse that contributes to the problem."

Many health care professionals—doctors especially—also encourage this me-versus-them attitude when it comes to eating and exercise pathology. Some are so weary of the concurrent epidemic of obesity that they have put on blinders when dealing with the other extreme. These doctors encourage rigorous exercise and restraint in diet, regardless of the profile of the individual patient. A good friend of mine recently had a doctor recommend that she avoid carbs for breakfast and eat boiled eggs instead, despite the fact that she solicited no advice on how to lose weight, has a history of anorexia, and was in for a routine checkup. The doctor was a woman. Another girl I interviewed talked about seeing a doctor in college, secretly praying that he would notice her dwindling weight, but as she left his office, he hollered after her, "Keep up the good work. Lookin' great!" My former gynecologist showed me the body mass index in her office and pointed out how many pounds I had to go before I was overweight. She didn't mention a thing about the other end of the scale. I wondered if she was trying to subtly let me know that I needed to "watch it" (as if every girl isn't already).

The media and so many doctors would have us believe that eating disorders are like the chicken pox: Either we have one or we don't. But there is no blood test we can take to confirm that we are misdirecting our energy, time, and money. There is no urine sample that proves your life is being watered down by your focus on the inanity of counting calories. Susie Orbach, a feminist psychologist who has helped thousands of women with her 1978 book, *Fat Is a Feminist Issue*, argues that eating disorders are many and varied in the way they manifest themselves, and women should not consider themselves "out of the woods" because they don't fit the textbook diagnoses.

I'm with Susie. Eating disorders are more extreme versions of what nearly every girl and woman faces on a daily basis—a preoccupation with what they put in their mouths and how it affects the shape and size of their bodies. We all have some degree of obsessiveness about food and our bodies. A lucky few feel guilty only for major holiday binges or when they haven't been to the gym in months. Some of us are relatively healthy, doing a decent job of avoiding the cultural influences that make us feel bad about ourselves, making choices about what we want to eat based on what we are hungry for, restraining or restricting ourselves only when it seems necessary. Others are somewhere in the middle—sometimes obsessing, sometimes coasting. And the majority are struggling somewhere beyond what we know is healthy but shy of having a diagnosable eating disorder. We struggle in limbo because we can convince ourselves that, as long as we don't hit starvation, full-blown self-hate, or weekly purges, we are average. We find comfort in being almost as screwed up as everyone else.

A History of Eating Disorders, CliffNotes-Style

One of the first questions that skeptics ask about the prevalence of eating disorders is: Haven't eating disorders been around for years in one form or another? This is nothing new, is it?

Yes and no. Joan Jacobs Brumberg, feminist author, Cornell professor, and badass historian, provides a thorough, surprisingly entertaining education in the social history of women's relationships with food, fitness, and their own bodies in her 1997 book, *The Body Project: An Intimate History of American Girls*.

Religious martyrs sometimes exhibited eating-disordered tendencies. Joan of Arc wouldn't have called herself anorectic, of course (the term hadn't been invented yet), but she did starve herself to make a point. Bingeing and purging was actually a communal ritual at some ancient Greek feasts, where people would rock out so hard and eat so much that they had to make themselves throw up. Yet this did not amount to diagnosis, just debauchery.

During the 1870s, however, doctors in France and England scrambled to name and develop treatments for a new crop of girls who came into their offices with the mystifying tendency to reject food altogether. Charles LeSac, from France, and William Withy Gall, from England, competed head-to-head to be the first to name the disease the starving girls suffered from. France won with

anorexia, perhaps because “Gall disease” didn’t catch on. Gall suggested that young women needed “parentectomies” in order to heal properly. Both doctors employed artists to draw before and after versions of their patients—eerie portraits of an anomaly that predicted a future epidemic.

It isn’t surprising that the Victorian era marks the birth of modern eating disorders. As they are today, control and thinness were characteristics of wealthy, attractive women. Food, by contrast, brought to mind sexuality, appetite, and indulgence—all things that the prim-and-proper woman was supposed to steer clear of. Victorian gals even converted to the ultimate modern-day eating disorder cover, vegetarianism, because meat was considered carnal. (Funny, my boyfriend says that there is nothing sexier than me taking a big bite of a cheeseburger.)

Around the same time in America, lunatic asylums were reporting the presence of starving girls suffering from “sitophobia”—literally translated from the Greek as “fear or loathing of bread” (and Atkins hadn’t even been invented!). The word *image* started appearing in American girls’ diaries in the 1920s—the same time movies became a public obsession. Brumberg explains that “girls learned that images could be malleable” from Hollywood actresses, who changed identities and looks as fast as moving pictures could be produced.

Anorexia would not become a household term in the United States until much later. In fact, Brumberg herself remembers returning to her eastern college dorm after her first day at a hospital internship and telling her roommates about this strange woman who was starving herself. That was 1965, and none of them had heard of *anorexia*.

I believe that Brumberg’s discovery is representative of the experiences of many women my mom’s age. I’ve been cornered frequently by middle-aged women who tell me stories, after they hear the subject of this book, about the mysterious sorority girl who used to throw up after meals or the disappearing sister whom no one knew how to treat. In the 1960s and most of the ’70s, *anorexia* and *bulimia* were still exotic and undiscussed. They were seen not as diseases so much as aberrations, phases, sounds: the roommate who always rushed to the bathroom immediately after meals, the little sister who always picked at her plate and avoided mealtimes, the best friend who got depressed and shrank to the size of nothing.

One of the first public memories of eating disorders that many middle-aged women have is of the singer Karen Carpenter, who first dieted in 1967 and by the fall of 1975 weighed just eighty pounds.

After collapsing on a Las Vegas stage and being rushed to the hospital, she was diagnosed with anorexia (though she suffered from a combination of fasting, purging, and laxative abuse). The headlines were a shock to the average American. Karen Carpenter died in 1983, though most of her fans mistakenly thought she had been cured.

The 1980s brought on the era of fitness and food obsession: Jazzercise, fad diets, consumerism, and extravagance. Eating disorders were still not diagnosed at the level they are today, but they became a familiar phenomenon, less a sound than an image: another Christie Brinkley ad, skinny blondes in rock videos, *Mommy & Me* workout tapes. Brumberg asserts that the biggest changes in our collective consciousness have been the increased tolerance for thinness and ambivalence about excessive exercise: "In the nineteenth century a woman running through public parks in spandex would be locked up." Today, of course, she is lauded.

Catherine Steiner-Adair, a specialist in eating disorder treatment and prevention at Harvard Medical School (*and*, as she adorably puts it in her e-mails, "the real world"), argued as early as 1986 that perfectionism was correlated with eating-disordered behavior. The "superwoman," she wrote, often has a "vision of autonomy and independence that excludes connection to others and a reflective relationship with oneself." In other words, we are so keyed in to achievement, over and above attachment, that we have a hard time being in relationships with others and are not conscious about our own bodies' needs. Steiner-Adair is now developing prevention models with great success, which she documents in her latest book, *Full of Ourselves: A Wellness Program to Advance Girl Power, Health, and Leadership*.

Dr. Janell Lynn Mensinger, a young researcher and a survivor of anorexia herself, has carried the torch of Steiner-Adair's work by developing a "superwoman scale" aimed to prove statistically that perfectionism, coupled with pathological independence, often leads to eating disorders. Though the results of her initial study were inconclusive, she writes, "We are forced to question whether the concept of the Superwoman as being doubly burdened has essentially become outdated for adolescents coming of age in the twenty-first century." I would say Superwoman is not outdated as much as eclipsed—we are perfect girls before we even have the chance to become "superwomen."

So no, eating disorders are nothing new. But yes, the extreme form that they have taken on is very much new and characteristic of our

time. Today you don't have a small percentage of white, upper-class women starving themselves; you have a generation of girls obsessed with the shape of their bodies, the number of calories they consume, and their fitness regimens. I challenge you to find a female between the ages of nine and twenty-nine who doesn't think about these issues more than she would like to, who doesn't feel racked by guilt and unsatisfied with her body a lot of the time.

Eating disorders no longer discriminate. Research suggests they now affect poor women and women of color in nearly equal numbers. For example, Dr. Ruth Striegel-Moore, chairwoman of psychology at Wesleyan University, found that young black women were as likely as white women to report binge eating in a 2003 study. Two Latina women in the Intro to Women's Studies course at Hunter College that I teach stood in front of the class and confessed to having eating disorders. One, a working-class woman, the first in her family to go to college, admitted to making herself throw up multiple times a week so she can look more like her aunt, who has had liposuction.

Ours is a time of dramatic addictions. Besides textbook anorexia and bulimia, excessive exercising, plastic surgery addiction, and laxative abuse have also grown common. The "starving disease" is no longer whispered about behind closed doors but is sensationalized by media coverage of celebrities openly wasting away. Diet and fitness information is everywhere; messages of wellness and authentic health are nowhere. Fad diet headlines can be found on just about every issue of every magazine aimed at a female demographic. At home, women are surrounded by the latest cookbooks and health guides; they print new recipes off the Internet, but food is an indulgence they won't let themselves have in real life. Reality shows promote our dissatisfaction with ourselves and our lives: Extreme makeovers of houses, children's behavior, marriages, and careers are big business. We are conditioned to believe that everything is within our grasp, that the only thing between us and perfection is, well, us.

Yes, eating disorders have a long history, but what was once a strange and rare disease has become a modern and dire epidemic. Girls today grow up with the knowledge that part of their inheritance is a more gender-equal world but a sicker and more unhealthy one as well. They are trained early in the typical female language of guilt and shame at the dinner table: "Oh, I really shouldn't." They watch the women around them obsess and judge and despair. They hear them vomit and lament and deny. They sense their mothers' dissatisfaction

and self-hate and become younger versions of them, the perfect girls and the starving daughters of a broken culture.

The Brain Drain

The 7 million American women and girls currently suffering from diagnosed eating disorders are just the tip of the iceberg. A quantity of evidence shows that women in their twenties are increasingly vulnerable to out-and-out anorexia or bulimia. Beneath that evidence lie more women who are harder to diagnose but who show evidence of widespread shame, guilt, self-hate, obsession, and deprivation. This borderline behavior is what I am most committed to talking about in this book. I want you to see it for what it is—not a normal part of being a girl, not an acceptable way of moving through the world, but a destructive pathology that is stripping us of our potential. Obsessing over every little thing we put in our mouths may not lead to death or some of the other tangible side effects of diagnosable eating disorders (osteoporosis, infertility, depression), though it does take away our ability to control our own thoughts, our inalienable right to feel good about ourselves regardless of the size of our thighs. It takes away our time, our pleasure, our energy, our vision, our joy.

We are not our bodies. Our souls are not our stomachs. Our brains are not our butts. A lot of women have lost track of the truth that how we feel about our bodies does not have to be indicative of how we feel about ourselves. My friend's therapist recently asked her, "So how are you?" She answered, "Oh, I'm okay, feeling kind of fat this week."

"No, but how are *you*?" he asked again.

"What do you mean?" she questioned. "I just answered that."

"No, how are *you*?" he asked for a third time.

"I'm okay, I told you," she spat back, frustrated with what appeared to be a weird psychological game.

"You realize that you are not your body?" he finally explained. "You realize that your body is only one aspect of who you are?"

"Yeah, of course I . . ." She was stunned speechless.

This exchange was a revelation to me. I could feel completely fat and out of shape and gluttonous but say to myself, *Man, I feel bad about my body right now, but I feel great about my career and my relationships and my talents and my intellect and my . . . and my . . . and my . . .* Almost every girl I know lives as if how she feels about her body is representative of how she feels about everything

else. It doesn't matter how successful or in love or at peace she is in the rest of her life, if she feels overweight, she is unhappy.

You don't need to have a diagnosable eating disorder to be powerfully affected by these issues. If you spend precious time and energy worrying about your weight instead of your soul, you have been cheated. If you waste your sharp intellect on comparing and contrasting diet fads instead of on the state of the world, we are all cheated. Brumberg has identified body preoccupation as a dangerous "brain drain" on our society. We are the most highly educated generation of young women ever. We now outnumber men in law schools, are creeping toward the 50 percent mark in medical schools, and receive more Ph.D.'s than any generation of women scholars before us. Some of this, no doubt, is thanks to our perfect-girl mentality—the work of achieving is never done. But what is the point of all this learning if we don't use it to its full potential to make the world a better place? Some of us already have the yet-to-be-solved conundrum of how to raise kids and have a fulfilling career ahead of us. Why would we add to that mix the full-time job of worrying about our weight?

Even if you don't feel like you have a disease, the quality of your life is diminished if you think about food and fitness obsessively. That, in turn, diminishes the quality of all of our lives.