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Recovery

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ABSTRACT: Despite the increasing incidence of eating disorders, very few films have addressed these conditions in particular. What's more, most of the US-American mainstream fiction films that deal with eating disorders tend to be built on anachronistic clichés, hardly depicting their broad array. Furthermore, the traditional narrative structure of beginning, middle, and (happy) end misrepresents the erratic temporality of eating disorder symptoms as well as the nonlinear phases of recovery and relapse.

Recovery

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Despite the increasing incidence of eating disorders, very few films have addressed these conditions in particular and, what's more, most of the US-American mainstream fiction films seem to be built on anachronistic clichés hardly depicting the broad array of eating disorders. As a proof—however controversial and partial—of the dramatic and manifold presence of this health issue in our society, the latest, fifth edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5),¹ in 2013, has reclassified and expanded the types of eating disorders [abbreviated in the following as 'ED'], acknowledging ones which are less visible, either because they do not conspicuously mark the body or because they fit socially accepted obsessions and practices—e.g., strict diets, orthorexia, and overexercising.

I am particularly interested in looking at the cinematic misrepresentation of these conditions because it crucially

Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, DSM-5, ed. by American Psychiatric Association (Washington, DC: American Psychiatric Publishing, 2013).

sheds light on a discrepancy between the temporality of ED symptoms and the narrative of recovery. The latter often merely serves the purpose of framing the film's protagonists' dramatic development, namely the story of their ED experience, according to the traditional plot structure of beginning, middle, and end, which in most cases winds up in an implausible 'therapeutic happy end'. In this sense, 'to recover' meets the classic definition of 'returning to a normal state of health, mind, or strength', as if nothing happened 'in the meantime', and as if 'to heal' meant 'to forget'. Pointing out the entanglement between ED symptoms and the process of recovery itself is not a way to deny the condition, to push it back into a hidden and secret realm, where no one is around, but it is rather a proposition to find a different angle to read the 'externally' evident expressions of discomfort, especially when taking into account less easily detectable, less circumscribed nutritional disorders. Comparison of medical, psychological, and sociological explanatory models of eating disorders with one another shows that anorexia, bulimia, binge eating, and chronic dieting have not one single cause, but this is not the sense one gets from watching most films about ED. Not eating — overeating and binge eating mainly remain out of frame — is most often shown as a response to life stress or as corresponding to a desire to be more fashionable or more efficient. Even if statistics show that anorexia, in particular, afflicts mostly women, the focus on a single affected constituency not only marginalizes afflicted minorities, but also hinders understanding the complexity and multifaceted nature of the disorder, at the risk of reducing it to a contemporary form of hysteria.² In this connection, Abigail Bray illuminates how such a perspective fuels the risk

² Cf. Greta Olson, Reading Eating Disorders: Writings on Bulimia and

of considering women weak subjects that tend to be passive, narcissistic victims of the beauty ideals promoted by the media and the world of fashion.³

The expressive power of ED symptoms, conceived as a pathic history of the body in motion (as Aby Warburg would say), does not appear on screen. What the audience sees instead are bodies progressively wasting away. The spectator is given no hint of the asynchrony between daily life and the attempts of the ED-affected person to stop, to interrupt, and to alter time by shaping and reshaping, filling up, and emptying their body: a temporal dimension paradoxically linked to what is rejected, namely the everyday and corporeality. On the one hand, ED rituals build up a supposedly safe and private spot where time is suspended, hollow, detached from shared time; on the other hand, this temporality is organic, heavy, and 'physical', as it is paced by the rhythm of chewing, the speed of digestion, the compensatory vomiting or 'purging'. The food rituals create a delusional control over the flow of time, a way to fold and unfold time at will, and to daydream about unlimited and coexisting possibilities. This overwhelming tangle of desires and fears prevent the interaction among past, present, and future by disjoining every single experience under the influence of substantial mood swings.

In two of the most popular mainstream films that deal with ED, For the Love of Nancy (ABC, 1994) by Paul Schneider and the more recent To the Bone (Netflix, 2017), directed by Marti Noxon, temporality is rather flattened to fit a particular age, and it only counts for a certain kind

Anorexia as Confessions of American Culture (Frankfurt a.M.: Peter Lang, 2003).

³ Cf. Abigail Bray, 'The Anorexic Body: Reading Disorders', Cultural Studies, 10.3 (1996), pp. 413-29.

of character: a beautiful, white, smart, wealthy teenage girl affected by anorexia, who will, eventually, recover, thanks to the support of a charismatic male doctor. Despite the differences between the two movies, its two protagonists, Ellen and Nancy, embrace a similar journey of healing, which ultimately guides them across the threshold of adult age beyond which they will have to become an active part of society. This temporal window neither touches upon the socio-political dimension of ED, for instance, by questioning the broader frame of capitalist consumption, nor unveils the individual, morbid, fantasies linked to the object 'food' and the ways in which these fantasies can be an either visible or invisible obstacle in the interactions of daily life.

To the Bone confirms, for instance, a certain voyeuristic approach that spectacularizes anorexia, which remains the most represented form of ED in film, probably because it shows, together with obesity, the most conspicuous bodily effects. Unlike the latter, though, anorexia evokes and embodies, or better tries to disembody, a desire for control and a repulsion for the terrestrial and animal side of human nature. In Noxon's film — some of whose crew and cast reputedly had experienced ED, the filmmaker included we find at stake some simplistic, and surely not innocuous, stereotypes that smooth out the characters' identities and any probable inner conflicts over their will to be skinny. Their feeling, their affects, their morbid thoughts, their obsessive gestures are not brought to the surface, but rather appear as superficial as a fashionable tantrum. To the Bone tries to challenge traditional family values as much as the official therapeutic methods with which ED are being addressed, but these attempts do not really question the rhetoric around ED, and, furthermore, they do not escape gender and racial clichés. As Hadley Freeman has noticed, the 'unconventional' psychiatrist is a man, 'the nurse is a woman, Ellen's mother and her girlfriend are both self-obsessed, her father is absent but hard-working. The one male anorexia patient is wise and selfless in a way none of the female patients are, and he, along with the male doctor, helps to "save" Ellen'.⁴

Over the last years, journalists⁵ and academics from the social sciences, cultural and gender studies⁶ have been drawing attention to the way in which discriminatory assumptions are in play in and being validated by narrative representations of ED. But despite the longstanding debate about the negative influence of media on the proliferation of ED, there is very little research on the significance of the aesthetics employed in representing ED in narrative visual media.⁷ And yet, when cinema meets such a

⁴ Hadley Freeman, 'To the Bone Confirms There Are (Almost)
No Good Movies about Anorexia', Guardian, 12 July 2017
https://www.theguardian.com/film/2017/jul/12/to-the-bone-confirms-there-are-almost-no-good-movies-about-anorexia
[accessed 21 September 2018].

⁵ See Elisabeth King, 'Are Movies about Eating Disorders Fundamentally Uncinematic?', Pacific Standard, 14 July 2017 https://psmag.com/social-justice/how-to-make-a-movie-about-a-lonely-terrible-experience [accessed 21 September 2018]; Michelle Konstantinovsky, 'Eating Disorders Do Not Discriminate: Puncturing the Dangerous Myth That Only White Women Get Eating Disorders', Slate, 20 March 2014 https://www.slate.com/articles/double_x/doublex/2014/03/eating_disorders_and_women_of_color_anorexia_and_bulimia_are_not_just_white.html [accessed 21 September 2018].

⁶ See Roxane Gay, Hunger (New York: Harper Collins, 2017); Gitte Marianne Hansen, Femininity, Self-Harm and Eating Disorders in Japan. Navigating Contradiction in Narrative and Visual Culture (London: Routledge, 2016); Helen Malson and Maree Burns, Critical Feminist Approaches to Eating Dis/Orders (London: Routledge, 2009).

⁷ See Su Holmes, '(Un)twisted: Talking Back to Media Representations of Eating Disorders', Journal of Gender Studies, 27.3 (May 2016), pp. 1–16.

sensitive and persistent social problem, different aesthetic practices can dramatically affect particular kinds of audiences — for instance those who suffer from ED themselves as distinct from those who want to learn more about it. Films are not, or not only, meant to reproduce conventional conceptions of reality but they can go beyond medical statistics, pathological categories, and predictable ways of instilling empathy. In 2016, the writer and artist Jessie Kahnweiler directed the webseries The Skinny to sensitize people to those eating disorders like bulimia that tend to be less commonly represented than anorexia, since, despite their exponential rise, they are less conspicuous, that is, cannot be recognized as easily on the patient's body. Kahnweiler, who herself has been suffering for many years from bulimia, points out how films about eating disorders are not at all realistic since they don't reveal the disgusting and shameful aspects of binging, purging, and throwing up. Her attempt to move the issue out of the clinical space and into daily life by showing eating disorders in their ordinary, mundane environment where they become invisible — yet very present in the daily schedule of the protagonist — is a remarkable alternative to unrealistic plots with compulsively happy endings. Nonetheless, visibility and eating disorders are much more entangled than Kahnweiler brings to light in her intentionally grotesque depiction of bulimia. If Kahnweiler's provocation draws attention to shame and secrecy by overexposing bulimia symptoms, it uncovers only some of the numerous elements at stake in analysing eating disorders through both an individual and socio-political lens.

The question of how ED should be represented suggests a more general question: how to account for mental disorders, especially when the disorders' borders blur into

a chronic life background and their supposed symptoms approach what Lauren Berlant, within her theory of 'slow death', calls 'self-interruptive' gestures.8 In a similar vein, perhaps, a more detailed and useful way of accounting for the pervasiveness of ED could be found outside of those places where recovery officially takes place (clinics, hospitals, therapists). By insisting on the interior settings of the clinic or the family, films that deal with ED tend, in fact, to adopt a psychological point of view without enlarging their frame to the dimensions of production and consumption that are so central in neoliberal societies. Eating disorders touch, in fact, both the private and the public spheres and by doing so, they reveal transformations, obsessions, and contradictions of society at large. The paradoxical way, for instance, in which eating disorders are stigmatized while at the same time 'low-fat', 'healthy' food and dieting have become one of the most profitable businesses. Not to mention the medicalization of political issues through the discourses of public shaming disguised by a rhetoric of 'individual responsibility' and the introjection of control. In this sense it is interesting to look at the obsession with the body not merely as a form of individual as well as collective narcissism. In the words of Micki Mcgee 'the desire to invent a life is no longer evidence of narcissistic self-involvement or an emancipatory countercultural impulse, but rather is increasingly required as a new form of 'immaterial labour' — mental, social and emotional tasks — required for participation in the labour market".9 In this perspective, the desire to shape and con-

⁸ Lauren Berlant, 'Slow Death (Obesity, Sovereignty, Lateral Agency)', in *Cruel Optimism*, (Durham, NC: Duke University Press, 2011), pp. 95–119.

⁹ Micki McGee, Self Help, Inc.: Makeover Culture in American Life (Oxford: Oxford University Press, 2005), p. 24.

trol the body is yet another piece of the puzzle that in Silvia Federici's historical reconstruction of modernity from the seventeenth century onwards, sees body and capital as inextricably linked, 10 or to be precise, the female body and capital. Zooming out from the pathological frame in this sense is indeed not a way to relativize the severe medical consequence of eating disorders, but a way to read the macro- and micro-expressivity of their symptoms. A teleological narrative of recovery occludes a crucial aspect of the temporality of eating disorders, namely the experience of being condemned to a 'not yet', barred from recognizing one's self as part of a story in the name of a phantasmal true self still to be realized. It is perhaps in this sense that, once again, we should shift our gaze to the causes of the overwhelmingly gendered epidemic in the socio-historical roots of this phantasm.

Silvia Federici, The Caliban and the Witch: Woman, the Body and Primitive Accumulation (New York: Autonomedia, 2004).



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