Original Paper

Anorexia: the female identity from holy mysticism to the new social feminine mystique

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Abstract. In recent times, the word "meaning" has become increasingly popular as times of uncertainty and chaos awaken in society a need for affirmation of its values and beliefs. This article attempts to extend scientific existential psychology by revealing the vitality and creativity of experimental social psychology in terms of existentialism. It presents the results of studies carried out using Analysis of Lexical Correspondence (ACL) on letters of mystics of the past (Caterina Benincasa, Simone Weil) who are today considered to have been anorexic, and contemporary women who suffer from anorexia nervosa. Considering anorexia as a Culture Bound Syndrome (CBS), the research is part of the perspective of cultural social psychology and cultural psychiatry, and thus analyses the relationship between the culture of the epoch to which the writings belong and the ultimate ends for which the choice of fasting was made by the authors. Specific attention is given to the self-representation of these women, in light of the meaning of the sacrifice offered by them as a function of health-salvation, socially interpreted as an expression of "mysticism". This theme brings us to consider the evolution of the female role in Western history as well as the significance attributed to the body.

Key words: anorexia, identity, body-representation, cultural psychology, cultural psychiatry, experimental existential psychology, culture-bound-syndrome, feminine mystique, nihilism.

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INTRODUCTION Hoskins (2000, pp. 51-52) reflects that adhering to a radical constructivist epistemology entails enormous difficulties with the relationship between self identity, culture and discourse. The present article, in order to consider this issue, provides an example of research that integrates different symbolic orders, so that the meanings, constructed at both social and individual levels, are comprehensible. A central feature of Terror Management Theory (TMT; Pyszczynski, Greenberg & Solomon, 2000) states that an individual's cultural beliefs serve as a shield against fears concerning mortality by convincing individuals that they are worth more than mere mortal animals. Furthermore, according to TMT, our instinctive desire for survival represents the most fundamental of all human motivations from which other motivations derive. This basic drive for survival is channelled through a tripartite system which acts in a hierarchical fashion to take into consideration motives at different levels of abstraction. The tripartite, hierarchical system consists of: 1. direct biological motives (obtaining the biological necessities for life), 2. symbolic-defensive motives (controlling the potential for existential terror brought about by realisation of the impossibility of continued satisfaction of the self-preservation instinct), 3. self-expansive motives (growth and expansion of competencies and internal representations of reality). The reality of our physical constitution (our body) serves as a reminder that we are merely animals and that our lives are therefore finite. This reminder increases the need to value one's self-esteem and cultural values (Goldenberg, McCoy, Pyszczynski, Greenberg & Solomon, 2000). The present study demonstrates that existential concerns contribute to uneasiness with the

body, especially regarding food and also to pervasive concerns with how the body measures up to cultural standards, most obviously regarding women's appearance (Goldenberg, 2005). Contemporary society can be defined as a somatic society (Turner, 1992; Young, 1997) in which the body absorbs a great part of individual, cultural and political interests. Several social phenomena, from health problems to the new techniques of reproduction, form the basis of the central role of the body in social practices and public speeches. Individuals manifest and model their identity through their body. The body has become the elective place, enveloped by a halo of sacredness, where identity is negotiated. In other words, in post-modern society the body has become a project (Armstrong, 2000). A slim and pretty body is the goal to reach, forcing people to impose discipline and care on it. Physical activity, natural foods and every kind of diet are the instruments society makes available to individuals so they can realise their body project (Turner, 1996). Pushed to extreme, this project can result in eating disorders, which often lead to death. In this sense, anorexia is considered a "paradigmatic disease" (Shilling, 1993) which reflects post-modern sensitivity towards body perception (e.g., Furnham & Radley, 1989). Following TMT, Goldenberg, Arndt, Hart, and Brown (2005) suggest women's striving to attain a thin physique is fuelled in part by existential concerns. Restricted consumption is a self-regulatory framework, linked to the context of pressures for women to be thin and to avoid mortality salience.

The present research belongs to the realm of cultural social psychology, TMT, and psychiatry which, following the second cognitive revolution (Harré & Gillett, 1994) has witnessed increased dialogue between science and other forms of knowledge. Cultural psychology and cultural psychiatry recognize the fundamental importance of the symbolic orders responsible for the dynamics of interpersonal and social relationships which make up and transform the environment, so much so as to affirm that no one among the infinite number of subjects studied by psychology can be objectively considered neutral or independent from its cultural context (Bruner, 1990; Cole, 1996; Galimberti, 1999; Geertz, 1973; Gergen, 1973, Mantovani, 2000; Schweder, 1991). This research aims to be yet another instance of aperture between culture and psychology, explicitly evidencing the unavoidable position of philosophy and history of thought in the investigations which regard the conditions of human suffering.

1. ANOREXIA AS A CULTURE BOUND SYNDROME AND FEMININE

MYSTIQUE Anorexia has been considered an "ethnic disorder", that is a "cultural syndrome" (Culture-Bound Syndrome [CBS], Banks, 1992; Iancu, Spivak, Ratzoni & Apter, 1994; Katzman & Lee, 1997; Keel & Klump, 2003; Littlewood, 1998; Prince, 1985; Swartz, 1985). According to Bartocci (2000, 2004), applying the theoretical orientation of the CBS is fundamental in interpreting various supernatural forms (manifested in numerous and diverse cultures), especially when the concept is utilized in transcultural psychiatry in order to understand culturallyinfluenced psychopathology. In order to avoid the psychiatric associations of a 'syndrome' other terms can also be used such as 'culture-bound phenomena' or 'culturally patterned phenomena'. This means that supernatural beliefs and religious experiences can be interpreted with relatively less bias and placed within a individual perspective capable of evaluating the psychic dynamics involved in mental disorders. Such experiences can be placed within a precise epistemology, yet remain hermeneutically distinct. Consequently, it can be concluded that such transcultural methods are useful in developing a scientific procedure capable of evaluating the interaction between nature and nurture and thus study the psychological dynamics relevant to the development and formation of supernatural beliefs. Hood, Spilka, Hunsberger & Gorsuch (1996) argue that such research must be based on the idea that religious phenomenon is interpreted in terms of the status of ordinary subjects of knowledge which can be studied scientifically.

Gordon (1990) used the definition "anorexia as CBS", taking the idea from Devereux (1982) to indicate that anorexia is a psychopathological expression typical of Western culture. Although not all researchers agree on this conceptualisation, in particular Van't Hof (1994), who strongly challenges this concept, the importance of cultural factors seems to be underlined by the fact that the syndrome more often affects non-western women who are immigrants in the West and subjects living in countries that are westernising (Ford et al. 1990; Lee, 1995). In parallel, a number of scholars have underlined the need to study this phenomenon from various perspectives, not only the clinical point of view (Bell 1985; Bemporad, 1995; Bordo, 1993; Bruch, 1978; Bynum, 1987; MacSween, 1993; Orbach, 1986; Vandereycken, Hoek, 1992; Vandereycken & Van Deth, 1994). They suggest analysing the problem in light of a wider spectrum of considerations which place the cultural dimension at the forefront. In particular, Banks (1996, 1997) maintains that the body is one of the few areas on which women can exercise their power; therefore dying of starvation may be considered a form of protest and a cry for freedom. This leads us to examine family tensions as a significant element in the onset of eating disorders and their treatment. Food can be the issue which catalyses power issues within the family and reflects the power interactions existing at a social level (Selvini-Palazzoli, 1974). Thus, there is the need not to confine the analysis to the clinical indicators offered by the anorexic subject, but rather to go beyond these determinations, which cannot be escaped in any way, and consider the representations that come into play in the dynamics between individuals and society.

The importance to be attributed to socio-constructionist and cultural-psychological methodologies is due to two fundamental symbolic referents which are involved in anorexia: body and food. The "body" has a strong importance for individuals' identity formation, for their self-representations and for the perception of well-being influenced by quality of social relations (Armstrong, 2000; Turner, 1992, 1996). A natural perception of the body is not provided, but rather the perception of its presence as the product of social construction, and so its physical features are seen through cultural schemata (Mauss, 1950; Galimberti, 2005; Jodelet, 1975; MacSween, 1993). Following Foucault's (1976, 1984) teaching, Turner (1996), in addition, argues that the subjective area needs to be socially oriented. And nowadays body image is so strictly linked to health-beauty representations, social desirability and its ensuing advantages (Eagly, Ashmore, Makhijani & Longo, 1991; Feingold, 1992), that increasingly individuals feel the need to behave in a way which "builds" a "beautiful" body. On the one hand, the body is an endless "generator" of meanings; on the other it is itself a "social metaphor". In this sense anorexia can be considered a behaviour that communicates something to someone by utilising actions on the body rather than words.

Another fundamental cultural aspect involved in anorexia is food. The feeding-fasting relationship is loaded with great symbolic significance which mediates the social relationships of each and every civilisation or historical moment (Lupton, 1996; Rozin 1990). As indicated in a famous study on the reasons why individuals have certain eating habits, characterising different human groups, Lewin (1951) has shown that the dynamics regulating the meeting-around-the-food moment is the expression of complex symbolic orders which include the psychological aspects of the cultural horizon. Conviviality has accompanied the whole of Western history, recounting, through eating habits, the meanings underlying the act of sharing food according to certain rituals. The anorexic woman who refuses food, therefore, does not simply isolate herself from the family group, but also excludes herself from all those social occasions where sitting at a table takes on the value of a meeting. It is then possible to consider anorexia as a representation of the suffering these subjects feel within their universe of close relationships, internalizing a discomfort which is also experience on the outside – that is in their contact with society and the culture which

it produces. But together, since categories of meaning are involved – food and body – which are deeply rooted in social relationships, we can consider anorexia as a manifestation of cultural discomfort in a strict sense, related to the modalities through which society develops within its own non-coherent body-food structures, inside which individuals are trapped.

The theme of the feminine mystique, along with a long series of topics relating to aspects of behaviour and attitudes which in the past were defined as predominantly masculine, is raising significant interest today. In particular, however, the theme of mysticism brings into play deeper dimensions which have to do with aspects which find their roots in the history of Western Society and which have tied the condition of women to the total or partial exclusion of control of intellectual and spiritual power. The possibility of discovering the female experience within the social roles attributed to males is presently being explored by a growing number of scholars, in various fields of historical culture and social science. This article analyses the relationship between the expression of the feminine mystique through the body and anorexia, evidencing how women through somatic language express the contradictions intrinsic to the Western concept of salvation. That is, it describes how the deep and coherent ethical adherence, on the part of women from different epochs, to socially shared principles relating to the sense to be attributed to "existence" and thus to coping with life, has brought about the certainty of a contradiction: the pursuit of what is wished for is the cause of disapproval. In particular, the theme of female fasting and anorexia is analysed, scrutinizing a limited sector of language: that is the written testimony of women, past and present, who have refused food. In fact, with reference to the theme of the relationship between fasting and anorexia which we are analysing, if we consider the social dynamics which promote the desirability of limiting intake of food together with the deploration of reducing oneself to starvation, we see how much the representations which support the images of health-salvation and illness are constructed from strong cultural matrices (Bordo, 1997)1. And these matrices are differentiated according to the historic moment in which the language (which is seen as expressing a certain social conscience) is inscribed.

2. FEMALE CONDITION IN THE WESTERN PERSPECTIVE Making reference to the theories of Severino (1958, 1980, 1982), we consider as fundamental a concept which is precise yet at the same time capable of representing the entire history of Western culture: nihilism. The philosopher considers the matrix of Western thought to be totally inscribed in the Greek sense of becoming and of things, nihilistically understood as oscillating between being and nothing. This perspective describes human pain as depending on the representations with which it is defined and in particular by that which the sufferer is convinced he/she is. (Severino, 1985, 1988). Western thought, by defining the being as destined to annihilation, has attributed to it the most terrible faces of death, linking life to the anguish of the end of existence. The first form of remedy which Western tradition offered to such a vision was epistemic and metaphysical thought, which underscored the sense of absolute truth and an absolute being to which the contingent being is necessarily linked. The vision of one unchanging absolute being and the possibility of affirming incontrovertible existence permitted man, from Parmenide to Hegel, to consider life as a moment of passage, before and after which the certainty of eternity reigns. From certain and incontestable knowledge the social structures of the absolute State and of religion, from which the symbolic orders through which the shape of the contingent being is drawn, took form. Life was seen as a function of the afterlife, and the more it conformed to the rigid and immutable laws of social and moral good, the more salvation after death was guaranteed. In this perspective the role of thought

Among those who share this opinion in their important studies on the subject: Apfeldorfer, 1991; Bell, 1985; Bordo, 1993; Bruch, 1973, 1978, 1988; Gordon, 1990; Raimbault, Eliacheff, 1989; Szekely, 1989; Vandereycken, Hoek, 1992; Vandereycken, Van Deth, 1994; Wilkinson & Kitzinger, 1995.

and of the management of spiritual and temporal power was attributed to men, while women were left with the meagre role of handling secondary appurtenances relative to bodily survival. The appearance on the scene of veritable knowledge eclipsed the mythological tradition and with it the representations which united the female principle with the telluric divinity (Campbell, Eiseler, Gimbutas & Musès, 1991; Devereux, 1982; Neumann, 1956). With the Christian culture, imbued in the epistemic-metaphysical philosophical tradition, every dominion of the creative maternal divinity having been lost, and the absolute character of the transcendental dimension of the divine having been defined, the female function was transformed into a simple instrument of continuation of the original will of the Creator. The woman's belly became the site of procreation, the last echo of the original act which gave form to the contingent being.

From Hegel onwards, Western thought has witnessed the irreversible process of the decline of epistemic certainties and the incontrovertible character of veritative knowledge which instructed the immutable order of the world. With Nietzsche the certainty that the only incontestable element of knowledge is the total contingency of the being was definitively reached: beings spring from and return to nothing and no absolute being awaits them after death. The decline of the security offered by the immutable freed man from the rigid laws which governed individual and collective behaviour, opening the ethical horizon to the pluralism of democracy. In this slow process which sees culture once again coping with overcoming the tendency towards absolutisms, the predominant form of knowledge is more and more scientific-technological. The earthly truth has thus become the primary good, and scientific-technological knowledge demonstrates itself to be, more than any religion, that which guarantees the conquest of lifespans which are longer and longer and of higher and higher quality. In this cultural channel, where conventional, pragmatic, instrumentalist and positivist aspects take on great weight in the definition of what is to be wished, good is no longer absolute and transcendental, but hypothetical and tied to opinions. Salvation is transformed into mental and physical health and good into individual and social wellbeing. Health no longer regards the afterlife, but the quality and length of life on this earth, and no law exhorts us to worsen the conditions of the lives of individuals as a form of otherworldly investment. At the same time the woman's belly is no longer the last mystical bastion, and the discoveries relating to the technologies of test-tube fertilization and cloning have shown that sooner or later the uterus may become an organ destined to atrophy.

But it is precisely in the Western world, where the technology of well-being has thwarted the spectre of hunger, that women ever since the middle ages have escaped from the imperatives of the belly, through fasting. Both Anorexia and prolonged mystic fasting, if in one sense block the feasibility of procreation and thus render impossible the acceptance of new lives, in another express the refusal of the consummation of the existing being for the sake of life. Thus, on one hand the female belly refuses to function as guardian of the original nothingness from which new life springs, and on the other refuses to become the workshop of annihilation of that which already exists. In this contraposition we see a radical female expression towards the dominant culture, although it is also rash in as much as it takes on from that culture certain aspects considered desirable, which are then however taken to the extreme (i.e. death as a result of privation, or the risk of mutilation).

The mystique of ancient times is different than that of today. Mysticism is the expression of an attitude of profound adhesion to what is defined as "good"; "good" is the primary end to which all other objectives are secondary, and for which the necessary means are predisposed. Analyzing the ends for which the somatic dimension is supressed, the historical definitions of the sense attributed to the body as the instrument through which salvation is reached and what is believed to determine suffering is overcome, are brought to light. Given that women have been historically excluded from the cultural committment towards the construction of intellectual and spiritual remedies against suffering, they were relegated and tied to bodily functions which are

indispensable for life (Bordo, 1993). It is exactly through the body that women have expressed both the refusal of this exclusion and the adhesion to socially accepted values, unconsciously underscoring the contradiction inherent. The common definition of mysticism implies total abnegation and adhesion to divine will; but since God has always spoken through man, it is ultimately credible that those who made themselves spokesmen for the divine were thus men who took on great power over consciences through their words. Given this, radical obedience to divine will ultimately mean consenting to the construction of symbolic orders established by the human mind. Medieval mystics thus adhered with their ethical obedience to the power of epistemic metaphysical thought, finding in it the ultimate and transcendent end for which earthly life should be mortified. With the decline of epistemic-metaphysical thought this expression of mysticism is declining as well, but the concept remains in the unaltered social representations. Friedan (1963) offered a different image from that commonly utilized to represent mysticism, recognizing the peculiarity of the feminine mystique of the fifties and sixties. In her view, in that period the social image of women promoted a role of total subjugation to family life and the needs of the "other". The "good", for which women were to strive and for which total abnegation was required, was to be found within the confines of domestic life. From the seventies on the feminist movement and the changes in social structure radically modified that female image, and it is exactly in that period that the phenomenon of anorexia as a relevant epidemiological problem exploded. It is thus possible to hypothesize that women have expressed a new figure of the femminine mystique through said bodily symbolism. In taking into consideration this hypothesis this research has analyzed the self-representation of women, from different epochs, who made use of fasting as a means to achieve "good" and salvation.

Today leanness and health are the elements which ultimately hinge on one single axis, that is the concept of well-being; through this concept the means of improving the quality of life and thus its length are predisposed. But in the past, when Western thought developed its characteristic tradition, the concept of health was not identical to that of salvation; salvation was inherent to something other than the somatic sphere. Fasting thus took on a different value from that to which it is attributed today, as we are witnessing the decline of traditions. We intend to underscore in which different symbolic orders the will of women belonging to different historic moments, yet all drawn towards reaching health-salvation through bodily consumption, are inscribed. The conviction that salvation implies the annihilation of something is what supports the need to reduce bodily abundance, and according to what is considered as "saving", the ends for which the somatic dimension must be mortified are defined.

3. THE RESEARCH: SUBJECTS, DESCRIPTIVES OBJECTIVES, AND QUALITATIVE METHODOLOGY

Subjects: In order to investigate the mystic universe of female fasting, writings of Caterina Benincasa (Catholic saint, Siena, Italy, who lived in the late middle ages), Simone Weil (French philosopher, of Jewish origin, who lived in the first half of the nineteenth century), and women with anorexia of today were analysed.

Saint Caterina of Siena (Caterina Benincasa) was born in Siena in 1347, and died in Rome in 1380. She was the youngest of a large family. From her earliest childhood Caterina began to see visions and to practise extreme austerities and fasting. In her sixteenth year she entered the order of the Dominican Tertiaries. After three years of mystic visions and conversations with Christ, probably around 1366, she rejoined her family, began to serve the poor, to tend the most seriously ill (especially those afflicted with leprosy), and to convert 'sinners'. Though suffering constant and extreme pain, living for long times on practically no food save the blessed sacrament, she was continuously engaged in researching into the highest of spiritual insights. During the 1370 she had a series of divine manifestations, which culminated in a trance, in which she had a vision of hell,

purgatory, and heaven, and heard a command to leave her cell and enter in the public life. She began to dispatch letters to individuals in every social status, entered into correspondence with the princes and politicians of Italy, and was consulted by the papal legates about the affairs of the Church. In 1376, she went to Avignon and made such a profound impression upon the the pope that he returned to Rome (1377). After prolonged agony, she died (Rome, 29th April, 1380). The epistles of St. Caterina rank among the classics of the Italian language, written in the Tuscan vernacular of the fourteenth century; they are considered the most complete expression of Caterina's personality. The key-note to Caterina's teaching is that humans must ever abide in the "cell" of self-knowledge, which is the stable in which the soul may conquer eternity (see: Bell, 1985; Bynum, 1991). Caterina, who was canonized by Pio II in 1461, was proclaimed Patron of Italy by Pio XII in 1939 and Patron of Europe by Giovanni Paolo II in 1999, is today considered, by Bell (1985), to have been anorexic. According to Michel Foucault (1963, 1972), the values of the Catholic religion are different from those of psychoanalysis, and the same subject, with the same behaviour taken into consideration, can be recognised as a 'sainted doctor of the church' by some and as an individual afflicted by a painful psychopathology by others. The second important representative woman that we consider is Simone Weil. She was born in Paris in 1909. Her parents, both Jewish but not practising any religion, encouraged Simone toward manly virtues. Her philosophical pursuits began in her youth as she studied at the best schools in Paris and continued until her untimely death. She was a teacher, a political activist, and a mystic who searched for truth and ways to overcome the injustices of the world. Weil focused her philosophical inquires on social and political injustices and religious inquiry. She had her first mystical experience at the Solesmes Monastery as she listened to the monks chant. She later had another mystical experience in which she stated that Christ himself came down and took her. After these mystical experiences, Weil spent the rest of her life trying to discover God's will for her life and articulating the intellectual dimension of her research. In 1942, she was forced to flee to America with her family, to escape Hitler's invading army. After seven months, she left for England to join the Free French. She had begun to eat only what the French official ration allowed, and, when was diagnosed with tuberculosis, continued more and more to limit her food. She died in 1943 at Grosvenor Sanatorium in England at the age of thirty-four. Because of her extreme fasting, after her death it was ruled that she had committed suicide by starving herself, and, similarly to the case of St. Catarina, she was also defined as anorexic (Raimbault & Eliacheff, 1989). Weil's writing is fragmented and generally difficult to follow; her thoughts on religion are found in her essays and letters, where she relates Christianity to Greek Philosophy and where she talks of the need for sacrifice through an ascetic lifestyle which led to her untimely death.

The texts utilized are letters and writings considered as forms of communication which were directed personally to someone. The six volumes of the Epistles of Caterina Benicasa, edited by Piero Misciatelli (1940) were analysed; of the works of Simone Weil we considered were Notebooks, Waiting for God, Oppression and Liberty, The Love of God, Shadows and Grace, Greece and pre-Christian Intuition, Correspondence between Weil and J. Bousquet, The Condition of Workers, Letter to a Clergyman. The selection of the exerpts on which Analysis of Lexical Correspondence (ACL) was performed was made using a preliminary study where the entire text was first read, then analysed critically – i.e. biographies, critiques, historical context, and clinical analysis – for the sake of economy we omitted the biographies. The fragments extrapolated from the epistles of Caterina Benincasa and Simone Weil for analysis are phrases which make reference to alimentary needs (hunger, thirst, to starve, to be thirsty, hungry, thirsty), to gratification of said needs (eat, devour, feed, drink, gain weight, lose weight), to the refusal of gratification (fasting, abstain from food and/or drink, vomit (v), vomit (n)). Of the modern anorexics, letters sent to advice columns in national newspapers and magazines were used; every aspect of these texts was scrutinized. Separate ACL's were performed on all of the texts.

Descriptive objectives: The objects of the analysis concern the interpretative repertory [systems of terms recurrently used to characterize and to value actions and events (Potter & Wheterell, 1987), that we consider as the gleaming of wider symbolic systems, able to organize the sense of the human behaviour], subtending the construction of the self-identity in women who are today considered, by some academics, to have been anorexic and to have lived in different historic epochs, and modern women suffering from self-starvation. In order to investigate the universe of female fasting, letters of Caterina of Siena, Simone Weil, and female anorexics of today were analysed. This research comes into the view of Mary M. Gergen and Kenneth J. Gergen (1997); in fact a fundamental element in the analysis of mystic phenomena regards the identity which the subject attributes to itself; if we investigate the forms with which a person thinks about his own condition and position in the world, the motives for certain actions against the self come to light.

Qualitative methodology: The ACL is used in order to establish constant factors in systems of meaning, extrapolating them from symbolic data belonging to a specific linguistic context, respecting the criteria of credibility and validity, i.e. the possibility of replication, and the effective quantification of the object under consideration. From a statistical point of view, ACL is a type of factorial analysis; as textual analysis it is both a form of analysis of content, and a semantic quantitative analysis which utilizes the word as a unit of classification, applying analysis of correspondence (AC) for textual data (Doise, Clemence, Lorenzi, Cioldi, 1995, Krippendorff, 1980). Data was processed using the SPAD-T computer program (Sisteme Portable pour l'Analise des Donnees Textuelles by Lebart-Morineau).

3.1 RESULTS

In the fragments analysed from the writings of Caterina Benincasa and Simone Weil, which have as the dominating theme the concepts of fasting and hunger, clear references to self-representation appear, i.e. how these women considered themselves. In fact, the representation of their relationship with food was not independent from the idea of their identity and position in the world; the same semantic traces can be found in the letters of the modern-day women with anorexia.

3.1.1 The Identity of Caterina Benincasa

The total number of words used in the selected phrases, from *Epistles*, is 7,323 ("token"), among them 1,667 ("types") are distinct, with a proportion of 22.8 % ("types/token" / language richness). Lemmatisation was carried out on them with 501 lemmas found. The "equivalences" were then determined, by ascribing the synonyms to the same lemma. Frequency threshold "3" was chosen. Eventually, there were 137 analysable words. From the analysis four factors were drawn; on the basis of the explanation level of total inertia, 3 were considered, since, as the actual value histogram shows (see Figure 1), the graph tends to flatten beyond the fourth factor (12 % of total inertia is explained).

First factor "Vomit versus hunger" (table 1). This dimension shows the construct derived by the opposition between "vomit" and "hunger". The negative-semiaxis shows the sense about the refusal of the "filth" of the "sin", that must be "thrown up" by the "mouth" as the "vomit" through "to confess" to "priest". In opposition to this emptying operation, in the positive-semiaxis, there is the "hunger", that, because of its factorial position, means empty, or rather, lacking sin.

Positive Semi-axis	Co-ordinates	Abs.C	Relat. C.	Negative Semi-axis	Co-ordinates	Abs.C	Relat. C.
Hunger	.39	.8	.03	To return	-4.68	19.8	0.65
			To confess	-3.85	17.4	0.80	
			Sin	-3.35	14.2	0.68	
			Vomit	-4.12	10.7	0.53	
				Filth	-1.88	7.0	0.44
			To th	To throw up	-2.74	6.8	0.47
				Priest	-3.67	6.1	0.13
			Mouth	-2.2	2.6	0.10	
			Intellect	-2.01	2.5	0.26	
			To fear	-1.06	0.8	0.11	

Second factor "Eternal life versus bodily life" (table 2). This dimension shows the construct derived by the opposition between "vomit" and "hunger". In the positive semiaxis, "hunger" means the "nuisance" of the existential shortage to which it is possible to offer a solution ("to satiate") in the "eternal life" of "paradise" ("Christ's servants" aim), whose "light" and "perfection" eliminates the "darkness". In the negative semiaxis the "fast" is the exercise of "duty", "eve", "rule" and "discretion light", in the battle of "order" "against" "disorder" of "sinners", where the "body" is involved.

Table 2 Factor 2 "Eternal life versus bodily life"

Positive Semi-axis	Co-ordinates	C $Abs.$	Relat. C.	Negative Semi-axis	Co- ordinates	Abs.C	Relat. C
Eternal life	5.72	27.5	0.43	Body	-1.30	6.7	0.20
Nuisance	3.68	8.5	0.44	Sinners	-1.50	2.1	0.04
Sorrow	1.46	6.3	0.16	Eve	-1.99	2.1	0.10
To satiate	1.50	6.1	0.23	Fast	-1.13	2.0	0.15
Hunger	0.84	4.4	0.15	Duty	-0.98	1.6	0.08
Christ's servants	1.30	2.9	0.06	Discretion-light	-1.60	1.6	0.18
Darkness	1.98	2.1	0.06	Precept	-1.60	1.6	0.18
Paradise	1.23	1.9	0.08	Penance	-1.57	1.3	0.11
Light	1.16	1.3	0.12	Disorder	-1.43	1.1	0.10
Perfect	1.01	0.9	0.08	Order	-1.04	0.8	0.14
				Against	-1.22	0.8	0.15

Third factor "Body versus I-Caterina" (table 3). This dimension clearly exhibits that Caterina constructs her Self excluding the "body" from her identity. In fact, in the negative-semiaxis "body" is the concept where the summary of the precedent cultural dimensions is explained, and where the fight against the "sin" is engaged for "eternal life", through "penance". In the positive semiaxis, Caterina describes her self as "hungry-soul" that "looks for" the "health-soul" in "Christ" and in the "God's honour" (that doesn't "deceive" her), eating and drinking the "Christ-food" ("blood-wine").

Table 3 Fattore 3 "Body versus I-Caterina"

Positive Semi-axis	Co- ordinates	Abs.C	Relat. C.	Negative Semi-axis	Co- ordinates	Abs.C	Relat. C.
Hungry-soul	1.86	3.8	0.06	Body	-1.79	13.4	0.39
I Caterina	0.75	2.7	0.09	Eternal life	-3.44	10.5	0.16
Christ	0.47	2.4	0.10	Hedonism	-1.72	3.9	0.08
Christ-food	0.82	2.2	0.09	Nuisance	-2.14	3.0	0.15
God's honour	0.79	1.5	0.06	Sorrow	-0.99	3.0	0.07
To drink	0.87	1.3	0.04	Eve	-2.10	2.4	0.11
Blood	0.76	1.2	0.06	Discretion-light	-1.92	2.4	0.26
Wine	1.04	1.1	0.07	Precept	-1.92	2.4	0.26
Food	0.41	1.0	0.04	Fast	-1.10	2.0	0.15
To look for	1.14	0.9	0.04	Paradise	-1.19	1.9	80.0
To deceive	0.81	0.8	0.04	Penance	-1.80	1.8	0.14
Health-soul	0.59	0.7	0.03	Duty	-0.89	1.4	0.07
				Darkness	-1.53	1.3	0.04
				Disorder	-1.49	1.2	0.10
				Order	-1.18	1.1	0.18
				Beast's-food	-1.49	1.0	80.0
				Intellect-light	-1.15	1.0	0.16
				Sinners	-0.98	1.0	0.02
				Time	-0.97	1.0	0.07
				Against	-1.27	0.9	0.16
				Infinity	-1.23	0.8	0.27
				Prayer	-0.67	0.8	0.07
				To fatten	-0.96	0.7	0.02

Caterina Benincasa lived in a historical era where epistemic-metaphysical thought was dominant; the management of spiritual and physical power respected rigid hierarchical structures and absolutism, and the "good" life was governed by iron-clad rules which promoted renunciation and abnegation. The saint's fasting was thus strongly motivated by ascetic ends (Rampling, 1985). Throughout Epistles, Caterina starts by calling herself "I Caterina, servant and slave of the servants of Jesus Christ", thus underscoring both the value which was attributed to the humility with which one's calling must be announced to its recipient, and the faith to which one's identity must be entirely dedicated. We meet the saint from Siena in first person, "I Caterina", and as object, "me", when she underscores her condition as seeker of truth, driven by the hunger of the soul which would reach satiation in the afterlife, who must deal with the doubts deriving from the devil's deception. This segment of her discourse is important in that the saint does not simply consider herself as an individual who must confront the devil, but on the contrary reveals with this conceptual scenario the problem of the error which is settled in the heart of subjectivity. To trust in the honour of God who guarantees the absoluteness of revealed truth means denying subjectivity: the truth cannot be a dimension of the individual since he is an easy victim of doubt. The humility of being "slave of the servants of Jesus Christ" is thus not just rhetorical; the expression is substantial and refers to the absolute adhesion to the contents of faith to which the thinking subject must pledge allegiance every time he finds himself doubting, trusting in God to find comfort and remedy for his fears through prayer and total submission to faith. Caterina's mystique thus consists of combating the doubts which weaken faith in God; doubt is represented as being instilled by the devil; thus to keep him away it is necessary to deny the needs of the body, which must be mortified as easy prey for evil. Prayer together with penitence keep man "good" and certain of eternal life close to God.

3.1.2. The Identity of Simone Weil

The total number of words used in the selected phrases is 5,987 ("token"), among them 1,600 ("types") are distinct, with a proportion of 26.7% ("types/token" / language richness). Lemmatisation was carried out on them with 662 lemmas found. The "equivalences" were then determined, by ascribing the synonyms to the same lemma. Frequency threshold 3 was chosen. Eventually, there were 131 analysable words. From the analysis six factors were drawn; on the basis of the explanation level of total inertia, 3 were considered (11 % of total inertia is explained).

First factor "Fear vs labyrinth" (Table 4) This dimension shows the construct derived by the opposition between "fear" and the life as "labyrinth". The positive-semiaxis shows the sense about "fear", "desire" and "anguish", in opposition, in the negative-semiaxis, there are "imprudent" (as the human condition) and "labyrinth" (where the life ends).

Table 4 Factor 1 "Fear vs labyrinth"

Positive Semi-axis	Co- ordinates	Abs.C	Relat. C.	Negative Semi-axis	Co- ordinates	Abs.C	Relat. C.
Fear	5.89	36.5	0.81	Imprudent	-1.30	1.8	0.03
Containing	6.28	24.9	0.76	Labyrinth	-1.30	0.9	0.03
Desire	2.79	11.4	0.61				
Anguish	2.82	5.0	0.21				
Cause	2.08	3.2	0.10				
Annihilated	1.26	1.8	0.08				
Sorrow	1.06	0.8	0.08				

Second factor "The human life as labyrinth" (table 5). This dimension shows the representation (on the negative semiaxis) of the human condition: the human life is the history of an "imprudent" individual who "enters" in a "labyrinth", where there are "fear" and "misfortune".

Table 5 Factor 2 "The human life as a labyrinth"

Positive Semi-axis	Co- ordinates	Abs.C	Relat. C.	Negative Semi-axis	Co- ordinates	Abs.C	Relat. C.
				Imprudent	-6.69	50.6	0.89
				Labyrinth	-6.69	25.3	0.89
				To devour	-3.18	5.7	0.41
				To enter	-1.78	2.5	0.37
				Fear	-1.06	1.3	0.03
				Misfortune	-1.38	1.3	0.09
				To drink	-1.27	1.1	0.12
				Containing	-1.14	0.9	0.03

Third factor "Tantalo vs Christ" (table 6). This dimension shows the opposition between "Tantalo" ("hunger", "thirst", "to renounce" on the positive semiaxis) and Christ ("to save", "bread") (on the negative semiaxis).

Table 6 Factor 3

Positive Semi-axis	Co- ordinates	Abs.C	Relat. C.	Negative Semi-axis	Co- ordinate s	Abs.C	Relat. C.
Tantalo	1.51	3.8	0.07	Baptized-humans	-7.61	43.8	0.57
To renounce	0.98	1.4	0.05	To believe	-2.30	8.7	0.36
To try	1.45	1.3	0.07	Christ	-0.82	4.0	0.14
Hunger	0.38	1.2	0.06	Indication	-1.99	2.5	0.16
Thirst	0.82	1.1	0.05	To save	-1.61	2.3	0.13
Fruits	0.92	1.0	0.06	To die	-1.35	1.6	0.17
Effort	1.07	0.9	0.02	Pure-heart-humans	-1.29	1.5	0.02
Punishment	1.11	0.8	0.01	Bread	-0.51	0.9	0.04
				Fear	-0.80	0.8	0.01

Simone Weil lived during the era in which the decline of epistemic-metaphysical immutables became irreversible; after Nietzsche the school of thought which had as its object spirituality and the truth of faith became occupied "repairing" and "defending" the idea of God. Philosophy was defined as a beggar who knows he is in the inexhaustible human condition of Tantalus, because humanity bears an irremediable fault: that of being indebted. Philosophy, conscious of its own radical indigence and thus considering itself part of the human race, does not regard itself simply as a beggar among the rich, but maintains instead that all men are as unfortunate as it is. That is to say, that man in his essence is wretched who must renounce both spiritual and material goods, as they do not provide definitive salvation from death, but simply permit man to live better while knowing he must die. The debt man bears is the debt of being contracted with God by existing. It is paid off by giving back one's being to God. But suicide is not the solution; payment is made instead with the constant refusal of that which assuages hunger, just as in the case of Tantalus: man gives back his essence to God only by remaining alive while renouncing the satiation of bodily needs, painfully consuming himself to the last moment. Simone Weil's image of creation is thus that of the kenosis of God, which requires of creation not the reparation of itself, but of the creator, through renunciation. In this image we find the fundamental example to be followed, according to Simone, in Jesus Christ. Suicide is not a solution in that it is necessary to live, and, if God exists, it is necessary to give back the life he deprived himself of by creating us. Suicide implies that there is no divinity. The only remedy which remains is the example of Jesus Christ who gave back his life to its creator: life can be understood and thus lived only if we maintain the idea of God: Weil's mysticism consists thus of totally dedicating life to this idea and to its restoration, since if the idea of God were lost there would no longer be any reason to live.

3.1.3. The identity of the Anorexics

The total number of words used in the letters is 4,895 ("token"), among them 1,518 are distinct ("types"), with a proportion of 31% ("types/token" / language richness). Lemmatisation was carried out on them with 677 lemmas found. The "equivalencies" were then determined, by ascribing the synonyms to the same lemma. Frequency threshold 3 was chosen. Eventually, there were 135 analysable words. From the analysis six factors were drawn; on the basis of the explanation level of total inertia, 4 were considered (29.44% of total inertia is explained).

The first factor "The son/ daughter" (Table 7) appears as a very strong issue which nothing can oppose: it is the precious figure of a child accompanied by the feeling of "absence", which can be interpreted both as absence of what is wished for and as absence of the "strength" needed to "be able" to "play" with him/her, towards whom no maternal care is devoted. The first represented image is that of being an "unsuccessful mother".

Table	7 Factor 1	$"The \ son/daughter"$

Positive Semi-axis	Co- ordinates	Abs.C	Relat. C.	Negative Semi-axis	Co- ordinates	Abs.C	Relat. C.
				Son/daughter	-8.91	68.4	0.99
				Play	-7.12	21.8	0.97
				Failing	-2.15	3.3	0.71
				Succeeding	-1.15	1.7	0.24
				Strength	-1.13	1.6	0.37

In the second factor "A child who vomits rather than screams" (Table 8) two traits are opposed: the child who wants to be praised and the injured body which, instead of screaming, vomits. The contrast is represented on the one side by the situation of starvation that the child reduces herself to, and on the other, by the availability of food that allows her to be free to scream through vomiting. The first situation is on the positive semi-axis, where the anorexic woman defines herself as a "child" wishing to look like a "model" and at the same time feeling "ill" and wanting to go to a "specialised centre" to be treated. On the negative semi-axis her "relationship" with "food" shows up as an "escape" which "turns off"; on that depend the craziness of the "soul" and the "wound" of the "body", from which originates the "impotence" which produces the need to "scream", need that is then translated into vomit.

Table 8 Factor 2: "A child who vomits rather than shouts"

Positive Semi-axis	Co- ordinates	Abs.C	Relat. C.	Negative Semi-axis	Co- ordinates	Abs.C	Relat. C.
Magazine-TV	0.88	4.2	0.16	Food	-1.94	22.7	0.82
Anorexia	0.54	3.9	0.34	Relationship	-2.18	12.3	0.69
Photography	1.05	1.4	0.14	Escape	-3.09	7.0	0.72
Child	1.00	1.3	0.05	Turns off	-3.09	5.3	0.72
Specialised				Vomit			
Centre	0.62	1.2	0.08		-1.16	4.2	0.45
Ill	0.57	1.1	0.25	Shouting	-1.95	3.5	0.64
Model	1.04	0.8	0.19	Impotence	-0.98	2.3	0.38
Hunger	1.05	0.8	0.14	Injured	-1.70	2.1	0.55
Praises	1.05	0.8	0.14	Certain	-1.12	2.1	0.46
				Body	-0.57	1.7	0.22
				Crazy	-0.85	1.2	0.31
				Soul	-1.10	1.1	0.38
				Improper			
				relationship	-0.79	1.0	0.04
				Feeling	-0.56	0.9	0.26

The third factor "Child models and model daughters" (Table 9) indicates the anorexic women's wish to be part of the mystique of femininity (Friedan, 1963), that is the wish to be pretty and socially admired. The tension between the poles is between being a charming child and model daughter versus being starved: the "image" of "hunger" which sculpts the "body" of the "models" is continually "praised" by "television" and in "photographs".

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Table 9	Factor 3:	"Child	models an	d model	daughters"

Positive Semi-axis	Co- ordinates	C.a.	C.q.	Negative Semi- axis	Co- ordinates	C.a.	C.q.
Magazine-TV	1.63	15.4	.54	Model-daughter	-2.71	4.4	.13
Photography	2.07	6.1	.54	Fat	-1.60	3.6	.21
Imagine	1.94	5.3	.64	Diet	-1.12	3.0	.21
Hunger	2.07	3.5	.54	Eating	85	2.6	.28
Praises	2.07	3.5	.54	Bathroom	-1.76	2.5	.14
Body	.66	2.5	.29	Running	-1.45	2.1	.14
Model	1.76	2.5	.54	Starting	-1.06	1.8	.28
Anorexia	.36	1.9	.15	It-disgusts-me	-1.06	1.8	.11
Child	1.01	1.4	.05	Family	57	1.2	.16
Food	.44	1.3	.04	Onset	51	1.0	.20
Escape	1.17	1.1	.10	Normal-weight	-1.27	1.0	.18
Crazy	.73	1.0	.23	Beginning	86	1.0	.16
Attention	.90	.8	.08	Home	69	.9	.13
Worry	1.24	.9	.26	The-others	48	.8	.04
				Loneliness	39	.9	.30

The consciousness of modern anorexic women is based entirely on the significance of contemporary earthly life; the fundamental crux is no longer divine salvation, but health and social consent. The self-representations offered by these women are unravelled examining the figures of the "baby", the "good girl", the "spoiled child", and the "sick girl". The course of the disease is that which unites the infantile with the desire to be an adult who is admired like a fashion model, but which instead leads to the opposite result. What results from the testimony of these women is that the process of suffering which eventually drove them to lose control over their own bodies and nutrition initiated with a simple diet. The desire which moves them to an ever more rigorous reduction of food intake is that of looking like fashion models, to whom the press dedicates much social attention and recognition. The intent of looking like a cover girl is generated by the need to obtain consensus and admiration from family members and friends. But the desire to be a "good girl" who looks like a "model" brings about the opposite effect, i.e. that of being considered "spoiled" or "sick" girls. Their real identity is thus the dimension which must still be uncovered, through psychological care in specialized eating disorders clinics. Anorexia is therefore the aspect of identity which constructs a basic certainty, from which one must acquire the awareness necessary in order not to fall into the trap of desiring to appear as we think others wish to see us. In this light the eating disorders clinic becomes the "workshop" for the reconstruction of identity, when it is clear that a cry for help cannot be expressed through vomiting. During this phase it becomes evident that salvation can be defined as health, totally inscribed in the medical language promoted by our scientific-technological society.

The mystique to which anorexics of today fall prey is that which preserves desirability in the eyes of others; desirability which is strictly physical, and not that of the soul, as in the case of Caterina Benincasa. In fact, in contemporary culture the absence of transcendence means that the state of desirability is defined within the parameters of the body².

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The fact that traces of religious asceticism can be found in anorexic women of today, as the studies of Banks (1996, 1997) show, presents no conflict with the data herewith presented. What comes to light is that the disease begins, according to the anorexics in question, with dietetic, i.e. aesthetic goals. The primary goal is thus to receive social consensus; once they have fallen into the pathological condition, or as in some cases, are cured, some women can offer a more complex symbolic interpretation of their situation,

CONCLUSIONS If the mystique of Saint Caterina of Siena subjects the needs of the body to the penitence necessary in order not to distract the mind from God so as to reach eternal life after death, and if Simone Weil takes the mystique of mortification to such a radical end as to establish that one must consume oneself not for ones own unreachable salvation, but for the salvation of God, it is clear that the mystique of renunciation sees in this passage the irreversible decline of the significance of the mortification of the body in order to reach eternal life. Already the passage between the mystiques of Caterina Benincasa and Simone Weil describes the failure of will to save any aspect of man after death. Contemporary anorexics testify to this impossibility by not appealing to any form of transcendence in order to justify their renunciation. The ends which shaped the desire to construct a "good" identity in Caterina and Simone through the use of the body as the instrument of mortification undergo a transformation with contemporary anorexics which sees the means as becoming the primary end. The social values which describe the "desirable aim" establish that the body is no longer an instrument, but the end itself. The problem which anorexics bring to light by choosing the body as ultimate end, taking on behaviours very similar to those of mystics who in theory respected opposite theoretical principles, consists on one hand in the significance of being attributed to the body, and on the other in the fact that by doing so they must predispose strategies which in the end become a new mystique of renunciation. If earthly life is now the only corner of existence in which man may believe, the body becomes the theatre for all the scientific-technological strategies necessary so that it may prolong its capacity to survive. This implies that the cognitions which apply to it become more and more complex and vast; indeed, we are witnessing the development of a medical-technological image of the body. Women become the protagonists of this vision, as the traditional role of women has always been inscribed in the symbolic order of bodily care. Caterina and Simone refused this role by mortifying the theatre in which they were asked to play their female role (Bell, 1985; Raimbault & Eliacheff, 1989), taking on in a radical way, however, the same principles of thought promoted by the dominant culture of their epochs. Today women are expected to play a different role to that of the past; they are asked to renounce the monastic life consumed in relation to man and the family, and thus to appear on the social scene. But the social scene in its turn promotes visions of women which represent the technological sense of the body. It is thus that the image of the natural physical condition of women is no longer accepted, in that women are no longer bearers of symbolisms regarding efficiency and productivity; the lives of embarrassment and dissatisfaction of young women who feel the need to be able to control their bodies through dieting can be linked to this concept, as Chesters (1966) indicates. Control over food is the first form of rupture with the image of natural equilibrium; the body can also be constructed through eating. In addition, the reduction of the functions relative to procreation and the raising of offspring is represented by the demonstration of the possibility of modifying technically what is natural in women's bodies. In its primary aspects this is represented by the new techniques of assisted procreation, secondarily by the medicalization of the aesthetic figure. Thanks to surgery, breasts, hips, the belly, and buttocks, can no longer be dimensions which physiology allows, but must take on the cavities and rotundity that fashion establishes. It is that which adolescents, drawn towards an anorexic destiny, clearly express experiencing during the monthly cycle which regulates the fecundity of the belly in an extremely negative manner (Malson & Ussher, 1996). The call to appear on the social scene requires that "somatic costumes" be worn as clothes, which reflect the image of a body which is technically constructed and is thus totally material, predisposing means capable of sculpting the flesh in function to the role it takes on and the forms considered socially desirable.

which may be linked to religious mysticism or to the rites of initiation of the past, as Garret (1996) suggests in his sociological analysis.

The importance placed on aesthetics demonstrates this normative and demonstrative function. The social promotion of women must present itself with images which alienate as much as possible those of the past; the new woman, socially desirable, must thus be constantly alert, mystically carried away by the objective of not falling into the temptation to respect feminine mystiques by now considered outdated.

It is therefore once again women who demonstrate that every form of mystique, that is of radicalization of the strategies predisposed to reach culturally desired ends, in the end brings us to the opposite of that which is desired. To the certainty of faith responds the terror of doubt; to the need to end human suffering expressed by the figure of Tantalus the need to restore the idea of a God who does not know how to prove without a doubt his existence is counterposed; the quest for health and beauty is responsible for starvation. And all these contradictions are expressed by the refusal to accept the appeal of the primary need of existence: hunger.

REFERENCES

Apfeldorfer G. Je mange, donc je suis [I eat, therefore I am], Paris, Payot, 1991

Armstrong D. Social theorizing about health and hillness. In: Albrecht GL, Fitzpatrick R, Scrimshaw SC. (eds.) Handbook of social studies in health and medicine, London, Sage, 2000

Banks CG. Culture in culture-bound syndrome: The case of anorexia nervosa. Social Science and Medicine, 34: 867-884, 1992

Banks CG. There is no fat in heaven: religious ascetism and the meaning of the anorexia nervosa. Ethos, 24:107-135, 1996

Banks CG. The imaginative use of religious symbols in subjective experiences of anorexia nervosa. *Psychoanalytic Review*, 84:227-236, 1997

Bartocci G. World Psychiatric Association Forum: Culture spirituality and psychiatry. Current Opinion in Psychiatry, 13:525-543, 2000

Bartocci G. Modern techniques and psychobiological mechanisms underlying religious experience. *Mental Health Religion & Culture*, 72: 171-183, 2004

Bell R. Holy anorexia. Chicago, University Press, 1985

Bemporad JR. Self-starvation through the age: Reflections on the pre-history of anorexia nervosa. *International Journal of Eating Disorders*, 19: 217-237, 1995

Bordo S. Unbearable weight: Feminism, western culture, and the body. Berkeley, University of California Press, 1993

Bordo S. Anorexia nervosa: Psychopathology as the crystallization of culture, in Gergen MM, Davis SN. (eds.) Toward a new psychology of gender. New York, Routledge, 1997

Bruch H. The golden cage. The enigm of anorexia nervosa. Cambridge Mass, Harvard University Press, 1978

Bruch H. Conversations with anorexics. New York, Basic Books, 1988

Bruner J. Acts of meaning. Cambridge Mass, Harvard University Press, 1990

Bynum CW. Holy feast and holy fast: The religious significance of food to Medieval women. Berkeley, University of California Press, 1987

Campbell J et al. In all her names. Explorations of the feminine in divinity. San Francisco, Harper, 1991

Chesters L. Women's talk: food, weight and body image. Feminism and Psychology, 4: 449-457, 1994

Cole M. Cultural psychology. Boston Mass, Harvard University Press, 1996

Devereux G. Femme e mythe. Paris, Flammarion, 1982

Doise W, Clemence A, Lorenzi-Cioldi F. Rappresentazioni sociali e analisi dei dati [Social representations and data analysis]. Bologna, Il Mulino, 1995

Eagly Aet al. What is beautiful is good, but: A meta-analytic review of research on the physical attractiveness stereotype. Psychological Bulletin, 110:109-128, 1991

Feingold A. Good-looking people are not what we think. Psychological Bulletin, 111: 304-341, 1992

Ford KA, Dolan BM, Evans C. Cultural factors in the eating disorders: A study of body shape preference of Arab students. *Journal of Psychosomatic Research*, 334:501-507, 1990

Foucault M. La volonté de savoir [The will to know]. Paris, Gallimard, 1976

Foucault M. L'usage des plaisirs [The use of pleasures]. Paris, Gallimard, 1984

Friedan B. The feminine mystique. New York, Dell Publishing, 1963

Furnham A, Radley S. Sex differences in the perception of male and female body shapes. *Personality and Individual Differences*, 10:653-662. 1989

Galimberti U. Psiche e techne. Feltrinelli, Milano, 1999

Galimberti U. Il corpo. Feltrinelli, Milano, 2005

Garrett CJ. Recovery from anorexia nervosa: A durkheimian interpretation, Social Science and Medicine, 43:1489-1506, 1996

Geertz C. The interpretation of culture. Basic Books, New York, 1973

Gergen KJ. Social psychology as history. Journal of Personality and Social Psychology, 26: 309-320, 1973

Gergen KJ, Gergen MM. Narratives of the self. In: Hinchman LP, Hinchman SK. (eds.) Memory, identity, community: The idea of narrative in the human sciences. New York: State University of New York Press, 1997

Goldenberg JL. The Body Stripped Down: An Existential Account of the Threat Posed by the Physical Body. Current Directions in Psychological Science, 14: 224-228, 2005

Goldenberg JL, Arndt JHJ, Brown M. Dying To Be Thin: The Effects of Mortality Salience and Body Mass Index on Restricted Eating Among Women, Personality and Social Psychology Bulletin, 31:1400-1412, 2005

Goldenberg JL et al. The body as a source of self-esteem: The effects of mortality salience on identification with one's body, interest in sex, and appearance monitoring. *Journal of Personality and Social Psychology*, 79:118-130, 2000

Gordon RA. Anorexia and bulimia. Anatomy of a social epidemic. Oxford, Basil Blackwell, 1990

Harré R, Gillett G. The discursive mind. London, Sage Publications, 1994

Hood RW et al. The psychology of religion. London, The Guilford Press, 1996

Hoskins ML. Living research: The experience of researching self, other, and discourse. *Journal of Constructivist Psychology*, 13:47-66, 2000

Iancu I et al. The sociocultural theory in the development of anorexia nervosa. Psychopathology, 27: 29-36, 1994

 $\label{eq:compact} \mbox{Jodelet D. La représentation sociale du corps} \mbox{ [The social representation of the body]. Paris, PUF, 1975. } \\$

Katzman MA, Lee S. Beyond body image: The integration of feminist and transcultural theories in the understanding of self starvation. *International Journal of Eating Disorders*, 22:385-394, 1997

Keel PK, Klump KL. Are eating disorders culture-bound syndromes? Implications for conceptualising their etiology. Psychological Bulletin, 129:747-769, 2003

Krippendorff K. Content analysis. An introduction to its methodology. London, Sage Publications, 1980

Lee S. Reconsidering the status of anorexia nervosa as a western culture-bound syndrome. Social Science and Medicine, 42:21-34, 1995

Lewin K. Field theory in social science. New York, Harper and Row, 1951

Littlewood R. The Butterfly and the serpent. New York, Free Books, 1998

Lupton D. Food, the body and the Self. London, Sage, 1996

MacSween M. Anorexic bodies. London, Routledge, 1993

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Malson H, Ussher JM. Blood women: A discourse analysis of amenorrhes as symptom of anorexia nervosa. Feminism and Psychology, 6 505-525, 1996

Mantovani G. Exploring borders. London, Routledge, 2000.

Mauss M. Sociologie et antrhopologie [Sociology and anthropology]. Paris, PUF, 1950

Neumann E. Die grosse Mutter [The Great Mother]. Zürich, Rhein-Verlag, 1956

Orbach S. Hunger strike: The anorectic's struggle as a metaphor for our age. London, Faber & Faber, 1986

Potter J, Wetherell M. Discourse and social psychology. Beyond attitudes and behaviour. London, Sage, 1987

Prince R. The concept of culture-bound syndromes: Anorexia nervosa and brain-fag. Social Science and Medicine, 21:197-203, 1985

Pyszczynski T, Greenberg J, Solomon S. Why do we need what we need? A Terror Management Perspective on the roots of human social motivation. In: Higgins ET, Kruglanski AW. (eds.) Motivational science: Social and personality perspectives. New York, Psychology Press, 2000

Raimbault G, Eliacheff C. Les indomptables [The indomitables]. Paris, Odile Jacob, 1989

Rampling D. Ascetic ideals and anorexia nervosa. Journal of Psychiatric Research, 19: 89-94, 1985

Rozin P. Social and moral aspects of food and eating. In: Rock I. (ed.) The legacy of Solomon Asch: Essays in cognition and social psychology. Hillsdale, Erlbaum, 1990

Selvini-Palazzoli M. Self-starvation. London, Chaucer, 1974

Severino E. Aristotle and classical metaphysics. Philosophy Today, 2: 71-82, 1958

Severino E. Legge e caso [Law and chance]. Milan, Adelphi, 1980. [Fr. trans.] La loi et le hasard. Paris, Petite Bibliotheque Rivages, 1990.

Severino E. Essenza del nichilismo [The essence of nihilism]. Milan, Adelphi, 1982. [Ger. trans.] Vom Wesen des Nihilismus. Stuttgart, Klett-Cotta, 1983

Severino E. Temps et alienation [Times and alienation]. Critique, 45:181-190, 1985

Severino E. The earth and the essence of man, In Recoding metaphysics. Evanston, Northwestern University Press, 1988

Shilling C. The body and social theory. London, Sage, 1993

Shweder RA. Thinking through cultures. Expeditions in cultural psychology. Cambridge, Harvard University Press, 1991

Swartz L. Is thin a feminist issue? Women's Studies International Forum, 8:429-437, 1985

Szekely EA. From eating disorders to women's situations: extending the boundaires of psychological inquiry. Counselling Psychology Quarterly, 2: 167-184, 1989

Turner BS. Regulating bodies: Essays in medical sociology. London, Routledge, 1992

Turner BS. The body and society (2nd ed.). London, Sage, 1996

Vandereycken W, Hoek H. Are eating disorders culture-bound syndromes?. In: Halmi K. (ed.) Psychobiology and treatment of anorexia nervosa and bulimia nervosa. Washington DC, American Psychiatric Press, 1992

Vandereycken W, Van Deth R. From fasting saints to anorexic girls: The history of self-starvation. New York, New York University Press, 1994

Van't Hof SE. Anorexia nervosa: The historical and cultural specificity. Fallacious theories and tenacious 'fact'. Lisse, Netherlands, Swets and Zeitlinger, 1994

Wilkinsons S, Kitzinger C. (eds.) Feminism and discourse: Psychological perspectives. London, Sage, 1995

Young K. Presence in flesh. Harvard, Harward University Press, 1997