

STARVING GIRLS AND SKINNY BODIES

A Literary History of Anorexia



BY MORGAN PATTERSON

I have acted with honesty and integrity in completing this work and am unaware of anyone who has not.

Introduction

In September of 1842, a short story appeared in *Graham's Lady's and Gentleman's Magazine*, entitled "Sketch of a Case, Or a Physician Extraordinary." This piece, written by Caroline Kirkland, describes the case of a Mrs. Waldorf, who cannot eat or sleep and is suffering from general pains, and her doctor's subsequent treatment plan for her symptoms. The clever doctor diagnoses her at once but waits to reveal her ailment until he has already set her treatment plan in motion and Mrs. Waldorf begins to recover, implying that her best chance at a successful recovery relies on her doctor's ingenuity and an ignorance of her own health. The doctor clearly does not believe that Mrs. Waldorf is in any particular danger, despite her list of symptoms, and thinks her cure will be rather simple. And what was this mysterious illness that left Mrs. Waldorf terrified enough to visit the doctor at his own home? Well, nothing really, at least not according to her physician, but Mrs. Waldorf does seem to be cured by the end of the story thanks to Doctor R—'s extraordinary, we might say, prescription of Christian charity. As it turns out, Mrs. Waldorf's diagnosis was nothing more than a case of too much leisure time and frivolity – the only cure for which is, of course, philanthropy.

In just four pages, readers are provided with the fictional case of a woman who is clearly suffering and who's only recourse is to turn to a doctor who cannot see past her lifestyle of luxury and, instead of providing any kind of real medicine to his patient, seeks instead to solve her physical problems by reforming her social life. Doctor R— arrives at his conclusions quickly, stating that "He had found solitude, inactivity, late hours, suppers, coffee, green tea, music and books – with not one counterbalancing item of that labor – effort – sacrifice – which has been affixed as the unchanging price of health and spirits."[1] Since Mrs. Waldorf had so far

[1] Caroline Kirkland, "Sketch of a Case: Or a Physician Extraordinary." *Graham's Lady's and Gentleman's Magazine* XXI (1842): 188.

"walked through the world without ever discovering the secret of life," according to the physician, she is denied the option of bodily pain at once and assumed to be lacking in character, all because she had not experienced enough hardship in her life to suit the doctor's sensibilities.[2] This in and of itself is fascinating and perfectly represents issues of feminine physicality and body image in the nineteenth century, both in America and Britain, that I will discuss in detail later in this paper. However, what is really of interest to me here is the description of symptoms that Mrs. Waldorf provides at the beginning of the story and how they interact with this idea of Mrs. Waldorf that Doctor R—— instills in the readers.

When initially asked what her complaint was, Mrs. Waldorf responded, "Oh! a thousand things, doctor; my heath is miserable … I have pains in the right side – and such flutterings at my heart – and such lassitude – and such headaches – and sleep so miserably," before the doctor cuts her off to ask a question.[3] Mrs. Waldorf's symptoms are severe enough in her own mind to make her fearful of "a future evil" that she feels looming over her in her current state.[4] While she admits that the pains she feels are not very severe, Mrs. Waldorf does go on to say that she barely has the energy to dress herself in the mornings and "never ha[s] the slighted appetite for breakfast," beyond a cup of coffee.[5] Giving a timeline for her eating habits, Mrs. Waldorf states that after her morning coffee upon waking, her lunch is not until one o' clock at which time she has only a "tolerable appetite;" then dinner is at four, which she presumably does not eat as she claims that she "should not care if dinner were stricken from the day" as she is never hungry at such time.[6] She then takes green tea at seven and ends her day with supper at ten in the evening,

[2] Kirkland, "Sketch of a Case," 188.
[3] *Ibid.* 187
[4] *Ibid.*
[5] *Ibid.*
[66] *Ibid.* 188

by which time her appetite has returned, but she takes "nothing beyond a bit of chicken or a few oysters, or a slice of cake, and sometimes only a cracker and a glass of wine."[7] Certainly, Mrs. Waldorf has the occasion to eat often enough in the day; however, I am concerned more with the quantity and quality of her diet as she describes it.

While readers cannot be certain what Mrs. Waldorf eats at her luncheon, it does appear that lunch is the only meal that she actually seems to eat with an appetite, and considering her sickly feelings throughout the rest of the day, it can also be assumed that a "tolerable" appetite at lunch does not necessarily add up to a feast. So if one is to read this account of Mrs. Waldorf's eating habits literally, then it would seem that apart from lunch, on a particularly bad day, Mrs. Waldorf may only take coffee, tea, wine, and *a single* cracker. Taken into perspective, it seems unlikely that Mrs. Waldorf would ever be able to eat enough at lunch to make up for her apparent caloric and nutrient deficit throughout the rest of the day. No wonder she cannot even dress herself in the mornings and sleeps so fitfully; she would appear to be malnourished or, at the very least, undernourished. Mrs. Waldorf does not illicit the same reaction from her physician, as he seems mainly concerned that she takes too much caffeine – never mind that caffeine is an appetite suppressant, let alone a neural stimulant – and by the fact that she even has a supper at all – an apparent indulgence, in his mind.

The story, however, becomes stranger still as the doctor abruptly leaves for another appointment, leaving behind Mrs. Waldorf in his own home with instructions to go out to the garden and dig up some unfamiliar root there that will serve as her medicine. Of course, Mrs. Waldorf follows these instructions, as eccentric as they might seem, but she is never able to find the root requested. The doctor sends her home upon his return, promising to send along the

[7] Kirkland, "Sketch of a Case," 187-188.

medicine when he does – which "looked not a little like grated potato, and without the slightest disagreeable taste" – and sets a time for her to visit some friends of his in need of some kindness and attention.[8] The story progresses to show that Mrs. Waldorf's symptoms abate as she becomes busy with caring for her new less well-off friends. Whether or not her appetite returns or she merely stops noticing her symptoms because she is "much too occupied" to think of them, readers will never know and the doctor did not think to ask.[9] Mrs. Waldorf does acknowledge that she has been tricked into health as the story comes to a close, and Doctor R—— confesses his use of the placebo and states, in the final line, that he "could not think of sending [her] to the Pyramids, when there are not only pyramids but mountains of sorrow and suffering at home, which shun the eye of common charity, but which must be surmounted by just such heads, hearts and purses and those of Mrs. Waldorf!"[10]

I have chosen to begin with this story to illustrate the reality facing nineteenth century women of leisure when they came to doctors with real complaints only to essentially have many of their symptoms disregarded as trivial or, even worse, not regarded as symptoms of anything at all. In fact, in the story above, Mrs. Waldorf does not even report her lack of appetite as a possible symptom and only mentions her eating routines when prompted by the doctor; although the doctor only seems to find fault in the aspects of her diet that reveal her class status, as opposed to any of the actual health consequences of her food choices, or lack thereof. While this story is fictional, it would also have been instructive to the contemporary readers of *Graham's Lady's and Gentleman's Magazine*, acting as evidence, of a sort, that charity of body and spirit of mind can mean more to one's health than any medicine ever could – especially if that

[8] Kirkland, "Sketch of a Case," 189.
[9] *Ibid*. 190
[10] *Ibid*. 191

someone was a lady. As the author of "Sketch of a Case" was in fact a woman, it might be safe to assume that she had either experienced some interaction like this with a physician first-hand or had heard of someone else being so treated by a physician. It is impossible to know for sure, but the assumptions about women's health that this story provides were entirely all too common to be dismissed as mere fiction. When we consider that the Western medical profession did yet not have the proper language in 1842 to adequately assess any type of "disordered" eating behaviors, this type of interaction becomes incredibly telling and, therefore, incredibly important.

Anorexia, which I will discuss in greater detail in Chapter 1, was not a diagnosable disorder until 1873; therefore, we cannot look back at the case of Mrs. Waldorf and call her an anorexic. She was not. We can say, however, that she did exhibit what we would now call disordered eating patterns and that this was apparently normal enough at the time to not warrant any suspicion. In this paper, I would like to outline the ways in which women, even before the discovery of anorexia, were conditioned to believe they should not eat or should only eat in very specific and ritualized ways to be seen as beautiful, moral, and essentially worthy of love. In this way we might say that Mrs. Waldorf exhibits signs of what I will call pre-anorexia, or anorexic tendencies before anorexia officially came into existence. Victorian domestic fiction that features these types of pre-anorexic heroines serve a great historical function that fits my purposes here quite nicely: it grants entry into the Victorian middle-class female mindset in a way that other more conventional, "historical" primary sources for this time period do not. With my interest in the physicality of the female body and its interactions with the world in the nineteenth century, the literature produced by this era's women writers is sometimes the only space in which the female voice can be heard.

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I have always been fascinated with Victorian fiction – in particular, the ways in which Victorian women writers were able to subtly rework ideas of femininity and feminine agency in their fiction during a time in which women were allowed few avenues of self-expression and exploration. Beyond just a love for the literature of the nineteenth century, this fiction also serves a great historical function that fits my purposes here quite nicely: it grants entry into the Victorian middle-class female mindset in a way that other more conventional primary sources for this time period do not. With my interest in the physicality of the female body and its interactions with the world in the nineteenth century, the literature produced by this era's women writers is sometimes the only space in which the female voice can be heard.

In setting out to explore the physical space that women embodied during the nineteenth century and the ways in which they envisioned that space, it became impossible to ignore the reality of female characters' existence on a practical level, i.e. how they nourished themselves or were allowed nourishment in the novel. The more Victorian literature I read, the more interested I became with the gendered representation of food and eating. The nineteenth century provides an interesting moment in time in which the difference between genders was so clearly pronounced in nearly every aspect of life. For this reason, a rhetoric of gendered behavior, and for my purposes gendered eating, is now quite visible in hindsight. By exploring classic Victorian texts that deal largely with food or food abstinence, such as *Jane Eyre* by Charlotte Bronte and "The Goblin Market" by Christina Rossetti, alongside contemporary fiction that focuses exclusively on eating disorders like *anorexia nervosa*, such as the 2009 novel *Wintergirls* by Laurie Halse Anderson, I believe it is possible to begin to more fully understand the complicated relationship women have with the food they eat – both in the nineteenth century and the twenty-first.

What initially drew my attention to this phenomenon was memory of a book from my own adolescence. I could not help but notice that the Victorian fiction I held so dear read eerily familiar to contemporary adolescent fiction featuring young women suffering with anorexia, the disorder in which a person restricts their intake of food to fatally low levels. In the majority of Victorian domestic novels, the female characters, almost always in their late teens and early twenties, rarely appeared to directly interact with food; it was as if they were literally starving on the page. It was difficult to believe that a period of literature so well known for its intense attention to detail, and even its depictions of food, could manage to simply overlook the necessity for women to eat. For me, the absence of food and women eating in these novels spoke volumes about the expected relationship women were to have with food.

Despite the socialization of disordered eating behaviors, it became increasing clear that the self-starving women of the Victorian period were considered, at least to some extent, mad. Two separate discourses about women and their relationship to food then emerged in the nineteenth century: the medical discourse that viewed food abstinence in women as a fatal folly and the social discourse that contradictorily instructed women that, alongside a fashionable corseted hourglass figure, weakness and fragility were the essence of true femininity and feminine beauty. In essence, middle-class women were conditioned – by conduct book writers, novelists, fashion designers, trend setters, and so on – to starve themselves in order to maintain or advance their social status and prospects, and yet those that did so to an extreme were condemned as incompetent and potentially even frivolous by their male physicians. In this way, the "discovery" of anorexia served as a diagnostic tool for maintaining the social order that saw women as the weaker sex. In this paper, I will seek to explore how these two discourses evolved at the initial moment of anorexia's conception in medical knowledge and how the resulting

paradox actually worked to normalize anorexic behavior in women. Beginning my history in the mid-nineteenth century, I will establish how gendered beliefs about food and the body gained momentum throughout the century and how the process of anorexia's public social construction allowed for the "discovery" of anorexia in 1873.

To this end, I will use well-known and widely read Victorian texts as an entry-point for insight into the female mind, for there are few other resources written by women that deal quite so exclusively with contemporary (middle- and upper-class) women's issues, such as acceptable body image and social conduct. In addition to such texts as *Jane Eyre*, I will draw on popular conduct books and etiquette guides that detail the appropriate way for a lady to interact with food and the connotations of such women who forgo those rules. Used extensively in Victorian literary studies as a way of engaging with popular culture, conduct books, in many ways, were the precursor to the domestic novel as it came to be known in the nineteenth century. They no longer exist as a part of twenty-first century society in the same form, but for Victorian middle-class women, conduct books – such as *Domestic Duties* by Mrs. William Parkes (1829), *The Women of England, their Social Duties and Domestic Habits* by Sarah Stickney Ellis (1839) – would have been the go-to source for learning proper etiquette. Almost exclusively written by and for women, conduct books detail the appropriate behaviors for nearly all possible circumstances, and a knowledge of the social dos and don'ts for any given situation would have been a crucial quality in a respectable young lady. More importantly, almost every conduct book alludes to food, even if it does not discuss eating outright, strengthening the idea that unhealthy attitudes to food were disseminated widely through subconscious social cues.

Until now, the scholarly conversation surrounding anorexia has mostly revolved around the issue of modernity: i.e. how modern is anorexia? By this, I mean both that historians are

concerned with the timeliness of anorexia as a disorder, meaning that it is a *recent* development, and with why such a disease did not, or could not, "exist" prior to the modern era. Most scholars would say that anorexia is indeed a modern phenomenon. Historian Joan Brumberg and psychologists Walter Vandereycken and Ron van Deth, who have written the seminal histories of anorexia, for instance, do not believe that anorexia as we know it today could have existed in pre-modern times due to the "historical changeability of deviant behavior" which underlies mental disorder diagnoses and which rely wholly on contemporary cultural responses and norms.[11] Some historians like Rudolph Bell, however, would argue that anorexia has always existed in some form but the causes and rationales for it have changed alongside broader cultural changes.[12] Often viewing anorexia as a social reaction to patriarchy and feminine oppression, both Bell and Brumberg seem to use their histories as forms of feminist activism, and their main reasons for writing revolve around the need to change contemporary responses to anorexia and hopefully, therefore, create a more nuanced understanding of the disease's underlying societal causes.

In the 1988 *Fasting Girls: The History of Anorexia nervosa*, Brumberg explores how the modern disease of anorexia nervosa was influenced by secularization and medicalization of self-starvation practices and how people were talking about such practices (e.g. doctors, spiritualists, clergy, family members, and fans or supporters of fasting girls). In this way, Brumberg engages in a more traditional medical history, in the sense that she is looking to physicians and practitioners to mark broader cultural shifts in the understanding of self-starvation practices, whereas Bell, in his history *Holy Anorexia* published in 1985, plays the part of a psychologist and attempts to essentially diagnose medieval ascetic saints with a recognizable although

[11] Vandereycken and van Deth, *From Fasting Saints*, 10-11.
[12] Bell, *Holy Anorexia*

markedly different version of anorexia. In *From Fasting Saints to Anorexic Girls: The History of Self-Starvation*, originally published in 1990, Vandereycken and van Deth choose to look at the broader cultural significance of self-starvation practices over time, and their history, thus, singles out the *reasons* for self-starvation throughout time in the Western world, making the "patients" as opposed to the physicians their primary subject matter.

Despite their differences, the above scholars all sought to place anorexia in a historical moment – and an increasingly modern one. For my purposes, I am not interested in exploring the modernity context of eating disorders any further. The historians who have come before me have given a near exhaustive answer on this account, and I see no need to revisit it. Whether or not anorexia is modern is not the point of this paper, and the focus on the chronology and etiology of anorexia within history detracts from understanding the social function of its discovery and subsequent diagnoses in the late nineteenth century. Whereas past scholars have focused on anorexia as a disease entity, the goal of my study will be to provide a more comprehensive understanding of the relationship that women had to food throughout the nineteenth century, as represented by *anorexia nervosa* and its discovery. The paper that follows, then, will necessarily seek to establish how societal pressures and ideologies actually normalized anorexic behaviors in women while the medical community stigmatized such apparently "non-normative" endeavors.

In literary studies, the study of anorexia in Victorian fiction has focused almost solely on the way in which disordered eating in fiction serves as a mechanism for female characters' control and subjugation by the male figures in their lives and the way in which food intake, then, functions as a moral prescription of a woman's worth. Again, I feel that the critics who have come before me, such as Helena Michie and Anna Krugovoy Silver, have fully established this particular aspect of the role of food in Victorian fiction, and I see no need to explore it any

further. I am far more interested in the health context, both mental and physical, that such disordered eating habits represent in fiction and what they mean for women in a social context. In particular, I want to examine how this discourse of health, and of madness, serves to reinforce gendered beliefs about the abilities of women and their self-worth. In many ways, despite the obviously negative impact of "anorexic" behaviors on the mind and body, hunger in Victorian novels can serve as a space for a productive discussion about women's own role in their social control and obligations by exposing the interiority that made anorexia possible. In the past, anorexia has been discussed as something that has been done primarily *to* these female characters, but anorexia is, first and foremost, voluntary and it is important to look at the historical implications of that. By this I mean, that many literary scholars in particular have focused on the symbolic qualities of anorexia and the way that male characters exert control or influence over their female counterparts by reinforcing an idea that women do not or should not need food. This argument is inherently problematic in that it anachronistically utilizes a modern definition of anorexia to diagnose these types of heroines, which I will discuss in greater detail later, but more importantly, this type of argument privileges the idea of anorexia as a metaphor for social deprivation rather than focusing on the disease itself as it affects women and the way they eat in the real world.

By combining literary and historical methodologies, I believe that we will be able to see the initial process in which anorexia was normalized in society, which may give some clue as to why anorexia has spread the way it has in the past century and a half. But more important than any implications such a study might have on the future, I wish to discover the power of anorexia, both in society as a tool for labeling and categorizing "dangerous" women and as an individual means of rebellion and control. Drawing primarily on new historicism as both a method for

talking about literature and writing history, as well as post-structuralist tendencies of paranoia and suspicion, I ask that we return to anorexia's first appearance as a medical concern and ask ourselves not when and why it functions as it does but *how*: how, in fact, did anorexia and gendered beliefs about food and eating manage to become so important as to require a new medical language and terminology while simultaneously becoming apparently normal enough to not cause much attention or concern outside of the medical community. This is where the literature element plays an absolutely intrinsic role, for we cannot begin to know the minds of actual patients diagnosed with anorexia in the 1870s – this particular viewpoint is mostly lost to us in history – however, the writing of women who lived in the nineteenth century, when ideas about women and food were pronounced enough to draw attention to the need for a new type of medical classification, can act as a guide to understanding public perception of gendered (disordered) eating habits more broadly.

In dealing with issues of representation in literature, it is often essential for literary scholars to engage with history on some level. In fact, new historicism emerged in the twentieth century as a way to turn history – both history of literature specifically as well as History as a discipline – on its head by asking new questions about the relationship between literature and history. Notable new historicist Nancy Armstrong argues for a more historical approach to studying literature in her book *Desire and Domestic Fiction*. In it, Armstrong advocated for a history of the novel that is inclusive of history itself, meaning that the novel has a social role that cannot be entirely separated from history simply because it is "fictional." Because Armstrong wants to rewrite a history of specifically domestic fiction that does not exclude women from the political and economic spheres, Armstrong is ultimately concerned with the ways that other

literary scholars have overlooked the constructed nature of classifications such as gender.[13] Armstrong especially finds fault with the way this ignorance has denied Victorian domestic fiction, and fiction in general, the proper attention it deserves by assuming the answers to unasked questions.[14] If sexuality and gender, for example, are culturally constructed, then they necessarily have a history: choices have been made by individuals and society at large which have allowed for the formation of a gendered worldview, not the other way around.[15] Even the delineation between what is literature and what is not is arbitrary, Armstrong reminds readers, as the "distinction between literary and nonliterary was imposed retrospectively by the modern literary institution upon anomalous works of fiction."[16] Not only is history informed by literature, but Armstrong suggests that literature also helps to create and shape history by envisioning a type of ideal or appropriate life for readers to strive for; therefore, it is truly impossible, in her opinion, to separate history from literature.[17] A varied and interdisciplinary approach, then, is the best way to achieve an unassuming and inclusive narrative of the world and of literature.

As much as literature functions as history, history often looks much like literature upon closer inspection. In "The Burden of History" by Hayden White, who is both a literary critic and a historical theorist, White points out that the process in which history is actually created is often overlooked. White, like Armstrong, believes that "Many historians continue to treat their 'facts' as though they were 'given' and refuse to recognize … that they are not so much 'found' as 'constructed' by the kinds of questions which the investigator asks of the phenomena before

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[13] Nancy Armstrong, *Desire and Domestic Fiction: A Political History of the Novel* (New York: Oxford University Press, 1987), 7.
[14] *Ibid*. 7
[15] *Ibid*. 8
[16] *Ibid*. 9
[17] *Ibid*. 9, 21

him."[18] There is a tendency in History to be as accurate as possible by being as Truthful as possible, but the search for Truth, as opposed to truths plural, can place too heavy an emphasis on what is already known or expected, making it possible to disregard alternate ways of experiencing the world. If history is constructed by the choices historians make – much as literature is constructed by the choices of an author – and Truth is arbitrary, then history can be read and interacted with just as one reads a text. In other words, history, or at least our understanding of history, is interpretive and ever-changing. In "The Burden of History," White calls historians to embrace the artistic elements of history-making, rather than resist them. Since, as White states, "only history mediates between what *is* and what men think *ought to be* with truly humanizing effect," the historian can only remain relevant if they embrace the changeability, and readability, of history and, thus, allow history to unfold in new ways.[19]

For my purposes, both Armstrong and White reveal that history and literature need each other. We should not try to always understand the two disciplines as mutually exclusive, and we would, in fact, benefit from an integrated approach to understanding the world around us. In this paper, the choice to focus on anorexic behaviors before the actual discovery of anorexia in 1873 necessitates this link, in that literature provides one of the only consistent and coherent places in which views about women and their food can be found throughout the nineteenth century. As a discourse of anorexia and healthy relationships to food did not yet exist, fiction provides one of the few places that women in the early and mid-nineteenth century could actually talk about food as something more than a series of meals to be prepared for. Beyond that, domestic fiction was certainly, one of the few places in which women might read about normal – or abnormal – ways to interact with food outside of cookbooks and conduct manuals. In this way, Victorian fiction

[18] Hayden White, "The Burden of History," *History and Theory* 5, no. 2 (1966): 127, *JSTOR*.
[19] *Ibid*. 134; my emphasis

represents an ongoing process by which women learn to understand the food they either do or do not eat as a means for both self-identification and public perception: i.e. how does food shape one's own identity as well as society's acceptance of one's self. In the nineteenth century, and even today, food is never just food, and eating is often about more than just survival. Fiction, both past and present, allows us to explore the physical ramifications of that. In the Victorian domestic novel, at mealtimes, the body becomes a battleground and food a weapon.

Now that I have established a connection between literature and history, it is necessary to delve into the specific methodology that makes this paper possible. This paper functions very much as a history of disease – specifically of *anorexia nervosa*, which is of course a mental disorder; however, histories of mental disease are still a fairly recent development within historical scholarship and, therefore, require a bit of explanation. Charles Rosenberg, in discussing disease as a topic for historical exploration, states that "Disease should … be understood in context, as a time- and place-specific aggregate of behaviors, practices, ideas, and experiences," in which "'Experience' should be understood as including the biological as well as the cognitive and the emotional."[20] This means, essentially, that diseases are specific to a particular historical context, as they are at once a "biological *and* social phenomenon."[21] Rosenberg goes on to state that "it is a framework that makes it impossible to ignore the precise relationships between a suffering individual and the culture that provides meaning for his or her – necessarily idiosyncratic – pain."[22] As disease is, in and of itself, highly individualistic in that each person has a unique interaction with specific diseases, writing a history of disease can be extremely complicated. This is why most historians of disease have written histories of

[20] Charles E. Rosenberg,"What is Disease? In Memory of Owsei Temkin," *Bulletin of the History of Medicine* 77 (2003): 494.
[21] *Ibid*. 495; my emphasis
[22] Rosenberg, "What is Disease?," 495.

communicable diseases: they have symptoms which can more easily be pinpointed and charted throughout history and those symptoms are observable "facts" that can be measured on the body. With mental diseases, the trouble is, as practicing psychiatrist David Healy points out in his history of bipolar disorder, that "diagnoses depend on what people say" rather than any visible, bodily signs, and this means that "we have moved into a world in which illnesses are negotiated."[23]

Despite its obvious complexities, histories of mental diseases remain essential, if not urgently so. Since our understandings of mental illness change so frequently and erratically, one might ask if it is even possible to write such a history, and, if so, why we would want to. One answer to this is that, as Healy argues, histories of mental diseases are "about how we understand ourselves, about how we fit ourselves into our bodies or fit our minds into our brains."[24] In many ways, attempts to understand mental disorders are attempts to understand human nature. Healy explains that "[w]hatever we think about other diseases, when it comes to diseases of behavior, the capacity to conceive of a disease like manic-depressive disorder was all but completely constrained by our views of how humans functioned. … with how we view the self and its brain and issues of human responsibility."[25] If diseases are unique to the particular time and place – and even unique to each individual within that time and place – then it can sometimes be difficult to construct a history of a particular disease. Although, as Rosenberg states, "Once discerned and named, every disease claims its own history,"[26] "even if that history is not always defined in terms familiar to twenty-first century physicians,"[27] scholars and physicians still debate whether

[23] David Healy, *Mania: A Short History of Bipolar Disorder* (Baltimore: The Johns Hopkins University Press, 2008), 2
[24] *Ibid.* 2
[25] *Ibid.* 248
[26] Charles E. Rosenberg, "Foreword," *Mania: A Short History of Bipolar Disorder*, by David Healy (Baltimore: The Johns Hopkins University Press, 2008), xii.
[27] *Ibid*. xiii.

or not diseases have a "real essence that transcends the lived experiences of affected individuals." Healy is inclined to believe, at least in the case of bipolar disorder that "diseases [have] a reality in their own right."[28] Of course, as history tells us, things change over time, but it also tells us that some extremely important and basic things always stay the same. As Healy notes, "People have always fallen in love and been driven by ideals and have needed to find words to tell their children about what it means to be human. These continuities seem uncontestable."[29]

While it would be wrong to assume that we can diagnose people prior to the discovery of *anorexia nervosa* in 1873 with an eating disorder, it may also be equally wrong to assume we cannot understand them or what motivated their actions at all, as fellow human beings. More than that, anorexia, and other mental disorders like it, deserve to have their histories explored so that we might not only shed light on the current realities facing patients with anorexia today but also better understand human nature and the way the mind works. In some ways, histories like this one, like all histories really, help us to understand the way the world works on a human level. More to the point, the actual date of the discovery of anorexia is in many ways arbitrary. While the discovery allowed for anorexia's past to be realized and discussed in a productive manner, the fact that mental diseases, more so than any other types of disease, are enmeshed in the fundamental processes of how the brain works and society's role in those processes allows the historian to look to the past for comprehension of a mental disease through comparison to its precursors. As Healy argues about manic-depressive disease, "the issue of priority in the discovery … is almost irrelevant – this was a disease *clamoring* to be described [my

[28] Healy, *Mania*, 219-220.
[29] *Ibid*. 250

emphasis]."[30] I believe that the same can be said of anorexia in the nineteenth century – especially because I seek to chart a relationship between food and women and society that enabled anorexia, rather than the disease as an entity of its own.

Some understanding of anorexia and the medical community in Britain in the nineteenth century, however, is required before moving forward. In Chapter 1, I will briefly delve into the moment of anorexia's discovery, providing an outline of its chief characteristics and reception by various medical communities. In order to understand the significance of the doctor-patient relationship in Victorian England, consider, as Alison Winter did in *Mesmerized*, "how malleable and intertwined were notions of femininity and illness," how women gained "strength through weakness, and authority through submission," and even attractiveness through dependence.[31] When reading Victorian medical narratives of anorexia through this lens, it will become clear, I hope, how the medical community acted as a tool of social control, through the processes of diagnosis and treatment, in Victorian Britain, ensuring that women maintained an inferior social role and position.

After Chapter 1, I will alter my focus to the pre-history of anorexia, so-to-speak, and it will, therefore, be necessary to move back in time to the first half of the nineteenth century. Each subsequent chapter will then be oriented around an important theme in anorexia's story. In Chapter 2, I will explore the character of Jane Eyre as a pre-anorexic heroine and place her in a broader context of feminine starvation in the early and mid-nineteenth century. This chapter will largely be dedicated to uncovering social cues that encouraged self-starvation and conflated beauty with the look of starved bodies.

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[30] Healy, *Mania*, 54

[31] Alison Winter, *Mesmerized: Powers of Mind in Victorian Britain* (Chicago: University of Chicago Press, 1998), 214.

Anorexia, and therefore pre-anorexia, is necessarily an upper-class phenomenon. In order to willfully decide to starve one's self, one has to first have access to plentiful food. In order to understand the implications of this, it is important to first explore the English middle-class and their stake on society. England, and the broader Western world, underwent a period of frantic upheaval (war, scientific advancement, empire-building, etc.) at the end of the eighteenth and beginning of the nineteenth century, and it was during these decades in which the English middle-class was essentially created. The Industrial Revolution changed the nature of business, giving middle-class merchants the opportunity to gain wealth on their own terms and separate themselves from the hegemony of the landed gentry. People with newfound wealth were climbing the social ladder, closing the gap between themselves and the elite and effectively distancing themselves from the urban squalor of the working-class which they depended on for their fortunes.

Women, however, as a group had few opportunities of their own, as "Ideas of a woman's place were underpinned by legal, political and social practices which subordinated women" to their fathers, brothers and husbands.[32] For a middle-class woman, then, marriage – as one's access to financial stability and success – and religion – through philanthropic efforts which gave them access to work outside of the home – became incredibly important.[33] Because women were excluded from the public sphere, it became "absolutely vital that women should continue to behave in a traditional manner;" thus, motherhood reached cult-like status as an example of how women might contribute to society.[34] As we will see in the following chapters, the choices

[32] Leonore Davidoff and Catherine Hall, *Family Fortunes: Men and Women of the English Middle Class 1780-1850* (Chicago: University of Chicago Press, 1987), 25.
[33] *Ibid.* 18-25
[34] Linda Colley, "Womanpower," in *Britons: Forging the Nation 1707-1837* (Hartford: Yale University Press, 2012), 245.

women made in terms of feeding and clothing their bodies often stemmed directly from issues of morality, as it was a woman's job to be the moral center of English society. Every individual choice, therefore, was informed by the need to maintain this image in order to marry, advance their financial and social situation, and eventually procreate and thereby fulfill their service to British society. Thus, middle-class women were eager to secure their position within this moral framework of gender relations and, in doing so, set themselves apart as worthy, marriageable individuals with something to offer.

Transitioning from the early to mid-nineteenth century, Chapter 3 will begin with an analysis of Christina Rossetti's poem "Goblin Market," in which a fearfulness of food begins to develop alongside issues of class and gender as mentioned above. This fear of food translated directly into food reform movements in the mid-nineteenth century that changed the way people thought about their meals in relation to the body. This chapter will establish that the largely pre-anorexic social norms that governed women's lives in Chapter 2 migrated into specific ideas about the bodily effects of consuming different types of food, giving the concept of pre-anorexia a more tangible, food-based reality. For this purpose, I have chosen to explore the writings of vegetarian reform advocates, as Victorian vegetarians absorbed largely feminine ideals about food and eating in an attempt to renegotiate mainstream gendered eating practices and lend their movement much-needed authority.

Vegetarianism as a movement began in England in the 1840s and grew out of concerns surrounding food scarcity (famine and food crises), advances in food technology, dissatisfaction with animal agriculture and animal cruelty, questions of sanitation in food production, and concerns about reliance on imports of foodstuffs from other countries, and the like. Food has always been a marker or social status and identity, as I hope to explore more in Chapter 3, but

vegetarianism became a way of both saving money and encouraging a more healthful, vegetable-centered diet across Britain.[35] As the vegetarian movement worked to reinforce their ideas by utilizing typical gendered arguments about food, I will mainly be exploring how this actually worked to further bolster pre-anorexic societal claims on the female body.

Finally, in Chapter 4, beauty ideals related to slenderness, the construction of womanhood as ultimately weak and subservient, and fears surrounding the navigation of knowing what to eat and when converge to reveal the debate surrounding corsetry at the end of the nineteenth century. In this chapter, I will explore the ways in which corsetry became a corollary to anorexia that mirrored Victorian society's conceptualization of femininity through external, "artificial" manipulation of the waist.

In the Victorian era, much like today, an inherently unhealthy attitude towards the female form persisted as a means of social control. Women received a pervasive, informal social education about the ways their bodies were supposed to look and function, and access to substantial, healthy food was largely absent from that narrative. While anorexia may not have been discovered until 1873, the nineteenth-century society upheld long-standing, unrealistic ideals of femininity that acted as precursors to the disease itself, effectively conditioning women to believe that self-starvation was normal and necessary.

[35] James Gregory, "Introduction" in *Of Victorians and Vegetarians: The Vegetarian Movement in Nineteenth-century Britain* (London: Tauris Academic Studies, 2007), 1-20.

Chapter 1: The Discovery of Anorexia

Anorexia nervosa, as we now know it in the twenty-first century, is a mental disorder that distorts a person's ideas about their body and causes them to stop eating, almost entirely. Despite its reputation as a "new" disease, anorexia was first discovered, under the name *anorexia hysterica*, in 1873 in Britain and France. While the disorder was discovered at the end of the nineteenth century, it took the passage of nearly one hundred years before the Western world became familiar with this increasingly common disorder. Initially, I wanted to know why there was such a large gap of time in the historical narrative of anorexia in the twentieth century, but that is a problem too vast to illuminate here. Instead, needing to know how such a malicious mental disorder continued to affect young women like myself, I chose to explore in the pages that follow the social construction of anorexia at the time of its discovery, hoping to perhaps elucidate the complex cultural and sociological concerns that fed, and continue to feed, the harmful discussion of an ever-slender and small feminine body.

Anorexia first made its appearance as a medical concern in 1873, when it was discovered almost simultaneously in England and France by Sir William Gull and Dr. Ernest-Charles Lasègue, respectively. In a paper he presented to the Clinical Society of London on October 24, 1873, Gull announced a new and "peculiar" disease that he had recently come across, mainly affecting only females between the age of six and twenty-three, which was chiefly characterized by extreme emaciation.[36] In outlining cases of this disease, Gull attributed all the symptoms to anorexia, literally meaning a lack of appetite,[37] "which led to starvation, and a depression of all the vital functions; viz., amenorrhea, slow pulse, [and] slow breathing."[38] While Gull had seen

[36] William Withey Gull, M.D, "V. – Anorexia Nervosa (Apepsia Hysterica, Anorexia Hysterica," Reprinted in *Obesity Research* 5, no. 5 (Sept. 1997): 498.
[37] Joan Jacobs Brumberg, *Fasting Girls: The History of Anorexia nervosa* (New York: Plume, 1989), 119.
[38] Gull, "V. – Anorexia Nervosa," 498.

cases in which the patients were able to reach a full recovery, he also noted that sometimes the disease was fatal, and in this case that "Death apparently followed from starvation alone."[39] In an earlier version of his paper Gull called this disease, *apepsia hysterica* – "apepsia" meaning indigestion – but abandoned this term for the more appropriate *anorexia hysterica* that Dr. Lasègue in France had utilized in describing similar cases of his own. Feeling that the term "apepsia" implied an inability to digest food or a biological rejection of food, Gull settled on "anorexia," stating that "The want of appetite is, I believe, due to a morbid mental state" without any cases of "any gastric disorder to which the want of appetite could be referred."[40] For the first time, anorexia became a "central and not peripheral" concern[41] – a disease unto itself and not merely a symptom of other medical complaints. Apparently anticipating that the association to hysteria would necessarily detract from the significance of such a disease in the minds of his colleagues, Gull indicated a personal preference for the qualifying term "nervosa," which would allow the disease to be applied to patients of both genders suffering from this nervous condition;[42] thus, *anorexia nervosa* was born. It seems, however, that *anorexia hysterica* remained the more popular nomenclature until the twentieth century.

Despite Gull titling his paper "Anorexia Nervosa" and indicating his own personal preference for the term, at the time of its discovery, Gull seems to have been the only doctor to refer to the disease as such at the time. In fact, initially the medical community disagreed upon whether or not the disease described by Gull and Lasègue could even be considered hysterical. At the 1873 meeting of the Clinical Society of London[43] mentioned above, several doctors came

[39] Gull, "V. – Anorexia Nervosa,". 499.
[40] *Ibid*. 500
[41] *Ibid*. 500
[42] *Ibid*. 501
[43] Now known as the Royal Society of Medicine

forward to discuss their own experiences with cases of patients with food aversions. The primary concern proposed at this meeting was whether it can be considered hysterical in cases where "there was simply a loathing of food" – whether anorexia itself could be its own disease separate from any apparent physical, bodily malady. One doctor present argued, in direct contradiction to Gull's own findings, that he "had always looked upon these cases as due to some local condition of congestion of the mucous membrane, and was inclined to consider the real cause as peripheral rather than central."[44]

Despite this discomfort among some of the society members present at the meeting surrounding the issue of defining anorexia as a disease of the mind, other doctors recalled similar cases to those of Dr. Gull's in which insanity seemed to run in the family, suggesting a causal link between an "unsound mind" and anorexia.[45] In describing one such case as he had seen, a society member referred to as Dr. Greenhow recalled how the case

> "came of a family in which insanity existed. The girl was greatly emaciated; but, upon being removed to the house of a doctor, she at once improved. She then returned to her family, and had a relapse; but, upon removal from home, again recovered. From the day that the moral surroundings were altered, she became better. The moral management of these cases is to be insisted upon; medical treatment is of little use."[46]

Several doctors agreed that cases of anorexia required nothing more than "moral management" of the patient – which generally consisted of removing a patient from their home environment for recovery – especially in cases where the validity of a patient's insanity might be called into question. For example, a Mr. Brudenell Carter argued that in some cases "some repulsive idea is conjured up by the fancy when food is presented, so that it is set aside with abhorrence" in order to "obtain sympathy from friends." Describing one case in particular, Mr. Carter recalled how

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[44] BMJ, "Reports of Societies," October 24, 1873, 528.
[45] *Ibid*.
[46] *Ibid*

one patient "always thought of putrid cat-pudding when pressed to eat; thus food caused her to vomit, and she gained her own way." Unfortunately for this woman, "the vomiting beat her," [47] and she was no longer able to control her aversion to food. Thus, in cases of presumed anorexia, one major concern for doctors in 1873 was how to "draw a line between these cases and certain cases of insanity in which a disinclination for food is a prominent symptom."[48] In other words, how could physicians be sure that their patients were telling the truth, and not simply lying about their inability to eat as in the case of the Welsh Fasting Girl, who's infamy was still fresh in the doctors' minds.[49]

The English medical community was changing in the nineteenth century, but many of the accepted ideas about the body, and food's effect on it, were quite Hippocratic, as I will discuss more in later chapters. While food reformers, such as the proponents of vegetarianism, and laypeople more generally believed that the food one put into their body directly affected not only one's health but personality, actual medical opinion was not so far off, as one may think. Reverend Alex Munro's 1859 text *The Aberdeen Water-Cure Journal and Family Guide to Health* was a popular medical guide committed to instructing readers in the benefits and usages of hydropathy[50] as a cure for most ailments, and in doing so, Munro set out to establish for

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[47] BMJ, "Reports of Societies," October 24, 1873, 528.

[48] *Ibid.*

[49] For the purposes of this paper, it is important to note that fasting girls were young girls who purported to go for years at a time without eating or eating very little. Cases of fasting girls in the Western world did not occur quite frequently enough to be called common. Fasting girls often acquired local and international fame, however, as their ability to live without food was thought to be a mystical sign. No one could ever agree, though, whether those signs were from God or the devil. Because of the spiritualism and mysticism surrounding fasting girls, people were often more concerned about the authenticity of their abilities rather than their actual health. When a fasting girl was discovered, they were placed under twenty-four-hour supervision, but their nurses were only there to supervise, never to treat or intervene. Sarah Jacobs, the Welsh Fasting Girl, lived and died in the 1860s and would have been well-known throughout Britain.

[50] The *Oxford English Dictionary* defines "hydropathy" as "a kind of medical treatment, originated in 1825 by Vincenz Pressnitz at Gräfenberg in Germany, consisting in the external and internal application of water; the water cure." The *OED* further defines "water cure" as "Medical treatment by means of the external application and drinking of (usually cold) water, often accompanied by a strict regime of diet and exercise." This was sometimes

readers a scientific connection between the mind and body. Munro argued that "everyone knows that the mind has great influence on the health of the body, and that the body in its turn powerfully affects the mind. Faults of temper and conduct are more immediately owing to the state of the body, than to any cause that is strictly or exclusively mental."[51] Furthermore, Munro believed that "certain mental states affect *directly* only particular bodily organs."[52] For instance, according to Munro, "The emotional states of mind act directly upon the organs of secretion" (i.e. the intestines, stomach, lungs, mammary glands, skin, etc.).[53] In particular, Munro noticed that nervous states of mind or extreme emotions such as grief or joy actually worked to destroy the appetite,[54] and in this way, Munro established a connection between a person's mental and emotional state and the functioning of the digestive system.

For diseases which resulted in "nervous irritation," Munro noted that the issue often began when improper foods came in contact with the gums. From there, signals spread from the gums to the nervous system and then to the heart, stomach, and bowels. Once such an "irritation" moved through the body in this way and "set up in the stomach," an "irritating influence" would then impact the brain.[55] Finding that every "morally bad" state of mind had a bodily connection resulting in ill health,[56] Munro's understanding of the mind-body interaction seems indicative of what doctors in 1873 might have thought about anorexia, which was largely considered to include some "morbid" mental state as we have seen. Early conceptions of mental health, such as this, would have later strengthened concerns that a gastric component was required in a diagnosis

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used to treat anorexic patients later in the century. "hydropathy, n.," *Oxford English Dictionary*, Web; "water cure, n.," *Oxford English Dictionary*. Web.

[51] Rev. Alex. Munro, *The Aberdeen Water-Cure Journal and Family Guide to Health Volume 1* (London: Partridge & Co., 1859), 23, *Hathi Trust.*

[52] *Ibid*. 44.

[53] *Ibid*. 137.

[54] *Ibid.* 138

[55] *Ibid*. 14

[56] *Ibid*. 24

of anorexia and possibly even reaffirmed anorexia's link with hysteria, as hysterical patients were known to have physical symptoms of their mental derangement.

While one member of the Clinical Society of London in 1873 claimed that "Starvation is often … the most manifest sign of insanity," many doctors worried that "there was no symptom of hysteria in the cases they had discussed; the malady was more mental than physical." According to these voices, unlike typical cases of hysteria "There was no mental alienation … but simply a disgust for, and inability to take, food ."[57] This concern about how to define anorexia, then, stemmed in part from the definition of hysteria – or the "functional disturbance of the nervous system, characterized by such disorders as anæsthesia, hyperæsthesia, convulsions, etc., and usually attended with emotional disturbances and enfeeblement or perversion of the moral and intellectual faculties."[58] Hysteria, while characterized by extreme emotions, was considered to have a physical counterpart played out in the body which rendered the patient weakened or temporarily disabled. Anorexia, however, did not function in the same way although it achieved similar results. One reason for the debate surrounding its status as a disease or a symptom was that the idea of a purely mental disorder, with no direct bodily cause (such as an infectious disease) or effect (like convulsions), was still a fairly new phenomenon in 1873. Therefore, the resulting debate around nomenclature and the definition of the disease represents how the medical community was struggling to understand the logic behind a disorder which often, if not caught and treated, led to death for no apparent reason. For this reason, the medical community in 1873 seemed reluctant to wholeheartedly support the findings of Dr. Gull, and instead insisted that many patients suffering from a disinclination towards food "greatly desired

[57] Munro, *The Aberdeen Water-Cure Journal*, 24.
[58] "Hysteria, *n.*," Oxford English Dictionary, http://www.oed.com.navigator.southwestern.edu:2048/view/Entry/90638?redirectedFrom=hysteria.

to get well. It was not that they *would* not, but they *could* not, take food [my emphasis]."[59] In this way, such physicians resisted the idea that a supposedly illogical disorder of the brain which made patients, primarily women, desire to starve themselves to death could exist. According to many members of the Clinical Society, it seemed that there had to be more tangible, reasonable cause. Either that, or these women simply had to be insane.

In response to the discussion his paper caused, the report from the meeting stated that Gull

> "would not insist on the etymological meaning of hysteria, in applying that term to these cases. The nervous equilibrium of the patient is not quite right. Still, it would be unfair for the doctor to go into the world and say that they are of unsound mind. Some of the patients certainly had other symptoms of hysteria."[60]

It would seem, then, that while the term *hysteria* did not completely satisfy the definition of anorexia, it was a useful signifier in order to imply that a nervous mental state was a prerequisite for diagnosis, as Gull believed. At the same time, however, Gull is careful to delineate between insanity and hysteria. While the conversation surrounding the discovery of *anorexia hysterica* at the meeting of the Clinical Society of London often referred to patients exhibiting anorexic symptoms as *not* hysterical, the doctors present almost universally discussed insanity in some context. While there is a difference between insanity and hysteria, within a nineteenth century context, the two would have been easily and often conflated, especially as hysteria was an acceptable cause for committal to insane asylums at the time. When taken into consideration that the doctors of the Clinical Society *only* took offense at the use of the term *hysteria* because of an issue with the explicit definition of that word that did not apply to understandings of anorexia as it manifested itself on the body of their patients, it becomes clear that their arguments were not

[59] BMJ, "Reports of Societies," October 24, 1873, 528.
[60] *Ibid.*

directed at the mental or psychical components of hysteria. Therefore, one may assume from the interactions presented thus far between the physicians at the meeting that a diagnosis of anorexia accompanied a general assumption about the incompetence of those who suffered from it. With this in mind, Gull's declaration that it would be "unfair" for physicians to refer to anorexics as possessing an "unsound mind" was a noteworthy milestone in the development of the science and study of mental illness and especially anorexia.

Although Gull did not believe that his anorexic patients were insane, the fact that *anorexia hysterica* became the widely recognized and utilized nomenclature for understanding this eating disorder – as opposed to *anorexia nervosa* – until well into the twentieth century implies that popular understandings of anorexia and anorexic behaviors were not so nuanced. Later in the century, the British Gynecological Society discussed anorexia at its February 1889 meeting and, even then, only to supply cursory remarks about medical progress in treating the disease. In fact, one physician present referred to *anorexia hysterica* as a "disease of the pelvic viscera," much like a previously mentioned case of "*Hystero-epilepsy*" in which a woman suffered from epileptic fits supposedly brought on by hysteria which apparently could only be cured by the removal of her uterus.[61] By believing that a case of hysterical epilepsy and its treatment shed light on understanding how to better treat anorexia, it becomes clear that a mere sixteen years after its discovery, doctors were no closer to understanding the complexity of mental diseases, let alone an eating disorder that hinged upon the voluntary starvation of the patient. The fact that anorexia was discussed as being a gynecological issue, in addition to support shown for ovarian castration as a viable treatment for hysterical patients, shows how

[61] *BMJ*, "Reports of Societies," February 27, 1989, 714-715.

anorexia came to be clearly defined as a "woman's disease" despite Gull's initial insistences to the contrary.

At the meeting of the Harveian Society of London in February of 1888, one Dr. Stephen Mackenzie discussed some cases of hysteria which he had recently treated that "were regarded as apepsia and anorexia hysterica." In the first case, a twenty-one-year-old girl "with emaciation and profound anaemia [*sic*], complaining of constant and severe pain, increased by food" was cured by a regiment of forced feeding. In the second case, "a young lady, aged 19, who, from gastric pain, had gradually ceased taking food until she was reduced to a condition of extreme emaciation and weakness." In providing his reasoning for diagnosing these patients with *anorexia hysterica*, Dr. Mackenzie stated that "He thought the current view in the profession, as well as out of it, was that hysteria was 'a want of self-control' … 'a giving way to the feelings.'"[62] While Mackenzie recognized that these views were not necessarily etymologically correct, his rationale for understanding anorexia hysterically would have been rather common, as he said, both within and without the medical community. Amongst the medical professionals of the Harveian Society specifically, hysteria was understood according to the following principles:

> "In hysteria there was a suspension of function of the so-called inhibitory 'centres [*sic*],' which occasioned the negative element – loss of inhibitory power (psychically, loss of control), and the positive element – overaction [*sic*] of the nervous arrangements constituting the physical basis of the emotions (psychically, outburst of the emotions). This 'suspension of function' of some of the highest nervous arrangements which inhibit the nervous arrangements forming the physical basis of the emotions, might be brought out by all kinds of debilitating influences, including organic disease."[63]

Hysteria, then, had two components: loss of control and overactive emotions. Some believed that hysteria stemmed from a general malnutrition – at which time malnutrition of the uterus was

[62] BMJ, "Reports of Societies," February 16, 1888, 417-418.
[63] BMJ, "Reports of Societies," February 16, 1888, 418.

discussed among other intrauterine experiences and treatment related to hysteria[64] – which, of course, would have cemented the relationship between hysteria and anorexia for most doctors. Such a theory provides a tangible reason, in the minds of medical practitioners, for why women might starve themselves: their malnourished brains told them to. For a nineteenth-century physician, hysteria, and the feeble mindedness it then implied, might have been more comforting than the reality that they did not understand and could not always treat self-starving women.

Since hysteria, and anorexia by association, was generally considered to be women's issue, it became largely irrelevant or, at the very least, of significantly less importance to the medical community, except as a method for ensuring supposed female inferiority. Interestingly, despite its widespread usage as a method for rationalizing apparently irrational feminine behaviors in and out of medicine, physicians had conflicting ideas about the existence of hysteria itself. In fact, one doctor present at the meeting of the Harveian Society argued that "many so-called cases of hysteria were cases of nothing," and another physician corroborated this sentiment stating that "it was necessary to distinguish between hysteria and shamming: the former class was characterised [*sic*] by an absence of motive, the latter had originally a motive."[65] Once again, the issue of truthfulness and authenticity arose for these physicians worried about women who might be manipulating their circumstances in their favor.

Considering that hysteria was disease only diagnosed in women, and despite being a committable disease, often functioned as a societal catchall for "badly" behaved or overly emotional women, the association between anorexia and hysteria is rather significant. The fact that male doctors chose to look at anorexia, another disease that mostly affects women, as a form of hysteria meant that anorexia was largely not understood in 1873. It also signifies that anorexia

[64] BMJ, "Reports of Societies," February 16, 1888, 418.
[65] *Ibid.*

was thought of in terms of gender identity and performance. If women were thought to be the weaker sex, emotionally and physically, then a disease that physically weakens the body by literally starving the life from it, might be hard for male doctors to conceptualize. Anorexia would most likely seem to be a natural extension of feminine fragility. Since weakness and dependence in women was often thought to be an attractive virtue, meaning that they would make for sweet but subservient wives, a disease like anorexia, which enfeebles women, might even make them seem more attractive to the men who had to care for them. Throughout all of the reports of the various medical communities, the narrative surrounding discussions of anorexia tended to focus on the doctors' abilities to cure their patients, [66] rather than patients' actual lived experiences with the disease. In this way, the medical narrative of anorexia focused on the doctors and their medical prowess as opposed to the patients themselves, most likely because the disease was both new in 1873 and markedly female. Despite the fact that Gull advocated for the treatment of anorexia as a pathological concern, the persistent use of the term *anorexia hysterica* by both physicians and the popular press suggests that anorexia was considered "normal."

The dynamic between doctors and their patients would also have affected anorexic patients' abilities to communicate their symptoms and doctors' abilities to then understand them. By the 1870s, physical examinations were largely focused on "reading" the body via "visual observation and manual manipulation of the body, combined with a few rudimentary tests of body temperature, blood, and urine." With young female patients, like one might find in cases of anorexia, doctors would often perform the examination in the presence of the girl's mother as

[66] We now know that there is no cure for anorexia. It is a lifelong illness. At the end of the nineteenth century, however, doctors believed in the ability of a vast variety of treatments to be able to cure anorexic patients. One such popular method in the late nineteenth century was known as the Weir-Mitchell method, named for the American doctor who discovered it. It was also known as the Rest Cure. Essentially, it required the patient to remain immobile for days while they were continuously fed, forcibly. It was an unpleasant process and did not yield long-term results. It was eventually discredited.

well as a clinical clerk who recorded the information the doctor observed. As Brumberg found in her analysis of the doctor-patient dichotomy, "the nineteenth-century physician's new faith in the verifiable external signs and sounds of symptoms" meant that doctors were often "more interested in what the body revealed than in anything the patient had to say about her illness."[67] As a diagnosis of anorexia was largely dependent on patient's own account of her experience, the disinclination of the medical community to actually listen to their patients complicated abilities to actually understand how the disease worked. Even should a patient be asked about her symptoms, it would have been largely impossible for an anorexic patient to comfortably disclose her abstinence from food, let alone reasons for such abstinence, in the presence of her mother who would have spoken for her and a male doctor who was busy scrutinizing the partially undressed form of his young patient. Thus, the protocol of the examination room, and the gender dynamics therein, worked to silence anorexic patients more than anything else, effectively hindering the medical community's ability to adequately assess and recognize cases of anorexia at the end of the nineteenth century.

For the majority of this paper, I will be referring to a more general understanding of anorexia as a disorder in which sufferers maintain food abstinence, rather than *anorexia hysterica or anorexia nervosa* in particular, because despite changes to the disease's definition and diagnostic criteria since the nineteenth century, this element of anorexia has always remained the same. *Anorexia nervosa*, as it is now known today, is "characterized by distorted body image and excessive dieting that leads to severe weight loss with a pathological fear of becoming fat."[68] The psychological component that this criterion relies on is not necessarily

[67] Brumberg, *Fasting Girls*, 166-167.
[68] "Feeding and Eating Disorders," American Psychiatric Association (American Psychiatric Publishing, 2013), 1.

reflective in the usage of *anorexia hysterica*, either by Dr. Gull or the broader British medical community at the time of discovery. For this reason, I will almost never refer to *anorexia nervosa* specifically. As I am more interested in the learned relationships that women had with food in the nineteenth century more broadly, I will mostly be discussing the socialized aspects of food abstinence that allowed for the discovery of *anorexia hysterica* in 1873, which I hope to reveal as an ongoing process of understanding the female mind and body that continues today. In this regard, the discovery of *anorexia hysterica* in 1873 itself is not my chief concern, but rather just a critical moment in Victorian understanding of this phenomenon of feminine self-starvation.

As we will see in the following chapters, the decades leading up to the moment of anorexia's discovery each possessed crucial elements that arguably enabled anorexia's existence, let alone discovery, by instructing women on how to behave in a pre-anorexic way. In this way, I envision anorexia as a conditioned response to society's gender values that can be traced throughout the nineteenth century in various forums, including literature, medical texts, the media, and popular etiquette guides. From this point onwards, I will be discussing what I have decided to call pre-anorexia, or anorexic symptoms and ways of thinking as we now know them that can be seen prior to the actual discovery of anorexia in 1873. In this way, I hope to show how anorexia was not only created but encouraged by a culture fascinated with controlling and subjugating the female form.

Chapter 2: *Jane Eyre*: A Heroine Who Doesn't Eat

The history of anorexia, as the previous chapter hopefully showed, is a long and complicated one. The discovery of anorexia, while an important moment in time and one which allows for such a history as this to exist, is not, however, where our story truly begins. As other scholars before me have noted, there is nothing new about self-starvation practices, and they have, in fact, been in existence for millennia for different reasons across the world. The discovery of anorexia as a disease and the developing language for understanding eating disorders as we now understand them, though, marks the nineteenth century as period of time in which issues surrounding gendered eating behaviors and norms became increasingly visible and, therefore, increasingly significant for the purposes of understanding anorexia as a historical and cultural byproduct.

It took nearly 100 years after its discovery before anorexia reached an incidence level high enough to garner any public attention as a medical concern alone. As mentioned previously, *anorexia* nervosa, as it is now known today, is "characterized by distorted body image and excessive dieting that leads to severe weight loss with a pathological fear of becoming fat."[69] In many ways, while our understanding of this disease has changed immensely over the last century and a half, the disease itself still maintains the basic definition that Gull outlined in 1873. This allows a comparison to be made between literature that exhibits pre-anorexia and contemporary fiction, like *Wintergirls*, that is fully entrenched in an understanding of eating disorders and how they function. As I have previously stated, I have no desire to anachronistically diagnose characters such as Jane as anorexics, but the similarities between characters like Jane and like *Wintergirls*'s Lia suggest that anorexia, or disordered eating in general, is a much more endemic

[69] "Feeding and Eating Disorders," 1.

and deeply-rooted problem than the history alone would suggest. Literature, then, in this paper will serve as a way to assess the normalization of disordered eating in the nineteenth century that has allowed for the practice of self-starvation to persist today to such extremes and as a way to re-enter a mindset of gendered eating, which functions almost incognito today in different ways.

For this reason, we must look to the decades leading up to anorexia's discovery – and the available texts written by, for, and about women; namely literature – in order to uncover the effect of gendered ideas about food on the physical form of the female mind and body. As of yet, the critical literary approach to understanding anorexia in Victorian fiction has largely been psychoanalytic. For this reason, anorexia has always been treated as a type of physical signifier, written out on the body, that indicates much larger crises of conscience within. For example, Helena Michie, in *The Flesh Made Word*, uses her first chapter to illustrate what she calls "ladylike anorexia," or a type of socially acceptable and even encouraged eating disorder, in Victorian texts by the likes of Charlotte Brontë, Elizabeth Gaskell, and George Elliot, to name a few.[70] However, Michie is not particularly concerned with the actual anorexia that she anachronistically diagnoses these heroines with itself but rather the relationship between food and food abstinence and female sexuality in these novels. For Michie, anorexia is about control: a heroine's control over her own body or the control which others seek to exert over it.[71] This is certainly true, but Michie's attention to how food is used against characters like Jane Eyre and how symbolic hunger pushes the plot forward in these novels presents an incomplete picture of potentially (pre-)anorexic Victorian bodies. By focusing on the metaphorical and symbolic nature of anorexia as it functions in the domestic novel, as opposed to the actual lived

[70] Helena Michie, *The Flesh Made Word: Female Figures and Women's Bodies* (New York: Oxford University Press, 1987), 20.
[71] *Ibid*. 23-24

experiences these novels portray, Michie's argument continues to represent Victorian gendered eating habits as mystical and enigmatic – as if anorexia can only be understood in terms of its symbolism.

When literary critics, Michie included, do make a connection between anorexia and fiction, they almost always mention *Jane Eyre*. This comes as no surprise as one can count the number of times Jane interacts with food directly on one hand. There are even moments in the plot in which readers are made aware that Jane is literally starving to death on the pages before them, and yet, it is these moments which allow Jane so much development as a character. Until now, critics have largely approached Jane's apparent perpetual hunger as a metaphor for her lack of physical identity and agency through much of the novel. In Michie's analysis of *Jane Eyre*, she chooses to highlight how, in the first half of the novel, Mr. Rochester "uses food and food imagery to control Jane" while the second half of the novel witnesses Jane's "acceptance of her own physical desires" by acknowledging her hunger.[72] Here, Jane has little to do with her own "anorexia." Instead, her hunger is the main driving force of the novel as it is turned against her by Rochester and then accepted as reality by Jane herself. In other words, Jane's literal hunger, and her acceptance that she does in fact have physical needs, translates into her discovery of her self and her sexuality.[73]

It is time, I believe, to redirect the conversation surrounding anorexia in Victorian fiction back to the physical bodies and psyches of these heroines as they are represented, for characters like Jane have much to say about the lives of real nineteenth-century women. More than just novels, I believe that Victorian domestic fiction, like *Jane Eyre*, provides an unhealthy history of feminine hunger. Michie claims that "Heroines can have their hunger turned against them or turn

[72] Michie, *Flesh Made Word*, 24.
[73] *Ibid.* 24-25

their hunger into energy to fight for what they want. Hunger is both dangerous and potentially liberating; it can lead to fulfillment or obsession."[74] To fully understand the extent to which this is true, we have to explore the *physical* effect of anorexia on the female mind and body and the ways in which society normalized what would become known as anorexic behaviors to such an extent as to make it go virtually unnoticed in literature until the last few decades. But first, I would like to make it clear, that I disagree with past liberal usages of the term "anorexia" in describing Jane's behavior. As *Jane Eyre* was published in 1847, nearly thirty years before the discovery of anorexia, it is impossible to diagnose her with an eating disorder. Furthermore, she does not exhibit the classical symptoms of anorexia, nor does she necessarily seem to *intentionally* refuse food, as one might expect to see in a patient suffering with anorexia nervosa. Rather, Brontë presents a series of abnormal eating behaviors and situations in the character of Jane that suggest anorexia, as we now know it, runs much deeper in our collective psyche than we would like to believe and that must be explored further in order to truly understand why anorexia, for its own sake, was able to take root as it did and be discovered in 1873.

While it could not have been her intention, Brontë creates a firmly pre-anorexic worldview in *Jane Eyre*. Within the first few pages of the novel, Brontë introduces self-starvation quite causally as an option for Jane's escape from the habitual bullying she receives as a child at the hands of her cousins. In fact, young Jane – who is only eight or nine years old when the novel begins – believes that "never eating or drinking more, and letting [herself] die" would be preferable to remaining in her aunt's home and enduring the "insupportable oppression" she feels there.[75] Not only does young Jane prefer a slow and agonizing suicide to life at Gateshead Hall, but she also realizes that such thoughts of "starving [herself] to death" might be construed

[74] Michie, *Flesh Made Word*, 23.
[75] Charlotte Brontë, *Jane Eyre*, Ed. Beth Newman (Boston: Bedford of St. Martin's, 1996), 12.

as "wicked," and even criminal.[76] If we consider Jane's young age, these thoughts are simultaneously overwhelmingly depressing and surprisingly mature. Jane would rather die than grow up at Gateshead, but more than that, she would rather *starve*, despite the sinful implications of doing so. The fact that Jane sees starving as a viable method of dealing with her problems reveals how problematic female relationships to food were in nineteenth-century fiction and life.

Such relationships are learned and replicated. If Jane thinks she can escape her troubles by abstaining from food, then she learned that, most likely through observation of the adult women around her. However, if she knows that starving herself is wrong, then this too she must have learned, suggesting that while self-starvation happens it is frowned upon by society as a whole. While Jane may wish to starve to death, she does not wish to be condemned for doing so, which is one reason among many that she does not cease to eat in chapter two, when she first proclaims a proclivity for self-starvation. However, this rather complicated inner dialogue that readers see Jane having so early on in the novel exemplifies the intensely contradictory nature of the values that nineteenth-century society placed on food and the body. When reading *Jane Eyre* with this set of values in mind, it becomes impossible *not* to notice how Jane is enmeshed in a pre-anorexic battle of wills.

If we take Jane as a fictional version of her real-world counterparts, with the same or at least similar concerns about the ways in which food abstinence can impact life experiences, then it is useful to understand the context behind some of these ideas about the relationship between food, the body, and society as they were disseminated. As I have mentioned before, conduct books were a huge source of information for nineteenth-century women looking for guidance on their role and position within society. In a time and place highly regulated by class and gender

[76] Brontë, *Jane Eyre*, 13.

strictures, success in the world was highly dependent upon one's ability to act appropriately for one's station in life. Conduct books, widely written for and read by women, provided a unique service to women of the middle and upper-classes by identifying the rules that governed society but may otherwise not have been openly discussed. Almost no topic of interest was off-limits for these prescriptive texts, and they typically covered everything from etiquette in all specific social engagements imaginable to standards of beauty and hygiene to the best way to behave in order to politely attract the attentions of the opposite sex.

Conduct books often mentioned, either directly or indirectly, how a woman should interact with food on a daily basis but to varying and typically contradictory ends. In 1829, Mrs. William Parkes published her third edition of one such popular text, titled *Domestic Duties; Or, Instructions to Young Married Ladies on the Management of Their Household, and the Regulation of Their Conduct in the Various Relations and Duties of Married Life*. While Mrs. Parkes spends the majority of her time extolling the duties and responsibilities of women as wives and mothers, she also includes some practical dietary guidelines, primarily intended for instruction of mothers in regards to their children. According to Mrs. Parkes, regularity is of the utmost importance to the diets of children, eating at the same time everyday so as to ensure the proper growth;[77] however, children should not be allowed any food between meal times, as allowing undigested and "half-digested" foods to mingle in the stomach is "almost as injurious as poison" to the digestive system.[78] In addition to a concern for the frequency and timing of meals, *Domestic Duties* also exhibits a societal anxiety surrounding the quantity of food given to children. In one dialogue, one woman suggests that "parents, and indeed people in general, have

[77] Mrs. William Parkes, *Domestic Duties: Or, Instructions to Young Married Ladies, on the Management of Their Households, and the Regulation of Their Conduct in the Various Relations and Duties of Married Life* (New York: J. & J. Harper, 1829), 228.
[78] *Ibid*. 229

[a propensity] to encourage in children *the disgusting failing of gluttony*, by making their chief gratification and rewards consist in presents of cakes, fruits, or confectionary [my emphasis]."[79] Mrs. Parkes is quick to correct this mentality that sweet treats should be withheld entirely, for she believes occasional gratification may be appropriate[80] and serve a moral purpose. In fact, according to Mrs. Parkes, children may be "taught to prefer a higher gratification to the enjoyment of their palate" by "resigning a portion, and sometimes the whole, of any tempting gift they had received, to a younger sister or brother, [thus] they have shown themselves capable of fully enjoying and appreciating the pleasures of benevolence, procured by the *sacrifice* of their own gratification [my emphasis]."[81]

While food in Mrs. Parke's *Domestic Duties* is only referenced in relation to children and invalids, the issues revealed therein are extremely relevant to our understandings of nineteenth-century beliefs about food in general. From the remarks above, it becomes clear that Mrs. Parkes's female readers, as well as society in general, highly regulated and scrutinized the frequency of meals and the quantity of food at meals, not to mention the quality of food, which I will discuss in detail later. There appears to be a particular concern about eating too much, if Mrs. Parkes feels the need to address an issue she does not necessarily agree with outright. Considering that over-eating would not only result in encouraging the sinful behavior of gluttony but also in potential weight gain and even potential diseases caused by "indigestion" from an "unwholesome diet,"[82] according to Mrs. Parkes, a preoccupation with diet and its physical and immediate effect on the body suggests that pre-anorexic values may be found in British society rather early in the century. Interestingly, *Domestic Duties* not only establishes over-indulgence of

[79] Parkes, *Domestic Duties*, 230
[80] *Ibid*. 230
[81] *Ibid*. 231
[82] *Ibid*. 232

food as harmful on both moral and medical grounds but it also offers self-sacrifice of food as an opportunity to learn to become a better, more benevolent individual. In this way, food not only causes a moral dilemma but offers a solution to overcoming that dilemma through abstinence. In this light, it seems natural that Jane and girls like her might subscribe to an ideology where simply not eating might solve all of their earthly problems while also ensuring a heavenly reward – a recurring theme of Victorian prescriptive literature as we will see.

Framed as a dialogue between two women discussing the minutiae of their daily lives, and their resulting opinions on such, Mrs. Parkes lends an air of authority and authenticity to *Domestic Duties* by suggesting that such conversations as might be found bound within her book could have taken place in any drawing room in England between any two women of at least moderate means. When we consider that *Domestic Duties* was published almost two decades prior to the publication of *Jane Eyre*, which while released in 1847 is set in the 1830s, it is reasonable to believe that the beliefs expounded by Mrs. Parkes might have influenced Brontë's own life and writing and, at the very least, represent some of the popular ideas about food consumption that would have been widely believed during the fictional lifetime of Jane Eyre as well as by the generation and class of women she represents.

Other such prescriptive texts give explicit advice against such follies as food abstinence, supporting the widespread reality of Jane Eyre's youthful ideas about self-starvation as a coping mechanism for life or even a tool for advancement. Published in 1843, just four years before *Jane Eyre*, prolific conduct book writer and now-recognized anti-feminist Sarah Stickney Ellis's *The Daughters of England: Their Position in Society, Character, and Responsibilities* sheds light on some of the specific food-related behaviors of nineteenth-century young women. Admonishing the fact that "the necessary act of eating is looked upon too much as a luxury, and

an indulgence" in British society, Ellis considers such "capricious" behavior as "abstinence from food … which by certain individuals is thought to be rather lady-like and becoming," as "a great evil in society."[83] While the type of behavior described is certainly harmful, Ellis's concern here is irrelevant. Rather, Ellis's acknowledgement of the practice of food abstinence as a common enough practice to garner attention in her book confirms that ideas of self-starvation were indeed fashionable among young women and directly related to ideas of beauty and deportment. Not only was it fashionable to refrain from eating for its effect on the physical appearance, but rather eating was considered unnecessary and even indulgent – indulgence being, as *Domestic Duties* indicates, something particularly fearful and abhorrent. The popular conduct book, anonymously published in 1840, *Etiquette for Ladies: With Hints on the Female Preservation, Improvement, and Display of Female Beauty* even reiterates that "Moderation in everything is so essential,"[84] "Moderation never offends."[85] Although not specifically discussing food in either instance, the generic usage of moderation in *Etiquette for Ladies* suggests that these were catchphrases, of a sort, that could aptly be applied without hesitation to any circumstance, presumably even or especially meals.

Interestingly, although Ellis claims to want to eradicate such unhealthy notions about eating, farther down on the same page as her rebuke of food abstinence she describes how "It is a remarkable feature in connexion [*sic*] with the constitution of woman, that she is capable of enduring, with patience and fortitude, far beyond that of the stronger sex, almost every degree of bodily suffering."[86] Continuing in this vein, Ellis claims that "there is strength and a beauty in

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[83] Sarah Stickney Ellis, *Daughters of England: Their Position in Society, Character, and Responsibilities* (New York: D. Appleton, 1843), 107, Internet Archive, https://archive.org/details/daughtersenglan00conggoog.
[84] *Etiquette for Ladies; With Hints on the Preservation, Improvement, and Display of Female Beauty* (Philadelphia: Lea & Blanchard, 1840), 19, *Hathi Trust*.
[85] *Ibid*. 137
[86] Ellis, *Daughters*, 107.

her character, when labouring [*sic*] under bodily affliction … Wherever woman is the most flattered, courted and indulged, she is the least admirable; but in seasons of trial her highest excellences shine forth."[87] If to abstain from food is to suffer and to suffer is not only a woman's purview but also increases her ability to be genuinely admired, then Ellis does not make a convincing case for why women should in fact give up food abstinence and eat regularly. While Ellis is attempting to describe the reality of food intake, or lack thereof, among young women and encourage the abandonment of such unhealthy and presumably impractical notions, she very well might have only further supported food abstinence's supposed value for women in society instead.

To return to the novel for a moment, *Jane Eyre* clearly elicits a fascination surrounding female starvation from the beginning, and this fascination, whether intentional or subconscious on the part of Brontë but plainly repeated in prescriptive literature, develops the plot in really interesting ways. There are several pivotal moments in which Jane faces either food deprivation or debilitating hunger that she must overcome in order to move forward in the novel. One chief instance of this occurs during Jane's time at Lowood. Jane's time at school there is arguably one of the most formative moments in her life, as it not only sets her up to be a governess and, thereby, work in Mr. Rochester's household but it also introduces her to her first real sense of family and even contentment in the novel. Despite the good that comes out of her time at Lowood, when Jane first arrives, it is a particularly foreboding and difficult place for a girl to grow up – not least of which because of the schoolmaster's stance on food.

Unfortunately for Jane, food at Lowood is often nearly inedible. Jane's first real meal at Lowood consists of burnt porridge, "a nauseous mess … almost as bad as rotten potatoes."[88]

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[87] Ellis, *Daughters*, 108.
[88] Brontë, *Jane Eyre*, 38.

Describing the meal as so disgusting that "famine itself soon sickens over it," Jane's hunger is *repulsed*, rather than satiated.[89] Not only, though, is her first taste of food at Lowood foul, but it is intentionally so. Upon hearing that the superintendent Miss Temple had allowed the students a meal of bread and cheese to make up for their inability to eat the burnt porridge, Mr. Brockelhurst, the schoolmaster, chastised her for the apparent "luxury and indulgence" of such a meal, stating that he wished to "render [the students] hardy, patient, *self-denying* [my emphasis]."[90] Lecturing Miss Temple further, Mr. Brocklehurst argues that "you may feed their vile bodies, but you little think of how you starve their immortal souls!"[91] Mr. Brocklehurst's self-proclaimed mission to "mortify in these girls the lusts of the flesh" and his endorsement of their spoiled meals suggests that within the walls of Lowood, and possibly beyond, female bodily hunger equates to carnal desire that must be repressed. Such asceticism forced on girls at such a young age could certainly lead them to believe that they were underserving of such "luxurious" necessities as food – or in the very least, remotely edible food. It may be confidently assumed, then, that Mr. Brocklehurst seeks not just to deprive the students but to teach them to deprive themselves. Moreover, hunger, then, does not necessarily need to be ignored but rather *repulsed*, much like the food at Lowood is repulsive. It is this distinction that establishes *Jane Eyre* as a pre-anorexic novel, for rather than assuming feminine hunger is nonexistent, repulsion implies that women can and should rise above their hunger – an element of choice that will later be crucial to a diagnosis of anorexia.

Mr. Brocklehurst's religious and moralistic views about both food and its effect on young girls echoes, to some extent, the language of conduct book writers like Ellis. In the preface to

[89] Brontë, *Jane Eyre*, 38.
[90] *Ibid*. 53
[91] *Ibid.*

Daughters of England, Ellis asks her readers, "Is it your intention … to live for yourself, or for others … is it your aim to live for this world only, or for eternity?"[92] In doing so, Ellis implies that a woman's moral duty, so-to-speak, is to serve others selflessly with the afterlife in mind, as it was, in her mind, a woman's responsibility to "to promote the great end of our being, the happiness of our fellow creatures, and the glory of our Creator."[93] One's own happiness, unless derived from the happiness of others, seems of little consequence to Ellis. In *The Women of England*, published in 1839, Ellis states that a woman's responsibility in life is to "uphold the moral worth of [England]."[94] For Ellis, "there is no sensation more cheering and delightful than the conviction of having been useful"[95] to others, and to this end, women must seek to acquire a "willing temper" – "a temper that does not object, that does not resist, that does not hold itself excused. A temper subdued to an [*sic*] habitual acquiescence with duty." [96]

This emphasis on duty in combination with her belief that women are designed to withstand suffering,[97] as discussed previously, suggests that pre-anorexic tendencies correlate with the servility and selflessness Brocklehurst and Ellis attempt to instill in the young girls under their influence. While Ellis discounts food abstinence in women as foolish and capricious, She acknowledges that the young women who participate in such endeavors, "sometimes refusing to eat at proper times, and eating most improperly," do so because they believe "it gives them an attractive air and looks like an absence of selfishness."[98] Again, while Ellis disapproves of food abstinence, she encourages women to embrace their Christian morality throughout

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[92] Ellis, *Daughters*, 7
[93] Ellis, *Daughters*, 10
[94] Sarah Stickney Ellis, *The Women of England, Their Social Duties, and Domestic Habits* (New York: D. Appleton & Co., 1839), vii, Google Books.
[95] *Ibid*. 117
[96] Ellis, *Daughters,* 108.
[97] *Ibid*. 107
[98] *Ibid.* 104.

Daughters of England; thus her recognition that women refrain from eating out of a desire to deny attention to themselves and focus on the needs of others leaves little room for change. If women believed, as Ellis claims they did, that food abstinence allows one to even just appear selfless, then there might arguably be better reasons to choose to not eat than otherwise in a culture that idolizes pious, subservient women. In fact, despite arguing for the importance of eating regularly, Ellis describes life as "A mere struggle for the food and clothing of a body about to mingle with the dust,"[99] in which case, something as simple as eating becomes a worldly endeavor as well as a waste of time for someone focused on an eternal life in heaven. Considering that food-abstinence leaves one weak and incapable of much activity, Ellis's argument that "there are many enjoyments in the chamber of sickness – enjoyments derived for the absence of temptation, from proofs of disinterested affection, and from the unspeakable privilege of having vanity of earthly things, and the realities of the eternal world, brought near, and kept continually in view"[100] suggests that women might actually enjoy the moral opportunities and insights that physical weakness from hunger and deprivation would afford them. Whether they would actually find pleasure in their discomfort is not so much of concern here so much as the idea that society would look to women of this sickly nature with higher regard; thus, there is a social benefit to a woman's hunger. This line of thinking, while not explicitly in support of disordered eating behaviors, does still manage to encourage them.

During her time at Lowood, there is only one moment in which Jane is able to actually enjoy her food, and, even then, she can only do so in secret. After an embarrassing public scolding by Mr. Brocklehurst, Miss Temple invites an upset Jane and Helen to have tea with her in an effort to comfort the girls. However, upon requesting more bread to share with them, Miss

[99] Ellis, *Daughters*, 109.
[100] *Ibid*. 108

Temple is informed that the housekeeper "sent up the usual quantity," implying that she would receive no more.[101] Hearing this news, Miss Temple then reached into her *locked* desk drawer and retrieved a well-wrapped and hidden seed-cake that she then shared with her guests. The housekeeper's firm rationing of Miss Temple's daily tea implies a high level of scrutiny on each morsel of food within the school, where it goes, and who consumes it. The fact that Miss Temple keeps cake locked away in her desk would suggest that the cake is a sort of contraband, only to be consumed behind closed doors. Thus, Miss Temple's actions, along with Jane and Helen's, become illicit, furthering the criminal aspect of feminine eating.

It is interesting here that the only time Jane is actually able to indulge, even just a little bit, and enjoy her meal is in the relative privacy of Miss Temple's office, where she probably should not be, with this secret cake, that Miss Temple probably should not have. Jane and Helen, however, certainly appreciate the tea as they "feasted" and "satisfied [their] famished appetites on the delicate fare [Miss Temple] liberally provided," going so far as to compare it to "nectar and ambrosia."[102] For Jane to be hungry enough after such a short amount of time at Lowood, at this point in the novel, for a few pieces of toast and a bit of cake to seem like a feast after a famine, it is clear that she is not being fed enough under Mr. Brocklehurst's reign. But perhaps more importantly, Jane learns several significant (pre-anorexic) lessons from this evening of meager splendor. Beyond simply participating in a conspicuous evening of secretive eating, which is problematic in many ways itself, Jane learns the value of the proverb "Better is a dinner of herbs where love is, than a stalled ox and hatred therewith."[103] Having finally found women to love and look up to in her life, Jane would rather endure the "deprivations" of Lowood and go

[101] Brontë, *Jane Eyre*, 61.
[102] *Ibid.*
[103] *Ibid.* 63

hungry than return to the luxuries of Gateshead Hall.[104] One might say, then, that on this night, Jane learned both that it is preferable for a woman to eat in secret and that happiness and love are worth starving for.

Lowood and its deprivations build upon Jane's early notions of self-starvation to really ensure that she maintains a pre-anorexic relationship to food throughout the novel. Despite the fact that *Jane Eyre* presents readers with only a handful of moments in which Jane can actually be seen eating,[105] hunger is a huge driving force in the novel, especially in transitional or life-changing circumstances for Jane. When Jane leaves Thornfield Hall, where she was employed after leaving Lowood, she is heartbroken at having to leave her former fiancé and employer Mr. Rochester. The fact that no one has ever loved Jane as Mr. Rochester loves her makes her worried that there can be no place for her other than Thornfield. Jane asks herself then, "Who in the world cares for *you*?" to which she answers, "*I* care for myself. The more solitary, the more friendless, the more *unsustained* [my emphasis] I am, the more I will respect myself."[106] Jane's choice of the word *unsustained* here is rather foreshadowing, as within days of thinking this, she lies on the moors in the middle of nowhere, quite close to death for lack of food. She will literally, very soon, have no sustenance. However, in leaving, Jane finally recognizes her own physical needs through her extremely present hunger. More than this though, the acknowledgement of her emptiness – both figuratively and literally – makes Jane more respectable in her own eyes, as she can, and always has, taken care of herself. This might suggest that Jane not only foreshadows her eventual near-starvation but also necessitates it as a method

[104] Brontë, *Jane Eyre*, 63.
[105] This is not uncommon in Victorian literature. Few nineteenth century female writers present scenes in which their characters eat or interact with food. The moments in which they do, then, become extremely important and rife with meaning. This phenomenon has been written on extensively in the literary community.
[106] Brontë, *Jane Eyre*, 270.

for coping with her raw emotions and new situation. After a few days with no food, Jane finds that "Want came to [her], pale and bare."[107]After years of apparent self-deprivation, Jane realizes that she "was a human being, and had a human being's wants," but it took nearly starving to death for that revelation to occur.[108] Begging for morsels of food or some work to do for several more pages, Jane finally collapses at the door of a local parishioner, St. John Rivers, who takes pity on her and offers her food and shelter.

Jane's harrowing escape from Thornfield allows her the opportunity to find herself, so-to-speak, in the novel. In leaving, Jane gains independence, a family, a small fortune, and as Michie might say, a body, but before any of this can happen, she has to nearly starve to death. Even though it is quite clear to the Rivers that Jane would have died by morning had they not taken her in, Jane's savior, St. John, still attempts to deny Jane food in the moments after her arrival. Insisting that Jane has had "enough" milk and bread, St. John instructs his sisters to "restrain" the hungry girl from eating anymore, despite pleas from the women to let her continue.[109] Instead of allowing Jane to eat in this moment of desperate need, St. John demands information about who Jane is and why she has come. In this instance, yet another religious male figure seeks to control Jane's food intake while she still sits at death's door. This is a significant first interaction between St. John and Jane, as it becomes clear that some things are more important than a woman's hunger and even health at yet another pivotal moment in Jane's life.

In spite of this, Jane's hunger drove her to seek help at the Rivers' home, and this ultimately did save her, both in mind and body, so that she might make the choices yet to come later in the novel. While she nearly died, Jane's hunger did in fact solve all of her problems in

[107] Brontë, *Jane Eyre*, 277.
[108] *Ibid.*
[109] *Ibid*. 287

the moment and fulfill all of her childhood wishes for home and family, a fact which echoes young Jane's own inclination at the beginning of the novel to escape her problems via self-starvation. In some ways, this experience of deprivation and its ultimately positive outcome proves for Jane that starvation has its place in a woman's life. The fact that St. John both continues to exert control over Jane's ability to eat and facilitates her salvation from poverty, obscurity, and death by starvation only serves to complicate Jane's relationship to hunger further. Hunger pushes her forward while simultaneously making her vulnerable.

Apart from just hunger itself, Brontë emphasizes Jane's physical presence throughout her time at Thornfield Hall, and it is this focus on Jane's body that underpins the pre-anorexic world of *Jane Eyre.* At Thornfield, Jane's physical appearance gains much attention from Mr. Rochester. After meeting Jane for the first time, Mr. Rochester describes her as having "rather the look of another world" that reminded him of "fairy tales," and he even attributes this look to Jane's many years spent at Lowood, where she quite often did not receive enough food to eat.[110] Mr. Rochester, amazed that Jane managed at Lowood for eight years of her life, states that "[he] thought half the time in such a place would have done up any constitution."[111] Apparently, the hazards and general unhealthiness of Lowood is known far and wide; yet, it is her time there, or rather the lack of nutrition acquired there and her resulting starved body, which gives Jane the "otherworldly" look that so intrigues him. There are many such instances in which Mr. Rochester denies Jane a physical form or physical needs by considering her "an elf, a goblin, a fairy, ethereal," as Michie points out in *The Flesh Made Word*.[112]

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[110] Brontë, *Jane Eyre*, 104.
[111] *Ibid.*
[112] Michie, *The Flesh Made Word*, 24.

Michie, concerned largely with how such expressions may be used to control Jane, argues that "In [Mr. Rochester's] eyes, Jane does not need physical sustenance; her 'otherworldliness' is his expression of her lack of physical presence."[113] When Mr. Rochester pleads for Jane to remain with him at Thornfield because she "must become a part of [him],"[114] as he repeatedly states throughout her time there, "the sinister implication [is] that she has no flesh of her own," according to Michie.[115] While this certainly seems true, Jane's lack of flesh is not only a mechanism of control, then, but also an expression of Mr. Rochester's, and the novel's, ideal form of beauty. From this, one might say that the novel encourages Jane's tense relationship with food that Lowood instilled in her, as the physical signs of not eating that Jane possesses apparently only positively affect Jane's beauty in the eyes of the novel's only love interest. For readers, no matter if they find themselves reading *Jane Eyre* in the nineteenth or the twenty-first century, an ideal body, then, would probably look like Jane's particularly thin and unobtrusive form.

Body image aside, Jane's need to eat is often ignored at Thornfield, further contributing to the pre-anorexic anxieties of *Jane Eyre*. Despite the lavish home and the multi-day dinner parties it boasts, Jane only really comes in contact with food once in her time at Thornfield, and even then, it is only to find food for her pupil, Adele. When Mr. Rochester comes home with a group of friends in tow, Jane secretly makes her way through the house to the kitchen to gather provisions for Adele, as no arrangements were made for their dinner that evening and Jane does not wish to intrude on the festivities. Again, Jane must interact with food in secret if she wishes to have any at all. Jane scuttles about the house being particularly careful to not be seen by the

[113] Michie, *The Flesh Made Word*, 24.
[114] Brontë, *Jane Eyre*, 259.
[115] Michie, *The Flesh Made Word*, 24.

other women present, as if her "cargo of victualage" might somehow be considered damning if discovered.[116] Since "everyone downstairs [at the party] was too much engaged to think of [them]" or their need to eat, Jane and Adele's potential hunger seems inconsequential both to Mr. Rochester and the house kitchen staff, signifying how little attention in general is paid to Jane's, and other women's, need for food in this novel. Considering that later when Mr. Rochester suggests he might take Jane to the moon for their honeymoon – where Michie points out, *there is no food*[117] – and Adele is the only one to realize that "She will have nothing to eat: [Mr. Rochester] will starve her,"[118] the practicalities and logistics of when and how women eat are exposed as irrelevant.

Prescriptive literature supports this idea that not much thought was given to where, when, or how women might actually come by their food. As previously mentioned, Mrs. Parkes in *Domestic Duties* discusses foods appropriate for children and invalids to eat, but does not give any dietary guidelines for healthy, adult women. In reference to children, Mrs. Parkes writes that "The food of which their meals are composed should be good of its kind, and it ought to be plainly dressed. Milk and bread afford the best breakfast and supper for children; plain, roasted, or boiled meat, or occasionally broiled meat, sometimes fish, and a light pudding, with a few vegetables are the materials of which the dinners of children should generally consist."[119] Exactly what "good" food consists of is unclear here, and Mrs. Parkes makes no attempt to explain. From these suggestions, however, it is clear that plain, simple, namely white foods are privileged as the most necessary or the most healthful, which we now know is untrue according to modern understandings of nutrition. It is probably safe to assume that if this diet was

[116] Brontë, *Jane Eyre*, 142.
[117] Michie, *The Flesh Made Word*, 24.
[118] Brontë, *Jane Eyre*, 227.
[119] Parkes, *Domestic Duties*, 229.

considered the healthiest choice for children, then adults, or at least adult women, might be advised to eat similarly.

In addition to lacking much nutritional value, meals such as bread and milk, which according to Mrs. Parke should make up two out of potentially three meals of every day, and plain, undressed white meats would taste rather bland and not particularly flavorful. This type of diet, then, might easily inspire boredom or just a general disinterest in eating that might encourage pre-anorexic behaviors. As a suggestion for how to think of eating not as a luxury but as a necessity, Ellis suggests that "We should consequently think little of each particular portion of food set before us, and *the business of eating* would then be despatched [*sic*] as a regular habit, attention to which could afford no very high degree of excitement or felicity [my emphasis]."[120] In an attempt to encourage regular eating, Ellis turns meals times into an unenjoyable event, equated with a business or obligation that must be accounted for, that inspires no excitement. Such a philosophy of eating would seem to actually discourage eating by relating it to a masculine sphere of interest that would have little bearing on the average middle and upper-class Victorian woman, despite Ellis's intentions. More than simply discouraging regular eating habits, however, such an ideology surrounding meal times in fact might inspire an unhealthy relationship to food itself, as it is now a chore to be dealt with and dismissed, rather than an important life-continuing activity to be enjoyed. This type of disassociation between the activity of eating and the reasons for eating becomes a significant element in later diagnoses of anorexia in the twentieth and twenty-first centuries.

Jane Eyre perfectly exemplifies the prevalence of pre-anorexia in the first half of the nineteenth century and how women were subtlety instructed to either abstain from eating entirely

[120] Ellis, *Daughters,* 107.

or only eat in particular, potentially unpleasant ways. While anorexia may not have officially come into existence yet in 1847 when *Jane Eyre* was written, the socialization of disordered eating behaviors that would later become known as anorexia can clearly be seen in the novel, quite possibly to the detriment of the many women who read it both then and now. Jane's relationship to food, like that of the many real women she represents, is certainly complicated. By reading *Jane Eyre* with anorexia in mind, the extent of that complexity both in life and fiction starts to reveal itself, making it clear that anorexia is not isolated to the here and now, as it so often seems, but was rather a product of society – the same one that encouraged Jane to starve and remain small as a way of problem-solving and dream-making.

Chapter 3: Food as Fatal: Fear of Food in "Goblin Market" and the Move to Reform

As the century progresses, discussions of food in literature become much darker and take on a life of their own. Whereas food itself is infrequently discussed in *Jane Eyre,* in Christina Rossetti's exemplary 1862 poem "Goblin Market" negative food imagery becomes the central focus. Moving away from self-starvation as a method for coping with life for women, texts like "Goblin Market" utilize scare tactics, so-to-speak, to show readers the detrimental effects of incautious indulgence. Victorian scholar Lisa Coar, in her article "Sugar and Spice and All Things Nice: The Victorian Woman's All-Consuming Predicament," argues that "In a vast array of Victorian writing food acted as an indirect metaphor for sexuality" and "Goblin Market" can be read as particularly "erotic."[121] For Coar, the emphasis on food consumption in works like "Goblin Market" highlights the ways in which "The nineteenth-century female was urged to curb her consuming tendencies" and effectively resist any temptation by repudiating the Original Sin – which was, of course, initiated by the eating of forbidden food.[122] Written in the decade leading up to the discovery of anorexia, the specific focus on the act of eating in texts like "Goblin Market," then, reflects a transition in fiction and its readers from a pre-anorexic world into an anorexic one.

Rossetti uses food in "Goblin Market" as a seductive tool in order to reveal the dangers it poses to young and vulnerable women. "Goblin Market," just as the title suggests, begins with a long passage describing fruits for sale by goblin men at a nearby market. Listing the many exotic choices on offer, the goblins call out for the local girls to "Come buy, come buy" their fruit

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[121] Lisa Coar, "Sugar and Spice and All Things Nice: The Victorian Woman's All-Consuming Predicament," *Victorian Network* 4, no. 1 (Summer 2012), 52.
[122] *Ibid.* 48

throughout the poem.[123] This chant, which has a rather hypnotic effect on one of the poem's two central figures, is intended to seduce sisters Lizzie and Laura into perpetuating the Fall of Eve once again by consuming the forbidden fruits and therefore initiate shameful, even sexual, behavior.[124] Lizzie warns, however, that "Their evil gifts" are meant only to "harm."[125] In spite of Lizzie's warning, the goblin men, much like the serpent in the Garden of Eden, quickly entice Laura; "Cooing all together: / They sounded kind and full of loves" to Laura's sympathetic ears and her temptation grew too strong in the face of the goblin men and their fruit.[126]

Too late, readers learn that Laura is not the goblin men's first victim, as they tempted another girl to eat their wares and she soon "pined and pined away; / Sought them by night and day, / Found them no more, but dwindled and grew grey," which is exactly what happens to Laura over the course of the poem.[127] As Laura falls into a pit of despair at having tasted such sweet fruits once only to never experience them again, readers witness the sinful effects of Laura's disobedience as she "gnash'd her teeth for baulk'd desire, and wept / As if her heart would break" from the "exceeding pain" of loss.[128] Rossetti then warns readers that, if they do not want to "dwindle" and "decay" as their fires burn away like Laura, they must resist the goblin men's sweet treats.[129] While "Their fruits [taste] like honey to the throat," Rossetti uses the steadfast Lizzie, the poem's heroine and Laura's savior, to show that their fruits are "But poison in the blood" – the only antidote for which is complete abstinence.[130]

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[123] Christina Rossetti, "Goblin Market," https://www.poetryfoundation.org/poems-and-poets/poems/detail/44996, 4.
[124] Much of the scholarly work on this poem actually references incest and lesbianism as chief concerns of the poem, as sister Lizzie and Laura interact throughout the poem in particularly intimate ways.
[125] *Ibid.* 66
[126] *Ibid*. 78-79
[127] *Ibid.* 154-156
[128] *Ibid.* 266-268, 271.
[129] *Ibid.* 276-280
[130] *Ibid*. 554-555

The poem conflates fruit with sin and, more importantly, with several of the seven deadly sins: covetousness, lust, gluttony, envy, and even sloth, making eating an especially dangerous endeavor for Laura and Lizzie. In "Goblin Market," Rossetti provides readers with a character who – although she readily eats, unlike earlier characters like Jane Eyre – eats and then wastes away, corrupted by the food she allows to pollute her body. In many ways, "Goblin Market" acts as a Victorian parable for how eating "inappropriate" foods – such as the goblin men's fruit which is sweet, ripe, and sexually charged – can only lead to disaster. One might assume, however, that the frightening message about fruit here might envelop all foods, as who is to say which foods might trigger one's sinful nature? Rossetti certainly does not offer any alternatives. Interestingly, this message specifically targets young women, as they seem to be the only ones susceptible to the call of the goblin *men*. Therefore, one might say that "Goblin Market" engenders a fear of food in women that becomes central to a diagnosis of anorexia in the next decade, making Rossetti's poem an important pre-anorexic stepping stone of the nineteenth century. In this sense, where previous literature, such as *Jane Eyre*, might have encouraged young women to abstain from eating merely by example and a highly codified set of subconscious cues, "Goblin Market" explicitly encourages readers to be wary of food itself and potentially give it up for its own sake.

The evil consequences of food did not exist solely within the context of nineteenth century fiction. In society at-large there was a huge concern surrounding the direct effects of eating on the body throughout the nineteenth century, with much fear directed at the possible sinful implications of one's relationship to food. As we saw in the previous chapter, such prescriptive texts as Mrs. Parke's *Domestic Duties* were particularly interested in warding off any temptation towards over-indulgence and gluttony, and the potential resulting obesity.

Recommending that "Children should never have any food given to them which will tempt the to eat more that the appetite demands; and, indeed they will seldom desire more unless they are pampered by delicacies"[131] such as the seductive fruits of the goblin market, Mrs. Parkes 1829 guide reveals two important issues involved with Victorian food consumption. First, Mrs. Parkes implies that satiety is key in mealtimes and that to eat beyond the point of being full would result in dire moral consequences, much like the situation Laura finds herself in when she tastes the sweet fruits of the goblin market and incurs an insatiable hunger that leaves her lifeless and entirely dependent. Second, readers learn that food probably should not taste *too* good, because if a desire for the food itself arises, without the precipitating hunger that necessitates and rationalizes the act of eating, then perhaps that might mean that individual eaters are either spoiled or sinful for wanting more than their portion.

Besides the implications of what that might mean for women in particular – who, as already established, were supposed to be the *self-sacrificing* moral centers of Victorian society – concern about the corrupting influence of food, both on the mind and body, abounded. Interestingly, Victorian vegetarian ideals, in their efforts to advocate for the abstinence from certain obvious foods, tended to align with Hippocratic assumptions about the effects of food on the body. In the vegetarian magazine *Dietetic Reformer and Vegetarian Messenger*, the official "organ" of the Vegetarian Society in Britain in the 1860s, one physician wrote that meat was evil-inducing and disease-causing by disordering the digestion and essentially poisoning the blood with fat. Highly seasoned meats would be even worse, as they were more likely to encourage dyspepsia, but any meat-eating at all would be "incompatible with innocence," engage the lusts of the flesh, and was likely to ruin one's appearance. This was largely due to the fact

[131] Mrs. Parkes, *Domestic Duties*, 230.

that, according to this physician, "the blood of the person who eats animal food is richer, thicker, and more stimulating, and produces a much greater excitement of the different organs than the blood of those fed on vegetables."[132] Although these arguments against meat were not directed towards women in particular in this article, the fascination with how meat-eating ruins innocence as well as physical beauty is remarkably similar to the wider cultural, gendered ideas about food consumption I discussed in the previous chapter.

According to Victorian diet principles, stimulants, in general, needed to be avoided at all costs for the dangers they posed to health and happiness. The April 1863 edition of the *Dietetic Reformer* included an article in which a Dr. Vain argues that spices and stimulants – such as salt, iron, alcohol, coffee, and tea – should not even be considered human food, as they are supposedly bad for the body and one might as well eat dirt. In fact, Dr. Vain actually suggests that such common foods such as "tea, coffee, pepper, ginger, allspice, cloves, etc., are no more food than rum, gin, brandy, whiskey, and the like, and these no more food than tobacco, opium, quinine, strychnine, or arsenic."[133] Interestingly, many of the substances listed are primarily used as flavor additives, their nutritional value by today's standard would largely be based on their mineral content and ability to add variety to one's diet. However, despite the relative inconsequentiality and banality of such spices as cloves and allspice, they are listed as equivalents to some highly addictive and highly lethal substances – when their only apparent crime is being flavorful.

Not only are stimulants a problem for Victorians because they, not surprisingly, *stimulate* the senses, like the caffeine in coffee and tea for instance, but they were also thought to stimulate certain unwanted behaviors or bodily humors. For example, one argument in favor of

[132] "An American Physician on Diet," *The Dietetic Reformer and Vegetarian Messenger* (January 1861), 81-82.
[133] W. T. Vail, M.D., "Human Food," *The Dietetic Reformer and Vegetarian Messenger* (April 1863), 49-50.

vegetarianism was that "the whole tendency of the system of killing and eating of animals is towards brutality, cruelty, murder, and cannibalism. It is a *lust-engendering* and *lust-feeding* system, having its rise in sensualism [*sic*] and selfishness, not sympathy and enlightened reason [my emphasis]."[134] In July of 1863, *The Dietetic Reformer* included a quote from Flavel, presumably John Flavel the seventeenth-century English Presbyterian minister, which essentially proposed a "you are what you eat" ideology. According to Flavel, "according to their nature so is their food. Sensual men feed upon sensual things, spiritual men upon spiritual things; as your food is so are you. If carnal comforts can content thy heart, sure thy heart must be a very carnal heart."[135] Here, spiritualism and religiosity are set in opposition to carnal foods, such as meat. Thus, meat or flesh-eating essentially blackens the soul by sensualizing and sexualizing it and awakening carnal desires of the flesh, making a pious woman who eats meat, for example, an impossibility, and purity and piety in women was considered a necessity for Victorian ideas about self-fulfillment and even marriageability, as discussed in the previous chapter. Farther down the same page of the 1863 issue, the editors of *The Dietetic Reformer* included the statement that "Great strength, fleetness of foot, *usefulness*, cleanliness and *docility*, are, then, always characteristic of vegetable eaters [my emphasis]"[136] suggesting that all worthy, arguably feminine, attributes arise from the eating of vegetables as opposed to meats. Since the anonymous author of this statement includes such notably idealized female (and even working-class) characteristics as usefulness and docility, there is an implied assumption in this statement that vegetables – and not only vegetables but flavorless, unstimulating vegetables if the above articles are to be believed – are the only appropriate foods for female consumption.

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[134] "Man's Relation to the Brute Creation," *The Dietetic Reformer and Vegetarian Messenger* (October 1865), 100.
[135] *The Dietetic Reformer and Vegetarian Messenger* (July 1863), 87.
[136] *Ibid*.

As we have seen, Victorian women, and advocates of vegetarianism more broadly, were instructed to abstain from meat and stimulants, but in an era which thought key aspects of a nutritional diet, such as iron and salt (iodine), were not only unhealthy but not even human foods, such abstinence efforts left women with few healthful and enjoyable options at mealtimes. As mentioned in the previous chapter, white foods were largely thought to be best for women both in and out of literature, as little else is left on the table once you remove all spices, stimulants, and meats from one's menu. In the case of *Jane Eyre*, the only foods shown to touch Jane's lips are gruel, bread, cake, and tea – all of which are notably white – and such circumstances are replicated throughout Victorian domestic fiction. Even texts focused on the act of feminine eating, like "Goblin Market," warn against bright and colorful foods like fruits as being dangerous and disruptive.

In his popular medical guide, *The Aberdeen Water-Cure Journal and Family Guide to Health*, Reverend Alexander Munro outlined that the most healthful foods consisted of mother's milk, potatoes, bread from wheat, and oatmeal as "persons will continue strong and every way well nourished [*sic*] who eat little else," while tea, sweet cake, bread and such were not thought to be unhealthy but certainly eaten out of proportion.[137] Not only were women instructed that white foods were the most appropriate and the most healthy, but Munro also revealed that they were eaten in the greatest quantities, despite the fact that we now know white foods offer the least nutritional value in addition to their relative blandness. *The Dietetic Reformer* actually corroborates that women went in search of white foods, apparently aware even then of the specific limitations to their diet, in an 1863 article entitled "The Cruelty of Luxury," which included accounts from English butchers testifying to the fact that veal had to be bleached before

[137] Munro, *The Aberdeen Water-Cure Journal*, 201.

female customers would consider purchasing it. Claiming that unbleached veal could not be sold, one butcher recounted how "the ladies that come by [his] stall, say, 'I do not like the colour [*sic*] of it, it is not *nice and white*.'" He went on to clarify that the process of bleaching veal – which was unnecessarily cruel in his professional opinion as a butcher – was "not to make the veal *wholesome* but WHITE." In fact, the process of bleaching actually negatively affected the flavor of the final product,[138] highlighting how the color and appearance of the meat mattered more to female customers than flavor and quality.

This account suggests several noteworthy conditions under which women could consume meat, and food more generally, without reproach. First, although *The Dietetic Reformer* was a vegetarian journal focused on advocating a vegetarian lifestyle and therefore had specific motives for including an article detailing the inhumane treatment of calves slated to become veal, the inclusion of testimony from a butcher, who is obviously not vegetarian but an expert in the field of meat-production, implies that his experience might certainly have been common. Therefore, with all the other evidence about the appropriate foods for consumption that have so far been discussed, it is safe to assume that many women wanting to eat meat might have gone to such lengths as to seek out bleached options. It is particularly interesting that the bleaching process – which the butcher admitted was only done to appease his female clients – seems to have only been applied to veal. If the chief problem with meat-eating, especially in regards to women, was its lust-inducing, carnal effects, then the choice to consume meat from an immature, and therefore sexually pure, animal may have made veal a socially acceptable meat option for women. Apparently, in order for women to eat meat and remain characteristically "feminine"

[138] "The Cruelty of Luxury," *The Dietetic Reformer and Vegetarian Messenger* (July 1863), 85.

and ladylike, first the meat had to come from a young, even infantile, source and then still had to have the color, and therefore flavor, literally drained from it.

As the rules for what one could and could not eat grew quite complicated, examples of acceptable and supposedly healthy methods of food abstinence worked to further complicate and undermine the relationship between Victorian women and their food. The October 1865 issue of *The Dietetic Reformer* included the details of a paper entitled "On The Effects of Scanty and Deficient Food" that a Dr. Davy apparently presented to the British Association in Birmingham.[139] In this paper, Dr. Davy argued that "occasional abstinence from food was likely to prove more beneficial than otherwise," citing case studies on African and Artic travelers. Essentially, Dr. Davy found that people who ate less, as in people below the poverty line, tended to live longer despite their dire circumstances.[140] According to Dr. Davy,

> "With regard to the benefits of occasional abstinence from food there can be no doubt, always under certain limitations. The custom of fasting adopted as a religious act was doubtless also dietetically correct. When, by luxury and gluttony, the system has become gorged, and the whole nature animalised [*sic*], it seems logical to abate the cause of depravity … Thus, without understanding the process probably, the winebibbers and riotous eaters of flesh were led by the external signs of penitence into a condition favourable [*sic*] to a healthier exercise of their mental and spiritual powers."

Therefore, when customs of eating became too "depraved" and extended beyond the limits of polite social standards, indicating a depravity within the individual eaters in question, then fasting could be used as a method of both physical and spiritual atonement. Furthermore, for Dr. Davy, abstinence was *only* necessary and beneficial – and thereby healthy – when eating became

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[139] The journal does not make clear which association it is referring to, merely titling that section "The British Association, 1865." I would assume that maybe the editors of *The Dietetic Reformer* were relating the minutes from an organization affiliated with the vegetarian movement, although it may have just as likely been an association of physicians, considering the ensuing discussion. It is impossible to know; however, the participants of the conversation that apparently took place within this meeting after the reading of the paper consisted only of individuals with the title of doctor.

[140] "The British Association, 1865," *The Dietetic Reformer and Vegetarian Messenger* (October 1865), 101-102.

immoral or other sins of the body were present. Too much fasting, in his opinion, "robs [individuals] of the power of active usefulness, which every person ought to try to retain;"[141] thus, a fine line existed between moral and immoral usages of food abstinence. While starvation was certainly a "folly" for Dr. Davy, the members of this organization felt that "forgoing a meal or perhaps two" every now and then could cause no harm to the average person and, indeed, might be extremely useful. Once again, usefulness and piety factored into food choices and echoed Victorian ideals of femininity that every woman was encouraged to aspire to.

In addition to moral concerns, the doctors present at this meeting agreed that animal food had the tendency to fatten those who ate it and gave some philosophical and practical advice to those ladies "with a doubtless desire to improve in size or grow *beautifully less* [my emphasis]."[142] The fact that the discussion of Dr. Davy's paper was concluded with an in-depth lecture, of sorts, that contemplated women and their waist sizes, tangentially in the least, suggests either that this article was in fact targeted towards female readers of the journal or that the members of the organization present for the reading of the paper as well as the journal's editors believed that the subject of abstinence was somehow more of a women's issue. Despite the fact that the article maintained a neutral stance that variety exists within the human form and that some bodies are just larger or smaller than others, the article still managed to conflate female beauty with smallness, as if being *less* is somehow a virtue in and of itself.

An example of such a worthy woman who ate little but had a large presence appeared in an earlier edition of *The Dietetic Reformer* in an article entitled "What We Need to Eat."[143] Once

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[141] "The British Association, 1865," *The Dietetic Reformer and Vegetarian Messenger* (October 1865), 102.
[142] *Ibid.* 103
[143] "What We Need to Eat," *The Dietetic Reformer and Vegetarian Messenger* (January 1861), 115. According to the editors of the journal, this article was originally published in the *Phonetic Journal*, "devoted to the Reading, Writing, and Spelling Reform. It often contains valuable papers bearing on Dietetic Reform, Temperance and other good movements."

again, this article expressed concern about over-eating. The article, in an attempt to discern what cultural diet seemed to yield the strongest people (i.e. men), argued that the English "eat too much:" "Many people eat breakfast, lunch, dinner, tea, supper – five meals a day, and four of them hearty ones, with various kinds of fleshmeat [*sic*] and prepared dishes," something that people in other countries apparently did not do.[144] As proof of how this was unnecessary, the author related the following story:

> "The smartest Irishwoman we know of – a little woman who can roll a barrel of flour up to a room in the third story, and walk ten miles without prejudice to a hard day's work – has not tasted meat for twenty years, and lives every day on a little bread, and a pennyworth of milk boiled up with a very weak cup of coffee."[145]

This article tried to convince men that large quantities and portions of stimulating, heavy food were unnecessary for and even a hindrance to strength and endurance by stressing the abilities of a working-class woman who had eaten a particularly plain and limited diet for the past two decades alongside stories of men, often exploited and in positions of subservience, from other countries who persisted on minimal fare. However, while most of the examples consisted of poor, working (and serving) men who never needed meat to accomplish their work, the author also shared tales of celebrated saints who ate similarly, stating:

> "Not only may the most tremendous muscular force and great powers of endurance be nourished upon a very light vegetable diet, but great mental energies as well. For example: Saint Gregory Nazienzen lived on bread, herbs, and salt. The great Saint Ambrose, of Milan, lived in rigorous abstinence, and seldom broke his fast before noon. Saint Chrysostom, called on account of his eloquence the Golden-mouthed, ate one meal a day of bread and herbs. Saint Augustine lived on apples and herbs. Saint Bernard, the ablest and most influential man in Europe in the twelfth century, lived on coarse bread softened in warm water; and great numbers of the ablest and most eminent men, in all times, have lived in great abstinence."[146]

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[144] "What We Need to Eat," *The Dietetic Reformer and Vegetarian Messenger* (January 1861), 115.
[145] *Ibid*. 116
[146] *Ibid.* 115.

Notably, these men lived off of vegetable diets that largely consisted of *bread and herbs*, and the author does not provide any suggestions or alternatives for a healthy diet, which is quite misleading given the title of the article. Instead, the author focuses on the apparent achievements and successes of people, like the saints listed above, who ate heavily restricted diets or even practiced various forms of acceptable self-starvation (fasting), effectively endorsing such minimalistic approaches to food and eating and idealizing the necessary diet of the working-class.

While the author directed his arguments towards men and outlined the apparent scores of men who lived according to such ascetic principles – either by choice or by necessity – the implication is that women already practiced such self-denying methods at the dinner table. For instance, despite the lengthy list of illustrious men above, the author chose to end his article with the tale of the Irishwoman, suggesting that he felt her case to be the most compelling and important. Considering that the Irishwoman lived in the present at the time of the author's writing and that she worked quite tirelessly, the author suggests that men could learn from the behavior of such a common, working class woman. In this regard, the Irishwoman becomes a type – a substitute for all women – and any women readers of her tale would no doubt be encouraged to acquire sustenance from her example. Because of her assumed poverty, the Irishwoman has no alternative to the way she lives. Rather than choosing to abstain from eating, she literally does not have access to ampler fare; however, she supposedly accomplishes much more on her diet of bread, milk, and coffee than anyone of the upper classes who feasts on delicacies, marking her diet as the most beneficial for productivity. In addition to her meager daily portions of *white* foods, by including the Irishwoman's story after those of the saints, the author equates her actions with those of the religious figures who preceded her, which would

resonate with the image of the ideal woman as a moral center of the household. Finally, though, and maybe most importantly, the Irishwoman was primarily marked by her *usefulness* and her strength, in spite of her diet. As discussed in the previous chapter, and as I will discuss in greater detail below, a woman's usefulness mattered above all else, and as Dr. Davy reminded readers, the goal of eating was only to eat what makes one useful. In essence, then, the Irishwoman in this story represented a successful woman who literally consumed little but contributed immensely to her community and, assumedly, her family.

In addition to praising the feats of women who subsisted on particularly limited diets, women were being urged to police their plates and only eat what was absolutely necessary. The concern surrounding over-consumption of food, not surprisingly, carried on throughout the entirety of the nineteenth century – long beyond the heyday of the actual food reform and vegetarianism movements of the 1860s – and assumedly gained traction with young women across Britain and the Western world, if the newfound existence of anorexia at the end of the century is any indicator. In 1880, *The Girl's Own Paper* was established, and this popular magazine, featuring literature and advice columns on such topics as fashion, history, etiquette, and more, included a medical column written by Dr. William Gordon-Stables (known to his readers as Medicus) for the first twenty-two years of its circulation. In his column, Dr. Gordon-Stables used his knowledge and experience as a physician to instruct his young female audience on matters of medicine, beauty, and diet. Frequently, Gordon-Stables gave conflicting advice about food and the body. In 1882, Gordon-Stables told readers that there were "evil" consequences to over-eating, suggesting that ladies eat slowly without drinking or engaging in too much conversation, and additionally that "eating between meals is a grievous mistake."[147] In

[147] Medicus, "A Few Facts About Food and Digestion," *The Girl's Own Paper* (1882), 566.

this way, he first suggested conscientiousness in consumption so as to ensure that one only eats until satisfied (advice that is still in effect today and widely regarded as beneficial) but then essentially ensured that no real food would be consumed outside of designated meal times. Considering that a woman's stomach capacity at any one time was particularly small due to the pressure of her corset, an issue I will discuss more in the next chapter, should she find that she was hungry again upon completion of a meal, she might be convinced that eating was not in her best interest, and she would, therefore, go hungry. In an era in which female beauty was strongly entangled in an ideal of slenderness, the fear-mongering that appeared time and again about the dangers of over-eating seem almost entirely unnecessary. Considering too that Gordon-Stables was writing about the need for dietary restriction only nine years after the initial discovery of anorexia, it becomes clear that women were being encouraged to adopt unhealthy eating principles and that particular scrutiny to the quantity of food on one's plate might actually have suggested that an anorexic body was within acceptable societal limits of the female form.

In his column, Gordon-Stables also warned against eating the wrong types of food, saying "it is far better to go without that to eat badly prepared food" and even equated drinking hard water with imbibing poison. Should girls eat the wrong things and acquire indigestion as a result, serious consequences and even death could arise, according to Gordon-Stables. As young girls, and even grown women, in the leisure classes would have little to do with the preparation of their food or were likely to know the source and quality of their water supply off-hand, comments such as these might have been likely to inspire paranoia surrounding the foods and beverages on one's table. Readers may have concluded that it was often better to go without – on the orders of their favorite doctor – than to risk eating things that were out of their control. Even his actual diet prescriptions were suspect and likely to enforce innutritious eating, as he believed

that too much meat was consumed, too little bread, and that puddings were the most nutritious food group.[148] Unfortunately, his dietary suggestions fell largely within the scope of a supposedly feminine-friendly diet, thus reinforced popular unhealthy beliefs about food and eating and guaranteed the anorexic reality facing most women.

With a widespread rhetoric of death and damnation in discussions of over-eating and the general renown given to those who restricted their diets, it likely would have been far easier for a woman to conform to the overwhelming pressure to abstain from eating than to navigate the social customs and connotations of food. Even if a woman had no intention of starving herself or of refusing food as a method of minimizing her waistline, typical understandings of gender performance at the time had the potential to subconsciously strengthen a pre-anorexic, and later anorexic, societal agenda towards food and the body. According to the writings of John Ruskin, a well-known English critic of art and society, the ideal woman was silent, submissive, and subservient to her husband. In *Sesame and Lilies*, a compilation of three speeches that Ruskin gave originally published in 1865, Ruskin engaged with the "conventional construction of the feminine, as pacific, altruistic, and uncompetitive" in what would become a notorious example of "Victorian male chauvinism."[149] In his remarks directed at the "lilies" of British society, Ruskin spends the majority of his time belittling women and their abilities. For Ruskin, women were ultimately flawed, and he believed their chief efforts should be directed towards eliminating those imperfections in order to be useful members of society, meaning that "whatever else [they] may be, [they] must not be *useless*, and [they] must not be *cruel* [my emphasis]." [150] Once again, the usefulness of women, alongside their selflessness, was paramount. In addition, Ruskin stated

[148] Medicus, "A Few Facts," 566-567.
[149] "John Ruskin," *Britannica Academic*, Accessed April 13, 2017, http://academic.eb.com.navigator.southwestern.edu:2048/levels/collegiate/article/John-Ruskin/64461.
[150] John Ruskin, *Sesame and Lilies* (London: George Allen, 1902), xiv.

that "the first duty of young people [was] to be delighted and delightful,"[151] and while this particular sentiment was directed at both men and women, the connotation for women was, again, that other's perceptions of them – or in other words, how they appeared and contributed to those around them – mattered most. In order to work to improve themselves, and thus "resolve not to be useless," Ruskin believed that women must "consider all of [their] accomplishments as means of assistance to others."[152]

Continuing with the theme of usefulness, Ruskin argued that women "must be to the best of [their] strength usefully employed during the greater part of the day, so that [they] may be able at the end of it to say, as proudly as any peasant, that [they had] not eaten *the bread of idleness* [my emphasis]."[153] Here, Ruskin associates the ideal woman, once again, with working-class women – who as we have seen ate very little but were believed to contribute exponentially beyond their means – and the sin of idleness with food, as if eating was somehow a leisure activity. More than that though, Ruskin's ideal woman, a rarity in British society according to him, was "recognized chiefly in the happiness of their husbands and the nobleness of their children;" [154] thus, a woman was only as good as her contribution to her family and held no identity of her own outside of her relationship as wife, mother, and daughter. To be this perfect woman, caring for the happiness of others but never her own, "She must be enduringly, incorruptibly good; instinctively, infallibly wise – wise not for self-development, but for *self-renunciation* [my emphasis]."[155] While *Sesame and Lilies* refrained from giving any practical examples of how women might act and behave, and it therefore never discusses the act of eating

[151] Ruskin*, Sesame and Lilies*, xvi.
[152] *Ibid*. xvii-xviii
[153] *Ibid*. xxi
[154] *Ibid*. xxxiii
[155] *Ibid.* 109

in particular, Ruskin's constant references to usefulness through service and his focus on the assumption that women were supposed to be inherently self-denying serve to reify ideas about food abstinence.

In the sense that abstinence leads to weakness, any woman who starved herself – whether she was doing so subconsciously or consciously – would in effect make herself dependent on those around her in subscription to beliefs such as Ruskin's that women were the more fragile sex. If women were believed to be so inferior that their identity was often conflated with service to others, this way of thinking might also have supported ideas that women potentially needed less food or were somehow less deserving of it. If a woman's worth was in her usefulness, which as we have seen was the sole reason to eat (to be useful; not to enjoy it and not to be healthy), then her food requirements diminished exponentially, as it was her duty supposedly to provide for the needs of others before her own, and if this self-denial in the form of self-starvation caused any pain, then that "conquerable pain"[156] would serve to make her stronger, according to Ruskin and most of the conduct book writers discussed thus far. In this way, food-abstinence and self-starvation practices became a performance of feminine passivity, and the denial of worldly goods, which apparently extended to food, assured women their status as appropriately feminine and, thus, appropriately marriageable.

[156] Ruskin, *Sesame and Lilies*, xxiii

Chapter 4: Killer Fashion: The Fetishization of Slenderness

Throughout the mid-nineteenth century, relationships to food changed and navigating the many, extensively coded, social norms around eating grew particularly difficult. In the last chapter, it became clear that, underneath the various strictures governing ladylike eating habits, both subliminal and overt concerns about over-eating and obesity were being communicated, further complicating the act of eating and encouraging unhealthy habits. As eating according to societal expectations became increasingly difficult, abstaining from food might have been an easy choice to make at meals in which one was under constant scrutiny. The additional fear of over-eating – both for its physical and spiritual connotations – easily translated into fashion in the form of the constricting corset and the small group of advocates who practiced an extreme version of corset-training, known as tight-lacing.

In the context of women's relationships to their bodies, the concept of the corset alone lends itself to a pre-anorexic view of Britain, and the Western world, in the nineteenth century. While it can certainly not be said that all corset-wearers maintained undiagnosed eating disorders, especially before the discovery of anorexia, or that even the corset was actually intended to diminish appetites despite the fact that it did interfere with stomach capacities and digestion, the existence of the corset and its longevity as an essential fashion item suggests a long-held obsession with slender waists. As the corset slimmed and smoothed the waist, shaping it to the desired hourglass figure often thought to be the most beautiful even today, it functioned to literally make the waist smaller by artificial means, making it a corollary to pre-anorexic behaviors which chiefly existed throughout the nineteenth century as methods of maintaining a small frame.

Historically, concentrations on corsetry by scholars has been used, according to fashion historian and curator Valerie Steele, as "proof" of women's oppression in the nineteenth century,[157] but this view has often limited and denied the realities of why women themselves would choose to wear corsets, when they have been shown time and again to be painful and detrimental to health on various levels. For both Steele and art historian David Kunzle, the corset "also functioned as an adjunct to female sexual beauty" and "allowed women to articulate sexual subjectivity."[158] More than that though, "The corset, like the shoe, was one of the first items of clothing to be treated as a fetish."[159] However, as Steele points out in her works, there was a huge disparity between your average woman's corset and a tight-lacer's, which even in the nineteenth century was highly contentious. Despite this awareness in much of the recent scholarship on corsetry and its extremes, most research has centered on the erotic nature of the corset beginning in the medieval period with its earliest iterations and moving through to the contemporary uses and significances of the fashion piece. Little connection has been made, beyond the rare individual, case-by-case analysis, between eating disorders and corsetry, particularly corsets made for tight-lacing. Considering that the height of the rational dress reform movement and the attack on corsetry took place near the end of the century in the 1880s – just after the moment when anorexia was finally discovered – it is impossible to ignore the similarities between pre-anorexic thought and wasp-waisted beauty ideals propagated by the fashion industry and the society that created it.

Tight-lacing was a severe form of waist-training which consisted of wearing the smallest corset possible and lacing it so that no space was allowed between the laced sides so as to

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[157] Valerie Steele, *The Corset: A Cultural History* (New Haven: Yale University Press, 2003), 35.
[158] *Ibid*.
[159] Valerie Steele, *Fetish: Fashion, Sex & Power* (Oxford: Oxford University Press, 1996), 58.

achieve a waist smaller than sixteen inches. The corset would be laced increasingly tighter over time until both sides met in the back and a potentially smaller corset could then be worn. Enthusiasts of tight-lacing often wore their corsets day and night without loosening them until the desired waist size was achieved. While tight-lacers were certainly not indicative of all Victorian women by any means, the debate surrounding their use of corsets took center stage between 1867 and 1874 with the *Englishwoman's Domestic Magazine* (*EDM*), which "printed thousands of letters on corsetry and tight-lacing, often with a pronounced sadomasochistic tone."[160] For the better part of the latter half of the nineteenth century, discussions of corsetry dominated lifestyle and medical publications with many correspondents contributing to the conversation from across Great Britain. Despite the fact that tight-lacing was condemned by the mainstream majority of corset-wearers as well as medical practitioners, it garnered a nationwide discussion. This fascination with corsetry by both sides of the argument suggests a larger concern for waist size than specific ideas about food and eating alone can convey, which is why corsets must be reevaluated alongside pre-anorexia in order to fully illuminate the power of the corset itself within Victorian society.

Tight-lacing was a particularly dangerous practice, and nineteenth century physicians and laypeople both were quick to deride and discredit it on the basis of health. In 1866, English beauty writer Arnold Cooley wrote that "The zone or waist of healthy and symmetrically formed women … is found to measure twenty-eight to twenty-nine inches in circumference." According to Cooley, any waist measuring smaller that twenty-seven inches around was unnatural and that, for every inch below the accepted limit, a woman's health showed "deterioration." Despite this, Cooley found that "most women [did] not permit themselves to exceed twenty-four inches round

[160] Steele, *Fetish*, 59.

the waist, whilst tens of thousands lace[d] themselves down to twenty-two inches, and many deluded victims of fashion and vanity to twenty-one and even to twenty inches," which Cooley largely deemed as "suicidal."[161] According to Kunzle, however, the "'fashionable standard' for the ideal nineteenth-century waist" would have been closer to eighteen inches. Many tight-lacers claimed it was possible to constrict to nearly thirteen inches in circumference, but this was apparently only barely believable even then and is now practically impossible to prove.[162] Either way, women would have been particularly aware of their waist sizes in relation to the other women around them.

Throughout the 1860s and '70s many women wrote to magazines such as the *EDM*,[163] about their own opinions of and experiences with tight-lacing, both good and bad. It is in these letters, most written anonymously, that supporters of tight-lacing made themselves and their reasoning known. In Lord William Barry's popular *The Corset and the Crinoline*, the author provides not only his own opinions about the desirability of corsets and their effect on the female form but also includes some correspondence from ladies writing to various magazines of the time as supposed evidence of the vast support behind corsetry by those who wore it. One such woman, writing to *The Queen* (Barry does not include the date, but she mentions the Exhibition of 1862 in her letter), believed that only corsets which were poorly constructed or improperly

[161] Arnold Cooley, *The Toilet and Cosmetic Arts in Ancient and Modern Times* (London: Robert Hardwicke, 1866), 352.
[162] David Kunzle, *Fashion and Fetishism: Corsets, Tight-Lacing & Other Forms of Body Sculpture* (London: Sutton Publishing, 2004), 306.
[163] Unfortunately, I did not have access to the original letters. The only letters available to me were curated and included in the works of other author, so I am relying on the truthfulness of other authors in their selection of the *EDM* letters. Lord William Barry includes and discusses some of the *EDM* letters, as well as other similar addresses to other popular publications, in his 1868 book *The Corset and The Crinoline*. Kunzle also includes some letters in the appendices to his book *Fashion and Fetishism*, and Valerie Steele also makes frequent reference to the letters. These letters are somewhat infamous, both for their content and subsequent treatment by historians, with many believing they have been used uncritically in the past. I attempt to address that concern by refraining from making generalizations about all women's relationship to corsets based off the information I acquired from those letters.

worn posed any threat to a girl's health. As an example, the writer of the letter explained how she began corset-training her daughters at the age of seven. Whenever her daughters outgrew their corsets, new ones were made to the new specifications of their size, but the waist circumference always remained the same. According to the writer, "by these means their figures were directed instead of forced into a slender shape; no inconvenience was felt, and [her] daughters … enjoy[ed] perfect health, while the waist of the eldest is eighteen inches, and that of the youngest seventeen." In the writer's opinion, beginning her daughters' corset-training at an early age, as opposed to beginning nearer the onset of puberty at around twelve or fourteen years of age as was common, eliminated the need for "tight-lacing."[164] Interestingly, it becomes clear immediately that there was not one single definition of tight-lacing at the time. For this woman, despite the fact that she was attempting to maintain her daughters' waists at their size at *the age of seven*, she does not believe that her daughters were laced tightly, as she never allowed their waists to grow beyond that initial prepubescent size.

"Training" as opposed to "forcing the figure into slenderness" was considered to be the better method by the 1860s, according to Barry; [165] however women who waited until adulthood were still able to manage fantastic feats of waist manipulation according to one 1868 correspondent of the *EDM*, who claimed that she did not begin tight-lacing until after marriage and still managed to reduce her waist circumference from twenty-three to fourteen inches by forcing a fourteen inch corset on, living in it day and night, and continuously tightening the laces until it finally fit properly. As is common with sadomasochism, this tight-lacer acknowledged the great pain she felt at the beginning of the process but grew to enjoy the feeling, and regardless of

[164] A Former Correspondent of *The Queen* (Edinburgh), "Corsets and Small Waists," Qtd. In Lord William Barry, *The Corset and the Crinoline* (London: Ward, Lock, and Tyler, 1866), 166-168.
[165] Barry, *The Corset and the Crinoline*, 168.

any pain, her husband's delight – for whom she began tight-lacing in the first place – "amply repaid [her] trouble." In this woman's case, she began tight-lacing so as "not to lose one atom of [her husband's] affection for the sake of *a little trouble* [my emphasis]."[166] Several things of note reveal themselves in her statements. First, because the woman was capable of slimming her waist, in spite of intense pain and the many health ailments which she exposed herself to as discussed above, she trivialized her own effort and experience by downplaying the difficulty implied in such a transformation. Secondly, the woman stated that her only reason for utilizing tight-lacing, or for even wanting a smaller waist, was her fear of her husband liking someone else's figure better;[167] therefore, in her mind, tight-lacing became a necessary way of keeping her husband's love. Even if she did grow to enjoy the pain she felt, it could be argued that she enjoyed it because there was a real, perceived reward for her struggles – her husband's approval.

The need to and desire received from controlling her own physical shape so as to make herself, in essence, more worthy of her husband's love is reminiscent to contemporary anorexics' struggles for control in their own lives and the feelings of inadequacy often associated with that. The fact that the woman believed tight-lacing to be easy and without harm, despite the evidence to the contrary she must have read if she felt compelled to write to the *EDM* and share her story, is also suggestive of a pre-anorexic mindset in which concepts of pain and sickness lose any meaning other than in association with a desired goal, much like a modern anorexic who does not know she is sick but thinks, if she eats less and becomes smaller, her problems will be solved – as if being "beautifully less,"[168] as one *EDM* correspondent quoted, would save her. Interestingly, this phrase, "beautifully less" also made an appearance in the last chapter with a

[166] An excerpt of a letter to the January 1868 issue of the *Englishwoman's Domestic Magazine*, Qtd. in Barry, *The Corset and the Crinoline,* 168-169.
[167] *Ibid*. 168
[168] Qtd. in Barry, *The Crinoline and the Corset*, 179.

different author. The fact that a woman writing to the *EDM* references it, gives credibility to the idea that to be inherently beautiful in the Victorian era is to be small and reinforces the belief in women's "less-ness" in a patriarchal society.

The Corset and the Crinoline includes many such descriptions of women and tight-lacing. In one such letter, jealousy appeared in a young woman who claimed to have a twelve-inch waist, seeking ways to distinguish herself from her sister who she perceived to be the more beautiful of the two despite her larger waist size.[169] This is, of course, not surprising if we accept that one reason for corset-training and developing the coveted wasp-waist was to gain acceptance and approval within society – most notably in the form of love and marriage, as the tale above suggests. In fact, there were few avenues for adult women to pursue other than marriage if they wished to survive and thrive in Victorian England, making it all the clearer why women might do the (now) unthinkable in the name of beauty. Even *The Lancet*, in its notice of a woman whose death was attributed to tight-lacing (suffocation), acknowledges that "Ladies will, of course, be in the fashion. We only show them that this occasionally takes them out of the world."[170] Here, the writers offer no alternative for abiding by fashion dictates even when that fashion was deemed deadly – and the corset was not even really fashionable so much as it was essential. Instead, they accepted as fact that women will behave irrationally in the name of fashion, as if women's chief and only concern was the clothing on their bodies. *The Lancet* often discussed issues relating to tight-lacing with the condescension evident in this statement, possibly either because they were tired of rehashing the same arguments in opposition of tight-lacing time and

[169] An excerpt of a letter to the February 1868 issue of the *Englishwoman's Domestic Magazine*, Qtd. in Barry, *The Corset and the Crinoline,* 169-170.
[170] "Medical Appointments – Births, Marriages, and Deaths," *The Lancet* (May 1868), 675.

again or possibly because corsetry was resolutely a woman's issue, and certainly one the male writers for *The Lancet* could not possibly understand.

While corsetry was obviously an important part of a Victorian woman's life, as it physically affected the way one might interact with the world around her, its significance to the history of anorexia is much more complicated than just its position within the world of fashion. Clothing had a symbolic purpose as much as it did a practical one. It was a statement presented at first viewing of a person's class, status, age, personality, and so on. What a woman chose to wear might make or break her acceptance by her peers or affect her chances of maneuvering up the social ladder. According to Barry, the wearing of stays is what made women "presentable in society."[171] Even publications which denounced tight-lacing, like *The Girl's Own Paper*, admitted that to not wear stays would be to appear "untidy,"[172] which would have been a form of social suicide. In other words, until alternative forms of dress might be made mainstream, "Without the aid of the corset … no dress of the present day could be worn, unless its fair possessor was willing to submit to the withering contempt of merciless society."[173] Even when the dress reform movement began to offer other styles of dress that did not require a corset to be worn, *The Girl's Own Paper*, which always included the latest fashions in its issues, reported that, in America where the movement began, "rational dress" was often associated with "what is masculine, inelegant, and eccentric"[174] – unappealing qualities for the average Victorian woman to say the least.

[171] Barry, *The Corset and the Crinoline*, vi.
[172] The Lady Dressmaker, "Recent Ideas on Dress Reform," *The Girl's Own Paper* (1891), 35.
[173] Barry, *The Corset and the Crinoline*, 189.
[174] The Lady Dressmaker, "Recent Ideas on Dress Reform,"35.

The significance of being beautiful in Victorian Britain was often as much a practical concern for women as it was a fashionable one. In *Intemperance and Tight Lacing*, Fowler addresses his female readership, stating

> "Properly you are called *fair*. You are called fair, beautiful, lovely, handsome, pretty, graceful, charming &c. God has made you so. Man is constituted to love female beauty. And whatever *adds* to your beauty, should be sedulously cultivated. Whatever *detracts* therefrom, should be entirely eschewed."[175]

While Fowler, an adamant opponent of tight lacing, certainly did not believe a corseted waist could be beautiful, he was in the minority. As we have already seen that the majority of women did not believe the arguments made against their corsets by the medical community, especially not the women likely to practice tight-lacing, such an argument would likely just have reinforced mainstream ideas about corsetry. If one believed that a corset would make her more beautiful in her own eyes or those of a man, she would likely have been encouraged to "sedulously cultivate" a slender waist. Considering that, as Barry argued, "slender waists *are* … held in high esteem by the great majority of the sterner sex,"[176] women had little reason to believe that beauty ideals had changed just because medical knowledge had advanced, and in reality, they had not. According to an 1867 letter written by a male correspondent to the *EDM*, "there can be no doubt that gentlemen admire those figures the most which have attained the greatest slenderness … there is no more deplorable sight than a large and clumsy waist." The writer of this particular letter even expresses an awareness of men's overall lack of familiarity with "the means used for attaining a fashionable figure,"[177] and his nonchalance about this fact suggests that, for the majority of Victorian men, the end result was all that mattered. While the anonymous man would likely have

[175] Fowler, *Intemperance*, 29.
[176] Barry, *The Corset and the Crinoline*, 189.
[177] An excerpt of a letter to the September 1867 issue of the *Englishwoman's Domestic Magazine*, Qtd. in Barry, *The Corset and the Crinoline,* 181-182.

held rather fetishistic views towards slenderness as an advocate of tight-lacing, his views, although extreme, would probably have been shared by men at large who were inexperienced with the undertakings necessary to become "beautiful" in a male-dominated society.

In the 1880s and '90s, Dr. Gordon-Stables often included beauty advice in his medical column. In 1880, he wrote that "to look her best is the desire of every young girl … not only is it her desire, but it is also her duty, for the sake of those around her."[178] Nearly twenty years later, in 1898, Gordon-Stables reiterated, "Yes, beauty is a duty you owe to everyone around you." Stating "There is nothing that some females will not do or suffer for the sake of being considered pretty or beautiful,"[179] Gordon-Stables simultaneously implies that girls must be beautiful but because, being told that, they then seek out beauty, they are considered vain or frivolous for doing so, especially when their attempts at beauty put their health at risk. This hypocrisy, as typical as it was of Victorian gender stereotypes, was rather uncritical of the reasons why women might need to risk looking vain in order to achieve beauty, and because of that, women were often condemned for the very aspects of their personality and physicality which society instructed them to nurture.

One does not need to imagine the effects of tight-lacing on the internal workings of the body as nineteenth century physicians wrote prolifically on the subject in great detail. As early as 1842, *The Medico-Chirurgical Review*, a medical science journal, published an article entitled "On the Use and Abuse of Corsets," which stated that

> "perfect freedom can never be exercised, if the body is cabined, cribbed, confined by the stiff stays of the present day. A woman can then neither stoop, nor bend backwards, not to a side without irksomeness and trouble. The pliancy and

[178] William Gordon-Stables, M.D., R.N., "How Can I Look My Best," *The Girls' Own Paper* (1880), 130.
[179] William Gordon-Stables, M.D., R.N, "Beauty: A Duty," *Own Paper* (1898), 222.

> flexibility of the back, so essential to graceful movement of the body, become, as is well known, less and less as the years advance."[180]

American phrenologist O. S. Fowler wrote in *Intemperance and Tight-Lacing*, originally published in 1848, that the "murderous practice of Tight Lacing" was a most barbaric custom that killed thousands of women each year.[181] Attempting to convince men and women alike of the significance of tight-lacing's effects on the body, Fowler asked his readers to imagine the following scenarios:

> "Deprive the stomach of its required supply of food. You become weaker and fainter in mind, in body, till you die of pure [inanition]. And this will show both the nature and function of digestion, and the importance of a healthy stomach, as well as of furnishing the right kind and quantity of food. Another. Go without breath, or breathe impure air, or air saturated with poisonous gases, or breathe only half enough, or compress the chest, and the office of the lungs, as well as the importance of abundance of wholesome air for respiration, will become sensibly apparent. Or let the heart become enfeebled – Its pulsations labored and inefficient, – the blood unequally distributed, the hands and feet cold, but the head burning up with heat, the skin cold and clammy, the body chilly, the blood diseased – any disorder affecting the circulation, and you will have a practical illustration of the importance of a vigorous circulation. Let the liver, let the kidneys, let any of the internal organs be disordered, and we then feel the value of vitality by its scarcity."[182]

In addition, Fowler believed that tight-lacers "only have half of their natural powers of life, and are therefore only about half-alive, the other half being dead – dead while they live."[183] Giving more specific medical context to Fowler's inflammatory account, *The Lancet*,[184] one of Britain's most significant medical journals, described in 1868 how tight-lacing: "almost annihilate[d] the respiratory movements of the diaphragm," impaired and weakened the abdominal muscles to

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[180] "On the Use and Abuse of Corsets," *The Medico-Chirurgical Review* 37 (July 1842), 168.
[181] O. S. Fowler, *Intemperance and Tight Lacing, Considered in Relation to the Laws of Life* (London: J. Watson, 1852), 38.
[182] *Ibid.* 27
[183] *Ibid*. 28
[184] According to Steele, *The Lancet* published nearly an article a year from the 1860s to the 1890s on the dangers of tight-lacing. *The Corset*, 67.

such a degree that tight-lacers would actually feel worse without the support of their stays, made breathing inefficient and led to "general languor and debility," pushed internal organs downward thus displacing the natural alignment of the body, impaired digestion causing dyspepsia, "perverted" uterine functions, deformed the bust and led to difficulties in nursing,[185] in addition to actually changing the shape of the skeleton.

Fig. 1

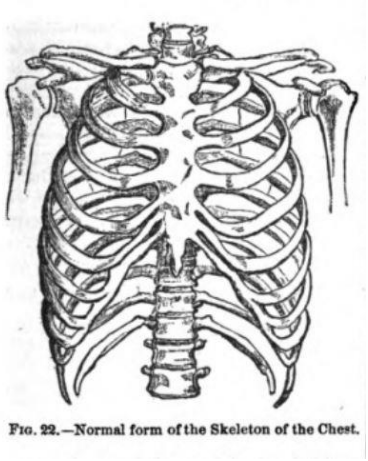


FIG. 22.—Normal form of the Skeleton of the Chest.

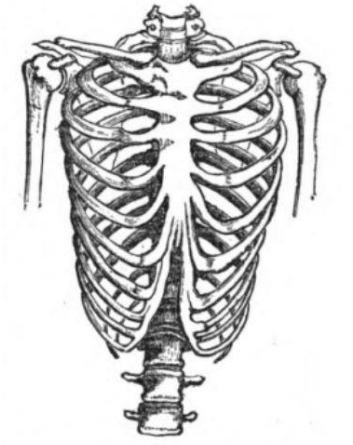


FIG. 23.—Skeleton of the Chest of a Woman, twenty-three years of age, deformed by tight-lacing, from Rüdinger's "Anatomie des Menschen." By no means an extreme case.

Despite the numerous concerns doctors had about the effects of tight-lacing, [186] their pleas to their female patients fell on virtually deaf ears, as corsets continued to be worn until the beginning of the twentieth century, and even then, the legacy of the corset persisted throughout the twentieth century and into the twenty-first with a series of various slimming undergarments designed to provide support and a supposedly more feminine shape. If medical knowledge about the adverse effects of corsetry was so extensive and poised so perfectly as to discredit the safety

[185] "Medical Annotations: Tight-Lacing," *The Lancet* (June 1868), 729.

[186] While the health side effects listed above were in specific reference to tightly laced corsets, we now know that even moderately laced corsets would have produced similar consequences to a lesser degree. Fainting spells, lightheadedness, and pregnancy complications (in addition to just a general discomfort) would have been more universal.

Fig. 1. Before and after images demonstrating the skeletal deformity caused by tight-lacing from William Henry Flower, *Fashion in Deformity* (New York: Humboldt Publishing, 1882), 23.

of popular fashion, why then did women persist in wearing their stays? Apart from the logistical answer that the corset both provided warmth and modesty, for one such contentious article of clothing to maintain such a high level of popularity in spite of well dispersed and supported medical knowledge for the better part of a century, fashion, it seems, could not be the only determining factor in the corset's assumed necessity to upper- and middle-class Victorian women.

Interestingly, many arguments against tight-lacing often talked about tight-lacers as vain and insane. In 1868, *The Lancet* acknowledged that "the grounds upon which tight-lacing have been recommended are diametrically opposed to the teachings of anatomy and physiology, not to say of common sense,"[187] meaning that to tight-lace was to be *senseless* and privilege fashion over health in many medical practitioners' opinions. In the1852 text *Intemperance and Tight Lacing*, Fowler argued that there was even evidence to suggest that "tight-lacing produces *mental derangement.*"[188] According to Fowler, since tight-lacing impeded the digestive system by effectively crushing and displacing the main organs involved, the blood of a tight-lacer was made "imperfect, or perhaps loaded with disease; for when food lies long in the stomach without being digested, it ferments, that is, decays or rots, and thus engenders vast quantities of corruption, which, entering the blood, carry disease to all portions of the system."[189] Fowler believed that "lacing corrupts the blood, and this diseases the *brain*, which makes the feelings produced by that brain diseased. This diseased action of the brain is usually called craziness, or insanity … those who have laced so tight as to disease the blood, are crazy."[190] This in and of itself is noteworthy as Fowler is offering tight-lacing as a cause for mental illness, although such

[187] "Notices to Correspondents," *The Lancet* (January 1868), 33.
[188] Fowler, *Intemperance*, 30.
[189] *Ibid*. 27
[190] *Ibid*. 30

language is a bit anachronistic in 1852. More than that, however, Fowler describes tightly-laced corsets as the cause of what might be generally referred to in Victorian medical terminology as dyspepsia, a general term that applied to almost any kind of stomach ailment or digestive issue, which later in the century would be closely linked to anorexia.[191]

In addition to graphic descriptions of food rotting within the body and poisoning the blood, Fowler also wrote that "tight-lacing around the waist keeps the blood from returning freely to the heart and retains it in the bowels and neighboring organs, and thereby *inflames all the organs of the abdomen*, which thereby EXCITES AMATIVE DESIRES."[192] Fowler, worried about being indecorous in describing this particular side effect, seemed reluctant to have to state that tight-lacing, in his opinion, inhibited modesty and virtuosity in that is made one more "disposed to loving"[193] by stimulating a part of the body apparently responsible for lustful behaviors. Here, Fowler presents a strangely Hippocratic idea of the effects of tight-lacing on the body that seems out of place amidst some of his more quantifiable scientific knowledge. All the same, such descriptions of the sexual repercussions of tight-lacing mirror the arguments about the effects of stimulating, or carnal food, on the body from the previous chapter, which is particularly interesting considering that much of the contention surrounding tight-lacing was the apparently erotic nature of the practice. Considering the testimony of many male writers that corseted, wasp-waisted bodies were more attractive, blame for the erotic, even sadomasochistic at times, practice was placed on the tight-lacers themselves as opposed to the men they were trying to please.

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[191] Anorexic patients were often identified as dyspeptic before diagnosis or even misdiagnosed as dyspeptic around the time of anorexia's discovery. This was especially true during the early years when doctors still believed *anorexia hysterica* stemmed from a gastric inability to digest food.
[192] Fowler, *Intemperance*, 32.
[193] "Amative, adj.," *Oxford English Dictionary*, Accessed April 13, 2017.

While a tight-lacer – if one publicly admitted to or was recognized for tight-lacing, which was unlikely to happen – would likely have been considered inappropriately sexual and therefore unfeminine, and possibly even insane given the argument above, the fact that tight-lacing in this instance was associated with both mental derangement and hyper-sexualization seems indicative of the broader narrative surrounding pre-anorexic feminine bodies. First, women were essentially instructed by society to wear corsets as a means of enhancing their beauty; then when some took the practice to an extreme for they were virtually given no constructive limits, they were condemned for being both insane and unacceptably sexually-inspired for doing so. In the same way, women were told to eat less and given few options for maintaining healthy and sustainable eating habits and then denounced as insane and ridiculous for doing so when anorexia was finally discovered.

Despite such vehement opposition to tight-lacing, and the corset more broadly, most women seemed to find the alternatives unacceptable, as we have already seen. The corset, and slimness,[194] was ultimately a status symbol. Wearing one signified being a member of the fashionable leisure classes. For this reason, the dress reform movement did not really garner much attention until the 1880s – noticeably after the discovery of anorexia – with the Society for Rational Dress, which opposed "tight corsets, high heels and unwieldy skirts" on the grounds of "physical restraint," as it slowly became more fashionable to be athletic and active outside of the home.[195] In their January 1889 issue of their gazette, the Society for Rational Dress expressed frustration that simply encouraging women to not wear their corsets was not enough, as fashionable garments were actually made more uncomfortable without stays to inhibit contact

[194] Brumberg, *Fasting Girls*, 185.
[195] "The Rational Dress Society's Gazette," British Library, Accessed February 1, 2017, https://www.bl.uk/collection-items/the-rational-dress-societys-gazette#sthash.rjz1sJud.dpuf.

with the skin, for which dresses of the time were not designed. The society accepted that if women wanted to remain clothed in mainstream fashion as it was, "the pressure of stays to deaden the sense of feeling" was necessary when adorned in a "fashionable heavy skirt and tight bodice." Even when one woman was explicitly forbidden by a supposedly forward-thinking husband who did not wish for his wife and daughter to suffer the medical effects of their corsets, the society reported that the women would just lace in secret after he left the house in the morning. While alternatives to mainstream women's fashion was beginning to be made available by the society who actually sold improved items of clothing to their readers, the society found that "the eye of the uneducated [man was] satisfied with the deformed figure as it sees it every day," and thus, change was slow.[196]

While the corset did eventually fall out of fashion to a certain extent, beauty ideals that celebrate slenderness have remained largely unchanged. In an attempt to dissuade readers from wearing a corset in 1842, "On the Use and Abuse of Corsets" included "the various requirements in the composition of a perfect female beauty," a comprehensive list, detailing how almost every limb and feature of the female body should look. According to the author, one's figure was almost inconsequential as "a slender waist is only a small fractional part in the composition of perfect beauty." However, of all the aspects mentioned, the waist was arguably the most easily manipulated of all beauty concerns, as little could be done about the whiteness of skin and teeth, the blackness of eyes, the redness of nails, the width of the forehead, or the length of the ears to name a few.[197] While much that was considered beautiful was out of a woman's control, with the aid of a corset, the waistline was not, making a slender waist undeniably the easiest way for a woman to alter her appearance in accordance with Victorian standards and methods of alteration,

[196] "A Gossip About Dress Reform," *The Rational Dress Society's Gazette* (January 1889), 2-3.
[197] "On the Use and Abuse of Corsets," 168.

and as we have seen, the majority of men, by-and-large, seemed to still prefer a corseted waist to a "natural" waist, giving women an extra incentive to maintain the practice.

While not all Victorian women tight-laced and while tight-lacers can certainly not be diagnosed posthumously as anorexic, there are certain similarities between the practice of tight-lacing and of self-starvation. As Kunzle pointed out in *Fashion and Fetishism*, "it is evident that compulsive lacing and self-starving both require a high degree of abstinence and self-discipline that may be termed heroic, and presuppose a manic desire to control the body as a means to (or substitute for) control of life itself." [198] Regardless of their reasons for doing so however, the existence of tight-lacers in history, despite their position outside of the mainstream, suggests that Victorian society overwhelmingly maintained a preference for slender waists to such an extent that women went to great lengths and endured great pains in an effort to conform to a fashionable ideal. This fact alone is indicative of the great pressure that was placed on Victorian women to be beautiful, and not only beautiful but also submissive to male views on the body, in keeping with the need to marry well in order to advance in society.

[198] Kunzle, *Fashion*, 254.

Conclusion: Reading for Anorexia Then and Now

In the 1970s and '80s, anorexia finally, and somewhat poignantly, became a recognizable disease entity across America and the Western world, as incidence levels of eating disorder diagnoses reached epidemic proportions. Medical professionals and people everywhere were confronted with an overwhelming number of young women who were dying needlessly from self-starvation. One hundred years after Gull's "discovery" of anorexia in 1873, people were finally starting to take notice

Victorian ideas about feminine hunger and the female body are deeply embedded within the Western world's cultural heritage. The way we think about food, our bodies, and beauty is predominantly Victorian. Unfortunately, the historical narrative of anorexia from the end of the nineteenth century to the present day is largely one of stasis. According to the National Association of Anorexia Nervosa and Associated Disorders, "At least 30 million people of all ages and genders suffer from an eating disorder in the U.S." alone, and at least one person dies every 62 minutes as a direct result of an eating disorder," giving eating disorders "the highest mortality rate of any mental illness."[199]

While the discovery of anorexia nervosa in the nineteenth century equipped medical professionals with a new discourse to better understand women and their relationship to food, the ideas and feelings both by and about women that led to anorexia's discovery are nothing new. Victorian texts, like *Jane Eyre* and "Goblin Market," indicate a systemic problem in the ways society taught women to interact with their food, and contemporary texts, like the award-winning

[199] "Eating Disorder Statistics," National Association of Anorexia Nervosa and Associated Eating Disorders. Accessed April 13, 2017. http://www.anad.org/get-information/about-eating-disorders/eating-disorders-statistics/.

novel *Wintergirls* (2009), now depict the potential aftermath of such an extensive ideological education, both on the mind and body.

For instance, in *Wintergirls*, author Laurie Halse Anderson presents the figure of the modern anorexic as a young woman who believes that being physically empty and thin makes her strong. Lia, the main character, not only exhibits classic signs of body dysmorphia (her eyes are "broken," as she says, and unable to see how little of her is left) that many women today struggle with but also reveals how complicated living with an eating disorder can be. For Lia, like virtually all anorexic patients, the desire to control one's size grows out of an inability to control all other aspects of life. As with the case of tight-lacers, Lia may not be able to calm the chaos of being a teenager in twenty-first century America, with the constant onslaught of societal pressures at school and at home that that includes, but she can make her body, if nothing else, respond to her will. However, in making herself sick through starvation, Lia actually loses control over even herself, as her parents and doctors tell her what to think and what to do in order to "heal." Although Lia succeeds in making herself "beautifully less" in accordance with societal prescriptions that tell her a woman needs to be thin and weak, which are a remarkably Victorian holdover, Lia gains no solace and no respite from the judgements of others. Her life is literally out of her hands; and her story becomes one of mere survival.[200]

Reading classic Victorian texts, like *Jane Eyre* and "Goblin Market" alongside contemporary texts specifically about anorexia nervosa is vital for understanding how anorexia has come to exist as we know it today. Contemporary ideas about food and the female body are largely dependent on values established during the nineteenth century – and quite possibly even before. By reexamining nineteenth-century literature through a lens of anorexia, the development

[200] Laurie Halse Anderson, *Wintergirls* (New York: Viking, 2009.

of women's complicated and conflicted relationship to food and eating begins to reveal itself as a social construct. Victorian literature written by and about women establishes a backdrop of (pre-) anorexic thinking that allows eating disorders to thrive in the twentieth and twenty-first centuries. Contemporary fiction with anorexics as main characters, then, showcases the long-term effects of the disordered eating patterns that were socialized and normalized nearly a century before, suggesting that society has not evolved as much as one would like to think. In many ways, one might say that Jane, Laura, and Lizzie, with their own unhealthy edifications on the usefulness of self-starvation, might struggle with anorexia if they were real teenagers in twenty-first century America or Britain. There is no way to know for sure, but nonetheless, they certainly would have difficulty maintaining lasting and healthy relationships with food, if their Victorian adolescences are any indication.

There is little doubt that anorexia was a consequence, a by-product so-to-speak, of a harmful ideology surrounding women and their bodies. Everything they read, from literature to conduct books to magazines and journals, cemented the idea that women were supposed to be *less than*, were supposed to be fragile and passive, were supposed to be dependent on men. The subconscious cues telling women to starve and fashionably waste away to a controllable, manageable size, were everywhere, as I have endeavored to show here. There is no question that Victorian women were being conditioned to become anorexic, and yet, when they did, they were almost vilified as insane and incompetent. The fact that a century had to pass, and countless more women were infected with such persistent pathological thinking, before physicians could even begin to understand anorexia as a disease and how to treat it just further suggests that anorexia was a "second-class" disease that only seemed to affect "second-class" citizens and was not significant enough to garner much medical focus at the end of the nineteenth century. In

considering the complicated mine-field of Victorian gendered eating habits and constructs, it is important to ask ourselves, "Why is it that women still think that, in order to survive and thrive, they must be 'beautifully less?'"

I would like to return for a moment to the case of Mrs. Waldorf – who, as a reminder, approached her physician with symptoms quite suspicious and anachronistically indicative of disordered eating. When Mrs. Waldorf outlines her almost entirely liquid diet for the doctor, he proceeds to ignore the seriousness of the facts before his eyes and presumes to re-educate Mrs. Waldorf, so-to-speak, on the benefits of living a charitable life on one's health. One might say, that the good doctor's eyes are broken, to quote Lia, and could not really see Mrs. Waldorf and her symptoms accurately, even if he was inclined to do so. Moreover, society as a whole has broken eyes, when it comes to the treatment of women. For anorexia to persist as it does today and threaten so many young lives, there must be an inherent flaw in the system. Somehow, society is operating under the same fallacy as Mr. Rochester in *Jane Eyre* that, for some reason, women just do not need food. The only way to begin to fully comprehend how deeply this mentality endangers women in both the nineteenth and the twenty-first centuries is to acknowledge this fault and begin to look back through history's cracks for the moments where fearful and vulnerable women have been taught that their suffering was either unreal or unavoidable. Both in literature and in life, women have been conditioned to starve themselves. It is now time, that we start to ask ourselves how this happened and why. It is time to mend our broken eyes.