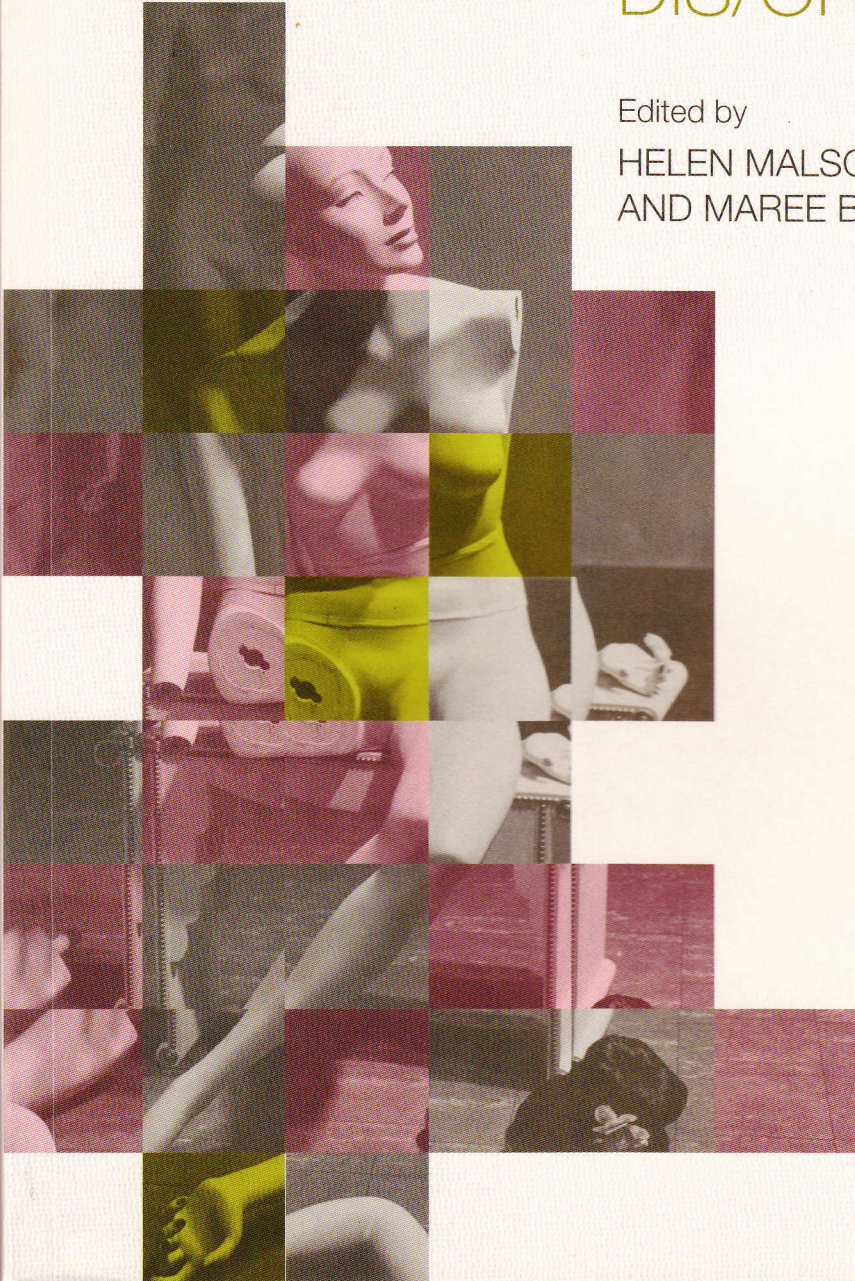


CRITICAL FEMINIST APPROACHES TO EATING DIS/ORDERS

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Foreword

How much other is enough? Contemporary narratives assert that many anorexic women are waif warriors writing a social history with their bodies, which are at once an extreme, distorted vision of beauty and a living example of social ills. They are the ultimate insider and outsider all in one. The contributors to the current volume create a prism of perspectives, offering analyses that position our thinking both within and outside of the mainstream and thereby provide a critique of the very field that each of these authors has helped create.

Critical Feminist Approaches to Eating Dis/Orders offers insights across colour and size (Bordo, Rice), East and West (Sayers, Nasser and Malson), and parent, patient and provider of care (Treadgold et al., Surtees, Moulding, Burns et al.). We are challenged to consider the multiple and contradictory influences on individuals and their body projects (Eckermann, Burns, Malson), given a chance to review the impact of the world wide web on patient experience (Day and Keys), prodded to recalibrate what is 'normal' (Saukko, Throsby, LeBesco), and asked to mull over the morality of consumption (Gard, Probyn, Epston and Maisel).

In the nineteenth century, cholera, a *medical* problem, exposed problems with rapid urbanisation such as poor sanitation and limited public health services. The response to the epidemic revealed divisions of class and race, while also acting as a key impetus for greater social responsibility towards the disadvantaged (Evans, 1988). As the contributors to *Critical Feminist Approaches to Eating Dis/Orders* illustrate so well, encapsulated in the 'disease' of eating disorders are the twentieth and early twenty-first century issues of identity, gender politics and the prospect of profits from marketing unobtainable ideals.

Throughout this comprehensive compendium we dip into the details of deconstruction and then step out to reflect on the movement in the field. It is an exhilarating dance step. In the narrative of 'what's next' in the field of eating disorders, the challenge is to adopt a lens of possibility, to not only deconstruct but to rebuild, to recombine concepts across disciplines, and to tap unexpected sources for ideas, influence and funding. This is a time of possibility.

A new generation of business leaders appear to have moral compasses with a gravitational pull towards achieving greater social impact. Corporate social responsibility programs are becoming a part of the business culture – dedicating *intellectual* and *monetary* capital to community development and the alleviation of societal ills. Google has set up a for-profit ‘charity’ that can both make grants and lobby the government; eBay’s founder has invested (US)\$90 million in a non-profit organisation to nurture environments that ‘*unleash people’s potential*’ and eBay’s first president, Jeff Skoll, established a \$55 million foundation to support social entrepreneurs (i.e. people who make a difference while making a profit).

How can the interest in social action and contributions emerging from other fields be harnessed to respond to the precipitants of disordered eating? In two different chapters, one by Gard and one by Throsby, the rhetoric of crisis is examined. Today’s media presents the war *on terrorism*, the war *for resources* and, of course, the war *on fat*. This very aggressive language marshals attention and demands a response. How do we parlay the attention into positive action? Gard informs us that obesity science is ‘an Alice-in-Wonderland place where nothing is as it seems’ (p. 36), where the risks of global warming and obesity are equated even in the absence of confirmatory data. Gard suggests that we respond to the war *on obesity* not by reigning in desire, but rather by recognising the need to cultivate new desires.

Cultivating new desires sounds exciting! How does one do that? Perhaps there are creative ways to partner with people beyond our disciplines to explore alternatives that are healthy and, if necessary, profitable too.

With respect to prevention of disordered eating, Bordo posits, ‘There is no king to depose, no government to overthrow, no conspiracy to unmask’ (p. 57). The feminist, social/cultural analysis has been both inclusive of various disciplines and often the most self-critical, as the authors featured in this volume reveal. Yet, we remain handicapped in our ability to influence finance and politics to a meaningful extent. Much of our scientific research looks at MRIs not ROIs (returns on investment). We talk of power and recognise that it is gendered; but hierarchy is not merely pink or blue. The better able we are to analyse and respond to the economic realities that inform the marketing of mental distress, the better able we will be to craft creative, healthy solutions.

Our challenge as a field is how to communicate outside of academia. What are the words and arguments that will capture the attention of business leaders and social entrepreneurs in addition to our traditional granting agencies and policy makers? Our formulations and suggestions cannot make sense only to ourselves, and we can surely benefit from the intellectual prowess of other applied fields.

What is the knowledge that is needed to act; how do we create a language of persuasion and change? Probyn writes, ‘I realise that this is a big ask, but that is the challenge I see for our discipline.’ Being practical may be a challenge but there is no excuse not to be. Do we want to be so specialised

in our interventions that we become marginalised? Or do we want to create an 'other' that means another, more novel way of responding to socio-cultural forces?

For many years now, I have split my professional focus between studying the presentation of eating disorders in countries undergoing rapid transition (an area dominated by great ideas and limited influence) and coaching executives leading multinational, multicultural teams (a group of individuals with a great deal of influence but often limited exposure to grass roots concerns). Recently I have worked to bring these two worlds together, and have been excited at the almost audible synaptic firing that happens when experts experiment across disciplines. I have met numerous social entrepreneurs who are creating sustainable, profitable responses to domestic violence, physical disability and impoverished children's health. Many have been doctors, frustrated at 'curing' one patient at a time yet motivated to treat an ill society (for good examples see Bornstein, 2007). Where are the social entrepreneurs in the eating disorders field, and if they don't yet exist or we can't find them yet, how can we begin to cultivate them? How do we shift our training and our discourse?

Previously, we joined forces with professionals from the field of addiction, abuse and depression. Perhaps now the forces we need to join with are those professionals who are tackling over-consumption – of food, retail goods, energy – social diseases or disorders born of a quest for wellbeing and self-definition.

Thomas Friedman, in the *The World is Flat* (2005), argues that historical, regional and geographic divisions are becoming increasingly irrelevant in today's global marketplace. Indeed, eating disorders, once the province of privileged white rich girls in the United States, have proven to be far more democratic. Nasser and Malson carefully elucidate that eating disorders have gone global but that the expressions of distress are local and nuanced, reflecting the world's ever shifting 'traditional' and 'modern' cultures. Their work reminds us that, as a field, we have developed multiple tools to measure impacts on women. We may have some new opportunities to apply our skills.

Bill Gates, the founder of Microsoft, says he is 'reordering his priorities' to work on his \$29 billion foundation, focusing primarily on global health. The investment bank Goldman Sachs recently announced that it will invest \$100 million over the next five years in providing 10,000 women in developing economies with business and management education – a decision based on their research indicating that investing in women in the developing world is most likely going to yield the greatest social return. Is this not the same group that we would identify as at risk for eating disorders because of the possibility for greatest disparity between what is possible and what is likely? Gremillion urges us to consider alternative ways of being that are crafted in active relationship to the norm rather than from a space 'outside' of the status quo.

xx *Foreword*

In the *war* against eating disorders, as good foremothers and forefathers to the field, it behoves us to introduce new confident, pragmatic conceptualisations and the requisite tools for change. Malson and Burns insert, and assert, a slash between dis and order. That slash between order and chaos stimulated by the chapters that follow should send us dashing to think of ways that we can partner *big*, think broadly, inclusively and less as 'other'.

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