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# **Girlhood and the ‘Problematic’ Body: The Struggle for Acceptable Femininity**

**Heather Simmons**

## **Abstract**

There is currently a rapidly expanding collection of literature on the body (body image, body image disturbances, eating disorders, etc.), coming from a wide variety of disciplines. However, much of the research on girls and eating disorders comes from medicine, psychiatry, and psychology. This is evidence of ongoing pathologization of such disordered behaviours, which is heavily influenced by neoliberal ideology. This article examines existing literature on the subject of girls’ body images issues and eating disorders; literature which suggests that visual and consumer cultures negatively impact girls’ ability to construct acceptable feminine identities and leads to eating disorders. Following the literature review, it argues that attributes and behaviours associated with eating disorders (such as self-starvation, binge eating, purging, etc.) are pathologized as the result of neoliberal ideology, and that girls with such diagnoses engage in constant and intensive self-surveillance as part of that behaviour. The final section includes suggestions for future research on girls’ bodily perception and eating disorders within the field of Girlhood Studies.

## **Keywords**

girls, Girlhood Studies, eating disorders, body

## Introduction

While there are myriad factors which influence identity construction, in our visual, media-driven, consumerist culture, the body has achieved particular significance. The body is an essential part of self-making, but many girls and young women also experience their bodies as obstacles in that construction, and as sources of distress (Rice 2018). Such distress can lead to issues with body image, and result in eating disorders. This paper will begin with a brief background on the history of theorizing body image issues and eating disorders. Next, it will offer a short literature review on texts which cover subjects such as identity construction, femininity, and cultural influence on girls' bodily perception, body dissatisfaction, and eating disorders. Three themes from the literature will be explored: the body, the influence of image and consumer cultures, and acceptable identity and femininity. The next section argues that attributes and behaviours associated with eating disorders (such as self-starvation, binge eating, purging, etc.) are pathologized as the result of neoliberal ideology, and that girls with such diagnoses engage in constant and intensive self-surveillance as part of that behaviour. Finally, this paper includes suggestions for future research on girls' bodily perception and eating disorders within the field of Girlhood Studies.

## Background

There is a rapidly expanding collection of literature on the body (body image, body image disturbances, eating disorders, etc.), coming from a wide variety of disciplines such as psychology, medicine, media studies, sociology, gender studies, and many more. While more contemporary research in this area has begun to examine the experiences of girls,<sup>1</sup> this has not

always been the case. Beginning in the 1950s, theories about bodily perception expanded beyond purely biological explanations and began to consider the influence of psyche and society on the individual's body image. Since then, research has tended to focus on body image issues, particularly on eating disorders among girls and women. During the 1970s, there was a shift towards social psychology, which led to increased recognition of cultural influence on an individual's psychology. However, this shift did not necessarily influence how body image "disturbances" were understood or defined. Beginning in the 1980s, biopsychosocial frameworks were highlighted as explanatory models for eating and body image issues. However, there has recently been an increase of obesity-related psychological studies on body image and weight, which aim to address the "obesity epidemic" (Rice 2018). While the scope of the research has expanded to include the experiences of diverse groups, such as racialized girls and women, men, disabled people, the elderly, and members of the LGBTQIA2S+<sup>2</sup> community, problems with body image are still highly individualized. In other words, body image issues (including eating disorders) are understood to exist primarily within the individual (where levels of individual "disturbance" can be measured), and the individual is therefore the focus of intervention (Rice 2018). This individualization (and pathologization, which will be discussed in a later section) is visible in the expansive psychological and psychiatric literature on girls' body image and eating disorders, where disordered behaviours (such as self-starvation, "excessive" exercise, bingeing, and/or purging) are attributed to psychiatric illness and are not considered within the broader social context. For the purposes of this paper, I intentionally excluded such research from my

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<sup>1</sup> I use the term "girls" here to include those who were most likely assigned female at birth and experienced their youth as girls/had girlhoods. While there is not a definite age range for this group, I would generally say that the category includes those between the ages of three or four to approximately nineteen or twenty years old.

<sup>2</sup> Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual, Two-Spirit and beyond

analysis, instead focusing on literature which examines subjects like identity construction, femininity, cultural influence, and stigma.

## Key Areas Identified in the Literature

There are a number of themes which cut across the literature on girls' body image and eating disorders. This paper focuses on three: the body, consumer culture, and acceptable femininity. While there are distinct aspects to each, there is also an incredible amount of overlap between them. This is to be expected, as elements from one theme intertwine with elements from others; all coming together to form an intricate map of what it means to have the body of a girl, to have body image "issues" as a girl, and to have an eating disorder as a girl.

### *The Body*

Understandably, much of the literature is centred on girls' bodies. While the texts analyzed for this project cover a wide range of subjects, all of them focus on the body—as a locus for identity construction, as a cultural production, as a vehicle for shame, and as a threshold between acceptance and Othering. Some authors focused on the embodied experiences of women, reflecting on how they learned to view their physical bodies during the course of their childhoods (Rice 2009; 2018), while others spoke directly with girls to learn how they felt about their body size and appearance (Grogan 2017; Grogan and Wainwright 1996). While some of the texts focused more explicitly on girls' bodies in relation to their eating disorders (Bordo 2009; Holmes 2017; Raulli 2018), many of the same themes were present. One of the most significant, reoccurring concepts across the literature is the power of cultural imagery on girls' perceptions of their bodies, and for some, their subsequent eating disorders.

### *Influence of Image and Consumer Cultures*

The literature analyzed for this project discusses two inextricably linked sources of cultural influence on girls' bodily perception: visual/image culture and consumer/commercial culture.<sup>3</sup> The texts emphasize the profound influence that global communications and visual media have had on girls' sense of their bodies and of themselves. Visual culture is amorphous, vast, and difficult to define. It includes our entertainment (e.g., film, television, music); media (e.g., advertisements in print, on billboards, and in commercials); children's toys (e.g., Barbie and Bratz dolls); the exercise and fitness industries (e.g., health is about looking a certain way); social media; and, of course, the fashion industry. At the centre of visual culture, of course, lies the blueprint for the "ideal" woman and girl: thin, athletic (but not too muscular), white, with long hair and Eurocentric features (like a small nose and light eyes). This ideal is visible in the narrow range of body types we see represented in film and television, in the advertisements trying to sell us products for completely natural phenomena (like cream for cellulite, or shapewear for "smoothing" skin folds and fat rolls), in the constant commercials for weight loss supplements and fad diets (Atkins, South Beach, paleo, ketogenic, Whole30, etc.), and in the limited number of popular clothing brands offering plus sizes. When girls are exposed to such media, they learn to identify with real or imagined spectators viewing the ideal girl/woman who is depicted in the image, advertisement, toy, or other product. As a result, they become conscious of being seen (Rice 2018). To paraphrase Liz Frost, women and girls are their appearances (2001, 146). As a result, girls<sup>4</sup> learn that in order to be admired, valued, and rewarded in this culture, they must try their

<sup>3</sup> The texts use the terms "visual culture" and "image culture" to describe the same phenomenon. They also use consumer culture and commercial culture interchangeably (some authors, like Frost, also emphasize Western

capitalism in this definition).

<sup>4</sup> Multiple authors explain that youth, and girls in particular, are especially vulnerable to the influence of this cultural imagery (Bordo 2009; Grogan and

hardest to live up to that “ideal.”<sup>5</sup>

These themes are also inseparable from consumer culture, which both supports and simultaneously feeds off the cultural emphasis on aesthetics and imagery. As alluded to earlier, there are rapidly expanding, highly profitable beauty, health, and fitness industries which capitalize on girls’ and women’s deepest bodily insecurities (i.e., those aspects which distance her from the “ideal”), attempting to sell “solutions” to their non-existent “problems.”<sup>6</sup> Susan Bordo brilliantly describes the contradictions within consumer culture: “[o]pen most magazines and you’ll see them side-by-side. On the one hand, ads for luscious and usually highly processed foods, urging us to give in, let go, indulge. On the other hand, the admonitions of the exercise and fitness industries to get in shape, get it together, prove you’ve got willpower, show that you have the right stuff” (2009, 55). In this context, it’s understandable why so many girls and young women have resorted to problematic, or disordered eating habits (such as self-starvation, binging, and/or purging) to try to manage their body size so that it more closely aligns with the thin ideal. Multiple texts from this analysis indicate that negative social interactions regarding girls’ weight and/or body size are likely to cause avoidance of physical activity and the adoption of problematic or disordered eating habits (Grogan 2017; Rice 2009). Because these behaviours centre on girls’ bodies and their appearance, girls with eating disorders are often accused of being vain, narcissistic, or superficial (Holmes 2017). However, the literature reviewed for this project clearly demonstrates that this is not the case. In reality, girls dealing with eating

disorders are struggling to construct acceptable feminine identities.

#### *Acceptable Identity and Femininity*

In one of the first studies to directly engage with girls and female adolescents on the subject of body dissatisfaction, Sarah Grogan and Nicola Wainwright found that girls as young as eight recognize and internalize cultural pressures to be thin, and experience dissatisfaction with their body shape and size as a result (1996). In other words, those young girls had already learned about the acceptability of thin bodies in Western society, and the unacceptability of having a fat body (Grogan 2017). Much of the literature from this review emphasizes the gendered nature of body image “issues” or dissatisfaction. It’s not only that girls, like those in Grogan and Wainwright’s study, recognize and internalize cultural pressure to be thin, it’s that the thin ideal<sup>7</sup> is integral to femininity. Failure to be thin means a failure to achieve femininity. A heart-breaking recollection from one of Carla Rice’s interviews with a woman named Gayle exemplifies this: “[b]ecause of my fat . . . I was made to feel like an improper female if I showed signs of femininity” (2018, 104). For girls and young women, maintaining a credible feminine identity is of the utmost importance. Wanting to fit in and be accepted by one’s peers is a natural human desire, but this desire is especially pronounced during adolescence. The teenage brain is in fact wired for peer approval (Albert, Chein, and Steinberg 2013), which means that the potential for Othering, exclusion, and ridicule is particularly distressing for teens. Participants from Stephen Raulli’s research on anorexia echoed this sentiment while recalling memories

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Wainwright 1996).

<sup>5</sup> There are several ways in which girls strive towards this ideal—racialized girls attempting to lighten their skin using bleaching products (a direct result of colourism), girls receiving cosmetic surgery such as rhinoplasty to try and disguise their ancestry, girls from certain socioeconomic backgrounds or geographic locations learning to change how they speak in order to sound “whiter,” etc. For the sake of this paper, I am only focusing on girls’ strategies for managing their body size in relation to the cultural “ideal.”

<sup>6</sup> By nonexistent, I am not suggesting that women and girls are not experiencing deep shame, frustration, and sadness from particular “issues” that they have with their bodies and appearances. Rather, I’m suggesting that those “issues” are not in fact problems at all. They have been culturally constructed as “problems” in order to sell products, maintain the status quo (of “ideal” girls and women), uphold white supremacy, etc.

<sup>7</sup> Along with other attributes, such as whiteness or able-bodiedness.

from their teenage years. In one questionnaire, a respondent wrote: “I went to an all-girls high school and sought acceptance” (Raulli 2018, 161). Two other participants reflected on the relationship between their food restriction and subsequent peer approval, including receiving male attention: “I started limiting my food intake somewhat and saw big results. Girls at school noticed and guys began asking about me”; “Guys had never liked me before—I lost a bunch of weight and suddenly these cool, attractive guys were interested in me and I was psyched” (Raulli 2018, 161, 163). The literature emphasizes this connection between the female body as an object of sexual desire and the significance of the male gaze in a visual, cisheteropatriarchal society such as ours (Frost 2001; Grogan 2017; Raulli 2018; Rice 2018). In this context, since men, as a group, are granted greater power to determine women’s desirability, girls learn to expect this type of assessment, and develop insecurities about how they will be perceived by boys and men (i.e., as desirable or not). However, this critical gaze is not only an external practice. Women and girls are not only conscious that their bodies are objects to be looked at by others—they also engage in continual self-objectification, self-policing, and self-surveillance. This behaviour is an integral part of girls’ eating disorders and will be explored in the following section.

## Discussion

This paper has demonstrated the enormous influence that visual and consumer cultures have on girls’ bodily perception and examined how and why many girls resort to disordered habits to try to achieve or maintain an acceptable feminine identity. What this shows us, however, is that eating disorders are a symptom of a cultural problem—and yet, they are repeatedly treated as psychiatric illnesses, explained through biomedicine or genetics. This section will demonstrate that particular attributes and behaviours associated with eating disorders (such as fear of gaining weight, self-starvation, binge

eating, purging, “inappropriate” compensatory behaviours in order to prevent weight gain such as misusing laxatives or excessive exercising, or one’s sense of self being “unduly influenced” by body weight or size) (American Psychiatric Association 2013) are pathologized and psychiatrized as the result of neoliberal ideology. Under neoliberalism, individuals are constituted as self-managing, autonomous, and hyper-responsibilized. A key factor in this self-governance is ongoing self-surveillance. We constantly monitor our thoughts, behaviours, and decision-making because, according to neoliberalism, our ability to succeed (or fail) is entirely in our control. As will be shown, this mindset is deeply ingrained in the logic of eating disorders.

The literature from this review is united in its belief that eating disorders need to be situated in relation to the socially and culturally constructed nature of female identity. As Stephen Raulli so eloquently put it, “the psychopathology of an anorexic person is the outcome of all that’s wrong with a culture...The body is a medium of its culture” (2018, 24). So why are eating disorders conceptualized as psychiatric illnesses, despite the fact that body dissatisfaction<sup>8</sup> may be normative, likely affecting most women and girls (Rice 2018)? The answer is, of course, neoliberalism’s emphasis on individual responsibility. Individuals are ‘free to fail’; expected to fend for themselves, and responsible for any failures they encounter. In the context of girls’ bodies and acceptable identities, this means that girls are responsible for embodying the ideal feminine body. If they fail to achieve the thin ideal, they will not be accepted, and it is their own fault entirely. Because maintaining an acceptable identity is so important for girls and women, many resort to disordered habits to try and achieve that goal. It’s understandable then, why so many girls struggling with eating disorders talk about control in relation to their behaviours: “I liked the control it gave me”, “[i]t was a constant way to have control over something,” “it was one

<sup>8</sup> Which is listed as a symptom of multiple eating disorders in the DSM-5

thing that I could control in situations where I felt so desperately out of control” (Raulli 2018, 146, 147, 162). Engaging in disordered habits offers girls a false sense of control—the belief is, that if she controls her food intake or exercise, she can control her body size. If she can control her body size, she can make it smaller to fit more closely the feminine ideal.<sup>9</sup> And if she can achieve an acceptable feminine body, then she will be accepted by society, her peers, and, ultimately, by herself.

However, this is where the contradictory reality of eating disorders comes into focus. The influence of visual and consumer cultures on girls’ bodily perception and their self-construction (which strives towards an acceptable feminine identity), and the path towards behaviours like self-starvation or binge-eating and purging in order to achieve that identity, is clear. When such behaviours are deemed abnormal or unhealthy (i.e., pathologized), and are labelled as disorders, this inadvertently attaches another unfit identity onto girls and women who engage in such behaviour; the designation of mental illness. An acceptable feminine identity does not include mental illness, or disability of any kind (Rice 2018). This creates a double bind for girls, as they are either “too fat” to accomplish an acceptable identity, or they are mentally ill (which is also unacceptable) because they use disordered habits to try and change their body size.

All of this is, of course, influenced by excessive observation of the female body in Western society. As previously explained, the objectification of women’s bodies and the conceptualization of those bodies as images is an essential feature of our visual and consumer cultures. However, the monitoring of girls and women’s bodies is multidirectional. We are not only observed and scrutinized by others—we have also internalized this behaviour and engage

in perpetual self-surveillance to check how well we are living up to the cultural ideal (Grogan 2017, 142). While this statement applies to all Western society,<sup>10</sup> this behaviour is amplified for those experiencing eating disorders. Because eating disorders are so focused on the body (its weight, its size, how certain parts of it look, etc.), girls with these diagnoses engage in even more intensive self-monitoring and self-surveillance than those without such disorders. Common eating disorder behaviours such as constant body checking, tracking caloric intake, and frequent weighing are all examples of self-surveillance, which these girls use in order to “govern” themselves appropriately (i.e., to ensure their behaviours are in line with their goals of altering body size to achieve an acceptable identity).

### Conclusion and Call for Change

This paper began with a brief background on the history of theorizing girls’ body image issues and eating disorders. This was followed by a small literature review which examined research outside the realm of psychiatry on subjects like identity construction, femininity, and cultural influence on girls’ bodily perception, body dissatisfaction, and eating disorders. Three themes from the literature were explored in depth: the body, the influence of image and consumer cultures, and acceptable identity and femininity. The section that followed argued that attributes and behaviours associated with eating disorders are pathologized as the result of neoliberal ideology, and that girls with such diagnoses engage in constant and intensive self-surveillance as part of that behaviour.

This paper has demonstrated the profound and troubling influence that visual and consumer cultures have on girls’ bodily perception and their ability to achieve and maintain acceptable feminine identities. However, the existing research on these phenomena in the realm of

<sup>9</sup> This is not to discount the fact that many individuals who suffer from eating disorders experience body dysmorphia and have trouble viewing their physical body (even when it becomes *too* thin) as being an “acceptable” weight, size, or shape.

<sup>10</sup> As well as other cultures, as certain industries (beauty, health, fitness, diet, etc.) and cultural imagery continue to expand globally. As Bordo writes, “body insecurity can be exported, imported, and marketed just like any other profitable commodity” (2009, 53).

Girlhood Studies is lacking. As mentioned previously, there is an abundance of literature in fields such as biomedicine, psychiatry, and psychology on girls and eating disorders—but the existence of such literature merely reinforces the problematic pathologization of disordered habits. What girls and young women desperately need is more research addressing the cultural problems which create and sustain eating disorders. While such literature does exist, the majority of it does not engage directly with girls and young women. Both Susan Bordo and Carla Rice write about the experiences of diverse girls, but neither author talks directly to girls (Bordo, for example, writes theoretically about racialized girls with eating “disorders,” and Rice interviews diverse women about their experiences during their girlhoods). Sarah Grogan and Nicola Wainwright’s 1996 article was groundbreaking since they did engage directly with eight- and thirteen-year-old girls, but their analysis did not explore the cultural influences on eating “disorders,” and their sample was almost entirely white (as well as working- or middle-class and non-disabled). Frustratingly, the writing that has emerged since the 1980s on body image and/or body dissatisfaction which does explore the influence of culture, has not exclusively examined girls’ experiences. Much of the discussion emphasizes how women are disproportionately affected by such cultural influence, and girls are sometimes lumped into those discussions. However, girlhood is not just a steppingstone toward womanhood. While it is somewhat difficult to define in terms of when it starts or ends, girlhood comes with its own set of challenges that do not necessarily apply to the experiences of adult women. Therefore, Girlhood Studies needs to prioritize participatory research with diverse girls (i.e., racialized girls, disabled girls, rural girls, queer girls, girls living in poverty, etc.); research which explores how visual and consumer cultures impact those girls in their varied social locations, and how those factors relate to notions of acceptable identity and femininity for their unique and diverse bodies.

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## Author Biography

Heather Simmons (she/her) is a white, queer, able-bodied settler who is a first year PhD student in Gender, Feminist & Women's Studies at York University. She has a Master's degree in Criminology and Social Justice from Toronto Metropolitan University, where she wrote her MA thesis on transgender survivors' experiences of intimate partner violence and abuse. Her dissertation will further explore this subject, utilizing participatory action research methodologies.