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A biographic case of body dissatisfaction

Um caso biográfico de insatisfação corporal

Natalia Solano-Pinto¹ Félix Díaz-Martínez¹

¹ Universidad de Castilla-La Mancha. Departamento de Psicología. Toledo, Espanhã.

Correspondence Natalia Solano-Pinto E-mail: natalia.solano@uclm.es

Abstract

In this paper we analyze the life history of a woman, as told in first person by herself and in third person by her partner, focusing on her worries about body image and how they affect various important aspects of her everyday life through the life cycle. Our materials are the respective biographic interviews to a 33-year-old woman and her partner, a 40-year-old man, where they storied her life paying special attention to body image and dissatisfaction issues. The analysis is structured into six emerging themes along both stories: "The gaze of the other and body exposure," "Pregnancy," "Modifying the body," "Socio-cultural pressure," "Masculine desire," and "The silence dilemma". We pay special attention to changes in positioning, feelings and habits with respect to the body along the life cycle, with key moments in teenage, and before, during and after a pregnancy. The analysis of biographies of non-diagnosed persons may help us understand various ways of positioning in the socio-cultural context of the Western culture with respect to the body. At the same time, it may facilitate the development of actions to construct a critical view on context, contributing to women's free elaboration of their identity and body experience.

Key words: Body Image. Pregnancy. Diet. Reducing. Biography.

Resumo

Neste artigo, analisamos a história de vida de uma mulher, relatada em primeira pessoa por ela mesma e em terceira pessoa por seu parceiro, concentrando-nos na sua preocupação

com a imagem corporal e em como isso afeta diversos aspectos importantes da sua vida cotidiana ao longo do ciclo vital. O material de análise são as respectivas entrevistas biográficas a uma mulher de 33 anos e a seu parceiro, um homem de 40, em que ambos relataram a vida dela prestando especial atenção a aspectos relacionados à imagem e à insatisfação corporal. A análise está estruturada em seis temas emergentes ao longo de ambos os relatos: "Olhar do outro e exposição do corpo", "gravidez", "modificar o corpo", "pressão sociocultural", "desejo masculino" e "o dilema do silêncio". Prestamos especial atenção à mudança de posicionamentos, sentimentos e hábitos com relação ao corpo ao longo do ciclo vital, com momentos-chave na adolescência e antes, durante e depois de uma gravidez. A análise de biografias de pessoas não diagnosticadas nos permite entender diferentes formas de se posicionar no contexto sociocultural da cultura ocidental com relação ao corpo e, por outro lado, pode facilitar o desenvolvimento de ações para construir um olhar crítico com relação ao contexto e contribuindo para que as mulheres elaborem a sua identidade e a vivência do seu corpo de uma forma livre.

Palavras-chave: Imagem Corporal. Gravidez. Dieta Redutora. Biografia.

Introduction

In this article, we approach a woman's life history, reported first-hand by herself and in the third person by her partner, to consider a series of discursive processes related to her body image and other concerns associated.

We are particularly interested in the impact that a pregnancy process had on Juana's life (as we shall call the participant), but we shall go through different moments in her narration that refer to other periods of her life cycle. It is about accessing the rhetorical and narrative resources that Juana uses throughout her life history (and those her partner uses in a parallel account) to analyze the development of public discourses in a particular case.

The emergence of the diagnostic category of eating disorder runs parallel to the consolidation of discourses that promote lean female beauty and a sophisticated culture. Then, Bishop¹ has deconstructed the discourse promoted by women's magazines that invites them to achieve their beauty goals through a healthy and careful diet and physical exercise. Griffin & Berry² have

analyzed messages conveyed in Western food advertisements to prove that food consumption (particularly high-fat food) is culturally associated with debauchery, sin, and weakness.

Academic and professional concerns with body image arise within these historical and cultural creations.

Feelings associated with the body itself, among other aspects, are the result of a comparison between the figure itself and the ideal body.^{3,4} When from this comparison arises a great difference and the body itself becomes devalued, people feel bad.⁵ As a result of such dissatisfaction, people may decide to control or modify their bodies. The media conveys the idea that all people, with adequate effort, diet and products, can have the body with the desired weight and figure, similar, if desired, to those of a top model.^{6,7}

With respect to this last aspect, the ideal figure is rectilinear from the waist down, which means narrow hip and a flat belly. However, this proposal is biologically inadequate, more appropriate for a preteen girl or a boy than than an adult woman. This ideal matches economic interests and turns bodily dissatisfaction into something constant for contemporary Western women. This dissatisfaction leads many women to adopt measures to be able to modify the body, this being a socially accepted practice.⁸⁻¹⁰ Mernissi,¹¹ a doctorate degree holder in Sociology, mentions that "in order to be beautiful, a woman must look 14 years old." And, "By putting the spotlight on the female child and framing her as the ideal of beauty, he condemns the mature woman to invisibility." (p. 244). This same author thus summarizes the current western women's situation: "The Western women's harem (the prison) is size 6" (p. 237).

This sociocultural pressure is constant throughout women's lives, although perhaps vital moments be especially vulnerable due to rapid corporal transformations, adolescence and pregnancy being the most significant ones^{12, 13}. In both cases, a process of identity construction takes place. Regarding pregnancy, women develop their roles and identities as mothers, but the identity is also reconstructed in all areas of people's life. Every transformation creates a certain insecurity and, in this context, sociocultural pressure has more impact.

MacSween¹⁴ links the development of the self throughout the life cycle to contemporary cultural demands with respect to women. Women and girls have to strike a balance between passive femininity and independence and male success in contemporary bourgeois patriarchal cultures. And starvation represents a way of dealing with this conflict by integrating an impenetrable, independent self (defined by a renunciation to eating) into a thin, feminine body.

In addition to this, the experience of one's own body is usually a mediator in relationships with other people.^{15, 16} In certain moments of women's life cycle, the experience of their own body acquires more relevance. Thus, in adolescence the corporal transformations and the process of accepting them causes insecurity related to the body to increase.^{17, 18} In girls, one of the most

notable changes in puberty is the first menstruation, which in many cultures presumes the tangible passage from childhood to adolescence. Biologically it presumes the beginning of the reproductive system functioning, which, in turn, shall imply an accelerated growth during the following two years. It is estimated that girls usually have a weight gain of approximately 40%. Socially, the shift to adolescence is reflected in phrases like "a girl turned woman," accompanied by a certain satisfaction in proving normal development and growth. However, the young woman has a double challenge that can be summed up in "duel and acceptance," that is, beginning a process of mourning in relation to acceptable behaviors in childhood (like playing) and with her girl body, to face a process of transition into adult life.²⁰

The obvious transformations in women are reflected in the breast volume increase while the figure is thinned, the hips grow and adipose tissue increases in the area of the abdomen and thighs. In Western culture, women's breasts are objects of desire and it is understood that the heavier, the more sexual arousal they shall cause in males. Thus, adolescents have to fight on several fronts: corporal change, how to face environments, how to dress one's body and the very process of identity.⁴

With regard to the surrounding look, corporal transformations may provoke joking or mocking comments. Toro²¹ has found that 28% of the girls reported being criticized by the family for their weight, body and eating manners. Eisenberg²² has observed similar values: 28.5% have reported criticism by the family and 14.6% would mention criticisms by companions and the family.

With regard to clothing, clothes give meaning to the body and presuppose a bridge between the self and the image that one wants to show, constituting an instrument of social communication. Nowadays, fashion has become a form of social and global language. Pecifically, in women's underwear there is a tendency to "tighten up" with a series of more or less sophisticated systems that enhance breasts. Promoting the smaller waist/heavy breasts binomial provides many adolescents the desire for having "fashion breasts," which leads them to consume lingerie marketed to adult women or to turn to plastic surgeons and, in fact, to reshape their body by wearing sexy clothes. Provides the series of more or to turn to plastic surgeons and, in fact, to reshape their body by wearing sexy clothes.

Different qualitative studies have analyzed the discursive articulation of experiences associated with body and FTC (Food Compensation Theory). ²⁶⁻²⁸ The value of narration as a cultural resource to face the problem of FTC is documented through the proliferation of biographical novels on the subject. Autobiographies have become a popular resource to develop some personal experience, to help other sufferers to face problems or to dignify complexities of the condition of an affected one before the public. ^{29,30} Realistic fiction novels promote the recognition of a cultural reality and some reflection on problems experienced by many people in daily environments. ^{31,32}

Autobiographies offer us the opportunity to know a very theorized problem from the very terms and structures of meaning used by their protagonists. The analysis of narrative discourses

is intended, in our case, to understand the complexity of a common and worrying experience with rigor, in its human contexts and near its vernacular categories. And the selection of a woman's life history without a diagnosis allows us to recognize the extent of the problem beyond those who receive clinical care and outside the categories of psychological evaluation and programming: within the meaningful cultural niche in which it is produced.

Method

Our material for this analysis consists of two biographical interviews carried out with Juana and her partner Paco.

Juana is a 33-year-old administrative employee and a university student. Her body mass index in the last 6 years ranged from 21 to 23, which corresponds to normal weight values. At the time of the interview, she had become a mother and had a 4-month-old baby.

Paco is a 40-year-old man, also from the administrative area. His body mass index is approximately 23. Juana and Paco have been living together for 6 years. They also work together.

The interviews were conducted separately and each interviewee reported Juana's life. The interviewer, in both cases, was the first author of this work. The interview with Juana consisted of 285 shifts (around 7600 words) and Paco's consisted of 107 shifts (around 3800 words).

This analysis is part of a larger study, which includes 20 biographical interviews of 5 people diagnosed with FTC and their corresponding primary caregivers and 5 non-diagnosed individuals with characteristics similar to those of the participants in the clinical group and to their family members or partners (in analogy to the main participants' caregivers in the clinical group), so that the total sample consists of a post-clinical subsample and a control subsample. Juana and her partner Paco belong to the non-clinical sub-sample, which was intentionally selected.

Both participants gave their informed consent in writing to participate in the study, thus fulfilling the ethical criteria of confidentiality, anonymity and adequate use of personal information in the research. The interview was structured as a life history: Juana's vital and biographical trajectory was the main thematic axis. We tried to structure the narration around markers such as places of residence, educational institutions, partners, family relationships or workplaces. The question opening the interview would invite to tell "the story of your life to this day, the most important things that happened, the ones that have made you the way you are, your life process to this day."

Once the narration began with this generic question, the interview would unfold through open questions. The interviewer used a flexible script that consisted of a list of topics related to body image to invite the participant to discuss them in a timely manner. The interviews were recorded in audio and transcribed in full. The analysis was based on the MAXQDA Qualitative Data Analysis Software and included all the thematic references referring to the ways how Juana would experience her body.

Results

We have structured the analysis based on six emerging topics throughout both accounts: "The look of the other and the exposure of the body," "Pregnancy and body," "Modifying the body," "Socio-cultural pressure," "Male desire," and "The dilemma of silence."

The look of the other and the exposure of the body

In the following excerpt, Juana describes the moment of her menarche and her feeling about this fact.

38 Juana: Christmas night. Yeah! I went to the bathroom and suddenly... Oh! I placed the toilet paper and kept quiet. And of course, that night we stayed at my grandparents' house and everything. I left the room and the bed. And nothing. And I was there. Like that... wow! You cease being a child and that was very bad. Saying, "Well, maybe it shall pass," hahaha... I wanted to say nothing. But in the end it was news for the whole family. Because then we went to see the family of my mother and father. And then everyone. How nice! hahaha

40 Juana: hahaha. "I've already got to know," hahaha. So after a few days went by, it suddenly disappeared. And of course I was not very well informed about these things. But I was glad because I thought it was like... It was over. You know... like it was over. And it was, "Hey! It's good that I can be a child again! And play and stuff." And then... No, hahaha. Then... This was kind of bad. You know. Bodily changes as well. It was a little bit bad for me. I remember that it would squeeze like this. In the summer, with the swimsuit I would do like that. I tightened myself, hahaha. Oh well.

41 Interviewer: Tightening your breast, hahaha.

[...] 46 Juana: It turns out that everything was different. But no. I remember, I think that in natural science class we had to measure ourselves. While inspiring and expiring. It's nothing. Nonsense. Then a colleague said, "Hey! What happened?" I hadn't done it out of shame, you know. For not wearing it. Then a colleague said, "Hey, let it go. And I take note of yours and you take note of mine. You no longer have a breast," hahaha. She had already noticed it, hahaha. And I hadn't. No, hahaha. Then, nothing... This was the most... (3a). Oh well.

a Within the interview excerpt, the numbers in parentheses indicate pause time in seconds.

In the previous excerpt, Juana recalls the exact day on which she had her first menstrual period and describes the sensations she experienced. First, the attempt to hide it by using toilet paper and hiding information from her family. The association between the onset of menstruation and leaving childhood behind, the magical thought that arises when this menstruation ends, related to the solution of a supposed problem, the illusion that everything could return to being as before. This rejection of the biological event corresponds to the moment of "duel-acceptance" proper to the transition from childhood to adolescence. But perhaps Juana's duel has been complicated due to lack of information, as well as the lack of confidence to approach and have a person as a reference within the family to whom to appeal. On the other hand, Juana did not accept the corporal transformations. In her own words, "bodily changes were bad." This difficulty in accepting her body is presented in the following excerpt:

97 Interviewer: Listen! And the body at this time! How was it?

98 Juana: It was gray. Throughout my life until a year ago the body was like... I didn't like it. As for example... this I could not explain. I don't know... it was all like... I don't know very well.

99 Interviewer: A lot? By the gesture you make.

100 Juana: Look. Yes. So... Ah! To not be noticed. To not show anything through my clothes. Such as... I don't know how the idea... of no one noticing that I am a woman. Or something like this. That is, it shows through or whatever. But... No see-through. Let's not... see-through. May no one see the bra.

101 Interviewer: May the breasts not stand out.

102 Juana: Sure. So... a shapeless outfit. Nothing. That is, being very feminine. No. Me in jeans and a lot like that. So that has changed now. Because the focus is my son. With pregnancy, hahaha. Let's go, hahaha. Good. Because. Maybe in my teens I had to go buy something. A bra. I'm not like that. For example, if my mother were up there. Or change in front of my mother or a cousin or something. No. It is not that I would lock the door and change. And if there was no other way or such. Well, then I would take it off and put it with the pajamas, hahaha. With the T-shirt on, so nobody could see anything, hahaha. Or else going to buy a bra for me and my mom to go and see! And I would say, "No, mom." "No," hahaha. "What are you doing?!"

(...) 105 Juana: Of course. Wearing a bikini. A swimsuit and such. Good at the beach 'cause nobody's gonna look at me and I don't know anyone. But in the swimming pool like that a little. (3) Then... like that.

106 Interviewer: Look. Maybe it's my interpretation but that of hiding the breasts?

107 Juana: More than hiding is covering, hahaha. But that's what I don't know. (3) So they are there but they don't have to be highlighted or shown. Go out with a cleavage or I don't know what. Nor the bra. Nothing. You know, it's more like some part. But not like others who might wear something just tight to show or show off the bra. The same with transparencies, that!

Juana describes her body as "gray," a body she did not like, with an evident refusal to show it to others. She speaks of a way of dressing characterized by the choice of shapeless clothes, which wouldn't show through, "so that no one notices that I am a woman." The invisibility before the eyes of others appears as a solution for the new shapes and bodily attributes. Breasts, representing the most visible feminine attributes, do not have to be "highlighted or shown," as is done by other women in tight clothing or transparencies showing bras through. She decides not to let it show through or show even in the most intimate settings, specially in front of her mother, in front of the family in general.

In adolescence, the first erotic and/or sexual experiences also happen. In the following excerpt, Juana describes such moment:

112 Interviewer: Very well. And what about flirting? What would you do with your breasts?

113 Juana: hahaha, well...

114 Interviewer: I mean... with the body

115 Juana: hahaha, generally... protect it. It's miiiiine, hahaha. Because I didn't have such a serious relationship, you know? They were just flirting. So maybe six months. But no. It was on the weekends that we saw each other because we had a group of friends who would meet on the weekends and that was all. And we would think we would be going out. I would call two days a week, you know? And there was only one that touched my breasts a little. And I let him do it because I liked it. But only that.

The interviewee remembers experiences with sporadic partners that she calls "flirting" that would mean nothing. Exchanging phones numbers, conversations and little else. Juana also mentions how she let a young man touch her breasts without going beyond that, preventing him from touching her genitals and protecting her body, perhaps expecting an environment of intimacy or confidence.

Pregnancy and Body

When Juana gets pregnant, her relationship with her body radically changes:

138 Interviewer: hahaha. You had mentioned before that being a mother is amazing and wonderful.

139 Juana: Oh yeah.

140 Interviewer: Until a year ago my body was... and now...

141 Juana: hahaha. Yes, with motherhood. I think raising awareness, hahaha

142 Interviewer: Yeah, hahaha. You expose yourself. It becomes public

143 Juana: hahaha, yeah, completely. My mother... the amount of things out there, hahaha. So you really think it's a body? That's it, hahaha.

144 Interviewer: And you thought it was good? How? Because it is not just the exposure, right? And you do realize that it is a body. But that is a change of shape, size, amplitude. Thus, it is a world. Let's go! You tell!

145 Juana: hahaha. Well, yes, everything changes. The body changes and now it is deformed because... Well, yes. You say "but if it's a body," hahaha. Beforehand, the breasts would look like they were a symbol of...

(...) 149 Juana: Let's see how I say it. So! The focus is not on the topic of motherhood. The focus is on the feminine topic. Man and woman. Like that! Sexual, hahaha. Gosh... hahaha. So now you say "No. It's not like that. Now I'm going to eat!!!" Yes, I like it, hahaha. And that's it. Then also... Well... the stuff of losing more. I remember earlier when I would go to a doctor or gynecologist, it was like that. I would close my eyes and think, "My mom! What a shame!" I would do like that. The ostrich technique. I don't look at him, hahaha. And then it's already good, hahaha. But, well! Relationships from there change, they are better. I tell Paco, hahaha, "I think this was very good," hahaha, "it was great," hahaha.

In earlier stages, the cover-up would make the body meaningless. In the interviewee's words, a gray body" (line 98). However, in pregnancy it acquires a function of generating and giving life and fundamentally of feeding. Thanks to this perception of the body's function, a change of attitudes about body exposure occurs. She can feel safe and comfortable when her body is publicly shown with a certain prominence: at doctors', in breastfeeding. In addition, this functionality highlights the increase in satisfaction in sexual relations as a consequence of purely physical transformation in the female genitalia. In Juana's words, "I think it was great."

Modifying the body

The vital moments in which corporal transformations occur require the beginning of processes of corporal identification. In Juana's case, there are 5 moments in this line: adolescence, moving from home and independence from the family of origin to begin coexistence with her partner, before pregnancy, pregnancy itself, and then gestation. At these times, along with bodily changes, Juana needs to rebuild her identity.

- 1. **Adolescence.** When Juana decides to cover her body and this becomes a "gray body" (lines 97-07).
- 2. **Family independence**. In this case, as the following excerpt shows, a weight gain of 6 kilos occurs due to a diet change that consisted in trying new dishes or foods that seemed to be associated with a moment of vital satisfaction. Juana chooses to resort to a fast weight loss center of dubious professionalism.

282 Juana: No. Nothing about the body at all. I've dieted twice in my life. When I came to live here because I think I started to get fat. Well, I dieted for a year after coming to live here.

283 Interviewer: When you stopped living with your parents to live with (speech interrupted).

284 Juana: Yes, then one changes. "Look how tasty! Let's buy this!" And such! hahaha Or else I buy snacks. Then, I don't know... I changes my habits a little and I gained some six kilos. Nothing. I went to a "weight loss center" and that's it! I lost this and then on that diet I already talk about to you (3) and in a little while... hahaha.

3. **Before pregnancy**. A few years after starting to live with her partner, they plan to have children. Before pregnancy, Juana wanted to lose weight:

179 Juana: And nothing went very well. Because I'd have things like milk, sugar and wheat that are some of the foods that do not do me well and besides I noticed that... I took these things away and felt more energetic. I felt much better.

I lost weight and besides I would eat. Because there were times when I could not have milk and at that time I'd eat lots of soy things and then I would eat a lot at breakfast. I'd eat some stew. Hahaha. So I would eat an awful lot. Hahaha. So I would eat a lot. I would eat things that were more natural and better than before and that's it. Then, like that I would lose weight and I stayed like this. Until I got pregnant. If so, then I'll enjoy it, hahaha. And I really enjoyed it

As it is observed in the excerpt, Juana decides in this occasion to look for a professional who diagnoses food allergies and eliminates from her diet essential products like milk and wheat derivatives and carries out, in Juana's words, "a cleaning diet." Without debating the dangers of these recommendations for future pregnant women, this decision causes Juana to lose weight even when eating large amounts and many types of food at unusual times of the day (cooked for breakfast). For the interviewee, this is a highlight: being able to eat a lot and lose weight.

In the interview with the partner, this supposed value is also emphasized, as we shall comment when talking about "sociocultural pressure."

4. **Pregnancy**. In the following excerpt, the corporal change that happens during the gestation is described.

157 Interviewer: And now how do you feel about your body? Because you say you feel great. I think so. But, well!

(...) 160 Juana: No. I got seven or eight kilos more. Well, I'm a little bit like this. Especially now that summer is coming... like that. And I don't know if I'm going to wear a bikini or a bathing suit, hahaha. And clothing. It always seems like I'm in a uniform, hahaha. Because I have almost no clothes fitting me. Because when I got pregnant, I had been on a diet. A preliminary diet. It wasn't to lose weight but a cleansing diet. They told me about the foods that I didn't tolerate well.

161 (4)

162 Interviewer: Did you gain much weight in pregnancy?

163 Juana: Yes, I gained a lot of weight. Yes, I gained 16 kilos. Up to four months. But from there on, from the fifth month I gained one kilo per week.

164 Interviewer: You felt hungry. Hunger hahaha.

165 Juana: hahaha. It was like, "I can't stop it" hahaha. And everything. Everything. Chocolate hahaha. And then they told me, 'Well, now with breastfeeding...' I still can't diet but now I've already stopped breastfeeding and let's see when I start it.

Prepregnancy weight loss possibly favors an increase of 16 kilos during pregnancy. Usually, for women of normal weight, a weight gain of 11.5 to 13 kilos before pregnancy is recommended.³³ However, culturally it is common to convey the erroneous belief of being possible to eat at will. Thus, as Juana says, "Then I took advantage of if and I enjoyed it well" (line 179). This belief could be reinforced because during pregnancy it is socially justified "to be chubby."

5. **After pregnancy**. In this excerpt the interviewee reflects on how she feels about her body after pregnancy.

271 Interviewer: And sometimes by rejection of the body. Or whatever. You stopped eating. Or you thought you had to change it

272 Juana: I know I have some habits that I need to control a little. Like when I go to school and feel like having some lollipop, hahaha. That. But not to stop eating. Besides I say that tomorrow I will not eat! But you know how... not like that, hahaha.

273 Interviewer: Do you happen to think about something but you don't do it?

274 Juana: It is not possible. You think about something but... damn! I gotta take it seriously because that is not so and I also don't stop eating.

Juana comments in another excerpt of the interview that she had decided to wait for breastfeeding time to lose weight gained in pregnancy in order to carry out some control on the snacks eating habits (line 165). She had previously expressed some dissatisfaction with her body shape in pregnancy ("the body changes and now it is deformed," line 145), which indicates a rejection of her current weight and a dislike for not being able to wear her clothes from before the pregnancy. Also previously (line 160) she had shown some concern regarding future situations of body exposure in swimming pools and/or at beaches. In conclusion, for Juana, her current body, both in shape and weight, causes her pain and desire to change it. Finally, it is explicit that there is no intention to undergo other eating habit maneuvers, but incoherence or ambivalence in the decision to lose weight and the procedure to be followed by Juana are tangible.

Her partner is also aware of this suffering (interview with Paco, line 56): "The poor woman keeps lamenting," "Clothes don't dress her well."

Sociocultural pressure

The interview with Paco, Juana's partner, gives us an opportunity to delve into some conceptions about the female body, the male heterosexual desire and the partner's care relationships from his subjectivity. In the following excerpts, Paco makes a series of general evaluations on social and cultural issues regarding Juana's problem and from his position as a partner.

In the following excerpt, Paco refers to the stages through which Juana has been in relation to her body:

56 Paco: [...] (3) She began to go to (3) a weight loss center and well... She stopped eating some foods that wouldn't do her well or something like that. She also lost weight but a lot of weight... She would eat a lot. She would even eat beans for breakfast or things like that or some stew for breakfast, but she lost weight. She got to be lean, perhaps excessively thin, three or four years ago or so. It is a weight that some may say that is the weight that is used now... which is like this: very little meat. Very little waist. Little hip. A bit of everything but she is not like that. (3) No way! (3). These shape or bone structure that allow her to stay so thin. And then she gained some weight before pregnancy and during pregnancy she gained a lot. And the poor woman is complaining that there are still six or seven kilos left. But, well! I think she lives much worse than others think because after a pregnancy, there are four world-class top models that after three months are parading. But maybe genetics has given them those bodies and they also have their personal trainers, their nutritionists. But normal people who are devoted to taking care of children and to study in their free time... She studies from eleven at night to two in the morning. It is very difficult to stay in shape and the poor woman feels bad because her clothes won't fit very well. She does not want to buy clothes in the size she wears now because she is always hopeful that she will lose weight. But, well! As my sister has been like that for twenty years and I know this story... But it is very difficult and in fact if she loses weight it will be gradually, not from one month to the next. But she experiences it much worse (3) than the rest.

Paco recounts (a) a diet that Juana followed before pregnancy, (b) her weight fluctuations during pregnancy and then (c) her discomfort with her body at present.

Paco does not question the need for a diet or the methods at the weight loss center. However, he emphasizes the exaggerated weight loss that leads his partner to have an image closer to a rectilinear figure, which does not correspond to Juana's "shape or bone structure." He thus contrasts the ideal body ("what is fashionable now") with Juana's, emphasizing the impossibility of having such figure.

His next comment contrasts "four top models" looks, blessed by genetics and support from professionals, with that of "a normal person who is devoted to caring for children and studying in the free time" (Juana).

In a few seconds, Paco relied on two possible ways of understanding "normality". On the one hand, there is a tendency to accentuate the thinness that does not fit well Juana's particular body. On the other hand, the specific cases of professional models that define an ideal body type are incompatible with normal people's real lives.

These two contrasts add up to an argument that denounces the practical impossibility of satisfying an ideal of thinness. The excerpt draws the image of shared body ideals as a reason for Juana's concerns and control practices, which implies that they stem from sociocultural pressures.

Male desire

Later, and in the margins of Juana's biographical trajectory, Paco has an opportunity of speaking about women's body as an object of desire:

100 Interviewer: Then I also ask you as an almost forty-year-old man. What do you like about a woman's body? What would you highlight in general?

101 Paco: I think it's everything, the harmony of the whole. I think, without raising any suspicion of having some kind of pathology, that there are few more beautiful things in a relationship than a woman's body. (3) Everything. (3) The whole. The curves. Could it be that as men... their hormones are triggered when they see a woman... Come on! It's something. But separating this from any kind (3) of (3) pornographic act... Women... I know that a woman on a topless beach and such... If the body type is more or less proportional, to me it is enough. It is an act of total beauty.

102 Interviewer: And do you highlight harmony?

103 Paco: Yes. Nowadays big breasts and narrow hips are fashionable. Which is too much. I hate it deeply and am disgusted with silicone in breasts. I think it's a freak. Totally unattractive too. Knowing that a person, including men, who put silicone or prostheses implants in the buttocks. I mean, I think (3) that it is the result of the current society

The question (100) assumes that Paco generically appreciates women's bodies "as an almost forty man." When asked to describe an ideal, Paco responds coherently and pays homage to women as objects of admiration from men's perspective as subjects of contemplation. His description appeals to the biological myth of the male who, by his own constitution, reacts with desire before women.

The description in line 101 rests on a contrast between the natural-originary and the social-artificial. He distances himself from "any kind of pornographic act" (pornography being an industry of active production of specific body images). He places desire in common places ("on a topless beach and such"). He is based on absolute values, affirmations of normality and extreme formulations, 34,45 "without raising any suspicion of having some kind of pathology," "everything, the whole," "total beauty."

In line 103, Paco contrasts these natural impulses with the artificial introduction of silicone or prostheses, which is "social." Faced with the appreciation of "curves" or proportionality, Paco rejects a "large breast and narrow hip" model that "is now fashionable." Curves and proportional forms are presented as naturally beautiful properties. The introduction of silicone into a woman's breasts is presented as unnatural, "it is the fruit of present-day society."

Nevertheless, Paco's homage to beautiful women resorts to their curves more than the strict lines from the paradigm of thinness. And although Paco speaks here in general, aside from his relationship with Juana, this allows us to better understand to what extent he normally accepts his partner's body and helps us contextualize his astonishment regarding Juana's weight loss by means of a diet, which we discussed above, in excerpt 56 of the interview with Paco.

The dilemma of silence

Finally, we retrieve an excerpt of the interview with Paco that illustrates his position as a caregiver throughout his affective partner relationship. The conversation in this part is about Juana's daily complaints and the attention they deserve in everyday life:

64 Interviewer: And what do you say when she makes those complaining comments?

65(4)

66 Paco: Look, I... it is like this. (3) I try to soften the subject. The truth is that she is six or seven kilos overweight. I don't know exactly. More than before. But for me it is not a determining or fundamental thing in my relationship with her. It is more of a secondary thing and I could actually try harder on softening the subject but the truth is that I say, "Don't worry." My sister has already said that it's nonsense and not worth it. But she feels bad about it. Maybe... I don't know if I'm acting right when it comes to softening the subject but she feels bad, at least apparently. One thing is what one says and another one is what one thinks.

67 Interviewer: OK. Since you've got to know her, what you tell me, you have noticed, besides pregnancy, that she tried to hide the body or maybe not show it in front of you in a more natural way.

68(5)

69 Paco: I think that more than with the body itself or maybe some extra kilos, it is for body hair removal. Look, this is it for her. Even when it comes to pondering, it is even worse. She says, "I've got this hair," hahaha.

70 Interviewer: hahaha Oh yeah?

71 Paco: When we first met and started to go out she was like that (3). She even told me that when she was a little girl with her cousins in the same room on vacation, she would change. She would take her clothes off and everything in a way that she would remove her clothes and put on her pajamas without anyone seeing anything. It was some... She always had enough (3) or thought so... much intimacy... Her own or experienced that in a very... (3) I don't know. In a very private way.

72 Interviewer: What now?

73 Paco: Now she is breastfeeding. The other day I opened a door and she was exposing her breast and breastfeeding the baby. Now it's different. Between us. It has changed a lot. It's logical after living together for six years. I think there should be some trust.

In line 66, Paco presents his dilemma of "softening the subject" when Juana speaks of her concerns with her weight, knowing that "she feels bad about this" (although she won't explicitly express it). It describes a day-to-day scenario in which one notices but does not manage to address a fundamental problem. The paradox is that expressly speaking about something means constituting this as a problem and feeding the concern (where the concern itself is a problem). However, silence can also be problematic by allowing troubled thoughts and behaviors to remain buried.

In the sequence, Paco reviews some situations he has experienced with Juana and his account suggests that he pays attention to her concerns about her own body (lines 69 and 71). In line 71, these descriptions complement each other and suggest being a stable trait in Juana ("always") that characterizes her ("particular"). Juana's modesty seems to be overcome in the present, which Paco attributes to the experience of living together.

Discussion and Conclusions

In the analysis, we see a woman constructing her identity in different vital moments and making decisions regarding her body. According to Le Breton⁵, in the concept of appearance a relation is established between the image that people offer of their body to others and to themselves. There

is a dilemma between what she wants to be and what she wants to represent before the eyes of others, trying to achieve satisfaction without being able to do it completely.

Adolescence is an evolutionary moment in which the physique is especially relevant due to the strong and rapid transformations that occur.^{17, 18} The body and physical appearance are questioned and there is a concern about body image and desire to like.^{36, 37} This is the first vital moment pointed out by Juana in which a dilemma arises when facing the changes that occur. Juana decides to cover her sexual characteristics using clothes as a means to control what she wants to show.^{23, 24} At the vital moment of adolescence, she reacts in a way that is opposed to directives from her sociocultural context.²⁵ In addition, the fear of intimacy is also manifested in the family, in which she does not find some reliable reference allowing her to develop acceptance for her bodily forms.

Likewise, the body functionality in Juana's life changes from before to after her pregnancy. The body turns from being experienced as something that generates malaise to something useful. More specifically, her breasts no longer have an erotic-sexual functionality and have a biological goal in the sphere of motherhood: feeding. In addition, the biological transformations occurring during pregnancy and childbirth lead to increased satisfaction in Juana's intimate relationships.

However, this satisfaction, due to the change in functionality, is counteracted by the dissatisfaction caused by the "extra" kilos after pregnancy and attempts to modify the body before and after pregnancy. These attempts have led Juana to carry out two diets of dubious benefits. Different currents have pointed out that the body dissatisfaction is associated to forming and structuring the identity.^{19, 38} In this line, the "escape" hypothesis indicates that people who are dissatisfied about their own body perceive themselves in a negative way and wish to escape from it through controlling such body.³⁹

The first diet coincides with the moment of independence in relation to the family of origin and the beginning of married life. This change leads to changes in eating habits, which in turn lead to weight gain. It could be enough to go back to a diet similar to the one she had with her family of origin or to have developed a new diet with the advice of a nutritionist. However, Juana's decision was to resort to a fast weight loss center. The second diet is called by Juana "a cleansing diet" as preparation for pregnancy. This decision is very common in Western culture, as many women rely on medical recommendations made to overweight women in pregnancy. For example, it is recommended to lower the weight to facilitate conception or to avoid gestational diabetes or other problems associated with obesity in pregnancy. The problem is that many women with normal weight follow these recommendations, which causes a rebound effect on weight during pregnancy. In addition, the interview emphasizes the typical balance sought by diet consumers: losing weight while enjoying food.^{40,41}

Currently, Juana feels bad about the kilos she has gained during pregnancy and shows an ambivalence about the method she will follow to eliminate them. According to Carey,⁴² some

people concerned about eliminating some supposed overweight resort to fast and restrictive diets that can cause rebound effects in the body. These behaviors are common in a social context that rewards efforts to control weight even when starting from a normal weight. Thus, weight loss and the power that the person infers often become a significant part of their identity.

Juana's partner, Paco, seeks an explanation for his partner's suffering which intriguingly she has not verbalized: sociocultural pressure. In this case, Paco reproduces in his own way Featherstone's⁴³ critique of consumer culture. According to this author,⁴³ the proliferation of body images in contemporary culture "creates a world in which individuals become emotionally vulnerable and are constantly monitored for body imperfections, which could no longer be considered natural" (p. 175).

In other words, the consumer culture constitutes bodies, and in particular women's bodies, as images, so that the corporeal aspect is no longer something natural or inevitable, but rather a matter of individual responsibility, which must be worked out to present itself publicly. The culture of consumption promotes a corporeal subjectivity, as pointed out by Featherstone,⁴³ in which "a sensuous experience [...] is completely submerged amidst the welter of benefits called up by the market and health experts" (p. 185-6).

On the other hand, this conception of sociocultural influence as something independent of individual psychology reproduces the idea that food control is a psychopathological manifestation⁴⁴ and that women are its passive victims as opposed to the originators of public discourse.⁴⁵

Paco is also in line with the sociological studies on FTC that tend to identify as a "sociocultural influence" only that which comes from the media and is frowned upon by official sanitary discourses, forgetting that the promotion of thinness is also performed by health institutions. 46-48

With respect to male desire, Paco's homage to beautiful women translates a statement of principles about the value of "natural" and "proportional" bodies as opposed to aberrant artificial interventions and certain social standards that are formulated as independent of the same appreciation of a proportionate natural beauty and of the very principle which postulates that men react with desire towards women.⁴⁹

These considerations on female beauty from a man's heterosexual viewpoint gain relevance in relation to the analysis of Malson and Ussher⁵⁰ on the idealization of thinness. According to these authors, the connection between beauty and thinness lies in a construction of the female body as attractive within a heterosexual matrix, in which the woman is the object of masculine desire. The B side of this conception is the construction of the fat body as unattractive to men and the reason for the "failure" in women's relations with men. Malson and Ussher⁵⁰ locate this construction within a traditional romantic discourse in which the beautiful woman gets a man with whom she attains happiness.

In this sense, we observe that both Paco's considerations on the influences that sustain his partner's problem and his assessments of ideal and real beauty constitute instances of consumption of a public discourse, developed from the participants' particular circumstances and with their personal capacity of a descriptive articulation.

Examining Paco's views on daily living with Juana's difficulties, we have identified a paradoxical situation for caregivers: although "talking about problems" is a resource to confronting them, Paco justifies the act of avoiding speaking for fear that naming the problems would generate a concern (in which the very preoccupation would feed the body image problem). This "dilemma of silence" is in line with the experiences identified by Perkins et al.⁵¹ in caregivers of bulimia patients who reported not giving sufficient importance to the problem or having done so too late. In a recent publication⁵², we have better developed these paradoxes in caring for people with FTC by their caregivers.

In conclusion, the analysis of biographies of people without a diagnosis allows us to understand different ways of positioning in the sociocultural context of the Western culture. On the other hand, it can also help us create actions through which we can construct a critical look at the context by helping women to develop their identity and experience of their bodies in a free fashion.

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