

The Other Side of Well-being – What Makes a Young Woman Become an Anorectic?

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Abstract

The aim of this research is to reveal those factors that make an individual enter an anorectic world in adolescence. Why does a young woman develop anorexia? What makes one go to a journey to that “Wonderland”? The causes of anorexia were collected from the narratives of 11 Finnish women who survived their own anorexic trip as winners. Anorexia is a serious psychiatric condition that can lead to death at its worst. The causes of anorexia have not been clearly evidenced which makes it difficult to draw a distinct insight of the problems of anorexia. This article reveals the reasons and factors that make usually good and dutiful girls destroy themselves and their lives hooked by anorexia. Furthermore, the complex nature of eating disorder is discussed from an educational perspective because when pursuing toward the ideal of education, one performs to excess.

Keywords: Eating disorder, Anorexia nervosa, Cause factor

1. Introduction

Appreciating beauty and slimness is typical of the Western culture of the beginning of the 21st century although West-European people are fatter than ever before. Especially, women are expected to have uniform appearance—in other words, slimness and tallness—whereas men’s masculinity and attractiveness usually depend on a muscular and firm, and partly slim, exterior. Beauty models are transmitted by movies, commercials, and magazines but in reality they mold several people’s lives unintentionally making them concentrate on themselves and their bodies (Wolf, 1991). Indeed, Utrio (2001) calls the modern era as the heyday of superficiality. Dieting as a word is on everyone’s lips and it does seem to belong especially to a society where there is too much food and too little physical work. (Bordo, 1993; Fay & Price, 1994.)

Anorexia, reckoned among eating disorders, is an illness that typifies the attitudes of our contemporaries: you are something only when thin, and an extremely small size is the goal that anorectics secretly strive for. Anorexia is a serious psychiatric condition that can lead to death at its worst. As an illness, anorexia has been known for a

long time but this form of eating disorder came in public not until in the 1990s after many public figures became seriously ill. Anorexia has been branded mainly as women's illness even though verifiably part of men has suffered from it as well. Healing from anorexia is possible but it is also quite usual that it may recur. (e.g., Bulik, Sullivan, Tozzi, Furberg, Lichtenstein, & Pedersen, 2006; Fay & Price, 1994; Michel & Willard, 2003.)

The causes of anorexia have not been clearly evidenced which makes it difficult to draw a distinct insight of the problems of anorexia. This article reveals the reasons and factors that make these aspirants for perfections, usually good and dutiful girls destroy themselves and their lives hooked by anorexia. The present research gives an extraordinary and unique sight to the forms of eating disorders, anorexia and the enigma of illness. The article is based on the interviews with 11 ex-anorectic subjects who each gave their story about their experiences and survival from the anorectic trip.

2. The Theoretical Introduction

When dissecting the history of medicine and fashion, it can be noticed that the manipulation of women's body in the context of accentuation of sexuality has been practiced already for over hundred years. This partly helps to understand the connection between anorexia and the idealization of slimness when it comes to sexuality. (Bordo, 1993.) Society seems to expect slimness and connects it with sexuality. The common message is that without skinny slimness you cannot be desirable and successful nowadays. However, the fundamental cause of anorexia has not yet been defined because there is not just one reason for why some people want to destroy themselves by dieting. Instead, there are several reasons and they can be understood from a variety of perspectives depending on how one wants to address and dissect the illness. (Michel & Willard, 2003; Riihonen, 1998; Lucas, 2004.)

The attitude toward food has been a public topic for several decades. For example, already at the beginning of the 20th century the connection between nutrition and people's control over life was realized in the context of household instruction in Finland. In the 1950s, the population's eating habits were interfered by nutrition education: the excessive use of sugar, fat, and white flour as well as counting vitamins and minerals in nutrition became the issues of interest. This trend has only strengthened nowadays. The thought that by controlling eating an individual proves to control other areas of his or her life as well seems to lie behind everything. (Puuronen, 2004a; Mäkelä, 2000.) Turner (1984) calls health terrorism the way the society takes care of people. Exactly this can be considered as conniving anorexia. Nutrition recommendations are only recommendations but for those people who are inclined to anorexia these guidelines turn their life into a tangle of problems that revolves around eating, and often into a serious eating disorder. (cf. Lucas, 2004.)

People's relationship with bodiliness and gender ideals is similar everywhere in the Western culture to a large extent because of the media (McRobbie, 1997). Media provides the model of a thin, even skinny, body that creates the image of beauty that can be achieved by skinny appearance. Media, indeed, maintains the excessive glorification of slimness and the idea of beauty resulting first and foremost from skinny slimness. Slimness seems to guarantee succeeding and doing nicely in life. According to Orbach (1989), anorexia does start when an individual pursues meeting the demand of thin body created by media and at the same time by the society as well (see also Charpentier, 1998). Slimness and dieting have started to appear almost as religion-like concepts especially in women's life (Freedman, 1986).

An anorectic system of meanings originates in change. It is a sort of turn away from something reasonable for oneself, striving for ideal citizenship, or something bigger. Becoming anorectic is not connected to any particular common reason but the change can be situated in various areas of life and the changes often tend to cumulate. One does not catch anorexia like a flu but an anorectic behavior begins as strive and obligation to do things right. Puuronen (2004b) refers to becoming anorectic as the demand to meet the strict criteria of ideal citizenship set by the society. Being fat is seen as the biggest sin to which a model citizen would never resort. Fatness does evidence disobedience to the society which is almost the same than if one breaks the law. (Puuronen, 2004b.) Especially alarming in this hysteria about slimness is the fact that beauty ideals and pressure for success are part of younger and younger children's lives resulting in more and more starving anorectics in the middle of the onslaught of food.

Although modern women seem to be on a continuous diet Claude-Pierre (2000) warns not to consider it as the immediate and only cause of anorexia. The excessive admiration of slimness is, according to Claude-Pierre, extremely dangerous but anorexia is much more complicated illness by its nature than just an individual's vanity concerning slimness. Namely, it is totally different matter whether an individual is dieting in order to meet the society's expectations on slimness or whether he or she wants to lose weight to die. On the other hand, Abraham and Llewellyn-Jones (2001) consider the dieting spree as one cause of anorexia. When starting to pay attention to his or her weight, an individual learns two ways to control it: dieting and the methods that prevent the food from

being absorbed. According to Ster (2006), many anorectics have had a strange relationship with eating throughout their lives turning, at some point, into a serious illness. Food and body are especially women's grounds through which they express themselves, either their good or bad feelings. With anorexia, people may signal non-verbally about the bad feeling they have inside them in addition to which anorexia acts as a means to fight for the right for a normal life. (Ster, 2006.)

Medicine searches for the causes of anorexia from the functional disorders of organs. However, these disorders are highly unlikely factors to cause anorexia because those who get anorexia are often young women. Among other things, the deficiency of zinc has been proposed as a cause of anorexia but it has not been proven by research. According to another physiological explanation, refusing to eat causes the increase of the percentage of opioids in the brains of anorectic lifting the mood and thus causing a sense of well-being and making an anorectic dependent on hunger little by little (Abraham & Llewellyn-Jones, 2001). According to the recent studies, the serotonin metabolism is boosted up affecting the feeling of fullness and leading through neglecting eating to losing weight. Similarly, other nerve transmitters and stress hormones are assumed to have their part in the emergence of anorexia. (Attia, Mayer, & Killory, 2001; Michel & Willard, 2003.) A Swedish research, for its part, claims that over a half of the anorexia cases originates in the genetic causes; in other words, the research argues that the vulnerability to get anorexia would be hereditary (see Bulik et al., 2006).

3. The Purpose of This Article

The purpose of this article is to reveal those factors that make an individual enter an anorectic world in adolescence. Why does a young woman develop anorexia? What makes one go to a journey to that "Wonderland"? The causes of anorexia were inquired from 11 Finnish women who survived their own anorectic trip as winners. The factors that emerged are indeed part of the survivors' journey; exactly the particular part that is colored with the negative chains of events but that cannot be just wiped away when talking about overcoming anorexia. Revealing the causes aims at making the things visible that can trigger the anorectic behavior and making easier striving for, contemplating, and understanding the survival. By presenting the causes of anorexia that emerged among the participants, our aim is to discuss them in the light of education: what kind of challenges they set for education and how could educators pay attention to the complex nature of anorexia?

4. Research Method, Data, and Analysis

The aim of this research is to understand the reality of life and related experiences through the individual women's perspective. Those who did get ill are the real experts in describing what makes a young person develop anorexia or what factors tempt on the way to the Wonderland.

The goal of narrative research is to give subjects the opportunity to make their voices heard because the information which is formed in this way is more polyphonic and varied. In this research, participants were Finnish ex-anorectic women (N= 11) aged between 23 and 45. They had developed anorexia between the ages of 10 and 18 years. The survival story told by each ex-anorectic is her own view of her suffering, disappointments, successes, and joys.

The research participants were selected in this research mostly based on their own willingness to participate. The Finnish Anorexia Association (SYLI) helped to find the research participants: it informed through its channels of the possibility to participate in this research. Six ex-anorectics were reached this way. The interviews were designed to concentrate on the interviewees' narration. Indeed, the narratives in this research were built upon the starting question presented by the researcher and the interviewees' were allowed to tell about their journey with anorexia freely. At the end of an interview, and even after an interview for some of the participants, the interviewees' were asked some specifying supplementary questions.

In order to guarantee sufficiency, the data collection was complemented with written survival narratives. Through the authors' personal contacts, ten written narratives about anorexia were received. At this phase, the narratives started to seem repetitious. Therefore, of these ten narratives, six narratives that somehow differed from each other were selected in this research. Finally, the eventual data consisted of five interviews and six written narratives.

Silverman (2005) pointed out that the research subject and research tasks are the keys to selecting the most appropriate data collection method for a study. In this one, the method selected was oral data collection in which the narratives are collected by interviews. In addition, data also consisted of written narratives. The purpose of this study is to describe the causes of anorexia through the ex-anorectics' narratives about their personal experiences.

Narrative is also reflected in the method of data analysis which, in this study, was carried out by narrative

analysis. In addition, the analysis was also used for categorical content analysis (See Lieblich, Tuval-Machiach, & Zilber, 1998; Polkinghorne, 1995).

Narrative is often associated with the constructivist view of information; reference to the nature of knowledge, knowing, and the process of knowledge itself. In this study, the word “narrative” refers mainly to the nature of the research material and the research data analysis. However, it is simultaneously a research with a constructivist view of knowledge because the examinees themselves have built their knowledge and reality through social interaction (Lieblich, Tuval-Machiach, & Zilber, 1998; Garro & Mattingly, 2000; Mahoney, 2002).

The results are analyzed by analysis of narratives that is based on Polkinghorne’s (1995) classification on analyses (analysis of narratives and narrative analysis) because the data was comprised of stories and narratives: the prerequisites for the analysis of narratives. This analysis has an emphasis on the paradigmatic tradition of knowledge as a part of the analysis of narratives as well, because the data is categorized by its content. The narratives were analyzed as whole and they were categorized. Categorical content analysis was used in order to gather up separate expressions that were categorized as factors that caused anorexia among the participants of this research.

5. Results

Several causes and chains of events emerged from the participants’ narratives that together or separately caused their anorexia in adolescence. We categorized these factors into (a) the problems inside a family, (b) inability to control conflicts, (c) lost control over life, (d) the adoration of the societal beauty ideal, and (e) the traumatic experiences.

5.1 The Intra-Family Problems

One central group of the causes of anorexia can be located in the intra-family problems according to the interviewees’ stories. The problems appear especially as a poor emotional atmosphere (e.g., Engblom, 1998; Michel & Willard, 2003), emotional suppression, “forgetting” the child because of the adults’ personal problems, as well as adults’ hurry which had, for its part, made one participant obliged to do the right thing comparable to “the good girl syndrome” (see e.g. Mussell, Mitchell, & Binford, 2001; Einhorn, 2007). These causes were found in the anorexic journey of five research subjects.

Parents’ busyness can make a child feel lonely, inadequate, and secondary and thus cause anorexia.

“I had to catch their attention by succeeding at school and competitions. Otherwise it seemed to me that they didn’t even notice me. They didn’t remember ask about my day much because they were always going to some meetings and assemblies. They were unearthly busy enhancing their own careers. I guess it made me think that they don’t care about me at all as they didn’t have even time to take me to the training lessons.”

The intra-family problems were manifested among three participants by emotional suppression. The prevailing atmosphere at home included the constant hiding and suppression of emotions and made the participants give vent to their feelings by anorexia.

“We never hugged at home. I don’t remember if I ever was kissed goodnight or was allowed to sit in my parents’ lap. Showing emotions was somehow forbidden or at least we did not do that in any form at home.”

One participant’s intra-family problems were connected with the parents’ own problems in life, such as alcoholism and medication abuse because of which the child was often forgotten at home.

“...I have those early-childhood images about food that I have always eaten because of loneliness... just eaten because I haven’t known what to do... The parents had a raft of their own problems so they did not pay any attention to me.”

5.2 The Inability to Control Conflicts

On the other hand, anorexia may result from the inability to control or handle various conflict situations in life. Then, one reason for anoxia may be extreme perfectionism which cannot be executed for some reason. The cause can also be lowered or poor self-esteem for example due to bullying. In addition, anorexia is considered as a means to attract attention, a silent cry for help because of bad feelings. By seeking attention, an anorectic just wants to become visible and cause concern among his or her close people who become obliged to respond to the situation. (Vandereycken & Meerman, 1988.)

5.2.1 Perfectionism

It is quite typical of anorectics to strive for perfection; that is perfectionism. For anorectics, perfectionism means

an attempt to meet the expectations of the outer society and an effort to be perfect in order to get the people's and society's approval. (Michel & Willard, 2003; Charpentier, 1998.) Indeed, perfectionism appears in anorexia as both a reason and a way to control oneself, one's emotions, and life.

"...so that the model for anorectic behavior has been there already; in other words, already in childhood and adolescence, I have used it, you know, as a means to control anxiety... I even managed to get off school with that fundamentally anorectic perfectionism."

The A-grade-girl syndrome can also turn into a form of striving for perfectionist supremacy. Among one of the participants, it resulted in the feeling of incompetence and anorectic control over herself.

"Then I thought that the only thing that means something was just getting As from the tests and having them in the reports. Only then I am worth approval when getting the A. It caused me a horrific pressure and feeling that I'm not enough and good enough because I didn't always get straight As."

5.2.2 Bullying

Young people may find bullying by peers as a conflict situation where they feel guilty for what happened. Bullying may make its object's self-esteem deteriorate; one does not dare to defend or run off nor talk about it to anyone assuming that no one would believe. Two participants found anorexia as a way out from a situation that seemed impossible.

"Then at the beginning of puberty, when I was about 11 years old, I arrived at a turning point. Because of bullying, I just started to slim down. Suddenly, I just came up with the idea that now this will end after I had realized that there was a certain connection between eating and bullying. Practically, I almost stopped eating totally. Then in a very little time, I reduced my weight from 90 kilos to some 50 kilos."

5.3 Lost Control over Life

During childhood and adolescence an individual seeks his or her identity and place in the world. Lack of approval can lead to diseased conceptions of oneself and life.

5.3.1 The Negative Self-Concept

Often the negative perceptions of oneself lie behind anorexia. Performing, pleasing the others, and doing everything perfectly belong to the lives of the pleasing, nice individuals who live with these negative perceptions (Einhorn, 2007). An excessive emotional sensibility or ability to sense the various messages and attitudes from the environment lie behind the negative notions. A sensible individual is willing to please the others by scarifying himself or herself and doing everything for the others. Three participants admitted that their anorexia was partly caused by this behavior.

"I have always had to please everyone, you know. So, if someone does not correspond to my thoughts in the same way I'm the one who has failed."

"... I'm nice and sensitive by nature and a kind of pedant. I am sort of sensitive to the environment, so I observe the atmosphere and always try to adjust to it. It is, of course, a positive feature too if I get along with people but the other side is that you mold yourself too much according to the others' preferences..."

5.3.2 A Distorted Relationship with Food

Food is the anorectic's worst enemy but also the most interesting thing in the world. Two of the participants associated the beginning of their anorectic journey with a clearly increased interest in food: viewing the nutritional facts and changing the fanatically healthy diet to refusal to eat gave an impetus to their anorectic journey.

"At first I made myself clear that after six pm there was no point in eating. It was just part of that dieting plan. I tried it for a few evenings and after the bad feeling I had at the beginning, I started to get used to it. It actually started to feel really great. Another important thing was the feeling of hunger before the next meal. I thought that if I'm not hungry, it is unnecessary to eat. Nor did I even feel the hunger any longer because my metabolism had already been pushed. And after having followed that diet for a little while, I tried to eat a bit of chocolate; the greasy taste left stuck to the roof of my mouth. I was revolted by the whole chocolate and that fat."

5.3.3 Unnecessarily Important Exercising

Physical exercise as a source of pleasure and positive feeling is an important part of people's everyday life. However, exercising can become too an important part of life even to the extent when everything happens on the terms of it. Exercise has anorectic features when eating behavior starts to follow exercise: diet becomes fanatically healthy and whole meals are neglected to make exercising possible. The energy burnt off is not

compensated but food starts to act as a substitute for meal and a way to regulate hunger. (cf. Bulik et al., 2006.)

"So then I started to have more these exercises and thus the whole life started to become more ritualistic. And then I got more and more things to control and started to think what I will eat before training and what after it. So that everything became more planned, you know..."

Four of the participants thought that physical exercise was one factor that was connected to the beginning of their anorectic journey. Running was their exercising method as the anorectics consider it as an efficient way of burn off calories.

"I went all the time into overdrive and physical exercise started to turn into an obsession. And especially in a way that after eating something I had to get to a certain run or go cycling or anything... I solved the things by torturing myself physically, forced exercise."

5.4 Adoration of the Societal Beauty Ideal

Initially, several women in this research started dieting because of their discontent with their body and belief that when slimmer they are closer to a perfect life. A young woman who is about to get an eating disorder can also use a model body as the goal of her efforts. Perfection will not be achieved by the size 34 but by the size 0, that is total non-existence, Claude-Pierre (2000, p. 94-95) notes.

"I have never been overweight but already since I was little there was such a composition that I'm big. My sister has always been wonderful, intelligent, and, you know, more lovable for them. So it began already in childhood that I'm not enough and I'm not good enough when being myself."

This research supports the widely popular theory of how one of the initial causes of anorexia is located as a part of the cultural beauty ideal and admiration of slimness (e.g., Simpson, 2002; Fay & Price, 1994). Johansson (1999) thinks that common to the beauty ideal of different eras is that there is always something to improve in body. Utrio (2001) points out that the beauty ideals of the modern society tend to change fast shaped by the market organizations. There is plenty of debate about the cult of slimness, the super models' iconic position, and the perception that the victims of eating disorders are slimming down in order to imitate the model body perceived as the physical ideal.

5.4.1 Mother as a Role Model

The beginning of anorexia was located at the threshold of puberty among the participants, when the young tend to soak up all the ideas and ideals of the surrounding society, especially their own mother's attitude towards food and dieting (see Jaffe & Worobey, 2006).

"My mom didn't ever admit that she would have had any eating disorders but I surely know because I've followed her dieting attempts since I was a child. She has rarely been satisfied with herself and she has always been so unhealthy thin too. We didn't ever have much baking days or feasts at home; or not at least the ones that my mom would have participated in."

On the other hand, media is also one of the significant actors in the anorectic manipulation that makes women hate their own bodies and drives them to the fat phobia (see Thompson & Heinberg, 1999). More and more women try to achieve the societal recognition by falling into these conceptions and starting a new miraculous life. This does not concern only the teenagers who search for their identity because nowadays one large group of dissatisfied is the mothers who want and thirst for beauty not only for themselves but also for their children. (Cf. Policy & Herman, 2002.)

"I had heard both directly and indirectly from my mom that slimness is beautiful and eligible. And I had been called names for years, as 'a fat ass' among others. Indeed, slimness enhanced my dancing hobby and I surely wanted to do my best in everything and preferably a little bit more too."

A youngster who is building his or her own life is vulnerable to all communication in the environment. Even one wrong word or act can trigger off an anorectic journey.

"I don't, for example, remember ever sitting in my mom's lap and I have always thought that it was because I was fat. I have such a notion that when I once tried to seek my way to mom's lap she noted that I can't because I am so heavy..."

5.4.2 The Pressure Placed by the Environment

The pressures and demands placed by the environment can become too hard when one with a sensitive personality cannot any longer handle the continuous performing and striving for better. The pressure does not necessarily come from appearance but for instance originates in work or studying. In addition, the stirring of

interest toward the other sex, seeking popularity in the group of friends, and the friends' experiences on dieting can increase a youngster's eagerness to watch weight. One of the participants did think that the initial cause of her anorexia was not so much the factors related to her appearance as was the pressure from the environment.

"I think that the anorexia was merely caused by the pressure from the environment as, for example, the model that some women's magazines provide you with. You see, it's not a small thing to become so thin. It requires the sort of methodicalness and effort of will as the starvation is not that fun."

5.4.3 Traumatic Experiences

Psychological opinions on the causes of anorexia are based on a thought according to which anorexia arises from the young themselves and their families but also from the surrounding culture and society. Getting ill may be preceded by some traumatic experience which unwell people cannot solve in any other way except by punishing themselves. (Buckroyd, 1997; Charpentier, 1998) After a traumatic incident, a variety of symptoms can emerge which help to avoid oppressive emotions and to forget the bad experiences. The situation can trigger off such powerful emotions that the previous experiences or ordinary ways of action are not enough for handling the situation. (Jakobson & Wiegand, 1996; see also Policy & Herman, 2002; Saari, 2003)

One participant had been an object of mental violence at school for years. In the middle school, bullying culminated in a physical assault.

"Beating was the final straw for my coping. Developing anorexia was, at that phase, a sort of cry for help because the situation started to be so intolerable that my own strengths were not enough anymore. Someone else would have committed a suicide; I selected anorexia as my coping method."

Another participant had to experience the violation of her own body and bodily integrity in a home party. Due to the rape, she felt herself as contaminated and the feeling of shame was intolerable. Anorexia provided an escape in order to calm down the dirty feeling and to forget the incident.

".. It came to a horrible end for me... one guy was totally wasted and he just assaulted me and dragged me by force into that room. Then he raped me and left there alone. I was totally shocked and I don't remember anything else that someone from our class dragged me at home and warned me that I can't tell anyone about it."

6. Conclusions

The causes that the participants in this research brought up were connected among others to a family's own problems that have a negative influence on youngsters' self-image—youngsters who were still searching themselves and their identities. Additionally, some societal factor can cause anorexia, such as continuous hurry, pressure, the experiences of insufficiency, and constantly increasing demands both in working life and school world or some traumatic incident. However, not every people develop anorexia even if they had to confront similar hardships in their life. Quite often the anorectic seem to be sensitive and pedant perfectionists whose striving for perfectionism ends in one way or another.

Anorexia is quite a topical research theme with which to address the indisposition related to the increase in the youngsters' and adults' bad feeling especially within the countries with high living standard and excellent setting for well-being. Anorexia as an illness partly mirrors the distress that an individual has in the conflict situation of the society's increasing demands and expectations: when just normal, you are nothing but only through over-performing you can accomplish something in your life. Certainly, anorexia appears as a sort of cry for help against all these demands but also a way of venting bad feelings and an attempt to stop the development in a phase where you do not have to take care of yourself. (Cf. Simpson, 2002; Fay & Price, 1994)

Anorexia nervosa is mostly related to different obsessions, an infinite desire to lose weight, and a huge fear of weight gain. Anorectic life seems to just rotate around food and dieting. The secret goal is to destroy one's own appetite completely. Life is controlled and over-regulated; repeating the same routines day after day because of the fear of loss of control. The anorectics believe that the control shows discipline and self-mastery. In their own eyes, only slenderness and a body without fat appear to validate and offer a decent life (Bordo, 1993; Mussell, Mitchell, & Binford, 2001). Anorexia is a business deal grounded in hard thoughts, feelings, and fears, through self punishment.

7. Discussion

There are some limitations in the research that should be contemplated. The number of participants was relatively low and therefore the results are not generalizable as such. However, in qualitative research like this one was, the purpose is not to produce generalizable information but to describe the participants' experiences and thoughts and regard them as the exemplars of the phenomenon studied. In this research, the participants

exemplified a selected group of anorexics: the women who were willing to tell their stories had all conquered anorexia. Indeed, all the participants were women and lack of men can be considered as a limitation of the study. However, this matter was something that the researchers could not affect but the data was considered sufficient by its content and authenticity.

When working with this kind of sensitive research theme, it is important to analyze the researcher's position in and relationship with the research (Guba & Lincoln, 1994). It is especially important, as the first author of the research is an ex-anorectic herself. It can be contemplated whether her experiences had affected the results somehow or not as the researcher's experiences may have directed the interpretations made from the data to some extent. However, it can be seen as an advantage as well: the interviews may have succeeded better because the researcher was more likely to really understand what the interviewees were talking about and to see what they really mean when, for example, explaining the reasons for their actions.

According to Puuronen (2004a), anorexia is like a game where anorexia appears to be a way of life and a sacrifice to the victim. Giddens (1996) describes anorexia as a form of addiction in late modern time. He lists the addictions in the anorectic as including coffee, drugs, alcohol, work, fitness, sex, and love. According to Giddens, anorexia demonstrates the negative effect of an individual in society: anorexia enables individuals to try to resolve the question of how to be a good citizen in the performance and efficiency of a society that values them (Michel & Willard, 2003).

At the moment, a perception is prevailing according to which anorexia could initiate mostly from a mental disorder. Additionally, some other psychosocial stressful situation, such as a loved one's death or illnesses, parents' divorce, sexual abuse, moving away from home, break-up, graduating, low self-esteem, the excessive admiration of slimness, or bullying can trigger off self-destructive thoughts and their implementation. (Buckroyd, 1997; Charpentier, 1998) In addition, some anorexics seem to have experiences of change or break-up in their early-life interactional relationships that clearly involve a threat of destroying the self or object experience. These kinds of break-up experiences make people vulnerable to changes and adversities and give birth to the experience of separateness that can, when reactivated, lead to self-destructive eating behavior, such as anorexia nervosa. (Engblom, 1998) Studies show that the propensity for anxiety has its influence on developing anorexia. For example, Michel and Willard (2003) note that even 90 percent of anorexics had suffered from some kind of anxiety before anorexia.

Doing research on sensitive subjects is often difficult for both the researcher and participants. Plenty of things were said and many of these came to print, but there are a number of experiences and other things that the research did not bring out. The research does not provide an easy prescription for overcoming anorexia. All the stories that were heard, however, led us to realize the importance of individual life and the fragility of a delicate sense of the infinite individual beauty. Life and the difficulties of survival are not everyone's gift. Instead of a foregone conclusion, life is something much more special.

The complexities related to anorexia arouse many difficult issues. On the other hand, one should eat healthy to avoid gaining on weight. One should exercise to maintain well-being and make the effort for success at school and in life overall. All these are important and good qualities and goals but the anorectic adhere to these features in a way that harm themselves and end up with excess. From an educator's point of view, balancing between encouraging the young for having healthy lifestyle and not to put too much pressure on them seems extremely difficult. How to notice when the line between normal and distorted attitude toward eating has been crossed; and more importantly, how to prevent this from happening?

Some youngsters are more sensitive than others and they should be addressed with care. Children's well-being is the responsibility of those people who live with and close to them, such as parents, other immediate caregivers, teachers, and friends (see Ambert, 1994). They should be careful when commenting or making comparisons to ideal types as they can be so easily misinterpreted. Someone with low self-esteem may take the comments personally and end up with developing anorexia as can someone with apt for perfectionism too. Indeed, the present research showed that good girls can become unhealthy good girls.

More research should be conducted from this point of view: the modern busy way of living does not provide enough time and space for care and support, and listening to youngsters' worries. As the medical side of anorexia is relatively widely studied, now it is time to pay attention to the causes of anorexia and give voice to those who suffer or have suffered anorexia. It would be important to remember that not only women but also men can develop anorexia (e.g., Raevuori, 2009) as the illness is often labeled as women's disease. More consideration

and research should be aimed at the survival stories as there certainly is something that can be adopted not only helping and treating anorexics but to preventing youngsters from developing it. Our purpose was to contribute to this discussion with the present research.

Furthermore, one extremely interesting, significant, and challenging research theme would be to find out what kind of actions and means anorexia could really be prevented with. Certainly, it is possible to make a list of things that should be intervened in both at the societal and individual level. However, it would be important to get research-based information about these things to make preventive work easier.

As partly addressed in the results of this research, it would be important to study more profoundly what ex-anorexics are like as mothers (see also van Wezel-Meijler & Wit, 1989): whether they unconsciously transfer their own food-related thoughts to their children, restrict their children's eating somehow or over-feed their children, and whether their ex-anorectic life affects their way of rearing and treating their children somehow. On the other hand, it would be necessary to listen to the intra-family stories about living by an anorectic's side from children and spouses or his or her siblings and parents. It would open the curtains to the everyday life lived with the anorectic at its best and worst and provide an opportunity to contemplate those burdens, joys, and sorrows that the loved ones confront when sharing their lives with the anorectic.

Anorexics' loved ones and relatives should, indeed, be addressed by research as they are too often put aside and left alone to struggle with their guilt, powerlessness, and grief. Research that focused on anorexics' circle of acquaintances would help not only the loved ones but also anorexics to understand that pain and the magnitude of pain and concern as well as the spectrum of emotions that the people who are the most important in their lives experience because of them. (e.g., Guisinger, 2011).

All in all, anorexia is certainly a complex phenomenon to be considered by parents and other educators. Not only do adults act as role models but they should also support children's balanced development and strengthen their self-esteem. Educators' task is to support youngsters' awareness of their strengths, to show and guide in what one is good at and direct their interest on gaining positive experiences in these areas (e.g., Mcree & Halpern, 2010), but also protect children. For example, as bullying was named as one factor, parents and teachers should intervene in it immediately when noticing such a thing and thus show the young that they really care and want to protect them. Of course, it is impossible to totally prevent bad things from happening but what can be done by rearing and education is to provide children with the feeling of security and appreciation that also function as the foundation pillars of healthy and positive self-respect (e.g., Sheridan & Burt, 2009) and which could help in the battle against eating disorders like anorexia. However and unquestionably, the most fundamental thing would be that children were accepted as they are.

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