

**Literature and Coping Skills**  
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**Lecture No. 38**  
**Mimetic Desire and the Possessed Body – II**


Hello everybody, I am Ajit K Mishra, your course instructor for Literature and Coping Skills. I am here again with another segment of this module. In my last lecture I talked about mimetic desire, body dissatisfaction, and the implication of these two serious issues for eating disorders. I told you all that eating disorders are a major global problem today; and it has been so for a long long time. If we do not get to know how to overcome this particular menace, we might end up contributing to it. Therefore, it is important that now we understand what eating disorder is all about; its triggers, its risk factors and its root causes as well.

In my last lecture, I started by talking about Girard's mimetic desire theory, and I also tried to connect mimetic desire with eating disorders. I also talked about how this all can be traced to the body dissatisfaction that we all probably have. Most of us learn how to move on in life with some dissatisfaction with their body parts; but, there are people who cannot move on. And when that happens, they develop some serious body dissatisfaction or body image disturbances. And that these dissatisfaction or disturbances lead them to eating disorders; because the only way we think we can make the body chaste or discipline the body is through eating alterations.

So, when that happens these eating alterations will lead to eating disorders. So, today I am going to talk about some other aspects associated with eating disorders; so let us start.



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## Beating Eating Disorder



- Mimetic Desire and the Possessed Body- I
- Mimetic Desire and the Possessed Body- II
- Carol Ann Duffy, "The Diet"
- Marty McConnell, "Instructions for a Body"


Image Source: Thenounproject



As I told you today I am going to focus on this particular segment that is the lecture two of this module. I am going to talk about mimetic desire and the possessed body as well. How mimetic and desire in fact leads us to the body, which we find as if it has been possessed by certain evil spirits, certain strange and mysterious things. And when that happens how the body responds to those issues; we will take a look at those things. So, let us start today's lecture.

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## Body Image



- Body image is how you see yourself when you look in the mirror or when you picture yourself in your mind.
- It encompasses:
  - What you believe about your own appearance (including your memories, assumptions, and generalizations).
  - How you feel about your body, including your height, shape, and weight.
  - How you sense and control your body as you move. How you physically experience or feel in your body.

(NEDA)

Image Source: Triathlon Magazine



It is all about body image; I hinted at this particular issue in my last lecture. Body image is a very very important concept, because we all have our body images. If we do not get the right kind of image that will promptly push us to some problems. Therefore, it is important that when a person begins to develop the body image, the person is helped to develop the right kind of or the positive body image at this stage. And interestingly enough several researchers have found that body image information occurs very very early as early as 3 years.

So, it is very very important that we are awake to this particular phenomenon so that we can help people around us to come to terms with their body images quite early in their lives; so that they grow up to accept the right kind of body they have; the body that comes to them naturally. Fitness is one of the finest things that we can seek that we can look forward to of course. But, fitness does not necessarily mean that we will begin to treat this body as our enemy; and begin to punish this, as if this body has sinned; therefore, it deserves punishment.

So, body images are the most important things that we all need to be aware of; so that we grow up with a positive body image and we not only minimize the risk of body dissatisfaction disorder or disturbance, or body image disturbance; which will promptly push us into some eating disorders as well. And together all these dissatisfaction disorders will develop into some other psychiatric issues as well, like depression, anxiety and a variety of other things. So, it is important that we learn to develop the right kind of body image. So, in this particular section, I am going to talk about body image from these perspectives.

So, body image is all about how I see myself or you see yourself. When I look at myself in the mirror, look at my reflection, and the kind of picture that forms in my mind; if it tells me that I look good, I am very happy with my body; I will have no problems at all. If my reflection tells me that you are not looking good, or have some problem with your body, you need to do something about your body. That means it will lead to some body image disturbances in me. So, therefore it is important how I see myself in the mirror.

So, sometimes I may actually look a little flabby or chubby in the mirror; but if I accept that as my true or real body image, not the ideal body image, the actual body image. There is no problem at all fine; I look nice, I look good; but in most cases that does not happen. If there is a

pimple on my face that might disturb me; how can I go out? Or is that pimple on my face? How will others react to my pimple? So, you begin to experience anxiety.

So, these are some of the issues that occur the moment we look at ourselves or our reflections in the mirror; and that is the beginning of the body image. And then body image encompasses all these important things. What do you believe about your own appearance? It is not about the mirror reflection; it is more about what you believe about your appearance, including your memories. Do you have bad memories associated with your appearance? Have you ever experienced bullying, taunting, ostracizing on the basis of your appearance, which is not liked by a group of people, some other assumptions and generalizations?

For example, this type of body is not accepted in that society; that is a generalization. How can that society determine the biological conditions of individual entities in that community? But, societies do that. So, there are generalizations as well. When that happens that might also lead to problems. So, it is all about what you believe about your own appearance and how you come to believe about your own appearance. You develop a sense of your own appearance on the basis of these things; your past experiences or your ongoing experiences.


For example, your memories, your assumptions and the generalizations; and then how you feel about your body including your height, shape and weight? Do you think you are overweight? You have a shorter height in comparison to a standard height prescribed for bodies in a society. If you do not have that you might think I do not have that right height; and then your weight, your height, your shape. Finally, how do you sense and control your body as you move? When you move do you find it comfortable to move or you find it absolutely uncomfortable to carry your limbs. How do you physically experience or feel in your body when you move? Also contributes to your body image.

So, all these things together contribute to our body images, our memories, assumptions, generalizations. What do I think about my height, my colour, skin colour and my shape; and how I feel when I walk, when I move, when I run, when I jump? Do I feel comfortable or uncomfortable? If I feel uncomfortable, then I must say yes I am overweight, I am obese. I have

to do something about it, or I am extremely lean and thin; I have to do something about it. I have to put on some weight, so that I am a little more energetic, comfortable.

So, it is all about how we approach the whole idea; now that is exactly what neither suggests the national eating disorder association suggests. So, these are some of the things that we need to take care of at the beginning, when we begin to form or formulate our body images.

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The slide is titled "Negative Body Image" in a large, bold, black font. Below the title, there is a sub-heading "A negative body image involves" followed by a bulleted list of three points. The first point is "Being overly focused on comparing your size, shape, or appearance to unrealistic ideals." The second point is "Holding yourself to a thin-ideal or an athletic-ideal may cause you to develop unhealthy self-talk, low self-esteem, or disordered eating patterns." The third point is "A negative body image increases the risk of engaging in unhealthy lifestyle behaviours, such as dieting or restrictive eating, overexercising and other disordered eating or weight control behaviours." To the right of the text, there is a photograph of a man in a blue shirt speaking. In the background of the slide, there is a faint image of a person's legs and a measuring tape. The NPTEL logo is in the top right corner. At the bottom, it says "Image Source: Medical Xpress".

**Negative Body Image**

A negative body image involves

- Being overly focused on comparing your size, shape, or appearance to unrealistic ideals.
- Holding yourself to a thin-ideal or an athletic-ideal may cause you to develop unhealthy self-talk, low self-esteem, or disordered eating patterns.
- A negative body image increases the risk of engaging in unhealthy lifestyle behaviours, such as dieting or restrictive eating, overexercising and other disordered eating or weight control behaviours.

Image Source: Medical Xpress

And that brings us to the negative body image; if it is a positive body image, it will not trouble you at all; because it is going to make you happy and healthy. You will not mind, if you are comfortable with your body. If you like your body's shape, it is perfectly fine; it will create that positivity in you. And you can easily carry on with that positive body image all your life without any problems at all. Come what may, what others say will hardly matter to you. But, if you develop or if one develops negative body images, and that particular body image formation stage; that is a formative stage, when we begin to develop our body images. As early as 3 the age of 3, people begin to form body images.

If at that stage, one develops a negative body image; that is going to be a serious problem all the life for the person. And that might lead to several psychological and psychiatric conditions. So, therefore, it is very important that we get to know what negative body image is all about; how it

develops and what we can do to overcome that particular problem. So, a negative body image involves being overly focused on comparing your size, shape, or appearance to unrealistic ideals.

For example, if somebody begins to compare oneself with Barbie dolls unrealistic ideals Barbie dolls, then the person has a negative body image. And the person is likely to develop some serious psychiatric conditions as well; because we need to understand that Barbie is an unrealistic doll. It has been produced in certain mechanical conditions, so that is not a human figure; so that cannot be real. Even if it is real, it can be so at a huge cost; therefore it cannot be so real, it cannot be realistic; it is unrealistic.

If somebody is a young girl begins to compare her body size, shape or appearance with Barbie; that will lead to serious problems, and this has happened for many years, young girls develop a tendency to compare themselves with Barbie dolls. Because they play with that doll and they develop that mimetic desire for that particular object. So, therefore, that will lead to negative body images as well.

And then if somebody holds oneself to a thin-ideal or an athletic-ideal; that may also cause them to develop unhealthy self-talk, low-esteem, or disordered eating patterns. So, if somebody holds to the thin ideal; thin is the only form that can be recognized. If one holds to this particular ideal, this particular image; then one is bound to lose one's self-esteem, and engage in disordered eating, so that will lead to serious consequences as well.

A negative body image also increases the risk of engaging in unhealthy lifestyle behaviours. Such as dieting or restrictive eating, overexercising and other disordered eating or weight control behaviours; this image is an indicator of such behaviours. So, if you go on measuring your tummy every now and then using the inch tape; you are engaging in some of these behaviours, which are not normal clinically or medically. So, these are lifestyle behaviours, and these lifestyle behaviours will lead to anxiety in you; and then you will promptly engage in these activities. For example, on dieting and then over exercising, restrictive eating or disordered eating; and then weight control behaviours.

So, negative body image is of course a very very serious problem. Some of the contributors of this problem of negative body image are for example, past, unpleasant memories; like somebody

is being teased about appearance. And then somebody grows up in a household that puts a lot of emphasis on the right size of body and shape. And then there are parents and family members who emphasize a great deal on the body types and body shapes. They also emphasize weight control behaviours, they emphasize proper eating habits. If somebody grows up in such a family; such people may engage in some kind of lifestyle or altering behaviours.

And then there is a cultural factor, a cultural contributor that tells you that this is not the right kind of body; although I mean body of the right size or shape. There is peer pressure, especially among the teens that leads to negative body images. If somebody is not slim, the person will find it extremely difficult to find a group to belong to a gang or a group or a peer group; so that will also lead to negative body images; somebody might begin to think that I am not part of that gang, because I do not have that type of body; so that will lead to severe negative body images.

And then the impact of media and even well made public health campaigns can also lead to; if they are not properly designed, if they do not adopt an inclusive approach; they might end up causing negative body image. So, these are some of the contributors to negative body image.

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## Negative Body Image

- Body image is generally conceptualized as a multidimensional construct

There is

- a behavioral component involving body-related behaviors (e.g. checking behaviors)
- a perceptual component involving the perception of body characteristics (e.g. estimation of one's body size or weight)
- a cognitive-affective component involving cognitions, attitudes, and feelings toward one's body

(frontiersin.org)

Image Source: Medical Xpress



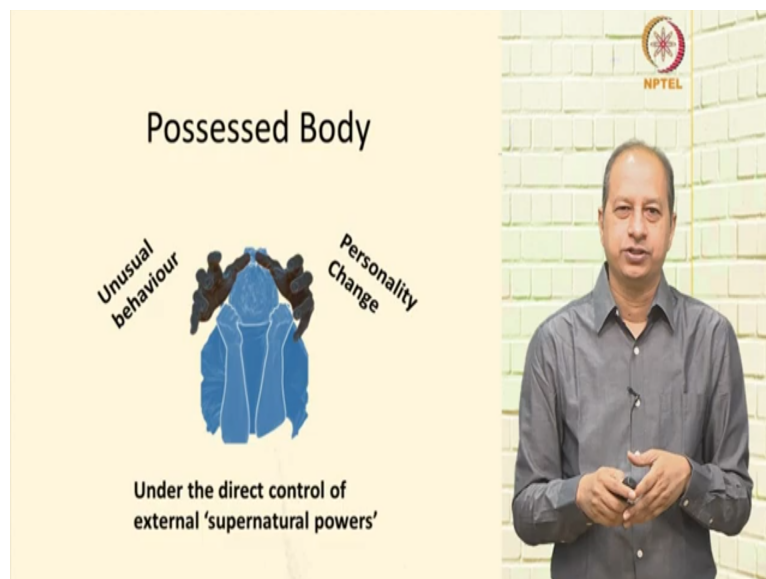
So, negative body image again is generally conceptualized as a multidimensional construct; it has several dimensions. So, to be precise there are 3 distinct dimensions, which point towards lifestyle behaviours. A lifestyle changes in a person who has developed a negative body image.

For example, there is a behavioral component which involves body-related behaviours. For example, checking behaviours; one such example is the image that you can see. Somebody keeps on checking one's body parts; there is checking behaviour that is a behavioral component.

There is a perceptual component which involves the perception of the body and its characteristics; especially or the estimation of one's body size and weight. So, if you think you are adding weight; you will go and check your weight, and then do a variety of things to curb that particular thing. So, this is a perceptual component. We generally begin to believe as if I am I am you know adding weight, putting weight.

And there is a cognitive affective component as well, which involves cognitions, attitudes and feelings towards one's body. So, that is exactly where people develop negative body images or positive body images as a case maybe. If my cognitions, my attitudes, my feelings towards my body are negative; I will definitely develop a negative body image. So, these are some of the factors that result in negative body image.

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That brings us to a very very interesting and very important phenomenon; that I call the possessed body. So, mimetic desire and the possessed body, why is the body possessed, and what it is possessed of? So, who possesses the body? The person who owns the body, the owner of the body or somebody else from outside; something mysterious, something strange, something evil

from outside begins to possess, or begins to overwhelm; and takes control of this body; so that we lose complete contact with this body, and then we do not have any any control over this path.

So, it is very important for us to understand the idea of possession from a religious perspective. Possession in religious and folk traditions as we all know is a condition characterized by unusual behaviour; that is very important- and a personality change that is interpreted as evidence that the person is under the direct control of an external supernatural power.

So, as you see the possessed body, you can see as if there is an external agency, there is an external factor; that is trying to exercise direct control over the party. And then you suddenly recoil, because your behaviours change, your lifestyle changes, your personality changes; you suddenly experience several multiple changes in yourself in your life. And you begin to experience it as if an external agency is trying to take control of your body; so that will result in unusual behaviour. A person will behave in a very very different manner.

That means it may be as simple and commonplace as taking an inch of tape and checking one's tummy size; 10 times, 20 times, 100 times a day, every now and then. That may be a very very unusual behaviour; because that person has developed a negative body image. The person has developed body dissatisfaction and that is the reason how the body is now reacting to those images; and body dissatisfaction.

So, as if it has been the body has been possessed by an external agency. So, the behavioral patterns will suddenly change; they will appear to be unusual, that is why pauses to the body. And then there will be severe personality changes. So, the person will experience very different types of personality changes in oneself; and then under the direct control of external supernatural powers. So, what are these supernatural powers here, when I am talking about the possessed body under the impact of mimetic desire? Those are the supernatural powers, the mediators, the models can be television, can be person, can be object, can be anything.

So, those mediators and those models exercise a tremendous impact on the body; and that is how the body gets possessed by these powers. And if I can use the ideas of Girard, I can very well say that he suggests that the etymology of the word deceptively suggests, the anorexic has an appetite. Because when it comes to anorexia that means when your personality changes, where

your behaviour changes; and when you find yourself under the control of an external agency, you will develop eating disorders. And when that happens to the anorexic, the word anorexia means loss of appetite or lack of appetite.

But, lack of appetite is not the right meaning of this word; loss of appetite which is a nervous loss of appetite; therefore it is called Anorexia Nervosa. So, this nervous loss of appetite is not necessarily the right meaning of this word; that is exactly what Girard believes. Because, a person who is experiencing anorexia, most women in fact experience anorexia. A woman still wants to eat just as much as we do and even much more; because the body of such a person is starving for quite some time.

So, the only problem is that they generally fear that if they eat even a bite; that will become a habit, they will never stop eating. So, in other words, they would become bulimic and that is the reason why the body is possessed; and that is the reason why such people never relax through their superhuman efforts. They have triumphed over their normal instinct and now the spirit of unnatural thinness possesses them. And this is so complete that the notion of demonic possession suits their case better than the vocabulary of modern psychiatry.

So, if we go by the ideas of Girard, we can very easily believe that the body gets possessed. Possessed by this desire or this uncontrollable desire to starve it, to keep it thin; to exceed the thin ideal, which is prevalent at any given time; so that is the reason why the body is possessed. And once the body is possessed, it will lead to behavioral changes, personality changes; and then it will lead to severe lifestyle alterations. And it will not lead to physiological alterations as well. It will also lead to neurobiological alterations, physiological alterations. For example, people suffering from such problems will probably experience depression, anxiety and several other psychiatric problems as well.

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So, it is very very important that we understand the very nature of eating disorders, which has such a long trail, such a huge background. Now that we have taken a sufficient look at the background; the trail itself, we are in a position to approach the idea of eating disorders. So, eating disorders as we know is a dangerously maladaptive approach to food. It is a maladaptive approach to food either you eat too much, or you do not eat at all; so, it is highly maladaptive.

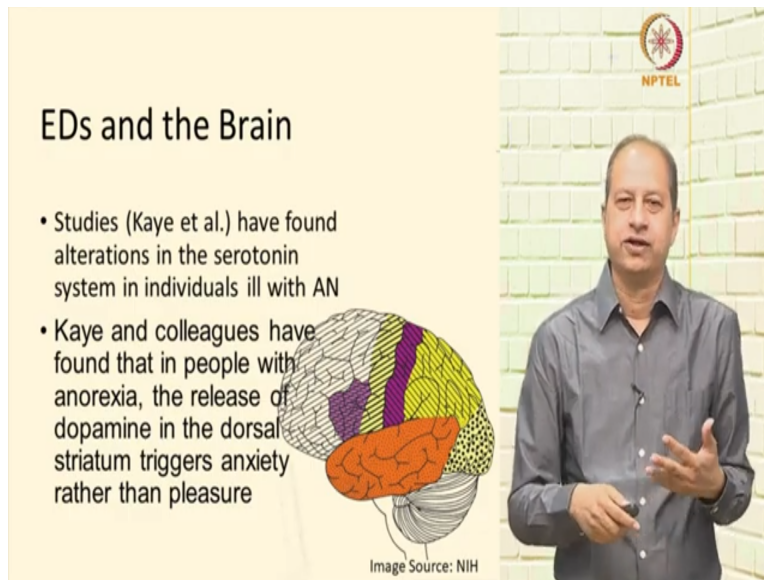
So, the DSM-5, the Diagnostic Statistical Manual of mental illness of the American psychiatric association; in its fifth edition, the DSM-5 as it is very popularly known, distinguishes between three primary eating disorders. Anorexia Nervosa-AN, Bulimia Nervosa-BN, and Binge Eating Disorder-BED; so AN is characterized by intense fear of weight gain. So, sometimes it is also called the weight for beer and a disturbed experience of one's own body, weight or shape; negative body image, body dissatisfaction; they will promptly result in Anorexia.

BN or Bulimia Nervosa is characterized by recurrent episodes of Binge Eating inappropriate compensatory behaviours to prevent weight gain. For example, vomiting, misuse of laxatives or excessive exercise behaviour change, personality change; because the body is now under possession, it has been possessed. Possessed by sometimes mysterious, strange, evil even. So, and then finally binge eating disorders are characterized by recurrent episodes of Binge Eating, without compensatory behaviours.

So, reason 5 has in fact listed these three as the most important and potential eating disorders. There are other eating disorders as well as you can see or very well. For example, OSFED and ARFID and UFED; there are also equally important eating disorders. But, these are the 3 which are the major cause of global menace involving eating disorders. So, again if we have to look at eating disorders, we can very strongly suggest that collectively eating disorders have the highest death rates, among all mental illnesses. So, you can imagine how serious these eating disorders are.

So, and in most studies Anorexia Nervosa has the highest mortality rate of various eating disorders. So, the mortality rate is so high that Anorexia has been treated as or the most deadly psychiatric issues or problems. Because it has a mortality rate of around 5.86, which is dramatically higher than that of schizophrenia. So, you can easily imagine how serious these problems are eating disorders; and how easily they escape our attention.

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The slide is titled "EDs and the Brain". It features a speaker on the right side, a diagram of a human brain on the left, and a list of bullet points. The speaker is a man with short dark hair, wearing a grey button-down shirt, standing in front of a light-colored brick wall. The brain diagram is a sagittal view with different regions highlighted in colors: purple for the frontal lobe, yellow for the parietal lobe, orange for the temporal lobe, and green for the occipital lobe. The cerebellum is shown in a darker shade. The text "Image Source: NIH" is at the bottom of the brain diagram. The NPTEL logo is in the top right corner of the slide.

## EDs and the Brain

- Studies (Kaye et al.) have found alterations in the serotonin system in individuals ill with AN
- Kaye and colleagues have found that in people with anorexia, the release of dopamine in the dorsal striatum triggers anxiety rather than pleasure

Image Source: NIH

So, it is important that we begin to take a look at this. In order to understand the implications of eating disorders for our existence and well-being; we need to focus on the relationship between eating disorders and the brain or altered brain mechanisms; so that we can understand its neurobiological aspects as well. While, most people think that the environment certainly plays both the social and cultural environments. Certainly play an important part in shaping the behaviours associated with eating disorders; contemporary now findings by neuroscientists, also establish the fact that eating disorders can also be located to the brain mechanisms.

So, these research findings are playing an important role in our understanding of the whole amenities of eating disorders. And we can also hope that very soon we can find measures or help from these neurobiological researches, with the help of which we can take care of these problems; otherwise untreatable, virtually untreatable problems, psychological disorders. So, it is important that we take a look at the eating disorders and the brain mechanism. So, there have been studies, especially the study that has been conducted by Kaye and others, in which they have found alterations in the serotonin system in individuals, always in the anorexia universe.

That means the serotonin system we all know is our happiness, neurotransmitter; it gives us a sense of happiness, contentment and it tells us that everything is fine. So, the serotonin level is altered in people who are experiencing AN or Anorexia Nervosa. And then the same research

group also finds that people with AN; or generally experience this release of dopamine in the dorsal striatum, which triggers anxiety rather than pleasure.

In one of my previous lectures, I talked about how dopamine, the (pleas) brain chemical in fact, gives us a sense of pleasure. How dopamine pathways are very closely aligned is always the reward mechanism of the brain. How dopamine is released in the vta, whenever we experience something pleasant rewarding. But, this particular research group has found that in people with anorexia; the release in the dorsal striatum triggers anxiety instead of pleasure.

That is very shocking; because dopamine generally triggers or releases pleasure experiencing behaviours. But, the release of dopamine in this particular part of the brain does not give pleasure; in this case it gives anxiety. And that is serious, and that is why it is important; that we also take a look at the neural networks and neural circuits of eating are associated with eating disorder; so that is on the basis of their findings Kaye and his colleagues have hypothesized that starvation actually makes people with anorexia feel better, by decreasing the serotonin in their brains, these anorexic people make themselves feel better; because there is a behaviour change, there is a personality change; everything has been altered, everything has been changed. So, as the anorexics continue to starve themselves, the brain responds by increasing the number of serotonin receptors to more efficiently utilize the remaining serotonin. So, in order to keep feeling better, an anorexic needs to starve himself or herself further.

So, thereby creating a vicious cycle of that illness; so, that is why it is very very important that we understand. When it comes to Bulimia Nervosa, it also leads to serious illnesses including gastrointestinal problems, electrolyte imbalances, and cardiovascular diseases as well. Anorexia on the other end can cause muscle wasting, hardened brain damage, and a variety of other problems. So, a person with Anorexia after starving a body for a long long time begins to eat again.

The person experiences anxiety and emotional chaos, thus making recovery extremely difficult. This happens because the anorexic has or the anorexics behaviours eating behaviours has led to some serious alterations in the brain. Because of this it is not responding to pleasure activities; so

taste activities. Now, that is why it is very important that we also understand the neural mechanisms of eating disorders.

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The top slide is titled "Positive Body Image" and lists the following points:

- The body positivity movement
- challenges how society views the body
- promotes the acceptance of all bodies
- helps people build confidence and acceptance of their own bodies
- addresses unrealistic body standards

(thebodypositive.org)

The bottom slide is also titled "Positive Body Image" and features a cartoon illustration of four fruit characters: a green apple, a yellow banana, a red apple, and a green pineapple. A speech bubble from the green apple says "We've all got sweet bodies!". The text on the slide is partially obscured by the characters but includes the same bullet points as the top slide. The source is cited as (thebodypositive.org) and the image source as Kids Health.

So, that brings us to the positive side of this particular thing that is eating disorder. It all began with a negative body image, which led to body dissatisfaction; and then eating disorder and a few other things will all on its way. The only way to overcome this vicious cycle, this problem is to create a positive body image; the sooner the better. If a positive body image is created at an

early age, it is going to help us a lot. But, there are other ways through which we can also create a positive body image; so that we do not fall into the traps of eating disorders.

So, the body positivity movement, it is a very popular movement. Now, beginning sometime in the late sixties has established itself as a very important movement that helps us with positive body images. So, one needs to challenge how society views the body; it is not the society that has given you the body, you need to realize. Your body is given to you because of certain biological processes, not because of society; society comes next afterwards. So, your body is your possession, so you are the owner of your body. You need to accept the fact, and you need to challenge yourself if society begins to interfere with your body; so that is one.

And then now this positivity movement also promotes the acceptance of all bodies; all bodies are equally important. There is no one particular type of body that is the predominant body type; that is the best body type, that is the canonical body type. There is no such thing, all bodies are equally important; and it is important that we all accept all body types. And then it also helps people build confidence and acceptance of their own body; because it is all about developing the confidence in your body. My body is good, I want to remain fit, I want to keep fit; so I can go for exercise, I can go for a healthy diet that is fine.


But, the moment you begin to hate your body; you begin to treat your body as your enemy; then that will lead to some serious alterations. So, therefore it is very important that I must start with an acceptance of my body; yes, this body belongs to me. Now, it is my responsibility to keep this body fit and hearty hail and strong. So, I do not have to do any alterations to this body to make fit or keep it fit; I can keep it fit in this particular shape and size only.

So, and then unrealistic body standards need to be decoded; there are certain unrealistic body standards that are doing the rounds around us. We need to be very very aware or cautious of those standards; they are unrealistic. I must know that even though I achieve those standards, I will have to do so with a lot of expenses. So, at a great expense I have to, maybe compromise with the quality of my life. The quality of my body type and then achieve those standards; so that is again very very unrealistic.

So, these are some of the suggestions that come to us from the body positive movement. So, where this particular image I can I can tell you that we have got sweat bodies; we all have sweat bodies. All we need to do is to accept these body types; so that we do not begin to hate our bodies. We do not develop negative body images, and then we do not develop body dissatisfaction; and then we do not fall into the trap of eating disorders.


But, then we need to rethink something that is very important; that is numeric desire. It all lies in the desire, the desire to exceed, the desire to be recognized, the desire to be liked and appreciated. So, the mimetic desire is one of the biggest reasons or the biggest causes of this particular problem. If we can overcome the mimetic desire, if we can manage the mimetic desire properly, it will not convert our bodies into a possessed body; thereby, saving this body from disaster.

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So with that, we come to the end of this lecture. I hope I have been able to explain eating disorders from the perspective of body dissatisfaction; body images including negative body images, mimetic desire, possessed body and a variety of other things. And with that in mind when I meet you next, where is the next lecture; I will be taking you to the diet by Ann Duffy. So, thank you for joining me.