Jan-2015

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Facts behind the Façade: Is There More to Dieting Than Meets the Eye?

By Huda Iqbal Ahmed Qazi

Abstract

This paper extends a previous qualitative research on female yo-yo dieters/weight cyclers in the UK. Out of nine participants in the previous study, this investigation has made use of feminist perspectives to further analyze the data of four participants that was previously derived via thematic analysis. Feminist analysis revealed that initiation of frequent dieting episodes is not merely to lose weight; rather complex control and identity issues as well as negative emotions play a role in triggering yo-yo dieting in some women. Furthermore, the similarity of these manifestations to eating disorders is discussed.

Key Words: Feminist Perspectives, Yo-Yo Dieting, Disordered Eating Behaviors, Control and Identity Issues, Power Struggle, Qualitative Methodology

Introduction

“[I] wish that compulsive eating, bingeing, dieting, throwing up, and starving were oddities rather than the routine experiences of so many years and women today” (Orbach: 1997: vii). Almost two decades on, Orbach’s wish has yet to become a reality.

The incidence of eating disorders and disordered eating behaviors in Western as well as Non-Western countries has been increasing in recent years (Makino et al., 2004). Furthermore, there has also been an increase of eating disorders not otherwise specified (EDNOS) (Machado et al., 2006). This increase has been attributed to various factors, including social, cultural, familial (Polivy & Herman, 2002, Stice, 1998), individual and personality factors (Polivy & Herman, 2002). It has been well documented that disordered eating behaviors are widespread (Machado et al., 2006) and may lead to the development of full-blown eating disorders (Polivy & Herman, 2002).

This paper is going to concentrate on a specific category of disordered eating behaviors—yo-yo dieting/weight cycling. Yo-yo dieting has been defined as the process of going on and off diets repeatedly which subsequently causes weight loss and regain (Brownell & Rodin, 1994; Muls et al., 1995; National Task Force on the Prevention and Treatment of Obesity, 1994; Qazi & Keval, 2013). To date, the prevalence of yo-yo dieting has not been established due to the use of different criteria to assess weight cycling by different studies (Kensinger et al., 1998; Lahti-Koski et al., 2005). However, there is evidence to support that it is a very common and widespread phenomenon (Qazi & Keval, 2013). The aim of this paper is to highlight the more

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obscure aspects of this behavior, rather than the salient and much discussed ones such as social, cultural, familial and media influences (Polivy & Herman, 2002, Stice, 1998) and to analyze the factors responsible for the development and maintenance of this behavior. Qazi and Keval (2013) have discussed in-depth other influencing factors that trigger frequent dieting episodes among women such as socio-cultural pressure and the physical and mental impact of yo-yo dieting on women. This paper builds on and incorporates the previous analysis (Qazi and Keval, 2013) and in addition, utilizes feminist perspectives to further highlight and elaborate on the less apparent factors which have been briefly discussed by Qazi and Keval (2013) that lead to the development and maintenance of this behavior.

**Prevalence of Disordered Eating Behaviors**

Research has revealed that 35%-60% of women are chronic dieters (Polivy & Herman, 2007). Furthermore, dieters are eight times more at risk of developing eating disorders that non-dieters (Patton, 1990). Various longitudinal studies indicate that a percentage of normal dieters may evolve into pathological dieters and there is a possibility of some of them developing partial or full-blown eating disorders (Polivy & Herman, 2002; Shisslak et al. 1995). Evidence also suggests that concern regarding weight and frequent dieting episodes may help in predicting development of an eating disorder (e.g. Polivy & Herman, 2002; Shisslak et al., 1995; Stice et al. 1998). Furthermore, as there is also evidence to support the theory that dieters evolve into eating-disordered individuals (Shisslak et al, 1995), it is important to identify the factors responsible for triggering yo-yo dieting in women and strategies to help prevent women from developing full-blown eating disorders. To be noted, however, is that all normal dieters are not prone to developing full-blown eating disorders (Polivy & Herman, 2002).

**Methodology**

A qualitative study was carried out on nine participants who revealed that they were engaged in yo-yo dieting. The findings of this study derived via thematic analysis are documented elsewhere (Qazi & Keval, 2013). Semi-structured interviews were carried out to explore the experiences of these women and from these interview transcripts, this paper is going to concentrate on four interviewees’ transcripts and utilize feminist perspectives to further analyze the thematically-derived data. For detailed methodology, please refer to Qazi & Keval (2013). To be noted is that the experiences of these four participants do not necessarily represent the experiences of the rest of the five participants, or of all other women who engage in yo-yo dieting. However, the rationale for analyzing these four interviewees’ transcripts is that they provided additional perceived causes and influences that triggered their dieting behavior, which in turn may facilitate in understanding many women who adopt yo-yo dieting.
Table 1: Demographic Information of Participants

<table>
<thead>
<tr>
<th>Age</th>
<th>Name</th>
<th>Location</th>
<th>Occupation</th>
<th>Marital Status</th>
<th>Duration of Stay in UK</th>
<th>Course (at time of study)</th>
<th>Duration of Yo-Yo Dieting</th>
<th>Ethnicity</th>
</tr>
</thead>
<tbody>
<tr>
<td>29</td>
<td>Jenny</td>
<td>Berkshire</td>
<td>Nurse</td>
<td>Single</td>
<td>Since birth</td>
<td>MSc Clinical Nutrition</td>
<td>2 years</td>
<td>English</td>
</tr>
<tr>
<td>20</td>
<td>Sally</td>
<td>North London</td>
<td>Student</td>
<td>Single</td>
<td>15 years</td>
<td>Biomedical Science (1st year)</td>
<td>3 years</td>
<td>African</td>
</tr>
<tr>
<td>21</td>
<td>Sue</td>
<td>North-West London</td>
<td>Student</td>
<td>Single</td>
<td>5 years</td>
<td>Health Studies (1st year)</td>
<td>6 years</td>
<td>Somali</td>
</tr>
<tr>
<td>22</td>
<td>Veronica</td>
<td>Ealing</td>
<td>Student</td>
<td>Single</td>
<td>5 years</td>
<td>MSc Clinical Nutrition</td>
<td>8 years</td>
<td>Greek</td>
</tr>
</tbody>
</table>

(Adapted from Qazi & Keval, 2013)

**Feminist Perspectives**

Feminism, according to Peplau & Conrad (1989), is an ideology as well as a movement. To quote Peplau & Conrad (1989), “Feminism is both an ideology—a set of beliefs and values about women and gender relations and a social-political movement for social change.” (1989:381).

**Feminist Multiple Methods**

*Interviews*

According to Reinhart (1992), historically feminists have used interviews for the purposes of social reform.

*Content Analysis*

Contemporary feminists also perform secondary data analysis (in this case, primary data which was analyzed via thematic analysis has further been analyzed using feminist perspectives) in order to address impending conditions pertinent to women (Reinhart, 1992). Individuals who
perform content analysis observe events or situations analytically by construing and interpreting themes contained in them (Reinharz, 1992).

Thus, feminist content analysis studies texts in existence as well as those that are not which can then be linked by a feminist with the current social situation (Reinharz, 1992).

**Case Studies**

In a case study, research is centered on a single issue/event (Reinharz, 1992). Feminist case studies usually consist of detailed description of a single issue/person/community/phenomenon (Reinhraz. 1992). “Some feminist researchers have found that social science’s emphasis on generalizations has obscured phenomena important to particular groups, including women. Thus case studies are essential for putting women on the map of social life. The power of the case study to convey vividly the dimension of a social phenomenon or individual life is power that feminist researchers want to utilize.” (Reinharz, 1992:174).

To be noted is that feminist research utilizes multiple research methods in a particular project (Reinharz, 1992). Feminists adopt multiple research methods in order to gain a thorough understanding of crucial issues in women’s lives (Reinharz, 1992). In this particular research, qualitative semi-structured interviews that have been analyzed via thematic analysis, feminist content analysis of these initially thematically-analyzed interviews and case studies of certain participants have been used. The use of multiple research methods in a single study is known as “triangulation” (Reinharz, 1992). Using a combination of multiple research methods enables the feminists to examine and explore previously misunderstood or unexamined experiences.

**Results and Discussion**

**Dieting to Cope with Anxiety and/or Negative Emotions**

Analysis of this theme reveals that some women engage in frequent dieting episodes as a coping strategy to deal with negative emotions and anxiety (Qazi & Keval, 2013). For them, dieting or breaking their current diets is a way of managing and releasing these complex emotions.

I was very stressed with my studies and I was doing a lot of things, and family problems as well so food wasn’t the one thing that was on my mind…when I do get into a bad mood, I go back onto those diets. (Sue)

It was just more stress, with college and stuff…I’d get really hungry and so I would just go into the cupboard and have…chocolate…I’ve just got so much on my plate…and I comfort eat during that and stuff like that, there’s a lot of stuff going on… (Jenny)

While Jenny on the one hand experienced an increase in appetite due to anxiety, Sue, on the other, claimed that anxiety resulted in loss of her appetite.

Previous research has highlighted that environmental stresses contribute to the development of eating disorders. Godart et al. (2003); Pallister & Waller (2008) and Polivy & Herman (2002) conclude that eating-disordered women manifest higher rates of anxiety disorders. While some researchers argue that anxiety occurs in succession to eating disorders
(See Pallister & Waller (2008) for review), others contend (See Swinbourne & Touyz (2007) for review) that increased levels of anxiety may contribute to the development of eating disorders in some women. The findings of this study concur with the latter that an anxiety disorder is frequently present prior to the development of an eating disorder.

*Is Dieting A Cause or Consequence of Negative Emotions?*

So whenever I am upset, I just stop all eating and it happens to me all the time, I cannot help it. I am not doing it on purpose…I don’t know why I do it but I always do it and I don’t think I can control it. I am just upset, and I don’t want to eat. I think it is a kind of eating disordered behavior, to be honest. But I am not sure which eating disorder it is…it could be anorectic behavior. My mother said I do have to stop doing that. She knows that whenever I am upset, I never eat. So she said, ‘I am really scared that there is going to be one point where you are just going to cross the line’ because things have been very close many times to cross the line and I do believe that and she’s just afraid that there will be one time where I will get a little bit more upset and I am just going to cross the line. I don’t know whether it’s going to happen or not, but I really hope it won’t. Because we all know the consequences of that. They’re horrible. (Veronica)

It should be taken into account that though Veronica admits that she manifests anorectic behavior, yet she goes on to explain that she does not have a full-blown eating disorder. While some of her symptoms appear to tally with that of Anorexia Nervosa, her self-reported symptoms do not appear to meet all the eligibility criteria for Anorexia Nervosa (DSM-V). This further highlights the importance of curbing disordered eating behaviours such as yo-yo dieting before they evolve into full-blown eating disorders in some women.

I know I get depressed. And I get mood swings. It’s either because of my dieting, I don’t really know…I don’t know what it is, I’ve never ever found it out. I don’t know if I am suffering from depression because I am not eating properly. (Jenny)

Although it has been documented that depression is co-morbid with eating disorders, (Lewinsohn et al., 2000; Santos et al., 2007; Zaider et al., 2000), there is an inconsistency among researchers regarding depression being the cause or the consequence of an eating disorder. While some propose that depression precedes an eating disorder (e.g. Levy & Dixon, 1985), others (e.g. Godart et al., 2000) postulate that dieting and eating-disordered symptoms predict the onset of depression. Fox and Power (2009) conclude in their review that depression may be a cause as well as a consequence of an eating disorder.

This study findings are compatible with the theory that the concurrent incidence of eating disorders and mood fluctuations may be the cause of an eating disorder and/or a consequence of it (Fox & Power, 2009; Polivy & Herman, 2002; Qazi & Keval, 2013). Espeset et al. (2012) findings revealed that eating-disordered individuals develop these disorders partly to regulate their emotions. For them, eating disorders lend voice to their otherwise suppressed emotions and feelings of anger, resentment and sadness. Espeset et al. (2012) provided a detailed account of their study findings regarding how participants in their study expressed difficulty in regulating and managing their emotions which in turn partly led to the development of eating disorders.
While for some, eating disorders were a coping strategy, others developed them as a way of disassociating themselves from complex emotions. Furthermore, while certain individuals used them to subdue and suppress their emotions, on the other hand, eating disorders were a way of releasing their emotions for certain others (Espeset et al., 2012).

Reasons as to why I diet, I think, it’s not just…because I think I am fat. I think, sometimes as well there are other factors that cause me to diet. For example, I don’t see, I don’t have contact with my family but I see my mum, I sometimes do want to see her because she works in the same place where I work but at different sides. And you know, she is quite stick-thin and quite pretty. And when I get stressed from college work, I think, ‘Oh, I am going to go on a diet.’ I think it’s important to highlight…that there are other factors that psychologically cause me to go on a binge and then suddenly just stop or go on a diet. I am not that close to my family, you know. That’s another reason why I go on diets. I try to get my mind off it… (Jenny)

Jenny poignantly articulated how detachment from her family may have been a contributing factor in precipitating dieting episodes. Although Jenny did not elaborate regarding the duration of her yo-yo dieting, it is clear that despite living independently, her disassociation and lack of communication with her family still affects her and triggers her to go on diets and this could perhaps be a form of coping strategy.

Previous research (e.g. Byely et al. 2000.; Leon et al., 1994) has highlighted that familial conflict, dysfunction and negative family relations and atmosphere during adolescence is a contributing factor to the development of disordered eating in some young females.

**Dieting to Assert One’s Identity: “This is Who I Am”/Dieting to Make a Statement**

*Making A Statement—This is Now Who I Am*

Veronica elucidated how her father always cautioned her about her weight. This in turn appeared to have incited her to be on stringent diets.

My father…when I (would see him), the first thing that he will say…‘You lost weight’ or ‘You put on weight’ that has been always. Constantly. Whenever I’d see him, it would be that. And ‘Look after your diet; you don’t want to be…’ So I think it’s from my childhood years…My dad now is concerned that I am just restricting myself too much. Maybe he feels responsible, but he doesn’t admit it. Maybe he feels responsible for what I am now, and how careful I am now, because I wasn’t like that in the past. (Veronica)

Veronica’s statement reveals an underlying tone of resentment directed against her father. It appears that despite being aware that her father is concerned about her frequent dieting episodes, she still engages in this behavior as she may perceive this as a form of asserting her identity to him—it may be that she is unconsciously trying to convey to him that “This is what you made me and so this is who I am.” It almost appears as if she is trying to “punish” her father by self-directed hostility, as she may perceive that her dieting episodes bothers her father and makes him feel guilty.
This finding that paternal comments and influence mediates daughters’ dissatisfaction with body weight and predicts their dieting behavior is consistent with previous studies. E.g., Dixon et al. (2003) found that fathers played a role in influencing their adolescent daughters to engage in dieting behaviors. Similarly, Keel et al. (1997), Rodgers and Chabrol (2009), and Wertheim (2002) concluded from their study that parental weight concerns may contribute to the development of disordered eating patterns among daughters. Maine (1991, 2004, 2013) has emphasized how fathers play a crucial role in influencing daughters regarding their weight and body. Furthermore, several studies (see Rodgers et al., 2009, for review) indicate that paternal comments and attitudes play a role in influencing adolescent daughters to initiate dieting.

**Dieting to Rebel against Parental Authority**

Veronica elaborated how during her childhood years, she was restricted from certain foods by her parents, as her father had diabetes. Her statement reflects her frustration due to this restriction:

(My dad) had to follow a certain diabetic, nutrition plan. So we were following it with him, whether we liked it or not. Because my mom couldn’t cook like 10 different meals. (Veronica)

She further alluded to her current dealing with her parents regarding food whenever she visits them:

…My mom will be cooking ‘Have that, it’s good for you’ and I am like, ‘No, I don’t want it!’ Or she cooks at night as well which I hate. And I am like, ‘I am not eating that’ and she’s like, ‘But I cooked it’ and I say, ‘But I told you not to cook it!’ (Veronica) (Qazi & Keval, 2013)

Veronica’s statement reveals pent-up anger and resentment, albeit an unconscious one directed at her mother, perhaps due to being restricted in childhood from the foods that she enjoyed. This rejection of food prepared by her mom could either be a rejection of the mother and/or a form of rebellion against the mother. According to Bordo (1993), women convey their love and affection through the process of preparation and serving of food. Furthermore, Orbach (1993) postulates that acceptance of food prepared by a woman conveys the family’s appreciation to her and this in turn boosts a woman’s self-esteem. Pipher (1995) elucidated how the manipulation of food, specifically restricting food intake can be used to convey rejection of the person who prepared it. Haworth-Hoeppner (2000), Schwitzer et al. (2001), and Tata et al. (2001) further contend that this act of restricting dietary intake is practiced by children to rebel and protest against parental authority and to obtain some power due to perceived lack of power or control in other aspects of their lives.

**Dieting and Control Issues**

*To Establish Control over Others*

The above quote by Veronica further indicates that she may also have been trying to assert her identity and establish control over her environment which she was not able to achieve in her childhood and this too may be an unconscious reaction to her childhood experiences. This
argument is evidenced by other researchers (e.g. Bruch, 1978; Chernin, 1985; Counihan, 1998; Franks, 1986; Lawrence, 1979; Lupton, 1996; Pipher, 1995; Szekely, 1989) who argue that the act of restricting dietary intake may be perceived by these individuals as establishing control over their lives and make up for lack of control in other aspects of their lives.

Furthermore Sue’s quote may also be construed as an attempt to establish control over her body and on others by proving to them that she is entirely capable of controlling herself:

I get annoyed with somebody for saying something to me which is a negative thing and automatically, I will think, ‘I am going to show that person’ and I would not even think twice about it. I’ll be like, ok, stop eating food for a little while.

(Sue)

According to Cooks (2009), food resistance has been used throughout history by marginalized segments of society as a form of protest and rebellion and to exercise power. Furthermore, Cooks (2009) argues that this resistance to and through food occurred in situations where women have been objectified and consequently food was used to resist against the dominant forces in their lives.

Establish Control over One’s Own Self Due to Perceived Lack of Control

Frequent episodes of dieting also appear to indicate the individuals’ struggle to obtain control and power not only on others but also on their own selves partly due to a fear of loss of control (Bruch, 1982) and partly as a search for identity (Mujtaba & Furnham, 2001). This control paradox is startlingly similar to control issues manifested by individuals with Anorexia Nervosa (Bruch 1973; Fairburn, 1999; Lawrence, 1979; Tiffany & Tiffany, 1996) and hence begets the question of whether individuals with disordered eating behaviors, including yo-yo dieting are more susceptible to developing full-blown eating disorders subsequently. Polivy & Herman (2007) argue that chronic dieters and eating-disordered individuals share and manifest many similar characteristics. This further raises the question whether yo-yo dieting falls within the category of Eating Disorders Not Otherwise Specified (EDNOS).

I do feel quite restricted and a lot of times I go to bed hungry, but I just say, ‘No, no, no, you’re not going to have anything because you cannot have anything.’

(Veronica)

Cooks (2009) has shed light on this aspect:

Ultimately, technologies of the body, such as the practices of counting calories, lying about food consumption, constant monitoring of intake, and even the nurturance of others while starving one’s own body, become performances that connect food with (lack of a) body. This performance becomes the literal proof of the discourse: you are what you (don’t) eat. (Cooks, 2009:103)

It is proposed that women with eating disorders perceive control by restricting their intake of food and that this restriction could perhaps be a protest against the ideals of femininity (Carey, 2009). However, based on the data from this study, it appears that women with disordered eating behaviors could also be restricting food intake as way of coping with their
stresses and also as an expression, albeit an unconscious one of their identity “This is who I am” (Qazi & Keval, 2013) while there are some who may use it as form of rebellion silently affirming that this restricting food aspect is controlled only by them and that others cannot control this aspect of their lives (Lawrence, 1979). This is consistent with previous research (e.g. Carey, 2009) who argues that women with eating disorders consider the act of dieting as a source of power and an assertion of their identity. Hence, perceived lack of control in one’s life may predict eating-disordered behaviors in some individuals (Ahmad et al, 1994; Slade, 1982; Wagner et al, 1987).

Unfortunately, although women with disordered eating behaviors perceive this as a form of control—it is only when they lose control that they adopt this behavior because ultimately this behavior starts controlling them. Bruch (1982) has emphasized this with reference to Anorexia Nervosa that though it was the attempt of these individuals to obtain control, eventually the eating disorder starts controlling them.

From the present study, this is evident from Veronica’s statement:

I wish I wasn’t like that. I wish I wouldn’t have to think about what I eat all the time and I wouldn’t have to calculate the calories, and just stop and just enjoy food, I wish it was like that but I don’t think it’s ever going to happen, to be honest. I just hope that I won’t go further than this point. But I really, really wish it wasn’t like that. I don’t really enjoy restricted eating…I am not doing it on purpose (not eating)...I don’t know why I do it but I always do it and I don’t think I can control it…It’s just that I don’t really enjoy the food that much because food is supposed to be enjoyed, but I don’t really enjoy it. I just think “How many calories?” I even go on Google, if sometimes I don’t know something and I have eaten something which I don’t know; when I will go home, I would just go to Google and say, “How many calories is that?” I’ll do that as well. So that’s quite a lot. I am always thinking about food, what I am going to eat…I don’t think I’ll ever stop restricting myself. (Veronica)

_Dieting to “Fit in”/Be “Accepted”_

One of the reasons that I diet is because maybe…I don’t speak to my mum and that can be the cause of why I go on different diets…is it because I am too fat that she doesn’t talk to me? Or I am not right in her league? Or I am not like my brother’s wife? Does she get on very well with just who’s stunning and good figures? I throw myself into the diet, try and lose weight and think that if I change, then maybe she’d like to see me a bit more. (Jenny)

Although Jenny is independent, her mom’s detachment still affects her and triggers her to engage in frequent dieting episodes in the hope that this may perhaps aid her in earning approval from her mother. Negative involvement by mothers in family may perhaps be a risk factor for daughters developing body-image issues and problems (Benninghoven et al, 2007). Strained family relations and atmosphere may in certain cases be a significant predictor of weight and dieting concerns among daughters (Benninghoven et al, 2007).
...I was getting criticized all the time about my weight plus my dad is diabetic so he was always scared that we would get diabetes as well so he was quite judgmental on our body weight so it has kind of grown into me for a very long time to be like that. (Veronica)

Veronica’s perspective regarding her father’s judgmental attitude is consistent with previous studies. It has been documented previously (Humprey, 1989) that fathers of eating-disordered individuals have demonstrated greater negative communication with their daughters than controls. Previous research (e.g. Noller & Fitzpatrick, 1993) has also highlighted that adolescent girls perceive their fathers to be more judgmental, authoritative and less understanding than mothers. What is interesting to note is that though Veronica resented her father’s judgmental attitude regarding her weight, she conformed to his standards and then gradually started restricting herself and practicing restrained eating by precipitating frequent dieting episodes to the extent that her father began to get concerned regarding her excessively restricted caloric intake. Perhaps this may have been yet another unconscious attempt by Veronica to be accepted by her father and earn his approval.

Trapped Within A Cycle?

Mentally, it would affect you, you go into an emotional state of course. You have low self-esteem, you get stressed, you become depressed because you are so fixated on that one thing (losing weight) and that one thing, if it doesn’t happen, you seclude yourself maybe from society. You end up sitting at home and...maybe because the diet didn’t work, overeat and do the exact opposite as it didn’t work and when you do start gaining weight even more, you end up in a situation where you cannot get out of. So you are socially deprived of other people as well. (Sue)

It’s sort of obsession. I just don’t want to put on weight and it’s constantly on my mind. Like I will plan the day around what I am going to eat. I am like, “I am going to have this now, that means I cannot have that later...I get off dieting on week-ends, but then I feel guilty and it’s horrible. I always do that. (Veronica)

(Qazi & Keval, 2013)

Sue and Veronica have poignantly articulated that they are trapped within a vicious cycle of yo-yo dieting (Qazi & Keval, 2013) to the extent that being fixated on achieving a certain type of body size and shape has become their constant source of worry and concern. Veronica and Sue admitted that losing weight was an obsession that overwhelmed them daily and failure to achieve the desired weight resulted in stress and depression as well as negative emotions. From a feminist perspective, the argument is that—“The stigmatization of fatness and the glorification of thinness constitute forms of sexism and misogyny (Brown, 1989) and are methods of controlling women” (Gilbert & Thompson, 1996:185). This “stigmatization of fatness and glorification of thinness” (Gilbert & Thompson, 1996:185) by society appears to have resulted in some participants in this study resorting to desperate measures in order to “fit in/be ‘accepted’” by society.
Conclusion

This paper reinforces the earlier paper (Qazi & Keval, 2013) that there is more to dieting than meets the eye. Dieting appears to be merely a smokescreen, a façade to conceal complex emotions and feelings underneath. Dieting is a tool used to convey a message. Dieting is a vehicle that is used to manifest these unexpressed emotions. Dieting is a form of rebellion against authority. Dieting is a weapon for establishing control over one’s social environment. Dieting is the voice of the voiceless.

In reality, what happens is that when dieting becomes chronic, these individuals lose control (Chernin, 1981; Haworth-Hoeppner, 2000; Orbach, 1993) and the vicious cycle of yo-yo dieting controls and dictates their lives, making them feel even more trapped. Yo-yo dieting and other disordered eating behaviors appear to stem from multifactorial elements, i.e. they appear to be a symptom/result of certain factors and if these factors are not addressed, the symptom (yo-yo dieting) may prevail and perhaps transcend into a more serious disorder. Yo-yo dieters appear to share many characteristics with individuals with Anorexia Nervosa (Qazi & Keval, 2013), and hence this merits further research on whether individuals with disordered eating behaviors including yo-yo dieting go on to develop full-blown eating disorders subsequently. Based on the data from this study, it can be concluded that yo-yo dieting and other disordered eating behaviors are much more than simply the desire to lose weight. It is a plea for help. Food, or rather lack of it, is used to make a statement.

“Food is the medium through which women are addressed; in turn food has become the language of their response” (Orbach, 1993:3). More than two decades later, Orbach’s statement still remains a fact—still remains a reality.
References


