

Representing Young Men's Experience of Anorexia Nervosa: A French-Language Case Study

Katie Jones, University of St Andrews

Abstract

This article analyses two young adult (YA) novels about young men's experience of anorexia nervosa (AN), within the dual contexts of medical humanities research into literary depictions of illness, and the broader field of young adult literature about AN. While emphasising the importance of diverse literary narratives in order to raise awareness of the prevalence of AN in men and boys, and to contribute to the reduction of stigma, it also considers current research into the potentially harmful triggering effects of AN literature on vulnerable readers. It identifies Anne Percin's *Point de côté* (Side Stitch) (2006) and Simon Boulerice's *Jeanne Moreau a le sourire à l'envers* (Jeanne Moreau Has An Upside-Down Smile) (2013) as examples of good practice in AN literature, not just due to their thematic focus on male experience, but also because they employ narrative strategies that disrupt reader identification with the anorexic character, and avoid focusing directly on potentially triggering descriptions of anorexic ideas and behaviour. They also contribute to diversifying the portrayal of AN via non-judgmental portrayal of LGBT themes, a topic absent from equivalent YA novels currently available in English.

The article further argues that literature – including fiction – contributes to the overall social and cultural discourse surrounding specific illnesses and is likely to affect patients' real-world experiences, but that it is a specific kind of discourse in its own right, which demands to be read with the appropriate tools. Its detailed analysis of narrative voice alongside thematic content demonstrates how specific approaches from the field of literary studies may complement empirical research into literature and its place within mental health discourse.

1. Introduction

This article sets out to contribute to two areas of medical humanities research which have attracted increasing interest in recent years: the prevalence of eating disorders – in particular anorexia nervosa (AN) – in male subjects, and the role of literature and literary analysis within mental health discourse. In both clinical and cultural contexts, the prevalence of AN and other eating disorders (EDs) among boys and men is under-represented. First-person testimonial accounts in the press and in published memoirs, as well as fictional representations of male ED sufferers are an increasingly popular way to raise levels of public awareness of the phenomenon, and to reduce associated stigma. However, in the specific case of AN, such representations of the condition are particularly sensitive, due to the risk of testimonial and fictional depictions triggering harmful thoughts and behaviours in vulnerable readers. The analysis of fictional case-

studies in this article will show how a nuanced approach to genre and narrative can help identify examples of good practice in ED texts, which may contribute to goals of awareness-raising and reduction of stigma while avoiding, as far as possible, the inclusion of triggering material.

Public awareness and media coverage of eating disorders in men and boys in Western countries has increased in recent years. This is due in part to the advocacy work of charities such as Men Get Eating Disorders Too and BEAT in the UK context, and the National Eating Disorders Association in the US. Anorexia and Bulimia Quebec (ANEB) currently features imagery with equal space given to males and females on its website, as well as testimonials from male ambassadors alongside accounts from women and girls.¹ A brief survey of mainstream press websites in French and English reveals a range of media outlets in the last few years publishing awareness-raising articles about the prevalence of male EDs.² Although such articles are now easily available and their publication in mainstream outlets shows that the issue *is* addressed in the public sphere, all of the examples cited here begin by emphasising the surprising nature of their message; their goal is thus to give male ED experience a mainstream status it does not currently have.³ In the literary sphere, compared to the high volume of autobiographical and fictional accounts of female AN and other EDs since the 1970s, a handful of male-focused ED memoirs and fictions in both English and French can be identified since the early 2000s.⁴ Overall, then, an increase in the visibility of male ED sufferers can be observed. However, the subject is still under-studied in both clinical and cultural contexts.

In this article, I shall be referring to young adult (YA) fiction and memoir published in English, but the main focus of my analysis is on two case-study texts published in French in France and Canada: Anne Percin's *Point de côté* ('Side stitch', 2006) and Simon Boulerice's *Jeanne Moreau a le sourire à l'envers* ('Jeanne Moreau has an upside-down smile', 2013). These texts have been selected because they provide potentially fruitful examples of literary strategies that could be developed further. There are relatively few male-focused ED fictions available in any

language, but I compare these French ones to equivalent texts written in English and argue that my case-study texts are particularly successful in highlighting the issues involved without focusing in detail on potentially harmful thought patterns and practices. Some of these features are likely to be of benefit to publishers of YA fiction and educators both in the English-speaking world and internationally. The cultural landscape is comparable as my primary texts form part of a cultural landscape in which key British and American texts are also available in translation; in France and Canada, too, comparable problems exist with respect to awareness of EDs and their prevalence in males. Finally, focusing on French-language examples within a comparative framework allows me to avoid an Anglo-centric approach in a context where research in medical humanities is likely to be published in English and thus to draw on Anglophone examples, but examples of good practice in other languages deserve recognition.

Following a brief review of current clinical research on AN in males,⁵ my first section will consider the role of literature within mental health discourse, drawing on recent debates about the use of ‘narrative’ in the medical humanities, as well as more specific studies of literary representations of eating disorders. I shall then go on to give an account of the existing field of literary representations of both female and male experiences of eating disorders, with a particular focus on the popular genres of memoir and young adult (YA) fiction, ending with an in-depth analysis of two case-study fictional texts, originally published in French. The goals of this discussion are twofold: firstly, analysis of my case studies in terms of their genre and narration will demonstrate how methodologies more conventionally used in literary studies contribute usefully to the narrative debate in medical humanities. Secondly, and more importantly, by bringing together the findings of clinical research into AN and detailed analysis of its literary representation, I seek to explore how literary texts featuring AN in males might helpfully contribute to clinical and public understandings of eating disorders both in men and boys, and more generally. This contribution has the potential to influence mainstream healthcare practice,

Author Accepted Manuscript: Please do not cite. This article has been accepted for publication in *Medical Humanities*, 2020, following peer review, and the Version of Record can be accessed online at <http://dx.doi.org/10.1136/medhum-2020-011847> © BMJ Publishing Group Ltd ultimately leading to more effective and sensitive treatment of ED patients whose experiences do not conform to existing diagnostic and social norms.

Given the literary-analytical framework for this discussion, and the overall argument concerning the compatibility of literary-critical and other medical humanities methodologies, this research was carried out without direct patient and public involvement (PPI). However, the research arose from my involvement in the AHRC research network 'Hungry for Words: A cross-disciplinary approach to articulating, communicating and understanding male anorexia', in which patient representatives and members of the public participated.⁶ Findings from the research were presented at a workshop at the University of Nottingham in January 2018, at which patient representatives were present, and their contributions to discussion were helpful in framing the final direction of the argument. In particular, patient representatives stressed the importance of literary and other cultural representations in reducing stigma.

2. Rationale: the place of literature in the Medical Humanities and AN awareness and prevention

Large-scale studies of AN in males are still relatively rare, despite increasing awareness that the condition can affect males as well as females. To date, one expanded special issue of the journal *Eating Disorders*, published in 2012, has focused on male experience; prior to this the journal had published relatively few articles on EDs in males, and its editor noted that fewer than 12 book-length studies had been published on the topic between 1990 and 2012.⁷ Further significant progress was made in the amendment of the descriptor for AN in the DSM-V (2013) when amenorrhea was removed as a necessary symptom for diagnosis: the previous iteration excluded males (and pre-menarchal and post-menopausal females) by definition, perpetuating the notion that AN was a disorder of teenage girls.⁸ New diagnostic tools have also been proposed for men and boys, such as the Eating Disorder Assessment for Men (EDAM), though more work is still required in this area.⁹ More recently, Tom Wooldridge's 2016 book proposes an 'integrative approach tailored to men and boys' in the treatment of male AN, highlighting the differences in

the way the illness manifests itself differently in male than female patients across ‘biological, systemic, cultural psychodynamic and spiritual’ domains, and the need for adequate narratives to reflect male experiences.¹⁰ Indeed, various researchers note that existing assessments have been normed using female subjects and are therefore less likely to reflect male experience, meaning that successful diagnosis is less likely.¹¹ In fact, even where male experience has been included in studies of AN, male perspectives have historically been excluded: Hilde Bruch’s case studies for her now-classic 1978 study *The Golden Cage* included 10 male patients out of a total of 70 (14%).¹² However, these cases were anonymised via the use of composite characters named alphabetically with exclusively female names.

This situation of under-representation is also reflected in the cultural sphere. Medical humanities and other researchers have argued that cultural representations and understandings can affect the way in which both male sufferers and society more broadly understand and talk about disordered eating among males.¹³ A recent qualitative study of male experiences of eating disorders in the UK suggested that young men were less likely to seek help early and had less awareness of eating disorders as conditions which could affect men and boys.¹⁴ Despite increasing clinical and public awareness of EDs (including AN) as conditions which can affect men, it is still unclear what proportion of ED sufferers are male, with estimates ranging from 10% to 25% and above.¹⁵ However, what is clear is that whatever the proportion, it is not reflected in literary representations of EDs, where representations of (mainly white, middle-class) teenage girls predominate, especially in the Anglo-American YA fiction context, and in French-language YA literature, which will form the basis of my case study. The same holds for memoirs: while the female-centred ED recovery memoir is a mainstream staple, far fewer male-authored memoirs exist, and of those that do, about half are self-published.¹⁶ The French-language cultural context more broadly also reflects this trend; for example, in a major study of cultural representations of anorexia from the middle ages to the present, the male author, in spite of his own personal experience of AN, frames his study in terms of his own position as an interloper in

Author Accepted Manuscript: Please do not cite. This article has been accepted for publication in *Medical Humanities*, 2020, following peer review, and the Version of Record can be accessed online at <http://dx.doi.org/10.1136/medhum-2020-011847> © BMJ Publishing Group Ltd
women's territory. In an echo of the pre-2013 diagnostic criteria, Tonnac specifically mentions the criterion of amenorrhea as excluding him from this diagnosis.¹⁷

The role of literature in the medical humanities and in clinical settings is complex and contested. Literary representations of physical disability and physical and mental illness are often considered to be useful as a means of raising awareness of specific conditions and encouraging empathy in both medical students and in the general public more broadly.¹⁸ In the case of EDs, research has shown that greater visibility and a more nuanced understanding of the conditions within mainstream society can lead to earlier diagnosis and reduced stigma.¹⁹ However, scholars in the critical medical humanities have also pointed to a lack of precision in the ways in which the term 'narrative' is used, potentially leading to a conflation of the types of benefits it is assumed to confer. In her 2011 article 'The Limits of Narrative', Angela Woods identifies what she terms 'seven dangers' of narrative, including a frequent lack of attention to genre, and the difficulty of establishing whether narrative accounts of illness are 'accurate', whether fictional or non-fictional.²⁰ Indeed, where fiction is analysed in medical humanities contexts, part of the justification for the selection of primary texts often involves its perceived 'accuracy';²¹ this makes sense in contexts where the primary goal of reading narratives is to establish empathy among clinicians or raise awareness of what it is like to have a particular condition, but seems alien to the field of literary studies, in which accuracy is not necessarily a criterion for a successful literary representation, and where comparison of the literary text to real-world phenomena might be considered naïve. Furthermore, as I shall argue below with reference to my case-study texts, accurate depiction of symptoms may not be the only – or even the most beneficial – means of achieving a realistic and empathetic portrayal of the ED patient's experience.

This is the first context in which I would argue that the interdisciplinary encounter between literary studies and the medical humanities can be mutually productive: traditional literary criticism can benefit from being reminded that real-world readers engage with texts in

ways which are not always purely aesthetic, and may read them variously as sources of information, identification *and* aesthetic experience, sometimes simultaneously; the literary critic should therefore not neglect the concrete, real-world applications of literary texts in favour of literary-aesthetic aspects. Similarly, when seeking practical benefits (in terms of knowledge or therapeutic potential) in published narratives, it is important for medical humanities researchers to be aware of generic differences in the types of narratives that can be produced and the ways in which they may be read: for example, fiction and memoir are likely to share some structural and representational features, but can also function differently in the ways that they are written and read. Literature – and other cultural products such as film and various forms of media, which are beyond the scope of this study – contributes to a broader social discourse surrounding illness but is itself a specific kind of discourse that demands to be read with the appropriate tools.

Indeed, by contrast with non-fictional narratives such as testimonies, which raise different questions, but which invite reading as ‘authentic’ accounts to the extent that they are written from the perspective of personal experience, fictional literature about specific disabilities or medical conditions need not be accurate in order to participate in the broader cultural awareness of and attitudes towards particular groups of people, whether in ways that might be perceived as broadly helpful or harmful. For example, Mark Haddon’s bestselling novel *The Curious Incident of the Dog in the Night-Time* (2003) is often cited as a key text for understanding Asperger’s syndrome and it is plausible that it has contributed to a greater level of public empathy for people with this syndrome. However, Haddon himself has stated that he did not set out to write a novel about Asperger’s, and thus did not seek to make this portrayal ‘accurate’.²² In an article on his publisher’s website, he explicitly distances himself from the novel’s use as a ‘textbook’, calling for it to be treated ‘simply as a novel’, thereby implicitly aligning himself with a literary-studies position that does not consider works of literature primarily in terms of real-world use-value.²³

Indeed, specific types of illness and disability often have culturally-established metaphorical significance, such that their representation serves symbolic purposes rather than setting out to show ‘what it is like’ to experience them. I contend, however, that such representations may nonetheless shape cultural attitudes, in both helpful and unhelpful ways. One such example is cancer, whose metaphorical construction in the Western imagination was famously discussed by Susan Sontag in *Illness as Metaphor* (1979), in which she made a connection between literary and cultural metaphors and their often pernicious effects on cancer patients in the real world.²⁴ Although Sontag’s rejection of metaphorical language in the discussion of *all* illness has been contested, a recent empirical study has corroborated her argument with respect to cancer by demonstrating that the use of military metaphors leads to a fatalistic attitude and reduced likelihood of compliance with treatment.²⁵ It is therefore pertinent to understand how such representations function, and the context(s) in which they do so. In the case of AN, a broader account of the metaphors and ideas that inform our cultural understanding of the condition could include literary depictions of self-starvation as an aesthetic gesture, as well as political and religious traditions, all of which have the potential to feed into patients’ and others’ conception of disordered eating and its social and personal meanings.²⁶

In the specific case of literature representing eating disorders, there is a long Western cultural history of symbolic use of self-starvation in literary fiction.²⁷ However, my focus in this article is on young adult (YA) literature, a specific genre in which both published testimonial (non-fiction) accounts of AN and fictional depictions proliferate. Accuracy of representation potentially has more relevance in this context as the genre has a greater educational role than other types of literature, and is consumed by teenaged and pre-teen readers. However, any criterion of ‘accuracy’ is likely to be variable, both because – especially in the case of fiction – the goal of producing an engaging novel may not necessarily be compatible with the goal of accurate depiction, and because – even in the case of testimonies – some of the most enduringly popular texts are up to forty years old and portray methods of treatment and experiences of

hospitalisation that do not reflect current practice. Thus what is an ‘accurate’ account of one person’s real experience, or at least the way he or she perceived it at the time of writing, may not be an ‘accurate’ account of what it is or would be like to have an ED today.

However, beyond considerations of the accuracy of literary representations – arguably most relevant in the clinical education context – a more significant ‘danger’ raised by Woods is the question of whether ‘narrative coherence [can] be a *harmful* phenomenon, how, and in which context?’²⁸ This danger may be seen as applicable to fictional representations of EDs in two ways: firstly, as noted above, the clinical diagnosis of males with AN and other EDs has been problematic because the existing assessments have been normed for females, and do not necessarily reflect male experience. Similarly, the fictional representation of EDs tends to perpetuate existing stereotypes about the type of person who has an ED (most frequently young, white, female, middle-class), how she behaves, and her motivations for doing so. As Woods’s emphasis on narrative ‘coherence’ implies, the power of a master narrative whether in the form of the elements expected in a diagnostic interview, or in the fictional representations that influence individual and public ideas about what EDs are like and who has them, risks the exclusion and misrecognition of atypical experiences.²⁹ This applies not just to men, whose experiences are underrepresented in literature, but also to any female ED sufferers whose experiences do not fit the prevalent stereotypes. Secondly, and specifically with respect to EDs, recent research by Emily Troscianko and the UK eating disorder charity BEAT suggests that literature about EDs can be harmful in itself: ED sufferers reported an increase in harmful behaviours after reading literature about EDs.³⁰ This large-scale study confirms claims made in a range of ED memoirs about the intertextual nature of the condition: authors of memoirs often report visiting the library or otherwise seeking out books and accounts of EDs in order to find out more about them, but seeing these representations as a source of competition.³¹

In this context, I propose to engage in the next section with some of the questions raised by Troscianko and Woods in a detailed case-study of two young adult novels that represent male experiences of anorexia nervosa.³² While representations of AN and other EDs exist in a wide range of genres, including literary fiction and memoir, I focus here on YA fiction as a key genre in which AN is frequently represented, which is often read in educational contexts, and which has its own clearly identifiable tropes and generic conventions. I aim to apply traditional techniques of literary analysis to explore the ways in which male-focused narratives adhere to or depart from these conventions, and the extent to which *fictional* depictions in particular may serve the purpose of awareness-raising and destigmatisation while avoiding the potentially harmful triggering effects Troscianko identifies. I have selected as my key examples two recent texts originally published in French, in France and Quebec. Beyond the coincidence of my happening to research in the field of French literature, I have selected these texts because, as I shall argue below, they offer narrative strategies which could serve as a model for responsible and sensitive portrayal of EDs. Following a survey of some issues in the field of YA literature about EDs in French and English in the next section, I shall move on to close analysis of my case-study texts with reference to comparable novels in English featuring male protagonists. Via the examination of genre, thematic content, and narrative voice, I shall aim to demonstrate what is special about the novels I analyse, as well as the specific contribution of these literary-critical methods to understanding how ED literature may function differently for different readers.

3. Literary analysis

3.1 Context

Claims made in favour of young adult (YA) literature about AN, often in publisher's marketing material or the books' cover blurb, generally focus either on its role in educating readers and reducing stigma, or its potential for therapeutic benefit, or both. This is particularly pertinent for boys and men, given the relative lack of male-centred narratives. Samuel Pollen, discussing his motivation for writing an autobiographically-inspired YA novel about a boy with AN, explains

understand that I wasn’t alone and may have helped others to understand too’,³³ since the only stories available at the time were about girls. However, although the role of cultural representations such as YA novels in reducing stigma is undoubtedly valuable, and may also encourage earlier access to treatment,³⁴ there is less evidence to suggest that reading AN literature is therapeutically helpful for those who suffer from the condition; indeed Troscianko’s recent study suggests the opposite.³⁵

The development of YA literature as a literary category distinct from books written specifically for adults or children can be traced back to the late 1960s, and has been defined as ‘all genres of literature [...] that are written for and marketed to young adults’, a category generally understood to include readers aged between twelve and eighteen.³⁶ However, in contextualising the field of YA literature about AN and other EDs, I shall also refer to memoirs which may not be exclusively aimed at YA readers, alongside key examples of YA novels. Although ED memoirs may not always be aimed primarily at a YA readership, and are often written retrospectively from the perspective of adulthood, they often focus on their authors’ adolescence and, in practice, are read alongside YA novels by young people with an interest in the topic.

In both English and French, then, YA literature about EDs takes two main forms, both overwhelmingly female in their focus: the personal journey memoir (non-fiction) and the problem novel (fiction), a genre that explores social problems from a young person’s perspective. As one goal of such novels is to invite empathy on the part of their readers, the first-person narrative voice is often (though not always) used, but the narrative is more likely to be in the form of a diary or a real-time account of events, as opposed to the retrospective narration of the memoir. Both genres tend to follow a similar narrative arc, describing an increasingly severe illness followed by a turning point – often an external intervention, or a crisis such as a physical

collapse – and finally recovery, or the first steps towards it. The emphasis on recovery as the conclusion to the narrative is more uniformly present in the novels; more recent publications also tend to reflect developments in ED research and treatment, emphasising the role of the family in the therapeutic process, for example. Pollen's 2019 novel is a good example of such progress: whereas many earlier texts use specific weight and other bodily statistics to indicate blanket 'dangerous' thresholds, often designed to shock both characters and readers, Pollen avoids doing this. Instead, his character offers a more nuanced explanation of Body Mass Index (BMI) as a rough guideline, and emphasises the importance of body type, thus reflecting some of the changes in DSM-V.³⁷

However, although many such novels are based on detailed and up-to-date research, and memoirs are by their nature based on personal experience, it is worth noting that certain 'classics' of each genre have continued to be read and reissued long after their initial publication, despite in some cases being cited as having potentially harmful influence, as in the case of Steven Levenkron's *The Best Little Girl in the World*, first published in 1978.³⁸ Where public awareness of EDs is influenced by literary representation, then, it is important to note the far slower dissemination process, by contrast with the clinical literature, in which new findings replace outdated assumptions. The ED canon in literature is also intertextual: writers of memoirs frequently cite other memoirs they have read, as well as novels, and the structures of their own works echo these forerunners, shaping in turn their readers' expectations. Intertextuality in literary studies is the notion that texts are 'intertextual' in that they are produced in a context where other texts already exist. Texts thus interact with the existing body of literature via direct quotation, allusion, and even via affinities that are not consciously intended;³⁹ this can be seen in ED literature due to the level of generic coherence across a range of texts, even where direct reference is not made to existing texts.

Aside from this coherence across the genre, this is a particularly important literary feature for AN texts because AN can itself be considered a peculiarly ‘intertextual’ condition. Writing about what she terms ‘hysterical’ conditions, Elaine Showalter draws on this literary concept to explain how symptoms of unrelated individuals may echo each other when they are part of a larger narrative of an illness’s trajectory:

Writers inherit common themes, structures, characters and images; critics call these common elements *intertextuality* [...] [P]atients learn about diseases from the media, unconsciously develop the symptoms, and then attract media attention in an endless cycle. The human imagination is not infinite, and we are all bombarded by these plot lines every day. Inevitably, we all live out the social stories of our time.⁴⁰

Showalter is not referring here specifically to EDs, but rather to conditions in which similarity of physical symptoms across unrelated patients may be cited as evidence of physical rather than mental illness. However, her account of ‘social stories’ which manifest themselves in specific ways in particular cultures is potentially useful for thinking about the cultural context in which patients experience EDs. Furthermore, the model of intertextuality as an unconscious echoing of cultural codes may be extended further in the case of AN; the accounts in several memoirs also suggest a *deliberate* intertextual engagement on the part of AN patients. By seeking out and copying the behaviours and attitudes they find in literature, these patients not only participate in an ambient cultural narrative, as in Showalter’s account, but they could be seen to directly ‘quote’ from others’ experience of the illness.⁴¹

The genre of the confessional memoir is often called ‘true-life story’ or ‘tragic life story’ or even ‘misery memoir’ in an English publishing context, and the more neutral ‘récit-témoignage’ (literally: eyewitness narrative, or testimonial) in French. In the case of ED memoirs, these typically include a claim that the book has been written in order to help other people in a similar situation, either within the text itself, often towards the beginning, or in the paratextual information such as a preface or the cover blurb.⁴² However, in the light of Troscianko’s study, such claims may appear misguided, or even disingenuous; in some cases, authors claim that their

goal is to help or inspire others but also include details of how their *own* reading of ED memoirs and novels fuelled their disordered eating. Kelsey Osgood singles out this tendency for criticism in her own memoir, *How to Disappear Completely*, whose title echoes the kind of how-to manual she strives not to reproduce. As part of her discussion of the ‘communicable’ nature of AN, including the irresponsible inclusion of diet plans, body weight details, and aesthetically appealing imagery,⁴³ Osgood mentions her own reading of AN memoirs and novels, including her response to Hornbacher’s *Wasted*, noting that ‘after reading it, [she] incorporated some of Hornbacher’s tricks into [her] own weight-loss repertoire.’⁴⁴ Offering a ‘prescription for culture,’ Osgood makes the following recommendation: ‘when writing about eating disorders in general, do not include details of the sick person’s intake and dieting techniques. Do not include the person’s weight statistics.’⁴⁵ Nonetheless, claims of therapeutic benefit appear often to be taken at face value, and the goal of ‘raising awareness’ of one’s own situation in order to ‘help others’ may go unchallenged, particularly due to the ethical difficulty implicit in rejecting an individual sufferer’s account of her own experience.⁴⁶

Fiction would thus appear to have a key advantage in the critical distance it offers: as readers, knowing that we are engaging with an invented character rather than a real person opens up space for a more critical reflection. However, fiction can also be problematic, in part due to generic uncertainty, especially where YA novels are structurally and thematically similar to memoirs. One finding of Troscianko’s study was that participants frequently confused fiction and memoir: the survey asked about fiction, but participants frequently cited examples of memoirs in their responses.⁴⁷ Furthermore, their emotional reactions to reading both fiction and memoir were similar, leading her to conclude that genre makes little difference to the potential harmfulness of literature about EDs.⁴⁸ In my analysis below, I would like to suggest that certain types of fiction may, however, fulfil the beneficial functions of awareness-raising and destigmatisation while minimising the potential for harm. Triggering effects, whether accidental or deliberately sought out, cannot be avoided altogether, and, as Troscianko notes, fictional

textual strategies that emphasise the fictionality of the novel, incorporate multiple perspectives, disrupt reader identification with the anorexic character, and avoid detailed accounts of diet plans and disordered thinking around body image and food may help to mitigate these effects.

The majority of available YA fiction on EDs features female protagonists, and, like ED memoirs, focuses primarily on the perspective of a protagonist with an ED, whether narrated in first or third person. When ED novels are recommended on popular education-focused YA websites, specific texts appear to be selected with the public-health-focused goals of awareness raising and reduction of stigma in mind. The language used to promote them tends to focus both on their honesty and accuracy in representing EDs, and on their literary-aesthetic quality. For example, Reading Brightly, a US-based resource with over 200,000 followers on Facebook, recommends two specific ED novels for being ‘haunting yet hopeful’, ‘poignant’, ‘realistic’ and ‘empathetic’:⁵⁰ the first two of these characteristics can be interpreted as judgments of literary merit, and the second two as contributions to the reduction of stigma. Quebecois website sophielit.ca, written by a secondary teacher and with 10,000 followers across social media platforms, similarly recommends novels by topic alongside educational resources, focusing in its write-ups on aesthetic quality and engaging characterisation.⁵¹ I do not seek to call into question here the literary quality or potential social value of these novels, which tend to promote a strong recovery narrative, with many including the interventions of supportive family members and health professionals. However, the frequent emphasis on realism and empathy seen in professional and reader reviews, while potentially helping to reduce stigma among readers without EDs, may be counterproductive where such texts are recommended to and read by readers who have or are vulnerable to EDs.⁵² Furthermore, features which contribute to a compelling and successful novel in terms of literary quality – realistic portrayal; empathetic characters; depth of research – do not necessarily lend themselves to positive outcomes for all categories of reader.

Within the broad category of YA novels focusing on a central protagonist with AN, I have identified three examples in English and my case-study novel by Percin in French. Sherry Shahan's *Skin and Bones* (2014), narrated in the third person, describes the experience of a teenage boy in an ED unit and his progress towards recovery. Lois Metzger's *A Trick of the Light* (2013) more problematically makes AN itself into the narrator, whose disordered perspective describes its increasing and then waning hold over the thoughts and actions of the male protagonist. Finally, Samuel Pollen's *The Year I Didn't Eat* (2019) is a first-person account of a teenage boy's experience of AN. Although these novels include some overtly triggering material such as dieting techniques, pro-ana ideas and calorie counts, they do also, however, present a more diverse picture of AN than conventional female-focused AN novels and memoirs via their use of well-developed secondary characters, including girls with EDs (Metzger and Shahan), thus offering a more balanced and representative account.⁵³ A similar effect is achieved in the sub-genre of graphic novels for young adults by Hubert and Marie Caillou's *La Chair de l'araignée* ('Flesh of the Spider') (2010), which juxtaposes the stories of a male and a female AN patient who share the same therapist.⁵⁴

The inclusion of multiple perspectives is a key advantage of the novel over the memoir,⁵⁵ and Robin Friedman's *Nothing* (2008), although it deals with bulimia nervosa (BN) rather than AN, is noteworthy in this respect as the first-person narration alternates between the male bulimic character Parker and his sister Danielle, thereby including an alternative voice as well as developed characterisation.⁵⁶ The use of sibling narration also features in a subset of AN novels in which male perspectives are included via a (non-anorexic) male narrator's discovery of his sister's or female friend's ED.⁵⁷ My second case-study novel, by Boulerice, falls into this category which, as I shall argue below, allows for an external perspective on AN emphasising familial and cultural aspects above identification with disordered attitudes.

3.2 Case Studies

3.2.1 Plot and genre

Anne Percin's *Point de côté* ('Side Stitch') is narrated by Pierre, a seventeen-year-old boy living in Strasbourg.⁵⁸ He and his family have struggled to come to terms with the death of his twin brother Éric in a car accident at the age of ten. The narrative comprises three notebooks of Pierre's diary; we learn that he plans to die on the tenth anniversary of Éric's death, that he eats very little, and that he runs for several hours each week. Pierre believes himself to be overweight but there is no evidence of this in the text, though it is plausible that he was overweight as a younger child in the years immediately following the accident. The plot follows Pierre's family problems (in particular, his mother's suicide attempts), social difficulties, notably with a popular boy named Xavier, and nascent relationships with first a female character (Geneviève) and then a male character (Raphaël), the latter of whom helps him realise the extent of his illness and need to recover. He ultimately leaves home to follow Raphaël to Paris.

In Simon Boulerice's *Jeanne Moreau a le sourire à l'envers* ('Jeanne Moreau has an upside-down smile') (2013), the first-person narrator, Léon, is an ordinary 15-year-old boy living in Montréal in an ordinary family, whose main preoccupations are his chronic dandruff and his attempt to get his first girlfriend. However, we gradually become aware that his much-admired older brother is suffering from an eating disorder, in particular when Léon's penpal and romantic interest Léonie comes to visit the family. Eventually, the family accept the possibility that their elder son is suffering from anorexia nervosa and he begins to undergo treatment.

Both novels adhere to many conventions of the YA fiction genre: both feature teenage narrators and follow the typical illness-intervention-recovery story arc common to most YA novels about AN. Furthermore, *Point de côté* is a conventional YA problem novel in its introspective focus on the first-person narrator and his difficult family circumstances; its presentation as a diary is also common for the genre. As noted above, *Jeanne Moreau's* strategy of representing a character's AN from his brother's perspective echoes examples from female-

focused AN novels, and its title, referring to cult New Wave actress Moreau's unusual facial features, is a reference to the narrator's perception of himself – and later his brother – as misfits, another common trope of YA fiction. However, by introducing a male perspective and male characters with AN, these texts and the ones surveyed above are also able to disrupt assumptions about the typical AN narrative, and to unsettle conventional expectations of a female sufferer, usually white and middle-class, often concerned either with academic success, or a specifically female-gendered conception of body image predicated on thinness and social acceptability. For instance, the title of Percin's novel, literally meaning a side stitch, refers both metaphorically to the feeling of being stopped in one's tracks, and literally to Pierre's obsession with sport. This is here connected not just to calorie burning, but also to athletic performance, a context for EDs less frequently represented in YA literature.⁵⁹ As well as raising awareness of the fact that boys can also have eating disorders, such texts may thus also serve to diversify readers' conception of how EDs may manifest themselves in both male and female sufferers, by broadening the range of motivations, ideas, and social and familial contexts depicted.

3.2.2 Thematic analysis

I have argued above that these novels, while broadly conforming to their genre as YA novels about AN, also subvert the dominant narrative in potentially productive ways, via their thematic focus on male experience. Before turning to specific narrative strategies, I will now consider their thematic focus on aspects of body image and sexuality, arguing that in addition to making the point that EDs can affect boys as well as girls, these texts also offer space for other understandings of how individuals may experience their own and other people's bodies. This is facilitated by the plural nature of the novel, as opposed to the memoir; while in both cases these texts are narrated by a single first-person narrator, both feature well-developed characters whose perspective is different from that of the anorexic character, and other voices are incorporated via the use of dialogue and letters.

In *Jeanne Moreau*, different perspectives on body image and aesthetics are provided by Léon's attitude to his own peer group and to his brother. He expresses admiration at various points for Antoine's refusal to conform to contemporary popular culture, instead preferring French New Wave cinema of the 1950s and 60s, including an obsession with the actress Jeanne Moreau, whose unusual looks give the novel its title. He also considers his brother to be extremely attractive,⁶⁰ despite his slender physique which contrasts with the enviably muscular good looks of Léon's best friend Carl, whom he frequently compares to actor Taylor Lautner. By contrast, Percin avoids the description of bodily appearances in favour of physical capabilities; her novel juxtaposes the athletic world of the swimming pool and athletics track with the music school in which Pierre enrolls, and where he meets his eventual boyfriend Raphaël.⁶¹ Writing about his first encounter with Raphaël, Pierre mentions that he is tall and good-looking, but focuses in his description on the effect of his piano playing, and characterises him overall as 'bizarre',⁶² in a validation of non-conformity comparable to Boulerice's novel.

Both Percin and Boulerice also disrupt the heteronormativity of much conventional YA AN fiction, a thematic feature not present in the equivalent male-centred texts currently available in English. Boulerice's Léon is presented as a 'normal' middle-class Quebecois teenage boy, desperate to get a girlfriend. However, due to his lack of knowledge of his brother's private life, we do not learn much about Antoine's sexuality. Crucially, when Léon speculates about whether his brother might be gay, he does so non-judgmentally, simply curious to know what motivates Antoine.⁶³ *Point de côté* goes further in exploring adolescent sexuality: following an ambiguous encounter with his antagonist Xavier in a sports centre changing room, Pierre later develops sexual relationships first with Geneviève, and later with Raphaël. In a context where Pierre has significant psychological difficulties, including the trauma of his brother's death, his ongoing eating disorder and his fragile sense of self, it is noteworthy that his exploration of his sexuality is presented with relative neutrality. In spite of a plausible element of homophobic bullying in the swimming team's reactions to Pierre's encounter with Xavier, homosexual desire is not presented

in both novels is significant, given that homosexuality has been identified as a risk factor for eating disorders in men and boys.⁶⁴ Sensitive representation of LGBT themes thus has a potentially important role to play in increasing awareness of diverse patient groups and reducing stigma.

3.2.3 Narrative perspective.

Both *Point de côté* and *Jeanne Moreau* are narrated in the first person, a mode which can invite easier identification with the narrator on the part of the reader.⁶⁵ However, in both novels the structure of the narrative and the mode of narration are designed to create distance between the reader and the depiction of AN. This is in large part due to both authors' employment of *unreliable* narration; both also draw attention away from the core subject-matter of AN by making their narrators focus their attention elsewhere for large parts of the narrative. Before discussing the status of the narrator, however, it is important to clarify my approach to 'the reader' in the analysis that follows. As Shlomith Rimmon-Kenan notes, a range of meanings are possible for the term 'reader', including 'two diametrically opposed views and various nuances between them. At one extreme, the concept is of a real reader [...]. At the other it is a theoretical construct, implied or encoded in the text, representing the integration of data and the interpretive process "invited" by the text.'⁶⁶ For the purposes of my analysis in this section, I shall use the term 'reader' in the singular, or 'implied reader', to refer to the second of these categories. I do so to avoid speculating on the texts' actual effects on real-world readers, while nonetheless engaging with textual features present in the novels in terms of the literary effects they seek to produce.⁶⁷ Where I allude to the possible effects on readers in the real world, I shall specify the categories of reader to whom I refer. In my conclusion, I shall suggest some avenues for potential empirical research.

In any narrative, the narrator is the person who tells the story. A first-person narrator does so using the pronoun ‘I’, from his or her own perspective. In a memoir, readers are invited to accept that the first-person ‘I’ who tells the story is identical with the author whose name appears on the title page, and the narrative is written as though addressed directly to its real-world readers. This is what French theorist Philippe Lejeune refers to as the ‘autobiographical pact’;⁶⁸ the author undertakes to tell his or her own story, and the reader undertakes to accept this as sincere, that is, we agree to assume the narrator is *reliable*. In a novel the reader is aware that the narrator is fictional, and no such pact applies; indeed, the person to whom the narrative is addressed need not be the real-world reader of the book, and the reader has no obligation to trust the narrator. The first-person narrator of a novel may thus be reliable (telling the truth about events in a way that does not mislead the reader) or *unreliable* (a narrator whose account the reader has reason to doubt). According to Shlomith Rimmon-Kenan, unreliability can take various forms: the narrator may be mad or drunk, he or she may lack knowledge, or have a value-system that seems at odds with the overall message of the book.⁶⁹

In *Point de côté* Pierre is an unreliable narrator where the AN storyline is concerned primarily because he is ill and does not see his situation objectively. In this respect, Percin’s narrative strategy is not dissimilar to many female-focused AN novels, in which the first-person narrator’s thoughts concerning body image and diet, and her reactions to interventions by other characters, are often shaped by the anorexic mind-set depicted, and a reader can discern the difference between the narrator’s perspective and the likely (fictional) reality.⁷⁰ However, this effect is heightened in *Point de côté* in ways which disrupt easy reader identification with Pierre’s perspective, and facilitate the creation of an aesthetic distance between narrator and reader. For example, Pierre’s presentation of his body shape towards the start of his diary already invites readers to doubt his account. He writes: ‘Mon corps [...] est gras et plissé, je ne veux pas le regarder mais je suis sûr qu’il est comme ça, et qu’il pue le moisi.’ (My body is fat and wrinkled; I don’t want to look at it but I’m sure it’s like that, and that it smells of mould); he goes on to

remember that he was put on a diet as a child because he was fat, '[e]nfin, plus petit et plus gros que maintenant.' (that is, shorter and fatter than now).⁷¹ Already, Pierre's explicit refusal to look at the body he describes allows for doubt concerning the accuracy of his viewpoint. His perception of his body as fat and unathletic does appear to be corroborated by other characters a few diary entries later, when he is bullied at the swimming pool by members of his former swimming club, who tease him for his poor performances, and their ringleader, the supremely fit Xavier, challenges him to a 5000m running race he is widely expected to lose.⁷² However, when Pierre implausibly wins the race, the reader is challenged to reassess the physical image of the character which has so far been presented. Rimmon-Kenan notes that one way of identifying narrative unreliability is that 'when the outcome of the action proves the narrator wrong, a doubt is retrospectively cast over his reliability in reporting earlier events.'⁷³ In *Point de côté*, the oscillation between the different levels of plausibility in Pierre's account has a potentially alienating effect; although a reader well-disposed to Pierre can still empathise with his tragic backstory, or account of being bullied, discrepancies in Pierre's account make it hard to trust him, and therefore to fully enter into his perspective.⁷⁴

A second key facet of Pierre's unreliability is that he withholds information about his ED. By contrast with a memoir, in which the narrator communicates directly with the reader, the fictional Pierre is presented as writing a diary for himself, so pertinent information is left out that can only be read between the lines. The novel's central concern of AN is set up at the start of the narrative, when Pierre refers to his history of overweight, dieting, his daily running regime and plan to lose *all* of his bodyweight in the early pages of his diary. However, he rarely mentions it in subsequent entries. For example, in notebook one, of eighteen diary entries spanning the period from July 26 to August 18, 1999, passing references to disordered eating, body image, or excessive exercise occur in only six. The effect of this deliberate de-centring of AN is that the reader is permitted to share Pierre's focus on other aspects of his life, while likely remaining – perhaps uncomfortably – aware of the ED in the background. Thus when Pierre mentions that,

while in a café, he has eaten all of the sugar cubes in the bowl,⁷⁵ or when, about two thirds of the way through the narrative, he writes that his doctor has commented on his ED, using the word ‘anorexique’ for the first time in the novel,⁷⁶ these moments may produce a jarring effect, reminding the reader of what he or she already knows.

Boulerice’s *Jeanne Moreau* similarly de-centres the representation of male AN, even though it is at the heart of the novel’s plot. Narrator Léon’s unreliability, by contrast with Pierre’s, is based on a lack of knowledge: because he is not the anorexic character, he does not have full access to the details. Furthermore, because the story is narrated as it occurs, rather than retrospectively as in a memoir, Léon does not know that he is telling the story of his eighteen-year-old brother Antoine’s AN, and the main focus of his attention is his own adolescent issues: his dandruff, his better-looking friend Carl’s romantic successes, and his own possible romance with his penfriend Léonie. The details of Antoine’s illness thus emerge intermittently during Léon’s narrative of his home and family life, particularly at family mealtimes where both boys are present. As in *Point de côté*, relatively few of the thirty-one short chapters mention Antoine’s food-related behaviours and attitudes, and, until Léon is made aware of the severity of his brother’s illness in chapter twenty-five, Antoine’s anorexic behaviours have been a major focus only of chapters twelve, fourteen and seventeen. For Léon, then, this is one concern among many, and even in a chapter where Léon catches Antoine vomiting straight after dinner in a restaurant, he does not think any further of the incident as he is preoccupied with his own feelings of adolescent inadequacy.⁷⁷

Filtered through Léon’s perspective, the outwardly visible details of Antoine’s illness are presented to the reader much as they appear to Léon and his parents. Readers are thus allowed to become accustomed to Antoine not finishing his dinner, or saving it to eat at college the next day via intermittent mentions;⁷⁸ we learn that he has been sick after at least two meals,⁷⁹ but elsewhere in the text Léon merely mentions in passing that Antoine has returned to the table

downplay his behaviour: his mother claims he has a delicate stomach, and his father jokes that Antoine never eats desert because he is 'watching his figure'.⁸¹ These narrative strategies tend to normalise Antoine's anorexic behaviours, which may create an uncomfortable effect for the reader: like Léon and his parents, the implied reader of this novel is aware that something is wrong, but is able to get used to Antoine's eccentricities as they do. Ultimately it is an outside – Léon's visiting penfriend Léonie – who is able to articulate what is wrong with Antoine. She is the first to use the word 'anorexique', articulating late in the narrative what the other characters and the implied reader have been ambivalently aware of all along.⁸² Following Léonie's revelation in chapter twenty-five, Léon and his family – and by extension the reader – are forced to make Antoine and his AN the central focus of their attention. All subsequent chapters deal with Antoine's illness, his collapse and hospitalisation, his diagnosis, and the family's acceptance of their responsibility and role in the recovery process.

In both novels, then, the main plot concerns a character's AN, but the narrators' attention is primarily focused on other things. This de-centring of AN creates a troubling effect for the implied reader, who becomes gradually aware of the presence and significance of the illness. In this way, both novels emphasise the social and familial context. *Jeanne Moreau* does so explicitly via Léon's eventual realisation and his family's acceptance of the diagnosis following a period of denial. *Point de côté* functions more subtly: by offering hints about Pierre's behaviours and thoughts surrounding food and eating, without allowing him as narrator to engage explicitly with his ED, the novel places the responsibility for discerning what is happening on its implied reader.

Both novels also fulfil a key function of the YA ED novel, in raising awareness about boys' potential to develop AN, and doing so in a way likely to reduce stigma via the use of sympathetically portrayed characters and emphasis on social and familial context. As I have

ideation. While this approach may entail losses in terms of the amount of information conveyed to a healthy reader, and the opportunity to fully enter into the anorexic character's perspective, I suggest that these omissions may help to mitigate potentially harmful triggering effects for readers with or vulnerable to EDs, thus rendering the texts suitable for a diverse audience.

Although, as noted above, *Jeanne Moreau* in particular does mention specific details such as Antoine's strategies for not eating, and his habit of vomiting after meals, the distanced narrative perspective means that such details are only those which are visible to an external observer.

Thus, other more visible aspects of his personality and behaviour relevant to AN such as perfectionism and dutiful behaviour – 'good' characteristics likely to be overlooked by family members as potential indicators of an ED – are made more prominent in the novel. Many well-researched and accurate novels about AN *do* include details such as diet plans, body weights, specific behaviours associated with the condition such as dividing food into small pieces or tapping on the table.⁸³ In such cases, authors may justify the inclusion of such information in terms of the educational value and realism of their novels.⁸⁴ However, the two novels I have discussed achieve an effect of realism differently; they do so by developing convincing and complex relationships between characters, and by emphasising the role of context and of families and social networks in both the experience of EDs and the process of recovery.⁸⁵

4. Conclusions and hypotheses for future study

There is still more to learn about the role of literature and other cultural representations of AN (and other mental illnesses) in contributing to the public perception and awareness of illness, including the way in which this broader public discourse surrounding illnesses like AN affects the lived experience of sufferers and the process of the disease. However, it is clear (1) that literature remains one means of raising awareness of illnesses like AN, and its prevalence among men and boys, and that such awareness may contribute to reducing stigma and encouraging early

access to treatment; (2) that those suffering from the disease are likely to respond differently to literary representations of AN than healthy readers; and (3) that access to and interpretations of literary texts are hard to control, even if this were desirable. In addition to further large-scale studies into the effects of reading, such as Troscianko's, which focused on creative bibliotherapy in particular, qualitative research using literary-critical techniques can contribute to a detailed evaluation of how representations of conditions such as AN work, and what kinds of texts are likely to serve useful purposes of awareness-raising and destigmatisation, at the same time as avoiding potentially harmful or misleading depictions. While it would be counter to the values of the discipline of literary studies to limit any individual's choice of reading material, such analysis can contribute to a more selective approach to which books are recommended for educational or self-help purposes, and can inform hypotheses for further empirical study.

In the case of AN, analysis of two French-language YA problem novels featuring male characters with AN has shown that, while in many respects these novels adhere to the conventions of their genre, they may provide good examples of sensitive and responsible portrayals of EDs. In addition to contributing to young readers' knowledge of male ED experience and to the reduction of stigma, my case-study examples also explore LGBT themes in a non-judgmental way, a contribution currently lacking in the equivalent English-language fiction. I have also argued more broadly that *fiction* – as opposed to memoir – may have greater potential for contributing to knowledge and reducing stigma while minimising the risk of triggering readers with AN. While triggers cannot be avoided altogether, and may even be sought out by vulnerable readers, my case-study texts offer examples of how their effect may be potentially mitigated via the use of distancing devices, including overtly unreliable narration, and a de-centred approach to storytelling that represents AN as the main plot driver while directing the central focus of attention away from it.

The textual analysis above suggests various avenues for further study, in particular relating (1) to the potential benefits of the thematic and narrative strategies I have identified for reducing stigma among young people in general, and (2) their potential to mitigate the harmful effects of AN narratives for young people who have or are vulnerable to EDs. In relation to (1), I have suggested that the novel as a genre may be more beneficial than the memoir due to its inclusion of multiple perspectives, and that male-focused novels which also address LGBT themes may be particularly valuable in this regard. I would predict that readers of these novels would express a greater awareness of different types of people who could be affected by EDs, and a more sympathetic attitude towards different categories of ED sufferer, than readers of either a conventional female-focused memoir, or a conventional novel dealing with a typical (white, middle-class, female) anorexic protagonist. Focusing in more detail on the specific narrative strategies employed by Boulrice (a first-person narrator who is not the anorexic character; the representation of social and familial context), I further suggest that healthy readers are more likely to identify and engage with their own responsibility to take action and support those struggling with EDs. In relation to (2), I have suggested – in line with anecdotal evidence cited from various ED memoirs – that the avoidance of specific details such as body weights and diet plans can help avoid triggering negative thoughts and behaviours in readers vulnerable to EDs. I have also suggested that the use of overtly unreliable narration might help to mitigate such triggering effects. These effects could be empirically tested by distinguishing between specific aspects of readers' responses to the mode of narration; for instance, by investigating the connections between the level of unreliability signalled by markers in the narrative, and the levels of empathy, trust, and desire to compete with the anorexic narrator. If these hypotheses are borne out, novels such as my examples by Percin and Boulrice could contribute to valuable educational resources, for example in facilitating classroom discussions of EDs and their effects in educational settings where the level of vulnerability to disordered eating may be varied and unknown, or in contributing to editorial decisions in YA-focused publications and websites.

Although my discussion has focused on just two texts out of a vast existing field of AN literature, this analysis highlights features of a responsible approach to writing AN fiction, and identifies types of text that may be more suitable for educational purposes and for recommendation to a diverse YA readership. While it does not replace the need for empirical research, the analysis above complements such approaches, offers categories which can help to frame future empirical testing, and shows that close attention to technical aspects of literature such as genre and narrative perspective has an important role to play alongside consideration of thematic content.

Notes

¹ Anorexia and Bulimia Quebec, www.anebquebec.com, accessed 5 January, 2020.

² The following selection of articles since 2017 from the mainstream press in the UK, the USA and France shows the range of such publications, from public service broadcasting, to broadsheet newspapers and lifestyle magazines: Dave Chawner, “As a teenage boy with anorexia I couldn't find words to describe my mental illness,” *The Guardian*, October 17, 2017, <https://www.theguardian.com/healthcare-network/2017/oct/17/teenage-boy-anorexia-mental-illness-stigma>; Samuel Pollen, “‘Male eating disorders tend to fly under the radar’: How it feels to suffer from anorexia as a teenage boy,” *The Independent*, March 28, 2019, <https://www.independent.co.uk/life-style/eating-disorder-awareness-week-anorexia-boys-men-what-its-like-samuel-pollen-not-eating-a8796416.html>; Michel Martin and Amanda Morris, “Underdiagnosed Male Eating Disorders Are Becoming Increasingly Identified,” *All Things Considered*, NPR, March 2, 2019, <https://www.npr.org/2019/03/02/699733879/underdiagnosed-male-eating-disorders-are-becoming-increasingly-identified?t=1567604697938>; “Boys get eating disorders, too,” *Today*, September 3, 2019, <https://www.today.com/parents/more-boys-have-eating-disorders-need-treatment-t160274>; Marc Gozlan, “Quand l’anorexie mentale touche l’homme adulte,” *Le Monde*, December 11, 2017, <https://www.lemonde.fr/blog/realitesbiomedicales/2017/12/11/quand-lanorexie-mentale-touche-lhomme-adulte/>; Laetitia Reboulleau, “Manorexie: quand les hommes souffrent d’anorexie mentale,” *Marie Claire*, [no date], <https://www.marieclaire.fr/,manorexie-quand-les-hommes-souffrent-d-anorexie-mentale,818839.asp>, accessed January 5, 2019.

³ Anecdotal evidence in such articles as well as qualitative studies such as Räisänen and Hunt’s confirm the persistence of this lack of awareness among male ED patients. U. Räisänen and K. Hunt, “The role of gendered constructions of eating disorders in delayed help-seeking in men: a qualitative interview study,” *BMJ Open* 2014;4:e004342. doi:10.1136/bmjopen-2013-004342

⁴ See bibliography for a list of such texts.

⁵ Although my specific focus in this article and in my literary case studies is on AN, I shall at times refer to eating disorders (EDs) more generally in my discussion of existing clinical research and literary representations. Due to changes in diagnostic criteria, notably in DSM-V, male ED patients may now be more likely to be diagnosed with AN rather than EDNOS (Eating Disorder Not Otherwise Specified) as previously. Furthermore, some of the existing studies include other conditions such as Bulimia Nervosa (BN), and many charity and advocacy groups deal with a range of EDs.

⁶ ‘Hungry for Words: A cross-disciplinary approach to articulating, communicating and understanding male anorexia’, AHRC research network, University of Nottingham 2016-2018. I am particularly grateful to Principal Investigator Heike Bartel for inviting me to collaborate on this project, and to co-investigator Nadia Micali for pointing me towards the latest clinical research into AN.

⁷ Leigh Cohn. “Introduction to the Special Issue on Males With Eating Disorders.” *Eating Disorders*, 20:5 (2012): 345. <https://doi.org/10.1080/10640266.2012.715511>.

⁸ Janet Treasure, Stephan Zipfel, Nadia Micali, Tracey Wade, Eric Stice, Angélica Claudino, Ulrike Schmidt, Guido K. Frank, Cynthia M. Bulik, and Elisabet Wentz. “Anorexia Nervosa.” *Nature Reviews Disease Primers* 1 (2015): 7. <https://doi.org/10.1038/nrdp.2015.74>.

⁹ Stevie Chariese Stanford, and Raymond Lemberg. “Measuring Eating Disorders in Men: Development of the Eating Disorder Assessment for Men (EDAM).” *Eating Disorders*, 20:5 (2012): 427-436, <https://doi.org/10.1080/10640266.2012.715522>; Alison M. Darcy, and Iris Hsiao-Jung Lin. “Are We Asking the Right Questions? A Review of Assessment of Males With Eating Disorders.” *Eating Disorders* 20:5 (2012): 416-426, <https://doi.org/10.1080/10640266.2012.715521>.

¹⁰ Tom Wooldridge. *Understanding Anorexia Nervosa in Males: An Integrative Approach*. London: Routledge, 2016. 6-8.

¹¹ Katherine D. Arnow, Talya Feldman, Elizabeth Fichtel, Iris Hsiao-Jung Lin, Amber Egan, James Lock, Marcus Westerman and Alison M. Darcy. “A qualitative analysis of male eating disorder symptoms.” *Eating Disorders*, 25:4 (2017): 297. <https://doi.org/10.1080/10640266.2017.1308729>; Stanford & Lemberg, 427-8.

¹² Hilde Bruch. *The Golden Cage: The Enigma of Anorexia Nervosa*. Cambridge, MA: Harvard UP, 2001, xxii.

¹³ Räisänen, and Hunt, 7.

¹⁴ Räisänen and Hunt.

¹⁵ Leigh Cohn, Stuart B. Murray, Andrew Walen, and Tom Wooldridge. “Including the excluded: Males and gender minorities in eating disorder prevention.” *Eating Disorders*, 24:1 (2016): 114-15. <https://doi.org/10.1080/10640266.2015.1118958>. The proportion rises when a broader range of EDs are included. Cohn et al argue that, due to the rising prevalence of disordered eating in males, the proportion of males displaying any type of disordered eating behaviour should be estimated at up to 50% (115).

¹⁶ For example, Evans, John. *Becoming John: Anorexia's Not Just For Girls*. Xlibris, 2011; Kohl, Jim. *Skeletal Marriage*. CreateSpace Independent Publishing Platform, 2009.

¹⁷ Jean-Pierre de Tonnac. *Anorexia: Enquête sur l'expérience de la faim*. Paris: Albin Michel, 2005, 9.

¹⁸ Paul Crawford, Brian Brown, Charley Baker, Victoria Tischler, and Brian Abrams. *Health Humanities*. London: Palgrave Macmillan, 2015, 6-7.

¹⁹ Räisänen and Hunt. 4-5.

²⁰ Angela Woods. “The limits of narrative: provocations for the medical humanities.” *Medical Humanities* 37 (2011): 74. <https://doi.org/10.1136/medhum-2011-010045>.

²¹ See for example Ben Rutter and Rodney Hermeston. “The space between words: on the description of Parkinson’s disease in Jonathan Franzen’s ‘The Corrections’.” *Medical Humanities* Epub ahead of print (March 6, 2019):1. <https://doi.org/10.1136/medhum-2018-011536>; Anna Obergfell Kirkman, Jane A Hartsock, and Alexia M Torke. “How *The Fault in Our Stars* illuminates four themes of the Adolescent End of Life Narrative.” *Medical Humanities* Epub ahead of print (26 May 2018): 1. <https://doi.org/10.1136/medhum-2017-011400>. Both articles justify their choice of primary text at least in part due to its realistic portrayal of the condition and situation depicted.

²² Anita Singh. “Mark Haddon – don't use *Curious Incident...* as an autism ‘textbook’,” *The Telegraph*, June 8, 2015, <https://www.telegraph.co.uk/culture/culturenews/9311242/Mark-Haddon-dont-use-Curious-Incident...-as-an-autism-textbook.html>

²³ Mark Haddon. "Mark Haddon on the origins of *The Curious Incident*," Penguin Books, April 7, 2015, <https://www.penguin.co.uk/articles/2015/mark-haddon-on-the-origins-of-the-curious-incident/>

²⁴ Susan Sontag. *Illness as Metaphor*. London: Allen Lane, 1979.

²⁵ David Hauser. "The War on Prevention II: Battle Metaphors Undermine Cancer Treatment and Prevention and Do Not Increase Vigilance." *PsyArXiv* (August 4, 2019) : 19. <https://doi.org/10.31234/osf.io/a6bvd>.

²⁶ Although such a survey is beyond the scope of this article, Tonnac makes connections between aesthetic self-starvation (49-56), political use of hunger strikes (71-77) and medieval Christian iconography (135-42) with contemporary AN. In English, Maud Ellmann draws a compelling comparison between the Irish Hunger Strike of 1981 and Samuel Richardson's 1748 novel *Clarissa*, in *The Hunger Artists: Starving, Writing, and Imprisonment*. Cambridge, MA: Harvard UP, 1993.

²⁷ See for example Anna Krugovoy Silver. *Victorian Literature and the Anorexic Body*. Cambridge: Cambridge University Press, 2004; Patricia McEachern. *Deprivation and Power: The Emergence of Anorexia Nervosa in Nineteenth-Century French Literature*. Westport, CT: Greenwood Press, 1998. For an overview of more recent European literary depictions of EDs, see Petra M. Bagley, Francesca Calamita, and Kathryn Robson, eds., *Starvation, Food Obsession, and Identity: Eating Disorders in Contemporary Women's Writing*. Oxford: Peter Lang, 2018.

²⁸ Woods, 74.

²⁹ See also Wooldridge, 5-7.

³⁰ Emily T. Troscianko, 'Literary reading and eating disorders: survey evidence of therapeutic help and harm', *Journal of Eating Disorders* (2018) 6:8 DOI: 10.1186/s40337-018-0191-5; Emily T. Troscianko, 'Fiction-reading for good or ill: eating disorders, interpretation and the case for creative bibliotherapy research', *Medical Humanities* (2018) 44, 201-211, DOI: 10.1136/medhum-2017-011375

³¹ See for example Kelsey Osgood. *How to Disappear Completely: On Modern Anorexia*. London: Duckworth Overlook, 2014, 22-24.

³² Simon Boulerice, *Jeanne Moreau a le sourire à l'envers* (Montreal: Leméac, 2013); Anne Percin, *Point de côté* (Paris: Thierry Magnier, 2006).

³³ Cited in Elaine Bousfield. "Fiction as Therapy." *National Health Executive* (March 20, 2019). <http://www.nationalhealthexecutive.com/Comment/fiction-as-therapy>, accessed January 5, 2020.

³⁴ Wooldridge, 38-39; Räisänen and Hunt, 6-7.

³⁵ Troscianko, "Fiction Reading", 207.

³⁶ Chris Crowe. "Young Adult Literature: What Is Young Adult Literature?" *The English Journal* 88, no. 1 (September 1998): 121. <https://doi.org/10.2307/821448>.

³⁷ Samuel Pollen. *The Year I Didn't Eat*. Manchester: ZunTold, 2019, 79.

³⁸ Steven Levenkron. *The Best Little Girl in the World*. London: Penguin, 1988. This novel was one of the most frequently-cited ED texts by participants in Troscianko's 2018 study, forty years after its initial publication. Troscianko, "Literary Reading," 6. Osgood describes the novel as 'every anorexic of my generation's entrée into the world of eating disorders literature.' Osgood, 23.

³⁹ Graham Allen explains that 'works of literature [...] are built from systems, codes and traditions established by previous works of literature,' and that '[r]eading [...] becomes a process of moving between texts. Meaning becomes something which exists between a text and all the other texts to which it refers and relates, moving out from the independent text into a network of textual relations.' Allen, *Intertextuality*. London: Routledge, 2000, 1.

⁴⁰ Elaine Showalter. *Hystories: Hysterical Epidemics and Modern Culture*. London: Picador, 1997.

⁴¹ Eighteen respondents to Troscianko's survey spontaneously reported deliberately seeking out triggering literature on EDs, sometimes to pick up tips. Troscianko, "Literary Reading," 11.

⁴² For example, the Flamingo edition of Marya Hornbacher's *Wasted* reproduces the following quotation on its dust jacket: 'I wrote this book because I believe some people will recognize themselves in it [...]. I would do anything to keep people from going where I went. This book was the only thing I could think of.' Hornbacher. *Wasted: A Memoir of Anorexia and Bulimia*. London: Flamingo, 1998, 5-7.

⁴³ Osgood, 25-37.

⁴⁴ Osgood, 24.

⁴⁵ Osgood, 234.

⁴⁶ I do not deny that such texts, and the goal of 'raising awareness', can be beneficial in spite of their potentially triggering effects. Michael Krasnow's memoir is presented by its author as beneficial in a specific sense: 'Each book that is sold will make that many more people aware of the serious problem of male anorexia. And the more people that know, the more demand there will be to help those with this problem.' Krasnow, *My Life as a Male Anorexic*. NY: Harrington Park Press, 1996, 2. Unlike Hornbacher, he avoids making claims about therapeutic benefits for readers who already have anorexia.

⁴⁷ Troscianko, "Literary Reading," 14.

⁴⁸ This finding is echoed in an interactive online reading list with 492 participants as of January 5, 2020 explicitly titled YA Eating Disorder Fiction. Despite the efforts of some editors to remove miscategorised texts, the list still contains memoirs alongside novels.

https://www.goodreads.com/list/show/2140.YA_Eating_Disorder_Fiction.

⁴⁹ Troscianko, "Literary Reading," 14.

⁵⁰ Brightly Editors. "The Best Children's and YA Books of June 2017."

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Dena McMurdie. "8 Enlightening and Empathetic YA Novels About Mental Illness,"

<https://www.readbrightly.com/enlightening-empathetic-ya-novels-about-mental-illness/>, accessed January 5, 2020.

⁵¹ <http://sophielit.ca/recherche.php?recherche-criteres=anorexie>, accessed January 5, 2020.

⁵² While my focus is on destigmatisation and the avoidance of obviously triggering style and content, rather than bibliotherapy as such, Troscianko's findings about the relative helpfulness of literature *not* related to EDs lead her to question what she identifies as an under-justified assumption within the field of 'creative bibliotherapy' that beneficial novels should depict protagonists whose situation closely mirrors that of the patient. Troscianko, "Literary Reading," 3-4.

⁵³ Pollen's novel also includes a trigger warning regarding its subject matter and use of calorie numbers.

⁵⁴ Hubert, and Marie Caillou. *La Chair de l'araignée*. Grenoble, Glénat, 2010.

⁵⁵ In his highly influential essay 'Discourse in the Novel', Mikhail Bakhtin identifies a diversity of voices as a defining feature of the novelistic form, which is characterised by 'a multiplicity of social voices.' Bakhtin, "Discourse in the Novel", in *The Dialogic Imagination: Four Essays*, ed. Michael Holquist, trans. Caryl Emerson and Michael Holquist (Austin: University of Texas Press, 1981), 259-422, 263.

⁵⁶ Robin Friedman. *Nothing*. Woodbury, MN: Flux, 2008.

⁵⁷ Examples include Irène Cohen-Janca. *demande l'impossible.com*. Arles: Rouergue, 2000.

⁵⁸ All translations from the French for both case-study texts are mine. As there are currently no published translations into English, I shall refer to both novels by their French titles.

⁵⁹ Wooldridge notes that sports requiring weight control increase the risk of their participants developing AN, and that this context is particularly relevant to men. Wooldridge, 6.

⁶⁰ Boulerice, 119.

⁶¹ Rocío Riestra-Camacho's research into the potential for young adult sports fiction to serve as bibliotherapy texts for anorexia nervosa is relevant in this context: she highlights examples of narratives focusing on body-positive representations of young women's physical capabilities, and

their appetite for – and enjoyment of – food as nourishment. See Riestra-Camacho, “Body Awakening through Athletics: A Gender Analysis of Corporealities in *Breathe, Annie, Breathe*”, *Atlantis* 41.1 (June 2019): 109-124.

⁶² Percin, 77.

⁶³ Boulerice, 119-20.

⁶⁴ Wooldridge, 75-76.

⁶⁵ It is worth noting, however, that the use of a first-person narrator need not necessarily have this effect. An empirical study by Van Lissa et al. found that the use of first-person versus third-person narrative did not affect reader empathy for the same character. Caspar J. van Lissa, Marco Caracciolo, Thom van Duuren, and Bram van Leuven, “Difficult Empathy: The Effect of Narrative Perspective on Readers’ Engagement with a First-Person Narrator”, *DIEGESIS. Interdisciplinary E-Journal for Narrative Research / Interdisziplinäres E-Journal für Erzählforschung* 5.1 (2016): 43-63.

⁶⁶ Shlomith Rimmon-Kenan. *Narrative Fiction: Contemporary Poetics*. London: Routledge, 2002, 123. For a discussion of this debate from an empirical literary studies perspective, see also Daniel Allington and Joan Swann. “Researching Literary Reading as Social Practice”, *Language and Literature* 18(3): 219-230, especially 219-223.

⁶⁷ Rimmon –Kenan goes on to note that ‘the advantage of talking of an implied reader rather than of “textual strategies” pure and simple [...] is that it implies a view of the text as a system of reconstruction-inviting structures rather than as an autonomous object’. In this view, discussion of ‘the reader’s’ response should be taken as egalitarian, rather than an authoritarian attempt to dictate how the text should be read.

⁶⁸ Philippe Lejeune, *On Autobiography*, ed. by Paul John Eakin, trans. by Katherine M. Leary. Minneapolis: University of Minnesota Press, 1989, 14; 19-21.

⁶⁹ Rimmon-Kenan, 103-4.

⁷⁰ It is particularly worth noting here that although the *implied reader* of such texts is invited to view an anorexic narrator’s attitudes as unreliable, a reader with AN may be less likely to do so, due to his or her alignment with the worldview of the anorexic character rather than that promoted by the book as a whole.

⁷¹ Percin, 12.

⁷² Percin, 19.

⁷³ Rimmon-Kenan, 104.

⁷⁴ See Van Lissa et al., 53 for a discussion of the distinction between empathy and trust in fictional narratives.

⁷⁵ Percin, 91.

⁷⁶ Percin, 103.

⁷⁷ Boulerice, 91-93.

⁷⁸ Boulerice, 65, 73, 109, 130.

⁷⁹ Boulerice, 74, 93.

⁸⁰ Boulerice, 137.

⁸¹ Boulerice, 74, 136.

⁸² Boulerice, 163.

⁸³ Among many other possible examples, Shahan’s *Skin and Bones* shows its male anorexic protagonist Jack copying a female inpatient’s eating habits in the ED unit they are being treated in (39). Sophie Laroche’s *Le Carnet de Granku* (Big-arse’s notebook), a popular and frequently-recommended French YA AN novel, concerns a teenage girl who follows dangerously restrictive dieting instructions from another girl with anorexia she meets in an online forum. Despite its thematic focus on the dangers of competitive dieting and copying others’ disordered behaviours, the novel nonetheless includes detailed accounts of its protagonist’s dietary restrictions and specific amounts of weight lost. Both these texts therefore depict the process by which young people with anorexia learn behaviour from others, adding realism to their account; however, they

potentially contribute to the perpetuation of this cycle by describing the learnt behaviours to their readers.

⁸⁴ For example, Laurie Halse Anderson has discussed consulting a range of ED experts before publication of her novel *Wintergirls*. NY: Viking, 2009. She reported that experts confirmed the book would be triggering to vulnerable readers, but that she had managed to ‘show the entire story’. Tara Parker-Pope, “The Troubling Allure of Eating-Disorder Books,” *The New York Times*, May 11, 2009. <https://well.blogs.nytimes.com/2009/05/11/the-troubling-allure-of-eating-disorder-books/>, accessed January 5, 2020. Parker-Pope notes in her article shortly after the novel’s publication that *Wintergirls* had not so far been taken up as a pro-ana dieting manual; however, it has since become notorious and is one of the specific examples of ‘triggering’ fiction frequently cited by participants in Troscianko’s study. Troscianko, “Literary Reading,” 6.

⁸⁵ In this context, Alan Palmer’s approach in *Social Minds in the Novel*. Columbus: Ohio State UP, 2010 is particularly pertinent. Identifying an ‘undue emphasis on private, solitary [...] thought’ (39) in literary criticism, Palmer argues in favour of an ‘externalist’ approach that ‘stresses the public, social, concrete, and located aspects of mental life in the novel.’ (40).

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Author Accepted Manuscript: Please do not cite. This article has been accepted for publication in *Medical Humanities*, 2020, following peer review, and the Version of Record can be accessed online at <http://dx.doi.org/10.1136/medhum-2020-011847> © BMJ Publishing Group Ltd

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