



REVIEW ARTICLE

# The culture of the perfect body: analysis of the use of dietary and anorectic elements to weight loss and eating disorders

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### **Abstract**

Eating disorders are psychological disorders that directly affect the physical health of those who suffer from them, with a high mortality rate. Women are more prone to eating disorders than men, which is why most research focuses on women. Thus, 10% of patients with eating disorders are men. The results of bibliographical research are presented through in-depth interviews about the perception of the body that Social Work and Psychology professionals, who worked in both the public and private sectors, as an element that can influence eating disorders. This perception has been analyzed as an element that influences eating disorders. This research reaches three main conclusions: First, the body is considered by professionals as an instrument to stop time when personal identity problems arise, especially when the patient is a woman. Second, professionals perceive their patients' bodies as a responsibility in open conflict with social perceptions seen as something unattainable, ideal, and subject to unattainable parameters. Finally, the perception of the body is guided by social imaginaries in which morality (taboo and sin) and the biological are predominant.

**Keywords:** Body Aesthetics. Perfect body. Eating disorder. Psychological disorder. Eating behavior.

### Introduction

The body plays a major role when it comes to eating disorders (ED) [1]. The body takes the form of a biological structure that, at a certain point in people's lives, can be altered, become sick. This is shown through a deteriorated body, but at the same time, it will do so through an altered self-image and self-concept [2,3].

This altered perception of the body itself is what is "thrown" into the therapeutic and social processes that surround and trigger EDs. A game that takes on a complex structure, and in which both the patient's body and the body of the therapist or social professional participate in some way, as well as the social imaginaries that guide them, and somehow build the perception of the body, both socially and individually [3].

If we return the focus with which we observe the body, in addition to being a biological structure, it can be analyzed as a social entity, we will see a whole series of social processes that determine and influence it. Especially in contemporary, highly complex, and hyperconnected Western societies. In this sense, it will be possible to observe how new technologies and the possibilities of constant and continuous connection endow the media messages of speakers who saturate society with meanings that can influence a person so much that they feel bad about their body, and they can have difficulties in developing a personal identity with which they feel comfortable and recognized, or which, in turn, can determine the change in eating behavior patterns that end up making the pathology wishbone jump **[2]**.

To eating disorders, the operational definition proposed by the DSM-5 will be used, that is, the Diagnostic Manual of the American Psychiatric Association, which defines these disorders as a persistent change in eating or diet-related behavior that leads to an alteration in the consumption or absorption of food and which causes a significant deterioration of physical health or psychosocial functioning, differentiating as types of this type of changes: rumination disorder, eating restriction disorder, anorexia, bulimia, and binge eating disorder. Given the



above, an investigation was carried out to determine the senses linked to the body in professionals who treat and intervene in eating disorders [1,2].

In various cultures and historical periods, corporeality was inextricably linked to the social and cultural. In Western society, education tends to shape our body, already adjusted to the demands and regulations of the environment in which we live, the body acquiring a very relevant function as a cultural mediator. This is how the ideal body image is shaped by the values, beliefs, and aesthetic canons that each society promotes; in such a way that the last decades of the 20th century and the beginning of the 21st century were characterized by a total cult of the body [4]. An exploratory survey of eating disorders showed that 18% of school-age youth, 15% of a group of college students, 41% of overweight adolescents, along with 23.4% of pregnant women attending primary care controls, would be at risk of developing anorexia nervosa and/or bulimia nervosa under certain favorable contingencies; that is, they had a partial or subclinical disorder. In a six-year prospective follow-up of this population, it was found that approximately 40% of the subjects continued to be at risk of developing an eating disorder and, of these, around 27% had a complete nutritional picture [4].

In this aspect, it is necessary to identify risky eating behaviors and the consumption of drugs to lose weight in the development of eating disorders in the search for the "perfect body". Thus, it is necessary to bibliographically analyze the Eating Behaviors of Risk, know the eating behaviors that are at risk for the development of eating disorders, in the search for the "perfect" body imposed by society, evaluate the impact of consumption of weight loss medications and classify the frequency of risky eating behaviors by sex [5].

Adolescents compete to be thinner as a sign of prestige and aesthetics and the control over their bodies that they wish to reflect. The role of prevention from the medical point of view of these disorders is essential, identifying at-risk groups early, establishing nutrition education and school food programs and the practice of healthy physical exercise, widely disseminating information about these affections to family members and the population. in general, encouraging the more selective use of the media that place their attention on the figure, which greatly favors the distortion of body image [6,7].

Therefore, this study aimed to analyze the use of drugs to lose weight and eating disorders.

# **Methods Study Design**

The methodology adopted in this study was based

on a qualitative literary review study. The research process was based on research in various materials by renowned authors in the field of study in question, and the data collection was through digital books, articles, etc.

#### **Data Sources**

The search strategy was performed in the PubMed, Scielo, Cochrane Library, Web of Science and Scopus, and Google Scholar databases, using scientific articles from 2001 to 2021.

### **Descriptors (MeSH Terms)**

The main MeSH Terms used were "Body Aesthetics. Perfect body. Eating disorder. Psychological disorder. Eating behavior", following the rules of the word PICOS (Patient; Intervention; Control; Outcomes; Study Design).

## Development

### **The Construction And Medicalization Of The Body**

The eighteenth century will be the time when the body will be the object of attempts to dominate it to make it docile. It is the moment when the medical gaze that Foucault talks about (2007) [5] appears. The French philosopher says that in this century there is a process that has two faces. At the origin of the process, Foucault (2007) focuses on the problem of the body, that is, an instance that henceforth enters the sphere of politics-biopolitics, to be more exact, as an element to dominate and an object of political management. For Foucault, the body appears as a carrier of new variables: not simply bodies that are scarce or numerous, subjects or insubmissive, rich or poor, valid or invalid, strong or weak, but also more or less usable, more or less susceptible to profitable investments, endowed with a greater or lesser chance of survival, death or illness, more or less capable of effective learning. The biological characteristics of a population thus become relevant elements for economic management, it being necessary to organize around them a device that guarantees their submission and, above all, the constant increase of their usefulness.

Medicine is no longer an individual practice to be a social practice, which leaves things less and less out of its control. At the same time, the clinical dimension of the hospital emerges, that is, "the hospital as a place for training and transmission of knowledge [5]. This clinical dimension revolves around several axes, one of them being the overlapping of the disease in the bodies,



but placing the symptoms in a game of relationships, subordinations, divisions, and similarities, which start to obscure and hide the person's presence. Thus, the physician's gaze does not initially turn to that specific body, that visible set, that positive fullness that is in front of him, the patient; but at intervals of nature, lakes, and distances, where they appear as negatives.

that moment on, medical incorporates the social power of giving certain people the "label" of mental illness with all that it means: confinement, limitation of subjective or social rights, stigma, difficulties to others and isolation, etc. This domain of medicine on the identity and definition of the body ends up permeating the perception of social workers and psychologists, given the social hierarchy of medicine within the organizational scheme of the in the different institutions professions organizations in which these professionals are provided. Regarding the construction of the body, the first to clearly explain the status of the body as a sociocultural construction was Marcel Mauss. Mauss introduces the concept of body technique, defining it as how man, society by society, traditionally uses his body. He is the first to advance that through socialization the way we move, rest and use our body is structured [4].

Still, Bock (2012) [4] says that "We have bodies, but we are also, in a specific sense, bodies; our corporeality is a necessary condition of our social identification, so it would be absurd to say "I arrived and brought my body with me [4]. In short, sociology claims the subject of the body who claims that at that moment it is colonized by the imaginary biologist, as he considers that the body is a matter of special importance for sociological reflection since incorporeality, as stated in the last nomination, the social identity of individuals is at stake. made from sociology, since, according to this sociologist, the body in sociological theory had a furtive and secret history, not none. But Bock (2012) [4] recognizes that the body in postmodernity reaches high levels of complexity, as it presents itself at the same time as the most solid, elusive, illusory, concrete, metaphorical, always present and always distant: a place, an instrument, an environment, a singularity, and a multiplicity.

These initially paradoxical characteristics and traits are explained through the processes that affect the body in contemporary times. If in antiquity or modernity the body was considered a natural entity and for being such it was an anchor to cling to, since, in principle, it would not vary with time, today the body has acquired the character of a culturally operative and living fiction [6]. This means that the body is inserted in a web of

meanings and meanings, which allows its diversification through the application of body modification techniques, and even more, currently allowing body reconstruction in the biological sense (breast enlargement, leg-lengthening to get taller, cosmetic surgeries of all kinds, change of nose, even having the nose of actress x or actor y, etc.) [7].

Faced with the traditional body characterized by its liminal, unified, uninterrupted character that distinguishes us or excludes us from the other, the postmodern body appears characterized as an individual identity element, diversified, interrupted and that can function as an element of connection with others. From this point of view, the body is a structure that is especially permeable to meanings, and it can be used as an instrument to guarantee social order through its construction in different social imaginaries.

Costa (2009) [3] comments that if a superficial look is given to the question of the body in post-modernity, the discourse about it may seem colonized by medicine and biology, but both disciplines would account for official knowledge of a formal nature. dictated by academic bodies of universities; and that it would legitimize the practices of both sciences. This social construction of the body undoubtedly influences therapeutic and social intervention processes. And it is necessary to take into account that the professionals themselves have/are a body and are affected by the social imaginaries of this structure.

#### The Social Imaginaries of the Human Body

It is therefore necessary to look at the body as an inexhaustible reservoir of social imaginary, as, as Greenfeld (2001) [8] points out, the body allows the emergence of imaginaries. Within the theme of social representations, the first analyzes refer to Emilio Durkheim, who started to typify them from the concept of collective consciousness. One of his first concepts was "bringing things to mind". Only until his first book would he have a more concrete concept based on the German psychologist Wundt "a representation is not, in fact, a simple image of reality, an inert shadow cast on us by things; it is a force that causes a whirlwind of organic and physical phenomena around it within the body.

Thus, religion, being the media area where popularity emerges, is structured around a set of beliefs in society. This is why in Durkheim's words, they are mental phenomena that are shared by the main exponents of Durkheim's theory are Moscovici and Denise Jodelet. For Serge Moscovici, social



representations include cognitive, affective, and symbolic contents that play a significant role in the subjects, but also in the organization of the groups they live in and which would have their characteristics, as mentioned by Xavier (2013): Social characteristic of its genesis; Be shared and widely distributed in the community, as a specific way of thinking, feeling and acting in social groups; Internal structure and social processes involved [9].

Therefore, Xavier (2013) [9] analyzes three dimensions of social representations: information, a field of representation, and attitude. As for information, it is related to what the individual knows. This information is collected through individual or collective actions. In other words, the experience that the social groups he interacted with left him. The field of representation is the organization of content, giving rise to ideas or concepts with which there is agreement. Finally, there is the dimension of attitude, which is what the individual feels, be it a favorable or unfavorable orientation. In the words of Moscovici himself "he concludes that we inform and represent something only after having taken a position and based on the position taken". These dimensions serve him well for the human being as a guide to analyze the information obtained, which finally allows him to express himself with a certain sense and property about the reality he perceives.

Maria Laiz Damasceno (2010) [10], another researcher who has carried out works and contributions on the theme of social representations, created it as a definition of social representations that "are a form of knowledge and also a strategy to acquire and communicate it. knowledge." In addition, the author characterizes modern societies as "bombed" firmly by the media. The two mentioned authors agree on these aspects, as they find in the media an affinity in the everyday language of each group. Researcher Damasceno (2010) supports her in Moscovici's theories and emphasizes the deepening of this theory, although there is a high degree of complexity when it comes to theorizing from empirical experiences since the facts proved in the theoretical analysis of social representations through the qualitative method to access the universe symbolic and significant of the subjects.

Still, looking at the theories of imaginaries and representations, it is possible to see the importance of these two issues, because, thanks to these two processes, collective behavior originates, it is important to continue studying and contributing to these two models that are not synonymous, but they complement each other and make use of this useful tool to

understand social reality, and not only understand it, but also intervene in the pursuit of human development [11]. In this sense, it is finally worth mentioning that biological images of the body are rooted in the ideas that Darwin developed. To the point of being able to speak of psychiatric Darwinism that would argue that mental illness leaves marks on people's physical appearance. It is worth mentioning that ideas of this type would be the starting point for Lombroso, who even published a photographic study of the faces of some women who committed a crime. These theories transferred to sociobiology through entomologist E. Wilson, who, in turn, would influence the entire etiology [11].

In the imagination of the sexed body, it can be mentioned that Margaret Mead pointed out that the sexed body of all cultures did not coincide, but that some imaginaries determined the social construction of certain biological-sexual facts. Today theories about the sexual difference between men and women have acquired great complexity. Faced with the traditional dichotomy of man and man, others currently overlap, forcing what has been called heteronormativity. Different sexual orientations come into play, amplified by new phenomena: heterosexuality, homosexuality (and their different manifestations: bears, daddies, kittens, otters, wolves, etc.), bisexuality, asexuality, polysexuality, etc. and to that are added transvestite, transsexuality, and different sexual tastes: sadism, masochism, different fetishisms and new situations or configurations such as different masculinities [12].

In this context, as Shore (2011) **[13]** points out: "The moral and physical qualities attributed to a man or a woman are no longer inherent to the attributes of the body, they belong to the social meaning that this gives them and the norms of behavior that this implies.

# The Use of Marketed Products for Weight Loss and Its Risks

Currently, there are beliefs and perceptions about the effect of food on the body and, consequently, on body image. Thinness, obesity, vigor, strength, skin appearance, hair, and beauty care products of the type and quantity of food and constitute an element that comes into play when choosing what to eat. The culture of "weight loss", combined with social pressures and fashions, has contributed to the unnecessary increase in adherence to diets that are harmful to health, especially among women. The ideal of a very slim body figure proposed by today's culture is impossible for most to achieve. This generates dissatisfaction and guilt and generates strategies that aim to reduce weight and



body volume, but which sometimes prove to be counterproductive, such as frequent and poorly oriented diets. When individuals are on diet regimens to lose weight, unattainable goals are often set for themselves. Diets become popular the faster pounds are lost [14]. This new food awareness has also reached women and men in rural areas of the country. The fashion industry, manufacturers of slimming products, diet foods, and beverages, the messages contained in presentations of these products, publishers of books and magazines on diets, and experts in "magical" diets to lose weight, among many other factors, have reached various communities of the country and transformed food practices and representations, as well as its language. Now, women are also concerned about their figure, contrary to what appears in research carried out between the 50s and 80s [14].

This qualifier refers to diets that, without any scientific basis, claim to have unproven qualities that are not consistent with current knowledge of the Science of Nutrition. They promise quick weight loss through easy-to-follow dietary guidelines, are different from what the person has tried before (and likely failed) and are often promoted with the addition of being "natural", totally safe and without health risks. While any diet and probably the most unbalanced ones can give short-term results, they don't seem the most convenient from a nutritional point of view and can be risky from a health point of view and difficult to maintain for long. time, which means that its effectiveness can be questioned [141].

Still, Modesto (2020) [15] defines miraculous products as those that are characterized by exalting one or more therapeutic qualities, aiming to eradicate evils. They are made with plants, nutrients, synthetic products and other ingredients that generate effects that are still unknown and that have pharmacological action without being medication. Its advertising is associated with the fraudulent promotion, distribution or sale of articles that are shown to be effective in the diagnosis, prevention, cure, treatment or eradication of a disease, without their effectiveness and safety having been scientifically proven. It is worth mentioning that the so-called "natural" products are accessible to the population and are usually accompanied by large marketing campaigns that publicize their enormous advantages, although their quality, safety and efficacy have not been proven. Most products marketed as weight loss aids contain medicinal plants in their composition, which the patient demands directly, without adequate professional guidance, just because they have heard or read their hypothetical beneficial

effects.

Besides, food supplements, in turn, are herbal products, plant extracts, traditional foods, dehydrated or fruit concentrates, with or without vitamins or minerals that can be presented in the pharmaceutical form and whose purpose is to increase the total food intake, complement it or supplement some of its components [15]. There is a tendency to believe in the safety and effectiveness of medicinal plants. In the case of weight-loss products, their preference seems to be linked to the difficulty of sustaining a change in lifestyle that includes a high-fiber diet and more time spent on physical activities.

As part of the phenomenon of advertising of various products, especially food supplements, and the impact and risk that their dissemination implies, National Council for Advertising Self-Regulation defined as one of its five priority projects the regulation of products called miracle products. An important fact to highlight is the fact that many diet pills are not properly regulated by any institution, such as the FDA, Food and Drug Administration, in the United States. In addition, some companies of this type of medication have been sanctioned for misleading advertising, and the truth is that this happens all over the world.

Also, many diet pills have been researched and the truth is that in most cases they are not very likely to help you lose weight. Some pills created from herbs and natural sources do not precisely help to burn fat. Therefore, the individual may be losing money instead of calories. In some cases, diet pills can cause problems with the digestive system because they contain fat blockers that decrease nutrient absorption, which can cause diarrhea, abdominal pain, or stomach inflammation. Even its long-term ingestion can cause worse side effects than those already mentioned [14].

Possibly those who take this type of medication run the risk of having bad eating habits and suffering from heart disease, but perhaps taking diet pills increases the risk of heart attack and of suffering a cardiovascular accident or stroke. This is because the stimulant components are found in most of these drugs that are not endorsed. In some cases, these diet pills are simply a combination of caffeine and other diuretics that cause water loss. What may look good at first can eventually cause signs of severe dehydration. The truth is that the main risk of diet pills is that they are expected to function as a method of losing sizes and possibly believe that this is the only solution to losing weight [15].

### **Sociocultural Theories of Body Image Disorder**

Sociocultural theories establish that the body



aesthetic ideal proposed by society and disseminated by the media is internalized by most women in Western culture due to the high dependence between self-esteem and physical attractiveness. The prevailing body aesthetic ideal currently advocates that "being beautiful is equal to being thin", which is often biogenetically difficult to achieve, facilitating the discrepancy between real and ideal body size, generating body dissatisfaction. Thus, internalization acts as a central component in the development of body dissatisfaction that occurs early in some girls [9].

During the last 50 years, socioeconomic and nutritional conditions have changed dramatically in all industrialized countries. As a result, there has been a sharp increase in the prevalence of obesity. Simultaneously, social and cultural pressures to maintain a slim body silhouette have increased significantly. These social pressures are based on the exercise of body control favored by a wide range of diet products, gyms, and countless weight loss methods, which are persistently offered in the market. The shift, therefore, from a willingness to keep the line to an eating disorder is very subtle and pervasive [9]. After the second half of the 20th century, the notion of "modern woman", white, executive, and avant-garde, emerged. The precept of freedom, saving time and technological access was configuring this profile, in addition to personal identity, posture, and social condition, which became institutionalized as a norm, producing unreal bodies, where women's boundaries between the natural and the artificial are confused. A clear example of this fiction is the almost childlike size of women's clothing.

# Factors Related to Body Image Disorders in Eating Disorders

Changing the perception of body figures in eating pathologies involves several biopsychosocial aspects. Sociocultural factors constitute one of the fundamental aspects in the development of bodily stereotypes. Among the inherent attributes that society and culture possess are fundamental: 1) The cultural model of beauty in our contemporary Western society; 2) aesthetic standards; 3) Social class; 4) The world of modeling; 5) The media; 6) Advertising and 7) The narcissistic cult of the body [16].

Human culture, characterized by a vertiginous development of communication and consumption, seems to favor the constant bombardment of advertising messages aimed at creating, exhibiting, and perpetuating an ideal archetype of beauty that must be achieved. A social environment was formed in which the

physical aspect is constantly evaluated, to the detriment of other spiritual and/or intellectual attributes. The coercion of the media is so ambiguous - because it confuses and overlaps the concepts of beauty and success, and at the same time so powerful that it is very difficult to ignore it; above all, for those women who belong to the so-called risk groups, in which the slender body stands out, such as models, gymnasts, dancers, adolescent women and young adults [16].

The disturbing and sustained increase in eating disorders appears to be related to a society in which the body is used as a passport to social status, and the slim figure is positively valued as synonymous with success, power, value, attractiveness, and intelligence. At the same time, our culture negatively equates fat with disease, ugliness, laziness, deficiency, and inefficiency, and discriminates against overweight or obese individuals. Implicitly and explicitly, the message is transmitted building the notion of thinness as an axiomatic, authentic and irrefutable value, as its main objective, as a body model to be pursued - often in anorectic and bulimic patients at all costs -, becoming thus an overrated transcendental idea. In other words, being slim is being a competent, self-sufficient modern woman. On the contrary, not being thin, gaining weight, losing control of weight, means failure, lacking the ability to please, to achieve the proposed goals, and to be successful [16].

In the view of Costa (2009) [3], a greater degree of urbanization seems to increase the probability of an eating disorder, as it would lead to greater exposure to the ideal of thinness by the media, as it promotes changes in eating habits, sedentary lifestyle and a greater number of overweight and obese people. Aesthetic stereotypes tend to spread downwards in complex societies, that is, from the upper to the lower classes. In more developed societies, there is an inverse relationship between social class and obesity. Silva (2011) [17] found that 11.6% of the lower-class female adolescent population was obese, while in the upperclass it was only 5.4%. In this context, it is highlighted that the relevance of appearance and the ideal of thinness- previously considered exclusive to the upper classes - came to occupy a fundamental place at all socioeconomic levels.

Traditionally, it was believed that eating disorders were limited to a group of young, white women, belonging to a high social class, living in rich countries, a phenomenon that has been denied by the growing number of reports of these pathologies in developing countries and different ethnic groups. The field of fashion, including seamstresses, stylists and



seamstresses, plays an important role in women's concern with revealing or hiding the body. The models are protagonists in the dissemination and exhibition of the predominant patterns of body silhouettes, which massively affect adolescents and young people in particular. Experts point out that between 20% and 30% of these girls suffer from eating disorders. The socalled supermodels currently represent a paradigm of autonomy, social success and self-determination, versatility and versatility, arising from the use of the body, which also has implications for gender relations [18]. In his study on this topic, Takahashi (2020) reviewed the weight and height of models, candidates and winners of the Miss America pageant from 1959 to 1978 and found not only a decrease in weight of 3.4 kg, but also in dimensions. of breasts and hips. Furthermore, she replicated this study and deduced that weights not only decreased between 1979 and 1988, but that they are between 13% and 19% below normal healthy weight.

## The Media and the Culture of the Image

The media promotes an ideal of thinness that generates body dissatisfaction. The standards of beauty disseminated by these women and by social life seem to have a shocking effect on women. Television seems to be the means of communication with the greatest impact on the dissemination of values and standards related to the aesthetics of thinness. In her study, Damasceno (2010) [10] addressed the characteristics of men and women who appeared on television for one month (139 men and 82 women), finding that 69% of women entered the classification of "very thin" which only it happened in 17.5% of the men who appeared on the screen. To obese television, men constituted 25.5% and women 5%. On the other hand, 35% of women were under 26 years old, while in the case of men only 16% were of that age. Therefore, the model provided by television is that of the extremely thin and young woman.

Media images reinforce an ideal dichotomously qualifying it as acceptable or unacceptable: the fat/thin, the beautiful/the ugly, the modern and the obsolete, the appropriate and the inappropriate, the feminine and the masculine, etc., and that often affects self-esteem, as well as cinema, photography, reports on weight-loss methods help to determine the state of opinion and body evaluation. Gonçalves' (2013) [19] research on biological, familial, and psychological contributions to the onset of eating disorders places a significant responsibility on advertising for its potential impact on establishing identification models.

In this sense, we analyzed the advertising related to thinness, published in 10 women's magazines with great circulation in Spain, and observed that one in four advertisements directly or indirectly invited people to lose weight. Another study showed that only 9% of commercials bring a direct message about beauty, but many of them implicitly emphasize its importance and, in particular, the feminine, especially girls and women [19]. Another analysis found that 56% of commercials aimed at young women on television and 57% in women's and fashion magazines talked about beauty. In this sense, these authors mentioned research from the period (2005-2011) that highlighted that women's magazines contained 10.5 times more articles related to diet and weight loss than men's magazines.

### The Narcissistic Cult Of The Body

Some authors point to the narcissistic obsession with the body aimed at aestheticism and consumption. Thus, the body itself became a symbol of status, youth, health, energy and mobility as it was disciplined by proper diet and exercise. Currently, perfect body control is achieved through the promotion of self-control and discipline, cultivated mainly in the areas of nutrition, physical exercise and sports, aesthetic care and sexuality. The relevance attributed to the body is mainly reflected through the media, the world entertainment, leisure, sport and advertising, instances that attribute to it certain qualities such as youth, beauty, a sense of hygiene, seduction and sporty appearance and that usually is discordant and far from usual [19].

Cosmetology and cosmetic surgery - favoring the emergence of increasingly frequent body dysmorphic disorders - are becoming more and more widespread. Furthermore, there are now many different food products, in addition to the enormous proliferation of technologies and diets. In addition, physical exercise has given rise to an entire industry - very profitable with devices, various techniques, videos, clothing and additional treatments. Likewise, a self-esteem is cultivated, highly focused on work, performance and production. At the end of the 20th century and beginning of the 21st century, the fantasy and sensuality of the female body are promoted through tattoos, piercings - a technique that transforms parts of the body into erotic and aggressive jewelry; the brandthe burning iron-marked skin, procedures that involve, by a kind of masochistic pleasure, self-punishment or a form of protest [2].

Today, the manipulation of the body has become more compulsive and institutionalized as a norm,



producing unreal bodies with totally blurred boundaries between what is natural and what is not. These unrealities are manifested in almost child-sized clothes for an eternally adolescent body, and in the cyborg body, - a cybernetic organism, a hybrid of machine and organism, a creature of social reality as well as fiction - manipulated, intervened, transformed, computerized, in that growth or aging is not noticed, that it follows the trends of globalization and that places us in the aesthetic categories of ugliness, the grotesque 40 and the cartoonist [2].

### **Conclusion**

The forms of historical configuration of the body evidenced in the imaginaries and social are representations, not corresponding to a single concept because they are the result of a social production oriented towards associating a state of affairs; realities, situations and contexts, which make the concepts of the body divergent and polysemic, although the imaginary as a subjective construction assumes its validity in the social representations where its objectivity is materialized. In the remotely controlled and screened society of the spectacle, the constitution of woman as an object should not surprise us. Object of contemplation constructed, on and around his body, by the media and social networks that act as generating instances of new imaginaries and social representations, as the research subjects say, due to the constant "bombing" that saturates our society. The problem arises when utopian and unattainable canons are established and are beyond perfection. All of this can cause the desire to become that image that we use as telos of our vital action or our vital project, to bring out the pathology or disease constructed from hegemonic discourses. The professionals' body perception appears determined and informed from a visual imaginary, which guides a perception that oscillates between the body as a structure absent from the professionals' perception, and the body reduced to an unattainable image, pattern or rate. Something that is not touched, that is taboo and sin; something that defines us, but beyond the real, something situated on the utopian levels of the human being, something without a place. Thus, we find the body as a physical, biological, medicalized structure, that is, the body as an object; vis-à-vis the body as a social construction mediated by the action of the media and which makes the body an identity and individual problem for people (more precisely for women). It is concluded that all of this generates the perception that there is a feeling of malaise inherent in women's psychology, a feeling of malaise caused by their body,

which can make some people feel like reversing the advance of the clock, to get your body fades or the possibility of living without any body, to finally disappear from yourself.

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# **Data sharing statement**

No additional data are available.

### **Conflict of interest**

The authors declare no conflict of interest.

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