

WHEN THE BOUNDARIES EXCEED: THEMATIC ANALYSIS OF ANOREXIA
NERVOSA IN LACANIAN PSYCHOANALYSIS

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ABSTRACT

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The present study intends to examine the dynamics between the anorexic subject and the Big Other and explore the significance of anorexia nervosa for the individual through the lens of Lacanian psychoanalysis. Semi-structured interviews were conducted with five women diagnosed with restrictive type anorexia nervosa. The questions “How do we position anorexic subjects in their relationships with significant others?”, “How is family dynamics in anorexia nervosa?” and “What is the meaning of anorexia nervosa for the anorexic subject?” formed the basis of these interviews. A theoretical reflexive thematic analysis approach was utilized, and four main themes were generated from the data. The themes were “*all-knowing and has everything: Inseparable (m)Other, between presence and absence: the father, power of the gaze: am I ideal, to be or not to be: striving to “exist.”*” The result of the study was discussed in light of the associated literature and clinical implications.

Keywords: Anorexia Nervosa, Lacanian Psychoanalysis, Reflexive Theoretical Thematic Analysis

ÖZ

SINIRLAR AŞILDIĞINDA: ANOREKSİYA NERVOZA’NIN LACANYEN PSİKANALİZ KAPSAMINDA İNCELENMESİ

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Güncel çalışmada, anoreksik öznenin Büyük Başka ile olan ilişki dinamiklerinin ve anoreksiya nervozanın özne için öneminin Lacanyen psikanaliz perspektifinden araştırılması amaçlanmıştır. Kısıtlayıcı tip anoreksiya nervoza tanısı almış beş kadınla yarı yapılandırılmış görüşmeler gerçekleştirilmiştir. Görüşmeler “Anoreksik özne, Büyük Başka ile olan ilişkisinde nasıl konumlanmaktadır?”, “Anoreksiya nervozada aile dinamikleri nasıldır?” ve “Anoreksiya nervozanın, anoreksik özne için anlamı nedir?” sorularının üzerine inşa edilmiştir. Yapılan görüşmeler, teorik refleksif tematik analiz yöntemine göre analiz edilmiş ve dört ana tema oluşturulmuştur. Temalar, *her şeyi bilen ve her şeye sahip olan: Anne, varlık ve yokluk arasında: Baba, bakışın gücü: ideal miyim, olmak ya da olmamak: Olma çabasıdır*. Bu bulgular ilgili alan yazın ışığında ve klinik uygulamalar çerçevesinde tartışılmıştır.

Anahtar Kelimeler: Anoreksiya Nervoza, Lacanyen Psikanaliz, Teorik Refleksif Tematik Analiz

To my beloved family...

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CHAPTER 1

INTRODUCTION

1.1. Overview

This presenting study examined the relations and experiences of young Turkish females diagnosed with anorexia nervosa during adolescent years via theoretical thematic analysis (Braun & Clarke, 2006). Subsequently, it explicated these findings through a Lacanian framework. This chapter will provide a concise overview of anorexia nervosa with references to pertinent literature, and will also furnish information concerning the researcher's rationale and objectives for undertaking this study.

1.2. General History of Anorexia Nervosa

Voluntarily self-starvation has a lengthy history. In ancient Greece and Egypt, individuals engaged in short-term fasts to deprive themselves of sustenance (Bemporad, 1996). During the 13th and 16th centuries, a more extended form of fasting emerged, called Ascetic-mystic fasts. These fasts were undertaken with the express aim of spiritual purification, as adherents believed that their souls and bodies could be purged of impurities through abstention from sustenance. The objective of these fasts was to rid oneself of all sins and divest oneself of all material desires, thereby facilitating a closer relationship with the divine (Dell' Osso et al., 2016). For this purpose, early Christian monks, Chinese Daoist priestesses, and Italian nuns engaged in such practices. In this context, it can be said that Saint Catherine of Siena is the most famous of these people, who lived in the late medieval period. Renouncing worldly pleasures, St. Catherine removed herself from society and took a vow of celibacy. In addition to fasting, she cut her hair as a symbol of detachment from her feminine appearance. Ultimately, her devotion to her cause led to her

demise, passing away at 32 due to malnutrition (Habermas, 2015). Bell (1985) suggests that modern-day anorexics share similarities with the historical holy anorexics' renunciation of social ties, denial of their sexual maturation, and self-starvation under pressure (cited by Özbek Şimşek, 2019). However, the anorexic nature of individuals who starve themselves for sacred reasons is disputed since anorexia nervosa is not solely characterized by a loss of appetite. Instead, anorexia nervosa involves a distorted body image, a fixation on thinness, and a strenuous attempt to conform to sociocultural aesthetic standards (Behar & Arancibia, 2015). The motivation behind the intentional self-starvation by holy anorexics was not to achieve thinness or underweight but to attain spiritual purification by abstaining from food consumption. Also, it is widely known that those who 'miraculously' survived without eating were deemed pious and even rewarded by the Church during that era. Nevertheless, as the Church's view on miracles changed, holy anorexia eventually ended in the 16th century since sustaining life without food was acknowledged as impossible. Therefore, to accept anorexia nervosa as a significant issue, it was imperative to recognize the impossibility of sustaining life without proper nourishment (Habermas, 2015).

During the 16th century, as cultural and social norms evolved, there was a noticeable shift in the demographic of individuals engaging in self-starvation. It is thought that anorexic behavior became linked to hysterical conversion. It was observed primarily in young girls of middle-class background who were often passive in nature and still living with their parents (Cosenza, 2016). Appearance and body image held great significance for these individuals. This demographic change refers to a departure from the previous association of self-starvation with religious asceticism (Habermas, 2015).

Richard Morton's definition of anorexia nervosa, first presented in 1694, is widely considered as the earliest comprehensive definition of the condition in modern terms. This definition included symptoms such as loss of appetite, cessation of menstrual periods, food avoidance, and emaciation. It posited that anorexia nervosa is caused by a disease of the brain and nerves (as cited by Pearce, 2004). Robert Whytt advanced an alternative conception of anorexia nervosa in 1776, attributing the

disorder to the derangement of gastric nerves (as cited by Silverman, 1987). Presently, anorexia nervosa manifests in various ways, including a dread of gaining weight, a compulsion to engage in excessive physical and mental exertions to uphold thinness, refusal to acknowledge thinness and illness, and covert conduct aimed at concealing the condition in the service of maintaining thinness (American Psychiatric Association, [APA], 2013). The definition of anorexia nervosa, as it is understood today, can be traced back to the work of William Gull and Charles Laségue in the late 19th century. Gull, in particular, employed the term "anorexia nervosa" to characterize a disorder that impacted metabolic processes and featured psychological elements. The patient profile, according to Gull, was largely limited to young adolescent girls. Notably, Gull concentrated on the disease's observable physical and behavioral manifestations (as cited by Pearce, 2004). In contrast to Gull's focus on physical and behavioral symptoms, Laségue's conceptualization of anorexia nervosa was more influenced by a psychoanalytic perspective, emphasizing the psychological elements of the disease. He coined the term "anorexia hysterique" and observed that individuals with the condition often exhibit self-doubt and a desire for external validation (Silverman, 1997). Undoubtedly, reaching the present definition of this affliction has not been easy. The name of the disease added to the confusion "Anorexia" is a Latin word for loss of appetite. However; anorexia nervosa does not include self- starvation only. In this context, while some experts viewed the illness as nothing more than an eating disorder, others, influenced by psychoanalytic principles, made a concerted effort to apprehend its true nature. This was done by focusing on the symptoms, patient histories, subjective experiences, and psychological effects. Through this intense scrutiny, the current definition of the disease was eventually established (Habermas, 2015). The following section will delve into the current definition of the disease, its clinical characteristics, and how it has evolved.

1.3. Anorexia Nervosa in Diagnostic and Statistical Manual of Mental Disorder and Clinical Features

The concept of eating disorders is a comparatively recent phenomenon. While intentional starvation has been present throughout history, it wasn't until the 17th

century that it began to be acknowledged as a distinct condition (Habermas, 2015). However, the occurrence of eating disorders remained relatively uncommon until the 20th century. The progression from anorexia nervosa to other eating disorders such as bulimia and binge eating disorder, and more recently, the inclusion of obesity, has led to a significant impact on a larger segment of the population (Cosenza, 2016). In the following section, our attention will be devoted specifically to the history of anorexia nervosa as a disease.

Anorexia nervosa was first recognized as a psychogenic disorder in the Diagnostic and Statistical Manual of Mental Disorder, DSM-1 in 1952, albeit without detailed symptomatology or placement under any specific category (APA, 1952). This can be attributed to the fact that anorexia nervosa was rarely seen as a black swan before the 1960s. It wasn't until the latter half of the 1960s that anorexia nervosa began to manifest alarmingly. It was discussed for the first time at the 1965 Psychiatric Congress, and was accepted that it was not a purely neuroendocrine or nutritional condition. Psychoanalysts Hilde Bruch and Mara Selvi Palazzoli carried out pioneering studies in this context. They added the adjective "nervosa" to the name of the disease to emphasize that anorexia is not just a nutritional disorder but is also related to a mental state (Cosenza, 2016). Consequently, it was included as a "symptom" under the category of special symptoms of feeding disturbances in the DSM-II published in 1968 (APA, 1968). In the 3rd edition of the DSM, published in 1981, it was formally acknowledged as a distinct disorder and was listed under the heading of children and adolescence disorders (APA, 1981).

During the mid-1970s, anorexia nervosa became increasingly prevalent among young college women from affluent and upper-middle-class backgrounds in developed countries such as the United States. This rise in prevalence could be compared to the widespread drug addiction that affected a similar demographic in the 1960s (Cosenza, 2016). At the time, the DSM attempted to link this disorder to ethnicity. In the DSM-IV's appendix published in 1994 (APA, 2000) anorexia nervosa was classified as a culture-bound syndrome specific to developed Western countries (Bemporad, 1996). While it is now evident that anorexia nervosa is a

global phenomenon, the classification was contentious at the time. According to reports, anorexia nervosa has been found to be prevalent not only in the United States, Canada, Europe, and Australia but also in Japan in these periods (Prince, 1983). Therefore, some sources suggest that the disorder is not related to ethnicity but rather to capitalism, a common feature of these countries. In this regard, Cosenza (2016) argues that anorexia nervosa is a natural consequence of a system created by capitalism, which compels individuals to seek pleasure constantly and objectifies them.

With the introduction of the DSM-IV, it was acknowledged that two distinct disorders fell under the category of eating disorders (APA, 1994). The first disorder is characterized by excessive food consumption and is known as binge eating. The second disorder is bulimia nervosa, which involves binge eating followed by purging through self-induced vomiting. As a result, these disorders were no longer classified as childhood or adolescent disorders. Instead, they were assigned their own distinct classification within the domain of eating disorders, separate from anorexia nervosa (Cosenza, 2016).

In 2013, the publication of the DSM-5 resulted in merging the categories of childhood and adolescent eating disorders with that of adult eating disorders, creating an all-encompassing classification. As for the definition of anorexia nervosa, it was subsequently formulated in the following manner:

- “A. Restriction of energy intake relative to requirements, leading to a significantly low body weight fit in the context of age, sex, developmental trajectory, and physical health. Significantly low weight is defined as a weight that is less than minimally normal or, for children and adolescents, less than that minimally expected.
- B. Intense fear of gaining weight or of becoming fat, or persistent behavior that interferes with weight gain, even though at a significantly low weight.
- C. Disturbance in the way in which one’s body weight or shape is experienced, undue influence of body weight or shape on self-evaluation, or persistent lack of recognition of the seriousness of the current low body weight.” (APA, 2013).

Upon examining these standards, it is conceivable to suggest three primary components compose anorexia nervosa. Foremost among these is the fact that the

individual in question is notably below the weight corresponding to their age and height, achieved by limiting the amount of nutrients and calories needed for the proper functioning of their body. The second factor necessitates that the individual experiences apprehension regarding weight gain or fat accumulation, thus resulting in behaviors that impede weight gain. In essence, the diagnostic criteria for the disorder encompass not only intentional self-starvation but also an overpowering dread of gaining weight. Within the context of anorexia nervosa, the apprehension surrounding gaining weight remains despite weight loss. On top of the first two criteria, there must exist a disturbance in the individual's perception of their physical appearance and bodily condition that is disproportionately focused on weight. The individual must place excessive importance on their weight and be unable to acknowledge their situation's severity and underweight state. Some anorexia sufferers believe they are generally overweight, while others assert that specific body parts, such as the abdomen, buttocks, and thighs are cumbersome. As a result, these individuals may frequently scrutinize these areas in the mirror, with their self-confidence directly linked to their physical appearance. Apart from the symptoms mentioned above, anorexia nervosa has two subtypes. The first is referred to as the "restrictive" subtype, characterized by the person eating very little or following a rigid diet, along with frequent exercising. For the diagnosis, it is crucial to consider the absence of binge eating, vomiting, and the use of laxatives or diuretics in the preceding three months. On the other hand, the second subtype is termed "binge eating/vomiting," which necessitates the presence of at least one episode of binge eating followed by purging within the past three months, either through vomiting or medication use (APA, 2013).

When assessing weight loss in anorexia nervosa, it is essential to consider factors such as age, gender, height, and developmental stage. To measure weight loss, the DSM recommends using the body mass index (BMI), a measurement unit that shows the ratio of height to weight. The World Health Organization provides criteria for the minimum BMI for a healthy adult, which is 18 kg/m². In assessing anorexia nervosa, a BMI value greater than or equal to 17 kg/m² is considered non-severe underweight. A BMI value between 16.00 and 16.99 kg/m² is accepted for moderate underweight,

while cases with a BMI of 15.00 and 15.99 kg/m² are classified as severe underweight. Individuals who have a BMI below 15 kg/m² are classified as being in the category of "extremely underweight" according to the guidelines set forth by the World Health Organization. When evaluating children, it is recommended to utilize the percentage value of the BMI measurement (APA, 2013).

1.4. Anorexia Nervosa in Psychoanalytic Literature

The process of diagnosing anorexia nervosa, which began with Morton (1694) and solidified with Gull (1874), primarily focused on attributing its causes to organic factors (as cited by Pearce, 2004). However, in the 1930s, a few pioneering psychoanalysts started to propose the idea that unconscious conflicts and desires played a significant role in the development of eating disorders, particularly anorexia nervosa. These ideas were largely influenced by the theories of Sigmund Freud, although he did not explicitly address the treatment of eating disorders in his works (Caparrotta & Ghaffari, 2007). Nonetheless, references to eating disorders can be found throughout Freud's writings, and his perspectives on the symptoms of eating disorders evolved over time (Habermas, 2015). This section will delve into the progression of Freud's ideas and the psychoanalytic interpretations of anorexia nervosa.

During this early phase, Freud made connections between certain eating disorders and unconscious childhood fantasies (Caparrotta & Ghaffari, 2006). In 1893, he first mentioned a patient whose condition he referred to as "mental anorexia". This patient, Frau Emmy von N, was a young hysterical mother who displayed behaviors of consuming minimal amounts of food and either retaining or discarding it. Freud employed hypnosis during the treatment of this patient, and while under hypnosis, she linked these behaviors to distressing memories from her childhood. The patient recounted experiences from her childhood, revealing that she was compelled to consume unappetizing and hardened food against her will. She expressed that she faced threats of punishment if she refused to eat. Furthermore, Frau Emmy von N shared that she had to share a table with ill family members who displayed repulsive behaviors, and she was prohibited from expressing her feelings of disgust in their

presence. Freud attributed the patient's distress to unresolved emotions stemming from these traumatic events. This emphasis holds significant importance as it highlights that the refusal to eat cannot be solely attributed to organic factors. In the same text, Breuer also connected the anorexic behavior of a young boy to past traumatic experiences. In this regard, Freud asserted that every neurosis observed in adults actually originates from a neurosis that developed in childhood but may not have been prominent or recognized at the time. Specifically concerning eating disorders, Freud suggested that an unacknowledged disturbance in appetite during childhood could potentially contribute to a predisposition for anorexic behavior later in life (Freud & Breuer, 1893/2013).

In 1895, glimpses of eating disorders can be found in the drafts Freud wrote to his friend Flies (Freud, 1897-1904/1985). During this period, Freud drew a connection between eating disorders and melancholia. Describing melancholia as a state of loss, he regarded anorexia nervosa as a form of melancholy that arises from an underdeveloped sexuality. Freud observed that individuals with anorexia nervosa refrain from eating without any specific reason, indicating that their lack of appetite is not solely due to a natural loss of hunger. He connected this loss of appetite to a decrease in libido within a sexual framework. Essentially, in the context of melancholia, the loss of libido parallels the loss of appetite in anorexia nervosa (Freud, 1887-1904/1985). Freud further reinforced these concepts through the case of Dora, where he noted a similar pattern of appetite loss following her interaction with Herr K (Freud, 1905/1953; Saklı-Demirbaş, 2021).

In 1899, in a letter to Flies, Freud made a connection between psychogenic vomiting and self-starvation, attributing them to an unconscious fantasy of oral pregnancy. In a related case, he described this symptom as a conflict between the fulfillment and inhibition of desires. According to Freud, the act of vomiting is not only a manifestation of an unconscious fantasy but also a point where the unconscious defense mechanisms become compromised (Freud, 1887-1904/1985).

In 1905, Freud published his work "*Three Essays on the Theory of Sexuality*", which laid the foundation for psychoanalytic explanations of anorexia nervosa that would

be developed after him. In this text and his subsequent works, Freud proposed that nutrition and sexuality are interconnected, and their separation occurs during the weaning process (Freud, 1905/1953). He highlighted the significance of the oral phase in early psychosexual development, where sexual activities and food intake are not distinct but rather intertwined. Freud interpreted the refusal of food in anorexia nervosa as a hysterical symptom associated with Oedipal conflicts and an expression of sexual aversion. In the post-Freudian era, eating disorders, particularly anorexia nervosa, came to be understood as a result of conflicts between unconscious desires and wishes, and the symptoms were approached within a symbolic context (Farrell, 1995).

1.5. Anorexia Nervosa in Lacanian Theory

Throughout his career, Lacan had made several references to anorexia nervosa in his writings and lectures (Cosenza, 2013). His understanding of anorexia nervosa evolved over time in conjunction with the development of his theoretical framework. In this section, we will examine Lacan's works on anorexia nervosa, taking their historical and contextual similarities into account, and supplementing them with the insights of Lacanian psychoanalysts.

1.5.1. Anorexia Nervosa on “Family Complexes in the Formation of the Individual”

Lacan firstly mentioned anorexia nervosa in the 1938 writing “*The Family Complexes in the Formation of the Individual*” (Lacan, 1938/2006a). At the time of writing the article, Lacan was working as a psychiatrist, but had not yet begun practicing psychoanalysis. Despite this, it is evident that Lacan was heavily influenced by the works of Sigmund Freud and Melanie Klein during this period (Cosenza, 2013). In his 1938 text, Lacan places psychoanalytic complexes such as weaning, intrusion, and the Oedipus complex, which occur prior to subject construction, at the core of the text (Lacan, 1938/2006a).

Lacan focuses on weaning, defined as a crisis of the psyche. According to Lacan, weaning leads to permanent traces in the human psyche for interrupting biological relationships. However, Lacan also emphasizes weaning is primarily related to cultural pressure. This physical crisis initiates a psychic crisis and it has to be solved with the dialectical structure. Thus, weaning is either accepted or refused. In anorexia nervosa, the subject refuses to wean, which results in the maternal imago's fixation (Lacan, 1938/2006a). In other words, anorexic pathology manifests nostalgic regression, including failure to go through the Oedipus complex and effort to merge with the object of primary jouissance, the mother (Cosenza, 2013).

Fixation of maternal imago is related to an appetite for death, and weaning has the original form of the psychic tendency towards death. In this context, non-violent suicides like anorexia nervosa, oral addictions leading to a slow death, and the starvation diet of gastric neurosis are special examples of efforts to rediscover maternal imago. This relationship can be seen clearly in cultural burial practices; death means a return to the mother's womb in according to ancient theology and psychoanalysis (Lacan, 1938/2006a). In this context, anorexic pathology can be called an appetite for death which results from efforts to return to maternal imago and it includes a parallel with Freudian melancholy (Cosenza, 2013).

Also, Lacan emphasized the decline of the paternal imago in this text. Anorexia nervosa is always remembered with relationships issues with the mother, and the fathers are always playing second fiddle. Lacan mentioned the "social decline of paternal imago" in modern civilization (Lacan, 1938/2006a). In this context, it can be said the decline of the paternal imago leads to issues with completing the Oedipus complex and "to repeat indefinitely the effort to get rid of the mother" in anorexia nervosa (Cosenza, 2013).

1.5.2. Anorexia Nervosa on "The Direction of Treatment and the Principles of its Power"

Lacan's second discussion about anorexia nervosa takes place in the 1958 writing "*The Direction of Treatment and the Principles of its Power*" (Lacan, 1958/2006b)

and the fourth seminar “*Object Relations*” (Lacan, 1956-1957/2020). Since the period in which these works emerged was very close to each other and fed from each other, they will be discussed together. These texts have a more solid Lacanian framework than an article from 1938. In these texts, Lacan built the framework of “unconscious structured as a language” and discussed the symbolic register, Name-of-the-Father, and field of the Big Other in the psychoanalytic treatment (Cosenza, 2013). In the following section, the concepts mentioned in this text are discussed by enriching them with further and later readings.

1.5.2.1. Exert to degradation of desire to the register of need

In these texts, Lacan notes that anorexia nervosa is a subjective position as regards the choice of the subject rather than a malfunction with appetite (Lacan, 1958/2006b). Lacan distinguishes between the concepts of desire, demand and need, and clarifies that the subject has to demand in order to express their biological needs, yet there is another distinction between need and demand. According to Lacan, every demand is also an unconditional demand for love. Under this context, the subject’s demand for unconditional love can never be fully actualized, even if the subject unveils their needs, and makes a demand and the Other has provided the object which the subject needs. Due to the lack of the Other, the Other will never be able to respond to the subject’s request for love. According to Lacan, the lack, which emerges from the separation of need and demand, constitutes desire. In other words, the subject may desire due to the lack arising upon the demand of the subject (Lacan, 1956-1957/2020). However, according to Lacan, the Other, with whom the anorexic subject is in a relationship, does not regard the subject as a subject who desires and tends to meet all the needs of the subject with utmost enthusiasm, including the subject’s demand for nurturing and primary needs. In this sense, the Other, who tends to meet all the needs of the subject in an excessive manner, does not leave any space for the subject to demand their need and therefore cannot respond to the demand of the subject with their desire (lack). In such a case, the capacity of the subject to separate their need from their desire does not get to be formed (Recalcati, 2010). According to Melman, the signifier of castration is lacking, and this lack

arises when the Other fails to satisfy what the subject demands. This situation is requisite for the child to desire as a subject by cutting the jouissance received from their relationship with the Other who does not hold any lack (Melman, 2009). However, in this context, the Other of the anorexic subject, instead of failing to do otherwise, over-saturates the anorexic subject, and acts as if there is no lack. As a result, Lacan remarks that the anorexic subject confuses need with desire. In this sense, Lacan states that the Other, with whom the anorexic subject is in a relationship, is the Other who leads desire down to the dimension of need and tends to reduce the subject to a passive object of care. According to Lacan, the suffocating extent of the Other's demand comes into existence here as well, when the Other leaves no space for desire. The subject, reduced to the position of the object which fills the lack of the Other, is to respond to this situation with an apprehensive paralysis and the death of desire (Lacan, 1958/2006b). Thus, it can be said anorexia nervosa is the result of radical clinical incarnation of exert to degradation of desire to the register of need. According to Lacan, the anorexic maneuver, which includes refusal of food, means taking to accept one's own death risk in an effort to preserve desire (Lacan, 1956-1957/2020). In other words, Lacan emphasizes anorexic maneuver is a way of staying as the desiring subject in the face of the Other and refusal to manifest as a "desire" (Recalcati, 2011a).

1.5.2.2. Eating nothing and refusal

Lacan emphasizes the omnipotence of the Other in the child's relationship with the Other and argues that the child is powerless and dependent on the Other (both symbolic and in real register) in the face of this impotence. Hence, the child always acts in accordance with the demand of the Other and seems content with satisfying this demand. Considering this, it is no coincidence that anorexic subjects are individuals who are overwhelmed by the demand of the Other, and are busy fulfilling the Other's narcissistic demands (Recalcati, 2010). In such a relationship where the boundaries of the subject with the Other are confusing, the subject finds herself in a devoured state by the Other's reduction of the subject to the object of jouissance. Therefore, there is no space left for the subject's enunciation. In light of this, Lacan

argues that the anorexic subject is eating nothing. It can be considered that Lacan puts the emphasis here on the relation of the subject to absence, and therefore the concept of 'nothing' represents a point on the symbolic register (Lacan, 1956-1957/2020).

According to Lacan, the anorexic subject, as the "object of nothing", struggles to turn things around in the face of the omnipotence of the Other. In this sense, Lacan argues that the child rejects food as a desire and the object of nothing becomes a symbolic representation of the subject's need for separation (Lacan, 1956-1957/2020). In anorexia nervosa, the subject's need for lacking, that is, the object of nothing is interpreted as the subject's effort to make a place for herself/himself in the face of the Other's impotence. Thus, behind the anorexia nervosa lies the desire of the subject, the subject's relationship with the Other and her identification with the object of the Other (Desbordes, 2014). In this sense, the subject fundamentally tries to cope with anxiety by displaying refusal of eating, that is, in fact, eating nothing. For this reason, Lacan argues that the most distinctive feature of anorexia nervosa is the "refusal" (Lacan, 1938/2006a). This refusal, phenomenologically, manifests itself in anorexia nervosa as refusing to eat, refusing nourishment, and rejecting the body's biological needs. However, in this way, the subject ultimately rejects the Other. Utilizing this solution, the subject remarks, "I will not be a slave to control again! I am now free from this body dependent on these drives! I am forever exempt from the Other's demands! Never again shall I be the object of the Other's jouissance!" (Recalcati, 2010). With this refusal, the subject constructs herself into a state which rejects this dichotomy and those who make herself dependent on the Other (Recalcati, 2011a). In other words, the rejection of the anorexic subject is a way of separation as a metaphor of desire.

1.5.3. Jouissance as real register over on symbolic register

Considering the texts of the 1950s, Lacan's views on anorexia nervosa now seem to be grounded. In a place where a suffocating and devouring Big Other leaves no room for lack, the subject creates it through reality, by eating "nothing". In essence, this

approach also includes a hysterical stance. However, Lacan's theory, which developed and progressed predominantly on the symbolic order in the 50s, would grow on the real order on the basis of jouissance in the 60s (Cosenza, 2013). Lacan's handling of anorexia nervosa in his eleventh seminar "*Four Fundamental Concepts of Psychoanalysis*" in 1964 was interpreted on the real order that formed the general nature of the seminar (Lacan, 1964/1998). In this seminar, Lacan also places a new question in the system by continuing the classical hysterical anorexic paradigm that maneuvers on the basis of the Other's desire. Where is the real jouissance in the anorexic subject? In the texts of the 50's, the rejection of the anorexic subject manifests itself as a metaphor of desire (Lacan, 1956-1957/2020). In other words, the anorexic issue is handled between a kind of symbolic and imaginary orders. This refusal can also be interpreted in the seminar in 1964 as a rejection of separation and alienation, which are important stages in the structuring of the subject, and as an operation against object a (Cosenza, 2013). To put it another way, according to Lacan, there is an implication in anorexia nervosa about a restructuring of the real and the symbolic (Lacan, 1964/1998). This change in Lacan's interpretation would also form the basis of disagreements about the positioning of post-Lacan anorexia nervosa. In this context, psychoanalysts such as Recalcati, Menard and Soria, including ourselves, adhere to the paradigm shaped by Lacan's hysterical symptom developed in the 50s, while psychoanalysts such as Cosenza and Desbordes would evaluate anorexia in the context of a structural symptom (Cosenza, 2013). At this point, Parlêtre, which Lacan put forward in his last seminars and which means speaking and being, is of great importance. Rather than the understanding that the symptom has meaning and comes from the unconscious, the body itself has become a talking state by replacing the unconscious. In other words, a shift has been made from symptom with meaning to *sinthome*, which includes jouissance without meaning (Miller, 2015). In this respect, there are opinions that eating disorders should be considered as a symptom of Parlêtre rather than a symptom of the unconscious in the context of its relation to real (Cosenza, 2016; Özbek Şimşek, 2019). In this context, anorexia nervosa is also considered as a structural symptom. In readings of Lacan's eleventh seminar, he associates true jouissance with the maneuver of the anorexic subject regarding their position in the Other's desire. By

refusing food, the anorexic subject is putting their own life at risk, while testing their position in the eyes of the Other. To illustrate, the anorexic subject, who tries to create a lack in the Other, does an excessive job by trying to create this lack with their own absence (Cosenza, 2013) and asks the following question for the Other: "Does it matter if I am dead or alive?" The anorexic subject, who shapes the game they play with the Big Other entirely through their own body, tries to create the lack with the first object that comes to mind, that is, over their own self (Lacan, 1964/1998). However, Lacan also indicates that one aspect of object a is the lack resulting from weaning. At this point, he states that in anorexia nervosa, too, the subject eats "nothing" and continues: "You can see how lack occurs at the castration level of the weaning object (Lacan, 1964/1998)." It is also possible to interpret that when the child eats nothing, they the object a and creates the lack in this way. As a matter of fact, post-Lacan psychoanalysts who associate anorexia with a structural situation evaluate these words of Lacan in the context of his words about the anorexic subject eating nothing (Cosenza, 2016). In this context, the anorexic subject, who eats nothing, also keeps a view of object a in their mouth, holding the pleasure and saying "I am not separated, I am not weaned" (Cosenza, 2013). In relation to all these, the real effects of anorexic symptoms on the body (absence of menstruation, minimization of sexual appearance, etc.) can be interpreted as a re-enactment of a period in which there was no separation. In this way, the subject proceeds over the pure reality and rejects desire and phallic meaning by not existing. According to this paradigm, the anorexic position is now not only related to the subject's own desire and the desire of the Other, but also to real jouissance. In this context, the anorexic struggle is now open to interpretation as a struggle for jouissance, which is located in real, rather than for the desire located in the symbolic (Cosenza, 2013).

1.5.4. Final remarks / Epilogue

In the Lacanian approach, symptoms are evaluated independently of clinical structures, and the nature and function of the symptoms vary according to the structure in which they occur. The difference here is surely related to the subject's

relation to the Big Other (Recalcati, 2010). In this context, based on Lacan's texts and all these interpretations enriched by post-Lacan psychoanalysts, there is no doubt about the jouissance that the anorexic subject receives by "rejecting".

In this context, in our interpretation, anorexia nervosa takes place as a maneuver by the subject to make room for oneself. To clarify, rejection is a way of showing desire. However, it is not possible to ignore the unlimited jouissance as Lacan mentioned in his eleventh seminar. In this context, our interpretation, in parallel with Recalcati's, is that anorexia nervosa is a radical and pathological way of desire. At this point, it would be important to examine anorexia in the context of the uniqueness of the subject, the function of the symptom and the clinical structure in which it occurs. Within this framework, Recalcati states that the function of anorexia nervosa may vary depending on the structure. Stating the most important thing clinical experience has taught us is that anorexia always exists in plural form, Recalcati claims there are different subjective forms of anorexia according to the clinical structure of the subject rather than a single one (Recalcati, 2010).

1.6. Anorexia Nervosa in Psychoanalytic Qualitative Research

Numerous quantitative studies have been conducted to investigate eating disorders, examining various variables and establishing relationships between anorexia and related factors. These studies have provided valuable insights and revealed associations between different aspects of the disorder. However, qualitative studies have also emerged to delve deeper into the phenomenon of anorexia nervosa. These studies have employed methodologies such as Interpretative Phenomenological Analysis (IPA) and Thematic Analysis to explore the experiences of individuals with anorexia and gain a more comprehensive understanding of the disorder (Rance et al. 2016). Additionally, there are studies utilizing grounded analysis, which aims to establish novel connections and generate new theoretical frameworks in the context of anorexia nervosa (Espeset, 2012). Indeed, it is worth noting that there is a limited presence of qualitative research in the literature that specifically explores anorexia nervosa through the lens of a particular theory and employs thematic analysis.

Similarly, the number of qualitative studies worldwide, as well as in our country, that examine anorexia nervosa from a psychoanalytic perspective is relatively scarce. Given the scarcity of psychoanalytically oriented qualitative studies, this section also includes qualitative studies that investigate anorexia nervosa through the use of projective tests. Initially, the focus will be on qualitative studies conducted by using projective tests, followed by an examination of qualitative studies based on psychoanalytic principles.

One notable study in this regard is the doctoral dissertation conducted by Bengi Pirim Düşgör in 2007 at Istanbul University, Department of Psychology. This study involved 15 participants with whom psychoanalytically oriented preliminary interviews were conducted. The participants also underwent the administration of projective tests such as the Thematic Apperception Test (T.A.T.) and the Rorschach test. The obtained findings were then subjected to content analysis. The study analyzed the findings within the context of incestuous father-daughter relationships and discussed them in terms of the father's role. The findings revealed difficulties in establishing boundaries in the relationships between anorexic individuals and their fathers, which were interpreted as a resurgence of the Oedipal conflict. The intense sexual connotations associated with the image of the father were discussed as contributing to a dilemma between desire and prohibition, reflecting the father's inability to fulfill the role of a prohibitive figure. Furthermore, the study highlighted how the Oedipal conflict led to a sense of competition with the mother, which hindered anorexic individuals from identifying with femininity and their mothers (Pirim Düşgör, 2007).

An additional research investigation worth mentioning is Berfin Yapa's master's thesis, carried out in 2019 at the Department of Psychology, Istanbul University. Yapa's study focused on four adolescent individuals diagnosed with anorexia nervosa. During the study, the participants underwent T.A.T. and Rorschach projective tests, with the obtained data being subjected to content analysis. The findings of the research revealed that individuals with anorexia nervosa tended to perceive their mothers as deeply intrusive and unbounded, harboring a pronounced

inclination to establish autonomy from their mothers. Paradoxically, these individuals also experienced anxiety when confronted with their desire for separation (Yapa, 2019).

Within the framework of psychoanalytically informed qualitative research, Blackburn et al. (2020) conducted a study titled "*Becoming needless: A psychoanalytically informed qualitative study exploring the interpersonal and intrapsychic experiences of longstanding anorexia nervosa.*" The primary objective of this study was to delve into the interpersonal and intrapsychic encounters of female participants who had been actively grappling with anorexia nervosa for a minimum of seven years. The researchers employed a psychoanalytic interview format, involving three interviews per participant, conducted without any specific prompts and allowing for free association. The aim was to gain a deeper understanding of the participants' experiences in relation to their disorder. Consequently, this approach allowed for an exploration of the participant's inner psychological landscape, as well as their interpersonal dynamics and unconscious attributions pertaining to anorexia nervosa. The researchers emphasized their adherence to the principles of qualitative research methodology throughout the interview process. They further specified that they followed Holmes' (2015) framework during the analysis phase, suggesting that content analysis was indeed employed, even if not explicitly acknowledged by the authors (as cited by Blackburn et al., 2020). As a result of the analysis, three central themes emerged: "*All on our own,*" "*Becoming needles,*" and "*Nobody speaks your language.*" These thematic categories shed light on important aspects of the participants' experiences within the context of longstanding anorexia nervosa. Under the first theme, participants shared their accounts of enduring recurring intrusive and abusive interventions throughout their lives. These experiences were described as having a significant impact on their well-being. The emergence of the second theme, "*becoming needless,*" was interpreted as a defense mechanism employed by the participants to safeguard themselves following negative events. Interestingly, despite projecting an image of not having any physical or psychological needs, the participants displayed remarkable sensitivity towards the needs of others. They often identified themselves

as "people-pleasers" and expressed making tremendous effort to meet the expectations of those around them (Blackburn et al., 2020).

An additional study worth mentioning is a doctoral thesis conducted by Derya Özbek Şimşek within the Clinical Psychology Graduate Program, Psychoanalytic Track, at Middle East Technical University. This particular study aimed to explore the subjective meanings attributed by patients with anorexia nervosa to their symptoms, as well as their experiences regarding the function of these symptoms. The research employed Interpretative Phenomenological Analysis (IPA) and involved six participants. Through a psychoanalytic lens, six themes were discussed. The first theme, titled "*Food deprivation as a substitute for the privation of love and care,*" revealed that participants described their mothers as cold and strict, underscoring the lack of love and nurturing they experienced within their maternal relationships. Within this framework, the participants' symptoms were interpreted as serving as a substitute for the absence of love and care in their lives. The second theme, titled "*Food deprivation to compensate for the feeling of loss of control and freedom,*" highlighted participants' discussions about familial pressures and their resistance against them. In this context, their refusal to consume food was seen as a means for participants to assert their autonomy and challenge their families' expectations. Moving to the third theme, "*Receiving love and care from the family: Repairing the Broken relationships,*" participants shared their experiences of familial indifference prior to their illness, noting that their families became more concerned and caring after their illness manifested. This theme shed light on participants' efforts to mend and reconcile fractured relationships within their family dynamics. This pattern was interpreted within the context of participants receiving attention and love from their families through their symptoms. The fourth theme, titled "*Others as a reference point: The importance of Others' thoughts and acceptance,*" revealed that participants viewed weight loss as a means to garner praise and recognition from those around them. In the fifth sub-theme, "*Is Anorexia Nervosa the Only Way Out? Expressing resentment and Anger through Punishing Others,*" the symptom of anorexia nervosa was identified as a way for participants to express their emotions and assert themselves. The final theme, "*Distracting attention away from relational*

problems: I was dealing with what I ate to keep my mind occupied," highlighted how participants utilized their anorexic symptoms as a means to divert attention from unwanted life events and emotions, providing a way to occupy their minds (Özbek Şimşek, 2019).

The subsequent section of the study will focus on the purpose and framework of the research, delving further into its objectives and methodology

1.7. The aim and scope of the study

Anorexia nervosa, when observed externally, may give the impression of an introspective condition characterized by self-preoccupation. However, clinical interviews with individuals affected by anorexia nervosa, as well as existing literature, reveal the enduring significance of their relationships with others. Within this context, the importance of parents, who serve as the "Big Other" for individuals with anorexia nervosa, becomes apparent. The objective of this study was to examine the relationship between an anorexic individual and the "Big Other" and to explore the meaning and function of anorexia nervosa through the lens of Lacanian psychoanalysis. Reflexive theoretical thematic analysis was chosen as the methodological approach for this study. This method enables the examination of both explicit and implicit meanings, allowing for the exploration of these meanings and experiences from a theoretical standpoint. By employing this approach, it is anticipated that a better understanding of the dynamics between the "Big Others" and the anorexic subject can be achieved, shedding light on questions such as "How do we situate anorexic subjects within their relationships with significant Others?", "What are the family dynamics surrounding anorexia nervosa?", and "What is the significance of anorexia nervosa for the anorexic subject?". The subsequent section will provide a detailed discussion on reflexive theoretical thematic analysis as a qualitative method, as well as comprehensive information on the research design and procedures.

CHAPTER 2

METHOD

2.1. Qualitative Analysis, Thematic Analysis and Different Schools

Thematic analysis is a method that identifies, analyzes, and reports themes within data and allows interpretation of the research topic via themes (Braun & Clarke, 2006). The concept of thematic analysis has sparked a debate about whether it can be considered a methodology or simply a method in qualitative research. Thematic analysis is not a methodology but instead a research method in itself. Braun and Clarke published a paper in 2006 that established a standardized approach and outline for thematic analysis to address this issue (Braun & Clarke, 2019). They also identified the stages of conducting a thematic analysis, its advantages, disadvantages, and potential pitfalls. To ensure clarity and prevent misuse of thematic analysis, they later categorized it into three distinct schools of thematic analysis in their subsequent studies. These schools are: "*coding reliability*," "*reflexive*," and "*codebook*" thematic analysis (Braun et al., 2019). For this reason, it is essential to note that thematic analysis is not a "one thing" but rather a method that encompasses these three distinct approaches to analyzing data (Braun & Clarke, 2019).

The coding reliability approach to thematic analysis is based on the works of Boyatzis (1998), Guest (2012), and Joffe (2011) and places a strong emphasis on ensuring reliability in the coding process (as cited by Braun et al., 2019). This approach prioritizes accuracy, reliability, and reproducibility in data coding by creating codebooks and codebook frames that dictate how to code. These codebooks allow multiple researchers to analyze the data independently. The coding reliability approach aims to establish consensus among multiple researchers regarding the codes and themes generated from the data. For this purpose, Cohen's kappa is used to

assess researchers' agreement, and a score of 0.80 or higher indicates reliable codes. By emphasizing agreement between researchers, the approach aims to minimize the subjective effect of the researcher on the research and increase its reproducibility. It could be said that this approach has a strong inclination towards a "post-positivist" and "scientific method" perspective, viewing the researcher's subjectivity as a potential barrier to the reliability of the research (Braun et al., 2019). As a result, this approach aligns with the definition of "small q" qualitative research proposed by Kidder and Fine (1987). In other words, this approach is not entirely appropriate for qualitative research; therefore, it can be considered "partial qualitative research." (Braun et al., 2019)

Braun and Clarke (2006) emphasize that the researcher's subjectivity and reflexivity should be prioritized for proper qualitative research. They assert that the research design and analytical process should be exploratory and follow open-ended and flexible principles, with the researcher having a solid connection to the data by Yardley's principles (2000) of rigor and commitment (as cited by Braun et al., 2019). *The reflexive thematic analysis* considers the researcher's subjectivity as a valuable resource. It emphasizes the researcher's active role in the knowledge-generation process. Thus, reflexive thematic analysis aligns with the expectations for qualitative research and can be referred to as "fully qualitative research," following Kidder and Fine's definition of "Big Q" qualitative research (Braun et al., 2019). In their 2006 paper titled "*Using thematic analysis in psychology*," Braun and Clarke also sought to provide structure to the process of thematic analysis. The approach they proposed in the article, referred to as "thematic analysis," is actually a form of reflexive thematic analysis.

The "Codebook" thematic analysis can be considered as a third type of thematic analysis that lies between the "reflexive" approach and the "coding reliability" approach. It incorporates the philosophy of qualitative analysis and a structured, but not as stringent, version of "coding reliability." (This approach differs from the latter in not relying on methods such as Cohen's kappa calculation to ensure reliability.) (Braun et al., 2019).

To examine the relationship of an anorexic subject with the "Big Other" and explore the function of anorexia nervosa from a Lacanian psychoanalysis perspective, the chosen methodology for this study is the reflexive thematic analysis. This approach was deemed the most suitable given the researcher's psychoanalytic background. The study adheres to the guidelines established by Braun and Clarke (2006) and Braun et al. (2019) in conducting reflexive thematic analysis. The following section will provide an outline of the decisions taken, considerations made, epistemological stance, and the design and details of the analysis process in conducting reflexive thematic analysis.

2.2. Design of the study: Theoretical Thematic Analysis

In conducting a reflexive thematic analysis, several decisions must be made to accommodate its flexible nature (Braun et al., 2019). It is crucial for the validity of the analysis that the steps taken during the research are transparent and internally consistent (Braun & Clarke, 2006). As the researcher of this study, I, Hekimoğlu, have a substantial theoretical inclination and curiosity towards the topic, and also, our research questions are rooted in Lacanian psychoanalytic theory. Consequently, my research team (my advisor and my co-advisor) and I decided to employ the theoretical reflexive thematic analysis and examine meaning at both the latent and semantic levels from a constructionist epistemological perspective. In this context, the theoretical background of these decisions and the reasons for their preference will be discussed in the following sections.

When conducting reflexive thematic analysis, the researcher must first decide on the level at which coding will be established. There are two primary methods for this. The first question is whether the coding will be inductive/bottom-up or deductive/top-down. The choice between these two approaches will dictate how the codes are established; for example, in the inductive approach, coding is not guided by a pre-existing coding frame or the researcher's assumptions. Therefore, inductive coding is driven by the data (Braun & Clarke, 2006). However, this does not mean that the researcher's subjectivity, preferences, and interpretation are not a factor in

the inductive coding process or the researcher's mind like *tabula rasa* while coding inductively (Terry et al., 2017). It is unrealistic to expect the researcher to completely separate themselves from their theoretical and epistemological perspective while coding (Braun et al., 2019). This means that the words the researcher selects, what they choose to code or exclude, and so on, are all influenced by the researcher's subjectivity. What sets the inductive approach apart from the deductive/theoretical approach because the former begins with the "data" itself rather than relying on any theoretical framework, as Braun et al. (2019) pointed out.

In contrast, what does the researcher rely on in the theoretical approach? The researcher approaches the data with pre-existing thoughts, assumptions, concepts, and theoretical knowledge and matches the codes with their theoretical understanding while coding (Braun & Clarke, 2006). While applying the theoretical approach, the researcher may prefer various methods. Some researchers prefer to identify possible codes concerning their theory before analyzing the data. However, when the theoretical approach is adopted, there is no requirement that codes/themes will be determined beforehand (Braun et al., 2019). In other words, we have not determined any coding frame or themes in advance despite using a theoretical approach. Instead, we relied on theoretical knowledge for naming the codes during the data analysis. It is possible to be concerned that using a theoretical approach in coding may lead to a loss of the richness of the data. However, this is not the case since the theoretical approach enables the researcher to approach the data with their knowledge and theoretical approach, thus enriching the research (Vanheulue, 2002).

The theoretical approach is shaped by the researcher's theoretical and analytical interests. It aims to provide an analytical interpretation of the data within the context of a particular research question, going beyond merely providing a detailed description (Braun & Clarke, 2006). In this study, we preferred a theoretical approach because one of the research questions investigates the link between a young female individual diagnosed with anorexia nervosa and the Big Other, which is rooted in Lacanian psychoanalytic theory. During the coding process, we focused on the participant's relationship with their mothers, the first Big Other in the theoretical

context, and their fathers, who also represent the Big Other. In this context, we referred to the mother as the (m)Other because of her place in the theory (Lacan, 1964-1965/2002). When participants described their relationship with their mothers as "too close" or "intertwined," we coded it as "difficulty in separation," which aligns with the theoretical framework. However, suppose the study had been an inductive one, and the research question had been about the relationship between individuals with anorexia nervosa and significant figures in their lives (which can include the mother, father, teacher, and so on.) corresponds to big Other in Lacanian theory (Lacan, 1964-1965/2002), exact quotes could have been coded as "a close relationship with the mother." However, in this study, we coded these instances as "difficult to separate with the (m)Other," which formed the base of the first super-ordinate theme.

The choice of which level of meaning assessment to use during coding is another crucial aspect of conducting reflexive thematic analysis. There are two options here, semantic, which involves explicit meaning, and latent, which involves interpretative meaning. When employing semantic coding, the researcher concentrates on the explicit meaning of the data and does not seek to uncover anything beyond its literal sense. In other words, in semantic-level coding, the researcher places greater emphasis on the semantic meaning of the data, organizing it into patterns and later interpreting the broader significance and meaning of these patterns. In contrast, in latent coding, interpretation starts from the moment of coding. The researcher goes beyond the surface meaning and seeks to understand the underlying concepts and ideologies in the data (Braun & Clarke, 2006). This requires simultaneous interpretation and goes beyond mere description to include analysis (Braun et al., 2019). This type of analysis is associated with the constructionist tradition and is similar to discourse analysis. Creating meanings at the latent level is quite fitting for researchers using a psychoanalytic framework (Braun & Clarke, 2006; Braun et al., 2019). As psychoanalytically-oriented researchers, we preferred studying the latent meaning of the data. However, in practice, the distinction between the two levels of analysis is not always clear-cut and exists more as a continuum than a dichotomy (Braun et al., 2019). Thus, in this study, both semantic and latent-level analyses were utilized.

In this study, a participant named Serra provides an example of latent level signification. Serra states during the interview that "actually... my family is oppressive... I did not have an oppressive family". Although Serra says on a semantic level that her family was not oppressive, she uses the word "actually" and pauses after saying that her family is oppressive. The participant's use of negation is interpreted that her family was actually oppressive, which is why it was coded as such. The primary reason for interpreting this statement as suggesting that Serra's family is oppressive is that she begins her sentence with the word "actually," which typically implies clarifying "what is true" or "what actually occurred," and then pauses before stating that her family has an oppressive. This interpretation goes beyond the semantic meaning of the sentence and is made with an unconscious notion and practice. If the researcher had a different background, they might have coded the data differently, or if they had interpreted the meaning based on a semantic level, they might have concluded that Serra's family was not oppressive. Another example of latent level meaning is when participants say things like "I only told my father about my illness" or "I looked at my father when I was diagnosed with anorexia nervosa" when speaking about their anorexia nervosa process. These statements were coded as "messages to the father" by going beyond their semantic meaning and interpreting the underlying significance. However, the coding in this study was not entirely done at the latent meaning level, as some statements were coded based on their semantic meaning. For instance, the statement "the thinner I am, the more beautiful I am" was coded based on its semantic meaning. It was later interpreted within the broader context and positioned under the super-ordinate theme of "power of the gaze" as a psychoanalytic concept.

In conclusion, it is crucial to determine the researcher's epistemological stance when conducting reflexive thematic analysis. The stance in thematic analysis can either be realist/essentialist or constructionist. The reflexive nature of the thematic analysis accommodates both perspectives; however, it is essential to specify the preferred stance as it will result in different foci and outcomes (Braun et al., 2019). In the realist/essentialist approach, motivations and experiences are theorized linearly, whereas in the constructionist approach, motivations and experiences are reproduced

within a sociocultural and structural context. It can be said that themes generated at the latent level are more appropriate for a constructionist epistemological stance (Braun & Clarke, 2006). Furthermore, this study is rooted in Lacanian psychoanalysis, which also adopts a constructionist epistemological stance (Birlik, 2019). Therefore, it was concluded that a constructionist stance would be the most appropriate for this study.

2.3. Data Collection and Data Analysis

The flexible nature of reflexive thematic analysis enables the utilization of a diverse range of data collection methods (Braun et al., 2019). In this research, semi-structured interviews were employed as the data collection technique. The interview questions can be found in Appendix C and Appendix D.

Subsequently, the data analysis process was initiated. Braun and Clarke (2006) put forth a six-step guide for analysis in their publication, which outlines the stages of the analysis process. It should be noted that these steps are not necessarily sequential, and the process may involve going back and forth between the steps (Braun et al., 2019). In this study, such back-and-forth movement was indeed observed several times. The first step, as suggested by Braun and Clarke, is referred to as "familiarization." During this stage, the researcher is expected to gain a thorough understanding of the data (Braun & Clarke, 2006; Clarke & Braun, 2013; Braun et al., 2019). In the present study, the researcher conducted the semi-structured interviews in a one-on-one setting, providing the researcher with some prior knowledge of the data. However, more than having prior knowledge is needed to gain a comprehensive understanding of the data; it is necessary to delve deeper (Braun & Clarke, 2006). To this end, the researcher also transcribed the interview data. Transcribing the data is a highly effective method of becoming familiar with it, so much so that it is considered a "key stage of interpretive qualitative analysis" (Bird, 2005). This approach allows the researcher to gain a verbal understanding of the data, rather than simply reading a written text, as it enables the researcher to observe pauses, changes in tone, mumbling, laughing, crying, and so on. Also, it is

essential to transcribe the data without using punctuation marks in order to gain a proper understanding of the data, as the use of punctuation may alter the meaning (Poland, 2002). As the present study delves into the latent meanings and explores interpretations related to the unconscious, the transcriptions have been completed without punctuation marks. However, more than the mere transcription of the data was needed to gain a thorough understanding, so the audio recordings were repeatedly listened to, the transcriptions were checked, and the transcriptions were also read multiple times while taking notes. Listening and reading were sometimes iterated, returning to previous stages as needed (Braun & Clarke, 2006).

Braun and Clarke (2006) state that the second stage involves "generating initial codes." This stage begins with the notes taken during the familiarization phase, where the notes are informal. However, the coding done in this stage was more specific and deliberate. The coding was done more systematically and organized using MAXQDA 2022. During the third stage, known as "searching for themes," the research team established links between the codes, laying the groundwork for higher-level and lower-level themes (Braun & Clarke, 2006; Braun et al., 2019). At this point, initial outlines of these themes were created. This stage and the previous one involved a back-and-forth revision of the data. In the fourth stage of "reviewing themes," the generated themes were revisited, and in the fifth stage, the themes were defined and named. It was essential to not only define the themes but also explain why the theme was identified, its significance, and its relationship to other themes. Essentially, creating themes amounts to narrating the story of the data (Braun & Clarke, 2006; Braun et al., 2019). In doing so, it is crucial to consider the possibility of overlap or inconsistency among themes and, if necessary, revise them accordingly (Braun et al., 2019). For example, in this research, "Guarantor of existence" was initially considered a separate super-ordinate theme but was later determined to be a sub-theme of "To be or not to be: Striving to be" along with its sub-themes, as it was deemed to be related to the subject's "striving to be."

After completing all stages of reflexive thematic analysis, the final step involves generating a written report of the findings. During this phase, the research team

identified and established the main themes and matched relevant quotations to each theme. The themes were subsequently presented within the framework of the research question, moving beyond mere interpretation (Braun & Clarke, 2006; Braun et al., 2019). According to Braun and Clarke (2006), the stages of analysis do not have to be sequential, and the back-and-forth flow is positive for the research. In the final stage of the analysis, we revisited earlier stages. We identified that the pre-existing "constructing some borders" sub-theme was a sub-theme of the "Guarantor of existence" sub-theme. However, the initial version of the analysis, "constructing some borders," was a sub-theme of the super-ordinate theme of "Striving to be." Also, the theme named "I lost control," initially determined as a sub-theme under the third super-ordinate theme, was removed as its content did not fully align with the narrative of the super-ordinate theme. After all these, the study was concluded after following the 15-item checklist provided by Braun and Clarke (2006).

2.4. Participants

In reflexive thematic analysis, the researcher can determine a sample related to the research questions (Braun et al., 2019). In this context, participants' criteria are determined based on research questions. Research questions are below, as mentioned before:

- a) How do we locate anorexic subjects in their relationships with significant Others?
- b) How is family dynamics in anorexia nervosa?
- c) What is the meaning of anorexia nervosa for the anorexic subject?

The current research aimed to examine the dynamics between the anorexic subject and the Big Other, as well as to understand the significance of anorexia nervosa for the individual. According to recent findings (Cosenza & Busiol, 2021), anorexia nervosa is frequently seen in adolescent girls, and adolescence is viewed as related to separation from a psychoanalytic perspective (Plaut & Hutchinson, 1986). Therefore, the study sample was designed to include female participants diagnosed with

anorexia nervosa during adolescence and both parents being alive, based on four specified inclusion criteria: a) the diagnosis of anorexia nervosa made during adolescence (age 10-19; the present age of participants is neither inclusion nor exclusion criteria), b) female biological sex, c) both parents being alive, d) anorexia nervosa restrictive type diagnosis made by a psychiatrist according to DSM-5 criteria.

The Lacanian approach asserts that anorexia nervosa can occur in any clinical structure (Recalcati, 2010), with psychosis being the only exclusion criterion for the study. Furthermore, other psychiatric disorders -for example, anxiety disorders, depression, and obsessive-compulsive disorders are mostly comorbid with anorexia nervosa (Marucci et al., 2018)- are not an inclusion or an exclusion criterion since they are compatible with the anorexia nervosa theoretical background that goes along with the Lacanian perspective (Recalcati, 2010).

In thematic analysis, there are no magic formulas for determining sample size, and be cautious about suggesting simple recipes. For all that, most of the researchers used "saturation" to determine the sample size. Saturation corresponds to no new information with new participants. However, determining sample size according to the rationale of saturation is also problematic when the researcher is actively part of the interpretative process, like the reflexive thematic analysis. Because researchers have an active role in having the partial, multiple, and contextual nature of meaning and this context, saturation is not suitable for the philosophy of qualitative research and also, when using saturation, researchers should take a "theoretical knowingness" position but this position, not suitable for "big Q" qualitative research. Additionally, in thematic analysis, the discovery of meaning patterns occurs post-analysis. Determining the sample based on saturation implies that the emergence of themes occurs during the data collection stage, resulting in superficial and hasty themes determined prior to the conclusion of the analysis. This raises concerns regarding the validity of saturation as an effective method. In addition, it suggests that determining sample size by saturation is suitable for coding reliability approaches rather than reflexive thematic analysis (Braun et al., 2019). In this regard, Braun and Clarke

(2019) emphasize the importance of considering contextual and practical factors, such as balancing claims of themes and sample size. According to their recommended guideline, if the data is obtained from a homogeneous sample with a specific research question and yields rich information, a sample size of five to six interviews would be sufficient (Braun et al., 2019). Thus, the current study, which is a focused research question and a homogeneous sample, consists of five participants. The demographic information of the participants, the age at which anorexia nervosa symptoms started, their current age, educational status, and marital status of their families during anorexia nervosa processes are shown in Table 1. All participants' information was edited for confidentiality and using pseudonyms.

Accordingly, the age of onset of symptoms of anorexia nervosa of the participants ranged between 15.5 and 17 years, and their current age ranged between 18 and 22 years. All participants are university students who had completed anorexia nervosa treatment in Ankara, Türkiye and all has restrictive type of anorexia nervosa. Also, two participants were not included in the research for various reasons. The first one is not compatible with the research's inclusion criteria. Her anorexia nervosa onset is 25; thus, she has not met having been diagnosed with symptoms in her adolescence onset criteria. The second one was not accepted to answer research questions related to the family during the interview, and end of the interview, she asked to delete an audio recording. Therefore, this participant could not be considered suitable for inclusion in the study.

Table 1. Descriptive information of participants

Participants	Onset age/Present age	Education	Parental status when Anorexia Nervosa period
Melike	15.5/18	Fresh-year student in college	Married, alive,
Görkem	17/22	5 th year in college but 3 rd class	Married, alive

Table 1. (continued)

Adile	16/20	A second-year student in college	Married, alive
Işıl	16/22	A fourth-year student in college	Married, alive
Serra	17/21	A third-year student in college	Married, alive
Excluded Participants		Reason of exclusion	
Lale		The age of onset is not compatible with the research's inclusion criteria (25/26).	
Menekşe		She did not accept to answer family-related questions and asked to delete an audio recording (17/23).	

2.5. Procedure

Ethical approval to conduct the research was obtained from the Middle East Technical University (METU) Human Research Ethics Committee (Protocol number: 461-ODTU-2021). After permission, the study was announced on various social media platforms, which elicited volunteers' participation to contact the researcher through email. Semi-structured interviews were conducted to facilitate a comfortable environment for the participants to express their personal experiences and free associations. Three interviews were held with each participant, spaced one week apart, and conducted online due to the ongoing pandemic, with individuals who had completed anorexia nervosa treatment in Ankara, Türkiye, each lasting approximately 50 minutes. In the initial interview, the participants were informed about the purpose of the study and the audio recording. Their informed consent was obtained through verbal agreement after reading the consent form aloud. Participants were reminded that the interview was voluntary, that they could discontinue at any time if they felt uncomfortable, and that they could choose not to answer specific questions. After the interview, the participants received an informed consent form, and an information about psychological support resources via email.

2.6. Trustworthy of the Study

Reliability and validity methods exhibit dissimilarities between qualitative and quantitative research methods. In the case of quantitative research, these concepts are treated as relatively quantifiable, whereas qualitative research utilizes equivalent techniques to ensure reliability and validity but is not quantifiable. In this context, trustworthiness in qualitative research includes subjectivity, reflexivity, adequacy of data, and interpretation (Morrow, 2005).

In qualitative research, subjectivity is not deemed a limited or undesirable circumstance; instead, it is acknowledged as the richness of the research as long as it is conveyed transparently to the reader (Morrow, 2005). Patton (2002) emphasizes the significance of subjectivity in constructivist and social-constructivist research, like the current study, regarding the quality and validity of the research. The qualitative research process involves the active participation of the researcher. From the inception of the research question to the interpretation of the research data, the researcher assumes a central role equal in significance to the participants who generate the data. As such, the researcher's theoretical foundation, socio-cultural background, and experiences should be considered in qualitative research to ensure the research's reliability (Finlay, 2002). The researcher must acknowledge that their value judgments may influence the study's results. In this regard, reflexivity, which denotes self-reflection, signifies the researcher's awareness of their impact on the research. In other words, reflexivity requires a researcher to engage in a continual process of self-meta-analysis (Rolfe, 2006). By maintaining a research diary and conducting supervision meetings with the research team, a researcher can cultivate a heightened awareness of their subjectivity and how they affect the research process (Clarke, 2006). This heightened self-awareness enriches the research process and fosters a deeper understanding of the phenomenon. Moreover, readers can better evaluate the researcher's ethical approach through this lens (Hewitt, 2007). Concordantly, I transcribed the audio recordings accompanied by reflexive notes and held supervision meetings with the advisor and co-advisor throughout the research process, including data collection and analysis, to address my cultural and theoretical

background and impact on the study. Also, bracketing is a way of understanding reflexive stance, which means the "process of becoming aware of one's implicit and predispositions". Without articulation of subjectivity and reflexivity, the researcher has to deal with questions of whose perspectives are laid on research findings (Morrow, 2005). In this context, different bracketing methods can utilize. In this study, the existential bracketing technique was implemented, which method researchers do not rupture connection to the world and reality. According to existential bracketing, researchers cannot bracket out personal consciousness and personal assumptions; researchers can only put their propositions and theoretical knowledge on hold for a while (Tufford & Newman, 2010). The following section delves into the researcher's theoretical knowledge, research presuppositions, interest and motivation for the research, and the extent of their influence on the research based on the existential bracketing techniques.

I, Hekimoğlu, define myself as a psychotherapist and an academician. I have been actively involved in the clinical practice, publications, and follow-up of patients in Lacanian psychoanalysis for five years. Over the years, my professional sphere and the psychoanalytic approach I operate within have significantly influenced my working style, perspective on life, and personal relationships. I firmly believe that my intellectual and theoretical background as a researcher undeniably impacts my studies, particularly in exploring the notions of the unconscious. Hence, it was paramount for me to undertake a research endeavor that enabled me to integrate both my clinical expertise and theoretical knowledge. To this end, I employed reflexive thematic analysis in my research. The reflexive thematic analysis enables me to recognize and integrate my theoretical perspectives into the research process while acknowledging my role as a researcher in shaping the findings, which is typically considered unacceptable due to the emphasis on objectivity in research. The inspiration for this research originated from the nexus of my academic pursuits and psychotherapeutic practice, which I consider a pivotal intersection in my life. In my qualifying examination for my Ph.D., I had to analyze my patients' cases, engage in both clinical and theoretical discussions, and publish an article based on one of them. I have always been intrigued by the deliberate infliction of physical harm upon

oneself, prompting me to wonder: What motivates individuals to harm themselves intentionally? Thus, as a psychotherapist and an academician, suicide has been one of the primary topics I have researched and made publications on. In situations involving suicide, the individual actively brings about their own death, often to communicate a message to someone significant in their life. As I prepared for my qualifying exam, I had similar thoughts regarding my patient with anorexia nervosa. In contrast to suicide, which involves an active termination of one's life, anorexia nervosa represents a passive ending to one's existence. Interestingly, I later realized that the literature substantiated my perspective, with anorexia nervosa carrying a notably high mortality rate called passive suicide. Despite observing the behavior of restricting food intake and self-harm associated with anorexia nervosa, I realized that the disorder was more complex and not solely defined by these actions. Through my observations, I developed the belief that anorexia nervosa stemmed from the influence of significant individuals in the individual's life. The complex interplay between anorexia nervosa and the individuals who hold significant importance in the subject's life captured my attention, motivating me to make it the central focus of my qualifying paper. It became clear that akin to suicide, anorexia nervosa is a complex phenomenon, with relational dynamics playing a pivotal role. The inception of this study arose from the desire to comprehend the nature of the relationship that the subject establishes with the Big Other. This was primarily motivated by my curiosity regarding the extent to which others can influence our lives. Nonetheless, the undertaking was challenging for me, as I found it particularly arduous to navigate the therapeutic processes and foster connections with patients afflicted by anorexia nervosa. As the research progressed, it became evident that anorexia nervosa represents a form of self-existence and self-assertion. Conducting interviews with participants and gaining insight into their illnesses' underlying motivations bolstered my stance as a therapist. Furthermore, my clinical experience and inquisitiveness as a therapist rather than a researcher were instrumental in enriching the research process.

CHAPTER 3

RESULTS

In this chapter, the relationship of an anorexic subject with the "Big Other" and meaning and the function of anorexia nervosa were presented in light of theoretical thematic analysis from a Lacanian psychoanalysis perspective. In the result of theoretical thematic analysis four super-ordinate themes were generated. These were (1) *All-knowing and has everything: Inseparable (m)Other*, (2) *Between presence and absence: The Father*, (3) *Power of the gaze: Am I ideal?* (4) *To be or not to be: Striving to "exist"*. These super-ordinate themes and also sub-ordinate themes were also listed in Table 2. And each super-ordinate theme was described and participants extracts also provided in this chapter.

Table 2. Themes of theoretical thematic analysis

-
- 1. All-knowing and has everything: Inseparable (m)Other**
 - 1.1. The one who does not recognize a child as an individual
 - 1.2. The one who has control over the child
 - 1.3. The one wants to become one entity
 - 2. Between absence and presence: The Father**
 - 2.1. The father in the shadow of the mother
 - 2.2. Insufficient dad: The father who is not as expected
 - 2.3. Resembling the father: Bearing the traces of the father's presence
 - 3. The power of the gaze: Am I ideal?**
 - 3.1. Being thin is being beautiful
 - 3.2. How do I look in someone else's eyes?
 - 3.3. Expectations: Gotta Meet Them All!
 - 4. To be or not to be: Striving to "exist"**
 - 4.1. Always wanting more: "There is no limit"
 - 4.2. Pretending I don't exist
 - 4.3. Guarantor of existence: Functions of symptom
 - 4.3.1. Being at the wheel: The illusion of regaining control
 - 4.3.2. Efforts to have some boundaries
 - 4.3.3. Addressing the third one: The father
 - 4.3.4. The way of be-ing
-

3.1. All-knowing and has everything: Inseparable (m)Other

This superordinate theme examines the relationships between female participants diagnosed with anorexia nervosa in their adolescent years and their mothers, who are considered as the "Big Other." (m)Other is the first Big Other for subjects. The participants describe their mothers as individuals who do not recognize their individuality and hold power in making decisions about various aspects of their lives. However, the participants also emphasized their biological similarities with their mothers. This can be interpreted as they have difficulties separating themselves from their mothers, who are perceived as all-knowing and omnipresent and do not allow for any sense of subjectivity or self-difference. Therefore, the title of this section, "All-knowing and has everything," emphasizes the lack of autonomy and control that the mother has over the child, and the term "inseparable" is added to highlight the mother's resistance to separation. In this context, this superordinate theme explores the research question of how anorexic individuals are located within their relationships with significant Others.

This superordinate theme is broken down into three sub-themes, each discussing a different aspect of the participant's relationship with their mother. The first sub-theme examines the issue of mothers who do not recognize their children as subjects and the experiences of participants seen as extensions of their mothers rather than separate individuals. The second sub-theme focuses on the control mothers exert over their children's lives, as described by the participants, including the mother's control even in the minor details of their lives and the participants' attempts to conform to their mother's wishes. The third sub-theme is about the participants pointing out their similarities with their mothers. They paid particular attention to these similarities in relationships where the mother is perceived as all-knowing and all-powerful and where she does not allow the participants to separate themselves. All these indicate that the participants also have difficulty separating themselves from their relationship with their mothers.

3.1.1. The one who does not recognize a child as an individual

This sub-theme reflects the participants' positions in their relationships with their mothers. Participants state that their mothers do not see them as separate individuals who can have their own thoughts and way of living. In other words, the participants shared that they are not seen as separate/different/independent individuals by their "inseparable" mothers.

Görkem conveyed that her mother did not view her as an individual human being but rather as an extension of herself. The daughter defined herself as an object position in this relationship. For Görkem, her mother did not have the notion that she could also have a personal life and boundaries.

G: ... I have yet to perceive that my mother views me as an autonomous individual but rather as an extension of herself. She does not think I am an individual. She clearly has no awareness that I can have my personal life, nor does she acknowledge my boundaries.

Original

G: ... annemin beni bir insan olarak gördüğünü düşünmüyorum. Beni çocuğu olarak değil bir uzantısı olarak görüyor. Bir birey olduğumu düşünmüyor. Kendi kişisel hayatım olabileceğine, kendi kişisel sınırlarım olabileceğine dair bir farkındalığı açık bir şekilde yok.

Similarly, Melike stated that she felt equally unacknowledged as an individual in her relationship with her mother, describing herself as a used toy in this relationship. Using words such as bureaucrat and governor to describe her mother and puppet, an enslaved person, and used toy to describe herself was interpreted as a reference to her mother's perceived position of power and control, which happened to have granted omniscience and omnipotence.

M: ... in my relationship with my mother, I perceive her to have a dominant role, similar to that of a bureaucrat. On the other hand, I feel like I am being controlled and used like a puppet. I am unsure of the exact definition of a bureaucrat, but I would describe our relationship as one in which I am in the position of a slave. I feel objectified and reduced to the level of a toy in this dynamic.

Original

M: ... Annemle olan ilişkimizde o bir bürokrat ben de bir kuklayım. Bürokrat tam olarak ne demek bilmiyorum ama ilişkimiz bir yönetici ve bir kölenin ilişkisi olarak tanımlanabilir. Kendimi kukla gibi hissediyorum. Kullanılıyormuş gibi hissediyorum, bir oyuncak gibi hissediyorum.

As can be seen from these excerpts, there was a common theme in the interviews with the participants: they were not recognized as separate individuals by their mothers. This was interpreted as the result of the difficulty experienced in separation.

3.1.2. The one who has control over the child

This sub-theme delves into the participants' mothers' impact on their lives. As they discussed their relationships with their mothers, the participants also spoke about the extent to which their mothers influenced and controlled their lives. They described their mothers as someone who strongly impacted their thoughts, attempted to control their lives, and made decisions about what they were allowed to do. According to the description, the mother is perceived as "all-knowing and seemingly all-possessive" for participants. It is also interpreted as a reflection of the difficulties they faced in separating from their mothers in daily life. The mother's level of influence and control was considered very high. Thus, this sub-theme was named "the one who has control over the child."

Serra shared that her mother's involvement in her life is sometimes "too much." Without further explaining, she went on to say that her mother does not look favorably upon her and wants her to do a little wrong". She wishes to have more freedom and negates that by saying her family is oppressive (referred to as "*aslında sıkıştıran... baskıcı bir ailem yoktu*" in Turkish). However, she expressed her wish for her mother to interfere less and mentioned that even at 21 years old, she is not allowed to go to the university pool because of her mother's restrictions. It is noteworthy that despite her age, Serra positions herself as a child when discussing her relationship with her mother. It can be interpreted that her mother is seen as having a very controlling presence in her life, leaving little to no space for subjectivity.

S: ... I recall my mother being overprotective during my childhood, constantly reminding me to be careful and not to let anything bad happen to me. As a child, I sometimes wanted to misbehave or take risks, but my mother's cautionary nature prevented me from doing so. I desired more freedom and relaxation as I entered adolescence, but my mother's overprotective nature persisted. Despite this, I do not feel that my family oppressively pressured me. For example, as a 21-year-old, I can swim, although not very well. I would like to go to the university pool, but my mother still disapproves and expresses concerns about my safety. As a result, I do not go.

Original

S: ... Ben küçükken "bazen çok fazla şey yapıyordu". Sürekli dikkat et, sana bir şey olmasın, başına bir şey gelmesin diyordu. Bazen çocuk biraz daha yanlış yapmak istiyor, yaramazlık yapmak istiyor ama annem çok temkinli davranıyordu. Çocuklukta değil de ergenlikte biraz daha rahat olmak istiyordum. Aslında sıkıştıran, şey yapan baskıcı bir ailem yoktu. Mesela yüzme biliyorum. Çok iyi bilmiyorum ama 21 yaşındayım. Üniversitenin havuzuna gitmek istiyorum ama annem hala çok sıcak bakmıyor bu duruma. Sen yüzmeyi tam biliyorsun, gitme, başına bir şey geliyor diyor. Ben de gitmiyorum.

Melike went into more detail about her mother's control over her life, stating that her mother would make plans for her and make decisions about various aspects of her life. This included what she would eat or not eat, what courses to study, and even what to wear.

M: ... my mother makes decisions for us. She decides on my clothing, arranges my meals, and even decides which classes I should take and how much I should study each day, including how many questions I need to solve. She is always in charge of every aspect of my life.

Original

M: ... annem bizim üzerimizde planlar yapar. Kıyafetlerimi seçer, yiyeceklerimi ayarlar. Hangi derse çalışacağımı belirler ve bugün bu kadar ders çalışıp, bu kadar soru çözeceksin der. Her şeyi hep o ayarlar.

Adile defines her relationship with her mother as a "mother-child" relationship. This definition is significant because it implies a lack of separation, considering her age and no conflicts in the relationship. Adile's further associations with this relationship include mentioning things that her mother did not allow her to do without being prompted. She stated that she needed to ask her mother's permission for everything, and her mother would not permit it without any explanation, which prevented her

from visiting her childhood friends in the same neighborhood. This definition of the mother-child relationship and the subsequent associations were interpreted as the exerting control of her mother over Adile's life.

A: ... my relationship with my mother is one of a mother-child relationship, we never fight, and we are always together. My mother is overprotective and does not trust others easily, so she does not let me go to my friends. I have had close friends since primary school, but I need to ask my mother's permission to visit them, and she says no without explaining. I do not understand why she does not let me go, and it can be overwhelming to stay at home all the time. Sometimes I just want to get out, but she does not even allow that.

Original

A: ... Annemle hiç kavgamız olmaz anne çocuk ilişkisi bu. Zaten hep annemizin yanındaydık. Annem... nasıl desem... annem bize hiç izin vermez. Arkadaşlarıma gidemem çünkü annem etrafa fazla güvenemiyor. Tabii ben anneme soruyorum, niye izin vermiyorsun diyorum. Çünkü çok nadir olur. İlkokuldan beri çok yakın arkadaşlarım var. Onlara gitmek için izin istiyorum ama olmaz diyor. Neden izin vermediğini cidden bilmiyorum. Sadece olmaz diyor. Başka hiçbir şey söylemiyor. Bazen evde de çok bunaltıyorum, dışarı çıkmak istiyorum. Ona bile izin vermiyor.

Görkem, unlike the other participants, explicitly stated that her mother exerted control over her by trying to restrict her in various areas of her life, such as her friendships, when she came home, how much she studied, and even what she looked at. She mentioned that her mother had a long list of ways in which she would interfere in her life.

G: Because I think that my mother is... you know, I automatically conclude that she is trying to restrict me... she is constantly trying to control me... you know, my friendships, what time I come home, what time I go back, how much I study, what I look at, etc., are things that she is very much involved in.

Original

G: ... Çünkü annemin şey yaptığını düşünüyorum... hani beni kısıtlamaya çalıştığına varıyorum otomatik olarak... sürekli beni kontrol etmeye çalışıyor... işte yani arkadaşlıklarım, kaçta geldiğim kaçta döndüğüm, ne kadar ders çalıştığım, nelere baktığım falan bayağı karıştığı şeyler.

Based on all the quotes provided, it is inferred that the participants' mothers have a strong influence over their lives, are seen as omniscient, and have a say in their lives. Also, as someone who has everything, the mothers have the authority to grant or deny permission for various aspects of their lives.

3.1.3. The one wants to become one entity

This sub-theme highlights the participants' observations on their similarities with their mothers in genetics, physical appearance, and intellect. They spoke about these similarities as if they were identical. Given the nature of their relationship with their mothers, it was inferred that the emphasis on similarities was related to difficulty in separation, and it was deemed relevant to include it as a theme. In a relationship where the participants could not express their subjectivity, such focus on similarities was interpreted as a means of maintaining a symbiotic union with the mother in a physical sense, indicating an inability to separate.

Işıl's first thought was, "If my mother has it, I wonder if I have it too." This was in response to hearing about a disease her mother might have but be unable to diagnose in her first doctor's appointment. The fact that this thought came to her mind first was interpreted as an indication of a symbiotic relationship between her and her mother.

I: I was upset when my mother came and told me that the doctor said she might be borderline in their first meeting. I told my mother that this could not be said or diagnosed easily, especially not in the first meeting. This thought comes to my mother's mind and subsequently comes to my mind. I could not stop thinking if my mother was borderline and if I was, too. It was a challenging thought, and it stuck in my mind.

Original

I: ... Doktor anneme daha ilk görüşmelerinde sende borderline olabilir demiş. Annem geldi bana bunu söyledi. Ben de dedim ki anne bu böyle söylenebilecek bir şey değil, sana söylenebilecek bir şey değil. İlk görüşmede sende borderline var diyebileceğin bir hastalık değil bu dedim. Çok sinirlendim ama bu düşünce benim de aklıma takıldı, şimdi annemin aklına takıldı benim de aklıma takıldı. Annem de borderline varsa acaba bende de mi var?

On the other hand, Görkem stated that her mother believed that "I do not live; my daughter does." This put pressure on her. This statement of Görkem's mother was interpreted as her perception that her daughter and herself are the same as if her daughter was an extension of herself. She also mentioned that her mother would tell her that she could wear her old clothes and aimed to fit into her mother's pants. Görkem realized that her mother desired for them to be alike. Despite feeling uncomfortable, she recognized that her notion was also present within her.

G: ... my mother has a belief that "she could not live her life, so I have to live instead of her," and she tries to impose it on me. My anxiety got worse in those days. For example, she would say things like, "you have lost weight, you look great, now you can wear my old clothes". She gave me a pair of jeans that she wore in university, which were too small for me, but it turned into my goal to fit into those jeans.

Original

G: ... annemin "ben yaşayamadım benim yerime kızım yaşıyor" gibi bir anlayışı var. Bu anlayışı bana empoze etmeye çalışıyor. O aralar, annem böyle yaptığı zamanlarda benim anksiyetem çok artmıştı. Annem bana "görkem bak kilo verdin, bayağı iyi oldun, artık benim eski kıyafetlerimi giyebilirsin" dedi. Üniversitede giydiği çok küçük bir kot pantolon vermişti. Ben o kot pantolona sığmıyordum ama o pantolonu giymeyi kendime hedef ettim.

Based on these extracts, it appears that the mother's refusal to allow separation had a significant impact on the participants, leading to acceptance. In this context, the participants' focus on their similarities with their mothers is also analyzed.

3.2. Between presence and absence: The Father

This super-ordinate theme pertains to the participants' connections with their fathers and their references to them. This overarching theme was deemed to be significant in understanding the question, "How do we locate anorexic subjects in the relationships with significant Others?". It is crucial regarding the participants' relationships with their fathers, as well as providing insight into "How are family dynamics in anorexia nervosa?" since it also encompasses references to the relationship between the mother and father within a family where anorexia nervosa was. The participants

described their fathers as being largely silent or absent in their lives and not being actively present. However, it is inaccurate to say that the father figure is entirely absent in the participants' lives. The participants' fathers are present in their discourse, but in a limited or diminished way. Therefore, it can be said that their fathers occupy a position "between presence and absence." In other words, the participants try to somehow bring their fathers into "existence," whom they perceive as "insufficient/absent" in their daily lives and discourses, by emphasizing their similarities with their fathers. Thus, the theme of "between presence and absence: the father" was chosen to describe this phenomenon.

The first sub-theme in this context centers around comparing the father to the mother and the father being perceived as overshadowed by the mother. The second sub-theme relates to the participant's perception of the father as inadequate, even when considered independent of the mother. The participants express that their fathers do not meet their expectations. The third sub-theme illustrates the participants' attempts to bring their perceived absent fathers into existence in their discourse. To do so, they identify with them despite their perceptions of inadequacies.

3.2.1. The father in the shadow of the mother

This sub-theme examines the comparison of mothers and fathers in the participants' minds. The participants were not asked to directly compare their mothers and fathers throughout the interviews. However, when asked about their fathers, it was observed that the majority of the participant's answers were about their mothers. They spoke more about their mothers than their fathers and compared one another. In these comparisons, the participants described their mothers as more powerful, knowledgeable, strong, and having more control. In contrast, they described their fathers as being shaped and influenced by their mothers and having to align with their thoughts and ideas. For the participants, their fathers were seen as being in the background, overshadowed by their mothers.

Adile says her mother is more dominant and assertive than her father. Unlike her father, her mother is unafraid of anyone and can defend herself. Adile compared her

mother to her father and said that she is the one who is more oppressive/dominant in the household. On the other hand, Adile described her father as someone who does not speak up, does not say anything to anyone, and follows her mother's decisions. Adile stated that her mother's rules are valid in the household and that her father takes shape according to her mother.

A: ... I see my mother as more assertive and confident than my father. She is not afraid to speak her mind and stand up for herself. Meanwhile, my father tends to keep quiet and not express his opinions. My mother holds more power in our household and makes most of the decisions. My father tends to follow whatever my mother says rather than stand up for himself. So, in our family, my mother's views and decisions hold more weight and shape how things are done at home.

Original

A: ... annem babama göre daha atılgan, daha kendini savunan birisidir. Annem kimseden korkmaz, düşündüğünü rahatça söyleyebilir. Babam da anneme bir şey demez. Annem zaten evde daha baskıcı ve daha baskındır. Yani evde daha çok annemin dedikleri olur. Babam hiç kimseye bir şey söylemez. O yüzden, her şeyi annem devralır. Çoğu şey annemin dediklerine göre şekillenir.

Serra stated that her mother was the one who made the rules in the household and provided a recent example to illustrate this. She explained that a piece of furniture had been moved into the house and that her father was unhappy with the new placement. To gain support, her father asked Serra for her opinion on the new location, to which she responded that she did not like it. Despite this, her father's request to move the item back to its original location was rejected by her mother.

Researcher: Who sets the rules in your family?

S: My mom (laughs).

Researcher: Can you give me an example?

S: Sure, I can give you a very recent one. Recently an item was moved around in the house. My father is not happy about it. He asked me for my opinion, and I said I did not like it; I preferred the old position. He said, "Well, if we both do not like it, then let's put it back where it was." Nevertheless, my mother said no, it is staying where it is now."

Original

Researcher: Ailenizde kuralları kim koyar?

S: Annem (laughs).

Researcher: Bir tane örnek isteyeceğim.

S: Çok güncel bir örnek verebilirim. Evin içinde son zamanlarda bir eşyanın yeri değişti. Babam bundan hoşnut değil. Bana sordu sence nasıl olmuş diye, ben yeni döndüm eve dedim ki beğenmedim eskisi daha iyiydi, dedi ki o zaman ikimiz de beğenmediyse eski yerine dönsün annem de dedi ki hayır, hayır dönmeyecek.

Görkem also talked about a memory she had with her father and mentioned that her father had withdrawn permission she had previously given out of fear, saying, "What would your mother say if she heard?" Görkem said that her father had given permission for her friend to stay with her and that her father called her in a panic half an hour later and said, "Your mother is furious; please cancel this." According to Görkem, her father is basically a person who is shaped according to his wife's opinion.

G: ... I remember a time when my father seemed more lenient. I had my brother with me, and I asked my father if my friend Ahmet could stay over too. My father said sure, no problem, your brother is here. However, about 30 minutes later, he called me in-panic. He said he was worried about what my mother would think and said we should cancel it. Even when my father gets mad, it is because he is afraid of how my mother will react. Like when he could not reach me and got mad because he worried about my mother's reaction.

Original

G: ... babam daha kabul eden birisidir. O gün kardeşim de bendeydi ve arkadaşım Ahmet bizde kalabilir mi diye babama sordum. Babam da tabii ki kardeşin de orada sıkıntı değil dedi. Yarım saat sonra ise panikle aradı. Ben annenin ne düşüneceğini düşünemedim, annenle konuştuk, annen çok kızdı, lütfen bunu iptal edelim dedi. Babamın sinirlendiği zamanlarda bile sinirlenme sebebi annemin endişelenmesinden korkmasıdır. Bana bir keresinde ulaşamadığı için kızmıştı. Ancak kızma sebebi annemin tepkisinden korkmasıydı”.

During the interviews, when participants were asked, "Who sets the rules at home?" it was noted that all of them mentioned their mothers who establish the rules in their households. When this answer is considered together with these excerpts by the participants, it appears that the mother only sets rules rather than being jointly set. This resulted in the fathers being overshadowed by the mothers in the participants' minds.

3.2.2. Insufficient dad: The father who is not as expected

This sub-theme highlights the participants' descriptions of their fathers not meeting their expectations. During the interviews, the participants mentioned their fathers' shortcomings as fathers, husbands, and individuals. They implied that their fathers were not meeting their expectations in various situations and examples. The participants shared that their fathers did not meet their expectations as a father, husband, and human being by providing examples such as poor performance as a husband, inability to assert themselves and need to be defended, lack of presence, and not being attentive to the needs of their children.

For example, Melike states that she perceives her father as inadequate in his role as a husband to her mother. She later expands upon this idea of inadequacy and expresses the belief that her father is not only inadequate as a husband but also as a father to her.

M: ... I often thought that my father was not enough for my mother. He left her alone while she was pregnant, and she struggled a lot. I saw him as an inadequate husband because he had another woman in his life at that time, and my mother had to pay for everything they needed with her own salary. She had a hard time taking care of my brother and finding a daycare center for him while she was pregnant with me. Because of this, I felt like I was not wanted and saw my father as inadequate, as a father and a husband.

Original

M: ... Babamın annem için yetersiz olduğunu çok düşündüm. Babam annemi hamileyken tek başına bırakmış. Annem çok zorluk çekmiş. Bu yüzden bana, babam yeterli bir eş değil gibi geliyor. O zamanlar babamın hayatında başka bir kadın varmış. Annem maaşı ile onların yediği yemeklerin parasını ödemek zorunda kalıyormuş. Annem o zamanlar çok zor zamanlar geçirmiş. O dönem kardeşim de kreşe başlayacaktı. Bakıcı da yokmuş. O yüzden annem hem işe gitmiş hem kreş aramış. Bir de bana hamile olduğunu öğrenmiş. Yani... kendimi hem fazlalık gibi hissettim hem de babamı yetersiz gördüm. Çok yetersiz gördüm. Babam hem yetersiz bir baba hem de yetersiz bir eş.

Adile expresses her perception of her father's inadequacy in a more subtle way. Adile described her father as a very reserved person who does not speak up when he should and does not stand up to anyone. Adile mentions that her father could not speak out

against a problem within the extended family, and she advised him to defend himself. Adile believes that her father's personality will not change with age, thus stating that she will be the one to speak up for him from now on. This situation was seen as an indication of her father's inadequacy in Adile's perspective.

A: ... my father is tranquil; he never speaks up for himself. Even my mother gets angry at him for not standing up for himself. I am now 20 years old, and I understand everything. In the past, they would not tell us because we were young. However, now, my siblings and I are angry with my father because he does not defend himself. We tell him to stand up for himself and not just do what my grandfather says. Nevertheless, my father still does not say anything. I even tell my father that I will speak up for him instead because I do not think his personality will change at this age.

Original

A: Babam hiçbir şey demiyor. Benim babam çok sessiz bir insandır, hiç karşı gelmez. Doğrusunu söylemek gerekirse bu duruma annem de sinirleniyor. Babamın kendisini savunmasını istiyor. Babam da ses çıkarmadığı için bu duruma sinirleniyor. Ben büyüdüm, artık 20 yaşındayım ve her şeyin farkındayım. Eskiden bize küçük olduğumuz için söylemezlerdi. Artık her şeyin farkındayız. Ben de kardeşlerim de artık kızıyoruz babama. Baba biraz kendini koru diyoruz. Dedemin söylediği her şeyi yapmak zorunda olmadığını söylüyoruz. Babam hala hiçbir şey demiyor. Babam çok sessiz, sakin biridir. Onun yerine biz sinirleniyoruz. Hatta ben babama “artık yeter, senin yerine ben konuşacağım” diyorum. Çünkü babam kırk yaşında, bu yaştan sonra karakterinin değişeceğini sanmıyorum.

As seen from the quotes provided, the participants shared that their fathers did not meet their expectations. This sentiment was sometimes stated directly, and in other instances, it was implied, as in the case of Adile. The overall sentiment conveyed is that the participants saw the fathers as inadequate.

3.2.3. Resembling to the father: The traces of the father's presence

This sub-theme delves into the participants' emphasis on their similarities with their fathers. During the interviews, it was observed that all participants mentioned similarities with their fathers when discussing their own personal characteristics, even though they were not explicitly asked about any similarities. Despite describing their fathers as relatively vague and inadequate figures, the participants still pointed

to their fathers as the source of certain qualities they possessed. This behavior is interpreted as the participants' effort to acknowledge and exist their perceived absent fathers in their discourse by stating, "I inherited it from my father" as a means of countering the "absence" caused by the indistinct and inadequate father figure.

Melike reported having a distant relationship with her father. She cited having many similarities with him as the reason for this distance. These similarities mentioned by Melike were considered general and relatable to many people, such as enjoying desserts, going to guesthouses, and watching movies. Melike stated that she and her father were "like two peas in a pod," and as a result, they grew apart from each other. In this context, it was believed that Melike was attempting to establish a relationship, a connection, between herself and her father through these supposed similarities. It was interpreted as Melike's effort to bring her father into existence in her own discourse.

M: My father and I have much in common regarding interests and preferences. For instance, he likes sweets just as much as I do. Similarly, he enjoys visiting places, and so do I. Furthermore, he likes watching movies, and I do too. We share a lot in common. When two people are the same, it can sometimes lead to friction. I do not usually believe in this kind of thing, but that is exactly what happens with my father and me.

Original:

M: ... Babamla beğendiğim şeyler birbirine çok benziyor. Mesela o tatlı yemeyi sever, ben de çok severim. Mesela o misafirlğe gitmeyi çok sever, ben de çok severim. Şimdi film izlemeyi çok sever, ben de severim. Babamla birçok ortak yönümüz var. İki aynı insanın ortak yönleri çok olunca birbirini çok fazla itiyor. Normalde bu tür şeylere çok inanmam ama babamla tam olarak bunu yaşıyoruz.

Işılçay highlighted the disconnection in her relationship with her father by stating that her father was indifferent toward her feelings. However, she also indicated that her father placed much importance on other people's opinions and that she attempts to identify with him by recognizing this behavior within herself. This situation is interpreted as Işılçay's attempt to exist in the perceived absence of her father.

I: ... my father has always been this way. He often influences my thinking pattern and cares a lot about what others think and perceive. He does not pay much attention to my feelings. He is more concerned about how others see him.

Original:

I: ... babam hep şöyle bir insan olmuştur. Benim de düşüncelerim hep babamdan gelir. Babam da diğer insanların ne düşündüğünü ne gördüğünü çok umursar. Benim ne hissettiğim önemli değildir. Başka insanların ne gördüğü önemlidir onun için.

The repetition of similar characteristics in the fathers mentioned by other participants while discussing their personal traits was interpreted as a recurring theme in their discussions. This theme reflected their efforts to acknowledge and incorporate their perceived absent fathers, who are overshadowed by their mothers and perceived as inadequate.

3.3. Power of the gaze: Am I ideal?

The super-ordinate theme focuses on how the participants perceive and interact with the gaze of Others. "Being visible" is crucial to the participants. This concept of "being visible" encompasses not only their physical appearance but also how others perceive them and whether they align with Others' expectations. Subsequently, it is interpreted that the participants put in significant effort to conform to the ideal image that they believe the Other has of them, aligning with the desires of the Other. The question can summarize this theme, "Am I ideal?" which was a prevalent thought among the participants. In this context, this super-ordinate theme also encompasses the participants' relationships with significant figures in their lives and how it relates to their experiences with anorexia and can be understood as an answer to the question "How do we locate anorexic subjects' relationships with significant Others?"

This superordinate theme is composed of three sub-themes. The first sub-theme examines the participants' perspectives on the discourse surrounding the direction of the gaze, precisely the idealized image that is desired. Because gaze addresses the direction of the desire, it was believed that the societal belief that being thin is

attractive had a significant impact on the participants. The second sub-theme delves into the participants' interest in understanding how Others perceive them beyond just their physical appearance, which is discussed in the first sub-theme. The participants expressed their attempts to understand their position in the gaze of those who are Big Others in their lives. They reported that they try to conform to the expectations of these significant figures, as outlined in the gaze and demands of the Other. This is discussed further in the third sub-theme. Overall, this super-ordinate theme delves into the anorexic participants' curiosity about whether they are perceived as ideal in the gaze of the Other and their efforts to conform to that ideal image.

3.3.1. Being thin is being beautiful

This sub-theme pertains to the participants' shared understanding of their desire for thinness. It was noted that all participants, without exception, stated that "being thin means being beautiful" as the reason for their desire. When asked about this belief's origin, they said they were unsure. They suggested that the influence of the media and external societal discourse may have played a role. This observation is interpreted as evidence that the participants are affected by the gaze and desires of Others.

Görkem shared her belief that thinness and beauty are inseparable and recalled an experience from her school days that may have contributed to this belief. She mentioned a fellow student who was tall and thin and perceived as extremely beautiful. Görkem overheard two other girls in the bathroom admiring this student's thinness and asking about her secret to being so beautiful. The student attributed her beauty to anorexia, also known as "the mannequin disease." Görkem revealed that this incident occurred three months before she began losing weight.

G: ... I have some unhealthy thoughts and tendencies regarding my body image. Like, the thinner I am, the more beautiful I feel. I remember when I first learned about anorexia. I was in the school bathroom and overheard two girls talking about another student. They were discussing how thin and beautiful she was. I was fascinated by her appearance. She was tall and very thin, and I thought she looked amazing. The girls in the bathroom were

asking her how she managed to be so beautiful and so thin, and she told them it was because of "model's disease,"- also known as anorexia. After hearing that, I began losing weight about three months later.

Original

G: ... Bunlar çok sağlıklı şeyler değiller. Ama ne kadar zayıfsam o kadar güzelmiş gibi hissediyorum. Ben anoreksiyayı nasıl öğrendiğimi hatırlıyorum. Tuvalette iki kızın konuşmasına şahit olmuştum. Başka bir kız hakkında konuşuyorlardı. O kız çok zayıftı. Onun çok güzel olduğunu düşünüyordum, gerçekten çok beğeniyordum. Böyle uzun boylu çok zayıf bir kızdı. Tuvaletteki kızlar da bu kıza nasıl böyle zayıf ve çok güzel olduğunu sormuşlardı. O kız da manken hastalığı demiş. Ben de ondan üç ay sonra falan kilo vermeye başladım.

Serra also stated that being thin means being beautiful and that this idea is ingrained in her mind because of the television shows and young girls' magazines that she used to consume.

S: Interestingly enough, I believed that being thin meant being beautiful. I found that thin and tall women were considered pretty. During my childhood and adolescence, the internet was prevalent, and it was accessible through computers, telephones, television, and girlie magazines. These mediums had a significant impact on me as I saw on the cover pages of magazine headlines that read "getting ready for summer" and "detox plans to lose three kilos in a week," featuring celebrities like Britney Spears and Paris Hilton, who were all thin. This exposure made me accustomed to this kind of ideal beauty standard. I also think that social media played a big role in shaping my perception of beauty during my adolescent years. I would often compare myself to beauty pageant winners like Miss Turkey or Miss World and end up feeling sad.

Original

S: İlginç bir şekilde zayıf olmak eşittir güzel olmak şeklinde bir düşüncem vardı. İnce, uzun, zayıf kadınlar güzel geliyordu. Bir de benim çocukluk, ergenlik dönemimde internet vardı. Bilgisayar, telefon, televizyon, genç kız dergileri çok popülerdi. Her derginin kapak sayfasında her zaman yaza hazırlanıyoruz, bir haftada üç kilo verdiren detoks diye yazardı. Britney Spears, Paris Hilton... hepsi incecik kadınlar. İnsan göre göre alışıyor. Bence sosyal medyanın benim ergenlik dönemimde üzerimde çok etkisi vardı. Türkiye güzeli, dünya güzeli gördüğüm zaman kendimle karşılaştırıp ağlıyordum.

As the statements show, it is believed that the discourse present in media and society has impacted the thoughts and actions of the participants. This discourse conveys a

message that portrays the individual as an "object" and promotes the notion that "thin women" are desirable. It was determined that this discourse was particularly triggering for the participants who were positioned as "objects" rather than subjects in relation to the Big Other. As a result, it was deemed necessary to include this prevalent discourse as a theme.

3.3.2. How do I look in someone else's eyes?

This sub-theme highlights the participants' preoccupation with how they are perceived by other people beyond just their physical appearance. It was noted that the participants, who were highly concerned with how they appeared to others, attempted to act following the "ideal image" in the gaze of the Other. This was seen as a situation that hindered the participants from expressing their subjectivity (e.g., restraining themselves during the interviews, and so on.). In this context, the participants stated that they determined their behavior based on how they would appear in the eyes of the Other, and in this context, they discussed their actions to align with this gaze.

For instance, during the interview, Işıl paused, saying that she stopped herself because she felt like she was talking too much. When asked why she did this, she said it was related to how important it was for her to appear a certain way in the eyes of the other person. Işıl mentioned wanting to appear intelligent and not say nonsensical things in front of others, which indicates the desire to conform to the ideal image. Additionally, she expressed a lack of self-confidence, unsure of how the other person perceived her. Işıl made a slip by saying "in the face of who I am" (referred to as "*olduğum kişi karşısında*" in Turkish), which is interpreted as the subject internalizing their position in the gaze of the Other and not being able to differentiate themselves. This is all interpreted in the context of the importance placed on the gaze of the Other concerning self-perception and behavior.

Işıl: I sometimes feel like I give too much information and talk too much. It is like I am repeating myself, and I think it is best to stop talking.

Researcher: Why do you feel the need to stop yourself?

I: I am not entirely sure. I think it has to do with how other people perceive me. I often have this feeling of wanting to stop myself from speaking. Like when I feel like my words might sound silly.

R: Why is it so crucial for you to be understood by other people?

I: I am not sure. I think I want to be perceived as someone who speaks intelligently and does not say nonsensical things. I do not want to be regarded as stupid or as someone who does not make sense. It is tied to my own self-perception. I do not want to keep saying the same things over and over again in front of others. Of course, this also has to do with how others see me. I do not have much external confidence. I do not know if there is a specific term for it, but I am never sure if I am considered a successful student, someone who can become a lawyer or someone who can excel in exams.

Original

Işılay: Bazen çok fazla bilgi verdiğimi ve çok fazla konuştuğumu düşünüyorum. Sanki sürekli aynı şeyleri söylüyorum. O yüzden de bari susayım, konuşmamı durdurayım diye düşünüyorum.

Researcher: Neden kendini durdurmak isteyesin?

I: Bilmiyorum. Karşımdaki kişinin gözünde nasıl görüldüğümle alakalı sanırım. Böyle genel bir durumum var. Kendimi durdurmak gibi. Sözlerimin saçma geleceğini düşündüğüm an susuyorum.

R: Sözlerin karşı tarafta nasıl anlaşıldığı neden bu kadar önemli?

I: Bilmiyorum. Sanırım böyle düzgün konuşan, saçmalamayan biri olarak görünmek istiyorum. Böyle aptal biri gibi, zurvalayan biri gibi görünmek istemiyorum. Olduğum kişiyle de alakası var. Olduğum kişi karşısında, sürekli aynı şeyleri söylemek istemiyorum. Tabii bu durum da insanların gözünde nasıl görüldüğüme geliyor. Dış güvenim hiç yok. Böyle bir terim var mı gerçi bilmiyorum. İnsanların gözünde başarılı bir öğrenci, avukat olabilecek bir öğrenci, sınavı kazabilecek bir öğrenci gibi görüldüğümünden hiçbir zaman emin olamıyorum.

Görkem stated that she desires to be perceived as intelligent in the eyes of others, particularly her family. She aims to be accepted as fulfilling the image that she believes her parent(s) view as ideal.

G: I am concerned about the perceptions others have of me, and I desire for them to view me as a person who is smart.

Original

G: İnsanların benim hakkımda ne dediklerini umursuyorum. Beni zeki biri olarak görmelerini istiyorum.

As presented by the participants' statements, the participant's thoughts and feelings were characterized by a strong desire to be perceived as meeting the expectations of

Others. They were concerned with how Others viewed them and whether or not they were seen as deemed ideal in the eyes of the people around them.

3.3.3. Expectations: Gotta Meet Them All!

This sub-theme highlights the participants' perspectives towards the expectations set by those they have a relationship with and those who act as a "Big Other" figure for them. The participants expressed a strong inclination to meet these expectations.

Işıl stated that she felt intense pressure to meet the expectations of her father, who is an educator, and that it was vital for her to meet these expectations in order to be seen as "father's daughter" despite the challenges it might bring. This behavior was interpreted as Işıl's desire to align with the gaze directed towards her as her father's daughter.

I: As the daughter of a chemistry teacher, I felt pressured to excel in chemistry and not disappoint my father or my chemistry teacher. I remember my chemistry teacher even mentioning such an expectation from me, saying, "You are the daughter of the chemistry teacher, so you should be good at it." This added to the already challenging chemistry. I constantly needed to meet this expectation and prove myself as a capable student, not just to my father and chemistry teacher but to all my teachers and classmates. I felt they all expected me to be better because of my father's teaching profession.

Original

I: Babam kimya öğretmenini olduğu için babama sorun çıkartmak istemiyordum. Kimya öğretmeninin kızı kimya dersinde iyi olmalı gibi bir düşüncem vardı. Kimya öğretmenimin de benden bunu beklediğini düşünüyordum. Ki yanlış hatırlamıyorsam bana bu beklentisini söyledi. Sen kimya öğretmeninin kızıydın dedi. Lise hayatım bu şekilde geçti. Bir de kimya diğer derslerden daha zor görünüyordu bana ancak beklentiyi karşılamak benim için çok önemli. Babamın öğretmen olması, birinci olma kaygım, babamın ve diğer öğretmenlerin benden beklediği bir şey gibi geliyor bana. Onlar bence benden daha iyi olmamı bekliyorlardı.

Görkem highlighted her strong desire to fulfill her family's expectations, stating that it felt like an obligation. She also emphasized the importance of receiving approval from her mother, noting that when she met these expectations, she felt a sense of

pride from being positively regarded in her eyes. This was interpreted as a reflection of the impact of the "gaze" of Others on her actions and emotions.

G: As I see it, I really wanted to live up to my family's expectations. I felt a strong desire to get into the school they wanted me to attend. Even though they did not explicitly put pressure on me, I still felt this sense of "success" hanging over me. I believe they care about me, but I think it's more accurate to say that I wanted to make them proud of me. I wanted to meet the expectations they had for me. Moreover, I felt proud when my mother was content with my actions.

Original

G: Beklentileri karşılamayı çok istedim. İstedikleri okulu kazanmayı çok istedim. O başarı meselesi var, baskı olmasa bile o isteklerini bize set etmişler gibi. O yüzden ona ulaşmak zorundayız gibi hissediyorum. Beni sevdiklerini düşünüyorum ama onları gururlandırmak istiyorum desem daha doğru olur. Benden beklentileri karşılamak istiyorum. Annem benden memnun diye gurur da duyuyorum.

As evidenced by these quotes, the primary focus in the participants' discussions is their attempts to conform to the ideals and expectations set by the individuals they consider to be the "Big Other" in their lives. This behavior is considered to stem from their desire to align themselves with the gaze of the "Big Other."

3.4. To be or not to be: Striving to “exist”

The super-ordinate theme encompasses the participants' struggles in becoming their own individual selves, the solutions they have found, and their self-perception. It was observed that the participants had difficulty establishing their own boundaries due to the influence and presence of a powerful and all-knowing entity known as the (m)Other. This issue was prevalent in the first and third super-ordinate themes. It was observed that the participants attempted various methods to separate themselves from the omnipotent, omnipresent, and omniscient Big Other. They also exhibited behaviors that went against this separation. It was observed that the participants agreed with the "Big Other" in regard to maintaining situations where their personal "boundaries" were not clearly defined. It was suggested that the participants wanted to separate themselves from the Other and simultaneously maintain a state of

boundaryless situation. Subsequently, this super-ordinate theme was labeled as "to be or not to be: striving to exist" to convey the participants' fluctuation between "being a separated individual" and "being a non-separated individual." Additionally, this theme is believed to provide insight into the questions of "How do we understand the position of individuals with anorexia in their relationships with significant others?" and "What is the meaning of anorexia nervosa for the anorexic subject?"

The first theme centers around the participants' ambiguous boundaries and their discussions about preserving this state of boundarylessness. Their boundarylessness can be interpreted as all or nothing (referred to as "*ya hep ya hiç*" in Turkish). The second sub-theme examines the passive stance of the participants, who are unable to assert their own subjectivity amidst the confusion of boundaries. The first two sub-themes suggest that the participants primarily exist in a state of "not being." In the third sub-theme, the role of anorexia nervosa in the participants' becoming separated subjects and setting boundaries was discussed. In this context, the third sub-theme delves into the participants' efforts to "exist."

3.4.1. Always wanting more: There is no limit

This sub-theme explores the participants' perspectives on constantly wanting more in various aspects of their lives, including ignoring physical limits of being in a human body, such as overeating or overdrinking, as well as disregarding societal and cultural boundaries by engaging in risky behaviors like unprotected sex with multiple partners or addictive behaviors. This sub-theme is included under the super-ordinate theme of "to be or not to be: striving to exist" because it addresses the participants' attitudes towards disregarding boundaries. The question is raised to see whether the subject can indeed exist without any limits or boundaries and to see if they use this boundarylessness as a shield against the control of the "Big Other." The "boundarylessness" of the participants is interpreted as a boundary they have created to resist the domination imposed on them by the "Big Other." However, this can be seen as a move towards "non-existence."

For instance, Işıl states that she is unable to define herself as a person with well-defined boundaries, and her desire to establish clear limits is significant. She expresses confusion about her own limits and engages in behaviors such as excessive eating and drinking. She also notes that this behavior is similar to when she has anorexia nervosa and that her approach to boundaries is an "all or nothing" mentality. This confusion about boundaries and the inability to take a stationary position on them is central to Işıl's discourse.

I: I do not really know where my boundaries lie, but I wish I did. I wish I had limits when it comes to mental things like eating and drinking. I tend to go overboard with those things, like overeating or drinking too much, without really being aware of it. It affected my eating disorder too. I either restrict or indulge myself completely. There is no in-between for me.

Original:

I: Limitlerimin belli olduğunu söyleyemem ancak limitlerimin belli olmasını isterdim. Örneğin belli bir dereceye kadar yemek, belli bir dereceye kadar içmek... bunun gibi şeyler. Çünkü ben sınırsız yiyorum. Mesala limit deyince aklıma alkol geliyor, mesala ben alkolde de uzun süre limitlerimi bilemeden böyle içerdim. Ben böyle her şeyin çok ölçüsünü kaçıyorum. Zaten yeme bozukluğunda da bunun etkisi oldu. Ya hep ya hiç. Ya tamamen kısıtlama ya da tamamen çok yeme gibi bir durum oldu.

Görkem states that there is no limit to how much weight she can lose and that she always feels the need to lose more. She feels that being thin and beautiful go hand in hand. Görkem compared her experience of engaging in sexual activities with numerous unfamiliar individuals to a momentary insight she had during the interview and compared this situation to an addiction reaction concerning her eating habits. This observation highlights the connection between addiction and a lack of boundaries, suggesting that Görkem struggles with setting and maintaining boundaries for herself.

G: I constantly strive to be liked by others, but it feels like there is no end to it. For example, I weigh myself regularly, and when I saw that I weighed 49 kilos today and 50.5 kilos yesterday, I wondered if I had gained too much weight. Even though 50.5 kilos are still considered thin, it feels like there is no end to how thin I want to be. Sometimes I even think about how amazing it would feel like to weigh 40 kilos. I know these thoughts are unhealthy, but I feel that the thinner I am, the more beautiful I get. I was also engaging in

sexual activities with many people I did not know, and this situation caused distress. I resorted to lying to continue this behavior, which felt addictive. I used to lie to people, but now I realize that it is similar to my eating habits.

Original:

G: İlk aklıma gelen şey beğenilmek istiyorum. Ama bunun bir sonu yok. Her zaman daha çok kilo verebilirim. Mesela bu sabah tartıldım. 49 kiloydum 50.5 olmuşum. Kilomu görünce acaba dedim, çok mu kilo aldım... Aaa! Şimdi şunu fark ettim. Sadece kilo almakla ilgili değil, 50,5 kilo da zayıf ama ben sonu yok gibi hissediyorum. Örneğin 40 kilo olsam... bunların çok sağlıklı düşünceler olmadığını biliyorum ama ne kadar zayıfsam o kadar güzelim gibi hissediyorum... Bir de çok fazla tanımadığım insanla birlikte oluyordum. Bu bana zarar veren bir şeydi, bunu devam ettirebilmek için yalan söylüyordum. Bu durum bana bağımlılık tepkisi gibi geliyor. Bir sıkıntı olmadığını söylüyorum ama bir sıkıntı vardı. Şimdi böyle düşününce... şu an fark ediyorum. Yeme alışkanlıklarım da benzer bir durum vardı!

The participants reported difficulty in establishing boundaries was interpreted as a struggle with the question of "to be or not to be." These boundaries were found to be both physical and/or in relation to cultural connections. It is believed that the participants, who are in a relationship with the all-encompassing "Big Other," lack a clear understanding of where their boundaries lie. Without clear boundaries, it is difficult to define a stationary position of the subject. Since all the participants have experienced a tendency towards limitlessness, this issue emerged as a common theme. It was examined in the context of the "absence" of a clear sense of subjectivity.

3.4.2. Pretending I don't exist

This sub-theme highlights the participants' recurrent comments about suppressing their thoughts and opinions in a compliant manner. The participants described their interactions with other people, including family members, in terms of their inability to assert their own wants and needs. In other words, it was thought that the participants who could not express their desires and wishes placed themselves in a state of "not to be" by not assuming responsibility for their desires and wants.

Işıl describes herself as a compliant individual who is reluctant to assert her own opinions. The use of the word "defend" (corresponds to "savunmak" in Turkish) in

this context highlights Işıl's struggle in revealing her subjectivity. Furthermore, Işıl notes that she readily adopts other people's opinions and feels as if she has no opinions of her own. This situation is examined in relation to the "not to be" aspect of the subject's "to be or not to be" dilemma. The term "mediator" (corresponds to "arabulucu" in Turkish) chosen by Işıl is also significant in terms of "inexistent" in this context. By stating that she does not take sides, it was thought there was the implication of not existing as a subject.

I: As a person, I am flexible and able to adapt to different situations. My thoughts and opinions are not always clear and defined. I am not inclined to defend or argue my point of view on specific matters. Most of the time, I act just like a mediator. When communicating with others, I tend to agree with them and say, "yes, you are right," before sharing my own thoughts. Mostly, I believe that the other person's perspective is correct. I tend to acknowledge where they are right. I do not have much trust in my own thoughts and opinions, and others easily influence me. I tend to adopt the thoughts and opinions of others quickly.

Original

I: Uyumluyum. Ortamlara uyum sağlarım. Düşüncelerim çok net değildir. Belli bir konuda düşüncemi savunmak ve tartışmak istemem. O yüzden daha çok arabuluculuk yaparım. Biriyle konuşurken, kendi düşüncelerimi ifade etmeden önce o kişiye "evet, haklısın" derim. Çoğu zaman karşı tarafın haklı olduğunu düşünürüm. Onun haklı olduğu yerlerden bahsederim. Karşı tarafı haklı görmek gibi bir eğilimim var. Kendi düşüncelerime çok fazla güvenmiyorum. Başkalarının düşüncelerini çok çabuk benimserim. Düşüncelerim başkalarından çok çabuk etkilenir.

Melike expresses that she refrains from expressing her own desires and wishes because they may not align with the other person's views. She feels more comfortable going along with what the other person wants and sees this as a way of avoiding taking responsibility. This reluctance to take responsibility is related to the concept of "not to be" in the binary context of "to be or not to be." In other words, this reluctance to responsibility is interpreted as reluctance to subjectivity.

Researcher: "I understand that you may have a personal preference about something, but you choose not to express it or find it difficult to do so; what do you think would happen if you did?"

Melike: "It may not align with the other person's wishes... I can consider my own desires later, but if the other person has a clear and decisive stance and

can express it, it feels more right to follow their lead... I want to avoid taking on responsibility.

Original

Researcher: "Yani bir tercihin var aslında bir konuyla ilgili ama onu söylemiyorsun ya da söyleyemiyorsun yani söylersen ne olur sence?"

Melike: "Karşımdakinin isteğine ters olabilir... kendi istediğimi daha sonra da düşünebilirim ama onun bir kararı varsa kesin ve netse ifade edebiliyorsa onun dediğini yapmak daha doğru geliyor... sorumluluğu üzerimden atmak istiyorum."

Adile described her relationship with boundaries through the lens of negation and self-definition by stating that she is not someone who oversteps boundaries. She also revealed that her mother shapes her understanding and behavior towards boundaries, and she acts in a way that her mother finds appropriate to avoid any adverse reaction. This behavior was perceived as an obstacle in the formation of Adile's own subjective existence.

A: I am mindful of boundaries, as I am often in my mother's presence. I am aware of her reactions and adjust my actions accordingly to avoid crossing any boundaries.

Original

A: Ben hep annemin yanında olduğum için sınırlarını aşan biri değilim. Annemin ne tepki vereceğini bildiğim için davranışlarımı da ona göre belirliyorum."

These passages demonstrate the belief that the participants faced challenges in assuming responsibility for their desires as individuals and asserting their presence as subjects. This difficulty was understood in the context of their positioning in the "not to be" aspect of the existential question "to be or not to be."

3.4.3. Guarantor of existence: Functions of symptom

In the interviews with participants, it was observed that having a diagnosis of anorexia nervosa may serve certain functions for the individuals. One of the themes that emerged was the idea that the participants felt controlled by an all-knowing and all-powerful "Big Other," like the first superordinate theme. The effects of this were discussed under the fourth superordinate theme of "to be or not to be." It was also

thought that anorexia nervosa might be a form of protection and comfort against this overwhelming control. Thus, the theme was named "guarantor of existence." The functions of anorexia nervosa as a symptom were identified as "Being at the wheel: The illusion of regaining control," "Efforts have some boundaries," "Addressing the third one: the father," and "Way of be-ing.". These sub-themes were mainly seen as ways for the individuals to assert control in the face of the demanding and oppressive "Big Other." Additionally, it was also thought that anorexia nervosa might serve as a way to involve the "father," who was discussed in the second superordinate theme as being in a state of "presence and absence" in the process. This is also highlighted in the subheading "Addressing to the third one: the father."

3.4.3.1. Being at the Wheel: The illusion of regaining control

The sub-theme represents the perception of control that the interviewees felt as a result of their anorexia nervosa. Participants shared their experiences of feeling stressed and pressured in various aspects of their lives before their diagnosis and expressed that they could not exert control over certain situations. However, they stated that restricting their food intake gave them a sense of control.

Görkem states that she had very limited autonomy in her life when she was living with her family. She describes feeling like she had no sense of self in a family environment. As a result, Görkem began to exert control over her food to control other aspects of her life. After losing it, this was a way to regain her sense of self when transitioning from an independent life to one where only her daughter's roles defined her.

G: As I lived with my family, I did not have much control over my life. I felt like I was not in an environment where I could be true to myself. I had transitioned from being independent and having control over my own life to being a daughter in a household. I believe that during this transition, I began to control my food as a way to assert control over something in my life.

Original

G: Aile evinde yaşadığım zaman kontrol edebileceğim çok az şey vardı. Çok mutlu olduğum bir ortam değildi. Benliğimin olduğu bir ortamda değildim. Kendi kişisel ortamımdan, kendi kurduğum hayattan bir anda evin kızı

olmaya geri döndüm. O noktada bir şeyleri kontrol etmek istediğim için yemekleri kontrol etmeye başladığımı düşünüyorum.

Işıl mentioned feeling stressed and anxious during exam periods and said she felt she had no control over anything. She also said that she began to reduce the amount of food she consumed. Although Işıl does not explicitly state that she started controlling her food because she could not control other aspects of her life, as Görkem did, the way she speaks about it interprets it served a similar purpose for her.

I: As I began high school, my circle of friends and my schedule altered. I began to feel a lot of pressure and anxiety regarding my academic performance. I felt like there was nothing in my life that I could control. I could not control my classes, my school, or even my friends. As a result, I started to eat less and less because I was scared of gaining weight. I wanted to have control over something in my life.

Original

I: Liseye başladığımda doğal olarak arkadaşlarım değişti, sınıfım değişti, aldığım dersler değişti. Üzerimde baskı hissetmeye başladım. Başarılı olma kaygısı yaşamaya başladım. Hiçbir şeyi kontrol edemiyordum. Dersleri kontrol edemiyordum, okulu kontrol edemiyordum, arkadaşlarımı kontrol edemiyordum... Gittikçe yediklerimi azaltmaya başladım. Kilo almaktan çok korkuyordum... bir kere kontrol etmek istiyordum. Kontrolümde olmasını istiyordum.

It can be observed from these quotations that the participants, who felt that they had no control over their lives, began to control their food intake in order to experience a sense of control. For participants who feel they have no control over their own lives, the perception of being able to control something can be functional for that particular time. However, it is clear that this sense of control is not genuine, and the underlying issues causing a lack of control still need to be solved. This is why the theme is called the "illusion" of gaining control.

3.4.3.2. Efforts to establish some boundaries

This sub-theme highlights the various strategies the participants employ to establish their boundaries. The individuals discussed their attempts to set boundaries and provided explanations, such as wanting to avoid manipulation, surveillance,

suffocation, and interference. This behavior was interpreted as an attempt to carve out a personal space for themselves by individuals who struggle to locate a space for their own subjectivity.

Melike mentioned that she dislikes when decisions are made for her, feeling uncomfortable even if they are made for her own good. She desires to make decisions about her own life and shared that after her experience with anorexia nervosa, she was able to say no to her mother on various issues and even restricted her mother from entering her room to avoid any interference. These examples are seen as her attempts to establish her personal boundaries in the face of the powerful and all-knowing "Big Other" in relation to her experience with anorexia nervosa.

M: I do not like it when someone else makes decisions for me; it goes against my will. Even if it is for my own good, I do not want someone else making decisions about things that only affect me, like going out. After my experience with anorexia nervosa, I made it clear that I did not want any junk food in the house. I also want to be the one who makes decisions about my clothes because it is something that concerns me only. My mother used to be very involved in my clothing choices, but I told her that I want to wear what I want and I don't care how I look. I do not allow her in my room anymore because she always interferes with things there.

Original

M: Başka bir insan, benim yerime karar veriyor. Ben bunu istemiyorum. Benim isteğime karşı karar veriyor. Sadece beni etkileyecek olaylarda, örneğin dışarıya çıkmak gibi, benim adıma benim iyiliğim için bile olsa karar verilmesini istemiyorum. Anoreksiya nervozadan sonra eve abur cubur almayın dedim. Kıyafetlerim de sadece beni ilgilendiren bir konuydu, bu konuya da sadece ben kendim karar vermek istiyorum. Kıyafet konusunda annem çok karıştıyordu. Ona ben bunu giymek istiyorum, nasıl görüdüğüm umrumda değil dedim. Artık odama girmesine de izin vermiyorum. Çünkü odama girdiğimde odamdaki şeylere karıştıyordu.”

Serra mentions that she does not particularly share the details of her illness with her family. This statement, in which she describes this as getting "difficult to control," holds significance. The underlying situation is that Serra does not want to be "controlled," as she mentions. By not disclosing her illness to her family, Serra asserts that it becomes impossible for her family to observe and control her. She even goes as far as to say that she avoids communication with her mother, with whom she

has a close relationship, for several days due to this issue. This situation is again interpreted as an effort by Serra to establish her own boundaries through her anorexia nervosa.

S: I kept my anorexia nervosa a secret from my family and did not share the details of my illness with them. I became hard to control, as is typical with the disease, and I did not tell them the truth about my eating habits. I was living away from home, and they were unaware of my condition. This made it impossible for them to monitor or control me. My mother was upset with me for not eating enough. We usually have long video chats every day, but we didn't talk for a few days because of this issue.

Original

S: Ben çok semptomatik olarak ailemle paylaşmıyordum hastalığımı. Hastalığın tipik bir özelliği olarak yemek yemediğimle alakalı hiçbir söylemiyordum ya da yalan söylüyordum. Kontrol edilmesi zor bir hale gelmiştim. Evden uzaktayım ve benden haberleri yoktu. Beni gözlemlemeleri ve kontrol etmeleri imkansızdı. Yemek yemediğim için annem benimle küstü. Normalde her gün görüntülü olarak birkaç saat konuşuruz. Bu yüzden iki üç gün konuşmadığımız oluyordu.

Görkem believes that disrupting her food intake is a way of asserting control and establishing boundaries in her life. This perspective is significant in understanding the role of anorexia nervosa in setting limits. As the subject is unable to establish boundaries in other areas, they do so through their food restrictions. Görkem also mentioned that this is the reason why she frequently deceives those around her, particularly her mother.

G: I noticed that I frequently deceive those close to me in order to prevent them from disrupting my food habits and the routine I have established. For instance, when my mother prepares meals for me, or I cook for myself, I tell them that I have consumed the food, but in reality, it ends up going bad in my freezer.

Original:

G: "Şunu fark ettim. Yemeğime karışılmaması için yani kendi kurduğum düzene karışılmaması için etrafımdaki insanlara çok fazla yalan söylüyorum. Mesala annem yemek gönderiyor ya da ben kendime yemek yapıyorum. Bu yemekleri yediğimi söylüyorum ama aslında buzluğumda bozuluyorlar."

As demonstrated in these quotes, it appears that anorexia nervosa allows the participants to establish a barrier between themselves and the "Big Other." In the

realm of the question "to be or not to be," this attempt to establish a divide is viewed as a means of existence for the subject.

3.4.3.3. Addressing the third one: The father

This sub-theme focuses on the connection between the participants' experiences with anorexia nervosa and their relationship with their fathers. It was noted that the participants frequently mentioned their fathers' reactions and their interactions with them when speaking about their anorexia nervosa. This is interpreted as the participants attempting to involve their fathers in their lives through their anorexia nervosa. In other words, anorexia nervosa is being used by the participants as a way to communicate with their fathers.

Görkem stated that she did not reveal to anyone in her family that she had been diagnosed with anorexia nervosa. However, she believed her father might have an idea about her condition. She mentioned that she had dropped hints to her father about her illness and shared details about her symptoms with him but was uncertain about how her father perceived it. This, and the fact that Görkem only shared information about her illness with her father specifically were interpreted as Görkem's attempt to seek her father's attention and understand her impact on her father. Görkem's comment "about how seriously her father takes her" was seen as a sign of her curiosity to know whether her father would respond to her call for help.

G: I have not informed my family of my diagnosis. They are still unaware of it, but I believe my illness is noticeable. My friends have suspected it, as I have been losing weight rapidly and avoiding eating in front of other people. My father might have an idea, as I confided in him about my struggles with food and mentioned that I was trying to make myself throw up. However, I do not think he took it seriously, as he simply told me that I will constantly struggle with trying to lose weight in the future and that if I do not eat for a while, it will be a problem.

Original

G: Tanı aldığımı söylemedim. Yani aileme söylemedim. Hala bilmiyorlar ancak bence hastalığım bayağı belli. Arkadaşlarım tahmin ediyor, çok hızlı kilo veriyorum, insanların yanında yemek yemiyorum. Ama babam biliyor sanırım. Yemekle ilgili sıkıntılarım olduğunu, kendimi kusturmaya

çalıştığım dan ona bahsetmiştim. Ancak ne kadar ciddiye aldı bilmiyorum. Çok ciddiye almış gibi durmuyor. Öyle bir tepki hatırlamıyorum. Sadece babama dedim. Yemek yiyemiyorum, yemekler midemi bulandırıyor dedim. O da bana hayatın boyunca kilo vermeye çalışacaksın, bir süre de yemek yeme, bir şey olmaz dedi.

Işıl, on the other hand, linked her anorexia directly to her father and linked her father's strictness to her own strictness in her anorexia. She mentioned that her father pointed out her weight gain in the fourth grade and was against it. These statements suggest that Işıl has established a connection between anorexia nervosa and her father. She seems to fulfill her father's desires by saying, "I will not gain weight." Işıl also wants to demonstrate to her father the adverse effects of being a rule follower through her anorexia nervosa. In other words, she is punishing her father through her anorexia nervosa. These statements by Işıl are seen as her way of calling out to her father in the context of their relationship.

I: I recall a moment from my fourth grade when my father commented on my weight gain. He has a negative view of weight, which could have contributed to my development of anorexia nervosa. Growing up, my father was rigorous, and as a result, I also became strict in my own ways. Looking back now, I realize that perhaps I was using this strictness to punish my father for his strict behavior towards me.

Original

I: Dördüncü sınıfta iken, babam bana sen biraz kilo aldın demişti. Babam kiloya karşı biridir. Kilo almam... ya da diyet yapmama babam sıcak bakıyor olabilir. Anoreksiya nervoza olmam da babamla alakalı olabilir. Babam çok kuralcı biriydi. Ben de çok kuralcı bir insan oldum ve bu kuralcılığın ne kadar zararlı olduğunu bu şekilde babama göstermiş oldum. Şu an bunu düşünüyorum ama belki babamı cezalandırmak istemişimdir.

The analysis of these quotations revealed that the participants used their struggles with anorexia nervosa as a way of reaching out to their absent fathers. As a result, this phenomenon is named "addressing the third one: the father."

3.4.3.4. The way of be-ing

This sub-theme highlights the enjoyment the participants experienced through being thin, abstaining from eating, shedding weight, and the sense of power and control

they felt. Essentially, they spoke about the positive aspects that anorexia nervosa brought into their lives. The participants stated that not eating was beneficial for them, and they felt stronger, more determined, and more content. This indicates the significance of anorexia nervosa in the participants' journey of becoming a unique and separated "subject." To put it differently, the participants utilized anorexia nervosa to "exist".

Serra finds personal satisfaction in losing weight and feels good about herself. She emphasizes that her own opinion and preferences are important, rather than the opinions and desires of other people. This can be seen as her way of distinguishing herself from the gaze and desire of Others, as discussed in the third super-ordinate theme.

S: I may have some underlying desire to be more accepted in society, but I primarily lose weight for my personal satisfaction. When I look at myself in the mirror, I feel proud and happy with what I see. My aim is not to please others by being thin or attractive, but rather to satisfy myself by feeling good about my appearance.

Original

S: Tam olarak emin değilim. Belki toplumda daha fazla kabul görmek içindir. Ancak bundan ziyade, bunu kişisel tatmin için yapıyorum. Aynaya baktığımda kendimi beğeniyordum. Zayıf olarak ya da güzel görünmeye çalışarak kendimi bir başkasına beğendirmeye çalışmıyordum. Zayıf ve güzel olarak kendi kendimi tatmin ediyordum.

Serra expressed that she felt a strong impulse for food when others were dining and that abstaining from eating at such times gave her a sense of empowerment. Her commentary once more indicates that not eating is considered a method of existing as a subject.

Researcher: So, can you describe your feeling when you observe others eating something you crave but choose not to partake in?

Serra: Yes, it is pretty fascinating, actually. When I experience this, I feel very determined and in control of my actions. I am proud of myself for

resisting temptation and making the conscious choice not to eat. It gives me a sense of psychological satisfaction and a belief in my own strength.

Original

Researcher: Peki şey nasıl bir his önünüzde birileri bir şey yiyor canınız çekiyor ama durduruyorsunuz kendinizi?

Serra: İşte çok ilginç bir şekilde onu yaptığım zaman çok iradeli ve güçlü hissediyordum, kendimi psikolojik olarak da tatmin ediyordum, herkes yedi ama ben yemedim, ben çok güçlü biriyim diyordum.

Melike pointed out that she discovered her potential and what she could achieve by losing weight. She stated that if she were to gain weight again, she would revert back to her previous insecure, shy, and unsuccessful self. It seems that for Melike, not eating is a way of constructing her subjectivity.

Melike: Typically, I am not known for being a hard worker, and I struggle with putting in the effort, but when I set my mind to something, I see it through to the end. This was the case with my weight loss journey, as I had struggled with being overweight...

Researcher: What does gaining weight signify to you?

Melike: A relapse into my previous shy and timid self, which I wanted to avoid at all costs. I love food, but the thought of going back to my old self was so daunting that it prevented me from eating. So, in a way, it was a personal victory for me.

Original

Melike: Ya normalde... çok böyle çalışma şeyinde değilim çok çalışmayı beceremem ama bir şeyi azmettim mi onu sonuna kadar yaparım bu da kilo vermeye şey oldu yani kilolu...

Researcher: Kilo almak senin için ne demek?

Melike: O utangaç çekingen halime geri dönmek başarısız... bir de yemeyi çok istiyordum çünkü yemek yemeyi çok severim ama işte o hesaplar beynimi çok yoruyordu korkutuyordu o yüzden yiyemiyordum, aslında biraz benim için başarıydı.

Işılay mentioned that before she struggled with anorexia nervosa, she was characterized by insecurity, shyness, and a lack of recognition. She highlighted that by overcoming this challenge, she had accomplished something that not everyone was capable of and that this set her apart and made her unique.

I: I used to believe that before I struggled with anorexia, I was a much more insecure individual who was very shy and basically a nobody. However, now

I see the fact that I was able to overcome this disease as something that sets me apart and gives me a sense of strength. I see myself as a strong person now because I was able to overcome something as difficult as anorexia, and this gives me the confidence to tackle other challenges and achieve other things in life. Additionally, overcoming anorexia has helped me overcome my shyness and be more confident in myself.

Original

I: Ben hep şöyle düşünmüşümdür, ben anoreksiya olmadan önce çok kendine güvensiz, çok çekingen, çok silik bir insandım. Bence, benim böyle bir şeyi atlatmış olmam -ki bence herkes için söylenemez- bir hastalığın üstesinden gelmiş olmak herkesin yapabileceği ya da yapmış olduğu ya da yapabileceği bir şey değildir. Bu durum, beni öne çıkaran bir şey, bunun üstesinden gelebilmiş olmamın benim hayatımda önemli bir yeri var. Evet, ben bunu başardım, ben bunun üstesinden geldim, ben bunu yendim. İşte bu, benim çok güçlü bir insan olduğum anlamına geliyor, bundan sonra kendimi güçlü bir insan olarak görmeye başladım ve hani ben bunu yaptıysam, başka şeyleri de yapabilirim, ben bunu bile yendim, başka şeyleri de yenebilirim, başka şeyleri de başarabilirim gibi düşünmeye başladım ve hani bu durum, aynı zamanda çekingenliğimi yenmeme de yardımcı oldu.

Upon analysis of the quotes, it was concluded that the experience of anorexia nervosa impacted the participants. This experience allowed the participants to see themselves in a positive light and make positive self-assessments. As a result, the theme was named "the way of be-ing".

CHAPTER 4

DISCUSSION

The current research aimed to examine the dynamics between the anorexic subject and the Big Other, as well as to explore the significance of anorexia nervosa for the individual through the lens of Lacanian psychoanalysis. For this purpose, interviews were conducted with five participants diagnosed with restrictive type anorexia nervosa. The questions “How do we position anorexic subjects in their relationships with significant others?”, “How is family dynamics in anorexia nervosa?” and “What is the meaning of anorexia nervosa for the anorexic subject?” formed the basis of these interviews. In order to find answers to these questions, the interviews were analyzed with the reflexive theoretical thematic analysis method (Braun & Clarke, 2021). Based on their statements, it was seen that the participants were faced with an omnipotent and complete m(Other) and an ambiguous father figure. Within this dynamic, it was thought that the participants tried to use anorexia nervosa as a way to separate. As stated in the findings section, four main themes were used in the light of the information obtained from the interviews.

Looking at the relevant literature in Turkish and English languages, this research, which is the first qualitative research in which anorexia nervosa is handled with a Lacanian psychoanalysis orientation, aims to shed light on the positioning of the mother and the father, especially in the context of family dynamics and meaning of anorexia nervosa for the individual. The findings of the research will be discussed in the light of the relevant literature also the distinctive features of the research, its importance, clinical implications, limitations and recommendations for future studies will be discussed also in this section.

4.1. Someone who knows and has everything: Inseparable (m)Other

A child is completely dependent on her/his mother's presence in a way that is not seen in any other human relationship. When we think of a newborn, we know that no human relationship can be that disproportionate, unstable and dominant. In no other human relationship can one be that "purely omnipotent" over the other, and no one is ever as dependent on the other in every possible way (Recalcati, 2019). Because of this imbalance, the baby is never omnipotent in this relationship. As Lacan said, all strength and omnipotence always belong to the Big Other (Lacan, 1956-1957/ 2020). As a matter of fact, this imbalance in the mother-child relationship gives an unbridled power to the mother, who is in the Big Other position (Recalcati, 2019). In this context, the theme tries to discuss answer of questions is "How do anorexic subjects locate themselves in the relationships with significant Others?". When the results of the research are examined, it is seen that the mothers of the participants are the ultimate decision makers in their lives. It was observed that the traces of a relationship dynamic similar to the unbalanced and dominant relationship dynamic between the baby and the mother persisted between the participants and their mothers. This disproportionate dominance manifests itself in the participants' lives as not being perceived as individuals/subjects and continuing to live under the domination of the Big Other. What one of the participants, Melike, said while describing her relationship with her mother can be considered as a summary of this relationship dynamic: "*Annemle olan ilişkimizde o bir bürokrat ben de bir kuklayım, ilişkimiz bir yönetici ve bir kölenin ilişkisi olarak tanımlanabilir, kendimi kukla gibi hissediyorum.* [In my relationship with my mother, I perceive her to have a dominant role, similar to that of a bureaucrat. I would describe our relationship as one in which I am in the position of slave, I feel like I am being controlled and used like a puppet]." This discourse is compatible with the literature, as it defines mothers as authoritarian, intrusive and meddling with everything (Sours, 1969; as cited by Özbek Şimşek, 2019).

As a matter of fact, this dynamic is quite risky as it can cause the child/subject, who is also an "other", to evaporate, destroy their subjectivity and submit (Lacan, 1956-

1957/ 2020). The participants said that their subjectivity was not recognized in their relations with their mothers, and they were not even perceived as a human being. For example, Gökem stated that her mother did not see her as a human being, but rather as an extension of herself: “*Annemin beni bir insan olarak gördüğünü düşünmüyorum, beni çocuğu olarak değil bir uzantısı olarak görüyor.* [I have yet to perceive that my mother sees me as an autonomous individual but rather as an extension of herself].” While this discourse reflects Gökem's position in her relationship with the Big Other, it also shows the mother's difficulty in separation. By treating her child as an extension, the mother does not recognize her as a separate subject. It seems like the mother does not permit separation. Lacan associated such attempts to evaporate the subject with psychopathologies (Lacan, 1938/2006a). In line with the literature, their symptoms of anorexia nervosa emerged in a period when the participants were already reduced to the object position and had no subjectivity in parallel with the need for separation in adolescence (Recalcati, 2010). When the subject is reduced to the object position, the subject can only create the lack in the face of the omnipotent Big Other by eating nothing (Lacan, 1956-1957/2020). Not eating is the only way for the subject to show that the omnipotent Big Other is not omnipotent. In other words, the subject can only bore through the Big Other through nothing -it refers to objet petit a for anorexic subject- (Lacan, 1958/2006b), revealing the object of separation necessary for her to be separated from the Big Other (Fuks & Campos, 2010). In this context, the symptom of anorexia nervosa that manifests itself should not be interpreted as a coincidence, on the contrary, separation should be considered as a maneuver.

According to Lacan, even the most loving and devoted mother has an irresistible urge to "absorb" her children. Lacan's famous crocodile analogy has its roots in this drive. He compares the mother to a crocodile that opens its mouth to swallow her child (Lacan, 1956-1967/2020). According to Recalcati (2019), this analogy also includes the sado-cannibalistic features of maternal fantasy. In other words, the incestuous side of limitless motherhood is evident. The mother wants to swallow her child, to embody her again, to take her back into herself, to possess her completely, in other words, not to separate (Recalcati, 2019). What Gökem said about her

mother, “She sees me as her extension,” is a very good example. However, the easiest way to do this in daily life is when the mother knows everything about her child. She enjoys her body by ensuring that her child has the body she wants and is involved in everything about her child to the extent of reading her thoughts, deciding for her. In other words, she demands the absolute right of ownership over her child (Recalcati, 2010). Looking at the results of the research, it was thought that the participants had a similar “boundaryless” relationship with their mothers. According to the statements of the participants, the desire of mothers to have absolute control over their children continues: “*Annem bizim üzerimizde planlar yapar, her şeyi hep o ayarlar.* [My mother makes decisions for us; she is always in charge of every aspect of my life].” In the face of their mothers’ desire for control, the participants also share everything with their mothers without a filter and shape their lives based on the approval they get. The fact that the participants still refer to themselves as “the child” can be interpreted within this context. Psychoanalysts interpret the lying child positively in the context of the separation process. Because this way, the child actually says to her mother, “Mom, you don't know everything about me! You can't read my mind!” (Recalcati, 2019). Indeed, according to the results of the research, m(Other) stands out as the ultimate decision maker in the lives of her children. At this point, the fact that the participants, who are now adults, still do not object to their mothers to defend their wishes and tell the truth even when they know that they cannot get approval, is quite thought-provoking in terms of the “lying child” and the “separation” processes. The participants tell everything to their mothers, whom they describe as quite omnipotent and omniscient. Thus, the participants are unable to say to their mothers, who are all powerful and reject separation, “Mom, you can't know everything about me and you can't read my mind.” It is important in this respect that children diagnosed with anorexia nervosa are known as “very compliant”, in other words, as “submissive” children (Humphrey, 1989). In this study, the participants defined themselves as harmonious children who listened to their mothers. For example, Adile, while describing her mother's excessive control over her life, defined this situation as “a mother-child relationship” and stated that she and her mother had never really fought: “*Annemle hiç kavgamız olmaz anne çocuk ilişkisi bu, zaten hep annemizin yanındaydık.* [My relationship with my mother is one of a mother-child

relationship, we never fight and we are always together].” However, it is especially noteworthy that while talking about her illness, Adile also mentioned that she and her mother often quarreled. The objections and oppositions against the inseparable, omnipotent mother could only manifest in the period of anorexia nervosa. The emphasis on the period of anorexia here is very important. In anorexia nervosa, where the subject can find space for herself only by eating nothing in the face of the omnipotent and complete Big Other (Lacan, 1958/2006b), it is quite meaningful that the only point where the subject stands against the Big Other coincides with this illness period.

However, Recalcati (2019) states that the desire for motherhood is basically something that equates to loss. Having a child requires separation. Because m(Other) has divided and not having objet petit a. However, anorexic subjects’ (m)Other’s act like complete, non-castrated. Lacan likens the degeneration of maternal desire to totalitarianism (1938/2006a), since the degeneration of maternal desire means “one entity” and there is no lack. Thus, Lacan associated this with the degeneration of the paternal metaphor, the abandonment of the norm, and the ruthless exercise of power. According to Lacan (1958/2006b) such degeneration that leads to the “oneness” in the maternal desire and the overemphasis of omnipotence will result in the illusion of mutual belonging, because there is no notion of separation in the mother. These views of Lacan can be observed in the context of the relationship between the anorexic subject and the Big Other, which is shown in the research. The inseparability of the omnipotent mother brings with it the dream of mutual belonging and oneness (Recalcati, 2019). In this context, the identification of the participants with their mothers and their statements such as “If my mother has it, so do I” and their mothers’ statements such as “Whatever I couldn’t experience, my daughter will” are quite remarkable in this context. Participants talk about their similarities with their mothers in genetics, characteristics, physical appearance and intellect. For these mothers and their daughters, it is as if there is only one person rather than two separate persons, as if they were identical. This situation can be interpreted as the inseparable mother’s effect on the child and results of a symbiotic relationship between her and her mother.

Farnori (1976; as cited by Recalcati, 2019) on the other hand, interprets this situation in parallel with the discourse of the 21st century. Giving up critical discourse in exchange for the protection of our lives is equivalent to the security and care we get from our mothers in return for our freedom. According to the results of the research, the mothers of the participants do continue to provide care and to be a control mechanism that even monitors what their children eat or not eat. Even though the cost is as big as freedom, this is actually what allows the subject to maintain the imaginary oneness that she gets *jouissance* from. In parallel with this situation, Lacan defines contemporary culture as a Big Other that is very close to the definition of the mother of the anorexic person (Lacan, 1956-1957/2020). In other words, we have an omnipotent Big Other that leaves no room for the lack, masking the real lack with false needs and constantly offering new objects as solutions. This blocks the unconscious desire of the subject, because there is no room for lack (Recalcati, 2003). This is why anorexia is thought to have increased precisely when the subject encounters such a Big Other and within such a culture (Fuks & Campos, 2010).

As a matter of fact, all these positions create a space where the subject cannot find space for herself and cannot reveal her subjectivity. When the boundaries between the Big Other and the subject are overreached, the subject is swallowed, trampled, and becomes the object of the Big Other's "*jouissance*" (Recalcati, 2010). According to the results of the research, it can be said that the participants are in the position of an ingested object rather than the subject in the relationship with their mothers. In this context, Lacan defines the Big Other faced by the anorexic subject as a Big Other that reduces the subject to the position of a passive object of care, and refuses separation (Lacan, 1956-1957/2020). This is the moment when the subject is drowning in porridge (Lacan, 1938/2006a). In the light of this information, it was thought that the participants were indeed faced with a Big Other as defined by Lacan.

4.2. Between absence and presence: The father

When we talk about the mother, we don't always have to include the word father in the system. However, it is always essential to talk about the mother when talking

about the father (Halifeoğlu, 2022). As discussed in the first theme, the mother is both the first and has the most direct influence on the child. The presence of the mother is always unquestionable (Freud, 1939/2015). Since the identity of the father is "always a bit unknown", his presence is directly dependent on the mother (Lacan, 1969-1970/2007). In this context, although the influence of the father on the child may seem more indirect, it is essential. It is because of the fact that the influence of the father also means the influence of the mother on the child (Halifeoğlu, 2022). That's why this influence is indeed vital. In this study, the father could only find a place between "presence and absence" for himself in the shadow of the omnipotent mother. The fact that the father's influence is between "present and absent" in a relationship where the mother-daughter relationship is experienced so intensely is compatible with the literature (Maine, 2004; Elliott, 2010). While mothers are always the leading roles both clinically and in the literature of anorexia nervosa, the whereabouts of the fathers is always unknown (Selvini-Palazzoli, 1985; Pirim Düşgör, 2007), and when we look at the clinical cases, we see that the relationship with the father shows deterioration (Kog & Vandereycken, 1985).

As a matter of fact, where is the father positioned as a third in anorexia nervosa, in which the dual relationship experienced with a limitless, complete, omnipotent Big Other is experienced as oneness? Also, how is family dynamics in anorexia nervosa? This study basically seeks to answer these questions. In other studies, conducted with anorexic people, paternal deprivation and absence are slightly mentioned, but the focus is always on the mother, as mentioned before (Maine, 2004). As a matter of fact, paternal deprivation has a crucial impact on anorexia nervosa and current developmental studies show that the father has very important effects on the development of the daughter in the context of anorexia nervosa (Roggman, 2004).

In psychoanalytic literature the "father" has always had a special place. Considering the works of Freud, it is seen that he attaches great importance to the "father" figure (Lacan, 1956-1957/2020). Due to his position in the Oedipal period, which is a developmental process, the relationship with the father is related to the etiology of psychological pathologies (Freud, 1905/1953). Similarly, Lacan directly associates

the role of the father in the subject's psychic construction with clinical structures. He identifies the relative absence of the father as the most important factor in the etiology of psychopathological structures, even when the subject's structure is neurotic (Lacan, 1938/2006a; Evans, 1996). In this context, the ambiguous position of the father, which is also evident in this study carried out with anorexic subjects, is very important.

Lacan associates the contemporary social decline in the father's imago with psychopathological disorders. In other words, Lacan states that we will be more likely to see psychopathological structures in children whose parents are divorced, separated or who have father images that are humiliated by their spouses (Lacan, 1938/2006a). In this context, it is possible to say that the structures such as eating disorders, addictions, etc., which Melman (2009) calls new psychological structures that manifest themselves with new pathologies, are also related to the contemporary decline as pointed out by Lacan. Also, Miller and Laurent (1997) mentioned, in modern days, there is a decline of the paternal metaphor. Descriptions such as "*silik ve yetersiz baba* [faint and inadequate father]", which also appeared in this study, suggest that there is a decline in the participants' father imago. The participants' language includes a father but he is crushed under the weight of the omnipotent mother. For example, Adile's answer to the question "What is your father like?" started out with an introduction of her mother and then continued with a description of her father as "shaped by her mother" and "doesn't say much". The father remained silent in the face of the mother, who was "not afraid of anyone" and was "oppressive and dominant". These attributions are quite contradictory with the "strong, threatening, authoritarian, vengeful" father figure that Freud associates with the Oedipal process and expects the child to have in mind (Etchegoyen, 2002). In addition, when participants were asked, "Who sets the rules at home?" it was noted that all of them mentioned their mothers who establish the rules in their household. When this answer is considered together with these excerpts from the participants, in this expression, the "father" does not have an autonomous structure. On the contrary, he lives quietly under the shadow of the omnipotent and all-knowing mother. In this

case, it does not seem possible to say that this father figure can have a separating or saving role against the omnipotent m(Other).

In this context, Recalcati (2019) also states that in a story where the mother positions herself as omnipotent, the only thing that can keep the child alive is a third one. In this context, Freud (1930/2019) expresses the child's need for a father in his work titled "*Civilization and its Discontents*" as follows: "*I cannot think of any need in childhood as strong as the need for a father's protection.*" As a matter of fact, in the interviews with the participants the presence of the father as a third is quite ambiguous. In the words of the participants, this dimness parallels the inadequacy of their fathers. Participants talked about their disappointment with their fathers: "...*babamı yetersiz gördüm. Çok yetersiz gördüm. Babam hem yetersiz bir baba hem de yetersiz bir eş.* [My father is inadequate. I have always found him very inadequate. My father is both an inadequate father and an inadequate husband.]" The Turkish word "*yetersiz*" (inadequate) used by the participants to define their fathers also makes sense at this point. The root "*yeter*" alone means "adequate/enough" while the suffix "*-siz/-süz*" means "without". This points to the father's stance, that he is "without enough", meaning he does not say "Enough!". The father fails to limit the mother by not saying "Enough, you can't cross that line!" For the participants, in an Oedipal context, their fathers are both not good enough to deserve their mothers and not strong enough to break the omnipotence of their mothers and to separate them from each other. In other words, they are not enough.

According to Lacan, this situation is quite dangerous. Comparing the mother to a crocodile that wants to close her mouth tightly, Lacan positions the child between the mother's teeth. The only thing that will save the child is the phallus, a stone cylinder that prevents the teeth from closing (Lacan, 1969-1970/2007). In other words, it is the signifier of the mother's desire. All these concepts correspond to the mother's desire, that is, what she lacks. In this context, the situation is quite thorny for the anorexic subject, who is faced with a Big Other that is thought to be complete (Lacan, 1958/2006b). It is thought that the participants performed various maneuvers in order not to be swallowed by their mothers. Just like Little Hans who developed a

phobia of horses when faced with the fact that his real father was inadequate (as cited by Hekimoğlu, 2022), it was thought that the participants developed symptoms of anorexia nervosa. Considering that phobia is in a position that structures the subject, it can be said that anorexia nervosa is a very radical choice. The act of eating nothing indicates a strong need for separation for the anorexic subject. In this way, the child wishes to end her fusion union with the Big Other (Recalcati, 2003). Indeed, when the paternal metaphor is not strong enough and the mother's desire does not point toward there, the child may do so through anorexia nervosa (Miller & Laurent, 1997). In other words, the paternal function, boundaries and distance that will separate the mother and the child is realized through anorexia nervosa. Indeed, this does not mean a total foreclosure of name-of-the-father. On the contrary, eating nothing serves as a shield and support for the subject's desire (Recalcati, 2010; Lacan, 1957-1958/2020).

In this context, Nasio quotes "*No, I do not want to eat because I do not want to be satisfied and I do not want to be satisfied, because I want my desire to remain intact. Moreover, I want not only mine, but also my mother's desire to remain intact*" (as cited by Phillips, 2020). The reference to the mother's desire here is very important. Because, in the face of a Big Other who seems to be complete/desireless, where the mother's desire does not strongly match the real father, the anorexic subject can only secure herself by being dissatisfied and creating the deficiency in her own body (Recalcati, 2010). As an alternative explanation, Lesourd (2006/2018) states that when there are no boundaries regulated by a third in the subject's relationship with the Other, the subject deviates to different ways to establish a boundary. He says that these people, whom he defines as postmodern subjects, can only experience boundaries through their bodies, because death is the only place where the body's limit will be tested and recorded. In this context, at a point where the father cannot set the limit adequately, anorexia nervosa is a very radical solution to test the boundary with the limitless Big Other and to set/record the limit.

In the context of this being a solution, it was seen that the participants did not completely ignore the presence of their fathers and rather shaped their own existence

around them. It is thought that having a relationship with the father will provide the child with an alternative ally, and in this way, she can separate from the mother more easily and form her own identity more easily (Kalter et al., 1985). The fact that the participants also referred to their fathers as a third while describing their own subjectivity was interpreted positively in this respect. During the interviews, the participants mentioned their fathers as the source of some of the characteristics they used to describe themselves. In other words, it was thought that the participants were in an effort to include their father's presence in the system by saying "this comes from my father" and "I got this from my father" and this was interpreted as an effort to identify with their fathers. However, it was also observed that the participants especially talked about their fathers while describing their anorexia nervosa processes.

Furthermore, anorexia nervosa, which finds its place in the current situation where the existence of the father is between "presence and absence" and in a world order where the Name-of-the-Father is so devalued, brings to mind the concept of the new symptoms. The new symptoms, independently of the classical symptoms, exclude the possibility of the subject's own desire and dialectical relation to the Other. In the new symptoms there is no symbolic space for the subject's desire. In other words, the new symptoms can be defined as actions that skip the symbolic and are characterized by deadly pleasure, rather than symptoms resulting from suppression, which has an unconscious meaning. However, this does not always refer to a foreclosure to Name-of-the-father (Fuks & Campos, 2010; Rudge & Fuks, 2016). In this context, Recalcati defines these symptoms, which he determined as anorexia nervosa, bulimia nervosa, addiction and panic attack, as "psychotic base", the clinical structure of people with these diagnoses is not necessarily psychotic (Recalcati, 2003). Recalcati (2011b) makes this emphasis because the symptom is shaped entirely on the body and contains intense jouissance. Of course, the reason for this situation is the weakening and evaporation of the function of the Name-of-the-Father as mentioned by Lacan (Terminio, 2004). At this point, both the statements of the participants and the diagnosis of anorexia nervosa they received are compatible with this situation. The ways the participants referred to and identified with their fathers, and how they

associated the disorder with their fathers are very important. According to the research results, it was thought that anorexic subjects still followed the traces of their fathers even in the face of the father's imago that is thought to be subject to a "contemporary decline".

4.3. The power of the gaze: Am I ideal?

During the interviews, the participants' sensitivity towards the viewpoints of other people emerged as a significant issue. This sensitivity encompassed reflections on their physical appearance as well as perceptions of other people. In essence, the participants frequently discussed their self-perception through the lens of others and their perspectives during these interviews.

The participants' perception of being observed by other people was thought to be connected both to their physical appearance and subjective presence. For them, the way they were perceived in the eyes of other people extended beyond mere physical attributes, encompassing how they were mentally perceived and whether they aligned with expectations. The participants frequently discussed their endeavors to align themselves with expectations. These efforts encompassed various actions, such as cultivating a physical appearance deemed appealing to others, adopting a personality that would garner approval, and displaying behaviors that would be valued by other people. This was interesting because anorexia nervosa is known as refusal. This refusal shows itself refusal of all stuff about the Other's (Cosenza, 2016). However, study results indicate too much acceptance rather than refusal. How is it that anorexics, known in the literature as girls who don't care about anyone's opinions (Fuks & Campos, 2010) are so sensitive to thoughts from the Big Other? In other words, this theme tries to discuss answer of "How do we locate anorexic subjects' relationships with significant Others?". In this study, this was interpreted as the participants making a concerted and intense effort to align their behavior with the idealized image which they believed the significant Other held in their mind.

The sensitivity to other people thoughts first shows itself in the perception that being thin means being beautiful in this study. According to whom does be thin means

being beautiful? The significance that participants assign to their perception in the eyes of the "Other" can be closely linked to the mirror phase, a fundamental concept in Lacanian psychoanalysis (Evans, 1996). The mirror phase occurs during the developmental period between 6 and 18 months, wherein a baby recognizes itself through its reflection in the mirror, experiencing pleasure from this self-recognition. At this stage, the baby has not yet gained full control over its own body, but through the mirror image, it perceives a unified and complete representation of itself. Paradoxically, this coexists with a fragmented perception of the body. Consequently, the baby becomes alienated from its own physical form and eventually identifies with the image in the mirror (Lacan, 1949/2006c; Özcan, 2023). This process, referred to as the first identification by Lacan (1958/2006b), corresponds to the formation of the ego and signifies the entry into the order of imaginary (Lacan, 1949/2006c).

The ego, situated within the imaginary order, incorporates a deceptive recognition or illusion within itself to experience a sense of completeness (Recalcati, 2010). Consequently, this process leads to the formation of the ego and masks the fragmented body perception of the infant. The baby perceives its own body in a manner resembling the larger and more powerful bodies it observes in its surroundings (Gençöz ve Özbek-Şimşek, 2020). This prompts the infant to idealize its own body and mistakenly believe it possesses abilities beyond the actual capacity. Lacan (1949/2006c) thus elucidated that the subject's perception of omnipotent wholeness is linked to the ego formed during the mirror phase. In this context, the sensation of omnipotence, such as the belief that one can survive without eating as observed in anorexia nervosa, can be attributed to the ideal ego developed during the mirror phase (Varhaeghe, 2004; Lesourd, 2006/2018).

Through its reflection in the mirror, the baby constructs an idealized image of itself, which is synonymous with the ideal ego. The subject perceives a convergence between their actual image and the idealized image of their ego in the mirror because of narcissistic manner (Recalcati, 2010). This initial imaginary identification hinders the subject from creating distance between themselves and their mirror image.

Excessive fixation on this idealized image can be highly detrimental, as it impedes the individual from asserting their own subjectivity (Haute, 2012) and also, it has function against to castration (Fuks & Campos, 2010). In the case of anorexia nervosa, a similar delusion of completeness and non-dividedness emerges (Lesourd, 2006/2018). In this yearning for a sense of completeness, wherein even basic bodily needs are neglected, the subject becomes fixated on their own mirrored image (Recalcati, 2010). They associate thinness with beauty, align themselves with the ideal, and develop a fixation with their own images and had to deal with anorexia nervosa. Görkem, for instance, expresses how the concept of beauty is paired with being thin this way: “*Ben anoreksiyayı nasıl öğrendiğimi hatırlıyorum. Başka bir kız hakkında konuşuyorlardı. O kız çok zayıftı. Onun çok güzel olduğunu düşünüyordum, gerçekten çok beğeniyordum. Tuvaletteki kızlar da bu kıza nasıl böyle zayıf ve çok güzel olduğunu sormuşlardı. O kız da manken hastalığı demiş. Ben de ondan üç ay sonra falan kilo vermeye başladım.* [I remember when I first learned about anorexia. I was in the school bathroom and overheard two girls talking about another student. I was fascinated by her appearance. She was tall and very thin, and I thought she looked amazing. The girls in the bathroom were asking her how she managed to be so beautiful and so thin, and she told them it was because of "mannequin's disease,". After hearing that, I began losing weight about three months later.]” As a matter of fact, this association with its own likeness on the imaginary order, specifically on the axis of the other, is limited to mere replication of the image and cannot extend beyond that (Can & Uçurum, 2022). Here, the significance lies in the participants' assertion that “*Being thin is being beautiful.*” There is no mention of a relationship with a significant Other here. It has triggered a comparison and similarity about being beautiful, which only manifests in the axis of the other, like the reflection of a mirror image. This requires a firm refusal of the Other (Fuks & Campos, 2010). The participants have internalized such narratives from their peers discussing “*mannequin disease*” in private spaces like restrooms, as well as from the individuals they observe on television and the internet. It is not related to desire; it only refers to narcissistic mirror reflection (Recalcati, 2010). Serra, in this context, put forth the equation between thinness and beauty this way: “*İnce, uzun, zayıf kadınlar güzel geliyordu. Bir de benim çocukluk, ergenlik dönemimde internet vardı. Britney*

Spears, Paris Hilton... hepsi incecik kadınlar. Türkiye güzeli, dünya güzeli gördüğüm zaman kendimle karşılaştırıp ağlıyordum. [During my childhood and adolescence, the internet was prevalent... celebrities like Britney Spears and Paris Hilton, who were all thin. This exposure made me accustomed to this kind of ideal beauty standard. I would often compare myself to beauty pageant winners like Miss Turkey or Miss World and end up feeling sad.]”. We see a young girl who cries when she compares herself to her ideal mirror image. Again, there is no reference here to the Big Other and desire. For anorexic subject, “only Other is the Other the reflected mirror image, the imaginary Other, the idealized similar one” (Recalcati, 2010). In this context, upon reviewing the existing literature, it becomes apparent that the impact of thin women portrayed in the media on anorexia nervosa is significant like Serra’s case. Models and actresses who maintain an extremely low weight contribute to the establishment of an idealized societal standard (Spettigue & Henderson, 2004). This ideal standard aligns with the desired reflection in the mirror that the participants strive to achieve and be admired for. In this case, we cannot talk about a reference related to the Big Other, as Recalcati (2014) said there is only a narcissistic double of the subject.

However, Lacan's perspective on the mirror phase extends beyond its connection to the imaginary order (Vanheulue & Verhaeghe, 2005). Lacan also associates the mirror phase with the symbolic order, highlighting the significance of the Other's existence and the influence of their words and gaze (Lacan, 1958/2006b). The act of affirming "This is you!", when a baby looks into the mirror is a crucial process that shapes the baby's development and initiates the formation of the ego ideal (Dor, 1998). "How do I look in someone else's eyes?" is can be related to this issue. In this manner, the subject engages in symbolic identification, connecting themselves with the signifiers that the Other manifests along the axis of its desire (Verhaeghe, 2004). This, in turn, sets the stage for the emergence of the subject's own desires. It is important to acknowledge that desire is inherently intertwined with the desires of the Other (Lacan, 1964/1998). Lacan posits that the ideal ego and ego ideal are intimately intertwined within the subject's construction (Haute, 2012). The ego ideal, situated within the symbolic order, provides space for the subject's own desires to

manifest (Lacan, 1958/2006b). However, in the case of anorexic individuals, their problematic relationship with the Other (referring to discussion chapter of themes one and two for a more comprehensive information) hinders the subject from creating room for their own desires. In this reason, anorexic subject places herself as if there was no big Other for separating themselves (Lacan, 1956-1957/2020). Thus, the anorexic subject may construct their identity primarily through the ideal ego, rather than the ego ideal (Recalcati, 2010). Therefore, for participants with anorexia who aspire to see themselves as their mirror reflection, equating thinness with beauty and striving to meet expectations becomes synonymous with exerting constant control over their mirror image (as cited Legrand & Briend, 2015). In this context, a revealing slip of the tongue by Işıl during the interviews serves as an illustrative example. She expressed, "*Olduğum kişiyle de alakası var. Olduğum kişi karşısında, sürekli aynı şeyleri söylemek istemiyorum.* [It has to do with who I am. I don't want to say the same things all the time in front of the person I am.]" In this statement, she inadvertently substituted "in front of the person I am" (Turkish means is "*karşımdaki kişi karşısında*") instead of "in front of the person I am facing" (Turkish means is "*olduğum kişi karşısında*"). This may indicate that mirror image is important than gaze of the Other because anorexic subject identify with the image as the Other desires (Verhaeghe, 2004). Thus, "How do I look in someone else's eyes?" is interpreted as a fixation with the idealized mirror image rather than a concern with the ego ideal.

In this context, we have to mention about the gaze. This serves to highlight the immense power of the gaze because mirror reflection is directly related to gaze. Lacan dedicated significant attention to the concept of the gaze in his eleventh seminar, "*Four Fundamental Concepts of Psychoanalysis*" (Lacan, 1964/1998). He draws a clear distinction between the act of seeing and the gaze itself, associating the act of seeing with physiological processes while attributing to the gaze the potential to function as object petit a. This particular function places the gaze at a desirable and sought-after position. Lacan further characterizes the gaze as a structure that exists external to the subject, independent of the subject's control, much like language, which predates the subject's existence (as cited by Can & Uçurum, 2022).

To put it another way, the gaze is what is desired for the subject and that which is beyond the subject's dominion. Lacan, (1964/1998) referring to the relation of the object to desire, says the object is actually determined by the gaze. In this context, the term "gaze" does not refer to the participants' own act of looking, as they themselves mention in their narratives. Rather, it pertains to the gaze directed towards them, the gaze to which they are subjected. Essentially, the subjects are positioned as objects of the gaze. This positioning is of utmost significance. As evident in the identified themes, the participants also placed themselves in the object position and exerted considerable effort to mold themselves and their lives in accordance with the expectations of the Other. The perception that thinness equates to beauty, the preoccupation with meeting expectations, and the concerns about how one appears in the eyes of the Other all revolve around the object position of the subject. This position, where the subject struggles to assert their own subjectivity and desires, can be perilous. A notable illustration of this occurred during the interviews when Işıl was speaking about herself fluently but suddenly halted. When asked about the reason for the interruption, she responded, "*Karşımdaki kişinin gözünde nasıl görüldüğümle alakalı sanırım. Böyle genel bir durumum var. Kendimi durdurmak gibi. Sözlerimin saçma geleceğini düşündüğüm an susuyorum.* [I think it has to do with how I look in the eyes of the other person. I have such a general situation. Like stopping myself. I stop when I think my words will sound absurd.]" This instance serves as a small example highlighting the subject's difficulty in expressing their subjectivity and desires under the gaze of the Other. The gaze, which shapes the subject, now hinders their ability to truly be themselves. The anorexic subject may therefore be trying to refuse the Other. Because, according to the results of the research and the literature (Rudge & Fuks, 2016) the Other has spread to the whole subjectivity of the subject.

According to Lacan, being trapped in the gaze represents a position where the subject faces the imminent threat of annihilation (Lacan, 1964/1998). In other words, when the subject is unable to find room for their own desires, they confront the risk of disappearing. In this regard, Lesourd (2006/2018) suggests that individuals who lack a fixed position in their relationship with the Other, struggle with desire, and have blurred boundaries, may develop eating disorders as a means to establish their own

existence. It is important to note that the gaze here is not a concrete, tangible gaze. Instead of giving consistent recognition to the subject, it leaves the deformed with a Big Other gaze (Fuks & Campos, 2010). In this context, for the subject who desires to experience a sense of completeness in their relationship with the Other, akin to the reflection in the mirror, the gaze is essentially an imagined projection of the Other's gaze (Verhaeghe, 2004). During the interviews, Işılart articulated her idealized self-image, stating, "*Sanırım böyle düzgün konuşan, saçmalamayan biri olarak görünmek istiyorum. Böyle aptal biri gibi, zurvalayan biri gibi görünmek istemiyorum.* [I think I want to be seen as someone who speaks properly, who doesn't talk nonsense. I don't want to be seen as someone stupid, as someone who talks nonsense.]". In this context, this narrative is interpreted with a fixation ideal mirror image rather than a gaze that constructs the subject. However, it is seen in the research results that the people participants want to be are related to the expectations of their families. In this context, it could be said the participants internalized these expectations too much. It is, therefore, associated with the appearance that the subject believes the Other expects from them, rather than an expression of their own true self. In other words, while refusing the Other, the subject is at the same time intertwined with the Other (Recalcati, 2010).

Lacan delves into the concept of the curtain in his eleventh seminar, drawing connections to the gaze (Lacan, 1964/1998). According to Lacan (1964/1998) the subject, positioned as an object within the field of the painting, must assume a form dictated by the curtain. Lacan articulates this notion by stating, "*If I am something in the painting, it will always be in the form shaped by the curtain.*" Hence, the external gaze also possesses the power to mold the subject. This interplay between the gaze and the curtain is closely intertwined with the mirror phase (Can & Uçurum, 2022). This becomes evident when examining the participants' narratives. In the context of the ego-ideal, the gaze guided the subject towards a place which was structured within the symbolic order, thereby creating room for their desires (Evans, 1996). However, in the case of anorexia nervosa, the subject becomes ensnared in the grip of the gaze, fixated on an idealized image perceived through the eyes of the Other (Recalcati, 2010). Consequently, the subject faces the peril of relinquishing their

subjectivity while being confined to the object position, as illustrated by the emerged themes.

The participants' persistent preoccupation with how they are perceived by Others and their ceaseless endeavors to conform to expectations exemplify these circumstances. Lacan emphasizes that when the subject proclaims "*I am such and such*," they are in error and unable to break free from the grip of the ego. This pivotal moment fails to create room for subjectivity and desire. The subject, tightly clutching onto the object position under the dominance of the ego, inevitably forfeits their subjectivity as well (Recalcati, 2010). Therefore, it was thought that the participants were under the dominance of the Other's gaze, which initially manifested in the mirror phase, and they made efforts to conform to the idealized image presented there. However, it is evident that there is a certain *jouissance* derived from being fixated on this image. Because the dream of wholeness comes with there is no lack (Recalcati, 2011a). This condition, revolving around the belief that being thin equates to being beautiful and necessitating a strenuous struggle with one's body, extends to the realm of the minds as well. The participants express their compliance with the Other's expectations by stating, "I please the Other," and they take pride in this situation as Görkem said: "*Benden beklentileri karşılamak istiyorum. Annem benden memnun diye gurur da duyuyorum* [I wanted to meet the expectations they had for me. Moreover, I felt proud when my mother was content with my actions.]". In this way, there is no lack, and the dream of wholeness will continue.

It can be said that the participants find a certain *jouissance* in being the focus of attention, which aligns with Lacan's notion of the object a. This *jouissance* persists due to the participants' illusion of having object petit a and their position as objects rather than subjects. However, it is crucial to acknowledge that this *jouissance* also underscores the detrimental nature of anorexia, as it perpetuates a state of diminished subjectivity and confinement to the object position (Recalcati, 2011b).

Under the influence of capitalist discourse, the discourses of "*I capable the expectations*" and "*Being thin is being beautiful*" send a message of completeness. However, the constructive aspect of the gaze involves comparing oneself to what is

lacking. The subject, unsettled by their own lack of presence in the gaze of others, will gradually come to accept their incompleteness and recognize their own subjectivity with a getaway of an imaginary dream (Lesourd, 2006/2018). But the anorexic subject, who strongly clings to the ideal ego in the mirror phase, rejects their own lack with refusal, which is a characteristic of anorexia (Recalcati, 2010). Consequently, the mistaken subject believes they can satisfy the Other by meeting expectations. In other words, the anorexic subject tries to meet the expectations of the Other with the illusion of being complete. The critical point is that the effort to meet these expectations is not related to accepting the lack but rather the dream of being whole.

4.4. To be or not to be: Striving to be “exist”

According to the results of the research, it was thought that the participants had problems in separating from the relationship with the omniscient, omnipresent and omnipotent Big Other and determining their own boundaries. These problems are discussed in the first and third themes. However, it was seen that in the face of these problems the participants tried various ways to separate themselves from the Big Other and become an autonomous individual, while also making some attempts to contradict this autonomy effort. This was interpreted in the context of the contradiction experienced by the participants between separating and not separating. The confusion about “to be or not to be a subject” experienced by the subject who does not want to drown in porridge with the “jouissance” of not separating (Lacan, 1938/2006a) is discussed in this section by asking the questions “How do we understand the position of individuals with anorexia in their relationships with significant others?” and “What is the meaning of anorexia nervosa for the anorexic subject?”

The ambiguity of the relationship boundaries between the participants and the Big Other is discussed in the conclusion and discussion section of the first and second themes. As a matter of fact, it is thought that the ambiguity of relationship boundaries with the Big Other is also seen in other areas of the participants' lives.

Participants have some confusion about setting boundaries in their private lives too. For example, one participant expressed her relationship with boundaries as follows: “I cannot say that my boundaries are clear, but I would like them to be clear.” Although anorexia nervosa manifests itself as an answer to a problem in the relationship with the Big Other, it also brings the rejection of the Big Other along, as it is a radical and pathological solution (Lacan, 1956-1957/2020). This rejection is easily manifested phenomenologically by the rejection of food, the rejection of nutrition, and the rejection of the law of biological needs (Recalcati, 2010). Similarly, this rejection can be seen in the statements of the participants as not recognizing the physical limits of being in a human body (eating too much, starving oneself, consuming a lot of alcohol, too much physical exertion) and not recognizing the limits of social life and culture (actions that put their physical and mental health at risk, unprotected sex with many partners, addiction, etc.). The subject rejects her social ties with the Big Other by saying “I will not be the object of your jouissance.” In other words, with this solution, the anorexic subject says, “Never again will I be a slave to what I do not control! At last, I am free from the chains of the drive-ridden body! Finally, I am forever separated from the demands of the Other! Never again will I be an object of the ‘jouissance’ of the Other!” (Recalcati, 2010). As a matter of fact, this situation is also interpreted as a buffer against castration (Fuks & Campos, 2010). In this context, the fact that the participants push the limits of real with anorexia nervosa, in other words the physical limits of their bodies, can be interpreted as the resistance to castration (Rudge & Fuks, 2016). In this way, the participants reject their own lack and divisions (Recalcati, 2010). Especially considering the modern age, which pushes subjects away from the law/the prohibition and forces them to take jouissance, anorexia is defined among the symptoms associated with mere “jouissance” and is positioned opposite to neurotic symptoms (Fuks & Pollo, 2010). In a place where there are no borders, the subject says “I want it all.” This was especially seen in the context of the participants being very attached to the “all or nothing” rhetoric and not being able to establish the balance within themselves. Since the subject cannot be in a place where there is no castration, this situation has been interpreted as a move that pushes the subject to “not be”. Since the anorexic subject basically rejects her own lack, she makes a

negation and only consumes herself as a one-sided opposition to the Big Other (Recalcati, 2010). Because the anorexic subject does not take the symbolic ties to the Big Other into account while performing anorexic refusal and proceeds with a passion for freedom/limitlessness to the detriment of the bond imposed by the signifier (Fuks & Campos, 2010). This situation causes the subject to move forward in a radical framework, which she defines as “all or nothing”, where there is no limit. Furthermore, boundary issues also manifest in the participants’ failure to take their own responsibilities as subjects. The participants maintain the rigidity in their “all or nothing” rhetoric in their social relations with other people as well. The participants stated that they especially avoided objecting/opposing other people. While the participants do not reveal their own wishes and desires, they do not take responsibility for these wishes and desires either. A statement made by one of the participants that “I adopt other people’s ideas very quickly, as if I don’t have my own ideas” is quite noteworthy in this sense. Within the ambiguity of the boundaries with the Big Other, the participants also blurred the boundaries between their own subjectivity and other people’s ideas (Recalcati, 2010). This means that the participants do not take their responsibilities as subjects, positioning themselves as if they do not exist. This moment can be interpreted as a prime example of an anorexic subject being vaporized (Lacan, 1958/2006b). Because the anorexic subject is very inclined to meet the demands of the Big Other and feels satisfied when meeting these expectations/demands (Recalcati, 2010). Another participant made a “negation” and defined herself as “I am not someone who crosses boundaries.” The emphasis that followed this statement is noteworthy: “Because I comply with my mother’s expectations.” The participant, who said that she did not cross boundaries because she acted in accordance with her mother’s expectations, also expressed that she destroyed these expectations with anorexia nervosa. In other words, the participant states that she is in strong rebellion against the Big Other through anorexia nervosa (Fuks & Campos, 2010). According to the results of the research, the anorexic participant’s almost “no” self-expression skills became quite excessive and imposing as an “all in” attitude. So where does this radical change come from? How does the rather passive golden child who was tied to her mother’s apron strings suddenly start going against the parent Big Other (Recalcati, 2010)?

In this sense, the function of the anorexia nervosa symptom should also be considered. In the Freudian approach, symptoms are an expression of the unconscious. That is, symptoms are metaphors with messages from the unconscious. Lacan, like Freud, interprets neurotic symptoms as unconscious occurrences and distinguishes symptoms from clinical structures (Evans, 1996). In the “*Object Relations*” seminar, he interprets symptoms as incomprehensible messages that actually come from the reality (Lacan, 1956-1957/2020). So, the question to ask is: What message is the anorexic subject trying to convey with this symptom? In line with the literature (Özbek Şimşek, 2019), the results of this research showed that the symptoms have functions for the participants as in making the subject autonomous and separating them from the Big Other. Because when the boundaries between the subject and the Big Other are unclear, the subject feels aspirated, sucked and swallowed and is reduced to the position of the Big Other’s object of “jouissance” (Recalcati, 2010).

Similarly, it was seen that the participants used anorexia nervosa as a way to establish boundaries. The participants do make efforts to maintain the boundaries between themselves and the Big Other, and within this context, they often referred to anorexia nervosa while describing how they set these boundaries. For the participants, these limits are practically a way of telling the Big Other to stop. For example, one of the participants, Melike, stated that she became able to say no to her mother only after she was diagnosed with anorexia nervosa. Serra, on the other hand, described herself as “hard to control” with her illness. It is especially noteworthy that the participants relate notions of setting their own boundaries to the symptoms of anorexia nervosa. The participants seem to establish a pseudo-boundary between themselves and the Big Other through anorexia nervosa. This is also evident in different studies. In other words, individuals may be determining/protecting their boundaries with other people through their symptoms (Özbek Şimşek, 2019; Lawrence, 1979).

In addition, “maintaining control” as another function of the symptom is a prominent theme in line with the literature (Özbek Şimşek, 2019; Granek, 2007). The

participants defined the period before anorexia symptoms as a period when they “did not have control of their lives,” and stated that they regained control via anorexic symptoms. That is, for the participants, anorexic symptoms are a way of regaining “pseudo” control (Recalcati, 2010). Moreover, Görkem, one of the participants, described her mood at her family home by saying “I was not in an environment where I could be myself.” The word “self” chosen by this participant, who said that she started to control the food because she could not control anything at home and because she wanted to reveal her identity, is very important. By choosing this word, the participant directly refers to her own subjective existence. This can be interpreted in the context as how the subject’s subjectivity evaporates when encountering the complete and omnipotent Big Other. The subject’s encounter with a Big Other who has no lack will cause the subject to feel anxious (Recalcati, 2010). Lacan says that anxiety arises in two situations. The first situation is the absence of lack, while the second situation is when the desire of the Other is too close (Lacan, 1962-1963/2016). In both cases, a “real” explosion occurs, in which the anorexic subject escapes with a symptomatic substitution. What is meant by “real” here is about the fact that anxiety is the only real effect experienced in reality. The subject tries to include a symbolic object of nothingness into the system by opening space in reality (Sobral, 2001). When the boundary between the subject and the Big Other becomes unclear, when there is no room for lack, the subject will look for ways to cope with anxiety (as cited by Hekimoğlu & Bilik, 2020). This is where the function of anorexia nervosa begins. Because the child wants $m(\text{Other})$ to share her deficiency/castration. This is a desire for separation (Recalcati, 2003). In the absence of separation, the demand for lack will inevitably lead us to the anorexic symptom, that is, to the object of nothingness created by the anorexic maneuver (Lacan, 1958/2006b). The subject tries to open space for her own boundaries and subjectivity by eating nothingness. Thus, “the object of food” will replace the anxiety-provoking phobic object and support separation (Recalcati, 2010). Therefore, within the context of the participants’ symptoms and their relationship with the Big Other, it was thought that anorexia nervosa has a function that creates a cut in the Big Other and determines the boundaries with the Big Other (Lacan, 1956-1957/2020).

In this sense, it is particularly striking that the participants associated their symptoms with their fathers while describing their illness processes. The participants referred to their relationships with their fathers and their fathers' reactions to their symptoms. For example, one of the participants said that her family did not know about her illness, but that she only shared it with her father. This is quite interesting because, among mental illnesses, anorexia nervosa is the only one that is visible (Fuks & Campos, 2010). To put it another way, the presence of anorexia conveys a message to others that is difficult to ignore (Schmidt & Treasure, 2006). In this context, describing anorexia nervosa with reference to their fathers can be interpreted as a message the participants desire to convey to the father, since anorexia nervosa is a powerful way for the subject to convey the emotional difficulty and the feeling of suffocation without verbalizing it (Özbek Şimşek, 2019). At this point, it was thought that their symptom was actually a call to the father. As is known, in clinical cases of anorexia nervosa, the presence of the father is quite ambiguous (Pirim Düşgör, 2007). This is in line with our research results as well. In this sense, in the dual relationship established with the omnipotent and omnipresent, anorexia nervosa is also a call to the father, just like the object of food becoming the phobic object. In other words, anorexia nervosa, which occurs at a point where the paternal function is weakened, manifests itself as a call to the third in order to strengthen this function (Fuks & Campos, 2010).

Furthermore, the positive-looking attributions that the participants made to themselves with the symptoms of anorexia nervosa are also very important. Anorexic patients are known for their features such as inflexible radicalism, decisive determination, and excessive emphasis on willpower. An anorexic choice requires controlling the uncontrollability of the body with executive power. This is interpreted as sources of happiness and enthusiasm for the subject (Recalcati, 2010). In fact, the participants of this research expressed that by not eating, they felt stronger, more determined, satisfied, successful, etc. Although these attributions are interpreted in the context of the subject's creating space in the face of the omnipotent Big Other only by not eating, they also contain a great "jouissance" in terms of their relation to real (Cosenza, 2013). In other words, when the Big Other drowns the subject in

porridge, the subject creates space for herself to breathe only by eating nothing, and as a result, the participants make positive references to themselves. In particular, these anorexic choices made with a hysterical motive basically progress on the basis of pursuing their own desires by taking away from the Big Other. In this sense, Lacan emphasizes that the anorexic maneuver is a way for the subject to maintain her own desires in the face of the Big Other (Silva et al., 2010). Indeed, when describing the feeling of “satisfaction” they experience, the participants specifically said that they do not do this for anyone. These positive attributions of the participants seem to have evolved into a narcissistic and omnipotent stage at some point. Within this frame, it may be important to focus on the concept called “Parlêtre”, which Lacan pointed out during his last period. According to Lacan, anorexia nervosa is a symptom of “Parlêtre” because of the intense “jouissance” it contains (Miller, 2015). In the Freudian perspective, the symptom is a symbolic practice of castration, and in this context the neurotic subject can never be “master in his/her own house”. Essentially, although the rejection of the Big Other in anorexia nervosa has emerged with hysterical motives, that is, to maintain the desire by leaving the Big Other incomplete, in practice it manifests itself as a rejection of division. In other words, the subject is pursuing ideal total mastery via anorexic choices. Thus, although anorexia nervosa is a way of separating from the Big Other, this separation is a pseudo-separation – “which does not stem from the subjectivation of the symbolic debt but rather from its anti-dialectic refusal” (Recalcati, 2010). The separation here also basically functions to defend against separation, because there is no loss of “jouissance” in the pseudo-separation within the anorexic maneuver. On the contrary, anorexic refusal is “an experience of exclusion”. In other words, the subject performs a pseudo-separation, similar to rupture, in order not to be swallowed up (Recalcati, 2010). As a matter of fact, since this is not a real separation, the subject oscillates between “to be or not to be”. This is what makes the anorexic choice a radical choice. Therefore, the extreme limits and limitlessness that manifest themselves in the statements of the participants are also interpreted in this perspective.

4.5. The Conclusions and Clinical Implications

Lack forms the basis of the subject clinical' structure. No matter what else the child demands, the main demand will always be a demand for love, and this demand will always be incomplete due to the dividedness of the Big Other. The subject will only be able to desire through this lack. Indeed, the Big Other of the anorexic subject thinks that it can meet the demand and fills the subject with unnecessary objects that the subject does not need. This, for Lacan, is the moment when the subject is drowned in porridge by the Big Other, left breathless (Lacan, 1938/2006a). The anorexic subject, who cannot create lack in the symbolic sense, creates space by starving herself in real. This is why Lacan says that the anorexic subject "eats nothing", rather than "does not eat". The "nothing" here corresponds to "objet petit a", serving as a defense for the subject to feel desire (Lacan, 1956-1957/2020).

The present study sheds light into anorexic subjects' relationships with significant others, and meanings and functions anorexia nervosa for themselves from Lacanian psychoanalytic perspective, as well as aiming to answer three main research questions: (1) How do we position anorexic subjects in their relationships with significant others? (2) How is family dynamics in anorexia nervosa? (3) What is the meaning of anorexia nervosa for anorexic subjects? Accordingly, three semi-structured interviews were conducted with each of the five participants diagnosed with restrictive type anorexia nervosa, and these interviews were analyzed using the theoretical thematic analysis method. According to the results of the analysis, four main themes emerged: (1) All-knowing and having everything: Inseparable (m)Other (2) Between absence and presence: The father (3) The power of being viewed: Am I ideal? (4) To be or not to be: Striving to "exist". Each theme is discussed in the context of the different effects of anorexia nervosa on the subject.

According to the study findings, the anorexic subject is confronted with an omnipotent, omniscient, and omnipotent Big Other. Participants describe a Big Other that does not recognize them as a separate subject/individual, but rather as an extension of them. Participants who state that the omnipotent Big Other has great

control over their lives are in the position of an object in this relationship without their own subjectivity. However, it has been observed that in the face of the Big Other, who does not leave room for the subject and does not make room for subjectivity, the anorexic subject is also in a symbiotic relationship with this Big Other, and they define themselves as a one entity rather than two different persons. In this frame, the findings of the study are compatible with the literature. It is known that the families of individuals diagnosed with anorexia nervosa do not encourage their children to be autonomous and separate during their development years (Özbek Şimşek, 2019). In addition to the literature, the finding of the study on “oneness” with the mother can be considered as an important clinical complication. In this perspective, the anorexic subject’s struggle with the mother is one-sided and not only a struggle for control over life events, but also an existential issue. In this context, during therapeutic studies, the demand for fusion that comes not only from the mother but also from the anorexic subject should be carefully considered.

The number of studies in the literature that details the relationships of individuals diagnosed with anorexia nervosa with their fathers is quite limited. This study tries to explore the relationship of the anorexic subject with her father as a third. From this perspective, it was seen that the design of father in the mind of the anorexic subject was crushed by the omnipotent mother, and for the participants, the father was not strong enough to provide separation. Participants describe their fathers as inadequate. In clinical applications, especially the protection and the recognition of the father's position will be important in terms of the relationship of the anorexic subject with the law and the separation processes.

According to the findings of the study, it was seen that the participants were sensitive to the views and expectations directed towards them. For the participants, who attach great importance to the opinions of both the media and those who are in the position of a Big Other, this situation was thought to be related to image. In other words, while the anorexic subject constructs herself through the ideal-ego, she also gets stuck in this image, thus creating an illusion that she is complete and perfect. As a matter of fact, the ego-ideal is also very important for the subject to reveal her own

subjectivity and desire. In order to position the subject in the ego-ideal rather than the ideal-ego, it is important to clinically study the motivation to be ideal and perfect, and to lead the subject to ask the question “What do I really want?” and to wonder about herself.

In accordance with the literature, it was thought that the participants developed symptoms in order to create space in their relations with the omnipotent and omnipresent Big Other and to reveal their own desires. In other words, for participants, their symptoms are the only way to survive. The symptom is a way of maintaining individual boundaries and control; it is a call to the father and a way of making positive attributions to themselves. In fact, the anorexic subject, who tries to create a complete image against the omnipotent Big Other, can only create the lack in the symbolic through real. Thus, while food serves as a phobic object, the symptom stands out as a way to strengthen paternal function. This attempt to separate by rejecting the Big Other through the symptom emerges as a pseudo-separation. Therefore, it has been observed that the participants made attempts to protect their own boundaries, as well as efforts to make these borders ambiguous. “All or nothing” appears to be the motto of the anorexic subject. As a clinical implication of the study, it is recommended to understand the function and meaning of the symptom for the subject, and not to focus solely on the positive functions of the symptom. In this context, it is thought that trying to understand the function of the “all or nothing” motto for the subject can create new meanings in the relationship of the anorexic subject with the Big Other and the law.

In conclusion, in line with the literature, this study showed that anorexia nervosa is more than an eating disorder; it is a reflection of a problem in family dynamics and a way of self-expression. Moreover, anorexia is the only mental health problem that can be observed by the external world. As most of the participants stated, it is an important point that the participants were mostly encouraged to get treatment by their families. In this direction, it will be vitally important not to focus only on the patient, but also to consider the family dynamics and to understand the position of the mother and the father in the family. In therapeutic intervention, too, the

therapist/psychoanalyst must be there to listen to the unconscious rather than to restore an organic function, that is, to reduce the symptom. In this sense, Recalcati (2003) says demand must be corrected. Because, as can be seen in the findings of this study, the anorexic subject does not demand anything in the face of a Big Other who does not leave any room for lack, and refuses all her needs; she creates the lack, which the demand would create, physiologically with hunger (Recalcati, 2010). At this point, it is important to not repeat the Big Other that the anorexic subject is already facing, which also manifests itself in studies. Consistent with the literature, participants described an omnipotent, omniscient, omnipresent, controlling and authoritarian parent. This parent tries to respond to all needs, leaving no room for lack and desire. In a clinical setting, it would be especially important to not take this position. The anorexic subject should be heard and her unconscious associations should be understood, otherwise the anorexic subject will not respond to the treatment just to break the analyst's omnipotence in the therapeutic setting and to create a lack in the analyst (Fuks & Campos, 2010).

However, it is worth remembering that Freud defined anorexia nervosa as a symbolization of loss of libido. In this context, “speaking and listening” was considered to be an important clinical implication of this study. When asked with “curiosity” rather than from an all-knowing position, it was observed that the participants also wondered about themselves and expressed the things they realized “in that moment”. In other words, the subject should be led to ask “What do I want?” instead of “What does the Other want from me?” When working with an anorexic subject, the focus should never be solely on the symptom or the diagnosis, it should rather be about the function of the symptom for the person, what it represents, what it is related to, its contradictions, which need it corresponds to, and its meaning. At this point, it will be especially important and helpful to study the signifiers. In this context, what should not be forgotten is that there are “anorexias” rather than anorexia. It should not be forgotten that the process carried out on the basis of the clinical structure of the subject, the relationship with the Big Other, the signifiers and the subjectivity are all unique. With the information obtained in the light of this study, it is hoped that the association of the anorexic subject with the Big Other and

the references will be better understood, and thus, the analyst will take a position that engages the subject instead of revealing their own knowledge in the therapeutic process.

4.6. The Strengths and Limitations of the Study and Suggestions for Future Studies

The presenting study has several strengths. To the best of our knowledge, this is the first qualitative study to consider anorexia nervosa in the context of Lacanian psychoanalysis. In this frame, the fact that it was conducted with participants who grew up in Turkish culture and that the diagnosis of all of the sample group was restrictive anorexia nervosa is another strength of the study. The study's findings are in line with Lacanian theory and past research, but provide additional support for clinical practice.

In the study, together with the theoretical thematic analysis, the statements of the participants were analyzed both latently and semantically. In this perspective, the statements of the participants were evaluated in a second context and analyzed in depth. Within this frame, it is thought that the family relations of the anorexic subject, their dynamics, the meaning and function of anorexia nervosa for the subject will be better understood. It is thought that this situation will be beneficial for clinicians, especially for clinical studies and therapeutic processes.

Furthermore, this study tries to explore the relationship between the anorexic subject and the father, and the father's position in the family. Few studies in the literature of anorexia nervosa have focused on the father's position. In some studies, the father is defined as cold, strict, etc., while in some studies, the father is defined as the person whose Oedipal desire continues. In this study, the father is represented as a figure trying to exist in the shadow of the omnipotent mother. The father is neither fully present nor absent for the participants. Therefore, he cannot function as a separating force between the mother and the child. Although it is hoped that the findings of this study will shape future studies and guide clinical practice, it is recommended that

future studies focus more on the relationship with the father, and the relationship between the anorexic subject, the rule and law.

Moreover, in this study, three 50-minute interviews were conducted with each participant, one week apart. Although the number and content of the interviews are quite sufficient to conduct an in-depth interview, it is thought that it may be significant to conduct a long-term follow-up in future studies, as the unconscious content, information on relationships and the quality of this information to be obtained in long-term interviews may be different. In this way, it is thought that both the transference relationship and the changes in the relationships before, during and after the symptom can be observed better.

In addition to its strengths, the study also has some limitations. First of all, it should be noted that although the sample size and homogeneity of the study are in line with the thematic analysis guidelines of Braun and Clarke (2020), the findings of the study cannot be generalized due to being qualitative research. In fact, it is expected that similar associations with the Big Other will be seen in the anorexic subject structure, regardless of culture and different family dynamics. This study was conducted with young adult Turkish women diagnosed with restrictive type anorexia nervosa during adolescence. In this frame, it does not provide insight into the binge eating/vomiting subtype of anorexia nervosa. Moreover, it is important that the participants described themselves as “healed” during the interview period. In this study, the sample of participants was composed of individuals who were diagnosed in adolescence, which is the most frequently diagnosed age group in the literature, and who received this diagnosis two or three years ago. In this context, since this study offers a retrospective analysis, it is thought that the experiences of the participants over time, the life events they experienced, the treatments they received, etc. may have affected their perspectives on their symptoms and the types of relationships with their families. However, it should be taken into account that the function of the symptom and the type of association may differ in people who are diagnosed for the first time in adulthood rather than in adolescence. It is recommended to pay attention to this issue in future studies, and therefore to work

with individuals diagnosed in adulthood and male individuals, in addition to individuals diagnosed in adolescence.

Furthermore, many adolescents diagnosed with anorexia nervosa share their anorexia nervosa journey with their followers through their blogs and applications such as Instagram. The relations of the participants with such practices were not involved in this study. However, it is known that Melike, the youngest of the participants, also has such a page. For someone who defines herself as suffocated/overwhelmed in her relationship with the Big Other, the function of this page in which she shares her physical appearance, feelings and thoughts, and the food they can/cannot eat is very thought-provoking within the frame of views and her relationship with the Big Other. It is recommended to investigate the function of views in the context of these practices and anorexia nervosa in future research.

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APPENDICES

A. APPROVAL OF THE METU HUMAN SUBJECTS ETHICS COMMITTEE

UYGULAMALI ETİK ARAŞTIRMA MERKEZİ
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ORTA DOĞU TEKNİK ÜNİVERSİTESİ
MIDDLE EAST TECHNICAL UNIVERSITY

Sayı: 28620816/

01 ARALIK 2021

Konu : Değerlendirme Sonucu


Gönderen: ODTÜ İnsan Araştırmaları Etik Kurulu (İAEK)

İlgi : İnsan Araştırmaları Etik Kurulu Başvurusu

Sayın Prof. Dr. Tülin GENÇÖZ

Danışmanlığımı yürüttüğünüz Eylül Ceren Hekimoğlu'nun "Sınırlar aşıldığında: Anoreksiya Nervoza'nın Lacanyen Psikanaliz Kapsamında İncelenmesi" başlıklı araştırması İnsan Araştırmaları Etik Kurulu tarafından uygun görülmüş ve **461-ODTU-2021** protokol numarası ile onaylanmıştır.

Saygılarımızla bilgilerinize sunarız.


Prof.Dr. Mine MISIRLISOY
İAEK Başkanı

B. INFORMED CONSENT

Bu çalışma, Orta Doğu Teknik Üniversitesi Psikoloji Bölümü Klinik Psikoloji Doktora Programı öğrencisi Eylül Ceren Hekimoğlu tarafından Prof. Dr. Tülin Gençöz danışmanlığında yürütülmektedir. Araştırma kapsamında, anoreksiya nervoza tanısı almış kişilerin anoreksiya nervoza sürecindeki kişisel deneyimleri ve kişisel ilişkileri, bu süreç içerisindeki duygu ve düşünceleri ve tüm bunları nasıl ifade ettiklerini incelemek amaçlanmaktadır. Çalışmaya katılım tamamıyla gönüllülük temelinde gerçekleşmektedir. Toplanan verilerin analizinin yapılabilmesi amacıyla görüşmeler ses kayıt cihazıyla kayıt altına alınmaktadır. Kimlik bilgileriniz araştırma sürecinde ve sonrasında tamamıyla gizli tutulacaktır. Verilerin analizi yalnızca araştırmacı tarafından yapılacaktır.

Mülakat, genel olarak kişisel rahatsızlık verecek sorular içermemektedir. Ancak, katılım sırasında herhangi bir nedenden dolayı rahatsız hissettiğiniz takdirde görüşmeyi yarıda bırakabilirsiniz ve daha sonra destek almak isterseniz AYNA Klinik Psikoloji Destek Ünitesi'ne başvurabilirsiniz. İletişim: 0312 210 67 13

Çalışmayla ilgili sorularınız için benimle ile e-posta adresi üzerinden veyahut ilgili telefondan (uzmpsk.eylulhekimoglu@gmail.com) iletişime geçebilir ve bilgi alabilirsiniz. Çalışmaya olan katkılarınız için teşekkür ederiz.

Bu çalışmaya tamamen gönüllü olarak katılıyorum ve istediğim zaman yarıda kesip çıkabileceğimi biliyorum. Verdiğim bilgilerin bilimsel amaçlarla kullanılmasını kabul ediyorum.

İsim Soyadı

Tarih

İmza

C. SEMI-STRUCTURED INTERVIEW QUESTIONS

Interview Questions

In the current study, a semi-structured interview approach was utilized. This involved posing the following questions but allowing the participants to elaborate freely and respond during the interviews.

1st. Can you tell us about yourself?

During this section of the interview, it is anticipated that the participant will furnish comprehensive information on their daily life, occupation, and educational background in addition to general demographic information. The purpose of this is to gain a thorough understanding of the participant's living arrangements, sources of income, and how these are accomplished. If pertinent information is not of one's own accord, it is intended to solicit such information by asking supplementary questions.

2nd. Can you describe the process that led to your diagnosis of Anorexia Nervosa?

During this interview segment, the participant will be expected to furnish information regarding the specifics of their journey with anorexia nervosa and their interactions with their surroundings during this period.

2nd.1. When did your initial complaints commence?

2nd.2. Could you describe your daily life during that period? Have you considered any potential factors that may have contributed to the onset of your complaints?

Is there a particular event or individual that you believe may have a connection to the initiation of your complaints?

2nd.3. Can you outline the process that marked the beginning of your treatment? What are your thoughts and opinions regarding this treatment process?

2nd.4. Has there been any alteration in your relationships with those in your close surroundings since your diagnosis of anorexia nervosa? If so, what are these changes? How do you interpret and understand these modifications in your relationships?

2nd.5. What effect has anorexia nervosa had on your life? Can you discuss the positive and negative impacts of anorexia nervosa on your life?

2nd.6. (If relevant) Can you provide information regarding the anxiety attacks you experience? How would you characterize these episodes of anxiety?

2nd.7. What factors do you believe may have contributed to these anxiety attacks? Do you think there is a connection to a specific event or person?

3rd. Can you describe your childhood?

In this part of the interview, the participant is invited to speak their childhood and familial relationships, including the nature of their relationship with authority and regulation within these relationships.

3rd.1. Before commencing the interview, is there any particular aspect of our previous interview that you would like to reiterate or emphasize as being relevant?

3rd.2. Can you tell us about your childhood? Where did you grow up, and who did you live with?

3rd.3. Can you tell us about your mother's pregnancy and the story of your birth? Were you a planned and wanted child? How did you get your name? How was this decision made?

3rd.4. How was your relationship with your mother as a child and now? Can you describe it? What would you like it to be like?

3rd.5. Has your relationship with your mother changed because of anorexia nervosa?

3rd.6. Can you describe your relationship with your father as a child and now? What would you like it to be like?

3rd.7. Has your relationship with your father changed because of anorexia nervosa?

- 3rd.8.** What is your relationship like with your brother(s) or sister(s), if any?
How are they related to your parents?
- 3rd.9.** Please, tell us about your family relationships.
- 3rd.10.** What was your parent's relationship like when you were a child?
Please, describe your mother and father's relationship. How do you want it to be?
- 3rd.11.** Could you express your thoughts and preferences when you were a child? How did your mother and father react to what you said? What were their similar and different reactions?
- 3rd.12.** Who makes the rules in your family? What do you think about that?
- 3rd.13.** What's your relationship with rules? How do you react when someone tells you to do something or reminds you of a rule?
- 3rd.14.** What important things happened in your childhood that we haven't asked about yet? How much do you think those experiences impact your life today?
- 3rd.15.** Can you talk about your teenage years? How was the transition from childhood to adolescence for you?

D. TURKISH VERSION OF THE QUESTIONS FOR INTERVIEWS

Mevcut arařtırmada yarı-yapılandırılmıř grřmeler yapılmıřtır. İř bu hususta ařađıda yer alan sorular takip edilmiř olmakla birlikte, grřmelerde katılımcıların ađrıřımları ve zgrce cevap vermeleri desteklenmiřtir.

1.. *Kendinizden bahseder misiniz?*

Genel demografik bilgilere ek olarak katılımcının grřmenin bu blmnde gnlk, iř ve eđitim hayatından bahsetmesi beklenmektedir. Nerede ve kiminle yařıyor, geimini nasıl sađlıyor gibi konulara iliřkin ve de bu srelerin nasıl gerekleřtiđine dair detaylı bilgi edinilmesi hedeflenmektedir. Eđer ilgili bilgiler gelmezse iliřkili sorular sorularak bilgi edinilmesi planlanmaktadır.

2.. *Anoreksiya nervoza tanısı almanıza iliřkin srecinizden bahseder misiniz?*

Bu blmde katılımcının anoreksiya nervozaya iliřkin srecinin detaylarından ve bu srete evresi ile olan iliřkisinden bahsetmesi beklenmektedir.

2..1. Őikayetleriniz ilk ne zaman bařladı?

2..2. O dnem hayatınız nasıldı? Sizce bu Őikayetleriniz ne ile iliřkili olabilir?

Yařadıđınız bir olayın veyahut bir kiřinin Őikayetlerinizin bařlaması ile iliřkisi olduđunu dřnyor musunuz?

2..3. Tedavi sreciniz nasıl bařladı? Siz bu sre hakkında ne dřnyorsunuz?

2..4. Anoreksiya nervoza tanısı aldıktan sonra yakın evreniz ile olan iliřkilerinizde herhangi bir deđiřiklik oldu mu? Eđer deđiřiklik olduysa bu deđiřiklikler nelerdir? Siz bu deđiřiklikleri nasıl yorumluyorsunuz?

2..5. Anoreksiya nervozanın hayatınıza nasıl bir etkisi oldu? Olumlu ve olumsuz etkilerinden bahsedebilir misiniz?

2..6. (Varsa) Yařadıđınız kaygı ataklarından bahsedebilir misiniz? Bu atakları nasıl tarif edersiniz?

2..7. Sizce bu ataklar neyle iliřki olabilir? Bu atakların bir olay veya bir kiři ile alakalı olduđunu dřnyor musunuz?

3.. Çocukluğunuzdan bahsedebilir misiniz?

Bu bölümde katılımcının çocukluğuna ve ailesi ile olan ilişkisine dair detaylardan bahsetmesi beklenmektedir. Bununla birlikte, ilişkiler bağlamında katılımcının yasa ve kurallarla olan ilişkisinin de sorulması planlanmıştır.

- 3..1.** Görüşmemize başlamadan önce geçen görüşmemize ilişkin aklınıza gelen, söylemek istediğiniz, ilişkili olduğunu düşündüğünüz bir şey var mı?
- 3..2.** Nasıl bir çocukluk geçirdiniz? Nerede, kimle yaşıyordunuz?
- 3..3.** Annenizin hamilelik sürecine ve doğum hikayenize dair neler biliyorsunuz? Planlı ve istenmiş bir çocuk muydunuz? İsminizi kim koymuş? İsminiz nereden gelmiş? Bu sürece nasıl karar verilmiş?
- 3..4.** Çocukken annenizle ilişkiniz nasıldı? Şimdi nasıl? Annenizle olan ilişkinizi tarif edebilir misiniz? Siz bu ilişkinizin nasıl olmasını isterdiniz?
- 3..5.** Anoreksiya nervoza ile birlikte annenizle olan ilişkinizde nasıl değişiklikler oldu?
- 3..6.** Çocukken babanızla ilişkiniz nasıldı? Şimdi nasıl? İlişkinizi tarif edebilir misiniz? Siz ilişkinizin nasıl olmasını istersiniz?
- 3..7.** Anoreksiya nervoza ile birlikte babanızla olan ilişkinizde nasıl değişiklikler oldu?
- 3..8.** Varsa, kardeşiniz/kardeşleriniz ile ilişkiniz nasıldır? Kardeşiniz/kardeşleriniz ile anne babanızın ilişkisi nasıldır?
- 3..9.** Ailenizden/ aile ilişkilerinizden bahsedebilir misiniz?
- 3..10.** Siz çocukken anne ve babanızın ilişkisi nasıldı? Annenizle babanızın ilişkisini tarif eder misiniz? Siz bu ilişkinin nasıl olmasını isterdiniz?
- 3..11.** Kendinizi, düşüncelerinizi, tercihlerinizi ifade edebilir miydiniz? Annenizden ve babanızdan nasıl reaksiyonlar alırdınız? Bu reaksiyonlar birbirleri ile nasıl farklılıklar ve benzerlikler gösterirdi?
- 3..12.** Ailenizde kuralları kim koyar? Siz bu konuda ne düşünmektesiniz?
- 3..13.** Sizin kurallarla ilişkiniz nasıldır? Biri size bir kuralı hatırlattığında veyahut bir şey yapmanız gerektiğini söylediğinde (bir kural koyduğunda) nasıl tepkiler verirsiniz?

- 3..14.** Çocukluğunuzda deneyimlediğiniz, benim size sormadığım ancak sizin “önemli” olarak gördüğünüz deneyimler nelerdir? Çocukluğunuzda yaşadığınız deneyimler sizce bugün sizi ne kadar etkiliyor?
- 3..15.** Ergenlik döneminizden bahsedebilir misiniz? Çocukluktan ergenliğe geçiş süreci sizin için nasıldı?

E. CURRICULUM VITAE

Eylül Ceren Demir Hekimoğlu

Education

Middle East Technical University, Faculty of Arts and Sciences, Ankara, Türkiye.

Doctor of Philosophy (PhD) in Clinical Psychology, August, 2023

Dokuz Eylül University, Faculty of Arts and Sciences, İzmir, Türkiye,

Master of Science (MS) in Psychology, 2018-2023

Çankaya University, Faculty of Arts and Sciences, Ankara, Türkiye,

Bachelors of Science in psychology, June, 2016

Work Experiences

AYNA Clinical Psychology Peer-Reviewed Journal (AYNA Klinik Psikoloji Dergisi)

Editorial Board Member, 2022, September – *present*.

Journal Reviewer, 2020, July – 2022, September.

AYNA Clinical Psychology Unit (AYNA Klinik Psikoloji Destek Ünitesi) Middle East Technical University, Ankara, Türkiye.

Supervisor, 2020, March – *present*

Clinical Psychology Graduate Program Coordinator, 2020, September – 2023, July.

Clinical Psychologist, 2018, September – 2023, July.

Middle East Technical University, Psychology Department, Ankara, Türkiye.

Research and Teaching Assistant, Clinical Psychology, 2018, April – 2023, July.

Teaching experience:

Application in Clinical Assessment, Spring, 2023 – Dr. İncila Gürol

Freud: Development of Psychoanalysis; *Spring, 2021 – Dr. Kemal Özkul*

Clinical Interview Skills; *Fall, 2019, 2020, 2021, 2022 – Prof. Dr. Faruk Gençöz*

Addiction: Psychoanalytic Approach; *Spring, 2021, 2022 – Prof. Dr. Faruk Gençöz*

Lacanian Psychoanalysis: Basic Concepts;

Fall, 2018, 2019, 2020, 2021, 2022- Prof. Dr. Faruk Gençöz

Analyzing Cinematic Characters; *Spring, 2020 – Prof. Dr. Faruk Gençöz*

Applications in Clinical Psychology; *Fall, 2022 – Assist. Prof. Dr. Emek Yüce*

Zeyrek-Rios

Dynamic Psychotherapy; *Fall, 2019, 2020 – Prof. Dr. Faruk Gençöz*

Trauma in Psychopathology; *Spring, 2020 – Assist. Prof. Duygu Cantekin*

Qualitative Research Methods, *Spring, 2022 – Assist. Prof. Dr. Elif Ünal*

Adult Psychopathology: Dynamic Approach;

Spring 2019, 2020, 2021, Fall 2021, 2022 – Prof. Dr. Tülin Gençöz

Child – Adolescence Psychopathology; *Spring, 2021 – Assoc. Prof. Dr. Gülin Evinç*

Child – Adolescence Supervision; *Fall, 2021 – Assoc. Prof. Dr. Gülin Evinç*

Emotions in Psychopathology; *Spring, 2019, 2020, 2021 – Prof. Dr. Faruk Gençöz*

Adıyaman University, Psychology Department, Adıyaman, Türkiye.

Research Assistant, 2016, December – 2018, April.

Hacettepe University, Faculty of Medicine, Psychiatry Service, Ankara, Türkiye.

Intern Psychologist, 2015, July – 2015, September

Publications

Bilik, Z. and **Hekimoğlu, E. C.** (2023). Gradiva: Bir Pompei fantezisinde sanrı, düş ve kadın. In T. Gençöz (Ed.) *Freud'dan Lacan'a Vaka İncelemeleri ve Psikanalitik Değerlendirmeler, Cilt 4*. Ankara: Nobel.

Bilik, Z. and **Hekimoğlu, E. C.** (2023). Psikanalizin etiği ve “Göz Alıcı” Antigone. In T. Gençöz (Ed.) *Freud'dan Lacan'a Vaka İncelemeleri ve Psikanalitik Değerlendirmeler, Cilt 3*. Ankara: Nobel.

Hekimoğlu, E. C. (2022). Öznenin arzu ile olan trajedisi: Hamlet. In T. Gençöz (Ed.) *Freud'dan Lacan'a Vaka İncelemeleri ve Psikanalitik Değerlendirmeler, Cilt 2*. Ankara: Nobel.

Hekimoğlu, E.C., Bilik, M.Z., Uçurum, S.B., Erten, İ., & Can, D. (2022). Grief During the Pandemic: The Experiences of Individuals Unable to Fulfill Their Religious and Cultural Rituals, *Studies in Psychology*, 41(2), <https://doi.org/10.26650/SP2021-899771>

Ergün, S., **Hekimoğlu, E. C.** ve Gençöz, F. (2022). An Investigation on the Relation of the Fetish Object with the Phallus. *AYNA Clinical Psychology Journal*, 9(2), 332-350. DOI: 10.31682/ayna.1047639

Hekimoğlu, E. C. (2021). Fobi ve Küçük Hans Vakası. In T. Gençöz (Ed.) *Freud'dan Lacan'a Vaka İncelemeleri, Cilt 1*. Ankara: Nobel.

Ay, B., **Hekimoğlu, E. C.** ve Gençöz, F. (2021). A Psychoanalytic Approach to Horror Movies: A Study of Reasons for Interest and Representation on the Audience. *AYNA Clinical Psychology Journal*, 8(3), 357-375. DOI: 10.31682/ayna.904298

Hekimoğlu, E. C. ve Cantekin, D. (2021). Acting Out: A Qualitative Study Exploring the Experiences of Individuals who have Attempted Suicide. *AYNA Clinical Psychology Journal*, 8(1), 44-64. DOI: 10.31682/ayna.810304

Bilik, M. Z, **Hekimoğlu, E. C.** ve Gençöz, F. (2021). Traces of Unconscious in Language. *Psychoanalysis and Language*, 10(1), 1-9. <http://dx.doi.org/10.7565/landp.v10i1.4390>

Hekimoğlu, E. C. ve Bilik, M. Z. (2020). Anxiety: From Freud to Lacan. *AYNA Clinical Psychology Journal*, 7(3), 336-367. DOI: 10.31682/ayna.761464

Conference and Seminar Presentations

Ergün, S. ve **Hekimoğlu, E. C.** (January, 2023). “*Melankoli ve Yas*”. Psikanalize Giriş Seminerleri, Freud – Lacan Psikanaliz Derneği, Ankara, Türkiye.

Hekimoğlu, E. C. (November, 2022). “*Klinikte Lacanyen psikanaliz ve dilin işlevi*”. Hacettepe University, at the invitation of Hacettepe University, Psychology society, Ankara, Türkiye.

Hekimoğlu, E. C. (May, 2022). “*Lacanyen psikanalize giriş ve psikoterapi uygulamaları*”, Mardin Artuklu University, at the invitation of Mardin Artuklu University, Psychology society, Mardin, Türkiye.

Hekimoğlu, E. C. (May, 2022). “*Kaygı ve işlevi ekseninde: Hayvan fobisi*”. Yıldırım Beyazıt University, at the invitation of Yıldırım Beyazıt University, Psychology society and Doğa Dostları, Ankara, Türkiye.

Hekimoğlu, E. C. (January, 2022). “*İntihar ve geride kalanlar*”. Middle East Technical University, at the invitation of METU, Psychology society, Ankara, Türkiye.

Hekimoğlu, E. C. (May, 2021). “*Psikanalitik yaklaşımda yemek bağımlılığı nedir? Nasıl yaklaşılır?*” Akdeniz University, at the invitation of Akdeniz University, Psychology society, Antalya, Türkiye.

Hekimoğlu, E. C. ve Gençöz, F. (2021, September). Psikanalitik yaklaşımda bağımlılık: Öznenin uyuşturucu bağımlılığı ile mücadelesi. *2nd International Drug Conference: “Drug Enforcement in the World.”* 6-7 Eylül, Ankara, Türkiye [Oral presentation].

Hekimoğlu, E. C. ve Cantekin, D. (2021, July). Acting out: The experiences of people who attempted suicide. *32nd International Congress of Psychology.* 19-24 Temmuz, Prag, Czech Republic [Oral presentation].

Hekimoğlu, E. C. ve Bilik, Z. (2021, July). The experiences of people who lost someone during the COVID-19 pandemic: A Qualitative analysis. *32nd International Congress of Psychology.* 19-24 Temmuz, Prag, Czech Republic [Oral presentation].

Emiroğlu Demirel, E. ve **Hekimoğlu, E. C.** (February, 2021). “*Özne Kurulumu*”. Psikanalize Giriş Seminerleri, Freud – Lacan Psikanaliz Derneği, Ankara, Türkiye.

Hekimoğlu, E. C. ve Gençöz, F. (October, 2020). “*L’angoisse*.” Psikanalize Giriş Seminerleri, Freud – Lacan Psikanaliz Derneği, Ankara, Türkiye.

Hekimoğlu, E. C. ve Gençöz, F. (May, 2020). “*L’angoisse*.” Psikanalize Giriş Seminerleri, Freud – Lacan Psikanaliz Derneği, Ankara, Türkiye.

Hekimoğlu, E. C. ve Bulut, B. P. (November, 2019). “*Fobi: Küçük Hans Vakası*”. Psikanalize Giriş Seminerleri, Freud – Lacan Psikanaliz Derneği, Ankara, Türkiye.

Hekimoğlu, E. C. (November 2019). “*Mezunlarla Söyleşi*”. Çankaya University, at the invitation of Çankaya University, Psychology society, Ankara, Türkiye.

Hekimoğlu, E. C. ve Cantekin, D. (2019, September). İntihar: Eyleme dökme. *12th Symposium of Suicide Prevention Day.* 10 Eylül, Ankara, Türkiye.

Hekimođlu, E. C. ve Genöz, F. (January, 2019). “*Cat on a Hot Tin Roof: Tennessee Williams*” Film Analizleri, Freud – Lacan Psikanaliz Derneđi, Ankara, Türkiye.

Board and Association Memberships

Turkish Academy of Sciences, Türkiye Bilimler Akademisi (TÜBA)- Turkish Glossary of Science Terms, Member of Psychology Terms Working Group, 2023, January – present.

Suleyman Demirel University, Psychology Department, Advisory Board, 2022, September – present.

Turkish Psychologists Association (TPD), 2022, July – present.

Freud-Lacan Psychoanalysis Association, 2018, May – present.

F. TURKISH SUMMARY / TÜR KÇE ÖZET

BÖLÜM I

GENEL GİRİŞ

1.1. Genel Bakış

Bu çalışma, ergenlik döneminde anoreksiya nervosa tanısı almış genç Türk kadınlarının deneyimlerini ve ilişkilenmelerini theoretical tematik analiz ile etmiş ve Lacanyen bir bakış açısıyla yorumlamıştır. Bu bölümde de anoreksiya nervoza, ilgili literatürün ışığında anoreksiya nervoza kısaca tanıtılacak ve araştırmacın rasyoneli ve amacı hakkında bilgi verilecektir

1.2. Anoreksiya Nervozanın Klinik Tarihi, Tanımı ve Özellikleri

2013'te yayımlanan DSM-5'te anoreksiya nervoza, çocuklukta ve ergenlikte görülen yeme bozuklukları ile yeme bozuklukları kategorisi bir şemsiye kategorisi altında birleştirilmiş ve anoreksiya nervozanın tanımı şu şekilde yapılmıştır:

“A. Gereksinimlere göre erke (enerji) alımını kısıtlama tutumu, kişinin yaşı, cinsiyeti, gelişimsel olarak izlediği yol ve beden sağlığı bağlamında belirgin bir biçimde düşük bir vücut ağırlığının olmasına yol açar. Belirgin bir biçimde düşük vücut ağırlığı, olağan en düşüğün altında ya da çocuklar ve gençler için beklenen en düşüğün altında olarak tanımlanır.

B. Kilo almaktan ya da şişmanlamaktan çok korkma ya da belirgin bir biçimde düşük vücut ağırlığında olmasına karşın kişinin, kilo almayı güçleştiren sürekli davranışlarda bulunması.

C. Kişinin vücut ağırlığını ya da biçimini nasıl algıladığıyla ilgili bir bozukluk vardır, kişi, kendini değerlendirirken vücut ağırlığı ve biçimine yersiz bir önem yükler ya da o sıradaki düşük vücut ağırlığının önemini hiçbir zaman kavrayamaz.”

Bu belirtilere ek olarak anoreksiyanın iki alt türünden bahsetmek mümkündür. “Kısıtlayıcı” olarak adlandırılan ilk ve klasik alt türde kişinin kilo kayıpları kişinin neredeyse hiç yemek yemeyerek, sıkı bir diyet ve spor yapması ile ilişkilidir. Tanı koyarken kişinin son üç ay içerisinde tıknırcasına yemek yeme ve ardından yediğini kusma, laksatif veya idrar söktürücü ilaç kullanmak vb. gibi eylemlerin olmaması göz önünde bulundurulur. Tıknırcasına yemek yeme/çıkarma olarak adlandırılan ikinci alt türde ise kişinin son üç aylık dönemde tıknırcasına yemek yediği ve sonrasında yediğini yemeyi kusarak veyahut çeşitli ilaçları kullanarak çıkardığı bir dönem olması gerekmektedir.

1.4. Psikanalitik Literatürde Anoreksiya Nervosa

Freud, yetişkinlerde ortaya çıkan her nevrozun aslında çocuklukta ortaya çıkan ancak göze çarpmayan ya da öyle olduğu kabul edilecek kadar güçlü olmayan bir nevrozdan kaynaklandığını söylemiştir. Yeme bozukluğu bağlamında ise, çocuklukta fark edilmemiş bir iştah bozukluğunun daha sonraki yaşamda anoreksik davranışa eğilim oluşturabileceğini ifade etmiştir (Freud, 1918).

Bununla birlikte, Freud, anoreksiya nervozadaki gıda reddini Oedipal meselelerle ilişkili ve cinsellikten tiksindenin ifadesi olan histerik bir semptom olarak yorumlamıştır. Freud sonrası dönemde de başta anoreksiya nervosa olmak üzere yeme bozuklukları bilinçdışı istek ve arzuların çatışmasından ortaya çıkan bir durum olarak değerlendirilmiş ve semptomlar sembolik bağlamda ele alınmıştır.

1.3. Lacanyen Teoride Anoreksiya Nervosa

Lacan, anoreksiya nervozanın, iştahla ilgili bir problemden ziyade öznenin seçimi ile ilgili öznel bir pozisyon olduğunu söylemektedir (Lacan, 1958/2006a). Lacan’a göre

anoreksiyanın ilişkide olduğu Başka, özneyi arzulayan bir özne olarak görmemekte ve öznenin bakım talebi ile birincil ihtiyaçları olmak üzere, öznenin tüm ihtiyaçlarını aşırı bir hevesle karşılama eğilimindedir. Bu anlamda, öznenin tüm ihtiyaçlarını aşırı bir biçimde karşılama eğiliminde olan Başka, özneye ihtiyacını talep edecek alan bırakmamakta ve öznenin talebine, kendi arzusu (eksiği) ile karşılık verememektedir. Böyle bir durumda ise öznenin ihtiyacını, arzusundan ayıracak kapasitesi de oluşmamaktadır (Recalcati, 2010). Anoreksik öznenin ilişkide olduğu Başka, başarısız olmaktan ziyade anoreksik özneyi fazlasıyla doyurmakta ve sanki eksiği yokmuş gibi davranmaktadır. Lacan bu yüzden anoreksik öznenin ihtiyaç ile arzuyu birbirine karıştırdığını söylemektedir. Bu bağlamda Lacan, anoreksik öznenin ilişkide olduğu Başka'nın, arzuyu ihtiyaç boyutuna indirgeyen ve özneyi de pasif bir bakım nesnesine indirgeme eğiliminde olan bir Başka olduğunu belirtir. Lacan'a göre Başka'nın talebinin boğucu boyutu da burada; Başka, arzu için alana yer bırakmadığında oluşmaktadır (Lacan, 1958/2006b). Başka ile ilişkide, Başka'nın nesnesi konumuna indirgenen özne; eksiğin olmadığı bu boğucu duruma kaygılı bir felçle ve arzunun ölümü ile karşılık vermektedir (Recalcati, 2010). Böyle bir durum ise özneyi içinde bulunduğu jouissance yoğunluğu nedeniyle kaygılandıracaktır. Bu bağlamda Lacan, anoreksiya nervozanın öznenin içinde bulunduğu jouissance yoğunluğundan kurtulabilmesinin öznel bir yolu olduğunu belirtmektedir (Lacan, 1975- 1976/2016). Dolayısıyla anoreksiya nervozanın, öznenin sadece bir beden olarak algılanarak, nesne konumuna indirgendiği durumlarda, kaygıyla başa çıkmak için ürettiği çözüm yollarından biri olduğu söylenebilir.

Bu bağlamda Lacan'a göre anoreksik özne hiçlik yemektir. Lacan'ın buradaki vurgusunun öznenin yokluk ile olan ilişkisi üzerine olduğu söylenebilir. Bu haliyle buradaki hiçlik de simgesel düzlemde bir noktayı temsil etmektedir. Lacan anoreksik öznenin, "hiçliğin nesnesi" olarak tüm güçlü Başka karşısında işleri tersine çevirmeye çalıştığını belirtmektedir. Lacan'a göre çocuk yemeği bir "arzu" olarak reddetmekte ve "hiçliğin nesnesi" de öznenin, ayrışma ihtiyacının simgesel bir temsili haline gelmektedir (Lacan, 1956-1957/2020). Bu bağlamda anoreksiya nervoza, öznenin eksikliğe yani hiçliğin nesnesine olan ihtiyacı ve Başka'nın tüm güçlülüğü karşısında kendine bir yer açma çabası olarak yorumlanmaktadır.

Dolayısıyla anoreksiya nervozanın arkasında öznenin arzusu, Başka ile ilişkisi ve Başka'nın nesnesi ile özdeşleşimi bulunmaktadır (Desbordes, 2014). Bu anlamda özne yemeği reddederek, yani aslında hiçlik yiyerek temelde kaygı ile baş etmeye çalışmaktadır. Bu yüzdene Lacan, anoreksiya nervozanın en belirgin özelliğın “reddediş” olduğunu söylemektedir (Lacan, 1936/20006b).

1.4. Çalışmanın amacı ve kapsamı

Bu tez çalışmasında, anoreksik öznelerin Büyük başka ile olan ilişkilmesini ve anoreksiya nervozanın bu ilişkilmedeki işlevini Lacanyen psikanaliz çerçevesinde araştırmak amaçlanmıştır. Bu amaçla teorik tematik analiz yöntemi kullanılmıştır. Bu yöntemin seçilmesinde açık ve örtük anlamlara bakılabilmesi ve bu anlam ve deneyimlerin teorik bir bakış açısı ile izinin sürülebilmesi önemli olmuştur. Böylelikle Büyük Başka konumunda olan kişilerle anoreksik özne arasındaki dinamiklerin daha iyi anlaşılabilceğı ve “Anoreksik özne Büyük Başka ile olan ilişkisinde nasıl konumlanıyor?”, “Anoreksiya nervozanın anoreksik özne için anlamı nedir?”, “Anoreksiya nervozada aile dinamikleri nasıl?” ve “Anoreksiya nervozanın anoreksik özne için anlamı nedir?” sorularına yanıt bulunabileceğı düşünülmektedir. Bir sonraki bölümde nitel bir yöntem olan refleksif teorik tematik analiz detaylı bir şekilde ele alınacaktır. Ayrıca, araştırma dizaynı ve uygulanan prosedürlere ilişkin detaylı bilgiler verilecektir.

BÖLÜM 2

YÖNTEM

2.1. Nitel arařtırmalar ve Tematik Analiz

Tematik analiz, veri içindeki temaları tanımlamak, analiz etmek ve raporlamak için kullanılan aynı zamanda bu temaların yorumlanmasına da izin veren bir nitel bir arařtırma yöntemidir (Ünal, 2022). Braun ve Clarke bunu göstermek için, 2006 yılında yayınladıkları çalışma ile tematik analiz yaparken takip edilmesi gereken aşamaları, tematik analizin avantajlarını, dezavantajlarını, dikkat edilmesi gereken noktaları belirlemişler ve daha sonraki çalışmalarında da tematik analize yönelik olası kafa karışıklıklarını ve yanlış uygulamaları önlemek amacıyla tematik analizi, üç farklı tematik analiz okulu bağlamında kategorileştirmişlerdir. Bu bağlamda tematik analiz tek bir şey değil, veriye kendine has yaklaşımları olan üç farklı okuldan oluşmaktadır. Bu okullar kodlama güvenirliliği, refleksif ve kod defteri tematik analiz olarak isimlendirilebilir (Braun ve ark., 2019).

Bir sonraki bölümde, reflexive tematik analiz yaparken alınması gereken kararlar, dikkat edilmesi gereken hususlar, epistemolojik duruşa diğer bir deyişle çalışmanın dizaynına ve analizin ayrıntılarına yer verilmiştir.

2.2. Çalışmanın Dizaynı: Refleksif Teorik Tematik Analiz

Reflexive tematik analizin flexible doğası, beraberinde birtakım kararların verilmesini de gerektirmektedir. Bu noktada arařtırma süresince takip edilen aşamaların şeffaflıkla ele alınması ve kendi içinde tutarlı olması bir yol izlemesi, iyi bir reflexive tematik analiz için en önemli ön koşuldur. Bu arařtırmada arařtırmacı olarak benim (Hekimoğlu) güçlü bir teorik ilgim, motivasyonum ve merakım bulunmakta ve arařtırma sorularım da Lacanyen psikanalitik teoriden köken

almaktadır. Bu doğrultuda, bu çalışmada teorik yaklaşımın kullanılmasının uygun olacağı düşünülmüş ve anlam ise örtük ve semantik seviyede ele alınmıştır.

Reflexive tematik analiz yaparken, kodlamanın hangi düzeyde tanımlanacağını analiz öncesinde belirlenmesi gerekmektedir. Bu bağlamda iki ana yöntemden bahsedilebilir: tümevarımsal veyahut tümdengelim, diğer adıyla teorik. Tümevarımsal yaklaşımda kodlama süreci önceden belirlenmiş kodlarla ya da araştırmacının varsayımları referans alınarak yapılmaz (Braun ve Clarke, 2006). Teorik yaklaşımda araştırmacı, kodlama yaparken veriye zihnindeki düşüncelerle, varsayımlarla, kavramlarla ve teorik bilgisiyle yaklaşır. Dolayısıyla veriye baktığında; kodlama yaparken kodları kendi teorik bilgi birikimi ile eşleştirir. Bu çalışmada teorik yaklaşım benimsenmesine rağmen önceden herhangi bir kod listesi veyahut olası temalar belirlenmemiş, teorik bilgiden kodlamaların isimlendirmeleri yapılırken faydalanmıştır. Bu doğrultuda, teorik kodlamanın teoriye ilişkin yapılması veri zenginliğinin kaybolması anlamına gelmemektedir aksine araştırmacı veriye “kasıtlı” olarak kendi birikimleri ve teorik yaklaşımı ile yaklaşmaktadır. Çünkü theoretical yaklaşımda araştırmacı zaten hali hazırda spesifik bir araştırma sorusu/sorularının eşliğinde verisi ile ilgilenmekte ve araştırma sorusunun cevaplarını aramakta ve bu hususta da okuyucuyu bilgilendirmektedir.

Refleksif tematik analiz yaparken ikinci önemli karar ise kodlama yapılırken anlamın hangi seviyede değerlendirileceğidir. Burada da iki yaklaşım karşımıza çıkmaktadır: Semantik yani açık ve örtük yani yorumlayıcı seviyeler. Semantik seviyede yapılan kodlamalarda veri açık ve yüzeysel anlamları ile tanımlanır ve araştırmacı verinin temel anlamı ötesinde başka bir şey aramaz. Semantik seviyede yapılan bir kodlamada, araştırmacı öncelikli olarak semantik anlama odaklanır ve bunları bir örüntü haline getirir; daha sonra bu örüntülerin önemini ve daha geniş anlamını ele almak üzere yorumlama aşamasına geçer. Örtük seviyede ise yorumlama kodlama anından itibaren başlamaktadır. Bu anlamda verinin semantik içeriğinin ötesine geçilerek, verideki semantik anlamın konseptlerle, kavramlarla, ideolojilerle tanımlanması yapılmaya çalışır. Bu durum kendi içinde bir yorumlamayı da gerektirmektedir. Yani yapılmış olan kodlama “tanımlamanın” ötesine geçer ve

içerisinde yorumlamayı da içerir. Bu bağlamda latent seviyede bir anlamlandırma aynı zamanda yapısalcı bir geleneği de beraberinde getirmektedir. Bu şekilde yapılan tematik analizler bu haliyle söylem analizine de benzetilebilir. Nitekim, psikanalitik yaklaşımla çalışan araştırmacılar için latent seviyede anlamlandırma oldukça uygundur. Ben de araştırmacı olarak psikanalitik nosyondan geldiğim için örtük seviyede anlamı çalışmak özellikle tercih ettiğim bir şeydi. Nitekim, bu çalışmada hem semantik hem de latent seviyede anlamlandırma tercih edilmiştir bununla birlikte, bu iki seviyedeki ayrımın pratikte her zaman çok belirgin değildir

Son olarak refleksif tematik analiz yaparken diğer önemli husus ise araştırmacının epistemolojik duruşudur. Tematik analizde epistemolojik duruş realist veya yapısalcı olabilir. Bu çalışmada örtük seviyede oluşturulan temaların yapısalcı epistemolojik duruşa daha uygun olduğu düşünülmüştür. Bununla birlikte bu çalışmanın teorik arka planı da Lacanyen psikanalizden köken almaktadır. Lacanyen psikanaliz de yine bu anlamda yapısalcı bir epistemolojik duruşa sahiptir. Tüm bu nedenlerden dolayı, bu çalışmanın epistemolojik duruşunun da yapısalcı olmasına karar verilmiştir.

3.3. Verilerin toplanması ve analizi

Görüşmeler yarı yapılandırılmış görüşmeler aracılığı ile toplanmıştır.

Braun ve Clarke analiz için altı adımlı bir rehber yayımlamıştır ve analiz aşamasında bu adımlar takip edilmiştir. Kodlamaların daha sistemli olabilmesi için MAXQDA 2020 sürümü kullanılmıştır. Tüm bu aşamalar tamamlandıktan sonra çalışma Braun ve Clarke'ın 15 maddelik kontrol listesi sağlandıktan sonra son haline getirilmiştir.

3.4. Katılımcılar

Araştırmanın önekleme ergenlik döneminde anoreksiya nervoza tanısı almış, her iki ebeveyni de hayatta olan kadın katılımcılardan oluşturulmuştur. Bu bağlamda dört içleme kriteri belirlenmiştir. Bu kriterler a) anoreksiya nervoza tanısının ergenlik döneminde (10-19 yaşları arasında) alınmış olması b) biyolojik cinsiyetin kadın

olması, c) her iki ebeveynin de hayatta olması, d) kısıtlayıcı tip anoreksiya nervoza tanısının DSM-5 kriterleri uyarınca bir psikiyatrist tarafından konulmuş olmasıdır.

Bu bağlamda 18 ve 22 yaşları arasında olan beş kadın katılımcı ile görüşmeler yapılmıştır. Katılımcıların tanı alma yaşları 15.5 ve 17'dir. Bununla birlikte araştırma kapsamında iki katılımcı ile daha görüşme yapılmış ancak katılımcılardan biri hastalığın başlangıç yaşının kriterlere uymaması nedeniyle, diğeri de ses kaydı alınmasını kabul etmemesi nedeniyle araştırmaya dahil edilmemiştir.

3.5. Prosedür

Araştırmanın yapılabilmesi için gerekli izin ve onaylar Orta Doğu Teknik Üniversitesi'nden alınmıştır. Katılımcıların çağrışımalarını ve öznel deneyimlerini paylaşabilmeleri için gerekli alanın yaratılması amacıyla görüşmeler yarı-yapılandırılmış bir formatta yapılmış, katılımcıların araştırma soruları dışında da kendilerini ifade etmeleri için çağrışımları teşvik edilmiştir. Bu bağlamda, her katılımcı ile her biri ortalama 50 dakika süren toplam üç görüşme yapılmıştır. İlk görüşmede katılımcılar araştırmanın amacı ve görüşmeler esnasında ses kaydı alınacağı konusunda bilgilendirilmiş; bu konudaki bilgilendirilmiş onam formları sözlü olarak alınmıştır. Görüşmelerin sonunda katılımcılara katılım sonrası bilgilendirme formu, bilgilendirilmiş onam formu ve psikolojik destek alabilecekleri kurum belgeleri mail aracılığı ile ulaştırılmıştır. Ses kaydı alınan görüşmeler daha sonra araştırmacı tarafından deşifre edilmiştir.

3.6. Çalışmanın güvenilirliği

Nitel araştırma süreci, doğası gereği araştırmacının da aktif olarak yer aldığı bir süreçtir. Araştırma sorusunun ortaya çıktığı andan araştırma verilerinin yorumlanmasına kadar olan her süreçte araştırmacı, en az veriyi oluşturan katılımcılar kadar merkezi bir noktadadır. Bu yüzden nitel araştırmalarda, araştırmanın güvenilirliği için araştırmacının teorik alt yapısı, sosyo-kültürel özellikleri ve deneyimleri de göz önünde bulundurulmalı ve araştırmacı veriyi değerlendirirken, kendi değer yargılarının çalışmanın sonuçlarını etkileyebileceği

olasılığını göz önünde bulundurmalıdır. Bu bağlamda sözlük anlamı “kendi üzerine düşünmek olan” düşünümsellik, aynı zamanda araştırmacının araştırmaya olan etkisi üzerindeki farkındalığı demektir. Diğer bir deyişle, öz düşünümselliği benimseyen bir araştırmacının sürekli kendini analiz ettiği söylenebilir (Rolfe, 2006). Bununla birlikte, araştırmacının kendine olan öznelliğini sıfırlayabilmesi mümkün olmayacağı paranteze alma yönteminin kullanılması araştırmacılara önerilmektedir. Bu doğrultuda bu çalışmada varoluşsal paranteze alma yöntemi kullanılmıştır (Gearing, 2004). Araştırmacı, bir araştırma günlüğü tutarak ve araştırma ekibi ile süpervizyon niteliği taşıyan toplantılar yaparak kendi öznelliğine ve öznelliğinin araştırmaya olan etkisi üzerine farkındalığını geliştirmiştir (Clarke, 2006). Bu farkındalığın araştırma sürecine olumlu katkıları olacağı ve araştırmaya da daha derin bir anlayış kazandıracağı düşünülmüştür (Hewitt, 2007).

BÖLÜM 3

BULGULAR

3.1. Her şeyi bilen ve her şeye sahip: Ayrışmayan anne

Bu üst tema, ergenlik döneminde anoreksiya nervoza almış olan kadın katılımcıların, kendileri için Büyük Başka konumunda olan anneleri ile olan ilişkilerini ele almaktadır. Diğer bir deyişle bu üst temanın “Anoreksik kişiler Büyük Başka ile olan ilişkilerinde nasıl konumlanıyorlar?” sorusuna bir cevap içerdiği düşünülmektedir. Katılımcılar annelerini kendilerini bir birey olarak tanımayan ve hayatları ile ilgili çeşitli konularda izin veren/vermeyen konumunda olan birisi olarak tanımlamaktadır. Katılımcılar için anneleri bir nevi kontrol mercii görevi görmektedir. Katılımcılar yaşça büyük olduklarını da ifade etmelerine rağmen, annelerinden izin aldıklarını ve annelerinin görüşlerine uygun davrandıklarını söylemektedirler. Bununla birlikte, katılımcıların anneleri hakkında konuşurken, anneleriyle olan biyolojik benzerliklerini/aynılıklarını da vurguladıkları görülmektedir. Bu durum, katılımcıların her şeyi bilen ve her şeye sahip konumundaki anneleri ile ayrışmaya dair bir mesele içerisinde olduğunu düşündürmektedir. Bu bağlamda, katılımcılar tarafından tariflenen bu ilişki müdahale ve kontrol edebilen Büyük Başka konumundaki annenin, çocuğa özneliği için hareket alanı bırakmaması şeklinde yorumlanmış ve annenin, ayrışmaya izin vermediği düşünülmüştür. Bu yüzden bu temanın ismi annenin, özneye bırakmadığı alanı vurgulamak için “her şeyi bilen ve her şeye sahip” olarak belirlenmiş ve annenin ayrışmadaki direncini vurgulamak içinse “ayrışmayan” ifadesi eklenmiştir.

Bu doğrultuda bu üst tema, üç alt temadan oluşmaktadır. Birinci alt tema olan “Çocuğu birey olarak tanımayan adlı” alt temada ayrışmama bağlamında çocuğunu özne olarak tanımayan anneyi ele alınmıştır. Katılımcılar, annelerinin onları ayrı bir birey olarak tanımadığını ifade etmektedir. İkinci alt tema “Çocuğun üzerinde

kontrol sahibi” adlı alt temada ise yine ayrılmama bağlamında çocuğunun hayatı üzerinde kontrol sahibi olan anneyi ele almaktadır. Katılımcılar annelerinin hayatlarının küçük ayrıntılarında bile söz sahibi olduğunu ifade etmiş ve annelerinin isteklerine uygun davranmaya çalıştıklarını anlatmışlardır. Bununla birlikte üçüncü alt tema ise katılımcıların anneleri ile olan benzerliklerine olan vurgularını içermektedir. Her şeyi bilen ve her şeye sahip, ayrılmaya izin vermeyen bir anne ile olan ilişkide katılımcıların da bu benzerlikleri vurgulamalar, katılımcıların da ayrışma konusunda zorluk yaşadıkları şeklinde yorumlanmıştır.

3.2. Varlık ve yokluk arasında: Baba

Bu üst tema katılımcıların babaları ile olan ilişkilerini ve babalarına olan atıflarını yansıtmaktadır. Bu üst temanın, katılımcıların babaları ile ilişkilerini ele alması bağlamında hem “Anoreksik kişiler Büyük Başka ile olan ilişkilerinde nasıl konumlanıyorlar?” sorusunun bir cevabı olduğu hem de anoreksiya nervozanın ortaya çıktığı bir ailenin içinde, anne ve babanın ilişkisine dair atıflar da içerdiği için “Anoreksiya nervozada aile dinamikleri nasıl?” sorusuna bir yanıt içerdiği düşünülmüştür. Katılımcılar, babalarını daha silik/sönük diğer bir deyişle sanki yokmuş gibi bir pozisyonda tanımlamışlardır. Katılımcıların günlük hayatlarında ve söylemlerinde, babaları aktif bir konumda yer almıyor gibi görünmektedir. Bununla birlikte, baba figürünün katılımcıların hayatında hepten yok olduğu da söylenemez. Bu bağlamda, katılımcılar için babalarının “varlık ve yokluk” arasında olduğu söylenebilir zira babalar, her ne kadar sönük/silik bir şekilde de olsa katılımcıların söyleminde yer alabilmişlerdir. Diğer bir deyişle, katılımcılar günlük hayatlarında, söylemlerinde ve imgelerinde “yetersiz/yokmuş” gibi algıladıkları babalarını, babaları ile olan benzerliklerini vurgulayarak bir şekilde “var” etmeye çalışmaktadır. Bu yüzden temanın isminin de “varlık ve yokluk arasında: baba” olmasına karar verilmiştir.

Bu bağlamda “Annenin gölgesinde kalan baba” olarak adlandırılan ilk alt tema babanın, anne ile karşılaştırıldığı ve neticesinde annenin gölgesinde kalarak “yok olduğuna” yönelik bir içerikten hareketle oluşturulmuştur. Görüşmeler esnasında,

katılımcılara anne ve babayı kıyaslamalarını gerektirecek herhangi bir soru sorulmamıştır. Bununla birlikte, katılımcılara doğrudan babaları hakkında olan sorular sorulmuştur. Katılımcılar ise cevaplarını anneleri üzerinden, babalarını annelerinin özellikleri ile kıyaslayarak vermişlerdir. Sorulan sorular, katılımcıların babaları hakkında olmasına rağmen katılımcıların cevaplarının içeriğinin büyük bir çoğunluğunu -genel görüşme içeriği de dahil olmak üzere- katılımcıların annelerinin oluşturduğu görülmüştür. Diğer bir deyişle, katılımcılar babalarından ziyade annelerinden daha çok bahsetmişler ve anne babalarını karşılaştırmışlardır. Bu karşılaştırmalarda, katılımcılar annelerini daha baskın, ne yapması gerektiğini bilen, güçlü ve dediği olan/sözü geçen biri olarak anlatmışlardır. Babalarını ise annelerine göre şekil alan ve eşinin söylemlerine/düşüncelerine uygun davranmak zorunda kalan biri olarak tanımlamışlardır. Diğer bir deyişle, katılımcılar için babaları, eşlerinin gölgesinde kalmıştır. İkinci alt tema ise babanın, anneden bağımsız olarak, salt kendi varlığında da katılımcılar için yetersiz bulunmasını ele almaktadır. Görüşmeler esnasında katılımcılar, babalarının bir baba, bir eş, bir insan olarak yetersiz ve zayıf olduğuna yönelik çeşitli atıflarda bulunmuşlar ve çeşitli durum ve örneklerle babalarının “bekledikleri gibi” olmadığını ima etmişlerdir. Üçüncü alt tema olan “Babaya benzemek: Babanın varlığının izleri” adlı alt tema ise katılımcıların bir nevi “yok gibi olan babalarını” söylemlerine dahil ederek ve kendileri ile özdeşleştirerek “var” etme çabalarını yansıtmaktadır.

3.3. Bakışın gücü: İdeal miyim?

Bu üst tema katılımcıların, diğer insanların bakışı ile olan ilişkilerini ele almaktadır. Katılımcılar için “gör-ünmek” oldukça önemlidir; buradaki “görünmenin” hem var olmaya hem de imaja yönelik bir atıf olduğu düşünülmüştür. Diğer bir deyişle, “görünüm” katılımcılar tarafından salt fiziksel anlamda değil başkalarının zihninde nasıl göründükleri, onların beklentilerine uygun olup olmadıkları ile de yakından ilişkilidir. Bu durum, katılımcıların Başka’nın zihninde olduğunu düşündüğü ideal imgeye yani diğer bir deyişle Başka’nın arzusuna uygun davranmaya yönelik yoğun bir çaba içerisinde olmaları şeklinde yorumlanmıştır. Bu yüzden, bu üst temanın adını katılımcıların da zihnini meşgul eden “İdeal miyim?” sorusu oluşturmaktadır.

Bununla birlikte, bu üst temanın katılımcıların Büyük Başka ile olan ilişkilerine yönelik atıflar da içermesi nedeniyle “Anoreksik kişiler Büyük Başka ile olan ilişkilerinde nasıl konumlanıyorlar?” sorusuna bir cevap niteliğinde olduğu da düşünülmektedir.

Bu üst tema üç alt tema içermektedir. “Zayıf olmak eşittir güzel olmak” olarak adlandırılan ilk alt tema katılımcıların, bakışın diğer bir deyişle arzulananın olduğu yönle ilişkilendirilen söylem karşısındaki tutumlarını ele almaktadır. Bütün katılımcıların görüşmelerde istisnasız olarak “*çünkü zayıf olmak demek güzel olmak*” dedikleri görülmüştür. Katılımcılara bu düşüncenin kaynağı sorulduğunda, bu düşüncenin kaynağını bilemediklerini söylemişlerdir. Medyanın ve dışarıdaki insanların söylemlerinin etkili olmuş olabileceklerini belirtmişlerdir. İkinci alt tema ise katılımcıların fiziksel görünümüne ek olarak, başkalarının gözünde nasıl göründüklerine dair meraklarını ele almaktadır. Kendileri için Büyük Başka konumunda olan kişilerin bakışında (Other’s gaze) nerede konumlandığını anlamaya çalışan katılımcılar Başka’nın bakışına ve talebine uygun olarak Başka’nın beklentilerini karşılamaya çalıştıklarını ifade etmişlerdir. Bu durum ise üçüncü temada ele alınmıştır. “Olmam gerektiği gibi: Beklentileri karşılamalıyım” adlı alt temada katılımcıların ilişkide oldukları, kendileri için Büyük Başka konumunda olan bireylerin beklentilerine yönelik tutumlarını yansıtmaktadır. Katılımcılar bu beklentileri karşılamaya dair güçlü bir istek içinde olduklarını ifade etmektedirler. Sonuç olarak, bu üst temanın anoreksik katılımcıların Başka’nın bakışında ideal bir konumda olup olmadıklarına dair meraklarını ve ideal olmaya yönelik çabalarını ele almaktadır.

3.4. Olmak ya da olmamak: Olma çabası

Bu üst tema katılımcıların var birey olma serüvenindeki deneyimlerini, buldukları çözümleri ve kendilerine yönelik atıflarını yansıtmaktadır. Her yerde olan, her şeye sahip, her şeyi bilen tüm güçlü bir Büyük başka nedeniyle, katılımcıların kendi sınırlarını keşfetme/belirleme konusunda problemler yaşadığı görülmüştür. Bu duruma ilişkin meseleler özellikle birinci ve üçüncü üst temada ele alınmıştır.

Katılımcıların hem Büyük Başka'dan ayrıışmış, farklı bir özne/birey olabilmek için çeşitli yollar denedikleri hem de bunun aksi yönünde davranışlar sergiledikleri görülmüştür. Diğer bir deyişle, katılımcıların “sınırlarının” muğlak olduğu durumları sürdürme konusunda Büyük Başka ile uyum içinde olduğu görülmüştür. Bu bağlamda, katılımcıların hem ayrıışmak hem de ayrıışmanın olmadığı o sınırsızlığı sürdürmek istedikleri düşünölmüştür. Dolayısıyla bu üst tema, “ayrıışmış bir birey olmak” ve “ayrıışmamış bir birey olmak” arasında gidip gelen katılımcıların durumunu ifade etmek amacıyla “Olmak ya da olmamak: Olma çabası” olarak isimlendirilmiştir. Bununla birlikte bu temanın “Anoreksik kişiler Büyük Başka ile olan ilişkilerinde nasıl konumlanıyorlar?” ve “Anoreksiya nervozanın anoreksik özne için anlamı ve işlevi nedir?” sorularına bir cevap niteliği taşıdığı düşünölmektedir.

İlk tema, katılımcıların sınırlarının belli olmaması ve katılımcıların da bu sınırsızlığı sürdürmeye yönelik söylemleri göz önünde bulundurularak oluşturulmuştur. Katılımcılar bunu yaparken hep ya da hiç anlamına gelebilecek iki uçlu bir sınırsızlık tarif etmektedirler. Görüşmeler esnasında, katılımcıların hem insan bedeninde olmanın verdiği fiziksel sınırları (ya çok fazla besin tüketmek ya çok fazla aç kalmak ya da çok fazla alkol tüketmek, çok fazla fiziksel efor harcamak gibi) ve hem de sosyal hayatın, bir kültürün içinde olmanın verdiği sınırları (fiziksel ve ruhsal sağlıklarını riske atan davranışlar gibi örneğin çok sayıda tanımadıkları insanla korunmasız seks, bağımlılıklar gibi) görmezden gelmeye dair ifadelerinin olduğu gözlemlenmiştir. Bu alt temanın “olmak veya olmamak: olma çabası” adlı üst temanın altında yer almasının sebebi de bu bağlamda, öznenin sınırları görmezden gelmeye ilişkin tutumudur. Sınırların olmadığı bir yerde öznenin varlığından söz edilebilir mi? Peki, özne bu sınırsızlığı büyük Başka'nın tahakkümüne karşı bir kalkan olarak kullanıyorsa? Diğer bir deyişle, bu alt tema özne olamayan bireyin sınırlar konusundaki kafa karışıklığını ele almaktadır. Katılımcıların “sınırsızlığı” kendilerine Büyük Başka tarafından dayatılan tahakkümün altına girmemek için yarattıkları bir sınır olarak işlev gösterse de aynı zamanda bu sınırsızlık var olmamakla eş değer olarak yorumlanmıştır. İkinci alt temada ise, sınır kargaşasının içinde kendi özneliği ile konumlanamayan katılımcıların bu nedenle edilgen bir konumda oluşları ele alınmıştır. Katılımcılar aile üyeleri de olmak üzere

diğer insanlarla olan iletişimlerini anlatırken, kendi arzu ve isteklerini ortaya koyamadıklarından bahsetmektedirler. Diğer bir deyişle, kendi arzu ve isteklerini ortaya koyamayan katılımcıların aynı zamanda kendi arzu ve isteklerine dair sorumluluğu üstlerine almayarak kendilerini adeta “yokmuş” gibi bir pozisyonda konumlandıkları düşünölmüştür.

İlk iki temada katılımcıların daha çok “olmama” kısmında konumlandıkları söylenebilir. Üçüncü alt temada ise anoreksiya nervozanın, katılımcıların ayrışmış bir özne olma ve sınırları belirleme konusundaki işlevleri tartışılmıştır. Bu bağlamda üçüncü alt tema ise katılımcıların “var olma” çabalarını ele almaktadır.

Üçüncü alt tema “Düzenin koruyucusu: Semptomun fonksiyonları” olarak adlandırılmış ve anoreksiya nervozanın katılımcıların hayatlarındaki olumlu olarak yorumlanabilecek işlevleri ele alınmıştır. Bu alt temanın da kendi içinde dört alt teması bulunmaktadır. “Kontrolümü geri alıyorum: Kontrolü kazanma illüzyonu” adlı alt temada, katılımcıların anoreksiya nervoza ile birlikte deneyimledikleri kontrol hissiyatını yansıtmaktadır. Katılımcılar anoreksiya nervoza öncesinde hayatlarının çeşitli alanlarında stres ve baskı deneyimlediklerinden bahsetmekte ve yemek yemeyerek kontrolü sağladıklarına dair bir inanca sahip olduklarını belirtmişlerdir. “Sınırlara sahip olmak için çaba” isimli ikinci alt temada ise katılımcıların semptomları yoluyla ayrışma çabaları ele alınmıştır. Üçüncü alt tema olan “Üçüncüye/babaya çağrı” adlı alt temada katılımcıların anoreksiya nervoza süreçleri ve babaları arasında kurdukları ilişki ele alınmıştır. Katılımcıların anoreksiya nervoza ile birlikte babalarını sürece dahil etmeye çalıştıkları; bir nevi babaya bir mesaj/bir çağrı niteliğinde olan semptomları ile kendilerinin, babalarının üzerindeki etkilerini anlamaya çalıştıkları düşünölmüştür. “Olma-nın bir yolu” olarak adlandırılan son alt temada ise katılımcıların zayıf olmaktan/yemek yememekten/kilo vermekten aldığı hazzı ve kazandıklarını düşündükleri edimler ele alınmıştır. Bu bağlamda, kendilerine has, ayrışmış bir özne olma çabasında katılımcıların anoreksiya nervozaya “var olma” konusunda önemli anlamlar atfettikleri düşünölmüştür.

BÖLÜM IV

TARTIŞMA

4.1. Her şeyi bilen ve her şeye sahip olan: Ayrışmayan Anne

Araştırma sonuçları incelendiğinde de katılımcılar için annelerinin hayatlarında güçlü bir kontrol mercii olarak yer aldığı görülmektedir. Katılımcılar ve anneleri arasında, sanki bebek ve anne arasındaki dengesiz ve baskın ilişki dinamiğine benzer bir ilişki dinamiğinin izlerinin sürdüğü görülmüştür. Bu orantısız baskınlık katılımcıların hayatlarında birey/özne olarak algılanmadıkları ve Büyük Başka'nın tahakkümü altında hayatını sürdürmeye devam etmeleri şeklinde kendini göstermektedir.

Bu dinamik, çocuğun buharlaştırılmasına, öznelliğinin yok edilmesine ve boyun eğmesine neden olabileceği için oldukça risklidir (Lacan, 2020). Lacan, bu gibi girişimleri psikopatolojilerle ilişkilendirmiştir (Lacan, 1938). Bu bağlamda, katılımcıların da literatürle uyumlu olarak (Recalcati, 2010) anoreksiya nervoza semptomlarının ortaya çıkışı, ergenlik dönemindeki ayrışma ihtiyacına paralel olarak hali hazırda nesne pozisyonuna indirgedikleri ve öznelıklarının olmadığı bir dönemde ortaya çıkmıştır. Özne, nesne pozisyonuna indirgendiğinde, özne tümgüçlü Büyük Başka karşısında eksiği ancak hiçlik yiyerek yaratabilmektedir. Diğer bir deyişle, her şeye kadir Büyük Başka'nın her şeye kadir olmadığını özne, ancak yemek yemeyerek gösterebilmektedir. (Fuks & Campos, 2010).

Lacan'a göre en sevgi dolu ve kendini çocuklarına adanmak isteyen annenin bile çocuklarını "özümsemek" için dayanılmaz bir dürtüsü vardır. Lacan'ın ünlü timsah benzetmesinin kökleri de bu dürtüye dayanmaktadır. Lacan, anneyi çocuğunu yutmak için ağzını açmış bir timsaha benzetmektedir. Anne çocuğunu yeniden yutmak, onu tekrar içine katmak, kendi bünyesine katmak, tamamen sahiplenmek diğer bir deyişle ayrışmamak ister. Bunun gündelik hayattaki en kolay yolu annenin

çocuğu hakkında her şeyi bilmesi, istediğı gibi bir bedene sahip olmasını sağlayarak onun bedeninden zevk alması, düşüncelerini okuma derecesinde her şeyine müdahil olması, onun yerine karar vermesi, diğeri bir deyişle, çocuğu üzerinde mutlak mülkiyet hakkını talep etmesiyle olmaktadır.

Recalcati (2019) annelik arzusunun temelde kayıp ile eş giden bir şey olduğunu belirtir. Çocuğa sahip olmak aynı zamanda ondan ayrışmayı gerektirmektedir. Bu bağlamda Lacan da annelik arzusunun yozlaşmasını da totalitarizme benzetmektedir. Çünkü annelik arzusunun yozlaşması demek “teklik” demektir. Dolayısıyla Lacan bu durumu babalık kodunun yozlaşmasıyla, normun terk edilmesiyle ve gücün acımasızca uygulanmasıyla ilişkilendirmiştir. Lacan’a göre annelik arzusundaki “teklige” yol açan bu yozlaşma ve her şeye kadirliğin aşırı derecede vurgulanması, karşılıklı aidiyet hayali ile sonuçlanacaktır. Çünkü annede ayrışmaya dair herhangi bir nosyon bulunmamaktadır. Lacan’ın bu görüşleri, araştırma sonucunda ortaya çıkan anoreksik öznenin Büyük Başka ile olan ilişkisi bağlamında da kendini göstermektedir. Her şeye kadir annenin ayrışamaması, karşılıklı aidiyet ve teklik hayalini de beraberinde getirmektedir.

Nitekim, tüm bu pozisyonlar öznenin kendine alan bulamadığı ve özneliğini ortaya koyamadığı bir alan yaratmaktadır. Başka ile özne arasındaki sınırlar bu kadar aşıldığında özne yutulmuş, çiğnenmiş, Büyük Başka’nın jouissance’nın nesnesi haline gelmiştir. Araştırma sonuçlarına göre, katılımcıların anneleri ile olan ilişkide özne konumundan ziyade yutulmuş bir nesne konumunda oldukları söylenebilir. Bu bağlamda Lacan, anoreksik öznenin karşı karşıya olduğu Büyük Başka’yı özneyi pasif bir bakım nesnesi pozisyonuna indirgeyen ve ayrışmayı reddeden bir Büyük Başka olarak tanımlamaktadır. Bu durum öznenin artık yulaf lapasıyla boğulduğu andır. Bu bilgiler ışığında katılımcıların da Lacan’ın tanımladığı gibi bir Büyük Başka ile karşı karşıya kaldığı düşünülmüştür.

4.2. Varlık ve Yokluk arasında: Baba

Sınırsız, eksiğe yer bırakmayan, tüm güçlü bir Büyük Başka ile deneyimlenen ikili ilişkinin teklik gibi deyimlendiği anoreksiya nervozada (Recalcati, 2010) baba bir

üçüncü olarak nerede konumlanmaktadır? Bu çalışmada baba tüm güçlü annenin gölgesinde kendine ancak “varlık ve yokluk” arasında bir yer bulabilmiştir.

Lacan’a göre baba, çocuğun anne ile olan ikili imgesel ilişkisine müdahale ederek çocuğu kurtaran ve sosyal düzene dahil olmasını sağlayandır. Bu bağlamda, psikanalitik yaklaşımda babanın hem yasaklayan hem de çocuğu anneden koruyan bir görevi olduğunu söylemek mümkündür. Büyük Başka’nın eksigi olarak fallus konumunda konumlanan baba bu şekilde çocuğu da kurtaracaktır. Çocuk tümgüçlü olduğunu sandığı Başka’nın eksigi ile karşılaşp rahatlayacak ve ortaya çıkan eksikle birlikte kendi arzusu için de alan açılacaktır. Nitekim, anoreksiya nervoza kliniğinde, çocuk sanki eksigi yokmuş gibi görünen tüm güçlü bir Başka ile karşı karşıyadır (Lacan, 1958/2006b).

Lacan, babanın imagosundaki çağdaş gerilemeyi psikopatolojik bozukluklar ile ilişkilendirmektedir ve eşinden boşanmış, ayrılmış veya eşi tarafından aşağılanmış baba imgelerine sahip çocuklarda psikopatolojik yapıları görme olasılığımızın artacağını belirtir (Lacan, 1938). Bu bağlamda yeme bozuklukları, bağımlılıklar vb. yapılanmaların da Lacan’ın işaret etmiş olduğu çağdaş gerileme ile ilişkili olduğunu söylemek mümkündür. Bu çalışmada da kendini gösteren “silik ve yetersiz baba” tanımlamaları katılımcıların baba imagolarına yönelik bir gerileme olduğu düşündürmektedir. Katılımcıların dilinde baba vardır ancak tüm güçlü annenin ağırlığı altında ezilmektedir. Katılımcılar babalarını “annesine göre şekillenen”, “ses çıkarmayan biri” olarak tanımlamışlardır. “Hiç kimseden korkmayan”, “baskıcı ve baskın” olan annenin karşısında, baba susmuştur. Bu atıflar, Freud’un Oedipal süreçle ilişkilendirdiği ve çocuğun zihninde olmasını beklediği “güçlü, tehditkâr, otoriter, intikamcı” baba figürü ile oldukça çelişkilidir (Etchegoyen, 2002). Bu söylemde “baba” özerk bir yapıya sahip değildir. Aksine, tüm güçlü, her şeye gücü yeten ve her şeyi bilen annenin gölgesinin altında sessizce hayatını sürdürmektedir. Bu durum katılımcıların dilinde babalarının yetersiz olmaları ile paralel gitmektedir. Katılımcılar babalarına ilişkin bir hayal kırıklığından bahsetmektedirler: “*babamı yetersiz gördüm. Çok yetersiz gördüm. Babam hem yetersiz bir baba hem de yetersiz bir eş.*” Buradaki “yeter-siz” kelimesi de ayrıca önemlidir. Baba “yetersiz” olarak

tanımlanırken sonundaki cümleye yokluk anlamı katan “siz-sız” ekleri babanın aynı zaman da “yeter” demeyen duruşuna işaret etmektedir. Baba, anneye “dur, yeter, daha ileri gidemezsin” demeyerek sınır koymamaktadır. Diğer bir deyişle, katılımcılar için babaları, Oedipal bir düzlemde hem annelerini hak edecek kadar iyi değildir hem de annelerinin tüm güçlüğünü kırarak ve onları annelerinden ayırarak kadar güçlü değildir.

Lacan’a göre bu durum oldukça tehlikelidir. Katılımcıların içinde buldukları durum karşısında anneleri tarafından yutulmamak için çeşitli manevralar gerçekleştirdikleri düşünülmektedir. Tıpkı Küçük Hans vakasında da gerçek babanın yetersiz kaldığı durumda Hans’ın at fobisi geliştirmesi gibi (aktaran Hekimoğlu, 2021), katılımcıların anoreksiya nervoza semptomu geliştirmiş oldukları düşünülmüştür. Nitekim fobi özneyi yapılandıran bir yerde konumlandırırken, anoreksiya nervozanın oldukça radikal bir seçim olduğu söylenebilir. Özne, bu şekilde “sözde bir ayrışma” için Başka’yı reddeden bir yapılanma içine girmektedir (Recalcati, 2010). Bununla birlikte Lesourd (2006/2018), öznenin Başka ile olan ilişkisinde bir üçüncü ile düzenlenmiş bir sınır olmadığında öznenin sınır oluşturmak için farklı yollara saptığını belirtmektedir. Post modern özneler olarak tanımladığı bu kişilerin, sınırı ancak beden üzerinden deneyimleyebildiklerini söylemektedir. Zira beden, ölüm ile ilişkisi bağlamında sınırının sınanacağı ve kaydedileceği yegâne yerdir. Bu bağlamda, babanın sınırı yeterince koyamadığı bir noktada anoreksiya nervoza sınırsız Büyük Başka ile olan sınırı sınamak ve sınırı belirlemek/kaydetmek için oldukça radikal bir çözümdür.

Bunun bir çözüm olması bağlamında; katılımcıların babalarının varlığını tamamen yok saymadıkları ve kendi varlıklarını babalarının üzerinden inşa ettikleri de görülmüştür. Katılımcıların görüşmeler esnasında kendilerini tanımlarken kullandıkları bazı özelliklerin kaynağı olarak babalarını referans göstermişlerdir. Bu durum katılımcıların “babamdan gelir” ve “babamdan almışımıdır” diyerek bir üçüncü olarak, babalarının varlığını sisteme dahil etme çabasında oldukları düşünülmüş ve babaları ile bir özdeşleşme içinde oldukları şeklinde yorumlanmıştır. Diğer bir deyişle, araştırma sonuçlarına göre “çağdaş bir gerilemeye” maruz

kaldıkları düşünölen baba imagosu karşısında anoreksik öznelerin yine de babanın izlerini sürdüğünü düşünölmüştür.

4.3. Bakışın gücü: İdeal miyim?

Katılımcılarla yapılan görüşmelerde, katılımcıların diğör insanların düşöncelerine olan hassasiyetleri önemli bir yer tutmuştur. Katılımcılar için diğör insanların gözündeki görünömlerinin katılımcılar için salt fiziksel anlamda değıl başkalarının zihninde nasıl göröndükleri, onların beklentilerine uygun olup olmadıkları ile de ilişkilidir. Katılımcılar diğör insanların beğeneceğı şekilde bir fiziksel görünöme sahip olmak, diğör insanların onaylayacağı şekilde bir kişiliğıe sahip olmak, diğör insanların takdir edeceğı davranışlar sergilemek vb. gibi eylemlerden bahsetmişlerdir. Bu durum, katılımcıların Büyük Başka'nın zihninde olduğunu düşöndüğü ideal imgeye yani diğör bir deyişle Başka'nın arzusuna uygun davranmaya yönelik yoğun bir çaba içerisinde olmaları şeklinde yorumlanmıştır.

Lacan, öznenin arzu ile olan ilişkisine referans vererek özneyi asıl belirleyen şeyin bakış olduğunu belirtir. Buradaki bakıştan kasıt, katılımcıların da söylemlerinde yer verdiğı gibi kendilerinin bakışı değıl, kendilerine yönelen, maruz kaldıkları bakıştır. Diğör bir deyişle, özneler bakışın nesnesi konumundadır. Bu konumlanma oldukça önemlidir. Oluşturulan temalarda da göröleceğı üzere katılımcılar da kendilerini nesne konumunda konumlandırmış ve Başka'nın beklentilerine göre kendilerini ve hayatlarını şekillendirme çabası içerisinde girmişlerdir. Zayıflık eşittir güzel olmak; beklentileri karşılamalıyım söylemleri ve Başka-sının gözünde nasıl görünüyorum soruları hep öznenin nesne konumu ile ilişkilidir. Nitekim, öznenin kendi özneliğini ve arzusunu ortaya koyamadığı bu konum oldukça tehlikelidir. Zira Lacan'a göre de öznenin bakış tarafından yakalandığı bu konum aynı zamanda öznenin yok olma tehdidi ile karşılaştığı bir konumdur. Diğör bir deyişle, öznenin kendi arzusuna alan bulamadığı yerde özne yok olma tehdidi ile karşı karşıyadır. Lesourd (2006/2018) bu bağlamda Başka ile olan ilişkide arzu ve eksiğı sabit bir konumda bulunduramayan ve sınırları net olmayan öznelerin kendilerini var edebilmek için yeme bozuklukları geliştirdiğini belirtmektedir.

4.4. Olmak ya da olmamak: Olma Çabası

Araştırma sonuçlarına göre katılımcıların tüm güçlü Büyük Başka ile olan ikili ilişkiden ayrılmak ve kendi sınırlarını belirlemek konusunda problemler yaşadıkları düşünülmüştür. Katılımcıların bu problemler karşısında hem Büyük Başka'dan ayrılmış, özerk bir birey olmak için çeşitli yollar denedikleri hem de bu özerklik çabasına ters düşecek bazı girişimlerde de buldukları görülmüştür.

Katılımcıların Büyük Başka ile olan ilişkideki sınırların muğlaklığının katılımcıların hayatlarının diğer alanlarında da görüldüğü düşünülmektedir. Katılımcılar, özel hayatlarında sınırları belirlemek konusunda bir kafa karışıklığına sahiplerdir. Bu bağlamda anoreksiya nervoza, Büyük Başka ile olan ilişkideki bir soruna cevap niteliğinde kendini gösterse de radikal ve patolojik bir çözüm yolu olması nedeniyle kendi içerisinde Büyük Başka'yı reddetmeyi de beraberinde getirmektedir. Bu reddediş, fenomenolojik olarak yemeğin reddi, beslenmenin reddi, biyolojik ihtiyaç yasasının reddi ile kolaylıkla kendini göstermektedir (Recalcati, 2010). Büyük Başka'ya senin zevkinin nesnesi olmayacağım diyen özne bu şekilde Büyük Başka ile olan sosyal bağlarını da reddetmektedir. Nitekim bu durum aynı zamanda kastrasyona bir tampon olarak da yorumlanmaktadır (Fuks & Campos, 2010). Bu bağlamda katılımcıların anoreksiya nervoza ile gerçeğin (reel) sınırlarını zorlamaları, diğer bir deyişle, bedenlerinin fiziksel sınırlarını zorlamaları da bu bağlamda kastrasyona direnç olarak yorumlanabilir. Çünkü katılımcılar, bu şekilde kendi eksiklerini ve bölünmüşlüklerini reddetmektedirler (Recalcati, 2010). Özellikle özneleri yasadan/yasaktan sıçrayarak uzaklaştıran ve zevk alma zorunluluğuna iten modern çağımız düşünüldüğünde, anoreksiya salt jouissance ilişkili semptomlar arasında da tanımlanmakta (referans) ve nevrotik semptomların tam zıttı bir pozisyonda konumlanmaktadır (Recalcati, 2010). Çünkü sınırların olmadığı bir yerde özne "Hepsini istiyorum" demektedir. Bu durum özellikle katılımcıların "Ya hep ya hiç" söylemine oldukça bağlanmaları ve dengeyi kendi içlerinde kuramamaları bağlamında görülmüştür. Kastrasyonun olmadığı bir yerde öznenin bahsedilemeyeceği için de bu durum özneyi "olmamaya" iten bir hamle olarak yorumlanmıştır.

Sınırsızlık meselesi aynı zamanda katılımcıların özne olarak kendi sorumluluklarını almamalarında kendini göstermektedir. Katılımcılar diğer insanlara itiraz etmekten/karşı çıkmaktan özellikle kaçındıklarını söylemişlerdir. Bununla birlikte, katılımcılar kendi istek ve arzularını ortaya koymazken, bu istek ve arzulara dair kendi sorumluluklarını da almamaktadırlar. Diğer bir deyişle, katılımcılar özne olarak sorumluluklarını almayarak adeta kendilerini de “yokmuş” gibi konumlandırmaktadırlar. Bu an tam da anoreksik öznenin buharlaştırıldığı ana bir örnek olarak yorumlanabilir. Çünkü anoreksik özne, Büyük Başka'nın taleplerini karşılamaya oldukça meyillidir ve bu beklentileri/talepleri karşıladıkça tatmin hissetmektedir (Recalcati, 2010). Bu bağlamda diğer bir katılımcı “değilleme” yapmış ve kendisini sınırları aşan biri değilim diye tanımlamıştır. Bu söylemin arkasından gelen “çünkü annemin beklentilerine göre davranırım” vurgusu oldukça önemlidir. Annesinin beklentilerine uygun olarak davrandığı için sınırı aşmadığını söyleyen katılımcı, anoreksiya nervoza ile bu beklentileri yerle bir ettiğini de dile getirmektedir. Diğer bir deyişle, katılımcı anoreksiya nervoza aracılığı ile Büyük Başka'ya kuvvetli bir başkaldırıda bulunduğunu belirtmektedir. Araştırma sonuçlarına göre kendilerini ifade etme konusunda “hiçliğe” yakın olan becerileri katılımcılar için anoreksiya nervoza ile “hep” şeklinde oldukça fazla ve dayatmacı bir hale bürünmüştür. Öyleyse bu radikal değişiklik neyden kaynaklanmaktadır? Oldukça pasif, annesinin sözünden çıkmayan altın çocuklar nasıl birdenbire ebeveyn Büyük Başka'ya karşı bu kadar zıt hareket etmeye başlamaktadır (Recalcati, 2010).

Bu bağlamda anoreksiya nervoza semptomunun işlevi de ele alınmalıdır. Anoreksik öznenin semptomu ile iletmeye çalıştığı mesaj nedir? Araştırmanın sonuçlarına göre, literatürle de uyumlu olarak katılımcılar için semptomlarının, özneyi özerk bir hale getirmek ve Büyük Başka'dan ayırtırmaya yönelik işlevleri olduğu açıktır. Çünkü özne ile Büyük Başka arasındaki sınırlar belli olmadığında, özne yutulmuş hissetmekte ve Büyük Başka'nın jouissance nesnesi pozisyonuna indirgenmektedir.

Bu bağlamda katılımcıların anoreksiya nervozayı, sınır oluşturmanın bir yolu olarak kullandıkları görülmüştür. Katılımcılar, Büyük Başka ile aralarında olan sınırları koruyabilmek için bir çaba içerisindeyler ve bu bağlamda bu sınırları nasıl

oluşturduklarını anlatırken sık sık anoreksiya nervozaya referans vermişlerdir. Katılımcılar için bu sınırlar, pratik anlamda Büyük Başka'ya dur demenin bir yoludur. Katılımcılar sanki anoreksiya nervoza yolu ile Büyük Başka ile aralarında sözde bir sınır oluşturuyor gibilerdir. Bu durum farklı çalışmalarda da kendini göstermektedir. Diğer bir deyişle, bireyler semptomları aracılığı ile kendileri ve diğer insanlar ile olan sınırlarını belirleyebilmektedir/koruyabilmektedir (Özbek Şimşek, 2019; Lawrence, 1979).

Bununla birlikte, semptomun bir diğer işlevi olarak “kontrolü sağlamak” da literatürle (Özbek Şimşek, 2019; Granek, 2007) uyumlu olarak oldukça öne çıkan bir temadır. Katılımcılar anoreksiya semptomlarından önceki dönemi “hayatlarının kontrolüne sahip olmadıkları” bir dönem olarak tanımlamışlar ve anoreksik semptomlar ile bu kontrol geri sağladıklarını belirtmişlerdir. Diğer bir deyişle katılımcılar için anoreksik semptomları “sözde” kontrolü geri kazanmanın bir yoludur. Özne ile Büyük Başka arasındaki sınır muğlaklaştığında, eksikliğe yer kalmadığında özne ortaya çıkan kaygı ile baş edebilmenin yollarını arayacaktır. İşte anoreksiya nervozanın işlevi de bu noktada başlamaktadır. Çünkü çocuk anneden eksikliğini/kastrasyonunu paylaşmasını ister. Bu bir ayrışma isteğidir (Recalcati, 2003). Ayrışma olmadığında ise, buradaki eksiklik talebi bizi kaçınılmaz olarak anoreksik semptomla diğer bir deyişle anoreksik manevranın yarattığı hiçlik nesnesine götürecektir. Özne ancak hiçlik yiyerek, kendi sınırları ve özneliği için bir alan açmaya çalışmaktadır. Ve bu bağlamda “yemek nesnesi” kaygı yaratan fobik obje yerine geçecek ve ayrışmayı destekleyecektir (Recalcati, 2010). Bu yüzden katılımcıların semptomları ve Büyük Başka ile kurdukları ilişki bağlamında, anoreksiya nervozanın Büyük Başka'da kesik yaratan ve Büyük Başka ile olan sınırları belirleyen bir işleve sahip olduğu düşünülmüştür.

Bu bağlamda, katılımcıların semptomlarını ve hastalık süreçlerini babaları ile ilişkilendirerek anlatmaları da bilhassa dikkat çekicidir. Katılımcılar bu süreci anlatırken babalarının tepkilerine ve babaları ile olan ilişkilerine referans vermişlerdir. Bu bağlamda katılımcıların, semptomları aracılığı babaya bir çağrıda buldukları düşünülmüştür. Bilindiği üzere anoreksiya nervoza kliniğinde babanın

varlığı oldukça muğlaktır. Bu bizim araştırma sonuçlarımızda da paraleldir. Bu bağlamda, tümgüçlü bir Büyük Başka kurulan ikili ilişkide anoreksiya nervoza, tıpkı yemek objesinin fobik bir hal alması gibi babaya çağrı niteliği de taşımaktadır. Diğer bir deyişle, paternal işlevin zayıfladığı bir noktada ortaya çıkan bir durumda ortaya çıkan anoreksiya nervoza bu işlevi güçlendirmek adına üçüncüye bir çağrı olarak kendini göstermektedir.

Ayrıca, katılımcıların anoreksiya nervoza semptomları ile edindikleri/kendilerine yaptıkları olumlu görünen atıflar da oldukça önemlidir. Bu çalışmada katılımcılar yemek yemeyerek kendilerini daha güçlü, daha azimli, tatmin olmuş, başarılı vb. şeklinde hissettiklerini söylemişlerdir. Bu atıflar, öznenin tüm güçlü Büyük Başka karşısında eksiği ancak yemek yemeyerek yaratması bağlamında yorumlansa da gerçekte olan ilişkisi bağlamında büyük bir jouissance da içermektedir. Diğer bir deyişle, Büyük Başka özneyi yulaf lapasıyla boğduğunda özne kendisine nefes alacak alanı ancak hiçlik yiyerek yaratmakta ve bu durumda sonucunda katılımcılar kendilerine karşı pozitif atıflarda bulunmaktadırlar. Özellikle, histerik bir saik ile yapılan bu anoreksik seçimler temelde Büyük Başka'yı eksik bırakarak kendi arzularını sürdürmek temelinde ilerlemektedir. Lacan bu bağlamda anoreksik manevranın öznenin Büyük Başka karşısında arzulayan bir özne olarak kalabilmesinin bir yolu olduğunu vurgular. Nitekim, katılımcılardan deneyimledikleri "tatmin" hissini tanımlarken bunu hiç kimse için yapmadıklarını da özellikle belirtmektedirler. Katılımcıların bu pozitif atıfları bir noktada narsisistik ve tümgüçlü bir noktaya doğru evrilmiş görünmektedir. Bu bağlamda Lacan'ın son dönemlerinde işaret ettiği Parlêtre adlı kavrama odaklanmak da önemli olacaktır. Lacan'a göre anoreksiya nervoza, ihtiva ettiği yoğun jouissance nedeniyle Parlêtre'nin semptomudur. Freudyen bağlamda semptom kastrasyonun sembolik bir uygulamasıdır. Nitekim, anoreksiya nervozada Büyük Başka'nın reddi her ne kadar histerik saiklerle ortaya çıkmış olsa da diğer bir deyişle, Büyük Başka'yı eksik bırakarak arzusunu sürdürmek olsa da pratikte bölünmüşlüğü reddi olarak kendini göstermektedir. Bu yüzden anoreksiya nervoza her ne kadar Büyük Başka'dan ayrışmanın bir yolu olsa da bu ayrışma sözde bir ayrışmadır (Recalcati, 2010). Buradaki ayrışma da temelde ayrışmaya karşı bir savunma olarak işlev

göstermektedir çünkü anoreksik manevradaki sözde ayrışmada herhangi bir jouissance kaybindan bahsetmek mümkün değildir. Diğer bir deyişle özne yutulmamak için kopmaya benzer bir sözde ayrışma gerçekleştirmektedir. Dolayısıyla, bu gerçek bir ayrışma olmadığı için özne “olmak veya olmamak” arasında gidip gelmektedir. Anoreksik seçimi radikal bir seçim yapan şey de budur. Bu yüzden katılımcıların söylemlerinde kendini gösteren aşırı derecede belirlenen sınır ve sınırsızlıklar da bu bağlamda yorumlanmıştır.

4.5. Sonuçlar ve Klinik Uygulamalara Dair Öneriler

Bu çalışmada anoreksik özne ile Büyük Başka arasındaki ilişki dinamikleri ve anoreksiya nervozanın özne için önemi Lacanyen psikanaliz bağlamında ele alınmıştır. Bu amaçla, restrictive tip anoreksiya nervosa tanısı almış beş katılımcı ile görüşmeler yapılmıştır. Bu görüşmelerin temelini “Anoreksik özneyi, Büyük Başka ile ilişkisi bağlamında nerede konumlandırabiliriz?”, “Anoreksiya nervozada aile dinamikleri nasıl?” ve “Anoreksiya nervozanın anoreksik özne için anlamı nedir?” soruları oluşturmaktır. Bu sorulara yanıt bulabilmek için görüşmeler refleksif teorik tematik analiz yöntemi ile analiz edilmiştir. Katılımcıların ifadelerinde anneye denk düşen tüm güçlü ve eksiksiz bir Büyük Başka ve muğlak bir baba figürü ile karşı karşıya oldukları görülmüştür. Bu dinamik içinde katılımcıların anoreksiya nervozayı ayırışmak için bir yol olarak kullanmaya çalıştıkları düşünülmüştür. Bulgular kısmında da belirtildiği üzere görüşmelerden elde edilen bilgiler ışığında, dört üst tema altında tartışılmıştır: (1) Her şeyi bilen ve her şeye sahip olan: Ayrışamayan anne, (2) Varlık ve yokluk arasında: Baba, (3) Bakışın gücü: İdeal miyim? (4) Olmak ya da olmamak: Olma Çabası.

Sonuç olarak, literatürle de uyumlu olarak bu çalışma göstermiştir ki anoreksiya nervoza bir yeme bozukluğundan fazlasıdır. Aile dinamiklerindeki bir sorunun yansımaları ve kendini ifade etmenin bir yoludur. Bununla birlikte, anoreksiya dışarıdan fark edilen tek ruh sağlığı problemidir. Bu bağlamda katılımcıların çoğunun da ifade ettiği gibi katılımcılar çoğunlukla aileleri tarafından tedaviye yönlendirilmiş olmaları önemlidir. Bu doğrultuda da anoreksik özne ile çalışırken

sadece hastaya odaklanmamak; aile dinamiklerini de göz önünde bulundurmak annenin ve babanın aile içinde konumlarını anlamak hayati derecede önemli olacaktır. Bununla birlikte, terapötik müdahalede de terapistin/psikanalist organik bir işlevi düzeltmekten diğer bir deyişle semptomu düşürmekten ziyade bilinçdışı dinlemek için orada olmalıdır. Zira, bu çalışma bulgularında da görüldüğü gibi eksiğe yer bırakmayan bir Büyük Başka karşısında anoreksik özne hiçbir şey talep etmemekte, tüm ihtiyaçlarını reddederek talebin yaratacağı eksiği fizyolojik olarak açlıkla yaratmaktadır. Bu noktada, çalışmalarda da kendini gösteren anoreksik öznenin karşı karşıya olduğu Büyük Başka ile tekrara düşmemek önemlidir. Literatürle de uyumlu olarak, katılımcılar tüm güçlü, her şeyi bilen, her şeye sahip, kontrolcü ve otoriter bir ebeveyn tarif etmişlerdir. Bu ebeveyn eksiğe ve arzuya yer bırakmayarak, bütün ihtiyaçlara karşılık vermeye çalışmaktadır. Klinik bir ortamda ise özellikle bu pozisyonunu almamak önemli olacaktır. Anoreksik özne dinlenmeli ve bilinçdışı ilişkilenebilirliği anlaşılabilirliğe çalışılmalıdır aksi takdirde, terapötik ortamda da analistin tüm güçlülüğünü kırmak ve analistte eksik yaratmak için anoreksik özne tedaviye cevap vermeyecektir.

4.6. Çalışmanın Güçlü Yönleri, Sınırlılıkları ve Gelecek Çalışmalar için Öneriler

Çalışmanın güçlü yönleri arasında, bildiğimiz kadarıyla, anoreksiya nervozayı Lacanyen psikanaliz bağlamında ele alan ilk nitel araştırma olması bulunmaktadır. Bu bağlamda Türk kültüründe yetişen katılımcılarla yapılmış olması ve örneklem grubunun hepsinin tanısının kısıtlayıcı olması çalışmanın bir diğer zenginliğidir.

Bu çalışma anoreksik öznenin baba ile kurduğu ilişkiyi ve babanın aile içindeki konumunu keşfetmeye çalışmıştır. Literatürde çok az sayıdaki çalışma anoreksiya nervozada babanın konumuna odaklanmıştır. Bu çalışmada ise baba, tüm güçlü annenin gölgesinde var olmaya çalışan bir figür olarak temsil edilmiştir. Baba katılımcılar için ne tam anlamıyla vardır ne de tam anlamıyla yoktur. Bu yüzden de anne ile çocuğu ayırıcı bir güç olarak işlev gösterememektedir. Bu araştırmada ortaya çıkan bu bulguların gelecek çalışmaları şekillendirmesi ve klinik

uygulamalara yol göstermesi umut edilmekle birlikte, gelecek çalışmalarda baba ile olan ilişkilene ve anoreksik öznenin kural ve yasa ile olan ilişkisine daha fazla odaklanması önerilmektedir.

Çalışmanın güçlü yönlerine ek olarak bir takım birtakım sınırlılıkları da bulunmaktadır. Tüm katılımcıların kadın olması, ergenlik döneminde tanı almış olmaları sayılabilir. İlerleyen zamanlarda yapılacak olan çalışmalarda, örneklem grubunun genişletilmesinin faydalı olacağı düşünülmektedir.

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