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Redemption Without Mutilation: Girls, Cutting, and the Proclamation of Salvation

Thought by medical professionals to be an attempt to assert control in an out-of-control life or to express complicated and confusing emotions, self-mutilation is a growing phenomenon among adolescent girls. Theological reflection on this trend reveals connections with the historical practice of penitential self-harm and a cultural context that places overwhelming demands on young women. Nevertheless, churches and schools have theological resources for hearing the messages that girls are literally writing on their own bodies and for helping them find healthier ways to grow into adulthood.

Adolescent girls are growing to adulthood in a culture that is confusing and fragmented. They are hearing messages about who they are supposed to be from a wide variety of sources and these messages are often conflicting. Some girls respond to this cacophony and their resulting sense of lack of control by resorting to self-mutilating behaviors.¹ In harming themselves, these young women are trying to find a way to manage their emotions; this raises questions for theologians about salvation – not only what salvation means for the young women who self-injure, but also what messages of salvation they need to hear from the church.

Adolescent Girls and Self-Mutilation

Adolescence for girls is a time of great potential and great vulnerability. As girls become adults, their brains, bodies, and ways of thinking are changing dramatically even while our culture is bombarding these girls with messages telling them how they are supposed to be in the world – as consumers, as women, as adults.² At the same time, many girls find themselves isolated from those who could best help them navigate this confusing time. Modern teenagers tend to spend the majority of their time either in the company of other teens (in school, in church youth groups, in social situations) or alone (either at home after school or alone in their room).³

¹ Until relatively recently, it was assumed that self-harming behaviors are more prevalent in white and middle- or upper-class populations. Subsequent research has shown that these are problematic behaviors in a wide range of communities including poor communities and communities of color. However, because white middle- and upper-class girls and women come to the attention of medical professions at a higher rate, it is their experiences that are reflected in the medical and psychological literature. While it is beyond the scope of this paper, further theological reflection (in addition to the needed community based studies) on the class and race issues involved in the prevalence, diagnosis, and treatment of these disorders is needed. In this paper, given the emphases of the research literature, the descriptions of adolescent girls' behaviors will tend to be descriptions of white and middle-class girls.

² David Elkind, *All Grown Up and No Place to Go: Teenagers in Crisis*, Rev. Ed. (Cambridge, MA: Perseus Books, 1998), 25. Elkind argues that, while physical changes are the most obvious, it is the changes in the ways they think that are the most challenging for teens (and the adults who work with them). See also, Robert Kegan, *In Over Our Heads: The Mental Demands of Modern Life* (Cambridge, MA: Harvard University Press, 1994), 24-29.

³ Chap Clark, *Hurt: Inside the World of Today's Teenagers* (Grand Rapids, MI: Baker Academic, 2004), 50. Clark notes that this isolation is due in part to the additional demands put on the adults in teens' lives (such as single parenting and dual-career families). Straus also notes that girls spend a significant part of their days alone: 20% of

Caught among competing demands from family, friends, church, and society, girls often feel pulled in many directions – to be both sexual and innocent, active and passive, good and bad, caring and self-interested. Girls display a variety of emotional reactions to these competing demands: anger, aggression, self-doubt, defiance, and withdrawn silence. And they tend to turn these emotions inward and present a public face to the world that belies their emotional turmoil.⁴

Some girls respond to these stressors by hurting themselves. Self-mutilation refers to the deliberate harming or alteration of the body without suicidal intent.⁵ Some studies suggest that 1.5% of all Americans have or are currently hurting themselves. Of these, 60-70% are female; 90% of self-injurers begin hurting themselves as teenagers.⁶ Self-harming behaviors often begin around the age of fourteen.⁷ In one study, the authors argue that there were four factors that contributed to self-mutilation among adolescent girls. The first two factors deal with the regulation of emotions: some girls injure themselves to avoid negative emotions; others seek to provoke an emotion.⁸ Girls who are motivated by these two factors are reflecting significant internal distress, especially depression. The second two factors have to do with stress surrounding interpersonal relationships: some girls self-injure as a negative reinforcement (to avoid punishment from others) while others self-injure to get attention from others.⁹ Interpersonal concerns are particularly important for girls and they are often dealing with stress related to their relationships.¹⁰

In addition to this correlation between self-mutilating behavior and depression and/or anxiety, there is also a significant overlap of self-mutilating behavior and eating disorders.¹¹ Approximately 25% of young women with an eating disorder also engage in some kind of self-injurious behavior and nearly 50% of self-mutilators have a history of disordered eating.¹² In both self-mutilation and eating disorders, the goal is rarely death; rather these are behaviors that

their waking hours, more than twice as much time as they spend socializing with friends. See Martha B. Straus, *Adolescent Girls in Crisis: Intervention and Hope* (New York: W. W. Norton, 2007), 7.

⁴ Straus, 11. Straus also reminds us that, while the majority of girls in our contemporary society experience these pressures, only a minority of girls engages in self-destructive behaviors or has on-going psychological issues. The vast majority of girls do successfully navigate the transition to adulthood.

⁵ Shana Ross and Nancy Heath, “A Study of the Frequency of Self-Mutilation in a Community Sample of Adolescents,” *Journal of Youth and Adolescence*, 31, no.1 (February 2002): 67. There are few hard numbers describing the prevalence of self-mutilation among adolescent girls; there are a variety of reasons for this uncertainty: 1) self-mutilation is a hidden behavior only recognized when it comes to the attention of medical professionals; 2) few broad community-based studies have been done to establish the prevalence of this behavior; 3) self-mutilation is often one of several diagnoses, often accompanying depression, anxiety, eating disorders, and/or suicidal behavior, making it harder to separate self-mutilation from other medical issues; 4) families often treat it as a passing phase that will pass on its own or as a bid for attention that would be reinforced by over-reaction. See also, T. Suzanne Eller, “Cutting Edge,” *Today’s Christian Woman*, 28, no. 1 (January/February 2006): 39.

⁶ Eller, 39.

⁷ Ross and Heath, 69. A similar survey of high school students reported that 39% had engaged in self-mutilating behaviors in the last year. See Straus, 59.

⁸ Lori M. Hilt, Christine B. Cha, and Susan Nolen-Hoeksema, “Nonsuicidal Self-Injury in Young Adolescent Girls: Moderators of the Distress-Function Relationship,” *Journal of Consulting and Clinical Psychology* 76, no. 1: 63.

⁹ Hilt, Cha, and Nolen-Hoeksema, 63.

¹⁰ Hilt, Cha, and Nolen-Hoeksema, 69.

¹¹ Eating disorders include a variety of behaviors such as extreme food restriction (anorexia nervosa), purging of food eaten (bulimia nervosa), cycles of restriction and bingeing, and excessive exercising. While these are separate, if related, disorders, for the purposes of this paper, they will be treated as a single cluster.

¹² Randy A. Sansone and John L. Levitt, “The Prevalence of Self-Harm Behavior among Those with Eating Disorders” in *Self-Harm Behavior and Eating Disorders: Dynamics, Assessment, and Treatment* ed. John L. Levitt, Randy A. Sansone, and Leigh Cohn (New York: Brunner-Routledge, 2004), 3-4.

help girls control aspects of their lives that they perceive as being out of control.¹³ Eating disorders and self-mutilation also share important phenomenological overlaps: both are more typical of females, onset is usually in adolescence, and both can often be interpreted as a dissatisfaction with one's body coupled with a sense of ineffectiveness in other areas of life. Both seem to be attempts to take control of the body, especially after the uncontrollable changes brought about by puberty.¹⁴

Given that these behaviors are more common among women and girls, feminist theorists root the behavior in a patriarchal society in which women, regardless of class, race, age, appearance, sexual orientation, or religious affiliation, are systematically marginalized and silenced. Beth Hartman McGilley suggests that patriarchal culture perpetuates an oppressive disregard for women's bodies and that patriarchy is the context in which women and girls behave as though they are under constant observation and judgment by others – judged and found wanting because of who they are and how they look.¹⁵ For McGilley, self-harming behaviors and eating disorders in girls are a misdirected but not illogical attempt to assert control and to communicate in a patriarchal culture that silences the voices of girls and dictates how women should act and look.

Self-Mutilation in Christian History

Christian history is replete with examples of holy people who have harmed themselves for religious reasons. Consider the following: “Blessed Clare of Rimini had herself bound to a pillar and whipped on Good Friday. Hedwig of Silesia scourged herself, and Blessed Charles of Blois wrapped knotted cords around his chest... Christina of Spoleto perforated her own foot with a nail.”¹⁶ And many more fasted themselves to the point of starvation, wore hair shirts, or whipped themselves. Simon the Stylite lived on a pillar for 37 years; Catherine of Siena fasted so severely that she likely died of starvation.¹⁷

Ariel Glucklich describes several ways that religious believers interpret self-inflicted harm. Individuals might harm themselves as punishment for sins; they might use it to cure an illness or to end suffering. They might understand their behavior as preparation to fight the enemy (such as Satan) or as spiritual training (for resisting sin). Some see self-harm as having magical or purifying effects. Others see self-harm as communal – pain experienced vicariously (experiencing the suffering of Christ) or sacrificially (so that others might be spared).¹⁸ Ultimately, Glucklich argues that there are two fundamental types of pain: disintegrative pain

¹³ Mervatt Nasser, “Dying to Live: Eating Disorders and Self-Harm Behavior in a Cultural Context” in *Self-Harm Behavior and Eating Disorders: Dynamics, Assessment, and Treatment* ed. John L. Levitt, Randy A. Sansone, and Leigh Cohn (New York: Brunner-Routledge, 2004), 24. Nasser quotes a young woman who describes her cutting this way: “While I was cutting, I felt more in control, whereas before I’d cut, I sort of felt like, Oh God, there is nothing I can control.”

¹⁴ Angela Favaro, Silvia Ferrara, and Paolo Santonastaso, “Impulsive and Compulsive Self-Injurious Behavior and Eating Disorders: An Epidemiological Study” in *Self-Harm Behavior and Eating Disorders: Dynamics, Assessment, and Treatment* ed. John L. Levitt, Randy A. Sansone, and Leigh Cohn (New York: Brunner-Routledge, 2004), 32.

¹⁵ Beth Hartman McGilley, “Feminist Perspectives on Self-Harm Behavior and Eating Disorders” in *Self-Harm Behavior and Eating Disorders: Dynamics, Assessment, and Treatment* ed. John L. Levitt, Randy A. Sansone, and Leigh Cohn (New York: Brunner-Routledge, 2004), 83.

¹⁶ Ariel Glucklich, *Sacred Pain: Hurting the Body for the Sake of the Soul* (New York: Oxford University Press, 2001), 79.

¹⁷ Caroline Walker Bynum, *Holy Feast and Holy Fast: The Religious Significance of Food to Medieval Women* (Berkeley, CA: University of California Press, 1987), 169.

¹⁸ Glucklich, 13.

and integrative pain. Disintegrative pain is the experience of pain as destructive; it is the experience of pain as punitive or as an enemy. Integrative pain is the experience of pain as something healing, productive, or transforming.¹⁹

Parallels between Glucklich's understandings of sacred pain and the factors motivating self-mutilation can be identified.²⁰ First, some girls self-mutilate in order to stop negative feelings or to provoke intense, if negative, feelings. Glucklich might describe this as integrative pain, perhaps as curative (curing the bad feelings) or preventative (to prevent negative emotions). Second, some girls self-mutilate to deal with stress; it can be a negative reinforcement or an attention-grabbing behavior. Glucklich might describe pain used as a negative reinforcement as disintegrative pain in a punitive model – to punish oneself before another can. An attention-getting motivation might also be interpreted as disintegrative in a communal model – aligning one's self-harm with the perceived needs and responses of the community.

Glucklich further argues that modern young women who self-mutilate describe their pain in similar ways to the medieval saints. He describes the case of a young woman named Jill who experienced very little pain when she cut herself; Jill also described “a feeling of somehow taking charge of her life with the help of the razor.”²¹ Glucklich also presents the experiences of St. Maria Maddalena de' Pazzi, a sixteenth century Florentine Carmelite sister, who practiced an extreme form of self-harm, including beating herself with sticks and thorns, wearing a girdle studded with nails, and dripping hot wax on herself in an attempt to transform herself into an instrument of God. Glucklich makes the point that, whereas St. Maria Maddalena's self-mutilating behavior was understood in religious terms, the same behavior in Jill is seen as an illness.²² This shift from a religious to a medical understanding of self-harm means that medical professionals do not always consider the ways that self-mutilating behavior are interpreted by religious believers. This also means that doctors may not make connections between a young woman's faith background and her understanding of her own self-harming behavior.

Eating Disorders, Self-Mutilation, and Questions of Salvation

Just as extreme fasting and self-inflicted pain were often linked in the religious practices of our saints, they continue to function theologically in similar ways today. Given the significant overlap of eating disorders and self-mutilation, it makes sense to look to those theologians who explore the theological questions raised by eating disorders. Michelle Mary Lelwica engages the question of soteriology through the lens of eating disorders²³ and her insights can speak to the soteriological questions raised by self-mutilation.

Lelwica argues that contemporary culture is sending girls and women messages that tell them that, in order to be saved, they have to be thin. This message of thinness, proclaimed through the media, but also found in the fitness culture, the medical community, and the diet industry, tells girls that they are not good enough if they are not thin. She goes on to suggest that the reason that this thinness salvation myth finds traction among so many girls and women is that it echoes the misogynistic and anti-body tradition of Western culture. Girls and women

¹⁹ Glucklich, 34.

²⁰ While not all young women interpret their own self-injurious behavior in religious terms, there are significant similarities between the ways that the Christian tradition has interpreted self-harm and the ways that some girls speak about their self-harming behavior.

²¹ Glucklich, 80.

²² Glucklich, 84. See also, Bynum, 194-5.

²³ Michelle Mary Lelwica, *Starving for Salvation: The Spiritual Dimensions of Eating Problems among American Girls and Women* (New York: Oxford University Press, 1999).

experience this as a message that, because they are female, they are bodily and therefore imperfect. In addition, the Christian tradition has often told women that bodily cravings are sinful. This is taken up by the contemporary culture when girls and women are told to “control your appetite, be thin, and you will be beautiful/loved/successful/saved.”²⁴

Lelwica traces some of the ways that medieval female fasting practices are reproduced in the contemporary situation of women and girls with eating disorders. Caroline Walker Bynum argues that medieval women saw fasting as redemptive and sacrificial, whereas today’s young women are starving themselves for narrower and less lofty reasons.²⁵ Lelwica argues, however, that situating fasting within a theology of women’s suffering as salvific is problematic because it is oppressive of women. Further, contemporary girls and women who engage in extreme fasting are not simply engaging in narcissistic behavior. “If we listen carefully, we will hear that contemporary girls’ and women’s accounts of their struggles with food and body are multifaceted, diverse, and permeated with symbolic and ritual – one might argue, religious – significance.”²⁶ Particularly noteworthy are the ways in which rituals of weight-loss take on religious overtones.²⁷

While Lelwica’s discussion centers around the symbolic power of media portrayals of thin women and the salvific promise of thinness, her approach speaks to questions of salvation raised by self-mutilating behavior. First, many girls describe self-mutilating behavior as an attempt to assert control – often over the one thing, their bodies, they can control.²⁸ In a patriarchal culture, where women are powerless, the search for control through one’s own body is logical. However, the inadequacy of self-mutilating behaviors to achieve control points to the fact that these behaviors do not address the actual cause of powerlessness in girls’ lives.²⁹ Similarly, many young women who self-mutilate describe their cutting behavior as a search for a voice or a way to express emotions that they cannot otherwise express.³⁰ The self-harming behavior is not caused by the sense of a lack of voice and agency – lacking these does not necessitate finding one’s voice through self-harm; rather, in a patriarchal culture where they are denied these, some girls find that self-harming is the only way to assert their voice and agency.³¹

²⁴ Lelwica, 8. This dualism gets played out, as well, in rhetoric about good and evil women: “‘Good women’ (nuns, martyrs, virgins, and saints) transcend their natural inferiority as females by eschewing bodily pleasures. When ‘evil women,’ by contrast, give into those pleasures, they are merely doing what is ‘natural’ for them, given their supposedly inferior nature as women” (85).

²⁵ See Lelwica, 27-29. See Bynum, 299-300.

²⁶ Lelwica, 29.

²⁷ Whether it is counting calories, logging hours on the treadmill, or purging the body of unwanted food, girls and women with eating disorders structure their lives around these weight-loss rituals and, in doing so, these rituals become sources of meaning and control in their lives.

²⁸ Paradoxically, in both eating disorders and self-harming behaviors, it is easy for these young women to move from a behavior that seeks control and over which they do have control (such as dieting or cutting) to a point where they lose control over the behavior and can no longer manage their lives without it.

²⁹ See Lelwica, 108-112. In this section, she discusses how language about control is understood and gets played out in young women with eating disorders.

³⁰ Straus describes this as “‘writing’ messages to us on their bodies” (59).

³¹ See Lelwica, 111-112, in particular for her discussion of agency and voice as related to the powerlessness experienced by women and girls with eating disorders. “To understand the spiritual dimensions of anorexia and bulimia, we must ask not simply ‘Why do anorexic-bulimic girls and women want to control their bodies?’ but also ‘How has the language of control become the most viable idiom for exercising agency and resisting domination?’ This question suggests that neither the desire for control nor the sense of helplessness to which it responds is the *cause* of eating problems. These feelings are best seen as the *effect* of living in a culture that is guided by a logic of domination: a way of thinking-feeling-being that reduces power to control” (112).

As a theological question, the search for control and voice point to the historical silencing of women and girls in the church and the various messages that girls and women are sent about how they fit into the economy of salvation. When women are told that the only way to achieve salvation is through transcending the fleshy concerns of the body – to become spiritual – then control over one’s own body in the attempt to achieve this salvation makes sense. Further, in finding voice and agency in self-harming behaviors, these girls are also offering a profound critique of a church that tells them that their bodies are undesirable and that salvation comes through control over all aspects of one’s life.

A second theological concern that is raised by self-mutilation among young women is their sense of escapism and an otherworldly search for salvation. Girls who self-mutilate often experience a sense of release of emotions and a sense of freedom and inner-peace.³² These descriptions suggest that girls who self-injure are searching for a sense of salvation that is bound up with this otherworldly or disconnected experience. However, self-mutilation goes beyond this escapism; rather, in a world where transcending this reality is a spiritual goal, then self-harming behaviors that provoke this feeling make sense to these young women. Further, the use of self-mutilating behaviors to manage emotions and to seek salvation means that, for these girls, they are alone and isolated from their families and communities.³³ Because self-mutilation is usually hidden, girls are engaging in private rituals and a solitary struggle for salvation. Their search for salvation through an otherworldly experience of freedom or release becomes an attempt to achieve salvation through suffering.³⁴ Locked into a cycle where self-injury seems to be the only way to achieve salvation, girls find that they have to continue the self-injury in order to maintain that salvation. Two theological questions are raised by this escapism and otherworldliness. First, a salvation that is experienced primarily as detached from this world serves to reinforce the spirit/body dualism that feminist theologians, among others, find problematic. Second, the search for an otherworldly salvation that isolates young women becomes a rejection of the role of the community in the experience of salvation and perpetuates the sense of being alone with which many girls are struggling.

Proclaiming Salvation to Girls Who Self-Harm

In her discussion of eating disorders and salvation, Lelwica argues that, in addition to investigating the individual causes of eating disorders, we need to interrogate the symbol and ritual systems that make disordered eating a useful strategy as well as the anti-body and anti-woman messages of salvation of our religious traditions. In order to do this, Lelwica advocates a re-examination of salvation – What does it mean to be well and healthy?³⁵ In considering the proclamation of salvation to young women who self-mutilate, we must ask a very similar question – What does it mean to be healthy and whole? In the unmaking of self-harming behaviors in young women, theologians and religious educators must provide girls with the tools to break the connection between self-harm and salvation.

³² See Lelwica, 119-121, for descriptions of how food and food-denial become escapism and create an otherworldly shelter for women and girls. Paradoxically, by creating a shelter for themselves through their self-harming behavior, girls can find themselves in a prison. Just as the search for control easily becomes a loss of control over this behavior, so does the search for a safe shelter become, in fact, a self-destructive and crippling prison. Because they lack other skills for managing what feels so out of control, girls continue to fall back on self-harming behaviors since they seem to work for them.

³³ See Lelwica, 124, for a discussion of the isolating tendencies of eating disorders.

³⁴ See Lelwica, 123, for a discussion of the elevation of suffering in the salvation myth of thinness.

³⁵ Lelwica, 127.

A first important part of helping young women to understand salvation without feeling the need to self-injure is to help these young women come to a critical consciousness about the effects of a patriarchal society and church on their understandings of themselves as women and as embodied. Young women can see that the messages of being the “good girl” who does not show negative emotions, who does not act on her emerging sexual feelings, and who is passive and selfless are, in fact, destructive messages that serve to reinforce the oppression of women. In addition, critical awareness of the patriarchal roots of girls’ and women’s experiences of lack of voice and agency can help them to understand not only why they feel this lack of voice, but also how self-harming behaviors are not adequate ways for them to find their voice and sense of agency. Taking this critical consciousness to the messages of salvation that are preached by a patriarchal church can help young women highlight the oppressive aspects of that message of salvation. When suffering and pain are held up as salvific, when salvation means becoming more “spiritual” and less “body,” when salvation is an individual endeavor, and when women and men who tortured themselves to achieve salvation are idolized as saints, girls who self-mutilate may be more likely to see this behavior as useful or even necessary for achieving salvation. However, critical awareness of these destructive tendencies can help girls and women see them as unhelpful distortions of the Gospel message and can help them to reject misogynistic and oppressive approaches to salvation. Developing critical consciousness can empower girls to find new ways of creating meaning in their lives, to develop a new vision for what salvation means, and to learn new ways of coping with the emotional stresses they must still deal with.

A second approach to addressing questions of salvation with young women who injure themselves is to help them understand salvation as a process rather than as a state of perfection. We live in a society and a church that ties salvation to conversion and then identifies conversion as a once-and-for-all event – we are either saved or not saved. However, when salvation is understood more as a process of continual movement towards the goal of wellness, wholeness, and love, this dualistic approach to conversion/salvation is contested. Understanding salvation as a process can be challenging for girls who self-injure; it means that girls who self-harm will have to let go of their belief that their self-harming behaviors are *the* answer to managing their inner emotional turmoil. Instead, salvation can come to mean engaging in a multitude of more healthy practices that draw girls into community with others rather than shutting them into their own isolated prisons.

As adults who work with young women in our churches and schools learn to recognize and adequately respond to these young women who self-mutilate, we must also learn new and more life-giving ways of preaching a message of salvation to these young women. Churches and other faith-based institutions have much to deal with as they help adolescents navigate the tricky waters of growing into healthy adulthood. But these adults have the opportunity to preach a message of salvation that rejects the need for girls to, as Mary Pipher puts it, “carve themselves into culturally acceptable pieces.”³⁶ Girls who are in such emotional distress that they resort to harming themselves as a way to control and relieve their stress should be able to turn to the adults in the church for assurance and grounding in a tradition that offers redemption without mutilation.

³⁶ Mary Pipher, *Reviving Ophelia: Saving the Selves of Adolescent Girls* (New York: Putnam, 1994), 157.

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