

# Time Bomb: Youth, Health, and Lifestyle in the Aftermath of the Childhood Obesity “Epidemic”

Scott Stoneman  
Mount St Vincent University

To set the problem in these terms is to imagine a different sense in which vital phenomena, in their multiplicity and indeterminacy, are political.... At stake for policy in this hypothesis is not only the distribution of scarce medical resources, but the distribution of claims to rationality in speaking on matters of health.

*Monica Greco*

*“The Politics of Indeterminacy and the Right to Health”*

## **O**besity’s Veracity and the Politics of Knowledge

During what are often called the golden and silver ages of comic book production—the period spanning the 1940s, 1950s, and 1960s in which characters like Superman, Batman, and Captain America became icons of graphic heroism—a small publisher called the American Comics Group invented a character named Herbie Popnecker whose superhero alter ego, the “Fat Fury,” could not have more flagrantly perverted the notion of superheroes as the charismatic saviours of nation and community. Investing the character with an arbitrary mélange of supernatural abilities, including the ability to fly, speak with animals, and render himself invisible, Ogden Whitney draws the Fat Fury as a rotund, somnolent boy

SCOTT STONEMAN is a teacher of cultural studies and English at Saint Vincent University and a graduate of the doctoral program in English and Cultural Studies at McMaster. His primary research works through the convergence of youth, population, and consumer culture in representations of the contemporary obesity crisis, but other essays on topics ranging from food sovereignty to fat stigma to finance and “found footage” horror films have appeared in journals like *TOPIA* and the *Review of Education, Pedagogy, and Cultural Studies*.

who is widely stigmatized for his body size. The first pages of the issue of *Forbidden Worlds* where writer Richard Hughes created Herbie sets the superhero up as the antithesis of national vigour, hegemonic masculinity, and capitalist progress. The opening scenes represent a PTA meeting in which a figure of authority—a comptroller, principal, or public lecturer—is explaining that boys in particular are the “leaders of tomorrow” (O’Shea 17). What we need, the pedagogue exclaims, are “Real boys ... boys of action, boys who are always out doing things!” Herbie’s father takes the diatribe to heart and laments after the meeting to his wife that, while there are so many “men who make America great,” all they have is their indolent son Herbie (O’Shea 19).

Throughout its run, the *Fat Fury* comics revolved around bizarre scenarios in which the eponymous hero takes on enemies terrestrial, extraterrestrial, astral, and geopolitical using the unlimited genetic powers he augments by eating magical lollipops derived from “the Unknown.” Beneath layers of zany comedy and absurdist irony, however, Hughes’s comic also gestured to the inescapable banality of fat phobia that was renewed as part of the cold war American militarism which sought to celebrate the fictive unity of a patriarchal state. This is nowhere more evident than in the inaugural issue: Herbie’s father leaves the PTA meeting despondent but arrives home angry and ashamed. He surveys the neighborhood and, seeing svelte boys in active play, turns to confront his son. Incensed with seeing him sitting sedentary on a chair, staring vacantly into the middle distance (today one might worry that Herbie is preoccupied by Facebook or a gaming console), the father chides our hero for being a “little fat nothing” and orders him outdoors, where, unsurprisingly, he is berated and banished by the boys whose normative masculinity inspired loathing and longing in his father.

No doubt Herbie was hiding in his home from precisely this sort of caustic weight prejudice, but his father, impelled by the idea that masculinity is made by risking the body in performance and that real boys are ones whose embodiment mimics the gusto of entrepreneurs, innovators, and athletes like the legendary ballplayer “Stan the Man” Musial, cannot control his temper at his obese son’s apparent inability to “do anything.” What is the cause of the father’s indignation? And, more importantly, what does Herbie represent, and why is he outcast? Herbie’s transgression is self-abnegation: rather than performing the kinds of exercise made redundant by his unsurpassed superpowers, the boy remains a “little fat nothing” in his father’s eyes, because he seeks refuge from the pervasive jingoistic valorisation of self-discipline as a quality written on the male body. The

deeply gendered discourse of civic responsibility Herbie's family is forced to face is one in which the vitality of a country is wedded conceptually to the fitness and physical capacity of its citizens.

The Fat Fury is, in other words, a figure that anticipates the contemporary crescendo of state-focused anxieties regarding the fat child in public discourse. In this sense, Herbie helps identify the historical emergence of fatness in youth as a cultural and political problem. Indeed, long before fat children's bodies signified an epidemic of decadence and disease, mainstream culture subjected them to a battery of beratement. In the current moment, the "use of health concerns to convey disapproval and censure" offers a medical foundation for singling out the fat bodies of young people (Weinstock and Krehbiel 102). As Michael Gard and Jan Wright put it, "it is difficult to envisage the fat child as anything other than 'unhealthy' and/or morally defunct in a climate where fear of fat has reached such epidemic proportions" (86). In this context, the relationship of children to their bodies is increasingly shaped through the conflation of fat with a growing anomie, with a collapse of family values in a time of hyper-consumption, with a contagious lack of conscience or individual responsibility, and perhaps most of all with the "epidemic of inactivity" that is tied to the use of new technologies of convenience (Burgard 42).

The Canadian government's recently renewed series of "ParticipACTION" PSAs, for example, make the point that children's habits have become perversely obesogenic. As a visual allegory of obesity's chronic health effects, the PSAs represent children playing bingo, driving motorized wheelchairs, discussing pacemakers, bypass surgery, heart attacks, and colonoscopies. By caricaturing Canadian children (ten years or younger) as indistinguishable from octogenarians, prematurely immobilized by age and illness, the campaign adopts a pedagogy of hyperbole to emphasize how obesity has corrupted childhood social relations. The implication of the ads is that children move between conditions of confinement and addiction that forfeit their bodies to chronic illness: the home with its virtual amusements, the school and the mall with their endless indulgences. Private comfort or uninterrupted shelter excludes the out of doors and displaces play from childhood altogether, leaving us with an idle class of youth whose allergy to activity leaves them unfit to reproduce the social order.

In this intervention, I will be centrally concerned with how the contemporary hegemony of obesity alarmism inscribes anti-fat ideology on young bodies, from infancy to adolescence. It will be necessary to propose alternative ways of reading the cultural politics of the "childhood obesity epidemic" as an object of medical analysis that, in particular, politicizes

lifestyles in ways that condense pervasive anxieties about life under late capitalism into a single crisis. I will contend that the compelling visual force of the obese child, backed up by reams of statistical data, creates an entrenched narrative of social decay that impedes our ability to think through the connections between human health, the built environment, manufactured risks, and social responsibility more broadly.

Despite the centrality of medicine in determining the paradigm for discourse about fat subjects today, in this essay I am not single-mindedly arguing in opposition to the capacity or responsibility of biomedicine to examine, assess, or provide solutions to the epidemic. Rather, recognizing that the contexts in which obesity discourse occurs are dispersed and varied, I claim that in order to reread the obesity epidemic as the product of the cultural circulation of medical constructs, one must begin to think of childhood obesity, in Paula Treichler's terms, as an "epidemic of signification" (160). With this concept, Treichler describes a "dense citation network" or circuit of reference and pop cultural translation that overdetermines the conceptual conditions under which an epidemic can be understood (160). She makes the point that crisis communication transmits medical information in "a form of short-hand in which facts, once admitted, need no longer retain the history of their fabrication" (86). More importantly, she recognizes popular culture as a fulcrum of knowledge production, pedagogy, and embodiment upon which determinations are made about whether or not health is a matter of social justice or social control, equity or economics, collective or individual well-being. Her method is principally cultural, in that her account of AIDS insists that biomedical knowledge during the (ongoing) crisis of AIDS is reliant upon "prior social constructions" and "semantic oppositions" such as "self and not-self," "normal and abnormal" for its intelligibility (Treichler 15, 35). The most useful of Treichler's many insights for this study is that entrenched frames for apprehending body difference (size, gender, sexual orientation, race, and so on) have as much of a determinate impact on mapping out a health crisis as controlled empirical studies or the data-focused analysis of population trends. The reason that Treichler's work offers the condition of possibility for this study is that it emphasizes the cultural and discursive dimensions of health.

Wherever and whenever threats to private and population health emerge, popular culture is flooded with concerns over which bodies are at risk and where, what makes them at risk, and how one is meant to join in the fight against the foreign agent that has occasioned the emergency. The regularizing effect of the representation of health is a particularly pressing

issue today, when the spread of medical models through mass culture takes a more global and multifarious form than it has in the past. How, then, are health crises reified? In what sense does a health crisis presuppose a particular understanding of what it means to be well? Acknowledging that the contexts in which obesity discourse appears or occurs vary, the aim of this essay is to examine the symptoms of this “epidemic of signification” in contemporary popular culture. My critical frame of reference is a broad one that assumes both the ideological impact of popular culture on institutional and public spheres of activity as well as the impact of knowledge from institutional spheres on the representation of health and illness in popular culture. When I use the term “popular culture,” I do not mean to limit my purview to the mass media proliferation of narratives, statements, and images that construct the epidemic. Because, as Stuart Hall teaches us in “Notes on Deconstructing ‘the Popular;’” no community exists apart from “the distribution of cultural power and the relations of cultural force” that shape knowledge through mass communication (447). In regarding childhood obesity pre-eminently as a social construction, then, my intention is to underscore the particular currency childhood obesity has in contemporary culture as an indicator of “altered patterns of life” (Lofink and Ulijaszek 338) and to ask how truth claims regarding childhood obesity have shaped the meaning of this “menace.”

In August 2007, in a sardonic attempt to expose the peremptory nature of obesity thinking, the news satire website the Onion posted a video in which its actors stage a roundtable concerning a related rhetorical question, “Are we doing enough to shame America’s obese children?” Each of the four speakers responds with an insistent “No,” stating with mock censure that, by failing to foster an environment in which shame is proportional to weight and personal health is a matter of vigilant self-appraisal, parents are leaving their children at risk of becoming altogether too comfortable with their flabby frames. One fictional roundtable member implies that whatever ethical reservations she might have about strategically instilling shame in “America’s obese children” are nullified by her sense that eliminating fat is a personal health necessity. In fact, her only reservations about employing shame to prevent obesity are pragmatic and instrumentalist: she explains that she has tried the technique on her own family without success. Another of the roundtable’s characters, Robert Haige, a “Professor of Media & Politics, American University,” responds with phony evidence of humiliation’s helpful effects: “Here are some statistics,” he says with eyes cast down gravely at a prop piece of paper, “a civil regimen of 8–10 insults per day can help a child lose 3 pounds.” We should take note of the feigned

Childhood  
obesity has  
quickly become  
an emblem of  
the unexpected  
risks of  
consumer  
societies, a  
somatic  
illustration of  
Western  
capitalism's  
unanticipated  
spatial effects,  
and a problem  
of  
representation  
itself.

tact of Haige's phrase—"civil regimen"—and the way his interjection satirizes the transposition of expert knowledge and empirical research into a twenty-four-hour news cycle dominated by the allergy-to-analysis typical of CNN and Fox News. As a result of this unending news blitz, digestible pedagogies of deportment and obesity-fighting prescriptions for public hygiene are offered as easy ways of moralizing about what needs to be done to "end the epidemic."

What is pointed and valuable about the Onion's cheeky intervention is that it captures the tendency of the "epidemic" to inspire discussions about responsibility that go beyond the matter at hand—fat—and ask a host of questions about the economic and social nexus that manufactures fat. Perhaps a problem for policy and population initially, childhood obesity has quickly become an emblem of the unexpected risks of consumer societies, a somatic illustration of Western capitalism's unanticipated spatial effects, and a problem of representation itself.

The site's authors insinuate that what ossifies speculation on the social meaning of obesity is the underlying suspicion that fatness, left to foment at the national stage, is like a time bomb, portending a disaster that will be more damaging for its delayed effects on the overall health of society as a whole. When used rhetorically to convey the demographic dilemma posed by a purported childhood obesity epidemic, the metaphor of the ticking time bomb represents fat children's bodies as a bane for public health because of the extra damage experts speculate will be caused—at a structural level, and in the future—if measures are not taken to defuse the situation in the present. Bethan Evans has argued that this rhetoric is important for the ways in which it coincides with the model of conceiving time that is now characteristic of American militarization after 11 September 2001: the military-industrial complex authorizes itself to use pre-emptive security measures in order to stave off an unforeseeable destruction to come, and for Evans hegemonic pre-emption operates metonymically as the *modus operandi* of all political decision-making. But rather than taking up the recurrence of the time bomb in terms of the ways it mirrors the militaristic logic of the war on obesity, for my purposes the rhetorical symbol of the time bomb is significant for its relationship to obesity's discursive effects. The use of the trope in, for example, an Associated Press report on the decline in UK children's average physical activity does not simply convey information, it also seeks to inspire a fear of fatness.

The time bomb operates to reproduce the obesity epidemic narrative in much the same way that the action/thriller television genre employs it: as a means of injecting tension into a usually rather banal story in order

to produce rapt attention in an otherwise media-inundated audience. And its diffuse usage is not limited to the selling of news, either. In national health studies and forecasting research, the time bomb metaphor recurs to reinforce the association between obesity, consumer trends, and looming disaster.<sup>1</sup> This, because weight gain has now been provisionally associated, in innumerable scientific and news articles, to a raft of medical conditions such as heart disease, type 2 diabetes, endometrial, breast, and colon cancers, hypertension, dyslipidemia, stroke, liver and gallbladder disease, sleep apnea, respiratory problems, osteoarthritis, and infertility (among others). In the majority of countries that collect comparative data, “rates of obesity” have reportedly been rising dramatically over the last twenty years (Lofink and Ulijaszek 338). In the United States, cases of “severe” or “morbid obesity” have, by some accounts, quadrupled since 1988. At the present moment, roughly 65 percent of adults are considered (according to the standards for establishing normal body size instated by the medical “Body Mass Index” or “BMI”) to be overweight, while around 30 percent are identified as obese (Kersh and Morone 842).

The problem, reportedly, is especially acute with regard to children: young people have reportedly experienced a tripling of the rate of obesity in mainly the populations of the Global North (Lofink and Ulijaszek 338). These statistics compel the question: if it is possible to coordinate a campaign, a project, or even a “war,”<sup>2</sup> that corrects the local habits and structural conditions that produce a general “crisis of fat deposition” (Marvin and Medd 314) on the bodies of younger and younger children, then should all germane institutional power be mobilized to do so? If the “obesity epidemic” is, in other words, a genuine and growing threat to the overall well-being of populations, is it not only irresponsible, but in a certain sense unthinkable, to dispute the need for intervention?

The obsession with obesity which marks our current moment is intensifying. And yet, the medical establishment admits that it is in a state of

1 In “The Size and Risks of the International Epidemic of Child Obesity,” for example, policy analyst Tim Lobstein compares childhood obesity to a “massive tsunami,” a “time bomb” in order to rhetorically punch up his claim that the persistence of “excess body weight” from childhood to adulthood in Europe, North America, and Australia especially, conflicts with a child’s “natural growth” (107).

2 For an exhaustive account of how the war on obesity has run parallel semantically to the war on terror (following the temporal logic of “preemption”) see Bethan Evans, “Anticipating Fatness: Childhood, Affect, and the Pre-emptive ‘War on Obesity.’” *Transactions of the Institute of British Geographers*, vol. 35, 21–38, 2010.

crisis over how to measure and remodel the impact of the social on the size and tissue of young bodies (Boon and Clydesdale). Approaching childhood obesity as an epidemic of signification in this context opens up the possibility of reassessing assumptions that corpulent youth are threats to themselves and to idealized notions of national vitality, capitalist progress, and self-actualization. Provisionally and improvisationally thinking the etiologies of childhood obesity in terms of rhetoric and signification may also accomplish the unthinkable: end the epidemic. Or end it, at least, in the fashion that Eric Oliver suggests the end should arrive:

Despite the plethora of apocalyptic warnings, there is no clear evidence that, for most Americans, their weight is putting them at any health risk. Nor is obesity an intractable public health problem. Obesity and the obesity epidemic are nothing more than medical constructs. In truth, we could end the obesity epidemic right now if we desired—all we would need to do is to redefine obesity according to the real criterion of a disease. If we simply classified obesity at a level where body fat is incontrovertibly pathological, only a fraction of Americans would qualify and this “epidemic” would vanish. (182)

Conceptualizing an “end” to the “obesity epidemic” begins by recognizing that anti-obesity ideology has triggered a moral panic and mortal fear of fatness without ever needing to confront the question raised by obesity skepticism: is fat something which, in a real sense, prevents life and the body from flourishing? There is a need for a politically engaged cultural studies critique that addresses the effects of childhood obesity discourse in terms of knowledge production. This critique begins with the meaning of the purposefully alarmist “time bomb” image, which generates anxiety about the health impact of fatness in order to render debates over whether or not health is a question of social justice or of social control, collective or individual well-being, public or private wealth, conspicuously moot.

If the pathologization of obesity since the turn of the millennium has made weight and weight loss more of an issue for governing the vitality of whole populations, it has nonetheless renewed normative anxieties about the perceived disappearance of constraints on body shape, eating, activity, and comportment in general. Indeed, after the emergence over the last thirty years of the statistical anomaly of an “obesity epidemic,” on average people’s bodies are now returning to “normal” (or at least not getting any bigger) (see Gard 2011). And, in spite of new evidence that population obesity is more likely the consequence of pervasive industrial toxins than

the product of foundering self-discipline (Guthman), anti-obesity counter-measures continue to be concocted in the language of regulating lifestyle and everyday life as a measure of mitigating the economic and human health burden of obesity. Knowledge of the epidemic incites fantasies of the body's perfectibility under late capitalism.

The epistemic tenacity of the “war on obesity” is an effect of obesity's singular embodiment of “a familiar story about Western decadence and decline ... which pre-dates by centuries the relatively recent spike in overweight and obesity statistics” (Gard and Wright 2). Political rhetoric imagines obesity to be necessitated by the spread of an ethos of blind consumption throughout the social. In a 2006 speech laden with the neo-liberal rhetoric of “empowering individuals” to take responsibility for their health, former UK Prime Minister Tony Blair said that rather than being an epidemic in the strictly biological sense, obesity represents the costly outcome of “millions of individual decisions, at millions of points in time” (Blair, quoted in Rawlins 136). Blair's framing of the problem is exemplary in the sense that, like many cases of pathologizing fat bodies, he describes the “crisis” of obesity in individualizing terms as the long-term impact of a population habituated to fattening behaviours. The etymological root of “crisis” implies both the turning point of a disease, the moment at which a disease begins to destroy bodies, as well as a crisis of decision.

The global outbreak of fat, from the perspective of people like Blair who invoke the notion of a healthy free will, has occurred for “no good reason,” in Kathleen LeBesco's words, “other than a lack of control” (LeBesco 29). Eve Sedgwick taught us that “medicalized discourse both lay and clinical” has come to attribute addiction and addictiveness to a seemingly limitless array of everyday acts (132). Following Sedgwick, I argue that the locus of childhood obesity is not the obese body itself, nor principally the substance, food, or the insufficient expenditure of energy presumed in medical literature to make it bulkier but, rather, the “overarching abstraction that governs the narrative relations between them” (131). The governing abstraction in this case is a “healthy free will. The ability to, let us say, choose (freely) health” (Sedgwick 132), but, in the context of the obesity “outbreak” narrative, this will is presumed to be compromised by Western mass culture's construction of self-obsessed, overindulgent consumer citizens.

Marilyn Wann is right to stress that, in this context, both the subjects and objects of obesity epidemic discourse—the visibly fit and the visibly fat respectively—“absorb anti-fat beliefs, assumptions, and stereotypes, and also inevitably come to occupy a position in relation to power arrange-

Political  
rhetoric  
imagines  
obesity to be  
necessitated by  
the spread of an  
ethos of blind  
consumption  
throughout the  
social.

ments that are based on weight” (xi). Is the deployment of an “obesity epidemic” primarily about concern for the health of our bodies, or even about the strength, stability, and sustainability of national economies in a time of unevenly globalized austerity? What if we found, upon closer examination, that the public is haunted by the horror of corpulence because of something other than an altruistic concern with the well-being of other citizens? Because of a capitalistic interest in removing all encumbrances to financial growth, and because fat citizens perform iterations of gendered body size disconcertingly incongruous with historically specific and contingent fantasies of ideal embodiment, obesity discourse increasingly equates the fat child with the figure of a squandered future.

The assumption that the child as a subject lacks the capacity for self-control heavily informs this narrative of degeneration. Children are vulnerable to the fattening effects of the built environment because of their “diminished autonomy,” as Clare Herrick puts it (98); for this reason, she says, “childhood obesity raises much more potent ethical and moral questions when compared to that among adults” (98). Here she is rewriting the concept of diminished autonomy as it occurs in public health discussions for the purpose of applying notions of responsibility and risk to the obesity issue. While autonomy in medical care and health politics is typically synonymous with the ability to provide informed consent for various types of treatment, autonomy in the case of obesity incorporates a wider array of social phenomena: personal autonomy is imagined to be in conflict with the controlling interference of consumer culture. While diminished autonomy in medicine generally denotes an inability to grasp the probabilities of success or failure in the case of a given procedure, by contrast a person of diminished autonomy is, in obesity rhetoric, anyone vulnerable to the everyday constraints on behaviour (pre)supposed to be obesogenic.

A number of parents and consumer advocacy groups were outraged when Enfagrow, in an open effort to stimulate infants to consume more formula, added a chocolate-flavoured option to its product line. The outcry that occurred as a result of what was seen as a clear corporate strategy of producing desire, even addiction, in the very young through the manipulation of taste was largely based on the fear that this “baby milkshake” would exacerbate the “epidemic of obesity in six month olds” in the U.S. (Lustig). Because of the power of obesity discourse to render the product anathema to child health, Enfagrow was quickly forced to discontinue its baby milkshake formula (although they continue to manufacture formula with comparable sugar contents).

What this seemingly isolated struggle demonstrates is that obesity in children is defined by a struggle over where the power to determine what children consume should be located. Part of the reason chocolate formula (which is only one among manifold odd and unnecessary food products marketed to youth) produced the backlash it did is that it was seen to exploit the inability of children to discern between fulfilling foods and non-nutritive ones, between lasting nourishment and fleeting gratification. But perhaps more to the point, it was a product viewed with scorn because it was seen to exploit parents or, rather, the relations of cultural force that parents face in limiting their children's consumption of sweetened foods.

Obesity discourse posits youth as more vulnerable than most, because they have not yet fully achieved the critical autonomy we, somewhat idealistically, believe ourselves (as self-reflective and self-regulating adults) to possess: the ability to exert control over the self and one's health by regulating what we eat and how active we are. The result of the exploitation of the child's diminished autonomy, according to Megan Purcell, is that fat poses a more serious threat to the child's very political subjectivity. Purcell argues that, in order to thrive socially, the child's body must be protected from "chronic diseases" like obesity, which "limit the possibilities for children to actively engage with their communities" and with what she somewhat anachronistically calls the "national community" (5). From Purcell's perspective, the child's development into an active, self-possessed citizen is put at risk by obesity, given that growing up obese is an increasingly stigmatized subject position. Abandoned in Purcell's critique is a thoroughgoing examination of how structural change and environmental transition have been crucial in the genesis of this so-called epidemic and how a recognition of the troubling ways that this approach to politicizing fat prejudice restores rather than tests assumptions that fat should be stigmatized. The consequences of representing consumption habits, and by extension the civil self-management of one's lifestyle, as a test of self-worth are considerable because, for youth, the conflation of healthy size with self-control subtly instates an image of the normative body that spontaneously excludes fat bodies.

Rather than delineating between medical empiricism and semiotic analysis in this paper, I take issue with the medicalization of everyday life that has occurred in response to this peculiar lifestyle epidemic based on the following set of questions. To what degree does the pathologization of fat children's bodies according to the medical equation of fat with disorder militate against a compassionate and nuanced understanding of the obesity problem? What alternative discourses must exist to enable us to

In a diverse  
array of  
professional and  
political  
registers, obesity  
has sparked a  
debate over the  
central  
problem of how  
consumption  
undermines or  
attenuates  
critical agency.

question the inverse relationship between a body's weight and its capacity to feel well, exert agency, and fashion oneself as a serious subject? How do particular disciplinary investments interpolate scholars and intellectuals as political actors, in the case of obesity? The truth claims originating in population study not only inform government policy, health promotion initiatives, web resources, school practices, and an increasingly diffuse set of other cultural sites; they also influence the manner in which "children and young people come to know themselves" (Wright and Harwood 1). For this reason, the gap between normative constructions of physical health and the normalizing practices of treatment and health management should be made radically open to critical inquiry. The undergirding principle of this analysis, then, is that it is possible to interrogate what we mean by health and to question how the distribution of claims to rationality informs the specificity of obesity as a health concern, without rejecting health as an organizing social ideal.

### Consumerism and the Pathology of Lifestyle

Nikolas Rose's account of the way governmentality operates today provides a clear picture of what it might mean to "fight" obesity. In *Powers of Freedom*, he links the "rhetoric of reaction" which has dismantled the social state to "the emergence of a new way of understanding and acting upon human beings as subjects of freedom" (84). He does so as a means of moving beyond arguments that neoliberalism represents the "revival of an old free-market scepticism over the powers of government" to a discussion of the ways that freedom as a political concept "comes to be understood in terms of the capacity of an autonomous individual to establish an identity through shaping a meaningful everyday life" (84). Rose provides an essential resource for understanding why obesity prevention is becoming a central part of anti-obesity educational messages. I extrapolate his notion of a "new ethical politics ... which refuses the idea that politics is a matter of state, parliament, election and party programme" to make the argument that childhood obesity exposes the things which most mystify and trouble us about the ways that the economic and cultural complexity of space, or power, shapes bodies. In a diverse array of professional and political registers, obesity has sparked a debate over the central problem of how consumption undermines or attenuates critical agency, where the ability to discern and respond to risk is seen as one potentiality or tendency of that agency.

For seminal theorist of "healthism" Robert Crawford, as well as for Rose, the underlying strategy involved in deploying health as a fundamen-

tal but highly mutable value is to effect forms of social control based less on coercion and more on class anxieties and self-surveillance. “Healthism” is Crawford’s term for the ways in which, over the last forty years, the pursuit of health has begun to operate as both an indicator and determinant of social capital through this process of soliciting increased self-surveillance. When Crawford stresses that “self-control as a pillar of middle-class identity is employed as a shield against downward mobility,” he is describing the way in which health signifies in excess of its intended aim and engenders something else: body privilege (416). What Rose calls a “norm of autonomy” informs this specific form of body privilege, in the sense that it is built upon encouraging “continuous self-scrutiny, self-dissatisfaction and self-evaluation in terms of the vocabularies and explanations of expertise” (93) as well as the exclusion of those who lack the resources to perform a civil, properly self-fashioning practice of freedom.

Most of the factors associated with “Western decadence” have not been, and likely cannot be, confirmed as causative or constitutive of fatness, let alone illness, by empirical analysis,<sup>3</sup> but this does not seem to affect the consistency with which obesity is connected through lifestyle to an overarching societal ennui. As Christina Paxson et al. note, experts usually attribute the childhood obesity epidemic to the “explosive” effects of cultural factors such as

increases in television and computer game use that have led to a new generation of “couch potatoes”; the explosive proliferation of fast-food restaurants, many of which market their products to children through media campaigns that tout tie-ins to children’s movies and TV shows; increases in sugary and fat-laden foods displayed at children’s eye level in supermarkets and advertised on TV; schools that offer children junk food and soda while scaling back physical education classes and recess; working parents who are unable to find the time or energy to cook nutritious meals or supervise outdoor playtime; the exodus of grocery stores from urban centers, sharply reducing access to affordable fresh fruits and vegetables; and suburban sprawl and urban crime, both of which keep children away. (3)

3 Take the example of television viewing. Marshall et al. claim that “The mechanisms by which sedentary behaviours contribute to negative health outcomes, particularly overweight and obesity, are not well understood. One hypothesis is that involvement in sedentary behaviour limits the time available for participation in health-enhancing physical activity. Most data do not support this hypothesis and cross sectional and prospective data between TV viewing and adiposity show inconsistent and weak associations” (402).

No doubt believing themselves to be reacting in good conscience against social environments engendered by hyperconsumerism that appear to make fatness compulsory for the poor and avoidable for those with capital, anti-obesity campaigns have begun to spring up increasingly in major North American cities. In Cincinnati, advocates pledging to “close the health gap” posted billboards that asked the sensationalistic question: “Are We Feeding Our Kids to Death?” Consider an analogous attempt by PETA, through its own national billboard advertising campaign, to convince a public shocked into fear of fatness that a convenient way to “Save the Whales” (as the advertisements contemptuously figure the objects of the war on obesity) is to eliminate animal products from our diet. When key fat acceptance activist Marilyn Wann appeared on CNN to dispute the ethics, legality, and effectiveness of the latter campaign, her pleas to PETA to stop advancing its important agenda “on the backs of fat people” were dismissed by both the show’s eponymous talking head Jane Velez-Mitchell and PETA co-founder Ingrid Newkirk (“Fat shaming ...”). What is telling about the disdain with which Velez-Mitchell and Newkirk reacted to Wann’s criticisms is the insistent way in which the two “fit” people on screen casually and confidently employed the rhetoric of at-risk youth to trivialize Wann’s intervention, who is a visibly fat person. To Wann’s demand that PETA stop suborning fat prejudice Newkirk responds:

I’m awfully sorry, but sometimes you need tough love. What we’re talking about here are two issues. One is a lack of discipline from most people who are overweight or obese, who are setting a very bad example for children. And the other is cruelty to animals ... We have an obesity epidemic among children, and being fat and coddling fat people to look that way doesn’t help our kids to eat right. (“Fat shaming ...”)

The Cincinnati campaign contains a number of features common to the kind of anti-obesity rhetoric this article examines. Most obvious is the use of the figure of the scourge of childhood obesity as a talking point, purported public health menace, and cultural construction.

Why does reinforcing the rationality of a childhood “obesity epidemic” afford Newkirk and Velez-Mitchell the privilege of shirking Wann’s criticism? In the context of what is nominally a televised debate, their invocation of the spectre of overweight and obese youth shows how the child-in-jeopardy acts as a figure of social decay that implies an incontestable consensus. Fat children in the age of obesity are figured as a source of

“anxieties regarding citizenship, nation, and subjectivity” and as antithetical to the notion of a healthy future (Guthman 188).

Rising rates of obesity might be one of the symptoms of contemporary consumer culture, but is it the most worrying one? And why is this question so seldom raised? Amid the sense of outrage or emergency incited by the presumed relationship between predatory consumer culture and fat children, arguments about the way in which this culture jeopardizes our collective future by fostering individualism, social alienation, and the accumulation of debt have found conspicuously little traction.

At stake here is the way in which the scientific weight of obesity knowledge, especially as it pertains to overweight and obese kids, tends to eclipse a more meaningful discussion of how cultural norms regarding the body's proportions (or looking “that way”) are manufactured. We should be asking what prior construction of knowledge regarding bodies and discipline buttresses both Newkirk's patronizing declaration that Wann and her obese ilk “need tough love” and the PETA president's accusation that obese adults are, in a very material sense, disproportionately responsible for the cruelty perpetrated on animals in the United States. The absurdity of the accusation that the insatiability of individual obese Westerners (rather than, say, the logic of accumulation) governs Western methods of meat production is masked by an appeal to “common sense” assumptions that obese adults present a contagiously undisciplined model of body management to young people. Newkirk and Velez-Mitchell's response to Wann presupposes that their viewers have internalized and accepted the notion that obesity is a “lifestyle disease”; they presume their viewers will agree that people who “look that way,” obese people, pose a particular threat to the overall value and vitality of their communities. Additional research must be done to further unpack the overlapping of childhood obesity with other forms and sources of intergenerational anxiety, like screen media preoccupation, economic decline, and the capacity of liberal societies to cope with population-level crises through democratic means.

## Conclusion

I have neglected, in this paper, to properly engage with the politics of choosing whether or not to consistently put quotation marks around the word “obesity” as a means of placing it, as it were, under “erasure.” The problem is important for framing childhood obesity as an “epidemic of signification” because, in my reading, rhetorics of responsibility and futurity subtly inform the expert empirical studies in which “the obese” are an incontestably medical category. What particular type of public is implied

I have argued  
that decrying an  
epidemic of fat  
children posits  
fatness as a  
subject  
position  
requiring  
containment,  
quarantine, and  
correction.

by the rhetorical and political incorporation of quotes around the word “obese”? And how do we name or locate the public for whom “obese” would never warrant being put under erasure?

When I presented an interpretation of Lee Daniels’s film *Precious: Based on the Novel Push* by Sapphire to a group of gracious colleagues at McMaster University’s “Health, Embodiment, and Visual Culture” conference in November 2010, the overarching question of who or what decides when fatness enters the sphere of personal failing or individual disease was thrown into high relief. Following my presentation, two pro-fat activists, artists, and intellectuals—Cindy Baker and Stefanie Snider—took me aside to discuss the politics of my paper’s title: in the publicized version, my essay was titled “Learning to See the Obese Body,” with no scare quotes around the word “obese.” They expressed serious offence in response to the way that I, as a pro-fat academic, purported to speak in opposition to prevalent notions of what the “obese” body can be or do while neglecting to make the important political and theoretical move of signaling that the label itself is the material basis for much fat oppression. For Snider and Baker—whose work, in the case of the latter, satirizes and exposes fat prejudice through public performances designed to intervene in and disrupt the occupation of the public by licit and legible bodies—the deployment of a term like “obese” without an attendant attempt to annul its power is problematic because its use is part of a network of images and social relations that continue to make the well-being of fat people collateral damage in the “war on fat.”

In this paper I have argued that decrying an epidemic of fat children posits fatness as a subject position requiring containment, quarantine, and correction. I raised the question of if or to what extent the medicalization of childhood obesity militates against thinking fat in oppositional terms, as something to be reclaimed as deserving of dignity and pride. I have argued that the child’s body has been deployed discursively as a condition of obesity’s escalation into a crisis, and that this crisis is phantasmic in the sense that it requires the construction and reproduction, in multiple registers, of the image of a body politic bloated beyond hope. The “battle against obesity” targets youth as a central site of cultural struggle and as the main players in a broader staging of self-help as a duty to the future of a larger social project.

## Works Cited

- Boon, Caitlin S., and Fergus M. Clydesdale. "A Review of Childhood and Adolescent Obesity Interventions." *Critical Reviews in Food Science and Nutrition* 45 (2005): 7–8. Web.
- Burgard, Deb. "What is 'Health at Every Size'?" *The Fat Studies Reader*. Eds. E. Rothblum and S. Solovay. New York: New York UP, 2009.
- Crawford, Robert. "Health as a Meaningful Social Practice." *Health* 10 (2006): 401–20.
- Evans, Bethan. "Anticipating Fatness: Childhood, Affect and the Pre-emptive 'War on Obesity.'" *Transactions of the Institute of British Geographers* 35.1 (2010): 21–38. Web.
- "Fat shaming by PETA President Ingrid Newkirk." Web. 15 August 2011.
- Gard, Michael. *The End of the Obesity Epidemic*. Madison: Routledge, 2011.
- , and Jan Wright. *The Obesity Epidemic: Science, Morality, and Ideology*. Madison: Taylor and Francis, 2005.
- Guthman, Julie. *Weighing In: Obesity, Food Justice, and the Limits of Capitalism*. Berkeley: University of California Press, 2011.
- Hall, Stuart. "Notes on Deconstructing 'the Popular.'" *Cultural Theory and Popular Culture: A Reader*. Ed. John Storey. Upper Saddle River: Pearson/Prentice Hall, 1998. 477–87.
- Herrick, Clare. "Risky bodies: Public Health, Social Marketing, and the Governance of Obesity." *Geoforum* 38.1 (2007): 90–102. Web.
- "In The Know: Should We Be Shaming Obese Children More?" Onion News Network. Web. 20 August 2012.
- Kersh, Rogan, and James A. Morone. "Obesity, Courts, and the New Politics of Public Health." *Journal of Health Politics, Policy, and Law* 30.5 (2005): 839–68. Web.
- LeBesco, Kathleen. *Revolting Bodies?: The Struggle to Redefine Fat Identity*. Amherst: University of Massachusetts Press, 2004.
- Lobstein, Tim. "The Size and Risks of the International Epidemic of Child Obesity." *Obesity and the Economics of Prevention: Fit Not Fat*. Ed. Franco Sassi. OECD Publishing, 2010. 107–14.
- Lofink, Hayley, and Stanley Ulijaszek. "Obesity in Biocultural Perspective." *Annual Review of Anthropology* 35 (2006): 337–60. Web.

- Lustig, Robert. "Controversial Chocolate-Flavored Baby Formula Ends Production." Fox News. 9 June 2010. Web.
- Marshall, S., S. Biddie, T. Gorely, N. Cameron, and I. Murdey. "Relationships Between Media Use, Body Fatness, and Physical Activity in Children and Youth: A Meta-analysis." *International Journal of Obesity* 28, 1236–46.
- Marvin, Simon, and Will Medd. "Metabolisms of Obesity: Flows of Fat through Bodies, Cities, and Sewers." *Environment and Planning A* 38.2 (2006): 313–24. Web.
- Oliver, J. Eric. *Fat Politics: The Real Story behind America's Obesity Epidemic*. Oxford: Oxford UP, 2006.
- O'Shea, Shane. *Herbie Archives*, vol. 1. Milwaukie, Oregon: Dark Horse Comics, 2008.
- Paxson, Christina, Elisabeth Donahue, C. Tracy Orleans, and Jeanne Ann Grisso. "Introducing the Issue." *Future of Children* 16.1 (2006): 3–17. Web.
- Purcell, Megan. "Challenging Inadequate Policy Responses to Childhood Obesity: What's Holding us Back?" Canadian Obesity Network. Web.
- Rawlins, Emma. "Citizenship, Health Education, and the Obesity 'Crisis.'" *ACME: An International E-Journal for Critical Geographies* 7.2 (2008): 135–51. Web.
- Rose, Nikolas. *Powers of Freedom: Reframing Political Thought*. New York: Cambridge UP, 1999.
- Treichler, Paula. *How to Have Theory in an Epidemic: Cultural Chronicles of AIDS*. Durham: Duke UP, 1999.
- Sedgwick, Eve Kosofsky, and M. Moon. *Tendencies*. London: Routledge, 1994.
- Wann, Marilyn. "Foreword: Fat Studies: An Invitation to Revolution." *The Fat Studies Reader*. Eds. E. Rothblum and S. Solovay. New York: New York UP, 2009. xi–xxvi.
- Weinstock, J., and M. Krehbiel. "Fat Youth as Common Targets for Bullying." *The Fat Studies Reader*. Eds. E. Rothblum and S. Solovay. New York: New York UP, 2009. 120–26.
- Wright, Jan, and Valerie Harwood. *Biopolitics and the "Obesity Epidemic": Governing Bodies*. Madison: Routledge, 2009.