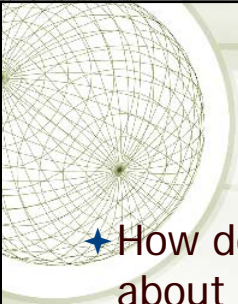



*Governing bodies: bio-  
pedagogies and the obesity  
epidemic*

Jan Wright  
University of Wollongong  
Australia



*Organising Questions*

- ◆ How does a particular idea (in this case about health and obesity) take hold?
- ◆ And with what effects for how people come to understand their own and others lives?



★ The theory: Foucault's notion of 'biopower' and specifically how we have interpreted this in relation to what we are calling 'biopedagogies'



*'Biopower' in its operation 'must include at a minimum the following elements':*

- ★ One or more truth discourses about the vital character of living human beings, and an array of authorities considered competent to speak the truth.
- ★ Strategies for intervention upon collective existence in the name of life and health
- ★ Modes of subjectification, through which individuals are brought to work on themselves, under certain forms of authority, in relation [to] truth discourses, by means of practices of the self, in the name of their own life and health, that of their family or some other collectivity, or indeed in the name of the life and health of the population as a whole


(adapted from Rabinow & Rose 2006, p.197)



## *Biopedagogies and the 'obesity epidemic'*

We use the word biopedagogies ... to bring together the idea of biopower and pedagogy in ways which help us understand the the body as a political space, the meanings associated with which are constituted in a multiple of 'pedagogical sites' - that is, sites which have the power to teach, to engage 'learners' in meaning making practices which they use to explain/make sense of their worlds and them-selves and thereby influence how they act on themselves and others.


These sites are not necessarily (and indeed mostly) in schools, but are everywhere around us, on the web, on television, radio and film, billboards and posters, pamphlets in doctors' waiting rooms.



## *Biopedagogies*

Across a range of contemporary contexts are instructions on *bios*: how to live, how to eat, how much to eat, how to move, how much to move, how to look. We are told what to eat, what to do, what to avoid. In short, an extensive pedagogy is aimed at us, a pedagogy of *bios*, or what can be termed 'biopedagogy'.

(Harwood 2009, *Biopolitics of Obesity Epidemic*, p.15)



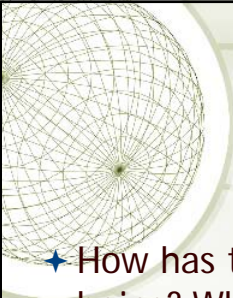
*One or more truth discourses ...  
authorised by experts*

Language "is a set of acts, repeated overtime, that produce reality-effects that are eventually misperceived as 'facts'".

(Monica Wittig, in Butler, *Gender Trouble*: 115)

The popularity of an ideology is in part due to the influence of moral entrepreneurs, who sometimes act in their own interests.

(<http://www.webster-dictionary.org/definition/ideology>)



*The 'obesity epidemic' as  
discourse*

- ★ How has the 'obesity epidemic discourse come into being? What are the social, cultural and political conditions which have allowed its constitution?
- ★ What authority/'expertise' is being drawn upon to support its constructions and dissemination and what silenced?
- ★ What are its effects?

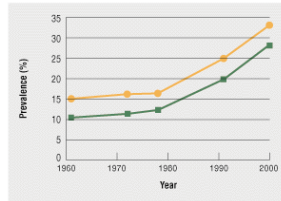


Figure 2. Prevalence of obesity in women and men in the United States, 1960-2000.  
Information from Flegal et al.<sup>1</sup>

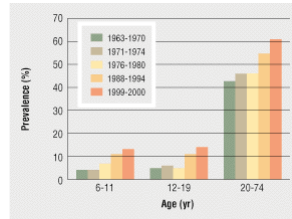


Figure 3. Prevalence of overweight in US children and adults, 1963-2000.  
Information from Flegal et al.<sup>1</sup> and Ogden et al.<sup>11</sup>

**Evaluation of obesity  
Who are the obese?  
George A. Bray, MD**

In the United States, obesity is an epidemic. Because of increased health risks and expanded demands on the healthcare system for obesity advice and treatment, the medical community needs a set of ground rules that define overweight and obesity and provide a risk-benefit approach to treatment selection.

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### Fears Kids will return to school fat and unfit

**Coalition out to exercise healthy option**

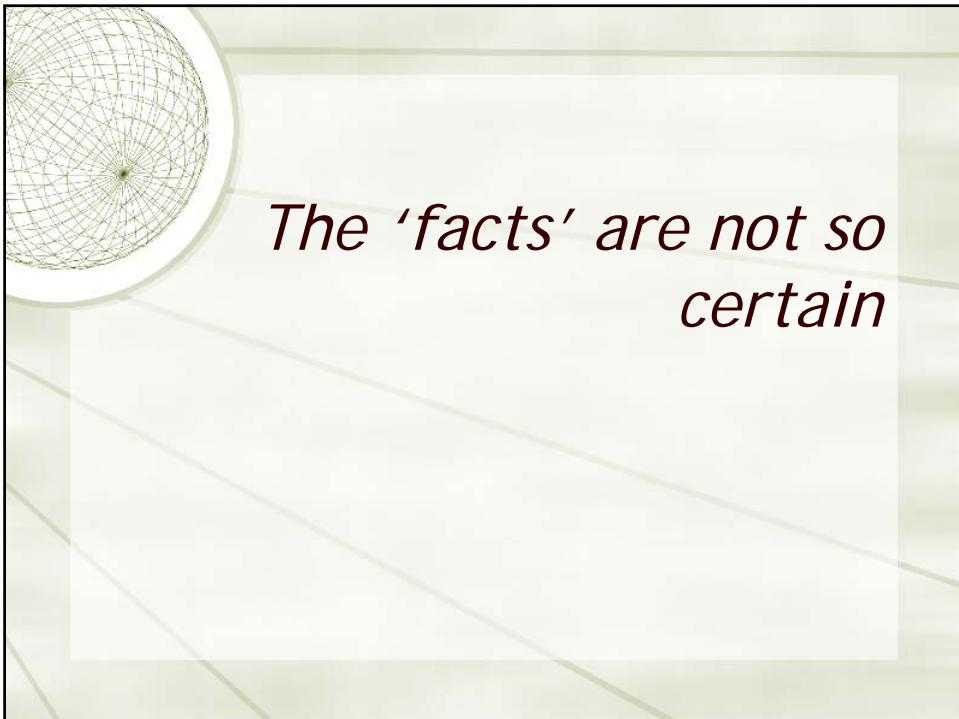


**ALP plan for child fat check**

**Kids face pinch test**

Labor's childhood fat attack

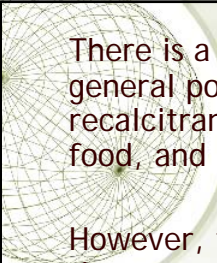
**OPINION**  
**Lunchbox lapses that add kilos to your kids**



Harry was frying eggs by the time Dudley arrived in the kitchen with his mother. Dudley looked a lot like Uncle Vernon. He had a large pink face, not much neck, small, watery blue eyes, and thick blond hair that lay smoothly on his thick, fat head. Aunt Petunia often said that Dudley looked like a baby angel — **Harry often said that Dudley looked like a pig in a wig.** (chapter 2)

Harry went down to breakfast the next morning to find the three Dursleys already sitting around the kitchen table. They were watching **a brand-new television, a welcome-home-for-the-summer present for Dudley, who had been complaining loudly about the long walk between the fridge and the television in the living room. Dudley had spent most of the summer in the kitchen, his piggy little eyes fixed on the screen and his five chins wobbling as he ate continually.**

(Harry Potter and the Prisoner of Azkaban)




There is a view in the health science literature that sees the general populations of Western countries as fundamentally recalcitrant, increasingly addicted to large amounts of bad food, and physically lazy (Lee & Paffenbarger, 1996).

However, there is a substantial amount of data that suggests the reverse, that large sections of Western populations have reduced both total caloric intake and the amount of dietary fat in their diets (Rolland-Cachera & Bellisle, 2002) while taking to jogging, gyms, and recreational sports in ever greater numbers (French, Story, & Jeffery, 2001).


At the same time, life expectancies have risen in many Western countries, and there are at least some members of the medical research community who are prepared to credit the lifestyle choices of individuals for these improvements (Australian Institute of Health and Welfare, 2004).

(Gard 2008:490)



*Mark, D.H. Deaths attributable to obesity (JAMA, 2005: 293)*

In this issue of JAMA, 2 studies present new analyses on the subject of obesity. The study by Flegal et al is likely to generate interest because it provides an estimate of deaths attributable to obesity that appears to strongly contradict prior estimates published in JAMA... The magnitude of the differences (identifies between previous studies and Flegal's) cries out for explanation of the reasons behind these differences. Some might wonder: If well-intentioned efforts to calculate this number can result in such widely varying estimates, is it worth trying to do at all.

- 
- ◆ Data from Biddle et al on TV and computer use and body fat and physical activity
  - ◆ Data from Green and Roberts on increasing participation of young people in physical activity in UK



## Strategies for intervention

**2&5 Campaign**  
<http://www.gofor2and5.com.au/>  
Eating plenty of fruit and vegies not only contributes to good health, but also protects against a number of diseases and *helps maintain a healthy weight.*

**MeasureUp Campaign**  
Unhealthy eating and drinking and not enough physical activity can seriously affect your health



**Jamie Oliver's Eat to Save Your Life**

**THE BIGGEST LOSER**

**honey we're killing kids**

**TEEN FIT CAMP**

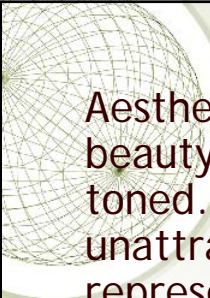


## *The role of emotions/affect*

How are we incited to work on ourselves, to accept particular 'truths'; to participate in actions that we would not consider doing otherwise?

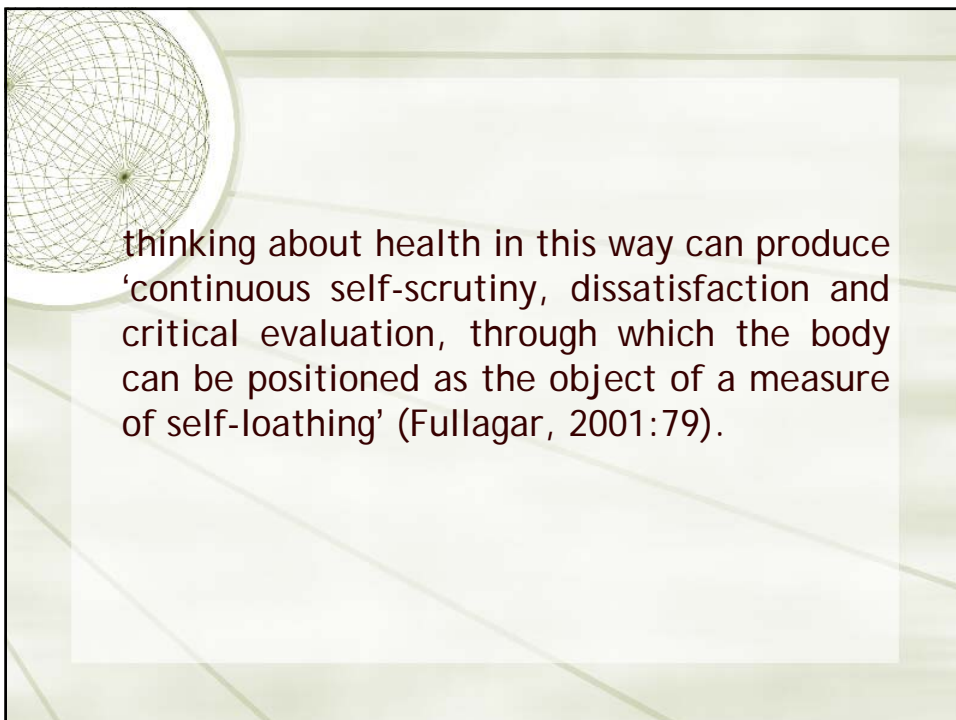
Morality - normality, good/bad, pride/guilt and shame

Abjection - the 'other' - disgust, loathing of one's own and the bodies of others



Aesthetically, fat is the antithesis of the beauty ideal of the day: tight, lean, and toned. Viewed then both as unhealthy and unattractive, fat people are widely represented in popular cultures and in interpersonal interactions as revolting - they are agents of abhorrence and disgust. (Lebesco 2001: 75)

'I would rather die than be like that'



The number of children being hospitalised with eating disorders has risen three-fold in the past two years, with sufferers as young as 10 being admitted with anorexia and bulimia.

Doctors say society's obsession with rising obesity has led to four and five-year-olds worrying about getting fat, and an alarming rise of admissions to the Royal Children's Hospital. Last year there were 76 admissions for eating disorders, but by June this year 78 children had been admitted.

"We do know that one of the greatest risk factors . . . is dieting and the increasing portrayal of highly idealised notions of what it is to be beautiful and the increasing discussion of obesity in our society and the increasing marketing that targets children, it's all part of the problem."

A survey by Eating Disorders Foundation showed 25% of seven-year-olds had been on a diet.

(Jill Stark, *The Age*, Aug 31, 2006)

### **It allows practices that in other contexts would be unthinkable:**


In schools:

monitoring of body weight

'fat laps'

lunchbox checks


mandated daily exercise



It promotes a particular relationship to the body and a narrow understanding of health

Health = fitness = thinness

It promotes a narrow notion of physical activity: valued as exercise to prevent overweight, to 'keep in shape'



*Year 4 and 8 children say...*

- ★ 'Lok at your alfe' (look at yourself)
- ★ 'weight your self on scales'
- ★ 'use scales to see how fat you are'
- ★ 'measure your belly'
- ★ 'I can't fit shots or pance'

(from Wright & Burrows 2004)

The worksheet is titled "How Fit?" and includes the following text: "It is important to know how fit you are. Make a plan which shows what you could do to test your own fitness. Ask the teacher if you want help with the writing." A list item reads "1. Stand on scales". Below the list is a drawing of a person standing on a scale. The worksheet has a header with "P22/S/98" and "A", and a student ID "S012-A1". At the bottom, it says "YEAR 4:1998", "91", and "STATIONS".

The worksheet is titled "How Fit?" and includes the following text: "It is important to know how how fit you are. Make a plan which shows what you could do to test your own fitness. Ask the teacher if you want help with the writing." Below the text is a table for tracking activity:

Days	Time	secs	mins	Day	Time	secs	mins

Below the table is a drawing titled "My Tummy diagram" showing five circles of varying sizes. The worksheet has a header with "P22/S/98" and "A", and a student ID "S054-A2". At the bottom, it says "YEAR 4:1998", "91", and "STATIONS".

*Int: How do you feel if you missed out on a game?*

Karin: Oh terrible. Yeah, we have bye games this season, so it's terrible. I feel terrible. I can't stand it. And if we don't have training either, nup I hate it. I just have to do something and I mean if we don't do anything than I just have to go for a run up the street. I'll do anything just to waste the energy, haha. I can't stand missing out on games.

And a little later

*Int: So how do you feel exactly when you miss out?*

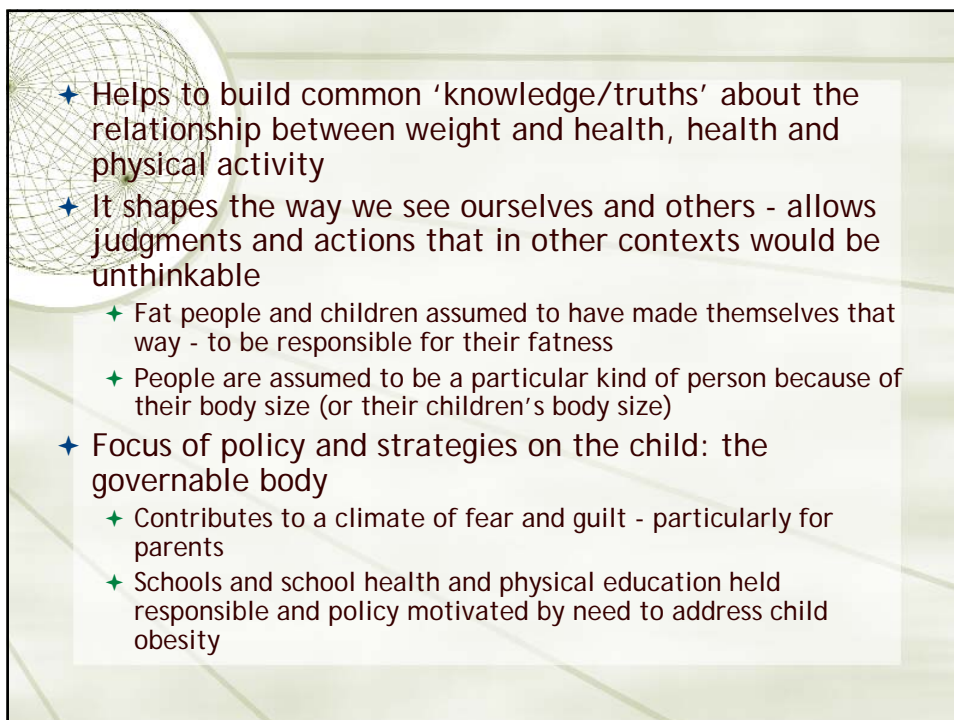
Karin: Just terrible, I feel like as soon as you miss out on a week, I just feel, you know, like fat. You know, you feel lazy, you can't do anything. You know, you feel fat and you feel so oily. You know you haven't worked off any energy so you feel heavy and, just like you miss the little exercise you need to feel normal.

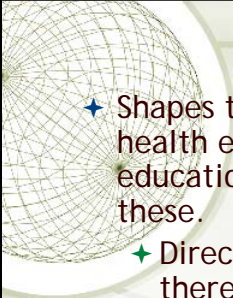
(from Wright, O'Flynn, Macdonald, 2006)

### *From young women with anorexia*


We used to have to get weighed in the class and that was terrible [...] It was to do with maths or something ... and that was horrible ... because then everybody knew your weight and then ... a lot of the lads actually used to go on ... and ... you know ... shouting out your weight in the class ... things like that ... that was terrible ... really terrible. (Rebekah, interview)

(Rich & Evans 2009: 164)





- ✦ Shapes the rationale for medical interventions, health education, health promotion, physical education and effects what happens in the name of these.
  - ✦ Direction of funding and research on proving there is a problem
- ✦ Particular ways of thinking about physical activity - as prescription for health
  - ✦ What is the problem with watching TV and using computers?
- ✦ A preoccupation with weight that is 'unhealthy'



### *Thinking and doing otherwise*

- ✦ Discrediting the 'truth position'
  - ✦ Assailing the unassailable
  - ✦ Making the discourse disreputable; unspeakable by challenging its truth claims
- ✦ Other ways of thinking about health (and bodies) and physical activity than those prescribed by science?

