Rethinking how we see and respond to fatness

Jessica Young BPhEd(Hon), MPhEd(Dist)

The four themed articles in this issue have at their heart concern for people's health, in particular how best to advise patients about weight and nutrition. They outline opportunities such as multidisciplinary teamwork and specific training to improve the health promotion advise offered to patients and their whanau.[1–3] Crowley *et al.*[3] suggest using free annual diabetes reviews as a vehicle that removes the cost barrier and offers the time necessary to provide whole person care. Perhaps, according Meredith-Jones *et al.*,[4] by this point it is too late and earlier interventions are required. The articles highlight many barriers to delivering appropriate care: time, knowledge, skill, remuneration, space, funding, conflicts of interest, lack of integration and inflexible contracts.[1–4] The articles also discuss responsibility, choice, and risk.

Some troubling assumptions around lifestyles, physical activity and bodies underpin weight (and by proxy, nutrition) research. Such research suggests that good health is something within our power to achieve if only we are prudent, disciplined, and control our impulses. In an era where health is increasingly at risk from global dangers, we are '*exhorted ever more to take individual responsibility for our bodies by engaging in strict self-care regimes*'.[5] To engage in 'risky' behaviours is seen as irrational and irresponsible. The notion of risk contributes to a moral panic about obesity. It compels a solution of surveillance and treatment, and an understanding that interventions relating to body shape, size, and fatness are crucial. 'Lifestyle' is blamed by many of the participants in the studies[2–4] but a universal healthy lifestyle does not exist. The focus on lifestyle conceals power and economic imbalances within society and these discourses have arguably been appropriated by government to justify the retreat of the welfare state from social responsibility for health.

Gard and Wright[5] argue that there is minimal evidence to support the energy-in-energy-out equation, which some of the studies in this issue reference explicitly and others more subtly, and that physical activity does not affect bodies in predictable and identical ways. This equation offers a medicalised view of physical activity to expend energy for the purposes of weight management rather than more holistic understandings of the purpose and potential of physical activity such as enjoyment, mastery of skills, and social contact. It presupposes that each person's priority is to be active over other commitments and pleasures. Eating becomes unable to be thought of without reference to achieving 'health', with little consideration for the cultural, religious, or social significance of food. The equation reduces people to 'bodies' rather than individuals with diverse needs and interests, shaped by particular socio-cultural and economic circumstances. Focusing health promotion advice on understanding our bodies as 'doing' rather than 'being' may help to shift the emphasis from appearance to function and provide a more joyous approach to activity and eating.

In Western contemporary contexts health is mainly regarded as something that is located within the body, with weight and size functioning as visual markers of healthy or unhealthy selves. Intensifying these beliefs is the historic notion that the body - its shape, surfaces, size - is representative of the inner self.[6] The socially ascribed meanings of fat can be 'read' from one's body as confessing the 'truth' about a subject, that is, lazy, self-indulgent, and greedy.[7] Implicit in obesity discourses is a belief that obese bodies not only *can* be worked on but a moral imperative is implied that such a body *should* be worked on (thereby publically expressing virtues of self-control and willpower). At the extreme, this mentality may exhort people to develop relationships with food and their bodies based on guilt and anxiety.

The use of the term 'obesity' in the media, the medical establishment and among laypeople

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CORRESPONDENCE TO:
Jessica Young
Department of General Practice and Rural Health, Te Tari Hauora o te Marea me te Hauora o te Huka Ahuwhenua, Dunedin School of Medicine, University of Otago, New Zealand
jessica.young@otago.ac.nz