

Understanding the 'too fat' body and the 'too thin' body: A Critical Psychological Perspective

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Introduction

In Quinten Blake's children's story, *Patrick*, a young man, Patrick, and two children, Kath and Mick, meet a tinker and his wife.

"Look at our procession" shouted Kath. "Isn't it fun!" "How can he enjoy it?" asked the tinker's wife. "He's very thin and I don't know what to do for him. "Let me play my violin and see what happens," said Patrick. So he played a tune, and you see what happened. The tinker started to get fatter. He lost his cough, and his cold, and his stomach-ache, and his headache; until he was well and smiling and happy again. (Blake 1970: 29)

Under the text is a series of five pictures of an initially slim man, dramatically increasing in girth until in the final picture the now dancing, happy man is positively rotund and might easily be described as obese. This is clearly not a recent publication. How, it might be asked today, could anyone – whether male or female – be happy about such a transformation in body weight and shape? Sure, he was initially perhaps a little thin (for a man) but even at the third picture he's looking 'flabby'. And surely at that final size he's 'grossly corpulent' and heading for, if not already succumbed to, serious ill-health?

Insert Illustration 1 here? (haven't checked permissions)



In *Patrick* the tinker's weight-gain is both felicitous and magical. In contemporary everyday life such a transformation from slimness to obesity would, rather obviously, not only be experienced and perceived very differently, most likely as an unmitigated disaster rather than a cause for celebration; but it would also in most academic and clinical as well as popular contexts be attributed to 'poor lifestyle choices': to eating

(far) too much 'bad food' and 'failing' to exercise. From a critical psychological perspective this scene from *Patrick* is interesting, first because it highlights a dramatic shift in cultural values and beliefs surrounding fat and thin bodies and, second, because, by relating a story of weight-gain caused only by magic, it further highlights the force of culturally dominant explanations of how people become 'too fat' or indeed 'too thin'. In this chapter our aim is to map out some of this cultural shift. Drawing on a range of interviews and focus groups conducted with 'too fat' and 'too thin' women and men we begin by exploring some key continuities and discontinuities in the cultural values and beliefs accruing around 'too fat' and 'too thin' bodies before then drawing out the ways in which these cultural perceptions shape the regulation and self-regulation of eating in 'too fat' and 'too thin' people.

The political gendered aesthetics of body-weight

Since the 1960's a slim or thin body has been a key signifier of 'femininity' in Western cultures (e.g. Bordo 1993; Malson 1998; Orbach 2006; Smith 1990). Slenderness was never the only criterion of feminine attractiveness – being young, white, able-bodied, blond and blue-eyed have also featured strongly (Bordo, 1993) – but in late twentieth and early twenty-first centuries Western/westernised contexts slimness has been an 'essential' and arguably the most vociferously promoted measure of women's (heterosexualised) beauty (Wolf, 1991). The achievement and/or maintenance of this idealised slim/thin body, has therefore, until quite recently, been framed almost exclusively as an issue of gendered aesthetics; and 'dieting', as the primary means of achieving this 'ideal', an issue for women's magazines, its prescriptions on a par with (though arguably rather more important than) 'how to' tips on applying make up. And, while 'dieting' in pursuit of an attractive slim body – along with other practices of feminine beautification – has frequently been presented as a trivial issue of vanity (Orbach, 1993), it is nevertheless loaded with considerable personal and cultural significance. Numerous feminist scholars have argued that a range of gendered body 'ideals' and practices of body-modification – foot-binding, wearing corsets, stilettos or make-up, dieting, cosmetic surgery and so forth – represent ways of subjugating and objectifying women (Wolf, 1991; Coward, 1984; Orbach, 2008; Ussher, 1991). Thus, the idealisation and pursuit of thinness has been interpreted as reflecting a cultural repudiation and fear of female flesh (Bordo, 1993) and of girls' and women's needs and desires (Orbach, 1993); as reflecting an infantilisation of women and a social requirement that women should both literally and metaphorically take up less space than men (Chernin, 1983); and as a response to the lack of control women in patriarchal cultures have over their lives (Lawrence, 1987). From this perspective thinness and dieting can be seen to be not only about (female) beauty but also about a range of culturally prescribed characteristics of 'proper' heteronormative femininity while, conversely, fatness becomes construed not only as unattractive but as 'failed femininity' (Malson, 1998).

In short, for over half a century slenderness has been imbued with considerable cultural currency as a key index of girls' and women's beauty

and of feminine subjectivity. Its promotion through the media, the dieting and fashion industries and everyday discourse, has for a long time been associated with near ubiquitous body-dissatisfaction and restrictive dieting amongst women (Polivy and Herman, 1985; Orbach, 1979, 1993) and with eating disorders such as anorexia and bulimia (Orbach, 1993; Grogan, 1999; Halliwell et al., 2005; Bordo, 1993, 2009). And, as we will discuss further below, whilst body-dissatisfaction and dieting have been described as descriptively and prescriptively normative for women (Wolf, 1991; Polivy & Herman, 1985), disordered eating has been viewed primarily as an individual psychopathology somehow caused by (at least in part) and yet distinct from this normative discontent (see Bordo, 1993; Malson, 1998; Eckermann, 2009; Malson and Burns, 2009). Thus, the thin female body, whilst idealised, is at the same time, if it is deemed 'too thin', also pathologised (cf. LeBesco 2009; Malson and Ussher, 1996; Malson and Swann, 1999) such that women at both ends of the weight spectrum are marginalized (Swami et al., 2010).

From feminine beautification to the neo-liberal moralisation of aestheticised 'healthy' body weight

The cultural equations of slimness/thinness with feminised beauty and of fatness with unattractiveness clearly still hold. And, as numerous studies have illustrated, thinness and fatness have and still do accrue numerous meanings - for example, self-denial/gluttony, self-control/self-indulgence, discipline/laziness, self-destruction/self-comforting - in addition to beauty and femininity (e.g. Bordo, 1993; Malson and Burns, 2009). Now, however, with national and global concerns about the alleged health consequences of an 'obesity epidemic', the message that beautiful bodies are slim is further overwritten by a framing of body fat as a health issue.

Research investigating the relationship(s) of bodyweight to health has produced conflicting findings and numerous authors (LeBesco, 2009; Campos et al., 2006; Cogan and Ernsberger, 1999; Miller, 2005; Gard, 2005) maintain that evidence used to support the notion that a high body weight is a risk factor *per se* is sparse and based on flawed research. Nevertheless, the mainstream perspective that obesity constitutes a severe health risk is generally accepted as commonsensical truth (Cogan & Ernsberger, 1999; Gard, 2005; Campos, 2004). Hence, health is equated with 'normal' bodyweight, defined as a body mass index (BMI) of 18-25. And, while non-normative bodyweights above *or* below that range are thus presented as causing many adverse health conditions (e.g. Saguy & Riley, 2005), the overwhelming emphasis in both government-sponsored and popular health-promotion discourse is on the dangers of overweight not underweight bodies (Campos, 2004; Gard, 2009). As such fat bodies (and weight-gain) are almost invariably presented as (always) unhealthy and thin/slim bodies (and weight-loss) as (always) healthy (LeBesco, 2009; Aphramor and Gingras, 2008; Rice, 2009).

In this context then, while the longer-standing gendered aesthetics and gender power-relations remain in place, the issue of body-weight and its management also take on new meanings - of health, responsibility and good (neo-liberal) citizenship - which apply to everyone regardless of

gender, body-weight or any other indices of identity (Malson 2008, Markula et al 2008)(Malson 2009). Moreover, despite numerous explanations for the causes of overweight and obesity including genetics and environmental factors, in the early twenty-first century body weight is considered primarily a consequence of an individual's lifestyle choices in respect of dietary intake and exercise and is thus seen as a matter of individual responsibility (e.g. Saguy and Riley 2005). Based on a simple energy-balance approach the dictate is most often to "just eat less and move more" to solve the 'obesity problem'. While lifestyle clearly is important for health, the evidence that 'excess' fat is a simple consequence of poor diet and over-eating are highly contested (e.g. Aphramor and Gingras, 2008; Gard, 2009). Thus it has been asserted that the 'war on obesity' is based on the faulty assumptions that

- 'overweight' and 'obesity' are major contributors to morbidity and mortality;
- to be healthy and happy, people have to be thin;
- people can change their weight at will, with long-term sustained weight-loss being achievable for everybody;
- dieting works and improves health;
- 'overweight' and 'obese' individuals have no willpower, eat too much and do not exercise enough.

Despite considerable evidence contradicting these assumptions (e.g. Campos, 2004; Gard, 2009; Aphramor, 2008), weight-loss 'dieting' is promoted to entire populations as an efficient way of improving health (LeBesco, 2009; Aphromor and Gingras, 2008). A glance across the magazine shelves of any larger newsagent highlights this cultural prominence. Numerous titles specializing in body-transformation are on offer, ranging from slimming magazines such as *Slim at Home* and the official magazines of commercial slimming clubs, which are aimed near-exclusively at women, to those such as *Fitness*, *Men's Health* and *Diet and Health* targeting men as well as women, that couch weight-loss dieting in broader discourses of health and fitness. As might be expected, slimming magazines tend to feature headlines like "Lose fat fast" and "Drop a Stone", offering 'real life' accounts of women losing large amounts of weight as a 'guarantee' of "looking fab" and "feeling great". Aimed at women audiences these magazines clearly illustrate the intertwining of the newer healthist framing of weight loss with the longer-standing dictum that 'slim is feminine and beautiful and 'fat' is ugly and repulsive' (Germov and Williams 1999, LeBesco and Braziel 2001). Those magazines targeting a mixed or male audience tend, as noted above, to emphasise health-maximisation over appearance-enhancement in promoting weight-loss diets. At the same time, however, pressures on men to achieve a particular look are increasing with the 'ideal' masculine body being presented as tall, strong, muscular, and lean (see e.g. Bell and McNaughton, 2007; Gill, 2008a, 2008b; Monaghan, 2007, 2008; Frith and Gleeson, 2004). Being a 'fat bastard' is no longer a culturally accepted

option on aesthetic as well as health-related grounds (Lupton, 1996; cf. Monaghan 2008) so that body dissatisfaction amongst boys and men is increasing and men as well as women are now engaged in 'body projects' that are perhaps as much about gendered aesthetics and the regulation of normative gender identity as they are about health (Tiggemann et al., 2008; Gill et al., 2005).

The promotion of slenderness and dieting implies that achieving or maintaining a medically sanctioned body size (and thereby health) is a matter of individual responsibility. This neo-liberal framing of health/weight (as amenable to modification and as an individual's responsibility) interfaces with the cultural idea of the body as malleable and as a project to be worked on in pursuit of a 'better look' rather than as a natural object (Malson, 2008). As such bodies become constituted and experienced as always flawed but always perfectible – in terms of maximizing both health and aesthetics – and indeed the pursuit of this 'perfection' has become a normative '*duty*' of good citizenship *and* 'correct' embodiment of gender (Lupton, 1996; Featherstone et al., 1991).

In this context 'correct' body-weight management becomes a highly charged moral imperative articulated in the 'collective knowingness [that] the fat subject is lazy, not willing to commit to change or to the dictates of healthy living' (Murray 2005:145-155). The 'fat' body has thus come to signify amongst other things, a failed body project, a lack of self-discipline, laziness and irresponsibility (Lupton 1996, cf. Murray 2005, Throsby 2007) and a failing of gender (Gill 2008a, Monaghan 2008, Gill et al 2005) whilst the thin/slim body signifies the obverse of all this. That these moral values are read off 'fat' and 'thin' bodies is not only evident in discourses of health and health promotion, but also reflected by research findings documenting the considerable and widespread discrimination to which 'fat' individuals are subjected (e.g. Swami et al. 2010; Blaine and Williams 2004; Puhl and Brownell, 2003; Schwartz et al. 2003).

Policing the 'too fat' and the 'too thin'

The investment many people have in the notion that being slim is inherently good was born out in a recent web-blog (The Guardian, 2009) following an article by Lucy Aphramor, promoting the Health at Every Size paradigm. Numerous readers felt provoked to defend the slim equals good dictum, and probably their own efforts to stay slim, with statements such as:

I can see how they're judged, but why is that such a bad thing? Being judgemental is only wrong, if you make bad judgements. Equating obesity with physical laziness and greed is an accurate judgement for the overwhelming majority of obese people. What is wrong with telling the truth and saying that obesity is unattractive and for many an indicator of undesirable personality traits? HAES [Health at Every Size] is a ridiculous concept pandering to the inability of a minority to take some responsibility for themselves. (Danot, 2009)

As the interview quotes below illustrate, this culturally prevalent judgement of fat people as morally and aesthetically repellent clearly shapes the lived experiences of those deemed 'too fat'

Emily: If, if *I* didn't feel other people looking at me and thinking "yuk" (.) then I would go [swimming] / I: hmm / yes, it is that simple actually, isn't it?

Alli: I've come home from places before (.) I've gone to parties, and I am talking about 10 years ago now but I've gone to parties and I remember I went to the loo and I caught a glimpse of myself in the mirror and uh thought oh God you're just a ugly monstrosity and you know just burst into tears and went home.

Negative judgements based on body weight, however, are not reserved for 'fat' people: they are directed at individuals at both ends of the body weight spectrum. As noted above, while slim/thin bodies, particularly for girls and women, are ubiquitously idealised, the 'too thin' body is pathologised and denigrated. Thus whilst the 'anorexic' body is often envied (Hsu 1989), derogatory stereotypes of 'anorexia' as self-inflicted and of 'anorexic' girls as spoilt, vain, self-obsessed fashion-victims also circulate (Malson, 2008; Katzman and Lee, 1997). In the interview extracts below Nicky talks about doctors viewing her through this derogatory lens while Denise distances herself from her diagnosis for this same reason.

Nicki: They {doctors} think it's to do with vanity and the media /H: right/ but it's so much more deeper than that /H: right (inaud.)/ Like it's called the slimmer's disease which is a load of rubbish anyway.

Denise: I would definitely not call myself anorexic [...] So when people say to me: Oh you're anorexic, or, you're in the anorexic unit, /H: right/ it just makes my back prickle. I hate it. /H: mm right / I really do. I think it's uhh (.) in a way it's because even in *my mind*, even though *I've* been with people who who are, who would call themselves anorexics, /H: mm/ still in my mind is the old stereotype of (.) what *the media* portray as (.) as anorexic, / H: right/ sort of um self-inflicted, spoilt brat, /H: right/ selfish, um (.) unnecessary. You know: Well why can't you just eat, / H: right mm/ things like that. Um (.) and other people sort of see it as pathetic and that.

Both 'too fat' and 'too thin' bodies, then, are highly scrutinised and judged negatively. Whilst the 'fat' body is always denigrated, however, the scrutiny of the 'too thin' body swings between idealisation and pathologisation. Celebrity magazines praise female celebrities for their slenderness and weight-loss but at the same time often berate them for being 'anorexic'; media coverage of Victoria Beckham being a prime example of this vacillation.

Regulating the eating of 'too fat' and 'too thin' people

There is then a complex web of value-laden meanings, produced by dominant cultural discourses of food, health, gender and appearance, which converge on 'too fat' and 'too thin' individuals. The consequences of this for judging those deemed 'too fat' or 'too thin' are reflected in the following extracts:

Lynn: I thought people must look at me and think I'm, that person's mental uh like, you know. Like sort of walk round town and you'll see someone who's schizophrenic, you know, with all the homeless people and everything. And I'd think they'd look at me and they'd think I'm like that /Jane: mm/ so I stopped going out /H: mm/ so that people wouldn't see me.

Scrupz: I suppose (.) just sit there and eat all day (.) that's what people think /I:Hmm/ so, which isn't true /I:Hmm/ (.) which then gives you a complex when you go out, if you *do* go out to eat, it sort of, well me personally I sit there and I'm looking around, "who's looking at me, who's looking at me" /I:Hmmm/ uhm, I sort of avoid eating in front of people.

Blade: It's like if you're uhm, I could take you shopping now and if we went up to uhm a a queue with all slim people in, and I come up with my trolley, they would actually see what I was buying / I: hhm / to prove to themselves "that's why she's fat" /I: mhm/ and you know that that do, you know, nobody up to now said anything /I: mhm/ uhm but you can tell that they're doing that look.

The consequences of cultural 'knowing' about bodyweight are clearly apparent in Lynn's reflection on her pathologised thinness and in Scrupz' and Blade's comments about their denigrated fatness. Lynn felt she was judged as 'mental' for being 'too thin' and thus stops going out whilst Scrupz and Blade talk about being subjected to stares and monitoring. Scrupz represents the experience of going out for a meal as affecting her as other people's opinion of 'fat' individuals "give you a complex" which she sees as stopping her from eating out whilst Blade talks about being monitored and judged by 'slim people' while shopping for food. However, whilst Blade constitutes 'slim people' as the policing agents, many 'fat' participants included themselves in this social monitoring:

Jenny: I think that a fat person walking down the road eating a doughnut (.) gets more attention than a thin person walking down the road eating a doughnut /I: mm/ um, and (.) and and and would get more attention from *me* as well and that's where I feel so conflicted because I, I feel fat and happy or whatever (.) but I would (.) I guess I wouldn't ever want to be smaller than a size 16, I can't see /I: mm/ I can't really see see that (.) but I'd I'd quite like to be maybe maybe I just want to be a size 18.

Much as Denise, quoted above, talks about subscribing to derogatory stereotypes of 'anorexics', Jenny, as a 'fat' woman, positions herself alongside others as actively critical of other people's fatness. Although she

also expresses a conflict between her experience of herself as 'fat and happy' and her judgemental gaze, she nevertheless seems unable to extricate herself from dominant discourses that construct 'fat' individuals as unhealthy uncontrolled overeaters- a construction which is again apparent in the quotes below:

Rich: I'm, I'm quite self-conscious about eating in public / I: mhm / (..) uhm (.) ech, not so bad with restaurants and things like that but if, but nearer the classic thing is when there's something like a buffet or something like that / I: mhm / I always take great care not to, not to take too much / I: mhm/ because I feel self-conscious (.) you know, that I'm fulfilling a stereotype / I: mhm/ you know, that if I, if I if, you know I would really love a plate full of stuff but, yeah, will, uh, a a a mound of of things, but on the other hand it would just fulfil the stereotype.

Don: Yeah, now that you mentioned that uh, that does affect me uhm, I often have something to eat before I go to a buffet here / I: mhm/ so I don't appear greedy / I: mhm/ uh, because I would like to have lots of food and I like eating nice food, I would like to have lots of food, but (.) uhm like, like you said, I, I (.) beware putting ideas into people's heads that uh, you know, he's having a lot and, look, he's quite big, or (obese), so I'd often have something to eat before I went to buffet so I didn't kind of uh appear as greedy as I was, so to speak.

In the above excerpts from a focus group with 'large' men (Tischner, PhD, Tischner and Malson, 2008) participants construe their eating as self-regulated in response to others' judgemental gazes. To avoid 'fulfil[ling] the stereotype' of fat people as glutinous they either avoid eating in public altogether or consciously restrict the amount of food they eat in public. In the quote below this construction and regulation of fat people is extended to manifest itself as a cultural prohibition against fat people eating in public view.

Jacqueline: I don't know it's probably a stroke of paranoia and also *maybe* it is happening, but I always feel that when I go in a restaurant, my partner who is also big that we get put nearer the back so we are not seen near the front of the restaurant to be eating food as two big people / I: hmm/ and that seems to have happened quite a lot you know.

Jacqueline's being seated out of sight at the back of restaurants can be understood as an act designed to avoid a public view not only of fat people but also of (their assumed) uncontrolled eating. The cultural horror of 'uncontrolled eating' is undoubtedly associated now most strongly with those deemed 'too fat'. But it also has a considerably longer genealogy. A moral requirement to control bodily desires can be traced through from Christian practices of, for example, fasting and self-flagellation to the Cartesian dualist view of personhood that divides mind, will or spirit from body and that continues to inform a plethora of Western cultural ideas and

practices (Bordo, 1993, Malson, 1998). Within this framework the body becomes constituted and experienced as alien, eruptive and disruptive: it requires the mind's control. Eating thus appears as a bodily and therefore dangerous, alien desire, as the mind's failure to properly control the body. This cultural image of eating as uncontrolled bodily desire which underpins Jacqueline being seated at the back of restaurants can also be seen to mobilise 'eating disordered' practices such as self-starvation and binge/purging:

Nicki: I know that you have to eat to live but um (.) when at the time it seemed like an awful thing to do /H: mm/ and re' like a disgusting thing to do.

Zoe: I would just run into the like kitchen and like four o'clock in the morning, like have a bowl of cereal, like *two* muffins and like toast, like and would eat so much and then I couldn't like, I felt like I had eaten half of it before I'd even realised what I was doing. You know /H: mm/ and I was like, you know, this is so weird [...] my body was just eating it before my mind could /H: could think about it/ was awake enough to stop it from doing it.

Michelle: A cream cake can be really threatening and frightening [...] I know that food's got a lot of power over *me* because it I start (.) if I start eating and sort of (.) if I don't have that control then I could quite easily (.) blow it.

Jane: I just wanted to rid of all this weight an' /H: right/ (.) it made me feel I was better cos there was less fat /H: mm/ as if there was less/H: mm/ less bad [...] I just wanted to get down to like a stone or something.

The moralistic construction of bodies as eruptive and requiring control and of eating as therefore a disgusting bodily urge and as a failure of the mind's control can, we would argue, be viewed as a culturally embedded understanding which contributes to the production of *both* anti-fat discrimination and 'eating disordered' practices. It is part of the cultural palimpsest behind Rick's and Don's avoidance of eating in public, Jacqueline's being seated at the back of restaurants and the cultural sanction against 'a fat person walking down the road eating a doughnut'. But it is also behind Nicki's and Michelle's self-starvation and Zoe's experience of binge/purging. In popular, academic and clinical discourses uncontrolled eating is clearly associated with fat bodies, not thin bodies, but the abject cultural imagining of uncontrolled eating is implicated in the experiences and practices of those deemed 'too thin' as well as those deemed 'too fat'.

Conclusion

To summarise, body weight represents one of the most culturally significant aspects of appearance. While 'too fat' bodies are clearly denigrated and 'too thin' bodies idealised as well as pathologised, both are

imbued with a plethora of cultural meanings relating to aesthetics, gender identities, moral worth, health, good citizenship and so forth. As we have sought to illustrate above, this 'collective knowingness' (Murray 2005) about body weight significantly shape the lived experiences and practices of those deemed 'too fat' or 'too thin. And, in the context of the early twenty-first century where appearance is so vociferously prioritised, where body weight is so prominently represented as *the* index of health and health is presented as a matter of individual responsibility, this matrix of meanings accruing to bodyweight undoubtedly also shape, though less dramatically, the experiences and practices of most individuals regardless of their BMI. Messages that urge us all to maintain or strive for medically sanctioned body weights and watch what we eat are now near-ubiquitous but are, we have argued, also potentially harmful. They re-produce the commonsensical 'truth' that thinness and weight-loss are inherently good and thus occlude their potential detrimental effects not only of fat-phobic discrimination but also of, for example, malnutrition, reduced bone density (Aphramor 2008), deterioration in mental health (Kiefer et al. 2000) and disordered eating practices (e.g. Bordo 1993, Austin 1999, Burns, Gavey 2004, Rich and Evans 2005, Wooley and Garner 1994). As Burns and Gavey (2008) assert the discourses that construct any weight gain as potentially dangerous and weight-loss as always healthy also produce a rationale that allows for problematic dietary practices like purging to be constructed as healthy. As such, the discourses intended to promote healthy lifestyles may also mobilise practices that can be (mentally and physically) harmful to individuals of any size.

This argument that diets and weight-loss can in fact be harmful has led to an alternative approach to health promotion: "Health At Every Size" (HAES) (e.g. Miller 2005, Aphramor and Gingras 2008, Liebman 2005, Miller and Jacob 2001) which maintains that health is possible for people of any size and calls for a focus on increasing health by promoting healthy eating (not to be confused with weight-loss diets) and exercise, regardless of body weight. Thus, rather than focusing on promoting weight-loss for the 'overweight' and 'obese', HAES seeks to promote healthier lifestyles (rather than weight loss) for all. The approach thus avoids the automatic construction of 'fat' people as health-villains and at the same time recognises the possibility of unhealthy lifestyles amongst thin/slim people. Thus, in contrast with weight-focused health promotion, HAES also avoids sanctioning problematic weight-loss practices as beneficial since it rejects the notion that 'slim is always good and fat always bad'. It thereby also disrupts our 'cultural knowingness' about body weight where gendered, aesthetic, moralistic and health-related values all converge to produce the fat body as abject and which are arguably re-articulated and endorsed in contemporary mainstream health promotion (Riley et al., 2008; Gard 2005; Lebesco, 2009). The HAES approach may provide a solution to the seeming dilemmas of untangling the conflicting and complex evidence regarding the relationship(s) between health and weight (see Gard, 2009) and of promoting health without creating the iatrogenic effects of fat-phobic discrimination, 'disordered eating' and widespread body-dissatisfaction and distress outlined above. The HAES representation of health as independent of body weight and its emphasis on 'healthy lifestyles' (for people of any size) rather than body weight will no doubt

have little effect on aesthetic imperatives to be slim or on many other cultural values accruing to body weight but it may at least mitigate some of the pernicious ways in which 'cultural knowing' about body weight shapes people's lives.

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