This is the published version:


Available from Deakin Research Online:

http://hdl.handle.net/10536/DRO/DU:30015892

Every reasonable effort has been made to ensure that permission has been obtained for items included in Deakin Research Online. If you believe that your rights have been infringed by this repository, please contact drosupport@deakin.edu.au

Copyright: 2006, University of Hull
Producing the ‘unhealthy other’: School lunches, obesity and governmentality

Deana Leahy and Lyn Harrison
Deakin University
Victoria, Australia

Contact details:
Deana Leahy
Faculty of Education
Deakin University
Burwood Campus, Vic. Australia
Email: dleahy@deakin.edu.au

DRAFT ONLY: PLEASE DO NOT CITE WITHOUT AUTHORS’ PERMISSION
Abstract

Using theories of governmentality and risk, this paper explores the often overlooked tensions and contradictions that arise when schools are incited to become ‘settings’ for health promotion. In this paper, we focus on two examples of pedagogical strategies that have targeted children’s nutritional and exercise needs. A discourse analysis of curriculum, programs and pedagogy related to school lunches and nutrition in general reveals that current Australian initiatives, are underpinned by biomedical and individualising knowledges and practices. This has become a real tension in the health education field, given that the mandate for a socio-cultural focus on health and health behaviours has seemingly been displaced by a reinvigoration of hyper individualising practices. Our paper will interrogate this tension by using post Foucauldian insights to suggest that any attempt to shape people’s behaviours or capacities is embedded within a ‘governmental assemblage’ of hybrid discourses, that compete, align and/or contradict (Dean, 1999; Rose, 2000). The paper takes up the notion of assemblages and maps the organisations and subsequent knowledges that are circulating in the nutrition field and discusses the implications for program development and classroom practice. In particular we argue that contemporary discourses ‘coagulate’ to produce an ‘unhealthy, immoral other’ within pedagogical moments, and that there are ethical implications for this in how children come to understand themselves, others and “their duty to be well” (Greco, 1993: 361).

Introduction

The proliferation of initiatives targeting school lunches and young people’s eating behaviours is part of an all too familiar and enduring pattern of crisis fuelled responses in school settings, and health education more broadly. The crisis of the moment in Australia is childhood obesity. Previous crises have elicited similar responses and over the past 20 years we have witnessed a succession of panics that have powerfully shaped policy and practice in schools. These include for example, HIV/AIDS, drug use, mental health and youth suicide. We are not suggesting that these health issues are not significant for those who suffer negative effects. However like others in the field (for example Gard, 2006, Gard and Wright, 2001) we are concerned about how such panics fuel particular responses and interventions that to our minds, are deeply troubling and potentially dangerous.
In order to begin to analyse such a proliferation of initiatives, we draw from the later work of Michel Foucault (1991) on government, as well as those who have drawn on the insights afforded by his work. The vast body of literature and analyses of work on governmentality offers the field, we believe, a very generative theoretical framework with which to interrogate contemporary initiatives and concerns related to childhood obesity.

Foucault’s governmentality thesis is complex and extensive, and a full review of his work, and those who have contributed to the governmentality field, is beyond the scope of this paper. Briefly however, the field of governmentality is broadly interested in how political regimes seek to govern populations, and how strategies or technologies of government have changed over time reflecting emerging political and economic imperatives (Dean, 1999). According to Foucault (1991) the project of government is very much tied to the ‘conduct of conduct’ and how agencies and organisations seek to guide and shape the conduct of populations to align with political imperatives and obligations.

Drawing on Foucauldian writings on governmentality, Dean (1999:2) suggests that “the term governmentality seeks to distinguish the particular mentalities, arts and regimes of government and administration that have emerged since ‘early modern’ Europe”. Drawing from Foucault, he suggests that techniques of government comprise of any more or less calculated and rational activity, undertaken by a multiplicity of authorities and agencies, employing a variety of techniques and forms of knowledges, that seeks to shape conduct by working through our desires, aspirations, interests and beliefs, for definite but shifting ends and with a diverse set of relatively unpredictable consequences, effects and outcomes (1999: 11).

As previously discussed, the art of governing has changed over time in response to changing economic and political structures, and thus techniques of government, forms of
knowledge and the type of imagined citizen have altered accordingly. Referring to the present moment Rose suggests that the project of contemporary governance is primarily concerned with seeking “to foster and shape such capacities so that they are enacted in ways that are broadly consistent with particular objectives such as order, civility, health or enterprise” (Rose, 2000: 323). Government here emphasises practices of the self and thus can be understood according to Foucault as a ‘contact point’ where technologies of power, or domination, and technologies of the self interact (Burchell 1996: 20). Foucault describes ‘technologies of the self’ as those practices of the self whereby subjects constitute themselves in interaction with technologies of power. Thus these technologies:

permit individuals to effect by their own means or with the help of others a certain number of operations on their own bodies and souls, thoughts, conduct and way of being, so as to transform themselves in order to attain a certain state of happiness, wisdom, perfection, or immortality (Foucault 1988: 18).

It is the ‘help of others’, within the project of governmental self formation (Dean, 1995), that we are particularly interested in exploring in this paper in relation to childhood obesity. Specifically we are interested in interrogating how the help of others functions within contemporary arts of government, and what are the subsequent effects for schools and their communities.

**Governmental assemblages and dominant knowledges**

Given the imperatives of contemporary governance, it should come as no surprise that governmental spaces, in this case schools, programs and curriculum are ‘assembled from a complex and hybrid range of technologies’ (Rose, 2000: 323) and ‘enacted via a whole range of organisations, a whole variety of authorities and lash ups between diverse and competing bodies of expertise’ (2000: 323). This enlisting of the ‘help of others’ has significant consequences for programs and their effects.
Currently within Australian initiatives it is possible to identify many organizations that constitute the field. For example in a review of policy, programs and curriculum we have identified the following as being active in contributing to the ‘assemblage’ of discourses on obesity:

- Diabetes Institute
- Heart Foundation
- Life Education Van
- Local farmers
- ACHPER
- See Saw Foundation
- WHO Collaborating Centre for Obesity Prevention and Related Research and Training
- Centre for Physical Activity and Nutrition Research
- University Faculties of Health Sciences
- Vichealth

This list is certainly not exhaustive and at the local level there are even more ‘players’ involved, including professionals from community health centres, employees from WeightWatchers or similar businesses, local doctors, gym owners, canteen representatives, and television personalities to name but a few. The list of contributors includes both public and private organisations that offer, and draw from, a range of ‘expert’ (largely bio-medical) knowledges to inform programs in schools. The expert knowledges that circulate, and that are deployed, are central to the project of governmentality (Rose, 1989). Given what Rose has suggested about the contemporary make up and assemblage of government, it is not surprising that so many organisations and individuals are involved in school based health promotion. It is also important to note that current frameworks informing best practice insist on making appropriate community links (see the Health Promoting School (HPS) model as an example of this). This reflects modern forms of thinking about government and simultaneously produces ways of doing governmental work.
As we mentioned earlier, we are concerned about the piling up of ‘expertise’ coagulating around school based interventions, in this case children’s lunches and nutrition. Although there are numerous discussions to be had about this, we are particularly concerned with two significant effects. The first relates to the ways in which certain organisations, and related knowledges are tending to occupy the field. As a result we are witnessing a revitalization of individualizing practices in schools, regardless of any directive that we recognize the social origins of health and calls to abandon victim blaming. We would suggest that this has much to do with the dominance of the notion of young people at risk [of obesity in this case], and the ways in which certain research and knowledges both produce and sustain such perspectives as well as the actions that are often called for.¹ The second effect pertains to the resultant messiness created by such an ensemble of diverse bodies of expertise, knowledges and individuals. Rose (2000: 32) has suggested that such messiness should not be surprising given that within governmental assemblages:

current control practices manifest, at most, a hesitant, incomplete, fragmentary, contradictory and contested metamorphosis, the abandonment of some old themes, the maintenance of others, the introduction of some new elements, a shift in the role and functioning of others because of their changed places and connections with the ‘assemblage’ of control (2000: 322).

Dean (1999: 29) has also alluded to the fragmentary nature of current attempts at regulations and suggests that:

Practices of government cannot be understood as expressions of a particular principle, as reducible to a particular set of relations, or as referring to a single set of problems or functions. They do not form those types of totalities in which parts are expressions of the whole. Rather they should be approached as composed of heterogeneous elements having diverse historical trajectories, as polymorphous in their internal and external relations, and as bearing upon a multiple and wide range of problems and issues.

¹ For those who are interested in governmentality studies and practices of self formation, the ‘turn to risk’ is significant (Turner, 1997). Though this is not the focus of the paper, it is however necessarily implicated.
What might this then mean for school based health promotion? The best way for us to highlight our point here is to provide an analysis of pedagogical practices in one Australian classroom (though there are numerous examples of such assemblages, and subsequent messiness, evident in current curriculum documents and support materials, program initiatives, media advertising etc). We use data gathered by the first author for her PhD, together with one widely available classroom resource. We realise that the focus of the conference is on school lunches. However, the provision of school lunches, as it manifests in the United Kingdom, is not mirrored in the Australian context. Our focus on pedagogical approaches to nutrition education is apposite however as the common goal is to encourage children to make healthy eating choices and, we would argue, similar technologies of the self prevail in both settings.

We have selected two pedagogical strategies or devices for analysis that we believe will clearly highlight our concerns. Both devices effectively mobilise a ‘pedagogy of disgust’. One readily available classroom resource named The Gobbiliser, deploys expert knowledges to enable students to evaluate their daily nutrient intake. The other selected strategy, which is a common pedagogical device in health education, is classroom discussion. We argue that this strategy commonly relies on the production of an ‘unhealthy other’ (in this case the ‘obese’ other) in order to persuade students that they are always at risk of becoming ‘like them’. This of course does not just happen in schools as, for example, media quite effectively deploy this pedagogical strategy as well. Here, the mass proliferation of knowledges about obesity, the ‘piling up’ if you like, actually contributes to their power to persuade us all that we are ‘at risk’ of becoming.

---

**Pedagogical Device Number 1**

*The Gobbiliser*, available on CDRom, was developed by the Department of Education in Victoria, Australia. This resource is an adaptation of a common classroom strategy that has been utilised in the field of nutrition education for some time but has the added advantage of quirky graphics and animation designed to appeal to students. The Gobbiliser asks students to select foods from a range of meals and then click on a swallow icon in the shape of a large mouth. Students then receive a 'read out' of the percentage of RDI attained from the selected foods. Students can compare and contrast nutritional requirements across age and gender. What is more, if students feel they have had too much of a particular nutrient, perhaps fat, they can hit the regurgitate button and vomit the food up, giving them an opportunity to start their daily eating again. Using expert knowledges students can engage in particular practices of self formation, that allow them to monitor their food intake, know when they may have overdone it, and then if they choose to, they can utilise another technology of the self - regurgitation. What is being encouraged here is a particular regime associated with eating, and purging that we suggest is not unlike practices related to bulimia. A regime that we believe health education classes should not be contributing to in such ways. We would also suggest that taken on its own, without a broader context of ‘discourses of disgust’ related to the ‘obese other’ (loss of control, laziness, moral bankruptcy etc) and the looming risk of becoming an unhealthy other, *The Gobbiliser* would lose much of its momentum, meaning and desired effect.

**Pedagogical Device Number 2**

The following excerpt is from classroom observation notes taken by the first author during a Year 10 Health class. This data is part of a much broader set collected in Health Education classes during PhD fieldwork over a 12-month period in a public girl’s secondary school in Victoria, Australia. Examples such as this, although only indicative of one pedagogical moment, are part of the broader pedagogical assemblage that made up teaching and learning in these health education classrooms. Similar versions of the pedagogical strategy described below were evident across content, topics and different classrooms and teachers and indeed these types of strategies were a familiar feature.
Ms Hill: Okay what is wrong with being unfit?

Class: [all at once] you get fat, look like Homer Simpson, yuk, you could die

Ms Hill: So well if you don’t want to look like Homer it’s important to exercise to keep fit.

[Year 10 HPE class]

The cartoon series *The Simpsons* has achieved iconic status in many parts of the world and the head of this family, the overweight and bumbling Homer is by now a familiar figure. Homer is foolish, has personal habits that make you cringe and is often the butt of jokes and a figure of public humiliation - all largely brought on by himself. A cultural studies analysis of *The Simpsons* is not our purpose here but it is worth emphasising just how much this series has entered into the lexicon of popular culture. It is precisely because of this that a group of Year 10 students in Australia can hail Homer Simpson as the antithesis of what they want to be. Not only is he overweight, he is extremely lazy and his actions (including his relationships with others) and his personality suggest that he deserves everything that befalls him. In other words Homer personifies the ‘unhealthy obese other’ we referred to earlier. The girls’ reference to Homer Simpson makes so much sense to this teacher that she does not even question their example. Instead, she uses this as a pedagogical device to reinforce the health message she wants to convey.

The dark side of this exchange of course is the production and reproduction of stereotypes and victims to be blamed - to be marked as ‘other’ and therefore fair game for ridicule.

We also made the point earlier, following Rose (2000), that governmental spaces are formed from a complex and hybrid range of technologies. In this short excerpt we see popular culture merging with (unacknowledged) medical knowledges - if you are unfit ‘you could die’ - to reinforce the health message: unfit=obese=(possible/probable)death. That one does not necessarily follow the other goes unquestioned. The elements that

---

1 Ms Hill is a pseudonym.
make up this discourse are messy - heterogeneous and polymorphous as Dean describes (1999).

**Conclusion**
In the two pedagogical examples we have provided here we have attempted to illustrate how classrooms, and school-based interventions more generally can be understood as vehicles for governmental assemblages that are comprised of both expert and hybrid risk discourses. The power of these discourses to name and blame and to focus almost solely on individual behaviour change (despite the rhetoric that would suggest a more structural approach, or exerting undue influence where more socio-cultural and collective approaches do exist) has profound ethical implications that should give us all pause for thought. We recognise that these ethical dilemmas are not lost on a large number of teachers and other health educators. In some senses it is a case of being damned if you do [intervene] and damned if you don’t [intervene]; what Lew Zipin (2005), writing about another educational context and another not unrelated set of educational/ethical dilemmas, has described colourfully as an ‘exquisite tension’.
References


