

“Fat Eats: A Phenomenology of Decadence, Food, and Health.” In *Food and Everyday Life*, Ed. Thomas Conroy. New York: Lexington Books, 2013. [forthcoming-scheduled 2013 publication, invited]

Fat Eats: A Phenomenology of Decadence, Food, and Health

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Abstract

This chapter addresses food through an examination of overeating. Considering the popular thesis that dieting is required for the overweight and obese as a path to greater health, it takes up a phenomenology of eating. One finds that eating is preceded by consumer practices in the developed world. When one finally eats, much of consumption is hidden from our awareness and it is only with externally provided tools that one can monitor weight day to day. Examining the arguments of the phenomenologists Maurice Merleau-Ponty and Drew Leder, this chapter explores the nature of eating and its differences from other modes of embodiment. Alongside Richard Shusterman, this chapter examines how we could imagine a food restricting as a “somaesthetic” practice. In conclusion, the chapter points toward thinking of eating as less a matter of hand to mouth activity that is backgrounded by various habits and choices, and more a complex situation that requires social, economic, and political changes to really transform individual bodily experiences.

Introduction

Food not only sustains our existence on this earth but it plays a central role in family and social life, in culture, and in everyday moments of pleasure. Breakfast, lunch, and dinner break up days and provide a common time in which to meet others and enjoy food together. Yet, the populace’s relationship to food is increasingly fraught with anxiety over obesity and being overweight. In the developed world, and increasingly in the rest of the world, it is difficult to avoid the news of growing waistlines and the correlated health conditions associated with obesity. Food has become inextricably intertwined with discourse about fatness.

In this chapter, I focus on food consumption by examining overeating as an assumed cause of overweight and obesity. But instead of approaching overeating through an appeal to exclusively biological or social forces, I examine the nature of eating phenomenologically. With the aid of the phenomenologists Maurice Merleau-Ponty, Drew Leder, and Richard Shusterman, I find that eating remains distinctly different in kind from other bodily practices that have been

more extensively examined by phenomenology. Eating is quickly drawn under a veil by the hiddenness of digestion, thus making eating far less accessible to traditional phenomenological inquiries. Weight gain or loss is an incremental process unable to be identified as such without socially engineered tools and charts. In addition, the first act that precedes eating in the developed world is one of purchasing products in a consumer field—be it a supermarket or a restaurant. One might have success with deliberative changes in movement associated with weight loss—exercise and modification of eating rituals—but without a modification of the situation of consumption, little long-term success can occur without modifying the situation of eating, not just the eating itself.

First, this chapter addresses the calls for diets and the failures of dieting. Then, it provides an overview of phenomenology, the philosophical tool used to explore eating. One finds that eating is preceded by consumer practices in the developed world. When one finally eats, much of consumption is hidden from our awareness and it is only with externally provided tools that one can monitor weight day to day. Taking up the arguments of the phenomenologist Richard Shusterman, this chapter examines how we could imagine a more engaged phenomenological practice that encouraged behavior modification, such as diet and exercise, and not just analysis. However, finally this chapter concludes that given the nature of eating, such calls for modification pass over the primary differences between eating and other bodily activities. Instead, it points toward considering eating as less a matter of hand to mouth activity that is backgrounded by various habits and choices, and more a complex phenomenon that requires social, economic, and political changes to really transform individual bodily experiences.

Dieting

A share of current obsession with fatness arises from the extraordinary proliferation of celebrities with extremely managed, and often photoshopped, bodies. These bodies are often far thinner than the average citizen, and they are also sculpted and modified in atypical ways. They have flawless tight skin and anatomical modifications that are rare for even the average active person—flab free thighs and arms in women and six-pack abs in men. Compared to such bodies, it is difficult for many to not look at their own with a sense of failure. Eating becomes an exercise in willpower to resist and monitor food in order to obtain a certain aesthetic.

Beyond the idea that food will lead to a body too fat to be considered attractive is the idea that fat bodies are unhealthy bodies. Weight loss is strongly moralized as being the right thing to do for yourself and those that you love. Advertisements for weight-loss programs often include testimonials that stress being able to “play with the grandchildren” or “knowing that I will be there to take care of them.” This discussion is bolstered by research that documents that persons with high weights, in particular those classified as obese, also have related poor health conditions. Heart disease, hypertension, diabetes, sleep apnea, asthma, fatty liver disease, osteoarthritis, and polycystic ovary disease are considered common comorbidities with obesity and have shown improvement when individuals have lost weight.¹

Given these concerns and the rising rate of overweight and obesity over the last several decades, a strong push has existed to consider obesity a public health crisis.² Former U.S. Surgeon General David Satcher summarizes the position of the government in 2001 succinctly by saying “overweight and obesity may soon cause as much preventable disease and death as cigarette smoking.”³ This view has remained stable since 2001: first, obesity increases disease and death, and second, obesity is a preventable illness. The comparison to smoking highlights overweight and obese individuals as suffering from preventable behaviors. The campaign

against smoking in the U.S. is a victory for public health advocates in that various laws, taxes, and media campaigns are seen as having been instrumental in reducing the number of smokers. A policy-directed war against obesity, the reasoning goes, would yield similar positive results. The popular press has taken up governmental and medical recommendations as evidence of the need to encourage keeping our bodies in check by maintaining a healthy weight much as one might advise a former smoker to watch out for sliding back into the habit. If obesity is equated with being a two-pack-a-day smoker, then having a slightly pudgy body is like being a moderate smoker. The obvious problem is that one can reasonably recommend quitting smoking, but cannot recommend quitting eating. Despite forced parallels significant differences exist between the act, pleasure, and practice of smoking and that of eating.

Few in the developed world would be surprised to find out that fatness is considered unhealthy. While significant debates exist around what to eat, when, and how, the general idea that one needs to consume less food, particularly if one is overweight or obese, is as ubiquitous as the call to stop smoking. A new disease or harmful drug interaction calls for public health policy to inform the public about an issue of which they were previously unaware. But, due to the constant repetition of fat as “unhealthy,” there is little need to tell the public of this association. Rather, it is to inform the public about *how* to modify behavior. One should focus more explicitly on that hand to mouth action—what is on the plate, how much one puts in one’s mouth—in order to obtain a smaller and healthier body.

Yet, many who invest in the belief that they need to change their eating to be smaller and healthier fail. As Oprah discusses frequently in her magazine, *O*, of all the things she has achieved, this one thing, weight loss, is what remains the most elusive. As a successful businesswoman who has overcome enormous odds, Oprah is not someone who lacks willpower

or agency. Why is weight loss so challenging? How could simply eating less be more challenging than starting a TV news network? Taking a phenomenological attitude toward eating can help explore the nature of eating as an embodied practice. First, one needs to explore the common attitude that one component of fatness is the simply eating too much and what the fat person needs to do is to restrain her consumption. A phenomenological approach to embodiment, where the body is seen as situation, helps explain why dieting is so elusive if the actual act of dieting, simple behavior modification, appears relatively easy. This approach, best expressed by the philosopher Maurice Merleau-Ponty, avoids the poles of either thinking of the individual as totally free in relation to eating (the individual is in control of her consumption) or one who is determined (the individual has been shaped by genetics and environmental cues to consume in a particular fashion).

Diets rarely work. The formula that is oft-repeated of reducing calories and adding activity is largely ineffectual for most. Long term studies on dieters who were given the best guidance, counseling, and support produce minimal if any weight loss. For example, the Women's Health Initiative study of almost 50,000 women found that after seven years on a low-fat diet rich in vegetables and fruit, they lost on average one pound.⁴ Many people evidently wish to lose weight, but few do even when they have taken steps to engage in the behaviors that are best associated with weight loss. The obvious question is—why do diets fail? Do dieters lack the “right” diet, as the advertisements for any particular diet will claim? Are our bodies so hard-wired to retain weight that they will subvert our attempts in the end? Is dieting itself the problem and instead the overweight and obese should engage in behavior modification ritual x, y, or z?

If it were only the case that diets did not work, one might suggest that in the rare cases when they do would justify the expense and waste for the many persons for whom diets are

ineffective. However, diets have been linked to even worse health outcomes than obesity itself. The high failure rate of diets and the increasing rates of eating disorders provide us with additional evidence of the deleterious effects of obsessions over size.⁵ Another large study found that diets not only fail to produce weight loss, but they encourage weight cycling, where the individual loses and regains the weight. This process is more deleterious for one's long-term health than being overweight. The authors conclude, "The benefits of dieting are simply too small and the potential harms of dieting are too large for it to be recommended as a safe and effective treatment for obesity."⁶ Despite such studies, the overwhelming voice in the mainstream media continues to maintain the need for weight loss amongst the obese and the overweight.

In addition to weight cycling, diets are correlated with eating disorders. The National Eating Disorders Association reports that around 10 million women suffer with eating disorders such as anorexia or bulimia with the highest rates among girls and young women.⁷ What is alarming about the lack of treatment for persons with eating disorders is just how dangerous having an eating disorder is. Anorexia nervosa has the highest mortality rate of any psychiatric condition, including schizophrenia and bipolar disorders; but the funding for addressing or treating it pales in comparison to that for less common but more widely publicized conditions.⁸

The idea that obesity is a preventable disease would also suggest that anorexia is likewise under the control of the individual and hence, unlike a "real" disease such as Alzheimer's, the sufferers should be able to start eating normally. It is this charge that lays at the heart of the promotion of dieting as a path to weight loss. The implicit theory is that eating is a matter of the individual's will. Of course, one acknowledges the way one eats is greatly shaped by one's upbringing, environment, and possibly one's biological make-up, but ultimately it is about a set

of the individual's *choices*. The focal choice is to modify what one puts in one's mouth. Certainly, all acknowledge that previous choices precede eating, such as shopping, but these too are choices of behavior modification. The eating disordered person is thus a person who is engaged in a series of bad choices, she is not a person, like a schizophrenic, who is determined to be a certain way. Compulsive overeating, anorexia, or bulimia are simply seen as kinds of bad eating habits gone array and not needing the serious medical attention given to other conditions.

The diet and weight-loss industry wouldn't make sense in its current formation if one was destined to be a certain weight in the way that one might be destined to have a brain tumor. Even when one presents the overwhelming evidence that diets fail and that diets are linked to extremely poor health outcomes with weight cycling and eating disorders, there remains a stubborn insistence that still one must engage in behavior modification. Thus, at the core of this problem there is an issue of the individual's agency. The rhetoric argues that certainly a compulsive overeater faces greater challenges than someone who eats too much candy once in a while, but in principle it is the same issue. One just needs to change old habits and form new ones. It is possible that the individual has not been presented with the right tools, such as the right diet, or that she has other pressures upon her that limit her agency, e.g., family, work, but ultimately it *must* be possible for her to alter her eating to lose weight as an individual project.

Part of our resistance to letting go of dieting is that people do lose weight on diets. This does mark the "disease" of obesity and overweight as different than Alzheimer's as we do not hear of stories of people through the force of will overcoming Alzheimer's. Take, for instance, the famous case of Oprah in 1988 when she walked on-stage carrying a wagon with 67 pounds of fat to represent the weight she had lost. In such a case, , the weight loss is dramatic and celebrated. But even with all her money and trainers, Oprah remains the typical case: she gained

back all she lost and then some. Thus, if it is the case that it is agency that caused the initial weight loss, the body appears to resist in a most curious and determined fashion. A common answer from the diet industry is that the right diet and exercise plan was not followed and the right mindset was not present. A recent book, *A Course in Weight Loss: 21 Spiritual Lessons for Surrendering Your Weight Forever* suggests that extra fat is a result of a type of spiritual problem and once one addresses the spiritual need in one's life, weight loss will follow.⁹

Such plans pit the mind, or spirit, against the body. The body is a kind of voiceless symptom of one's lack of control. If it is too big, then it is concluded that one has lost one's agency over it. One commits to a path to modify hunger, to shape desires, to limit excess and overindulgence. Given the tendency of the body to want more than it should have, constant vigilance is required. In the next section, I turn toward a discussion of phenomenology to help us understand why the theory of individual agency and free will in the hand to mouth activities that constitute eating might be at the core of our misunderstanding of food overconsumption.

Phenomenology

In order to consider more critically the continued investment in ideologies of freedom and control in the face of the empirical evidence of a failure of such models, phenomenology offers a valuable method. But, phenomenology is not an everyday part of discourse on eating and needs some introduction. Phenomenology is the study of how things appear to a conscious subject. It can also be described more conveniently as the study of experience. A phenomenologist would ask "How do I perceive? How do I understand time?" as opposed to the questions "What is the nature of object x? What is time?" The originator of contemporary phenomenology, Edmund Husserl, was initially concerned with issues that would appear to be

radically distant from the consumption of food. He was interested in the psychological and logical foundations of mathematics.¹⁰ However, in this pursuit, Husserl began to notice that one of the key issues that is often overlooked is the way in which one experiences something and how that experience shapes philosophical and scientific discourses about other issues. Much of what one experiences is not actually present at the moment of the experience but in some fashion has been habituated, or sedimented, in the minds. For instance, take listening to a melody. At any one moment one only hears a sound that is in-itself not the melody. If one thinks about what one hears, it is a series of notes. But when one hears a melody, such as the song “Row, row, row, your boat gently down the stream...” one “hears” the whole melody of that refrain even though at any moment one is hearing just one part, e.g. “row” of it. Why does one “hear” the whole melody? One is remembering, or “retaining” the past notes and anticipating or “protending” future ones. Hence in more experimental music one will “expect” to hear a certain resolution but be surprised to not hear it—an experience that for many “sounds” unpleasant or frustrating.

Husserl argued for the need to explore more deeply how things appear as phenomena in order to understand what is necessary, what is contingent, and what might skew our philosophical or scientific investments. One might naively say that one “hears” a melody, but upon more careful inspection, one should realize that it is more complicated. How does one figure out what is necessary and what is contingent? To do that, one has to adopt a phenomenological attitude and move away from the natural attitude. A phenomenological attitude is a specific kind of critical mindset. One must decide to describe experience without any investment in what is important, true, unimportant, or false. At first, this is counterintuitive since one would imagine the important thing is to be guided by a desire for truth. But, if one goes into

an investigation with a strong sense of what truth is or desires it too quickly, one might be blind to features of that experience that are critical.

Maurice Merleau-Ponty took up much of Husserl's challenge to philosophy and became most famous for his detailed analysis of the relevance of perception.¹¹ On the broadest of levels, stressing the importance of perception seems true but trite. Who denies that how one perceives things is very often the first way in which one encounters the world? Problems of perception are often seen as a subspecies of the problem of perspective (how I perceive something may not be the way you perceive something). The perspective problem seems to entail a type of subjectivism—and thus one wants to avoid perspectives when trying to find an objective account of the world and the beings that inhabit it.

But Merleau-Ponty stresses that his project is not merely to underline how perception is an important project for any psychology of the human, but that it grounds philosophical and scientific claims as well. This proposition is less obvious since often the perspective problem of perception is seen to hide the truth of reality to us rather than to reveal it. Very often the idea of being objective means trying to avoid all kinds of subjective problems. This is a challenge to all phenomenology that departs from experience, perception or otherwise, since experience seems so inevitably private and is inaccessible to the universalizing gaze of the scientist or philosopher.

Merleau-Ponty contends that it is true that certain “contradictions” arise when considering perception, but that these contradictions can be seen as part of the problem of trying to resolve experience into “pure being.”¹² In other words, the problem is the insistence that what can be truly known must be understood as existing prior to or outside of perception. Since all knowledge only comes through perception, one can never exit it to access being in-itself. The common objection to phenomenology is that it is merely a kind of introspectionism or at best a

part of psychology where one catalogues how one experiences. The phenomenologist replies that the ideology that condemns phenomenology to naval gazing is itself grounded in an assortment of naïve beliefs that are actually less “objective” because they are more ignorant of the biases that arise from experience.

Even if I try and imagine something “unseen” by humankind, say a planet deep in space, I find myself imagining it from a certain angle, the weightiness of my body drawn along even in the imagination.¹³ Certain aspects of perception are absent from me, such as the other side of the wall I am looking at, or the other face of the moon. But these “hidden” perspectives are present in the sense that they are what constitute my perception, in the way that the past notes of the melody, that I am no longer hearing, help me organize the current ones. How do I perceive the hidden objects? One answer would be to argue that I represent them—I imagine perhaps unconsciously the backside to the object in order to give it its fullness. But Merleau-Ponty argues that the other “side” is not a representation in my perception. “But since the unseen sides of this lamp are not imaginary, but only hidden from view (to see them it suffices to move the lamp a little bit), I cannot say that they are representations.”¹⁴ Much of Merleau-Ponty’s project is to uncover what these *hidden* but *not represented* parts of our perception are and how they shape our everyday and naïve understandings of perception, psychology, philosophy, and science.

In many ways, this process parallels other inquiries that endeavor to show that hidden prejudices shape what have the patina of being objective statements. For instance, overweight and obese job applicants are rated much lower in skills than their average weight competitors. This does not mean that the hiring committees explicitly possess anti-fat prejudices, but rather that they have been habituated in their way of seeing the world through an immersion in an anti-

fat culture.¹⁵ In the case of a phenomenology of the body, one can see how our views about agency in embodied experiences are not supported by examining more carefully how one lives in the world. One does not intellectually “conclude” that the wall has a backside, rather one’s own nature as being a body with multiple aspects and having long histories of experiencing walls has allowed one to habitually understand the other side of things. Much of one’s conscious experience is grounded by non-conscious, primordial experience that is meaningful without being characterized primarily as thoughtful.

Shop to Live

Merleau-Ponty’s approach avoids the need to resolve the contradictions among the aspects of eating that appear to be biologically determined, those that are socially constructed, and those that appear to be the result of a free will. Yet, eating is in certain important ways experientially different than Merleau-Ponty’s more famous modeling of perception and touch. While hunger may follow some of the model of perception as it situates me in the world and colors my perception of the world, satisfying hunger is unique. I need to represent hunger in order to either find food in a consumer culture or to modify my food intake in order to limit my intake. Visual perception and touch do not have the same relationship to satisfying and representation. One is always immersed in a tactile world and very often in a visually saturated one. One is not always immersed in eating. Eating must be pursued and in our culture that requires representation. Only after being pursued is hunger sated whereas merely opening one’s eyes can be said to “sate” perception. . The digestive process itself is hidden not just from others, but also largely from the self as it remains both more embodied and much more absent than the other side of the lamp or the surface of the moon. In principle, I, or others, could perceive the

other side, but no one experiences the inner workings of the digestive system other than through education.

What happens in a phenomenology of eating? First I am hungry. Once hunger makes itself known, the rest of one's endeavors increasingly become shaped by this insistent desire. Drew Leder notes that hunger is not only an internal twinge but something that brings the environment to the forefront, shaping it with its desire. Leder writes that such "biological urges color the perceived world, channeling attention and activity toward potential sources of gratification."¹⁶ Citing Merleau-Ponty's notion of operative intentionality, Leder describes how the hungry body projects itself outward.

But once I am hungry, food does not appear in my mouth as the world appears before me when I open my eyes. Indeed, a tremendous amount of action and decision making now must commence to satisfy my hunger. In my case, like many persons in the developed world, the hungry body must project its plans into deciding upon food to take from the kitchen, going to a restaurant, or going food shopping. The hungry body's projects are almost always consumption choices. I do not, nor do I know anyone, who entirely grows their own food. Even those of us who garden obtain a small fraction of our food from our gardens.

If I am at home and plan to stay home, I consider what I have available to me. The availability of food has required that at some point in the past I or another member of my house has bothered to imagine, represent, travel, shop, and pay for food and then transport it back and put it in the kitchen. For the overwhelming majority of persons in the developed world, obtaining food is not about the hunt, the search, or even the cultivation of crops or the raising of livestock. The hunt for food is a consumer's hunt. One travels to restaurants or stores to chose from an

extremely wide set of options. (Even if those options are produced by an increasingly small set of companies.)

The freedom that appears to be operative in eating is tightly grounded in the dizzying array of freedom one has when it comes to the purchasing of food and is less intrinsically tied to the actual eating of food. In the local grocery store down the street in Chattanooga, Tennessee, I am presented with aisle after aisle of food. I can get Kim-Chee, tomatoes, burgers, a hundred different kinds of cookies, frozen fish, tofu, steak, twenty kinds of yogurt, and so on. My choices are of course modified by packing and advertizing, by cost, by taste, by personal history, by nutritional concerns, by desires to please others, and by time pressures but it appears that regardless of the pressures on my freedom it seems very difficult to say I am rigidly determined to purchase this pasta sauce over that can of tuna. If I decide to go out, I have an equally wide range of food options from Indian to Tex-Mex, from inexpensive to pricey. It is this blurring of the line between shopping and eating that contributes to the theory that food consumption is about individual will and agency. When one talks about individuals choosing what they eat, one means individuals or some individual as a proxy has bought certain foods and those now purchased foods are available to eat. The primary choice is the consumer's choice. But turning to eating itself, one finds that much of the consumption of food remains beyond the individual's free will.

Open Mouths, Closed Stomachs

Once all the possible points for decision making have been negotiated and the food has been purchased and assembled or the restaurant venue has been chosen, one can commence eating. Certainly the texture and taste of the food are at the forefront of my awareness, but I keep

in the background the actual movements of my mouth while chewing and swallowing. In this case, there are some parallels to perception. In everyday, non-phenomenological perception I attend to the object of perception and not the perceiving. In eating, I attend to the taste and feel I receive from the food and not the machinations of my mouth and the rate at which saliva enters it to help break down the food. There is a kind of presence at a distance from the body in its chewing and swallowing that makes eating pleasurable. One wants to focus on the taste sensations in an aesthetic register, like when one hears music, one distances oneself from the feel of the chair, the rustling of the person next to you, the itchiness of one's skin. If those things come into awareness too forcefully one can no longer hear well. If one focuses on the activities of the mouth and throat movements, eating too can quickly become distasteful. If I start to think about my teeth mashing up the food, how my throat is pushing down the food, or how it feels slipping down the back of my mouth, I often lose the pleasure of eating.

Yet, despite this similarity, the sense of the situatedness of myself in relation to my object is much less apparent. I am far more conscious and aware of eating as eating than I am of perceiving as perceiving. In perception, the object reigns supreme and the perceiving requires serious philosophical focus if one wishes to focus on it. In eating, I am very aware of eating the entire time I am eating. This aspect of eating might also lead us to associate freedom with eating as one is more likely to forgive actions that have occurred under the veil of ignorance. It would be peculiar to say that the person who overeats was unaware she was eating as she might be unaware of snoring.

Thus, while in eating, unlike perceiving, the self is very self-conscious of the act of eating. After eating, the rest of the process requires representation to be understood. After the chewing and swallowing is over and the plate is pushed away, the internal organs enter the

picture and the thinking self is increasingly closed off to this experience. I cannot access the workings of my small intestine through phenomenological inquiry. In Leder's account of digestion, he notes that the visceral body—the digestive organs, the respiratory, cardiovascular, urogenital, and endocrine systems—are depth parts of bodies.¹⁷ They are not present to consciousness; they are also not controllable by the conscious self. I can only access them through an intellectual process of learning about my digestive system and representing it to myself. I cannot decide that a piece of fish that is disagreeing with my stomach shall henceforth be digested without further complaint as I might force myself through a difficult exercise class. Until the need to go to the bathroom presents itself, digestion occurs beyond awareness. Indeed, if I become aware after eating of my digestion, this is usually not a good sign signaling that I might be ill or the food might have been tainted. Leder summarizes “Unlike the completed perception of the proprioceptive body, our inner body is marked by regional gaps, organs that although crucial for sustaining life, cannot be somesthetically perceived.”¹⁸ My digestion displays an “it can” not an “I can” as I have been removed from the equation.

Now the loss of conscious power over my digestion is not a negative. After all, who would know what to do if one was in charge? Thank the body for knowing how to break down food and the liver for knowing how to filter. The degree to which obesity is caused by the overconsumption of food (a claim that is not evident in the research literature, but generally assumed to be true in public health mandates) requires that one addresses the way in which one comes to have a fat body. But, the end result, the fat body, is very far distanced from the consumption of food itself. Not only because food digestion occurs largely in regional gaps in awareness, but because weight-gain does not occur instantaneously. While one does live with the shape of one's body and that shape affects one's motility and possibly one's health, weight gain

is a gradual process. In order to draw lines and distinctions, one must use representational devices—the scale, the fit of clothes, or changes in one’s bodily statistics as measured by a medical professional. Most importantly these tools are socially constructed ones, ones that are learnt: for example from BMI charts and acceptable and unacceptable levels of cholesterol. I have no direct experiential access to my BMI as BMI. While some might have the symptoms associated with high cholesterol, one doesn’t experience cholesterol per se like one experiences a sound that is too loud.

The fattening body is very distanced from the lived body’s everyday experiences; it arrives slowly and when it has arrived is resistant to leaving. In the dieting world, these various tools and rulers of success and failure are essential to track progress because as with weight gain, weight loss is incremental. Without surgery, real fat loss is slow, so that one is often asking people with significant weight to lose to engage in a long-term set of policing procedures with regard to the buying, preparing, and consumption of food that will have no visible impact on a day to day experiential sense but will possibly, if followed, produce long-term changes. While any one act of food restriction seems well within our control, over time such control is illusory since it is determined by forces that far exceed the embodiment of moving hand to mouth.

Phenomenologies of Body Modification

In his book *Body Consciousness: A Philosophy of Mindfulness and Somaesthetics*, Richard Shusterman appeals to the way in which philosophers of the body, such as Merleau-Ponty and Michel Foucault, have preferred the “silent” body or the “polymorphism of pleasure” seeking body.¹⁹ Shusterman values their contributions, but sees them as too limiting and unable to really suggest pragmatic ways that one should live in the world and actually transform one’s

bodily movements through deliberative intervention. With Merleau-Ponty, one finds a detailed examination of the primordial underpinnings of how individuals *are* embodied; with Shusterman one finds a call for discussing how individuals *should* be embodied. However, while Shusterman pushes phenomenological inquiry in an important new direction, that of advocacy, it remains difficult to see clearly how to transform the practice of eating.

Shusterman argues that in the case of Merleau-Ponty, philosophizing about the body is valued, but the best manner in which to live is clearly to not overdetermine the primordial ways in which the body lives and moves in the world. For instance, Merleau-Ponty celebrates the body's wisdom in its interactions with the world and argues against the overly intellectual and freedom-laden accounts of action and understanding in scientific and philosophical theories. Merleau-Ponty strongly criticizes the representational schemes used by philosophy and science that reduce the body down to a physical thing and that fail to capture the way in which one actually lives.²⁰ However, Shusterman argues that while these criticisms are trenchant, Merleau-Ponty throws the baby out with the bathwater and tends to privilege modes of embodiment that are not representational. Merleau-Ponty prefers non-intellectual, non-explicitly driven behaviors and examines the natural way in which one perceives. Obviously a conscious deliberate effort to change one's eating habits requires that I take a distance from myself and make as much of my normally unconscious activities in the forefront of my mind as possible.

Shusterman suggests that Merleau-Ponty would find such behavior modification to interfere with the body's natural openness to the environment. Shusterman's account argues that Merleau-Ponty might be critical of the desire to take habitual modes of being and transform them based on a representational schema. For instance, is the plan to "eat less" based on a diet somehow inauthentically transforming my normal state of embodiment? Shusterman introduces

a contrary position and says that one should view such transformations of one's embodiment as "somaesthetics"—the willed and positive transformation of one's being-in-the-world.

Shusterman does not take up dieting except to associate it and its benefits with somaesthetics.²¹ He pays more attention to different kinds of deliberate body practice, such as yoga, the Alexander Technique, and the Feldenkrais Method (the latter he practices and is also a licensed therapist). These disciplines aim to make unreflective movements, such as bad posture, conscious and reflective to help cure the patient of a lack of motility or pain and additionally often are tied into a larger philosophy of the role of the body and its connection to others and the world.²² What is interesting in this account is the idea that phenomenologists not just advocate a more thorough approach to understanding embodied condition through research, but that phenomenologists should actually advocate particular activities. For instance, in practicing yoga, I transform my habitual sedentary body into one that is capable of movements previously impossible for me. In order to become better, I must be open to making previous, habitual movements, such as breathing, conscious and in the forefront of my mind. One could read Shusterman alongside many, but not all, healthy lifestyle recommendations as ways to make your habitual, unhealthy habits, such as overeating, into healthy ones.

Shusterman incorporates both an appreciation of the pleasure as well as calling for management of one's body in a conscious, deliberative fashion. In *Body Consciousness*, Shusterman points us toward such activities, but the text is a philosophical one and thus by no means a how-to manual. His brief discussions of weight modification simply group it as an unproblematic path toward health. More attention to the kinds of practices that are needed to obtain healthy food consumption calls for a broader phenomenological analysis of food overconsumption and the role of public health policy. In particular, I think a phenomenological

examination of food consumption highlights that overeating is not a typical embodied practice, such as movement, perception, or hearing. Food consumption is in the developed world a deeply and inextricably consumerized experience. Shopping or dining out are primary to eating—one of the most basic behaviors that sustains existence. An examination of food consumption shows it differs greatly from perception and willed movement. In perception, there are hidden aspects to the experience, but many can be brought to light with sufficient care. In movement, habit can sediment and remove from awareness aspects of one's actions, such as if one is slouching when one sits. But in movement, even more than in perception, one can draw the action to the forefront of consciousness—one can make sitting more conscious and deliberate—and thus modify one's behavior. In food consumption, the initial experience of moving hand to mouth is explicit, but the subsequent parts of consumption, digestion and weight gain and loss, are not only implicit, they are largely permanently hidden from any kind of phenomenological self-introspection.

Difficulties of Transforming Eating

Is the difficulty the overweight face losing weight an issue of improper embodiment? Has the person who tries to lose weight and failed suffering from some kind of “too silent” embodiment? Would calling her habitual behavior into the light provide the “solution”—making her more agentic and less condemned to repeat past over-indulgences? The literature on weight loss includes significant types of behavior modification plans that include “psychological” as well as “physical” alterations. Eating food becomes a matter of attentiveness. One is to celebrate one's body, to provide it with proper nutrition, and to learn and modify binge-eating as a solution to stress. Thus, popular discourse already includes some of Shusterman's recommendations.

How can one assert that there is something in the base bodily experience that clues one into the fact that one has consumed too much? Obviously one cannot simply emphasize “fullness” as fullness is a highly individual experience and there is no reason to expect that everyone who overeats has engaged in a practice that runs against a sense of fullness. Indeed, probably there is a lack of fullness in many and hence the desire to eat more. One must somehow adopt some socially given tools to determine what is enough—calorie counting, acceptable and unacceptable foods, portion control. This is quite different than engaging in a physical activity where one can measure success in the embodied experience. Have I run three miles successfully? Have I learned to breathe properly in yoga? In food restriction, the tools are not only not embodied, they also require other forms of representational systems—such as monitoring weight—that also are not felt by the individual directly. I no more experience as a bodily being the weight gain or loss of a half a pound than I experience that pizza is problematic. I might know pizza is not to be eaten based on externally provided guidelines, but while I am eating it I cannot find anything in that direct experience that tells me anything but that pizza is tasty.

Dieting overemphasizes agency and individual will in the face of a sedimented, habit body that needs to be shaped up and changed. Merleau-Ponty’s work on the body also draws our attention toward the ways in which one is not in control of one’s body like a captain of a ship. This isn’t merely because of sedimentation and habituation, but because there is no freedom-laden agency within the body that can stand apart from it and choose appropriate modification. I live in the world in a non-neutral manner; I am always invested and always connected to the situation in ways that make any kind of simple agency elusive. Merleau-Ponty cautions against seeing freedom as evidenced by moments of choice, and instead says that freedom is about a “field,” a “horizon,” a “manner of being in the world.”²³ In other words, freedom is not so much

about the mental ability to make a choice at a particular moment, but about the place in which one finds oneself. Decisions—shall I eat this pizza or not?—are never the locus of freedom, but rather my style of being, trajectories that I am embarked upon prior to any particular choice.

Merleau-Ponty writes that when our ways of being have received frequent confirmation, they have become “favored” and habituated. While he acknowledges that there is a possibility for change, it is unlikely given how much a part of our experience those behaviors have been:

But here once more we must recognize a sort of sedimentation of our life: an attitude towards the world, when it has received frequent confirmation, acquires a favoured status for us. Yet since freedom does not tolerate any motive in its path, my habitual being is at each moment equally precarious, and the complexes which I have allowed to develop over the years always remain equally soothing, and the free act can with no difficulty blow them sky-high. However, having built our life upon an inferiority complex which has been operative for twenty years, it is not *probable* that we shall change. (MP, PP, 442)

Why is changing what and how one puts in one’s mouth difficult? Because it isn’t the singular motion that is the challenge, but the way in which that action is the result of an entire constellation of behaviors, histories, and influences that have created a way of living. When considering overeating, one must be careful to not return to a sense of freedom that parallels the choice of salad dressing. One’s embodied freedom is deeply constituted by “complexes” or styles of being that are as much cultural experiences as they are physical ones. To assume one can simply stop overeating as one can learn yoga mistakes significant differences between these two activities.

As discussed above, the situation of eating is first experienced in a consumer setting for those in the developed world. This setting means that eating is preceded by purchasing and decisions that often are quite removed from the act of eating. When I chose what pasta sauce to buy, I am in an odorless aisle faced with glass jars. Eating the sauce requires finishing shopping and returning home and more often than not my purchases are for meals far into the future, not to

assuage pressing hunger. The modifiable behavior—hand to mouth—is preceded by consumer choice. This can help explain why sensible diet plans that are easily understandable and in principle possible to follow remain deeply difficult for most to follow. While certainly there is a bodily experience in the grocery store or at the restaurant, it is far removed from the actual act of eating until the food is purchased. Thus I am of the world—as a consumer in world where I do not produce my own food—and as such I am unable to simply modify my eating or analyze it as if this integral part of my behavior were irrelevant. The situation includes the economic, historical, linguistic forces that might seem to be quite removed from the reality of the moment.

The seeming obviousness of the problem of overeating is what prohibits us from seeing it fully. It is not simply a series of activities, like learning tennis, nor is it simply an embodied experience like perceiving. It is very much an activity that is situational and strongly constituted by non-embodied representations, weight charts, calorie counts, cost, time, advertising, purchasing power, and so on. While Shusterman's somaesthetics is appealing as a proposal to bring phenomenology out of its academic space and into a position of suggesting better styles of embodiment, it seems it would do little to address the complexity of eating.

Conclusion

In conclusion, one could call for a much broader somaesthetics that would tie into existing movements surrounding better food, better nutrition, and better eating experiences. One could call upon the slow food movement, critical discourse surrounding capitalism and the globalization of food production, participation in a CSAs (community supported agriculture programs), political advocacy for better, cleaner, and healthier food, calls for food gardens in more neighborhoods and schools to connect eating with the real production of food and to work against food consumption as holding little difference from purchasing an iPod. In such a way,

one could embrace Merleau-Ponty's ideas of freedom where the focus is not upon making good choices or engaging in good behaviors, e.g., eating the right food for dinner, but creating a better world, a better situation.

The call to modify eating to create a healthier populace could possibly be part of this healthier situation, but only if the focus remains on the living experiencing person and moves away from the overuse and overemphasis on representational schemas used to monitor the population. Charts of appropriate weights are less relevant than discovering if one's projects and plans are capable of being lived and fulfilled. Health thus would cease to be tied to passing certain tests and be more intimately connected with the broader environment one lives within. Eating would stop being tied to the continued investment in dieting, a failed project, and one could consider how to find less distance to food by being more critical of the consumer marketplace.

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²⁰ Shusterman, *Body Consciousness*, 57-58.

²¹ Shusterman, *Body Consciousness*, 26, 105.

²² Shusterman, *Body Consciousness*, 63.

²³ Merleau-Ponty, *Phenomenology of Perception*, 438.