OBESITY, HEALTH, AND THE LIBERAL SELF:
TRANSATLANTIC PERSPECTIVES ON THE LATE NINETEENTH AND LATE TWENTIETH CENTURIES

Conference at the GHI Washington, September 26-28, 2013. Co-sponsored by the Fritz Thyssen Stiftung. Conveners: Nina Mackert, Jürgen Martschukat (both University of Erfurt), Susan Strasser (University of Delaware), Uwe Spiekermann (GHI Washington). Participants: Nora Binder (GHI Washington and University of Konstanz), Bart Elmore (University of Alabama), Michael Gard (Southern Cross University), Deborah Lea Frommelt (University of Ulm), Jan Logemann (GHI Washington), Rachel Louise Moran (Penn State University), Ava Purkiss (University of Texas, Austin), Kathleen Robinson (University of Wisconsin, Madison), Ulrike Thoms (Charité — Free University Berlin), Katharina Vester (American University), Alice Weinreb (Loyola University Chicago), Psyche Williams-Forson (University of Maryland).

Obesity has been identified as a crucial social and health problem in the Western world and beyond. While doctors describe obesity as a modern epidemic and a major threat to individual health and well-being, obesity is analyzed in the humanities as a social marker, an element of defining and redefining social order. In public, obesity is often linked to the responsibility of the individual and the ability to remain a fit, productive member of business and society. The conference “Obesity, Health, and the Liberal Self: Transatlantic Perspectives on the Late Nineteenth and the Late Twentieth Centuries” sought to historicize these observations. The GHI invited sixteen historians, sociologists, cultural anthropologists, and specialists in American Studies to discuss this pressing contemporary topic and to compare the different cultures of obesity and obesity perception in Europe and the U.S. over these time periods.

Two brief introductions by Jürgen Martschukat and Uwe Spiekermann outlined an agenda for the presentations and discussions: For Martschukat, obesity is a key to understanding how society is organized and how the individual is integrated into power relations. But there is more than repression: Discussing obesity is always linked to the bigger topic of freedom and its consequences. In modern, liberal societies, a rational and efficient use of the body is preferred. Size is therefore a signifier: it marks winners and losers. Analyzing obesity can help to define moments of crisis and give a better idea
of the Westernization of the world and the fierce debates on the consequences of globalization. From a more historical perspective, Uwe Spiekermann saw obesity as a concept useful for questioning common ideas of historical linearity. Obesity is more than a narrative about the loss of our natural foundations or an inherent decline of mankind since industrialization. It shows history in action and sharpens our awareness of differences and choices. In contrast to doctors with their clear-cut distinction between healthy and unhealthy, the history of obesity allows us to realize complexity and contingency. Defining obesity is always about creating a hierarchy of different rationalities — that is, different knowledge regimes. The objective knowledge of experts and the subjective knowledge of people are in constant struggle, and public advice and guidance is always contested. Finally, obesity as a concept makes it possible to analyze human beings not only as cultural but also as natural beings.

The first panel “Obesity and Normativity,” chaired by Susan Strasser, focused on such differences between ideals and reality in exploring public health politics and the epistemology of natural sciences. Michael Gard, in his talk on “Schools, Public Health and the Responsible Self,” gave a taste of a book project exploring the crucial and long-lasting debate on liberality versus education in twentieth-century school systems in the U.S. Public health topics were introduced into schools from the 1930s to enable pupils to make their own responsible choices and to demonstrate the state’s determination to improve individual health. Although never uncontested, schools continue to hold this position today. Underfinancing, a lack of reliable teacher training, and pressure from companies led to an educational system driven by campaigns and based on corporate sponsorship. Gard gave many examples of the commercialization and commodification of today’s schools and stressed that public health education today is based on “illiberal” politics rather than a culture of knowledge-based decision-making by strong individuals. While Gard focused on teaching, Deborah Lea Frommeld discussed a basic and often unquestioned concept in medicine today. “Lipolitics: The Body-Mass-Index (BMI) as an Instrument of Power” started with the current significance of the BMI as a tool for categorizing people by weight and health. The index is closely linked to ideas of normality and abnormality that its creator, Belgian statistician Adolphe Quetelet (1796–1874), developed within the bourgeois mentality of the nineteenth century. Frommeld stressed the unintended consequences such hidden morality had in
the implementation and execution of several World Health Organization campaigns since 1997.

People have always questioned the normativity of companies and doctors, however. Panel 2, “Concepts of Obesity,” chaired by Jan Logemann, presented rather different ways to understand and deal with obesity. Nina Mackert, one of two colleagues whose travel expenses and accommodation were paid by the Fritz Thyssen Foundation, presented a case study on the Connecticut fat men’s club, whose members had to be wealthy men with a weight of at least two hundred pounds. Her paper, “‘I want to be a fat man / and with the fat man stand’: Fat Men’s Clubs and the Meaning of Body Fat in the United States around 1900,” showed that being fat could be regarded as a positive value and celebrated in opulent public banquets. Fat men, within the understanding of the clubs, embodied the promise of material success; the members perceived themselves as a climax of evolution. In contrast to the dominant discourse criticizing the appetite of these fat people as a threat to society, these happy ignoramuses understood fat as an expression of upward mobility in the new world. Obviously, fat has ambivalent interpretations. Fat, however, is not only a social marker distinguishing wealthy white men from the rest. As Kathleen Robinson demonstrated in her presentation “‘Militant Fats’: Contesting Obesity as Illness: NAAFA, and Its Heirs, 1969-2004,” the small National Organization to Advance Fat Acceptance has tried to change the public perception of predominantly female bodies since its foundation in 1969. Members have primarily been fat white women, who met regularly, published pamphlets, brochures, and books to promote “fat power,” and attempted to convince the public that fat is not unhealthy (although it can become so). Robinson discussed the often hidden background of the organization, which was supported by many men who loved fleshy women, but she made clear that the positive effect on society more than outweighed this: By questioning diet products and cosmetic surgery, they had some effect on regulating these new body-related markets.

This example already foreshadowed some aspects discussed in more detail in the third panel, “Obesity, Gender and Race,” chaired by Uwe Spiekermann. First, Katharina Vester examined the writings of French gastronome Jean Anthelme Brillat-Savarin (1755-1826) and English publisher William Banting (1797-1878) to understand how the idea that educated people could control themselves was developed. In her talk “Diets and Gender in Late Nineteenth-Century America,” she
showed how Brillat-Savarin presented dieting as a question of knowledge and rationality and thinness as a difference between males and females that had to be produced. Banting’s low-carb diet dismissed the idea of weight as a hereditary and developed individualized treatment for overweight people. Within this framework, obesity became an expression of laziness and lack of self-discipline. The U.S. market was flooded with self-help guides that celebrated the disciplined and thin self-made man. Dieting was to become a good habit of the educated classes. Thinness among women came to be perceived as a sign of strength, while being overweight came to be associated with greed. Restraint became an expression of white superiority, while overeating and overabundant body forms became loaded with racial connotations. The obvious racism of body discourses changed at the end of the nineteenth century, when modern physiology offered new explanations for moderate eating. Rachel Louise Moran referred in her lecture “The Good Wife and Mother does not Understand: Federal Expertise and Authority in American Nutrition Science, 1880-1935” to the modern (German) scientific approach of Wilbur O. Atwater (1884–1907). He publicly propagated a family economy in which women were to develop a rational plan for purchasing food and learn to cook in a male-oriented way. This approach was propagated and promoted by the U.S. Bureau of Home Economics after Louise Stanley (1883–1954) took on leadership of the institution in 1923. The agency established a balanced approach to promoting a slim body combined with common concern about motherhood. Advice literature highlighted the prestige and practicability of rational food choices without using quantification; rather, it tried to appeal to the public’s common sense. The rational consumer, it was assumed, needed to make purchases according to the findings of modern physiology, but she should also have some freedom in composing a proper and tasty diet. White women were the main addressees of such approaches, but there was a broad discourse on fatness in the African-American community at that time as well. Fat shaming, as Ava Purkiss pointed out in her talk on “Beauty Secrets: Fight Fat: Black Women’s Physical Culture, Health, and the Beautiful Body in the Early Twentieth Century,” was well established among black women before World War I. But while white women were supported in their efforts to remain or to become slim, female African Americans had to deal with a long list of obstacles, concentrated in the image of African American nannies and a lack of respect for thin bodies, which were often associated by the (white) police with prostitution and intellectuality. The “white” ideal of thinness, however, shaped the lives of many black women
during the entire twentieth century — now perhaps embodied in the iconic body model of Michelle Obama. Psyche Williams-Forson focused on the current discussions on food in political, social, and popular debates in the U.S. In “‘What’s this in my Salad?’ Black Women, Food, and the Quandary of Self-Identity,” she presented food as an expression of basic rights. Eating right should not adapt to predominantly “objective” ideals of healthy and rational diets but on values of good diet and good eating. This would lead to eating and body patterns shaped by rather diverse cultures, values, and ideologies. William-Forson told some stories about young African-American girls in vicious cycles of excessive eating and exercising. She urged communities to incorporate healthier cooking techniques and ingredients into foods already rich in cultural meaning. Discussing food and the body is essential in questioning the artificial borders between healthy and unhealthy foods and eating patterns.

Most of the contributions during the first day focused on public discourses and the discussions between experts and the public, often excluding economic interests. This was different in panel 4, “Obesity as a Market,” chaired by Nina Mackert. Uwe Spiekermann’s lecture “Options for the ‘Slaves of Culture’: Light Products, Diets and Laxatives Diets in Imperial Germany” showed that the new scientific knowledge system, based on new ideas of nutrients and metabolism, opened the horizon to new generations of food products: Processed food could balance “natural” processes and keep the body in balance. Modern balneology established not only a market for advice and cures but offered nuanced mineral waters and salt essences to balance out-of-balance bodies. From the 1890s, stimulants were detoxified: Coffee without caffeine, cigars with less nicotine, and beer with very low alcohol content were the harbingers of a product world of both enjoyment and responsibility. Effective diet products, however, were rare. But from the 1890s, hormone preparations offered an effective (yet risky) way to reduce body weight. More prominent and widely used by bourgeois women were laxatives. Even before World War I, the food industry offered the first “light” products with either reduced or enriched nutrient content. This opened a knowledge-driven path to growing profits for entrepreneurs and experts — and new options for consumers, who did not want to eat differently but to eat something different. The overlapping field of food and health marketing was also examined by Ulrike Thoms in her contribution “Obesity and Diabetes: A Complicated Connection, and Its Role for the Development of the Health Market, 1880–1980.” Growing awareness
of diabetes began in the 1880s when the disease was already linked to undisciplined lifestyle and eating choices. Before the invention of insulin therapy in the 1920s, the treatment of the disease was based on dietary restrictions to prevent this deadly threat and to help those affected. Thoms showed how diabetes was linked to obesity, how biochemical research distinguished between diabetes type I and II, and how experts and specialized companies developed diets helpful for living a “normal” life even after contracting the disease. Diabetics had to take responsibility for themselves by preventing obesity and living a balanced and moderate life. While the first two papers of the panel focused on specialized markets, Bart Elmore concentrated on one company. In “Coca-Cola and the Battle of the Bulge: Defining the Solution to Obesity, 1990–Today,” he explained the soft drink producer’s successful strategy to fight regulation. Coca-Cola is a company that chooses not to own most of the value chain except the syrup and to share the profits with a large number of local and regional stakeholders. This engenders an ever-changing coalition that is able to fight any regulation of soft drinks, the consumption of which is surely linked to widespread and growing obesity. The coalition partners’ strong financial stakes establish networks to fight any “threats,” even without the Coca-Cola Company’s direct involvement. Philanthropy, engagement in communities, developing “healthier” products (mineral water, Diet Coke), and advertising a healthy lifestyle were additional strategies the company developed to reduce its appearance of responsibility for the growing obesity problem.

Coca-Cola is surely a model for global capitalism in the twenty-first century. The spread of knowledge and practices and the question of national differences were discussed in more depth in panel 5 “Transatlantic Differences, Transnational Entanglements,” chaired by Jürgen Martschukat. Nora Binder presented the successful career of an immigrant in her talk “The Obese within the Group: Kurt Lewin’s Method of Changing Food Habits and its Limits (1940s–1950s).” German-American psychologist Kurt Lewin (1890–1947), who had to leave Germany in 1933, became one of the most influential social scientists of his time. His ideas on group psychology and chain management aimed to close the gap between knowledge and activity and to trigger social change. As a member of the U.S. Committee on Food Habits, established in 1941, Lewin developed new and “democratic” methods of group decision-making processes to rationalize food choice among housewives and to reduce poor eating
habits resulting in obesity. His research, later continued and specified by members of his group at MIT, analyzed subjects’ resistance to eating recommendations. Three consequences were drawn from Lewin’s research: Obesity treatment must be long term, it must be recognized as an individual problem, and it should be embedded in a group environment. This led to new public health approaches, most notably self-help groups and group therapy. While Levin transferred the core elements of his social psychology from Berlin to the U.S., the effects of specific political systems for defining the causes of and treating obesity were a broader and more complex phenomenon, discussed by Alice Weinreb in the final presentation “Fat in the Cold War: East and West German Struggles with Obesity.” For her, fat has to be recognized as a problem of modernity, which has been politicized wherever it has been debated. In West Germany, fatness was perceived as the result of a prosperous postwar economy contrasting with the hunger years between 1944 and 1947. Similarly, in East Germany, growing body sizes were understood as the result of the success of establishing the socialized planned economy in East Germany. Both Germanys, however, had to deal with the obesity epidemic starting in the early 1950s. In the West, the manager’s disease became a symbol for the threats of too much: Bourgeois males were affected and their spouses were trained to improve their families’ diets to keep their husbands healthy and fit. This changed in the following decade when obesity became a less exclusive and “ugly” problem for most people. In contrast, in the East obesity was perceived as a problem of labor productivity, especially a problem among working women. Collective responses, like healthy canteen meals and improved convenience foods were intended to reduce the problem and the body sizes.

The final discussion emphasized not only confusion on a higher level but also discussed strategies of using topics like obesity to conceptualize history in a different way. The concept of the “liberal self” and “liberal” societies were questioned: Sick people often do not have freedom of choice and often end up in hospitals, public service institutions, and retirement homes. The vanishing point of responsibility — the liberal self, the group, or larger communities — remained unclear. The economy mattered, but how did it interact with culture, how did values and prices interfere? How did different elites, either in politics, science, business, or the media, interact? What were the interests of individuals, and did they correspond to common perspectives?
Obesity appeared to be a multi-faceted, often puzzling creation, not a clear-cut concept. It varied from time period to time period, across regions, knowledge bases, classes, races, genders, ages and life situations. Obesity therefore gives us a tool for rethinking our yardsticks for comparison and our research categories. It opens a new perspective on the narrative and the reality of modernity: Freedom as a problem, the organization of society under constant threat, individuals and groups in an ongoing search for responsibility, business as a solution and a problem, knowledge as a burden and mode of dominance. And how can we combine this with more compelling ideals of perfection and efficiency, of beauty and a good life, of community and fellowship around the table? The GHI obesity conference opened up a wide field for further research.

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