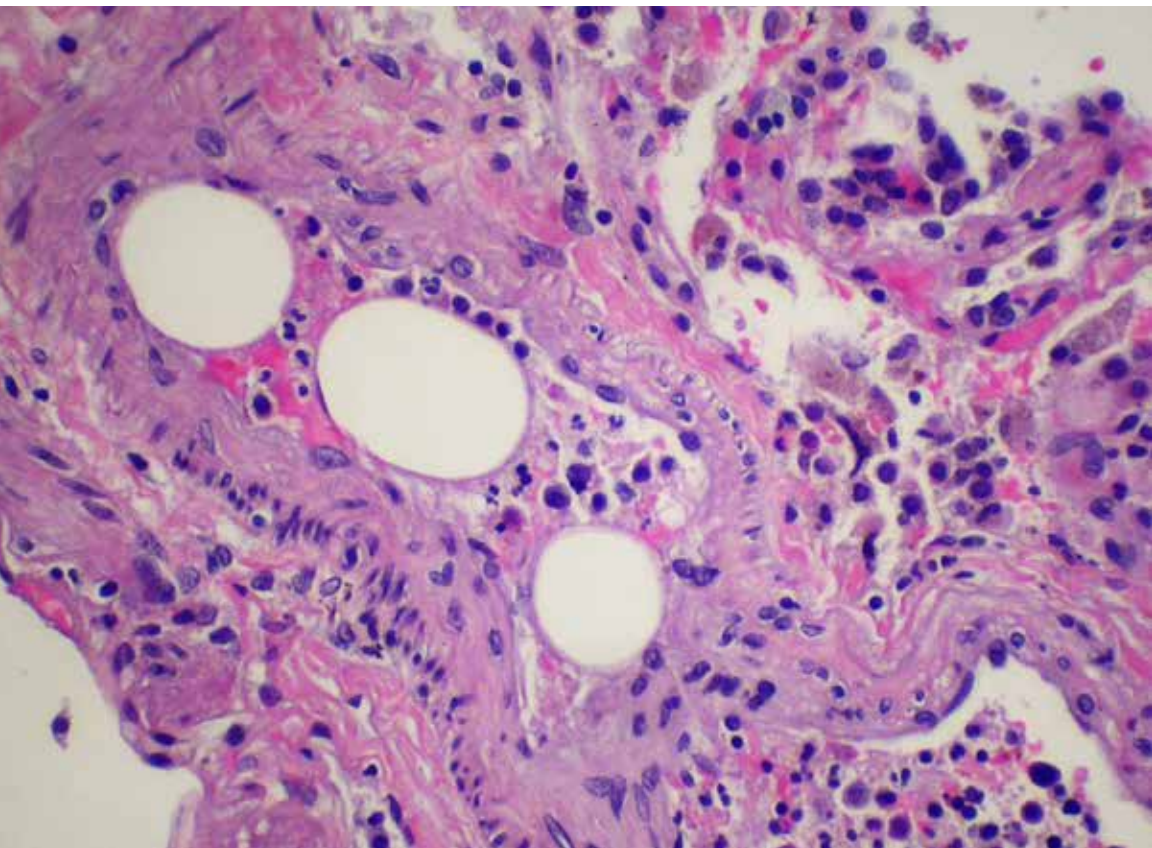


Fat Planet

OBESITY, CULTURE, AND
SYMBOLIC BODY CAPITAL

Edited by Eileen P. Anderson-Fye and Alexandra Brewis



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Fat Planet

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This volume was brought to fruition through the generous support and hospitality of the School for Advanced Research (SAR). In March 2014, nine of us gathered together for a week in frigid but beautiful Santa Fe, being fully cared for by the extraordinary team at the SAR seminar house. The SAR experience allowed our collective ideas to take hold and grow, and it is why this book exists. We met our goal that week—to bring together thinkers who would engage different levels of analysis, theoretical perspectives, and methodologies in exploration of issues related to the body norms that relate to obesity in multiple regions of the world. In particular, we sought to advance our understanding of the role of obesity as a symbolic and material entity, along with its constantly changing meanings and outcomes. Through the conversations within the advanced seminar, we were also able to push forward a further and perhaps more important agenda—to add the anthropology of obesity to a more central position within the often frenzied global obesity discourse. The editors could not have asked for a more collegial and productive group. We also thank the staff at SAR for continuing to support and encourage our collective efforts long after we left the seminar house. In particular, former program officer Nicole L. Taylor was a voice of both substantive and process wisdom. SAR is a unique and important institution advancing social science in a quiet but extraordinarily powerful way—by fostering good ideas to percolate, interlocute, and grow so they can be better.

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Making Sense of the New Global Body Norms

ALEXANDRA BREWIS

One of the most profound biological changes for the human species has been the consistent rise in average body mass over the last several decades. In 2015, the World Health Organization reported that some two billion adults were overweight or obese.¹ In all but the poorest nations in sub-Saharan Africa, technically overweight and obese bodies are becoming the new biological norm (Ng et al. 2014). From Fiji to Jamaica, and the United Arab Emirates to the United States, the average adult's body mass index (BMI) is now well into the overweight range. In eight countries—four in the central Pacific and four in the Persian Gulf and North Africa—more than 75 percent of the adult population is overweight or obese. Current accelerating trends in childhood overweight, and the increasing recognition that no one has yet devised any strategy that can reverse obesity at the national level, suggest we all will live in an even fatter planet in the decades ahead (Roberto 2015).

Historically, only the very wealthiest and most powerful had sufficient excess of food and leisure to become overweight or obese. But in recent decades, particularly since World War II, our shrinking world has led to rapidly expanding bodies. Major processes of modernization—including economic growth, market integration, trade liberalization, technological advancement, mechanization, and urbanization—have made high-calorie, high-fat foods cheaper and more accessible (Popkin, Adair, and Ng 2012). These *globalizing* processes have also changed how we organize our work, transport, and leisure time, much of it toward more sitting and less physical activity. As more households engage with the global market economy, take cash employment, and become new global consumers, they tend to become increasingly sedentary and eat more processed foods—and gain additional weight as a result. This historical trend of collective weight gain started sooner and developed more slowly in the wealthiest

nations. But now that it has begun to reach into middle- and even lower-income nations, the speed at which these populations are gaining weight is accelerating as national wealth grows (Hruschka and Brewis 2012).

More recently, however, wealthier nations have followed a different trajectory: as overall wealth and wealth disparities increase, obesity risk has slid down the socioeconomic ladder. We now observe clustering of obesity (and related chronic diseases, such as diabetes) with other compounding markers of social or economic marginalization in wealthier nations such as Australia, the United Kingdom, and the United States. In neighborhoods where incomes are lower, affordable healthy food choices are fewer, exercise opportunities are more limited, and health care is less accessible (e.g., El-Sayed, Scarborough, and Galea 2012). Middle-income nations, such as India and China, appear to be experiencing the beginnings of this same reversal, suggesting that in such countries obesity also will become tied to need, poverty, and vulnerability rather than plenty, wealth, and security (Dinsa et al. 2012).

Concerned by the association between obesity and expensive, deadly chronic diseases such as diabetes and cardiovascular disease, affluent nations of the global north have been fighting a desperate public health and medical “war on obesity” for several decades. These campaigns are now spreading throughout the developing world. But often this massive effort to tackle the “obesity epidemic” looks and feels more like a campaign against fat people themselves (Hansen 2014). At the same time, the social meaning of obese bodies also appears to be shifting rapidly across the world. In a key study based on global data we collected in 2010, we identified fat bodies emerging as a sudden and new, globally shared, moral preoccupation across a wide array of societies. From Mexico and American Samoa to the United States and New Zealand, people expressed negative, judgmental ideas about obese bodies, seemingly as a core cultural norm (Brewis et al. 2011). This global trend toward fat stigma has happened quickly—so quickly that even those of us conducting field research around body norms almost missed it. Over the preceding decades, several of us have conducted detailed ethnographic studies in places where large and curvy bodies were generally viewed in positive terms (Anne E. Becker in Fiji [1995, 2004], Alexandra A. Brewis in Samoa [1998, 2000], Eileen P. Anderson-Fye in Belize [2004]); many other examples also exist in the ethnographic record. These bodies were seen as representing power, beauty, sexual appeal, wealth, social connection, and caring. The sudden, generally unanticipated switch to

globalized fat stigma has happened with exceptional speed, most of it seemingly within the decade. And this shift is happening even as physically obese bodies become more common.

We term these negative attitudes *fat stigma*. We use the word *fat* as a social category or social fact that is deployed subjectively as a descriptor of specific physical bodies. This is in contrast to our utilization of *obesity*, a term that refers to medicalized perspectives on and definitions of large body size. Obesity usually relies on body mass indices and similar standardized measures (see Brewis 2011 for an extended discussion).

The concept of stigma has a long history in social science (beginning with and often circling back to Erving Goffman), and the construct often focuses on the process of an arbitrary characteristic of the individual becoming both socially undesirable and morally discredited. In this manner, the stigma of “being fat” is one of the most significant of modern life, laden with derogatory meaning; the phrase evokes such descriptors as lazy, dirty, unsexy, and unlovable. Ethnographic studies in wealthier Western nations have detailed the devastating emotional suffering such attitudes cause for people labeled as “too fat.” Meera and Riccardi (2008) provide particularly compelling accounts of the anguish felt in sharing the stories of bariatric patients preparing for surgery. Fat stigma seems especially prone to internalization as self-blame. And this sense of guilt is tied tightly to the core expressed belief (such as in anti-obesity campaigns or even clinical practice) that obesity is first and best modified by individual efforts. As a result, individual culpability is easily placed by everyone—including those with large bodies themselves—onto people socially stained as “being too fat.”

The recent anti-obesity campaigns emerging around the globe tend to describe fat as dangerous and in turn seem to advance the spread of fat stigma (Brewis and Wutich 2014; Campos et al. 2006). In addition, the globalization of social media appears to be part of the trend and helps explain *how* people are exposed to new norms. Nevertheless, these elements alone do not explain fully *why* people would adopt these new body norms with such enthusiasm. As part of our search for an answer, Eileen Anderson-Fye and I organized a School for Advanced Research (SAR) seminar in March 2014. The contributors to this volume participated in that weeklong collaborative effort in Santa Fe to explore this increasingly timely and relevant question. The week’s conversations featured a range of perspectives from the fields of anthropology, sociology, psychology,

and psychiatry. That transdisciplinarity proved invaluable to developing a more comprehensive and broad theorization of the fat body as a social and economic agent in the modern world.

During the seminar, we identified a number of transecting themes and issues. First, we used the term *fat stigma* to grapple with these changing norms around large bodies and the increasingly negative and judgmental social reaction to them. Yet traditional approaches to stigma as a construct proved weak theoretical tools for understanding the cross-cultural and temporal complexity of new body norms around fat. The concept of stigma has a long and fairly conventional history in sociology and psychology. Much of the theory building involved was tied to understanding the treatment of people with mental illness and certain infectious diseases such as HIV/AIDS. In these realms, stigma is conceptualized as structurally created, such as through institutional messaging and rituals (e.g., advertising or organizational patterns in hospital routines). This conceptualization is sometimes explained as “stigma power”: the capacity to keep some people down or out for the benefit of others, legitimizing exclusions and discriminations and reinforcing advantaged positions within the social hierarchy (Parker and Aggleton 2003).

There are many examples of how this conventional approach applies adequately in the domain of fat stigma in general, including a stated disdain by many in the medical professions for treating “noncompliant” patients with high body weight, the failure to enact laws against discrimination on the basis of weight despite repeatedly documented exclusions, and disparities in education and employment opportunities between those with larger versus smaller bodies. Stigma is also traditionally theorized as emerging interpersonally, in the day-to-day interactions people have with friends, families, and strangers; the frequency of stares and rude comments people struggling with high weights receive clearly illustrates the interpersonal nature of fat stigma.

Yet to understand fully *why* fat stigma is gaining such traction and to articulate how it is shaping people’s lives across the globe, we have to think between and beyond such analytic lenses and explore the meanings of fat as they vary across and interact among a vast array of contexts. We must include in our analysis such factors as modern marriage and economic markets at both the local and global scales, the multiple other vulnerabilities or points of difference (e.g., ethnicity) that layer onto or connect with embodied identities, and the prioritization (or not) of fat-avoidant body projects in the face of the many other constraints and concerns people face every day.

Accordingly, for the new theory building we are doing here, we decided to use *fat stigma* as a general term rather than be constrained by the more technically concise definitions usually employed in existing disciplinary stigma research. This decision was purposeful and important. Throughout the text, you will see people use terms such as *fat stigma*, *obesity stigma*, *thin body ideals*, or *body norms* to reflect the multitude of ways that the authors draw on diverse understandings of fat stigma and body norms as they frame their work.

Other important consistencies emerged during our SAR conversations with regard to how we came to understand the ways that fat becomes socially excluded. For example, we agreed that the moral meanings surrounding fat stigma allow us to identify and isolate the relevant social norms. We also found that people across the globe seem almost universally aware that fat is “bad” and exhibit surprising convergence in their body norms. By *body norms*, we mean what people generally, collectively agree is normal, acceptable, or desirable. Thus fat stigmas reflect and reinforce “what matters most” in social terms (Yang et al. 2014) to people, such as a marriageable, hireable body—that is, one that possesses high symbolic capital convertible into what people want or need. We observed that the attention to avoiding fat stigma is constant and obvious in the wide array of contexts—from Fijian villages to American school yards—explored in this volume, and that it isn’t just people at high weights who are concerned about and affected by this stigma.

The massive amount of time and energy that millions devote to weight loss perhaps reflects not so much an urge for health as avoidance of the cost of being socially discredited as “too fat” or achievement of the relative social advantages of “thin enough.” Thus fear of fat stigma seems to be a major motivator for people to work very hard to try to align with body norms as closely as they can.

Consideration of what the *fat* body in particular means in cultural, social, moral, and practical terms has not been the focus of stigma research to date. In addition, anthropological investigations of body norms more generally have little discussed notions of stigma. Rather, prior analyses concentrated on what ethnographic fieldwork until recently yielded—growing concerns with thinness. Much of the theorizing about body norms in anthropology and related fields has centered on these concerns, but we find it limiting to theorize fat stigma as being merely the flip side of thin idealism. The studies presented are highly influenced by, but step well away from, the cross-cultural literature on body norms (such as represented in the prior work of Anderson-Fye and Becker in this volume), which has emphasized growing slim idealism across the globe

over the last generation. We worked hard to not be bound by this literature and found at the end of the seminar and our collective discussions that we need to rethink “being fat” in cultural terms as much more and different than “not being thin.” This perspective has helped us identify some new and important theoretical points—perhaps most especially the idea that people can hold more than one and even competing body norms at the same time. Similarly, we found that the concept of fat stigma also needs to better accommodate the idea that stigmas are rarely singular: they tend to intersect or layer with multiple structural vulnerabilities such as poverty, sexism, racism, and so on.

To begin to address directly the question of why fat stigma is spreading so fast, we focused on the role of local and global economic change. In particular, we looked at individual concerns regarding upward mobility as a starting point to begin to unpack the *why*. As the seminar proceeded, our discussions quickly widened to incorporate ideas of power in relation to the meaning of large bodies. Specifically, we sought to deepen our understanding of the meanings and norms of the body as a potential tool for upward mobility or socioeconomic advantage—that is, the application of symbolic body capital. Conversely, some bodies in some contexts can create barriers to advancement, or even reverse existing opportunities.

If over time we became more slippery in our deployment of the term *fat stigma* to allow greater theoretical experimentation, we also became much more tightly focused in how we discussed and operationalized this economic and advancement context. Elizabeth Sweet (2011) detailed a model of the symbolic capital of consumption (material display of social status and its social constraint) as existing at the intersection of macro- and micropolitical economic change and potentially stress-inducing cultural norms. Her model provides a useful addendum to this working theory. Sweet’s framework does not consider the notions of symbolic capital specifically in the context of larger versus smaller bodies, but does provide a conceptual, and potentially testable, link between the issues of large body size, body-image change (and possible concomitant resistance), and economic changes at the macro and micro level. For example, as larger bodies become the norm, the *symbolic capital* model suggests two simultaneous reactions will follow: one against what is a likely erosion of the large body as an acceptable marker of social capital or another in favor of smaller bodies as a new one. This construct was key to how we bridged our individual work into a comparative, collaborative effort to understand fat stigma

that connects our work across very diverse places and involves very different levels and modes of analysis.

We also specified that by *upward mobility*, we mean the drive to improve one's social status, economic status, or both. In sociological terms, upward mobility can engage various forms of *capital* or resources—economic, cultural, human, social, physical, and symbolic. We draw on the ideas of Pierre Bourdieu (1984) with regard to the non-economic social assets driving upward mobility. In particular, we focus on the role of goods (which could include body size) that are rare and worthy of being acquired to mark status. Thus, in a time of scarcity, a fat body that consumes resources with relatively low exertion would be unusual and desirable. In a contemporary world with increasing urbanization and abundant and cheap lower-quality foods (in relation to health outcomes), a slender body can be seen as one that can afford fresh foods and the leisure pursuit of exercise. Moreover, especially for bodies gendered masculine, the global proliferation of a muscular body ideal includes assumptions of enough time and “work” on the body to achieve the ideal (e.g., Pope, Phillips, and Olivardia 2000). Increasingly, educational achievement is a key part of opportunity for upward mobility throughout the world. If people cannot easily access this pathway (for reasons such as limited finances), the role of symbolic capital as a means of upward mobility should be even more important to them.

So this book explores new ground to understand the ways increasingly fatter bodies are morally understood and used and abused in our increasingly complex globalized, capitalized, liberalized, and materialized world. As we show, evolving and seemingly expanding cultural norms about what bigger bodies mean, and related ideas of blame, are set within multiple intersecting global processes that play out locally: the democratization of education; the push to urban centers or transnational migrations to succeed in the cash economy; the spread of Internet access and, with it, engagement in new forms of social influence and types of dating markets; and the increasing entrenchment of inequality within nations reinforced through a dizzying array of institutional structures.

But this volume is also designed to help reboot our thinking around how anthropologists are reacting to and commenting on the growing global “obesity epidemic.” Most of the existing anthropological literature has focused on the impact of both larger bodies and social reactions to those bodies in the United States and other advanced anglophone economies. This work fails to acknowledge that the “fattest” nations are actually mostly in the rest of the

world. To better understand what it means to be a fatter *planet*, we actually need to include the entire globe within our broad theorization. This approach may seem obvious, but it is not how the field has generally moved—perhaps in part driven by a conventional but incorrect wisdom that the West is where most of the problematic body fat is concentrated.

Moreover, a concerning polemic has emerged around how we talk about fat in academic circles. Much of the anthropological, sociological, and fat studies scholarship pushes against the medical and public health notion of fat as unhealthy and instead rails against the proposition that this “obesity epidemic” will doom us all. We need to find new ways to speak to both of these concerns in constructive, meaningful ways. We need the frameworks that embrace this social critique of the fat body as a damaging social fact without denying that—however poorly or even destructively they may be expressed in social terms—the biological and medical observations about the health risks of excess weight also are valid and need to be addressed (Trainer et al. 2015b). Certainly, it is the only way our efforts as social scientists will spur concrete interventions for people and societies around the world. This book is our effort to forge that more neutral and inclusive theoretical space, to bridge that chasm between fat as a biological and social fact and to do what is needed to more deeply engage in the complexities of what is *really* going on with fat on our planet.

STRUCTURE OF THE BOOK

This chapter describes the origins of this book, specifically the core questions driving our exploration of the rapid expansion and embrace of these new body norms. The chapters that follow ask: How is the meaning of fat transforming globally and how does this transformation relate to other intersecting processes that also play out locally and globally—including globalization, socioeconomic development, and shifting economic opportunities? Specifically, how do new body norms shape opportunities for upward mobility or otherwise shape and reshape power relations? The authors of this volume purposefully shift among diverse levels of analysis and employ different theories to unpack the intersections of fatter (and thinner) bodies, the symbolic (and other) body capital they contain, and their means of upward mobility.

Daniel J. Hruschka provides a broad context for the chapters that follow by presenting a cross-national analysis that clarifies how changing body mass and wealth are related at the population level. His integrative approach, drawing

on training at the intersection of mathematics, human biology, and medical anthropology, explicitly tests basic social and evolutionary theories against one another to expose the underlying drivers of body-wealth associations. His analysis begins with historical observations of a general pattern of positive relationships between increasing wealth and increasing body size, most visible at the national level. Since the 1980s, however, we have begun to observe inversions of this association, particularly in developed nations. Greater wealth is becoming associated with lower body mass, whereas poverty is increasingly linked to obesity risk. Hruschka analyzes large, cross-national data sets to test two competing theories. The first involves the directional relationship between upward mobility and body size—that income and wealth better allow women to change their behavior to meet new norms. The second is that women's greater capacity to meet the new slim body norms leads to increased wealth. He suggests a specific and critical mechanism that underlies the broad observed population-level patterns: marriage markets increasingly act to sort thinner women into higher-income households. He also notes the importance of interpreting such broad, population-level findings within the particularities and constraints of local dating and marriage markets.

Chapter 2 clarifies and expands upon these questions. Anthropologist Alexander Edmonds and sociologist Ashley Mears use intersecting social analyses to explicate the idea of symbolic body capital more fully as it applies locally and globally. Their work focuses specifically on young women with beauty to “sell.” The two combine insights from their own previous works (e.g., Edmonds 2010) with Bourdieu's theories to show the ways young people use the body while they navigate the complexities of capitalism through the worth assigned to aesthetic attractiveness. Fat is one key, globalizing component of beauty in modern markets (marital, labor, or otherwise), although their analysis also considers others. They note that we always need to examine who owns the capital that slim beauty creates. In the case of women in VIP lounges, for example, the benefits of extensive and often unhealthy efforts to increase “girl capital” do not always accrue to the girls themselves. Thus the markets that potentially benefit women also create vulnerabilities by virtue of the lengths to which people go to gain aesthetic power, as well as the possibility that such power will be quickly appropriated by others.

In chapter 3, psychological and medical anthropologist Eileen P. Anderson-Fye and colleagues use a cross-cultural and comparative framework to present a thematic analysis of ethnographic data from three countries. This research

helps illuminate the ways young adults experience and apply body norms—and in turn how those local ideas affect upward mobility. By applying extensive qualitative and ethnographic approaches to Belize, Jamaica, and Nepal, they found data that underscore the fluid, and sometimes contradictory, nature of fat stigma. That is, the nature and intensity of fat stigma vary tremendously even within the same community or family, and certainly between developing and fully rural areas. This chapter highlights the importance of recognizing that myriad factors affect and shape fat stigma; scholars and policy makers both must resist the temptation to oversimplify explanations and interventions. Fat stigma differentially affects and is leveraged by people within communities—males or females, lower or higher incomes, college educated or not. What size and shape is deemed “too fat” in one context of people’s everyday lives might be acceptable or even appealing in another. Even as we reach for middle-range or higher theory to explain globalizing fat stigma, elemental understandings of how people manage these meanings as they go through their daily lives, connect to others, and reach for their own goals remain central. Reactions to our own and others’ fat are always personal and local. The findings from Nepal in particular provide a valuable balance to the broader theory Hruschka presents in chapter 1: the results there illustrate that people can be extremely concerned about weight with regard to their own prospects yet disconnect its importance from concerns about marriage markets.

In chapter 4, feminist sociologist Monica J. Casper explores the ways that women’s vulnerabilities are shaped and how power is reinforced through social and political reactions to fat. She uses her work on the *invisibility* of infant mortality as a health crisis in the United States to underscore the *hypervisibility* of obesity. Casper also shows how the two “crises” intersect at the site of (overweight, minority) women’s wombs. She also demonstrates how notions of blame attached to obesity are embedded in the politics of disadvantage in the United States, producing and masking the lack of women’s autonomy, especially for those already disadvantaged by poverty, race, or immigrant status. The hypervisibility of fat in public discussion of health and health disparities leads to constant surveillance and discrimination. The biopolitical gaze is focused on women’s *weight*, and especially expectant mothers’ weight, as the problem that must be solved. Instead, Casper posits, attention should be paid to the unjust structural factors that create the risk of women’s weight gain to begin with.

Tackling the oft-cited countercase in the body-image literature of African American women’s bodies, cultural and medical anthropologist Stephanie M.

McClure discusses her ethnographic study in the American Midwest in chapter 5. Body-image literature tends to pose African American women's cultural body norms as an exception, given their low rates of reported body dissatisfaction compared to other groups. In their historically placed position on the *margins* of broader body markets, McClure explains, young African American women's understandings of symbolic body capital are not as much racialized as situational. The lived experience of bodies, and the power they can have, centers on navigating being on the margins and being "not the norm." Her work challenges assumptions about how African American girls navigate weight and suggests struggles within that process. Her work explores how these young women understand and react to the male gaze; it also highlights the need to understand the diffuse nature of their body ideals—focused on general presentation rather than the specifics of size or shape. McClure's analysis also offers ties to some of the key themes from Casper's analysis of marginalized and racialized obese bodies; by including ethnographic observations from a personal and lived rather than a biopolitical, analytic lens, McClure also illustrates ways that these women manage to express some control and agency as they navigate the ambiguities of that marginalization and visibility of their bodies, fat and otherwise.

In chapter 6, linguistic anthropologist Nicole L. Taylor also focuses on a single ethnographic case to address body norms in American youth. Her analysis attends to the gendered language of fat, especially how it is employed to create and reinforce important social hierarchies. Like McClure, Taylor shows how youth "try on" or negotiate different body-related identities as they move among different social cliques within a high school in the Southwest. She explains how girls, again, are especially vulnerable to discipline (in both the literal and Foucaultian sense) when they fail to meet presentation norms. Many of their accounts involved experiences within female peer groups, meaning the female gaze was at least as important as a male one. Girls who could construct themselves as thin (the imagined body) rose in the social hierarchy, regardless of exact level of thinness (the material body). Their opportunities for upward mobility—as well as for avoidance of exclusion or other social costs—rests at the intersection of acceptable physical bodies and ways they shape attendant moral meanings to achieve social advantage.

In chapter 7, medical anthropologist and psychiatrist Anne E. Becker examines ways that the body's influence on symbolic capital is revealed at the family and community level. Becker has conducted ethnographic research in Sigatoka, Fiji, since the 1980s. Her more recent work has provided the most detailed

ethnographic analyses of how body image has changed amid multiple global changes (migration, urbanization, economic development, and assimilation) over the last several decades and considers how these intersecting processes relate to young women's aspirations for upward mobility. Here Becker explains how the meanings and moral attributions of ambition, and the uncontrolled eating that might derail it, are configured as a social (especially familial) concern in Fijian communities rather than as a natural and individual concern. The new norm is for a body that is "just right"—neither too fat nor too thin. Girls and their families will pursue an array of methods (including sanctioned use of purgatives) to create and maintain it.

In chapter 8, cultural anthropologist Sarah Trainer presents an ethnographic study of young university students in the United Arab Emirates (UAE), one of the most obese nations in the world. Her analysis mirrors themes from Becker's work in Fiji, detailing the efforts of young, upwardly mobile women and their families to create a body that can bridge both "modern" and "traditional" expectations and pressures. As in Fiji, attaining an appropriate weight is both an individual and family project. Yet women in the UAE also struggle with additional demands to conform to their educated friends' expectations that they achieve the very slim global norms associated with wealth and success. Trainer also details how the women's own standards of an ideal body, coupled with family pressures, lead to unhealthy behaviors. These behaviors likely will carry significant mental and physical costs to their health later in life. Echoing Hruschka's findings in chapter 1, she also details how marriage market sorting around slimmer bodies evolves as UAE families increasingly identify fat bodies as a threat to the chances of a desirable and advantageous marriage.

In the volume conclusion, psychological anthropologist and clinician Rebecca J. Lester and Anderson-Fye revisit the concept of symbolic body capital in light of the varied volume contributions. They discuss the importance of understanding the locally salient qualities of fat, not just quantity, with respect to body capital. Further, drawing on the multilevel analyses presented throughout the volume, they reiterate the *processes* that underlie the work to meet the desired body ideal may be more important than the aesthetic itself. In exploring this idea, they clarify how the chapters together document how the capital of the acceptable body now sits within changing, hybrid, and diversifying markets. These require the complicated challenges of a body presented within multiple markets at once and expanded thinking about the many moral dimensions of

body ideals. Then they leave us where all good works should — with an appreciation of the limits of our analytic focus on the economics of fat bodies and with a clearer map of where we need to be heading next as we work to understand what it means to live on an increasingly fat planet.

NOTE

1. Technically, a body mass index (BMI) of over 25 is classified as overweight, and over 30 is classified as obese.

From Thin to Fat and Back Again

A Dual Process Model of the Big Body Mass Reversal

DANIEL J. HRUSCHKA

Over the past two decades, obesity researchers have consistently identified a reversal in the relationship between body size and economic resources (Dinsa et al. 2012; Hruschka 2012; Monteiro et al. 2004; Sobal and Stunkard 1989; Subramanian et al. 2011). For the poorest 80 percent of contemporary humanity living on less than USD 10 per day, increasing wealth translates to bigger (and fatter) bodies (Hruschka, Hadley, and Brewis 2014). As people become richer, however, this relationship flattens until it reaches a plateau at about USD 3,000–4,000 per capita per year (Dinsa et al. 2012; Monteiro et al. 2004). At this point, men and women diverge in how their body mass index (BMI) relates to economic resources. Male populations remain at this bigger body plateau as they become richer. Female populations, on the other hand, begin a reversal (what I call here the *big body mass reversal*) whereby increasing wealth and income often become statistically associated with *thinner* bodies.

The positive relationship between economic resources and body size experienced by most of contemporary humanity fits a straightforward model of greater consumption in the face of increasing abundance (Brown and Konner 1987; Eaton, Konner, and Shostak 1988; Hruschka 2012). Specifically, as populations have more economic resources to consume calories, they deposit more body mass and become larger. Notably, this explanation does not require invoking any notion of a socially defined ideal body size. Rather, body size may strictly be limited by available resources. Although this resource constraint model works for 80 percent of humanity living on less than USD 10 per day, it breaks down among female populations as they reach sufficiently high levels of economic resources.

Since Sobal and Stunkard (1989) first identified this pattern more than two decades ago, scholars have proposed several theories to explain it. The first class

of explanations, found mainly in the nutrition and social determinants of health literatures, assumes that greater wealth provides people the capacity to achieve a society's ideal body size. For example, Sobal and Stunkard (1989, 266) speculated that obesity may be a "sign of health and wealth" in low-income countries but changes from a positive ideal to a stigmatized condition (especially for women) as populations become increasingly wealthy (for one example see Becker, this volume). According to this argument, among poor populations, those with more economic resources can approximate the reigning ideal of obesity more closely. Then, as the ideal reverses with increasing resources, wealthier individuals now use their economic capacity to attain the new thin ideal. This explanation assumes that people actively adjust their body sizes to fit these changing ideals, and that those with the most resources are best able to achieve those ideals. Sobal and Stunkard were agnostic about the specific mechanisms by which people with greater wealth or income were better equipped to approximate reigning body-size ideals. Recently, however, scholars have provided more detailed accounts based on food choice, time constraints on food preparation, and leisure exercise (Hruschka 2012). For example, the energy density hypothesis argues that less-energy-dense foods that protect against obesity (such as vegetables) cost more per calorie. Thus wealthy individuals are best able to consume diets that reduce their weight to fit an ideal of thinness (Drewnowski 2009; Drewnowski and Darmon 2005; Drewnowski and Specter 2004). A related theory focuses on a specific macronutrient—protein—which is thirty to fifty times more costly per calorie than carbohydrates and fats. It also is reported to be more satiating. According to the protein leverage hypothesis, wealthier individuals can purchase foods with higher protein levels. These foods satiate them at lower caloric intakes and prevent them from overconsuming calories (Brooke, Simpson, and Raubenheimer 2010; Simpson and Raubenheimer 2005). A third argument suggests that wealthier individuals have increased access to the kinds of resources—leisure time as well as safe public and private spaces for leisure activity—needed to shape their body size to realize current ideals through physical activity (Gordon-Larsen et al. 2006). Two key assumptions of these theories are that (1) people try to change their body sizes to fit current ideals, and (2) people with greater absolute income and wealth can change their body size by consuming the kinds of foods and engaging in the kinds of physical activity necessary to achieve those ideals.

The second class of body capital-driven theories is closely related to theories described elsewhere in this volume that examine how attractiveness can

become a form of exchangeable value (e.g., Edmonds and Mears, McClure, and Taylor). However, some differences among these approaches are worth noting. The bulk of work in demography and economics tests hypotheses with quantitative data and thus relies on common measures of body capital (e.g., BMI) to compare across a wide range of cases. This quantitative approach provides a powerful lens on macrolevel patterns between body capital and economic resources. Until comparable measures of other forms of body capital and attractiveness become available, however, it is impossible to perform the same kind of study with more nuanced notions of beauty and attractiveness based on form, movement, and other factors observed in local descriptions of specific cultural contexts (Anderson-Fye 2004). Hopefully, future work that clearly defines and operationalizes these fine-grained factors for comparison across different contexts will refine our understanding of how bodies viewed from a macrolevel perspective can become valuable and attractive in different cultural contexts. Until that time, BMI, the most commonly used measure of body capital worldwide, provides a first-order approximation of major global trends that complements local descriptions of how body capital shapes access to resources. Even with this one simple measure of bodies, interesting questions and paradoxes arise. In this chapter I seek explanations for the reversal in the relationship between economic resources and BMI as populations become wealthier.

To compare these two classes of theories—resource driven and body capital driven—as explanations for the big body mass reversal, I first detail the key features of this big reversal by offering new analyses of data from low- and middle-income countries and reviewing established patterns in high-income countries. I use novel household-level data from sixty-three countries to document the major dimensions of the big body mass reversal. Finally, I provide predictions from these two theories and assess their fit with established empirical patterns.

OBESITY, BMI, AND SOCIOECONOMIC RESOURCES

Scholars have most commonly identified the reverse gradient using body mass index, based on the assumption that BMI is a good proxy for obesity and excess body fat (Dinsa et al. 2012; Hruschka and Brewis 2013; Hruschka 2012; Monteiro et al. 2004; Sobal and Stunkard 1989; Subramanian et al. 2011). However, body mass confounds two components: “fat mass,” or the amount of fat stored in the body, and “fat-free” or “lean mass,” which captures the rest of the body’s bulk, including bone, muscle, and water. As a result, some cautions must be