Movement of Large Bodies Impaired: the Double Burden of Obesity

Somatic and Semiotic Issues

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Abstract

In contemporary obesity discourse, physical activity is routinely portrayed as essential regarding weight regulation. This axiom tends to neglect that health-enhancing exercise may involve categorically different sets of corporeal experiences for obese individuals than for people of other weight categories. Rather, obese people are seen as *fundamentally lazy* – the moral aspects of this have long been debated. Less attention has been paid to how *Western cultural signs and symbols are 'inadequate'* to distinguish how obese bodies are variously adapted to execute given bodily movement. This article is based on a case-study of a Norwegian paediatric obesity patient, and uncovers how she has to accommodate her bodily structure when being exertive. It is argued that embodying a particular 'configuration' of an obese body makes movement *burdensome*, which is a situation made worse by the fact that available 'symbolic representations' fail to do this bodily reality justice. The discussion thus focuses on the interplay of somatic and semiotic issues – how phenomenological, corporeal concerns and socio-cultural mechanisms combine to make obesity a veritable double burden for some individuals. This has very real implications in terms of participation in physical activity, and the debate might therefore offer useful insights to those who in some capacity encourage large adolescents to exercise.

Obesity discourse; Paediatric obesity; Phenomenology; Physical activity; 'Inadequate signs';

Introduction

Paediatric obesity is currently perceived and treated as a significant medical and social problem (Haslam & James, 2005). Conventional non-surgical treatment consists of interdisciplinary foci to support

enduring changes in consumption and physical activity (e.g. Barlow, 2007; Spear et al, 2007).

Documentation on the long-term effects of treatment on (paediatric) obesity and morbidity is scarce, and best practise is yet to be determined (e.g. Summerbell et al, 2003). A traditional medical approach does not adequately consider social factors that may predispose and maintain the condition. On these grounds, a research project on social aspects of paediatric obesity was initiated. Participants were recruited among patients in a treatment program, "Big & Strong" (Oslo University Hospital) – for children between the ages three and 17 with weight-for-height above the 97.5 percentile (www.ulleval.no).

This article is based on three observations. 1) Being of a large body can function to make some body-movement *a qualitatively different experience* than for limber, slightly overweight, and even some other obese individuals. 2) Culture-specific perceptions of obesity, tying the condition to *a need to exercise* – tend to blur comprehension of how obese individuals may experience depressed 'ability to functionally execute movement' (henceforth: '*ergonomics*'). 3) Available cultural 'signs' (in an extended sense) fail to do justice to this bodily reality. Focus in the following is on the convergence of these lines.

Over the last decades all strata of the Norwegian population have reportedly enhanced their levels of participation in sport (e.g. Nordic Council of Ministers, 2006). This can be taken to indicate how, in Norway, an active lifestyle is an established cultural prerogative (e.g. Folkehelsestatisikk Akershus, 2007). Apart from that, a prevalent notion that the same period has seen a concomitant decline in 'everyday activity' is seldom disputed or questioned. 'Sloth', as it were, is often held to be an important contributor to 'the global obesity epidemic' (e.g. Gard & Wright, 2005) – alongside 'gluttony'. In the Western world, these twin vices are fundamentally associated with weakness of will, lending credence to a notion that obesity can be overcome by application of that pinnacle of virtues, willpower. However, looking at obesity through these lenses, a critical factor becomes obfuscated. Some very large bodies are difficult to move in ways which are commensurable, at least theoretically, with substantial weight loss. Since the paradigm of willpower and self-control is a cultural axiom, arguably, a void in our culturally

specific ways of regarding obese bodies and movement can be postulated. This void signals a contrast between the somatic experiences of living life in an obese body, and currently entrenched ideas about physical activity and exercise, specifically as means to achieve a more culturally-sanctioned body type. In effect, that 'gap' – between bodily reality and the extant means available to articulate and express that reality – renders the condition of obesity a veritable *double whammy* for some individuals attempting weight control at least partially through physical activity.

Method(s)

The following discussion draws on participant observation of two specific activities (walking and bending down), reflecting the everyday life of a twelve-year old girl, Berit. Over the past two years, Berit had been patient and taken diligent part in organised exercise training through a treatment program for paediatric obesity. As part of her participation in my research, I was able to observe Berit at movement during the range of activities we did together, while conversing more or less fluidly. Indefatigably, over a period of some nine months, Berit devoted twelve afternoons to the research. Her mother, Turid, with whom I had two additional two-hour private discussions, was intermittently present during these activity sessions. Turid's presence gave scope to elaborating conversations and observation of family dynamics beyond the issue of body movement. These interactions form the basis of subsequent empirical sections.

In planning a methodology for the research project it was assumed that children/adolescents make for different 'informants' than would adults in the same situation (e.g. Gordon, 1992) – perhaps more easily distracted for one. Added to that, the thematic scope of the research was presumed a potentially disquieting topic for youngsters. Taking this into account, a tailor-made approach to Participant Observation (e.g. Ellen, 1984) was crafted. To facilitate conversational communication with participants and observation of their interacting in different social milieux (e.g. Hilden, 2003, p. 55), in each case the

research arena consisted of the leisure activity of the individual's choice (often as it turned out, bowling). A similar modus has not been encountered in previous research on paediatric obesity. The idea brainstormed with colleagues was that conversations in informal settings, before, during and perhaps after activities, might prove more fruitful than 'interviews' on hospital premises. Variously effective at soliciting elucidating verbal communication, engaging in assorted leisure activities turned out to be highly suitable for observations of motoric manners and miens as pertinent to this inquiry. Procedures were advised by the hospital's ethics committee, Regional Ethics Committee (REK) and Norwegian Data Service. Data collection took place between May 2006 and June 2007.

Berit has been chosen for the subject of a case-study because her situation illustrates that 'being fat is not the same as being fat'. Saliently, she brings out how obesity might manifest as a bodily *impediment* at the nexus of 'phenomenological' and 'societal' issues. By which is meant that the physical yoke one carries living life in an obese body is very significantly weighted further down by society's limp grasp of that reality. Among the participants in the research project, attitudes, abilities, functionality and behaviour vis-à-vis 'being active' was found to vary considerably. Juxtaposed to Berit, being large was, in general, observed to impact less severely on agility and mobility¹. The narrow focus of this article therefore does not ring true to all participants, even some whose indices and volume proximate hers. The physio-anatomy of *Berit's* body, viz. the particular combination of lipid distribution, structure and weight, including age and gender – in short, her peculiar type of bodily 'configuration' – converge *in her* in such a way as to cause friction and even pain when engaged in many forms of activity. In other words, a specific end of a 'spectre of body-experience' among the youngsters is highlighted, namely a configuration which often drastically *impedes* on movement. Perhaps the more important focus, however, is how there are few cultural articulations available to do this experience justice.

Theoretical framework

I commence the discussion by establishing a theoretical point of departure intended to shed light on the dual burden on Berit's back. Corresponding to my introductory observations, this load will be presented as some discrepancy between the physicality of weight and dimensions (Berit's lived corporeality) and society's means of conceptualizing bodies and movement (the cultural 'signs', as elaborated shortly, in which she and the rest of us are steeped). The arguments developed are guided by sign theory and theories of body technique, drawing on a phenomenological perspective – though with awareness that the latter tradition has been inadvertently instrumental in perpetuating a Western view of 'the body' as one thing, largely undifferentiated as units of experience.

It can be stated preliminarily that quite beyond human characteristics, human bodies are variously physically equipped to handle the sometimes momentous task of weight regulation through exertion. That is an empirically attestable fact. Nonetheless, individual propensities and variations are very frequently glossed over in relevant discourses. It seems incontrovertible that Berit inhabits a social atmosphere where "the exercised, slender body is health incarnate", and "the notion that exercise produces a slender, mesomorphic body is *believed to be inevitable*" (Kirk, 2006, p. 128; italics added). Although writing on anorectic girls, we can take a cue from Halse, Honey & Boughwood (2007, p.228) as to *what is expected of individuals*, under present conditions, in terms of 'normality' of body and weight.

"The discourse of healthism has been colonized by constructions of femininity, body and appearance [...] These forums promote weight loss as a desirable achievement warranting congratulations, and construct thinness as the signifier of beauty that is necessary to escape its oppositional 'other': a subjectivity were fatness is a metonym for laziness [...]"

Clearly, this subjectivity is widely disseminated.

To illustrate how such an overriding understanding of obese bodies produces the experiential 'void' in question, reference can be made to recent medico-scientific publications promoting exercise – which tend to make only fleeting remark as to how given physical activities may be suitable for *individuals* (e.g. Wadden & Clark, 2005). Point in hand, when obese patients are urged to exercise by way of taking short daily walks (e.g. van Bak & Saris, 2005) – often, this particular advice is given to counteract recidivism or lack of experience/confidence with physical activity etc, as much as to expressly accommodate the *variations of ergonomic functionality* among very large bodies. Specifically, conspicuously absent from fitness-and-health discourses is how ergonomic functionality of obese bodies is multifactorial and likely to be contingent on texture of tissue and distribution of fat on the body etc, beyond weight/volume alone².

Perusing literature relevant to obesity and exercise, it became clear that little academic attention has been paid to how it is that, in terms of movement, the very large body is *judged* by the same parameters by which 'normal' bodies are evaluated. That is, without much resort to nuance as to differences between obese bodies and as compared to other configurations of the human corpus. To exemplify further – the concept of Habitus is frequently applied to inquiries related to *the embodiment of social structures in individuals*, as reflected in given body technique, say walking (e.g. Bourdieu, 1977). Whereas, it appears a sub-theme relating to the *physicality of individual bodies* remains largely unexplored: how specific forms of bodies, and particularly such which *deviate norms*, are adapted to execute tasks within the confines of a cultural context.

That claim may not be surprising since, even "within phenomenology the lived body has often been identified primarily with one's immediate sensorimotor grasp upon the world, *as contrasted with faculties of abstract cognition*" (Leder, 1990, p.7; italics added). But more significantly to the present inquiry, this has often been done perhaps without paying overt attention to how various *types* of bodies

may stand to influence that experience. Drew Leder would seem to criticise a traditional phenomenological approach to *the* ('normal') *body*, when he points out that –

"Insofar as the body tends to disappear when functioning unproblematically, it often seizes our attention most strongly at times of dysfunction; we then experience the body as the very *absence* of an ordinary or desired state, and as a force that stands against the self [...] I experientially dwell in a world of ideas, paying little heed to my physical sensations and posture" (Leder, 1990, p.4).

The following discussion is informed by this 'normative' description of embodiment as a contrast to the effects massive bodies can have on the lived experiences of obese individuals. It will be shown that some forms of obese bodies are such that they leave the individual *constantly aware of one's bodily presence* (in the phenomenological sense, but also in terms of interaction with other people). I will argue that this corporeal dimension is combined – and this is the critical point – with the *impossibility of articulating* how one's body in reality is at odds with some "ordinary or desired state".

These examples are meant to highlight a general lack of focus on the peculiarities of the ergonomics of obesity in Western culture. The result of this is that the strains of life as an obese teenager – the burden of the obese – are added to by one important factor; which can be theorized as follows:

"Readily available symbols in the dominant discourses [fail] to express some of their [viz. gay, young men] vital experiences, at least without violating themselves and disfiguring [those] experiences" (Middelthon & Colapietro, 2005, p. 96).

To relate this squarely to obesity – in addition to the relentless visibility and physical arduousness inherent in embodying the condition, the 'dis-eased' may be said to fall victim to a cultural "absence of signs" capable of "adequately" (ibid.) conveying the condition she *personifies*. 'Sign' is here used in a Peircian tradition to mean, "...anything that stands for something in such a way as to generate

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another sign" (Colapietro, 1993, p.180). In this sense, body fat is a sign to the world transmitting a very forceful and unequivocally negative message, bespeaking *a need for exercise*. I draw on this angle to clarify that obese individuals possess precious little 'cultural space' where to experience bodies as *only body* – how slim individuals *routinely* accommodate corporeality – and not inevitably simultaneously as transmitter of value-loaded statements about one's personality. Asking an obese individual to exert herself ever more, then, can be construed as a sort of violation of her phenomenological reality, or at least a beclouding of it. In that, rather than conveying a message of obese bodies as 'ergonomically challenged', we all automatically read the sign (i.e. obesity) as a "signifier" (ibid, p.181) of 'laziness'. In this discussion the concept of "symbolic violence" (Farmer & Kleinman, 1998) is therefore taken as a useful secondary perspective on how obese individuals are perceived when engaged in physical activity.

In the following, bending down and walking are held to be representative of "...publicly ascribed techniques of the body involving complex and conventionalised social rituals aimed at the successful negotiation of social space" (Goffman, 1972, p. 5). This process has particular bearing on obese bodies, inasmuch as obese bodies are often somehow ill-equipped to perform such a standard repertoire of body movement. I will therefore adopt from Derges (2009, p. 34) the idea that –

"When these social rituals are disrupted, negotiating social space also becomes disrupted, thereby undermining confidence in the presumption of a natural order. [...] Public spaces and everyday objects [in our case, *one's body*] are no longer what they seem; otherwise benign spaces and objects become threatening or take on malevolent form."

"Results"/Observations

Berit's Body in Movement

Building on the above theoretical framework, we can now turn to what I could observe by interacting with Berit and her mother in a situation where Berit's bodily concerns became acute. For our final afternoon together Berit had chosen minigolf as a twist to our previous activities. On rendezvousing, her mother Turid jocularly approves of this choice, voicing the opinion that – "Some exercise will do her good". To this exclamation Berit aversively and evasively responds by declaring: "I won't bend down – my back hurts…!" During the progress of the ensuing game I observed two instances that I later came to recognize as epitomizing the impact her very body has on her mode of being-in-the-world.

At one point Berit foozles the ball off of the miniature course. We all watch as the ball zips through and behind the hedge separating our current and adjacent patches. As the next few seconds pass, observing her reaction, I can virtually trace her gaze to a point yonder where the ball landed. Distracted, as if something gives her pause, she freezes momentarily. Tilting her head she surveys the distance facing her. "Don't look at me," Turid says pre-emptively. "You know you'll have to get that one yourself!" Turning to me, she explains — "It's important she *does things* herself. To stay active...The problem's with the spontaneous activity." Considering her options, the distance of either path, Berit makes a nod towards the obstacle to her straight line of movement. Hesitant, she spells out what this development means to her. "But, then I have to walk all the way around there! ...I'll walk around like that...yes, that's what I'll do." Prodded by her mother's encouraging retort, she then proceeds to execute, very much at her own pace, the task she has thus defined. Returning, she uses her club to shepherd the ball back to the course.

Turid coaxes and entreats during several similar misadventures. Soon enough Berit's ball darts off again, to burrow beneath some nearby shrubberies. It sticks in such a way as to prevent pedial retrieval. She is therefore forced to *manoeuvre* to position herself. She does so reluctantly – making this clear. Applying the handle of her club in extension to her arm, she makes a determined and prolonged attempt at poking free the ungainly thing. Now grown impatient with what she takes to be malingering, "recalcitrant

behaviour", Turid tells Berit to – "Squat down! It won't hurt. Just bend down and pick out the ball!"

This message repeated and reformulated provokes Berit to trump that her back *does* hurt and rather dourly add – "It's just such a hassle to constantly have to bend down." The infectivity of her method proving patent, if not unperturbed, Berit elects to persist. Rather than say, squat on her hutches or sit down on her knees to enable a manual recovery. Plainly, she will not be persuaded at this point to lower her upper body sufficiently to reach the ball by hand.

As a result of our tarrying pace, fellow minigolfers have now caught up with our party. Maybe embarrassed by the ruckus, perhaps to end the protracted hiatus of activity, or possibly simply yielding to her mood, for whatever reason, Turid finally relents. Conceding defeat in the little family stand-off – laughing disarmingly at me as she mutters what I happen to be thinking – Berit's mother bends down and picks out the ball herself. Somewhat flushed, Turid allows the game to continue. Henceforth, though, the mood is more sombre.

'Her double burden does her sore dis-ease'

As an individual, Berit may be pictured as under the sway of the 'worst possible' constellation of physiological and socio-psychological *influences* on her propensity to movement. She is a big girl, and her reference to being "big boned" may not produce an accurate imagery. Respectfully, a few more details must be given. Tall of stature, Berit would seem to have a rather compact and taunt layer of adipose tissue on her torso and abdomen, over the shoulders and across the lower back. Her extremities too are fairly large and solid. To give an indication of her bodily proportions, a substantial amount of her bodyweight is amassed high up on her body. Her shape is consequently such that it affects her point of balance. What follows from this is critical.

In all, Berit constitutes a corporal entity which exceeds in size and 'bulkiness' for instance that of her mother's. In fact, I go as far as to argue that her proportions are such they may be said to exceed some

threshold to where bulky bodies become something substantially different than all-out larger versions of leaner, lither ones. Many observers might readily concede that sitting down in a bus, and certainly an airplane seat, will be uncomfortable, embarrassing, and perhaps even entirely impossible for large individuals. The point that when human bodies attain certain dimensions and compositions they take on radically, categorically different ergonomic qualities – something beyond what stems from size alone – is not easily impressed in discussions.

Berit's Movement as Body-technique

To generate a more qualitative impression, I will portray Berit's body in terms of movement. Edensor finds – "Walking bodies communicate meaning [...] 'signaled, formed and negotiated through bodily movement' [...] which unintentionally imparts conventions concerning the 'appropriateness' of bodily demeanor [but which is not wholly determined by cultural norms]" (Edensor, 2000, p. 82). We might therefore fruitfully consider how Berit comports herself when walking – obviously a common activity. Her dimensions may be envisioned as compelling her to pay close attention in undertaking what to other adolescents are entirely trivial tasks. This makes the cumbersomeness of her corpus a central concern. Not presently of proportions that *sensu stricto* constitutes crippling orthopaedic problems (Ludwig, 2007) – her complications at movement should rather be visualized within the matrix "A significant correlation between the degree of tibial deformity and [the] degree of obesity" (Regan & Betts, 2006, p.30). The stoutness and solidity of her thighs and torso is such that it causes her to plod forward – shoulders sunken – with a slight slant. And she is made to throw her legs arduously ahead of her when ambulating. A twin issue to the physicality of her structure, complicating matters, evident in her posture – she is governed by a pronounced timidity. This has general bearing on her movement.

Prior to Berit's involvement in treatment and exercise-training, two years past, for her, walking outside in the winter, ice on ground, would have appeared a daunting and rather physically exhausting project.

Her pace hampered by a profound fear of falling – "The other kids don't understand my body, how it is to be large. When I fall down, I fall heavily. It *really* hurts!" – Berit would make her daily way to school, figuratively bent nearly double and investing utmost care in every step. In that contrived fashion she would arrive generally spent, having expedited untold (and unsung) amounts of energy in the process. By my observation, walking remains a fairly complicated and energy dense affair, even under less gruelling conditions. The series of actions required for her to bring herself to locomotion seem literally weighted down by the very structural, idiosyncratic composition of her body.

Movement Impaired, Signs Curtailed

Like many of the activities Berit does in her everyday life, mini-golf is not a game designed with her type of body in mind. While many large people will undoubtedly experience few problems enjoying a round of minigolf, facets of that activity crop up which Berit's particular body is less fit to handle. Berit playing minigolf illustrates how her body forces, limits, her range of behaviour, how her corporeal entity is at odds with activities 'the body' is axiomatically thought capable of doing (viz. currently, in the West). Given the totality of Berit's bodily experience (inclusive of her habit of receding from situations where her body and its miens might draw attention to her person), and the onus vested in her to be active, the interaction might warrant closer analysis. While reminiscent of many a teenager's 'healthy assertiveness' – and there are probably such elements – Berit standing her ground, as it were, signifies something more than the average inter-generational battle of the wills. Refusing to bend down, it is almost as if Berit is making 'a strategic decision'. Faced with a choice of two evils, I see her as avoiding the one which will sting the most. 'Sting' is here meant as a semi-corporal metaphor, in that had she chosen to manoeuvre her body in the way demanded of her, it would perforce have materialised a bodily sensation. It is precisely how she is affected somatically that we must strive to understand – empathize with – in order not to dismiss her out of hand, superciliously, in thinking she is simply a child throwing a tantrum.

The ball remaining squarely wedged, club and foot useless, what then is Berit with her particular body, really up against? Recall the description of Berit's structure – not to forget she this-awhile reports a painful back. Arguably, her body is such that it makes her range of approaches in reality impracticable. Theoretically: lowering the entire corpus by sitting down or bending the knees in some fashion; or to remain standing and manipulate torso to the point where an extended hand would reach. However, with her bodily composition, 'arching' her torso to the sufficiently forward-and-down point is at best a shaky undertaking. To me, having observed her at movement, it is clear that attempting to lean forward thus, her body would gain a gravitational momentum of its own. Presumably, she has encountered many similar situations. The way she walks clearly suggests she has reason to doubt her motor-skills and balance are honed well enough for her to handle herself in any expansive position. Whether she, her body, be anatomically capable of mustering the Herculean strength in all actuality required to perform the task of re-erecting her upper-bodyweight, is frankly anyone's guess. The pertinent point, her body somehow makes her aware of its structural limitations in undertaking exertive movements. It is not argued she articulates these concepts all-out in her mind. To the contrary – she *cannot* do that. Like everyone else in her culture she lacks the signs to 'explain' or 'articulate' that her body is somehow structurally maladjusted to perform the tasks demanded of her. This is the very crux of the issue.

Berit is undoubtedly strong – her increased muscle mass a direct result of her body's condition (as well as a measure of solace from its yoke: "She *is* stronger than the boys"). Even so, we must never lose sight of the fact that in the final analysis, her body is that of a twelve year old girl. If squared up, Berit's very *being in* her body, every waking, moving moment – she's in truth labouring at something she is not physio-anatomically, developmentally, equipped to handle (e.g. Regan & Betts, 2006). This 'deficit' *congeals*, if not becomes tangible, in situations which require substantial additional exertion, and more so when she must support the full impact of her weight in ways she is not accustomed to.

With this in mind, the remaining theoretical options may be no more anatomically feasible to her than extending her torso forward-and-down, arch-like. It will be recognized that squatting too involves precarious issues of balance and agility to a lumbering body. Anatomical considerations might make that particular series of movement plain painful. Hypothetically, fat deposits on thighs stretching skin drumtight, made to squish against an eminently protruding belly. In jeans, Berit's clothing would have complicated the operation. She would likely be at peril of having fabric cut into her flesh because of the irregularity of her movements. Meanwhile, had Berit chosen to sit or squat down, her subsequent elevation would likely have necessitated hands-on assistance. Certainly, this would have triggered pressing issues of self-consciousness. Fuzzy on her ability to control her body, either leaning forward or squatting down – say you fall flat on your face... – and perhaps envisioning the attention her clumsiness in such an outcome might stir, Berit appears to have balked by the limits of her 'comfort-zone'. True, as it happened, she does risk drawing dreaded attention to herself. Yet, conveying the image of 'A teenager making a din' might just be preferable to 'A fat-kid trapped in some wrenchingly awkward pose'. Analysed on Berit and her body's premises, these appear convincing rationale for *not* bending down – an errant lose/lose-situation. Bending down, for the sake of being active, is burdensome to say the least, might well humiliate her, and hurt her back to boot. (And, as if to make matters worse – she knows firsthand previous exertions have accumulatively failed to make her "thin". Her body has proved deeply resilient to treatment.)

Cultural factors bar comprehension and ready articulation of what this task involves for Berit. Why do we not automatically see that to ask Berit to lean forward to a radical angle is tantamount to tell her to – *Fall down!*

Significance of Obese Bodies

I find the English language (ditto Norwegian) hard pressed for words, images, symbols and signs to evoke the obese body without smacking of morally loaded connotations. It would seem the plethora of words quantifying or alluding to body-fat automatically conjure explicitly negative associations. Plumpness, chubbiness – many similar appellations are moreover not very apposite at imparting nuance to the issues of concern to the evolving debate, for instance in terms of density or texture of particular tissue. Consider the word 'Fat' in this regard. To present purposes it seems capacious to the degree of meaninglessness. Particularly lacking is a lexicon capable of evoking in neutral terms the limitations many obese bodies present to exertion.

That statement can be substantiated by momentarily looking at a (British) manual 'promoting' the optimal manner of ambulation, seemingly epitomizing Western notions – as quoted in an article on the social history of that culturally-specific activity, *taking walks*.

"The body should lean slightly forward to offset the weight of the rucksack", reads the highly significant basic posture. "There is little movement of the arms and the hands are kept free. The legs are allowed to move forward in a comfortable stride [...] the weight of the body should be moved slightly forward, i.e. a slight forward stoop, with a short, smooth swing of the arms. [The sure sign of a good walker is the manner in which he makes it all look very easy"] (Edensor, 2000, p. 97).

The gist of this modus seems quintessentially antithetical to someone with Berit's type of body.

Moreover, in his analysis of walking as a cultural activity – *in a nutshell* – Edensor (see Theoretical Framework) for one never distinguishes or renders a thought to how various/individual bodies themselves might be affected by the actual walking. This critique arguably relates back to an "absence of adequate signs", in that the "dominant discourses" fail to do the obese bodily reality justice.

This mechanism is culturally grounded, which drawing on a non-Western perspective might illustrate. Indulge a thought experiment in the spirit of Marcus & Fisher (1986). Popenoe's recent work invites an illuminating ethnographic contrast. Her study portrays a Saharan society where female obesity and exertion is actualized in radically different terms than in Norway. There, the condition itself is cherished in women, while that entire genus of movement, i.e. all forms of exertion, is discouraged from girlhood. In light of what was said of how Berit manoeuvres her body when walking, a look at Azawagh women's behaviour during this particular activity may be worthwhile. Regarding Azawagh concepts of female bodies, Popenoe writes: "To be an Azawagh Arab woman *is* to have a certain type of body, a fattened one" (Popenoe, 2004, p. 140). Women of a certain caste are *expected to be immobile*. Perhaps equally due to what is here referred to as *ergonomics*, viz. size, bulk, and proportions, this female form finds itself –

"Usually seated, and lumbering and swaying if walking [...:] The characteristic women's walk, in which she swings her hips from side to side while throwing her hands out from the elbow at each step as if to balance her hefty lower torso" (ibid, p. 142).

These quotes hint at the existence of a culturally premised understanding of the obese/female body. As in general unwieldy and cumbersome, and in particular, as being in need of making certain ergonomic adjustments in order to achieve optimal agility when undertaking tasks involving the perambulation of corpus. Repeated as central to the unfolding line of argumentation, Norwegians, including Berit, lack the cultural literacy to derive these sets of meaning from the signs generated by *her* body.

Had an Azawagh Arab, transplanted from Popenoe's ethnographic present in the Sahara, observed Berit performing an everyday task, she would have seen a body reminiscent of her own. And adroitly recognized Berit's structure as 'maladjusted' to the things she is expected to do. Suppose Azawagh

women have found the ergonomically optimal way of comporting their type of body. With the descriptions of Berit's body composure and -composition in mind, one might ask whether Berit adopting this style of locomotion could have worked to ameliorate some of the structural impediments she must counteract when at all active. Still, to argue along these lines is very much to miss the point that exceedingly few Norwegian cultural expressions are primed on or do the semiotic work of differentiating manifestations and degrees of obesity. It follows that had Berit adopted the Azawaghstride, as a social signal, this could only be read to her disadvantage – obesity taints all things – if not invite ridicule from peers and public. (Long before that though, her socio-culturally mediated self-consciousness would effectively have 'cut her off' from this *cultural resource*: walking optimally as per her body's requirements.)

This take on Berit's situation would seem strange to our hypothetical observer. Why? – By culture and sense of her own body, our Azawagh would be inclined, rather, to *hand Berit a chair*. As for how this young girl comports her body, readily evident would be her astounding level of activity³. Because – due to the unwieldiness of bulk – her own "physical strength resides in [...] being seated" (ibid, p. 187). But perhaps more importantly, she'd be accustomed to a cultural understanding of lumbering bodies: "Standing, a woman's balance is unsteady" (ibid, p. 162). These are presumably lenses through which Berit' behaviour might be seen in relation to accommodations she must make towards her bodily presence when playing mini-golf. An Azawagh observer – whose views on female exertion in many ways would be antipodal to Western concepts – might have access to notions more suitable than ours to grasp the ramifications of Berit's body's size and structure on the execution of movement.

Concluding remarks: obesity & exertion – double whammy

Berit's body is very much *a constant presence*, a factor to be reckoned with, in all her undertakings. In my understanding, that particular combination of weight, proportions and texture of tissue – makes it

worthwhile for her to consider *the pros and cons* (Lombard & Lombard, 2003, p. 45) of every step. To gauge the outcome of imminent movement as measured against possible strain caused by exertion. Call it, allegorically, "Calculating the exact energy cost of a given amount of physical activity" (Gard & Wright, 2005, p. 39). Whereas a child of lesser stature might act on a spur, insouciantly, when similarly active, Berit seems obliged by her bodily structure to pause and inwardly pose the questions: *What will this particular movement achieve? Where will this situation land me?*

This is the phenomenological or corporeal dimension to the equation. What then are the wider, interpersonal implications? From the vantage of Turid trying to persuade her daughter to exert, her stake in the situation should be understood as fully aligned with a treatment perspective. The treatment program "Big & Strong" and public discourses strongly encourage *being active*, with a guiding principle that insufficient *everyday-activity* imperils prospects of 'normalisation'. The prerogative of weight loss very much informs prevailing notions of obesity and exercise. So much so, any other understanding remains inarticulate, is left *ineffable*. It should by now be clear how the 'signs' do violence rather than justice to the experience of embodying very large bodies – since obesity cannot help *betray*, castigate, the individual as 'lazy'. Berit is, in a figurative sense, left with exceedingly little room for manoeuvre.

These then, are crucial moments. They suggest how the very complex issue of obesity converges in Berit's life to 'tie' her behaviour in relation to the wider world. But the above descriptions should also evince that *to either* of the antagonists in the scenario, *there are no good solutions*. (On a related point, Backett-Milburn et al (2006, p.624) note that, "[Parents] seemed to *lack a discourse* to understand weight and overweight"). In as much, clearly, mother and daughter are faced with a dilemma. And since the scope of the slimming process has proven formidable and protracted, it seems inevitable that similar concerns must often be attended to. This time the situation is impossible to diffuse to the contentment of all vested interests. The corner-stone of the argument presented here is, access is scant to symbols and signs capable of infusing 'alternative meaning' into these social encounters.

Admittedly, I have realized the magnitude of that statement only by later reflecting on my own instinctive reaction. As it happened, I must to my chagrin confess to having arrested myself momentarily reproducing the wider cultural views on obesity and exercise – thinking along the lines of 'No wonder the weight-loss process is slow, doing her best to avoid exertion'. Ashamed, I recount my personal, silent reaction here, because this may be hold to measure something of the social existence of the obese. This is stated that we remain alert to the 'spectacles' we don when beholding large people moving. Lest, that is – in an attempt at a poetic simile – cultural expectations should dim our view ("Now we see through a glass darkened..."), rather than provide clairvoyance vis-à-vis the obese and exertion.

This article has been developed to highlight that people in Berit's situation are effectively 'double trapped' by their obese bodily condition – physically, and in terms of cultural codes. Beyond the literal meaning, that summary conveys that the dominant Western perceptions of obesity and exercise: its remedy, eclipse all other modes of making sense of the obese body. (In this a third 'burden' could be identified: medico-scientific mediated and culturally grounded expectations of weigh loss measured against an individual's de facto prospects of such an achievement). Weight loss can be an exceedingly heavy task for a lumbering body, as might be the execution of each and every movement required for its completion. Large adolescent Norwegians will therefore find that their bodies 'corner' their own and their counterparts' behaviour in many social situations. As repeated, this is in part due to a paucity of alternative explanatory models and cultural signs. The notion of 'eating less and doing more' is the prism, the speculum, through which all understanding of the obese individual must pass. The light that metaphorically shines through, I have argued, is too dim to illumine how various types of obese bodies might be variously adapted to handle the 'work' they are axiomatically set to do. Even the very notion that certain configurations of massive bodies can function to encumber agility is sometimes left in cultural obscurity. It is important to recapitulate, however, that a culture-specific inability to discern these nuances applies in equal measure to the obese individual herself, who sees by light of the same

prism and has internalized these values as part of her socialization, and to the entire range of people culturally entrusted the responsibility of promoting, executing, and overseeing the regiment of her body's 'normalization'. Little doubt will have accrued, presumably, that it is the obese individual who finally bears the grunt of this cultural state of affairs – such is the manifold burden of obesity. Vigilance at recommending ergonomically suitable activities is the most concrete lesson to be had by those who, in some capacity, urge obese individuals to exercise.

Notes

¹ Two other participants unequivocally 'fit the profile' on par with Berit in terms of mobility. Albeit a young adult – and thus probably physio-anatomically better equipped to handle her body, Parveen's bodily composition is very much at hindrance for movement. Kim experienced society as in all made to accommodate much nimbler bodies than his own.

 2 To indicate the effects of variation in patterns of adiposity on the body and like factors vis-à-vis agility and mobility, it may be noted that a more central accumulation of body fat – typically a male pattern – is likely to mount less obstruction to movement as compared to the case discussed here.

³ Had our observer been able to overcome an initial incomprehension at the project of *slimming* a female body, by closer exegesis she might uncover intercultural parallels as to how bodies are set to "cultural work". Inasmuch as girls of either camp might find their task displeasing and require *prodding* from well meaning kin, their common 'task' is the achievement of a socially sanctioned corporeal fulfilment – or metamorphosis even, since both massive gain and substantial weight loss amount to culturally grounded transformations of one's body.

References

- Backett-Milburn, K.C., Wills, W.J., Gregory, S. & Lawton, J. (2006) Making sense of eating, weight and risk in the early teenage years: views and concerns of parents in poorer socioeconomic circumstances, *Social Science & Medicine* 63(3), 624-635.
- Barlow, SE. (2007) Expert committee recommendations regarding the prevention, assessment, and treatment of child and adolescent overweight and obesity: summary report, *Pediatrics*, 120 Suppl. 4, S164-S192.
- Bourdieu, P. (1977) *Outline of a theory of practice* (Cambridge University Press).
- Colapietro, VM. (1993) Glossary of Semiotics (Paragon House).
- Derges, J. (2009) Eloquent Bodies: conflict and ritual in northern Sri Lanka, *Anthropology & Medicine*, 16(1), 27-36.
- Edensor, T. (2000) Walking in the British countryside reflexivity, embodied practices and ways to escape, in: Macnaghten & Urry (Eds), *Bodies of Nature* (Sage).
- Ellen, RF. (1984) Ethnographic Research, a guide to general conduct (London: Academic Press).
- Farmer, P. & Kleinman, A. (1998) AIDS as human suffering, in: Brown PJ (Ed), *Understanding and Applying Medical Anthropology* (Mayfield: Mayfield Publishing).
- Folkehelsestatisikk Akershus. (2007) Folkehelse og Levekår i Akershus (Oslo: Kunnskapsforlaget).
- Gard, M. & Wright, J. (2005) *The Obesity epidemic science, morality and ideology* (Abingdon: Routledge).
- Goffman, E. (1972) Relations in Public: Microstudies of the Public Order (Harper & Row)
- Gordon, T. (1992) P.E.T. Parents Effectiveness Training (New York: Peter H. Wyden Inc).
- Halse, C., Honey, A. & Boughwood, D. (2007) The Paradox of virtue: (re)thinking deviance, anorexia and schooling, *Gender and Education*, 19(2), 219-235.
- Haslam, DW. & James, WPT. (2005) Obesity, Lancet, 366, 1197-1209.
- Hilden, PK. (2003) *Risk and late modern health, socialities of a crossed-out pancreas* (Faculty of Medicine, University of Oslo).
- Kirk, D. (2006) The 'obesity crisis' and school physical education, *Sport, Education and Society*, 11(2), 121-133.
- Leder, D. (1990) *The absent body* (University of Chicago Press).
- Lombard, DN. & Lombard, TN. (2003) Exercise management of the obese patient, in: Foreyt, Poston, Rippe (Eds), *Lifestyle Obesity Management* (Blackwell Publishing: Malden).

- Ludwig, DS. (2007) Childhood obesity, the shape of things to come, *New England Journal of Medicine*, 357(23), 2325-2327.
- Marcus, GE. & Fischer, MMJ. (1986) Anthropology as cultural critique, an experimental moment in the human sciences (University of Chicago Press).
- Middelthon, AL. & Colapietro, V. (2005) Absent signs, elusive experience: on young gay men and absence of adequate signs and cultural images, in: Lee, JW (Ed), *Psychology of Gender Identity*, (Hauppauge: Nova Science), 93-111.
- Nordic Council of Ministers. (2006) *Health, food and physical activity Nordic plan of action on better health and quality of life through diet and physical activity* (Copenhagen).
- Popenoe, R. (2004) Feeding Desire fatness, beauty, and sexuality among a Saharan People (Abingdon: Routledge).
- Regan, F. & Betts, P. (2006) A brief review of the consequences of childhood obesity, in: Cameron, Morgan & Ellison (Eds), *Childhood Obesity Contemporary Issues* (Boca Ranton: Taylor & Francis).
- Sallis, JF. (2007) Determinants of physical activity behavior in children, in: Pate & Hohn (Eds), *Health and Fitness through Physical Education* (Champaign: Human Kinetics).
- Spear, BA., Barlow, SE., Ervin, C., Ludwig, DS., Saelens, BE. & Schetzina, KE. (2007) Recommendations for treatment of child and adolescent overweight and obesity, *Pediatrics*, 120 Supplement 4, S254-S288.
- Summerbell, CD., Ashton, V., Campbell, KJ., Edmunds, L., Kelly, S. & Waters E. (2003) Interventions for treating obesity in children, *Cochrane Database Systematic Review*, (3), CD001872.
- www.ulleval.no/modules/module_123/proxy.asp?iCategoryId=845&iInfoId=13861&iDisplayType=2 (site accessed 05.01.09)
- Van Bak, MA. & Saris, WHM. (2005) Exercise and Obesity, in: Kopeman, Caterson & Dietz (Eds), *Clinical Obesity in Adults and Children*, Second edition, (Blackwell Publishing).
- Wadden, TA. & Clark, VL. (2005) Behavioural Treatment of Obesity: Achievements and Challenges, in: Kopeman, Caterson & Dietz (Eds), *Clinical Obesity in Adults and Children*, Second edition. (Oxford, Blackwell Publishing).