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Tanya Zivkovic, Megan Warin, Michael Davies and Vivienne Moore

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What is This?

In the name of the child

The gendered politics of childhood obesity

Tanya Zivkovic
University of Adelaide, Australia

Megan Warin
University of Adelaide, Australia

Michael Davies
University of Adelaide, Australia

Vivienne Moore
University of Adelaide, Australia

Abstract

This paper investigates the ways in which 'the child' is positioned in obesity debates and, in doing so, examines the discursive relations between childhood obesity, mothering and child neglect. Using legal cases of parental neglect and an analysis of representations of obesity in Australian print media, we argue that a particular constellation of 'child politics' in which children are represented as innocent victims of poor parenting is at play. Parenting, however, is a code for mothers and it is their gendered responsibility for food and families for which they are now being held legally culpable in cases of neglect. The relationship between children and mothers has become the focus of moral discourses around childhood obesity, containing contradictory elements of innocence and risk, responsibility and danger. The intersection of child politics, mothering and individualized responsibility not only illuminates the ways in which gender is absent yet centrally implicated in obesity debates and policy, but also highlights how models of neoliberal governance encompass both State and decentralized forms of power in their attempt to regulate excess bodies.

Keywords: childhood, child politics, media, mothers, neoliberal governance, obesity

Introduction

This paper uses the concept of child politics (and its intersections with responsibility and governance) as a key orientation device to trace a set of relations that are useful for understanding contemporary discourses in the 'childhood obesity epidemic'. While Olds et al.'s (2010) recent study has suggested that obesity among children has plateaued (albeit at a high level in Australia), the majority of research depicts and presumes a continuing trend, so that 'excessive fatness has become the primary childhood health problem in developed nations' (Ebbeling et al., 2002: 473). Most reports on the prevalence and incidence of childhood obesity in Australia point to a 'tripling of obesity amongst children between 1985–95' (Margarey et al., 2001; Baur, 2002). These assertions are in line with worldwide trends; for example, Wang and Lobstein's (2006) systematic review of recent trends in child overweight and obesity prevalence maintains that there is a growing global childhood obesity epidemic which is likely to accelerate.

In light of this evidence, it is not surprising that children are now targeted as a priority in obesity intervention. Coveney (2008) argues that 'since childhood is the point in the life course where good habits can become inculcated, much of the effort in the fight against fatness is directed at children' (2008: 203). It is also suggested that once obesity is established in either childhood or adulthood it is difficult to lose weight, so focusing on children makes more sense for early intervention strategies. Moreover, as children regularly attend pre-schools, schools and after-school centres (where they eat food and engage in physical activity in a learning environment), they are a convenient (and captive) population for data collection, regulation and intervention (Dehghan et al., 2005; Vander Schee, 2009). Children are thus put forward as both potential problems and a solution, since they represent – through inalienable, epidemiological evidence – the future generations of obese adults, and bodily sites to prevent such medical and socio-economic disaster (Wang and Dietz, 2002).

This paper examines the re-orientation of policy and services towards children as targets for obesity intervention. Through the lens of the concept of child politics we investigate *how* children are constructed and positioned and the gendered assumptions and implications for women in this context. Following a discussion of the ideology of child politics we examine a case of medical neglect and abuse from a recent Australian medical journal, in which it is asked whether parents should be held legally culpable for allowing their children to become obese. This specific case, and the examination of similar cases in the UK and US, illustrates how children are represented as innocent victims of poor parenting, and the alarming repercussions for such 'neglect'.

To examine whether these underlying assumptions of child politics and poor parenting have wider cultural salience and are reproduced in popular discourse, we undertook a discourse analysis of Australian print media.

Lupton (2004) argues that the mass media constitute one of the most important sources of information about health, and the main body of this paper focuses on how the print media represents obesity and parenting. We discuss key rhetorical tropes of parenting, responsibility and blame in relation to childhood obesity, and how gender underpins these discourses. We argue that it is mothers, and not fathers, who are deemed to be primarily culpable, both legally and morally, for childhood obesity. Particular attention is drawn to the ideologies and cultural assumptions that shape the public perception of mothers (as both responsible and dangerous) and their relationship and responsibilities to children and future populations.

In tracing the play of child politics and obesity across several discourses (medico-legal and popular), the final section of this paper argues that there are serious implications for mothers in our understanding of obesity. In particular, we point to both the gendered assumptions embedded in discourses of childhood obesity, and the subsequent failure to acknowledge gender and gender relations in policy. We suggest that a mother's perceived failure to regulate and discipline her own body and her children's bodies (as prescribed in contemporary neoliberal discourses) opens the way for the authoritarian and legal regulation of private lives through State apparatus. Mothers who fail in their parental and civic duty of care are thus placed in positions of powerlessness in this debate. This positioning suggests that governmentality has not replaced sovereign power (as Foucault argues in *The Will to Knowledge*; Foucault, 1976), but is intimately linked with judicial systems of law and the possible threat of the repressive wielding of power.

Child politics

In her recent feminist analysis of child politics, Baird argues that 'the deployment of the figure of "the child" [carries] diverse political and cultural agendas' (2008: 291–2) and has been prominent in Australian domains of popular culture, the law and social policy since the turn of the 21st century. Like any ideology, child politics are 'neither neutral nor benign' (p. 292), and discursive constructions of the child are mobilized through a type of 'child fundamentalism'. As an essentialist form, fundamentalism captures the ways in which 'the child' is constructed 'as a fixed and absolute category' (p. 293). The mobilization of child fundamentalism is, according to Baird, a key political strategy that draws on rhetoric of concern for the figure of the innocent child. From issues as far ranging as online censorship to the consumption of illegal drugs, and to more pointed Australian examples such as 'the children overboard' scandal and the ongoing Northern Territory Intervention of Indigenous children and families,[1] the figure of 'the child' and the notion of 'childhood' have been reconstituted to affirm 'the unchallengeable authority of certain principles' in a manner that leaves 'little room for interpretation, contest or disagreement' (p. 293).

Central to this public discourse is the child as a site of investment for the future (Baird, 2008), or what Giddens refers to as the 'colonisation of the future' (Giddens, 1991: 111). Citing Mason (2005: 92), Baird (2008: 300) underscores that '"the child", as a representation of our future, of what society will look like in generations to come, tends to constitute children as "becomings" and not "as beings" with experiences in the present'. Overweight or obese children are caught in a 'worrying cycle', as they will become 'the next generation of overweight and obese adults' (*The Advertiser*, 3 February 2009). Headlines such as 'Cancer: Childhood Obesity Link', 'Coronary Disease Threat for Teenagers' and 'Consider Surgery for Teenagers' suggest that young bodies need to be controlled, even surgically modified, because they, as claimed in the article titled 'The Rise and Rise of Generation O', are 'putting a strain on the health system from obesity related conditions' (3 February 2009). Here, the child poses a threat to society at large, for the health and wellbeing of the nation is dependent upon the health and wellbeing of children, and, in line with neoliberal governance, the moral integrity of the families who raise them (Baird, 2008: 300).

The focus on children is a recent phenomenon in academia and social policy directives and reflects a shift from welfare states to neoliberal governance.[2] Gupta (2002), in his comparative work on Tibetan children, notes that in the last decade a new field of 'critical childhood studies' has emerged in western discourses. Scholars using Foucauldian frameworks of discourse and surveillance are examining the normalization of assumptions about childhood that occur in the institutional practices of schools and hospitals, the policies implemented by governments and legal systems, and the wide proliferation of 'expert advice' to parents (particularly mothers) in various media (Gupta, 2002: 37; see also Murphy, 2000; Fox et al., 2009). Current neoliberal models of governance deepen the critical focus on children as they recast responsibility as more of an individual or family matter and less of a collective or social responsibility protected by the State (Cossman and Fudge, 2002; cf. Featherstone et al., 2006; Lister, 2006). The neoliberal State's responsibility is now largely limited to ensuring that families do, in fact, look after their children within a gendered model of good parenting (Robson, 2005: 222).

It is in this context that Baird argues that if the child, and the ways in which children and childhood are constructed, are 'undergoing a period of reconfiguration, then so will those identities that are co-constituted with the child' (Baird, 2008: 298), namely parents. It is precisely the discursive relations of children, parents and politics that we examine in this paper. We begin by looking at a recent Australian medico-legal case of parental neglect in childhood obesity, using this case to examine the powerful constellation of discourses that intersect around the child politics of obesity.

Medical neglect and moral pathology

In a recent contribution to the *Medical Journal of Australia*, Alexander et al. (2009) argue that parental neglect is a causal factor in the growing obesity rates among children. Their paper, 'When Does Severe Childhood Obesity become a Child Protection Issue?', as the title suggests, begs the question of whether State intrusion into familial life is justified in cases of extreme childhood obesity.

Alexander and her colleagues claim that the manifestation of obesity is a matter of genetic predispositions that can be modified by environmental and behavioural conditions. They assert that severe paediatric obesity can often be the result of poor parenting skills, citing a lack of limit-setting and supervision as issues that can contribute to and moderate its expression. The authors suggest that the severely overweight child is often raised by parents who disregard excessive energy consumption and overlook obesity in their children. Parents who allow their children to become severely overweight and do not assist medical professionals to reduce calorie consumption run the risk of placing their child in a life-threatening situation. They are thus non-compliant, even negligent, and medical negligence is constructed as a form of child abuse. Alexander and her colleagues advocate that the neglected child, in order to be 'protected' from incapable parents, should be accessed and managed by healthcare professionals and, in some cases, removed from the parental home as a matter of legal duty. In obesity cases, neglect crosses both parental *and* medical domains, for the obese child is construed as not having the adequate provisions of care to maintain health and wellbeing. In failing to engage with medical advice, parents are deemed not to be acting in the best interests of their child, and the State thus has a duty to fulfil its role as *parens patriae* (parents of the country) (Arani, 2002: 881).

Drawing together their own clinical experience and life histories of several patients, they construct the case of a four-year-old girl whom they name 'Jade'.[3] At 110 cm tall, weighing 40 kg and coming from a family with a strong history of obesity, Jade is identified as exhibiting a number of obesity-related health conditions. The paper describes Jade's parents as separated, and her mother, with a history of post-natal depression, feels unsupported by her ex-partner. Her father has a history of childhood abuse. Finding it difficult to make lifestyle changes or keep to scheduled appointments with a multidisciplinary team of medical specialists, the mother does not manage to reverse the young girl's escalating weight gain. With no improvement in sight and a worsening health situation, State protection services intervene, leading to hospitalization of the child and weight loss.

Childhood obesity has only recently been constructed as a child protection issue in Australia. However, the conflation of childhood obesity

and child neglect is not a new phenomenon in the United States or the United Kingdom (Varness et al., 2009). In the US and the UK, where child neglect statutes are increasingly construed to encompass obesity-related health conditions, parents of obese children may experience the removal of their overweight children or face criminal prosecution (Patel, 2005; Martin, 2008; Bell et al., 2009: 161). In El Cerrito in the state of California, Marlene Corrigan was charged with the felony of child endangerment and later found guilty of misdemeanour child abuse when her 13-year-old daughter, Christina, died of congestive heart failure in 1996. Media reports of the trial focused on Christina's weight (in excess of 300 kg), her unkempt appearance, the dishevelled nature of the family home and her mother's status as single and working (Campbell and Levesque, 1998). Media representations shaped a portrait of Marlene Corrigan as a negligent mother unable to care for her child, and as responsible for her daughter's death.

News media on obesity

In our study we were interested in the media response to Alexander et al.'s article and the selection of discourses used in the reporting and public reception of obesity more broadly. The mass media (including television, video games, computers, magazines and other technologies) has an interesting role to play in obesity politics as it is often cited as a major contributor to the global obesity epidemic. The effect of increased sedentary lifestyles and the marketing and consumption of high fat and sugar content foods (and often directly to 'passive' children; Bonfiglioli et al., 2007) is argued to be a key factor in increased obesity levels. Mass media, however, can also be a public educator, and studies have indicated that the media are often primary providers of science and medical information (Seale, 2002; Hargreaves et al., 2003). Studies examining how the media have dealt with obesity are less common, and have been interested in discursive analyses of how obesity is framed as a problem (Lawrence, 2004), competing frames, and the subtext of reporting that blames particular individuals or groups and then proceeds to manage and regulate them in certain ways.

Alarmist discourses of risk and threat are often utilized to give meaning to health news stories (Lupton and McLean, 1998; Lupton, 2004; Coveney, 2008; Nerlich and Halliday, 2008). In her examination of media coverage of risks associated with food in three Australian newspapers between 2002 and 2003, Lupton (2004) established that almost 50 percent of stories on food risks concerned obesity and overweight and, of those, obese or overweight children received the greatest amount of news media attention. Lupton concludes that the discourses expressed in the news accounts on childhood obesity focused on 'parental responsibility for their dietary choices' (Lupton, 2004: 198).

Building on Lupton's methodological approach we examined the reporting of obesity over a three-month period in three metropolitan Australian newspapers – *The Advertiser*, *The Australian* and *The Sydney Morning Herald* – between 1 January 2009 and 31 March 2009. *The Sydney Morning Herald*, owned by Fairfax Media, and *The Australian*, of News Limited, are both broadsheets. *The Australian*, the only national newspaper, has a broader nationwide audience than *The Sydney Morning Herald*, one of the main newspapers published in Sydney. Owned by Murdoch's News Corporation, *The Advertiser* is a tabloid-format newspaper and has the widest circulation in Adelaide.

In order to collect data on visual images we opted against using text-based databases such as Factiva or LexisNexis and manually searched microfilm of the newspapers in our sample. We sourced 181 articles that included our search terms (obesity, parenting, child, eating and diet), made copies of each, and conducted a thematic analysis of text and visual images. We often encountered content overlap as issues of obesity were frequently constructed as a parenting issue and were closely aligned with food consumption. When obesity was constructed in terms of parental responsibility, the onus was on the parent to help their child lose weight for the specific purpose of reducing overweight-associated health problems.

Who is responsible for fat kids?

Childhood obesity was a major topic in the headlines during this period, comprising nearly half of the articles on obesity. A major discourse in these articles focuses on the responsibility, or rather irresponsibility, of parents to curb and control their children's food choices and appetites. This positioning of parents as entirely responsible for the obesity of their children was evident in the days that followed the publication of Alexander et al.'s journal paper. Australian newspapers ran sensationalized headlines such as 'Obesity is Parents' Fault' and 'Take Fat Kids into Care', along with a letter to the editor titled 'Frightened Child'. An article from *The Advertiser*, '"Protect" Obese Children' (2 February 2009), published on the same day as Alexander and her colleagues' contribution to the *Medical Journal of Australia* [MJA], cites the journal to support the view that State intervention is required in cases of severe childhood obesity: 'Children's Hospital doctor Shirley Alexander says removing children with major weight problems may be appropriate, … in a sufficiently extreme case, notification of child protection services may be an appropriate professional response'. A *Sydney Morning Herald* article, 'Call for Obese Children to be Taken into Care', which appeared on the same day, states: 'The continuing failure of parents to ensure treatment for their obese child could be considered medical neglect when the child is suffering, or is at risk of suffering, associated severe health problems'. Here, the medical discourse of health management and disease prevention is accompanied by another body of understanding that constructs obesity as a moral issue, as a

matter of medical and parental neglect. MJA's recent inscription of obese children as victims in need of protection from irresponsible parents, and Australian news media in citing select excerpts from the article, have targeted parents as morally culpable for obesity and overweight-related medical conditions in their children. Historically, only starvation under certain circumstances could be viewed as neglect. The recent construction of neglect as 'over-provision' requires a reinvention of what constitutes a failure of duty to provide, which specifically now includes a duty to manage surplus in addition to insufficiency.

Despite the reported multi-factorial (and conflicting) causes of obesity (including biological, genetic, psychosocial and dietary and lifestyle; Reilly et al., 2003), *The Advertiser* unequivocally narrows the frame and blames the parents of obese children for their unhealthy eating habits and excessive weight gain. The headline 'Obesity is Parents' Fault' (5 February 2009) is the predominant type on the whole sheet, running in a large, bold font across the top of the page. The article states that because 'children copy their parents' food choices' from an early age, ante-natal education classes on nutrition should be enforced to discipline mothers into making healthy food choices. *The Advertiser* asserts that these statements, made by health scientists at the University of South Australia, are the results of cutting-edge research which could help lessen the burden of the 'nation's obesity crisis'. In this article, obesity is not only a medical issue; it is a learned behaviour where children reproduce the eating habits of parents who do not provide a proper nutritional dietary influence in their children's lives. While parents are blamed for overweight children, it is types of parents who are singled out as lacking in skills and producing excess bodies. Parents from low socio-economic areas are represented as 'more likely to be obese or overweight and less likely to consume healthy foods' (*The Sydney Morning Herald*, 2 February 2009), and therefore have an increased risk of raising obese children. The corollary is that parents of low socio-economic status are more likely to lack parenting skills around limit-setting for food and behaviours and they do not 'always have a solid understanding of portion sizes' (*Weekend Australian*, 7–8 February 2009), and as a result they are constructed as 'more' responsible for childhood obesity. Such a deficit understanding that characterizes certain parts of the population as 'at risk' and likely to take more risks, is a 'characteristic [representation] of ... the poor, the working class ... and other "deviant groups"' (Evans et al., 2003: 233).

The sensationalism around children's eating and parental responsibility is not confined to the print media. Broadcast in Australia in 2006, the six-part television series *Honey We're Killing the Kids* similarly holds parents responsible for childhood obesity. The show uses the expert knowledge of its child development specialist and presenter to educate parents and the broader national audience about responsible eating and, by extension, responsible parenting. The programme fails to consider any other meaningful

socio-cultural or economic influences that may impact on their children's eating practices. Instead, as Kendrick (2008) points out, it expounds a particular discourse about parenting: 'the hallmark of the good parent is constant vigilance of a child's body weight and eating habits in order to prevent childhood obesity' (Kendrick, 2008: 398). In contrast, parents who do not intervene in the food and lifestyle choices of overweight or unhealthy children are portrayed as 'bad', even 'monstrous' (p. 390), and fatness is linked to a chaotic, hostile and dysfunctional family home (p. 394).

A failure of mothering

While our study confirms Lupton's earlier findings of parents being blamed for obese children, we argue that she overlooks a central discourse of gender that permeates the media. The newspaper items reproduce clear gender differences through a division of labour, accentuating women's roles in the domestic sphere and highlighting the role of maternal responsibility above and beyond paternal responsibility. Obese and overweight children (regardless of gender) are discussed more frequently than obese and overweight adults, and in these discussions mothers are consistently singled out.

Although articles often refer to 'parents' generally, the notable absence of fathers coupled with the personal reference to mothers, sometimes including their name and a photographic image, demonstrates that 'parents' often serves as a euphemism for mothers. Daniel and Taylor (2006) similarly note that in UK policy documents on child neglect, the term 'mother' is now routinely replaced with 'parent'. While this might indicate that parenting tasks are undifferentiated by gender (although there is little evidence to support this; EOC, 2003), we would argue that such interchange of terms only serves to mask the gendered nature of parenting. As many scholars have already noted, (see, for example, DeVault, 1991; Stapleton and Keenan, 2009), 'food related activities are traditionally understood [and continue] to be the responsibility of women' (Lake et al., 2006).

Mothers were frequently portrayed in our media analysis as carrying the sole responsibility for shaping the food preferences and lifestyle habits of their families. An article in the *Sydney Morning Herald*, titled 'Tackling Childhood Obesity: Get Mum Fit Too' (7–8 February 2009) points to the role of 'parents' in modelling healthy eating and regular exercise for their children. It then states that it is not parents but pregnant women and new mothers who can (and should) protect their children from childhood obesity by establishing and including their babies in a regular exercise routine. The newspaper item refers to the Alexander et al. (2009) article, emphasizing the case of the severely obese girl who was taken from the parents who neglected her escalating weight and allowed her to 'watch six hours of TV everyday and eat whatever she wanted'. It was not mentioned that the scenario was an abstraction of multiple cases, that the story of 'Jade' was in itself a fabrication. Juxtaposing the failed mother and her

obese child, the article shows a photograph of a new mother doing the 'right' thing. Anna Barwick is pictured on all fours, working out with a large smile extended across her face. Beside her is her 24-month-old son and they are both surrounded by other mothers and their babies preparing for their first team triathlon as part of the KidFit sessions that are designed for parents and their children. Such an example demonstrates the active creation of fiction around childhood, health and maternal responsibility within a culture of surplus.

Ambivalent discourses of mothering

While this particular news story constructs mothering across Cartesian lines, in which good and bad mothers are presented as opposite cases, these contradictions of mothering operate in a dialectical relationship in which all mothers are subject. Hays (1996) argues that the dominant ideology of appropriate parenting techniques is a constellation of varying, and often opposing, ideas. On the one hand, parents, or mothers, are expected to be selfless in the rearing of their children. According to Hays (1996), this gallant and valorizing approach to mothering has been greatly espoused by child behaviour experts (such as Brazelton, 1983, 1987, 1989; Spock and Rothenberg, 1985, 1992) and pervades popular culture. According to this model, mothers should totally reconfigure their lives around their infants, their behaviour, feeding and sleeping routines. It, in effect, consents to children determining their mother's conduct. This approach continues into childhood, with the mother sacrificing her own wants and needs as her children's desires continue to take centre stage. On the other hand, mothers should carefully balance their unconditional love toward their children with discipline, fostering within them socially appropriate behaviours that are deemed fit and proper.

Responsible and dangerous mothers

Mothers thus tread a fine line between permissive parenting and being disciplinarian. They are both dangerous and morally responsible. They are morally responsible for feeding their children according to appropriate social conventions (cf. Lupton, 1996: 41) and, on the other hand, their food choices can have potentially dangerous consequences such as overweight and obesity. Hays (1996) argues that an ideology of intensive mothering marks the dominant set of beliefs and practices around childrearing. Resting on the assumption that children are innocent or sacred, and that mothering is an instinctive and 'natural' trait in women, this ideology holds mothers as the appropriate primary carers of children and constructs the proper methods of care as 'child-centred, expert-guided, emotionally absorbing, labor-intensive, and financially expensive' (1996: 8). This constellation of beliefs, which is incompatible with the individualist and economic rationalist foundations of our public lives as often evidenced in

the paid workforce, also construes a particular dichotomy of 'good' and bad' mothers. The 'good' mothers are those who place their children's needs before their own, and the 'bad' mothers are those who don't. In this cultural patterning, obese children are the product of 'bad' mothers – morally irresponsible mothers who do not achieve or maintain the dominant ideology of intensive mothering.

Morally responsible mothers are concerned first and foremost with the health and wellbeing of their children. Accountability for nourishing their children begins in pregnancy, when the mother is expected to support the healthy development of her foetus by increasing, even supplementing the nutritional content of her diet, discontinuing consumption of alcohol, caffeinated and other potentially harmful substances.[4]

This committed approach to feeding continues once the baby is born. The mother is expected to breastfeed her baby and later introduce it to a diet of nutritionally sound solids. A strict dietary regimen develops, where the morally responsible mother makes nourishing meals to provide to the child on a daily basis. Lupton notes that 'in most households in western societies the purchase and preparation of food for the family is the major responsibility of women' (1996: 39). This knowledge of the proper kind and quantity of food to provide children comes to the mother from various sources, including 'medical, public health and nutritional bodies, child welfare agencies, formal education institutions and popular cultural products such as books, newspapers and magazines and radio and television programmes on nutrition' (p. 41). Caught in a web of regulation and normalization, the ideal mother, informed by 'experts', acculturates her children into the appropriate eating habits and thereby safeguards them from obesity (p. 39; cf. Coveney, 2008). The mother who does not comply with these time- and energy-intensive methods of childrearing is suspect. A danger to the health and longevity to her child, the mother whose actions are not expert-guided, who does not labour over her child's eating regimen meticulously to manage the nutritional balance of their diet and healthy development, is a moral failure.

Innocent and risky children

In our sample, Australian newspapers represented 'the child' as a homogenous category suffering from mothers' failures to provide appropriate food. Here, 'the child' is innocent, for it is mothers who 'allow' kids to become fat. This innocence, however, exists alongside a discourse of risk. Commonly presented in the news articles was the idea that an increased prevalence of obese children is tantamount to the rise of a generation of obese adults. In obesity politics the child is both an innocent figure and representative of a (morally compromised) future. The anthropologist James (James and James, 2004) exposes contradictory discourses at play in current constructions of childhood. Noting different perspectives in contemporary England, she

explains that the child is both vulnerable and innocent and yet also a threat – a 'social group in need of order and containment' (p. 10). This ambivalence, she states, 'is present in the many and various laws and policies through which children's lives are [increasingly] governed and controlled' and which presuppose that children live in 'a unitary "childhood"', despite the diversity of children's experiences (p. 11).

As the case of 'Jade' in the *Medical Journal of Australia* and the subsequent media articles illustrate, the uncritical construction of 'the child', a singular name or term 'used to represent an entire category of people – "children"', actively disregards the particularity of a person's life story and 'by collectivising children in this way, reduces their significance as agents with individual contributions to make' (James, 2004: 15). This 'conceptual slippage' between two different terminologies – a particular child and the collectivized child, who is idealized as innocent while also construed as being in need of restraint or discipline – works against the agency of children and implies they need greater surveillance. In so doing, the combination of these ideologies of childhood – the child as innocent and the child as risky – highlight a need for disciplinary action. 'The child' needs to be monitored, regulated and groomed, and a growing field of child and parent legislature and policies now abound in order for this to occur.[5]

Implications of child politics

In her examination of New Labour's agenda for children in an emergent 'social investment state' in the UK, Lister argues that 'there is a strong whiff of authoritarianism in the measures adopted to ensure that parents (typically mothers) turn their children into responsible children' (Lister, 2006: 326). Her discussion of recent UK legislation to assist parents in raising competent and responsible citizens highlights legislation that reinforces an increasing social control of childhood. Specific acts and forces of regulation such as the Anti-Social Behaviour Act (2003) and Crime and Disorder Act (1998), whilst aimed at the behaviour of children and young people, entail parents through enforcing them to take responsibility. In terms of truancy, for example, parents can be fined, asked to sign contracts, or ordered to make their child go to school. Ultimately they can face custodial sentences. The first parent to be jailed under this act in 2002 was a mother (Curtis, 2009).

This type of legislation falls under a broader context of neoliberal governance and is central to the play of child politics and obesity. However, an emphasis on choice (choosing the right foods) and individual responsibility (care of oneself), which is paramount to neoliberal ideology, operates differently when familial relationships are involved. Constructed as innocent and vulnerable to market forces, children are considered 'irresponsible' in relation to their unwillingness to eat the 'right' foods (Colls and Evans, 2008: 625) and they need to be protected from corporate marketing. As primary carers, it is mothers who are expected to take on these responsibilities,

and if children become obese, mothers have failed in this duty. This responsibility is not isolated to the mother–child nexus, but extends into the temporal 'space[s] for future health' (Murphy, 2000: 296) that mothers are inserted into.

To consider childhood obesity as a result of failed mothering provides a simple explanation to a complex issue. A clear logic underpins this thinking, in which assumptions about women as primary caregivers are reinforced. If obesity is a failure to care for oneself, then children who are obese have not been properly cared for by others (their mothers). This is neglect, and 'neglect is an indication of lack of nurturing; nurturing is carried out by mothers; therefore, when nurturing is absent the problem must be a problem of mothering' (Daniel and Taylor, 2006: 427).

The danger of following this logic is that mothers are entrenched in a web of blame, and this conclusion fails to acknowledge a range of structural and social factors that are already widely implicated in obesity discussions. Laying the blame with mothers negates the role that fathers and other significant family/community members may have in caring for children. Other people have significant social relationships with children, and children are part of a much broader social environment that has a powerful effect on their everyday worlds.

There is an assumption in popular and policy discourses that parents can successfully manage their children, and that traditional family structures in which parents maintain control of their children is desirable (and the 'norm'). This assumption overlooks questions of agency, identity and resistance which children strategically negotiate, embody and practise. Moreover, this line of thinking about a generic 'child' does not account for children who may be very difficult to manage, the diverse circumstances of family life (unemployment, sole parenting, lack of supports, poverty), the lack of choice in everyday lives, and the skills and time needed by the parent to manage children. Thus, there is a network of circumstances and a range of structural factors that need to be considered in child politics, but these are ignored when the focus narrows to mother–child relationships. In all of our examples – from the fictional Jade in the media reporting we collated, and in popular televised images of obesity (Kendrick, 2008) – the constraints placed upon mothers (and children) by gender roles, socio-economic status or ethnicity are ignored. And in ignoring these constraints, the weight of responsibility placed on mothers is simply disproportionate (Jackson, 2009: 256).

Conclusion

A framework of child politics has enabled us to trace a constellation of discourses embedded in assumptions of childhood obesity. Specific ways of thinking about childhood, the naturalization of mothers as responsible for their children's health (and thus the health of future populations), and

neoliberal governance come together to produce a gendered model of blame. The example of Jade and print media responses to this case display the ways in which these discourses narrow the causes of obesity to 'parents', which is a gender-neutral disguise for 'mothers'. Jade is the innocent child of a quintessentially 'bad' mother and it is against this fictive model that images and stories of 'good' mothering are counterposed.

Central to the fundamentalism of such child politics is a decontextualization of the child. 'The child' is an abstract signifier for all children, which strips them of relational contexts and constructs them as vulnerable in a world of harm and risk. Those people who are constructed as potentially harmful to children (such as asylum seekers allegedly throwing their children overboard, Indigenous Australian adults for the alleged sexual violation of their community's children, and mothers who allow their children to become too fat) are, through their own failures, made increasingly vulnerable to regulation and criminalization. For it is by virtue of mobilizing traditional and particular ideologies of childhood and mothering that the rigid forces of the State can intervene 'in the name of the child'.

A return to State intervention in the protection of obese children thus raises questions of the theoretical limitations of Foucault's concept of governmentality. While Foucault wrote about the ways in which governance operates through self-surveillance and technologies of self, he did not account for those who failed in this regulatory task. Mothers who fail to monitor and discipline their children's bodies are, ironically, being blamed for producing 'docile' bodies. Their failure to successfully negotiate the art of governance means that they enter what Donzelot (1979) calls a system of tutelage, in which authority over their children is replaced by the authority of the State. The power associated with governmentality *and* judicial sovereign power intervene, from local councils and health authorities to broader legal injunctions that may take children into State care. The intrusion of the judicial State into family homes and mothers' lives points to the continued presence of sovereign power, and the ways in which it has been 'increasingly incorporated into a continuum of apparatuses (medical, administrative and so on) whose functions are for the most part regulatory' (Foucault, 1998 [1976]: 144). This is not juridical regression, but an example of power as working between different axes, of the relationships between micro (capillary) and macro (arterial) forces.

Child politics questions the dualist focus on pre-modern and modern forms of power that are cited in governmentality studies, and asks us to rethink the role of State in neoliberal governance. In governing from a distance the State has not completely disappeared or replaced traditional strategies of top-down control (McKee, 2009: 481). Rather, the centralizing tendencies of the State continue to co-exist alongside decentred modes of neoliberal governance (McKee, 2009: 481). When people refuse to engage with political projects, fail in their assumed responsibilities or fail to achieve

desired outcomes (such as failing to reduce children's weights), a multifaceted range of governing forces swing into action. The fact that mothers are legally culpable for producing fat, docile bodies of children demonstrates not only the complex alliance between judicial (punishment) and non-judicial (welfare) agencies, but also how sovereign power remains a significant and important player in contemporary forms of governance.

Acknowledgements

Notes

1 In 2007 the Australian Federal Government, in response to the Northern Territory Board of Inquiry into the Protection of Aboriginal Children from Sexual Abuse (2007), took emergency action. The intervention (as it has come to be known) was a military-style model involving deployment of law and military enforcers and welfare changes: 'no meetings, no permits, no obligations and no negotiations – the things that strangle resolve – just doing what he [John Howard] deemed necessary' (Johns, 2008: 70). This action was exempt from the Racial Discrimination Act of 1975, and included the Commonwealth takeover of Aboriginal lands on 5-year leases.
2 Indigenous children taken from their families and lands under Australian Federal and State government acts of protection and assimilation from 1869 to 1969 have also been subject to intense scrutiny by government policy and this has been commented on extensively in academic work. Children marked as 'Other' due to race or other forms of difference are an exception to the more recent focus on children in general as a population in need of management.
3 Unfortunately this depersonalizing of Jade reproduces the broader future-orientated discourses which present the child as 'a unified, homogenous and undifferentiated category' (Dobrowolsky, 2002: 67). The effect of this is to downplay structural determinants of social class and reframe obesity as a matter of individual responsibility in the quest to equip oneself to take advantage of 'life's chances' (Hendrick, 2005: 56).
4 The accountability placed on women for the health of their children begins *before* pregnancy. Woman are now being encouraged to nutritionally prepare their bodies for pregnancy (e.g. by taking folate).
5 The increasing prevalence of breakfast clubs and parenting nights that focus on health and nutrition demonstrates the ways in which schools have taken an '*in loco parentis*' role 'to compensate for what [is] not being taught or provided in the home' (Vander Schee, 2009: 564, 570).

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Biographical notes

Tanya Zivkovic is a Research Officer at the Life Course and Intergenerational Health Research Group, University of Adelaide, and Visiting Research Fellow in the Discipline of Anthropology, University of Adelaide. Her work focuses on gender and obesity in Australia and Tibetan Buddhist understandings of the body and life course. *Address:* Life Course and Intergenerational Health Research Group, Faculty of Health Sciences, Discipline of Anthropology, Faculty of Humanities and Social Sciences, University of Adelaide, Adelaide 5005, Australia. [email: tanya.zivkovic@adelaide.edu.au]

Megan Warin is a social anthropologist whose research and teaching interests coalesce around theories of the body (including the dynamics of desire in anorexia and classed and gendered experiences of obesity) and the Iranian diaspora (specifically Iranian women's phenomenological experiences of remembering and forgetting).

Vivienne Moore is Co-Director (with Associate Professor Michael Davies) of the Life Course and Intergenerational Health Research Group at the University of Adelaide, South Australia. Her research investigates the social and behavioural influences on women's and children's health within a life-course perspective, and gender inequalities in health.

Michael Davies's research investigates early life factors that impact on the health of Australians within and across generations.