Eating Disorders and Obesity as Social Justice Issues: Implications for Research and Practice

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Abstract

The purpose of this paper is to explore the usefulness of considering eating disorders and obesity as social justice issues. Looking at systemic issues opens possibilities for new approaches to practice and research. By connecting at the root of eating issues, proposed as social justice, perhaps real change can occur.

It was the best of times, it was the worst of times, it was the age of wisdom, it was the age of foolishness, it was the epoch of belief, it was the epoch of incredulity, it was the season of Light, it was the season of Darkness, it was the spring of hope, it was the winter of despair, we had everything before us, we had nothing before us, we were all going direct to Heaven we were all going direct the other way - in short, the period was so far like the present period...

Dickens, 1997, p.3

This famous quote is reflective of the current state of people who work in the fields of eating disorders and obesity. In many ways, work in these fields has advanced to be recognized and respected for contributions to improving the lives of many people. At the same time, the relevance of our work as clinicians, educators, and researchers can be called into question (Nasser, Katzman & Gordon, 2001). We have made a direct impact on the treatment of eating issues and dysfunction, participated in efforts to minimize or prevent emotional or behavioral maladjustment, and intervened in ways that help improve lives (Striegel-Moore & Smolak, 2001). The range of activities is vast and diverse. Yet, there is a sense that our efforts may not be sufficiently connected to many
systemic roots that determine people’s relationships with food and with their bodies. Previous efforts have focused predominantly on prevention and treatment in contexts where food and financial resources are abundant. However, in light of the thousands of children each day that die from hunger, this work seems, frankly, not enough. The quote above is also reflective of the dichotomy that exists in power and privilege within and between cultures. As one culture drowns in the consequences of excess, another culture thirsts for the basic necessities.

Social justice is an emerging concept in counseling (Helms, 2003; Kiselica & Robinson, 2001). The purpose of this paper is to begin to explore the usefulness of considering eating disorders and obesity as social justice issues. A social justice approach to counseling refers to using counseling to confront injustice and inequality. The purpose of social justice work is twofold. Firstly, it is meant to increase a client's sense of personal power or efficacy (Kiselica & Robinson). Secondly, sociopolitical change should result. Oftentimes, unconventional approaches are needed in order to reach both goals. Kiselica and Robinson (2001) “…urge counselors to identify some human condition that moves them so deeply it inspires a personal moral imperative to make this world a better place by advocating for others…” (p. 396). First, to begin the discussion of social justice as a potential lens for viewing both eating disorders and obesity, definitions and a rationale will be presented to provide the needed background. Key issues that arise from addressing this conceptualization will be discussed and current gaps in the literature will be identified. Finally, implications for research and recommendations will be shared with the intent of advancing the idea of eating disorders and obesity as social justice issues.

Background

To create a context for discussion a brief description of the three concepts under examination, obesity, eating disorders, and social justice, follow.

Definitions

*Obesity.* Although the definition and conceptualization of obesity varies, it is generally accepted that “obesity is the state of a body resulting from energy intake exceeding energy expenditure for prolonged periods resulting in excessive body fat gain, and this excess body fat increases morbidity and mortality rates” (Cope, Fernandez & Allison, 2004, pg. 326). The World Health Organization defines obesity as a chronic physical illness (Bosch, Stradmeijer & Seidell, 2004). Obesity is not a new phenomenon, but there is mounting evidence that obesity is increasing and continues to become more prevalent (Hedley et al., 2004; National Center for Health Statistics, 2002; Perez, 2004).

*Eating disorders.* There is general agreement about the criteria for diagnosis of anorexia nervosa (AN) and bulimia nervosa (BN) as defined in the Diagnostic and Statistical Manual of Mental Disorders (DSM IV) (American Psychiatric Association (APA), 1994). Eating disorders are characterized by severe disturbances in eating behaviors and attitudes (Cavanaugh & Lemberg, 1999). Both AN and BN are characterized by weight preoccupation, fear of fat and a sense of self unduly influenced by weight and body shape concerns (APA, 2000). When distinctions between AN and BN are drawn, it is
usually because of weight and associated medical complications (Walsh & Garner, 1997). People with AN are underweight while people with BN tend to be of average or above-average weight. Less conclusive or agreed upon is the definition and criteria for a diagnosis of Binge Eating Disorder (BED) (Marcus, 1999). However, people with BED usually suffer from binge eating episodes without the compensatory behaviors seen in BN (Reagan & Hersch, 2005). There seems to be agreement that eating disorders result in serious physical, psychological, and social difficulties and dysfunction (Engel et al., 2006).

Social justice. The definition of social justice remains illusive despite the growing literature (Drevdahl, Kneipp, Canales, & Dorcy, 2001). Arthur and Collins (2005) in a recent review of the literature have combined previous work and define social justice as, a value that underpins an examination of societal concerns. The overriding goal of social justice is ‘full and equal participation of all groups in a society that is mutually shaped to meet their needs. Social justice includes a vision of society in which the distribution of resources is equitable and all members are physically and psychologically safe and secure (Bell, 1997, p. 3). At the heart of social justice is an examination of social structure inequality and practices that involve unequal power distributions, determining those with power (i.e. privileged and dominant groups in our society) and those without power (i.e. the oppressed and non-dominant groups in our society) (Chizhik & Chizhik, 2002). (p. 196) Regardless of definition, social justice remains an issue wrought with tension and conflict (Drevdahl et al., 2001) in part because of its political nature (O’Neill, 2005) and complexity (Speight & Vera, 2004). The examination of eating disorders and obesity as social justice issues opens the possibility that we can see eating issues in new ways.

Key Issues

Anytime a major shift in the conceptualization of an illness or problem is proposed, a number of key issues arise. Four issues will be addressed in turn including the complexity of the concepts, competing approaches, the focus on the individual, and culture-bound syndromes.

Complexity

Health professionals who work with eating disorders tend to be divided from and sometimes work in opposition to those who work in the obesity field and vise versa (Neumark-Sztainer, 2005). The competing agendas is best illustrated by a quote in the Daily Telegraph in June 12, 2000,

Instead of pillorying skinny models and actresses we should be thanking them for performing a valuable public service. They are the inspiration for young women to be thin. They help maintain the social stigma that controls obesity. The odd anorexic is a small price to pay. (as cited in Evans, Evans & Rich, 2003, p. 215)
Similarly, exercise is seen as such a virtuous activity in the battle against obesity that it is difficult to understand that, in excess, exercise can be unhealthy. Many people, especially males, report an obsessional preoccupation with their muscularity to the point where their social and physical functioning is impaired (Pope, Olivardia, Gruber, & Borowiecki, 1999). Exploring the possibility that eating disorders and obesity are social justice issues, brings three complex (and sometimes competing) concepts in and of themselves into light. The complexity of these issues is also illustrated by the controversies that exist within and between both obesity and eating disorder interventions. Fuzziness results from a lack of agreement on definitions and conceptualizations of the problem. In addition, even when standard definitions are accepted, there are vast discrepancies in how to approach the problem. Within obesity there is the Health at Every Size Movement (HAES) which takes opposition to the current medical standards of obesity treatment (Gaesser, 2003). Concurrently, within the eating disorder field, there is a Pro-Anorexia Movement (Pro-Ana) lobbying for the freedom to choose starvation as a lifestyle choice (Fox, Ward, & O'Rourke, 2005). Add to the mix the concept of social justice which suffers from its own lack of clarity and agreed upon definitions (Arthur & Collins, 2005) and there is a complex web to sort through.

**Competing Approaches**

Although simplistic, conceptualizations of eating issues can be boiled down to some version of two, albeit, differing approaches. The first approach is the medical model where eating issues are seen as psychophysiological disturbances within the individual. The second approach is the political model where women internalize gender norms. “The actual development of an eating disorder for a given individual may depend on physiological factors but insofar as the internalization of these norms is primary, eating disorders are best taken as a matter for political analysis” (Lavaque-Manty, 2001, p. 152). The medical approach sees the problem as within the individual whereas the political approach conceptualizes the problem beyond the individual.

For weight in particular, dominant definitions of impairment and disability are entangled in culture debates about medicalization, group and individual autonomy, cultural decisions and consequences of pathologizing certain bodies, demanding corrective action on the part of individual people rather than collective social action (Herndon, 2002, p.123).

There is a tendency to define problems from a medical perspective and locate the problem within the individual rather than see eating issues as the domain of the individual, the family, and/or the community (Williams, 2001).

**Blame the Individual**

People need to be responsible for their actions, but all actions take place within a context. In our current North American cultural context, fatness is seen as an outward sign of neglect of the body and thinness is seen as a virtue requiring almost obsessive attention to self-control (Evans et al., 2003). Another interpretation would describe our culture as blaming the victim for an adaptive response to their environment (Srebnik &
Saltzberg, 1994). Women are reminded that they are violating their social role by taking up too much space as overweight is seen as not only a medical emergency but an affront to what it means to be a woman (Wise Harris, 1990). Raphael (2002) in a paper entitled, “Social justice is good for our hearts” goes so far as to say that it is not lifestyle factors that cause cardiovascular disease but rather low income, social exclusion, and inequality that are the real culprits. In other words, with a social justice orientation to eating disorders and obesity, societal issues related to health status are addressed because differential health status across diverse communities is the focus rather than the intrapsychic nature of the problems.

**Culture Bound Syndromes**

It is perhaps through the lens of social justice that the gross inequities within and between countries can be viewed. For example, there are huge health discrepancies and disconnections within and across countries. For example, in the USA there is a 20 year gap in life expectancy between the most (rich) and least (poor) advantaged populations (Marmot, 2005). Across countries, there is a spread of life expectancy of 48 years with Japan having an overall life expectancy of 81 years and Sierra Leone with an overall life expectancy of 34 years (Marmot, 2005). Eating disorders, once considered culture-bound syndromes, have emerged in cultures that did not previously value thinness, following introduction of western media and in the context of rapid social change and unrest (Becker, 2004). Interestingly, the effects of the political and economic conflict that women play out on their bodies (expressed through eating disorders or obesity) are similar to the effects of violence on the landscape of any other war (Wise Harris, 1990). In this metaphor, the landscape shifts to personal property and the method of assault occurs through food consumption or withholding. It is almost as if the larger political and economic struggles of the country are paralleled by the relationship women in the country have with food and their bodies.

For hints at how larger global concepts inform our understanding of eating issues, the idea of eating disorders as culture bound syndromes is noted. Feminist scholars have long opposed the conceptualization of eating disorders as appearance based because it casts attention away from the real expression which is the need for control in social positions of little power (Nasser et al., 2001). Some scholars (i.e. Nasser) have gone so far as to define eating issues as culture-chaos syndromes basing the argument on the fact that,

> The emergence of eating disorders in areas that were once thought to be culturally incompatible with them...the one theme that seems to unite these disparate geographic and cultural regions is that they are either highly developed economies (Hong Kong and Singapore) or they are witnessing rapid market changes the their associated impact on the status of women. ([brackets added], Gordon, 2001, p. 11)

The irony is that the Westernized world not only introduces eating disorders as a side effect of economics but brings with it food consumption patterns that fly in the face of thinness as the ideal.
Gaps in Current Literature on Eating Disorders and Obesity

Much of this information is not new. Feminists have talked about eating disorders as a question of justice for years and what is ‘fact’ can be easily tied up into questions of value (fat is bad, thin is good etc.). However, exploring the idea of eating disorders and obesity as social justice is new and thus there are gaps in the literature that need further explication with research. First, most writing that informs this idea is theoretical and conceptual in nature. Second, research looks at either eating disorders or obesity and rarely considers both as part of the same continuum. Third, there is little actual research study addressing the issue of eating disorders/obesity as social justice issues. Eating disorders and obesity need to be examined from a lens that acknowledges the broader context (social, economic, and political) within which these issues occur. Finally, gender has long been recognized as an important construct to consider when discussing eating issues. However, the argument that eating issues are used to keep women in their place does not account for the increasing number of males coming forward with eating disorders and disordered eating (Levine & Smolak, 2006) or the large numbers of boys and men who are obese (Perez, 2003). Furthermore, gender as a construct does not recognize the multitude of demographic and social vectors that activate the risk for obesity and eating disorders. Power may be a more valuable concept for developing our understanding of eating disorders and obesity as social justice issues. For example, socioeconomic status needs to be considered when making statements such as black people tend to have higher incidences of obesity than white people (Kumanyika, 2005). Moving from gender to power as a construct may also be useful when considering potential next steps to advancing the idea of eating issues from a social justice perspective.

Implications for Research

Eating issues from a social justice perspective must now move beyond conceptual understandings and theoretical discussions to research approaches that support the idea both in the content of what is studied and how eating issues are studied. Four areas of focus are recommended, including feminist researchers and embodiment, research on systems, global interprofessional practice, and inclusion of communities.

Feminist Researchers and Embodiment

Feminist researchers need to address their own embodiment, defined broadly here as the experience of living in one’s body (Cash, 2004), given that they have led the charge for eating issues to be seen as political and justice issues.

For many...feminist scholars, fat is particularly scary and threatening, often evoking contradictory desires and troubling realizations. Fat tests the boundaries between individual desires for certain embodiments and larger feminist goals of resisting corporeal ultimatums precisely because so many women and/or feminists struggle with their own physical identities. (Herndon, 2002, p.131-132).
Boushel (2000) notes that feminists have made major contributions to research by amplifying the issues of inequality and exploring research questions from ‘the inside out’ (p. 76). Often, feminist researchers are from a culture which abhors fatness and glorifies thinness and thus, self-reflection is critical. In order to unite in a global context, issues around embodiment need to be both political and personal.

Research on the Systems

Eating disorders and obesity are powerful exemplars of social problems being redefined within the individual. Eating issues serve to shift our gaze from the social conditions that produce them, to pathologizing the individual that carries the weight (literally) of our social plight. The advantage of this shift in focus is that it dilutes attention from the structural change that would be needed to actually make a difference (O’Neill, 2004). We must recognize the interdependence of our national systems (Polack, 2004) and look at how economics shape us. People with anorexia exist in the lands of plenty and starving children in the land of none. Yet is it this simple? Perhaps the ‘have nots’ that live in the lands of plenty would argue this point given that it is probable the ‘have nots’ are not anorexic but rather obese. There are social justice perspectives to be explored within and between countries.

I am proposing more than an abstract commitment to social justice issues. Health professionals working with people with eating disorders and obesity are in a prime position to put their money where their client’s mouth is. Piran (2001) argues that academics and practitioners have a role in uncovering the complex social meaning of eating issues. We need to stop trying to foster change within a system that supports eating disorders and obesity, and look to transforming the larger systems that create the problems in the first place (Speight & Vera, 2004).

Interprofessional Practice on a Global Scale

Given the complexity of eating disorders and obesity, the delivery of comprehensive services warrants an interprofessional team approach (Blumenthal & O’Keefe, 1996) and not just in treatment services. It is well established that an effective way to organize and deliver mental health treatment services is through a multi-disciplinary team (Colombo, Bendelow, Fulford, & Williams, 2003). An interprofessional team of professionals has potential to be responsive to individual, family and community needs because of the diversity of expertise and areas of focus. Further, an interprofessional approach to social justice issues increases the probability that the global impact will be considered. Collective team identification, defined as “…a sense that membership in one’s team is an emotionally significant aspect of one’s identity” (Van der Vegt & Bunderson, 2005, p. 535) has been identified as important to success. Social justice awareness and intention may give the added dimension that unites eating disorder and obesity researchers. Van der Vegt and Bunderson (2005) suggest that expertise diversity will likely have a positive effect on performance of the team if members feel identified with their group.

Interprofessional work in the area of eating disorders and obesity needs to involve people one might not traditionally considered a part of such a team. For example,
anthropologists may be an important member of a team as they are trained to look at larger systems such as food consumption etc. If eating issues are considered a political analysis, a number of professions may need to be invited in order increase our understanding and potential impact and may include lawyers, historians, political scientists, politicians, entrepreneurs, CEOs of industries, business managers etc. Professions concerned with society, culture, and populations; such as sociology, anthropology, and public health will be important shareholders and offer important perspectives not often considered in our understanding of eating disorders and obesity. Approaching these issues using a broader lens from that which we are accustomed will require support and partnerships from professions not typically considered. With the broader view of eating issues as social justice, a broader vision involving multiple professionals is needed.

Research from the Perspective of the Communities it Effects

Research approaches to eating disorders and obesity needs to include all the shareholders (fat people, people with eating disorders, families of, professionals who treat and prevent issues, diet industry, fashion industry, the ‘haves’ and the ‘have nots’ etc.) The social, political, cultural and economic aspects need to be pushed to the forefront and research needs to target systemic change to address the inequities as a matter of policy and practice. Starvation in any context has far reaching effects beyond the biomedical implications. Regardless of the context, it can be seen as a global health concern. As such, research on eating disorders and obesity from a social justice perspective would, by definition, involve researchers from low and middle income countries. A social justice perspective would require that research result in outcomes that address the discrepancies that sustain the eating issues in the first place.

Recommendations for Future Research

Understanding the broader context of eating disorders and obesity may result in a more balanced approach to research and practice; one that moves beyond the individual. First, we need to better understand the global context and how political, social and economic factors influence our relationships with our bodies. Second, by building connections with researchers from low and middle income countries, international collaboration will be strengthened and thereby further encourage a global lens. Third, expanding our thinking opens up possibilities for partnerships and broadens the target of intervention. It is hoped that a critical examination of our practices and values in the area of eating disorders and obesity will produce benefits for the people in a privileged position. In turn, exploring the connection will hopefully result in benefits to those who suffer from hunger, in one form or another. For example, what if we could harness the energy that women in the Westernized world invest in their appearance and refocus that energy to addressing global hunger? How a more global approach to weight-related issues will manifest must be informed by the people it affects most and is limited only by the constraints of old ways of conceptualizing the problem.

Conclusion
Viewing obesity and eating disorders through the lens of social justice offers new perspective on what leads people to struggle with weight-related issues and offers potential to consider broader, systemic approaches to understanding behavior. Given the complex nature of eating issues and their continued prevalence, it is argued that we need to consider new perspectives on these social issues. Efforts to treat or prevent eating issues have not been sufficiently connected to the many systemic roots that determine people's relationships with food, with their bodies and with each other. If professionals can connect at the roots of this issue, proposed here as social justice, perhaps real change interventions can be designed and implemented. Current approaches to the treatment and prevention of weight-related issues tend to see the problem as within the individual. A social justice approach pushes the boundaries of problem definition beyond the individual to consider larger systemic influences. As such, research questions need to expand beyond the intrapsychic nature of inquiry to a more global vision of the nature of obesity and eating disorders. Connection at the root of these issues, offers potential for research explorations that recognize the need for fundamental changes to keep pace with an increasingly complex society.

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