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Exploring the Relationship Between Pedagogy and Physical Cultural Studies: The Case of New Health Imperatives in Schools

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This paper explores how we might better engage with pedagogy as a feature of the growing field of Physical Cultural Studies (Andrews, 2006). It is promulgated that pedagogy and physical culture, as disciplines, may benefit from a much stronger dialogical engagement. In progressing these discussions, the paper draws on the case of the current interest in what is putatively described as a childhood obesity epidemic, to illustrate how physical cultural practices relating to “health” produce public pedagogy which speaks to a complex interplay of political, social and technological relationships.

Why an Integrated Approach?

In recent years, in his paper on kinesiology’s inconvenient truth, Andrews (2008: 45) suggested the very demise of Kinesiology has been caused by “intensified subdisciplinary specialization and fragmentation and fundamental lack of comprehensiveness” and that the emergence of Physical Cultural Studies (PCS) offers a potential corrective to “kinesiology’s blinkered epistemological and empirical vision”. While a range of authors have turned their attention toward the study of

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physical culture and the active body (Duncan; 2007, Hargreaves and Vertinsky, 2007; Ingham, 1997; Pronger, 1998) the announcement of Physical Cultural Studies (Andrews, 2006) has attempted to define this field as the

synthesis of empirical, theoretical and methodological influences (drawn from, among other sources, the sociology and history of sport and physical activity, the sociology of the body, and cultural studies) that are focused on the critical analysis of active bodies and specifically the manner in which they become organized and represented, and experienced in relation to the operations of social power (Andrews, 2008: 45).

Drawing meaningful disciplinary boundaries around PCS seems an unenviable task given that so much research across a range of fields and methodologies permeates it. However, the breadth of its areas of study may prompt us to not only think about the epistemological and ontological orientations of PCS, but equally how we might transgress interdisciplinary fields to progress the study of physical activity, movement and health. Yet as Andrews (2008) reminds us, multidisciplinarity does not make for an integrated field, and calls for greater integration around the theme of physical activity. While there is a growing body of work in PCS (Pronger, 1998; Fusco, 2006; Howell and Ingham; 2001; Silk and Francombe, forthcoming; Silk and Andrews, forthcoming) little has been written about the potential or actual interdisciplinary connections between pedagogy and PCS. In this sense, rather than seeking to define these boundaries, this paper explores how we might better engage with “pedagogy” as a feature of this growing field of PCS. What is the place of pedagogy within this burgeoning field of PCS and why is it important not to overlook this or simply reduce it to another subdiscipline within the field (Andrews, 2008)? I argue that the focus from “sport” to physical culture, dialogically informs not only our understanding of physicality, but also the “pedagogic” and how one learns about physical practices, expressions and corporeality (see also Shilling, 2010). Various work is suggestive or and/or congruent with the PCS project, most obviously emerging from within the expanding field of “public pedagogy” (Giroux, 2004a) which explores how processes of learning and education takes place in many sites and environments beyond the school (Ellsworth, 2005, Giroux, 2004a/b) and thus into spaces which one might broadly define as physical culture.

However, while enthusiastic about the potential of public pedagogy to help us better under physical activity, and the relationship between culture and education, I also share Savage’s (2010: 103) concern that there is a

fabulous haze surrounding the term “public pedagogy” which renders it both exciting and problematic to consider. . . while the terrain around public pedagogy is vibrant, it can be a minefield for conceptualizing the ways informal pedagogies operate in contemporary times.

In this sense, while it might be possible that pedagogy and physical culture, as disciplines, may benefit from a much stronger dialogical engagement, in what follows, I endeavor to also draw attention to some of the complications that may confront us. To do so, I outline three key ways in which pedagogy and PCS might engage in interdisciplinary explorations. Firstly, an interdisciplinary approach to PCS and pedagogy may help those researching school policy, curricular and practice,
better understand what is going on in the classroom. This involves identifying and analyzing the contested and complex power relations and political orientations in physical culture and their relationship with the organization and regulation of bodies in schools. Secondly, following the expansion of studies in pedagogy beyond the boundaries of the school, one might examine how young people variously learn about their bodies in contexts beyond formalized school sites. However, I also draw caution to reducing public pedagogy to other broad forms of socialization and drawing on Savage (2010) I explore what we might understand as “public” and “pedagogy”. Finally, in drawing upon concepts such as the public pedagogue and the public intellectual, I explore how we might use public pedagogy to help advance Physical Cultural Studies’ aim of producing counter-hegemonic critiques or using popular culture to imagine new possibilities. These themes are not meant to be exhaustive but intended to open up future avenues for discussion in advancing research in pedagogy and PCS.

**Learning Health—The Impact of New Health Imperatives**

In exploring the relationship between physical cultural studies and pedagogy, I make reference to a recent Economic and Social Research Council funded study entitled “The impact of new health imperatives” RES-000-22-2003. The study has investigated how health imperatives and associated curriculum initiatives are operationalized within and across a range of schools located in England, while collaborating and collating its findings with parallel studies pursued in Australia and New Zealand, funded by the Australian Research Council1. The methodology was designed to explore the relationships between demographic ‘resources’ (sociocultural capital) born of age, gender, class, ethnicity and (forms of) schooling; sites and sources of influence on ‘body knowledge’, and individuals’ relationships to their embodied selves. Data sets were collected across eight schools in England selected to reflect a range of social, cultural and policy contexts enabling the in-depth analysis required to capture the interplay between culture forces, social institutions and its impact on young people’s embodied identities. All were policy saturated environments wherein policy on and commitments to health education sit alongside many other more pressing demands, for example, of literacy and numeracy. In bringing together data sets from teachers, students and examining the policy context of each school, the methodology has enabled us to derive the regulative functions of “biopedagogies” (Wright and Harwood, 2009) present in both formal and popular pedagogic sites of learning about the health and body.

The study involved a combination of quantitative and qualitative data derived from some 1176 questionnaires administered to pupils aged 9–16 years of age, in 8 schools in Middle England, UK, and qualitative data drawn from interviews with 90 pupils and 19 staff. Given the diversity of the school contexts selected for the research, the young people occupy a broad range of sociocultural categories across class, gender, ethnicity and culture. Semi-structured interviews were conducted with a total of ninety pupils, in pairs where possible. The interviews were based around four themes; health; school; the body; and obesity. Talking with young people about sensitive topics such as body-self relationships and issues of weight presented some ethical challenges which we addressed through a number of ways.
The study was guided by ethical clearance via the University Ethical Advisory Committee with data collection completed under the remit of the ESRC funded study. Furthermore, given the sensitivity of issues associated with young people talking about their body, photo-elicitation techniques (Heisley and Levy, 1991) were used during interviews, whereby photos of different body types from popular culture were presented to participants as prompts for discussion. All interview quotes are reported using pseudonyms.

**Physical Culture and Changing Health Curricular**

This first section offers perhaps the broadest approach for how one might think about PCS and Pedagogy; examining how curricular and pedagogy in schools are shaped by the educational forces of wider physical culture. In other words, one may point “directly to the need to understand school curriculum in the context of other public pedagogies” (Schubert, 2010: 13). In this sense, those working within education and pedagogy have looked to broader physical cultural contexts (and work within cultural studies/sociology of the body/sport) to better understand how the active body is managed, organized and understood in school contexts.

A growing body of work (Beckett, 2004; Burrows & Wright, 2007; Evans, Rich, Davies and Allwood: 2008; Leahy, 2009; Wright & Dean, 2007; Rich and Evans, 2009) has documented how health curricular and associated pedagogies have been drastically shaped in recent years by broader sociocultural constitution of an obesity epidemic and the emphasis on the slender, healthy, active ideals imbued within broader physical culture. In the UK, as in many other Western and westernized societies, a crisis has been constructed around the relationships between childhood inactivity, young people’s diets, and rising obesity levels and promoted through various sites of physical culture. Through this discourse, reduced activity and poor diets are reportedly leading to increased rates of obesity and overweight populations, leading to imminent decline in health and increased mortality rates.

This contemporary interest in obesity reflects a biopolitical shift toward organizing, shaping and regulating bodies in particular ways, through a reductive focus on “weight” (see Evans et al., 2008; Wright and Harwood, 2009). These fears continue to be used as justification for intervening in people’s lives at an increasingly younger age. While concerns about children’s health, weight and physical activity might not be new, following the broader concerns associated with a putative “obesity epidemic” the scrutiny of young people’s bodies has become relentless and often unforgiving. Antiobesity discourse has resulted in a barrage of policies and initiatives in schools to get children more physically active, slimmer and eat less. In England and Wales, central Government sought joint action from its agencies, the Department of Health (DoH) and the Department for Children, Schools and Families (formerly Department for Education and Skills DfES), to address health matters through policy affecting the whole environment of schools. Various mechanisms of surveillance have now been deployed in schools to monitor children’s bodies (see Table 1). These include fingerprint screening to monitor or report young people’s food purchases in school canteens, regular weighing to determine a Body Mass Index (BMI) classification, pedometers to record the number of steps a child will take, skinfold measurements, heart rate monitors, lunch box inspections and dietary constraints. Many of which were present in the schools in the study reported in this article.
**Table 1  Surveillant Practices in Schools**

<table>
<thead>
<tr>
<th>Type of surveillance</th>
<th>Practice</th>
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<tbody>
<tr>
<td>Inspections</td>
<td>Lunch box inspections</td>
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<td>Meals</td>
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<tr>
<td>Regulation</td>
<td>Fruit snacks</td>
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<td></td>
<td>Banning of drinks/foods, e.g., in Uk school—banning of chocolate to celebrate birthdays, replaced by a book or bowl of salad.</td>
</tr>
<tr>
<td></td>
<td>Moral regulation through comments on pupils/peers bodies/food practices</td>
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<tr>
<td>Monitoring</td>
<td>Fingerprint screening to monitor what children meal/snack purchases</td>
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<tr>
<td></td>
<td>Weighing (38% of students in the UK research had been weighed at school)</td>
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<tr>
<td></td>
<td>Use of technology to monitor physical activity e.g., pedometers, heart rate monitors</td>
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As Wright (2009) observes, the “obesity epidemic” offers one of the most powerful and pervasive discourses influencing ways of thinking about health and the body. In line with liberal individualism this has led to a renewed interest in the need for populations to monitor their own and others’ bodies, weight and health against perceived risks associated with deteriorating lifestyles. These concerns are driving what might be described as “new health imperatives” prescribing the choices people should make around lifestyle, in particular relating to physical activity and food (DH, 2008). Some scholars (Halse, 2009; Halse, Honey and Boughtwood, 2007: Rich and Evans, 2005) suggest these changes in schools are part of a product of broader performative and individualist neo-liberal pedagogy (see Giroux, 2004a). The imperative toward “eating well”, exercising regularly, and monitoring our bodies, carry powerful moral overtones; essentially, they advocate how individuals *ought* to behave (Evans, B. 2006). These imperatives are strongly associated with body size, such that the thin or slender body is taken to represent not only a state of “good health” but also reflect personal control, virtue and goodness (Rich et al., 2004).

The emphasis on the slim, active, healthy body is dialectically linked to particular social, historical, moral and political contexts. In this sense, body pedagogies in schools cannot be isolated from a number of issues that derive from, or are derivate of, developments in broader physical culture in which the body as a symbolic form of distinction has become intimately connected with health and well being (see Shilling, 2010). As Huckaby (2010: 76) argues, public life is saturated with images of the mediated body which are “exaggerated, less attainable and often unrealistic ideals of real bodies” which “draw our energies into maintaining and reifying the illusion, which we live through our embodied beings”. The pedagogies which teach us to do so, are underpinned by a new right ideology asserting particular versions
of personal agency (see Nettleton 1997: 213). The imperative to dutifully take care of one’s body emerging from a neo-liberal hegemony that has come to shape contemporary western life (Giroux, 2004a). Obesity discourse has been constituted through a focus on risk (Gard and Wright, 2005), a defining characteristic of both contemporary Western society and central to individualized health discourses. Physical culture has been mobilized to embody and encourage the neo-liberal individual who “enters into the process of self-examination, self-care and self-improvement” (Petersen 1996: 48–49) to monitor and regulate their bodies against the future risks of ill health through increased physical activity, weight loss and better diets. These broader sociopolitical relations of power shape the ways in which the ideas around health, physical activity and food are being produced within school contexts, via the syllabus, teachers’ interactions with children, and the various health promotion programs. In the UK research study, various mechanisms were identified in schools providing the means for children to self-monitor, and the prescriptions necessary for their self-regulation to meet expectations of new health imperatives associated with the “organizing force of neo-liberalism” (Giroux, 2010: 487).

**Physical Culture and the Conditions of Possibility for Pedagogical Engagement: Can Anything Be Pedagogy?**

Secondly, an integrated approach between (physical) cultural studies and pedagogy can also help us to examine how learning about the body occurs outside of official curricular spaces. However, that children learn in contexts outside of school is perhaps not particularly novel. Indeed earlier work around collateral learning (Dewey, 1938) Hidden curriculum (Jackson, 1968 and Bain, 1985), the outside curriculum (Schubert and Lopez Schubert, 1980) and its uptake by other scholars (Giroux and Purpel, 1983) marked a turning point in exploring these themes in new areas:

especially to outside curricular in society at large – specifically to cultures and communities, homes and families, peer groups and other relationships, non-school organizations […] and the mass media’ (Schubert, 2010: 12).

Since then, a body of research (Giroux 2004a/b; Kellner, 1995; Simon, 1995; Ellsworth, 2005; Lusted 1986; Sandlin and Milam, 2008; Sandlin, Schultz and Burdick, 2010) has directed scholars toward learning beyond the boundaries of formalized education sites, forming what has been announced as the field of “public pedagogy”. As Giroux argues, learning operates

within a wide variety of social institutions and formats including sports and entertainment media, cable television networks, churches […] profound transformations have taken place in the public space, producing new sites of pedagogy marked by a distinctive confluence of new digital and media technologies (Giroux, 2004b: 497)

Specifically, by focusing on physical culture, this extends our understanding of the pedagogic beyond school-based body pedagogies in understanding how young people learn about health across myriad sites. Certainly, the young people in the study made reference to the variety of discourses through which learning about the body occurred, and thus the fluidity between cultural, public and official
sites of learning. In particular, they reported drawing on discursive resources made available to them within popular culture to make sense of their bodies and health in various ways. The data suggests that schools are not the only, nor even the most influential source of knowledge from which young people draw their ideas about health. Participants across all social categories of age, ethnicity, social class and geographical made reference to learning about exercise weight and health in various contexts outside of school, revealing the extent to which mediated health practices were part of the broader cultural terrain which informed their everyday lives. Many reported learning about health through various media and cultural artifacts (see Miah and Rich, 2010).

However, the intention here is not to list various media types or forms of reception which occur through these public pedagogies. Rather, it is to ask a rather different set of questions about what is meant by public pedagogy, and what this offers in terms of bringing something unique to the PCS project. The expansion of pedagogy beyond the boundaries of schooling have clearly offered valuable and new insights into the location, operationalization and practices associated with learning about the (active) body (e.g., Markula, 2009; Huckaby, 2010). However, in doing so, I share Savage’s (2010) concerns about making public pedagogy distinct from traditional accounts of socialization, otherwise we risk conceptualizing everything everywhere as “pedagogical”:

what makes something educative or pedagogic in nature? Isn’t everything educative? Or is it? And most importantly: what distinguishes the pedagogy in public pedagogy from traditional accounts of socialization or interpellation and the old saying that ideology is everywhere thus all ideology is educative? (Savage, 2010: 107)

The idea that children come to school with ideas about their bodies derived from the broader culture is not new at all, and to articulate a view of pedagogy in this way may not help the PCS project, nor those scholars working in education, to “name, and thus analyze, the constituent elements of broader pedagogical flows” (ibid, 2010: 107). In this sense, while turning our attention toward the pedagogical flows operating in broader culture may yield important insights, if theorizations of public pedagogies (of the active body/health/obesity) remain generalized, this may do “little to distinguish it from traditional accounts of socialization and may be inefficient when deployed in research that aims to articulate nuances in the ways educative dimensions inform our lives” (Savage, 2010: 104–105). Unless we do so, research studies may highlight that children get their ideas from broader culture, but may offer little insight into the value of talking about pedagogy and PCS together. Perhaps then, our challenge is to move from seeing public pedagogy as akin to earlier views of mass media as socialization and look more closely at the constituents and particular relations and moments of pedagogies within spaces beyond schools. Perhaps one of the crucial questions worth asking here is how the young people in this, and other studies, discern what health knowledge is worth knowing? This, I argue, is contingent upon both the specific pedagogical moment, and the ways in which pedagogies are mediated through ones location in particular sociocultural spaces.
In terms of the pedagogical moment, it is not enough to suggest in relaying messages about obesity, health, weight and the active body, *that any* movie, website, advertisement or media technology forms a learning influence, or in Giroux’s (2004a: 78) terms “powerful pedagogical force over how people think about themselves and their relationships to others”. To do so, would be to rest upon the reductive fallacy that all culture is necessarily educative and would render “public pedagogy” unable to offer PCS something unique and meaningful. Drawing on Savage (2010: 108), for “public pedagogy” to help advance the PCS project, it needs to be “understood in relation to far more nameable subcategories and *specific forms of* pedagogy, or in a pluralized sense, *pedagogies*”. In the research study, many of the students were able to recognize specific forms of pedagogical address which held particular meanings for them, because they could recognize at is being produced as an educative tool:

Education I suppose. You could shock them, you know, TVs use shocking stuff to persuade people. (Jack)

I read lots of magazines that say that you have to have a balanced diet… Yeah. There was this article about which foods count as five a day and I learnt a lot from that so which I could eat and would help me keep healthy, and there’s lots of adverts on television and they say keep healthy and all that (Philippa)

I watch quite a few health programmes like Super Skinny vs Super Size. I watch just generally programmes that look interesting about obesity and all that lot (Nathan)

The role of the media in fashioning contemporary understandings of the body, weight and obesity, historically, might not be a new phenomenon (see for example Schwartz, 1986 and Stearn, 1987). However, more recent forms of the genre of reality media take on a far more “surveillant” (see Andrejecvic, 2002) and instructional format, *making it clear* that their task is to *teach* people how to better look after themselves. Indeed in recent years a proliferation of reality based media focusing on the body, diet and exercise have sought to not only entertain audiences, but also operate as pedagogical sites through which to encourage populations to undertake surveillance of their own and others’ bodies (Rich, 2011). Such media provided them with the “knowledge” of what sort of problem obesity is, and a vision of what life would be like as a “fat” or “obese person”:

One, we know it would be harder if we were much heavier because I have problems getting round places quickly anyway and also through stuff off TV, off those educational channels which you get when you get ill and stay at home. (Laurence)

And another way you can do it is one of those documentaries where first, you show all these really fat people and say “20 per cent of all Americans are obese, do you want to be like these obese people?” and show lots of pictures of really obese people so shock the youth into thinking “oh my goodness, if I grow up I’m going to be fat and ugly and I’m going to look just like that fat, ugly person” (David)
These include media that fall within the genres of “reality science” (Cohen, 2005) and “reality television”, involving “first person programming” (Wood and Skeggs, 2008) and non actors. These include the growing number of “factual” reality style films and television programs offering an instructional narrative around healthy living, weight and diet². The pedagogies cultivated through these media promote orientations to the body specifying its maintenance, development, enrichment and repair:

I was watching GMTV with my Mum this morning. There’s that Inch Loss Island… I think it’s kind of inspiring showing people how you can lose weight if you want to but they’re not like portraying images of like really skinny models and things like that but they’re just saying how you could change your lifestyle to be more healthy. (Laura)

A growing body of work alludes to the role the reality TV “lifestyle expert” (Biressi and Nunn, 2008; Lewis, 2007; Wood and Skeggs 2004; Rich, 2011) might play in this process of knowledge making. Expanding on this work, I would argue that the instructional format of weight/health related media, invoke not only lifestyle expert, but also announce to these young people who is deemed to be an “appropriate provider and evaluator” (Bernstein, 2000: 78):

Well it depends what it is, because sometimes like on the internet there could be things about healthy eating but you don’t know if it’s true so it’s hard to believe but I think that if you’ve seen it on a TV programme like if there’s someone who’s saying they’ve been unhealthy and now they’re healthy it must be true. (Elise)

When it’s written in a magazine or something and it’s someone’s opinion then I don’t really follow it because that’s just someone’s opinion but if it’s like…. Like you see it in a magazine and someone’s tried it and you’ve read about it and it’s worked. You have to hear it from somebody who knows, like a doctor or someone like that to believe it really (Emma)

When asked about where he learns about health, Craig recalls the significance of Honey We’re Killing the Kids, a reality television program which examines the lifestyles of a family, assessing this against the risks of future illness such as obesity, to reveal the potential health consequences of poor parenting (see Biressi and Nunn, 2008):

Erm, Programmes like Honey We’re Killing the Kids because it shows you what we’ll end up and it shows you the picture at the start and how you can… what you should eat. (Craig)

It is hardly surprising that such programs become recognizable as educative to young people, given its instructional narrative (families are given an instruction manual and rules to follow). Constructing a pseudo-scientific narrative, the children of the family on the show are examined by various experts (e.g., physicians, psychologists) who carry out tests to determine their “future health”. These individuals
thus become recognizable as “appropriate provider and evaluator” (Bernstein, 2000: 78) who have the right to intervene in people’s lives:

Diet Doctors and there’s loads like that where they go to someone’s house and the person is normally quite fat and they try to sort out their weight and it’s always got these manky fats and it’s really horrible. (Ben)

We ought not only think about the who and how of pedagogical flows, but also the spaces in which these flows might occur. This prompts us to think afresh about the possible “places” (McKenzie, 2008: 362) of pedagogy. For example, many of the young people in the research alluded to the powerful pedagogic moments that occurred in virtual contexts. The role cyberspace has played in the construction of health discourses (Miah and Rich, 2008) particularly those associated with the corporeal governance promulgated through obesity discourse (Rich and Miah, 2009) is now well recognized. Captured through the term “cyberspace”, the range of technologies which have expanded surveillance medicine (Armstrong, 1995) in terms of the tools available to monitor, regulate and surveill ones body weight and health are vast. These include though are not limited to mobile technologies, social media sites, web sites, online personal training, weight monitors and health indicators, video games etc. Participants made reference to these various virtual worlds as a source of knowledge about weight, health and obesity:

you can even check on the Internet they say that he doesn’t really eat that much [Christiano Ronaldo] but when he does eat a lot he eats mostly healthy and good foods. (Sayid, year 6)

These digital tools further expand the temporal spaces in which body data on children and young people is captured operating as “prosthetic surveillance” (Rich and Miah, 2009) of young people’s virtual as well as real bodies. Perhaps one of the most popular examples of this is The Nintendo Wii and Nintendo Wii fit, a games console that can detect movements of the player via wireless controllers, designed to mimic the real life movements of those activities.

Yeah, but they even brought out these computer games like with Wii. It’s meant to be so you can exercise when you do it because you do the sports. They’re not as good as real exercise but they’re better than sitting in front of the TV. (David, year 8)

Wii fit not only gives a BMI measurement offering categories such as “overweight”, but users are then offered training programs designed to improve their results:

If you look at new gadgets like the Nintendo Wii that’s like helping you like exercise a lot more. (James)

Elsewhere, internet web sites provided weight charts, calorie calculators, target heart rate calculators to enable users to undertake their own health screening to monitor their bodies in relation to risks associated with obesity. Websites associated with physical activity behaviors for example, typically provide Body Mass Index (BMI) and exercise level counters as methods of assessment. Users enter data about
their body, such as physical activity patterns, diets, weights, height etc., which are then reassembled into classifications of health categories and risk indicators.

They do calculations in maths so I think they [children] sometimes pick up on this, if you click into Boots the chemists’ web-site, you can check your BMI no problem. (Pamela, food and textiles teacher)

sometimes like on the internet there could be things about healthy eating (Elise, year 7).

With the advent of a range of digital platforms that merge entertainment with the regulation of the body, such as Internet based nutrition games, and the use of games consoles such as Nintendo wii fit the use of exergaming in schools (Vander schee, 2010) cyberspace becomes more recognizable to young people as contexts for learning.

However, such “pedagogies, public and institutionalized, in and of themselves are neither good nor bad, but as an apparatus of power they do hold the potential to harm or benefit” (Huckaby, 2010: 74). These may have different effects depending on how young people engage (through particular understandings of the body and health) and operationalize (through the uptake of particular practices of the body) them. While bodies were conceived of and constructed in different ways, some were more open to interrogation than others. Read through prevailing broader neo-liberal discourses of obesity, there was an assumption that those who were “overweight”, were irresponsibly inactive and lazy:

A lot of people just can’t be bothered to do the exercise if they have obesity or whatever (Kirsty, Year 6, W)

Like on the news when they say someone’s died from being obese, and all the schools, they switched didn’t they and I think that was really good. If someone tries hard enough to get it to stop then I think we will become like non-obese. (Milly, Year 7, H)

Many children suggested that evaluating health was simply a matter of “looking” at a person, assessing their size, shape (and/or assessing their eating and exercise behaviors), and making judgments about their perceived weight. This “you are what you eat” approach evident in many of the media referenced by our participants was reflected in their views of health. Overwhelmingly, students’ understandings of health reflect the messages found in new health imperatives; reducing complex matters of health to “weight issues”. The framing of obesity within physical culture through “the disease metaphors of obesity [. . . ] have not refuted the nagging culture-wide suspicion [that] fat people are still their own worst enemies” (Edgley and Brissett, 1990: 262; cited in Monaghan, 2008: 39). This way of thinking (as evident in new health imperatives) appeared to grant young people moral license to comment, often negatively, on the body size, shape and weights of their peers:

And they get pushed around and no-one wants to be friends with them and no-one wants to meet them (Ingrid)

As articulated in the media sources they described, many of the young people were invoking a moral imperative and duty to be healthy, reading the body as an
indicator of one’s health (e.g., Crawford, 1980; Markula, 1997) wherein fatness becomes a visible sign of lack of self control and a failure to gain rational control over one’s body (Evans et al., 2008; Sobal, 1995; Throsby, 2007). Physical culture impacts their understanding of their own and other people’s health and bodies, and consequently how it shapes and constrains “body management practices” (Riley et al., 2008) such that forms of physical activity were often reduced to instrumental means:

Eat good food and exercise everyday ‘cause it will burn off your carbs and make you fitter […] I feel really happy with myself because I’ve gone on a bit of a diet. This morning I didn’t have any breakfast […] I have, I’ve got one on my bike, it tells me how many meters I’ve done in a day and when I clip it onto my belt it will tell me how many steps I’ve done in a day […] I just want to know if I need to do more. I try to improve it, so say if I’ve done fifty in a day I’d do like seventy, and it also tells me how many carbs you’ve burnt off and how many stones you’ve lost

Marie, like other participants made reference to particular practices of exercise and physical activity, and focused on individual parts of their bodies, such as thighs or tummies:

I enjoy swimming and I really enjoy bike riding ‘cause it works all of your muscles and so does swimming. I’m trying to work on my thighs at the minute (Marie)

As Huckaby (2010: 74) argues, these pedagogies translate into “everyday politics and enacted pedagogies made real on our bodies and sustained through practices of our bodies” . The consumption of mediated representations of obesity involves more than a passive reading of physical culture. As Marie’s narrative reveals, this involves complex processes of negotiation in line with an individual’s gender, class, ethnicity and sociopolitical orientation. To fully use “public pedagogy” one must therefore also examine “the ways various educative dimensions operate in young people’s lives to enable the conditions for certain imaginations and subjectivities to emerge” (Savage, 2010: 103). This is of significance since, as revealed in the extracts above, young peoples’ concerns about weight are not confined to “health” or “medical” worries but are intimately connected to what Mcleod and Yates (2006: 6) refer to as “imagined futures” and what they might become. These imagined futures are differentiated and mediated by ones family, gender, social class etc., and in this sense “access to forms of knowledge is differentiated and situated with the specificities of an individual’s lived experiences” (Savage, 2010: 103). Savage (2010: 106) offers instructive comments at this juncture, remaining skeptical about the appropriateness of the term “public” as it has been developed in the field of “public pedagogy”, recognizing instead that the

**unevenness** in young peoples access to the possibilities offered in a so-called “global” city and suggests the operation of concurrent **publics** [ . . . ] one may suggest “public pedagogies” are public only to the extent that as citizens we are able to access them. Yet this view can be countered on the basis what is out there is clearly not available to all (Savage 2010: 105–106)
The young people in the research study experienced differential access to public spaces such as health care, religious space, museums, media, cyberspace, sports clubs and institutes etc. How do we define what is a public space, or a “public educative influence” (Savage, 2010: 104) given that ones position in various sociopolitical spaces “converge to govern the conditions of possibility for young people’s pedagogic engagements” (ibid, 105). How young people learn through public pedagogy cannot be separated from the local spaces which mediate the ways knowledge is experienced, valued and acted upon. PCS helps us to explore the complex power relations and structures which produce different meanings (connected to obesity and health) across various sites, not all of which were afforded equal levels of interest, status or influence. In looking more closely at how these power structures “impact young people’s access to pedagogical flow” (ibid, 106) the combined use of PCS and public pedagogy helps research studies to reveal how young people from different sociocultural positions, may have varied access to or engage differently with the pedagogies “out there”. In this sense, the “political implications of fantasy [health imperatives] turned pedagogy differ for us in terms of our genders, races, sexual orientations, cultures, social classes, faiths and the like” (Huckaby, 2010: 78). For example, the different schools involved in the study revealed “multiple and disparate publics” and “an unevenness in young people’s access to the possibilities offered in a so-called global city and suggests the operation of concurrent publics” (Savage, 2010: 105). Students in the independent schools in the UK described “thin bodies” as evidence not only of good health but a reflection of good citizenship, as someone who cares for their body in line with middle class values. Many referred to the ample sport and leisure opportunities available to them in both their family and school life, which offered cultural enrichment, a continuation of “the making up of the middle class child” (Vincent and Ball, 2007):

On Monday afternoon I have games and we play football an’ that, then after school I do tennis, on Friday night I have football after school on the Astro pitch, me and my friends rent that out, and on Saturdays I usually go and watch City play and Sunday I’ve got tennis fitness (Jamie)

These students were evidently more able to appropriate and accept obesity discourse and its imperatives because they had received at home and in public spaces they were located, a version of the “official pedagogic practice” (Bernstein, 1990: 176) found in schools (see Evans et al., 2009). Compare this with school X in the UK, an inner city, coed comprehensive school for pupils aged 11–18 from a variety of ethnic and cultural but mostly working class backgrounds. Students in this school were exposed to reparative pedagogies — given the health knowledge thought to help them deal with, avoid or repair transgressions/pathologies in their local cultures (primarily related to pregnancy and drugs) rather than focus on issues of exercise of diet. Thus, for these students there is little alignment between the orthodoxies of “healthy people” evident in wider media pedagogies of obesity, and those within the official pedagogies. Thus, recontextualisations of obesity policy may collide with those pedagogies present within broader “public pedagogies” mediating young people’s access and engagement with the pedagogical flows of official health pedagogies in schools. These media pedagogies were being read alongside school pedagogies which privileged direct intervention in what were seen
to be the pathological, impoverished lives of children invited to involve themselves in seeking out or being given advice on matters, such as pregnancy or drugs when and as required, not as matter of routine. This prevention and protection from specific ills of local working class life was experienced by pupils as problematic when read alongside orthodox messages of thinness these children and young people saw sanctioned by media on obesity. It constituted deviation from health agendas having greater authority privileged and sanctioned in the wider public domain, alienating and abjectifying them as having no escape from the material conditions of their lives, neither giving them “enough” nor the “right” health knowledge. Students in this sense may be aware of the produced “health student” but may feel it is something over which they have little or no control, requiring opportunity and levels of investment of time, effort, and, critically, money, that they simply did not possess.

People round here they can’t pay for enough like sports, yeah, you just go onto the field, but its dangerous these days so most parents don’t want them going out on the streets and then so [. . . ] The only safe thing to do is to go to an actual place that’s indoors or something and then play there, but children pretty much have to pay for themselves. If you get a paper round you can do it, its just, your just not rich enough to be able to do it these days. Everything’s going up in price so you can’t do it. (Participant)

They saw little possibility of alignment between weight and healthy eating measures advocated in media discourse and those of their families, while being well aware of the risks of being labeled as overweight and the dangers of being bullied because of their weight. Such practices may therefore inhibit the already disadvantaged, providing a differentiated sense of themselves as abject, and restricted their “imagined futures” (McLeod and Yates, 2009) in terms of future health. Event the persistence of cultural and material differences between groups of young people, however, may mean that access to technologies described earlier to monitor their health, may be highly differentiated (Holloway, Valentine and Bingham, 2000). Their occupation in different social-cultural, economic and physical cultural spaces means they also inhabit different opportunities to engage with pedagogy.

**Advancing the PCS Project Through Public Pedagogy**

Following Savage (2010) we ought to be careful not to imagine these contexts within an “enveloping negativity” and recognize that they are not merely negative ideological forces but have potential for counter hegemonic expressions. In line with Giroux’s work (2004a/b) one might begin to imagine the use of popular cultural as a site for imagining new possibilities, engaging in counter critiques, or critical pedagogies. In this final section, I explore how public pedagogy (Giroux, 2004) may help us to advance the project of PCS, which explicitly advocates challenging the exiting order of things when injustices are revealed, to “use the terrain of culture and education to actually intervene in the world” (Giroux 2001: 8). The announcement of the public intellectual and public pedagogue who seeks to “denude dominating public pedagogies of their commonsensical logic and expose underlying hegemonic aims” (Schubert, 2010: 3) provides some means to
do so. In this sense, media analyses may play a critical future role in developing critical pedagogies that draw upon the sort of approach which Wright, Flynn and Macdonald (2006: 716) describe succinctly:

“if young people are to recognise how truths are constituted it behoves those who seek to educate them to provide the means by which they have choices in the discourses they take up and to understand the effects of their positions on themselves and other.”

It should be noted in the study reported in this paper, tensions between economic, cultural, symbolic resources and pedagogies of schools did not solely act as modes of restriction or possibility to enact health imperatives associated with obesity. These tensions also served to create moments of disruption to health imperatives. Qualitative data revealed small yet significant illustrations of disruption, reassessment or resignification of discourses among the almost inevitable repetition of normative messages around healthy eating and exercise. Most notably, rather than overtly rejecting health messages, students tended to deploy strategies of simultaneously affirming and disrupting orthodoxies associated with weight and obesity:

Because I wanna be like Chris Moyses. Big. I might have to eat some more burgers and Big Macs from McDonald’s to look like that. Because I’ve been around big people all my life; my Dad’s big, my step-dad’s big and my Aunty Caroline’s big. No my Aunty Caroline’s really big because she’s had three babies and she’s not lost any weight. It’s just the thought of being big, big and powerful and all of that. I’m gonna be a lawyer; I’m gonna be a solicitor in criminal law hopefully. That’s why I wanna be big as well. I see people coming out of court, big, big people in suits and I think “I wanna be like them” (Charlie)

However, such moments were certainly in the minority, and data revealed more restrictive interpretations and experiences of pedagogies associated with obesity. The PCS project works with an epistemology which is inherently political and shaped toward addressing issues of injustice. Like Broadfoot (2001), the data above remind us that the success of any educational strategy to address body concerns of young people, is likely to depend on as much as what schools or teacher do, as on what students themselves bring to the “learner encounter” in the way of cultural predispositions. Mediatised physical culture assemble and frame body knowledge/s so as to regulate individuals’ embodied selves and relationships to their own and others’ corporeality, fashioning pupils’ subjectivities in relation to the embodied predispositions and characteristics each brings to official school based pedagogies. From a PCS perspective, this makes the case for Giroux’s (2006: 53) contention that teachers incorporate into their pedagogies a theoretical understanding of public pedagogy, so that “popular culture can be seen as a legitimate aspect of the everyday lives of students and be analyzed as a primary force in shaping the various and often contradictory subject positions that students take up”. This, he argues, is part of a broader project of working toward “border pedagogy”:

A theory of border pedagogy needs to address the important question of how representations and practices that name, marginalize and define difference as devalued Other are actively learned, interiorized, challenged, or transformed (Giroux, 2006: 59)
Interview data with teachers revealed that while popular culture was a long way off being “a serious object of study in the curriculum” (ibid: 53) in terms of deconstructing public meanings of health and the body, teachers were at least cognisant of the role that media play in shaping subject positions, knowledge and even school policy, and beginning to think about the need to bring this more directly into curriculum:

I think it definitely has impacted. All of the talks about school meals and issues of whether you have the fizzy drinks machine and all this kind of thing, that has been taken on board by our catering staff. I think one thing we’re quite keen on is whatever is happening in the media, whatever news items, things in newspapers, we bring those in as a regular part of life sort of thing, so anything that’s being talked about in the media gets discussed at school. (Peter Head of Personal Social Health & Economic education, Boys school)

Hannah: I think it’s all our roles – all mentors’ roles and I think you’ll find that that there’s many discussions, I may be wrong but in mentor groups, particularly in senior school where they have a maximum of 18 and some of the groups are down as few as 5, that they will talk about current issues and things in the news and things will come up all the time and once you build up a relationship with those children I think that they have a big influence over those children. Curriculum wise I think we have an influence in PSHE and I guess in food as well (Head of PSHE, rural state middle school)

Many of the teachers we interviewed talked about encouraging young people to think critically about extreme images of thinness evidenced in celebrity culture, and using media to think about body image:

There are four different things to look at there and what we tend to do with all the PSHE lessons is you launch off with one and you see what arises in discussion and then if a whole discussion develops from there you don’t need to use the other resources, whereas if it falls flat on its face then you try a different tack, so that’s how we approach it. I’m kind of working your way through the school so we do something in Year 7, something in Year 9, this in Year 10 on food and also in the 6th form, I don’t know whether you’ve seen there’s a series that BBC4 I think it was, or BBC3, produced a couple of years ago which was called Body Hits and it was focusing on different issues to do with body.

Having mentioned the need to tackle “body image” issues in the curriculum, Peter then moments later, talks at length about using popular media artifacts’ to develop dominant biopedagogies (Wright and Harwood, 2009) of obesity:

Peter: Obviously there’s lots in the press at the moment about fitness and obesity and so on. I suppose where I come into it is less to do with the fitness side, mine’s more classroom based, so the PSHE that we do. We focus on food issues. I’ve brought along something to show you from our Year 10. We do some stuff in Year 7. The Head of Year 7 is a biologist and he does some things to do with identifying what food is made up of and labeling of food and so on. In Year 9 we show an episode from the series You Are What You Eat and in Year 10 there’s some articles we use in class about how much food they
eat, that kind of photograph [shows article] … “Jamie Oliver - The Power of Celebrity: the slop they serve at school”. Obviously, they have school meals here so it’s good for that.

Far from acting as a resource through which dominant discourses of the body and health might be “challenged critically and effectively deterritorialized” (Giroux, 2006: 53) programs such as you are what you eat and Jamie Oliver’s television documentaries reiterate the need for forms of regulation of the self and others bodies and diets (see Rich, 2011). Peter’s incorporations of media within the curriculum point to a broader but pervasive problem facing those who deliver health education. On the one hand, teaching about eating disorders and critical thinking about body image is becoming more widely undertaken within school contexts, and was indeed endorsed by Peter’s own school. However, at the same time in the emotionally loaded language of obesity discourse, the term “epidemic,” and the specific construction of obesity as an “unbounded crisis” function through similar discursive acts to rationalize legitimate and encourage the various forms of surveillance of children’s bodies.

As Cliff and Wright (2010) argue, while there are many academic resources “to understand the relationship between health, physical education and the body, the spaces and incentives to bring this kind of understanding into physical education and HPE teacher education are still extremely limited”. While recognizing and enjoining the need for such awareness, the practical question facing us is how we might begin to incorporate alternative perspectives that define health more broadly than merely weight, size or shape, especially if teachers are currently obligated to fulfill policy requirements which define health as an “accountable” and “measurable” feature of school practice (Rich and Evans, 2009). Teachers are confronted on a daily basis with a particular orientation toward the body, health and weight within both official and informal policy texts and are under considerable pressure to meet the requirements of antiobesity programs.

A different way to do this, would be to explore how as scholars, we take our research into public spaces and physical culture, so that “knowledge forms emanating from the margins can be used to redefine the complex, multiple, heterogenous realities that constitute those relations of difference” (Giroux’s, 2006: 53) The sort of epistemology this necessitates, would enact a moral dialogue between pedagogues, academics (e.g., critical weight scholars) and those with community or political affiliation (e.g., fat activists). The emergence of “fat studies” (Tomrley and Kaloski-Naylor, 2009) as a field has begun to do just this, bringing together scholars and activists, seeking to challenge the exiting order of ways of thinking about fat. Aphramor and Gingras (in press) for example advocate for what they call Health in Every Respect, which acknowledges how issues such as social status and control over life circumstances (e.g., in relation to employment) are highly consequential for people’s health and health practices and ultimately the constrained effectiveness of health professionals.

Conclusion

While not intended to describe particular boundaries or deterministic relationships between pedagogy and PCS, the intention in this paper was to provide an expanded understand of education and open the possibilities for working with and
within PCS. The three areas explored above go some way toward opening dis-
cussion about the types of work that “crosses institutional borders and disciplinary
fields, and reframes inquiry into the relationships among pedagogy, democracy and
social action—regardless of where those relationships occur” (Sandlin, Schultz
and Burdick, 2010: 4). The areas of future work described rely upon a dialectical
relationship between sociology, cultural studies and pedagogy and endorse Giroux
(2004a: 62) suggestion that “pedagogy is central to any viable notion of cultural
politics and that cultural studies is crucial to any viable notion of pedagogy”.

Notes

1. Staff involved: Professor John Evans, Laura Di-Pian and Dr. Emma Rich, with parallel
studies pursued in Australia by Professor Jan Wright, Dr. Valerie Harwood, Dr. Ken Cliff (funded
by the Australian Research Council [ARC]) and Dr. Lisette Burrows and Jaleh McCormack in
New Zealand.

2. Such media included UK based television programs such as Jamie’s School Dinners and
Jamie’s Ministry of Food, You Are What You Eat, Honey, We’re Killing the Kids, Supersize
and Superskinny, Fighting Fat Fighting Fit, The Biggest Loser, and international films such as
SuperSize Me.

3. A recent development for this console is wii fit which offers an integrated balance board
peripheral device that weighs the user, gauges fitness and balance and monitors BMI. Weight
monitoring tools, nutrition games, and virtual environments such as Nintendo wii fit, provide a
means through which to regulate “prosthetic bodies” (Rich and Miah, 2009).

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References


