

# Choosing health: embodied neoliberalism, postfeminism, and the “do-diet”

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**Abstract** Feminist scholars have long demonstrated how women are constrained through dieting discourse. Today’s scholars wrestle with similar themes, but confront a thornier question: how do we make sense of a food discourse that frames food choices through a lens of empowerment and health, rather than vanity and restriction? This article addresses this question, drawing from interviews and focus groups with women ( $N=100$ ), as well as health-focused food writing. These data allow us to document a postfeminist food discourse that we term the *do-diet*. The do-diet reframes dietary restrictions as positive choices, while maintaining an emphasis on body discipline, expert knowledge, and self-control. Our analysis demonstrates how the do-diet mediates a tension at the heart of neoliberal consumer culture: namely, the tension between embodying discipline through dietary control and expressing freedom through consumer choice. With respect to theory, our analysis demonstrates how the embodied dimensions of neoliberalism find gendered expression through postfeminism. We conclude that the do-diet heightens the challenge of developing feminist critiques of gendered body ideals and corporeal surveillance, as it promises a way of eating that is both morally responsible and personally empowering.

**Keywords** Dieting discourse · Food choice · Food consumption · Corporeal control · Femininity

## Introducing the “do-diet”

In contemporary North American food culture, the “ideal woman” must balance a complex constellation of factors. She should know what foods make her fat, but also

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avoid the appearance of “dieting.” The model female consumer is well versed on the latest research regarding health-promoting foods, and she has the skills to make nutritious food taste delicious. Perhaps most importantly, she understands how to control her body but she also knows when to indulge. As the healthy eating magazine *Cooking Light* advises: “eating well isn’t about depriving yourself of something. It’s about finding balance and enjoying a variety of foods” (Nov. 2011, p. 84).

Does this new diet context allow women more corporeal freedom, as they are spared from the grapefruit diets of yesteryear? In this article, we use a feminist analytic lens to chart a contemporary food discourse that we call the *do-diet*—a healthy eating discourse that reframes dietary restrictions as positive choices, while maintaining an emphasis on body discipline, expert knowledge, and self-control. Our understanding of the do-diet is empirically grounded in an extensive discourse analysis of interviews and focus groups with women, as well as healthy eating blogs, magazines, and newspaper columns. The term “do-diet” is drawn from a regular feature in one of our textual sources, the Canadian women’s magazine, *Chatelaine*. The magazine asks: “Tired of living in a world of diet don’ts? So are we. That’s why we developed the Do Diet, a radical new way to eat that’s full of easy dos to get you on the right track” (March 2011, p. 78). Framed as an empowering discourse of choosing health, the do-diet has an explicit anti-diet message. At the same time, our analysis reveals how the pleasure of choosing health requires informed, disciplined, and carefully monitored food choices. While the specific language of the “do diet” was unique to *Chatelaine*, the do-diet discourse of healthy eating was pervasive throughout our data. Women articulated a vision of healthy eating that emphasized choice over restriction, while also describing how everyday eating involved considerable effort and control. More specifically, women engage in a balancing act to distance themselves from the two extremes of this tension; they work to avoid being seen as an out-of-control eater on the one hand, or as a controlling “health nut” on the other. We describe this process as *calibration*—a practice wherein women actively manage their relationship to the extremes of self-control and consumer indulgence in an effort to perform acceptable middle-class femininities.

In this article, we empirically explore the do-diet, and theoretically unpack its linkages with neoliberalism<sup>1</sup> and postfeminism. In a neoliberal food environment, there is an ideological imperative for individuals to make food and consumption decisions that protect themselves from risk (Cairns et al. 2013; Connolly and Prothero 2008; MacKendrick 2010; Szasz 2009). Previous scholarship has shown how the svelte, disciplined body is rewarded as the successful neoliberal citizen, while the fat body is pathologized as a site of failure<sup>2</sup> (Guthman and Dupuis 2006; Guthman 2009, 2011; LeBesco 2011; Smith Maguire 2008; Ringrose and Walkerdine 2008). Dovetailing with research on the individualization of responsibility, feminist scholars have documented

<sup>1</sup> Neoliberalism is a contested term, but can be used in a specific way to refer to a discursive context where market-culture is valorized, state responsibility is minimized, and individual responsibility is prioritized. As a political-economic ideology, neoliberalism came into vogue in the late 1970s and spread rapidly thereafter (see Harvey 2005). Today, it is understood to have important implications for a sociology of daily life (e.g., MacKendrick 2010).

<sup>2</sup> The equation of fat bodies with poor health has been widely critiqued. See LeBesco (2011), Guthman (2011), Campos et al (2006) and Burgard’s (2009) account of “health at every size.” For a critical realist analysis of the obesity “epidemic,” see Patterson and Johnston (2012).

the emergence of a postfeminist sensibility that emphasizes women's agency, and frames consumer choice as a source of empowerment (Gill and Scharff 2011, p. 4). Engaging this theoretical work in dialogue with empirical analysis, we argue that the do-diet works to remediate a tension at the heart of neoliberal consumer culture: namely, the tension between expressing freedom through consumer choice, and embodying discipline through dietary control. This insight makes sense theoretically, but is not easy to resolve in everyday food practices: how does one simultaneously embrace consumption *and* demonstrate self-control? Our analysis explores how women manage this contradiction in their everyday food choices.

In the first part of the article, we outline how our argument builds on two overlapping realms of scholarship: 1) embodied neoliberalism, with a focus on health and eating, and 2) feminist approaches to the body and postfeminism. Next, we analyze the do-diet discourse by studying in-depth conversations with women ( $N=100$ ) as well as textual data. Finally, we discuss implications for feminist aims of social equality and theoretical accounts of disciplinary discourse.

## Theoretical roots of the do-diet

### Embodied neoliberalism: fearing fat and choosing health

Our analysis of the do-diet extends and challenges Foucauldian approaches to neoliberalism and healthism. Below, we build upon key insights from this literature and use our empirical research to challenge what we see as a tendency toward theoretical determinism in governmentality studies.

Appreciating the embodied dimension of do-diet discourse is difficult without reference to Foucauldian scholarship, which has been essential for connecting macro power operations to the management of bodies in late modernity (Foucault 1977, 1982, 1994). In Foucault's groundbreaking conceptualization, power was not simply about *repressing* bodies, but was itself *embodied*; power relations were seen as "having an immediate hold on [the body]; they invest it, train it, torture it, force it to carry out tasks, to perform ceremonies and to emit signs" (1977, p. 25). Extending this conception of power as productive and embodied to the context of neoliberalism, scholars have drawn insight from Foucault's (1991) concept of governmentality (e.g., Cairns 2012; Dean 1999; Rose 1999). Governmentality studies explore how conduct is shaped not only by formal political rationalities, but also by the mundane ways individuals govern themselves and others in everyday life (Foucault 1994). Neoliberal governance operates through technologies of "responsibilization" that transfer collective responsibility onto self-regulating individuals (Cruikshank 1996; Lupton 1999; Rumpala 2011). Thus, neoliberal governance is not externally imposed onto bodies, but operates *through* the embodied actions of free subjects—often by exercising choice in the market. While governmentality studies tend to emphasize embodied surveillance and discipline, neoliberalism also operates at the level of emotion, as structural problems are individualized as private burdens that are *felt* in everyday life (Cairns 2013; Cairns et al. 2013).

Building on the idea of bodies as disciplinary sites, critical health studies have made significant contributions to understanding the embodiment of neoliberalism (King 2012; LeBesco 2011; Lupton 1999; Wright et al. 2006). Much of this work builds

upon Crawford's writing on "healthism," the individualization of health as a moral duty (1980, 2006). Crawford suggests that "individual responsibility for health has become a model of and a model for the neoliberal restructuring of American society" (2006, p. 419). In a context where "health consciousness has become increasingly unavoidable" (Crawford 2006, p. 415), healthy subjects must seek out, assess, and act upon an endless stream of knowledge on the latest health threats—an information-saturated environment that fosters anxieties about seemingly pervasive risks. From a governmentality perspective, risk-avoidance can be understood as a "technology of the self," wherein personal responsibility for health promotion "becomes viewed as a moral enterprise relating to issues of self-control, self-knowledge, and self-improvement" (Lupton 1999, p. 91). While accounts of the neoliberal subject may suggest that such practices are embodied uniformly across populations, in fact, they exacerbate existing social divides. The logic of health as personal responsibility reaffirms the boundary work of white middle-class populations able to adopt "healthy lifestyle" practices, working to distance themselves from unhealthy Others (e.g., Johnston, Szabo, and Rodney 2011; Ringrose and Walkerdine 2008; Smith Maguire 2008), and often serving to justify their own privilege (Crawford 2006; Guthman 2009).

Numerous scholars have connected embodied neoliberalism and fat-phobia, noting how thinness is idealized as an indicator of healthfulness, a corporeal expression of individual responsibility and self-control (LeBesco 2011; Metz 2010; Guthman 2009). The stigmatization of fat bodies is certainly not new, but fat-phobia has gained new legitimacy through medicalized discourses of "obesity" that naturalize fatness as a health problem and fuel public panic about a so-called obesity epidemic (Guthman 2011). Even as thinness is equated with health and responsible citizenship, the embodiment of the healthy subject is complicated by the simultaneous imperative to consume. In a market-oriented culture that celebrates consumer choice as an expression of freedom, the good (and healthy) citizen cannot be marked solely by restraint. As Guthman and Dupuis write, "we buy and eat to be good subjects" (2006, p. 443). Thus, they suggest that the "the fetish of consumer choice" (2006, p. 442) exists in tension with "neoliberalism's hypervigilance about control and deservingness" (2006, p. 443; Smith Maguire 2008, pp. 22, 140). Exemplary citizens are expected both to consume and to constrain themselves, yielding a discursive tension that is embodied in the neoliberal subject. We take this tension as a key entry point for our analysis of the do-diet. Framed in positive terms of empowerment (as opposed to restriction), the do-diet works to mediate contradictory logics of consumer choice and self-control through the practice of "choosing health." These logics appear to be in tension—one celebrating the empowering act of consumer choice, the other emphasizing the moral responsibilities of corporeal control—yet we demonstrate how they work together to facilitate the embodiment of neoliberalism and the expression of a postfeminist sensibility.

By analyzing how the logics of choice and control are discursively sutured through women's engagement with the do-diet, we provide a lens onto the embodiment of neoliberalism while avoiding an overly totalizing account of governmentality. We think of this totalizing tendency as a kind of "Foucault Machine": insert social agent and then identify disciplined subjects who uniformly take up their individual responsibilities

(Johnston and Cairns 2013).<sup>3</sup> While we are wary of the Foucault Machine tendency toward theoretical determinism—i.e., input case-study and churn out pre-set governmentality explanation—our own research suggests that Foucauldian insights on neoliberalism’s productive power retain tremendous relevance (Cairns 2013; Cairns et al. 2013; Cairns and Johnston *Forthcoming*). Indeed, our data suggest that neoliberal discourses *do* have a powerful presence in women’s consciousness, especially in relation to everyday food decisions.

Through our analysis of the do-diet, we work to incorporate Foucauldian insights while avoiding a deterministic account that straightforwardly manufactures disciplined subjects. To do so, we conceptualize power as productive and corporeal, but focus our analytic lens on women’s lived experiences negotiating the do-diet discourse, illuminating a process that we term *calibration*—the process of continual adjustment to meet an idealized and elusive feminine standard. When talking with women about their food practices, we repeatedly observed how women positioned themselves as conscientious, but not fanatical. While previous feminist scholarship has shown how women actively negotiate gendered discourses (e.g., Carlson 2011; Press 2011), our research demonstrates how women distance themselves not only from the abject but also from an *overly perfect* performance of femininity. Even as neoliberal discourse promotes the acquisition of expert health knowledge to control one’s diet, the feminine subject who is *too* informed, and *too* controlling in her eating habits is pathologized as “health-obsessed.” The need to avoid the penalty of the *positive extreme* was striking, and a theme we believe should be incorporated into theoretical understandings of femininity. At the same time, the feminine subject who is *too* relaxed about her eating habits runs the risk of being perceived as ignorant, self-indulgent, and—perhaps worst of all—fat. The process of calibration is analytically and politically significant because it reveals the sharp boundaries surrounding successful food femininities and the persistent gendered social pressures around women’s food practices. It also sheds light on the dynamic connection between discourse and subjectivity, opening the black box of subjectification. Feminist Foucauldian scholarship has made the important contribution of theorizing subjectivity formation as a socially situated process, analyzing how neoliberal discourse is negotiated in the context of gendered, classed, and racialized relations of power (Cairns 2013; Bordo 1993; McLeod and Yates 2006). Building on these insights, our analysis demonstrates the ongoing discursive positioning required in the performance of femininities, paying attention to social location and structural inequality. As such, we identify gendered processes that make the performance of healthy femininities difficult to achieve—especially for disadvantaged women, and especially given the intense surveillance and continual evaluation of women’s bodies.

### **Feminist approaches to the body, health, and postfeminist empowerment**

Feminist scholarship on the body provides crucial insight for understanding how neoliberal governance is embodied in the performance of femininity. In her

<sup>3</sup> Prior studies of governmentality have demonstrated the regulatory power of neoliberalism (e.g., Rose 1999), however this stream of scholarship has been criticized for an overly deterministic conception of the neoliberal subject that creates totalizing accounts of corporeal surveillance and discipline (Barnett et al. 2008; Brenner 1994).

foundational text, *Unbearable Weight*, Bordo (1993) demonstrates how Western consumer culture promotes the gendered beauty ideal of the slender female body, enacting cultural values of discipline, control, and sexual desirability. This slender ideal becomes a “project” to which the successful woman must aspire, curtailing her appetite in an effort to expel “excess” fat from her body (Spitzack 1990). From a Foucauldian perspective, efforts to shape one’s physical appearance (through diet, exercise, or dress) can be understood not simply as modifying a pre-existing female form, but as practices that *constitute* feminine embodiment (Bartky 1997). As Bordo writes: “[t]hrough the pursuit of an ever-changing, homogenizing, elusive ideal of femininity ... female bodies become what Foucault calls ‘docile bodies,’—bodies whose forces and energies are habituated to external regulation, subjection, transformation, and ‘improvement’” (1989, p. 14). The slender feminine ideal is normalized as a white, middle-class and heterosexual body, erasing structural inequities that shape the embodied lives of women (Bordo 1993). While research suggests that the slender body is deeply associated with whiteness (e.g., Milkie 1999), this idealized femininity inspires identification with thinness among women from diverse ethno-racial and class backgrounds (Boyd et al. 2011; Kwan 2010; Reel et al. 2008).

The slender feminine body takes on new meaning amid contemporary discourses that equate the pursuit of health with good citizenship. While public rhetoric about health threats and the so-called obesity epidemic circulate widely, the work of protecting, promoting, and embodying health remains closely linked to femininity. This can be seen in the persistent gendering of “health as women’s work” (Barnett 2006, p. 1), such that women—and particularly mothers—are tasked as familial “guardians of health” (Beagan et al. 2008; MacKendrick 2014). Beyond the gendering of health-related care-work, recent feminist scholarship has highlighted the gendering of the healthy body itself. Moore (2010) critiques a lack of attention to gender within the Foucauldian health literature and argues that the contemporary “healthy body” is coded feminine.<sup>4</sup> Tracing historical shifts in the discursive construction of healthy subjects (formerly associated with masculine traits of strength and utility), Moore forwards a feminist analysis of healthism:

When we study contemporary health messages ... and notice that they urge body-practices that have traditionally been associated with femininity, most notably the conscientious monitoring of the body and behavior that might cause bodily excess, we are also studying hegemonic gender norms (2010, p. 106).

Building on Moore’s analysis of the healthy body as an expression of femininity, we suggest that contemporary discourses of healthy eating must be understood within a context of postfeminism. A postfeminist “sensibility” (Gill 2007) valorizes women’s agency and choice (Gill and Scharff 2011, p. 4), but is characterized by the “double entanglement” of feminist and anti-feminist ideas (McRobbie 2004, p. 256). Central to an individualistic postfeminist sensibility is the understanding of “femininity as a bodily property” (Gill 2007, p. 149) that one can and should freely develop, along

<sup>4</sup> While our focus is on the links among health, diet, and femininity, we acknowledge that masculinities are also governed through health discourses that include a concern for physical appearance (e.g., Crawshaw 2007; Beagan et al. 2015, pp. 129–133).

with an associated “emphasis upon self-surveillance, monitoring and discipline” (Gill and Scharff 2011, p. 4). In a postfeminist context, compliance with beauty regimes is re-framed as an expression of empowerment, choice, and self-worth (Eskes et al. 1998)—a performance enacted on reality television shows celebrating the makeover of the female body (Banet-Weiser and Portwood-Stacer 2006; Ringrose and Walkerdine 2008). Within a postfeminist framing, even corporations can espouse the emancipatory goal of promoting girls’ and women’s “self-esteem” through marketing strategies that adapt a more expansive definition of beauty, increasing sales of firming cream in the process (Banet-Weiser 2012; Johnston and Taylor 2008, p. 943). The postfeminist fetishization of “choice” represents an “emerging modes of regulation” that emphasizes individual freedom and change—often at the expense of more significant discussions of gender inequality (McRobbie 2009, p. 51).

In summary, not only are gender considerations essential for analyzing the convergence of health and dieting discourses, but an analysis of postfeminist empowerment is critical to understanding how the do-diet engenders a particular form of feminine embodiment. As a dominant discourse shaping feminine subjectivities, the do-diet gives postfeminist individualism—and neoliberalism—an embodied form where health and thinness are internalized as desirable, empowering and coterminous. To be clear, this is not a simple case of Foucault Machine subject production. In fact, many of the women in our study were deeply critical of gender-based body inequalities perpetuated by the beauty and diet industry. We are wary of theorizing postfeminism in a way that over-generalizes women’s de-politicization via postfeminist subjectivities or that dismisses the feelings of empowerment that women may experience through body projects (Arnot 2011; Jeleniewski Seidler 2011: 706; Taylor et al. 2014; Walkerdine 2011). Yet, in the analysis below, we demonstrate how the do-diet makes use of women’s critique in the service of neoliberalism, designating body image as yet another site where commodity solutions are idealized and feminism has been “taken into account” (McRobbie 2009, p. 15).

## Methods

Our analysis draws on focus groups and interviews with one hundred women in Toronto, as well as discourse analysis of healthy eating blogs, magazines, and newspaper articles. Interviewees identified as women who viewed food as a significant aspect of their identities. They were recruited through advertisements in grocery stores and food-related listservs. For focus groups, initial contacts were recruited through a survey distributed at grocery stores and farmers’ markets, and additional members were recruited through snowball sampling.

Focus groups were held at a participant’s home and comprised that participant’s friends or acquaintances. Groups consisted of 4–6 participants, and lasted 1.5 to 2 h. Interviews were held in respondents’ homes or at the university, and lasted roughly 1 h. We conducted 20 focus groups with a total of 69 women, and conducted in-depth interviews with 31 women. Together, the focus groups and interviews included 68 white women and 32 women of color. Fifty-seven of these women were middle or upper-middle class, and 43 were working-class or poor. Class designations were made

based on an interpretive reading that factored in participant's household income, education, and occupational prestige (Gilbert 2008; Lamont 1992).

In both the focus groups and interviews, we began with broad questions regarding participants' food priorities and practices, and then asked them to comment specifically on topics relating to health and body image—e. g., how (and to what extent) these issues factored into their food shopping and eating decisions, how they defined healthy eating, and the degree to which they felt body image pressures were an issue for women today. All focus groups and interviews were digitally recorded and professionally transcribed, and coded to identify major themes.

To supplement our interview and focus group data, we conducted a discourse analysis of 6 months of popular media sources published between 2011 and 2012. We include five widely read healthy eating blogs (*Oh She Glows*, *Making Love in the Kitchen*, *Eating Bird Food*, *Sweet Potato Chronicles*, *100 Days of Real Food*), five general women's magazines and food magazines (*Cooking Light*, *Chatelaine*, *O!*, *Whole Living*, *Real Simple*), and two newspapers focussing on items related to food and health (*The Globe & Mail*, *The New York Times*). This textual content was coded and analyzed alongside the interview and focus group transcripts. As a whole, our data sources allowed us to gain an empirical sense of the discursive terrain that women encounter when they negotiate decisions about health and their bodies, as well as the way these discourses become meaningful in the context of everyday food practices. In this article, we focus on the interviews and focus groups, with the aim of showcasing women's lived experiences of the do-diet.

### The do-diet: choice and control

In this section, we document and analyze the do-diet in our empirical data. The first half of our analysis focuses on *choice* and unpacks the idea of healthy eating as postfeminist empowerment. Second, we analyze a narrative of informed eating as an exercise in *control*, where women are encouraged to assume individual responsibility for their health.

#### Choosing health

“Aren't you tired of nutritionists like me being a buzz kill? ... It's time for a holiday eating column about the 'to dos' not the 'don't dos'” (*The Globe and Mail* Nov 7, 2011, p. L6). Like many of the texts in our corpus, this column frames healthy eating as a set of positive choices rather than “buzz kill” restrictions. In doing so, it adopts of the language of *choosing health* that was pervasive throughout our data, and a key feature of the do-diet discourse. Contrary to prohibition-based diets that render mealtime a joyless hardship, the do-diet reframes healthy eating as a “win-win” choice that need not sacrifice pleasure. “Don't deny yourself,” declares an article advocating the health benefits of “eating a tiny amount of dark chocolate every day” (*Whole Living* February 2012, p. 2). Seductive appeals like this invite women to consume in the service of health. Nevertheless, efforts to redefine restriction as *choice* are sometimes so blatant that they become comical—such as when the advice to *eliminate* evening snacking is re-worded as, “Do Eat smart after dark” (*Chatelaine* March 2011, p. 78). Despite a



consistent anti-diet message, the do-diet discourse assumes weight loss as a universal goal, a discursive conflation of health and thinness evident in commonplace statements like “Your health—and your waistline—will thank you” (*Chatelaine* March 2011, p. 167).

The emphasis on “choice” in the do-diet is manifest through a consistent prioritization of health over body image and the framing of healthy eating as postfeminist empowerment.

*Health over body image: “I put things in my body that I want”*

Women in our study commonly ranked health as their number one food priority—trumping issues like taste, cost, convenience, and ethics. For example, Eva (43, white, nonprofit sector) emphasized the need to facilitate healthy choices within her family: “Health first. We want to have as many healthy things in this house as possible so that *we can make healthy choices for all our meals*” (emphasis ours). Zahra (44, South Asian, writer) put it simply, “Health actually wins out and trumps everything.” Beyond prioritizing health, we were struck by the consistency with which women emphasized health *over* body image concerns. One focus group participant, Sadie (49, white, city employee), scoffed at our question of body image and turned the conversation immediately to healthy eating. Sadie’s response was strong, but not atypical. Eva stated, “I’ve never done food stuff related to body image, really. It’s more related to health.” Like Eva, women in our study consistently articulated a discourse of *choosing health*—framing healthy eating as a positive *choice*, rather than a response to body image pressures.

By adopting the discourse of choosing health, women distanced themselves from a dieting femininity, even when they expressed concerns about their body weight. Lisa (42, white, product developer) said, “I always am thinking about being a little less weighty,” but added the caveat, “I’m not one of those, you know, ‘Can you put the dressing on the side?’ or anything like that.” Thus, even as women monitor and regulate their eating in the interest of weight loss or appearance, they frame these body practices as a positive choice and distance themselves from an *excessive* level of corporeal concern. This discursive positioning illustrates the process of calibration, wherein women negotiate the performance of healthy femininities in relation to pathologized extremes. Lisa enacts a femininity that is body-conscious, but not body-obsessed: “I’m not a fanatic. I don’t just drink smoothies and eat raw food or do anything that dramatic”. Similarly, Gina (54, white, investment manager) stated, “I’m careful about what I eat, but I don’t diet,” adding “My philosophy is more moderation as opposed to abstinence.” Through calibration, women distance their own “careful” but moderate approach to healthy eating from the pathologized subject of a dieting femininity—one who is shackled by food restrictions.

At the heart of the distinction between the positive choice of healthy eating and the negative restrictions of dieting are postfeminist understandings of choice as a source of empowerment. One participant, Alyssa (23, white, actor), had participated in *Weight Watchers* in the past, and framed her current vegan diet as a more empowering choice that allows her to maintain the body size she desires as an actor. “I don’t want to miss out on really enjoying food because I have to stay small for being in theatre,” she explained. Emphasizing this win-win combination of pleasure and health (as read onto

thinness), Alyssa rejected her father's accusation that she had become body-obsessed. "[My dad] is like, 'You think too much about what you put in your body,'" she said. "And it's like, Dad, do you not understand that *I put things in my body that I want?*" Contrary to her father's worry that she was overly concerned with body image, Alyssa positioned herself as an empowered consumer – one who ate healthily as a personal choice, and derived considerable pleasure from doing so (Eskes et al. 1998).

In keeping with the discursive emphasis upon choosing health, the idea of restricting consumption was not only deemed disempowering, but was gendered as an expression of pathologized femininity. Tiffany (28, white, university student) lamented situations where "There'll be a room full of girls and we're having tea and then somehow the conversation will go to food and everyone's talking about their current restrictions." By contrast, she said, "I never have those conversations with any guys that I know." Tiffany mobilizes a gendered construction of health, in which diet concerns are coded feminine (Gough 2007; Richardson 2010). After sharing her frustration with a performance of femininity linked to food restrictions, she expressed her preference for framing diet restrictions as active choices. "I find it really refreshing when people discuss it in a positive way, like, I'm deliberately going and finding these organic [foods]," she said. "But I find that it can also be framed very negatively, like, 'I'm not doing this, and I'm not doing this, and you shouldn't do this.'" Tiffany clearly identifies with a distinction at the heart of the do-diet—the idea of framing healthy eating as a choice, rather than a restriction—and aligns herself with the "positive," agentic feminine consumer who embraces healthy options.

While many women, like Tiffany, embraced the do-diet's emphasis on healthy eating as a positive choice, it is important to note that not all of the women in our study felt empowered by this discourse. When we asked a group of friends about health and body image, Carmen (33, Chinese-Canadian, librarian) said "Don't look at me!" Carmen lamented her recent efforts to monitor the nutritional value of her meals, exclaiming, "That's too much thinking!" Such expressions of exasperation were rare in comparison to the pervasive narrative of empowerment through choosing health; nevertheless, it is crucial to recognize such "cracks" within do-diet discourse. While Carmen challenged the win-win framing of pleasure and health, Joanne (60, white, retired) critiqued the persistent emphasis on weight loss, even as dietary restrictions are reframed as health-promoting empowerment. In her words: "Now they're trying to kind of counter [dieting] with trying to eat healthy and all that sort of stuff. But there is still a whole lot of discussion about weight and that sort of thing." As Joanne points out, the do-diet does not free women of feminine body ideals; rather, it repackages these expectations through the language of postfeminist empowerment and consumer choice. In this way, the do-diet places women in a double bind. Those who openly restrict food choices risk being viewed as disempowered and image-obsessed, but those who do not monitor and control their eating may fail to embody the healthy (read: thin) ideal. Staking out desirable femininities between these two extremes requires ongoing calibration.

*A postfeminist approach to bodies: "I'm not a vegetarian because I think it makes you skinny"*

Within the do-diet discourse, dieting is stigmatized not only as a gendered site of food restriction, but also through its feminine associations with vanity. These negative

associations—and the need to distance oneself from them—became apparent during one focus group hosted by Kerri, a white occupational therapist in her mid-thirties. When Kerri retrieved a dog-eared book from her coffee table to espouse its health insights, she became embarrassed to acknowledge its title, *Eating for Beauty*. “I’m vain,” she said, laughing sheepishly. “But I’ll admit it, there’s an element of, it’s health, but it’s also...” As Kerri fumbled to find words, her friend Christine jumped in: “It’s a win-win. It’s just that, the main factor is still health.” Kerri appeared relieved to receive this justification. “Yes! Exactly. When you eat better, you feel better, when you feel better, you look better.” While this emphasis on choosing health over beauty is clearly linked to healthism, it is important to recognize the gendered dynamics at play. The need for women to distance themselves from excessive concern with appearance is rooted in the longstanding cultural association between femininity and beauty.

The imperative to distance healthy eating choices from feminine beauty ideals is further shaped by postfeminist critiques of punishing body standards for women. As McRobbie notes (2004, p. 256), postfeminism draws selectively from feminist ideals, and in this case, the do-diet discourse draws from feminist critiques of oppressive body image standards (e.g., Greer 1970; Orbach 1978; Wolf 1990). The women we spoke with frequently critiqued media representations of the female body, which they deemed unrealistic and unhealthy. “I am not going to starve myself because of some perceived image of what I should look like,” said Donna (46, black, entrepreneur), adding “because half of those people are airbrushed anyway.” While women were critical of gendered body ideals, they situated this critique within a postfeminist context in which such feminist ideas had become commonsense. “Women are pressured beyond belief, certainly, but I think there’s also an awareness of that,” said Martha (47, white, baker). Another member of this focus group, Olive (27, black), supported Martha’s assessment from her perspective as a fashion magazine editor: “I feel like the public knows this now. Before they were so mesmerized by celebrities, by models and, you know, these unattainable images. Now I think people are wise enough to know that that’s photo-shopped, that the model does starve herself to get that thin.” Women brought a critical gaze to the slender feminine ideal, and believed this critique had widespread acceptance among empowered, postfeminist consumers who are “wise enough” not to starve themselves in the name of beauty.

Paradoxically, this postfeminist perspective on gendered body ideals did not mean that women felt free of such pressures. Carol (42, white, film producer) put the issue in simple terms: “As women, you can’t get away from body image.” Carol’s matter-of-fact assessment sheds light on the complexities of postfeminist empowerment. The women we spoke with did not deny that body pressures exist; rather, they were resigned to these pressures as an inevitable burden of femininity, albeit one that they critiqued. Asking about body image in one focus group of close friends produced knowing glances, as these young women shared stories of mothers and grandmothers who judged them to be too “fat.” They rejected these assessments of their bodies as unfair and they insisted that the comments did not influence their eating choices; however, they also talked about various high-fat foods as their “downfall” or “weakness,” suggesting that body image pressures may be internalized even when critically assessed. Similarly, Maria made clear that health was her priority, but admitted, “body image is a pervasive thing,” adding, “I think I still struggle with body image. It’s something I hope will subside at some point, but yeah, it’s definitely present.” Some

women also alluded to the emotional reward of losing weight, which carries social benefits in a fat-phobic culture; for example, Wei (40, Korean-Canadian, communications) described the positive feelings she experienced when people remarked that she looked thinner after becoming vegetarian. These examples highlight how women may be deeply critical of body image pressures and explicitly align themselves with a discourse of choosing health, and yet simultaneously internalize fat-phobic ideals of thinness on an emotional level.

Part of the reason that gendered body pressures persist, of course, is due to the persistent surveillance of women's bodies—a reality intimated in many of our conversations with women who described how their food choices were judged by family, friends, and co-workers. One participant, Sarah (26, Vietnamese-Canadian, student), reflected critically on the ways women must manage their eating in the face of others' scrutiny. "My boss will be like, 'why aren't you eating a donut?' And I'll be like, I'm actually just not hungry right now. But you kind of face all these questions where you can tell they're [thinking], okay, she's dieting." Sarah's words highlight the difficulty of managing gendered corporeal pressures and suggest the inadequacy of an individualized postfeminist response. Collectively, there remains considerable social attention to women's bodies and their conformity to idealized beauty standards. This means that, no matter how empowered women feel in their choices, they can still be judged for the (mis)management of their body projects. This constellation of feminine surveillance and judgment produces an ironic outcome: even when women frame their food choices as health-motivated, others may perceive them as dieting for weight-loss purposes. For instance, Gina said that she was "very skeptical of people who say they're gluten intolerant" describing it as "an easy way of saying 'I'm not gonna have a cookie.'" Regardless of whether these suspicions were well founded, our point is that collectively, women's eating practices and bodies are intensely scrutinized, despite the discursive emphasis on "choosing health." Sarah describes the challenging terrain between healthy eating and dietary restriction:

It's easier to say I'm detoxing than I'm dieting ... because diet's kind of become a taboo word almost, especially among young women who are educated. Like, everyone is too educated to admit that they're worried about the way they look. It's seen as being shallow. So people choose more of the "I'm on a raw food diet"; "I'm on a juice cleanse"; or "I'm juicing." Which, you know, I'm sure has its benefits, and I believe that people are trying to be more health conscious. But I think ... in young women "health conscious" just [means] that they're watching their weight.

Sarah's perceptive observations touch upon many elements of the do-diet: an emphasis on health over body image and choice over restriction, and the paradoxical demand that women actively manage their bodies, while giving the impression that this work is effortless.

#### *The do-diet as an expression of privilege*

While our qualitative sample does not allow for statistical generalizations, our empirical data suggest that the discourse of choosing health over body image is not equally

accessible to all women. We found that women possessing various kinds of social privilege, including the privilege of embodying the slender feminine ideal, more readily articulated do-diet discourse. In one focus group, two young women who were both quite thin insisted that they enjoyed food too much to care about body image or restrict their food choices. Their friend Syd (26, white, actor) responded,

Body image is an interesting one for me because I was sort of along the same lines as these guys for a long time where I sort of thought I would never care because I love eating and blah, blah, blah. And then I gained a bunch of weight [chuckles]. And then I realized how much it upset me, like, I actually became really uncomfortable with my own body. And so, and I do make [pauses as if she is trying to decide how to express herself] my eating choices, there are a lot of things that are involved in that, and you know, I'm vegan and health is a huge part of it, too, but I am aware now of like, calories and not adding to my weight, and ideally losing some weight.

Following Syd's disclosure that body image matters to her, the fourth member of this group, Tara (36, white, social assistance), voiced her agreement, saying she had felt similarly when she gained weight. The discussion revealed how the dismissal of body image is more easily taken up by those whose bodies resemble normative ideals of thinness. This kind of embodied privilege also facilitates a socially acceptable embrace of food's pleasures, a point brought to our attention by Jackie (30, Middle Eastern, student), who was involved in fat activism. Jackie noted how ordering a rich or fatty dish is a choice that is viewed differently depending on embodiment: "For the thin person it would be almost like, 'wow how do you do it?' And for the fat person it's like, 'why can't you have a bit of self-control?'" Jackie's critique reveals how the do-diet's discursive pairing of choice and control is embodied within the slender feminine ideal, reproducing fat phobia and privileging thinness. While thin femininities are celebrated for their ability to incorporate pleasurable indulgences, the same consumption practices are read onto the fat body as a sign of poor health and a lack of control. This suggests that the do-diet's win-win logic celebrating individual choice is not equally accessible, particularly in a context where fatness is interpreted as a failure to fulfill the moral responsibilities of healthy eating (LeBesco 2011; Guthman 2003).

In addition to body privilege, the logic of choosing health was more commonly subscribed to by economically privileged women in our sample. In contrast, many low-income participants discussed health and body issues through the lens of economic constraint, as this was the dominant factor shaping their food choices. Harsha (28, South Asian), who was living on social assistance, said "It's almost good that I don't have that much money to indulge on food because that keeps me happy with my body." She then reflected critically on this statement, and added "maybe I'm trying to placate myself by saying it's okay that I don't have that much money for food." Shannon (45, white), who was not working due to a disability, described how budget restrictions prevented her and her daughter from eating as healthily as she would like. "I almost find that the junk that fits in our budget doesn't help with weight," she said, adding, "I'm eating what I can afford to eat." Shannon's emphasis on economic necessity challenges the seemingly empowering discourse of "choosing health." She reported that the greatest tension shaping her current eating practices was "not having money to

buy the stuff I want to buy or just the stuff I feel is better choices.” Lacking the privileged resources required to enact the choice-centered consumer femininity celebrated in the do-diet, Shannon experiences her distance from this figure as a source of guilt and disappointment.

In this section, we have demonstrated how ideals of healthism and postfeminism intersect within the do-diet to render healthy eating a source of empowerment through the exercise of consumer choice. However, this empowered healthy femininity must be well-informed and carefully monitored. This means that the do-diet simultaneously involves elements of corporeal control.

### Embodying control

The control side of the do-diet equation emphasizes the hard work, discipline, and education required to construct a subject capable of making good food choices. Guthman and Dupuis note that the neoliberal ideal of self-control involves an element of “deservingness,” and “returns improvement to the individual, who is expected to exercise choice and to become responsible for his or her risks” (2006, p. 443). To be deserving, women must take control of their food choices. As one of our interviewees, Judy (56, white, legal publisher) said, “I feel it’s my obligation to do anything that I can do to make sure that I stay healthy.” Below, we document the control aspects of the do-diet; we chart the relationship to expert knowledge and corporeal restraint and discuss implications for class inequalities and food anxieties.

#### *Expert knowledge: “Think you know your nutrients?”*

From nutritionist advice to scientific research, expert knowledge is a central feature of healthy eating discourse (Moore 2010; Ristovski-Slijepcevic et al. 2010; Warin 2011), and constitutes a core logic for dietary control. Informed consumers are encouraged to incorporate nutrition knowledge into everyday food choices to promote wellness and protect their bodies from the ravages of disease, age, and excess weight. While the dietary knowledge covered in this discourse is extensive, the advice for healthy living is typically framed as easy. “Great news,” declares Chatelaine: “When researchers looked at the effects of choline (a B vitamin in eggs and milk) on brain aging, they were amazed.... Do it now: Add eggs, milk, fish, chicken and kidney beans to your plate to help improve your memory” (March 2012, p. 118). Three pages later, an article on “A cancer-fighting cuppa” shares more important health findings: “Here’s an extra reason to reach for a warm cup of tea: It could help prevent lung cancer. New research ... found non-smoking women who often drank black tea had a whopping 31-percent lower risk of contracting lung cancer than other non-smokers. DO IT TODAY: Drink black tea regularly to help protect yourself” (Chatelaine March 2012, p. 121). The translation of research into individual action is seductively simple and empowering: simply drink tea and eat eggs for optimal health.

While individual prescriptions are framed as simple, the overall do-diet project is one of continual education and self-improvement. Readers are often invited to test their health knowledge: “Think you know your nutrients? Take my quiz” (*The Globe and Mail*, 12 Jan 2011, p. L4). “Food Labels: Decoded,” reads one health column, with the

caution that “‘nutrition facts’ aren’t as straightforward as they seem” (*The Oprah Magazine* November 2011, p. 124). The do-diet frames this stream of expert knowledge as a source of empowerment for the healthy woman who skillfully controls her food choices and keeps abreast of the latest nutrition research.

During focus groups and interviews, many women described an interest in accumulating expert food knowledge (especially in comparison to male partners), and integrating this knowledge into daily foodwork. Christine (36, white, nurse) described how this lengthens her trips to the grocery store: “You’re incorporating what you’ve read about, or what you see on TV, you’re incorporating it into your shopping as you’re reading the labels.... I’m actively thinking about things I’ve learned.” As women integrate nutritional information into everyday food choices, healthy femininities become a site for ongoing improvement. “I always feel like there’s something I can improve,” said Petra, adding, “maybe all the reading I do.” Gail related this quest for perpetual improvement to the goal of optimizing her diet’s nutritional benefits: “I feel I’m doing some of that just by eating organic and getting nutrients in things like that, but I would like to shift and eat a little bit more fermented food or some of the superfoods.” Gail’s reference to “superfoods” echoes the do-diet language of scientific knowledge and nutritionism (Scrinis 2013). The textual sources we studied were rife with advice on “health-promoting nutrients” that hold “antioxidant properties,” and “help purge the body of potential carcinogens” (*Whole Living March* 2012, pp. 88–95). This kind of sophisticated nutritional knowledge was presented as key to controlling one’s health and one’s body.

Incorporating expert knowledge and controlling food intake is framed as a health objective, but one that delivers thinness as a natural reward for self-discipline. Kelsey (27, white, marketer) emphasized how she channels knowledge toward controlling the effects of food on her body: “I read a lot of health research [and] I find that once you really get a perspective of what things are doing to your body ... you realize that the more healthy food you eat, the more fulfilled you’re gonna feel and *you’ll just look better*” (emphasis ours). Similarly, in a post entitled, “Healthy is the new skinny”, blogger Meghan Telpner points toward the beauty payback of healthy eating: “When we feel great, *looking great is a by-product*” (*Making Love in the Kitchen*, October 25, 2012). Beauty benefits are part of the “deservingness” framed as owing to subjects who engage in controlled, educated, healthy eating. As health is read onto thinness as a reflection of corporeal control, fatness is stigmatized as an indicator of an individual’s poor health rather than an issue of aesthetics (Burgard 2009; Guthman 2003; LeBesco 2011). In this way, weight loss is normalized as the deserved outcome of healthy (normatively thin) femininities, and health replaces “skinny” as the paradigm of control.

*Control and class: “Poor people ... should know better”*

Food has immense cultural significance as a marker of status (e.g., Bourdieu 1984; Warde and Martens 2000), and critical food scholars have demonstrated how the “good” controlled and educated eating practices of reputable middle-class consumers are often defined in opposition to “the knowledge poverty of the working class” (Hollows and Jones 2010, p. 309; Guthman 2003; Johnston, Szabo, and Rodney 2011). During our focus groups and interviews, class boundaries were often articulated

in relation to the failed subject who consumes unhealthy processed food. “Poor people, they should know better not to eat Domino’s [Pizza], you know, go to the corner store and have Cocoa Puffs or something,” said Cassandra (31, white, film industry). She continued: “But when it’s all you have and when it’s all you’re raised on, I guess you, how do you determine, like if your mom came home with KFC every night.” Cassandra criticizes the unhealthy food choices she associates with a classed upbringing characterized by a lack of the food knowledge required to practice appropriate self-control. Her explicit naming of class was less common than statements in which class was coded through particular food choices. Alyssa lamented “people who have eaten Beefaroni for dinner and wonder why they get ...” she paused, then continued: “I was going to say cancer, but that’s a really bad thing. Really intense. But we wonder why all these diseases are all over the place.” Although Alyssa did not name class outright, her reference to Beefaroni invokes inexpensive, processed foods commonly associated with an unhealthy working-class consumer (Guthman 2003). Continuing, Alyssa emphasized the personal responsibility of making informed food choices in order to control one’s health and mitigate food risks:

People are like, oh I am so tired. Well, what did you eat for breakfast?... I am not a judgmental person, but when people are like, they’ve got a shopping cart full of meat, like hotdogs, whatever, it’s just like, if you want to have this conversation, I will have it. Let’s sit down and watch a documentary, or let’s google with me. I will do it with you. But the choice is yours.

Once again, class is signaled through the reference to a particular food product (hotdogs) that symbolizes uninformed consumers who are unable to control themselves in a food system filled with appealing but unhealthy foods, like Cocoa Puffs and Beefaroni. Alyssa offers to educate this unhealthy Other, implying that individual ignorance and lack of control are the key obstacles to healthy living.

These examples demonstrate how the do-diet narrative of controlled, educated food choices supports a classed conception of health as the deserved outcome of educated food decisions. “We have to make better choices, and not let the environment control our decisions,” said Li (47, Chinese-Canadian, life coach). Even as Li argued passionately for expanding health education, she articulated health as the personal duty of informed individuals: “I’m not going to use these coupons as enticing as it is.... When you buy cheap foods you get cheaper quality and it’s not as fresh. And you don’t know where it’s coming from or what they put into it.” Li understands “cheap food” as a temptation that holds health risks and demands personal willpower to resist. While understandable, her critique suggests that healthy eating is simply a matter of individual decisions and that every consumer has equal ability to resist the allure of low-priced food. This individualized narrative resonates with neoliberal discourses of personal responsibility and self-improvement, and obscures the structural inequities that powerfully shape classed health disparities (e.g., Mikkonen and Raphael 2010).

It is important to note that some participants—particularly those living with fewer resources—called into question the do-diet narrative of individualized, meritocratic, and controlled food choices. For example, Deb (43, First Nations, unemployed) made clear that avoiding cheap, processed food was a class privilege not readily available to her: “If you have a lower income you shouldn’t have to eat processed food that’s crap.



You should be able to eat healthy like everybody else.” What’s more, even those with privileged access to cultural and economic resources found this performance of informed, controlled eating difficult to achieve. Our focus groups and interviews suggest these extensive knowledge demands can leave many women feeling anxious about their *lack* of control over their diet.

*Control and anxiety:* “We all know what happens when you don’t eat well. You get sick or die.”

As Crawford notes, health warnings can have the ironic tendency to “aggravate the very insecurities they are designed to quell” (2006, p. 415). For example, Ingrid, like many middle-class women we spoke with, expressed considerable worry about the bisphenol-A (BPA) in canned foods: “Anything that’s canned food I know there’s always the risk of BPA from the lining of cans and some manufacturers are now looking at that and changing it. But you just don’t always know if that’s taken place yet.” Indeed, in our interviews and focus groups, soaking your own beans (as opposed to buying canned beans) appeared as a remarkably consistent marker for showcasing heightened food knowledge and control over daily food decisions.

In addition to raising concerns about specific risks like BPA contamination, participants expressed a generalized anxiety about whether they had adequate knowledge to make good food decisions. Li said, “I am wondering whether the food I’m eating is really providing enough for my well being”, and described the sometimes agonizing challenge of decoding food labels and factoring in food’s long-term bodily impact: “Sometimes I want to buy something, like yogurt, and I want to know that I am going to be okay eating it.... You have to be really aware of what you’re eating and how you’re feeling, especially 2 or 3 days after you eat it. Like, it’s still going through your body.” This kind of heightened corporeal self-awareness is celebrated within the do-diet, as women are encouraged to incorporate expert knowledge with self-awareness, closely monitoring their body’s response to food choices. While such informed consumption is promoted as a source of agency and control, it can have the paradoxical effect of engendering insecurity, even for highly informed consumers like Li. Thus, the empowerment promised through the do-diet brings great responsibility, as women are rendered personally accountable to control food intake and generate healthy futures. Li saw these informed food choices as the key strategy for protecting oneself against myriad health risks: “Your food is your, I guess, medicine so to speak. It is your health prevention,” she said, adding, “We all know what happens when you don’t eat well. You get sick or die.” In this individualizing narrative, women must control their food choices carefully, since these choices are conceptualized as the key determinant of their health—even to the point of life and death.

While many women in our study embraced this personal responsibility for their healthy food choices, some were skeptical of the message of corporeal control and expressed frustration with the tide of health food information on offer. “I can’t STAND those wellness magazines at health food stores,” said Hilary (28, white, barista). She explained: “‘10 power foods you absolutely must eat!’ Or, you know, ‘You absolutely, absolutely CANNOT eat this food,’ or too much of that, or ‘Did you know that this food gives you cancer in 20 years?’ or whatever.... It is just consumerism.” While Hilary criticized the consumerist message within health food discourse, Zahra

described a personal “backlash against too much information coming from women’s magazines.” She said that while she enjoys reading the recipes, she “can’t read anything more about superfoods and fighter chemicals.” Olive (27, black, fashion editor) reflected critically on the dual-promise of choice and control, and linked this to corporate marketing campaigns. “Companies that offer you the option are also banking on people’s desire to control what they eat,” she said during a focus group. “For example, I had a Starbucks coffee today and I got a non-fat, sugarless syrup, green-tea latte.” Olive laughed as she recalled her coffee order. “Starbucks is totally playing on the idea that when I buy a coffee I’m gonna make it as low-fat as possible. And that’s stupid on my part because it’s like, a sugary coffee ... but they distract you, right? And they also play on that whole idea of, you’re trying to control what you eat.” At this point, Heather (28, white, chef) said, “They’re giving you artificial choices.” Olive agreed: “Ya, for sure. I made several artificial choices this morning, but I sort of delighted in it. I was like, see, I got a non-fat, green tea latte, aren’t I smart? I didn’t get the regular one [laughter]. Ya. But you’re not really in control.” Even as Olive engages reflexively with the do-diet promise of empowerment through corporeal control, she acknowledges how she is emotionally drawn into this discourse and delights in the sense of control that comes with making her “artificial” coffee choice. This interaction highlights how the do-diet sutures the seemingly contradictory logics of choice and control, and delivers the promise of health, beauty, and thinness.

### **Discussion: feminism, fat-phobia, and the Foucault machine**

This article charts the contours of the do-diet, a discourse that promotes healthy eating as a positive choice, but links food choices to self-control, corporeal constraint, and individually responsible (and deserving) subjects. While the “do-diet” phraseology may connote superficial images of women’s magazine headlines, we have sought to demonstrate empirically how this topic yields important insights into the postfeminist naturalization of gender inequality, and the neoliberal fetishization of individual choice and self-control. The do-diet is not just a series of tips for healthy eating or just a rejection of old-fashioned calorie counting. Our analysis has shown that it is a powerful discourse that engages immense amounts of women’s everyday energies, appealing to food pleasures, consumer choice, and a feminist imperative of self-care, while drawing attention away from the structures that generate and naturalize fat-phobia, class-stratified health outcomes, and gender inequality.

By analyzing conversations with women as well as health-focused food writing, we have shown how gendered body ideals associating femininity with thinness persist but are re-framed as a matter of choosing health. Our research demonstrates how women articulate healthy eating as an empowering act of informed choice; yet, these same women negotiate food choices in the context of a do-diet discourse that valorizes expert knowledge, risk-management, and an ethos of perpetual improvement. Thus, the do-diet celebrates healthy food choices, while emphasizing the need for continual bodily discipline, allowing the seemingly contradictory neoliberal logics of continual consumption and corporeal control to co-exist. In closing, we discuss the do-diet’s implications for fat-phobia and feminist critique, and highlight the theoretical insights

that a feminist analysis can bring to understanding the gendered embodiment of neoliberalism.

First, we feel it is crucial to recognize how the do-diet reproduces and legitimizes fat-phobia. Despite its anti-diet message, this discourse repeatedly equates health with thinness and naturalizes weight loss as an automatic and positive benefit of healthy food choices. The feminine subject idealized within the do-diet appreciates the pleasures of healthy foods and distances herself from the restrictive diets of yesteryear, but also maintains a controlled, closely monitored relationship to food that is implicitly body focused. In keeping with previous scholarship on the moral regulation of fatness within neoliberalism (Guthman 2003; LeBesco 2011), the do-diet constructs boundaries around the categories of fat and thin bodies, good and bad food choices, and knowledgeable and uninformed consumers. The women we spoke with navigate these boundaries to calibrate their performance of healthy femininities while avoiding extremes—i.e., the anxious “health nut” addicted to green juices or the uneducated fat person eating Beefaroni. Women might defend their non-conforming bodies against feminine ideals, but the do-diet associations of health, personal responsibility and moral duty were firmly entrenched at the level of subjectivity and entangled with the intense emotions that accompany food decisions and body image. In short, the feminine body remains a site of surveillance, evaluation, judgment, and regulation, with the fear of fatness appearing as a backdrop in most of our data.

A second, closely related implication of the do-diet is its co-optation and repurposing of feminist claims. In a context where a “critique of dieting has become common sense for many women and girls” (Beagan et al. 2015, p. 126), the do-diet presents a deeply individualized response to unhealthy standards of feminine beauty. This discourse suggests women are now beyond a culture of restrictive dieting, even as it emphasizes strategies of corporeal control associated with the thin, feminine ideal. The healthy feminine subject *chooses wisely* in the interest of *health* and will “look good” as a natural outcome. This narrative both draws upon and bolsters the assumption that gender inequity is a thing of the past. Similarly, the do-diet’s model of postfeminist empowerment makes it difficult to formulate and sustain a feminist critique of gendered body ideals that engages with questions of power, privilege, and structural inequality. This is not to say that all critical capacity has been lost. As we have shown throughout the article, the women we spoke with voiced various forms of skepticism, frustration, and reflexive critique when it came to health and gendered body ideals. This frustration was most profound for the women most disadvantaged—women who lacked resources to invest fully in the do-diet or whose bodies did not easily confirm to normative standards of thinness. Our claim is not that women today are dupes of the do-diet, but rather that they negotiate body projects in the context of a dominant discourse of “choosing health” that replaces feminist critique with an individualizing narrative of postfeminist choice and empowerment through informed consumption.

Finally, our analysis of the do-diet demonstrates how a feminist perspective can deepen our understanding of embodied neoliberalism. We have developed a feminist analysis of bodily surveillance as a gendered practice, seeking to build a nuanced account of corporeal surveillance and discipline. By examining how discourse, power, and subjectivity are negotiated in everyday life, we suggest that feminist perspectives can support an analysis of neoliberalism that incorporates Foucauldian insights, but

avoids the “Foucault Machine” tendency to generate disciplined, overdetermined subjects (Johnston and Cairns 2013). To this end, we employ the term “calibration” to conceptualize women’s active engagement with do-diet discourse. Moving away from a static conception of subject positions, calibration draws attention to the dynamic process of discursive positioning, while keeping gender at the forefront of our analysis. What’s more, our empirical analysis reveals how the calibration process is deeply shaped by gendered power relations. Not only do women actively negotiate their performance of healthy femininities within do-diet discourse, but in so doing they manage their identities in relation to pathologized feminine figures of fat indulgence, as well as perfectionism and excessive control. Femininity has long been associated with irrationality, corporeality, and excess (Moore 2010, p. 108), and women calibrate their positioning within healthy eating discourse to manage surveillance and avoid the appearance of extremes. In summary, we hope to add nuance to understandings of the lived experience of diet, femininity, and health discourse, showing how the specter of fatness and ill-health are not isolated fears, but part of a gendered discursive terrain that most (if not all) women simultaneously critique and embrace in daily life.

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