



## Teenage Girlhood and Bodily Agency: On Power, Weight, Dys-Appearance and Eu-Appearance in a Norwegian Lifestyle Programme

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### Abstract

*Despite the growing literature on childhood obesity and lifestyle intervention programmes focusing on weight loss, few studies have examined young persons' experiences of being identified as candidates for such programmes and of participating in them. This paper does so. Juxtaposing insights from phenomenology with an approach inspired by Foucault, the paper shows how teenage girls' bodily self-perception and bodily self-awareness are shaped in intercorporeal assemblages comprising other people and specific features or elements of the lifestyle programme.*

*Inspired by van Manen's hermeneutic-phenomenological approach, with its point of departure in lived experience, this paper draws on interviews with Norwegian teenage girls participating in the same lifestyle programme and identifies three core thematic aspects of the girls' experiences: being identified as a candidate for a lifestyle programme and not wanting this; negotiating the lack of weight loss and the scales; and bodily situated agency – feeling good and being able. Permeating all three themes are two central, interrelated phenomena: agency and resistance. Furthermore, the paper shows how a combination of Foucauldian insights and a phenomenological understanding of intercorporeality can help to shed light on the power, affective, material and temporal dimensions of dys-appearance (i.e., when one's body appears as bad or wrong), as well as those of eu-appearance (i.e., when one's body appears as healthy or strong), and thus contribute to the understanding of the girls' narrated lived experiences.*

*On the basis of these findings, we argue that weight-related treatment goals are not necessarily compatible with the strengthening of adolescents' body images and self-esteem. However, whilst being obliged to attend to their bodies while in the programme, the girls also encountered unexpected, positive bodily feelings and experiences. Such events, we suggest, offer a means of resisting the more troubling dys-appearing bodily situations our participants described so powerfully.*

### Introduction

Childhood obesity has become a topic of concern in medical literature and the media, with the risk of morbid obesity, the psychosocial consequences of being obese, and the impact of obesity on quality of life attracting particular attention. Considerable effort and funding has

been invested in developing effective programmes to treat obesity. The prevailing biomedical perspective understands obesity in terms of an imbalance between calorie intake and output. Accordingly, current treatment approaches typically tend to emphasise lifestyle changes involving diet and exercise in order to achieve the desired result: weight loss (Holm et al., 2014).

The aim of such programmes is to treat children's and adolescents' obesity so that their body mass index (BMI) is reduced, with this aim incorporating both *preventative* and *curative* dimensions: seeking to prevent future health problems (including morbid obesity), and also attempting to "cure" obesity. Most childhood obesity programmes are accordingly situated in health care settings (Holm et al., 2014). However, despite the substantial efforts invested, the results of lifestyle programmes for young people have often been disappointing. A literature review suggests that, in many cases, participants register little change in their BMI by the end of the course (Benestad et al., 2016; Elvsaa, Juvet, Giske, & Fure, 2016; Ochner, Barrios, Lee, & Pi-Sunyer, 2013). A very similar pattern emerges in respect of lifestyle programmes targeting adults: whether in terms of participants reducing their BMI or managing to sustain such reductions in the long term, results have proved modest or negligible (Garner & Wooley, 1991; Ochner et al., 2013).

While adults are increasingly being offered surgical treatment for obesity, lifestyle programmes remain the preferred treatment for children. Given that weight-loss surgery involves irreversible bodily changes that can result in lifelong side-effects and complications, health authorities and medical experts seem agreed that surgery should not be offered as long as a child is still developing and hope remains that his or her life-style can change, thereby forestalling obesity-related problems in adulthood (Norwegian Directorate of Health, 2010; Øen, 2012). The emphasis in this regard has been on family-oriented lifestyle interventions rather than child-only ones, in the expectation that targeting parents along with the child will serve to enhance treatment effectiveness. However, this assumption has been called into question by a recent randomized controlled trial comparing the results from a camp-based programme for families with those of an out-patient family-oriented treatment programme (Benestad et al., 2016). Benestad and colleagues found that the camp-based programme had "only small long-term effects on BMI (and some cardiovascular risk factors) in children with severe obesity", that "most children remained obese after treatment", and that it therefore seemed "unlikely that the high summer camp costs can be justified given the modest effects" (Benestad et al., 2016, p. 7).

Despite the growing literature on childhood obesity and lifestyle interventions focusing on lifestyle changes, few studies have examined young persons' experiences of being identified as candidates for such programmes and of participating in them.<sup>1</sup> The aim of the present

<sup>1</sup> An exception here is Engström, Abildsnes, and Mildestvedt (2016)'s focus group study of adolescents and young adults participating in various lifestyle programmes in Norway. Drawing on self-determination theory (Deci & Ryan, 1986), they found that the motivation of participants changed from external to internal during their attendance in the programme. This change in motivation was related to the participants'

paper is to examine teenage girls' lived experiences of being identified in this way, and of participating in a one-year lifestyle programme in Norway. Drawing on philosophies of the body, the paper shows how the girls first try to reject suggestions from others that they should participate in the programme, even though all the girls nevertheless eventually agree to participate. They then use a variety of strategies to avoid perceiving their body in a negative mode. Their stories also highlight some more positive and unexpected experiences.

Based on the girls' narratives, the paper explores the dynamics of corporeal self-formation in relation both to others and to elements within the lifestyle programme. It focuses on how teenage girls' bodily self-perception and bodily self-awareness come to be shaped in "intercorporeal assemblages" (Diprose, 2009) comprising other people, the specific features or elements of the programme, and the sociopolitical context in which their participation takes place. On the basis of this analysis, we argue that weight-related treatment goals are not necessarily compatible with the strengthening of adolescents' body images and self-esteem.

### Philosophies of the Body

In order to analyse teenage girls' bodily self-perception and bodily self-awareness in terms of intercorporeal assemblages, the paper juxtaposes phenomenological philosophy with an approach inspired by Foucault.

Phenomenologists offer detailed explorations of the role of the body in relation to subjectivity, showing how lived embodied experiences of illness, pain or impairment can affect a person's bodily self-awareness, body image, and agency (Carel, 2016; Leder, 1990; Slatman, 2014a; Svenaeus, 2009; Zeiler, 2010). Such reasoning starts from an understanding of the self, or subjectivity, as *embodied* and *situated*. It also starts from the understanding of our fundamental mode of being as pre-reflective and practical, and sees any independent agency as intrinsically dependent on the situation in which it is articulated (Käll & Zeiler, 2014).

Following Merleau-Ponty's (1964/1968) account of the lived body as the lived relation to the world as mediated and experienced by the individual subject, and as an "intertwining" of body and world, phenomenologists emphasise the role of embodiment and relationality in their explorations of how bodily selves are formed in and through interrelations with one another. The phenomenological focus on the embodied self as being-in-the-world underscores how our very bodily mode of being-in is

progress, in particular their progress in terms of body weight. Most participants experienced a motivational shift in favour of internalization, a trend fuelled by their achieving of results (Engström et al., 2016, p. 8). By focusing on changes in motivation, the study did not discuss the experiences of those who did not experience a motivational shift.

constituted by “the context of meaningful relations with which we are involved ... our being and our world (always material *and* social) are constituted through the relation ‘in’” (Diprose, 2005, pp. 239 & 241). The lived body as a site of self-becoming is constituted through dynamic relations with others, things and the world, and scholars have made use of the notion of intercorporeality to further emphasise the non-discreteness and fundamental openness of bodies, and the relational becoming of bodily selves (Fuchs, 2016; Shildrick, 2008; Weiss, 1999; Zeiler, 2018).

In this paper, the notion of intercorporeality will be put to analytical use in investigations of bodily self-awareness. Leder (1990)’s conceptualization of how the body in many everyday interactions can *dis-appear* from thematic reflection, and at times also *dys-appear* to the subject (that is, appear to the subject in a “dys-state”, as bad, ill, or painful), offers a helpful starting-point here. According to Leder, dys-appearance can occur when the body fails us: for example, when we experience pain, discomfort or disease. At such times, the tacit pre-reflective “self-giverness” of the body is complemented by a reflective bodily self-awareness, and the body can come to be experienced as “that which stands in the way”: as a hindrance that blocks what we can do or be and that we cannot but attend to (Leder, 1990, p. 84). The body can also “*eu-appear*” (where the Greek prefix *eu* refers to happiness and well-being) in situations when one is likewise explicitly aware of one’s body, but in a positive mode – as when feeling buoyant, strong or healthy (Zeiler, 2010, p. 339). Bodily dis-, dys- and eu-appearance are all multidimensional phenomena; there are social dimensions governing the extent to which bodies are “allowed” to dis-appear, or “triggered” to dys-appear or to eu-appear to the subject (Leder, 1990; Zeiler, 2010).

The ways in which the other’s objectifying gaze can disrupt social interaction and result in reflective attention to one’s body in a dys-mode are explored in an extensive literature (for example, Fanon, 1952/2008; Sartre, 1956; Slatman, 2014a; Zeiler, 2013). Such writers shed light on the ways embodiment is experienced subjectively: how it is informed and formed by the manner in which our bodies are given meaning in the specific semiotic-material situation in which we live. To such reasoning this paper adds an explicit attendance to the significance of the role of others and things within intercorporeal assemblages for bodily dis-, dys- or eu-appearance. The notion of intercorporeal assemblages (which comprise other people, things, specific features or elements of the programme, and the socio-political context in which it takes place) is intended to underscore the significance of the role of the assemblage for the relational becoming of the bodily self within it (Diprose, 2009, p. 13). The paper further adds a concern inspired by Foucault with how the self comes to materialise through repeated techniques of discipline or through particular clusters of discourses,

practices and institutions to the phenomenological focus on embodied subjectivity and agency.

Previous studies that have used Foucauldian insights (Gimlin, 2006; Heyes, 2009) have attended to how “bodily defects” are described and created through visual and surgical techniques that both draw attention to specific body-parts *and* offer “solutions” to them when defining them as defects. Such research has drawn on Foucault’s theories regarding the ways in which disciplinary powers and technologies can help shape or produce particular bodies, or desire for these bodies (Foucault, 1975/1979). Analyses of governmentality inspired by Foucault have also shown how subjectivity and agency form individuals’ engagement with “the powers that govern them and through which they govern themselves” (Petersen, 2003, p. 192). They discern the ways in which medical technologies and therapies tend to encourage certain behaviours or shape specific social orders. At the same time, governmentality studies have been criticised for privileging official discourses over social relations, counter discourses and acts of resistance (O’Malley, Weir, & Shearing, 1997; Petersen, 2003), and for failing to attend to the dynamic ways in which individuals respond to official discourses (Lupton, 1997). Allowing a greater role for lived experience and the phenomenology of the body has been suggested as a way of addressing this imbalance (Lupton, 1997).

We take specific elements from past Foucault-inspired work, and from Foucault himself. We see the focus on disciplinary power and governmentality as promising with regard to understanding girlhood agency in the lifestyle programme. In contrast to the docile or subjected body in Foucauldian reasoning, however, we make use of the phenomenological understanding of the lived body as *a site of self-becoming* that pre-reflectively opens up a world of meaning to us, even if we also can approach things, others, or our own bodies in thematic thought – and attend to lived, narrated experiences.

Oksala (2004), applying the Foucauldian framework to phenomenological philosophy, suggests that the possibility of resistance to disciplinary powers rests with what phenomenologists call an “event” – something which takes us by surprise, or happens “in a terrifying or marvellous way [where the] *experiential body* is the locus of resistance in the sense that it is the possibility of an unpredictable event” (Oksala, 2004, p. 112). Wehrle (2016), yet another scholar to have combined these perspectives, argues that the phenomenological focus on *habituation* and *sedimentation* of norms and meanings within the lived body is what makes possible the formative effects Foucault explored in his early work.

For our purposes, the combination of phenomenological reasoning and Foucault-inspired attention to disciplinary powers makes possible an analysis of the *normative formation of embodiment*, and also of *resistance* to this.

Finally, phenomenological conceptualisations of body image bring together the subjects' perception and sense of their body and their emotional attitude towards it, while simultaneously acknowledging how body image is susceptible to being shaped by subjective, social and scientific conceptualisations of the body. The various dimensions are seen as interrelated, enabling body image to emerge as a subjective phenomenon related to how we make sense of, and assess, our own body, as well as how our body is assessed by others (Gallagher, 1986; Weiss, 1999). For Weiss (1999, p. 2, p. 105), body images are "construed through a series of corporeal exchanges that take place both within and outside of specific bodies" in engagement with others, a view we regard as relevant to the present study. Holding together the co-shaping of body images, individual bodily self-awareness, and the notion of bodily agency, this paper examines how bodily changes – or rather, health professionals' emphasis on bodily changes – have influenced teenage girls' narrated perception of their bodies and experiences of "I cannot" and "I can" in one particular Norwegian lifestyle intervention programme.

In the case of Norway, research has identified the pursuit of an active lifestyle as "an established cultural prerogative" (Wathne, 2011, p. 416), and has shown how obesity, in media discourses, is associated with "cultural messages of blame and shame" (Malterud & Ulriksen, 2010, p. 47).

## Methods

Our aim is to be sensitive to the participants' voices and attend to their *lived experiences* as narrated in the first-person. In doing so, we seek to contribute to a growing body of studies that combine the qualitative analysis of interviews with phenomenological philosophy: what Slatman (2014b) describes as a "socio-phenomenological approach" (p. 556). Our approach places emphasis on dimensions crucial to phenomenological investigations of embodiment. Our focus is on the embodied self as being-in-the-world, situated and embedded in a concrete semiotic-material world with others and things. For Slatman (2014b), the socio-phenomenology of the body involves an analysis of embodiment at the level both of the individual and of that individual's social group. As we view it, this also requires attention to the *socio-material* dimension of bodily existence and co-existence.

## Analysis and Research Ethics

Our analysis derives from interviews with seven teenage Norwegian girls participating in the same lifestyle intervention programme. Access to the twelve-month, publicly funded programme usually involves referral by a general practitioner or school nurse. Having a body mass index (BMI) of more than 35 is a basic recruitment criterion. Participation involves attending two exercise sessions a week, and a monthly nutrition session. The programme is interdisciplinary in the sense that it is run by both physiotherapists and dieticians.

Following van Manen's hermeneutic-phenomenological approach with its point of departure in *lived experience* (van Manen, 1990/1997, pp. 18, 88-92) we sought to uncover thematic aspects of the girls' experiences. This process commenced during the conversational individual interviews conducted by the first author (van Manen, 1990/1997, p. 66). Each interviewee was encouraged to elaborate on her own experiences of participating in the programme, including how these had changed over time. In keeping with van Manen's recommendations, the interviewer endeavoured to be as concrete as possible in asking follow-up questions, encouraging participants to think of a specific situation or episode that had made an impact on them: for example, an experience they had had while being tested or weighed. Such an approach proved valuable, resulting in rich accounts of how the girls felt, resisted, and acted in these episodes and situations. While participants did not use terms such as "resistance" or "agency" in their own accounts of these episodes, their use of certain phrases and examples illuminated how they had developed or negotiated their own ways of resisting and acting in various situations and settings.

At first glance, the interviewees' narrations seemed to juggle contradictory elements. On the one hand, they revealed a need to be perceived as good enough as the persons they were. But this need was accompanied by expectations of bodily progress and change, suggesting that they did not perceive themselves as good enough as they were: they needed to change, to alter their lifestyle along with their weight and body shape, their bodily being in the world. Further questions emerged. How did the girls juggle these seemingly opposed aspirations? How did they address their own needs and aspirations within the context of participating in a group-based programme geared towards the achievement of measurable results, including changes in BMI? What tensions attended or underlay their participation? How did they experience the tension of being a member of a group while also striving to relate to their individual needs and desires?

In line with van Manen's selective reading process, these analytical questions were used as guides while working on the transcribed interviews. The first author undertook a line-by-line reading of the transcriptions of the audio-recorded interviews, highlighting statements and episodes relating to these questions. During this process, she found it useful to draft thematic anecdotes. Writing and rewriting such accounts of the girls' experiences served to illuminate what was unique about the experience-based resistance of each and also how their unique experiences compared with those of others. In the next step, each of the authors read the transcribed extracts, and identified common threads and contrasting aspects. Both authors furthermore combined this analysis with attention to how the girls respectively, in narrating their experiences, presented and positioned themselves

and the lifestyle programme. At this stage, three themes were identified: *being identified as a candidate for a lifestyle intervention programme and not wanting this; negotiating the lack of weight loss and the scales; and bodily situated agency – feeling good and being able.* Permeating all three themes were two central, interrelated phenomena: *agency and resistance.*

The final stage of the analysis involved both authors working dialectically in search of links between participants' accounts and the concepts of disciplinary power, intercorporeality, dis-appearance, dys-appearance and eu-appearance. These concepts were employed in the analysis of the empirical material and also in a more theoretically-oriented discussion of teenage girlhood and agency. The recurrence of the phenomena of agency and resistance led to further analysis of the material in order to identify how exactly the respective phenomena were expressed within each of the three themes.

The paper forms part of a larger study approved by the Norwegian Data Protection Official for Research (NSD). Information about the study accompanied the letter inviting the girls to participate. They were informed of the voluntary nature of joining the study and their right to withdraw at any time. To maintain confidentiality, pseudonyms are used throughout the paper to identify the participants.

### Teenage Girls Speak about their Lifestyle Programme

#### *Being identified as a candidate for a lifestyle programme and not wanting this*

This first theme derives from the girls' accounts of how others identified them as candidates for a programme for overweight teenagers. None of the participants was at all happy about having been identified in this way.

Usually, such identification was made by a school nurse, doctor or parent concerned about the girl's weight. When recalling this situation, participants described feeling angry, hurt or uncomfortable. In different tones and with varying degrees of intensity, they described their reluctance to join the programme. Emma, informed about the programme by her school nurse, described how this made her feel *"a bit uncomfortable"*, declaring that she *"did not really want to start there"*. Gaby was *"totally against it ... not wanting to participate"*.

Such reluctance typically revolved around the girls not wanting to join a programme for adolescents identified as overweight and in need of professional help to lose weight. They wanted to avoid being labelled as overweight or seen as candidates for programmes for those *"needing help"* to shed weight. Declaring that she *"hated being called overweight"*, Alva noted that being identified as a candidate for a lifestyle programme seemed to imply that she was overweight, while Katrina declared that being a member of *"such a group"* was *"not for me"*: *"I*

*thought it was a programme for those with problems and things like that. And that it was a programme for overweight individuals ... . That is actually how I felt, I did not want to be in such a group ..."*.

These quotations exemplify a recurring positioning in the interviews. Since the intervention was referred to as a lifestyle programme to prevent obesity, being assigned to it involved being positioned as an overweight person. This was something the girls declared they did not want for themselves. However, despite repeatedly stating that initially they did not want to take part in the programme, all eventually agreed to do so.

The decisive factor here was parental influence, sometimes involving dynamics in which the final decision was left to the teenager herself. Gaby recalled how her *"mum and dad put their foot down"*. Their intervention was brutal and to the point: *"Let us spell it out, you are about to get very fat and you have to do something about it"*. Although *"really hurt"* by what they said, Gaby discovered they had the backing of the school nurse, who agreed with them *"that I should start here, so I did it, so I decided to have a go and see how it went"*. Emma, too, talked to her parents and thought it over. She felt that, after all, it was her choice whether or not to join the programme, and that it would be good to lose some weight. In one reading, such accounts seem indicative of the girls' ambivalence towards the programme; while initially reluctant to participate, they also spoke of the final decision being theirs, placing it in the context of school health care and family dynamics. In another reading, however, the verbally expressed aversion to the idea of participating in the programme can be read as revealing the powerful force of social and intersubjective dimensions of body image. Through the girls' narrations of how others had explicitly told them they were overweight and in need of professional help, or implicitly positioned them in this way, these others were also positioned as persons who had implicitly or explicitly focused on the girls' bodies, implicitly or explicitly suggesting that the girls themselves *needed to attend* to their own bodies as overweight and take action.

Emphasizing that body images are *"construed through a series of corporeal exchanges that take place both within and outside of specific bodies"* in engagement with others, Weiss (1999, p. 2) uses the notion of intercorporeality to highlight how body image can be seen as personal while also being continuously formed through interactions with others. Body image is never *only* personal; instead, it is dynamically shaped through and in inter-relating with others. In the present analysis, the focus on what is narrated as having taken place between the girls and their parents, school nurses or doctors brings to light the complex dynamics of the situation and their implications for the girls' subjectivity and agency: the girls voiced vexation at being identified as candidates for the programme, and whereas the intent of parents and

health care professionals had been to help, this may not be what the girls had heard. In the girls' narrations, their repeated denial or rejection of this understanding of themselves (expressed in terms of feeling uncomfortable at being perceived as overweight, or hating being seen in this way) can be seen as expressive of an attempt to *resist*: to resist others' understanding and positioning of their bodies, and the notion that they needed professional help.

For some of the girls, their dismay about being identified as candidates for the programme persisted even after they had agreed to join it. Alva recalled having tears in her eyes when she first encountered the group. As a newcomer, she did not know any of the others, nor did she regard herself as overweight. She emphasized how she felt like an outsider, like someone not supposed to be there, not fitting in, and not being overweight:

*I am not overweight. That I am very clear about. I hate being called that and I am not overweight. I do not regard myself as overweight ... . When I came here I had tears in my eyes and things like that because I felt that I did not fit in at all. Entering the room for the first time – and this is perhaps a bit mean of me to say – but there were many others there who were much bigger than me.*

In the case of most of the girls, the idea of entering the programme was first raised by others, even if some of them also stated that the decision was ultimately theirs to make. While they eventually agreed to participate, their reluctance set the tone for at least their initial sessions. In the light of research noting the association of obesity with blame and shame in Norwegian media discourses (Malterud & Ulriksen, 2010), the girls' affective responses when being positioned and labelled as overweight can be understood as efforts to resist being perceived in this way.

#### **Negotiating the lack of weight loss and getting on the scales**

The second theme that emerged encompasses several elements. Firstly, it explores the frustration the girls experienced when, after taking part in the programme for some time, they failed to achieve significant weight loss. As part of this, it examines the specific experience of getting on the scales in order to have their weight measured. What did "getting on the scales" mean for them and what did it do to them? Finally, the theme explores issues of bodily self-awareness and agency in the girls' efforts to find alternative ways to relate to the scales.

Most of the girls recounted how, while participating in the programme, their weight went up and down from month to month, with no significant weight loss noted. This lack of progress made them search for explanations

for their failure to lose weight. Gaby wondered whether, "since I feel more fit", it might have something to do with the exercise sessions; perhaps some of her fat had been replaced by muscle. She combined such reflections with a detailed description of where exactly she wanted to lose weight:

*I want to lose weight and get rid of this fat here [pointing to her stomach] ... . Yes, especially my stomach fat, and after that my thighs ... when I'm sitting down I'm very much aware of it. And after that my arms, because often my T-shirts don't fit; they fit around my waist, but not my arms ... . But I guess all teenagers focus on those things ... . In my school there are lots of sports-minded teenagers, ambitious and in good shape. I was the worst, the fattest in school, and that's no exaggeration.*

In the excerpt above, Gaby "normalises" her bodily focus and self-scrutiny, noting that "all teenagers focus on those things", while at the same time voicing detailed self-criticism of her body and its appearance. She identifies specific areas of bodily fat as problematic since they prevent her from wearing certain clothes and make her feel different from other girls at school.

Hannah narrated her response to her failure to make progress on the scales thus:

*I don't myself feel I've become slimmer ... because my weight goes up and down. People keep telling me that I've become slimmer, Yes, but in a way I don't feel that myself ... because my number [on the scales] goes up and down. So, I don't understand how they can say that. I can't understand that my body has become slimmer if my weight tells me that it has gone down or up.*

Here, Hannah explicitly relates to the number on the scales. Since this went up and down, it made her wonder about others' description of her as slimmer. As the interview continued, she also explained that, when the scales informed her of her lack of progress, she had "a little dark thought ... . Because the scales never lie, you get stuck in a number":

*It is scary in a way thinking that you actually weigh so much, kind of, ugh ... . It seems a bit hopeless. We get on the scales every month ... in between exercise sessions she [the nutritionist] comes and she weighs us one by one ... . It's hard not to bother about the number when you in a way know that ... . You get yourself so stuck in a number that it means everything in a way, and I don't really want that.*

In this excerpt, Hannah reveals how getting on the scales and having to relate to the results (as expressed in a “number”) did something to her. While not wishing to define herself in terms of the number on the scale, she describes finding it hard not to think about it. This focus on the number initiates “dark thoughts”, including the thought of putting her finger down her throat in order to induce vomiting.

Most of the participants did not achieve the expected results in terms of weight loss, and they consequently seemed to take the number shown by the scales as a signifier of their need to try harder. The scales were also regarded as telling the actual truth about their bodies, irrespective of others’ perception that they were looking slimmer. The number on the scales was described as taking precedence over even their own experience of their bodies. Any bodily experience of having become slimmer was interpreted via the number on the scale, and deemed questionable if not false. Hannah, for example, stated that she did not feel that she had become slimmer, because the number on the scales did not say so. Because the weighing sessions are repeated throughout the programme, and central to its design, the number on the scales was not easy to ignore. Even though some of the participants explicitly stated that they did not want to attribute this much value to the number, they could still get “stuck in a number” that came to mean “everything”.

Many of the girls offered detailed reflections on what going on the scales meant and did to them, as in the excerpts above. However, two girls described specific strategies to *avoid seeing the numbers* on the scale.

Aware of the emphasis on weight loss in the programme, Emma decided she did not want “to see the numbers”. When getting on the scales, she would “look the other way”, so that only the nutritionist in charge of weighing would see the numbers:

*Here they are focused on weight loss and things like that ... . But I didn't have to know the numbers if I didn't want to. And I didn't want to see the numbers. I told them I did not want to know my results ... they accepted that.*

Despite making sure that she did not see the numbers, and despite the fact that the nutritionist had accepted her strategy, Emma described how her diet became a topic of concern during weighing sessions; it was something that the nutritionist wanted to discuss with her. Emma described these conversations about her diet, with their specific focus on calories, protein intake, and the like, as “uncomfortable”; she described the nutritionist as “very nutritionistic” and “preoccupied with details”. From the way she experienced the nutritionist’s focus on her diet, Emma also gathered that her weight had not changed in the way it was supposed to and that she had not tried hard enough to stick to a healthier diet.

Katrina’s strategy was to avoid getting on the scales altogether. This was her precondition for participating in the programme:

*When it was first suggested, I was totally against it. I did not want to start here ... . And I was totally against getting on the scales. I did not want to be a part of that. But apart from that I've participated in all the other activities here. Indeed, that was my precondition for participating from the very start. That I didn't want to ... get on the scales here. And they accepted that. Nobody told me I had to get on the scales.*

The girls’ accounts make it clear that getting on the scales was not something that bolstered their perception of their bodies in positive ways. Rather, the scales produced a “number” they could not deny; they “couldn’t lie” about how they had failed to lose weight. The scales, in combination with a “nutritionistic” focus in the discussions that followed the weighing session, seemed to position the girls’ bodies in a “dys-state” (Leder, 1990, p. 84): that of failure in relation to the goal of weight loss.

While the literature on bodily dys-appearance attends to intersubjective and affective dimensions of experiences of pain and illness, there has been less attention to the material dimensions of such experiences. In the case of the current study, participants’ experiences of getting on the scales highlight how weighing equipment can play the role of a symbolic-material object within a particular intercorporeal assemblage – one comprising teenage girl, nutritionist, other girls, and the broader setting of the lifestyle programme – and how this can help shape the girl’s narrated dys-appearance. Getting on the scales was not something the teenagers did by themselves; they did it in front of the nutritionist, whose way of responding to them as measured bodies helped define the situation as one in which the girls needed to try harder to lose weight. The scales, too, played a central role in the girls’ narratives. When they mounted the scales, their bodies appeared to them in terms of weight loss failure. Their bodies dys-appeared to them in the intercorporeal assemblage of themselves, others, and the scales, where the number on the scales became a symbol of their failure. This symbol was perceived by the girls as something that could take over and become “all” that mattered. When seen in this light, Emma’s strategy of not seeing the number and Katrina’s refusal to get on the scales at all can be understood as ways to prevent the number affecting them in this way. These two strategies offer ways to make room for alternative ways of relating to one’s body, of ensuring a bodily “I can” which does not allow the body to dys-appear to the self involved.

This second theme also raises questions about resistance. According to Foucauldian reasoning, we may understand

human bodies as always already enmeshed in networks of power and knowledge within which particular bodies become the target of disciplining technologies which contribute to the formation of desired habits. Foucault perceives this operation of disciplinary power at the level of bodily movement as how subjectification takes place. To this can be added the phenomenological insight that repeated patterns of action and interaction can come not only to function as taken-for-granted dimensions of the bodily subject's being-in-the-world but also to feed into perception (Merleau-Ponty, 1945/2002; Talero, 2005). Once the role of habituation is acknowledged, it is hardly surprising that repeated measuring, weighing and attending to one's body progressively turns the girls' ways of attending to their bodies in self-critical directions.

In some of the girls' accounts, however, the repeated measuring is, if not resisted, at least explicitly negotiated. This was the case with Emma and Katrina, who in their own different ways refused to take part in the weighing session in the way most other girls did. While Katrina refused to take part at all in this key aspect of the programme, Emma modified her participation by turning her eyes away. Whether or not consciously chosen or thought through, such strategies can be understood as ways to challenge the essentially normalising message of the programme that "one should attend to one's weight via measurement". At the same time, Emma's narration reveals the efforts made by the nutritionist to align her with the programme's overall aims.

#### ***Bodily situated agency – feeling good and being able***

The third theme addresses the intersubjective and social dimension of a bodily sense of achievement that is unrelated to weight loss. It speaks to the girls' accounts of sensing their bodily capabilities in new ways. Many of the girls told of how they gradually felt more at home in the group. They described a sense of mutual support, fellow feeling and unity, mentioning how others in the group wanted good things for them. As Emma put it, "We help each other so that we achieve good results, yes". The girls contrasted this positive peer group experience with school activities such as PE (physical education). Emma explained that during PE sessions she had always felt "like a loser"; in the programme, by contrast, she felt at the same level as the others: "I thought it was incredibly wonderful that there were others here at my level". Katrina, too, described her experiences in the PE class, where everyone seemed to be looking at her in a critical way because she could not perform like the others. In the programme, by contrast, participants supported each other:

*I think it's been very visible. [During PE] I've felt that everybody can see, that everybody keeps staring at me. ... And I've never been a fast person, but in my class there*

*are many sporty and fit people who run very fast and things like that. So, that does not make you happy ... You rather get in a bad mood [during PE classes]. ... But here, there are some fantastic people here and we all support each other and back each other up.*

The girls described the critical gaze of their classmates at school in ways that resemble an objectifying gaze, one that through its focus on their bodies made them attend to their bodies in a negative mode (Fanon, 1952/2008; Leder, 1990; Sartre, 1956; Zeiler, 2013). Rather than dwell on such situations, however, the girls used them as the relief against which to understand their more positive experience of the lifestyle programme. Here they felt at the same level as the other participants. They could share concerns and talk to others in a new way. For Kina, the fact that all participants were grappling with the "same problem" is what made all the difference. Hannah described the new situation thus:

*I can talk with them [the teenagers in the group] about weight and things like that. Things that I can't talk about with my slim friends ... so I feel it's very right for me to be here, I feel safe ... Even though [my slim friends] care and want to understand, it's not they who are ... overweight ... Here I can talk about how much I weigh without being ashamed of it.*

Discussing weight with other group participants also involved talking privately with some of them about food and problems with food. Hannah recalled one particular episode when she tried to help one of her new friends in the group:

*I recall last summer Ingrid was struggling with food and then I could talk to her about it and support her, we did it together kind of ... I can talk about how much I weigh without feeling ashamed, without people judging me. And I think we usually joke about it because we are part of the same programme. It is completely different from talking to my slim friends.*

All the girls emphasised how, after participating in the programme for some time, they were able to run faster and for longer periods of time without having to stop or give up. They could also lift heavier weights. They all described how such achievements enhanced their self-confidence. As Emma put it, "I can sense, for example, that when I go jogging with friends now, my endurance is better so that I can jog the entire time without stopping or walking". Vilja declared that "I can perform much better. It takes longer before I get tired and exhausted during PE, compared with previously. And I notice it a lot myself, I can feel it myself". Gaby mentioned how



her family had noticed a change in her: “My mum ... is so proud of me now. And she notices in the way that I walk now that I am much more fit”.

Hannah spoke of how running to catch the bus or train was now something she could do without getting as tired and out of breath as before. Again, she formulated this in terms of a bodily feeling:

*Even though you do not see the results with your eyes ... you sense progress. I feel that I have better endurance and all of that, so I feel very good about that.*

In contrast to the second theme, the third theme evokes a bodily sense of achievement. In their narrations, the girls attend to their bodies as able and strong; they feel in their bodies that they are stronger and can do things that they previously hadn't been able to. This positive bodily self-awareness exemplifies bodily *eu*-appearance (Zeiler, 2010). It contrasts with the state of bodily *dys*-appearance the girls described earlier.

Significantly, the girls credited not only their supportive fellow participants but also their physiotherapists for contributing to this positive experience. Speaking with enthusiasm of how exercise sessions had made her able to do more than she thought she could, Hannah attributed this in part to the staff, “because the physiotherapists are so positive”. The ability of the physiotherapists to make the girls feel capable helped Hannah to feel more positive about her own capabilities.

Returning to the intersubjective dimensions of body images and bodily self-awareness, these accounts bring out the role of sociality, revealing how others' responses to, and interactions with, participants helped them to achieve a more positive attendance to their bodies. The girls' accounts also show evidence of an “event”, in the phenomenological sense of something that surprises or occurs in a “marvellous way” (Diprose, 2009; Oksala, 2004, p. 112). However, while such events may enable resistance (see Oksala, 2004), it could also be argued that, even though the girls in our study narrated positive surprises in terms of the way others supported them and how they came to feel strong, good, and proud of themselves, that which they sought to resist was not primarily a matter of disciplinary powers or prevailing norms regarding body shape and weight loss, but rather others' ways of making them feel bad, weak or ashamed of their bodies.

### **Normative Embodiment, Dys-Appearance, and the Power of Eu-Appearance as Event**

In *Discipline and Punish*, Foucault (1975/1979) explores how specific power practices, along with technologies that control bodily movement, define and form bodies via processes of normalisation that can at times be violent.

In contrast, phenomenological explorations attend to corporeal self-formation, focusing on how the subject engages with others, things and the world through corporeal or operative intentionality. Operative intentionality is what allows the bodily subject to move in the sensible world in which she or he is situated, and to reach out to others and things in it without thinking about how to do so. Through active engagement with others, things and the world, meaning is generated, habits are formed, and higher forms of reflection become part of the bodily subject's habitual being-in-the-world. Phenomenological accounts also examine how the repeated performance of bodily expressed and enacted norms can feed them into the lived body, thereby transforming body-world relations (see Zeiler, 2013). Wehrle (2016, p. 57) argues that one effect of this is to “enable normality”, in the sense of an orientation in the familiar world in which one lives, and that it is the phenomenological focus on habituation and sedimentation of norms and meanings into the lived body that makes possible the formative effects that Foucault explored.

In this paper, the interwoven application of Foucauldian and phenomenological insights enables us to analyse the findings through the lens of *normative formation of embodiment*. The narrations offered by our teenage participants reveal how the body becomes thematised against a background of norms about overweight bodies. Firstly, the girls' descriptions of what it felt like to be identified as candidates for the lifestyle programme, and their strong affective negations (“*this is not for me*”; “*I'm not overweight*”), reveal the pain of being identified in this way, and the sometimes confrontational nature of the girls' responses. Whether they like it or not, however, the girls are made to attend to their bodies and to acknowledge that these need to be worked on for the sake of their own health and well-being. This process continues after they join the programme. The girls tell of their desire to lose weight in particular areas of their bodies in order to be “just like everyone”, suggesting a normalisation process towards conforming with a specific way of attending to their bodies. They further express concern about the way in which a certain mode of measurement – getting on the scales – can “take over” (“*the number becomes everything*”), with two of them engaging strategies that involve an explicit refusal to attend to the number on the scales.

On the one hand, lifestyle programmes “order” bodies (in the Foucauldian sense of the term) according to very specific rules and norms. On the other hand, the phenomenological understanding of embodiment suggests that *habituation* is what enables interaction with others and the world, with repeated actions leaving traces within the lived body. Such traces can take the form of sedimented patterns of acting or interacting, transformed taken-for-granted body-world relations, or implicit lived sensitivities which help shape what affects us or what appears familiar or normal. From a phenomenological

perspective, this bodily thickness, this ability of habits to be incorporated into the lived body, is what enables the past to feed into the present and influence the future. Statements such as “*I hate being called over-weight*” can be read as indicative of how past situations – when they have been called overweight – may feed into the present, prompting the girls to state that the lifestyle programme is not for them, and shaping their affective response.

Furthermore, the girls’ accounts are not accounts of *docile bodies*. While there is an evident asymmetry of power within the lifestyle programme (the girls are supposed to participate in specified ways, and while they might try to – and at times succeed to – modify the rules of the programme, they are still told what to do), our analysis indicates the need to consider normative embodiment in ways that reach beyond the notions of passivity versus activity.

On the one hand, getting on the scales may be seen as a *forced habituation* in the Foucauldian sense: it is part of the girls’ routine within the lifestyle programme. As Foucault notes, routine is what enables effects on bodies to become enduring ones (1975/1979). In the case of this particular lifestyle programme, that which is rendered routine may be not only the actual measuring on the scales, but also a certain mode of attending to one’s body as a teenage girl. On the other hand, as noted by Wehrle (2016), such forced habituation is possible only because of the way in which bodily existence and co-existence inevitably generate habits. This is why we may ascribe a basic “sense of *activity to the body*” (Wehrle, 2016, p. 63). Some of the girls also explicitly engage in the balancing act, discursively and corporeally, of keeping at bay the “measuring” mode of attendance to their bodies while engaging in other activities within the programme.

The combination of Foucauldian and phenomenological perspectives also helps us to make sense of the girls’ narrated examples of bodily dys-appearance and eu-appearance. Bodily dys-appearance can occur when the body fails us, when we experience pain, discomfort or disease. For Leder, this implies that the tacit, pre-reflective “self-givenness” of the body is complemented by a reflective bodily self-awareness; the body can thus come to be experienced as “that which stands in the way”, as a hindrance that blocks what we can do or be, becoming something that we are compelled to attend to (Leder, 1990, p. 84). However, when juxtaposing Foucauldian perspectives with the phenomenological concept of intercorporeality, and that of intercorporeal assemblage, new light is shed on bodily dys-appearance: to think about dys-appearance via these notions is to attend to the *power, affective, material, and temporal* dimensions of dys-appearance. While the girls described in various ways how they attended to their bodies in a dys-mode (that is, when their bodies did not align with the goals of the lifestyle programme), they also spoke of a measurement-linked perception and attendance they

feared would “take over”. For some of the girls, getting on the scales was dreaded for what it *could* come to mean. In such cases, their concerns about what could happen, what they might be forced to do, and how they might possibly come to relate to their bodies seemed to be integral parts of their specific experience of their own bodies within this particular lifestyle programme.

Furthermore, that which the girls sought to avoid was a state of constant reflective awareness of their weight. And such *constant* reflective attention is what phenomenological accounts of objectification problematise. Such accounts suggest that being made constantly to attend to one’s body evokes the double ontology of the bodily self: a situation where the subject perceives herself/himself from the “outside”, in ways that typically hamper interactions (Fanon, 1952/2008; Zeiler, 2013). Such a situation disrupts smooth and seamless interaction with others and the world. However, even in narrations that emphasize what the girls are made to do, in ways that do resonate with Foucault’s processes of subjectification, the girls’ lived bodies are never passive in the sense of being docile objects, but are instead dynamically forming and being formed.

The benefit of reading the girls’ narrations through a lens that combines Foucauldian and phenomenological insights is particularly evident in relation to the third and final theme. Here, the girls’ narrated eu-phoric feelings were related to their ability to perform above their own expectations; the support and encouragement they received to push their limits; and their sense of being capable of new things. Situations that surprised them were also described. Here, their sense of “I can” seemed to indicate at least a temporary break with their habitual perception of themselves as less capable bodily than others.<sup>2</sup> In such cases, eu-appearance seemed to take on the character of an event: it broke with habitual perception and opened up new ways of living, thinking and self-perception. Significantly, such experiences of eu-appearance took place within a programme designed to help participants modify their bodies in accordance with predefined weight loss goals. While disciplinary powers may have played a role in shaping the girls’ embodied mode of being and of attending to their bodies, an “event” (the positive surprise) made it possible for the girls – at least partially – to resist dys-appearance. As Oksala (2004, p. 112) puts it, the “*experiential body*” becomes “the locus of resistance in the sense that it is the possibility of an unpredictable event”.

Our study suggests that a Foucault-inspired eye for the dynamics of power, together with awareness as to how subjectivity and agency form individuals’ engagement with “the powers that govern them and through which they govern themselves” (Petersen, 2003, p. 192), and

<sup>2</sup> Moreover, there is no mention of BMI or body weight; the focus is on other ways of relating to and sensing progress.

a phenomenological understanding of intercorporeality, and intercorporeal assemblages, can enrich discussions of bodily eu-appearance. The teenage girls in our study encouraged each other and focused on what they could now do. While the power dynamics at work within their programme were always evident, with the girls at times seeming to align themselves with the decreed norms, the girls also seemed to negotiate and make space for a more positive understanding of their own and their fellow participants' bodies and bodily capacities.

This suggests the need for a re-conceptualisation of what is happening in this particular lifestyle programme. While being obliged to attend to their bodies, the girls also encounter unexpected, positive bodily feelings and experiences. Such events, we suggest, offer a means of resisting the more troubling dys-appearing bodily situations our participants described so powerfully.

### Concluding Remarks

Our attempt to interweave phenomenological theoretical perspectives with Foucauldian insights has shed light on the corporeal self-formation of adolescent girls, and, in particular, on the ways subjectivity and agency come to be shaped in intercorporeal assemblages of others, things and a specific socio-political context. Our approach has facilitated interpretation of the actions of some girls (for example, avoiding seeing the number on the scales, and refusing to get on the scales) as strategies to ensure their bodily "I can". The approach has also revealed the ways in which the girls open up space for alternative ways of participating in and experiencing their lifestyle programme, suggesting their ability to challenge the disciplinary powers and technologies Foucault (1975/1979) identified as playing a key role in the production of particular bodies (and desires for such bodies). Our analysis poses questions about the role of the *power*,

*affective, material, and temporal* dimensions of both dys-appearance and eu-appearance, all of which merit further investigation.

Our analysis also has clinical implications. How might it be feasible for the design of lifestyle programmes to be modified so as to avoid fostering *I cannot* modes while promoting *I can* ones? Rather than prioritizing measurement and weighing machine data as barometers of progress, such programmes might consider a shift in emphasis towards individual agency and encouragement of the sense that "I can". An emphasis on activities geared towards *I can* would involve a more sensitive and explorative approach: one that seeks to identify individual preferences and allows for adjustments and variations within the group. Being conducted on the participants' own terms, such a programme would focus on the joy of movement. It would seek to foster feelings of physical strength and endurance, of increased capacity to participate in the hustle and bustle of everyday life, from walking the dog to running for the bus or carrying the groceries upstairs. On this basis, teenagers confronting obesity could be empowered to strengthen their body image and sense of self-worth.

For health professionals, there are lessons here about the pitfalls of promoting bodily change that may trigger modes of dys-appearance and thereby do more harm than good. In the case of lifestyle programmes, this suggests the need for a new approach. As we see it, this would involve a shift away from a biomedical approach focused on a standardised set of approaches, norms and outcomes. Bodily change in terms of weight loss would be toned down. Instead, attention would focus on the elaboration of notions of bodily change and on developing activities conducive to bodily eu-appearance: activities which individuals find meaningful, rewarding, empowering and inspiring.

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