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Introduction

It is a simple truth that nobody can do without food. Yet food is so much more than just a biological need. It is also a social and a cultural practice with a clear moral dimension. Food is embedded in our daily lives and is as much a cultural thing as it is a biological one. To emphasize this duality, we coined the term 'eating cultures'. An eating culture can be seen as a set of norms and values people attach to particular foods and the way they are consumed. For example, in the Netherlands people celebrate the birth of a child with 'beschuit met muisjes' (round double toasted bread with sugar covered aniseed sprinkles), while most Moroccans only eat the traditional harira soup during the month of Ramadan. The term eating culture then, encompasses a wider view on what is considered to be a proper meal, and on what type of food is appropriate under given circumstances. There are many reasons why people eat, or choose a particular type of meal or a component of a meal. For instance, people use food to celebrate (marriage, birth, death, holidays), to show their hospitality, to spoil and seduce their significant other, to still their hunger, or to strengthen the weak or cure the ill. It is clear that in deciding what and how to eat, health considerations are not necessarily decisive. Nevertheless, in many countries health authorities try to convince people to change their daily diet for health reasons. They present health as a main reason to choose one food item over another. In doing so, they neglect the fact that health may conflict with other values attached to food. This book aims to analyze the moral arguments at stake when a change in food behavior is promoted for health reasons.

Our central argument is that intervening in people's eating behaviour for health reasons is not morally neutral because eating behavior is related to our personal and social identity, to our culture and tradition and as such, food has many values attached to it. The ethical perspective on the change in food habits and thus on eating cultures is relatively new. So is the interdisciplinary approach that focuses on the debate regarding the promotion of healthy eating and changing eating cultures.

In this book authors from different fields and disciplines address different issues of ethics and eating. Interestingly, their visions do not always coincide. Some of the authors

develop arguments in favour of intervening in people's eating behaviour, stating that not all food-related values should be seen as equally desirable. On the other hand, some authors emphasize the idea of personal freedom and claim that everyone has the right to live as they choose, as long as nobody else gets hurt. Most authors however consider both aspects while reflecting upon the ethical aspects of food behaviour interventions.

In accordance with the Western 'culinary standard' of appetizers, main course and dessert, the essays can be divided into three components. For starters, the book opens with five essays containing particular approaches on food and eating behaviour. First, an introduction to the subject is presented by a paper on socio-cultural aspects of eating and the moralisation of food behaviour. Sofie Vandamme and Suzanne van de Vathorst are stating that eating is more than mere calorie–intake, and show that there are many other meanings attached to food. In fact, eating is primarily a pleasurable experience with a range of personal, social and cultural meanings. Peter Stearns then shows how we currently have to deal with an excess of food while in the past people often had to face shortages. His historical perspective describes the shift to new types of diet concerns. Kathy Davis explores what feminists do and don't have to say about obesity and obesity related eating behaviour. Many women struggle with their weight, and in the USA women are 25% more likely to be obese than men. Surprisingly, obesity is largely neglected in feminist literature, although some interesting facts come forward from a study among African American women. In her essay, Samantha Murray describes from a personal point of view how gastric banding controls eating behaviour. She makes an interesting observation regarding the place of bodily control: in-or outside the body. The last essay in this first section is written by Nicoletta Diasio, who outlines the anthropological perspective on de moralisation of children's food behaviour.

The second part of the book – the main menu so to speak – contains essays addressing the ethical considerations we may ponder when a change of eating behaviour is promoted for health and obesity reasons. The first three authors address the issue of *personal* responsibility. Two of them take a liberal approach defending the freedom of choice in food behaviour, even when this may lead to health problems. In this regard, Ignaas Devisch asks the question whether there is a way to respect food enjoyment in ethical terms. His approach is to scrutinize Homer Simpson's rather excessive food behavior and to ask what would be wrong with it. Fabio Bacchini then, dives into 'butter cultures', defending the moral thesis that we do not have good reasons to fight them. At the same time, he explores ways to help people develop healthy eating habits while respecting their unhealthy eating cultures. Søren Holm is a bit more reserved towards the idea of personal freedom. He analyses the connections between causal and moral responsibility and blameworthiness in the context of childhood obesity. He aims to develop a reasonable approach to parental responsibility when it comes to preventing and reversing childhood overweight and obesity.

The following chapters of this 'main course' address the issue of *social* responsibility in various ways. Firstly, Harald Schmidt reflects upon the question whether it is justified to demand higher insurance premiums from those who 'cannot control themselves'? Annemarie Mol concentrates on the morality incorporated in food advice, especially in food advices meant to prevent obesity. More specific, she reflects upon the idea that eaters should be moderate, questioning what one might say about this from an ethical perspective. Leon Rappoport writes about the moral implications of fast foods, starting with an overview of the way these novel products conquered the world. Next, the question how people around the globe adapted to the availability of fast foods is taken up, and finally, Rappoport offers some speculative conclusions how to combat the problematic health and socio-cultural effects of rampant fast food consumption. Abby Wilkerson pleads for justice: we have to foster and maintain those eating cultures that advance social justice *and* important health goals by supporting connections between communities, farmers, the land, and local traditions.

The third and final section of the book is as a good dessert should be. It is restricted in volume, easy to digest and in the best case surprising. These last two chapters reflect upon the representation of food and eating cultures in the media. Laura Lindenfeld for instance, analyses celebrity television chef Rachael Ray's 30-Minute Meals and her accompanying website. This commercial food television show claims to promote healthy, more responsible cooking and eating. She inspects these claims critically. This book ends with a view to the future, be it a fictional one, given by Frans Meulenberg and Henk Maassen. They analyse food and eating behaviour in science fiction movies. Do not look for a lot of academic references here, this last chapter serves as a kind of open reflection and certainly offers food for thought.

Enjoy your meal!

SOFIE EN SUZANNE

PART ONE

Different Perspectives on Food and Ethics

1 Eat, Drink, and Be Merry

Sofie Vandamme, Suzanne van de Vathorst

Healthy food habits are 'hot'. Citizens in many European countries are daily confronted with all kinds of campaigns to promote good food. For example, in Britain there is a '5 a day' campaign, in Germany '5 am Tag', in the Netherlands 'twee ons groente twee stuks fruit'. The advantages of healthy food habits – eat enough fruit and vegetables, be careful with fat and sugar – are also brought to us via our newspapers and magazines. The message suggests that if only we follow the advice to live a healthy lifestyle, we will live a longer and happier life, maybe even an eternal life.

One of the reasons for all this attention to our food is the growing so-called 'obesity epidemic'. More people get fat. In the UK it is predicted that in 2010 33 % of men will be obese, and 28 % of women. (In 2003 this was 22 and 23 % respectively). Of the rest, more than half will be overweight: 42 % of the men and 30 % of women in the UK are expected to be overweight in 2010 (Zaninotto et al., 2009). Similar predictions are made for other European countries. Even though the aesthetics of overweight and obesity can be regarded a matter of taste, the health risks seem to be unequivocally alarming. Obesity is related to diabetes, atherosclerosis, and cancer. It decreases fertility; it leads to arthritic changes in knees and ankles. Some predict that the increase of chronic, weight-related illness will eventually crush our social security systems.

The remedy seems straightforward: eat less, make a healthy choice and exercise more. Or as the UK campaign puts it so nicely: 'Small change, big difference.' Its simplicity however, is deceptive. Any change of habit is hard work, but changing your eating habits may even be harder than changing most other habits. Unlike giving up smoking, or abandoning alcohol, one cannot give up eating altogether. This means being on guard every time one eats. On top of that fat, salt and sugar, although undoubtedly unhealthy in large quantities, are very seductive. They really taste well. Even if McDonald's would

offer us a salad, eating a salad is hardly the same as eating a juicy hamburger. Children don't choose a plate of carrots, radishes and cucumber when a packet of crisps is just as available. To celebrate a birthday with celery stalks instead of cake seems ridiculous. And even if someone would be disciplined enough to choose the salad, have the carrots and prefer the celery, this discipline has to be carried out for life. Most people manage to stick to a short-time-diet, but to keep it up for years and years is a different matter. All people with a tendency to become overweight or obese must consciously keep a check on themselves every day, for at least the minimally 16 waking hours of the day. Because food is everywhere these days, and it is cheap, and it is available. They have to choose not to eat, or to eat less, all day long, every day of the week, year after year. It is therefore not surprising that many of those who lost weight through a diet gain weight once the diet is over. It is not even unusual to gain more than was lost.

There are campaigns all over Europe aiming to prevent obesity. Mostly, they try to achieve this by convincing people that being obese is bad for your health, and that everyone should make a healthy choice. Eat more fruit and vegetables, less fat etc. However, the results of this 'war on obesity' are meagre, to say the least. The prevalence of overweight and obesity is increasing all over Europe, in the United States, even in developing countries. It is a worldwide problem. And in many affluent countries obesity is more prevalent among the poor, than among the rich, linking obesity to socioeconomic inequalities. Prevention campaigns just don't seem to work.

In this introduction we want to address some issues related to prevention of overweight from an ethical perspective. We will show the pitfall of focusing on food solely as nutrition, and discuss personal, individual responsibility for eating. We want to emphasize that eating is more than mere calorie-intake, and show there are many other meanings attached to food. In fact, eating is primarily a pleasurable experience with personal, social and cultural meanings attached. To be ethically acceptable, as well as effective, any intervention aiming at influencing eating habits must take these meanings into account.

> *Good food, bad food*
> Fruit and vegetables can help keep your body fitter, healthier and happier. Best of all, eating them couldn't be easier.
>
> *Here are 5 great reasons to eat 5 portions of fruit and vegetables A DAY:*
> – They're packed with vitamins and minerals.
> – They can help you to maintain a healthy weight.
> – They're an excellent source of fibre and antioxidants.
> – They help reduce the risk of heart disease, stroke and some cancer.
> – They taste delicious and there's so much variety to choose from.
>
> *5 am Tag – Die Gesundheitskampagne*
> Wer kennt das nicht: Stress im Beruf, Überstunden und lange Arbeitstage. Da kommt eine ausgewogene Ernährung oft zu kurz. Doch Obst und Gemuse eignen sich ideal als

Snacks für den Arbeitsplatz. Greifen Sie doch öfter mal auf Paprikastreifen, Gurken-scheiben und Apfelschnitze zurück.

Obst und Gemüse enthalten nur wenig Kalorien und helfen Ihnen dabei, Ihr Immun-system zu schützen. Fünf Portionen Obst und Gemüse – am besten drei Portionen Gemüse und zwei Portionen Obst – sind ideal, um Ihren Körper optimal zu versorgen.

Ziel der Gesundheitskampagne 5 am Tag ist die Steigerung des täglichen Obst- und Gemüseverzehrs der Bevölkerung auf etwa 650 Gramm. Einfache Faustregel: Die Hälfte jeder Mahlzeit sollte aus Obst und Gemüse bestehen. Wie zahlreiche wissenschaftliche Studien belegen, wirken sich die in Obst und Gemüse enthaltenen Inhaltsstoffe positiv auf die Gesundheit aus.

Obesity and sight loss
RNIB's 'Feeling great, looking good' campaign report was launched on Wednesday 6 September 2006. The report shows a direct link between obesity and some of the com-mon eye conditions that cause blindness. These are:
age-related macular degeneration (AMD) – obesity may increase the risk of developing dry AMD, the type of AMD that has been linked to oxidative damage. Dry AMD is likely to impede ability to carry out daily activities such as driving, reading a newspaper or watching television. Obesity also increases the speed of progression of AMD.
diabetic retinopathy – obesity significantly increases the risk of developing type 2 dia-betes. Someone with a body mass index (BMI) of over 35 is up to 80 times more likely to develop the condition than someone with a BMI of less than 22.
cataracts – if obese, the risk of developing cataracts can be as high as double that of people who are not overweight. Although cataracts are largely treatable, one in four cases of sight loss in people over the age of 75 is due to cataracts.

Above are quoted some examples of campaigns in the U.K. and Germany. The focus of these campaigns is clearly on the health-effects of good food. In the 5 a day campaign, for example, 4 out of the 5 reasons for eating more fruit are health-related. That they actu-ally taste well comes last. Rules on food are not something new, and nor is the relation between good food and health. Food, eating, has long been the subject of moral rules. In the words of Appadurai, food is 'condensed biomoral substance' (cited in Rozin, 1997: 388). For the ancient Greeks the dietary rules were part of the art of good living, because to keep the body in good shape was believed to be a prerequisite for a good development (Coveney, 2006: 25-31). Taking the right food was also a way to promote health or avoid illness. Doctors throughout the centuries have promoted moderation in eating.

Most public health campaigns, as in the examples above, urge individuals to make a more informed, more 'rational' choice of food. 'Have an apple instead of a chocolate'. 'Have a raw carrot for a snack'. The reasons for these foods being superior to whatever they should replace (crisps, sausages, chocolate, candy bars) are that they promote health: eating broccoli may prevent cancer, eating lots of vegetables helps prevent weight gain and prevents diabetes and even blindness. Rational food is food that pro-motes health, and the rational choice is the healthy choice. However this overlooks the

many other reasons for choosing food and eating. People do not only or exclusively eat to be healthy; people eat for a variety of reasons. These reasons can be classified as personal, social and cultural.

Personal Reasons to Eat

First of all eating food is very personal. It is an intimate act (Fischler, 1990). Even more than clothes and cosmetics, things that merely dress our bodies, the food becomes part of our bodies, part of us. Literally, food is digested and transformed into what we are. Our bodies are biologically dependent on it. We cannot not-eat and survive. Our food also influences what we look like, skinny, fat, muscular, short or tall. But most of all, to eat is a sensual experience; it is experienced by our smell, our taste, and in the act of chewing and swallowing. Food and eating can evoke worlds beyond the foodstuff itself. These meanings of food are hard to predict on an individual level, as they depend on our personal history, social surroundings etc. For example the relation between food and childhood memories is a strong one (Sutton, 2001). One of the most famous examples, no doubt, is that of the madeleine in *A la recherche du temps perdu*, the cycle by Marcel Proust.

In the first part of this well-known book cycle, in *Du Côté de chez Swann*, our main character Marcel is suddenly upset when he tastes a madeleine, dipped in tea. A strong feeling of a pleasant memory suddenly lightens his depressive mood. It takes a while before he can put his finger on the source of this feeling: the taste of the madeleine with tea. This taste brings back memories of his childhood in Combray. Every Sunday morning before Mass he would visit his great aunt Léonie, and she would present him a piece of her madeleine, dipped in tea. Many years later the taste of the madeleine with tea evoked the Combray of his childhood days.

This scene not only demonstrates how strong the relation can be between taste, food and memory, but also how very personal this relation is. The meaning the madeleine had for Marcel, cannot be the same for anyone else, not even for someone else of the same age, or even for someone with the same roots in Combray. The personal association between a foodstuff and a memory will vary for each of us. This example clearly shows how eating is much more than the intake of a substance via the mouth into the digestive system. Eating has a clear psychological dimension. In the words of Rappoport (2003: 13) 'eating is as much or more a matter of the mind as it is of the body'.

What and how we eat, shapes our emotions, as it did for Marcel. The reverse can also be the case: our emotions guide us in what we choose to eat. A chocolate is more comforting than a carrot. The taste, smell and texture, as well as the experience of chewing can be intense sensual experiences. Many people have comfort-food; many crave

chocolate when in grief. They may however be less aware of these associations, indeed often do not know the source of certain cravings, or of certain repulsions.

Many other factors than these associations based on personal history determine our personal relation with food. A young child does not know the difference between edible and non-edible things. It will put everything in its mouth, be it sand, earth or even shit. What is acceptable as food and what is not, has to be taught and doesn't come naturally. In almost all cultures, some perfectly nutritious things are considered repulsive (Rozin, 1997: 23-41). This repulsion is not easily put aside. The taste of salted liquorice, of Yak-butter, of cow's blood mixed with raw cow's milk, of fried insects, are what we call 'an acquired taste'. The disgust or repulsion in fact doesn't even have to be related to taste, but can be related to the knowledge about the source of the food. Many people will retch upon being told that their delicious piece of meat comes from a human being. Claude Fishler (1990) calls it food's imaginary aspect. Annie Hubert (2000) states that this imaginary aspect actually has magical dimensions. Many believe that those who eat pure will stay pure. A belief the advertisement industry likes to latch onto, think for instance of advertisements for 'purifying water', or 'natural fruit juice, containing nature's best'. People with strict dietary rules often stick to them because they feel contaminated, dirty, if they don't. Other examples include the eating of pork for Jews and Muslims, eating meat for vegetarians and drinking milk for vegans.

A personal food style is thus formed by education, personal history, and by a third important determinant 'personal values'. Many vegetarians take a stance against animal suffering, organic foodies have moral view about the environment, and the extent of the orthodoxy of a Jew shows in his kitchen. Eating habits, food habits, cannot be isolated from the broader issue of life-style. We all try and live according to a more or less coherent system of values, and these values are about more than health. To live well, to live the good life, is to eat well. But this does not imply health is our only consideration in choosing our food. Other values can be just as important or even more so: to save the environment, to enjoy life, to live according to religious beliefs.

Food choice is based on very personal meanings attached to food, but these meanings do not always act on a conscious level. Just as Marcel did not immediately realise why his Madeleine evoked such happy feelings, we are not always aware of the reason why we choose a particular food and not something else. Clearly our choices are influenced by rational choice as much as by cravings, and other unconscious motives. Food can be irresistible. Many supermarkets and other shops are very aware of the impulsive need for food, and make sure they make use of it (e.g. by placing sweet comfort food near the cashier). This impulsive drive to eat, caused by emotions, a mood or certain associations, makes it hard to predict whether information about healthy food will have an effect. We do not eat just because we are hungry, or because we have to, but also because it comforts us, or just makes us feel good, or at least better. Food campaigns that give only health messages seem to ignore all these other very personal reasons for eating.

Social Reasons to Eat

Although clearly personal, psychological, motives play an important role in what we eat and how much, our social context seems to be as important a determinant (Fieldhouse, 2002). Sharing a meal often serves a social function. We develop and strengthen our bond with family and friends by sharing dinners, tasting various foodstuffs, by having buffets and parties, and by sharing rituals. Intimate moments of love, of connection, are created around the dinner table. Think of wedding dinners, Christmas dinners, and funeral dinners (Bell & Valentine, 1997: 57-89). As the famous saying goes, the way to a man's heart is through his stomach. Food expresses our relation to other people. It also gives structure to social rules. These social dimensions of food are important, they do not only structure our relationships, they also help build a family-, community-, and national identity. Family recipes are passed on from one generation to the next. The label 'according to grandmothers recipe' always has positive connotations. Similarly many nations are proud of their national dish. Think of Swedish gravad lax, French béarnaise, Belgian chips, or Dutch smoked sausage. The set of rules, habits and traditions creates social cohesion and social identity. A fine example was shown in the television series *Jamie's Italy*, in which the British cook Jamie Oliver travelled through Italy. He finds out that what is considered the best tomato sauce in one village, may not be the best tomato sauce in the next. He clearly enjoys both sauces, but the respective inhabitants are fiercely proud of their sauce, their recipe.

Just how susceptible we all are to our social context is also well illustrated in *Mindless Eating* by Brian Wansink (1996). The height of a glass, the size of a plate, dining alone or in a group, all determines how much we eat. The enjoyment of company, leading to a longer time spent at the table will induce people to eat more. This knowledge can profitably be used in old age homes, and nursing homes, where inhabitants frequently suffer undernourishment. A person that dines alone eats less, and with less relish. Even how we rate the quality of our food is easily manipulated by small differences in the context. Brian Wansink tells us of two different menus, one that uses a more elaborate description of the food, and another plain one. The people with the elaborate descriptions valued their food more, even though it was exactly the same food as was given to those with the plain menu.

An important further finding is that we tend to underestimate the impact of these contextual manipulations. Most people think themselves immune to such manipulations. However, even those who think they're immune are actually manipulated by small contextual clues. This shows that our defences against contextual influences are a lot weaker than we think. This may contribute to the ongoing obesity epidemic: we systematically underestimate the influence of the continuous display of food and its ready availability.

Eating is a social happening and a way of expressing social values such as respect, trust, and affinity within a community. It is an expression of social integrity. That's one

of the reasons why interventions in eating patterns can be so hard to achieve. What would a Christmas dinner be if it was prepared according to all good food rules, how much fun is it to watch the soccer competition while eating carrots, or to eat a wedding dinner with a calorie counter? Any dieter soon gets the label of being anti-social; a vegetarian among meat-eaters is 'being difficult'. Whoever wants us to change our dietary habits, will have to take into account the earlier mentioned personal factors, as well as these social aspects of eating.

Cultural Reasons to Eat

Both the personal and the social meanings of food are shaped within a cultural context. The norms and values are inherent in the culture that shapes our personal and social values. A coherent set of values and meanings on food could be called an 'eating culture' (Fieldhouse, 1996: 1-26). For example the Italian food culture, or eating culture, is known for its delicious meals, prepared in La cucina by 'la mamma'. It is linked to values such as family ties, pleasure, and purity in food. Values such as hospitality, moderateness, care, and safety are highly valued. It is also a highly normative food culture; only the best ingredients can bring about a good meal, all have to sit at the table, taking their time to savour the food. It is no coincidence that the slow-food movement has its roots in Italy. By contrast the American food culture seems to have as a main value the super size, with an emphasis on generosity, superfluency, on availability of food all day long and hence many snack moments.

In every culture there are hundreds of implicit norms governing the social rules around food. To burp or not, take off your shoes or not, to eat standing or sitting, on a chair or on the floor, pour your own drinks or wait to be served, to use the right hand or the left or both, wait until grace is said or not, eat in the presence or absence of the opposite sex, are all examples. Growing up in a culture teaches us to consider these rules to be normal, indeed most of us won't even be aware of these norms: 'This is how you should eat'. But for a traveller it is a normative minefield, and even the slightest mistake may cause offence. The fact that these norms are so internalized for the locals makes it difficult for them to explain the rules and not be appalled.

This sensitivity of the social rules governing eating behaviour shows how much more eating is than merely nutrition. Offering food may also signify care, respect and trust. But the way in which these values are expressed may differ from culture to culture. Serving large amounts of food can express hospitality, or wealth, or care, or more. Mothers wish to make sure their family members are well fed. For some this means making sure the family ingests enough vitamins and fibre, for others that they do not go hungry, or are satisfied. In one family this means mum hammering on about eating fruit and vegetables, in another family mum may be providing everyone with their favoured crisps.

Eating behaviour is thus determined by the cultural context as well as by personal and social history. Cultures can differ in 'obesogenicity'. The Thai eating culture, with little meat, lean food, and emphasis on many vegetables is less obesogene than the American food culture with its emphasis on generous portions. The spread of the American food culture may therefore also spread obesity. One of the examples is the Philippines, a country that lost much of its own food culture in favour of the American way of life, and where obesity is now a very serious problem.

Any intervention to prevent, stop or reduce obesity will have to take all these influences into account, be aware of the influence of the social context, and use the existing knowledge on cultural values and norms.

In doing this, it is important to realise that a culture is not a monolith inflexible practice. Within cultures there are differences, such as class differences, and many subcultures. These subcultures do tend to influence each other. The food habits of one group can then become the habit of another group (Bourdieu, 1979). Sidney Mintz illustrates this in 'Tasting Food, tasting freedom' (1996: 67-84) by describing the history of sugar consumption. Sugar, at first regarded a delicacy of the higher social groups, becomes available for the masses after the introduction of new production methods. The lower classes however started consuming much larger quantities of sugar than higher classes ever did, as if to display their access to this sign of wealth. The higher classes seem less vulnerable to an obesogenic environment. It is a fact that in most Western countries obesity is more prevalent in the lower socio-economic classes. One of the explanations may be that to be able to eat unlimitedly is perceived a sign of wealth by the poor. It may also be that unlimited supply of rich food is one of the areas in which they are able to enjoy life. The higher classes can distinct themselves by buying much more expensive exquisite food in smaller quantities (Bourdieu, 2005). Because culture is narrowly linked to identity any intervention should be aware of underlying cultural values such as these in any eating behaviour.

Ethics and Prevention

Any preventive measure that limits itself to the imperative to 'eat healthy and eat moderately' holds the individual accountable for their food intake. It doesn't take the facts into account that choices in food are as much influenced by social and cultural norms, values and context as by individual choice. We described how the context of food choice, is shaped by personal history, social environment and culture. Eating, food, is about so much more than health, it is a way to express class, values, beliefs, friendships, and family ties. These meanings of food are not easily changed, nor will the change be without loss.

On the other hand it would be foolish to suggest a very deterministic view on food choices and eating habits. We can make personal rational choices, we choose who or what we want to be, and can express that by what's on our plates. Values such as generosity, moderation, hospitality, can be expressed in many ways. However our choices are framed by our context, by our personal history, by our cultural background, by our family. The context does not deprive us of our freedom, but does limit it to certain options. We are responsible for our choices but not entirely free.

The deeply rooted values of food are not easily changed and it may seem that addressing the personal choice and personal responsibility is therefore the best way to influence a person's food habits. Many programs do this by referring to the health issues related to good food choice. But as we explained earlier, health is but one of the values attached to food. Ethically acceptable campaigns should be aware of the many other values food represents, and take these into account. Why shouldn't it be possible to improve health and keep important values such as generosity and hospitality?

How efficient it can be to address other values of eating, rather than merely nutrition and health, is illustrated, somewhat ironically, by McDonald's. McDonald's addresses these other values explicitly. Their marketing strategies emphasize precisely the other values of food; the social gathering, the being with your family, and the joy of eating. They emphasize their function as a family restaurant where children can have birthday parties, and eating there is presented as a festive occasion. One of the most famous meals sold are the 'happy meals'. McDonald's also tunes in on local cultural traditions: in the Philippines it emphasizes family values, in the US the generosity of the portion size. Even the hamburgers are not the same everywhere but always flavoured according to local preferences.

The success of McDonald's all over the world shows that it is possible to induce people to eat something new, as long as you tune into these other functions, meanings, of food. In many third-world countries McDonald's represents modernity, progress, however detrimental this may be to old customs. It is a pity that McDonald's seems to forget the nutritional side of the food, because that is exactly the value receiving the least emphasis. But then again, they are not a health-care organisation.

The focus on health issues by the governments, the encouragement to eat 5 a day, offers little countervailing power to the powerful images used by McDonald's. But surely we can learn lessons from their success: tap into the other values linked to food, and change is possible. Acknowledge that we eat for pleasure, for fun, for consolation, for gratification. Do not ask us to live or eat exclusively for our health.

Preventive measures against obesity should not put too much emphasis on personal responsibility. The individual choice is but one force in a field of many influences. Address the social context as well, for instance by preventing snack food being too

easily available, by allowing public space to be available for exercise. However, don't forget to address all other reasons why people eat what they eat, and respect these when they signify values. It is the only way to design a possibly successful campaign, and one that reckons with pluralistic values.

References

Aremelagos, G., & Farb, P. (1980). *Consuming Passion: The Anthropology of Eating.* New York: Washington Square Press.

Bell, D., & Valentine, G. (1997). *Consuming Geographies. We Are Were We Eat.* London: Routledge.

Bourdieu, P. (1979). *La distinction.* Paris: Minuit.

Bourdieu, P. (2005). Taste of Luxury, Taste of Necessity. In C. Korsmeyer (Ed.), *The Taste Culture Reader – Experiencing Food and Drink* (pp. 72-78). Oxford/New York: Berg.

Coveney, J. (2006). *Food, Morals and Meaning – The Pleasure and Anxiety of Eating.* Abingdon and New York: Routledge.

Fernandez-Armesto, F. (2001). *Food: A History.* Basingstoke: Macmillan.

Fieldhouse P. (1996; 2002). *Food and Nutrition – Customs and Culture.* Cheltenham:Nelson Thornes Ltd.

Fischler, C. (1990). *L'homnivore. Le gout, la cuisine et le corps.* Paris: Editions Odile Jacob.

Gard, M., & Wright, J. (2005). *The Obesity Epidemic: Science, Morality and Ideology.* New York: Routledge.

Hubert, A. (2000). Alimentation et santé: la science et l'imaginaire. *Cahiers de Nutrition et de Diététique, 35*(5), 353-356.

Mintz, S. (1996). *Tasting Food, Tasting Freedom.* Boston: Beacon Press.

Poust, M. (1995). *Op zoek naar de verloren tijd.* Amsterdam: De Bezige Bij.

Rappoport, L. (2003). *How We Eat. Appetite, Culture, and the Psychology of Food.* Ontario: ECW Press.

Rozin, P. (1997). Moralization. In A. Brand & P. Rozin (Eds.), *Morality and Health.* New York/ London: Routledge.

Scholliers, P. (2001). *Food, Drink and Identity.* Oxford: Berg Publishers.

Stein, R., & Nemeroff, C. (1995). Moral Overtones of Food: Judgments of Others Based on What they Eat. *Personality and Social Psychology Bulletin, 21*, 480-490.

Sutton, D. (2001). *Remembrance of Repasts.* Oxford: Berg Publishers.

Wansink, B. (1996). *Mindless Eating. Why We Eat More Than We Think.* New York: Brantam Books.

Zaninotto, P., Head, J., Stamatakis, E., Wardle, H., & Mindell, J. (2009). Trends in obesity among adults in England from 1993 to 2004 by age and social class and projections of prevalence to 2012, *Journal of Epidemiology & Community Health 2009*, 63,140-146.