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# Eating Identities, "Unhealthy" Eaters, and Damaged Agency

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**Abstract**

      This paper argues that common social narratives about unhealthy eaters can cause significant damage to agency. I identify and analyze a narrative that combines a "control model" of eating agency with the healthist assumption that health is the ultimate end of eating. I argue that this narrative produces and enables four types of damage to the agency of those identified as unhealthy eaters. Due to uncertainty about what counts as healthy eating and various forms of prejudice, the unhealthy eater label and its harms to agency are more likely to stick to some people than others and may reinforce patterns of oppression. I argue that fat people are especially vulnerable to this identification and the damage it can do. I then consider possible "counterstories" about unhealthy eaters, alternative narratives that might be less damaging to agency than the control narrative. I identify one promising counterstory but suggest that it may be limited when it comes to repairing damage to the agency of fat people. Overall, this paper illustrates some of the complex ways that healthism about eating affects agency, and emphasizes the ethical importance of the ways we think about and discuss eating and eaters.

**Keywords:** eating, food ethics, unhealthy eating, unhealthy eater, agency, social narratives, damaged agency, identity, healthy eating, health, ethics of eating, fat, relational autonomy

In healthist contexts like the United States and Canada, one of the central and most fundamental ways we categorize eating is as "healthy" or "unhealthy." Though they may not always be salient, these categories present themselves as applying to all eating, underlying all other possible designations. And as the well-worn cliché suggests, the way we eat is closely associated with who we are. (We might wonder whether it should be, though.) If all eating is healthy or unhealthy, we are all, in some sense, healthy or unhealthy eaters.

In this paper I argue that common narratives about unhealthy eaters can be harmful. Specifically, I contend that these narratives can significantly damage the agency of those identified as unhealthy eaters. I begin by identifying and analyzing a common narrative about the kind of person who eats unhealthily, which I call the "control narrative." This narrative combines a pervasive view of the eater *qua* agent—what I call a "control model" of eating agency—with the healthist assumption that health is or should be the ultimate end of eating. Within this narrative, unhealthy eating shows up as a sign that something has gone awry with the eater's agency: perhaps her agency is undermined by ignorance, lack of self-control, or a pathology of some sort. Whatever the case, a good agent, properly functioning, would simply not eat unhealthily.

Drawing from work by Hilde Lindemann and Alisa Bierria, I argue that this narrative can damage the agency of those identified as unhealthy eaters in four ways: deprivation of opportunity, infiltrated consciousness, distorted action, and blocked identities. This potential damage should be especially concerning for feminists and others concerned with inequality and injustice because of uncertainty about what counts as healthy eating—and therefore who should be properly categorized as an unhealthy eater—but also because what does get counted as unhealthy eating is influenced by classism and racism. The "unhealthy eater" label, and its harms to agency, are therefore more likely to stick to some people than others and may reinforce patterns of oppression. In some cases, interactions between the control narrative and other common narratives can make the label particularly sticky and difficult to challenge. To illustrate this point, I draw out the ways that fat people are especially vulnerable to this identification and the damage it can do.[2]

In my view, the agency-related harms produced by the control narrative, and the pronounced way in which it affects vulnerable populations, present powerful reasons to reject that narrative. In the next sections of the paper I consider possible "counterstories" about unhealthy eating, alternative narratives that might be less damaging to agency than the control narrative and could be productively deployed

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[2] I am using "fat" as a neutral descriptor here, following scholars in fat studies and other fields who wish to avoid inherently pathologizing terms like "obesity."

as a form of moral repair (Lindemann Nelson 2001b). I begin with two alternative accounts of the eater *qua* agent and suggest that while these accounts offer some benefits, insofar as they maintain the assumption that health should be the ultimate aim of eating, they remain damaging in significant ways. In the final section, I suggest that a situationist account of the eater combined with values-pluralism, a position that rejects the assumption that eating should be for the sake of health, produces a promising counterstory in several respects. However, this narrative too is limited, and may be particularly unhelpful when it comes to repairing damage done to the agency of fat people, who are particularly vulnerable to the harms of the control narrative. This demonstrates some of the challenges of deploying counterstories as a means for moral repair, and the necessity of taking an intersectional approach to such projects.

In addition to contributing to the growing literature critiquing healthism (e.g., Welsh 2011; Cheek 2008; Turrini 2015; Metzl and Kirkland 2010; Van Dyke 2018), this paper aims to illustrate some of the complex ways that healthism about eating affects agency. Common bioethical debates about eating focus on the ways healthist policies and interventions may impinge upon the exercise of agency through limiting food choice. While I agree with Anne Barnhill and colleagues (2014) that the scope of these debates should extend far beyond concerns with individual agency, this paper shows that healthism can damage agency in more insidious ways than are often acknowledged. This paper also emphasizes the ethical importance of the ways we think about and discuss eating and eaters. Narratives about eating and eaters, including the stories we tell about eating agency itself, are more than just descriptive: they can shape and even damage agency. As participants in conversations about eating and eaters, and particularly as feminist philosophers and bioethicists working on eating, we should take account of the ethical effects of our views and assumptions about how eaters eat and what kinds of people those eaters are.

**The Control Narrative**

A common assumption behind a good deal of media, "common sense," policy, and health research and writing is that individuals are in control of and personally responsible for their eating (Saguy 2012; Kukla 2018; Coveney 2006; Crawford 1994; Brownell et al. 2010; Schwartzman 2015). This presupposes a certain model of the eater, an eater who makes food choices based on the information she has and her goals, values, and desires. I call this the "control model" of the eater. This eater "receives advice about what to eat (a diet plan) or it gathers information (for instance, about calories) that will allow it to make its own plans. In addition, it must somehow muster the motivation to act on these plans" (Vogel and Mol 2014, 308). Motivation most readily comes from desire. But when the eater's desires do

not lead her in the direction of her goals, she must use willpower and self-restraint to act rationally, that is, in the service of her own goals.

A variety of factors, including advertising, social pressure, and desires, can undermine the eater's self-control and her ability to eat rationally, but it is ultimately her own responsibility to minimize the impact of these bad influences on her behavior. Her ability to secure and maintain self-control in the face of "temptation" is taken to reveal good character, especially strength of will. As Rebecca Kukla explains, "Good people with the right character make good [food] choices. Any other determinants of eating are marginal pressures that can be overcome by sufficiently virtuous eaters" (Kukla 2018, 595). Eating well—which, within healthist contexts means eating healthily—signals self-mastery, a characteristic assumed to be central not only to moral worth (Gilson 2015, 30) but also civic responsibility (Crawford 1994).

Because the eater is ultimately in control of her eating, or at least *should* be, she is responsible for its consequences. Indeed, it is part of the control model that the eater is in some way responsible for her ability to act autonomously. You need to take responsibility for yourself, and if you are unable to do that on your own, then you need to seek out and accept help. This enables the moralization of both eating and, in healthist contexts, health. Bad health (and being fat, a common proxy for bad health) is blameworthy because it is the result of one's poor agency, as revealed by bad eating. And this is, or should be, under your control.

When the control model of the eater is combined with healthism about eating, it produces what I call the "control narrative" about unhealthy eaters. To be clear, healthism in general is a paradigm made up of two key components: first, the assumption that health is a "monolithic, universal good" (Metzl 2010, 9), and second, that individuals should be "actively engaged" in promoting their own health (Turrini 2015, 18; Cheek 2008). As Talia Welsh (2011) explains it, the central way for individuals to actively engage involves directing their "modifiable behaviors" toward health. Along with bodily movement or exercise, eating is one of our central "modifiable behaviors." Healthism about eating, then, is the assumption that individuals should eat for the sake of health, above all else, and that eaters have a responsibility to make this happen. Good eating is eating for health, and good eaters eat healthily.

When this assumption is combined with the control model of the eater, it produces a narrative by which anyone who fails to eat healthily is either ignorant, misinformed, weak-willed, "mindless," or pathological. Perhaps the unhealthy eater is confused about whether butter or margarine is healthier, or if red wine is good for her. She may have undeniable cravings for cheese fries, or her willpower may fail in the face of the office bowl of candy. She might mindlessly snack on entire bags of chips while binge-watching TV, failing to make any conscious choice at all. She might

also be pathological—addicted to food, or living with an eating disorder—in which case her eating agency is deeply compromised, or perhaps (temporarily?) nonexistent. In any case, when an eater doesn't eat in accordance with her own goals (health), it must be because she doesn't have, or isn't using, what good agency requires: adequate knowledge, adequate willpower or self-control, or adequate intention and awareness.

In short, the control narrative characterizes unhealthy eaters as failed or flawed agents. Unhealthy eating is a sign that something has gone wrong with the eater's agency, and that she needs help. She should either help herself or acknowledge and welcome help from someone else. Unlike narratives about eaters that connect ways of eating with personal commitments, social roles, or values (for example, "real men" eat meat, animal rights activists do not), this narrative posits that unhealthy eaters are not positively expressing their identities through eating. Rather, unhealthy eating is an expression of *the eater's inability or failure to express herself through eating*.[3] Unhealthy eating represents a failure or flaw that prevents the eater's true self from shining through. To repair this, an unhealthy eater needs to educate herself, "pull up her socks," pay closer attention to eating well, or admit she needs professional help to regain or repair her eating agency, and perhaps submit to paternalistic measures to force her to eat well.[4]

**Damaged Identities, Identity Damage**

I contend that the control narrative about unhealthy eaters can do significant damage to the agency of those taken to be unhealthy eaters. This is because, as Hilde Lindemann argues, agency is shaped by identity, and identity is constructed, at least in part, through narratives. According to Lindemann, social narratives about what it means to be this or that sort of person, what such persons typically do, and how those persons should be treated, play an important role in constructing identities. And a person's identity—roughly, the kind of person she takes herself to be and others take her to be—has a significant impact on her agency. As Lindemann characterizes it, agency is centered in "capacities, competencies, and intentions that

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[3] Someone could say that this eating *is* revealing oneself, and that self is a flawed agent. But given the general societal narrative that we have "true" inner selves that need to be realized or achieved through self-control and work (Heyes 2007), I do not think we generally regard being a flawed or failed agent as one's true self.

[4] Note that my argument discusses the control model *qua* narrative and does not explicitly consider its accuracy as ways of describing the world. How accurate or true an account is (however one defines truth) is something that lends a narrative power, but it is not the only thing relevant to a narrative's success. For the purposes of my argument here, I remain agnostic about which account of eating agency is true.

lie within the individual" (Lindemann Nelson 2001b, 51), but the exercise and development of these capacities, competencies, and intentions is shaped by what the agent thinks is appropriate, expected, or available to her as a certain "kind" of person, how others expect and allow her to act, and how they understand her actions. And all of this is informed by social narratives.

But there isn't simply a top-down identity to agency relation of influence; identity and agency interact in more of a loop. Agents "assess the accuracy" of their self-conceptions in light of their actions (Lindemann 2014, 6) and may adjust their self-identifications accordingly. Likewise, others may "confer" an identity on an agent because of how she acts or "de-confer" an identity that she previously held because her actions do not line up with that identity. These self-identifications and conferrals inform the agent's actions and intentions, capacities, and competencies. In this way, identity and agency, informed by social narratives linking identities with actions, shape each other.

Many social narratives link different ways of eating to different kinds of people. Anthropologists, sociologists, and food studies scholars have done a great deal of work cataloguing and interpreting the many ways food and eating are connected to racial, gender, ethnic, class, and other social identities. For example, for many white people, eating so called "ethnic" foods is a way to show adventurousness or cosmopolitanism (Heldke 2003). And in many communities, if you are a "real man" you eat a lot of red meat and not a lot of vegetables (Rothgerber 2013; Ruby and Heine 2011) or "rabbit food" (as my uncle calls them). Who we understand ourselves to be, and who others understand us to be, affects how and what we eat; how and what we eat, in turn, influences who we understand ourselves to be and who others understand us to be.

According to this account, identity shapes agency through social narratives. I have suggested that social narratives about eaters, including about what eating agency is like, are part of what constructs an identity. But identities can shape agency in more and less enabling ways. Lindemann introduces the idea of a "damaged identity" as an identity composed of social narratives that "constrict" or "diminish" agency (Lindemann Nelson 2001b, 45). A damaged identity blocks recognition of someone as having full moral standing, as being worthy of respect as an agent, and so blocks possibilities for action and interaction that depend on that standing (Lindemann Nelson 2001a, xii).

For example, "woman" is a damaged identity in societies where social narratives about women's hysterical natures lead people to take women as less than fully rational agents. These narratives enable people to dismiss women's actions as irrational and women's statements as the incoherent or inconsequential ramblings of someone overtaken by hormones. When we think of women this way we tend not to trust them with certain socially valuable and important roles, such as being

the president of the United States. Even more perniciously, these narratives may lead women to think of themselves, *qua* women, as unreliable or incompetent agents, and therefore the possibility of, for example, being a politician, is closed off to them "from the inside."[5] In this way, a damaged identity can limit what actions are available to you, which capacities you develop, how others take up your actions and what they allow you to do—which affects what you can accomplish—and what you even consider possible for you and others like you.

One problem with the language of "damaged identity" is that it suggests that there are undamaged identities which enable the free exercise of agency (cf. Lindemann Nelson 2001b, 45). If so, our aim should be to ensure that everyone has one of those. But all identities constrict and constrain agency in certain ways, even when those identities are relatively privileged—consider everything that narratives about "real men" constrain people from doing. Even generous narratives push us toward some actions more than others; indeed, this is one of the ways that identities enable agency, by making certain actions, capacities, and goals seem well within our grasp. But this effectively closes off, or at least makes less attractive and likely, certain other intentions, actions, projects, and the development of certain capacities.[6]

Recognizing this, the interesting ethical question is not which identities are damaged and which are not, but in what ways a given identity—constituted as it is from social narratives—constrains and constricts agency, and to what degree? How sticky or stubborn and narrow or wide are these constraints? How difficult is it to challenge the narratives that construct this identity? Focusing on these questions would lead us to work to identify the specific ways that identities place significant, narrow, stubborn, and recalcitrant constraints on agency, rather than looking for damaged identities in general. This is the task I take up in the next section by identifying four different types of damage that are produced and enabled by the control narrative about unhealthy eaters.

**Four Types of Identity Damage**

In contexts dominated by the control narrative, unhealthy eaters may be treated as incompetent eaters. An unhealthy eater may not be trusted to make eating decisions for herself. Others may try to paternalistically control her eating, for

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[5] Sandra Bartky's canonical work on psychological oppression offers us one way of fleshing out the idea that possibilities get closed off "from the inside" (1990).
[6] Alisa Bierria (2014) also criticizes this tendency to conceptualize agency as either there or not there, damaged or undamaged. She recommends thinking of different *types* of agency, some of which may be available to an individual and some of which may not.

example, by restricting what she buys, watching her when she eats, or requiring her to report her eating to them. This surveillance and control can prevent people from eating what they desire, exploring new cuisines, acquiring the skills and knowledge necessary to select and prepare foods, cultivating and pursuing certain eating pleasures (Welsh 2011; Schwartzman 2015), and gaining the sorts of social goods that come along with sharing meals with each other. Lindemann calls this type of constriction of agency "deprivation of opportunity" (Lindemann Nelson 2001b, 51). While in many contexts it is difficult to fully control others' eating, those whose food is prepared or provided by others—like children, teens, people in institutions (schools, prisons, nursing homes), and people with certain disabilities (Williams-Forson and Wilkerson 2011)—are particularly vulnerable to this type of constraint.

The more that someone identified as an unhealthy eater is treated as incompetent, especially by people in positions of power and authority, the more likely she is to internalize that narrative, leading to "infiltrated consciousness" (Lindemann Nelson 2001b, 51). She may come to believe that her eating is out of control and that she is unable to make herself eat appropriately. She might, in other words, "lose confidence in [her] worthiness to be the author of [her] own conduct" (Lindemann 2001b, 56), vis-à-vis eating. This self-understanding, caused, in part, by the way others perceive and treat her, ends up justifying the limits, constraints, and controls that others place on her. It can make an eater vulnerable to those who offer to control her eating for her, and to the exploitative and often dangerous diet industry which will sell her the technologies and tools she "needs" in order to eat in an acceptable way.

Someone might object here that surely some people who eat unhealthily are *in fact* flawed, failed, or non-agents. Many people have had the experience of wanting to eat more healthily, setting that as a goal, and failing. This could be legitimately attributed to a lack of willpower, ignorance, or some other failure linked to agency. Recognizing that one's eating agency is limited or flawed and admitting the need for help may thus be a positive and necessary step. In some cases, being treated paternalistically may be appropriate and should not be understood as damage to agency, but as a way of helping someone achieve their ends.[7]

To be sure, this may sometimes be the case. Some people are indeed ignorant about which ways of eating would help them achieve their eating goals (whether they want to eat more healthily or something else) and could use some

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[7] A version of this argument is put forward in Sarah Conly's (2014) work, where she argues that paternalistic food policy and interventions actually help people be *more* autonomous, because as the flawed sorts of agents we are, we are often unable to actually achieve the goals and ends we set for ourselves (i.e., eating healthily) without such interventions.

education, while others may benefit from more self-awareness and self-control. Certain eating disorders may undermine the agency of eaters in ways that can be fatal (and certain ways of eating may be fully agential but still harmful), which could justify paternalistic intervention as well as a self-conception as someone who needs such help. In such cases, self-understandings and paternalistic interventions may not be properly characterized as agency damage at all.

But even if there are such cases, the problem is that the control narrative characterizes unhealthy eating *in general* as a sign of flawed, failed, or non-agency. It leaves very little space for unhealthy eating to mean anything else. This should make us nervous. For one, precisely what counts as healthy eating is not always clear. Given ambiguities in the concept of health (Van Dyke 2018), and financial incentives for corporations and producers to have their diet or food product appear healthy, it may not be surprising that wildly different and sometimes incompatible ways of eating are lauded as healthy. Healthy eating could mean counting calories, eating organic, following a Mediterranean diet, avoiding GMOs, or partaking in foods that "flush out" fat or "detox" your organs (Klein and Kiat 2015; Mohammadi 2014; Zeratsky 2015).

Even when the definition of healthy eating is narrowly circumscribed, uncertainty about what foods or diets meet its criteria persists. One dominant understanding of healthy eating is as nutritious eating: eating in accordance with nutritional guidelines and recommendations for certain amounts of vitamins, macronutrients (protein, carbs, fats), or calories (Scrinis 2013). Despite the fact that certain claims about nutritious eating (e.g., fruit and veggies are good: eat a lot of them) have remained constant for decades (Nestle 2013), there is a widespread perception that nutritionists' knowledge about what is healthy is in constant flux. We are told margarine is healthier than butter, then the opposite is true; red wine and chocolate are bad for you one day, then they are full of cancer-fighting antioxidants; carbohydrates are an essential part of a daily diet, but then they are accused of contributing to the so-called obesity crisis. This produces uncertainty (as well as anxiety) about what counts as healthy eating, which—as Marion Nestle argues—is encouraged by and benefits certain food corporations, producers, and lobbyists (Nestle 2013). These ambiguities and uncertainties about what counts as healthy eating raise the possibility that some people who are taken to be unhealthy eaters might not be so in any meaningful sense.[8]

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[8] To be clear, what matters here is what gets perceived as healthy and unhealthy eating, which may be related but is not identical to what *should* count as healthy and unhealthy eating. For the purposes of this paper, this is because what matters is who gets perceived as an unhealthy eater and treated as such, not who is "really" an unhealthy eater.

In addition, what gets counted as healthy food and eating is often inflected by race and class prejudice. For instance, fresh, local, organic vegetables are often held up as exemplars of healthy foods, while more affordable options like frozen or canned vegetables are ignored (Kirkland 2011, 474; Guthman 2008). White bread is derided as unhealthy, but baguettes are not subject to the same condemnation (Kirkland 2011, 474). Milk and other dairy products are promoted as an essential part of a healthy diet by the US and Canadian governments, though many Latinx and people of African heritage—indeed, most people whose heritage is not northern European—lose the ability to process dairy in adolescence (Freeman 2013).[9] This means that in some cases, people may be perceived as unhealthy eaters, and even understand themselves as such, because of prejudice rather than any legitimate criteria for determining the healthfulness of a diet.

In addition to these concerns about false positives, we might also worry that some unhealthy eating is not accurately explained as a failure of agency. Perhaps someone eats unhealthily, but is doing their best in a food context shaped by poverty and systemic racism. In that case, the unhealthy eating reflects a bad environment, not a bad agent. Blaming the unhealthy eating on the agent's failures rather than the oppressive environment individualizes systemic problems in a way that can re-entrench those problems and make them all but impossible to adequately address (Reiheld 2015). Another possibility is that someone who eats unhealthily simply does not prioritize health in their eating. We eat for many different reasons, not just health, and we might reject the assumption that health should be prioritized over other values. I will return to these alternative explanations for unhealthy eating shortly. For now, the key point is that it is not obvious that eating unhealthily is incompatible with good agency, but this is precisely what the control narrative suggests.

The possibility that someone could be incorrectly identified as an unhealthy eater, or that unhealthy eaters could be incorrectly identified as flawed or failed agents, is important because infiltrated consciousness and deprivation of opportunity can affect anyone identified as an unhealthy eater, regardless of their actual status as an agent, and regardless of whether they eat unhealthily in any

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[9] Nailing down accurate definitions of "healthy" and "unhealthy" eating, and figuring out whether and how these concepts might rid themselves of racism, classism, and other forms of prejudice, is outside the scope of this paper. It seems a worthwhile project to identify and articulate concepts of health that might be less problematic than others, but that is not my project here. What I am interested in are the consequences of dominant narratives about unhealthy eating (that is, what generally gets counted as such) and the "kind" of people these narratives describe and, in part, produce.

meaningful sense of the term. Deprivation of opportunity depends only on *others* taking me to be an unhealthy eater and therefore an incompetent agent in need of help. But, as I have suggested, others could get it wrong. My unhealthy eating may be fully informed, intentional, and in service of my values and goals, or I may not eat unhealthily at all, even by mainstream standards. Nonetheless, as Lindemann writes: "We will be treated according to who we seem to be, even if that's not who we are" (2014, 82). And if others regularly treat me as an incompetent agent, even if I am not, I may come to believe that I am. And thus, my agency may be damaged.

The possibility of a mismatch between the way people perceive you and the way you are brings us to the third and fourth categories of identity damage caused by the control narrative about unhealthy eaters. According to Alisa Bierria (2014), an important part of agency is having our actions make sense to others. Most of the time, we want our intentions, as expressed by our actions, to be clear to those around us. But what my actions *mean* in social space—and so, what my actions *are*—is partially determined by others. I don't have sole authorship of them; others play an irreducible role in their authoring. As Bierria explains, "Even if an agent develops her intentions and acts accordingly, others who observe the agent's action also construct narratives of meaning about her actions, empowering them as *social* authors of her autonomous action" (2014, 131).

This process of social authoring doesn't always go smoothly. The way my actions are understood by others (or *if* they are understood at all) depends on what interpretive resources observers have available to them. When these resources are dominated by incomplete, prejudiced, or misleading narratives about a certain "kind" of actor or action, they can systematically distort the way observers understand actors' intentions and actions. Bierria gives the example of the way stereotypes and prejudices about black criminality in the United States systematically distort interpretation of black people's actions (2014, 131). She explains that white people taking food from stores after Hurricane Katrina were described by media as "finding" food, while a black person doing the same thing was labelled a "looter" (Bierria 2014, 132). This characterization of the black person's actions is informed by racist social narratives, which enabled the media to project "phantom intentions" of criminality onto the black person in question. Through the social authorship of action, she may end up "acting" in ways she never meant to act—that is, what she does, as it is understood in social space, is made criminal— and what she actually meant to do and understood herself as doing, like finding food to survive, is erased (Bierria 2014, 133).

In a similar way, the control narrative can distort how observers interpret the eating of those identified as unhealthy eaters. This eating is viewed as a sign that the eater's agency is flawed or nonexistent, rather than as a reflection of her identity, values, preferences, and the like. Because the categories of "healthy" and

"unhealthy" eating can be understood as superseding all other categorizations and characterizations of eating, they have the power to undermine all other interpretations of that eating. But, again, if we may eat unhealthily in an agential way, or what gets counted as unhealthy eating is a result of uncertainty or prejudice, this is a problem. It means that the categorization of eating as unhealthy may distort the eater's action, and thus the further characterization of that eating as a sign of troubled agency is also a distortion. This is the third way that the control narrative constricts agency: it can distort unhealthy eaters' attempts to eat as they intend or to have their eating mean what they want it to. Unhealthy eaters' intentions and their own understandings of their actions are displaced or erased, and their eating is reconstructed into evidence of failed, flawed, or non-agency (Bierria 2014, 134).

The fourth form of damage to agency arises from the deeply intertwined relationship between agency and identity. Recall that others confer identities on us in virtue of our actions, including our eating. But if you continually fail to take my eating as I mean it, then you will not take it to reflect the identities I am attempting to live out through my eating, and will not confer them on me. I will be unable, in a significant sense, not only to act in the way I intend but to be who I am trying to be. It is true that we can take on identities first-personally, by self-identifying in ways that others don't acknowledge. But identities also have a third-personal component; they require social recognition (Lindemann 2014, 4). Without this recognition, our ability to inhabit or at least maintain most identities is limited.

By distorting interpretations of eating, the control narrative can obstruct unhealthy eaters from taking on certain identities. But deprivation of opportunity and infiltrated consciousness can also obstruct identities. Depriving eaters of opportunities to eat can literally prevent them from eating in ways that would enable them to inhabit, or be recognized as inhabiting, certain identities. And infiltrated consciousness can take the possibility of certain actions, and therefore certain identities, off the table "from the inside."

As mentioned earlier, there are many different racial, gender, ethnic, and other sorts of identities linked to ways of eating. Those identified as unhealthy eaters could be precluded from inhabiting these identities if the eating associated with the identity is blocked, precluded, or interpreted as a sign of failed, flawed, or non-agency rather than the identity in question. But the central identity obstructed by the control narrative is "healthy eater." Being a healthy eater is associated with being a responsible citizen and a good person overall, not to mention a good agent (Coveney 2006; Crawford 1994; Kukla 2018). By blocking this identity, and thereby these associations, the control narrative deeply constrains the agency of those identified as unhealthy eaters. This can affect an eater's actions, intentions, and the cultivation of her capacities in many areas of life, not just with regard to eating. This

might be one of the most significant ways that the control narrative about unhealthy eaters can damage agency.

**Who Is an Unhealthy Eater?**

Anyone identified as an unhealthy eater may have their agency damaged by the control narrative. However, because what gets counted as health and healthy behaviour is not only uncertain but inflected with classism and racism, some people are more likely to be identified as unhealthy eaters than others, and the label may stick to different people in more and less restrictive ways. In addition, the effects of the control narrative can be modulated by interactions with other social narratives. For example, the label may be less likely to stick to men than women because of stereotypes associating masculinity with indifference, and even antagonism, toward health (Springer and Mouzon 2011; Courtenay 2000). If men eat unhealthily, their eating may be understood as expressive of their masculinity, rather than reflective of their damaged agency. At the very least, this narrative opens up space to reinterpret men's eating so that it is not automatically or permanently understood as a failure of agency. Women, however, are often expected to be responsible not only for their own eating and health but for the eating and health of their families (Reiheld 2015). The label of unhealthy eater may not only be more likely to stick to women than men, but a woman may be subject to the assumption that she is a flawed or failed agent because of the way her family eats, not just because of her own eating.

I suggest that "unhealthy eater" sticks to and affects fat people in particularly stubborn ways. Despite the fact that the connection between eating and body size is deeply complex (Bombak 2014; Campos et al. 2006), it is widely assumed that a fat body is the result of unhealthy eating. This assumption appears in almost all the academic and mainstream literature on fat, whether the authors think that unhealthy eating is caused by lack of willpower, ignorance, the eater's proximity to convenience stores and fast food outlets, or their failure to read the latest diet book.[10] While these authors may come to different conclusions about what ultimately explains unhealthy eating, they share the common and pervasive assumption that a fat body is almost always caused by unhealthy eating. Given this narrative, it is highly likely that a fat person will be taken as an unhealthy eater,

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[10] As Alison Reiheld writes, "With rare exceptions, to discuss obesity as it has been framed [by the medical establishment] is to discuss a disease that is related to food. Here . . . the old saying applies: it is the exceptions that prove the rule" (2015, 231). Some exceptions include most work in the field of fat studies, Julie Guthman's work on toxins as possible contributors to "obesity" (2013), and folks working in the Health at Every Size movement (Bacon 2010).

*regardless of her actual eating practices*. Whether the person eats healthily or not, others will confer on her the identity of unhealthy eater simply because of the size of her body.

Moreover, because the association of fat bodies with unhealthy eating is so pervasive, and alternative explanations for fatness are so rarely considered, attempts to correct this conferral are likely futile. When there is a misreading of an agent's intention, reparative strategies can often be used to reauthor the action in a more accurate way (Bierria 2014). For example, say I hand you a book, and you think I have given it to you to read. You say, "I don't want this book," but I just want you to hold it so I can answer my phone. To correct this misreading, I can explain my intentions to you, a third party can explain it to you ("she just needs to answer her phone"), or you may be prompted to use your imagination and rethink what I am doing, perhaps when I meet your comment with a blank stare and proceed to answer my phone.

These methods could be used to correct misreadings of "unhealthy eating" ("I don't usually eat entire pies in one sitting, but today is March 14, Pi day!"). But when there are systematic misinterpretations of the actions of those Bierria calls "disenfranchised agents" due to widespread prejudice, these agents often do not have recourse to reparative strategies (Bierria 2014, 132). Attempts by the actor to explain or prompt reinterpretation might be preempted, ignored, or dismissed as lies. Others are unlikely to step in and explain, since they are likely drawing from the same set of prejudiced narratives. In such cases, the interpreter is unlikely to see a need for reinterpretation, even if the actor or a third party does protest.

This is often the case with fat people's eating. There is widespread cultural and institutional enforcement of the idea that fat people get fat because they eat unhealthily. It is simply "common sense," backed up by government and medical institutions (not to mention media and diet companies), that fat people get fat by eating poorly.[11] As Samantha Murray writes: "We exist in a culture of a negative collective 'knowingness' about fatness. . . . We presume we know the histories of all

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[11] Empirical research catalogs some of these "common sense" beliefs, many of which pertain to perceived flaws in fat people's agency. Review articles looking at prejudice and discrimination against fat people found widespread perceptions of fat people as lacking in self-discipline, and that medical professionals found "obese" people to be noncompliant, "indulgent," and lacking "willpower" (Puhl and Brownell 2001; Puhl and Heuer 2009). Studies have shown that educating people about the complex causes of fatness can reduce "obesity bias" (Pearl and Lebowitz 2014; Hilbert 2016), while educating people about alleged "controllable" contributors to fatness has been found to increase it (Teachman et al. 2003).

fat bodies, particularly those of fat women; we believe we know their desires (which must be out of control) and their will (which must be weak)" (2005, 154).

Because alternative explanations of fatness are few and far between, many observers cannot draw on them to inform their interpretations or produce the "productive self-doubt" (Bierria 2014, 132) that would prompt reinterpretation. Instead, when alternative explanations are raised, they are likely to be characterized as excuses rather than legitimate explanations, undercutting their power to force or inform reinterpretation. The hegemony of the "unhealthy eating causes fat" narrative means that when the testimony of fat people about their own eating does not concur with that narrative, it is dismissed as obviously false or deluded. [12] As the blogger "Your Fat Friend" writes:

> Being called a liar—openly—has become a regular feature of my life as a fat person. Any answer I offer about my body, the food I eat, the way I feel, or the regularity with which I move is answered with a dismissal. . . . These questions—about diet, exercise, worth and will—have no answers that will satisfy their askers. My words have already been betrayed by the believed brokenness of my body. . . . There is nothing I can say to counter the assumptions attached to my wide, soft frame. (Your Fat Friend 2017).

And even when well-established medical authority provides an alternative explanation that *will* be accepted within the control narrative—say the fatness is understood to be out of the person's control because of a thyroid condition, and she is seeing a doctor about it—the presumption that the individual is fat because she eats too much will need to be cancelled out again and again *and again*.

For these reasons, fat people as a group are particularly likely to be identified as unhealthy eaters and subjected to the forms of damaged agency that I have described. To be clear, this is not to say that fat people do not have agency at all, or that their agency is necessarily damaged. Rather, the combination of the control narrative about unhealthy eaters and the assumed link between fatness and unhealthy eating makes fat people particularly susceptible to the damage that may accompany being labeled as an unhealthy eater and leaves them with few effective means of avoiding those harms.

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[12] Ragen Chastain (2011) calls this phenomenon the "but but but syndrome." Assumptions about fat people's eating, exercise behaviors, or health status may be challenged with evidence (such as testimony, athletic achievements, or medical test results) but this evidence is discounted or rejected because it doesn't fit the assumptions.

This situation may contribute to and reinforce the oppression that fat people experience in North American society (Eller 2014; Farrell 2011).[13] It may also compound other forms of oppression and inequality. Fat people are a diverse group, and interactions between the control narrative, the "fat is caused by unhealthy eating" narrative, and narratives about race, gender, class, ethnicity, ability, and the like may amplify damaging effects on agency. For example, sexist narratives about women as emotional, irrational, and lacking in self-control, and sexist and racist narratives about black women as irresponsible (Collins 2000), may reinforce interpretations of women's apparent unhealthy eating as failures of agency. This may make it even more difficult for fat women, and fat black women in particular, to shake off the unhealthy eater label or force reinterpretations of their eating, even if there are alternative interpretations available. As we will discuss shortly, such interactions between narratives not only make some people particularly vulnerable to the damaging effects of the control narrative but present challenges for projects of moral repair.

**Counterstories: Alternative Models of the Eater**

I have argued that the control narrative about unhealthy eaters can damage agency by informing how others identify, perceive, and treat unhealthy eaters, and how these individuals understand themselves. In my view, these damaging effects

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[13] It should be noted while being fat might make you particularly vulnerable to the harms associated with being identified as an "unhealthy eater," given the racism and classism involved in identifying health and healthy eating, being "thin" does not in itself get you off the hook. Being thin does, for some people, offer protection from identification as an unhealthy eater. Thin people may be better able to force reinterpretation of their unhealthy eating, or that eating may be taken as a momentary lapse in agency, rather than a chronic condition. As Julie Guthman writes in her discussion of Kathleen LeBesco's work, "Fat people are imbued with little subjectivity no matter what they do, while thin people are imbued with heightened subjectivity no matter what *they* do" (Guthman 2007, 78). Though I have not found any research on the subject, I suspect that class and race come into play with who gets off the hook here; for instance, low-income white folks may be less likely to be seen as healthy eaters no matter how "normal" their BMI. Their thinness may be attributed to smoking or drug use rather than good eating practices, regardless of their actual engagement in any of those activities. Also, if those promoting the idea of "skinny fat" (Castañon 2016) or "normal-weight central obesity" (Sahakyan et al. 2015) get their way, the assumption that thinness equals health will be broken (while, at the same time, the link between fat and ill-health is reinforced).

and the pronounced way in which they affect vulnerable populations, like fat people, present powerful reasons to reject the control narrative. This is not to suggest that such effects should be our *only* consideration when deciding between accounts of eating agency or of what counts as good eating, just that they should be included. In any case, there are other good reasons to abandon the control narrative. For example, feminists have criticized the dualism and antagonism toward the body inherent in the control model (Bordo 2003, 144–146), and the way it undervalues or completely ignores how relationships and context shape, constrain, and enable agency (Mackenzie and Stoljar 2000; Reiheld 2015; Gilson 2015). Food and health scholars have also criticized the control model because it is apparently unable to produce effective eating interventions and fails to adequately explain the apparently massive shifts in eating habits over recent decades in the US (Brownell et al. 2010).

In light of these issues, alternative accounts of the eater have begun to gain traction in eating and health research and in the media. These accounts might be useful as "counterstories," narratives that challenge and potentially replace dominant, damaging narratives (Lindemann Nelson 2001b, 45). Since there is no such thing as an undamaged identity, we are not seeking narratives that do not constrain or constrict agency in any way. Rather, we want a counterstory that is, at least, *less* damaging than the dominant narrative and, ideally, more enabling than constrictive. To this end, I now consider two alternative accounts of the eater and the effects of their characterizations of unhealthy eaters on agency.

**The Environmental Model**

In response to the failures of traditional approaches to solving the "obesity crisis" (Hill and Peters 1998; Egger and Swinburn 1997), an environmental model of eating agency was developed in the 1990s. It has since become popular among some public health researchers as a corrective to the nearly exclusive focus on individual-level factors as determining eating (and other) behaviour (Brug et al. 2008; Larson and Story 2009; Glanz and Mullis 1988). Broadly speaking, the environmental model draws attention to features of the environment that influence what are considered the two main areas of behaviour contributing to fatness: eating (energy input) and exercise (energy output).[14] These environmental features include food policy and regulations, subsidies, the types of stores and restaurants near one's school, work, or home, one's income, cultural norms, and family traditions.

While the control model allows that the environment can influence eating (framing it as something that a virtuous eater will overcome, if need be), the

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[14] This presumes an "energy-balance model" of obesity. Guthman questions the validity of this model (2013), but it is widely taken for granted.

environmental model emphasizes that environmental influences can preclude or compromise individual control over eating. Proponents of the environmental model argue that contemporary environments—often called "obesogenic" or "toxic" environments (Brownell and Horgen 2004, 7)—undermine our ability to exercise our eating agency. These environments are broadly characterized as abundant in easily accessible, tasty, inexpensive, intensely marketed, "energy-dense," but innutritious foods, and a variety of social and cultural forces that encourage or at least fail to discourage regular consumption of large portions of these foods.

There are two key ways that contemporary environments compromise eating agency. First, they limit which foods are available for people to choose from. In "food deserts"—residential areas where healthy items are not readily available or affordable and fast foods and convenience foods are—choosing healthy foods is practically and economically difficult because they simply aren't *there* to choose from.[15] Second, the environment "hijacks" human biology and physiology (Brownell et al. 2010, 381–382). The story here is that humans evolved to survive in conditions of scarcity, which means that we are predisposed to eat large amounts of energy-dense foods when they are available and to store this energy in the form of fat (Brownell and Horgen 2004, 25). In the toxic contemporary environment, energy-dense foods are plentiful and constantly available, and we rarely encounter periods of scarcity. Since our biology "naturally" makes it nearly impossible for us to resist these ubiquitous sweets and "junk food" (Contento et al. 2007, 180), it is no surprise that we eat so much of it. In addition to the omnipresence of palatable innutritious foods that satisfy our "innate biological predispositions" (Contento et al. 2007, 180), certain forms of marketing may also bypass our agency and "tap directly" into our bodies (Brownell et al. 2010, 385).

While it seems logically possible to conceive of an environmental account of eating agency that does not make healthist assumptions about eating, the environmental model was developed and continues to be widely promoted and deployed within a healthist framework. A healthist environmental narrative about unhealthy eating attributes that eating to an unfortunate combination of practical limitations, our natural predilection for certain foods, and the toxic environment. One important implication of this narrative is that unhealthy eaters should not be *blamed* for their poor eating. *Personal* responsibility is (at least ostensibly) not the focus. Rather, it is the environment that is primarily to blame, and it is the task of

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[15] "Food desert" is defined differently by different researchers (Walker, Keane, and Burke 2010). It generally refers to neighbourhoods with fewer supermarkets, which are assumed to have a better selection of healthy foods at reasonable prices, and more fast food outlets and/or convenience stores.

governments, corporations, public health organizations, and other collective bodies to alter that environment so people will eat better.[16]

One benefit of shifting responsibility away from the individual is that it undermines the moralization of unhealthy eating. Given that many of the targets of "antiobesity" programs are low-income women of color (Guthman 2013, 143), some feminists and antiracists have found this feature particularly appealing (Yancey, Leslie, and Abel 2006). In terms of agency, shifting responsibility to the environment interrupts the association between being an unhealthy eater and being a flawed or failed agent. Instead, it makes unhealthy eating not really agential at all.

That said, personal responsibility for eating is not entirely absent from this account. Feminist critics have argued that it shows up in implicit explanations of how some people manage to eat well despite living in toxic environments (Guthman 2007; Kirkland 2011). If we assume that obesogenic environments are ubiquitous, healthy eaters in such environments must be good agents, able to fend off the encroachment of the environment, while unhealthy eaters cannot. As Guthman writes: "If junk food is everywhere and people are all naturally drawn to it, those who resist it must have heightened powers" (2007, 78). This is troubling since most of those assumed to eat unhealthily are members of low-income minority populations. We thus end up with a narrative in which wealthier, thinner, white people have good eating agency while poorer people of colour do not have eating agency at all: "Members of one group move powerfully through the world determining their body sizes and health statuses; others are pitiably stuck within and determined by the environment" (Kirkland 2011, 467–477).

Alternatively, if we suppose that only certain environments, such as food deserts, are toxic, then only those living in those environments are precluded from exercising their eating agency. But food deserts are generally understood to be low-income areas, so this produces a similar story about agency. Poor people's eating agency is negated by their environment, while wealthy people, living in nontoxic (clean?) environments, can exercise their eating agency unimpeded by environmental factors.[17]

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[16] Personal responsibility for eating is simply postponed, not eliminated entirely. The promise is that without the corrupting influence of an obesogenic environment, people will be better able to exercise their eating agency, which (given healthist assumptions) means they will eat more healthily, or at least, they will be properly personally responsible for their own unhealthy eating (Brownell et al. 2010, 383–384).

[17] It is possible that one could take an environmental model that denies anyone really has eating agency and that eating is generally determined by the environment. Perhaps those who do eat healthily despite "junk food" being

An environmental narrative about unhealthy eaters undercuts some of the damage done to agency by the control narrative. Rather than taking unhealthy eating as a sign of a flawed or failed agency, we can attribute it to the environment. But understanding unhealthy eating as something that is not agential can lead to its own forms of deprivation of opportunity and infiltrated consciousness. Given this understanding, institutions can easily justify interventions into unhealthy eaters' lives because they are clearly unable to help themselves eat better. And if I come to understand my own eating in this way, why would I bother to try to change it myself? I may therefore welcome outside interventions and paternalistic control of my eating, understanding myself to be unable to do any better. This account can also lead to distorted actions and blocked identities in much the same way as the control narrative. Others will not interpret my unhealthy eating as reflective of my identity or values. Such eating is nothing more than a product of a toxic environment. And this will prevent me from constructing an identity other than "unhealthy eater" in and through my eating.[18] In these respects, the environmental narrative about unhealthy eaters is not much better than the control narrative.

**The Situationist Model**

Another model of the eater is the "situationist model," which draws on situationist psychology and has been popularized through the work of Brian Wansink and "nudge" proponents Richard Thaler and Cass Sunstein.[19] Implicit in this work is

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"everywhere" are in different "microenvironments" than those who do not. (This explanation raises problems with defining the limits of an environment, since there will be people in the same household who, on this explanation, must live in different microenvironments). This would mean that no one is really a better eating agent than anyone else, which would undercut some of the harm. But unhealthy eaters would still be singled out for intervention because their eating is problematic; they would still need help from others, whereas healthy eaters would not.

[18] Because an environmental account is not often presented as a general theory of agency but only of eating (and exercise), this denial of agency and identity may not bleed into other areas of life. But this is a significant constriction on agency, even if confined to eating.

[19] Wansink's work has recently been criticized for a variety of significant methodological problems and self-plagiarism. This has led to the retraction of six articles in addition to multiple corrections, as of March 2018 (Lee 2018). It's not clear that this undermines the viability of the situationist model of the eater, as the retracted work was less about the model itself than about particular instances of it at work (e.g., looking at which particular environmental features had which

an account of an eater who has some control over their eating, but this control is attenuated by unavoidable openness to environmental cues and the use of nonconscious cognitive shortcuts. For example, how much we eat at a given meal is rarely determined by careful calculation or measurement. Instead, we tend to use informal consumption norms, which are influenced by a variety of factors including how many people you eat with, who those people are (e.g., strangers or friends and family), how much they eat, the size of the plate or bowl you use, and the size of the portion served (Hermans et al. 2012; Herman, Roth, and Polivy 2003). Though we may think that "internal" factors like hunger and satiety are the most important determinants of how much we eat, these factors are often overridden by the environmental cues shaping the consumption norms in a particular context. We generally do not notice the influence that these features have on our judgments about how much to eat and how much we ate (Spanos et al. 2014, 1487). For instance, in a study by Hermans and others, most of the participants claimed to have eaten an amount typical for them when the study showed that the amount they ate was altered by both portion size and how much their eating companion ate (Hermans et al. 2012, 593).

Simply *knowing* that the environment affects your behaviour in this way does little to stop it from determining the way in which you eat. Nevertheless, individuals can take steps to manipulate their environments to help them eat in accordance with their goals. Rather than insisting we just use our knowledge and willpower to overcome "temptation" and the influence of our environments, we can strategically use our openness to the environment to make ourselves eat in accordance with our values. Brian Wansink offers many tips and strategies for how to do this: use smaller plates, decide how much to eat before your meal rather than during it, keep healthy snacks like fruit visible and hide unhealthy foods in cupboards, and so on (Wansink 2004, 471–472).

This focus on the possibility of individual control distinguishes the situationist model of eaters from the environmental model.[20] Whereas the environmental model deemphasizes personal responsibility while emphasizing the need for broad, structural changes, the situationist model suggests that individuals can and should

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particular effects on eating). That said, Wansink's disgrace may undermine the narrative force of the situationist account as it is so closely associated with him.
[20] The models may be compatible (Kelly Brownell and colleagues (2010) promote both, for instance); a situationist model might be understood as a fleshing out of the ways microenvironmental features affect individuals. This would be welcome for proponents of the environmental account, given that environmental accounts are lacking in theoretical explanations of why certain features affect behaviour in the way they are assumed to do (Brug et al. 2008).

take personal responsibility for their eating—at least to a certain extent. We may not be able to block the environment from influencing us, but we can shape that environment so it influences us in ways we endorse. In this way, we are less personally responsible for eating a whole bag of chips once it is opened (consumption norms make it difficult for us to stop) and more personally responsible for failing to arrange our environment in ways conducive to good eating (i.e., not getting our hands on that bag in the first place).

The situationist model avoids the problematic suggestion that healthy eaters are superior agents with "heightened powers" while others have no eating agency at all. Instead, it requires only the claim that all humans use cognitive shortcuts. That's just how we are; it is not a feature that belongs to some and not others. Moreover, this model is optimistic about personal control; there is room for eaters to take control of their eating, just in a roundabout way. Individuals can employ a variety of tactics to modify their eating by modifying their environments, though there may be limits to what an individual can accomplish given that no one can fully control their own environment.

A situationist account does not rule out that some people may eat unhealthily due to flaws in agency, like lack of willpower or self-control. It simply offers a variety of alternative explanations. Unhealthy eating may be attributable to a lack of understanding about what needs to be done (perhaps one is stuck thinking that willpower alone will do the trick), a lack of good strategy to make the desired change, or environmental factors outside of one's control. Those who have proper strategies may have difficulties implementing them due to time, ability, or resource constraints. It may not be physically difficult for most of us to move things around in our cupboards, but if we do not have time to do it or the money to pay someone else to, it may not get done.[21] And in some cases, the changes required to eat better are outside of any individual's control, as with food deserts or even with cafeterias structured to induce overeating. Here, institutions, collectives, and others who have the power to make these broader changes will need to step in.

There are some clear benefits to the situationist narrative. For one, it offers a variety of possible explanations for unhealthy eating, opening up space for contestation and reinterpretation. While eating unhealthily could be due to lack of self-control or ignorance, it might also be due to a poorly organized kitchen, or plates that are very large. Because kitchen organization, plate size, and many of the other environmental factors that supposedly cause unhealthy eating are things eaters might change, eaters may be less likely to internalize the idea that they have no hope of controlling their own eating. Even if the changes needed are out of an

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[21] For those with certain physical disabilities or chronic pain, reorganizing the cupboards may be well out of the realm of physical possibility.

individual's reach, at least the blame can be displaced from agency and onto the environment.[22] Individuals may be better enabled to reject attempts to control their eating if they believe they can make the necessary tweaks on their own or believe that the problem is with the environment and not with themselves.

That said, a situationist narrative may helpfully widen the range of possible explanations of unhealthy eating, but insofar as it fails to challenge the assumption that eating should be for health, it maintains one crucial and harmful constraint on agency: unhealthy eating cannot show up as an expression of good agency or one's identity or values. Any account that precludes the possibility that unhealthy eating may express an individual's identity or values can lead to distorted eating and blocked identities. But not all deployments of the situationist account make this healthist assumption. In *Nudge,* Richard Thaler and Cass Sunstein are careful to reject the idea that good eating must be healthy eating. Following from their libertarian commitments, they insist that people should be free to prioritize other values in their eating and other behaviours (2009, 5). This produces a values-pluralist situationist narrative about unhealthy eaters. In the next and final section of the paper, I consider how such a narrative might function as a counterstory.

## Counterstories: Values-Pluralist Situationism

Despite the prominence of healthism about eating, many people seem to have pluralist intuitions about eating. For example, many people think that pleasure is an important eating value, in addition to health (Kukla 2018; Welsh 2011; Noë 2012). Empirical research suggests that people also see eating as related to taste, ethics, cost, convenience, identity, and social relationships (Connors et al. 2001; Bisogni et al. 2002; Devine et al. 1999). In line with these intuitions, some philosophers have pushed back on healthism about eating by suggesting that what is ethically important about eating is that individuals are able to autonomously pursue their own values through that eating, which may or may not include or prioritize health (Noë 2012; Bonotti 2015; Thaler and Sunstein 2009). I call this position "values-pluralism" about eating.

Values-pluralism does not preclude the possibility that unhealthy eating *could* be a breakdown of agency, but it enables an alternative positive interpretation of that eating. Values-pluralists cannot assume that someone is a flawed or failed agent when they eat unhealthily. Rather, they must always ask whether the person has autonomously chosen to pursue a value other than health through their eating.

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[22] That said, neoliberal individualizing and responsibilizing narratives may make people feel it is their fault for not having the time or money or energy to take care of themselves by altering their environments in the necessary way.

Eating deep fried Oreos on a regular basis may be good agency at work, if the agent prioritizes pleasure and finds that dish intensely pleasurable (Noë 2012).

While values-pluralist arguments often rely on something like a control model of the agent (at least implicitly), Thaler and Sunstein combine it with their situationist model of agency. As we have already discussed, the situationist model increases the number of possible explanations for unhealthy eating as well as avenues for addressing unwanted unhealthy eating. If we add the possibility that unhealthy eating could be good agency at work, we undercut the major limitation I identified with the healthist situationist narrative: unhealthy eating *could* show up as a reflection of identity and values. A values-pluralist situationist narrative would thereby not only increase the number of possible explanations of unhealthy eating but also enable unhealthy eaters to understand their unhealthy eating as agential, making them less vulnerable to those who would take advantage of them or try to control their eating. And it may also make people more open to interpreting others' unhealthy eating as reflective of someone's identity, character, and values, rather than their ignorance, lack of willpower, or nonexistent eating agency. In these respects, a values-pluralist situationist narrative about unhealthy eaters seems a quite promising counterstory.

That said, I have some significant reservations about the power of this narrative as a means of moral repair. In particular, I suspect that it is limited in its ability to repair the agency of fat people, who, as I have argued, are especially vulnerable to the harms of the control narrative. Recognizing that the effects of a narrative on agency are modulated by interactions with other narratives, I suggest that fat people will be unlikely to benefit from this narrative for at least two reasons.

First, ableism may prevent fat people from being recognized as (or recognizing themselves as) agential unhealthy eaters.[23] Even if we agree that individuals may legitimately prioritize values other than health, ableist assumptions about the value of able-bodiedness may lead us to believe that when someone's health is at risk or already compromised, the rational thing to do is prioritize health. In other words, intuitive sympathy for values-pluralism about eating may dissolve when the eater in question is sick, disabled, or perceived to be at high risk of illness or disability. This affects fat people because according to the American Medical Association, obesity is a disease (Pollack 2013). It is repeatedly and often urgently proclaimed that being fat "causes" or at least (and somewhat more accurately) is associated with serious illness, disability, and early death. According to an ableist narrative, then, even if *some* people can legitimately prioritize nonhealth values in their eating, fat people—some of whom are by definition diseased, and all of whom

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[23] For a discussion of ableism and its links to other forms of oppression, see Robert McRuer (2013).

are widely assumed to be at risk for bad health if not already unhealthy—should prioritize health. Otherwise they are irrational, which pushes them into the flawed or failed agent category.

Second, even if fat people do get counted as agential unhealthy eaters, the identity or values their eating is taken to reflect may be bad, as in sinful, corrupt, or irresponsible. David Mela claims that over 50 years of scientific research has been premised on the idea that "obese" people must get more pleasure out of food than "nonobese" people do, which explains why they (allegedly) eat so much even to the (alleged) detriment of their health (Mela 2006). This suggests that if fat people's unhealthy eating is taken as agential, it is likely to be attributed to a pursuit of pleasure. As Rebecca Kukla argues, our ethical evaluations of pleasure-seeking through food are complicated at best (2018). Who gets to be hedonistic without being judged a morally corrupt or irresponsible person is deeply coloured by classism, racism, and other forms of prejudice. For instance, thin, beautiful French women seem welcome to be hedonists, perhaps in part because their food pleasures presumably revolve around copious amounts of brie and wine, and they are assumed to remain beautiful despite (or even because of) their eating practices. On the other hand, low-income, fat Americans, whose tastes are presumed to fall more into the junk food and fast food range, seem more likely to be judged as irresponsible or gluttonous. In this case, a values-pluralist situationist narrative may simply push the object of criticism from an unhealthy eater's failed, flawed, or nonexistent eating agency to her bad character or values. And being understood a bad person can have its own damaging effects on agency.

**Conclusion**

One of the goals of this paper was to illustrate some of the complex ways that healthism about eating affects agency. As noted in the introduction, conversations about agency and the ethics of eating often exclusively focus on the ways policies and interventions can impinge on the exercise of agency through food choice. But I have suggested that healthist *narratives* can also affect agency in significant ways. I have argued that the common control narrative about unhealthy eaters may damage the agency of those identified as such in four different ways. I suggested that two prominent alternative accounts of eating agency—the environmental model and the situationist model—are not much better, at least on their own. A values-pluralist situationist narrative holds some promise, but I have suggested that it is limited in its ability to repair the agency of some of those most vulnerable to the harms of the control narrative, namely fat people.

This discussion emphasizes that any project of repair featuring counterstories needs to be responsive to the dynamic nature of social narratives and their intersectional effects on identity and agency. It also highlights that a single

counterstory is unlikely to be sufficient to repair the agency of those whose identities are constructed out of, or at least in relation to, multiple damaging narratives. Despite these challenges, I hope to have shown that resisting harmful healthist narratives about eaters is an important and worthwhile project. This is not to suggest that doing so should be our only response to healthism; healthism's harms extend far beyond agency and responding to these harms will require a variety of tactics. Nonetheless, as participants in ubiquitous discussions about eating and eaters—whether focused on environmental degradation, animal suffering, weight loss, food insecurity, climate change, or diet-related illness—we can and should work to undercut harmful narratives about eaters and promote more empowering ones. Precisely which narratives we should work to promote, and how to do so effectively, will have to be part of a future discussion. But I hope to have shown that it is a discussion we should have, and that the conceptual tools offered here will help make it a productive one.

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