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Eating Right in America: The Cultural Politics of Food and Health by Charlotte Biltekoff (review)

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Elizabeth Hallam and Samuel Alberti draw out other common themes in the introduction to the volume, which does an admirable job of integrating diverse chapters on very different museums. They talk about the roles of wonder and beauty in shaping collections, about the ideas of “abnormality” and disease that propagated through them, about technical changes in the way the body has been visualized that are reflected in medical museums, and about the role of remembering that medical museums fulfill. Despite that well-synthesized introduction, individual chapters sometimes seem to stand alone and to be divided. The book is not subdivided or organized thematically, and authors pick up various of its themes unevenly. Clear divisions between chapters and the styles and purposes of their authors prevent what might have been a more fruitful expansion on or dialogue regarding those ideas introduced at the outset, and they disrupt what might be common to the museums surveyed or to various time periods during which those museums were established or gained prominence.

This is a beautiful book, full of striking photographs, that examines the beginnings, present, and future of some of the most important anatomical collections in Europe and the United States; it will be of considerable use to historians of medicine and of considerable interest to a broader public.

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Charlotte Biltekoff. *Eating Right in America: The Cultural Politics of Food and Health*. Durham, N.C.: Duke University Press, 2013. xi + 208 pp. Ill. \$22.95 (978-0-8223-5544-1).

Rarely does one get a chance to review of volume by a first-rate younger scholar, in this case an assistant professor of American studies and food sciences at UC Davis who is also a well-regarded vegetarian chef. This volume had its origin as a dissertation at Brown University, which is about (geographically and culinarily) as far away from San Francisco’s Green Restaurant where Charlotte Biltekoff worked as one can get.

Having framed the book, one might imagine that it is yet another account of how healthy eating saved (or didn’t save) America. On the contrary this is a sophisticated and difficult book because it argues that food politics and the concomitant ideas of a health body and lifestyle are forms of coercion. Certainly in the United States their origin is not only in the complexity of American eugenics, but they have maintained themselves in recent time as part of the “war on obesity” that has become the new calling card for American public health.

Who eats what has always been a central question in the United States. It is of little accident that among the first widely circulated books for Yiddish-reading

immigrants at the turn of the twentieth century an “American” cookbook trumped all others. Charlotte Biltekoff spells out in great and fine detail how the science of race improvement, Malthusian economics, and an obsession for producing healthy (and fat) babies merged into a post–World War II world of the ultrathin driven by ideologies of health and religion. Only in America could the result of the Great Disappointment of October 22, 1844, when Christ failed to return as predicted by the Millerite sect of Christianity, generate a religion rooted in food culture. The Millerite Ellen G. White simply reversed the claims about original sin and the eating of the forbidden fruit in the Garden of Eden and argued for a strenuous vegetarian regimen as part of her new religion that followed her version of biblical principles. And so America became a land on which health, food, and religion (including its secularization) became entwined.

Charlotte Biltekoff does not return to Ellen White and the Seventh-day Adventists, but they haunt her volume. Yet they shape underlying attitudes of salvation through food that, in her telling, culminated in Alice Waters, Chez Panisse, and the “Edible School Yard,” the training ground of American locovars. Who worships what where is always the key, as is how such beliefs promise redemption: if not access to HEAVEN at least to HEALTH. And a healthy citizen is, in good eugenic terms, a good citizen.

The images of “normal and healthy man/woman” (an odd version of what some economists call “rational man” and the law has called “reasonable man”) haunt such a history and can be seen in today’s politics of obesity. Michelle Obama has taken up childhood obesity as one of her primary interests as first lady. In her opening salvo on February 9, 2010, she commented,

It’s time for a moment of truth for our country; it’s time we all had a wakeup call. It’s time for us to be honest with ourselves about how we got here. Our kids didn’t do this to themselves. Our kids don’t decide what’s served to them at school or whether there’s time for gym class or recess. Our kids don’t choose to make food products with tons of sugar and sodium in super-sized portions, and then to have those products marketed to them everywhere they turn. And no matter how much they beg for pizza, fries and candy, ultimately, they are not, and should not, be the ones calling the shots at dinnertime. We’re in charge. We make these decisions.¹

Her view is that obesity is not a medical problem, even though it has health consequences; rather it is a social or even a moral problem (laziness). Obesity is the result of an adult lack of desire to exercise and eat well. Such views stereotype all people who are obese as lazy and stupid and unable to deal with problems that they themselves have some control over. But obesity has become a public health issue that has an ever-growing pot of money associated with it. Everybody

1. See Lynn Sweet, “Michelle Obama’s Remarks at ‘Lets Move’ Launch. Prepared Text,” *Chicago Sun-Times*, February 9, 2010, http://blogs.suntimes.com/sweet/2010/02/michelle_obamas_remarks_at_let.html (accessed March 3, 2014).

is jockeying to get a part of that pie: the geneticists are making claims that it's all a question of genetic inheritance; the endocrinologists are arguing that this is mainly a problem of metabolic change; the infectious disease specialists point to increased obesity in those infected with specific viruses or who have consumed too many antibiotics; the people interested in social medicine say if people only had better access to organic or slow food there would not be any problem with obesity—all of which, in bits and pieces, is true. The moralizers argue that we should reintroduce physical labor—now in the form of compulsory exercise regimes in schools or a “fat tax” on unhealthy food. If the first lady is heard, obesity will be viewed as primarily a medical problem rather than a social one. It is the image of the obese with all its history that frames these questions. Without an awareness of this history, the debates and the solutions will always be partial, fragmentary, or contradictory. Indeed, recent experimental data have shown that the public expression of the stigma of obesity can be one of its causes.

Some policies and campaigns designed to combat obesity portray overweight and obese individuals negatively. For example, Georgia's Strong4Life campaign to combat childhood obesity prominently features advertisements portraying fat children as unhappy; other states send heavy children home with “BMI report cards”; and the Boy Scouts of America recently placed BMI restrictions for boys participating in the Boy Scout Jamboree. Although it may not be their primary intent, such programs increase stigmatization of overweight individuals.²

I am delighted that Charlotte Biltekoff and Duke University Press have confronted the claims of how we must make better citizens in our fantasy of how they should be made to eat. Now if we could only get the *New York Times* to stop pushing healthy eating as the cure for most of our social and cultural ills.

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2. Brenda Major, Jeffrey Hunger, Debra Bunyan, and Carol Miller, “The Ironic Effects of Weight Stigma,” *J. Exp. Soc. Psychol.* 51 (2014): 74–80, 75.