Health & Place 22 (2013) 132–139

Contents lists available at SciVerse ScienceDirect

Health & Place

journal homepage: www.elsevier.com/locate/healthplace

The rural and the rotund? A critical interpretation of food deserts and rural adolescent obesity in the Canadian context

Deborah McPhail [a,*], Gwen E. Chapman [b], Brenda L. Beagan [c]

[a] Community Health Sciences, Faculty of Medicine, University of Manitoba, S-113 750 Bannatyne Ave. Winnipeg, MB, Canada
[b] Food, Nutrition and Health, University of British Columbia, 2357 Main Mall, Vancouver, BC, Canada
[c] School of Occupational Health, Dalhousie University, Room 324, Forrest Building Halifax, NS, Canada

ARTICLE INFO

Article history:
Received 24 October 2012
Received in revised form
25 January 2013
Accepted 20 March 2013
Available online 29 March 2013

Keywords:
Adolescent
Critical obesity
Rural
Food deserts
Food acquisition

ABSTRACT

Resting on the notion that rural spaces are "food deserts," rural adolescents are increasingly regarded as a "problem population" in Western obesity narratives. Using qualitative data gleaned from interviews with 51 teenage participants from rural areas across Canada, this paper focuses on the ways in which obesity is constructed as a rural disease in the Canadian context, demonstrating in particular how discourses of food deserts and related rural obesity rely on classist imaginings of obesity as a working-class embodiment. The paper will further question the understanding of the rural as a food desert, showing the ways in which rural teens acquire fresh, healthy foods in part through an informal economy of food growing and sharing.

1. Introduction

In 2011, Canada's public broadcaster, the CBC, aired a reality television show called *Village on a Diet*, featuring the residents of a small town on the West coast of Canada called Taylor, British Columbia. Under the premise that residents of Taylor were collectively 2000 pounds overweight, as determined by weighing the town's population on a truck scale, a team of experts – a dietitian, psychologist, physician, chef, and two personal trainers – are introduced to help the adolescents, adults, and even the animals of Taylor slim down. Over the course of the show, the town's weight "problem" is attributed to an "obesogenic environment"; Taylor is depicted as a working class town with a resource-based economy in the middle of nowhere. Taylor, the narrator of the show tells us, is a food desert, a place where fresh fruits and vegetables are not available, there are no large grocery stores, and people buy their food at a local gas station. Rather than attempting to find a solution to food access issues in Taylor by, for example, supporting the implementation of food co-ops or community gardens, the show quickly turns its focus to individuals, blaming the residents of Taylor for eating too much and exercising too little and providing residents with diet and exercise programs to combat their weight issues. By the end of the show's run, residents of the town have of course succeeded in their collective goal, and once again pile on the truck scale to reveal a weight loss of one ton.

While CBC's programme is seemingly innocuous, it does help to demonstrate the discursive conflation of obesity with rural living that is complicated in this paper. The collapse of rural life with obesogenic environments is increasingly evident in obesity discourse in the North American context and Canada in particular, especially within the popular press, medical research and in public policy at the federal level. Evident in this literature is often a focus similar to that of *Village on a Diet*'s, as rural areas are characterized as food deserts with low food availability and poor access to fresh produce (Liese et al., 2007). Some articles and reports express particular concern about children and adolescents in rural areas (Hennessey et al., 2010; Rodriguez et al., 2010; Statistics Canada, 2004; Thomson et al., 2010), finding that children and young people residing in rural areas are "more likely to be overweight and obese in comparison with urban [counterparts]" (Bruner et al., 2008, p. 208).

In this paper, we draw on interviews with 51 teenagers from across Canada living in a variety of rural areas to explore the conflation of rurality and adolescent obesity, placing particular emphasis on food choice and the notion of the rural as a food desert. Relating the complicated and multi-faceted discussions of food consumption discussed by rural adolescents ages 12–19, we show how discourses of the rural as a food desert and obesogenic

* Corresponding author. Tel.: +1 204 480 1352; fax: +1 204 789 3905.
E-mail addresses: deborah.mcphail@med.umanitoba.ca (D. McPhail), Gwen.chapman@ubc.ca (G.E. Chapman), Brenda.Beagan@dal.ca (B.L. Beagan).

1353-8292/$ - see front matter © 2013 Elsevier Ltd. All rights reserved.
http://dx.doi.org/10.1016/j.healthplace.2013.03.009

environment do not capture the informal food culture of food growing which can and does occur in rural spaces, particularly in agrarian areas. Additionally, on a more theoretical level, we demonstrate how rural obesity discourse mobilizes affects of ambivalence toward modernity, which in turn are based in the characterization of the rural as food deserts and places of low Socio Economic Status (SES). We suggest that the discourse of rurality and obesogenic rural environments positions rural residents as a "problem population" similar to other populations that have been "blamed" for the obesity epidemic—such as racialized and colonized groups, people of low SES, and the working class in general. Specifically, we argue that rural obesity concerns are tinged with classist notions of obesity as associated with the working class and working poor, who are stereotypically imagined as under-educated and therefore unable to handle "modern" food systems or understand the benefits of healthy lifestyle practices. Thus, we argue that discourses of rural obesity further harmful class stereotypes that, in our view, must be challenged by critical scholars of health.

2. Literature review

Popular, medical and government literature on rural adolescent obesity is part of the larger body of discourse on rural obesity which, like all discourse, is complicated and sometimes contradictory. In one inflection of the discourse, no difference exists between urban and rural obesity rates (Henes et al., 2010; Plotnikoff et al., 2004; Schwarte et al., 2010). At times, texts uphold the notion that rural dwellers are generally more healthy than urban dwellers,painting a picture of the rural as a place where fatter city folk can come to lose weight (Abraham, 2008). In the main, however, the overall sentiment of the emerging discourse on rural obesity is that rural residents are fatter than urban dwellers.

Most obviously, rural obesity discourse maintains that obesity in rural areas is generally on the rise, and, echoing much US-based medical literature (Hovland et al., 2010; Maley et al., 2010; Nothwehr et al., 2010; Rodriguez et al., 2010; Smith, 2011; Thompson et al., 2010; Welch et al., 2009), rates of obesity in rural areas in Canada are said to be higher than in urban areas (Armstrong, 2002; Bruner et al., 2008; Fitzpatrick, 2006; Friedman, 2008; Gee, 2009; Ismailov and Leatherdale, 2010; Lawrence, 2004; Picard, 2000a, 2000b, 2002, 2009; Plotnikoff et al., 2004; Statistics Canada, 2004; Taber, 2012). Related, rural adolescents are positioned as more obese than their urban counterparts (Statistics Canada, 2004). As one headline from a Canadian national newspaper puts it: "Sleepy country life not just dull for teens, it's fattening too" (Blackwell, 2005).

Yet with an extensive review of the medical literature, critical obesity scholars have argued that the stated health effects of obesity rest on overstatements about the health risks of body fat (Bacon and Aphramor, 2011; Campos et al., 2006; Evans and Colls, 2009; Gard and Wright, 2005; Guthman, 2011). Some scholars have particularly focussed on the childhood and adolescent obesity epidemics, arguing that the notion that the weight or fat content of a continuously growing and changing body cannot tell us much about overall or future health (Colls and Evans, 2008; Evans, 2010). Health scientists and epidemiologists are also beginning to recognize the limits of a focus on obesity (Egger and Dixon, 2009), some showing that cardiovascular and metabolic health are not only more important than body weight, but also not necessarily correlated with weight (Flegal et al., 2007; Orpana et al., 2010). Additionally, even taking the highly problematic measure of BMI at face value, evidence suggests that obesity rates are actually at a plateau in Canada and North America generally (Ogden et al., 2007; Starky, 2005; Statistics Canada, 2008). Links between childhood/adolescent obesity and ill health have also come into question, as some literature sheds doubt on the by-now-common sense idea that fat kids become fat adults with health problems (see Statistics Canada, 2004 for a summary).

Thus, a disjuncture exists between the concerns about rural obesity and obesity in general and actual evidence that the weight gain of a population is a *problem*, even in children and adolescents. Speaking of childhood obesity, geographer Bethan Evans (2010), building on other scholars of affect (Ahmed, 2010a, 2010b; Clough, 2010; Crang and Tolia-Kelly, 2010; Lorimer, 2008; Massumi, 2010; McCormack, 2003; Thein, 2005), has characterized this disjunction as indicative of the mobilization of particular affects, or types of unintelligible forces formed in relation to the material world which can become embodied as emotions. Childhood obesity, according to Evans, is a concern not because scientific evidence has proven it to be unequivocally unhealthy – it has not proven this – but because of the types of affects such as fear, disgust, panic, and an anxiety about the future that childhood and adolescent obesity discourse tends to elicit.

One type of anxiety relied upon and reified by discussions of rural obesity is seated in narratives of modernization. Obesity discourse often locates the cause of rural obesity in the "modernization" of rural life. For instance, the rural is often positioned as a "food desert" in Canadian popular and medical texts-a place lacking in fresh, nutritious foods like fruits and vegetables and stores to buy them (Lebel et al., 2011; Picard, 2000b). Gone are the days of pastoral agrarian lives, where rural residents produced food in their backyards for their own consumption. As *Village on a Diet* exemplifies, rural dwellers are now imagined to rely on the modern food system like everyone else, the difference being that "the isolation limits food…choices" (Picard, 2000b). Obesity rates are also attributed to a dearth of exercise in rural areas which some speculate is related to, among other things, the modernization and mechanization of farming (Bruner et al., 2008; Picard, 2000b; see Maley et al., for the US context). According to the Canadian Centre for Health and Safety in Agriculture:

> Over the years…farming methods have evolved to machinery and automation performing most of the tasks which now keeps farmers from intense physical work, ….[while] healthy food consumption and meal preparation is limited by the lack of availability and accessibility to fresh produce. (Canadian Centre for Health and Safety in Agriculture, 2007).

In the words of newspaper columnist André Picard, the figure of the "'healthy' farmer may be a myth" (2000b, no page).

In their focus on obesogenic environments, however, narratives of rural obesity do not account for the agency that people can and do express in relation to their built environments (Grosz, 1994), and the ways in which people negotiate spatial realities with embodied identities and desires to be healthy (Guthman, 2011). We have shown elsewhere, for example, that the close proximity of fast food establishments does not neatly translate into fast food consumption for urban or rural teens (McPhail et al., 2011), and we will demonstrate in this paper that rural living does not necessarily imply inability to access fresh produce or eat healthfully. Further and in particular, narratives of rural adolescent obesity assume a naiveté about the presumed health effects of food choice and body size on the part of young people. Recent scholarship suggests, however, that such an assumption is unwarranted, and that children and adolescents are often not only well aware of mainstream discourses about healthy eating and obesity, but at times express a thoughtful resistance to them (see Evans and Colls, 2009 and Hopkins, 2012 for the UK context, and McPhail et al., 2011 for the Canadian context).

In addition to the modernization of the rural, discourses of rural obesity often attribute obesity to the low SES and low levels