Article

Ethnography

Ethnography
2016, Vol. 17(4) 539–558

DOI: 10.1177/1466138116655361
eth.sagepub.com
SAGE

Embodied resocialization at a children's weight loss camp

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Abstract
This paper examines the content and processes of embodied resocialization that occur at a children's weight loss camp. Drawing on ethnographic and interview data, I provide the children's accounts of their decision to attend camp. In addition to teaching the children to implement body projects through strategic and embodied means, the structured environment at camp allowed for the recalibration of the campers' habits. Social control supported weight loss at camp but ultimately created problems for effective resocialization. This paper contributes to a better understanding of processes of embodied resocialization and the tension between self-control and social control when resocialization occurs in an immersive environment for a short period of time.

Keywords
socialization, children, body weight, social control, embodiment

In June 2011, two dozen young people arrived at Camp Odyssey. During the weeks that followed, the campers engaged in quintessential summer camp rituals. They sang campfire songs, slept in bunk beds, decorated their cabin door, and swam in the lake. However, this summer camp differed in one key way: the campers were there to lose weight. In addition to the typical camp activities, Odyssey campers were measured, weighed, and participated in fitness tests. They ate carefully portioned, nutritious meals. Physical activity was routine, and they met with dietary experts and staff daily to learn about the science and psychology of weight loss. Camp Odyssey promised to help the children learn new habits, and the children were eager to leave camp weighing less and feeling

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better about themselves. In short, these children were engaged in a process of embodied resocialization.

Encouraging children to diet is relatively new and controversial (Saguy, 2013). The growing acceptance of weight management initiatives for children is directly linked to concerns – and even panic – about childhood obesity. As children are exposed to messages about weight control at earlier ages, anti-obesity programs have become important sites of cultural meaning about body size. In addition to the growing number of weight education programs in schools and communities, some parents send their children to summer weight loss camps. Thousands of children have attended one of the approximately two dozen summer weight loss camps in the United States (Ellin, 2005).

A weight loss camp provides a unique context to examine how children take part in resocialization efforts to change their bodies while temporarily living apart from their families. In this paper, I examine the content and processes of embodied resocialization that occur at a children's weight loss camp. I use ethnographic and interview data to answer the following research questions: How does the camp attempt to resocialize children and how do children negotiate this process? To what extent does the camp engage children in a body project focused on self-control versus using social control tactics to create embodied change?

In answering these questions, this paper makes three contributions. First, sociologists typically regard resocialization as a process that occurs in adulthood. Here, I examine how children may attempt to overcome past socialization while still in childhood. Second, I develop the idea of embodied resocialization by demonstrating how the camp was not merely providing information about weight loss but was actually trying to retrain the children's tastes, preferences, and habits in ways that would come to feel natural to them. Third, I address the dynamic between self-control and social control and find that the camp socialized the children to adopt a willpower approach to portion control even though the true mechanism of social control was the camp context itself. I conclude by arguing that the camp's short term effectiveness and its messages about body size and self-control are complicit in instilling problematic dieting discourse in the children.

I begin with the children's accounts of their motivation to attend camp and engage in a resocialization program. Guided by the theoretical concept of body projects, I then illustrate the camp's strategies aimed at the individual level of changing habits. I describe how the camp-sanctioned body project was negotiated by the camp staff and the campers when faced with challenges to resocialization. In addition to teaching the children to implement body projects through strategic and embodied means, the structured environment allowed for the recalibration of the campers' habits and sense of well-being. Eating and physical activities were explicitly and implicitly regulated through social control mechanisms. I conclude by discussing the challenges that participants faced when they left camp and the implications for lasting change occurring through camp resocialization versus family socialization.

Childhood resocialization

A children's weight loss camp is a setting for resocialization programming. Resocialization is a process of learning a new set of internalized norms, beliefs, and behaviors in order to transform a status or identity created by previous socialization. Research on resocialization often centers on adults who undergo processes of either occupational socialization, such as becoming a doctor or police officer (Chappell and Lanza-Kaduce, 2010; Fox, 1988; Merton et al., 1957), or institutionalization, such as becoming a prisoner or mental patient (Goffman, 1961; Schmid and Jones, 1991). The focus on adults in resocialization research is so pervasive that it is sometimes referred to as 'adult socialization' (Mortimer and Simmons, 1978).

The dominant perspective on childhood socialization posits that young people are active and agentic participants in bridging adult and peer cultures through social interaction (Adler and Adler, 1998; Corsaro and Eder, 1995; Eder and Nenga, 2003; Simon et al., 1992). This perspective asserts that young people are not passive receptors of cultural socialization but actively engage, interpret, and construct meaning. Most research on childhood focuses on primary socialization process, that is, how children engage with dominant cultural meanings and learn social order through interaction. While the socialization literature to date points to the interplay of structural constraints, culture, and children's agency, the idea of children intentionally attempting to overcome their previous socialization while still in childhood has not been adequately examined.

Resocialization programs 'can vary in relation to their voluntariness, their purpose and goals, their degree of separation from the outside world, the active or passive role of the individual in the process, the level of surveillance and control, and the permanent or temporary nature of involvement' (Morrison, 2007). Indeed, resocialization aimed at weight loss can take a number of forms ranging from dieting on one's own to online or in-person support groups. A weight loss camp is marked by high levels of social control because the daily schedule of activities as well as when and what to eat are strictly regulated by those in power: the camp directors and counselors. Campers are removed from the outside world and permitted limited contact with other influential agents of socialization, such as family, peers, and media. However, the weight loss camp is also reliant on its participants to seek involvement in their own resocialization. If the children are not motivated to change their habits and follow the camp's directives, bodily change will be less successful. Therefore, weight loss camps are best conceptualized as a blend of external social control factors and individual investments in self-change.

Embodied resocialization and body projects

Body projects are ongoing processes of people shaping and maintaining their bodies through vigilant effort and techniques, such as diet, exercise, or cosmetic surgery (Shilling, 2003). Applying the concept of body projects to a weight loss

camp leads to the expectation that campers are involved in a carefully packaged regimen of diet, exercise, and educational and therapeutic activities. In doing so, an important aspect of resocialization becomes explicitly guiding children toward new habits, skills, and knowledge so that they enact strategic bodily and self-change in order to gain a more socially accepted body size. Body projects require intentional and strategic attempts to change habits and the self. Individual responsibility and self-expression are implicated in body projects as people are 'conscious of and actively concerned about the management, maintenance and appearance of their bodies' (Shilling, 2003: 4). Linking body weight to self-control and morality is culturally deep-seated. Obesity is especially likely to be framed as a morality tale focusing on personal responsibility and blame in the United States (Saguy and Gruys, 2010; Saguy et al., 2010).

The weight loss industry reports annual sales of approximately $33 billion (Austin, 1999; Hesse-Biber, 2006) and over 40% of American women and 25% of American men are currently trying to lose weight (Granberg, 2006). These numbers convey the extent to which weight loss body projects have taken hold and how many people accept the premise that weight loss occurs through caloric restriction and increased physical activity. The energy balance model of weight management (i.e., calories in vs. calories out) typically places responsibility on the individual to eat fewer calories and exercise more frequently in order to lose weight. This focus on individual responsibility for body size persists despite the fact that over 80% of US adults fail to maintain weight loss within a year (Elfhag and Rossner, 2004).

Despite its popularity, the traditional dieting model has its share of critics. There is evidence that dieting can be unhealthy (Brownell and Battle Horgen, 2004; Campos, 2004), and psychological harm may result from shaming young people for their body size (Greenhalgh, 2015). Further, some 'obesity skeptics' question whether BMI categories accurately measure health risk as some studies find that those in the overweight category have the lowest mortality (Campos, 2004). Others critique the emphasis on personal responsibility to solve obesity rather than focusing on the broader social systems that may contribute to increased body size in the population such as social inequality (CDC, 2010; Baskin et al., 2005; Zhang and Wang, 2006; Reilly et al., 2005), the food system (Adler and Stewart, 2009; Guthman, 2011; Powell et al., 2007), and a neoliberal political system (Guthman and DuPuis, 2006).

Weight loss resocialization also involves embodiment, the physical sensations that come to feel natural through socialization. Past research suggests that resocialization must also focus on the mind-body connection so that changes become a physically rooted, normal way of being for the person. For example, Wacquant's (2004) research as a participant observer at a boxing gym in Chicago's South Side demonstrates how boxers experience embodied change via an environment supportive of specific training techniques as well as careful practices and strategies. Like Wacquant's boxers, the dieting and fitness regime at a weight loss camp may entail conscious choices and learning but will only be deemed effective when the child manages cravings and reduces the amount of food eaten in a way that comes to feel natural and normal. Body size and weight loss concerns speak directly to the

issue of embodiment – merging cognition and sensation, thoughts and a sense of well-being as people attempt to simultaneously change their thought patterns and physical reactions.

A children's weight loss camp exemplifies broader cultural tensions surrounding weight management. On the one hand, some may object to facilitating behavioral and bodily change in children on ethical grounds and worry that these camps only serve to further stigmatize obesity. On the other hand, resocialization aimed at weight loss could be viewed as an agentic response to a social system that produces obesity and a culture that ranks and discriminates bodies based on appearance. Concerns about health, social acceptance, and self-esteem rooted in lived experience may lead parents and their children to enroll in a body project aimed at weight loss. In this paper, I describe how the camp instructs children to agentically implement body projects while also pointing out the problematic aspects of this resocialization approach.

Methods

Research site

Camp Odyssey is a weight loss camp located in a Midwestern town that draws thousands of visitors to its waterparks and tourist attractions during the summer. A few miles from the souvenir shops and restaurants of downtown is Camp Jay, a large campground that is operated by the Jewish Community Center of a nearby city. Camp Odyssey is embedded in this larger camp, but it is not affiliated with the JCC. For over a decade, Fay and Steve, the camp directors of Odyssey, rented a small number of cabins and paid for the use of the facilities and dining services. Enrollment for Camp Odyssey is between 20 and 40 campers, and campers can stay for two weeks or a month. Odyssey campers follow a separate program of activities and have limited interaction with Jay campers.

Every morning, the campers went to Odyssey Time which consisted of three 45 minute rotations. One rotation was a weight loss information session called Education that was nearly always led by Fay, the camp co-director. Movement, a structured exercise class, was the second rotation. The third rotation ranged from a guest speaker on nutrition, a body image workshop, a self-defense class, or fitness tests and body measurements. For the first two weeks, campers were divided into three groups: older girls, younger girls, and boys. During the second two weeks, the number of campers was small enough that they simply divided into two groups based on gender. Odyssey Time provided a rich source of instruction related to the content and processes of resocialization at the camp. This content was referred to and used throughout the day as the campers participated in games, activities, and meals.

Participants

During the 2011 season, there were 24 total campers: eight stayed for two weeks and the rest stayed for a month. There were nine boys and 15 girls, and campers

ranged in age from eight to 16 years old. Most campers were white; three were African American. The children were mostly middle class. Four students were given scholarships to offset the cost of camp, and these students were from a poor or working class background. Using BMI measurements taken at the beginning of camp, two campers had a normal BMI, eight were overweight, and 14 were obese. Campers who stayed two weeks lost between three and nine pounds, whereas those who stayed a month lost between seven and 30 pounds.

Ethnographic approach

Ethnographic data is strongly suited for asking research questions related to how and why meaning is generated (Glesne and Peshkin, 1992; Creswell, 1994). My research question of how processes of resocialization operate within small group interactions required intensive and sustained observation. In order to collect participant-observation data, I lived at the camp for the entire four week session, and I participated in meals, activities, and free time with the campers. Participant observation allowed me to better understand the way that meanings are generated and used on a daily basis, and I was able to see contradictions and congruities between the way campers represented their experiences during the interview and how it played out on an everyday basis.

Overall, I felt that the campers easily accepted my presence. By the end of the first week, the campers loudly greeted me and some linked arms with me for the walks between activities. I spent eight to 12 hours with the campers each day, and I jotted field notes throughout the day. I elaborated my descriptions as I typed them on my laptop each morning before breakfast. I also wrote theoretical memos and notes on emerging themes each week. I was primarily an observer during Education sessions, and I participated in fitness classes, games, and social activities like camp dances. As a white female of average height and weight who was 27 years old during data collection, my body size, along with my age, likely contributed to the campers grouping me with the adult staff. The children did not comment on my body size or ask me if I had been overweight as a child. However, I participated in group activities and responded honestly about feeling self-conscious about my weight as an adolescent. Given that I had not been an overweight child and had not ever attended a weight loss camp, I was an outsider in many ways. However, I empathized with their body image concerns and understood their desire to lose weight based on personal experience. At the same time, I also was aware that I must collect data as objectively as possible. Rather than seeing the campers and staff as opposed or condemning the entire idea of a weight loss camp, I aimed to understand the motivations and experiences of all involved.

Interviews and analytic approach

I conducted in-depth interviews in a private meeting room with the campers during their free time. The interviews were semi-structured, which means that I had a

common set of questions that I asked each respondent, but I also followed up on unanticipated topics that respondents brought up (Hesse-Biber, 2007). Interviews lasted between 25 and 90 minutes. I asked questions about what they liked and disliked about camp, their family and peer experiences prior to camp, their perspective on body size and body image, and their hopes for the future. After each interview, I wrote down ethnographic field notes on the respondent and the interview (Emerson et al., 1995) and a narrative summary of the interview (Briggs, 1986). Interviews were audio-recorded and transcribed.

I began my data analysis by creating a case study for each participant. Given that my sample was 24 participants for whom I had interview data and field notes, it was manageable for me to write a three to five page narrative on each participant which summarized their body history prior to camp, salient observations about their experience at camp, and important quotes from their interviews. Then, I carefully read and made notations on field notes, memos, and interview transcripts multiple times using my research questions, previous literature, and codes that came up organically through observation. This served as a roadmap for each of my participants, and it helped generate codes and questions to explore in the field notes and interview transcripts. I used ATLAS.ti software to organize and identify common themes in the data. I also compiled my field notes by week for analysis. Once I was out of the field, I coded for theoretically informed themes, such as emotion management, immersion, social control, self-control, parroting, resistance, and double standards. As I developed hypotheses, I looked for patterns and discrepancies until no new insights occurred. While my data cannot generalize to all overweight children or all weight loss camps, the social psychological processes that I uncovered through my fieldwork may transfer to other sites or contexts and can be used to generate further research questions

Results

Deciding to attend camp

In order to participate in a resocialization program, the children or their families had to problematize the primary socialization of eating habits. Many of the families attempted to change their eating habits prior to the child's enrollment at camp. Almost all of the children tried to lose weight with family members, and many of their parents were actively dieting. However, previous attempts at changing eating habits were often short-lived and met with limited success. Both the children and their parents felt helpless, which led them to uncomfortable confrontations or avoidance of the issue altogether. This conflict caused both parents and children to view a weight loss camp as a desirable alternative. Two-thirds of the campers reported that attending camp was a mutual decision between them and their parents. While the children felt pressure to lose weight from family members and peers, nobody reported being coerced to attend camp. The three campers who said camp was solely their

parents' idea remarked that they grew to like camp after they arrived despite initial reluctance.

Quite a few families viewed camp not only as a means to transform their child's body but also as a way to alter the family's habits upon the child's return home. Some parents told their children that they wanted them to teach the rest of the family what they learned at camp. As Ashley explained, 'That's one of the things mom wanted was for me to come home from camp and teach my family everything I've learned so that our entire family can be healthy.' Mandy revealed that her mother said, 'Ok, I'm sending you to this camp because I want you to lose weight but when [you] come back I want you to tell me and help me lose weight.' Likewise Mark's grandmother supported his time at camp because 'one of the other reasons she wanted me to go to camp was so that I could learn stuff and teach it to her and the rest of the family. Everyone in my family could stand to lose weight except for my brother who stays active.' Parents blamed weight gain on their eating habits, yet they did not know how to change. In a reversal of the way that we typically think of childhood socialization in which parents transmit meaning and behavior to children, here the parents wanted their children to socialize them and help them to change. They identified flaws in primary socialization that led to what they perceived as their children's weight problems. These parents wanted to support their children by changing their environment and learning what they could do to help the child and themselves as well. Thus, parents viewed camp as a way to resocialize the child – and then, for the child to resocialize them.

Resocialization as a body project

When 'not a diet' is a diet. The primary way that the camp socialized the children to diet was to restrict portion sizes, yet the staff did not want campers to think of these changes as a restrictive diet. Eating 'Real Foods' was emphasized by basing meals on fresh, non-processed food and encouraging campers to try new food through cooking and tasting demonstrations. However, camp leaders did not want the children to feel like they were deprived of food that children would typically eat. Therefore, small amounts of junk food, such as baked chips or popsicles, were provided as a snack. Nicole, a staff nutritionist, told them that the way they eat at camp is not a diet because they eat the food that everyone else eats. Fay addressed why they were permitted to eat junk food by asking, 'Why are we allowed to have it? You can eat all of this because of the portion. You can have your chips, your ice cream. We just are not overdoing it.' When I asked the campers what they learned at camp, many of them brought up the idea that no food is off limits so long as it is portion controlled. Mark described the camp by saying 'They don't deprive you of anything. You can eat quite a bit of taste good food, you just eat less of it.' Ada said, 'But this camp, it's kind of like a diet, but it's like, how can I say it without making it sound like [a diet]? It's a diet but it's not depriving you of anything.'

The campers readily identified the energy balance model that the camp espoused. Grace learned, 'You should always read the labels on things and have

meals and snacks about 300 calories so you eat less than you are used to. And just to, you're supposed to get 60 minutes of exercise every day.' Janet captured the camp philosophy of adopting a new diet and exercise based lifestyle when she said, 'It's not like weight loss boot camp. You're going to lose weight while you're here because you are so much more active than you are in your regular life. You're eating better quality food and less of it. It's about what you learn about having a healthy lifestyle in general. It's not unmanageable changes. It's teaching you how to live in the real world, as the real world is working now which is geared toward unhealthy living.'

There were areas of resistance that the campers displayed in reaction to these socialization processes. Despite being told that real food was better for them and that they were not being deprived of junk food, campers talked about food that was not offered to them at camp, such as pizza and peanut butter sandwiches. As their time at camp progressed, these conversations about the food they missed from home increased in frequency. While certainly more reasonable than the grueling boot camp of military style drills and tasteless food that many of the children imagined as alternative styles to Camp Odyssey, teaching the children to eat small portions of junk food presupposes a great deal of self-control. At camp, the portions were controlled for them, but some campers knew it would be far more difficult to stop eating delicious food when on their own.

Further, the juxtaposition of healthy and junk food reflects broader tensions within dieting culture when the social value of a thin body competes with the contemporary food environment. Bordo (1993) refers to the broad psychopathologies of food and diet that have caused a widespread 'cultural bulimia' in which people are told to indulge in decadent, calorie dense foods but also to maintain a slender physique through diet and exercise. While the camp attempted to find a middle ground, it unwittingly reinforced notions of willpower in the face of junk food temptation which are unrealistic outside of the controlled environment of camp.

Embodied resocialization. The camp staff recognized that changing eating habits is not solely based on learning facts about nutrition and portion control. Therefore, campers were taught to make the connection between their thoughts and embodiment by recalibrating hunger and practicing mindful eating. The first lesson at camp dealt with the hunger scale. The hunger scale ranged from 1 to 10 with 1 being ravenously hungry and 10 being painfully stuffed. They were told that they should always maintain their hunger levels between 3 (hungry) and 6 (full) with 5 being pleasantly satisfied. Fay regularly asked if anyone had been feeling hungry or how full they were at that moment. During the entire time at camp, I never heard campers say they were a number outside of the acceptable 4 to 6 range.

Fay explained that the purpose of the hunger scale was to allow campers to check in with their bodies and to maintain self-control over how much they ate. The link between the mind and the body was made explicit when Fay said, 'You need to change your thinking so that a 5 feels good.' Using the hunger scale as a

cognitive tool and labeling a certain level of satiety as 'good,' the body is supposed to feel differently and overeating will feel unappealing, if not intolerable. Fay told them that if she or one of the counselors overeats they feel so uncomfortable that they cannot stand it, and they do not want to do that again. By not overeating, campers were told that they would experience other embodied benefits such as being able to move, feeling energetic, and feeling good about yourself. Fay told them that if they can sell themselves on feeling comfortable at a 5, the more successful they would be when they leave.

The hunger scale was a popular tool among the campers who used it even without staff prompting. However, the program leaders had to adjust their teachings to clarify that saying you are not hungry is only a good thing if you are eating adequately. There was an acceptable yet amorphous amount of hunger and food that campers were permitted. While most campers did not ask for more food, a few were reprimanded for not eating enough. For example, Sammi did not finish all of her food at breakfast one morning. Fay saw this and said, 'Sammi, you hardly ate anything.' Sammi replied, 'I'm not hungry.' Fay said in a disapproving tone, 'You haven't been eating very much.' After Fay walked away, Sammi turned to her friends and said, 'Fay got mad at me for not eating.' Here, we see an example of the confusion that campers had when they followed the guidelines to eat less, and the concern among adults that some were not eating enough. During the last week of camp, the issue of the girls not eating enough was addressed at their Education session. The counselors told the girls that their level of activity required them to take in enough calories for energy, and the camp provided a good amount of food, not too much or too little, but they have to eat what is provided.

In addition to teaching campers what to eat, the camp staff also tried to retrain *how* the campers ate. A counselor explained that Mindful Eating focuses on hunger and fullness cues, centers attention on the mental, physical, and emotional effects of food, and instills a positive regard for food. The Mindful Eating style is in contrast to the assumed mindless overeating that the campers had acquired before camp. Mindful Eating connects mental awareness and embodied habits such as taste, chewing, and eating slowly. Campers experienced Mindful Eating through a taste test. They were given fruit, a cracker, and a piece of chocolate and told to look at and smell each one. Then, they were guided to eat each piece of food mindfully – first putting it in their mouths and letting it sit there, then chewing it slowly before swallowing. The children responded enthusiastically to this exercise and commented that food tasted differently when they slowed down. A few of the boys contrasted this experience to the past when they put handfuls of crackers or chocolates in their mouths at one time. By adding an embodied experience to verbal instruction about Mindful Eating, the program facilitated a connection between the mind and the body. Chewing slowly was a consistent message during the Education sessions and at meals. The counselors often led the campers to sing about chewing before meals. Set to the tune of 'Row, Row, Row Your Boat,' the campers sang: 'Chew, chew, chew your food/Slowly through your meal/ The more you chew, the less you eat/The better you will feel.'

The camp thus attempted to retrain the campers' sense of the mind-body connection so that they would eat less food and change their style of eating. Just as Wacquant's (2004) boxers trained to fight in strategic and purposeful ways that eventually became habitual and embodied, the campers learned that weight loss also requires a reciprocal mind-body connection. The program explained how weight management operates through physiological cues, such as hunger and fullness. The campers were then taught to use mental strategies to become aware of their body's cues. The program assumed that the children had been overeating because they were overriding their body's signals of fullness. Through the recalibration of hunger that occurred during their time at camp, the intent was that the body would feel better and send new signals to the brain. Specifically, both the mind and body would be more satisfied with less food and healthier types of food. The program introduced a new target of satiety, gave the body time to adjust, and trained the campers to view this new level of fullness to be desirable. While the campers participated in and largely enjoyed the taste tests, songs, and the hunger scale, these tactics still required their active negotiation as participants adopted new meanings related to hunger and navigated behaviors such as chewing slowly.

Substituting outcomes: Fitness or thinness? The second dimension of the body project that the camp attempted to instill in the children was the idea that physical fitness was an important outcome. The focus on health and fitness provided an alternative to dieting culture and an important coping strategy when confronted with the flaws of dieting. The high failure rate causes some people to reject the premises of dieting to lose weight altogether. The Health At Every Size (HAES) philosophy posits that people should focus on nutrition and exercise instead of attaining weight loss in order to fit medicalized BMI categories (Bacon, 2008; Blair and Church, 2004). Additionally, physical activity, whether one is pursuing weight reduction or size acceptance, denotes morality even if one does not attain the cultural body size ideal. In this section, I demonstrate that the meaning of body size at a weight loss camp – where the objective to attain a thin body may seem straightforward – required sophisticated negotiation and hedging techniques by both the program and its participants.

While acknowledging the importance of weight loss, the program directors introduced fitness as a simultaneous outcome. Unquestionably, the camp directors wanted the campers to attain *both* weight loss and fitness. However, in terms of attainability and morale, the benefits of emphasizing fitness proved important. The camp directors hedged when it came to saying that weight loss and becoming thin were the ultimate goals. They told the campers' parents that they believed people can be healthy at any weight, and they wanted to deemphasize weight. Instead, they encouraged campers to measure success in terms of how they felt, their energy levels, and fitness. Yet the camp went to great lengths to preserve their endorsement of the energy balance model. Even though they knew that caloric restriction and increased physical activity could not guarantee even short-term weight loss, they

still believed that the children should embrace this model and came up with other outcomes to justify it.

While fitness and weight loss can go hand in hand, the message about their relative importance and relationship was confusing at times. For example, a day before the first week's weigh in, Fay said the campers should not emphasize how much weight they lost, but rather how much their fitness had improved. She asked them how many pounds they thought people would lose. The campers guessed between one and six pounds. Then she said, 'Don't compare yourself to what others have lost, just focus on fitness. You can be fit and heavy. However, that doesn't mean it's ok to be heavy. You can still get diseases – not that you have diseases now but you can be at risk for them and it can become that way if you are overweight. But it is better if you are heavy and fit.' Here, Fay told them that being overweight is unhealthy, yet fitness is more important than weight loss. Thus, they should focus on fitness, not weight – but they should still try to lose weight. Fay encouraged them to focus on fitness as a dimension of health even if they were overweight. Here, we see an implicit bodily hierarchy emerge. Being thin and fit was at the top, and this was what the program believed should be their aspiration. However, the reality was that achieving thinness may be a long process and one that cannot be guaranteed. Therefore, the next best alternative was to be overweight and physically fit. The implication was that being overweight and unfit was unacceptable, so the campers had to meet one of these objectives as part of their body project at camp.

Additionally, while many of the campers were excited about aesthetic changes and weight loss, Fay often tried to shift their focus to subjective feelings which are internally defined and cannot be measured by others, such as energy levels and feeling 'good.' Invoking fitness and well-being points to the ancillary benefits of *pursuing* weight loss regardless of whether people actually lose weight. By focusing on changes other than weight loss, the camp associated implementing a body project with subjective frames that could be immediately deployed to raise spirits even when the camp's diet and exercise regimen failed to produce weight loss.

Resocialization through social control

Camp Odyssey believed that its effectiveness was largely rooted in the immersive environment that allowed children to 'recalibrate' their past habits. Self-control not only occurred through intentionally changing thought patterns, but it was also *experienced* through being part of a new environment. The immersive environment greatly contributed to the camp's resocialization effort. The camp philosophy was that resetting hunger, activity level, and tastes is easier without the temptations, distractions, and established routines of home. The hope was that when they returned home, their time at camp would have fundamentally reset who they were so that they would react differently to their former environment. This implies a view that self-control, once established, will transfer to other environments.

While the immersive environment of camp afforded recalibration of past habits, this also created reliance on social control mechanisms. The camp carefully controlled food options and portion sizes. Before every meal, the group formed a circle outside of the cafeteria to listen to announcements and sing the chewing song. Then, a counselor brought over a sample plate to show what foods they could eat and the appropriate portion sizes. During meals, counselors policed the salad bar and the entrée at the table. While the campers could serve themselves, they were not allowed to choose how much they served. Some complained, but they also became reliant on this guidance.

During free time, the counselors checked in with the campers about their eating and exercise habits. One counselor, Sam, had a reputation for interrogating the campers about their past habits at home and what they were doing at camp. While some of the campers were annoyed by his style, others recognized his function. When writing goals for home, a few girls talked about making a cut-out of Sam to watch over them while they eat at home. One suggested that they create a 'Sam-bot' that would robotically tell them what they should be eating and doing, and it would make them feel guilty. This exchange shows that the girls did not fully trust themselves to make food choices at home, and their behavior at camp was largely driven by staff surveillance rather than self-directed decision-making. In everyday life, self-control and social control do not occur as distinct processes but rather blend together as people make sense of their options and actions. Sam attempted to instill conscious decision-making and self-control, but the girls viewed his questioning as a form of social control rather than empowering them to make their own decisions. As Janet said, 'I wish there was a way that you could be *taught* personal pressure like that... this is a big thing, it doesn't improve your personal pressure to be looking at food and resist it if what's actually holding you back from the food is actually social pressure.' Here, Janet points out that the camp was not really teaching willpower so much as it was enforcing the children's 'choices' through social control.

Since campers did not choose what they were eating, the camp had complete control over providing only foods that fit with their nutritional model. Eating what was provided allowed the campers' tastes to be recalibrated by the camp environment, but this also meant that they did not make food-related decisions about cutting calories and restricting portions like they would if dieting at home. Within this environmental control, the children lost weight. However, the long-term prospects for self-change might be limited because their success was a product of a structured environment. While the children changed their habits at camp, these changes were linked to camp surveillance. When faced with a non-camp environment, their new habits were put to the test.

Testing the resocialization process

Reentry into the non-camp world was fraught with challenges. The contrast between controlled camp life and non-camp 'real' life was experienced for the

first time when the campers spent the day at a water park at the end of the second week. The camp director predicted that campers' choices at the waterpark would reveal how much they had changed, and she acknowledged that the campers often said the right things without actually believing or practicing it. The waterpark was an opportunity to test the effectiveness of the camp's resocialization efforts. Fay announced that the campers would be given $5 to spend at the waterpark and she reminded them to think about the hunger/fullness scale when they made their decision to spend the money on junk food. Then, Fay revisited the camp-sanctioned narrative about their changed habits and selves. She said that in past years kids came back to camp feeling ill due to eating junk food. She drew on the camp's resocialization strategies like the hunger scale and the embodied consequences of eating junk food. The camp narrative was meant to show the children that their tastes had been reset to the point that they would find their old eating habits and food choices unappealing.

When they returned from the waterpark, Fay met with the campers to discuss how they handled food at the water park. Some of the campers drew on the camp narrative that previously had been discussed. For example, Sarah said that she split cheese fries with three other people. Even though it was a small portion, she felt sick and it was 'just gross. I'm done with fries. My mouth felt greasy.' Ada said that the French fries did not taste as she expected. Fay replied, 'I'm not surprised because taste buds change.' Ada said the French fries are made to make you eat and she soon found herself hungry again which she described as a 'terrible feeling.' From the camp program's perspective, campers who expressed both mental and physical aversion to unhealthy food had successfully achieved resocialization.

For others, confronting food choices at the waterpark was a challenge. Ashley reported feeling 'weird' when she decided on ice cream and asked herself, 'Should I be eating something else? Nothing?' In direct violation of the camp narrative, a couple girls ate junk food despite not liking it. Kyra bought mini corn dogs that she did not like, but she ate them anyway. Jasmine ordered cheese fries and admitted that even though she didn't like it, 'I kept putting it in my mouth. The taste got stuck, and I couldn't stop.'

Every single camper ate some type of food at the park. Most of them used negative words like 'gross' or 'disgusting' to describe it. When campers expressed a neutral or positive reaction to the junk food, Fay disapproved because she wanted them to embrace the narrative that their tastes had changed and they did not like it anymore. The majority of the campers used the camp-approved narrative, indicating they now preferred healthy food and the camp lifestyle. However, not all campers said these things, and even those who did still ate junk food. The camp narrative was not completely preventative, especially for campers who continued to eat junk food that did not taste good.

The effectiveness of camp. The camp staff spent a great deal of time talking to the children about returning home. They put together a packet of materials that outlined many of the lessons for the children to take home with them. When parents

came to pick up their children on the last day of camp, they each had a sit-down meeting with one of the camp directors to go over their child's progress at camp and to highlight ways parents could support the transition to home. In the last days of camp, the staff helped campers to brainstorm strategies to deal with the most challenging aspects of returning home.

The returning campers shared similar stories about what it was like to go back home in past summers. Adam said, 'I made the changes but then I started going back to my old habits.' Janet explained that she 'fell off the wagon' after several months of watching what she ate because eventually she stopped caring and did not want to put the effort into buying and cooking healthy food. Mike recalled, 'It was like that last year. I had a lot of high hopes and expectations but by September I really felt that it might not happen and then by December thinking about camp and camp-related stuff was gone.'

While camp may not be able to compete with the home environment ultimately, it may provide a foundation for change in the future. The camp directors believed that they were planting seeds that could blossom later in life and that repeated experience at camp yielded the best outcomes. In order to fully change habits, repeated exposure to resocialization may be necessary. Shana had attended camp six times, and the staff touted her as a success story. In past years, she had been 30 to 50 pounds heavier whereas this year she was physically fit. The camp's messages had taken hold and shaped her. She said that attending camp eventually helped her to realize that 'I am the kind of person who should work out every day so I'm just going to do it.' Not only did Shana lose weight through repeated camp socialization, but she also adopted the tenets of being a 'certain kind of person' who is disciplined and takes personal responsibility for her weight and fitness.

Putting aside whether the children actually lose weight or can maintain weight loss when they return home, most of the campers enjoyed camp and pointed to a number of other benefits. With the exception of one boy who dealt with bouts of homesickness, the children were overwhelmingly enthusiastic about their time at camp. When I asked them what they liked about camp, many told me that it was 'fun.' Specifically, they liked swimming, the activities, and spending time with the other campers. A number of campers declared that being around other people who were trying to lose weight was the best part of camp. Derek explained that at camp, 'everyone came here for the same reason so it is different because no one really cares. You get to know people a lot more because you are with them 24/7 so [you become] closer friends.' He confided in people at camp about his weight and personal problems with his family. Being away from their families and peers gave them freedom from any prejudgments about who they were and being around similar others resulted in a more positive self-image, regardless of whether or how much actual weight was lost. Weight loss programs thus may provide a significant source of peer acceptance among children who share the same stigmatized identity. On the other hand, the program sent mixed messages, promoting both self-acceptance and body change. This weight loss environment sent the message that they had problematic bodies and they must change themselves in order to be happy in their lives

outside of camp. It is clear that the functions and consequences of children's participation in a weight loss camp are complex, and the ancillary features of implementing a body project are more prominent than whether weight loss is achieved and maintained.

Discussion

In this paper, I examined the content and processes of embodied resocialization that occur at the children's weight loss. I found that weight loss resocialization requires complex processes of conscious intent and direct learning as well as environmental recalibration to form new habits. At Camp Odyssey, the program camp engaged children in a body project and taught them new skills, knowledge, and habits related to nutrition, portion size, and physical activity. The program also provided an environment for children to reset the connection between their mind and body. Techniques aimed at getting children to recalibrate their hunger and use a different style of eating moved beyond the realm of intentional and strategic action to include embodied change.

In addition to these resocialization processes, social control mechanisms and an immersive environment at camp supported resocialization and weight loss in the short-term. Indeed, all campers lost weight. However, the long-term effectiveness of the camp's resocialization efforts is unlikely as evidenced by their brief encounters with the outside world during camp. When the children left camp for a waterpark excursion, it was clear that many could identify features of the resocialization in a camp-sanctioned narrative, but they found it difficult to enact these changes without the support and control of the camp. As the camp staff acknowledged, camp is not a 'magic bullet.' In order for weight loss to be maintained or continued, the resocialization process would have to be adopted by the home environment. The children may have acquired knowledge, achieved physical changes, and experienced a new way of being, but this is unlikely to be sustained without adults who continue the camp's resocialization techniques at home.

At Camp Odyssey, the staff and directors were genuinely concerned about the campers' well-being and did not engage in coercive or overtly shaming tactics. Daily interactions were positive, and the children had fun. In fact, the children pointed to a number of psychological benefits to the friendships they made at camp. Many of the campers felt bullied and insecure at school, so camp was a welcome social environment where they could relate to and be accepted by others. These positive aspects of camp suggest that children who struggle with body image benefit from being around similar others.

On the other hand, my research reveals that resocialization aimed at children contains a number of troubling components which reflect broader cultural tensions surrounding body weight. Endorsing children's weight loss reinforces the notion that in order to be happy and successful, one needs to be thin. The explicit intent of a weight loss camp may be to resocialize children's eating habits, but the implicit message is that children must change themselves – to become thinner through

consuming products and services, to feel inadequate in order to motivate a change of habits, and, if successful, to anxiously try to maintain any 'improvements' that occur. The focus on individual responsibility obscures how other factors may have more to do with the increase in the population's body size than the energy balance model would suggest.

Based on my observations and a growing body of research, it is clear that body weight is not only a result of excess calories, eating style, and physical activity (Friedman, 2003; Gard and Wright, 2005; Kolata, 2007). While those certainly play a role, much remains unanswered regarding why some people gain weight and others do not despite similar lifestyles. This points to the limitations of individual level blame and invites questioning the larger food system and environmental toxins that may contribute to childhood obesity (Guthman, 2011). Yet, regardless of how systemic or multi-faceted the cause of obesity truly is, the camp staff viewed weight as a matter of personal responsibility, and the children at the camp ultimately held themselves responsible for their weight. When the focus is on calorie counting, self-control, and healthism, the stigmatization of obesity persists while more systemic explanations and solutions are ignored. Food deserts and inequality were never discussed at camp. Food marketing to children and fast food were only referenced occasionally, and children were told that they had to come up with individual level strategies to resist these temptations. The children were not invited to think about the food system critically or to engage in systemic solutions such as writing letters to politicians or school officials to advocate for changes in marketing, reducing the availability of fast food, or eliminating vending machines in schools. As education about health, nutrition, fitness, and obesity via school and community outreach programs becomes more common, future research should examine the short-term and long-term effects of these resocialization attempts on self-esteem and body size.

Rather than instilling healthy habits through resocialization, the weight loss camp may have unintentionally set up the children to become lifelong cyclical dieters. While removing the children from their home environments and past habits was effective, it was also a short-term solution, and the children were likely to regain the weight upon their return home. This inadvertent yo-yo model of weight management is an unhealthy precedent to set. As obesity skeptics point out, losing and gaining weight may cause more health problems than being overweight (Campos, 2004). Further, moralistic undertones and contradictory messages about weight management are unfair to all dieters, but these are particularly burdensome for children. The camp continually told children to work on self-control when, in fact, their weight loss was due in large part to the social control of the camp environment. By teaching children to equate health and morality and sacrifice and self-esteem, the camp sent the message to children that the pursuit of dieting was a valuable – and value-laden – personality trait. Most troubling of all was the unfair burden on children to maintain the changes on their own at home while also socializing their adult family members.

The children themselves were caught in a bind in which they felt that being overweight was unhealthy and socially stigmatized. They viewed the weight loss camp as an agentic solution to resocialize their past eating and exercise habits so that they could feel better about themselves and fit in. Unfortunately, the 'success' of the camp in providing short-term weight loss and a self-esteem boost may have actually been its ultimate downfall. If the benefits of that environment cannot be transferred and sustained in the outside world, the children were not so much resocialized in terms of eating and exercise habits as it was that their previous socialization that problematized their weight in the first place was reinforced and magnified. The children were sent clear messages that being a good person and self-esteem were linked to pursuing weight loss. Adults may wish to protect children from suffering and harm, but it is difficult to know whether the well-intentioned cure is worse than the disease. As childhood obesity continues to make headlines as a leading contemporary social problem and intervention programs aimed at resocialization grow in popularity, it is more important than ever to increase our understanding of how problematic cultural meanings of the body influence children's lives.

Acknowledgements

The author thanks Donna Eder, Tim Hallett, Brent Harger, Emily Meanwell, and Martin Weinberg for their helpful comments on this paper.

Declaration of Conflicting Interests

The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

Funding

The author(s) received no financial support for the research, authorship, and/or publication of this article.

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