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Young girls' experiences of 'good' food imperatives in a working class school community: rethinking food desire?

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ABSTRACT

Education policy internationally positions schools as central sites of intervention on 'obesity epidemics', particularly in working class communities. This article presents a moral geographies approach which examines how such obesity-focused healthy food imperatives are experienced in specific places and times. The authors draw on data from a participatory photo mapping exercise with 11-year-old girls in a working class school setting in Ireland. Rather than focus on the girls' food consumption through classed, deficit-based discourses of individual restraint or pleasure, they consider their food desires to be an ethico-political force for connection, identification and potential reconstruction of what constitutes 'good' food. The participants were adept at performing officially 'good' food knowledge, but also constructed food-based identities and relationships that challenged prevailing, individualised imperatives to 'make healthy choices'. The findings underline the importance of critical pedagogies of food desire, which could engage factors such as the strengths of family and community food cultures.

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Introduction

Food education has become a ubiquitous feature of popular and policy discourse internationally in recent years, as reflected in the growing number of cookbooks, cookery programmes, community gardens and food blogs, but also in more traditional educational spaces, such as schools. While transformations in school food policy and curriculum are motivated by multiple interests, they are frequently driven by rising concerns about child obesity (Rich & Evans, 2015; Leahy & Pike, 2015; Leahy & Wright, 2016). For example, Ireland's Minister of State for Health Promotion, Catherine Byrne, speaking at the 2017 launch of the *New Healthy Eating Standards for School Meals* noted that 'preventing child obesity is a particular priority' of the government's *Healthy Ireland* initiative (Department of Health, 2017). Several scholars have critiqued the basis on which claims about a so-called 'obesity epidemic' are made (Coveney, 2006; Gard & Wright, 2005; Share & Share, 2017). Yet the idea that Western countries have a growing 'obesity problem' has had significant policy effects and shaped pedagogical interventions at schools (Leahy & Wright, 2016; Share & Strain, 2008).

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Research on child obesity and food consumption patterns has exposed the link between obesity and poverty (Beghin et al., 2014; Kelly, Callaghan, Molcho, Nic Gabhainn, & Alforque Thomas, 2019; Layte & McCrory, 2011), pointing to structural issues as key factors needing policy intervention. Yet internationally, policymakers typically favour promoting food self-regulation with schools, families and children associated with lower socio-economic status over examination of local geographies of available food and health inequalities (Lupton, 1995; Wright, Burrows & Rich, 2012; Rich, De Pian, & Francombe-Webb, 2015). Policy, organisational and pedagogical 'healthy eating' efforts include, for example, educational material aimed at influencing young people's food consumption and dietary knowledge (Leahy & Wright, 2016; Rich, 2010; Vander Schee & Gard, 2011), and interventions directed at governing the types of food provided within schools (Pike & Leahy, 2012).

Children and young people are highly aware of claims about healthy eating promulgated by public health campaigns, educational material at schools and popular and professional discourses that reiterate the 'key' recipes for 'health' (Burrows, Wright & McCormack, 2009; Beagan et al., 2017; Browne, Barron, Staines, & Sweeney, 2019). But there are unintended consequences to the deeply moralising nature of health and food messages for children and young people. Food policies and pedagogies, while setting out to cultivate decision-making skills, in practice often operate as imperatives, or calls for obedience (Leahy & Wright, 2016). Such messages and experiences are mediated by age but also 'body shape and size, and importantly by class, culture and gender' (Wright, Maher, & Tanner, 2015, p. 689). Research has exposed how health pedagogies are permeated by discourses of shame and disgust, and how children focus on individual bodies, and not wider social structures, as the locus of 'health' (Leahy, 2014; Burrows, Wright & McCormack, 2009). Shame and risk-laden regulatory dichotomies of healthy/unhealthy food and body size can promote 'negative and moralistic ways of thinking about the body' for children via school, peers, family, and wider media and public discourse (Wright & Halse, 2014, p. 839; Wright et al., 2015). At the same time, research with children shows there are often significant disjunctures between school regulatory messages, and the material, socio-cultural and affective relations of love and care characterising family food cultures (Fairbrother, Curtis, & Goyder, 2016; Maher et al., 2019). Class, gender and resource-based familial distinctions add to these dynamics, as children's food may be regarded more as a health project to be managed by middle class mothers, and more as a question of managing necessity in working class households (Cappellini, Harman, & Parsons, 2018).

While class categories alone do not predict children's perceptions of, or priorities around food and health, children in middle class schools may experience discussion of 'obesity' as something happening to (working class) 'others' that they should avoid, while in working class schools, children are more likely to experience these issues more personally, and more directly through health behaviour change strategies (Wright et al., 2015). Middle class young people may also be emboldened to view their healthy eating as morally superior (De Pian, 2012). The ways health imperatives are taken up, interpreted and enacted by children thus depends on their 'emplacement' (Wright et al., 2015). Drawing on a moral geographies approach that emphasises the significance of paying attention to the relationship between space, morality and power, our study asks: how are 'good' food imperatives present in school pedagogies and wider public discourse

experienced by young girls in a working class community in an Irish city? Exploring this question contributes to the literature by focusing on how the cultural, economic, social, political and spatial dimensions of apparently objective discourses (e.g. scientific ideas of nutritious food) shape, or fail to shape, subjectivities and how children *should* act – in embodied, place-specific ways. For example, Pike and Kelly's (2014) analysis of Jamie Oliver's campaigns for 'proper' school food demonstrates how such food imperatives assume and promote certain particular types of subjects. Our moral geographies approach is conceptually aligned with analysis of how school food biopedagogies form part of the wider governance of children's health (Leahy & Wright, 2016), but emphasises how imperatives are experienced both in and out of school contexts. In addition, we ask how ideas of food desire as a complex ethico-political force, rather than an appetite individuals should or should not have (Tuck, 2009), might help us to conceptualise and legitimise alternative, more nuanced and collective constructions of what is good and acceptable with respect to food and eating for children in this working class community.

The study is located within one all-girls primary school in a working class city neighbourhood in Ireland. We present here on in-depth data from place-based Participatory Photo Mapping (PPM) research conducted with the two 5th class (11- to 12-year-old) groups from the school. PPM methods enabled the generation of data that demonstrate children's rational knowledge of food, and offer layered insights into sensory experience and community knowledge, providing the means to reframe food desire as involving situated and complex forms of connection (Dennis, Gaulcher, Carpiano, & Brown, 2009; O'Connell, 2013). The collected data demonstrate our participants were adept at performing 'healthy food' knowledge, but their views and daily encounters with food simultaneously challenged prevailing, individualised policy and pedagogical narratives of 'making healthy food choices' which primarily frame food as 'nutrition' (Browne et al., 2019). The children's photographs and commentary foreground the diversity of food practices, motivations and associated forms of connection and identification held by children who are most likely to be the target of policies and pedagogies. We ultimately argue that shifting the predominant policy and pedagogy problematisation of children's desire away from individualised moralities of pleasure/dislike, restraint/indulgence and towards children's active multiple, situated food-related dis/identifications, belongings, exclusions and dis/connections challenges apparently objective, individualised notions of good food consumption.

Research context and approach

Ireland's schools operate in a policy context which shapes prevailing food knowledge and moralities through three key means: first, national health promotion and healthy eating curricula; second, school meals for disadvantaged schools; and, third, healthy lunch guidelines and programmes. As regards health education curricula, the subjects *Social, Personal and Health Education* (SPHE) at primary level, together with *Home Economics* at secondary level, cover the areas of healthy eating, the food pyramid, healthy lifestyle, body care, exercise, relaxation and diet. Unlike some countries where school food provision is universal (such as Finland or Sweden), the provision of school meals is not mandatory in Ireland and 'free' school meals are only available to students in schools designated as disadvantaged (DEIS schools).[1] Since 2017, new *Healthy Eating Standards*

for School Meals have sought to ensure the programme follows the national *Healthy Eating Guidelines*.

For those schools that do not provide free school meals, healthy lunch guidelines and programmes are considered a key element to promote healthy eating. Resources for writing these lunch-box guidelines are available from different sources (Department of Health and Children (DOHC), 2003; Healthy Food for All, 2009; Safefood, 2018). There are also initiatives such as the *Food Dudes* programme, introduced to primary schools on a phased basis since 2015 as Ireland's approach to delivering on the EU School Fruit and Vegetable Scheme.

The government's *Obesity Policy and Action Plan 2016–2025* (Department of Health, 2016) also includes provisions such as the introduction of a levy on sugar-sweetened drinks; restrictions on the advertising of energy-dense food and drinks to children; and the provision of potable water at schools. Restricting the opening of fast food businesses within close proximity to schools has also been discussed (Department of Environment, Community and Local Government, 2013, cited by Callaghan, Molcho, Nic Gabhainn, & Kelly, 2009, p. 154), and some applications for fast food retail outlets close to post-primary schools in Ireland have been revoked or refused. However, it is unclear whether these decisions were made on health grounds (Callaghan et al., 2015).

The findings presented here are part of a wider collaborative project led by two neighbouring, city-based all-girls primary and post-primary DEIS schools, in collaboration with the state school inspectorate, who play a role in informing education policy. We did not set out to conduct a study of young girls' experiences of food in a working class community. Rather, we were initially approached to evaluate a holistic wellbeing project the schools designed and won state funding for. The project included the implementation of cognitive, emotional and relationship skills programmes, such as the (Irish) Friends Programme[2] and the (Australian) Parents Plus Programme,[3] as well as the engagement of a nutritionist to teach about healthy food and food consumption. While we agreed as part of the project to develop a quantitative instrument (a health and wellbeing survey) to map the children's lives, we agreed to conduct the research on the basis that we primarily focus on generating knowledge of the girls' experiences of food consumption, community and school belonging, and online activity, in ways that could problematise survey questions and dominant health imperatives. The data analysed here focus on the girls' experiences of 'good' food imperatives, within their school and wider neighbourhood contexts.

Research approach: food desires

Dominant health promotion approaches often do not account for what Carolan (2011) describes as our bodies-in-the-world. Our understandings of the world are inextricably shaped by embodied, lived experience in particular places. Conscious of the dominant policy production of deficit-based accounts of communities' food consumption 'choices', we distance our study from what Tuck (2009) refers to as *damage centred research*: that is, research that invites disadvantaged communities to speak, but often only to speak from a place of lack. Instead, Tuck proposes to use *desire-based research* frameworks, which are 'concerned with understanding complexity, contradiction and the self-determination of lived lives' (Tuck, 2009, p. 416). This approach is aligned with Deleuzian ethico-political understandings of desire as a constantly shifting force-relationship (Deleuze & Guattari,

1987), rather than a solely individual appetite/pleasure, or lack thereof. Desire here is centrally involved with connection and vitality, moving 'between bodies, enabling connections and becomings' (Leahy & Malins, 2015, p. 401; Deleuze & Guattari, 1987). Desire, in the abstract, is neither good nor bad: 'it more closely matches the experiences of people who, at different points in a single day, reproduce, resist, are complicit in, rage against, celebrate, throw up hands/fists/towels, withdraw and participate in uneven social structures' (Tuck, 2009, p. 420). Such notions of desire – rather than individual pleasure – emphasise how participants' food relationships exceed the reproduction/resistance of official food imperatives. Desire materialises in the diverse, on-going connections bodies make, which may affirm or diminish their capacities for various, situated forms of growth (Youdell, 2011). Such growth is not reducible to regulatory, universal notions of 'healthy' child development (Kitching, 2020; Youdell & Lindley, 2019).

Participants

The participants for this study included students in two 5th classes (6th class, by the end of the data collection period, aged 11–12) from the all-girls primary school. In total, 39 girls participated in the research activities over a two-year period. The girls were predominantly white, working class, settled Irish, with a small number from minority ethnic (white Irish Traveller and mixed race) Irish backgrounds. At the outset of the project, we held an information session for all the parents as part of a community event introducing the schools' wider wellbeing programme. The girls were also briefed about the objectives and rationale of the project. This was followed up by an information and consent form, which was taken home and completed by both the students and their parent(s)/guardian-(s), separately. The consent form gave options to participate in all research activities, just some, or none, and to withdraw at any time. Ethical approval was obtained from our institution's Social Research Ethics Committee.

Methods

As a first step in the research process we collected some data via a survey. Questions sought information on everyday eating practices and knowledge of healthy and unhealthy food, as well as the girls' views on school food and the wider local food environment. Questionnaires were distributed and collected during February 2019. We obtained 37 out of 40 responses from the 5th class student cohorts in the primary school. But following O'Connell (2013), we would argue that surveys and even interviews about habitual practices of food consumption may fail to capture sensory, non-rational and material aspects of food and eating. These dimensions may nuance or contradict the textual data generated through survey and interview methods. We used photo elicitation, but combined it with walking methods, to capture how children experience food imperatives and desire beyond school and home in 'emplaced', or corporeally, spatially and temporally specific ways (Wright et al., 2015). This Participatory Photo Mapping (PPM) approach accesses visual, physical and narrative knowledge of place to privilege children's community knowledge. PPM methods have been used in US cities to explore children and young people's assessments of health, safety and opportunities for development in their neighbourhoods (Dennis et al., 2009; Teixeira & Gardner, 2017). Talking,

and taking photos while moving between the school, franchise supermarkets and cafes, as well as locally owned shops, and then discussing the photos and walks afterwards, offered interactive opportunities to explore where food-related experiences happen and what such experiences look and feel like (Dennis et al., 2009). This emplaced approach not only generated visual and verbal data regarding inconsistencies in the healthy/unhealthy meanings of food in school and other contexts (Maher et al., 2019); from a moral geographies perspective, it also allowed us to generate data on how the children felt they *should* act around food in specific places and times, and, as such, revealed their food-related desires to be highly social, organised and thus ethico-political, rather than apolitical, individual preferences that may/may not align with seemingly 'objective' health messages.

The use of PPM involved two phases: student-led neighbourhood tours incorporating researcher-led walking interviews and student-led photography (Phase I); and photo elicitation focus groups which further discussed the photos taken (Phase II). While this research activity was focused on gathering data about the wider school food and wellbeing environment, conversations about food and food pedagogies emerged regularly.

Phase I was undertaken with one of each 5th class group on the 4th and 5th of April 2019. Each class group was divided into three subgroups (by their teachers) with one researcher (Eluska, Karl or Deirdre) and another (non-teacher) member of school staff accompanying each subgroup. We explained the purpose of the exercise to students: to discuss and photograph what they understood 'healthy', 'safe' and 'child friendly' environments in the school neighbourhood to be. A template with 'things to watch out for' (such as healthy/unhealthy things to do in their neighbourhood; supermarkets and shops in the area; and places children go for food) was provided to scaffold the girls to take pictures of relevant places or items in the context of the purpose of the exercise. The physical limits of a one-hour outing were discussed with each of the groups, and disposable cameras and a map of the neighbourhood was provided along with the template.

The researchers tracked the shape of their walk on their phone and/or a paper map, and recorded conversations with the students on dictaphones. Students took pictures prompted by the ideas provided within the template and ticked corresponding boxes (not necessarily in that order). At the end of the PPM exercise a short open-ended questionnaire was distributed among students, which was later filled in class. Finally, soon after the exercise was completed, we reflected on the PPM exercise using an ethnographic diary.

Phase II took place on 12 and 13 June 2019 and it involved a photo elicitation exercise with each one of the groups. The photo elicitation method is underpinned by the idea that photographs contain meanings, which children have the ability to see, read, interpret or share (Cardellini, 2017). We engaged the girls in focus groups of four to five to discuss the developed photos and organise them under themes. Themes that they identified included: 'Places they like and hang out'; 'Things they don't like about their neighbourhood'; and 'Food' (including school food). One of these key themes, 'Food', and the discussions that emerged in its context, along with the data from the participatory photo mapping exercise, provided the data base for our analysis here (next section).

Data analysis

Our data analysis focused on the girls' knowledge, views and experiences of food in their own everyday lives and how these interact with school food imperatives. PPM walk conversations and photo elicitation focus groups were transcribed, and each transcript and accompanying fieldwork notes were read several times. Given the fact that we did not have very frequent engagements with the girls, we could not attribute individual voices on the walking interview transcripts. A thematic analysis, focused on identifying codes in transcripts, fieldnotes and photos, and grouping these under emerging themes, was used (Braun & Clarke, 2006). Two main themes were eventually identified: the performance of knowledge about good and bad foods within the context of the school, home and local food outlets; and embodied experiences of school food and food guidelines, as well as everyday food pleasure.

Findings

Performing food knowledge: 'Mayonnaise is so unhealthy'

Reflecting wider policy trends, the girls' primary school had become increasingly concerned with students' food literacy and health education. Aligned with the national curriculum, the aforementioned health and wellbeing project taught lessons on healthy eating, the food pyramid, shopping for healthy options, planning a menu and reading food labels. Posters displaying sugar content experiments and unhealthy vs. healthy food images hung in school corridors. These practices reflected wider health promotion approaches that emphasise the need to educate students on certain nutritional knowledges and skills that will enable them to make healthy food choices (Leahy & Wright, 2016). Unsurprisingly, given the importance of family eating to children's concepts of food, the girls also referenced parents' requests not to spend money on unhealthy foods, as well their favourite home-cooked meals and parents' (especially mothers') cooking skills during the research process.

Results from the survey and the PPM exercise draw attention to the girls' complex, everyday negotiation of food consumption subjectivities, reinforcing Tuck's (2009) point about desire, i.e. the girls were involved in reproducing, resisting, being complicit in, withdrawing from and participating in healthy food imperatives and the consumption of 'unhealthy' food. Through the survey, a consistent majority indicated knowledge of and alignment with normatively 'good' food consumption practices. For example, the majority reported having breakfast every day, drinking water or juice, and all readily named examples of 'healthy' and 'unhealthy' food. Just under half of the participants also stated they ate in a fast food restaurant once or twice a week; 41% felt there was not enough healthy food in the community; and products most commonly ranked as 'very available' were biscuits, chocolate, crisps and fizzy drinks.

Knowledge of food learnt at school was something the girls were eager to share with us, both at school and in our visits to key local sites of food consumption. The latter included an internationally known, low-cost supermarket franchise, a long-established convenience store ('Mike's') whose owner was well known by many of the girls, and an international franchise coffee shop. Checking the sugar content on product labels – something they learned to do at school – was a key way the girls evaluated and presented 'healthy' and 'unhealthy' food to us in the supermarket. As one of the students explained:

We were testing how much sugar there's in cereals and some of them were shocking, because they have like 16 spoonfuls of sugar in like 30 gms.

So, the worst were?

Golden nuggets.

So which ones were the healthy cereals? Or are there any?

Rice Krispies and Weetabix.

And did that make you think a bit about what you eat in the mornings?

I eat porridge.

(Deirdre's group, PPM, 4 April)

They also repeatedly pointed to products such as white bread and mayonnaise as unhealthy, describing the various ways companies try to trick their customers into buying them, for example by replacing the word 'sugar' with more technical terms.

And some shops are trying to trick us as well, you know, the labelling information? Some shops are trying to trick us, because there are different names for sugar.

Ah.

There's deglotised glucose. Lots of weird names.

(Eluska's group, PPM, 4 April)

These girls' understandings of what constitutes unhealthy foods, while often framed as something they had discussed at school, was also influenced by the more relational contexts of home and family, e.g. parental knowledge and everyday life interactions with (ill)health (Maher et al., 2019). As one of the girls explained during one of the walks, 'sugar leads to diabetes, and my nan died from diabetes' (Karl's group, PPM, 4 April). Another student, while exploring the large local supermarket, wanted to highlight how unhealthy mayonnaise was through a photo (see Figure 1):

Mayonnaise is so unhealthy.

Tell me, why is mayonnaise so unhealthy?

It has lots of sugar and lots of like sweeteners and things inside it.

Do you know that from school or . . . ?

I know that because my mum, she was in the doctors, and she used to get like constant pains around her bowels, and they were telling her, are you eating mayo? And she said, yeah, and they said stop eating it because that's what caused it.

Oh my god.

Because she loves mayonnaise.

(Eluska's group, PPM, 4 April)

Drawing on our survey and research activities, and echoing national and international research (Beagan et al., 2017; Fitzgerald, Heary, Nixon, & Kelly, 2010; Leahy & Wright,



Figure 1. Displaying 'shock' at mayonnaise ingredients.

2016), our research suggests that these girls were highly aware of dominant health messages around what are commonly defined as healthy foods and unhealthy foods, with particular reference to sugar content. Healthy foods included vegetables, fruit and brown bread; unhealthy foods included sweets, donuts, crisps, fizzy drinks, fast food and take-away food.

But while the girls were incited as part of the research to perform 'good' food knowledge, many simultaneously acknowledged the pulls and pleasures of a range of self-driven eating practices constituted as unhealthy. One of the ways that practices such as eating sweets were reconciled was to argue that in fact 'everything has sugar' and that there is no escaping it:

> But like would all that information about sugar and about fat and whatever, would that put you off?
>
> No.
>
> No. Okay.
>
> And fruit has sugar too.
>
> It does, you're right.

Everything has sugar.

…

What are you looking for Sharon? (Sharon, not her real name, looks at the ingredients listed on a ready-made salad)

Sugar.

Is there sugar in the salad?

Yeah, there's sugar in everything.

Is there?

Yeah. There it is. Here's the sugar. It's 12.2.

Oh yeah.

(Karl's group, PPM, 5 April)

Checking labels and 'choosing wisely' was something that these girls learnt to do at school, but often did not do outside of school and when using their own money. In fact, some appeared unfazed by governing attempts of 'good' food imperatives and did not identify with them. For example, when asked, 'so would you check the labels, now that you know a little more about it?' one girl replied 'not really' (Deirdre's group, PPM, April 4). Elsewhere:

I heard like you're learning a lot about sugar and how much sugar is in stuff?

Yeah, but we still eat it.

Would that make a difference to …

No.

… whether you eat stuff or not?

No.

No.

No.

I'll still eat it.

But like would all that information about sugar and about fat and whatever, would that put you off?

No.

No. Okay.

(Karl's group, PPM, 5 April)

Echoing Cappellini et al.'s (2018) analysis of classed mothering practices, the girls indicated relative autonomy from adults in consuming products from these sites, based on small amounts of pocket money or gifts they received from parents and extended

family. Many demonstrated a sophisticated knowledge of, and identification with, foods and sites they could engage with outside of their parents' control and with limited available means. For example, the biggest supermarket in the neighbourhood was very popular among certain girls when they wanted to get a hot chocolate, since they could get it for only one euro, as well as cookies and donuts, which were 'so cheap … they really are tempting to buy them' (Eluska's group, PPM, 4 April). Choices about where and what to eat were often made based on prices and staff friendliness to their social groups. Some indicated affection for Mike who owned the local shop: 'Mike's is such a good shop because Mike is so nice' (Deirdre's group B, Photo Elicitation, 12 June). By contrast, while some enjoyed the local coffee franchise, it was not consistently friendly: 'sometimes it's annoying … they ask you to get up … and don't get me started on Starbucks … the last day they threw me out' (Eluska's group B, Photo Elicitation, 12 June). McDonalds, located in the adjacent neighbourhood near Starbucks, was often preferred by some because it is cheaper than, for example, Costa, the only café in their neighbourhood – 'I don't like it there. It's very expensive' (Deirdre's group, PPM, 4 April). In terms of these girls' own food purchases, unhealthy food was cheaper, affordable and sometimes even free. As one of the girls requested during a walk, 'can you bring me to MacDonald's because I won a free Sausage and Egg McMuffin yesterday?' (Karl's group, PPM, 5 April). According to some of these girls, even the local convenience store 'they give you free deli food because it's gone off' (Eluska's group B, Photo Elicitation, 12 June).

Consuming food as pedagogy and food as pleasure: 'Sweets are my boyfriend'

> I thought you got lunch from the school; do you bring your own lunch?
>
> Yeah.
>
> We get lunch from the school and we get our own lunch from home.
>
> So, you have two lunches.
>
> Yeah.
>
> (Eluska's group B, Photo Elicitation, 12 June)

As is the norm in DEIS schools, the school supplied their students with a free school meal, which normally consists of a filled sandwich/roll, and two other items such as fruit or milk. But as reflected here, most of the girls complemented their school lunch with additional food brought from home. Our photo elicitation group discussions provided an opportunity for these students to discuss their views on school food and lunch-box guidelines, and to indicate why they supplemented or replaced school food with their own food. Notably, students had their lunch with them and ate it when some of these group discussions were taking place.

Reflecting wider school food policy developments, the lunch box was a key site of school intervention. Supported by a set of guidelines around what the lunch box can and should not contain, this is also a space whereby students (and their parents, especially, mothers) had been enlisted to give effect to certain health/food imperatives.

> And do you have any guidance on what you can bring to school or … ?

We're not allowed chocolate or sweets.

We used to get Nutella on our sandwiches when we were in Juniors and we used to get apple juice and orange juice but now we don't anymore.

We used to call it bread and butter.

(Eluska's group B, Photo Elicitation, 12 June)

There was also some evidence of resistance to these restrictions, either in the form of disagreement with some of them, or in the form of non-compliance. As some of the girls admitted, 'We all bring in chocolate even though we're not allowed'; 'You should be allowed like two treats'; 'We're not allowed Frubes, yoghurts' (Eluska's group A, Photo Elicitation, 13 June).

The survey indicated most felt consulted on the 'healthy' meals provided by the school. This may be because the catering service in charge of school food provides an online questionnaire where children with their families can choose from a number of options. But when it came to discussing lunch-box guidelines, the girls often drew attention to inconsistencies and arbitrary rules within them, stating, for example, 'We're allowed Capri Suns, but we're not allowed Frubes' (Eluska's group A, Photo Elicitation, 13 June). They also highlighted how the school could provide unhealthy food: 'We got ice-cream before in school' and 'We got Apache [pizza] before. We got Apache for choir' (Karl's group, PPM, 5 April). The lack of consultation on 'non-school food' appeared to be something that was resented, although not entirely unexpected.

Perhaps most significantly, smell, taste, texture and appearance are key dimensions of food and eating, and they are reflected in the central role of sensory experiences, identity formation and desire in these girls' daily lives. It appeared that many did not enjoy the food provided at school, one of the likely reasons why most of them brought their own lunch. Students talked about school food as something that 'it just tastes like, almost like it's manufactured', 'factory made', 'weird', that 'comes in plastic' and 'it's rubber'. By contrast, on entering the supermarket during our walk (Figure 2), some were drawn to, and pointed out, what you experience even before you step inside: the smell of 'donuts and bread' and 'hot chocolate'.

Let's stay together, ok?

Mmmmmmmm the smell!

It's nice, isn't it?

I usually get the pain au chocolat or the pretzel.

Ooooh the bread!

(Karl's group, PPM, 4 April)

Alongside pleasurable smells and appearances, tastes were key to the ways in which food was enthusiastically discussed. Some defined themselves explicitly as having a relationship with food in these terms, emphasising the ways in which they used food meanings and values to form identities.

Why do you think you like sweets so much?



Figure 2. Baked goods at the supermarket entrance ranging from 39 to 89 cents each.

Cause they taste amazing.

Because they taste, they taste like glory.

They taste like heaven.

So how do you reconcile it with what they teach you at school about sugar?

It's yummy.

It's my boyfriend. Sweets are my boyfriend.

(Eluska's group, PPM, 5 April)

Underlining the significance of food meanings to creating identities, these and many more ways of describing food as 'lovely', 'my best friend' or even 'food is just my life' (Eluska's group B, Photo Elicitation, 13 June), contrast with how food was usually discussed at school and in official health promotion contexts.

Discussion of findings

These girls' perspectives and experiences raise important questions regarding how the implicit moralities of 'good' and 'healthy' food translate in specific child and community cultures. Conscious of disadvantages faced by the community and engaging a nutritionist, the school aimed to promote healthy eating in deliberate and effortful ways. School staff clearly cared about these girls and their families and, for example, recently decided to introduce hot meals once a week in the following academic year despite limited resources. But, from a moral geographies and desire-based perspective, structural, relational and material aspects of the children's social world interact with, rather than being supplanted by, educational imperatives and implicit, official moralities of what 'should' be consumed. Their experience was not a matter of reproducing good food imperatives or resisting, by indulging pleasures. Rather, their connections and identification with food (i.e. their food desires) were diverse, and mediated by economic, cultural and political relations.

Not only were these participants aware of what constituted normatively healthy food, they were also aware that their wider food environment was characterised by misleading products which pose a threat to their wider family's health. As such, they were capable of connecting to food imperatives differently, ethico-politically reframing what they 'should' eat in a way that articulated the context of class inequality. At the same time, they actively disconnected from the very skill of reading food labels, most probably because its rationalist and individualised approach to 'being healthy' did not entirely translate to their resource and cultural context. Prices and feeling welcome at food sites also mattered for what and where to eat in ways that are not likely to affect middle class children to the same extent, as shown elsewhere (Wills et al., 2016; Wills, Danesi, Kaptanaki, & Hamilton, 2018). Importantly, available, accessible and inexpensive food was used more to negotiate growing up and form local identities and relationships than as a tool to practice individualised self-surveillance. Label reading amongst children was unlikely to make sense, for example, when buying sweets in Mike's shop, or when meeting friends at McDonald's. A significant amount of research exists on the ways

teen middle and working class girls in different locales experience their bodies through enormous media and public policy pressures to self-regulate their appearance and weight (Rich & Evans, 2008). But this work and our own also indicates, in light of the socio-economic and cultural abjection often facing working class girls, that some 'might actually be better at protecting their mental health by refusing to turn in on and govern themselves' (Hey, 2010, p. 217). Furthermore, it makes sense to do so in welcoming environments, places such as Mike's shop, where these girls meet to bond and socialise. While further research is necessary, our data indicate the sidestepping of health guidelines in specific child cultures could be considered as an ethico-political reconstruction of what is 'moral' and 'good' about food in a way that prioritises its socially and culturally protective elements over negative physical effects.

The findings underline the importance of critically negotiating children's food desires through policies and pedagogies that are situated in social, cultural and material contexts, and that recognise children's activity beyond the formal structures of school in finding meaning through food consumption (Horgan, Forde, Martin, & Parks, 2017). At school, food is framed within abstracted, one-size-fits-all 'health' principles. Public health discourses tend to emphasise nutritional values, moderation and control (Thompson & Coveney, 2018), and as a result, during school lessons food pleasure is often treated with suspicion, as something that undermines self-control. Yet according to our study, food is a key source of pleasure for children (Rozin, Fischler, Imada, Sarubin, & Wrzesniewski, 1999; Thompson & Coveney, 2018). Stevenson, Doherty, Barnett, Muldom, and Trew (2007) and Fitzgerald et al.'s (2010) studies also found that food aesthetics in term of taste, texture, appearance and smell were central to young people's relationships with food. These points emphasise the need to rethink current school practices and approaches that consist of 'teaching' about food and nutrition, often ignoring pleasure, connection, and the sensory and social aspects of eating. Thompson and Coveney (2018), Pike and Kelly (2014) and Rich and Evans (2015) have also highlighted that unless pleasures as an aspect of embodiment are more centrally registered in pedagogical relationships, then we will fail to understand the relationship between learning and embodiment. However, conscious of the socio-economic factors mediating children's food desire, it is necessary to avoid falling into the trap of focusing on individual pleasure at the expense of examining food desire as a collective, dynamic set of dis/connections between bodies, which has ethico-political potential to offer new and alternative understandings of food experience (Malins, 2017).

Ultimately, our findings echo the need for inclusive approaches to school food policies and pedagogies. Andersen, Baarts, and Holm's (2017) study draws attention to three key elements of ideal approaches to food education: participation in taste lessons; joyful experiences in taste formation; and active involvement where students feel acknowledged as key and valued participants. These three elements emphasise the importance of participation and 'learning by doing'. In addition, young people are less likely to take school food messages seriously and change their practices if they are not actively involved in the decisions about what they can eat. For example, research in the UK shows that young people are less likely to eat the food provided by school if they have not been consulted about changes to the menu or dining environment (Wills, Danesi, & Kapetanaki, 2016). Even those who are eligible for free school meals may avoid eating in school and purchase additional food or drink from the commercial environment (Wills et al., 2018). Despite the provision of free school meals, many of our participants brought their own lunches from home. Possible unintended consequences in the

context of lunch-box guidelines and restrictions are that children may end up developing 'disembodied health compliance (or defiance) rather than embodied health competency' (Torslev, Norredam, & Vitus, 2017, p. 604). We would add however, that these points about policy and pedagogy must not neglect the material, social and cultural elements of food identity and relationships specific to local child as well as wider community cultures.

Conclusions

At the outset we noted that, while child obesity is frequently characterised as an issue of health inequality, policy interventions often focus on promoting self-regulation with schools, families and individuals. The embodied ways in which the girls in this study experience food policy imperatives dispute some of the underlying assumptions that often underpin deficit food education frameworks. Participants in this study were aware of healthy eating messages, and knew when, where and with whom to perform 'healthy food' knowledge. But their views and daily encounters with food also challenged dominant, abstract and individualised framings of food education as a matter of upskilling and restraint. In a damage-based framework (Tuck, 2009) one might question why, when provided with healthy eating knowledge and options, working class young people may resist, contest or disregard official discourses, or indeed, one might deduce that they may be pliant to corporate power; in a desire-based framework, what these girls' lived experiences with food highlight is the idea of complex personhood, lives and contexts.

Rethinking food-related desire ethico-politically, as an organised force for potential identification and connection, can help legitimise alternative, collective constructions of what is good and acceptable with respect to food and eating, where the experiences, resources and caring practices of children and working class communities are meaningfully foregrounded. These girls' stories provide strong grounds to favour critical pedagogies of food consumption, which sensitively engage structural factors that underpin (un)healthy eating practices, including the geographies of available food, the crucial centrality of family and community relationships, and children's pursuit of pleasure, in shaping their food practices. As such, food education needs to engage children's positioning as productive consumers (or 'prosumers') of both official food imperatives and food marketing (Sparrman, 2015). Policy responses need to move away from notions of individual restraint, and towards viewing food meanings and values as resources for children to create complex identities and relationships with the world.

Notes

1. Unlike some other countries where schools provide hot meals, in Ireland, free school lunches are usually made up of a filled sandwich/roll, plus two other items such as fruit or milk. However, 36 schools (DEIS and non-DEIS) were selected for a hot meals pilot during the 2019–20 academic year (Conway, 2019).
2. The Friends Programme is a school-based anxiety prevention and resilience building programme developed by Dr Paula Barrett in Australia.
3. The Parents Plus programme, developed by Dr John Sharry and Prof. Carol Fitzpatrick, is a parenting course that focuses on developing a positive relationship between parents and children.

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