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Governing through choice: Food labels and the confluence of food industry and public health discourse to create 'healthy consumers'

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Abstract

Food industry and public health representatives are often in conflict, particularly over food labelling policies and regulation. Food corporations are suspicious of regulated labels and perceive them as a threat to free market enterprise, opting instead for voluntary labels. Public health and consumer groups, in contrast, argue that regulated and easy-to-read labels are essential for consumers to exercise autonomy and make healthy choices in the face of food industry marketing. Although public health and food industry have distinct interests and objectives, I argue that both contribute to the creation of the food label as a governmental strategy that depends on free-market logics to secure individual and population health. While criticism of 'Big Food' has become a growth industry in academic publishing and research, wider critique is needed that also includes the activities of public health. Such a critique needs to address the normalizing effect of neoliberal governmentality within which both the food industry and public health operate to reinforce individuals as 'healthy consumers'. Drawing on Michel Foucault's lectures at the Collège de France, I examine the food label through the lens of governmentality. I argue that the rationale operating through the food label combines nutrition science and free-market logics to normalize subjects as responsible for their own health and reinforces the idea of consumption as a means to secure population health from diet-related chronic diseases.

Introduction

Widespread concern over the association between food choice and chronic disease has led to a flurry of policies and strategies attempting to alter population-eating habits. These include: fat taxes, sugar taxes, serving-size restrictions, and subsidies for fresh fruit and vegetables. Although these proposals have attracted some support in different political contexts, none have achieved long-term implementation. The highly publicized world-first fat tax in Denmark was abolished in 2012 owing to concerns over negative economic effects (Snowdon, 2013). The introduction of a law limiting the sale of large sugary drinks by New York's Mayor Michael Bloomberg was fiercely protested by the American Beverage Association and ultimately struck down by the State Supreme Court (Grynbaum,

2013). The difficulty of implementing taxes or restrictions is partly explained by the influence of neoliberal ideas of the free market and personal responsibility in many Western democracies.

The governance of chronic disease related to food choice represents a unique problem for neoliberalism. The food and beverage industry is a significant player in the global market and important for national economic security (Department of Foreign Affairs and Trade, 2008); Enterprise and Industry, 2012; Office of Health and Consumer Goods, 2012), yet food is also intrinsic to the life and health of populations. A number of commentators suggest that the 'market success' of cheap processed food has led to the 'public health disaster' of an increase in incidence of heart disease and type 2 diabetes (Popkin and Nielsen, 2003; Brownell, 2004; Drewnowski, 2004; Patel, 2009). Public health advocates argue that elected officials and government departments need to intervene in the market to prevent obesity and diet-related diseases (Brownell and Warner, 2009; Baum, 2011; Mayor, 2011; Stuckler and Nestle, 2012). However, direct government interventions such as those in Denmark or New York betray neoliberal ideas of free markets, free choice and personal responsibility (Mares, 2011; Secretary of State for Health, 2010).

Into this situation enters the food label. The label does not directly intervene in the market but provides nutritional information about food items. Despite heated debate over the presentation of the information, there is near universal agreement that more information is a good thing. Ethicists argue food labels are good for autonomy (Zwart, 2000); public health nutritionists contend labels are good for promoting healthier diets (Campos et al , 2011); consumer groups maintain labels that make healthy choices easier (CHOICE, 2011); celebrity chefs, such as Jamie Oliver, say labels are good for empowering healthy cooking and eating (Jamie Oliver's Food Revolution, 2014); the First Lady, Michelle Obama, believes labels are good for parents and children (Office of the First Lady, 2010); and some of the biggest food corporations and trade associations in the world agree, food labels are good for consumer choice (Grocery Manufacturers Association, 2011; American Beverage Association, 2014; Australian Food and Grocery Council, 2011).

To be sure, there are ongoing hostilities among food and beverage industry representatives, public health advocates, consumer groups and health authorities in Australia, the United States, the United Kingdom and Europe (Lawrence, 2004; Silverglade and Heller, 2010; Corporate Europe Observatory, 2010). These disagreements have been analysed in the media (A.A.P., 2011; Emanuel, 2012; Peacock, 2011), and also in critical public health and health policy literatures (Nestle, 2007; Farley et al , 2009; Brownell et al , 2010; Campos et al , 2011; Freedhoff and Hébert, 2011; Dorfman et al , 2012; Méjean et al , 2014). Research into industry's attempts to undermine food labelling policy processes is important for maintaining the integrity of democratic health policies and agencies. However, the focus of this article is not on the disagreements between industry and public health over label content, but the way the neoliberal context provides the conditions for a general agreement that more nutritional information for consumers is a good thing.

Using Michel Foucault's analyses of neoliberal governmentality, this article examines the effect of agreement that food labels are important for consumer health. Over the past 30 years Foucault's monographs on discipline, sexuality and care of the self have influenced sociologists and social theorists examining health, food and the body in late-modernity (Lupton, 1995; Petersen and Bunton, 1997; Rose, 1994; Coveney, 1998). However, a distinctive feature of this article is the use of the recent publication of Foucault's lectures from the Collège de France , which have received minimal attention in social theory and health literatures addressing food (Guthman, 2008; Henderson et al , 2009; Frohlich, 2010). Foucault's lectures not only serve to sharpen conceptual

tools dulled by overuse, but also provide an opportunity to discover new theoretical approaches. According to Sam Binkley, the 'availability of these lectures in English over the past decade has set in motion intellectual currents ... dealing with governmentality, biopolitics, and practices of subjectivation' (Binkley and Capetillo-Ponce, 2010, p. xv). This article draws on these lectures to explore the neoliberal governmental rationale operating through the food label to normalize subjects as responsible for health via consumer choice, while eliding the social determinants of health antecedent to choice.

Three parts structure this article. First, I outline the relevant features of Foucault's analysis of neoliberal governmentality. Second, I sketch a history of nutrition science and the confluence of food industry, public health, and government health agencies in creating and promoting the food label as a consumer guide. Finally, I offer a critique of the normalizing effect of neoliberal governmentality that conceives of health as determined by consumer choice and food as defined by its nutritional value.

Governing through freedom towards security: Food labels as an apparatus of neoliberal governmentality

The analytic lens used in this article is drawn from Foucault's lectures on governmentality (2007). The publication of his lectures and interviews present an opportunity to refine and develop analytic tools. Binkley argues, 'the Foucault for the 21st Century might be one culled from entirely different sources than that of the 20th Century' (Binkley and Capetillo-Ponce, 2010, p. xiv). Although sketches of governmentality and biopolitics were present in Foucault's monographs and interviews published in the 1980s, the lectures, according to Lois McNay, 'give greater depth and nuance' (McNay, 2009). Furthermore, the Birth of Biopolitics lectures 'takes Foucault's analysis onto new ground' (McNay, 2009, p. 56) that was not present in his monographs.

In these lectures, Foucault examines the art or rationality of government in a non-statist sense (2007, p. 120). Government in this sense is not defined by a political structure, such as the Federal Government of the United States, but government as an activity, practice and relation. A primary theme of governmentality important for this article is the conduct of conduct or 'action upon an action' (Foucault, 1983, p. 220). To conduct the conduct of individuals, communities or populations 'is not a matter of imposing a law' but employing tactics to arrange 'things so that this or that end may be achieved through a certain number of means' (Foucault, 2007, p. 99). This is not to imply that the law and State are redundant. In examining the tactics that conduct, Foucault is less interested in the decrees issuing from a sovereign or laws territorialized in the State, and more focused on the practice of government that guide the individual and the population - 'the one and the many' (2000c) - through techniques and strategies that operate continually, yet at a distance (Barry et al, 1996).

Three features of governmentality and the conduct of conduct are central for the analysis of the food label: (i) freedom as the condition of governing well; (ii) security as its objective; and (iii) the neoliberal subject as its product. According to Foucault the 'fundamental objective of governmentality will be mechanisms of security' and 'a condition of governing well is that freedom, or certain forms of freedom, are really respected' (2007, p. 353). Freedom establishes a new set of relationships between individuals, the market and society that enable governmental practices to operate through freedom, not in conflict with freedom. Nikolas Rose writes that freedom in this

context provides 'the grounds upon which government must enact its practices for the conduct of conduct' (1994, p. 11). Freedom conditions the mobilization of mechanisms of security. These mechanisms of security multiply and reframe law and disciplinary techniques towards the objectives of security by manipulating the environment and enabling the governance of the neoliberal subject, homo oeconomicus, to make choices that secure the population (Foucault, 2007, p. 9). The mobilization of laws as tactics in the conduction of homo oeconomicus's capacity to choose is evident in the governance of food and health via consumer-focused labels rather industry-focused bans or taxes.

Strategies of neoliberal governance are motivated by a biopolitical interest in securing the health and life of the population (Foucault, 2000a, 1998, p. 138ff.). Foucault's emphasis on governing through choice and freedom is conditioned by responsibility and security (Mayes, forthcoming). The responsible investor is not only the good citizen that secures their own future but also one who becomes 'an active agent in the provision of security' for the wider population (Rose, 1994, p. 166). The objective of securing the health of the population is achieved by modifying the environment in which the entrepreneurial subject, or homo oeconomicus, chooses and is made responsible for those choices.

Homo oeconomicus is the central point of reference in neoliberal governmentality (Lemke, 2001, p. 200). Foucault describes homo oeconomicus as 'someone who is eminently governable' (2008, p. 270). In contrast to the freedom of classical liberalism, where homo oeconomicus has an intrinsic and natural freedom that limits the activities of the State or others (Lemke, 2001, p. 200), the neoliberal subject has an entrepreneurial freedom of choice that is used to govern.

Entrepreneurial freedom is conceived through Gary Becker's human capital theory (Lemke, 2001, p. 199; Foucault, 2008, p. 226), which transforms human labour from something exchanged for a wage or embedded in the production of a commodity into a 'subjective choice' made by the labourer (Dilts, 2011, p. 135). Rather than exchange labour for a wage, the subject invests their human capital in order to receive an income. By reconceiving the subject as an entrepreneur of his or herself, all choices and activities of life, not just labour, are transformed into investments and incomes that 'may or may not improve human capital' (Foucault, 2008, p. 230). In rethinking the subject as an entrepreneur who is free to choose to invest in their self, neoliberal homo oeconomicus becomes governable through systematic 'modifications in the variables of the environment' (Gordon, 1991, p. 43; Foucault, 2008, p. 270).

A recent manifestation of techniques used to modify neoliberal homo oeconomicus's environment is the behavioural economics of Richard Thaler and Cass Sunstein, which has been adopted in health policies of the Obama Administration and Cameron Government (McSmith, 2010). According to Thaler and Sunstein a choice architect designs the choice environment in such a way that individuals make the 'right' or 'best' choice with the least amount of resistance. The choice architect guides 'behaviour in a predictable way without forbidding any options or significantly changing their economic incentives' (Thaler and Sunstein, 2009, p. 6).¹ In this sense, neoliberal homo oeconomicus is governed by his or her freedom to choose, invest and act in an environment that is 'artificially arranged' (Lemke, 2001, p. 200) to conduct their conduct towards the ends of neoliberal notions of security and population health (Elbe, 2010).

With this theoretical scaffold in mind, I contend that food labels emerge as a neoliberal tactic of governance. The food label is situated at the nexus of population health (security) and the market (free choice), and functions to guide individuals to make healthy self-investments or choices. The discourse of food choice and tactic of the label construct the subject as a 'healthy consumer' responsible for population health and security. Even though there is disagreement about the design, I argue below that both public health and food industry representatives are significant architects of the food choice environment and are anxious that this environment encourages consumers to make the 'right' choices.

Need for labels: A select history of labelling and the medicalization of food

But what exactly is a food label? And how did it become so important? Bruce Silverglade and Ilene Heller from the Center for Science in the Public Interest describe the food package and labels as a chaotic mix of information pertaining to health and nutrition that has the potential to mislead and confuse consumers (2010). Silverglad and Heller identify three features of the food package: nutrition facts panel, health-claims and front-of-pack (FOP) label. The nutrition facts panel quantifies the nutritional content of the product, including calories, fat, protein, sodium and so on. Health claims are used on packaging to inform consumers of the health promoting or disease preventing features of the product. FOP labels attempt to assist consumers to interpret the nutrition facts panel by providing easy to read, often colour-coded, summaries of the recommended daily intake percentage of a certain component of the food. FOP labels are the source of much debate between regulatory agencies, public health advocates and corporations.

To understand the emergence of this 'chaotic mix' of food labelling information, this section traces certain historical developments in nutrition science and public health that have influenced the medicalization of food. This is not an exhaustive history, but a sketch of the way nutrition science terminology has been introduced into the public lexicon over the past 100 years via dietary guidelines, food industry marketing and public health campaigns. I argue that these developments have medicalized food by overemphasizing the nutritional value and health effects of food, particularly in conceiving food choice as the cause or cure of incidence of chronic disease in populations. Through this history I show the way these shifts have led to individuals becoming increasingly dependent on nutritional and medical experts to know what is in food and its potential impact on health. In this context, the food label emerges as a surrogate for expert knowledge that guides consumption and produces individuals as self-governing subjects responsible for making health-related choices.

The medicalization of food has occurred through a variety of sources and historical events (Sobal, 1995; Mayes and Thompson, 2014). With the emergence of chemistry and physiology during the eighteenth century, the groundwork was laid to isolate the active properties of food that produce a therapeutic effect in the human body. This transformed the way food was understood (Scrinis, 2013). For example, it was known for several centuries that citrus fruits were associated with curing scurvy, yet it was not until Albert Szent-Györgyi in 1928 that vitamin C was isolated as the antiscorbutic agent (Carpenter, 2003, p. 3026). Thus social understanding of oranges transformed from a fruit eaten for taste, seasonality or affordability to sources of vitamin C that cure scurvy and maintain nutritional health.

Known as 'the golden age of nutrition', the first half of the twentieth century saw the isolation and categorization of the properties of food into vitamins, minerals, acids and proteins (Carpenter, 2003, p. 3031). This process enabled further experimentation on the causal effect of nutrients on the human body and their role in maintaining health and preventing deficiency diseases such as scurvy, beriberi, pellagra, rickets or goitre. Governments and corporations used the findings of nutrition science to address nutrient deficiency diseases by fortifying certain foods. Examples include: in 1924 Morton Salt Company marketed iodized salt in Michigan as a preventive measure against goitre (Markel, 1987); in the 1930s dairy producers and health authorities in North America and Europe fortified milk with vitamin D to prevent rickets (Holick, 2010, p. 269); in 1945 the Center for Disease Control and Prevention added fluoride to US drinking water to prevent tooth decay (Kargul et al , 2003); and more recently, folic acid has been added to flour and bread to prevent neural tube defects during pregnancy (Center for Disease Control, 1992). These interventions indicate the entwined activities of the food industry and government health agencies in responding nutrition deficiency disease.

A qualitative shift occurred in the second half of the twentieth century (Mayes and Thompson, 2014). Drawing on the success of nutrition science to cure deficiency diseases, public health and government agencies in the 1960s and 1970s sought to address multi-causal chronic diseases considered to be associated with individual behaviours (Lewis, 2003, p. 2). The turn from nutrient deficiency to chronic disease represents a qualitative distinction in aetiology (Rothstein, 2003, p. 286ff). While nutrition science was able to verify and predict causal relations between the deficiency of a specific nutrient and the manifestation of a specific disease, for chronic diseases such as heart disease, nutrition science has been less successful in isolating or verifying causal relations (Krieger, 2011). Instead a variety of factors, including but not limited to nutrition and individual food choice, are associated with the incidence of these diseases in a population.

Addressing this distinction in aetiology, a number of prominent public health researchers argue that social, economic and environmental factors are more significant as determinants of chronic diseases than individual behaviours (Krieger, 1994; Marmot, 2010; Baum and Sanders, 2011; Williams, 2013). Incidence of heart disease or obesity, for example, could be the result of multiple factors beyond the individual's control. Some researchers contend that focusing on individual choice and behaviours to reduce the incidence of chronic disease is ineffective and in some cases ethically questionable (Rich and Evans, 2005; Baum, 2011; Carter et al , 2011; Mayes and Thompson, 2014).

It is unlikely that diet-related chronic diseases can be resolved by fortifying foods with specific nutrients. As a result dietary guidelines became a key strategy for modifying diets in countries such as Australia, the United States and United Kingdom. Dietary guidelines are not necessarily at odds with a social determinants approach; however, within a neoliberal policy framework these guidelines provide the conditions that emphasis individual choice and behaviour change as the primary determinant of health (Goldberg, 2012). Dietary guidelines also serve to multiply nutritional information and reinforce the need for expert guidance. An example of the multiplication of information is the Dietary Guidelines for Americans. The initial 1980 Dietary Guidelines for Americans was a 20-page booklet with seven recommendations. Thirty years later, the 2010 Dietary Guidelines for Americans is a 95-page booklet with 23 recommendations for the general population and an additional six for specific populations (United States Department of Agriculture, and United States Department of Health and Human Services, 2011).

As with the fortification of foods, the food industry has been involved in modifying consumer dietary choices. Coinciding with the release of dietary guidelines, food corporations in the 1980s employed certain findings of nutrition science to market products as health promoting and disease preventing. In 1984 Kellogg's launched a campaign for its cereal brand All-Bran, asserting, 'The National Cancer Institute believes eating the right foods may reduce your risk of some kinds of cancer That's why a healthy diet includes high fiber foods like bran cereals' (Nestle, 2007, p. 240). The use of nutritional science not only supports health claims but also informs the consumer of a problem (cancer) and how this product (All-Bran) solves it. Stephen Gardner describes Kellogg's use of health claims and nutrition science as opening 'Pandora's cereal box' resulting in 'pandemonium' where '[c]ompanies of every ilk and repute began making a variety of disease-based claims' (Gardner, 2006, p. 299).

Public health practitioners and researchers are highly sceptical of industry health claims. Although public health professionals do encourage consumers to make healthy food choices, many fear food industry manipulation of nutritional science to increase profits (Nestle, 2007; Silverglade and Heller, 2010; Campos et al , 2011; Kolodinsky, 2012). Responding to these concerns, the US Congress passed the Nutrition Labeling and Education Act in 1990 to establish 'standards for health and nutrition claims and mandated most foods to have nutrition facts labels' (Kolodinsky, 2012, p. 199). Similar legislation exists in Europe and Australia. Despite such legislation there is still confusion.

This confusion has resulted in calls for clearer FOP labels. Public health professionals argue that regulated FOP labels are helpful for consumers to make informed and autonomous choices about their health (Pollan, 2009; Silverglade and Heller, 2010; Blewett et al , 2011; Campos et al , 2011; Kolodinsky, 2012). A common example of FOP labelling is the traffic-light system that 'typically display[s] green, amber or red labels to indicate whether foods contain low, medium or high amounts of contents such as fat, saturated fat, sugars' (Campos et al , 2011, p. 1500). Silverglade and Heller argue that FOP labels can provide '[a]ccurate, easy-to-read, and scientifically valid nutrition and health information' and are an 'essential component of a comprehensive public health strategy to help consumers improve their diets and reduce their risk of diet-related diseases' (2010, p. i). However, food industry representatives argue that regulated FOP labels are an unnecessary intrusion into the market and undermine their control of products (Brownell and Warner, 2009; Peacock, 2011).

In launching the US-based, but globally celebrated, Let's Move health campaign Michelle Obama appealed to food corporations to adopt FOP labels that are 'more customer-friendly ... so people don't have to spend hours squinting at words they can't pronounce to figure out whether the food they're buying is healthy or not' (Office of the First Lady, 2010). In response, the trade association representing the interests of corporations such as General Mills, Kellogg's and Coca-Cola have proposed and developed a variety of voluntary FOP labels, which they contend enables consumers to make healthy choices without government interferences (Australian Food and Grocery Council, 2010; Grocery Manufacturers Association, 2011; American Beverage Association, 2014). However, public health advocates and consumers groups maintain that industry designed FOP labels merely serve to emphasize positive nutrients while ignoring negatives, thereby further confusing the consumer with more quantitative information (Silverglade and Heller, 2010; Blewett et al , 2011; Brownell and Koplan, 2011; Campos et al , 2011; CHOICE, 2011; Emanuel, 2012; Kolodinsky, 2012; Peacock, 2011).

Clearly there are profound disagreements between public health and the food industry over the type of information shown on labels. But both agree that the label is an important interpretive tool to

bridge the epistemological gap between the consumer and product; a gap created by the medicalization of food and industrial food system that distances consumers from food producers (Scrinis, 2008). This gap creates the conditions for food labels to emerge as an apparatus of neoliberal governmentality that conducts homo oeconomicus towards responsible and entrepreneurial food choices that are claimed to maximize health. Rather than selecting for taste, hunger, cost or custom, homo oeconomicus is encouraged by industry, public health and government agencies to invest in health by choosing for nutritional value. Those that make 'healthy' choices are recognized as responsible and good citizens, while those that fail can be stigmatized as irresponsible and culpable for any disease that may result (Puhl et al , 2013).

In the context of the purported obesity epidemic and diet-related diseases an overwhelming rhetoric frames food choice in the terms of health and nutrition (Warin, 2010; Scrinis, 2013; Mayes and Thompson, 2014).² In this setting the food label becomes part of a neoliberal governmental strategy that aims to secure the population by guiding individuals towards health and away from food choices purportedly associated with diet-related diseases. A critical response is needed.

Games of critique and the normalizing effect of food labels

In 1784 Immanuel Kant used the example of independently determining one's own diet without recourse to the authority of a physician as a sign of enlightenment (Kant, 1983). Today however, individuals are entangled in a network of nutritional, public health and commercial knowledge that normalizes food choices to accord with objectives of population health and security. This process of normalization was demonstrated in the previous sections, which put recent divisions between public health and industry over food labels into a historical and political context. Contrary to the intentions of public health representatives, food labels do not liberate consumers from industry influence but further reinforce the conditions favourable to industry interests. Although many public health researchers rightly wish to critique food industry activities in the context of social determinants of health (Marmot, 2010; Baum and Sanders, 2011) and move health policy discussions beyond neoliberal notions of personal responsibility (Brownell et al , 2010; Ayo, 2012), the emphasis on the food label can contribute to simplistic ideas that health is determined by individual choices and that with the correct information individuals can become self-governing subjects responsible for their health via consumer practices.

In this section I argue that Foucault's work is not only useful for diagnosing relations of power and their normalizing effects, but can also provide a way out. The aim of Foucault's genealogy of governmentality, according to Paul Patton, 'is to find points of exit from or transformation in present social reality' (2010, p. 212). My reference to Kant is not only as a pertinent example of the historical shift in dietary epistemology, but to draw attention to Foucault's interest in Kant's definition of enlightenment as a way out or exit from the normalizing 'prisons of thought and action that shape our politics, our relations to ourselves' (Bernauer and Mahon, 1994, p. 152). Foucault draws on Kant to move towards a 'critical ontology of ourselves' that is not theoretical or doctrinal, but ethical - 'an attitude, an ethos, a philosophical life' (2000e, p. 319). However, an important question remains - why do we need a point of exit from the present social reality? Does the reality of food labels and healthy food discourse really need transformation? What is so bad about all of this?

There are at least three reasons why the governmental discourse of food labels should be critiqued: subject-formation, health and community. First is the confluence of food industry, public health and

government messages in subject formation. Public health advocates routinely point to the success of regulations placed on the tobacco industry to argue that governments should regulate the food industry in a similar fashion (Chopra and Darnton-Hill, 2004; Nestle, 2007; Brownell and Warner, 2009). Comparing the food industry to the tobacco industry has rhetorical strength, yet the comparison ignores public health's role in forming a subject that can be exploited by food marketers. While Marlboro tries to entice consumers into certain forms of subjectivity, a 'rugged cowboy' or 'sophisticated femme fatale', it is only Marlboro and the subtle advertising networks of the tobacco industry that try to create these subjectivities. In contrast, the food industry operates in an environment where public health and government agencies actively try to cultivate consumers as healthy subjects. Thus despite disagreement between the food industry and public health advocates over the food that qualifies as healthy, both entice homo oeconomicus towards a subjectivity produced via the norms of the life sciences and population health statistics, resulting in a 'narrowing and impoverishment of human possibilities' (Bernauer and Mahon, 1994, p. 143).

A second reason for critique is the narrowing of health. Food labels can reinforce individual choice as determinative of present and future health status. The normalizing effect of governmentality identifies 'healthy' homo oeconomicus as a responsible chooser and distinguishes this subject from the 'unhealthy' subject that poses a risk to the population through irresponsible choice. This is particularly troubling in light of research into the social determinants of health, which demonstrates that factors such as food availability, affordability, social infrastructure and economics have a greater influence on health than individual choices. (Black et al , 1980; Marmot, 2005; Gordon-Larsen et al , 2006; De Schutter, 2008; McDonald, 2011; Williams, 2013). While the label may provide important nutritional information, it also reinforces the idea that consumer choice is determinative of health without responding to the factors that precede choice and influence health.

A third reason is the erosion of community. Writing about homo oeconomicus as an entrepreneur of the self, Lois McNay notes the way neoliberal governmentality 'atomizes our understanding of social relations, eroding collective values and intersubjective bonds of duty and care at all levels of society' (McNay, 2009, p. 64). The label is part of erosion of collective values and intersubjectivity, insofar as it contributes to the understanding of health as an individual consumer choice rather than collective responsibility and public good. It would be naïve to suggest that the food label is solely responsible for this erosion of sociality. Rather it is a manifestation of wider logic of governance that focuses on consumers.

For these reasons it is important to address the governmental rationality that operates through the choice architecture created by food corporations and public health experts to guide food choice to conform to scientific norms of nutritional health. Thus not only do the activities of food corporations require critique, as prominent public health proponents suggest (Nestle, 2007; Baum and Sanders, 2011), but the mobilization of public health and nutrition science power and knowledge also needs to be included in a broader critique of neoliberal governmentality.

To be clear, my argument is not that labels are useless or bad. I am not precluding the possibility of the food label or nutritional information as important public health tools. Perhaps we should 'know' more about our food. But knowledge, as Foucault famously made clear, is imbued with relations of power that shape behaviours towards specific norms. Even if food labels do alter the marketing practices of the food industry and provide clearer consumer choice, the governmental rationale operating through the food label normalizes the subject and makes food choices determinative of health status.

The ubiquity and diversity of the networks of knowledges and relations of power emanating through public health and food corporation messages make the prospect of the individual critiquing and resisting subjection a complex task. Zygmunt Bauman suggests that in 'the land of the individual freedom of choice the option to escape normalization and to refuse participation in the normalizing game is emphatically not on the agenda' (Bauman, 2000, p. 34). Foucault was fond of the game metaphor in describing relations of power, knowledge and resistance (Foucault, 2000b). Continuing with this metaphor, the subject cannot leave the governmentality-subjugation game; however new tactics, manoeuvres and strategies can be introduced to shift the conditions under which the game is played. One such strategy is critique.

In his final seminars and interviews, Foucault appealed to the idea of critique as an approach to resisting or countering the conducting forces of governmentality. Rather than seeking liberation, which Foucault saw as leading to new relations of power (2000b, p. 284), critique provides space for new ways of conducting and relating to oneself or an ethics of the self. Drawing on Kant's negative definition of enlightenment as a way out, Foucault defines critique as 'the art of not being governed quite so much' (Foucault, 1997, p. 29). Critique involves contestation of the strategies that use scientific knowledge to produce norms of health, consumption and responsible behaviour, ultimately limiting the possibilities of human conduct. Critique serves to reveal different ways of thinking about the self, practices and relations with others. It becomes a way of self-formation and embodied disposition, not merely a cognitive or verbal activity. Critique in this sense is akin to virtue (Foucault, 1997, p. 25), an embodied activity through which norms of behaviour can be disrupted, destabilized and transformed (Mills, 2010). From this perspective critique is an ethical and political process in response to subjugation through governmental norms of behaviour. Foucault states:

if governmentalization is indeed this movement through which individuals are subjugated ... critique will be the art of voluntary insubordination Critique would essentially insure the desubjugation of the subject in the context of what we could call ... the politics of truth'.
(Foucault, 1997, p. 32)

While the operation of governmentality through food labels and healthy choices construct the healthy subject, the contestation of power and knowledge through critique enables the subject to question norms of behaviour and being 'governed like that' or towards those ends (Foucault, 1997, p. 29). By questioning the norms and adopting counter forms of conduct, the possibility of desubjugation is opened that allows for a transformation of the self.

I conclude this article by pointing to a potential, although tentative, opening through which individuals can embody critique and resist the normalizing effect of neoliberal governmentality.

Conclusion: A way out of the supermarket

Much of the normalization of individual food practices through food labelling occurs in the context of supermarkets. It is in the supermarket where packaged foods are regulated by legislation and promoted via marketing. However, there are exits. Food practices occurring outside supermarkets, often literally in parking lots or parks, present an opportunity for new, yet fragile, relations with others and with food that allow individuals 'not to be governed so much'. Farmers' markets and

community-supported agriculture are not external to the governmentality-subjugation game, but they can disrupt it for a time. Homo oeconomicus still invests in the self, and farmers' markets are often entwined with class, race and gendered discourses about food. However, these sites present an opportunity to re-invest in a manner that circumvents the governmental norms that position food choice a means to the ends of health.

A vast literature uncritically lauds the social and political significance of alternative food systems. I am not joining this chorus (Mayes, 2014). Farmers' markets, community-supported agriculture or the slow food movement are not free from the impulses of the food industry or immune from neoliberal governmental strategies (Guthman, 2003, 2004). My intention is simply to indicate that certain practices within these systems can be used in the formulation of an ethics of the self that critique and resists the conducting strategies of neoliberal governmentality.

A Foucauldian style of resistance has two features: first, a refusal to accept as fixed what the scientific and governmental network of power and knowledge determines to be a subject; and second, the invention, development and formulation of 'new forms of subjectivity' (Foucault, 1983, p. 212ff; Bernauer and Mahon, 1994, p. 147). Farmers' markets and community-supported agriculture create openings for both these aspects. First, the disruption of governmental enticements and instructions about responsible consumption conveyed via food label discourse. Yes, there is an emphasis on health in natural and organic food discourse, but there is an equally strong emphasis on taste, texture, seasonality, origin and pleasure. Second, presenting avenues for new practices of the self that involve food and food producers can lead to community engagement and flourishing (Knowlton et al., 2005; Hunt, 2007). Food purchased through these avenues is generally bought directly from the farmer or farmhand with minimal influence from intermediaries, particularly packaging, labels, health claims or regulations. These food practices do make health claims but they are often part of a broader socio-political critique about the 'sickening' effects of industrial agriculture. In this context health is a much broader concept, akin to ideas of social determinants of health. Engagements with food and food producers can serve to allow a renewed focus on the texture, pleasure, seasonality or communal aspects of food, rather than the sole defining feature of nutrition (Petrini, 2003, p. 23; Mol, 2010).

By opening new avenues to think about the self, food practices and relations with others, these sites can begin a critique governmental rationality by disrupting ideas of health as determined by consumer choice, unsettling the quantification of food in nutritional terms, and renewing relations between the producers and consumers of food. Farmers' markets or any other site of resistance will always be vulnerable to redeployment by governmental strategies. It is for this reason I do not consider these practices a linear path to liberation, but a strategic and tactical shift in a continuing game of moves and counter-moves.

In an interview discussing the politics of identity and sexual practice Foucault is asked, 'Can we be sure that these new pleasures won't be exploited in the way advertising uses the stimulation of pleasure as a means of social control?' Foucault's response indicates a restless and endless contest between conducting strategies of governmentality and counter-conducting critique. He says:

We can never be sure. In fact, we can always be sure it will happen, and that everything that has been created or acquired, any ground that has been gained will, at a certain moment be used in such

a way. That's the way we live, that's the way we struggle, that's the way of human history. (2000d, pp. 166-167)

The possibility of new relations, practices and pleasures through alternative food systems are not stable or permanent, but continually contested. However, 'we always have possibilities, there are always possibilities of changing the situation' (Foucault, 2000d, p. 167). As a response to the medicalization of food and governance, alternative food is not a victory, but it has changed the situation of the way individuals and communities can relate to each other via food.

In this article I have argued that food labels serve as an apparatus of neoliberal governmentality to conduct the food-choice of homo oeconomicus towards norms of health and responsibility. In tracing the history of food labels and the role of nutrition science, I demonstrated that both the food industry and public health representatives have provided the conditions for the normalizing effect of governmentality to operate. Finally I suggest that although neoliberal governmentality will always try to conduct choice, there are always possibilities of changing the tactics of the game. Farmers' markets may be an opening now that is soon closed off, yet they can serve as sites where the self is desubjugated and re-formed through new relations with food and others.

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Footnotes

1 Thaler and Sunstein reject the term homo oeconomicus, arguing that human beings are not capable of rational choice in the manner conceived by economists. This rejection cannot be adequately addressed here; however, I contend that they are rejecting the liberal homo oeconomicus and although they do not use the term they are affirming neoliberal homo oeconomicus, who responds to modifications in the choice environment.

2 Of course individuals still choose for taste. Yet taste is enfolded into health - healthy food is tasty food.

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