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Eat Your Way to Health: A History of Ability in the Progressive Era

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The article introduces the approach of a critical ability history by analyzing Progressive Era diet advice. It shows how calorie counting reframed health as an ability resulting from individuals' responsible self-conduct. At that time, novel understandings of bodies and health, techniques of measuring them, and hopes of improving them in the name of eugenics and industrial capitalism suggested that bodies and health were malleable and that it was the duty of individual citizens to care for and shape them. As such, health as ability became a terrain of exclusion as well as of struggles for citizenship recognition.

Robert Hugh Rose was hopeful. The New York-based physician was convinced he had found the key to improving the health of Americans. “Right eating,” he proposed in his 1916 book *Eat Your Way to Health: A Scientific System of Weight Control*, “will reduce the death rate [and] increase the health rate ... It will lessen diabetes, kidney disease, gout, and high blood pressure; increase the span of life from thirty to fifty per cent.”¹ As the title of the book reveals, for Rose, becoming healthy first and foremost meant weight control. He was “convinced that there is a normal weight for each individual and at no other is he in perfect health.” While Rose also provided advice on how to gain weight, he particularly targeted “obesity” as a “disease,” and his book was among the first diet manuals that endorsed calorie counting as a “remarkably effective” way of gaining health through weight loss.²

In the Progressive Era, at a time when modern life seemed to be taking its toll on people's bodies, Rose's promise was powerful. It resonated with contemporary hopes of remaking individual bodies and the American nation

¹ Robert H. Rose, *Eat Your Way to Health: A Scientific System of Weight Control* (New York: Funk and Wagnalls, 1924; first published 1916), 28, xi.

² *Ibid.*, x, 38, cover. See also Lulu Hunt Peters, *Diet and Health with Key to the Calories*, 2nd edn (Chicago: Reilly and Lee, 1919; first published 1918); Mary Dickerson Donahey, *The Calorie Cook Book* (Chicago: Reilly & Lee, 1923); Loretto C. Lynch, “Control Your Weight Via the Kitchen,” *Washington Post* series, Nov. 1924–March 1925.

with the help of modern nutrition.³ “Science has given the remedy which,” the physician insisted, “is certain to work a cure.”⁴ In his eyes, everybody could attain a healthy body, but only if people would educate themselves and act according to the newly gained knowledge, demonstrating industriousness and self-discipline. Fatness, Rose contended, was no “Providential visitation” but the “villainous design ... of the insinuating demon ‘Appetite,’ in league with his trusty Lieutenants ‘Inactivity,’ ‘Lack of Will Power’ and ‘Dietetic Ignorance.’”⁵ In short, the physician was convinced that body size and health were not given but made, and that individuals were responsible for shaping their bodies to attain and maintain health.

Rose’s book was one of numerous advice manuals that circulated new knowledge on bodies, diet, and health in the Progressive Era to teach people “How to Live.”⁶ Most of these texts presented a normative ideal of health that was conceptualized in terms of white racial fitness, gender difference, and productivity, particularly seeking to salvage white, middle-class men from the dangers of modern life.⁷ Foregrounding individual lifestyles and responsibilities, these texts reflected a neo-Lamarckian version of eugenics that suggested that individuals should improve their own health to foster collective health.⁸ They aimed at helping individuals to help themselves, sparking the first fitness craze in US history and a growing market of manuals specifically directed toward weight loss.⁹ Calorie counting, as a method of scientific

³ T. J. Jackson Lears, *Rebirth of a Nation: The Making of Modern America, 1877–1920* (New York: Harper, 2009); Charlotte Biltkoff, *Eating Right in America: The Cultural Politics of Food and Health* (Durham, NC: Duke University Press, 2013), chapter 2; Rachel Louise Moran, *Governing Bodies: American Politics and the Shaping of the Modern Physique* (Philadelphia: University of Pennsylvania Press, 2018), chapter 1.

⁴ Rose, 3.

⁵ *Ibid.*, 46.

⁶ Irving Fisher and Eugene Lyman Fisk, *How to Live: Rules for Healthful Living Based on Modern Science* (New York and London: Funk and Wagnalls, 1915).

⁷ Gail Bederman, *Manliness & Civilization: A Cultural History of Gender and Race in the United States, 1880–1917* (Chicago: University of Chicago Press, 1995); Kristina Graaff and Martin Klepper, “Self-Help and/in Mass Cultures: Performatives of (Self-) Management and Race between 1890 and 1930,” in James Dorson and Jasper J. Verlinden, eds., *Fictions of Management: Efficiency and Control in American Literature and Culture* (Heidelberg: Winter, 2019), 73–99.

⁸ Thomas C. Leonard, *Illiberal Reformers: Race, Eugenics, and American Economics in the Progressive Era* (Princeton, NJ: Princeton University Press, 2017); cf. Ellen H. Richards, *Euthenics: The Science of Controllable Environment* (Boston: Whitcomb & Barrows, 1910).

⁹ Patricia Vertinsky, “‘Weighs and Means’: Examining the Surveillance of Fat Bodies through Physical Education Practices in North America in the Late Nineteenth and Early Twentieth Centuries,” *Journal of Sport History*, 35, 3 (2008), 449–68, 456–57; Katharina Vester, “Regime Change: Gender, Class, and the Invention of Dieting in Post-bellum America,” *Journal of Social History*, 44, 1 (2010), 39–70.

calculation, conveyed the idea that the way to health was measurable, manageable, and, hence, imperative.¹⁰

While the Progressive Era's drive for social and individual improvement through scientific expertise has been studied extensively, I want to draw attention to its momentous reframing of health.¹¹ I contend that, by being increasingly understood as something people could and should achieve through proper self-conduct, health became conceived of as an ability. Strictly speaking, health was thought to be the result of individual abilities, no longer primarily determined by fate, divine providence, or even environmental conditions but by people's willingness and capabilities to continuously work on their bodies, educate themselves, and exercise self-restraint. As such, health could effectively be understood as an ability itself, and became a powerful mode of making and remaking the social order. A healthy body – now increasingly envisioned as a slim body – turned into a marker of knowledgeability and self-control, abilities that were simultaneously regarded as core requirements of citizenship in a liberal, enlightened republic.¹²

As health became an ability that characterized proper citizens, it offered the possibility to exclude people of color, women, immigrants, and people living in poverty or with disabilities, on the grounds of their seeming inability to pursue it. Against the background of eugenics, racist exclusion, and violence, health as ability was a white project, tying the ability for self-government mainly to white, middle-class men. At the same time, it formed a terrain of the struggle for emancipation as those fighting to become recognized as American citizens, among them black Americans and women, strove to claim health, and thus citizenship, for themselves.¹³

By historicizing health as ability, I am suggesting a novel approach that studies ability both as an analytical category and as a normative ideal of

¹⁰ Nina Mackert, "Work, Burn, Eat: Abilities of Calorimetric Bodies in the USA, 1890–1930," *Rethinking History*, 23, 2 (2019), 189–209.

¹¹ E.g. Robert Wiebe, *The Search for Order, 1877–1920* (New York: Hill and Wang, 1967); Lears; Jamie Pietruska, *Looking Forward: Prediction and Uncertainty in Modern America* (Chicago: University of Chicago Press, 2017).

¹² Jürgen Martschukat, "The Age of Fitness: The Power of Ability in Recent American History," *Rethinking History*, 23, 2 (2019), 157–74, 164; Anita Clair Fellman and Michael Fellman, *Making Sense of Self: Medical Advice Literature in Late Nineteenth-Century America* (Philadelphia: University of Pennsylvania Press, 1981); Abby Wilkerson, "'Obesity,' the Transnational Plate, and the Thin Contract," *Radical Philosophy Review*, 13 (2010), 43–67.

¹³ My arguments are particularly influenced by Stephen Knadler, *Vitality Politics: Health, Debility, and the Limits of Black Emancipation* (Ann Arbor: University of Michigan Press, 2019); Douglas C. Baynton, "Disability and the Justification of Inequality in American History," in Paul K. Longmore and Lauri Umansky, eds., *The New Disability History: American Perspectives* (New York: New York University Press, 2001), 33–58; Vester.

modern history, turning to the genealogy of the modern, able self, and to the varying, contested norms of ability that pervaded race, gender, and other categories of difference and regulated people's social participation and belonging.¹⁴ This perspective builds on recent scholarship in critical ability studies that shifts the perspective of disability studies in several ways. First, the focus lies less on studying disability and "deviance" and more on scrutinizing understandings of ability and "normality."¹⁵ This approach is similar to that of critical whiteness studies in seeking to decenter hegemonic norms and seemingly unmarked social positions of privilege.¹⁶ As Fiona Kumari Campbell emphasizes, this shift in perspective is radical: the goal is not to recognize and admit formerly excluded people to the illustrious circle of able, self-governed subjects, but to challenge the very norms of able-bodiedness, reason, and autonomy, and to shake the particular and limiting construction of modern humanness.¹⁷

Thus, second, my historical analysis of ability is not limited to corporeal norms, to the imperative of having a body considered whole, healthy, functioning, and able to do specific things.¹⁸ Rather, it emphasizes how able-bodiedness was connected to specific cognitive or moral abilities such as eagerness, self-education, and self-discipline, seeking to address how able bodies became a seemingly infallible proof of individual capabilities for self-government.¹⁹

As such, third, a critical ability perspective understands ableism – the ranking of people and their bodies according to norms of ability – to be a constitutive mode of modern, liberal governmentality. With this, I want to emphasize the role of ability in regulating citizenship and belonging. The able, self-governed subject is ideal-typical for liberal societies that connect civil rights and liberties to an individual's "ability to be free," as Tyler

¹⁴ Nina Mackert and Jürgen Martschukat, "Introduction: Critical Ability History," *Rethinking History*, 23, 2 (2019), 131–37; Nina Mackert, "I Want to Be a Fat Man / and with the Fat Men Stand': U.S.–Amerikanische Fat Men's Clubs und die Bedeutungen von Körperfett in den Dekaden um 1900," *Body Politics*, 2, 3 (2014), 215–43.

¹⁵ Fiona A. Kumari Campbell, *Contours of Ableism: The Production of Disability and Aabledness* (New York: Palgrave Macmillan, 2009); Gregor Wolbring, "The Politics of Ableism," *Development*, 51, 2 (2008), 252–58; Dan Goodley, *Dis/Ability Studies: Theorising Disablism and Ableism* (Abingdon: Routledge, 2014).

¹⁶ Shona Hunter and Christi van der Westhuizen, eds., *Routledge Handbook of Critical Studies in Whiteness* (Abingdon: Routledge, 2022).

¹⁷ Fiona A. Kumari Campbell, "Exploring Internalized Ableism Using Critical Race Theory," *Disability & Society*, 23, 2 (2008), 151–62, 152; for a similar critique of modern liberal "Man" from a perspective of black studies see Sylvia Wynter, "Unsettling the Coloniality of Being/Power/Truth/Freedom: Towards the Human, After Man, Its Overrepresentation – an Argument," *CR: The New Centennial Review*, 3, 3 (2003), 257–337.

¹⁸ Robert McRuer, "Compulsory Able-Bodiedness and Queer/Disabled Existence," in Sharon L. Snyder, Brenda Jo Brueggemann, and Rosemarie Garland-Thomson, eds., *Disability Studies: Enabling the Humanities* (New York: MLA Press, 2002), 88–99, 91–92.

¹⁹ Tobin Siebers, *Disability Theory* (Ann Arbor: University of Michigan Press, 2008), 9.

Stovall pointedly put it.²⁰ To be sure, practices of enslavement, confinement, and institutionalization continued as crucial practices of an ableism that worked through direct and violent exclusion.²¹ Yet, in addition, and increasingly toward the later nineteenth century, normative ideals of ability – particularly health – operated within the context of a certain degree of freedom that required the voluntariness and ability of self-governed citizens to make “proper” choices and turned people’s bodies into signs thereof.²²

In speaking of citizenship, I am referring less to legal concepts and more to citizenship in the sense of belonging: of who could count as “part of the body politic” and have access to resources such as education, health care, and employment.²³ With regard to this, health as ability operated as a powerful mode of exclusion, deflecting attention from racism and inequality and allowing individuals to be blamed as irresponsible “others.”²⁴ At the same time, such norms of ability not only excluded people but empowered those deemed able. To study this history reflects one crucial aspiration of critical ability studies: to scrutinize those discourses and practices that capacitate and privilege certain people.²⁵

In the following, I focus on discourses of weight loss – calorie counting in particular – to trace how ideals of self-control and personal responsibility were tied to health, shaping who counted as a legitimate part of US society.²⁶ In the

²⁰ Tyler Stovall, *White Freedom: The Racial History of an Idea* (Princeton, NJ: Princeton University Press, 2021), 249; Mackert and Martschukat.

²¹ Jenifer L. Barclay, *The Mark of Slavery: Disability, Race, and Gender in Antebellum America* (Urbana: University of Illinois Press, 2021); Kim E. Nielsen, “Incompetent and Insane: Labor, Ability, and Citizenship in Nineteenth- and early Twentieth-Century United States,” *Rethinking History*, 23, 2 (2019), 175–88.

²² Nikolas Rose, *Powers of Freedom: Reframing Political Thought* (Cambridge: Cambridge University Press, 1999); Martschukat, “The Age of Fitness,” 162.

²³ Natalia Molina, *Fit to Be Citizens: Public Health and Race in Los Angeles, 1879–1939* (Berkeley: University of California Press, 2006); Nancy J. Hirschmann and Beth Linker, “Disability, Citizenship, and Belonging: A Critical Introduction,” in Nancy J. Hirschmann and Beth Linker, eds., *Civil Disabilities: Citizenship, Membership, and Belonging* (Philadelphia: University of Pennsylvania Press, 2015), 1–21.

²⁴ Baynton, “Disability”; Knadler, *Vitality Politics*.

²⁵ Gregor Wolbring, “Ability Privilege: A Needed Addition to Privilege Studies,” *Journal for Critical Animal Studies*, 12, 2 (2014), 118–41; Campbell, *Contours of Ableism*, 197. This is not a claim for superseding/displacing disability studies but for a complementary focus on the role of ability in relational dynamics of (in)capacitation.

²⁶ Although dieting is a privileged site, it is not the only site of health as ability. While body weight served as a particularly visible sign of people’s alleged ability to eat “right” (Biltekoff, *Eating Right in America*, 119), this pervaded manifold other health-related discourses and practices, such as physical exercise or the prevention of infectious diseases. See Jürgen Martschukat, *The Age of Fitness: How the Body Came to Symbolize Success and Achievement* (Cambridge: Polity 2021); Patricia Wald, *Contagious: Cultures, Carriers, and the Outbreak Narrative* (Durham, NC: Duke University Press, 2008).

first part of this article, I show how, in the turn-of-the-century context of modern eugenics, industrial capitalism, and critiques of consumption, a healthy body became “normal” and slim. The second part argues that with calorie counting, slimness turned into a sign of an individual’s ability to act responsibly. In the third section, I address the productivity of health as ability in struggles for citizenship recognition, showing how the black strategy of “racial uplift” seized an understanding of health as ability and individual capability to claim emancipation.

BODIES AND CONSUMPTION IN TURN-OF-THE-CENTURY AMERICA

When Rose published his book in 1916, the idea of “obesity” as a massive problem was relatively new. Historians of bodies and dieting have pointed out that the meaning of fatness shifted decisively in the decades around 1900. Until the late nineteenth century, fatness was not a regularly trending issue in popular magazines or even most dietetic treatises. If it was written about, it figured as an ambivalent sign of wealth or the sinful gluttony of the elites, and was simultaneously associated with both disease and particularly robust health.²⁷ As late as 1910, the physician George M. Niles explained in the *Journal of the American Medical Association* that fat would protect individuals against the stress of modernity and was a welcome reserve for hard times, “lending to the body warmth and security, to the mind peace and good cheer.”²⁸ Yet Niles’s ostentatious defense of body fat already hints at the fact that other contemporary voices had begun to target it as a symptom of laziness and disease that people needed to eliminate, or avoid in the first place. Around the turn of the twentieth century, being “overweight” was increasingly considered a virulent problem of a significant part of the American population, not least indicated by a growing market of weight-loss diets, pills, and ointments that promised to help people shed pounds and become healthy and happy.²⁹

²⁷ See Hillel Schwartz, *Never Satisfied: A Cultural History of Diets, Fantasies, and Fat* (New York: Doubleday, 1990; first published 1986); Peter Stearns, *Fat History: Bodies and Beauty in the Modern West* (New York: New York University Press, 2012; first published 1997); Vester, “Regime Change,” 39–70; Amy Farrell, *Fat Shame: Stigma and the Fat Body in American Culture* (New York: New York University Press, 2011); Mackert, “I Want to Be a Fat Man.”

²⁸ George M. Niles, “Fat: A Physiologic Appreciation,” *Journal of the American Medical Association*, 54, 13 (1910), 1025–26. See also “Being Fat Is Like Having Money in the Bank,” *New York Times*, 15 May 1910, SM11.

²⁹ Farrell, 25. See an indexed list of historical weight-loss products in Schwartz, 467–68.

In 1916, diet doctor Rose grounded his calls for weight loss on the claim that fatness was the result of a harmful diet and proof of the “physical deterioration of the race,”³⁰ indicating that, for Progressive Era understandings of fatness and health, the significance of race cannot be underestimated. The era’s increasing fear of fat – and, as we will see, the concomitant refiguration of health as ability – was driven by racialized understandings of fat as an obstacle to progress, productivity, and modernity. As Thomas Leonard has pointed out, at that time, eugenic thought was “mainstream,” developing new momentum with the era’s focus on expert planning and state control.³¹ With eugenic control seemingly more feasible than before, the bodies that experts promoted as “superior” were not only white, male, and heterosexual, but also slim. Sabrina Strings has traced how these ideas built on longer traditions of associating fatness with people of color, and were now updated, casting “thinness” as a desirable characteristic of modern whiteness and “American exceptionalism.”³²

This new significance of body size and shape as a manifestation of eugenic fitness had developed since the later eighteenth century, with modern bio-power centering on bodies as objects of knowledge and social engineering.³³ The newly emerging life sciences such as physiology and nutrition science charted and classified human bodies, outlining what could count as congenitally human, “natural,” and “normal.” They thereby gave rise to a particular notion of humanity limited to white men and excluding black and Indigenous people of color, and the poor, queer, and disabled.³⁴

These dynamics of normalization were powerful in turning fatness into a problem, namely by rendering it “abnormal.” Rose emphasized that dieters needed to regain or maintain their “normal” weight in order to escape disease and premature death.³⁵ He could do so by pointing to height–weight tables – which insurance companies had been circulating since the later nineteenth century – that determined people’s “normal” and eventually

³⁰ Rose, *Eat Your Way to Health*, 8, 35.

³¹ Thomas C. Leonard, “Mistaking Eugenics for Social Darwinism: Why Eugenics Is Missing from the History of American Economics,” *History of Political Economy*, 37, Supplement 1 (2005), 200–33, 217.

³² Sabrina Strings, *Fearing the Black Body: The Racial Origins of Fat Phobia* (New York: New York University Press, 2019), 147; Farrell, 5, and esp. chapters 2–4; Vester.

³³ Michel Foucault, *The History of Sexuality*, Volume I, *An Introduction* (New York: Pantheon, 1978), 138; Nikolas Rose, “The Politics of Life Itself,” *Theory, Culture, and Society*, 18, 6 (2001), 1–30.

³⁴ Lennard J. Davis, *Enforcing Normalcy: Disability, Deafness, and the Body* (London: Verso, 1995), chapter 2; Anson Rabinbach, *The Human Motor: Energy, Fatigue, and the Origins of Modernity* (New York: Basic Books, 1990); Julian B. Carter, *The Heart of Whiteness: Normal Sexuality and Race in America, 1880–1940* (Durham, NC: Duke University Press, 2007).

³⁵ See, e.g., Rose, *Eat Your Way to Health*, 117.

“ideal” weights. Those tables created “overweight” (and “underweight”) not only as conditions associated with a higher risk of disease and mortality, but as deviations from what was “normal.”³⁶ This is crucial for the emergence of health as ability. The new knowledge of bodies supplemented and eventually substituted hitherto idiosyncratic understandings of bodies and disease with universalized but highly exclusionary notions of bodily “normality” that were tied to evolutionary progress.³⁷

The invention of the calorie is another striking case in point of this normalizing dynamic of the life sciences, one equally productive for turning fatness into a problem and health into an ability. In the late nineteenth century, influenced by thermodynamic thought, scientists began to conceptualize food as energy for human motors, measuring it in calories. Their research sought to determine the energy content of foods and the energy needs of bodies to precisely assess human food needs and productivity.³⁸ The resulting “dietary standards” – tables that listed the calorie needs for differently hard-working bodies – suggested that there was a direct and predictable relationship between nutrition and bodily capability. With the help of calorie counts, the productivity of bodies now seemed to be manageable.³⁹

The case of the calorie points to the profound role of industrial racial capitalism in shaping body norms. Its ranking of bodies according to their ascribed productivity and value offered a rationale for excluding those considered unable to work and provided the context in which ableism became a powerful force.⁴⁰ Moreover, in the new managerial capitalism, “Energy, strength, endurance, ease of motion, alertness and clearness of mind” not only described the

³⁶ Ibid., 100–4; Schwartz, 153–59; Amanda M. Czerniawski, “From Average to Ideal: The Evolution of the Height and Weight Table in the United States, 1836–1943,” *Social Science History*, 31, 2 (Summer 2007), 273–96.

³⁷ Charles Rosenberg, “Banishing Risk: Continuity and Change in the Moral Management of Disease,” in Allan M. Brandt and Paul Rozin, eds., *Morality and Health* (New York: Routledge, 1997), 35–51, 35–36, 39; Elizabeth Williams, *Appetite and Its Discontents: Science, Medicine, and the Urge to Eat, 1750–1950* (Chicago: The University of Chicago Press, 2020), 15; Davis.

³⁸ Rabinbach; Nina Mackert, “Feeding Productive Bodies: Calories, Nutritional Values, and Ability in the Progressive-Era US,” in Peter-Paul Banziger and Mischa Suter, eds., *Histories of Productivity: Genealogical Perspectives on the Body and Modern Economy* (New York: Routledge, 2016), 117–35, 120–21; Elizabeth Neswald, “Measuring Metabolism,” in Oliver Schlaudt and Lara Huber, eds., *Standardization in Measurement: Philosophical, Historical, and Sociological Issues* (London: Pickering & Chatto, 2015), 161–72.

³⁹ Mackert, “Work, Burn, Eat,” 193.

⁴⁰ Cedric Robinson, *Black Marxism: The Making of the Black Radical Tradition* (Chapel Hill: University of North Carolina Press, 2000); Paul R. D. Lawrie, *Forging a Laboring Race: The African American Worker in the Progressive Imagination* (New York: New York University Press, 2016).

successful dieter, but also the ideal mobile and efficient self of the era – a self that was, again, imagined as white, male, and slim.⁴¹

The apostles of efficiency – a broad coalition from diet doctors to economists – were convinced that fatness was inefficient. For one thing, they considered it an obstacle to efficient work and health. The physician Lulu Hunt Peters, for instance, the author of a best-selling calorie-counting manual, suggested by her own example that fat people were “only sixty-five per cent efficient” and did not deserve their full salaries.⁴² Pointing to the high costs of disease-related deaths and illnesses, the economist Irving Fisher urged people to fight the “menace of obesity” and strongly recommended calorie counting for those who fell into the actuarial category of “overweight.”⁴³

Simultaneously, diet experts condemned the patterns of consumption they associated with fatness, supplementing a religious critique of the sin of “gluttony” by attacking the wastefulness of “overeating,” now understood as “conspicuous consumption.”⁴⁴ With physiological suggestions that body fat was the result of superfluous and hence undigested food deposited on the outside of people’s bodies, fatness came to symbolize a literally unhealthy, unchecked consumption toward the end of the nineteenth century.⁴⁵ More specifically, these fears were geared to white, middle-class men and tapped into broader concerns that they were in crisis. In 1899, the owner of a lunch counter in New York City’s business district complained that American men would become “stouter and more indolent” through the technologization of modern life and labor. “Instead of lifting weights or pumping, men turn on an electric switch,” he claimed, contending that his customers would now prefer cornstarch pudding and crackers in milk for lunch instead of beef.⁴⁶ With pudding and sedentary lives instead of the infamous “strenuous life”

⁴¹ Rose, *Eat Your Way to Health*, 5; Jürgen Martschukat, “‘The Necessity for Better Bodies to Perpetuate Our Institutions, Insure a Higher Development of the Individual, and Advance the Conditions of the Race’: Physical Culture and the Formation of the Self in the Late Nineteenth and Early Twentieth Century USA,” *Journal of Historical Sociology*, 24, 4 (2011), 472–93. ⁴² Peters, *Diet and Health*, 14.

⁴³ Fisher and Fisk, *How to Live*, 30–33; Irving Fisher, *National Vitality, Its Wastes and Conservation: Report of the National Conservation Commission* (Washington, DC: Government Printing Office, 1909), 1; See also Mackert, “Feeding Productive Bodies,” 117–35.

⁴⁴ Thorstein Veblen, *The Theory of the Leisure Class* (New York: Mentor, 1953; first published 1899), 78, 79, 60; Alan J. Bilton, “Nobody Loves a Fat Man: Fatty Arbuckle and Conspicuous Consumption in Nineteen Twenties America,” *Amerikastudien/American Studies*, 57, 1 (2012), 51–66.

⁴⁵ Christopher E. Forth, *Fat: A Cultural History of the Stuff of Life* (London: Reaktion Books, 2019), 248; Schwartz, 80, 85–88, 131 f. See also Bilton.

⁴⁶ Quoted in “Getting to Fat,” *The Free Lance*, 17 Oct. 1899, 1. Cf. Rose, *Eat Your Way to Health*, 8.

of the frontier, fatness seemed to be a problem of the emerging white middle class no longer forced to do hard manual labor while not (yet) being capable of coping with its rising comfort. The fear of fat grew pressing with worries that modern society softened and sickened the bodies and minds of precisely those who were considered to be the carriers of progress.⁴⁷

Last but not least, these critiques of consumption point to another decisive change in understandings of bodies and health toward the late nineteenth century. Human bodies were no longer considered unalterable, given by nature or divine providence, but understood as something malleable that individuals could and should purposefully train, cultivate, and improve, thus centering on individual self-government and responsibility in matters of health. Jürgen Martschukat has recently demonstrated that the concept of fitness changed dramatically in the course of the nineteenth century. Initially denoting a rather fixed and unalterable state – in the sense of being suitable, fitting – it increasingly referred to something individuals needed to acquire through constant “training and proper self-government.”⁴⁸

To understand the discursive power that both fatphobia and norms of ability developed, these shifts towards simultaneously normalizing bodies and rendering them more flexible are crucial. The idea that body shape and health were the result of individual care and control, and hence of individual abilities, was a pivotal foundation of the era’s weight-loss advice and the urgency surrounding it. It was only thus that diet doctor Rose could promise it was “perfectly easy” to attain an “ideal” weight, “if intelligently managed,” and only thus that he could bemoan fatness not simply as pointing to disease, “incapacity,” and death, but as a sign of people’s unwillingness or inability to exercise self-control, act responsibly, and hence be proper citizens.⁴⁹ As we will see, the critique of fatness and the emergence of health as an ability went to the heart of the liberal society, revolving around the idea that people’s bodies were displays of their ability to be its citizens.

“ENTIRELY PREVENTABLE”: HEALTH AND RESPONSIBILITY IN CALORIE COUNTING

The huge success of Peters’s work was based on her promise that fatness wasn’t destiny. By 1939, she had sold two million copies of her book *Diet and Health with Key to the Calories* by claiming that body size and health were the result of

⁴⁷ Theodore Roosevelt, “The Strenuous Life” (10 April 1899), in *Voices of Democracy: The U. S. Oratory Project*, at <http://voicesofdemocracy.umd.edu/roosevelt-strenuous-life-1899-speech-text>; Vester, “Regime Change,” 43; Mackert, “I Want to Be a Fat Man”; Bederman, *Manliness & Civilization*.

⁴⁸ Martschukat, “The Age of Fitness,” 164.

⁴⁹ Rose, *Eat Your Way to Health*, ix, 104, 28, 40, 45, 54.

continuous work.⁵⁰ “We may inherit weak wills and strong stomachs, but not fat,” she put it in her equally successful syndicated health column in 1922, insisting that the responsibility for weight lay solely with the individual.⁵¹ Rose agreed: to become ill through overeating was “entirely preventable, and ... the fault of man himself.”⁵²

Such proclamations of self-responsibility were typical for dietary advice of the time and not limited to weight loss. In the Progressive Era, a range of dietary regimens – such as Fletcherizing (thorough mastication), vegetarianism, or fasting – were directed at improving eating habits in the name of health, economic efficiency, and evolutionary progress. Key to these diets was a concept of health as attainable by helping oneself: by understanding nutrition and choosing one’s foods accordingly.⁵³

Certainly, at that time, normative ideals of individual self-determination and responsibility were not entirely new. In fact, they had been constitutive for the United States as the first nation founded upon the principles of enlightenment and governing through freedom, upon self-governing citizens pursuing happiness. Historian Kim Nielsen stresses that “U.S. democracy is founded on the premise that citizens *are* capable,” that they are independent and able to exercise their rights and privileges.⁵⁴ This ideal of enlightened freedom was, from the beginning, inherently racist. It was built on distinguishing white Americans – considered no longer subjects to a sovereign but citizens – from

⁵⁰ Sander L. Gilman, *Obesity: The Biography* (Oxford: Oxford University Press, 2010), 91. The book’s title was mocking the 1875 guide Mary Baker Eddy, *Science and Health with Key to the Scriptures* (Boston: Christian Scientist Publishing Company, 1875), and while its tone was ironic throughout, the reference to this key work of Christian science wasn’t random. Peters urged her readers to let their minds – their self-control – take over the (fat) materiality of their bodies in order for weight-loss to follow.

⁵¹ Lulu Hunt Peters, “Drugs and Turkish Baths and Strong Stomachs,” *Los Angeles Times*, 11 May 1922, 118; Nina Mackert, “‘Nature Always Counts’: Kalorienzählen als Vorsorgetechnik in den USA des frühen 20. Jahrhunderts,” in Nicolai Hannig and Malte Thiessen, eds., *Vorsorgen in der Moderne: Akteure, Räume und Praktiken* (Berlin: de Gruyter, 2017), 213–31; Susan Yager, “Lulu Hunt Peters,” in Andrew Smith, ed., *The Oxford Encyclopedia of Food and Drink in America*, Volume II (Oxford: Oxford University Press, 2013), 816–17, 817.

⁵² Rose, *Eat Your Way to Health*, 8.

⁵³ Graaff and Klepper, “Self-Help,” 73–99; Biletkoff, *Eating Right in America*, chapter 2; Adam D. Shprintzen, *The Vegetarian Crusade: The Rise of an American Reform Movement, 1817–1921* (Chapel Hill: University of North Carolina Press, 2013); Marie Griffith, “Apostles of Abstinence: Fasting and Masculinity during the Progressive Era,” *American Quarterly*, 52, 4 (2000), 599–638; Chin Jou, “The Progressive Era Body Project: Calorie-Counting and ‘Disciplining the Stomach’ in 1920s America,” *Journal of the Gilded Age and Progressive Era*, 18, 4 (2019), 422–40.

⁵⁴ Kim E. Nielsen, *A Disability History of the United States* (Boston, MA: Beacon Press, 2012), xii (emphasis in original). See also Martschukat, *The Age of Fitness*, 43–44; Stacy Simpson, *Capacity Contract: Intellectual Disability and the Question of Citizenship* (Minneapolis: University of Minnesota Press, 2015).

those who were allegedly unable to live in freedom. This discourse rationalized the violence of enslavement, connecting it to blackness, disability, and dependence. As Stovall framed the powerful connection of whiteness and capable citizenship: “To be free is to be white, and to be white is to be free.”⁵⁵

In the course of the nineteenth century, notions of citizenship in the US had shifted, becoming even more tied to the ability of individuals. As Julie Reuben has shown, towards the Progressive Era, citizenship ideals changed from a focus on political rights and participation to foregrounding “upright behavior” and moral duty.⁵⁶ By 1915, the community civics curriculum of the National Education Association, which explicitly included health education as one important pillar of citizenship education, declared a “good citizen” to be “a person who habitually conducts himself with proper regard for the welfare of the communities of which he is a member, and who is active and intelligent in his cooperation with his fellow members to that end.” Stressing that proper behavior should be a matter of “character, not ... external compulsion,” civics educators emphasized that “self-control” and voluntary “cooperation” were necessary qualities of citizenship.⁵⁷

While Reuben suggests that this definition was less exclusive than “republican citizenship” had been – because it no longer limited citizenship and belonging to only white, wealthy men but potentially included all those able to become recognized as self-dependent – it wasn’t less ableist or racist.⁵⁸ Rather, it created novel forms of exclusion by granting or denying citizenship via ability, and particularly health as ability, shifting from “absolute neglect” to what Samuel Roberts has called “qualified inclusion based on specific notions of care, expertise, public utility, citizenship, social control, and responsibility.”⁵⁹ While, after the end of de jure enslavement, citizenship became more flexible, health as ability served to justify the neglect or exclusion of those deemed unhealthy by referring to their alleged inability to properly use their new freedom. In this sense, Stephen Knadler has pointed to the systematic debilitation of black bodies in the post-Reconstruction era, to their sickening by a lack of health care, food, and safe housing, that not only deprived them of health but

⁵⁵ Stovall, *White Freedom*, 5; Martschukat, “The Age of Fitness,” 160–61; Barclay, *The Mark of Slavery*, 11.

⁵⁶ Julie A. Reuben, “Beyond Politics: Community Civics and the Redefinition of Citizenship in the Progressive Era,” *History of Education Quarterly*, 37, 4 (Winter 1997), 399–420, 416.

⁵⁷ Special Committee of the Commission on the Reorganization of Secondary Education, National Education Association, *The Teaching of Community Civics, U.S. Bureau of Education Bulletin*, 23 (1915), 9; Winthrop D. Sheldon, “Our Body-Politic on the Dissecting Table: A Study in Civics,” *Education*, 36, 2 (1915), 73–83, 81.

⁵⁸ Reuben, 408; Mackert and Martschukat, “Introduction,” 131–37.

⁵⁹ Samuel K. Roberts, *Infectious Fear: Politics, Disease, and the Health Effects of Segregation* (Chapel Hill: University of North Carolina Press, 2009), 5.

at the same time of acknowledgment as agents and citizens, even as fully human.⁶⁰

This focus on individual responsibility is reflected in the fact that Progressive Era health discourse was shaped by a neo-Lamarckian version of eugenics that emphasized the importance of individual behavior on eugenic fitness, an approach that resonated well with the era's reforming spirit. It reformulated the hegemonic project of white and manly fitness by centering on people's diet, exercise, and environment, turning their eugenic fitness into a question of self-help and moral duty, and thus ability.⁶¹ When Rose described fatness as "criminal negligence" caused by "laziness, self-indulgence, lack of will-power and ignorance," he invoked an understanding of it as a crime warranting expulsion from citizenship.⁶²

When proper citizenship became corporeal and fit, body fat began to signify its opposite.⁶³ This shift was fostered through novel techniques of the self, with one, calorie counting, gaining momentum as a popular weight-loss practice of the middle class toward the end of the 1910s. With its teleological promise of future weight loss through controlled eating, calorie counting not only contributed to disparaging body fat, but also turned weight loss and health into goals that seemed hard to miss for able dieters.⁶⁴ While calorie experts usually also provided information on how to increase weight and warned against the dangers of being "underweight," their major focus lay in preventing and reducing fatness. "How anyone can want to be anything but thin is beyond my intelligence," Peters stated in no uncertain terms at the beginning of her book, and Rose suggested that fatness was a much greater threat to longevity than being "too thin."⁶⁵

At that time, although using calories to measure food was a few decades old, it had not yet been applied to weight loss. On the contrary: when chemists and physiologists began to use the calorie as a measure of food energy in the 1880s, they deployed it to promote foods particularly dense in calories to tackle

⁶⁰ Knadler, *Vitality Politics*, 9, 16.

⁶¹ Richards, *Euthenics*, viii; Biltekoff, 27–29; Leonard, "Mistaking Eugenics," 220.

⁶² Rose, *Eat Your Way to Health*, 39.

⁶³ The display of fat bodies in freak shows is a striking demonstration of their abjection by the late nineteenth century and the early twentieth. See Rosemary Garland Thomson, *Extraordinary Bodies: Figuring Physical Disability in American Culture and Literature* (New York: Columbia University Press, 1997), chapter 3. At the same time, fatness was still a common, if increasingly ludicrous, characterization of wealthy businessmen and politicians and in this regard not yet as disqualifying as it would become in the twentieth century. See Mackert, "I Want to Be a Fat Man."

⁶⁴ Mackert, "Work, Burn, Eat," 201–3; Mackert, "'Nature Always Counts'; Jou, "The Progressive Era Body Project," 423.

⁶⁵ Peters, *Diet and Health*, 11; Robert H. Rose, "How to Regulate Your Weight," *American Magazine*, 83 (Feb. 1917), 30.

working-class hunger. While labor activists called for higher wages to improve workers' food supply, a coalition of industrialists, scientists, and government officials suggested instead that working-class families could meet their food requirements by choosing cheaper calories.⁶⁶ When the chemist Wilbur O. Atwater, a key figure in US calorie research, praised the "benefits" of calorie counting for those "who most need" it, he extolled it as a scientific answer to social struggles and an allegedly straightforward measurement of working-class dietary needs and costs.⁶⁷ Comparing the amount of calories of a foodstuff to its price, he recommended foods such as oatmeal, beans, and potatoes as particularly "economical." As a result, researchers tied malnutrition to workers' alleged inability; that is, their lack of nutritional knowledge and ignorant food choices.⁶⁸ The idea of health as an ability pertained not only to body weight, but to malnutrition as well.

With regard to weight loss, only a few decades later doctors targeted their advice to a different class with different problems. "Sixteen hundred calories of food are required daily by a man lying quietly in bed," Rose explained. "Eight hundred more will enable the man to do office work, such as is done by a physician or lawyer."⁶⁹ To be sure, these manuals did also detail the importance of proteins, fats, carbohydrates, minerals, and eventually also vitamins, yet it was the calorie that functioned as a privileged gauge of food, reducing fats, carbs, and proteins to a common denominator: fuel value. "Hereafter you are going to eat calories of food," Peters commanded, so that "[i]nstead of saying one slice of bread, or a piece of pie, you will say 100 Calories of bread, 350 Calories of pie."⁷⁰

On this basis, calorie counting strengthened a link between fatness and what was considered "overeating." With the help of thermodynamic knowledge, diet advice underlined that in most cases, being "overweight" was not the result of disease, but of eating more than the body required. "[Y]ou eat too much, no matter how little it is, even if it be only one bird-seed daily, if you store it away as fat," Peters cautioned, emphasizing that "[f]ood, and food only, causes fat."⁷¹ Notably, advice givers felt the need to repeatedly make this causal connection, which shows that it was not well established at that

⁶⁶ Naomi Aronson, "Nutrition as a Social Problem: A Case Study of Entrepreneurial Strategy in Science," *Social Problems*, 29, 5 (1982), 474–87; Bilttekoff, 17–20; Mackert, "Feeding Productive Bodies."

⁶⁷ Wilbur O. Atwater, "The Pecuniary Economy of Food: The Chemistry of Food and Nutrition V," *Century Magazine*, 35, 3 (1888), 437–46, 437–38.

⁶⁸ Mackert, "Work, Burn, Eat," 200–1. ⁶⁹ Rose, *Eat Your Way to Health*, 16–17.

⁷⁰ Peters, *Diet and Health*, 24–25, 33–34; Rose, *Eat Your Way to Health*, 69, 115.

⁷¹ Peters, *Diet and Health*, 15; Peters quoted in "Watch Your Weight Says Lulu Hunt Peters, A.B., M.D.," *Chicago Daily Tribune*, 15 Sept. 1918, B4. See also Rose, *Eat Your Way to Health*, 47.

time. Until the early twentieth century, “overeating” had been only one of many causes experts gave for fatness, and physicians had tended to frame fatness as beyond the control of individuals by pointing to factors such as hereditary predisposition or glandular disfunction.⁷² While these explanations continued to be influential, calorie experts such as Rose and Peters emphasized that in most cases the path to weight loss was an issue of individual ability. They were supported by the most recent calorie research that had just turned to studying the nature of weight increase. Francis G. Benedict, who had been Atwater’s assistant in the first calorimetric experiments, declared in 1911 that an increase in body fat was due to an “intake of food ... slightly larger regularly than is the demand of the body for fuel,” disproving the belief of “many” that “excess food” would be excreted without being digested.⁷³

Calorie counting created what had been neither common sense nor measurable: an allegedly direct and precisely calculable link between eating and body shape. Experts could now compute the energy content of foods and the number of calories allowed for weight loss, increase, or maintenance.⁷⁴ Peters advised her readers to consume no more than 1,200 calories a day if they wanted to lose weight. Her book was more precise and comprehensive than Rose’s in terms of the numbers and formulas that were to help readers pursuing weight loss. Peters taught them how to calculate their ideal weight, and, most importantly, she offered precise predictions on how many pounds they could – and would – shed.⁷⁵ If dieters saved a thousand calories a day, she calculated, this would result in a weight loss of eight pounds a month and ninety-six pounds a year: “These pounds you can absolutely lose by having a knowledge of food values (calories) and regulating your intake accordingly.”⁷⁶

Calorie counting pivoted on the idea that modern science made weight loss precisely calculable and achievable – a promise that led Rose to describe it as a particularly apt dieting method for such an “age of efficiency.” When food intake and needs were “kept equivalent,” the body would reach or maintain its “ideal weight,” he explained: “This is a simple proposition in mathematics, and just as true as that two and two make four.”⁷⁷ Similarly, in a later edition

⁷² Williams, *Appetite*, 49, 181–82; Nicolas Rasmussen, *Fat in the Fifties: America’s First Obesity Crisis* (Baltimore: Johns Hopkins University Press, 2019), 23–24.

⁷³ F. G. Benedict, “Factors Affecting Changes in Body Weight,” lecture, 1911, Francis Gano Benedict Papers, Box 2, Countway Library of Medicine, 30–31; Mackert, “Nature Always Counts,” 220–24.

⁷⁴ Peters, *Diet and Health*, 26–27, 53; Rose, *Eat Your Way to Health*, 70–98, 116, 121.

⁷⁵ “Multiply number of inches over 5 ft. in height by 5½; add 110.” Peters, *Diet and Health*, 11; Lulu Hunt Peters, “Diet and Health: Calories Needed Per Day,” *Los Angeles Times*, 10 May 1922, II8. ⁷⁶ Peters, *Diet and Health*, 28. ⁷⁷ Rose, *Eat Your Way to Health*, 51, 9.

of her book, Peters defended calorie counting against unnamed critics who had described it as a “caloric theory,” elevating it to an undisputable standard. Calories were no “theory,” Peters urged, just as there was no “yard or meter ‘theory.’”⁷⁸ Emphasizing that elaborate and precise laboratory experiments had developed dietary standards, she made calorie counting particularly convincing in an era of increased trust in scientific expertise.⁷⁹ Calorie counting was personal Taylorism, scientific management in matters of diet, or, as Rose put it, the “substitution of intelligence for chance, or of efficiency for haphazard management.”⁸⁰

Reviewers praised Rose’s book for enabling the “lay public” to “comprehend” and interpret nutritional facts.⁸¹ For diet experts, this access to novel knowledge was key for promoting weight loss as to be without alternative: “since it is now possible to learn ... how to maintain the body at any desired weight,” Rose insisted, “there can be no two ways about it – the ideal weight being the desideratum, that is what all should strive to attain.” In his eyes, statements such as “I can’t reduce my weight” were unscientific, ignorant, and just plain wrong.⁸² Fatness appeared as a problem because now people allegedly could do better since they could know better.

In diet discourse, “overweight” now figured not merely as a peril to individual and collective health but also as a telltale sign of an individual’s cognitive or moral failure.⁸³ Peters explicitly wrote that due to the novel availability of caloric knowledge, being “fat” had shifted in meaning from “discomfort” to “disgrace.”⁸⁴ If people did not lose weight, it seemed that only they were to blame, namely for their inability to want or seek weight loss and, as Rose

⁷⁸ Peters, *Diet and Health*, 110–11; see also Mackert, “Nature Always Counts,” 215–16.

⁷⁹ Peters, *Diet and Health*, 24; Wiebe, *The Search for Order*, 174.

⁸⁰ Rose, *Eat Your Way to Health*, 1. This was also reflected in the work of home economists and social workers of the era who instructed members of poor and immigrant families on proper nutrition. Their advice was based on the same logic of individual calculability of food intake, if not for the sake of weight loss then for securing one’s nutrition and health despite a limited budget. See e.g. Mary Swartz Rose, *Food Lessons for Nutrition Classes*, Teachers College bulletin, thirteenth series, 11 (New York: Teachers College, 1922).

⁸¹ James T. B. Bowles, “Eat Your Way to Health, by Robert Hugh Rose, M.D. Published by Robert J. Shores, New York, 1916, Net. 10 \$;” *American Journal of Public Health*, 6, 12 (1916), 1334; Alfred Asgis, “Book Review: Eat Your Way to Health – A Scientific System of Weight Control. By Robert Hugh Rose, A.B., M.D., Instructor, Post-Graduate Medical School, New York. New Edition, Thoroughly Revised and Enlarged. Funk and Wagnalls Company, New York and London, 1924,” *Review of Clinical Stomatology*, 1, 10 (1923–24), 97–98.

⁸² Robert H. Rose, “Weight Reduction,” *New York Medical Journal*, 9 Oct. 1915, 756–57, 757; Rose, *Eat Your Way to Health*, 100–4; Rose, “Regulate Your Weight,” 16.

⁸³ Mackert, “Work, Burn, Eat,” 201; Mackert, “Nature Always Counts,” 226–27.

⁸⁴ Lulu Hunt Peters, “A Disgrace to Be Fat,” *Los Angeles Times*, 30 April 1922, III23.

emphasized, “*Stick to the diet.*”⁸⁵ In the Progressive Era, this reading of fat rationalized fat shaming and exclusion.

Furthermore, as an article on Peters’s weight-loss advice in the *Chicago Tribune* from September 1918 illustrates, fat people were also framed as unpatriotic for “hoarding” food in their bodies that was lacking in war-torn Europe.⁸⁶ Peters published her book during the wartime food conservation campaign that called upon Americans to save foods such as wheat and beef for feeding soldiers and civilians overseas. As Helen Veit has shown, this campaign was carried by portraying these acts of (non)consumption as patriotic self-control, and Peters seized this logic, suggesting that fat people were bad citizens, even suggesting that people should “tap [them] on the shoulder ... and ask [them] pointed questions about [their] patriotism which would be no joy to [their] ears.”⁸⁷

With “overweight” signifying individual inability – a lack of knowledge, willingness, or stamina – losing weight demonstrated competences crucial to recognition as a citizen of a modern consumer society. More than other diets, calorie counting depended on the freedom – and ability – to choose, with Peters claiming that its appeal lay in the absence of taboos. As long as one counted calories and looked for a balanced calorie budget at the end of the day, “You may eat just what you like,” she promised: “candy, pie, cake, fat meat, butter, cream ...!” While Peters did emphasize the need for nutritional balance, too – such as getting enough proteins to build muscle tissue – she time and again foregrounded the possibilities of indulgence, pleasure, and individual choice.⁸⁸ Similarly, the cover of Rose’s book flaunted the fact that readers were “not merely *told* what to eat” but given what they needed “for substituting or making up [their] own menus.”⁸⁹

This emphasis on choice was central for turning dieting into something that promised social status because it was understood as an ability. “[D]on’t be in a hurry to make your clothes smaller now,” Peters prompted her readers. “If they are loose they will show to the world that you are reducing.”⁹⁰ As Peter Stearns argues, weight-loss dieting became popular and promising because it could resolve the tension between consumption and moderation in early

⁸⁵ Rose, *Eat Your Way to Health*, 124 (emphasis in original); Mackert, “Nature Always Counts,” 226–30; Jou, “Progressive Era Body Project,” 430.

⁸⁶ “Watch Your Weight,” B4.

⁸⁷ Helen Zoe Veit, *Modern Food, Moral Food: Self-Control, Science, and the Rise of Modern American Eating in the Early Twentieth Century* (Chapel Hill: University of North Carolina Press, 2013); “Watch Your Weight,” B4.

⁸⁸ Peters, *Diet and Health*, 84, 58; Lulu Hunt Peters, “Diet and Health: ‘Counting Calories,’” *Los Angeles Times*, 6 May 1922, I18.

⁸⁹ Rose, *Eat Your Way to Health*, cover (original emphasis).

⁹⁰ Peters, *Diet and Health*, 20.

twentieth-century consumer society, offering “an implicit but vigorous moral counterweight to growing consumer indulgence.”⁹¹ For dieting to attain this meaning, voluntary self-control was crucial. In 1922, a seventeen-year-old stenographer proudly wrote to Peters that she had “trained” herself to “pass a window full of the most beautifully tinted, indigestible French pastry, without more than a tiny sigh,” and was now twenty-five pounds lighter.⁹² For the performance of her ability, it was significant that she had a choice: that she *could have* chosen, and afforded, the French pastry. When Peters’s readers boasted that they had lost a good many pounds, they demonstrated that they were able to make proper choices in the face of abundance.

This meaning of weight-loss diets as performances of ability is maybe even more evident in its gendered dimension. Peters directed her book to women and the stenographer was among hundreds of them who wrote in, telling her about their successful weight loss and asking for further advice. This is significant because in the Progressive Era, as Katharina Vester has shown, weight-loss dieting had just begun to be a female practice. When reducing diets became more common in the last decades of the nineteenth century, diet experts initially exclusively targeted men. Only they, those texts suggested, had the willpower and self-control necessary for dieting, and in this context, reducing diets became a terrain to distinguish white, upwardly mobile, male Americans from their “others.” Women were not merely deemed unable to diet, but were also told that dieting endangered beauty and fertility.⁹³ Maybe that was what the mother of the stenographer had in mind when she, as her daughter told Peters, “insist[ed] that I am crazy to reduce, that I looked much better plump.” For her daughter, however, this was no longer an attractive option: “I don’t intend to be fair, fat, and forty,” she assured Peters.⁹⁴

That women formed the main audience of calorie counting was the result of the shift that connected reducing diets to self-control and social status. Since the turn of the century, Vester writes, white women had increasingly claimed their right to diet, and suffragists such as Elizabeth Cady Stanton connected their ability to exercise dietary self-control to claims for political participation.⁹⁵ In the case of calorie counting, women seized normative ideals of self-determination to describe themselves and their endeavor; and here my analysis differs from that of Chin Jou who has described calorie counting as one way of disciplining women’s bodies in times of their increased political mobility.⁹⁶

⁹¹ Stearns, *Fat History*, 60.

⁹² Lulu Hunt Peters, “Diet and Health: Answers to Correspondents,” *Los Angeles Times*, 31 Aug. 1922, II8.

⁹⁴ Peters, “Diet and Health: Answers,” 31 Aug. 1922, II8.

⁹³ Vester, “Regime Change.”

⁹⁵ Vester, 49–50, 58.

⁹⁶ Jou, “Progressive Era Body Project,” 428.

Instead, my point is that it could serve as a demonstration of women's abilities, hence legitimizing this mobility, or at least claims for it. One reader wrote to Peters that she had lost thirty-five pounds and had also "induced" her brother to lose weight through calorie counting, concluding that women were "evidently ... not the weaker sex in a mental way."⁹⁷ Rose directed his advice to both men and women, and he similarly presented self-determination, expressed through the "right" body shape, as an allegory of citizenship: "No healthy person need be too fat or too thin. He has just as much right to say what he shall weigh as what church he shall attend or what political ticket he shall vote."⁹⁸

As the letters to Peters and Vester's historical analysis suggest, calorie counting was a predominantly white pastime, even more so since white supremacists used its link to ability to claim their alleged superiority.⁹⁹ Historians of weight-loss diets have thus tended to frame these phenomena as exclusively white. Yet, as Ava Purkiss has shown, with an emerging black middle class claiming middle-class values, dieting, exercise, and the rejection of fatness also became part of an African American politics of respectability and agency. Black women did diet, she argues, to perform self-determination and their capabilities for citizenship, because they "could not afford to be read as more shiftless, mentally unstable, deviant, and unattractive than the American public already assumed them to be."¹⁰⁰ In April 1927, for instance, the writer and civil rights activist Alice Dunbar-Nelson began to count calories. Noting in her diary that she had "start[ed] some drastic reducing dieting on 1200 per day," she repeatedly reported about her efforts, successes, and reasons to lose weight.¹⁰¹ "Had to be drastic," she commented one day, "Weighing 167 pounds and poking out back and front."¹⁰²

While Dunbar-Nelson did not explicitly connect her efforts to issues of health, they can be understood in the context of concurrent ideals of bodily self-discipline and responsibility as sites of struggles for recognition and citizenship, particularly for black women. "Nothing will do me any good until I learn to control this body of mine," Dunbar-Nelson wrote in September 1925, invoking the ideal of exercising bodily self-discipline to transform herself.¹⁰³ Her dieting highlights how health as ability is embedded in

⁹⁷ Peters, "Diet and Health: Answers to Correspondents," *Los Angeles Times*, 15 July 1922," II6.

⁹⁸ Rose, "Regulate Your Weight," 30.

⁹⁹ Vester, 58; Strings, *Fearing the Black Body*.

¹⁰⁰ Ava Purkiss, "'Beauty Secrets: Fight Fat'. Black Women's Aesthetics, Exercise, and Fat Stigma, 1900–1930s," *Journal of Women's History*, 29, 2 (Summer 2017), 14–37, 16, 26.

¹⁰¹ Alice Dunbar Nelson, *Give Us Each Day: The Diary of Alice Dunbar Nelson*, ed. Gloria T. Hull (New York: W. W. Norton and Company, 1984), entry from 1 April 1927, 175. I am grateful to Purkiss for identifying this source. See Purkiss, 29.

¹⁰² Hull, *Give Us Each Day*, entries from 12, 13, 14 Sept. 1928, 263–64.

¹⁰³ *Ibid.*, entry from 14 Sept. 1925, 264; Purkiss, 29.

intersectional politics of recognition, connected to claims of self-discipline for black women, and, even more, to uplift mobility. Such histories complement those that uncover ability as a powerful tool of exclusion. Ability, we learn from this, was not only an entry point for black women's dieting, but a terrain of struggles for emancipation, as we will see in the following.

HEALTH AS ABILITY AND STRUGGLES FOR CITIZENSHIP: THE CASE OF "RACIAL UPLIFT"

In 1908, the African American educator and writer Hightower T. Kealing published the self-help manual *How to Live Longer: The Gospel of Good Health*. Convinced that "fresh air, pure water and proper food will prevent most diseases, cure many, and cause none," the book included advice on healthy eating.¹⁰⁴ Kealing worried that African Americans in the rural South were dying by the "hundreds ... because they don't take enough care to live."¹⁰⁵ He hoped that his advice would help them to overcome their "ignorance in selecting and cooking the food eaten," to "nourish and develop" their bodies, and improve longevity. Life could "be shortened either by a bullet or a billet, and sometimes by a biscuit," Kealing contended, but also "prolonged to your full three score and ten, if you observe the laws of health."¹⁰⁶

What might sound similar to Rose's advice was, in fact, quite different, and not simply because Kealing didn't talk about weight loss. His advice targeted poor African Americans for whom, in the decades around 1900, claiming health was an issue of survival. Historians have characterized the post-Reconstruction era as a time of black health crises: with racist barriers to health care, adequate housing, and safe food and water resulting in high rates of morbidity and mortality in African American communities. They have also shown that white public-health experts ascribed the high rates of diseases and mortality among black people to their allegedly unsanitary, immoral habits and lack of self-discipline, suggesting that they were unfit to live in freedom.¹⁰⁷

Civil rights activists thus highlighted health issues. While black sociologists, physicians, and activists attacked bad housing, undernourishment, and poverty as systemic results of racism, some emphasized the responsibility of African

¹⁰⁴ H. T. Kealing, *How to Live Longer: The Gospel of Good Health; A Simple Treatise Designed to Correct the Large Death Rate among the People Both in City and Country* (printed for the author, 1905), 3.

¹⁰⁵ *Ibid.*, 3, 5.

¹⁰⁶ *Ibid.*, 7, 9, 33, 32.

¹⁰⁷ Knadler, *Vitality Politics*, 9; David McBride, *Caring for Equality: A History of African American Health and Healthcare* (Lanham, MD: Rowman & Littlefield, 2018), 20–22; Roberts, *Infectious Fear*.

Americans to improve their health themselves.¹⁰⁸ Although Kealing stated that the “largest death rate” of blacks was the result of “poverty and the white man’s prejudice,” he suggested that sickness and death were “more often the fault of the sufferer himself.” By stressing that “germs cannot live in any body whose system is in good order” and by foregrounding dietary self-help, he connected to an idea of health as ability and joined the ranks of proponents of “racial uplift,” such as Booker T. Washington, who believed that the black masses needed help to develop and demonstrate their fitness for citizenship.¹⁰⁹ This strategy redefined emancipation as African Americans’ individual and collective self-improvement, with health, food, and nutrition at the center of these efforts.¹¹⁰ One had to “have health” to be a regular human being,” Algernon B. Jackson, Howard professor of medicine, insisted, and suggested that if black people would learn how to properly care for themselves, not only would they improve their bodies, but also they could perform self-government, turning into “more valuable and acceptable citizens.”¹¹¹

Black uplift was built on this twofold goal of health education. At Tuskegee Institute, Washington aimed not merely to provide students with a sufficient and balanced diet, but also to teach them how to feed themselves properly in terms of nutrition and respectability. Instead of adhering to a tradition of eating fat pork – a foodstuff that black leaders increasingly associated with disease – Washington recommended that students should eat beef – a foodstuff associated with middle-classness and Americanness.¹¹² Simultaneously, black health campaigns and self-help columns in black newspapers sought to “enlighten” African Americans “in the way to live.”¹¹³ The progress of the civil rights struggle, these forms of advice suggested, depended

¹⁰⁸ Roberts, 52, 99; Saidiya Hartman, *Wayward Lives, Beautiful Experiments: Intimate Histories of Riotous Black Girls, Troublesome Women and Queer Radicals* (London: Serpent’s Tail, 2021; first published 2019), 81–120.

¹⁰⁹ Kealing, 9, 32, 47; Kevin Gaines, *Uplifting the Race: Black Leadership, Politics, and Culture in the Twentieth Century* (Chapel Hill: University of North Carolina Press, 1996), e.g. 37, 82.

¹¹⁰ Knadler, 34, chapters 1, 4; Gaines, *Uplifting the Race*, e.g. 82.

¹¹¹ Algernon B. Jackson, “The Need of Health Education among Negroes,” *Opportunity*, 2 (Aug. 1924), 235–37, 235.

¹¹² Booker T. Washington, “A Sunday Evening Talk,” 10 Dec. 1911, in *The Booker T. Washington Papers*, ed. Louis R. Harlan and Geraldine R. McTigue, Volume XI, 1911–12 (Urbana: University of Illinois Press, 1981), 407–10, 409; Jennifer Jensen Wallach, “Dethroning the Deceitful Pork Chop: Food Reform at the Tuskegee Institute,” in Wallach, ed., *Dethroning the Deceitful Pork Chop: Rethinking African American Foodways from Slavery to Obama* (Fayetteville: University of Arkansas Press, 2015), 165–80, 169.

¹¹³ “Encouragement,” *Chicago Defender*, 14 June 1913, 4; Kristina Graaff, “Racialized Self-Improvement: Advice in Black and White Self-Help of the Interwar Years,” in Ulfried Reichardt and Regina Schober, eds., *Laboring Bodies and the Quantified Self* (Bielefeld: transcript, 2020), 81–101, 81, 87–89.

on the degree to which African Americans were able to self-responsibly better their bodies and selves.

By reframing health and emancipation as results of diligent work on one's body and self, black uplift rested upon and reinforced notions of health as ability, with ambivalent consequences for the question of who was included in the civil rights struggle. A growing literature on the ableism that pervaded uplift ideology has pointed to the emancipatory limits of the imperative of rehabilitation and self-responsibility that reproduced disability as a "justification of inequality" and "functioned to impose its own forms of governance, particularly on a contagious African American poor and on black women."¹¹⁴ By connecting citizenship to health, the promises of emancipation were limited to those educated and able to behave accordingly.

Yet, at the same time, this dynamic of individual responsibility, the heart of health as ability, was key to the emancipatory claim of racial uplift because it refuted the racist construction of black incapability and instead emphasized agency. Contrary to civil rights activists who maintained that black people had "little or no control" over their lack of access to health care or unsanitary housing conditions,¹¹⁵ the sociologist Eugene Harris pointed to the need for narratives of black agency when he remarked in 1897, "If the large death-rate, the small birth-rate, the susceptibility to disease, and the low vitality of the race were due to causes outside of our control, I could see nothing before us but the 'blackness of darkness forever.'"¹¹⁶ Moreover, claiming self-management as African Americans was powerful against the history of slavery, the ongoing denial of citizenship rights, and the violent devaluation of black lives. To invoke self-responsibility by seizing the notion of health as an ability was a crucial tool of racial uplift, asserting black humanness, self-ownership, and citizenship.¹¹⁷

¹¹⁴ Baynton, "Disability," 33–58; Knadler, 3, 10. Throughout his book, Knadler offers a careful and excellent reading of the complexities of what he calls "vitality politics" in the works of Booker T. Washington, W. E. B. Du Bois, and others (see, for example, chapter 1). See also Christopher Bell, "Introducing White Disabilities: A Modest Proposal," in Lennard J. Davis, ed., *The Disabilities Studies Reader* (New York: Routledge, 2006), 275–82.

¹¹⁵ C. V. Roman, "The Negro's Psychology and His Health," *Opportunity*, 2 (Aug. 1924), 237–39, 238. Roman argued that African Americans were "expected to graft the virtues of freedom upon the opportunities of slavery and to fulfill the responsibilities of citizenship while maintaining the bearing of ... serf[s]," thus deflecting attention from individual responsibility toward a more systemic critique by pointing to barriers of ability.

¹¹⁶ Eugene Harris, "The Physical Conditions of the Race, Whether Dependent upon Social Conditions or Environment," in *Social and Physical Conditions of Negroes in Cities: Proceedings of the Second Conference for the Study of Problems Concerning Negro City Life Held at Atlanta University, May 25–26, 1897* (Atlanta, GA: Atlanta University Press, 1897), 20–28, 21. See also Knadler, 62.

¹¹⁷ Graaff, 90.

Health as an ability was thus politically promiscuous, serving both as an explanation of inequality and as an emancipation strategy. By claiming health, and especially claiming healthy behavior, individuals could express that they were capable of knowledgeable self-improvement and, hence, responsible citizenship. In the Progressive Era, novel knowledge on bodies and health, a critique of modern consumption, and new techniques of diet management such as calorie counting contributed to turn health into an ability: into something rooted in the knowledgeability and self-discipline of individuals. In this case, health was associated with slimness, precisely because diet advice rendered a slim body a visible sign of a capable self. Health as ability thus always incorporated more than having or attaining a healthy body; rather, it foregrounded individual capabilities that were considered crucial for successful citizenship. Ableism, this history of diet advice shows, sits at the heart of liberal societies based upon capable individuals pursuing health, fueling the social exclusion of those considered unable to strive for and maintain it.

Studying health as ability, we can thus address shifts in negotiating the nexus of health and belonging. Following the history of fatness in the course of the twentieth century, it seems that public interest in it and in people's responsibility for their health corresponded with larger shifts in discourses on governmental and individual responsibilities. During the Great Depression, for instance, public health tended to address the social causes of ill health and governmental responsibility for health care, while, toward the end of the century, the neoliberal rollback of welfare has brought back the notion of allegedly failing individuals and "wrong" lifestyles.¹¹⁸

The history of health as ability thus allows insights into the ways a society works, how it addresses the relationship of individuals and the state, and how it regulates health care, belonging, and citizenship. Just recently, the COVID-19 pandemic has highlighted the potentially deadly consequences of rendering health as ability. The majority of severe courses of COVID-19, a 2021 study found, were avoidable by eating more healthily and thereby improving one's metabolic health. "Clinicians," the authors suggested, "should educate their patients who may be at risk and consider promoting preventive lifestyle measures, such as improved dietary quality and physical activity," to prevent severe courses of the disease.¹¹⁹ The study contributed to a growing corpus of expertise that explained the higher prevalence of COVID-19 severity and deaths among African Americans by pointing to their higher prevalence of

¹¹⁸ Schwartz, *Never Satisfied*, 198–202; Rasmussen, *Fat in the Fifties*; Martschukat, "The Age of Fitness," 165.

¹¹⁹ Meghan O'Hearn et al., "Coronavirus Disease 2019 Hospitalizations Attributable to Cardiometabolic Conditions in the United States: A Comparative Risk Assessment Analysis," *Journal of the American Heart Association*, 10, 5 (2021), e019259.

“obesity” and focusing on lifestyle issues instead of critiquing social inequality, racism, unsafe work, and a lack of access to health care.¹²⁰ Suggesting that one’s vulnerability to COVID-19 is an issue of individual abilities lays the blame for a severe course of the disease on the individual, and becomes an existential issue: as it is when doctors in intensive-care units must decide who may live – and who dies.¹²¹

AUTHOR BIOGRAPHY

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¹²⁰ Sabrina Strings, “It’s Not Obesity. It’s Slavery. We Know Why Covid-19 Is Killing So Many Black People,” *NYTimes.com*, 25 May 2020, at www.nytimes.com/2020/05/25/opinion/coronavirus-race-obesity.html.

¹²¹ Cat Pausé, George Parker, and Lesley Grey, “Resisting the Problematicization of Fatness in COVID-19: In Pursuit of Health Justice,” *International Journal of Disaster Risk Reduction*, 54 (2021), at <https://doi.org/10.1016/j.ijdr.2020.102021>.