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Obesity: The Post Mortem: Reviving History and Dehumanizing Fatness via Televised Dissection

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Introduction

“We recognise the importance of images in education, and while the making and displaying of images (including photographs, films and electronic images) fall outside of the scope of the HT Act, and cannot be formally regulated, we expect establishments to take care not to compromise the dignity of the deceased.”

(Human Tissue Authority guidelines: Filming or photographing a post-mortem)

“It takes a lot more strength to cut through this … yellow adipose tissue, which kind of blooms out of the abdomen in this, you know, practically neon yellow. And it looks very much like butter and it has a greasy feel and it makes you suddenly very aware of the fat in your own body.”

(Carla Valentine, anatomical pathology technologist for Obesity: The Post Mortem, 00:50:10)

“I suffer from a sort of severe lack of self-discipline.”

(Ben, Obesity: The Post Mortem interviewee, 00:15:00)

In September 2016, BBC Three released Obesity: The Post Mortem, a so-called health and well-being documentary depicting the dramatized dissection of a fat, white, US American woman (BBC). Under the guise of “allowing a broader public to learn about the problems that are associated with obesity,” they aired 55 lurid minutes of dismemberment and pathologist commentary interwoven with confessional-style interviews of fat people and unsourced claims about the consequences of fatness (00:03:04). The content was also posted to their website the next day.

This film and its makers remorselessly defy 200 years of British legislation against the use of post mortems for entertainment and challenge cultural norms about the dignified treatment of dead bodies, yet have received largely positive reviews from the media and public support from multiple regulatory bodies in the United Kingdom (Browne; “BBC Media Centre”; Jayaram).
In this article, I use a feminist science studies analytic to explore how the vivisection of a fat, white woman became acceptable material for a television program as well as what cultural work such a program performs. A feminist science studies analytic requires a commitment to interdisciplinarity and intersectionality, to interrogating categories of gender and race and their co-constitution, to seeing and speaking from the margins, to tracing flows of power and capital, and to investigating the practice of science itself in addition to its effects and consequences (Cipolla et al.; Hammonds and Subramaniam; Harding et al.).

The first part of this article answers the question of how *Obesity: The Post Mortem* came to be by tracing the conditions of possibility for its existence. Historically, these conditions include the legacy of public dissection as spectacle, the cultural and economic work of freakshows, and the role of autopsies in the development of European scientific racism; more recent conditions include the development of the transnational organ trade, the ongoing pathologization of fatness, and the increasing prevalence of autopsies in popular media. These phenomena helped shape current ideas of what constitutes personhood, scientific knowledge, and entertainment; they produced the epistemic, cultural, and material conditions in which *Obesity: The Post Mortem* could be made, even if they did not contribute to it directly (Foucault, *Archaeology*; Davidson). Correspondingly, they also produced the conditions in which it could be received by an audience looking for a mix of seemingly educational and sensationalized content. Thus, neither the meaning nor the consequences of this film can be understood without consideration of the forces that made it possible.

In the second part of this article, I turn this analytic on the content of the film itself, using visual and discursive analysis to unpack the ways in which the film’s cinematography and narration work to create a spectacle, objectify the person being dissected, and reinforce current fatphobic narratives about individual health and responsibility. By relying on hegemonic stereotypes about fatness, the film presents itself as scientific and educational, thereby side-stepping the controversy of cutting open a real cadaver for an hour’s worth of television. Moreover, through a combination of panic-inducing hyperbole, strategic camera cuts, and documentary realism, this program presents itself as an undeniable authority on fatness and the health status of most, if not all, fat people (Belling; Nichols; Serlin).

Consequently, I argue that *Obesity: The Post Mortem* can be read as a biopedagogical text, or a script for how to be a good citizen by conforming to hegemonic ideas of health and thinness (Chandler and Rice; Wright and Harwood). This reading, combined with an understanding of the conditions that made *Obesity: The Post Mortem* possible, reveals that this film is not about fat people’s health but rather about reviving historical traditions of displaying and dissecting “different” bodies to reinforce hierarchies of
superior and inferior bodies, and, by extension, people. Although ostensibly intended to provide a public health function, this film instead operates as a way to reward thinness and degrade fatness, ironically perpetuating the very stigmas that are proven to worsen fat people’s health (Aamodt; Brownell et al.; Major et al.; Pausé, “Borderline”; Pearl and Puhl; Tomiyama et al.). By turning the dissection of a fat corpse into a spectacle-cum-educational program, *Obesity: The Post Mortem* teaches its viewers to trust television and dead bodies as legitimate sources of medical knowledge, to justify the material and symbolic expense of a televised dissection via the supposed “costs” of the “obesity epidemic,” and to find virtue in witnessing the dehumanization of fat bodies. In other words, *Obesity: The Post Mortem* teaches its viewers that the educational value of fat corpses is in what they can do to inspire good bio-citizens, rather than any medical knowledge that results from their examination.

**Some notes on content**

It is challenging to write about a body that has already been so dehumanized without reproducing the forces that have dehumanized it, such as prejudiced language and gruesome visuals. I use three strategies to avoid this replication. First, this article will not contain any images from the film. Doing so would continue to objectify and pathologize the person dissected. In lieu of visuals, I will provide descriptions of the scene to which I am referring, as well as including any dialogue or narration from that point in the program.

Second, where I am able to, I will use the words “fat” and “fatness” rather than “overweight,” “obese,” or “obesity.” This language choice reflects my position as a fat activist and fat studies scholar, coming from the fat studies tradition of reclaiming “fat” as a neutral descriptor of body size rather than a derogatory term. As Abigail Saguy explains in *What’s Wrong with Fat*, “The term *obesity* implies a medical frame and ... a medical frame implies that fat bodies are pathological” (5; emphasis in original). There is no way to not be fat-phobic when using the word “obese” since its very use implies that fat people are a medical problem to be solved, rather than a natural part of the diversity of human bodies (Braziel and LeBesco; Brown; Gard and Wright; Guthman; Kulick and Meneley; LeBesco; Maurer and Sobal; Oliver; Solovay and Rothblum; Saguy; Schwartz). Since even the title of *Obesity: The Post Mortem* perpetuates harm against fat people, it would be irresponsible of me to continue to use this stigmatizing language in my own writing.

Finally, I want to clarify why I have not been using the terms autopsy and post mortem in my own claims about this film. In the Human Tissue Authority (HTA)’s “Code of Practice and Standards” regarding post mortem examinations, they explain that opening a body after death is:
important for informing relatives, healthcare professionals, and other interested parties about the cause of death. It may also provide information about possible acquired or genetic diseases that may warrant treatment and care of the relatives of the deceased. More generally, post-mortem examination is considered by clinicians to be important in increasing understanding of disease, improving clinical care, maintaining clinical standards, identifying the spread of infectious diseases, and supporting research and training. (Code B 5)

Post mortems have either exploratory or educational functions. They can be performed to find the cause of death in either a coroner’s examination (for medico-legal purposes) or a hospital post mortem (to provide information about the illness or cause of death or to advance medical research) (Peres; “NHS”; “The Royal College of Pathologists”). Most medical students also perform a different version of the post mortem in the anatomy lab as part of their specialized training; they dissect corpses as a way of gaining firsthand knowledge not only about the body, but about being in such intimate proximity to bodies (Coulehan et al.). The dissection in *Obesity: The Post Mortem* does not fit neatly into any of these categories. First, the cause of death in this case was already known. In order to obtain the body for dissection, BBC, 7 Wonder, and Third Street Studios (the production companies involved in making the program) would have needed a death certificate. In this case, the program states in minute 7 that the woman died of heart failure (00:07:18). With the cause of death already known, the dissection cannot count as exploratory. Additionally, it might be tempting to make the argument that this program is educational. However, *Obesity: The Post Mortem* has its conclusion built into its premise. A fat woman was chosen for dissection because of her fatness, and when she was dissected, the pathologist found fatness. Moreover, the educational purpose of the post mortem is specifically for experts, not the public at large. The audience of *Obesity: The Post Mortem* is dependent on the pathologists in the program to translate their findings into lay language, which necessitates reducing any complex findings into simpler, and more entertaining, conclusions. The amount of medical knowledge that could result from such a set of constraints is questionable. Given these details, *Obesity: The Post Mortem* cannot properly be called a post mortem, nor does it deserve the medical validity the term grants it. Stripping away this medical gloss reveals a film that, at best, fundamentally misunderstands what it is accomplishing, and at worst, deliberately misleads viewers about the consequences of fatness and how to best support their own wellbeing.

The processes and consequences of categorization have been a key focus of feminist science studies scholarship. Applying this focus to *Obesity: The Post Mortem* makes visible the ways in which medical authority is used to obscure

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2That said, there is a not a single piece of journalistic coverage, celebratory or critical, that points out *Obesity: The Post Mortem* is not an autopsy (H. Archer; Penny).
the blatant fatphobia motivating this dissection. However, this film did not come out of nowhere. The public construction of medical authority and expertise via the exploitation of a marginalized body has a long history. So does turning this exploitation into entertainment, and profiting from it both materially and symbolically.

Public dissection, then and now

The tradition of public dissection began in sixteenth-century England as a way of punishing murderers who had already been hanged—opening the body after hanging ensured for the courts and the public that the criminal found no peace in death (Klaver; MacDonald; Richardson). Members of the public were encouraged to view the events of this punishment in a sequence for shock and pleasure: watching the hanging itself, following the hangman as he delivered the corpse to the surgeon, watching the surgeon cut open the body, and then ogling the body in its flayed state as it represented its own moral inferiority. Dissection remained a method of public, legal retribution, rather than a medical procedure, until the passage of the 1832 Anatomy Act.

Public dissection for spectacle has been illegal in England for almost 200 years, yet we view this very practice in *Obesity: The Post Mortem*. However, it is not the distance from 1832 that renders this film possible. In fact, the 1832 Act remains a historical touchstone against which recent events are compared. For example, in 2002, when Dr. Gunter von Hagens (of *Body Worlds* infamy) illegally dissected a German man for an invitation-only audience in an abandoned London brewery, media outlets quickly began labeling the event “the first [public autopsy] to be held in Britain in 170 years” and “a stomach-churning spectacle last performed in Britain in the 1830s,” indicating that this history remains salient for many UK residents (Gibbons, “Body Worlds”; Gibbons, “C4”). Surprisingly, despite *Obesity: The Post Mortem*’s obvious relationship to both von Hagens’s actions and the history of public dissection for spectacle, most media coverage of the film has not framed it in these terms. Instead, coverage has focused largely on its (supposedly) medical content, rather than the dissection itself or its subsequent broadcasting. The lack of media focus on how *Obesity: The Post Mortem* replicates a practice condemned in 1832 and 2002 indicates that this film is being normalized in other ways that make it more palatable than previous dissections. These normalizing forces include additional histories of dissection, scientific racism, and freakshows; more recent normalizing forces include the economic development of the transnational organ trade and obesity science, plus the rise of autopsies in popular culture. These forces

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3Laurie Penny’s “Obesity: The Post Mortem Shows Why Fat Is Still a Feminist Issue” does mention von Hagens’s autopsy.
all contribute to normalizing a medicalizing and pathologizing gaze on the fat body and the display of fat bodies for profit and spectacle.

**Producing the fat “other” in the nineteenth century**

During the era when the Anatomy Act was passed, Europe was experiencing significant changes in medicine, government, population, economy, geography, and colonial possession. This era, now known as modernity, was characterized by the imperative to see, know, and classify through empirical, “objective” measurements of nature, the collection of population demographics, the application of statistical calculations to both natural phenomena and population data, and the science of taxonomy (Daston and Galison; Foucault, *Clinic*; Gould; Hacking; Sturken and Cartwright). These new ways of knowing and producing knowledge led to both the social institution of the freak show and the medical tradition of autopsying the (loosely defined) “abnormal.”

As Sarah Mitchell explains in “From ‘Monstrous’ to ‘Abnormal’: The Case of Conjoined Twins in the Nineteenth Century,” the increasing status of medical knowledge allowed doctors to expand their expertise via the process of medicalization, “framing what had previously been regarded simply as variations of behavior, sins, or natural biological processes into medical conditions or diseases requiring medical supervision and intervention” (54). The process of medicalization created boundaries between the normal (things that did not require medical intervention) and the abnormal or pathological (things that did).

The separation between the normal and the abnormal—a separation that allowed for violence and subjugation in the name of knowledge production—was continually produced and reproduced through both medical and social practices. As Georges Canguilhem lays out in “The Normal and the Pathological,” no entity is abnormal or pathological without a surrounding milieu against which to contrast it. Medicine and other cultural institutions thus created the “normal” by virtue of studying and sensationalizing the “abnormal.” The more doctors and showmen poked, prodded, and displayed people who looked differently from them (non-white, non-male, non-cis, etc.), the more they created the justification for continuing to do so.

**Social production of otherness via the freak show**

Freak shows, from the middle of the nineteenth century to the middle of the twentieth century, were spaces in which the public was invited to find entertainment in distancing themselves from foreign, exotic, or otherwise “abnormal” bodies. As Nadja Durbach details in her book *Spectacle of Deformity*, the term freak “became the most common way to refer to the hundreds of individuals across the United Kingdom who exhibited a congenital bodily anomaly for profit” between 1847 and 1914 (1). There
are two things of note in this definition of freak. First, freaks were exhibited for profit. The United Kingdom has a history of both profiting from and insisting on the self-sufficiency of freaks. Second, the “fat lady” was a staple among those exhibited, demonstrating that fat women were pathologized in both medicine and broader society.\(^4\)

In addition to displaying anomalous bodies for the titillation of the audience, many freak shows were ostensibly intended to be educational. Showmen strove to make their exhibits cheap and family-friendly; as Durbach notes, freak shows were “packaged” as “respectable entertainment” with content applicable to young and old, rich and poor, and layman and expert alike (7). This packaging effort and air of respectability normalized the freak show’s role in maintaining the boundary between pathological and nonpathological. The display of extraordinary bodies also normalized their separation from “ordinary” society and, consequently, their exhibition for profit.

Read through the lens of the freak, *Obesity: The Post Mortem* appears as a continuation of the history of spectacle disguised as education. This lends the film scientific legitimacy, despite the fact that it is intended as entertainment media. Additionally, this educational overtone helps distract from the profitability of again rendering the grotesqueness of the “fat lady” into an object for consumption.

**Medical production of otherness via dissection**

While freak shows produced “fat ladies” as socially and medically abnormal, posthumous dissection played a crucial part in the boundary-making, hierarchical work of the anthropometric practices that defined ideas of humanity and evolution in the second half of the nineteenth century. As Siobhan Somerville explains in *Queering the Color Line*, the science of anthropometry relied on the idea that bodily differences represented differences in intelligence, disposition, and degree of civilization:

Behind … anatomical measurements lay the assumption that the body was a legible text, with various keys or languages available for reading its symbolic codes. In the logic of biological determinism, the surface and interior of the individual body rather than its social characteristics, such as language, behavior, or clothing, became the primary sites of its meaning. … Although scientists debated which particular anatomical features carried racial meanings (skin, facial angle, pelvis, skull, brain mass, genitalia), the theory that anatomy predicted intelligence and behavior remained remarkably constant. (23)

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\(^4\)There is a common misconception that fatness was associated with wealth or royalty in the eighteenth and nineteenth centuries. Although this may have been true prior to the Enlightenment, by the time of freak shows, fatness was firmly associated with greed, avarice, primitivity, and grotesquery. For more on this, see Gilman’s *Obesity: The Biography* and Farrell’s *Fat Shame*. 
The hierarchies produced from these anthropometric practices held up white men as the pinnacle of evolutionary superiority and declared other groups inferior based on the degree of their anatomical differences from the white male body. This racial science was then used to justify racist, imperial, and eugenic social and political practices.

Both race and gender structured these hierarchical rankings, with “comparative anatomists repeatedly locat[ing] racial difference through the sexual characteristics of the female body” (26). No dissection is more emblematic of this practice than Georges Cuvier’s 1815 post mortem of Saartjie Baartman, a Khoikhoi woman, also known as “the Hottentot Venus” (Gilman; Holmes; Magubane; Somerville; Terry and Urla). As Sander Gilman describes in *Difference and Pathology*, during this post mortem, Cuvier focused almost exclusively on the parts of Baartman’s anatomy that could be fetishized, including her breasts, buttocks, and genitalia (89).

This dissection, which set the precedent for several others throughout the next 50 years, is notable not only for this anatomical fetishization, but also for the way Cuvier and his colleagues used the fatness of Baartman’s anatomy as the specific indicator of her primitivity (Fausto-Sterling 20; Somerville 26). Amy Erdman Farrell elaborates in her book *Fat Shame* about the role fatness played in Cuvier’s dissection:

Cuvier spent numerous paragraphs explaining that “l’ennorme protuberance de ses fesses” (the enormous protuberance of her buttocks) was not muscle but an elastic and trembling mass of fat under the skin. Likewise, he described her knees as fat and blubber-like. Her neck, Cuvier wrote, was shorter and fatter than those of the white women he had studied. Her breasts he described as “grosses masses pendants” (a fat hanging mass). In thinking about the legacy of Cuvier’s work, then, it’s important to recognize that he, like other experts of 19th century science, focused not just on the sexual attributes of Baartman, but on fat as a distinctive attribute of those sexual attributes. This was not just seen as a normal variation of human bodies, but as something abnormal, deficient, degraded. (66)

Thus, fatness, as it interlocked with race and gender, was implicated as a mark of anthropometric inferiority; additionally, dissection was an important tool for examining the body in a way that this inferiority could be empirically measured.

These histories provide the epistemic preconditions for *Obesity: The Post Mortem*’s existence, making them crucial context for understanding the work this film performs. Although the woman dissected in this film is white, the actions of the pathologists in *Obesity: The Post Mortem* replicate the actions of nineteenth-century scientists searching for anatomical evidence of

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5We do not know Saartjie Baartman’s real name; this Dutch name was given to her by trader, Alexander Dunlop (Farrell 65).

6As Magubane and Holmes discuss, Baartman was also displayed in English and French freak shows before her death.

7Fatness was also used as an indicator of a broader racialized primitivity for many groups of African descent.
behavioral pathology. Despite its intention to show the “health effects” of fatness, what this film actually does is use the body of one dead person to make a claim about the behavior of an entire group of people based on one shared anatomical feature. The dissection shown in this film cannot be divorced from the history of using post mortems for the purposes of claiming the superiority of some kinds of people and the inferiority of others.

Moreover, reading through a feminist science studies analytic reveals a history that is as much about the production of cultural knowledge as it is of scientific knowledge. Freak shows and autopsy tables were sites where medical authority and claims to scientific truth disguised the cultural work of categorizing bodies and the distribution of those categories to the public. *Obesity: The Post Mortem* continues the naturalized legacy of producing and distributing cultural knowledge via medical violence while using medical authority to ward off scrutiny of these violent acts.

However, these three histories—public dissection as spectacle, the for-profit display of fat ladies as freak show exhibits, and post mortems as a way to classify superior and inferior bodies—are not the only conditions implicated in *Obesity: The Post Mortem*’s production. The next sections will account for the visual and economic trends that also created the conditions for this film’s emergence. The rise of obesity science and the transnational organ trade provide both the means and economic rationale for this film’s existence, while the increasing prevalence of autopsies in popular culture provides the visual culture in which audiences can recognize a corpse being cut open as entertainment media.

**The business of corpses and the pathologization of fatness**

The woman dissected in *Obesity: The Post Mortem* was a US American citizen from California. 7 Wonder, the film’s production company, could not procure a corpse for this film from the United Kingdom because of weight limitations on whole body donations, and thus was forced to look internationally for an appropriate donor (M. Archer). The international transportation of a corpse for this film is significant for two reasons: first, because fat bodies are frequently ineligible for donation to medical institutions in the United States and the United Kingdom, the initial donation was made to the Long Beach branch of a for-profit company called Science Care. The very existence of this for-profit business in corpses complicates the presentation of *Obesity: The Post Mortem* as an educational endeavor and scientific public service. Rather than a film made possible through purely altruistic donation, this project was produced in collaboration with a trade in “unacceptable” or medically “unusable” bodies. And second, this exclusion of fat bodies from

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8 Additionally, in light of this history, we can understand why the first glimpse the viewer gets of the corpse is her unshaven mons pubis, immediately followed by the rise of her rounded abdomen. This fixation on “deviant” women’s genitalia is longstanding.
spaces of medical research is an example of the contemporary pathologization of fatness in the medical field, particularly through the construction of obesity as a disease in modern obesity science. Both the for-profit tissue trade and the pathologization of fatness must coexist for Obesity: The Post Mortem to be presented as a feat of public health education.

When BBC Three and 7 Wonder procured a corpse for Obesity: The Post Mortem from the United States, it became part of the international market based in bodies and body parts, a market that is predicated on some people making profits off the sale and distribution of other people’s tissues. As Catherine Waldby and Robert Mitchell point out in Tissue Economies, although organ and body donors in the United States and the United Kingdom are “largely excluded from selling their tissues,” their donated tissues can be “sold by the receiving party,” and this is exactly what Science Care did with the corpse used for Obesity: The Post Mortem (23). When the film tries to present itself as an educational endeavor enabled by the altruism of a whole-body donor, it erases the fact that Science Care almost certainly profited (symbolically and probably materially) from a body they received as a gift by selling it to 7 Wonder.\(^9\)\(^10\) According to a Reuters exposé released in 2017, Science Care reported $27 million in annual sales the year after Obesity: The Post Mortem aired (Shiffman and Grow).

However, 7 Wonder being forced into procuring this corpse from a business rather than a non-profit donation site such as a medical school is evidence of the way fat bodies are rejected as cadaveric learning tools because of the ongoing pathologization of fatness (Aleccia; Sager). As King’s College London stipulates on their body donation Web page, donated bodies are intended for anatomical examination, “the object of which is the study of the normal structure of the body” (“King’s College London,” emphasis added). By listing obesity as a factor that disqualifies full body donation in their guide to what kinds of bodies they will accept, King’s College labels the fat corpse as not only an abnormal body but a body that is so counter to the “normal structure” of human physiology that it cannot be a source of anatomical understanding. Such guidelines reveal the rejection of fat bodies as appropriate educational references through the medicalization of obesity as a disease (Guthman 25).

It is impossible to watch Obesity: The Post Mortem without situating it in the larger context of the “global obesity epidemic,” a moral panic that combines medical and economic rhetorics in its condemnation of fatness. This panic is

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\(^9\)I have not been able to verify whether or not the woman dissected in Obesity: The Post Mortem consented to the film or not. However, since her left arm was given to her family for cremation pre-filming, it is likely that her family consented, which meets the guidelines set forth by the United Kingdom’s General Medical Council (“General Medical Council”). But just in case they did not, technically “the consent provisions of the HT Act do not apply to material that has been imported” (Code D, item 64).

\(^10\)It is also poignantly ironic that although this corpse could be brought into the United Kingdom, a fat person looking to immigrate or even fly internationally may not have the same advantage. Obtaining citizenship is increasingly predicated on health status and BMI and more airlines are requiring fat passengers to purchase multiple seats or risk expulsion from the plane, indicating again that fat bodies may have more value dead than alive. See Pausé’s “Frozen: A Fat Tale of Immigration” for more.
unavoidable not only because its rhetoric permeates nearly every aspect of life in the global north, but also because the film itself both perpetuates and frames itself as intervening in this rhetoric. As Julie Guthman writes in *Weighing In: Obesity, Food Justice, and the Limits of Capitalism*, the medicalization of obesity rests on a slippage “between condition and disease, between indicator and pathology,” in which “excessive” tissues become “abnormal” tissues (26). This medicalized conflation of body size with health is the groundwork for this film’s ostensibly educational purpose—to demonstrate the consequences of fatness. Although unacceptable for the purposes of educating medical students, the fat corpse provides a visual representation to the public of the “costs” of obesity. These costs are made viewable through the display of fatness in the dissection itself, but also through the film’s explicit reference to the financial costs of obesity as a disease. As is stated in the opening minutes, this film’s producers see their project as “help[ing viewers to] understand a problem that costs the nation billions and ruins so many lives—obesity” (00:01:50). The dual characterization of fatness as a medical and economic crisis partially obscures and partially justifies the actual circumstances under which the corpse was procured—through a for-profit trade in gifted bodies. Thus, the tissue economy and the medicalization of fatness function as coexistent conditions of possibility for *Obesity: The Post Mortem*’s production. The tissue economy was necessary for procuring the actual material for the film, while the medicalization of fatness allows this production to be celebrated as a work of science and education despite its economic entanglements.

One final condition allowed for the production and success of *Obesity: The Post Mortem* as an educational film: the increasing prevalence of autopsies in popular media.

The visual spectacle of dissection

*Obesity: The Post Mortem* could not be made or understood as an educational and entertaining film without an audience prepared to watch (and potentially even enjoy) the dissection of a real person. Fortunately for the BBC and 7 Wonder, the past two decades have seen an exponential increase in the number of corpses and autopsies being portrayed in popular media. In fact, popular culture theorists like Ruth Penfold-Mounce have argued that recently, “popular culture representations of science, namely forensic science, [have provided] a normalising and softening process towards death and corpses that is stimulating … public fascination with the morbid, the macabre, death and corpses” (20).11 In her 2008 essay “Dead Famous and Dead Sexy: Popular Culture, Forensics, and the Rise of the Corpse” Jacque Lynn Foltyn even claims that “the macabre cadaver is pop culture’s new star” (154).

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11Given this program’s connection to TV shows like *NCIS*, I do not think it’s a coincidence that Carla Valentine resembles *NCIS*’s resident hyperfeminine, “goth-punk” forensic scientist, Abby Sciuto, one of the most recognizable figures from this television genre.
In “Corpses, Popular Culture, and Forensic Science: Public Obsession with Death,” Penfold-Mounce coins a new term for the way frequent viewers of forensic television learn to watch the dissection of dead bodies: the autopic gaze, a layered combination of clinical, voyeuristic, abject, and forensic gazes (27). The clinical gaze, as defined by Foucault in *Power/Knowledge*, is a relationship in which “the patient’s body is ‘read’ and interpreted by a physician creating a penetrating form of observation” (24). To this, Penfold-Mounce adds the voyeuristic gaze, defined by a desire to view the intimate, private lives (or, in this case, insides) of others, and the abject gaze, which renders abject that which it observes, but also creates feelings of abjection—conflicting attraction and repulsion—in the gazer. Finally, she adds the forensic gaze, “the gaze of science,” which empowers the viewer by providing medical “truths” (26). Through the film’s cinematography, viewers of *Obesity: The Post Mortem* are encouraged to view the dissection through the autopic gaze, a gaze that is “abject, voyeuristic and forensically inclined, focusing on the eroticising process of the cadaver as a visual spectacle” (Penfold-Mounce 27). This mode of viewing, conditioned by the rise of forensic television, primes the film’s audience to find disgust, pleasure, and “medical knowledge” in the splaying open of a real corpse.

Dissecting a woman also fits with the gendered nature of the autopic gaze, which casts the corpse as a bearer, rather than maker, of meaning. Treating the body with an autopic gaze is what makes this film’s predetermined conclusions tolerable for viewers who might otherwise object to an anonymous vivisection; watching the dissection, the viewer knows that the corpse’s fatness will be condemned regardless of what else is found. An example of this occurs in the tenth minute of the film, when Carla Valentine, the pathology technician who performs the initial steps of the dissection, finds a pair of breast implants as she pulls the corpse’s skin and pectoral muscles back from the ribcage (00:10:48). This could be a moment when she lets the donor’s body speak back to the viewer, but instead, Valentine dismisses the implants as “an incidental find,” forestalling any speculation about why the woman might have had them and, subsequently, any thought about what her life might have been like. And to make sure this train of thought does not occur, Valentine immediately follows this “incidental find” with some of the most objectifying, needlessly cruel sentences of the film: “there is a very large amount of fat here, and the reason it makes it [cutting] so difficult is it actually is greasy. It feels very much like butter, so what I’m doing here is just trying to make sure that my knife doesn’t slip too much on it” (00:11:08). Here, not only is the film’s narrative immediately returned to the spectacle of fatness, but an essential component of the human body is objectified and turned into an abject substance, one that is cast as both foreign to the body (because it’s more like food than a bodily material)
and an inconvenience to the medical (pathological) expert. This is the work of the autopic gaze as it extends even into language.  

The autopic gaze includes the abjectness of the corpse, but we can additionally argue that this woman’s abjection extends back in time, prior to her dissection. As Le’a Kent discusses in “Fighting Abjection: Representing Fat Women,” fat women’s bodies are always presented as abject, whether live or dead. The fat, female body “takes up the burden of representing the horror of the body itself for the culture at large,” a horror characterized by “revulsion, fear of contamination, association with the deathly aspects of the body, a repeated expulsion that marks the self’s borders, consignment to the past, and constant reevocation” (135; original emphasis). If the fat, female body is abject in life, then viewing it in death, splayed open for an audience, makes it doubly abject, repulsive in the way that both the fat body and the corpse “represent ... the corporeality and inevitable death of all bodies” (135).

The forensic gaze gives us visual access to the actual quantity of fat within this woman’s body, providing the medical “truth” that she is worthy of her exile from the realm of the self, the good, and the human. As Foltyn says, “for each myth, discourse, statement, or behavior we construct about the dead body, we create a counter one to balance it, for oppositions allow us to experience various aspects of the corpse which may help us discharge some of the anxiety we have about death” (Foltyn 155). The corpse in Obesity: The Post Mortem (re)produces the counternarrative of a good, disciplined subject dying a “good” death, rather than a bad, undisciplined subject facing continued spectatorship posthumously.

The development of the autopic gaze via crime shows and other popular culture programs made Obesity: The Post Mortem not only possible, but potentially reassuring or even gratifying. Thus, the establishment of this gaze is the final condition of possibility for this film’s production and acceptance.

The cultural work of Obesity: The Post Mortem

The English histories of public dissection, displaying freaks, and autopsying “inferior” bodies; the material conditions of the tissue economy and the medicalization of fatness; and the visual culture created by forensic television all generate the epistemic and discursive framework within which Obesity: The Post Mortem can appear as an educational, health-focused documentary in addition to a piece of entertainment media. These forces do constitute the

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12 According to Penfold-Mounce, “the forensic gaze is intertwined with the language in its investigation (Pierson, 2010), contributing to the empowerment of the viewer. In popular culture representations of forensic scientists, they are shown verbally to record their observations about the victim and the crime scene. This is particularly well illustrated in shows such as Silent Witness and CSI where the pathologists or medical examiners continuously describe and discuss proceedings and findings using the language and jargon of science. The forensic gaze adds to the science-based lens that stands between the viewer and death as it softens and distances the viewer from the revulsion of dead flesh and aids the emergence of corpse and death as entertainment” (27).
conditions of possibility for this film’s production, but they also shape what effect it has, as well as how its intended audience should receive it. This program is doing a great deal of cultural work, teaching its viewers how to understand both its form and its content, as well as themselves and their peers as bio-citizens with particular responsibilities to the population at large.

**Reviving history**

First and foremost, *Obesity: The Post Mortem* is reviving the histories that set the stage for its emergence. Public dissection has been brought back into the realm of the thinkable. In fact, it’s likely that the global audience of *Obesity: The Post Mortem* is unaware that there used to be laws against public dissections in England, much less the history behind those laws. Of course, it’s also unlikely that a viewer would think of this program as anything other than an autopsy show, given how it is billed; the medical authority imbued in the very title makes it difficult to think of the program otherwise. Regardless, it’s clear that the program has not only revived the idea of public dissection but has in fact motivated some viewers to pledge their own bodies to similar programs after death, as evidenced by “David,” a fat “Body Donation Supporter,” in the “Behind the Scenes” footage from the program. It is unclear how David was chosen for this footage, but his monologue, juxtaposed with information about how the corpse for *Obesity: The Post Mortem* was procured, makes it clear that post mortem dissection is no longer so taboo:

> I’m a future donor. I’m a big supporter of medical research and scientific studies and it kind of just kind of corresponds with my own personal values. When you see where an action that you can do now … in the future has impact on, let’s say a child with cancer or other people who are dealing with obesity like I am and have disorders that are either caused by the obesity or the obesity has, you know, made worse … these are all things that, you know, that would be nice for me to be able to help others. (00:03:10)

David’s altruistic vow to donate appears right after a scene in which Science Care employees outline the corpse’s shipping logistics, which also erases the fact that Science Care profits from selling the bodies that are donated to them and makes the fact that there is a transnational market for tissues seem completely natural and inevitable. What’s not mentioned, of course, is that the only place David could donate his body would be a for-profit company like Science Care, since he would be rejected by a medical school for being too fat.

Finally, televised dissection is legitimizied by the endorsement of the HTA’s head of regulation, Caroline Browne. Browne not only appears in the film’s “Behind the Scenes” footage, but also wrote a blog post justifying the program that was published on the HTA’s website (Browne). The HTA’s involvement in granting licenses for the program to be filmed at the Royal College of Surgeons means that the scandal of public dissection, formerly squelched by the 1832
Anatomy Act, is no longer a scandal. Instead, the scandal is overridden by the hierarchical work the film permits, desecrating a fat corpse in the interest of the public’s “health.” In *Obesity: The Post Mortem*, dissection for the masses is back, and—horribly—it’s condoned by the government.

**A return to primitivity**

With the return of dissection, we also find the medical and public desire to classify humans based on physical features and (ab)normality reinvigorated. Here I do not mean to suggest that the eugenic desire present in the efforts of Cuvier and his colleagues ever waned, but that this desire has been given a new, more sanitized form in *Obesity: The Post Mortem*. The narration of this program reproduces and fortifies what Paul Campos and collaborators call the “moral panic” that is so central to the obesity epidemic. The panic is not that “we” are becoming “less healthy,” but that “growing body mass will halt and perhaps even reverse the millennia-long trend of rising human life expectancy” (55). In other words, the panic is about losing “our” civility, an idea of civility that is directly tied to a white, patriarchal supremacy via nineteenth-century practices of classification, because too many people are deviating from the norm of the “superior,” thin body. When the narrator makes unsourced claims like “on average, we are over a stone heavier than just 20 years ago” and “75% of adults will be overweight or obese by 2035” without explaining any of the science or statistical calculations behind those claims, *Obesity: The Post Mortem* contributes to the alarmist rhetoric that fat people are dragging humanity backwards. Incidentally, as Campos et al. point out, these claims are based on an extraordinary exaggeration of what has actually happened to “our” weight over the past few decades:

The so-called “obesity epidemic” is almost wholly a product of tens of millions of people with BMIs [body mass indexes] formerly in the 23–25 range gaining a modest amount of weight and thus now being classified as “overweight,” and, similarly, tens of millions of people with BMIs formerly in the high 20s now having BMIs just >30. This movement of population cohorts from just below to just above the formal definitions of overweight and obesity is what public health officials are referring to when they point out that rates of obesity have exploded over the course of the last generation. (55)

Moreover, as they explain, the “average” weight gain cited here disregards the distribution of who is gaining weight and how much: while there has been significant weight gain among the heaviest individuals, most people considered “overweight” or “obese” are only slightly heavier than their predecessors. Paying attention to the details of this program’s statistical claims reveals a much different picture than sweeping statements about the failure of civilization. It also reveals how strongly the film is attempting to shape its viewers’ thinking on individual fat bodies as well as fat people as a whole.
Dehumanizing fatness

*Obesity: The Post Mortem* is able to reinforce the moral panic of the “obesity epidemic” through the dissection of a single fat person by reducing her life to her weight, using narration and strategic editing to box the reader into a single narrative of a pathological, pitiable fat person. For example, every time the narrator transitions back to the dissection after an interview segment, she asks a rhetorical question that pushes the viewer into this perspective. At minute fifteen, the transition is “What will we discover from them about the damage that fat has done?” (00:15:50). At minute 25, it’s “With the cardiorespiratory block removed from our donor’s body, Mike [the pathologist] can start his dissection of her lungs. Will we uncover any evidence of damage linked to her obesity?” (00:25:51). At minute 36, it’s “In the next stage of the post mortem, will we find any evidence of fat damage in the organs of our donor’s digestive system?” (00:36:00). These leading questions do not leave any room for an answer other than “yes, this woman is sick because of her fatness.” They eliminate the possibility of finding “normal” organs or illness caused by something other than “yes, this woman is sick because of her fatness.”

Even evidence that points to illness mechanisms beyond fatness is quickly dismissed. For example, as he dissects the lungs, pathologist Mike Osbourne finds evidence of pulmonary edema, fluid buildup in the lungs as a result of heart failure. It’s extremely likely that some level of edema would be found in anyone who died of heart failure, fat or thin. Instead of pointing this out, however, the narrator says, “From the startling discovery Mike has made in our donor’s lungs, we now know that she would have felt the impact of her obesity and heart failure every single day” (00:28:01; emphasis added). Not only does this quote attribute something not weight-related to weight, but it also presumes to know how this woman felt on a daily basis without any input from her. It is possible that she did have difficulty breathing, but there is no way to know how she felt about it, nor if any of it was related to her weight.

This strategy of blaming every ailment—physical, social, and psychological—on fatness is a strategy with which fat activists are extremely familiar. In her blog about the program, activist Ragen Chastain points out that this program can’t tell us about this woman’s genetics, how the stress of living in a fatphobic society may have affected her health, whether she was affected by chronic dieting (and the often subsequent weight cycling), if she took dangerous diet drugs (that can cause heart problems themselves), or if she received appropriate medical care throughout her life (since the vast majority of fat women do not) (Chastain). For a program that is ostensibly supposed to help fat people, *Obesity: The Post Mortem* says shockingly little about the detrimental effects of weight stigma on fat people’s health.

However, the ability to attribute pathology solely to fatness is also a feature of the visual work *Obesity: The Post Mortem* is doing. What separates this program from any other obesity documentary is our ability to watch the dissection. In the example above, it is the viewer’s ability to see and hear Osbourne squeeze the fluid from the...
corpse’s lungs that makes the narrator’s later overstatement believable. This program was shot and edited using what media scholar Bill Nichols calls “documentary realism,” a filming technique in which the image “is made to appear highly similar to the way in which a typical observer might have noted the same occurrence” (166). This cinematographic style is meant to convince viewers that they are getting a “true” look at what is happening inside this corpse’s body, that they are seeing what they would have seen had they been present for the dissection itself. This technique provides implicit assurance of the film’s objectivity, staving off accusations that the film is biased. For example, one review from when the program aired on Netflix reads:

Very informative. This documentary is a brutally honest take on the effects of obesity and I highly recommend watching it. I will say though that to some it may be difficult to watch, as it is a post mortem autopsy, but it delivers an objective view of what fat does to our bodies. Anyone saying that this is fat shaming is incorrect. Everything expressed in this documentary is OBJECTIVE. It’s not an opinion that this woman’s lifestyle led to liver issues, heart issues, and ultimately a premature death. This can be scary to think about, but this documentary also tells us that it isn’t too late to change. (Netflix)

Through this filming style, viewers are encouraged to forget the many levels of mediation shaping their relationship to Obesity: The Post Mortem. As Catherine Belling phrases it in “Reading The Operation: Television, Realism, and the Possession of Medical Knowledge,” “in documentary … accuracy is expected and trusted to take precedence over drama, giving such programs an overt epistemological power” (15). Viewers are meant to trust this program and have faith in the medical knowledge it presents.

Regardless of presentation, this footage is highly mediated. For example, two thirds of the way through the program, the viewer is given the “good news” that “excess internal fat doesn’t have to be a death sentence” (00:39:50). Instead, we are told, “the fight to beat the dangerous invisible fat can be won” (00:39:55). However, the fat in Obesity: The Post Mortem is far from invisible. The corpse’s fat is referred to as “yellow” at six different points in the film; additionally, it is described as “neon,” “greasy,” and a “glistening mess.” The materiality of fat is framed as something alien and hostile to the body, making its presence unnatural and dangerous. In the next seconds, the screen flashes with the statistic “morbid obesity reduces life expectancy by an average of 8 to 10 years” (00:40:00). Again, without source or explanation, the viewer is left only with the information that weight alone is the culprit to poor health and early death. Fat, no matter that it is a substance made by our bodies, is turned into an enemy to be excised.

Another layer of mediation comes from the multiple subjects of the film: the viewer is not just watching a dissection—we also see interviews with pathologists Osbourne and Valentine, Science Care employees, and half a dozen fat UK citizens. We do not know how these people were chosen for the film, nor what questions they were asked in their interviews that led
to their answers in the film. What we do know is that each fat person interviewed tells at least one stereotypical “fat person” story, bookending different clips of the dissection with narratives of Polycystic Ovary Syndrome (a favorite target of ridicule for fatphobes), sleep apnea, and Binge Eating Disorder and confessional tales of purchasing candy instead of salad at the grocery store and not sticking to diets and fitness regimes. One interviewee, Ben, even goes so far as to say, “I suffer from a severe lack of self-discipline” (00:14:58). Here, weight, pathology, and lifestyle are all conflated: fatness comes from an indulgent and irresponsible lifestyle, fatness leads to poor health, and fat people remain fat because we are lazy and undisciplined.

By interspersing these interviews with dissection clips and written text containing “information” about obesity, *Obesity: The Post Mortem* effectively universalizes the information it is providing. The interviewees are made into one-dimensional stereotypes whose lives are defined solely by their weight. The dissection relies on realism and histories of classification to seem objective. The narration does the work of connecting the corpse to the interviewees, and the randomly incorporated statistics connect the fat people we see in the program to fat people as an entire population. After the film ends, the viewer is left with the impression that the worst kinds of fatphobic ideologies are true, and counterhegemonic possibilities, like the idea that someone could be fat and healthy—are rendered unthinkable. *Obesity: The Post Mortem* effectively becomes both a script for how to be a good, healthy person (be thin, lose weight) as well as a threat of the consequences should you fail to achieve thinness.

### A biopedagogy for the at-risk subject

In other words, this film can be read as a biopedagogy, an educational text that subtly works to bring its viewers into alignment with larger biopolitical goals while simultaneously encouraging the internalization of those goals. As Chandler and Rice explain in “Alterity In/Of Happiness: Reflecting on the Radical Possibilities of Unruly Bodies,” a biopedagogy is a “loose collection of information, advice, and instruction about bodies, psyches, health, and well-being, often moralizing or lecturing in tone, that works to control people by using praise and shame alongside ‘expert knowledge’ to urge their conformity to mental and physical norms” (231). This program, although billed as medically educational, is actually educating its viewers on “how to live … what ‘health’ is, and what to do in order to be ‘healthy’ and happy … and avoid ‘risk’” (231). It

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13One interviewee, Joey, does say that she started gaining weight after being diagnosed with epilepsy and put on a new medication. However, when we see her next, she is berating herself for the weight gain and needing a size 20 wedding dress.

14By biopolitical, I mean the goals of the state to fortify the population through positive measures, in the classic Foucauldian sense of “make live.”
performs this education through the visual threat of what could happen should you not adhere to this regime: die fat, and your body might remain a target for humiliation and shaming regardless of how you lived, your grotesqueness serving as a warning to others not to repeat your mistakes.\textsuperscript{15}

This message is harmful to every viewer. Based on \textit{Obesity: The Post Mortem}, everyone is threatened by fatness: thin people risk becoming fat and fat people risk staying fat.\textsuperscript{16} Even Valentine, the thin technician, ends the dissection with the lines, “It [the dissection] makes you suddenly very aware of the fat in your own body. Well, it made me aware of the fat in my own body and the effect of that [sic] might have on my organs ... the strain it might put on my heart and the way it may affect my liver” (00:50:36). By framing fatness as a threat, something that “costs the nation billions and ruins so many lives,” \textit{Obesity: The Post Mortem} offers its viewers both a lesson on what not to be, as well as a guide for how to be a good, healthy, disciplined citizen.

In addition to its biopedagogical function, \textit{Obesity: The Post Mortem} further stigmatizes fat people.\textsuperscript{17} We are portrayed as already having failed to achieve a good, healthy life, yet we are obligated to do everything in our power to achieve some semblance of this life. If fatness is our most defining feature, then losing weight is the key to having a life defined by any other characteristic. Becoming thin is presented as the thing that should be occupying the majority of our time and energy. This is reinforced by shots of the interviewees exercising and choosing healthy food off restaurant menus—they are repenting for their earlier confessions of “fat behaviors.”\textsuperscript{18}

This is, ironically, profoundly unscientific as well as extraordinarily damaging. It’s well proven that dieting is a better predictor of poor health and weight gain in the long term than it is of weight loss, but \textit{Obesity: The Post Mortem} encourages it nonetheless (see Aamodt, \textit{Why Diets Make Us Fat}, for more details). Moreover, the film implicitly encourages the viewer to use information gleaned from a \textit{dead body}, rather than weight science or fat studies experts, to make decisions about how to be healthy. And finally, this program asks its viewers to perform the epistemological contortion of trusting a television program promoted specifically for its shock value to be objective in the medical knowledge it provides.

\textsuperscript{15}This is similar to what Deborah Lupton calls the pedagogy of disgust. For more, see her essay “The Pedagogy of Disgust: The Ethical, Moral and Political Implications of Using Disgust in Public Health Campaigns.”

\textsuperscript{16}In her chapter “Bypassing Blame,” Natalie Boero calls the obesity epidemic a postmodern epidemic, characterized by an obsession with everyone’s risk for becoming fat: “What makes the obesity epidemic unique is that we are all at risk for obesity; what varies is our degree of risk. Indeed, in an era of personal responsibility for health, one no longer need manifest any concrete symptoms to be considered at risk for any given disease (Clarke et al. 2003). Both this concern with risk and the divorcing of the concept of an epidemic from a traditional biomedical model are the true hallmarks of a postmodern epidemic like obesity” (308).

\textsuperscript{17}Watching this program as a fat person can be traumatic. Watching medical violence be committed against a body that looks like your own, supposedly in the name of your health, can take a massive psychological toll. I have watched \textit{Obesity: The Post Mortem} countless times to write this article and doing so has absolutely harmed me.

\textsuperscript{18}See Levy-Navarro’s “I’m the New Me” for a more fleshed out discussion of the role of confession in dieting discourse.
Conclusion

Turning a feminist science studies lens on *Obesity: The Post Mortem* reveals its historical, economic, and cultural situatedness as well as the ongoing consequences of its production. By analyzing the conditions that made this film’s production possible, such as the historical classification, display, and punishment of “pathological” bodies, the economic rationale of buying and selling body parts, and the prevalence of autopsies in popular media, I have shown how these conditions are taken up, and, in some cases, reproduced, in what has been touted as a public-serving, educational effort (Browne; 7 Wonder). Viewed through this lens, *Obesity: The Post Mortem*’s good intentions are revealed to be sensationalizing, pathologizing, and stigmatizing of the very people the program purports to benefit.

*Obesity: The Post Mortem* is not, and, indeed, cannot be about fat people’s health, or even improving public health in general. Rather, it is about turning a failed body into a spectacle, repeating a historical pattern of hierarchizing superior and inferior people, normalizing the international, for-profit trade in tissues, and perpetuating fatphobia.

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Works cited


