Psychologizing childhood in the reality show Biggest Loser
Temporal ordering and narrating a fat identity

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Obesity and overweight are central issues in contemporary western societies, and the public debates in media are extensive. This paper investigates stories from participants in the reality TV-show Biggest Loser, and how the participants invoke temporal identity changes and childhood traumas to produce discursively accepted narratives about the causes for being obese. This study analyses personal stories about being overweight, and narratives of living a life of obesity. The findings illustrate narrative trajectories in personal stories used to explain overweight within a contemporary therapeutic discourse, and how the participants use chronology and childhood as narrative resources to explain their obesity. These narratives do not only produce preferred explanatory narrative elements, but also highlight that a number of psychologized explanatory storylines must be used in order to produce a culturally valid and discursively accepted personal obesity-narrative.

Keywords: overweight, obesity, Biggest Loser, psychologization, therapeutic discourse, narrative genre, storylines, childhood narratives, childhood traumas, discursive psychology

Introduction

One of the most central public health issues debated in many parts of the world today is the obesity crisis. Obesity is described as "a plague sweeping the Western world", and the World Health Organization (WHO) has emphasized that obesity is a greater public health risk globally than starvation; the organization emphasizes that overweight and obesity today kills more people than underweight (WHO, 2020). An increasingly central part of the work with the obesity epidemic is also about mapping and managing the emotional aspects of obesity (Levitan & Davis, 2010). Furthermore, obesity is an important debating issue in public

forums, public debates, online forums and TV shows (Gilman, 2008; Lupton, 2013). These forums all emphasize how weight loss is the road to a slimmer and happier self. There are also numerous personal stories about the problems of being overweight, and narratives of living a life as obese. Like all stories these narratives follow specific trajectories, building on societal norms and expectations of normality, using shared cultural narratives to produce a coherent and discursively accepted narrative version (Phoenix, 2008). These narratives include everything from blaming the overweight person for being lazy, disgustful and selfish, to self-help tips on how to overcome your physical "ballast" and become fresh, alert and (yet again) physically attractive (Gilman, 2008). But there are also personal stories that emphasize experiences of having a body size larger than what is considered normal and healthy.

This study analyses how obesity is represented in the stories by participants and experts in the competition reality show Biggest Loser. The show features overweight participants competing to win a cash prize by losing the highest percentage of weight relative to their starting weight. The analysis will illustrate how storylines of past events are used in personal narratives to explain a present overweight. By studying stories in reportage, interviews and during competitions from the participants in the TV series Biggest Loser Sweden, this study will analyse the narrative storylines used by the participants to produce discursively accepted stories about the causes of their obesity.

The historic stigma of being fat

The overweight body is significantly absent in contemporary advertising, in magazines and newspapers. It is relatively fair to say that being overweight in contemporary societies is socially stigmatized. However, the fear of being fat is not a new phenomenon. In the year 300 BC, Hippocrates claimed that obesity did not only cause premature death, it was also a sign of spiritual weakness. The fat man in ancient Greece, Hippocrates claimed, was lazy, stupid and sissified (Västerbro, 2019). During the Christian era, the stigma of having a fat body was even more strengthened. Gluttony was declared one of the seven deadly sins and as such a particularly problematic one: it was a sin that could be seen from afar. A fat man clearly showed by his own revelation that he had "turned away from God" (Västerbro, 2019). The explanations for being overweight were connected to sinful life driven by the immoral act of eating too much.

Over the past decades researchers have emphasized that obesity is not as simple as the consequence of too much food or an unhealthy diet (Levitan & Davies, 2010). It is a symptom of a life trauma or a problematic life situation. We can-

not, it is argued, reduce overweight to a matter of calorie intake and metabolism. Accordingly, the causes of human obesity can be found in a person's psyche.

The contemporary stigma of being fat

For the last decades, numerous research reports have brought attention to the obesity crisis of contemporary societies. On an individual level, the alarm reports are substantial where the risks highlighted range from heart attack, infertility and type 2 diabetes, to depression, social phobia and suicide (Gilman, 2008). However, the risks are not only physical and psychological, they are also social and moral. They are all part of the social stigma of obesity, and people belonging to this "category of risk" can be subject to social exclusion and moral condemnations.

The slenderness norm of today is often emphasized as symbolic capital, which indicates desirable personal characteristics that include both normative ideals and norms of behaviour (Kulick & Mendeley, 2005). Thus, obesity is not only a medical problem, it is also a cultural and social phenomenon that has repercussions on both individuals and on societal ideals, as well as norms about the desirable (and thereby the undesirable) body. Therefore, overweight and overweight people, and the norms that surround this category, need to be studied in a societal context (Farrell, 2011). By examining obesity in a contemporary media context, the production of societal norms, ideals and expectations on a docile body can be made visible (Lupton, 2013). Societal norms and ideals include a variety of social and cultural norms of what is normal but also desirable. Not the least, this applies to the body. Bodily ideals, unlike many other societal ideals, are particularly evident in the sense that "it is visible". Ideals about the body are not only socially and culturally situated and reflect the prevailing norms of a given time; they are visible norms. They provide resources through which individuals come to understand the relationship between bodies and personal characteristics in relation to social and cultural contexts (Cliff & Wright, 2010).

The therapeutic society

The area of psychology has increasingly crept into our everyday lives and is also followed by an extensive line of explanation of our presence (Madsen, 2014). For the last half century, our everyday lives have been ever more intertwined with psychology as part of what many researchers are emphasizing as a therapeutic culture and a psychologization of everyday life (Madsen, 2018; Miller & Rose, 1986; Rose, 1996). Psychological experts, psychological vocabulary and

psychological evaluations are now a central part of family life, our workplaces and schools (Rose, 1996). The rise of "the psychological" has also changed the way we make sense of ourselves, our relations and social problems (Rose, 2019). We understand ourselves through psychological terminology – we have anxiety, we get panic attacks or we work with ourselves to find mental balance. Thus, social problems such as relationship problems, shyness, addiction or obesity, can all be found in our psyche and managed by psychology (Rose, 2019).

At the same time, the field of psychology includes a variety of therapeutic traditions ranging from psychodynamic therapy to cognitive behavioural therapy. Without defining these traditions in detail or going into the specificity of the different fields, they all address temporal aspects of human life to understand and deal with social problems. The temporal aspect becomes interesting in the analysis of the narratives in this article. In short, where psychotherapy (PT) traditionally focuses on the temporal causes of a problem, cognitive behavioural therapy (CBT) is more interested in dealing with the problem in the present, and seeks to develop forward-looking strategies to deal with the problem in everyday life (for PT, see e.g. Kealy & Ogrodniczuk, 2019; for CBT, see e.g. Westbrook, 2016).

The Biggest Loser reality show as narrative genre

There is also a great media interest in how to lose weight and avoid becoming fat, and in discussing how to handle obesity. In line with such interest, one of the biggest TV successes in the last decade is the TV-show Biggest Loser, where obese contestants compete in losing weight. The program is a huge success in many countries such as USA, Germany and in the Scandinavian countries; it had over 10 million viewers in the US during the premiere season in 2004 (Patten, 2013). During the season, the TV-viewers get to follow a number of overweight participants who are trying to lose weight. Every week the participant who has lost the least weight leaves, or is voted out by the other participants. The episodes include various challenges and food temptations and the winners of a challenge are given special privileges (for example; immunity against being voted out during the coming week). The show includes a number of different types of narrative events that involve retrospective interviews and every day conversations. One central part of the show is the weekly public weigh-in. In front of the other participants, their physical coaches and millions of viewers at home, the participants in their shorts or cycling pants, one at a time, step onto the scales to see the results of the week.

This is part of what Deborah Lupton in her book Fat (2013, p. 43) calls "a stigmatizing anti-fat-discourse" aiming to regulate and discipline fat bodies. The

TV-show, as a modern form of gladiatorial game, can be understood as a specific discursive practice produced within the wider self-transformative discourse of slenderness and anti-fat. Moreover, Lupton highlights that Biggest Loser is a particularly telling example of the anti-obesity-discourse of contemporary society. She describes the purpose of the show:

> The underlying meanings of this programme are all too clear. Fat people are lonely, unloved, emotionally volatile and sad; they deserve punishing exercise routines and stringent diets as part of their weight-loss efforts; they are childish and need a stern authority figure to force them into proper weight-loss habits.
>
> (Lupton, 2013, pp. 2–3)

As illustrated by this citation, being overweight is not only a pathological condition, but also connected to the person's "inner life". There are psychological mechanisms that can help to explain why this condition has arisen. Regardless of whether the description of the program above is valid, distorted or overinterpreted, I argue that the reality TV-show is an ideal site for examining narratives of overweight. Moreover, it is a suitable way of studying how culture functions in particular versions of the obesity epidemic and how it is discursively accepted, but also how people must rhetorically handle the slenderness ethos of today's society.

Analysing narrative genres

In many areas of social sciences, narrative research has often been interested in the relationship between narrative, culture and identity (Bruner, 1991; Esteban-Guitart, 2012). Walsh (2007) emphasizes that in any particular medium, narrative is a discursive matter. Accordingly, the social context and time are crucial for which personal stories that are given legitimacy and which storylines they should include. The question about how narrative genres can be understood, how they enable and delimit storylines and how the concept can be used in the analytical work, has increasingly emerged. One such site of narrative genre is the reality TV show. Rampton (2006) explains that a narrative genre is characterized by conventionalized expectations from a social group guiding what types of narrative trajectories that will be possible (and acceptable). Consequently, I regard this form of reality television program as a particular narrative genre with specific expectations, characteristics, rhetorical resources, normative ideas which enable particular discursively accepted storylines. Narrative genres are also both temporally structured and told within (and from) specific positions (Van De Mieroop, 2021). Therefore, in this study the televised personal stories are understood as a genre of talk that is told from a particular position within a distinct discursive framework.

This genre constitutes a specific discursive practice in which particular stories can be told and where specific elements and identities are co-constructed within this discursive framework (De Fina, 2013).

As identified by Atkinson and Silverman (1997) some 25 years ago, we live in an "interview-society" where we, in our surge for immortality, are more and more eager to tell stories about ourselves and our life events in public. Even more so today, this is an especially important part of reality shows on television and on social media platforms. This genre of talk is characterized by specific narrative elements that can tell us something about the normative framework of our time (Depperman, 2013). The reality TV show is a narrative genre, and involves a complex narration that often draws on flashbacks, future expectations and inserted interviews to force the viewer to rethink moral accounts, development and accountability (Keating, 2013). Moreover, the genre often highlights the documentary aspect and the unscripted, naturally occurring talk, which makes viewers disregard all editing work that has be done to produce a specific storyline (Farias et al., 2021). In the narrative genre investigated in this article, the most startling story, the shameful, the obnoxious and the disgusting is often an asset (Lupton, 2013). Images of extremely fat bodies and descriptions of gormandizing are both central parts in a new personal narrative of transformation.

To sum up, I will analyse these stories in the TV show as a distinct narrative genre that sets the framework for specific culturally valid personal story. Lifestyle changes and personal transformations are both important elements in this genre of storytelling. Personal narratives are also intertwined with a discursive framework of culturally accepted narratives about becoming obese, losing weight and other transformations over time. In this article, the personal narratives and the use of culturally accepted storylines used by the participants in their personal story will be analysed within contemporary therapeutic discourses.

Narrative analysis and discursive psychology

In contemporary societies we are not only using professional psychology to handle psychiatric problems, we are also invoking a psychological terminology to understand and narrate ourselves and our daily lives (Wiggins, 2017). The narrative analyses of this paper are influenced by the theoretical framework of discursive psychology (DP). In many respects, narrative analysis and discursive psychology have common theoretical premises. Traditionally, DP is interested in how psychological concepts such as identity, emotions or memories are produced for the functions they serve (Stokoe & Edwards, 2006).

While DP is focused on a detailed analysis of talk and interaction based on a conversation analytic approach, this study focuses on narrative elements or storylines that build the wider personal narrative. The study is interested in how psychological matters are used to perform social actions, and the intersection between personal narratives and societal norms and ideals (Wiggins, 2017). A DP-approach thus offers a shift from a traditional psychological analysis that treats psychological states of anger, anxiety or self-confidence as traits operating "behind the spoken words". In DP, language is not a channel to uncover underlying mental processes. Instead, scholars within this field are interested in how psychological concepts are used and deployed (Tileaga & Stokoe, 2015). In line with such an approach, this study shares the common ground of stating that the spoken words construct rather than reflect reality. Thereby, in the analysis of talk in TV-shows, the contributions are not understood as expressions of the participants' underlying thoughts or attitudes. Instead, the analysis focuses on how the participants make use of psychological concepts in their personal storytelling (Wiggins, 2017). In addition, investigating language-use and how people make use of psychological concepts to speak about themselves is particularly suitable for narrative analysis in this genre of interaction (Tileaga & Stokoe, 2015). By using such an approach to contemporary entertainment material from television, this study investigates how an obese identity is actually represented on the level of everyday discourse. Through an investigation of the use of psychological explanations and childhood memories in this narrative genre, we can learn something about how problems of obesity are explained, how specific accounts are discursively accepted and how people in personal stories position themselves by using established psychological narratives (Phoenix, 2008).

Personal storytelling and temporal identity

This article is seeking to analyse the personal narratives of the participants and how they draw on psychological vocabulary in their stories. Stokoe and Edwards (2006) suggest that we should investigate not only narrative structure, performativity and content, but also focus on what stories are designed to do. In addition, Bamberg (2006) underlines how narrative analyses can help us understand how people construct a sense of self when they engage in telling their personal stories. Personal storytelling also requires the use of cultural narratives, or shared societal stories that work within a particular discursive framework. In other words, the personal story must be coherent and consistent to its discursive framework in order to be understandable and legitimate.

In the late 1970s, Lyotard proclaimed "the death of grand narratives" such as Christianity or Marxism, predicting that they would be replaced by more local and provisional narratives (Lyotard, 1979/1984). Even if many grand narratives have partially been altered, there are still several narrative elements that recur in contemporary societies. They have not disappeared, but rather assumed new forms, been fragmented and have assumed the form of normative models and ideals of life. Lyotard (1979/1984) argues that grand narratives are stories to legitimize historical power and authority, and produce socially desirable customs. In this study, it is the master narratives that are the culturally, or rather, discursively shared stories that can tell us about the specific context, and that provide guidance for how to tell a discursively accepted and socially recognized personal narrative (Hyvärinen et al., 2021). Thereby, master narratives are central rhetorical building blocks in the construction of narrative self and identity.

Chronology, temporality and temporal identity change are often central elements in personal narratives (Blomberg & Börjesson, 2013; Cunliffe et al., 2004). By involving chronology in personal narratives, the storyteller can implicitly and explicitly point to a changed personality and a new improved self. Such temporal identity change can be both a rhetorical resource for the storyteller and an important analytical tool for studying the process of constructing identity (Blomberg & Börjesson, 2013). When a speaker uses temporal indexes, the intention is often to illustrate change between present and future selves. Thereby, personal stories of transformation, personal trauma or future success often involve accounts of childhood experiences. Through such narrative accounts the narrator can invoke both a temporal identity change, but also showcase self-reflection which is often considered a highly sought-after ability in many areas of society (Kilger & Jonsson, 2017). It is only through self-reflection on childhood experiences that personal improvement can take place.

The concept of storylines is often used to explain the narrative elements used to organize a discursively specific narrative, as an organizing principle of discourse (Depperman, 2013; Kilger, 2017). Depperman (2013) underlines that personal narratives, and the way people position themselves in narrative interaction, are in many ways intimately tied to the use of particular storylines. As an analytic tool, the storylines used in personal narratives can illustrate the culturally shared and accepted narratives in contemporary society. They can illustrate how norms, ideals and legitimacy are co-constructed within this specific discourse. Thereby, storylines are lines of action, building blocks or narrative elements used to produce and construct a personal narrative. By analysing storylines, we can illustrate how people in their everyday language-use apply established societal narratives (Phoenix, 2008). The storylines analysed in this paper are regarded as discursively specific, and the concept of *discursively shared narratives* is used to emphasize the

way narratives are discursively shared within their specific context, rather than being culturally shared societal narratives (Kilger, 2017). These personal stories are not told in a societal and cultural void, they are intimately tied to time and place. The legitimacy, understanding and credibility of a story are closely connected to a cultural and social context. Illouz (2008) emphasizes that analysing personal narratives within a specific discursive framework and in a particular site of engagement can be especially suitable for the understanding of how self and identity are constituted in and through culture (Illouz, 2008).

Another central part of narratives of self is the use of temporality (Brockmeier, 2000; Popova & Cuffari, 2018). Narratives can, of course, tell us a lot about the past, but they can also offer a way to explore the time to come; they enable us to re-narrate our personal future (Cunliffe et al., 2004). Researchers have also emphasized how chronological descriptions and time are important rhetorical resources in stories about personal identity (Blomberg & Börjesson, 2013; Mishler, 2006). Thereby, the narrator can relate to culturally shared agreements about responsibility and agency in their lives. For example, by highlighting previous opinions in young adulthood, or previous experiences during childhood, the contemporary person can be understood both in terms of her success or her shortcomings. Her contemporary self can be understood and culturally accepted for instance by referring to youthful foolishness, school bullying, traumatic upbringing or abuse. Traditionally, stories of personal success have also been attributed to a high degree of agency, while failures are mainly explained through unfortunate or less favorable external circumstances (Bülow, 2003).

Analysing personal narratives in therapeutic discourses

The analytical starting point of this article, used to understand the personal narratives, also builds on the extensive work of critical psychology or what has been termed *psy-knowledges* or *psy-disciplines* (Madsen, 2018; McAvoy, 2014; Miller & Rose, 1986; Rose, 1996). The psy-knowledges involve expert arenas where judgements are made about people's behaviour, cognitive capacities, personalities and mental health. Accordingly, they have a profound impact on people's everyday lives and opportunities. The related disciplines have become an important focus in critical psychology along with the power that these disciplines exercise in constructing and constituting humans in particular ways – in categorizing, labeling but also restricting peoples' lives (McAvoy, 2014). Critical approaches to the psy-disciplines do not criticize the need for, or significance of, psychological knowledge; they investigate the knowledge and powers exercised through those disciplines. In addition, scholars have illustrated how the expansion of psychology

in our everyday lives has influenced our self-understanding and "the governing of the self" (Madsen, 2018; Rose, 1996; Rose, 2019). They have shown how the therapeutic culture is producing social changes in the understanding and implementation of legislation, ideas about self-improvement in self-help literature, when trying to find a partner or in psychiatric testing in work recruitment procedures. These examples are all part of what has been called a *psychologization of society*, and it has been emphasized that this phenomenon has fundamentally changed the social aspects of human interaction (Madsen, 2014).

In addition to these previous studies of a wider discourse in society, I wish to suggest a narrative analysis of the phenomenon by using narrative analysis and discursive psychology (DP). The analyses in this paper, based on critical psychology, do not only contribute to critical fat studies and critical psychology, but primarily make a unique contribution to understanding how people narratively handle a stigmatizing discourse and an undesirable narrative position, related to changes or transformations in individual lives. Success stories often involve a high degree of narrative agency, while stories of moral failure express low agency (Hoebeke et al., 2011; Sandlin & Clarke, 2009). In short, personal success is explained through unique personal characteristics, while failure is explained by unfortunate external circumstances. In this analysis, psychological explanation models, agency and the temporality of self are central narrative building blocks in the explanation (and cultural legitimization) of being obese.

Methodology

This study investigates how the problem of obesity is represented by participants and experts in the reality show Biggest Loser. The empirical material consists of thirty episodes of the TV-show Biggest Loser Sweden during season 2020. The material includes a total of about 20 hours of material retrieved from the commercial channel TV4 Play in Sweden during March to May 2021. All interviews are presented in the course of the TV-program. The analysis seeks to investigate the participants' stories about obesity and/or dieting, but also the ways that shared societal narratives were deployed by the participants to legitimize their personal stories within this genre of interaction. The participants included the competitors, as well as the TV-host, two physical personal coaches, a medical doctor and a nutritionist. It should be pointed out that all persons except the competitors could be described as physically fit, which makes the contrast even more apparent.

According to my narrative approach, the stories are analysed in their situated context, and the situated descriptions of persons, events or categories are examined (Phoenix, 2008). The focus of the analysis is on storylines used by the par-

ticipants in interviews (reportage) and in personal conversations with their PT ("coaching sessions"). During such coaching sessions, the participant is often asked to "talk about their personal history". The analysis includes temporal aspects of the narratives: the use of chronology and past childhood events as well as the use of temporal identity change (personal transformation) in the narratives. Narrative chronology is an important part in the construction of personal stories of personal change, but it is also an important part of contemporary psychology – acting as a self-reflective individual. Only through self-reflection can personal change take place. Accordingly, the aim is to analyse the narrative storylines used by the participants to produce discursively accepted stories about the causes of their obesity. The narrative storylines used in the personal narratives are tied to cultural values, traditions and norms deployed when producing discursively accepted personal versions. Thereby, the construction of a personal story is based on a shared cultural framework for producing a culturally accepted personal version

Analytical structure

The structure of the findings highlights three storylines recurrently used in this genre of narration. In the first part of the analysis, all programs were viewed in their entirety on two occasions, when notes were taken and an overall thematic coding was carried out. Thereafter, each theme was watched, and recurrent storylines in the material were coded by noting time and theme of explanation. Repeated storylines in each theme were analysed with regard to the theoretical framework of storylines (recurrent narrative elements), temporality (self-transformation) and discursive framework (normative elements employed for justifications), after which they were thematically structured. The excerpts cited were transcribed verbatim and thereafter translated from Swedish to English by the author. The chosen extracts in the findings section are based on an analysis of the entire corpus; they illustrate typical storylines from the entire material.

Ethical considerations

All empirical material used in this paper is freely available from Swedish TV4 play in its entirety. The study follows the guidelines for ethical research practice within social sciences established by the Swedish research council (2017). For example, all quotes used in the findings section are reproduced verbatim, but all names are fictitious. While the purpose of the article is not to analyse the life stories of the participants or critically examine their statements, the author chose to use fictitious names even though their real names can be found in the original Swedish

material. Thereby, I have sought to protect individuals from immediate identification, while remaining transparent about the research process. In addition, to ensure analytical validation, my provisional understanding of the empirical material and the translations has been discussed at several data sessions with colleagues in the discourse seminar at Stockholm University and the Swedish School of Sport and Health Sciences.

Findings

One of the overall findings in all of the recurrent narratives during the whole TV-series is that no one *wants* to be fat. This has repercussions on the personal narratives, and is the basic understanding emphasized both explicitly ('I don't want to be fat anymore!') and implicitly ('what does your daughter think about your eating habits?'). Overweight is a condition that you want to get rid of, in order to create a better life for yourself. The mantra stated by the TV-host and the personal coaches in the show is that "you need to change habits" and it is "up to you to do it". Moreover, it is emphasized that losing weight is in your own hands and appeals to your psychological stamina, determination and personal character. Secondly, the program underlines that there is more to overweight than (just) *overeating*. The problems of overweight "go deeper" than just eating too much, and the legitimate causes of overeating can be found in your psyche. Thereby, it is also a case of personal change and inner self-transformation. This change of body shape is not only a matter of the body getting thinner, it also involves "a mental journey" towards a new and more complete future self. In order to reach this new self, the slim, or at least non-fat, body is a prerequisite.

The findings illustrate the narrative storylines used by the participants to produce discursively accepted stories about the causes of their obesity. The analysis highlights three recurrent storylines used by the participants to explain their obesity: (1) childhood as a narrative resource, (2) comfort eating: psychologizing causes of obesity, and (3) unhealthy relationships, self-esteem and weight gain.

Childhood as a narrative resource

In the theme that deals with the causes of obesity, there are two main storylines: (1) always been "the fat kid", and (2) haven't always been like this. The first narrative is characterized by a fat-identity, while the latter highlights specific events during childhood. Both past tense stories deal with the issue of finding "the real causes" of the participant's obesity beyond bodily reasons, and these can be found in their psyche and are caused by past events. The first example is a recurrent

storyline in the material, and is a representation of the fat-identity-narrative. In this example, Monica describes memories of her childhood identity. In the second example, the causes are identified in childhood and young adulthood traumas, such as experiences of school bullying, casualties or the loss of a parent, neglectful parents or social vulnerability. In the example, Anne describes an event in order to explain why she is overweight.

(1) **Monica:** 'Well, I'm so used to being overweight. It's a part of me. I know nothing else. Me, I'm just 'the big girl', sort of.'   (Episode 12)

(2) **Anne:** 'I had a pretty difficult childhood. I grew up with divorced parents, and this was really when my comfort eating began.'   (Episode 2)

The retrospective descriptions of childhood trauma or past life events that initiated (or triggered) the participants' problems of obesity are often vaguely described. In line with what Kilger and Jonsson (2017) have illustrated, vague accounts are often used as a rhetoric approach in contested areas. Vague accounts are often difficult to question and are, therefore, more easily discursively accepted as legitimate. The example above is typical for the whole empirical material, when Anne emphasizes that she had "a pretty difficult childhood". As we will see, this approach also reappears in descriptions of events later in life, and is analysed in the last section of the findings. In a similar vein, Andy continues within the same explanatory theme.

(3) **Andy:** 'I've always been told I'm fat. Both from my parents, teachers, the school nurse. "Do not take an extra portion, because you are fat". "Do not eat that, because you are fat". All they knew was how much they put in front of me. But, I often went down to the kitchen, took ice cream and cola because we always had that at home. That was nothing my parents were aware of.'
                    (Episode 1)

This example shows how temporality is incorporated into the fat-identity-narrative. Fat is not an effect of overeating, it is what I *am*. Goffman (1959) emphasizes that stigmatization from the outside world produces identity acceptance, where the individual becomes and understands himself based on external expectations and opinions. In this case, the story is more about overcoming this chronology of self-understanding and shaping a new future self. In addition, this is an important narrative building block to legitimize that weight loss is difficult. It is not only about losing weight, it is also about changing identity.

Comfort eating: Psychologizing causes of obesity

Another repetitive example deals with obesity as an effect of handling social problems in everyday life, and using food as a strategy for this. This theme also involves the psychologization of eating. A common issue occurring in the entire material is the use of food in order to deal with emotions and the concept of *comfort eating* (Levitan & Davis, 2010). At the same time, comfort eating is a double-edged sword: it is both a means of self-medication to deal with difficult situations (such as bullying or exclusion), but it is also the reason that bullying and exclusion arises. In the next example, the participant Andrea describes how it all started. In this example, Andrea continues within the same theme, explaining how she uses comfort eating today to handle difficult times:

(4)   'I have a big problem with the fact that, at times, I comfort eat (.) a lot. This thing with prioritizing, and eating at 9 in the evening. And then, eat (.) tacos.'
(Episode 2)

Along similar lines, Monica describes her relation to chocolate in an interaction with the TV-host after having eaten chocolate during a "temptation competition".

(5)   **Monica:** 'Yes, but chocolate has always been a bad habit of mine. So that's what I've always found comfort in.'

Host: 'How did it taste?'

Monica: 'Well, it was good. But usually when I have eaten chocolate, it has been my comfort, so I've been so manic that I have had to gobble as much as I can. And that was not the feeling I had today. So, it was good, but not the same anxiety attached to it. It was quite nice.'   (Episode 18)

In line with this example, using food as an emotion regulator is frequently discussed by the participants. For instance, eating can be used when feeling misunderstood in everyday life situations, when dealing with anger or disappointment. In psychologically oriented obesity research, comfort eating is attributed to being one of the biggest risk factors for developing obesity (Levitan & Davis, 2010). Thus, eating and food becomes self-therapy and an emotional regulator, which often recurs as an explanatory model in other areas of addiction and self-harming behaviour: the alcoholic who uses alcohol to numb anxiety and worry, or the anorexic who handles low self-esteem through self-starvation. Madsen (2018) and Rose (2019) illustrate how personal narratives about the self in a psychologized contemporary discourse include the process of understanding and explaining our current mental status and actions through our "psychological luggage". Thereby, our behaviour becomes a rational product of our historical psychologized self.

However, comfort eating must be analysed within a wider discursive framework. It is not only an act of eating to deal with emotions. It is also about *who* comfort eats, *what* is eaten, *where* is it eaten, and *how* it is eaten. When Sarah Jessica Parkers' character Carrie Bradshaw, in the rom-com Sex and the City, eats Ben and Jerry ice-cream curled up in bed after (yet another) separation from Mister Big, comfort eating is hardly seen as a problem, rather the opposite. But in the examples above, this is seen as highly problematic and part of the participant's personal characteristics. Wiggins (2017, p. 45) emphasizes: "[…] repertories around eating can shape the types of food we treat as 'normal' or 'traditional' food, as well as how often and when we eat, and what we talk about when we're eating". In this case, eating at home, on your own, eating a lot and late at night is a form of comfort eating that is psychologized and cast as pathological. Unlike Carrie Bradshaw, such comfort eating is stigmatized and attributed to weak character rather than being an accepted or almost romanticized form of social action. Lupton (2013) emphasizes that this is a central part of the stigma of being fat: social action is attributed to personal identity as an effect of a lack of character.

Unhealthy relationships, self-esteem and self-transformation

Another storyline that reappears within this theme involves violent and/or unhealthy relationships during adolescence or young adulthood. This part includes several different narrative elements, where the feeling of being rejected results in low self-esteem, self-confidence and even self-hatred. Moreover, these storylines also emphasize that the relationship has led to an exclusion from a larger social context. In the first example, Rose describes her previous relationship; and in the following, Sara explains how her relationship resulted in weight gain.

(6)   **Rose:** 'Then I ended up in a relationship that was very destructive. He tried to meet other girls. Especially other girls who had a completely different body type than the one I had. That was what made me really hate myself.'

(Episode 2)

(7)   **Sara:** 'One of my first relationships was very unhealthy. And that was when I was just 20. We lived very sedentary. All we did was go to work, eat unhealthy food and drink beer. During the two years we lived together like that. So, I gained 30 kilos.'   (Episode 4)

In both these examples, food and eating is a way to deal with a difficult social situation, but it is also one of the main reasons for social exclusion. In the first example, vague, simplified psychological explanations ("destructive relationship", "self-hatred") are central narrative elements used to explain the current situation.

Within the psychological paradigm, the difference between self-esteem and self-confidence is often emphasized. Self-confidence is usually described as primarily situational, while self-esteem is a more general term that denotes our own view of our value as a human-being and especially in our love life (Illouz, 2008). High self-esteem, it is often argued in a psychologized rhetoric, reduces the need for us to compare ourselves to others (Madsen, 2018). In this case, the comparison with others indicates that Rose has a low self-esteem and is thereby feeling self-hatred. Such feelings are managed through food. Thus, a central part is about listening to a person's feelings and managing these feelings. In the new personal story, these must be signified in other ways and with other rhetoric tools. Only then has the overweight person gained real psychological insight and can then change. In another example from an interview in the final program, the issue of psychological self-transformation is addressed.

(8) **Host:** 'And Julia, how would you describe the biggest psychological change?'

     Julia: 'Well, the biggest psychological change, I would say is that I actually dare to admit that (.) but, that I have had the need for help and that [I have] really taken the step to feel better. To get to grips with feeling better. To get to grips with my well-being. Because I didn't feel good before. So gradually, I work on myself and I (.) I feel better and better.   (Episode 19)

This narrative element of temporal identity change is central to the story of self-transformation (Blomberg & Börjesson, 2013). In this example, the change is not primarily physical or behavioural, it is psychological. Obesity is not a consequence of eating too much, it is a psychopathological state recognized in the mind of the individual. It is also these explanatory models that are repeatedly confirmed, verified and encouraged by the program's experts. It is when the psychological trauma is identified and accepted by the participant that the transformation can begin "for real". Thereby, the psychologized explanatory narrative is naturalized, discursively accepted and given cultural validity. In line with previous studies, such psychologized narratives of self-transformation work well within a wider contemporary therapeutic discourse (Illouz, 2008; Madsen, 2018; Rose, 2019).

Discussion

It is undeniably interesting that particular social problems can be narrated and shown on television and not others. Although the personal stories related to the human psyche are central to many areas in addition to obesity, it would be unlikely that many other social problems would be given the same exposure and

gain such media interest. Which problems that are worth attention must be agreed on in the general community, and stories of obesity seem to be both culturally accepted and requested. However, it is also a question about *how*. These narratives must be told in a particular way using specific psychologizing rhetoric and explanatory models to become culturally valid and accepted (Rose, 2019; Wiggins, 2017).

In contemporary western societies, our body is a central part of our identities, and is considered to reveal something about the personal characteristics of an individual (Farrell, 2011). Our bodies are considered to reveal the true nature of our selves. The body is a marker of social identity; it is through the body's appearance that we can communicate ideals outside (and beyond) our personal narratives of ourselves. In addition, our bodies have also a narrative history and are an ideal site in the construction of a new and improved (narrative) identity.

The analysis in this article has illustrated how temporality is a central part of stories about our bodies and has shown how storylines from childhood are rhetorically used as culturally accepted storylines to explain overweight. Personal narratives combine significant events in one's life and, thereby, give our lives meaning, direction and purpose (Bamberg, 2011). They also serve as retrospective explanations for our various life events and, as such, they need to be socially accepted by the members of the community to which we belong (Moscovici, 2000). The findings illustrate how temporal aspects (past and future time) serve as valuable narrative resources in the construction of a transformed future self. In addition, the recognized personal stories of being overweight need to involve past events such as childhood traumas, bullying, parental neglect or unhealthy relationships. The personal story is intimately connected with culturally shared and discursively accepted stories in order to be accepted. One culturally accepted psychological explanatory narrative seems to be that the cause of obesity can be found in the psyche of the individual (Rose, 2019).

Thereby, specific events such as different forms of childhood events are used by the participants and become accepted within this contemporary therapeutic discourse. This therapeutic ethos is part of what many previous researchers have highlighted as a psychologization of personal problems and identity (Illouz, 2008; Rose, 2019; Madsen, 2018; Madsen, 2014). Consequently, particular temporal narrative accounts become discursively accepted within this therapeutic discourse, for example the quest for a constant improvement of the self. These therapeutic narratives about the self become narratives in action, interwoven in the process of understanding, working with and overcoming problems of the self. This also involves a normative societal narrative of self-improvement and personal development (Madsen, 2018). The personal story of success today always includes

change and development, and a driving force to become "the best version" of one-self (Illouz, 2008).

The findings also illustrate that the stories are closely linked to childhood experiences and, thereby, to a psychodynamic discourse with a focus on understanding contemporary personal problems through the analysis of childhood events of the past. Although this form of therapy has, in many settings, been superseded by a more forward-looking and effect-oriented cognitive therapy, these retrospective childhood stories still seem to be highly viable in therapeutic genres of interaction. In contrast to such development in the psychiatric traditions, a retrospective gaze on childhood memories is used by the participators in the show and recognized by the "experts". This produces discursively recognized versions to answer the questions about causes for obesity. In critical psychology, scholars have underlined how the power of psychology is governing contemporary society through psychological judgements about desirable human conduct or by categorizing psychological abnormalities (Gilman, 2008; Madsen, 2018; Rose, 2019). In line with these studies, the findings here illustrate how, in order to be discursively accepted, contemporary narratives about obesity have changed, from emphasizing the cause as an (immoral) act of eating too much, to outlining obesity as a pathological state recognized through the mind of the individual.

In this paper, I have shown how the identity work in the TV show follows the lines of contemporary therapeutic discourse. First, personal narratives must build on a psychological understanding, and it is empirically shown how psychological concepts are used to legitimize narratives of being fat. Furthermore, the use of childhood trauma as a narrative element is a viable resource in order to develop a culturally valid and discursively accepted version of these narratives. Methodologically, the article illustrates how discursive psychology can be integrated with narrative analysis in studies of how psychological concepts such as identity, emotions or memories are produced, and the functions they serve in personal narratives. By highlighting how childhood can be invoked as a narrative resource in personal stories, this study is also contributing to the field of child and the youth studies.

Finally, I would urge other narrative scholars to investigate the psychologized self and the therapeutic ethos in personal narratives in other areas, and the use of childhood traumas as narrative resources. Not the least, it is important to study how this surfaces on the level of everyday discourse, and thus how it influences institutionalized interaction in, for instance, appraisals in pre-schools, schools and work places, in health care and in total institutions such as prisons and youth detention homes.

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