

Weight-Inclusive Healthcare, Part 1

This may be an unfamiliar phrase, but it is a movement that has been around for decades and is gaining ground as more people recognize that currently accepted weight standards are discriminatory and harmful to a large portion of the world's population. The idea that weight or body size is an accurate indicator of health is being challenged as more proof is shown that there are fat people who have normal blood sugar, blood pressure, cholesterol, heart health, etc., just like there are thin people that have high cholesterol, high blood pressure, heart disease, diabetes, etc. This is a complicated topic, so will be addressed in a series of handouts. Continue reading to learn more about the basics behind this idea.

What IS weight neutral or weight-inclusive healthcare?

The belief that:

- ⇒ Weight is not an accurate measure of health
- ⇒ Fat people have existed since the beginning of the human race, and are still deserving of respectful care
 - ⇒ There is nothing morally wrong with living in a larger body
- ⇒ It is possible to work towards health (if that is your desire) without focusing on losing weight
 - ⇒ There are many reasons for body changes, including genetics, medications, medical conditions, etc.

***A note about language:**

- ⇒ the word “fat” is being used as a neutral descriptor, not a slur or insult
- ⇒ The terms “obese”, “obesity” and “overweight” are stigmatizing (“obese” is from a Latin word meaning “to eat oneself fat”)



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Why is it important to promote/advocate for weight-inclusive care?

- ⇒ Research has shown that weight bias from healthcare professionals leads to delayed care, including missed diagnoses
- ⇒ Many providers will prescribe weight loss no matter the medical symptoms or complaint
- ⇒ Joint replacement surgeries are often denied based on weight, despite evidence that higher weight people still benefit from the surgeries, including improvements in pain and function



Key terms:

- ⇒ Healthism: the idea that health is a personal responsibility, without regard for systemic problems like discrimination, access to food, safe exercise spaces and medical treatment
- ⇒ Weight stigma/bias: negative attitudes, beliefs, stereotypes and behaviors based on body size
- ⇒ Social Determinants of Health: the conditions in which people are born, live and work that can affect their health, like housing, health care access, food access, economic stability, etc.
- ⇒ Health at Every Size[®]: a framework that recognizes that body size does not determine metabolic health, that diets are not sustainable and can actually cause harm
- ⇒ Intuitive Eating: an approach to eating that is based on trusting the cues from your own body rather than following strict diet rules
- ⇒ Fat acceptance: a social justice movement that aims to promote the equality of fat people and decrease weight-based discrimination

A brief history of the fat acceptance and weight-neutral care movements

1940's: Minnesota Starvation Study (looked at the effects of reduced food consumption to determine the needs of people coming out of POW camps)

1960's:

*Weight
Watchers®*

- Weight Watchers is founded, the first gastric bypass surgeries are performed, and British model Twiggy is the beauty standard

- Lew Louderback publishes article entitled "More People Should be FAT" in the Saturday Evening Post, which leads to the founding of the National Association to Aid Fat Americans (later changed to National Association to Advance Fat Acceptance) or NAAFA

1970's: Michigan is the first (and only) state to pass a weight-based discrimination law

1980's: National Institutes of Health (NIH) committee ignores scientific evidence and declares obesity a disease

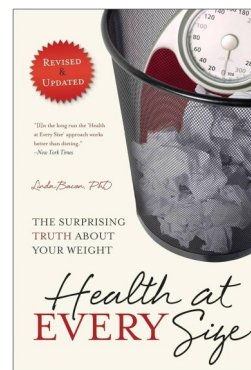
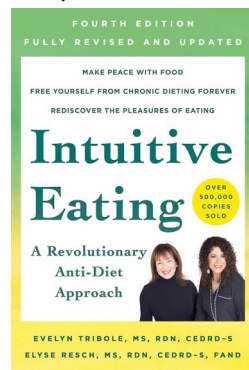


1990's:

- The first International No Diet Day is celebrated (observed each year on May 6)

- Surgeon General C. Everett Koop declares a "war on obesity"

- Intuitive Eating by dietitians Evelyn Tribole and Elyse Resch is first published (now in it's 4th edition)



2000's:

- The Association for Size Diversity and Health (ASDAH) is founded

- Health at Every Size by Dr. Lindo Bacon is published

Additional Resources:

- ⇒ ASDAH website: www.asdah.org
- ⇒ Maintenance Phase podcast (available on iTunes and Spotify)
- ⇒ Ragen Chastain's Weight & Healthcare Substack www.weightandhealthcare.substack.com
- ⇒ HAES[®] Health Sheets: www.haeshealthsheets.com
- ⇒ NAAFA website: www.naafa.org



Coming up in Part 2:

Deeper discussions of weight cycling, Intuitive Eating, Health at Every Size[®], and size discrimination

Resources: <https://asdah.org/haes/>

<https://www.health.mn.gov/facilities/hchomes/collaborative/documents/b3pptld24.pdf>

<https://www.takingcharge.csh.umn.edu/healthism-what-role-health-coach>

<https://www.nationaleatingdisorders.org/weight-stigma/>

<https://stop.publichealth.gwu.edu/LFD-apr24>

<https://journals.plos.org/plosmedicine/article?id=10.1371/journal.pmed.1005003>

**Consumer-centered access for long-term care information, referrals and assessments.
For information, call 518-382-8481, #9, ext. 304**



Do you have questions or concerns about what to eat?

If you are participating in services offered by Schenectady County's Senior and Long Term Care services, you are eligible for a free consultation with Debbie Griswold, Registered Dietitian.

Call Cornell Cooperative Extension, Schenectady County at 518-372-1622, ext. 269 to contact or leave a message.

Check out our website for nutrition resources: <http://ccschenectady.org/nutrition-for-seniors>