



**Objective:** This project aims to advocate for a Weight Inclusive Approach--an approach that sees size as a natural expression of diversity and is linked with greater positive health outcomes. This project will uphold an empowerment-based approach. Terminology, like *fat*, will be utilized as a process of re-appropriation and normalization, as fat is the preferred term within the fat acceptance movement.

## Weight Inclusive Approach (Calogero et al., 2018)

- This model upholds that body diversity is a natural part of the human experience and people have a right to be fat without prejudice.
- Health and wellness can be fostered independent of weight.
- Health and medical interventions should do no harm.
- People's health cannot be separated from the circumstances of their lives and working to improve health and well-being means attending to the circumstances and the systems that dictate them.
- A Weight Inclusive approach meets people where they are and takes a protective stance on health by encouraging sustainable practices that do not endanger people's health under the guise of health promotion.
- Eating patterns, physical activity patterns, availability of social support, stress-reduction, and self-care practices should be utilized as tools for health promotion rather than food restriction and "yo-yo dieting."

## Weight Normative Approach: Medical Myths (Calogero et al., 2018)

- Weight and its management are the central determinant of health.
- Weight and disease are positively and casually related.
- BMI is a meaningful proxy for determining health.
- Body weight is controllable and should be managed.
- Significant weight loss is maintainable and sustainable for the majority of people through dieting and exercising.
- The pursuit of weight loss is safe, and its health benefits outweigh any risks.
- Stigmatizing fat people will promote health and motivate people to lose weight.

## A Weight-Inclusive Reality

(Calogero et al., 2018)

- Socioeconomic status, access to health care, harassment based on size, and social location are stronger determinants of weight gain and disease progression than weight.
- Body weight co-occurs with certain conditions (e.g., hypertension); it is not the sole, casual determinate.
- Physical strength, metabolic fitness, biomarkers, eating habits, and physical activity are more reliable determinants of health than BMI.
- Lower-income communities have less access to recourses like nutrient-rich foods and safe, nearby recreational areas (e.g., gyms, Playgrounds, bike paths, pools, etc.), making dieting and exercising unsustainable and sustainable for many communities.
- Weight cycling through dieting compromises physical and psychological health.
- Maintaining a stable weight has better health outcomes for all body sizes.
- Internalized weight stigma is associated with stagnate improvements in disordered eating behavior and overall difficulty in weight loss.



## The Lack of Size in Diversity Training

(Kasardo, 2018)

- Research shows courses relating to professional counseling, marriage and family therapy, and social work do not include adequate training in size.
- The coverage in diversity courses are limited and (typically) do not cover the idea of sizeism or the impact it may have between health care providers and patients/clients.
- Majority of the time when weight is mentioned in mental health training textbooks it is in reference to eating disorders.
- Not acknowledging sizeism and diversity training adds to the fat stigma and the medicalization of size. It doesn't allow clinicians the ability to explore their own biases within their trainings.
- Clinicians are more likely to pathologize fat clients than non-fat clients and they expect fat clients to put forth less effort in obtaining better health.

## What Can We Do? (Kasardo, 2018)

- Acknowledge fat oppression and its impact on clinical work, including the problems presented in a weight-normative society.
- Recognize that sizeism is a part and should be included in the social categorizations of intersectionality.
- Acknowledge the existence of sizeism and include it as a dimension in diversity training courses.
- View fat through a social justice lens by respecting size as a diversity dimension, correcting weight normative/anti-fat ideology, and advocating for a weight inclusive approach.

## Resources

