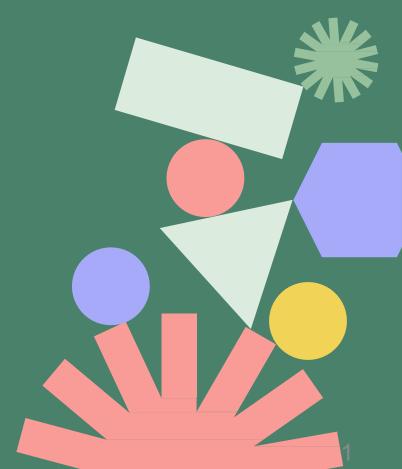
Health at Every Size® 101

Danielle Rhodes, MS, RD, LD

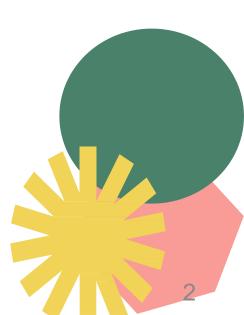
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Little about me...

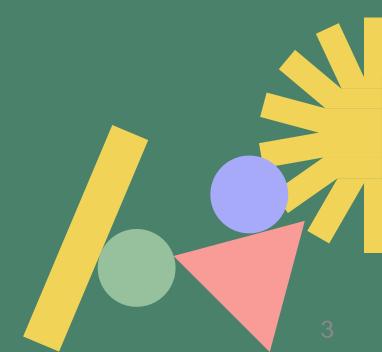


- Boise, Idaho
- Registered Dietitian
- Masters in Science of Nutrition
- Registered Yoga Teacher
- Anti-Diet
- Working with Eating disorders6 years



What we are going to talk about today

- Definition and history of Health at Every Size ®
- Misconceptions of Health at Every Size ®
- Consequences of weight centric approaches to health



History of Weight Inclusivity

- Taken many forms since the 1960's and maybe even beyond
- Gained traction when an engineer with a fat wife Bill Fabrey and author Lew Louderback joined forces
- Johnnie Tillmon
 - Women of color activist who fought for equity in fat and poor bodies, and more
- End weight discrimination/stigma
 - Discrimination based on a person's weight (NEDA)

NAAFA NEWSLETTER

NATIONAL ASSOCIATION TO AID FAT AMERICANS, INC. P. O. BOX 745

October 1970

Western Editor: "MEG" Gwynne Editor-in-Chief: "MEG" Gwynne Eastern Editor: Lew Louderback



YORK TIMES INTERVIEW: Bill and Joyce Fabrey (right) talking about NAAFA at interview lunchgiven by the Times. With them are Marvin Grosswirth, NAAFA's Public Relations Consultant. and actress Shirley Stoler, an Honorary Life Member. Other NAAFA members at this meeting were



What's happening today...

New York City passes law barring weight discrimination

1 hour ago





naafa national association to advance fat acceptable

Changing Our Language

Instead of stigmatizing terms like....

- Obesity
- Overweight

Use more inclusive terms...

- Larger body
- Person in a bigger body
- Fat

Better but NOT the best

Person with obesity

Health at Every Size® Introduction

- Trademarked in 2013 by Association for Size Diversity and Health
- They are revising principles this year to acknowledge more social determinants of health
- Also a well known book Health at Every Size By: Linda Bacon
- Social justice movement
 - o End weight discrimination and stigma



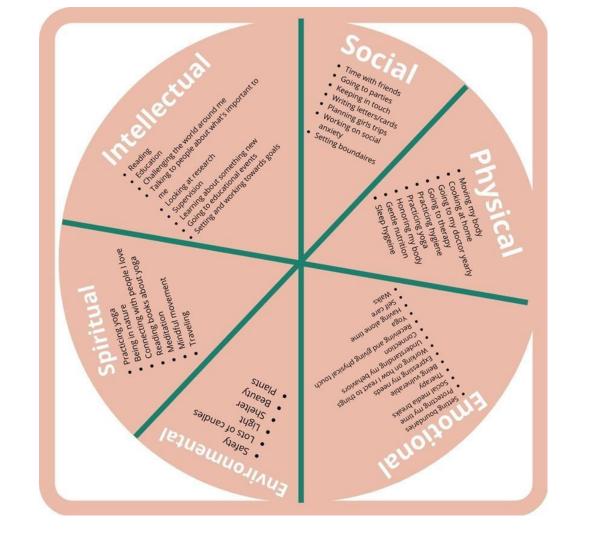
Health at Every Size®

HAES® supports people in adopting health habits for the sake of health and well-being (rather than weight control

Health from WHO

"Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity."





Diets Don't Work

- Many "diets" focus on on number or appearance
 - Miss other areas or social determinants of health
- Unsustainable
- Physical and psychological effects
 - Preoccupation w/ food
 - Decrease metabolic rate
 - Decreased muscle mass
- Decreased self esteem
- Increase risk for disordered eating



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NOOM

MINDSET

* Make Good Health a Hal







I eat dinner early

in the evening.



This is Slim-Fast.

Stick-thin models aren't our inspiration. You are, Slim-Fast is weight loss you can live with.

There's a word for the way society sees bodies.

Insane.



Principles of HAES®

01

Weight Inclusivity

Accept and respect the inherent diversity of body shapes and sizes and reject the idealizing or pathologizing of specific weights.

02

Health Enhancement

Support health policies that improve and equalize access to information and services, and personal practices that improve human well-being, including attention to individual physical, economic, social, spiritual, emotional and other needs.



03

Eating for Wellbeing

Promote flexible, individualized eating based on hunger, satiety, nutritional needs, and pleasure, rather than any externally regulated eating plan focused on weight control.

04

Respectful Care

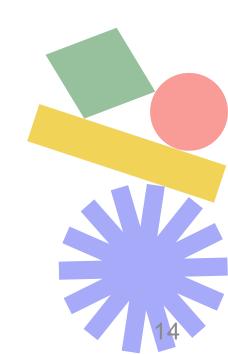
Acknowledge our biases, and work to end weight discrimination, weight stigma, and weight bias. Provide information and services from an understanding that socioeconomic status, race, gender, sexual orientation, age, and other identities impact weight stigma, and support environments that address these inequities.





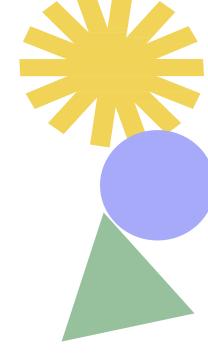
Life Enhancing Movement

Support physical activities that allow people of all sizes, abilities, and interests to engage in enjoyable movement, to the degree that they choose.



Misconceptions of HAES®

- Anti-weight loss
- Anti-Health
- Exercise and nutrition doesn't impact health
- Anti medical nutrition therapy or anti nutrition
- Anti-science
- Everyone is healthy regardless of weight
- HAES practitioners can't work with people who desire weight loss
- It's just for people in larger bodies
- Eat whatever you want whenever you want



Impacts of Weight Stigma

- Oppression and discrimination have huge impacts on health
 - Immediate effect: Less time spent with MD, belief they will be less complaint, increased negative experiences, impaired cognitive function and ability to communicate effectively
 - Long term effect: high levels of stress impact health, wait longer to seek out care, avoid health care settings, place lower value on health, weight focused treatment
- Internalized stigma, has greatest impact
 - Believes that one deserves discrimination
 - Feel less confident to engage in health promoting behaviors
- Withhold surgery, medication, or other interventions unless weight loss occurs

Research of HAES

Weight loss Group	Both	Weight-neutral program
Significantly lower BMI		No change in weight
	Improved Lifestyle Behaviors	Increased Intuitive Eating
	Cardio-metabolic fitness	
	Improved psychological well-being	
	No change in blood pressure, fasting blood glucose, or LDL cholesterol	Higher decrease in LDL

(Mensinger et al., 2019)

More Research

- I-HAES® (n = 62) or CTRL (n = 35) groups
- 58 completed the study
- Eating attitudes and practices, perception of body image, physical capacity, and health-related quality of life. Moreover, qualitative and quantitative data suggest that this novel intervention was more effective than a traditional HAES®-based one.
- Neither had change in body composition measurements
- No increase in time of physical activity in HAES group

Table 1. Type and frequency of the activities performed by the intensified HAES $^{\mathbb{R}}$ -based intervention group (I-HAES $^{\mathbb{R}}$) and the control group (CTRL).

Activity	I-HAES®	CTRL
Supervised physical activity	3 times-a-week	none
Individual nutritional sessions	2 times per month	none
Philosophical workshops	5 throughout the intervention	none
Lectures on physical activity	none	1
Lectures on healthy eating	2 (pre-intervention)	2
Lectures on philosophy	none	1
Food diary register	Throughout the intervention	2 (pre- and post-intervention)

Weight-neutral interventions in young people with high body mass index: A systematic review

- 6 articles
- Increase in weight related, behavioral, psychosocial, and cardiometabolic outcomes
- Focused on:
 - Mindful eating
 - Mindfulness
 - Eating a wide variety of foods
 - No focus on portion control or energy density of food items

How might this look

HUGS	LEARN
Health focused, understanding lifestyle, group supported, and self-esteem building	Lifestyle, exercise, attitudes, relationships, nutrition
Eating for well being-recognize and respond to hunger/satiety	Intake based of external prescriptions/caloric prescriptions
Size acceptance	Weight loss explicit goal
Physical activity	Physical activity
Personal enjoyment	
Life fulfillment	

Interventions in (Mensinger, et al., 2016)

Things You Can Do

- Discuss necessity of being weighed at the doctors office
- Challenge weight based policies
- Educate yourself and others as appropriate
- Remove dieting tools from your home/office:
 - Diet magazines or books, unfollow weight focused social media accounts, remove scales
- Challenge weight focused or fat shaming comments
- Uncover any biases you have, cultivate curiosity

Resources

Books:

- Intuitive Eating: Evelyn Tribole and Elyse Resch
- Body Respect: Linda Bacon
- Anti-Diet: Christy Harrison
- The Body is Not an Apology/workbook: Sonya Renee Taylor

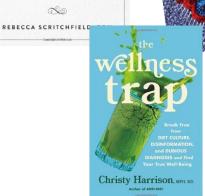
Podcasts:

- Food Psych
- Maintenance Phase
- Rebel Eaters Club
- Con Artist: Herbal Life episode



Transform your health from the inside out—

and never say diet again.



You've been generous.

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