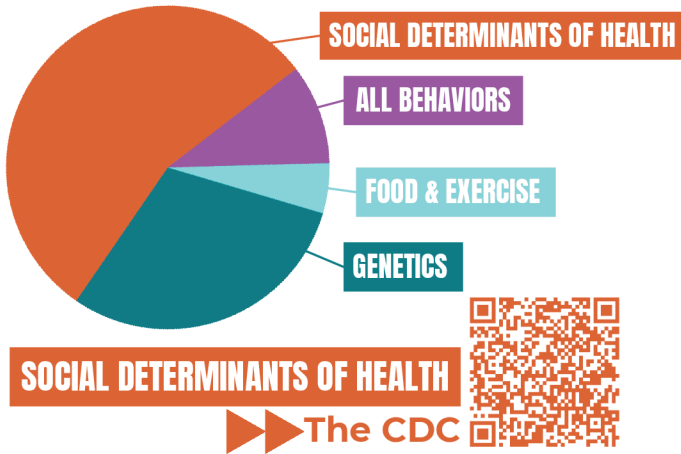


Determinants of HEALTH



SDoHs are the conditions in which we are born, grow, work, live, worship, and age. Including socio-political systems (i.e. poverty, stigma, discrimination, access to healthcare, etc.)

FOOD & EXERCISE + ALL BEHAVIORS

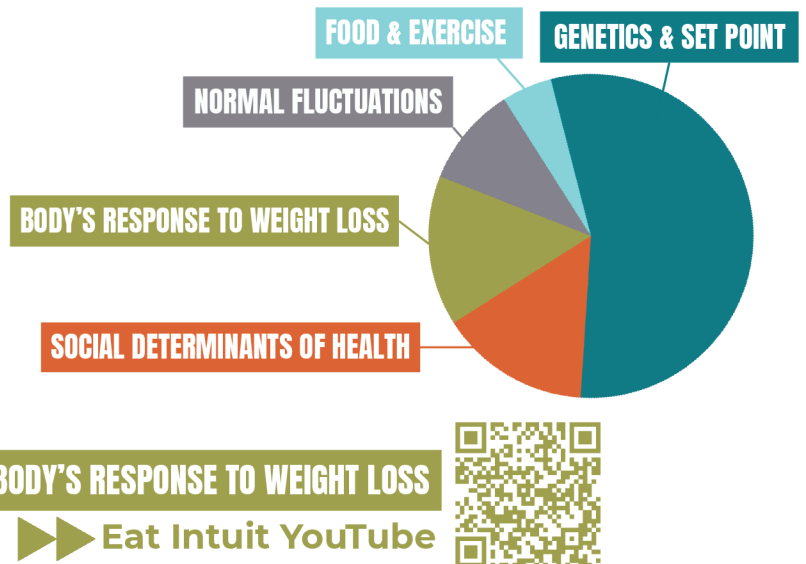
Food and exercise are a small subset of all individual behaviors that affect our health (i.e. smoking, substance use, seeking mental health, sleep, relational (de)stressors, risk taking, etc.)

GENETICS & SET POINT

►► Eat Intuit YouTube

Genetics play a key role in our physical make-up (shape, size, height, color, etc.) as well as susceptibility to hereditary and health conditions. Our Set Point is the weight range that our body naturally works to maintain for us, without any interference from us.

Determinants of WEIGHT & SIZE



The Body's self-protective Response to Weight Loss is to gain more weight. This extra energy storage is a buffer against future famine. 95-97% of weight loss attempts fail, with 2/3rds of the people regaining more weight than they lost.

NORMAL FLUCTUATIONS

Normal fluctuations could be *life-spanning* (growing up and aging), *seasonal* (change in level of activity, pregnancy, etc.) and *daily* (water retention, bowel movements, stress, hormones, etc.)

Redefining Health For Yourself: What Matters Most to You?

Diet Culture prioritizes the pursuit of thinness (under the guise of physical health) as the *only way* to be healthy. *But it's not.* Physical health isn't the *only* - or even the *most important* - kind of health. *Health doesn't have a certain look or a certain size.*

You get to decide for yourself, what health means and what it looks like for you.

When I think of health, I usually think of:

☐ weight ☐ diet ☐ discipline ☐ control ☐ something else: _____

I'd rather think of health as:

☐ energy ☐ peace ☐ connection ☐ joy ☐ resilience ☐ presence ☐ wholeness
☐ something else: _____

Three things that truly support *my* wellbeing are:

One external message about health that's been hurtful for me:

What Drives Weight Stigma?

Anti-Fat Bias - driven by the weight loss industry- has become baked into our weight-centric approach to healthcare. This is manifested in our wider Diet Culture which elevates thinness thru myths saying that we're in control of our weight and thinner is always better.

THE HARMS OF WEIGHT STIGMA

Mental

Increases anxiety, depression, self-judgment, while decreasing self-esteem and felt sense of agency (the ability to make decisions and effect change)

Physical

Increases Allostatic load (from discrimination), drives weight loss advice and attempts, which leads to weight cycling and Worsens our cardio-metabolic health (cholesterol, blood pressure, etc)

Eating Disorder Risk

Damages our relationship with our food and body, increases the risk of Eating Disorders while also causing clinicians to under-diagnose, misdiagnose and pathologize patients

Poor Quality Healthcare

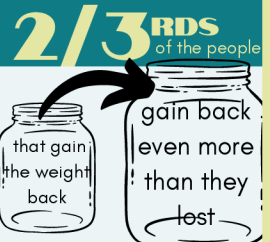
Leads to traumatization and worse health outcomes for patients due to being denied, or delayed, access to evidence-based care. Needing to lose weight before being treated often exacerbates the condition.

Weight-Centric Healthcare Is Rooted in Weight Stigma and Looks Like...

- Routine or mandatory Weigh-Ins
- BMI-Based Denials
- Prescribing Weight Loss Instead of the Evidence-Based Treatment offered to people in smaller bodies
- Anti-Fat Bias among Providers
- Assuming your weight is the root of any health issue and weight loss is a viable solution
- Refusing to provide treatment options other than weight loss
- Failing to provide Informed Consent on the risks and benefits of weight loss
- Blaming the patient's weight for fertility challenges or fetal health conditions.

95-97% of weight loss attempts fail

Humans haven't yet found a single way to maintain weight loss



Diet Culture Myths

NOT SUPPORTED BY SCIENCE

Thinner is Always Better

Your Body Is Your Enemy

You Are In Control of Your Weight

All Food is Either Good or Bad

Weight Stigma & Weight Cycling

independent of size
cause many of the issues
generally blamed on weight

INCLUDING

INCREASED RISK OF DEVELOPING

- Heart Disease
- Stroke
- Hypertension
- Insulin Resistance
- Type 2 Diabetes
- Cardiovascular Strain

**AT EVERY SIZE
AT EVERY AGE**

EVERYBODY DESERVES

The Right to Exist with Dignity, Respect

Everybody deserves the right to exist, access to support and services and respectful care at whatever size, age, ability, “health status” that they are. **1**

Evidence-Based Healthcare, Not Prescribed Weight Loss

The BMI is not an indicator of health and it shouldn't have any sway on which treatment options are available. The evidence shows that weight loss is neither healthcare, nor health promoting in itself. Higher-weight patients should be given the same evidence-based treatments prescribed for lower-weight patients.

Non-Stigmatizing, Non-Weight Centric Healthcare

Research shows that weight is *not* an indicator of health and that whatever a person's weight, weight stigma is bad for their health. Anti-fat bias and weight stigma have no place in healthcare. **2**

Informed Consent and Bodily Autonomy

Any discussion of weight loss must happen at the patient's request and must include informed consent about the ineffectiveness of weight loss attempts and the side-effects, possible complications and untested nature of weight loss drugs including GLP-1s. **3**

To Define Health for Themselves

We do not need to accept Diet Culture's narrow definition of health as peak, max, optimal physical fitness and ability. The pursuit of health is not a moral or social obligation.

Safe Spaces to Exercise and Move Their Bodies

Access to weight inclusive, stigma-free, spaces of belonging to move their body without restriction or judgment.

A Healthy Relationship With Their Food and Body

The freedom to be attuned to their body, their values and make their own choices about if/how they eat and exercise without interruption or judgment. **4**

Eating Disorder Awareness, Prevention and Treatment

Access to weight inclusive Eating Disorder treatment. The right to be informed about the role that dieting and weight stigma play in increasing the risk of Eating Disorders.



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**3 Weight &
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HAS A HEALTHCARE PROFESSIONAL TOLD YOU OR YOUR KID THAT YOU NEED TO LOSE WEIGHT?

USE THESE RESOURCES TO PROTECT & ADVOCATE FOR YOURSELF AND YOUR KIDS

LEARN ABOUT THE INEFFECTIVENESS & HARM OF WEIGHT LOSS

Ragen Chastain's Substack:
The Weight and Healthcare
Newsletter



Ragen Chastain, "New
Study on the Harms of
Weight Cycling" - Part 1



FIND A WEIGHT-INCLUSIVE HEALTHCARE PROVIDER

Association for Size Diversity
& Health (ASDAH) Health At
Every Size Directory



Christy Harrison's
Anti-Diet Provider
Directory



DOWNLOAD RESOURCES TO ADVOCATE FOR YOURSELF & YOUR KID

Association for
Weight & Size
Inclusive
Medicine



Quick Guide:
Diet Drugs and
Surgeries for
Children



HAES
Healthsheets
Library



RESOURCES FOR RAISING KIDS TO BE ANTI-DIET INTUITIVE EATERS

Book: "How to Raise Intuitive
Eaters with Food & Body
Confidence" by Sumner
Brooks, Amee Severson



Book: "Fat Talk: Parenting
in the Age of Diet Culture"
by Virginia Sole-Smith



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