



Please Support Me by Using a Weight Inclusive Approach to My Care

Dear Medical Provider,

I am currently in treatment for an eating disorder. During treatment, I have learned through my own experience and from research regarding weight regulation that dieting and trying to lose weight can cause more problems than it can solve. Furthermore, dieting and trying to manipulate one's body is largely unsuccessful in the long run, and I believe weight is not an indicator of health.

As a result of this realization, I have been working on feeling more at peace with my body I have and improving my lifestyle habits for my overall health and well-being - rather than weight change. I have been learning a lot about how to nourish and honor my body and unlearning some of the thoughts I had when chronically dieting.

I am excited to share some of my recovery-focused victories through this process:

- _____
- _____
- _____

I would love your support as I continue on this journey!

I have listed a few things below that will really help me along the way:

- I ask that I am not weighed if it is not applicable to the condition that I am seeking treatment for.
 - *If my weight is needed, please allow me to stand backward on the scale and ensure no one says the number back to me and/or includes it in the visit summary handed to me*
- In discussing treatment/interventions for my medical conditions I ask that you not suggest weight loss
- I ask that no one comments on my body or weight (i.e. compliments or concerns)

Please let me know if you have any questions about this moving forward. I appreciate you as my practitioner, and thank you for supporting me on this journey to becoming my healthiest self!

Sincerely,

Additional Reading and Research

[https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2253567/Weight Science – Evaluating the Evidence for a Paradigm Shift](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2253567/Weight%20Science%20%E2%80%93%20Evaluating%20the%20Evidence%20for%20a%20Paradigm%20Shift)

Lindo Bacon, Lucy Aphramor

<https://nutritionj.biomedcentral.com/articles/10.1186/1475-2891-10-9>

This paper evaluates the evidence and rationale that justifies shifting the health care paradigm from a conventional weight focus to HAES.

Size acceptance and intuitive eating improve health for obese, female chronic dieters

Lindo Bacon, Judith S Stern, Marta D Van Loan, Nancy L Keim

<https://www.ncbi.nlm.nih.gov/pubmed/15942543>

HAES approach resulted in improved health risk indicators

Relationship Between Low Cardiorespiratory Fitness and Mortality in Normal-Weight, Overweight, and Obese Men

Ming Wei, MD, MPH; James B. Kampert, PhD; Carolyn E. Barlow, MS; et al

<https://jamanetwork.com/journals/jama/fullarticle/192035>

Relative risk of all-cause mortality was similarly mitigated by fitness, regardless of BMI

Healthy Lifestyle Habits and Mortality in Overweight and Obese Individuals

Eric M. Matheson, Dana E. King and Charles J. Everett

<https://www.jabfm.org/content/25/1/9.abstract?etoc>

Healthy Habits were associated with a similarly significant decrease in mortality regardless of BMI

Stigma in Practice: Barriers to Health for Fat Women

Jennifer A. Lee, Cat J. Pausé

<https://www.frontiersin.org/articles/10.3389/fpsyg.2016.02063/full>

An exploration of barriers to healthcare for fat people, including structural and institutional policies, attitudes, and practices.



Eating
Recovery
Center



Pathlight
Mood &
Anxiety
Center

Recognizing the Fundamental Right to be Fat: A Weight-Inclusive Approach to Size Acceptance and Healing From Sizeism

Rachel M. Calogera, Tracy L. Tylka, Janell L. Mensinger, Angela Meadows, Sigrun Daníelsdóttir
<https://www.tandfonline.com/doi/full/10.1080/02703149.2018.1524067>

An exploration of issues with the Weight Normative Approach, the benefits of a Weight Inclusive Approach, and strategies for therapists to align their practice with a Weight Inclusive Approach

What's wrong with the 'war on obesity?' A narrative review of the weight-centered health paradigm and development of the 3C Framework to build critical competency for a paradigm shift.

Lily O'Hara and Jane Taylor

<https://journals.sagepub.com/doi/full/10.1177/2158244018772888>

Critique of the weight-centered health paradigm and review of the literature around ineffectiveness and harms of the weight-centered approach.

The weight-inclusive versus weight-normative approach to health: evaluating the evidence for prioritizing well-being over weight loss

Tracy L Tylka, Rachel A Annunziato, Deb Burgard, Sigrún Daníelsdóttir, Ellen Shuman, Chad Davis, Rachel Calogero

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4132299/>

Review of the data on weight and health, including ineffectiveness and harms of dieting, health effects of weight stigma, and data behind a weight-inclusive approach.

Obesity treatment: Weight loss versus increasing fitness and physical activity for reducing health risks

Gaesser and Angadi

[https://www.cell.com/iscience/fulltext/S2589-0042\(21\)00963-9](https://www.cell.com/iscience/fulltext/S2589-0042(21)00963-9)

Makes the case for weight-neutral care over intentional weight loss

The body politic: the relationship between stigma and obesity-associated disease

Peter Muennig

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2386473/>

Examines the relationship between weight stigma and health issues, and finds that weight stigma may drive health issues that are typically blamed on body size.



I Think Therefore I Am: Perceived Ideal Weight as a Determinant of Health

Peter Muennig

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2253567/>

Found that the difference between actual and desired body weight was a stronger predictor of physical and mental health than body mass index (BMI)

Validity of claims made in weight management research: a narrative review of dietetic articles

Lucy Aphramor

<https://nutritionj.biomedcentral.com/articles/10.1186/1475-2891-9-30>

The best available evidence demonstrates that conventional weight management has a high long-term failure rate. The ethical implications of continued reliance on an energy deficit approach to weight management are under-explored.

How effective are traditional dietary and exercise interventions for weight loss?

W.C. Miller

<https://www.ncbi.nlm.nih.gov/pubmed/10449014>

The data that exists suggest almost complete weight regain after 3-5 years

Medicare's search for effective obesity treatments: diets are not the answer

Traci Mann, Janet Tomiyama

<https://www.ncbi.nlm.nih.gov/sites/entrez/17469900>

Almost all dieters regain all the weight, many regain more

Long-term Effects of Dieting: Is Weight Loss Related to Health?

Traci Mann, Janet Tomiyama

<https://onlinelibrary.wiley.com/doi/abs/10.1111/spc3.12076>

Dieting was not shown to be correlated with improved health outcomes.

Probability of an Obese Person Attaining Normal Body Weight: Cohort Study Using Electronic Health Records

A. Fildes et. al

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4539812/>

The annual probability of achieving normal body weight was 1 in 210 for men and 1 in 124 for women with simple obesity. The probability declined with increasing BMI category