

Fiona Willer for www.healthnotdiets.com

Health at Every Size® in Dietetic Practice



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Unpacking Weight Science www.UnpackingWeightScience.com

Health, Not Diets www.healthnotdiets.com

*Training and workshops in weight neutral practice
for health professionals*

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Overview

- Health-focused, size accepting approaches eg HAES®
- HAES® and the Nutrition Care Process (NCP) & Evidence Based Practice (EBP) frameworks
- Interrogating weight centric & weight neutral research



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‘Lifestyle’ Interventions

Can be weight-centric or weight-neutral



Food/Eating



Movement/Physical Activity



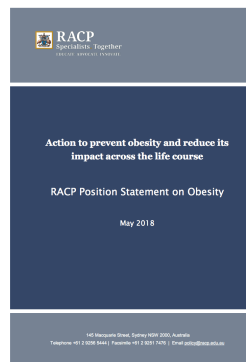
Psychological or counselling elements to change perspective and/or maintain behaviour change

Weight-Neutral Lifestyle Interventions

- Sensitive to considerations of body size
 - stigma, discrimination, medical needs
- Don't aim to change, body weight or shape
 - Not anti weight loss, simply anti pursuit of weight loss
- Impact and intention of intervention is not to change weight
 - Same use of term as in pharmacology

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RACP supports healthy habits at every size



“

The RACP recommends the Federal Government of Australia:

- Develop, support, update and monitor comprehensive and consistent diet, physical activity and weight management guidelines for children, with a focus on critical periods in the life course (pre-conception, antenatal, infancy and early childhood)
- Revise clinical guidelines for weight management of adults to incorporate:
 - The evidence on the low likelihood of long-term efficacy and potential detrimental effects for repeated attempts at weight loss
 - An emphasis on the importance of optimising health and managing treatable risk factors at any weight
 - The need to ensure the physical environment meets the needs of people with obesity and minimise the direct and indirect impacts of weight bias in the health system

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Obesity prevention and management

Position statement

February 2019

Recommends: 'health gain' over 'weight loss'

“ Weight bias and stigmatisation are serious issues affecting the health and wellbeing of people living with obesity.⁷ People with obesity may avoid healthcare if they feel shamed about their weight. Public obesity messages that focus only on weight and individual factors contribute to stigma and bias.⁸ The emphasis should shift from loss of weight to gain in health.⁵

The RACGP recognises the need for a change in public policy to support healthy environments, where healthy options are readily available and affordable. To prioritise their health, individuals increasingly must work against the environments in which they live.^{10,11,40} The RACGP advocates that the focus of the health message be on 'gaining health' rather than simply 'losing weight', recognising that obesity is about more than body weight.⁴¹ ”

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Health-focused, size accepting approach (weight-neutral) intervention models

For Health Professionals

- Health at Every Size®(HAES®) Principles¹⁷
- Non-Diet Approach¹⁸

For public via book or trained coach

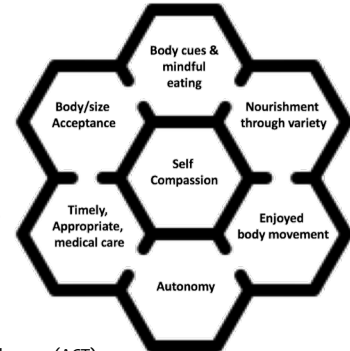
- Intuitive Eating¹⁹
- Well Now²⁰
- Am I Hungry²¹
- Body Trust® (Be Nourished)²²

Underlying motivational framework:

- Self Determination Theory²³

Counselling styles:

- Motivational Interviewing, Acceptance & Commitment Therapy (ACT)




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Health at Every Size® principles:


(Weight neutral approach example)

Principle	Statement
Weight Inclusivity	Accept and respect the inherent diversity of body shapes and sizes and reject the idealizing or pathologizing of specific weights.
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.
Respectful Care	Acknowledge our biases, and work to end weight discrimination, weight stigma, and weight bias. Provide information and services from an understanding that socio-economic status, race, gender, sexual orientation, age, and other identities impact weight stigma, and support environments that address these inequities.
Eating for Well-being	Promote flexible, individualized eating based on hunger, satiety, nutritional needs, and pleasure, rather than any externally regulated eating plan focused on weight control.
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.

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ASSOCIATION FOR SIZE DIVERSITY AND HEALTH



HAES AUSTRALIA

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Health at Every Size®: principle 1

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

- There is no moral or health obligation for larger bodied clients to attempt to lose weight.
- Reassure client that body size does not automatically dictate 'health' and that 'healthy BMI' is a population metric, not appropriate for individuals ('less incidence of certain diseases as a group')
- Encourage body appreciation and size acceptance in clients of self and others

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Health at Every Size®: principle 2

Principle	Statement
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.

- Advocate for your clients to access timely care, screenings, tests, medications and health services, not delayed by weight loss demands.
 - Be across weight-centric and weight neutral lifestyle approach research.
 - Broaden clinical goals to include PROMs & PREMs, behavioural measures & psychometric measures (dietetics relevant: diet quality, dietary restraint, ED risk).

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Health at Every Size®: principle 3

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

- Be aware of and actively work to reduce own thin bias and untangle other assumptions about people with larger bodies. This may take clinical supervision and/or therapy for own body issues.
- Ensure that clinical environment is suitable and non-stigmatising – no anti-obesity posters, scales are not visible, magazines include diverse representations.

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Health at Every Size®: principle 4

Principle	Statement
Eating for Well-being	Promote flexible, individualized eating based on hunger, satiety, nutritional needs, and pleasure, rather than any externally regulated eating plan focused on weight control.

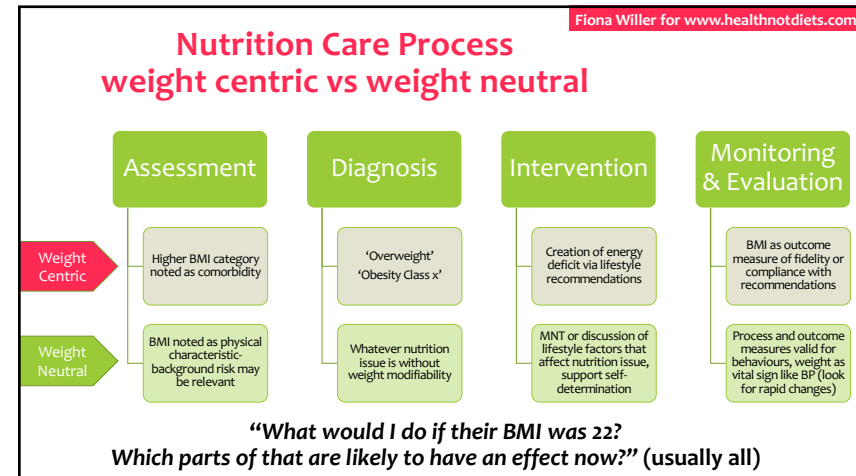
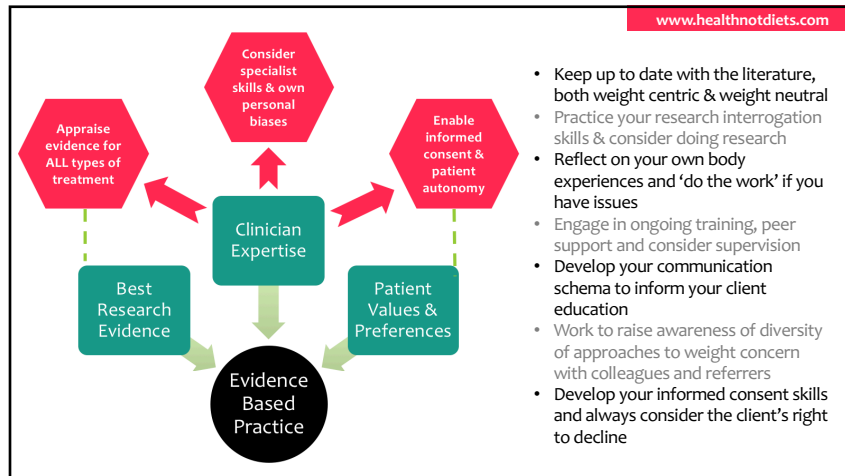
- Diet-disease relationships, nourishment, feeding as led by appetite cues, enjoyment and connection with others, flexible dietary restraint, eating for the purpose of health, wellbeing and enjoyment, not for the purpose of weight control.
 - Self-determination via experiential learning, not prescription

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Health at Every Size®: principle 5

Principle	Statement
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.

- Physical activity-disease relationships, strength, enjoyment, connection.
 - Self determination via experiential learning not prescription.



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WANT TO KNOW MORE?

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NON-DIET APPROACH
TRAINING AND WORKSHOPS