



1




*Loving yourself is a revolution*

## AGENDA:

- Check In & Focus Activity
- Review Homework
- Health Morality & Body Autonomy
- Reframing Fat
- Introduction to Weight Neutrality
- Health At Every Size (HAES)
- Discuss Health Behaviours
- Check Out & Grounding Activity

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2




CHECK IN  
+  
FOCUS

The Noting Technique:  
<https://www.youtube.com/watch?v=fjI9v-VYwZY>

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HEALTH MORALITY &  
BODY AUTONOMY

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4

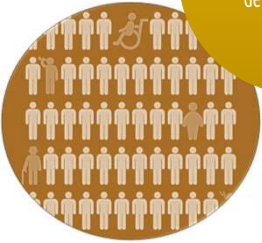
# HEALTH MORALITY & HEALTHISM:

**Defined** (Crawford, 1980):

- "A preoccupation with personal health as a primary focus for the definition & achievement of well-being. Elevating health to a super value, a metaphor for all that is good in life".
- "Emerges as the assumption that people should pursue health. Healthism includes the idea that anyone who isn't healthy just isn't trying hard enough or has some moral failing or sin to account for".

Positions health as a moral imperative & virtuous act


Disregards the impact of social determinants of health



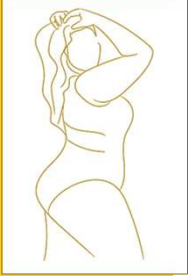
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5

## FACTS THAT CHALLENGE HEALTHISM:



Diverse bodies have always existed & there is no one ideal body type	Metabolism is a highly complex process & varies from person to person	Human health is diverse & exists on a spectrum, just like body diversity
Social determinants of health have a significant impact on health, more so than their daily eating or exercise habits	There is no one right way to eat	Complex physiological factors influence the body's ability to lose weight, making consistent weight loss difficult for most, if not impossible
One single day of eating, or one meal, does not have the power to impact your overall health or weight	Health does not need to be attained & for some, may not even be able to be attained	One's health does not indicate moral or personal failure



Modified from: Kinavey, H. & Sturtevant, D. (2024). Reclaiming body trust: Break free from a culture of body perfection, disordered eating, and other traumas. Tarcher Perigee. p. 105-107

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6

## BODY AUTONOMY: the right to make decisions about your body, free from coercion from others

### Research indicates:

- "When people feel autonomous, they experience an increased sense of connection to their values, motivation, physical & psychological health, as well as a decreased sense of pressure & control".  
(Ryan & Deci, 2000; Legault & Sago, 2022)
- "Those who feel autonomous experience positive body image".  
(Thøgersen-Ntoumani & Ntoumanis, 2007)
- "Contrarily, when people experience a lack of autonomy, they experience an increased pressure to conform, a repression of their inner wants & desires, & poorer self-esteem".  
(Hodgins et al., 2007)



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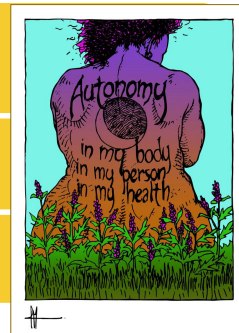
## REFLECT:

Body autonomy in relation to body image can look like many things & varies from person-to-person (ie: clothing preferences, body modifications, going to the doctor, medication, etc.)

Can you think of any situations/settings where you did not feel you had choice over your body?

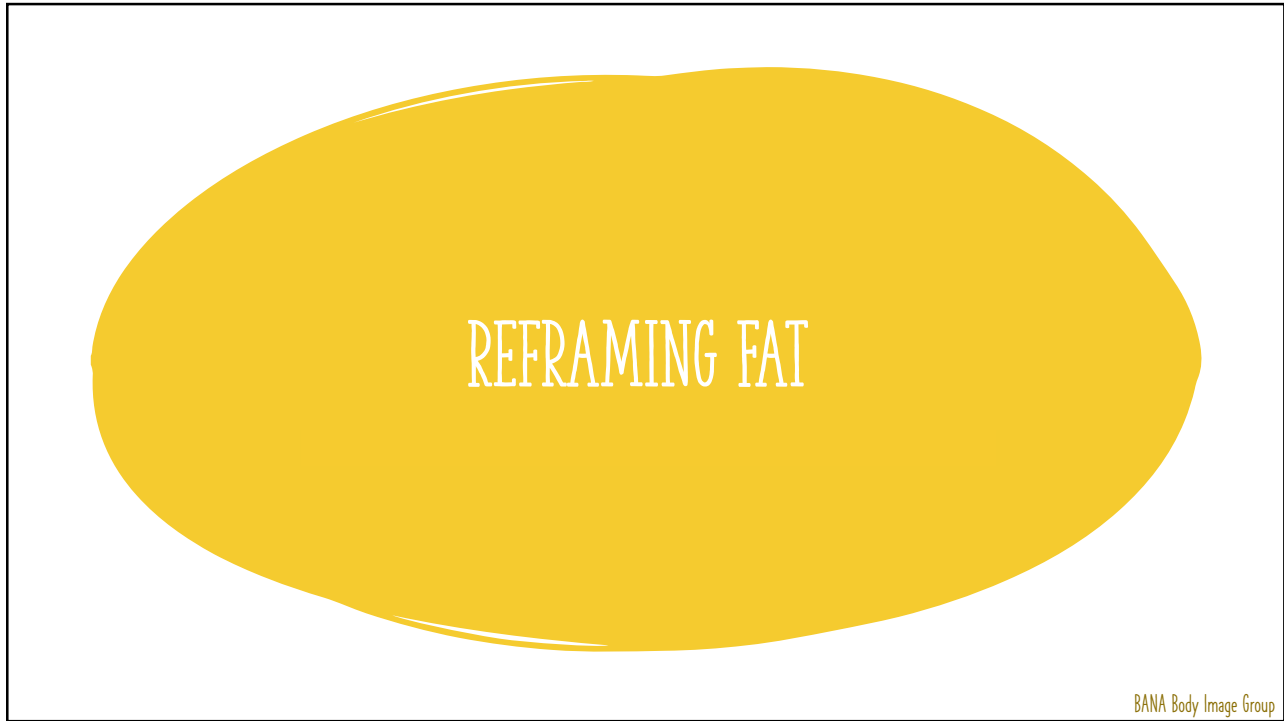
Is it body autonomy if you did not choose the body standards you are aiming for?

In what ways have you practiced body autonomy?



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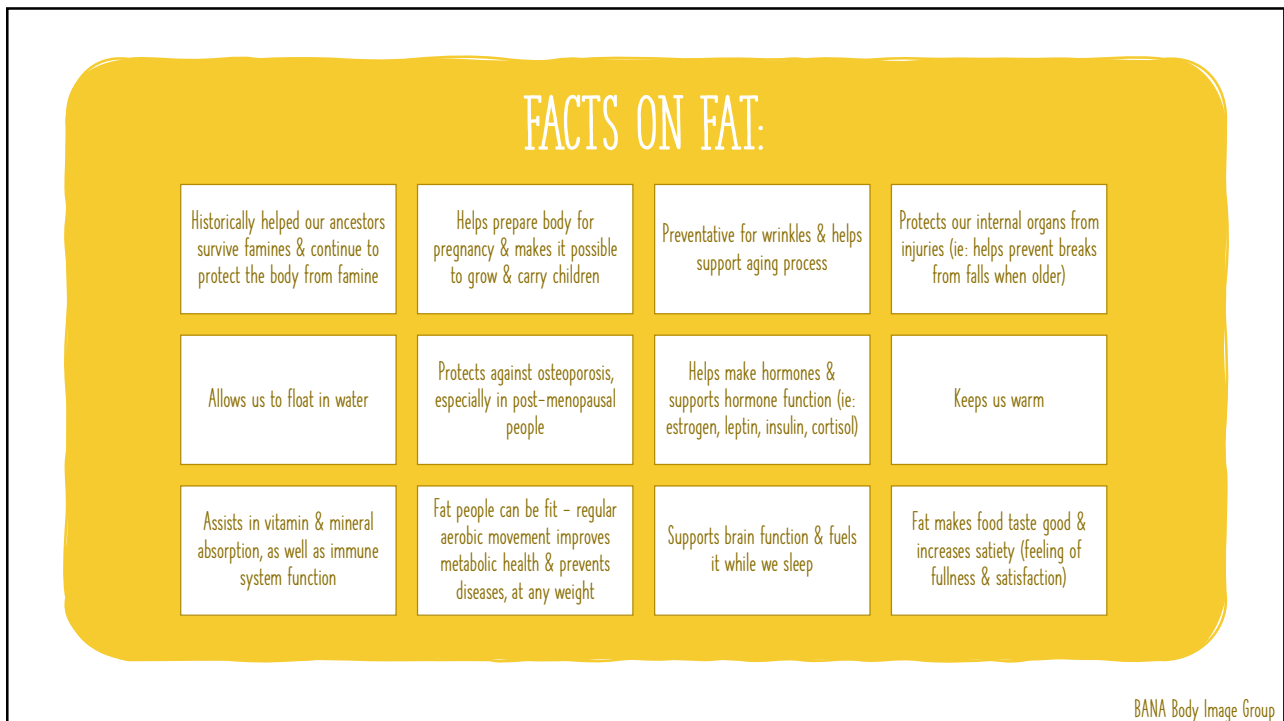
8



# REFRAMING FAT

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## FACTS ON FAT:

Historically helped our ancestors survive famines & continue to protect the body from famine	Helps prepare body for pregnancy & makes it possible to grow & carry children	Preventative for wrinkles & helps support aging process	Protects our internal organs from injuries (ie: helps prevent breaks from falls when older)
Allows us to float in water	Protects against osteoporosis, especially in post-menopausal people	Helps make hormones & supports hormone function (ie: estrogen, leptin, insulin, cortisol)	Keeps us warm
Assists in vitamin & mineral absorption, as well as immune system function	Fat people can be fit – regular aerobic movement improves metabolic health & prevents diseases, at any weight	Supports brain function & fuels it while we sleep	Fat makes food taste good & increases satiety (feeling of fullness & satisfaction)

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10

## REFRAMING THOUGHTS ON FAT

Fat bodies are not bad bodies

Fat bodies deserve care

Fat bodies deserve love

Fat bodies deserve respect

Fat bodies are beautiful

Based on what we have learned...

if fatness is not inherently a bad thing,

AND if BMI's demonization of fat is biased & skewed,

could our thinking of fat also be flawed?



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11

## FATNESS AS IDENTITY:

Fatness has value as an identity... meaning when the world celebrates a fat person's weight loss, it:

- Impedes on a fat person's ability: "to see themselves as someone who matters" (Harrison, 2021, p. 44-45).
- Disrupts a fat person's capacity: "to see their body as a neutral, rather than inherently bad" (Harrison, 2021, p. 44-45).
- Is "a breach of consent on how a person enters into a relationship with their fat body" (Harrison, 2021, p. 44-45).

Societally, we often do not hold space for fat individuals to accept & love themselves, or be proud & content with their body.



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12

# WEIGHT & SHAPE NEUTRALITY

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## BODY POSITIVITY:



- Body positivity is a movement sought after challenging appearance ideals & replacing them with positive or accepting attitudes
- Body positivity as a political movement is rooted in Black-femme-queer activism; however, overtime they have been more & more omitted from the community
  - Fatness as an identity has been excluded from the conversation, even though the movement advocated for basic rights for fat people
- Research demonstrates media depictions of the thin ideal are pervasive, unrealistic & harmful to body image
- Encourages love & acceptance of all different types of bodies; emphasis on confidence & acceptance of one's body

For some, focusing on changing your body brings forth feelings of failure and inadequacies;  
for others, trying to unconditionally love your body may also feel the same way.

Body neutrality is a stepping-stone between body dissatisfaction & body positivity & can be seen as a more attainable goal for some.

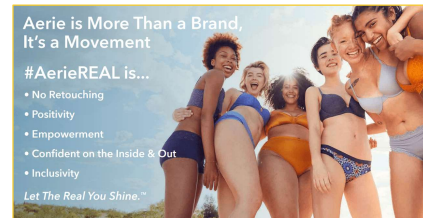
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14

## BODY POSITIVITY: CONCERNS



- Lack of inclusion & intersectionality
  - Prioritizes experiences of those with the most privilege and means (ie: white, able-bodied, straight women)
  - More & more excludes those who began to movement - fat bodies, BIPOC, etc.
- Co-opted by commercial interests
  - Ie: Dove, Aerie
  - Leads to commodification of bodies
  - Promotes objectification of bodies
- Focus is on appearance of bodies
  - Focus on appearance may have a place, but not before fundamental human rights have been achieved



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## WHY IS MY BODY NOT IMPORTANT?

by BBC News

<https://www.youtube.com/watch?v=7JaFNYGwKbE>



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# BODY NEUTRALITY

"Not supporting the hatred of our vessel (our physical structure) OR the love & adoration of our vessel!" (Poirier, 2015).



"Invites you to examine why you were so attached to your appearance in the first place, asks you to strip away undue significance you've been placing on your appearance, & encourages you to build a sense of yourself & your worth outside of how you look & what people think of you" (Kneeland, 2023).

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17

## DEFINITION: BODY NEUTRALITY

(RAYPOLE, 2021)




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"Body neutrality promotes acceptance of your body as it is, encouraging you to recognize its abilities and nonphysical characteristics over your appearance."

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"This movement aims to decentralize the body as an object by challenging the myth that the way you look drives your worth. It also creates room to step back from body conversations in general."

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"Taking a neutral perspective toward your body means moving away from the idea that you have to cultivate love for your body or make an effort to love it every day."

---

"It focuses instead on what you do with your body and how you think and feel."

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18

## BEING NEUTRAL:



- Neutral descriptions of the body are based in fact but utilize less colourful or value-based language around appearance, weight & shape.
- Does not lean negative or positive, but rather aims for acceptance for 'what is'.
- Describing the body neutrally may include:
  - Functions or performance of body parts (ie: what even is fat or cellulite?)
  - Non-appearance values we hold for body parts (ie: person's stomach supports pregnancy)
  - Less loaded - yet still accurate - terminology for physical descriptors (ie: fair-skin instead of pale; tiger stripes instead of stretch marks)
  - Instrument vs. Ornament (Kite Sisters)

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19

## NEUTRALITY RESEARCH:



In 2020, Janell Mensinger & colleagues found (Mensinger et al., 2020):

Alternatives to weight-loss approaches in women's healthcare (such as health at every size & weight neutral approaches) are just as effective - & in some cases more effective - for improving health outcomes &/or reducing health risks in women of higher weight.

- As of 2020, only one other randomized controlled trial had directly compared weight-loss & weight-neutral approaches on a wide range of health factors.
- This highlights that weight-loss approaches (which dominate healthcare) were not typically compared to neutral approaches in healthcare.
- Because of this, can we say weight-loss approaches are valid or reliable? What level of 'empiricism' do we trust?

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20

## WHY WEIGHT NEUTRAL?



"There isn't a single therapy (dietary, surgical, pharmaceutical or otherwise) that has been shown to sustain long-term weight-loss maintenance in a significant number of people" (Wolfram, 2017).

This leaves most people falling into pattern of weight loss and regain; weight cycling is a health risk.

Body neutrality takes away the need to form an opinion on your body.

With body neutrality, we do not need to focus on how we interpret our bodies and whether we even like them.

Can be liberating for many who are used to over-evaluating their bodies & having to always discern whether something is "good" or "bad".

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21

H.A.E.S  
Health At Every Size

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# HEALTH AT EVERY SIZE



- Quite a new philosophy, with literature only starting in early 2000's.
- Argues: "any intervention strategy for "obesity" should be one that promotes the development of a healthy lifestyle; this includes outcomes to evaluate success that are not limited to, & in fact may exclude, body weight or body composition" (Penney & Kirk, 2015).
- Includes core principles that challenge key assumptions from traditional weight management approaches:
  - Weight Inclusivity
  - Respectful Care
  - Health Enhancement
  - Eating for Wellbeing
  - Life Enhancing Movement

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23



## H.A.E.S. CORE PRINCIPLES:

### Weight Inclusivity

- Healthcare must be accessible to all
- Accommodations or equipment for all body types
- No longer following thin-centric or weight-loss focused perspectives

### Respectful Care

- Informed consent
- Body autonomy
- Seeks to address weight bias in healthcare

### Health Enhancement

- Considers a vast array of topics, such as: health equity, social determinants of health, community care & individual approaches
- Promotes elimination of oppression, as it recognizes the ties to health & disproportionate health access/outcomes
- Focus on health behaviours

### Eating for Wellbeing

- Flexible & individualized
- Based on hunger, satiety, nutritional needs & pleasure

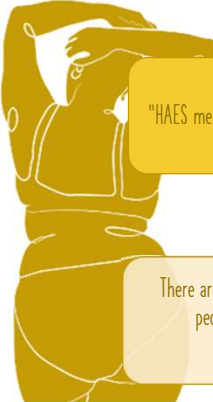
### Life Enhancing Movement

- Physical activities that allow bodies of all sizes, abilities & interests to engage in joyful movement, to whatever degree that they choose

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24

## H.A.E.S: MYTHS DEBUNKED



"HAES means all fat people are healthy"


↓

There are "healthy" & "unhealthy" people at all points on size spectrum.

"HAES is about convincing all fat people to pursue health or attain a 'healthy' status"

↓

Promotes equity & accessibility, but still recognizes health morality & allows for choice over pursuit of health.



"HAES is a social justice movement"

↓


A framework for care, looking to ground principles, curriculum & advocacy related to social justice disparities.

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25

## H.A.E.S: CONTROVERSIAL?

Highly controversial; many argue against this approach:



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"Accepting that one can be healthy at any size is a license to engage in unhealthy behaviors or put off losing weight"

- You may recognize this argument from a Joe Rogan podcast
- Ignores that thin individuals can also be unhealthy, not engage in regular exercise or balanced eating, or not "take care of themselves"
- Ignores research on harmful effects of weight stigma & weight stigma as a cause of "obesity"

"Across time, the effects of "obesity" will eventually "catch up" with an "obese" person"

- Refer to information learned in weight science section, as many studies have shown little control for other factors, and comparative outcomes of "normative" BMI's

"Research indicates that even a 5% to 10% weight loss improves health"

- More plausible that improved lifestyle habits improve health & lead to some people losing weight, rather than weight loss as a causal factor in improved health

26

# HEALTH BEHAVIOURS

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27

## HEALTH BEHAVIOURS: WHAT ARE THEY?

- Behaviours that have a direct impact on health outcomes
- Regardless of who the individual is, or other individual factors, the impacts on health tend to be stable
- Health is multifactorial, meaning there are many factors that influence it
- Typically, easily identifiable & observable
- Can be health enhancing (when adequate) or health impairing (when inadequate)



An indirect impact on health = other factors strongly mediate the relationship with health (ie: weight)

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28

HEALTH BEHAVIOURS:

- Balanced Eating
- Life-Enhancing Movement
- Hydration
- Quality Sleep
- Social Connectedness
- Substance Use
- Stress Management
- Suggested: Media Literacy
- Suggested: Nature Time

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29

REFLECT:

Have any of these health behaviours been focused on with your healthcare providers?

Are there certain health behaviours that have been more promoted over others?

If so, how & where do you see that happen most?



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30

## HEALTH BEHAVIOURS:

OFFICIAL PHYSICAL ACTIVITY RECOMMENDATION:  
20-30 minutes of moderate activity 5-7 days/week, OR  
75 minutes of vigorous activity per week (~10 minutes a day)

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### Balanced Eating & Life-Enhancing Movement = refer to information from in treatment

- "Studies have consistently identified a range of specific benefits, such as improved physical & physiological health & positive health outcomes in areas of mental health & well-being"  
(Arora & Grey, 2020).
- Studies have shown that there is no increased risk of cardiovascular disease or death for physically active fat people. Evidence has also shown that most cardiometabolic risk factors linked with having a higher BMI can be improved with physical activity that does not focus on weight loss  
(Gaesser & Angadi, 2021).
- Increasing your physical activity, whether this be dancing, swimming, rollerblading, etc., & your cardiorespiratory health is associated with a better decrease in mortality than intentional weight loss practices  
(Gaesser & Angadi, 2021)
- Research has shown that reduced exercise is a significant predictor of health, while BMI's importance is limited  
(Lavie et al., 2015; McAuley et al., 2016)



31

## HEALTH BEHAVIOURS:

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### Hydration

- "Water is critical for human survival. It is the largest single constituent of the human body, accounting for approximately 60% of adult body mass"  
(Lacey et al., 2019).
- It is the solvent in which many chemical reactions occur:
  - distributes diverse molecules to cells (amongst them oxygen & metabolic substrates);
  - is involved in the removal of waste products of metabolism (including carbon dioxide from cells, & as a major constituent of urine);
  - is essential for thermoregulation through redistribution of heat & via sweating  
(Lacey et al., 2019).
- "[Cognitive] tasks of executive function, attention & motor coordination were significantly impaired following dehydration"  
(Wittbrodt & Millard-Stafford, 2018).



32



## HEALTH BEHAVIOURS:

### Quality Sleep

- "A growing body of evidence which indicates that sleep plays a pivotal role in the onset and exacerbation of almost all chronic illnesses"  
*(Arora & Grey, 2020).*
- "short sleep (<6 h per day) was associated with a 30% increased risk of overall chronic disease, in particular stroke (2-fold increased risk) & overall cancer (more than 40% increased risk)"  
*(von Kuesten et al, 2012).*
- "Imbalances to sleep are known to effect energy homeostasis" & "cause disruptions to a range of metabolic hormones that are associated with "obesity" and type 2 diabetes mellitus"  
*(Arora & Grey, 2020).*



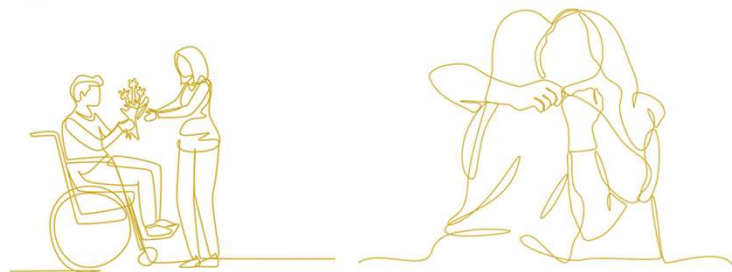
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33

## HEALTH BEHAVIOURS:

### Social Connectedness

- "A number of longitudinal studies have documented the associations between social isolation & risk of mortality, as well as the development of major chronic illnesses, independently of other sociodemographic factors & pre-existing health conditions"  
*(Schrempft et al, 2019).*
- "Greater isolation & loneliness stimulating neuroendocrine dysregulation; disturbances in autonomic function & blood pressure control; inflammatory responses; and chronic allostatic load"  
*(Schrempft et al, 2019).*



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34

## HEALTH BEHAVIOURS:

Stress from "clean eating" or "driven exercise" pressure may counteract health benefits.

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### Substance Use & Stress Management

- "Alcohol has a range of damaging short & long-term effects. In the short-term, alcohol abuse has a suppressive effect on the immune system with, particular effects on the lungs capacity to fight off infectious diseases[...]" (Arora & Grey, 2020).
- "Health-related quality of life profiles showed that daily smokers did worse than never-smokers in a considerable number of the health dimensions" (Heikkinen et al., 2008).
- "The long-term impact of exposure to stress affects the body at the cardiovascular, metabolic, neural, behavioral, & cellular levels & increases the risk of developing disease because the bodily systems stop working effectively" (O'Connor et al., 2021).



35

## HEALTH BEHAVIOURS:

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### Media Literacy & Nature Time = Suggestions to Consider

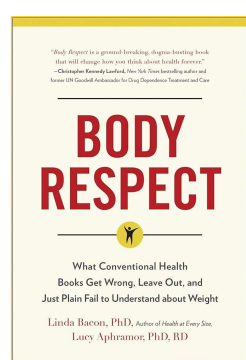

- New research has indicated a push to consider the "infosphere" as a new social determinant of health (ie: access to online health information, as well as exposure to misinformation & disinformation):
  - Misinformation is being recognized as a public health concern as it influences people's responses & behaviours to preventable diseases, promotes eating disorders, discourages people from seeking medical care.
  - The "infosphere" interacts with other determinants & studies have shown that those with lower socioeconomic & education statuses are likely to receive less online literacy training & thus makes them more likely to trust dubious sources of health information online. (Chen et al., 2018; Morley et al., 2020; Harrison, 2023)
- Referred to as "environmental psychology":
  - "Merely seeing or being present within nature can reduce stress through the automatic generation of physiological & psychological responses"
  - "Benefits that are relevant to cognitive capacities (including attention, memory, & impulse inhibition), emotional states (mood), & stress";
  - "Replenish certain types of attention through unconscious, cognitive processes in response to natural landscapes". (Bratman et al., 2012).



36

**HOMWORK:**

- 1) Weekly SMART Goal & Reflections
- 2) Read Chapter: "Facts & Fiction About Fatness"



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CHECK OUT  
+  
GROUNDING

Sunrise Visualization:  
<https://www.youtube.com/watch?v=uWEvseYTpVs>

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38