

FIERCE  
FATTY

# UNTANGLING INTERNALIZED WEIGHT-BIAS

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Workbook

## TERMINOLOGY AND LANGUAGE

### Fat

A neutral descriptor of body size. Other words that are used are bigger-bodied or higher-weight

### Fatphobia or Weight Stigma

Negative judgements about someone due to their bigger size and acting upon those judgements

### "Overw\*ight" and "Ob\*se" AKA "O Words"

Based on the BMI (outdated/racist). It suggests that there is a weight humans should be. Ob\*se means "having eaten until fat". The "O Words" pathologize fat bodies. They presume they are diseased and wrong

### Fat Positivity or Body Positivity

A political movement started in the 1960's working towards equal access and treatment of all body sizes specifically the most marginalized bodies

### Straight-sized

Someone who isn't fat. Someone who doesn't wear plus-size clothes.

### Diet Culture

A set of beliefs that values thinness, appearance, and shape above health & well-being. Most countries and cultures are steeped in diet culture



## Let's dig in deeper on language

### **Bias**

prejudice in favor of or against one thing, person, or group compared with another, usually in a way considered to be unfair

### **Fatphobia**

used at least as early as 1993.  
irrational fear of, aversion to, or discrimination against fatness or fat people

### **Sizeism**

or size discrimination is the idea that people are prejudged based on their size

### **Fatmisia**

Greek miso -, meaning "hatred"  
prejudice plus power; anyone of any weight or body type can have/exhibit size-based prejudice

**Anti-fatness, weight stigma, fat hate**

## Fat Liberation vs Fat Acceptance vs Body Positivity

### **Liberation**

the act of setting someone free from imprisonment or oppression; release

### **Acceptance**

the action or process of being received as adequate or suitable, typically to be admitted into a group

### **Body positivity**

social movement focused on the acceptance of all bodies, regardless of size, shape, skin tone, gender, and physical abilities

### **Positive**

a good, affirmative, or constructive quality or attribute

Ragen Chastain on Person First Language

Links:  
[Ash from The Fat Lip - Fat Spectrum](#)

[A Queer and Trans Fat Activist Timeline by Charlotte Cooper](#)



## Overview

Don't Use	Avoid/use with caution	Use
<ul style="list-style-type: none"><li>● "Overw*ight"</li><li>● "Ob*se"</li><li>● "Normal weight"</li><li>● Unhealthy</li></ul>	<ul style="list-style-type: none"><li>● Euphemisms</li><li>● curvy, husky, rubenesque,</li><li>● voluptuous, chunky</li><li>● Plus-size</li></ul>	<ul style="list-style-type: none"><li>● Fat*</li><li>● Higher weight</li><li>● Larger bodied</li><li>● Bigger bodied</li></ul>

\*Respect however someone refers to themselves. Use fat when talking about fat bodies at a population or group level. Follow a fat person's lead on what words they use. Don't use stigmatizing words yourself even if a fat person uses them to describe themselves. You may need to explain why you use "fat."

Discriminatory attitudes aren't a mental illness. People aren't actually afraid "Some use the term fatmisia, using the Greek miso-, meaning "hatred" (think misogyny)." - [Your Fat Friend](#)



# WHAT LANGUAGE WILL YOU USE? WHAT FEELS MOST ALIGNED WITH YOU?

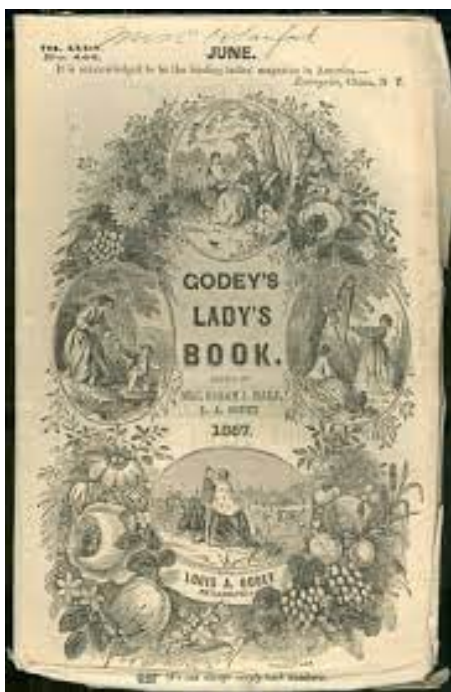
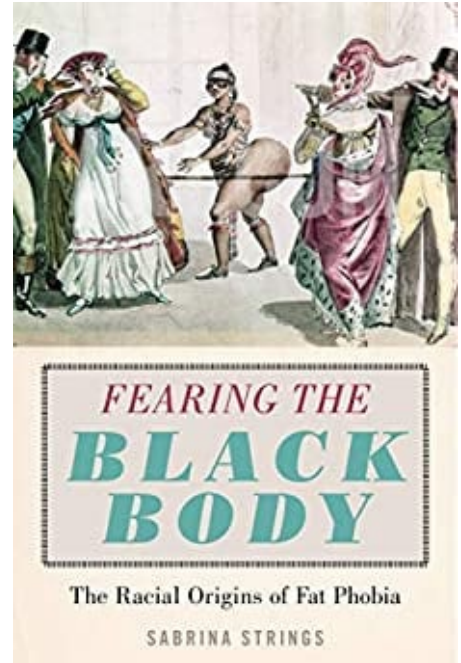


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## THE ROOTS OF FATPHOBIA ARE ENTRENCHED IN ANTI-BLACK RACISM

From Sabrina Strings: In my book *Fearing the Black Body: The Racial Origins of Fat Phobia*, and other writings, I describe how fatphobia in the West finds its roots in anti-blackness. Since at least the 18th century, white philosophers and race scientists had been convinced that Black people were excessively “sensual.” Black Africans, they claimed, were addicted to gratifying their sexual and oral appetites. As a result, they asserted, Black people tended to be “too fat.”

[Link to Sabrina's book](#)



From Sabrina Strings: In *Godey's Lady's Book*, the most popular women's magazine of the 19th century, an 1830 article by a socialite named Leigh Hunt described the relationship between overeating, femininity, and race, reminding the gentle Anglo-Saxon reader that women who want to preserve their looks must never eat too much. According to Hunt, no lady in American high society could hope to maintain her esteem while corpulent; only in Africa could a fat woman find her stride, since it was rumored that on the continent “no lady can be charming under [XX] stone,” or nearly [XX] pounds.



## Da'Shaun L. Harrison

**Belly of the Beast: The Politics  
of Anti-Fatness as  
Anti-Blackness**



**To live in a body both fat and Black is to intersect at the margins of a society that normalizes anti-fatness as anti-Blackness:** hyper-policed by state and society, passed over for housing and jobs, and derided and misdiagnosed by medical professionals, **fat Black people in the United States are subject to culturally sanctioned discrimination, abuse, and trauma.** Foregrounding the state-sanctioned murder of Eric Garner in a historical analysis of the **policing, disenfranchisement, and invisibilizing of fat Black men and trans and nonbinary AMAB people**, Harrison discusses the pervasive, insidious ways that anti-fat anti-Blackness shows up in everyday life. Fat people can be legally fired in 49 states for being fat; they're more likely to be houseless. Fat people die at higher rates from misdiagnosis or non-treatment; fat women are more likely to be sexually assaulted. **And at the intersections of fatness, race, disability, and gender identity, these abuses are exacerbated.**

[Link to Da'Shaun's book](#)

## Alok Vaid Menon




Most often we think of race as skin color, but European theorists initially began to define race by facial attractiveness + body size. **In order to perpetuate the racist myth that white people were superior to Black people, these thinkers asserted that Black people were inherently fatter than white people** (erasing the variation of sizes among white people and Black people). **Women's bodies were (+continue to be) the battleground for proving racial difference.** Despite Black women having long been idolized across Europe, they were soon shifted from aesthetic counterparts to counterpoints for white women. White women had to define their beauty against Black women. **Mandating thinness was about the pursuit of western rationalism, as experts maintained that fatness stifled one's ability to think clearly.** Fatness – a state of being which at various times had been seen as a mark of beauty -- became associated with racial failure. **White women, in particular, were tasked with managing their size as a way to preserve the integrity of the race.**

[Link to Alok's words](#)

### More links:

- <https://www.npr.org/transcripts/893006538>
- <https://bust.com/feminism/196525-racist-origins-of-fatphobia.html>
- <https://www.self.com/story/fat-activist-fatphobia>



1967 - First recorded fat activism. "Fat in" at Central Park saw a group of 500 people eating, carrying signs and photographs of thin actors, and burning diet books

1967 - Bill Fabrey founded NAAFA as a response to discrimination his fat wife, Joyce, faced after reading an article from Lew Louderbach about anti-fatness in the US

1969 "NAAFA's Constitution and Bylaws are signed. NAAFA: The National Association to Aid Fat Americans, later renamed the National Association to Advance Fat Acceptance" - Charlotte Cooper

1972 - the feminist group The Fat Underground was formed in California. They found that NAAFA wasn't radical enough and so formed a new group. Some were members of the Radical Therapy Collective, "a feminist group that believed that many psychological problems were caused by oppressive social institutions and practices." FU was founded by Sara Fishman and Judy Freespirit. They rallied against society's views of fat people. They coined the saying, "a diet is a cure that doesn't work, for a disease that doesn't exist".

1973 - "they had released their groundbreaking Fat Liberation Manifesto. It demanded "equal rights for fat people in all areas of life." It also called out the "reducing" industries (aka diet culture) and declared them enemies. Other fat feminist collectives, notably those in New Haven and Boston, worked alongside the Fat Underground to push the boundaries of the growing fat activist movement and to demand fat women's inclusion in feminist spaces." - NAAFA

### Fat Feminist Herstory, 1969-1993: A Personal Memoir by Karen W. Stimson

"1969--the year that saw humankind first set foot on the moon also saw a number of historic events back home on planet earth. In the U. S., a number of events occurred which, along with ongoing social currents, helped codify the personality, politics and philosophy of a generation and would have a profound influence on later decades. Among these events and social currents were the Woodstock music festival, the Second Wave of Feminism, the Stonewall Rebellion, and the founding of NAAFA.

The conjunction between a new counterculture, a resurgent women's movement, gay pride and fat liberation which occurred during the late 60's produced a movement-radical fat feminism-whose influence has rippled steadily outward from a small pool of individuals and grassroots groups to academic, social, legal, research and healthcare circles. Today, the world is still catching on-and catching up-to the revolution radical fat feminists started all those years ago."



## **FAT LIBERATION MANIFESTO (1973)**

by Judy Freespirit and Aldebaran

1. WE believe that fat people are fully entitled to human respect and recognition.
2. WE are angry at mistreatment by commercial and sexist interests. These have exploited our bodies as objects of ridicule, thereby creating an immensely profitable market selling the false promise of avoidance of, or relief from, that ridicule.
3. WE see our struggle as allied with the struggles of other oppressed groups against classism, racism, sexism, ageism, financial exploitation, imperialism and the like.
4. WE demand equal rights for fat people in all aspects of life, as promised in the Constitution of the United States. We demand equal access to goods and services in the public domain, and an end to discrimination against us in the areas of employment, education, public facilities and health services.
5. WE single out as our special enemies the so-called “reducing” industries. These include diet clubs, reducing salons, fat farms, diet doctors, diet books, diet foods and food supplements, surgical procedures, appetite suppressants, drugs and gadgetry such as wraps and “reducing machines”.  
WE demand that they take responsibility for their false claims, acknowledge that their products are harmful to the public health, and publish long-term studies proving any statistical efficacy of their products. We make this demand knowing that over 99% of all weight loss programs, when evaluated over a five-year period, fail utterly, and also knowing the extreme proven harmfulness of frequent large changes in weight.
6. WE repudiate the mystified “science” which falsely claims that we are unfit. It has both caused and upheld discrimination against us, in collusion with the financial interests of insurance companies, the fashion and garment industries, reducing industries, the food and drug industries, and the medical and psychiatric establishment.
7. WE refuse to be subjugated to the interests of our enemies. We fully intend to reclaim power over our bodies and our lives. We commit ourselves to pursue these goals together.

**FAT PEOPLE OF THE WORLD, UNITE! YOU HAVE NOTHING TO LOSE ...**

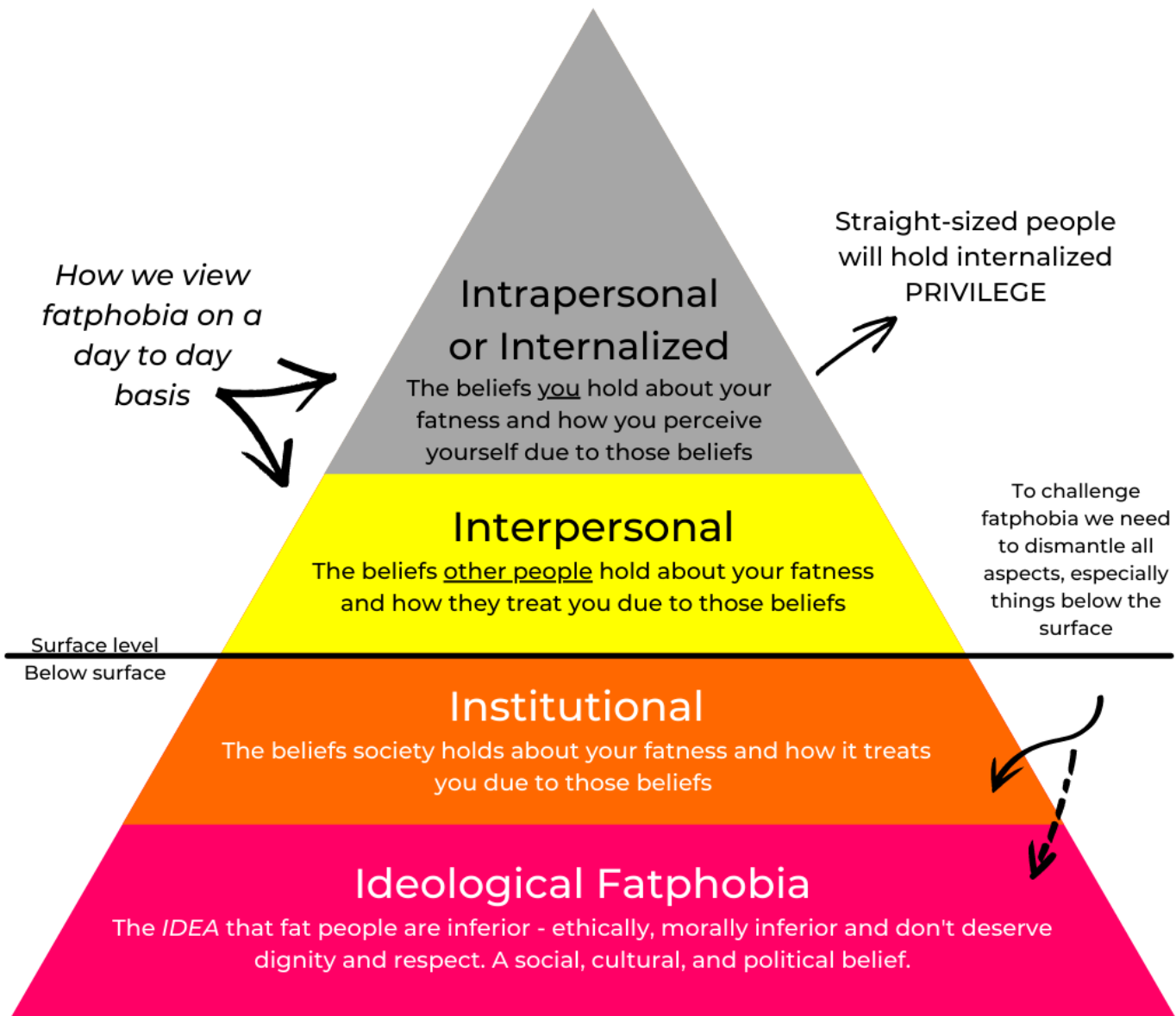


# FATPHOBIA IN SOCIETY

FATPHOBIA = PREJUDICE + POWER

## LEVELS OF FATPHOBIA

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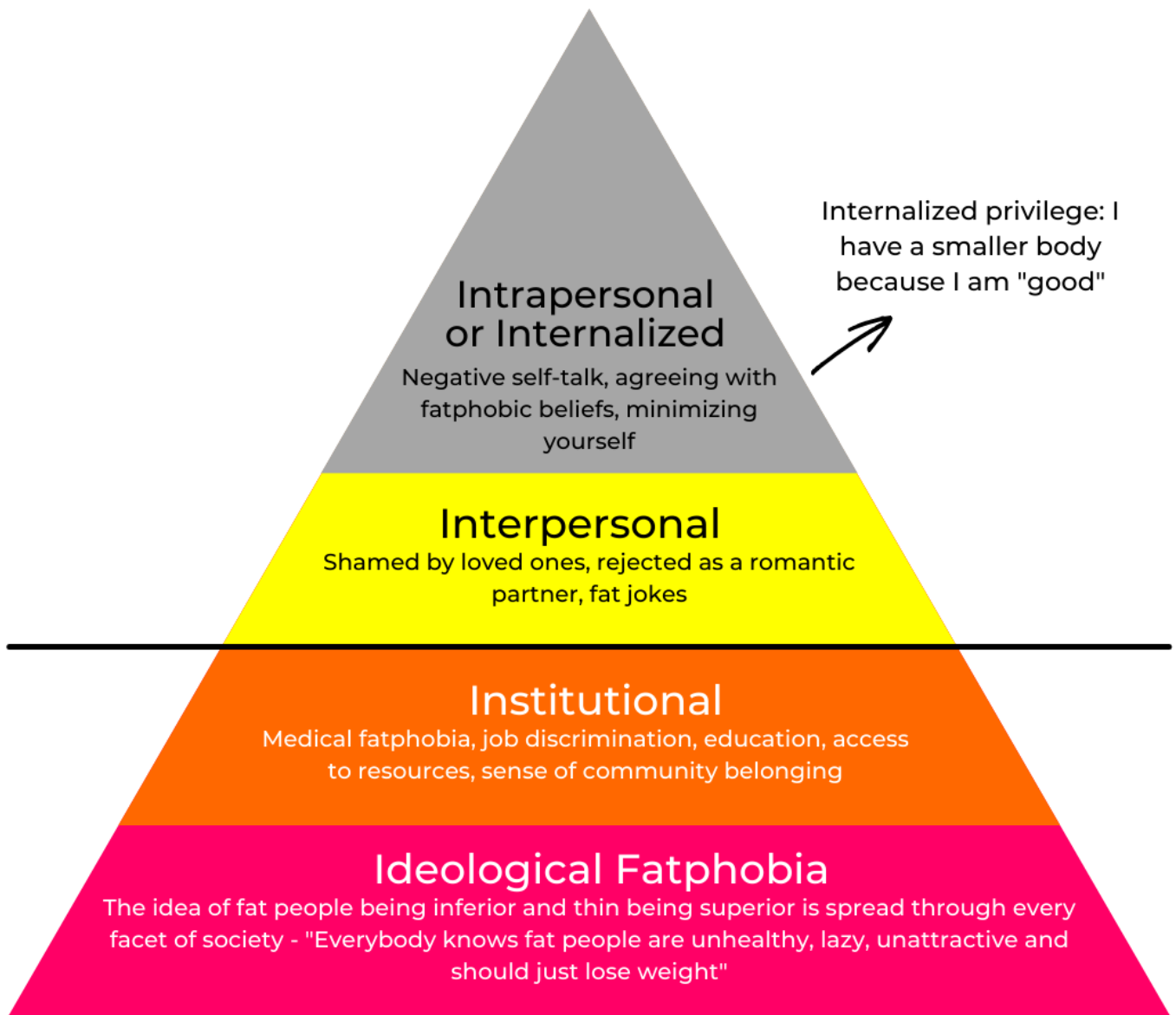




# FATPHOBIA IN SOCIETY

## EXAMPLES: LEVELS OF FATPHOBIA

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# MEDICAL FATPHOBIA



## Access

- CT and MRI machines made for small bodies
- Blood pressure cuffs for straight sized arms (gives false high readings)
- Exam and surgical tables with weight limits
- Having to pay higher insurance premiums or being denied any coverage at all
- Waiting room chairs with arms so fat people cannot sit which also makes visiting the doctor impossible for some disabled patients
- The experience of visiting a healthcare provider being so traumatizing that fat people suffer in silence and are delayed or denied important healthcare
- Gowns and wheelchairs that don't fit

## Beliefs and Bias

- Prescription of "eat less and exercise more" without asking what we eat or how much we exercise
- Healthcare providers are disgusted by fat bodies, don't want to touch fat people or provide care. Their level of fatphobia exceeds the general population - how can you provide evidence based care when you hold massive amounts of bias against your patient?

- Praising of eating disorders if they result in weight loss or the hopes of weight loss
- When a patient has higher weight doctors reported liking their jobs less and having less patience and desire to help the patient
- Treating fat bodies roughly and without care
- More than 50% of physicians viewed obese patients as awkward, unattractive, ugly, and noncompliant. One third said they were weak-willed, sloppy, and lazy.
- Doctors reluctant to do pap smears if the patient is fat
- Missed diagnosis or late diagnosis resulting in death

## Lack of evidence-based care

- Relentlessly monitoring weight of patients with weigh-ins every appointment but no monitoring of weight-stigma
- Being given inaccurate dosages of drugs and drugs that don't work effectively on fat people (for example, the morning after pill only works effectively on straight-sized bodies)
- Health being diagnosed by our body size and not with actual evidence-based diagnostic tools that thin people have access to
- Fat people denied assistance with IVF so they cannot become pregnant
- Being given the prescription lose weight which is not evidence-based
- Being forced to crash diet to lose weight (temporarily) to get treatment

## Systemic issue

- Healthcare providers trained to perpetuate weight stigma with their education
- Vaccines being administered with needles that are too short
- Doctors seeing fat patients as inherently "high risk" and therefore don't want to perform surgery in case their insurance premiums goes up in times of adverse outcomes
- Drugs trials being performed on straight sized people only
- Are less likely to have cancer detected early and get effective treatment for it (chemo drugs often dosed for smaller bodies and same dose given to fat people. Fat breast and ovarian cancer patients have worse outcomes but when given the correct dosage their risk was the same as straight sized people)
- Emergency evacuation plans don't include fat people - fat people are left to die in floods, hurricanes and other emergencies



- Less likely to receive an organ transplant as seen as “high risk” and left to die
- Being denied surgery due to weight (at very low cut off points) including life saving surgery like gender confirmation surgery...
- Yet, stomach amputation or squeezing surgery is magically safe and then..
- Being coerced and forced to have your stomach surgically amputated or restricted in order to get treatment for an unrelated condition
- Only to be blamed when the surgery doesn't result in long term weight loss

## WORKPLACE DISCRIMINATION

### Stats around weight stigma in the workplace

- **Fat people are less likely to be hired in the first place**
- In a study of employment discrimination hiring managers preferred thin candidates. “Overall, participants reported negative implicit and explicit attitudes toward “ob\*sity” and a belief that “ob\*sity” is controllable” (1)
- “A 2017 survey found that when 500 hiring professionals were shown a picture of a larger-bodied woman, only 15.6% of them said they would hire her.” (1.1)
- **Fat people are paid less**
- One study showed fat people are paid between \$9000 and \$22,000 less a year than smaller counterparts (2). Another study of 120,000 people in the UK showed that “If a woman was a stone heavier for no other reason than her genetics, this would lead to her having an income £1,500 less per year than a comparable woman of the same height who was a stone lighter.” That’s 30K over 20 years. (2.1)

Overall, participants reported negative implicit and explicit attitudes toward “ob\*sity” and a belief that “ob\*sity” is controllable

1: Ob\*sity Discrimination in the Recruitment Process: “You’re Not Hired!”: Stuart W. Flint,1,2,\* Martin Čadek,3 Sonia C. Codreanu,4 Vanja Ivić,5 Colene Zomer,6 and Amalia Gomoiu7: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4853419/>

1.1: The grim reality of being a female job seeker <https://fairygodboss.com/career-topics/job-seeker-appearance>

## Stats around weight stigma in the workplace cont.

- **A fat person can be terminated just because of their size and there are little to no anti-discrimination laws to protect them**
- **Fat people experience greater amounts of bias in the workplace**
- “According to research, over 40% of people with high body weight report that they have experienced weight bias from employers and supervisors.” (3)
- **Weight stigma doesn't motivate fat people to become thin. It makes them heavier and sicker**
- “Studies show that exposure to weight bias triggers physiological and behavioural changes linked to poor metabolic health and increased weight gain”. (4)
- **Higher weight folks are less likely to be promoted, be company leaders and be in client facing positions (4.1)**

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2: When it comes to pay do the thin win? <http://www.timothy-judge.com/Judge%20and%20Cable%20%28JAP%202010%29.pdf>

2.1: Height, body mass index, and socioeconomic status: mendelian randomization study in UK Biobank: <https://www.bmj.com/content/352/bmj.i582>

“According to research, over 40% of people with high body weight report that they have experienced weight bias from employers and supervisors.” (3)

3:<https://media.ruddcenter.uconn.edu/PDFs/Weight%20Bias%20Policy%20Brief.pdf>

Studies show that exposure to weight bias triggers physiological and behavioural changes linked to poor metabolic health and increased weight gain(4)

4: Fat shaming is making people sicker and heavier, Lauren Vogel:

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6565398/>

Higher weight folks are less likely to be promoted, be company CEO's and be in client facing positions

4.1:[https://www.omicsonline.org/open-access/weight-bias-in-the-workplace-a-literature-review-2329-6879-1000206.php?](https://www.omicsonline.org/open-access/weight-bias-in-the-workplace-a-literature-review-2329-6879-1000206.php?aid=55088&fbclid=IwAR12Ib3IRwZ0iMy4NRzjLWzkkXjcTd_jkUg8452Y97KHd6kEKoSSPfePUM)

[aid=55088&fbclid=IwAR12Ib3IRwZ0iMy4NRzjLWzkkXjcTd\\_jkUg8452Y97KHd6kEKoSSPfePUM](https://www.omicsonline.org/open-access/weight-bias-in-the-workplace-a-literature-review-2329-6879-1000206.php?aid=55088&fbclid=IwAR12Ib3IRwZ0iMy4NRzjLWzkkXjcTd_jkUg8452Y97KHd6kEKoSSPfePUM)

## But aren't fat people unhealthy? Shouldn't they lose weight?

- **Losing weight is not possible for the vast majority of people.**
- Diets have a 95%+ failure rate and 2/3rds of people who go on a diet end up weighing more (5, 6, 7)
- There are zero studies that show that any diet works for more than max 5% of people long term. The most likely outcome from a diet is weight increase. (6)
- Dieting leads to poor health outcomes, negative body image and disordered eating. (8)
- If you engage in health promoting activities then your mortality rate is pretty much exactly the same across all BMI's. (9)
- A lot of issues associated with fatness have been found to have very strong correlations with yo-yo dieting and weight stigma (10, 11)
- Weight does not equal health. Individual behaviour makes up 36% of a person's health status and how much exercise you do and what your diet looks like is only around 6% of individual health determinants (12)
- Recently a committee from the house of commons suggested that we should stop focusing on weight loss and instead focus on being healthy at any size which has very positive outcomes (8)

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

6: <https://www.acpjournals.org/doi/pdf/10.7326/0003-4819-116-11-942>

7: Weight Science: Evaluating the Evidence for a Paradigm Shift by Lindo Bacon & Lucy Aphramor: <https://nutritionj.biomedcentral.com/articles/10.1186/1475-2891-10-9>

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8: "Anybody places emphasis on the 'Health At Every Size' (HAES) approach as a more effective means to prevent weight based discrimination and an overreliance on BMI. The Health at Every Size approach involves treating patients whilst honouring differences in size, age, race, ethnicity, gender, dis/ability, sexual orientation, religion, class, and other human attributes."

<https://committees.parliament.uk/publications/5357/documents/53751/default/>



## MORE WEIGHT SCIENCE...

If you engage in health promoting activities then your mortality rate is pretty much exactly the same across all BMI's. (9)

9: <https://pubmed.ncbi.nlm.nih.gov/10546694/>

A lot of issues associated with fatness have been found to have very strong correlations with yo-yo dieting and weight stigma (10, 11)

10: Study found that regardless of their actual weight, people who experienced higher levels of weight stigma had more than twice the risk of high allostatic load—a measure of cumulative stress on all body systems that puts people at greater risk of type 2 diabetes, cardiovascular disease, and mortality. Perceived Weight Discrimination and 10-Year Risk of Allostatic Load Among US Adults Maya Vadiveloo, PhD, RD1 and Josiemer Mattei, PhD, MPH2: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5253095/> and [https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5253095/?utm\\_source=convertkit&utm\\_medium=email&utm\\_campaign=The+Truth+About+That+New+%22Fat+But+Fit%22+Study%20-%205310211](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5253095/?utm_source=convertkit&utm_medium=email&utm_campaign=The+Truth+About+That+New+%22Fat+But+Fit%22+Study%20-%205310211)

11: "In a study of more than 3.8 million adults found that weight cycling is an independent risk factor for diabetes. The study participants who weight-cycled the most were significantly more likely to develop diabetes within the 4-year follow-up period than those who weight-cycled the least—regardless of their starting BMI." - Christy Harrison [https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6678837/?utm\\_source=convertkit&utm\\_medium=email&utm\\_campaign=Do+Fat+Cells+Cause+Disease%3F%20-%205692712](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6678837/?utm_source=convertkit&utm_medium=email&utm_campaign=Do+Fat+Cells+Cause+Disease%3F%20-%205692712)

Weight does not equal health. Individual behavior makes up 36% of a person's health status and how much exercise you do and what your diet looks like is only around 6% of individual health determinants (12)

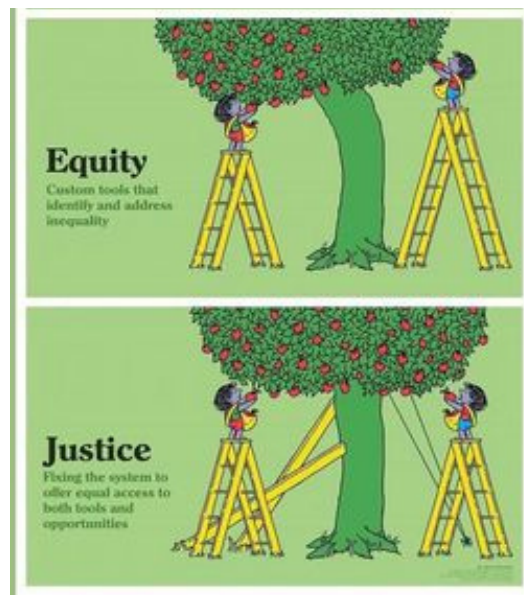
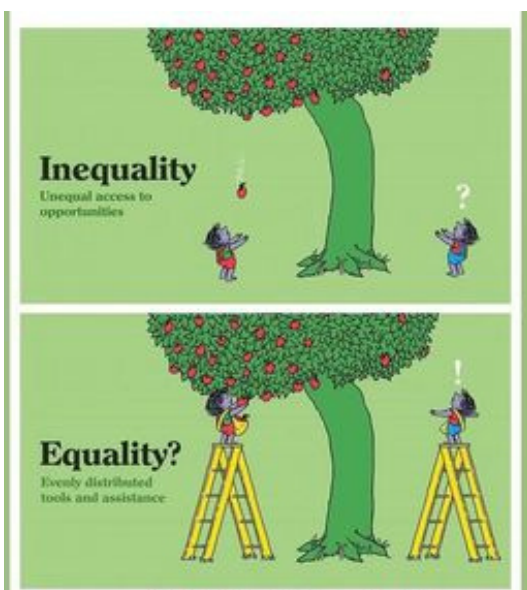
12: <https://www.goinvo.com/vision/determinants-of-health>

# HOW DO WE MOVE TOWARDS LIBERATION?

## EDUCATION, EMPATHY, AND ACTION



Robert Wood Johnson Foundation



Created by Tony Ruth, based on Shel Silverstein's "The Giving Tree"

**Intrapersonal/Internalized fatphobia**  
**Internalized Privilege**

**Working on fatphobic beliefs**

Action: Learn strategies from a fat person, listening to and centering fat people

**Interpersonal**  
**(How individuals treat fat people)**

**Using privilege and education to intervene**

Action: Speak up at work when fatphobia happens. Pay fat people,

**Institutional**  
**(Medical fatphobia, job discrimination, resource hoarding)**

**Using privilege and education to intervene**

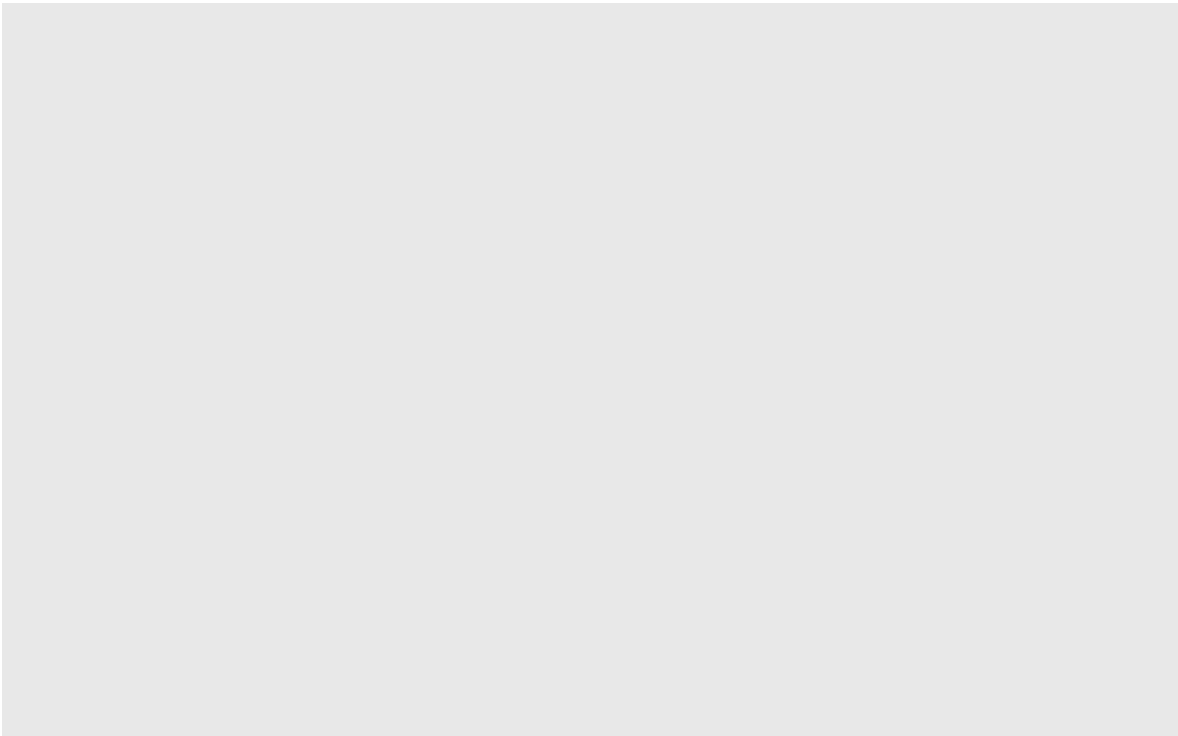
Action: bring in a fat person to train on weight bias, share resources, hire fat people, donate to fat positive orgs,

**Ideological**  
**(Social, culture, political beliefs)**

**Normalize fatphobia being totally unacceptable in society**

Action: fat activism

**WHAT IS ACCESSIBLE TO YOU TO TAKE ACTION ON?**  
**AND WHAT SPECIFIC ACTION WILL YOU TAKE?**





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Fatty hugs,

*Victoria Welsby*



[www.fiercefatty.com](http://www.fiercefatty.com)

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