

A New Standard: Shifting Emphasis from Weight Loss Promotion to a More Inclusive and Sustainable Health Model

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INTRODUCTION:

- BMI is used as a traditional method of tracking health
- 42.4% of Americans in 2017-2018 were classified as obese
- BMI does not consider other factors influencing health
- Weight loss is often unsustainable and is detrimental to physiological and psychological well-being
- Social and medical size-based stigma negatively impacts healthcare quality and health outcomes
- The HAES® model of care promotes the use of inclusive language, body acceptance, and respectful care from practitioners who work to acknowledge and end weight discrimination
- The purpose is to evaluate the current BMI and body-size focused healthcare system and suggest methods to improve health outcomes using a Health at Every Size® model

METHODS:

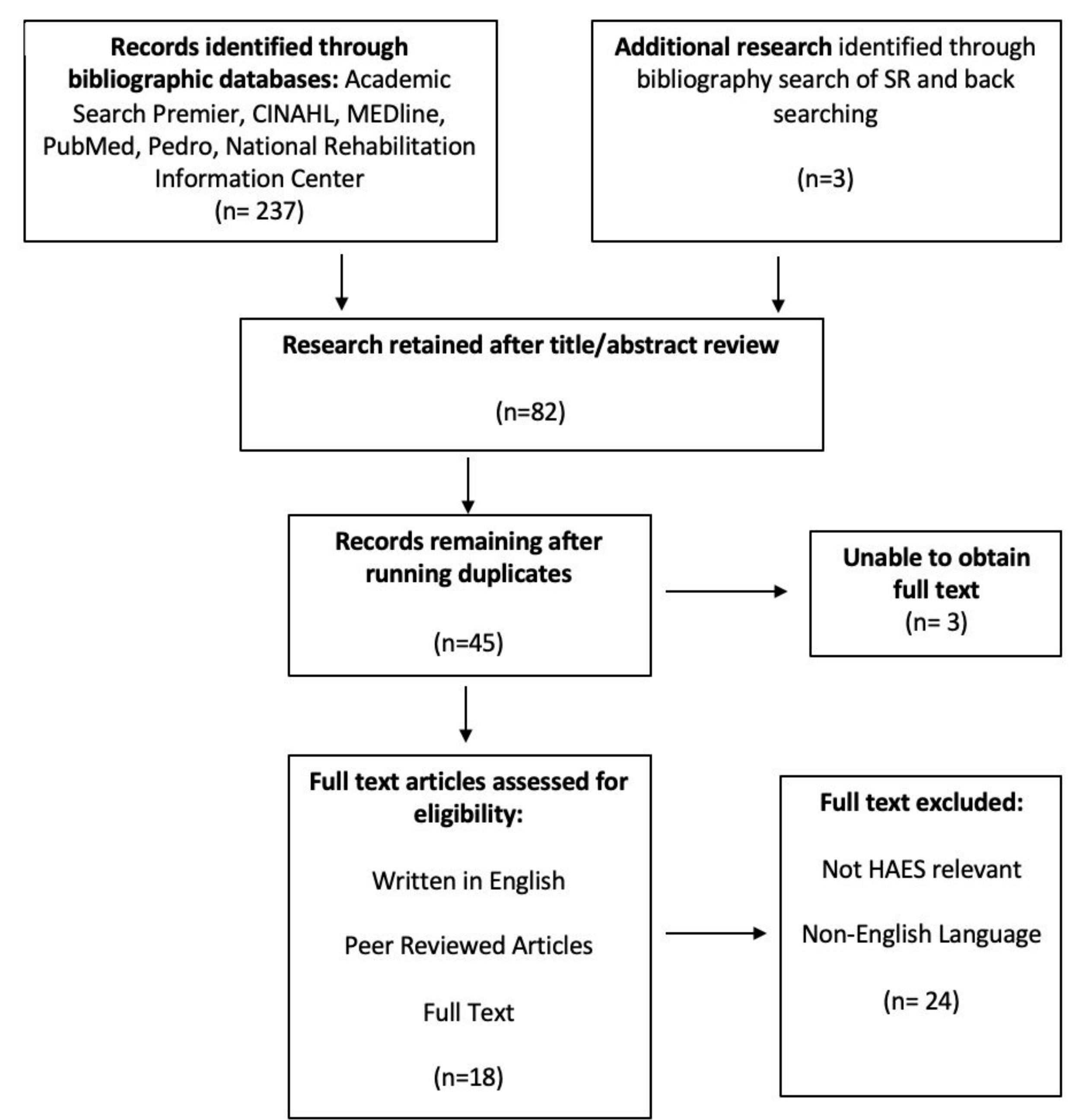
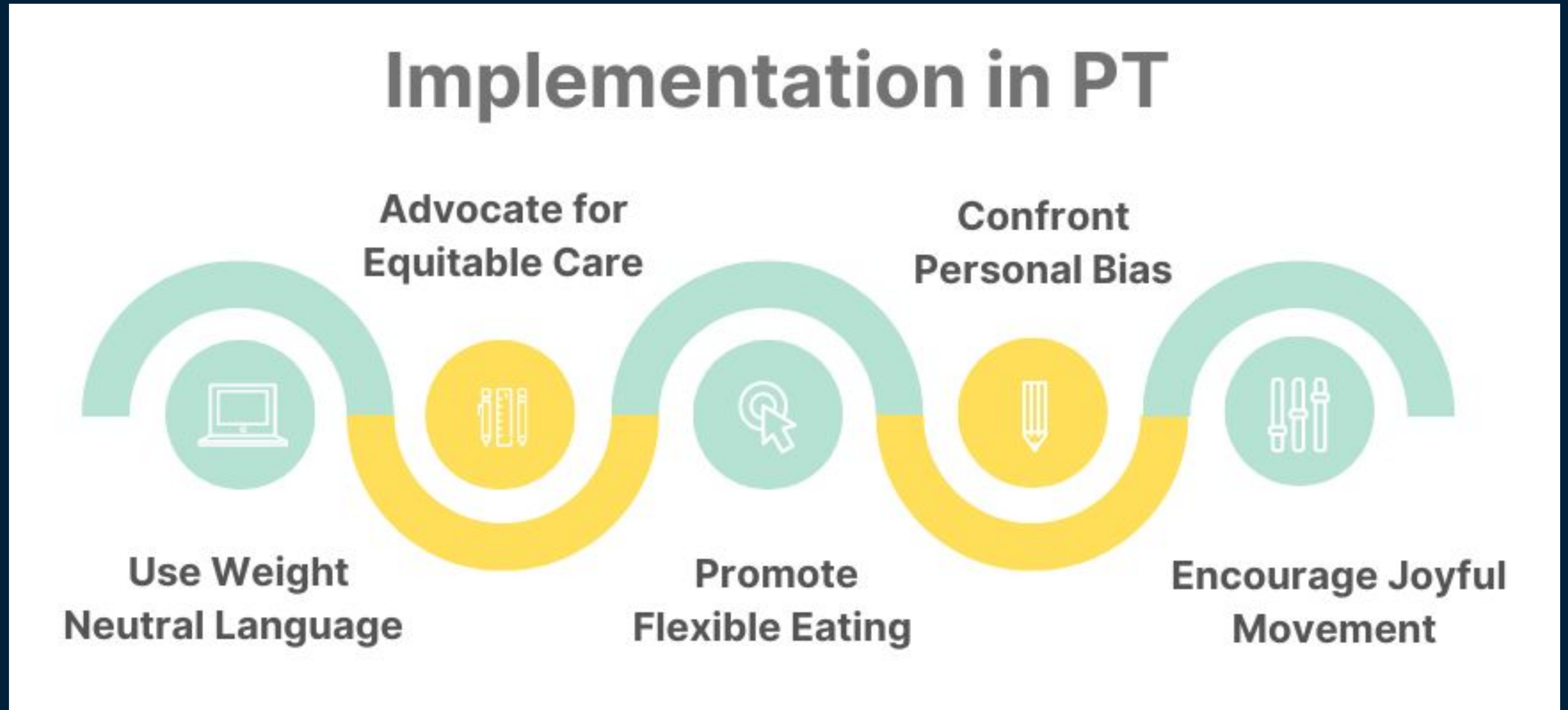
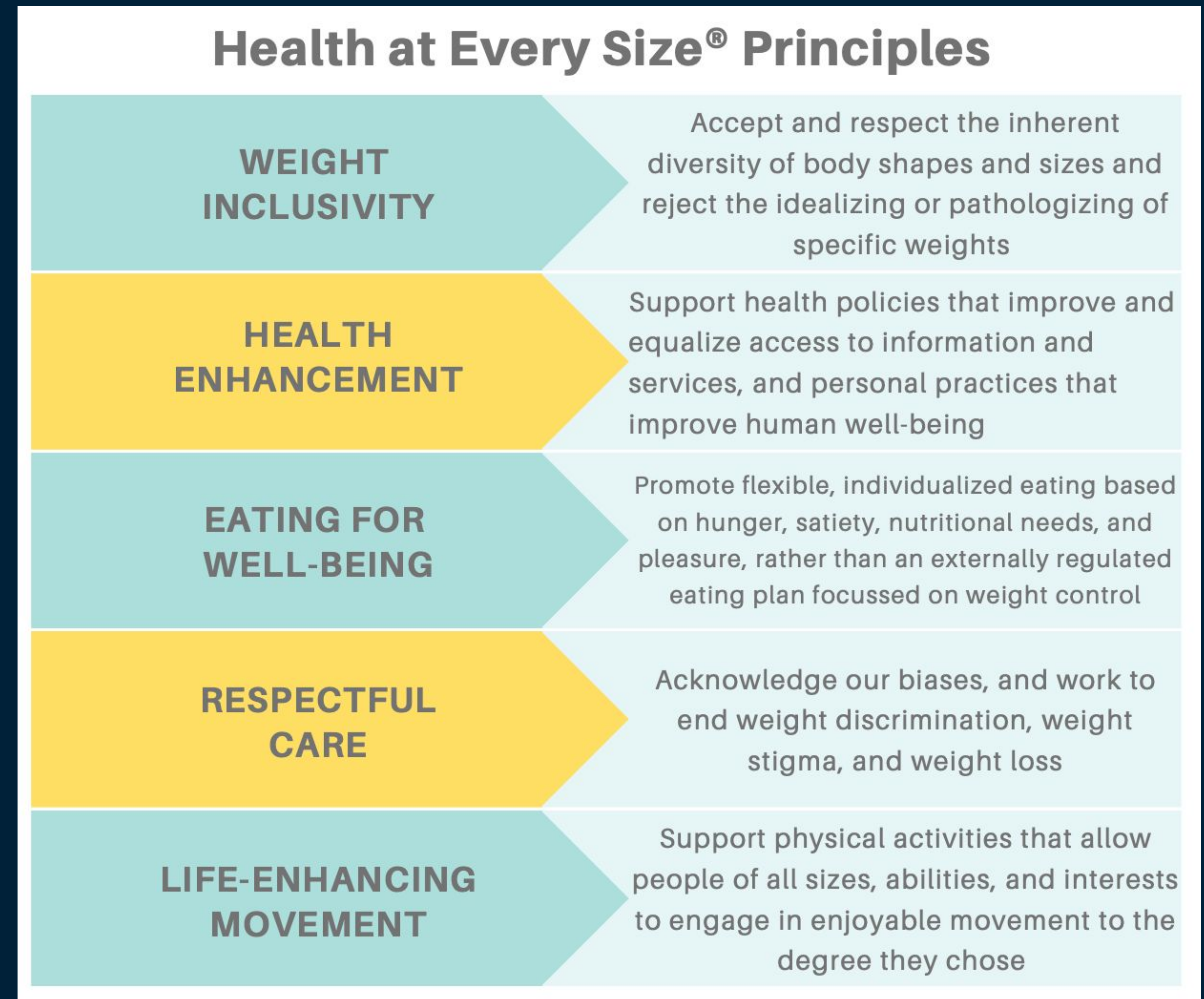


Figure 1: PRISMA of data collection for Narrative Review

Weight stigma is ruining patient health outcomes.



RESULTS:

- A HAES® model of care can improve physiological health measures and psychological health outcomes
- Weight loss is unsustainable and results in weight cycling
- Weight loss is detrimental to cardiovascular health and is associated with increased mortality
- Medical anti-fat bias is prevalent and perpetuates stigma, negatively impacting patient health outcomes

LIMITATIONS:

- Lack of high level of evidence
- Lack of variety of healthcare setting implementation
- Main focus on BMI interventions, not comprehensive health measures
- Narrow subject populations
 - young, cis-gender, white women with high education background
 - no older, non-binary, non-white, or male participants

REFERENCES



MANUSCRIPT



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