

Weight. There's more ...

Anti-obesity campaigns are useless and diets do not work, say those at the vanguard of a movement that focuses on health, not weight. **by JOANNE BLACK • photo by DAVID WHITE**

At the peak of his obsession with weight loss, Andrew Dickson wore out his dogs. At the time, he was running 150km a week and eating fewer than 1800 calories a day. He had completely cut meat – although not fish – from his diet and drank no alcohol. But desperate to see the scales dip below 86kg for the first time in his adult life, he pushed on.

“One of my dogs developed lupus and my wife and I are pretty sure it was down to running 17-18km a day with me. He was three years old and was too tired to go on more than one run a day, whereas I was sometimes doing two or three, or I’d go to the gym and do a spin class or cycle,” Dickson says.

Finally, Dickson, a Massey University lecturer who at his heaviest

had been about 135kg, got his reward. “I got to the lowest weight I ever saw on the scales, which was 85.9kg, but that was fairly heavily dehydrated, after running 30km without drinking any water or eating anything in the morning and not having had dinner the night before, just to see my weight go below 86kg.”

In that period, dieting and exercise ruled his life. “My wife barely tolerated my existence.” But even then, Dickson’s body mass



Off-again, on-again: Andrew Dickson at about 100kg; Oprah Winfrey before, while and after dieting.

“We don’t even have evidence that fatter people eat differently to thinner people.”



index (determined by dividing a person's weight in kilograms by his or her height in metres squared) was 26, "so I wasn't even in the healthy weight range. Technically, I was still overweight. In fact, I've never been in the healthy weight range, ever."

He says that even though BMI is known to be flawed, it has great power over people who are anxious about their weight. "The fact is that people do not go to the extremes I did to achieve something just for the hell of it. The function of BMI in our society, even though we know it to be a broken measure, is extremely powerful for those of us who are weight-anxious. So my argument is that the fact that we measure weight in itself is actually the problem."

SKINNY, WHITE, YOUNG

The weight-loss industry, he contends, creates a belief among those who are fat, or who struggle with their weight, that BMI is a measure of normal people. "The weight-loss industry is really the weight-anxiety industry and the basis of its profit is exacerbating anxiety."

"If you watch *Good Morning* or read *Healthy Food Guide*, they are predominantly skinny, white, young, female, privileged nutritionists and dietitians writing and talking about their life experiences, and that's an incredibly isolating and alienating experience for anyone who's had any serious issues with weight, or about weight anxiety. All that experience does is polarise people into thinking, 'I'm no good.'"

Further, says Dickson, those in the relatively new academic discipline of fat studies would also say overweight people are labelled as lazy, sloppy, slobbish and unintelligent. He says there is a feeling that even if fat people are good people, they still must be undisciplined or they would not be overweight. "There's always that partition, and adding a certain stigma. For me, that polarising experience prevented me ever thinking about my body as anything other than bad. And I'm still exactly like that now."

He says data also shows government-funded anti-obesity programmes serve no purpose. "They are not actually promoting health, they are following the discourse that tells them they should tell people to lose weight, even though 95% of those who try will fail and that may make their health worse."

Dickson, who wrote a PhD on his weight-loss experience and obsession, has reached a calmer relationship with his body and has not weighed himself for more than a year. He guesses he would probably weigh about

100kg. He still runs about 40km a week. "I am fairly careful with food but I drink alcohol, eat meat and eat large meals, but I do think about it every time I eat and it never leaves me. It's encoded in my unconscious."

He could be a poster boy for the relatively new Health At Every Size (HAES) movement that argues that society's unrelenting focus on weight is worse than useless, partly because it can drag people even in a healthy weight-range into an obsession about weight gain. It also makes overweight people miserable and dispirited even when, like Dickson, they are perfectly healthy.



Dr Linda Bacon holds public health officials responsible for escalating weight obsession.

WEAPON OF MASS DESTRUCTION

Dr Linda Bacon is the author of *Health At Every Size: The Surprising Truth About Your Weight* and a recognised leader of the growing HAES movement. She thinks public health officials have helped escalate weight obsession by fear-mongering. Former US surgeon-general Richard Carnoma, for

"The weight-loss industry is really the weight-anxiety industry and the basis of its profit is exacerbating anxiety!"

example, told Americans that obesity is "every bit as threatening to us as the terror threat we face today" and deemed "the obesity epidemic a greater threat than weapons of mass destruction".

What that rhetoric creates, Bacon says, is an environment that drives sometimes desperate and obsessive behaviours, makes fat into a moral issue and a public health issue and encourages even those at a healthy weight to become worried and fearful about adding kilos. She points out that Oprah Winfrey, arguably once one of the most influential women in the world, said after a "successful" diet, she considered

her weight loss to be the greatest accomplishment of her life.

"It's incredibly sad that this enormously accomplished woman ranked all her talents below that," Bacon tells the *Listener* from her home in California. "And of course, she regained that weight. The symbolism of this – possibly one of the biggest female role models publicly living the experience of most women – never got discussed. No one actually mentioned the regain, but everyone was behind her on her next diet, and she pushed the next diet guru to fame."

Bacon says although studies over decades have proved that it is very difficult to lose weight and keep it off, it persists as the model that is held up to overweight people. In theory, she

says, expending more calories than you consume should result in weight loss, but in practice it is extremely difficult. "We have to recognise that there are no known treatments that will help people to lose weight and keep it off. There is a whole fantasy that if only people eat well and exercise regularly, everyone should be able to lose weight, but it's not supported at all by the evidence, and we've been telling people that for decades and testing it for decades. The result of people trying to lose weight is lots of weight-cycling, where they lose weight then regain it. Their health worsens in the end and their self-esteem is terrible so it's not viable to say to people, 'just lose weight'."

METABOLIC SLOWDOWN

She also admits there is no evidence yet suggesting that telling people to focus on health rather than weight is any better at helping them achieve long-term weight loss. "All the studies that look at people long-term are

showing either that they maintain weight or that they gain weight and there's nothing, ever, that's been done that guarantees long-term weight loss. What is also interesting is that often people say, 'well, that's just because those people don't stick with the diet', but let's address that.

"Sure, it is hard, and physiology is part of that. For example, some people might be above what is a healthy weight for them to be, and when they start paying attention to their body by eating only when they are hungry and stopping when they are full, the body supports that and they might lose weight and get to a weight that is healthy for them.

"But for someone else, and this is the majority, dieting triggers compensatory mechanisms where the body wants to keep you at a higher weight in the future to protect you. When that person tries to restrict their calories, their body will do everything possible to make that difficult. It will do things like bump up their appetite so that foods they didn't even like before, they are suddenly craving. The body will also set it up so the person can't concentrate on other things, they're just so food-focused, because the body is trying to do everything possible to get them to ingest calories. So when we say someone just doesn't have willpower when they go off their diet, they don't realise that there are strong physiological mechanisms that are encouraging them to do that."

Bacon says the metabolism of dieters also slows down. A similar pattern can be seen with exercise, where studies show that people joining exercise programmes lose weight in the beginning, but over a long time reach a plateau and, eventually, "a switch-over where they regain weight back to baseline".

If this all seems depressing, particularly to anyone who is trying to lose weight, Bacon says it does not have to be. It is only depressing, she says, because everybody is living in a culture that reinforces the idea that if only they would diet and exercise, they could lose weight. "There's so much social support for that idea that it's really, really hard to let go of it. The whole paradigm shift is not something we can do overnight."

What would be more beneficial, she says, is to shift the focus from weight to health, and in doing so, debunk some of the myths about weight, including the "fact" that thinner people live longer. They do not. "The most valuable thing is that we all need to learn to look beyond stereotypes. We don't even have evidence that fatter people eat differently to thinner people. Many research



Running in the human race

If it's okay to be a large rugby player, why not a large marathoner?

A big man and a runner, Andrew Dickson would like to see more "Clydesdale" categories, for men over 100kg, introduced in running events. "What that does is confront the running community with something that they don't believe is possible, which is a large body that is also athletic."

Dickson says society deems it okay to be a large rugby player, "particularly if you are a Pacific Islander, and fine to be a large shotputter, though a little lighter is better", but its picture of a runner is extremely lean.

"I like to confront these stereotypes and am pleased to find the running community has been quite open and accepting." Next month he will run the Hutt Valley's Mukamuka Munter, a 29km mountain race that does have a Clydesdale category. "So I'm over 100kg and I will run this race in four hours, while the guy who wins it

in the open class will do it in three hours, but I will expend four times the amount of energy he does. And the running community is now saying, 'Yeah, good on you!'"

Dickson says he has just had a favourable response from the Manawatu Striders about accepting a Clydesdale category for the Palmerston North half-marathon.

"The race director said, 'what about a Clydesdale category for walkers', and I said 'great idea! It's amazing where things go just by confronting the discourse.'"



'Every day is a new challenge'

Dropping 10 dress sizes doesn't necessarily make you happier.

by JOANNE BLACK

Dr Robyn Longhurst knows all about the stigmatisation of fat people. A professor of geography at the University of Waikato, she has both a professional and personal interest in the subject, having lost 35kg a couple of years ago – her dress size dropped from 22 to



10-12 – by dieting alone. “I hate exercise,” she explains.

Longhurst has kept the weight off but only by staying on the same strictly controlled diet on which she initially lost the weight.

She admits to feeling conflicted about her support for people whatever their size, while harbouring her own desire

Robyn Longhurst: “painful stories out there”

to be slim. “It struck me a few years ago that social and cultural geographers have spent a lot of time thinking about issues of gender, sexuality, race, disability, ethnicity and so on, but nobody talked about body size. So as a large woman myself I was very aware that my spatial experiences were

studies show people are eating the same food but some are just disposed to store it as body fat whereas others burn it off more readily.”

DISEASE OF OPPRESSION

Even with diseases such as diabetes, behaviours like exercising seem to play a much larger role in any kind of disease risk than weight itself, Bacon says. “You can make a much, much stronger correlation between types of behaviour and Type 2 diabetes than you can between weight and diabetes. Here’s another example that blows me away: there is a much stronger correlation between socio-economic status and diabetes than there is between weight and diabetes. So, it’s a lot easier to view diabetes as a disease of oppression than as a weight-related disease. What I do acknowledge is that diabetes is more prevalent among heavier people than thinner people but it’s not the weight that causes the diabetes, the weight is a side effect of some other things. I’m not going to say it doesn’t play *any* causative role, but I am going to say that it’s very much blown out of proportion.”

Importantly, Bacon says, although there

is no evidence to show most people can change their weight, “we do know that if you can support people eating well and exercising regularly, it will certainly help lower their disease risk, so let’s put the focus there. Exercise is something that can benefit everybody and even though diabetes is more prevalent among heavier people, thin people get it, too.

“So if we make our message around weight, we’re only reaching a small part of the vulnerable population.” Also, she says, if messages are aimed at everyone, they do not add to the stigmatisation and fear of fat that already exists.

“What would be beneficial is to debunk some of the myths, including the ‘fact’ that thinner people live longer. They do not.”

FAT STUDIES

Dickson knows that stigma. When he lost a significant amount of weight – after his doctor suggested he try a medication called Reductil, which is no longer available in New Zealand – his photo appeared in the *Kapiti Observer* beside a photo of him when he was heavy, under the headline “Monster to marathon man”.

Massey University fat studies researcher Cat Pause, who also describes herself as a fat activist, knows the stigma exists because she has been called fat while just walking down the street. She is organising New Zealand’s first fat studies conference, which will be in Wellington this month. She thinks the Health At Every Size movement is probably gaining traction because it has a strong evidence base.

“When you’re talking to doctors, but especially to scientists, and I’m a scientist, it’s all about the evidence, the data, and when I look at the data around weight and health, I see there is no evidence to suggest that long-term weight loss is possible for 95% of the population. There is also very little evidence to support the idea that weight is a predictor of health. There’s data that suggests a

very much tied into my body size. So that was my inroad into the research."

Longhurst interviewed large women and says that although she was not asking them particularly personal things – just their experiences about going to the beach, to restaurants, or clothes-shopping – some of them cried during the interviews.

"There were a lot of very painful stories there. For a lot of them it was hard to be self-confident and to feel good about themselves because they had lived lives where they had got a lot of flak from people for being large. I didn't end up publishing them for a couple of years because every time I tried to engage with that material I got incredibly sad myself. I really get a sense that if you're larger, you do feel like you're on the outside. People of all sizes ought to be accepted and celebrated, and not made to feel shame and embarrassment about their bodies."

But although Longhurst intellectually accepted that argument, she wanted to be slim herself.

"There are a lot of contradictory emotions about being large and deciding you might want to lose weight and feeling like on the one hand you can intellectually go along with ideas through feminism

"When I first started actively trying to lose weight, I think I went in to a type of depression for the first couple of weeks."

that one ought to feel good about one's body, and I do genuinely believe that very much, but there was just that other part of me that kept thinking, 'Yes, but I'd like to be slim because my life would become easier and I would be approved of in a way that I am not approved of as a fat woman.'"

So now that she is slim, is she happier?

"That's a very good question and it's not easy to answer. It's still the same me and in some ways I am happier. There's no doubt you have a lot more social approval. I can also walk into any dress shop and buy something, and that feels incredibly liberating. I can sit on a long-haul flight without my hips being pushed up against the seat. So all those things mean, yes, in a way life is easier and, yes, that makes me happier, but there are things that I

miss from when I was a larger woman.

"I got enormous pleasure from eating and loved to feel as though I could eat when I wanted to eat. That's a wonderful thing and a wonderful pleasure, but now I feel as though each day I have to think about it in a way I didn't used to. When I first started actively trying to lose weight, I think I went into a type of depression for the first couple of weeks. I knew I was giving up a whole lot of those pleasures of my old life and that made me feel sad.

"If I wanted to lose weight and keep it off then I could never go back to that old way of eating and there was and is a sense of sadness and loss about that. We don't talk about the pleasures of it so much. It's just this simplistic discourse that you should eat less and exercise more and everything will be better. I don't think we explore some of the complexities nearly enough."

She weighs herself every day and says sometimes she feels that her life is destined to be one "where I hardly eat anything".

"Every day is a new challenge." ■

correlation, but it's still a very weak one, and then there is so much evidence to suggest that there are fat people who are healthy and non-fat people who aren't healthy."

The HAES approach, she says, is better for everyone. "We find girls as young as five who've been on diets and we find research which shows women in their forties would rather take 10 years off their life than gain 5kg. All these things are driven by fat phobia, supported by the myths that fat is unhealthy and the worst thing in the world. So the work we are doing across all these areas is getting people to focus on what really matters. If we want to talk about health, then talk about health. We can measure people's health by measuring their metabolic health, and measuring all sorts of things that are not weight."

When it comes to health, she says, even going to the doctor can be traumatic for fat people. "It is common for fat people to be hesitant about accessing healthcare because of the shame they have experienced in the past, and many of those who do access it are then subjected to doctors who are not using evidence-based medicine, so the patient gets poor medical care. If the doctor tells you

Stigmatised: Andrew Dickson featured in his local paper after he shed about 40kg.

to lose weight and do more exercise, there is no evidence that works for most people. Imagine what would happen if the doctor prescribed a pill for heart disease that worked only 5% of the time."

Back in the US, Bacon is sure HAES is on the right track. "As strongly as people cling to those messages about eating less and exercising more and losing weight, there is a

"We find research which shows women in their forties would rather take 10 years off their life than gain 5kg."

sense of disillusionment that comes along with it. And I don't get that in my work because I can feel the change and enthusiasm from being more honest with people, rather than feeding their weight-loss dreams. I see real change. It's almost a lifeline for people who discover it." ■

