A MESSAGE FOR THERAPISTS ON COMPASSIONATE THERAPY FOR WEIGHT CONCERNS

We are all raised with assumptions that fat is bad, that the pursuit of weight loss is positive self-care, and that body weight can be controlled through dietary change and exercise. These assumptions are so strongly a part of our cultural landscape that they are regarded as self-evident. As a result, many well-intentioned, caring people unknowingly collude and transmit these and other cultural biases regarding weight. A review of the science shows, however, that these ideas are social constructs that stand in the way of healthy development.

As therapists, it is important for us to look deeply at our biases and the ways they may show up in our work with clients. Taking the steps to identify your own implicit assumptions about body size, eating behaviors, and health will minimize the potential of your beliefs negatively influencing the way you work with those who come to you for help. The Health at Every Size (HAES) movement can help you develop a framework for conceptualizing weight and working with weight concerns. I encourage you to educate yourself about HAES.

Here are some suggestions on how to conceptualize and work with three common scenarios from a HAES perspective.

1. Clients on diets.
When clients announce they have just started a diet, you may feel tempted to view this as positive self-care and want to support their plan. Diets are seductive in their ability to make people believe that following a prescribed structure can bring about a feeling of “doing something.” However, following the rules of an outside authority
undermines dieters’ ability to trust their own capacity to meet their own needs. It also sets them up for feelings of failure and inadequacy. Sound science shows that biology often underlies the inability to sustain weight loss, even when that weight loss results from positive behavior change.

People who say they want to lose weight are speaking in code. It is up to you to help your clients identify what they are really looking for. Is it happiness, respect, health, feeling attractive? You can help your clients refocus their awareness on what they are really looking for and affirm their right to live in the world no matter what their size or shape.

If a client believes weight is the problem, then weight loss becomes the only solution. But if you reassure your client that his or her body is acceptable just as it is, your client can begin to pull their energy away from weight loss towards self-care behaviors that honor who they really are.

2. Clients who lose weight.
When clients share their success at weight loss, it is natural to want to celebrate with them. Doing so, however, affirms that thinner is “better.” It also reinforces bad feelings if (when) the weight returns. Instead, help your clients re-frame their achievement as a positive behavior change and self-nurturance. They can hold on to that regardless of their weight outcome.

3. Fat vs. Thin Clients.
Behaviors such as counting calories (or carbs or fat grams), using exercise to burn calories, exercising several times a day, etc., are suspicious when they come from an “underweight” client, raising a red flag for eating disorders. But larger clients who talk about these same behaviors are often applauded. Help your clients see that it’s not how big or small they are, but how they nourish themselves that is important.
For more information about Health at Every Size:

- Consider joining the Association for Size Diversity and Health (www.sizediversityandhealth.org), an organization for HAES-sensitive professionals.
- Visit the (free) HAES Community Resources (www.HAESCommunity.org) to register your voice, inform others about your work, and learn about other HAES-sensitive individuals and resources.