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[00:00:00] **Dana:** Hi, everybody. This is Dana. I'm here with Hillary. Hello. Hello. And Sirius. Hey, everybody. And we are recording our answers to some of our listener questions that have come in. So this is a change of pace for us today. We know there's a lot of questions when people start to get exposed to this work. Sometimes when we're giving talks in professional spaces or any space, really, we, we kind of warn people that there's a lot you're going to bump up against when you learn about this, and you're going to have a lot of questions.

[00:00:37] **Dana:** And like, one of the questions is always like, but, but, but, but, but, but, but, but, but what about health? And we are going to have an episode on health and healthism coming up soon. Today, we're answering some of the big questions that come in around weight loss. And here is one of the questions. When is weight loss appropriate in your opinion?

[00:01:03] **Dana:** Do you condone any kind of weight loss?

[00:01:06] **Hilary:** What a complicated question. I mean, the answer is no. The answer is no. But I think it's more complicated than that if we want to break it down a little bit. I think what we know, what, what What science tells us, what studies are showing us is very clearly that there isn't methods of sustainable weight loss.

[00:01:32] **Hilary:** And we also know that weight cycling is more harmful for people than just maintaining their weight. And so I haven't found a way to condone weight loss that doesn't actually contribute potentially to more harm. Weight loss also impacts people psychologically, physiologically, all kinds of ways. So I don't think there's any benign weight loss.

[00:02:03] **Hilary:** This is not to say that you haven't lost weight before and felt really good about it. But I also think conditioned to blame ourselves when we don't maintain weight loss and that is harmful to you because that's never been your fault. That's the, that's just, weight loss doesn't work. But I think there's more to say.

[00:02:23] **Hilary:** And I imagine Sirius and Dana have something they want to jump in with.

[00:02:31] **Sirius:** Yeah. This. Question in this conversation is complex and very fraught and it's difficult to have a succinct answer because there's so many individuals involved. It's never wise to deal in absolutes, but the reality is the data is very clear that for the vast majority of people having long term sustained weight loss [00:03:00] is, is not attainable. Sure, there are individuals who can do it. There are folks who have done it. You might know them, but it's more likely that it was your cousin's sister's friend's brother.

[00:03:12] **Sirius:** Not someone you actually know. Just saying, but, but the reality is that for most people, that's not what's going to happen. Weight cycling is very real. You might lose some weight, but within two to five years, it will likely be back. If not more. And I think that that Hillary is very right that our culture punishes people for gaining back the weight and celebrates the weight loss and people do feel good, but how much of that is a conditioned response.

[00:03:45] **Sirius:** So yeah, it's a, it's, it's not an easy thing to tackle because the, the weight of our cultural knowledge. Which is truly not connected to scientific knowledge about this is so strong and so deeply ingrained, but the truth is that, you know, weight loss isn't typically sustainable, and it can be often harmful.

[00:04:12] **Sirius:** And so, why would we condone something like that? We don't condone things that are unsustainable and harmful in other areas of our lives. But this is weight loss is one of the few things that like, we don't really question as being a good.

[00:04:29] **Dana:** Yeah. Well, it's kind of like what our colleague Deb Burgard said.

[00:04:35] **Dana:** has said and is quoted often for that we sometimes put up in presentations is, we, we actually prescribe for fat people, the very behaviors we diagnose as eating disordered and thin people. Sometimes when people ask this question, are you against weight loss? You know, bodies change. The truth is bodies change over the course of your lifetime. You will likely gain weight, lose weight. At times your weight will stay the same, that there's a place your body's comfortable.

[00:05:07] **Dana:** And when we diet and try to suppress our weight from where it naturally wants to be as serious was saying, it tends to promote more weight gain over time. Okay. In fact, researchers will say that you know, the best way to encourage someone to gain weight is to, is to ask them to lose weight. Because we know that if you ask someone to lose weight, they will gain weight ultimately.

[00:05:34] **Speaker 4:** Right?

[00:05:36] **Dana:** And, At the end of the day, body trust is about trusting people's bodies to sort out the weight, which means, you know, when you get sick with an illness, you may, your, your weight may change. It may go up, it may go down. It may stay the same when you come out of that illness, your body will change. You go on a medication, your body will change.

[00:05:56] **Dana:** It may go up, it may go down, it may stay the same.
[00:06:00] But we don't have control over that. And that is something that people reckon with in this. And, You know, it's not that we're anti weight loss necessarily because we know bodies will change. We're pro truth in that there is no evidence based treatment that supports weight loss.

[00:06:20] **Dana:** And the other thing is, this is a made up problem.

[00:06:23] **Speaker 4:** Mm hmm.

[00:06:24] **Dana:** Describing fatness as a problem is made up, right? If we didn't even have this belief in our culture, we wouldn't need the weight loss paradigm. If we accepted body diversity, and we know that bodies come in a diverse range of, you know, heights, shoe sizes, but like waist circumference, we better just have a very narrow range of what's what's normal across diversity, right?

[00:06:55] **Dana:** So this is a made up problem. And science has gotten so invested in it. And maybe that's what I was going to say with the researchers is, you know, they all thought they were doing good science. Because there is a lot of science, bogus science, that supports pursuit of intentional weight loss. But when you do more, you get more into the body trust work, you start to be able to spot the problematics in the research and see how we've all been duped.

[00:07:27] **Dana:** And we've been harmed.

[00:07:30] **Hilary:** I mean, this question is landing , people who are wrestling with this kind of question about when is weight loss appropriate. You know, is probably challenged by experiences they've had in medical community or their loved ones have had in medical communities that are more likely to encourage people to lose weight if they're in larger bodies than they are to offer whatever intervention or suggestions they'd offer to a thin person sitting in front of them.

[00:07:56] **Hilary:** But it's also in inviting us to Into our, where our ceilings are, our individual ceilings are in terms of fat acceptance.

[00:08:05] **Speaker 5:** Mm-Hmm. . Mm-Hmm. like

[00:08:07] **Hilary:** to wrestle with this question also means like, how am I gonna get myself to remember and believe hopefully that weight loss isn't necessary all the time or at all to improve health?

[00:08:25] **Hilary:** And that's a really complicated concept to run into in this arena. The other thing that is. Even if weight loss would help, which we jury's out on, it's not necessarily available or possible. And it also, every time we lean into that, we're marginalizing fat folks. Every single time. We leave the question open or we hedge.

[00:08:59] **Hilary:** We're [00:09:00] marginalizing fat folks. And instead of imagining what might be necessary for people, I'm interested in improving the lives of fat folks right now.

[00:09:12] **Hilary:** All of them. The ones sitting next to you right now, your loved ones, the people you judge on the street, all of them. Let's do that first, and then figure out the rest.

[00:09:26] **Dana:** Well, and that's It feels like, I think a lot of people straddle. That's one thing we'll say. It's really common when people come and hear, hear body trust. Like when you were listening to the first episode of this, you might have, of our podcast, you might've thought, Oh yes, oh my gosh, really? Oh my gosh, that's my lived experience.

[00:09:50] **Dana:** Whoa. Right. And then you're like, and then typically after that. Within 30 minutes, you get a culture, a message from, you know, broader culture. And it's like, Ooh, I really want this body's trust stuff, but I I'm going to, I first, I, I want to, I need to, to lose X amount of weight first, and then I'll do this body trusting thing, right?

[00:10:14] **Dana:** That is incredibly common in this. And the reckoning is knowing you're laying down weight loss. There's like, but let me do a last stitch effort just to get my weight down a little bit before I do this body trusting thing. And we believe we can do better that that we can keep coming over to this side without pursuing weight loss and, and a key point I wanted to bring up is that, and I think Hillary, you were just speaking to this to some degree, is we cannot address weight stigma and anti fat bias by upholding it.

[00:10:56] **Dana:** The dominant weight paradigm and encouraging people to lose weight, you don't get to have your cake and eat it to you don't get to say, I want fat liberation for everybody. But there's a different set of rules for me. And I'm going to keep losing weight, right? We can't get the system to crumble. If people are still dieting and intentionally pursuing weight loss,

[00:11:22] **Hilary:** it's also triggering AF for people. Who have had eating disorders, who live in marginalized bodies, who live with fatness, to have to constantly encounter you in your diet.

[00:11:35] **Hilary:** It's not normal. It's not okay. If we lived in a different culture that loved all bodies, maybe you could talk about it. I don't know. But here, you cannot. I don't think you can. You know, it's That's why when we see major influencers talk about their latest cleanse or something they're doing for health, I'm like, fine, do that, but God, shut your mouth.

[00:11:58] **Hilary:** Because it [00:12:00] Is you just triggered so many people back into their eating disorder and you don't even know, you know, you don't know what you don't know, but it's don't do it.

[00:12:13] **Sirius:** I think one of the really challenging things about this as a, as a fat person is that I think that for a lot of fat folks, they get to a point where it's not about health. It's not about. Aesthetics, it's, it's about quality of life. It's about accessing medical care. And I think that's where this question about.

[00:12:41] **Sirius:** Do, we, can, don't, any kind of weight loss becomes incredibly difficult because that that is the reality for some folks. Their lived experience is such that if they were smaller, their life would be better. If they were smaller, they could get this care that they're trying to get. If they were smaller, they wouldn't have to buy two seats on an airplane.

[00:13:02] **Sirius:** But again, my answer to that is Those are systemic problems. That is systemic oppression playing a deep and intense pivotal role in your life. And the answer to that is to change the oppression. We have to address the oppression. If we did live in a culture that was more accepting, these conversations would, I think, land a lot differently.

[00:13:27] **Sirius:** But that is not the reality. And so, you know, I think it, I think it becomes particularly difficult because we're dealing with problems that are showing up on a systemic level that are impacting individual lives. And is it, is it true that that individual life in that moment might be different if they lost weight?

[00:13:48] **Sirius:** Maybe, I don't know, maybe. But the long term around that, and it's, it's one intervention when there, there is a, a rule, a policy that is impacting so many people. The world has to change. The world has to change.

[00:14:13] **Dana:** Yeah. It feels like, I mean, we heard this talking point 20 years ago that you cannot address an end weight stigma and anti fat bias by delivering a weight based intervention, right? It's like the basic of the basics. And yet we have a lot of people in this field, on the outskirts of this field, we even see it with some of the GLP 1s, like these, infomercials that have been out there around these GLP 1 medications like Osempic, that want to, want to do that, want to have their cake and eat it too.

[00:14:57] **Dana:** We, they, they want to end weight stigma [00:15:00] and they want to be able to pursue weight loss. And then it's like, I was. shamed for being fat. And now I'm shamed for wanting to lose weight. Right? There was that piece in those infomercials.

[00:15:13] **Sirius:** To me that indicates that it's not about either one of those things. Right? It's it's about control. Right? shaming you for one shaming you for another. I mean, if you're damned, if you do, then you're just damp.

[00:15:31] **Speaker 4:** Yeah.

[00:15:31] **Sirius:** And how is that not the concern?

[00:15:33] **Speaker 4:** Mm hmm. Mm hmm.

[00:15:36] **Dana:** Yeah. And I'm really glad that Sirius brought up people who are being withheld from life saving medical treatments for, because their, their providers are demanding weight loss before a surgery that's going to save their life, like gender affirming, life saving surgeries, right?

[00:16:00] **Dana:** And then they dangle the surgery. And want the person to pursue weight loss. And we've sat in rooms with people who are in this place, this predicament of knowing that weight loss has only made them fatter. And yet they need this surgery that will not happen for the surgeon. because they're demanding weight loss.

[00:16:27] **Dana:** And we've held space for people in there, where we don't tell them, you know, we don't say, you can't do that. We also say, we also don't say, do that, do that. Yeah, just diet and get the weight off, and then we'll do this

body trust thing. Right? We hold space for people who are considering and dealing with this fuckery from medicine.

[00:16:48] **Dana:** And I have had people choose to go on liquid diets To get the weight off fast and then they have their surgery and then the weight comes back with the vengeance and they know that's going to happen but they really want the surgery.

[00:17:04] **Hilary:** Yeah.

[00:17:04] **Dana:** And then they go into the surgery in a malnourished state, weight suppressed body in a malnourished state because they've been starving themselves.

[00:17:12] **Dana:** And you actually need nutrients to heal from surgery. And there are papers that show that outcomes are better for people who maintain their weight even at higher body weights. than people who pursue weight loss prior to surgery because of that, in part because of that malnourished state they go into surgery for,

[00:17:39] **Dana:** you know, and our first avenue when we have clients that are in this predicament with medicine. Is talking to the physician and sending papers that might get the surgery approved without the weight loss component. You know, I've had people with eating disorders that have [00:18:00] almost killed them, and I've had to write to their medical doctors and say,

[00:18:04] **Speaker 4:** Mm-Hmm, ,

[00:18:05] **Dana:** this person has almost died from their eating disorder.

[00:18:09] **Dana:** Weight loss is contraindicated for anybody. In my opinion, but it's especially contraindicated for people who've had a life threatening eating disorder that has almost killed

[00:18:22] **Speaker 4:** them.

[00:18:24] **Dana:** So you're willing to risk that the eating disorder comes back because you can't imagine that this person could have a surgery outcome that's positive.

[00:18:35] **Hilary:** I think here we have to say, unfortunately, just so everyone gets, gets the message that fat people have eating disorders.

[00:18:47] **Hilary:** Because I can see, I can imagine people doing some kind of math where they're like, well, they're not skinny anymore. Why would it kill, you know, and that's not how it works, you know, eating disorders starving, not eating enough, regardless of size affects every organ system and we wouldn't know actually how many fat people have died because of eating disorders because they're rarely diagnosed.

[00:19:16] **Sirius:** Again, thinking about this as a systemic issue, I think it's just relevant to point out that sometimes it's not the doctor, right? It's the insurance company. It's, it's a regulatory body. It's some other force that is saying, no, we can't do this because of body weight. Right? I, in my previous workplace, We worked a lot with the team, the medical team, on these issues, on body trust, on not weighing patients, on not taking BMI, right?

[00:19:50] **Sirius:** We worked a lot, and like, there was a lot of change within those individuals who were providing the frontline care. But when they had to kick it back to an insurance company, or when they were, you know, a provider was confronted with potentially losing their license because they did something, right?

[00:20:09] **Sirius:** Like, that's Like, that's also a place of challenge and problem around these issues because sometimes it's not even the individual provider, but again, it's systemic. Yeah. It doesn't need any one person to uphold the system for the system to continue doing its deeply dirty work. Yes.

[00:20:33] **Dana:** When I worked in weight loss research with weight loss researchers, none of us thought we were promoting dieting behaviors.

[00:20:41] **Dana:** None of us thought we were prescribing eating disordered behaviors. You know, and The Biggest Loser is, is, is a great example of a television show that was prescribing compulsive exercise and severe eating [00:21:00] disorder restrictive behaviors for entertainment, right? And there have been articles written about how the majority of people on that show that were contestants have regained the weight.

[00:21:14] **Dana:** And then some, some have had health issues that haven't resolved. Some of them have eating disorders and, and come out of that show with raging eating disorders, especially when they're competing for weight loss. And they, I think back in the day, they, did they send them home for a while and then they would come back so when they would go home and be on their own, that's when their eating disorders probably really went off the charts.

[00:21:40] **Dana:** They were learning how to have an eating disorder on the show. If they hadn't had one already.

[00:21:45] **Sirius:** Yeah.

[00:21:46] **Dana:** And then they sent them.

[00:21:48] **Sirius:** Did I ever tell y'all that I was almost on The Biggest Loser?

[00:21:51] **Dana:** No. What? Do tell.

[00:21:57] **Sirius:** Yeah, this was, this was years ago when I was still obviously in a dieting mainframe or dieting mindset.

[00:22:04] **Sirius:** I was working at a university at the time and producers and recruiters were coming to Portland To, for casting and they had reached out specifically to the the fitness center at the university to see if there were any students that might be interested in, I was working there. So it wasn't a student, but the personal trainer who I was working with at the time was like, Oh my gosh, you should think about this.

[00:22:30] **Sirius:** Blah, blah, blah. My husband and I went to the casting call. We made it all the way. It's like a, it's a cattle call. I don't know if you've ever. been involved in reality TV casting. It is wild. But it's like a bunch of like group interviews where they ask you a question and you have a moment to like shine.

[00:22:54] **Sirius:** And then if you shine enough, they want to talk to you. So my husband and I got through all that and they invited us in for like filmed one on one interviews with the producers. And we went to that, we said the things and then we didn't hear anything back. And after the fact, I realized what happened was that we didn't cry, and so we weren't gonna make good TV.

[00:23:19] **Sirius:** Right? Like, we weren't, like, we weren't like, really sad. We just, like, wanted to lose some weight. Wanted to start a family. Let's, yeah. Like, we weren't, like, devastated by our fatness. And so, like, we just, we just weren't gonna make a TV and that's too bad. Too bad for them. Great for us, because had we actually ended up on the show, I would probably, we, we would probably have lifelong devastating impacts from the physical demands.

[00:23:51] **Sirius:** And the physical abuse of the show.

[00:23:54] **Speaker 4:** Yeah.

[00:23:55] **Sirius:** And I know that we'll include it in the notes for the show, [00:24:00] but there, you know, data mentioned there have been research and studies, and there was a great New York Times piece about the folks who are on The Biggest Loser and some of what they, you The lasting impact on them was and there's some really great graphs, easy to understand graphs there that show that, you know, most every contestant that they talk to you gain back the weight plus more, including winners, including people who could last over 100 pounds of weight through the course of the show.

[00:24:27] **Sirius:** All of them have, it is incredibly decreased their metabolism and many of them are facing different kinds of metabolic disorders that they weren't facing before in many cases because of this, right? That's, that's the impact of weight cycling. That's the impact of dieting.

[00:24:45] **Speaker 4:** I mean,

[00:24:45] **Sirius:** how much of what we attribute to the quote, unquote, going to use the word obesity epidemic to actually the impact of weight cycling over time, whether it's sort of metabolic stuff, diabetes, heart disease, all of those things.

[00:25:05] **Sirius:** You can, you can trace them back to weight cycling as well.

[00:25:09] **Hilary:** Absolutely.

[00:25:11] **Sirius:** Yeah.

[00:25:12] **Hilary:** And that show is, you know, something that has reinforced in our minds over and over again that that is health, that that is an expression of health to do those things to get fat off your body. And I think that is a prime example as to why people are confused.

[00:25:35] **Hilary:** About weight loss and health. What year was that, Sirius, you think?

[00:25:42] **Sirius:** That Chris and I were going to go on a show. Mm

[00:25:44] **Hilary:** hmm. Yeah.

[00:25:45] **Sirius:** 2012

[00:25:51] **Sirius:** ish. Mm

[00:25:51] **Dana:** hmm.

[00:25:52] **Sirius:** Yeah, 2012 ish, I would say. Were you

[00:25:55] **Dana:** going to go on as a couple? Was it like a Biggest Loser couple edition? Yeah.

[00:26:00] **Sirius:** So at the time that we entered the casting they were asking for couples. The, the version of the show that aired that we would have been on ended up being an individual. But at the time that they were talking to us and that actually, that may be part of why we didn't get cast was because they shifted away from couples that year, but yeah, who knows?

[00:26:21] **Sirius:** Who knows?

[00:26:24] **Dana:** And then you came all that way and you were in the, the Hulu shrill pool party scene.

[00:26:33] **Sirius:** My how times have changed. Yeah. Yeah. I will say that I, this, this conversation just brings me back to some of my early days around fat activism. activism in particular, I think I had definitely been in the body positivity phase and really thinking that like body positivity was great, but going [00:27:00] to no lose the pivotal conference around fatness being in fat community and being like really harshly called out by a friend at the time as being someone who was deeply involved in diet culture and, and, you know, All of that.

[00:27:14] **Sirius:** It was harsh when that person said it to me. And I wouldn't encourage anyone to actually do that to the beloveds in their lives around these issues. But the content of what that person said to me at that time was accurate. In that you can't have your cake and eat it too. Right. And that like dieting over the long term doesn't work.

[00:27:44] **Sirius:** Yeah.

[00:27:44] **Speaker 5:** Yes.

[00:27:47] **Dana:** And, you know, I just want to remind folks that the makers of these new weight loss medications are rebranding re weight cycling as a chronic relapsing medical condition to be able to sell the product. The same shit to you.

So just a reminder of how they're talking about weight cycling, but they're calling it something different to make it sound like science

[00:28:11] **Speaker 4:** and

[00:28:13] **Dana:** like a medical condition.

[00:28:14] **Dana:** And I think that's one other thing that. Maybe it's important around the surgery aspects and Hillary can maybe speak to this is like they don't, it's not that fat people can't have these surgeries. It's that they haven't learned, they haven't been trained to do surgeries on fat people.

[00:28:37] **Hilary:** Yeah, I mean, my understanding is that at least last I heard and people are welcome to correct me, but is that anesthesiologists aren't well trained on fat people.

[00:28:47] **Hilary:** Oh, working with fat folks. So it's not the fat bodies. It's the problem. It's we don't, as Dana was saying, we don't know, the people don't know what they're doing and we fat folks can't donate their bodies to science anymore. I have an aunt who is an OT and you know, she was in school, I don't know, seventies, I'm not sure.

[00:29:09] **Hilary:** And she had a fat cadaver that her fat ab cadaver was a fat cadaver. And I remember her talking to me about it and how. Great it was and how much she learned, blah, blah, blah. But. The thing is, that I don't think that can happen anymore. So, you know, every, it's so, it's a systemic piece that everything is set up to keep shoving us back into this corner where we have to disbelieve fat people, blame fat people, so we can stay in our cozy little corner of potentially, you know, being in a smaller size gene.

[00:29:49] **Hilary:** And that corner shouldn't feel as cozy as it does to lots of us.

[00:29:56] **Hilary:** It's hard to believe that you in your own little [00:30:00] relationship with your body, you know, can impact other people. And, you know, we all want. The next generation, our current generation, the kids around you to have a very different experience in their bodies. And that means we have to address each other differently, talk about ourselves differently, think about ourselves differently.

[00:30:21] **Hilary:** And I know saying that is one of those easier said than done things, but I also just want to reinforce how worth it is, how worth it is to keep, keep leaning into something that feels so foreign. Yes,

[00:30:35] **Speaker 4:** yes.

[00:30:45] **Dana:** Yes. There's kind of two other questions we were looking at to, for this episode. One is which kind of feels like a segue from what you just said to Hilary. So maybe I'll read this one and, and we'll talk about it. How, how do I stop listening to old internal voices telling me to just lose weight? You know, and one of the things you were talking about, like we don't talk enough about what's on the other side.

[00:31:18] **Hilary:** Yeah, we don't talk about enough what's about what's on the other side. And so what it is good for people to hear over and over again that it's worth it. I mean, that might be something each of us could speak to is like what in our lives changed when we shifted, if anything, and when we shifted into this, and I would say the level of freedom and self self love that's available to me is.

[00:31:45] **Hilary:** Exponentially bigger than what it was when I thought I could just hold myself to diet culture while being, you know, radically interested in liberation and every other area. No, it doesn't work. I remember when I finally felt like I was starting to land in a place that was far more like my own body acceptance.

[00:32:08] **Hilary:** How much other bodies started to look different to me, not different in size or shape, but just everything got so much more beautiful, just so much more exciting and beautiful. And it moved from like these categories and to like, look at all that I've missed out on. So it's totally different over here.

[00:32:31] **Hilary:** You're also not alone over here. I think you might feel alone because you're surrounded by folks that are immersed. And diet culture, anti fat bias, but there's a lot of us over here too. And I think we're a lot more fun, honestly. I agree. We just had a gathering last week, at least at the time of this recording.

[00:32:50] **Hilary:** And, you know, the gathering was of people who are in our certification training or are certified in body trust work. And for a lot of them, [00:33:00] it's the first time that they're in a space where there's, you know, where anti fat bias is being. addressed and they're not necessarily going to run into it and they can, you know, eat food without worrying what people are looking at, what people are thinking about what they're putting on their plate, or if they go back for seconds where there's other fat folks, where the chairs fit them, where you know, all of these things happen and they just get to be.

[00:33:34] **Hilary:** And it is a glorious space when we create that for other people, it's very, very, our spaces tend to be very loving and very fun, because a lot of that stuff goes away.

[00:33:49] **Dana:** I was going to offer a couple thoughts on how do I stop listening to old internal voices telling me to just lose weight. I think a lot of people. have these voices in their head, these thoughts that try to pull them up, up and out of this work. And sometimes it can be helpful to just name it as a thought, like just because your internal voice is saying this doesn't mean it's true, right?

[00:34:19] **Dana:** Just because you think it doesn't mean it's real or it's true, right? So to get curious, to, to, To notice, I mean, makes me think when we did a group years ago, one person, like three weeks in, we were checking in and she says, I'm noticing that I'm using the word notice a lot. So when you're having internal voices telling you to lose weight, it is an opportunity to hit the pause button and get curious.

[00:34:49] **Dana:** Huh, what just triggered this? I wasn't thinking about my weight an hour ago. I wasn't spinning in this place of you just need to lose weight. Right? So what triggered it? What were you doing? Where were you before this thought? So we kind of pull up and we get curious. About wait, what was going on and why am I thinking about weight loss all of a sudden I had a toxic, you know, sometimes it's you've had a conversation with your chief weight stigmatizer.

[00:35:19] **Dana:** That's our colleague. Shelby Jordan, Shelby Gordon named, you know, her mom was her chief weight stigmatizer, her CWS. She has called it this name, right? So if you have a conversation with your chief weight stigmatizer, you're probably going to get off the call and think, I need to lose weight, right? So what are the things happening in your life that trigger your desire for weight loss and start reducing your weight loss?

[00:35:46] **Dana:** exposure to that. You might have to curate your social media feed. It's really disgusting right now that people who follow Center for Body Trust are targeted with [00:36:00] GLP 1 medications. So if you follow us, you are likely getting GLP 1 ads. Ads. Because you follow us. And like when I look at Center for Body Trust feed, I'm just like, whoa, look at all the weight loss ads where I don't have that in my personal feed.

[00:36:17] **Dana:** God damn, I'm just like, report, spam, violation to try to clean up our feed for Center for Body Trust. And I'm like, if we're getting it, God, the

people who follow us , must be getting it. So you may have to unfollow a friend, snooze a friend for 30 days because they're on the whole 30 and they can't stop talking about it.

[00:36:40] **Dana:** Right? Like it reduced your exposure to the things that make you think about weight loss, right? That's one of the biggest things you can do. And then name the food voices, right? Like the, the, we've got a health splainer. Health splaining is the equivalent of mansplaining, but around health. And we'd call it, also call it concern trolling.

[00:37:04] **Dana:** You've got the concern trolls in your life, your family who are like, I know, I love you. And I think you're beautiful. I just want you to be healthy. Right? Like you've got those voices contributing to your own noise. And then you have your internal voices that have adopted this, the cultural narrative. And so being like, oh, hi, HealthSplainer.

[00:37:28] **Dana:** Oh, there's my food policing voice. If you have diabetes, you might have a diabetes policing voice that tries to tell you, blah, blah, blah, and make your weight loss about your diabetes. And so sometimes naming like, oh, there's my food police and there's the, the body police and there's the health splainer just gives you some separation

[00:37:52] **Speaker 4:** from

[00:37:52] **Dana:** these thoughts.

[00:37:55] **Dana:** And when I was doing some meditation, like training, just as a meditator, I love this idea that your thoughts are like hitchhikers. You get to decide which ones you pick up and which ones you let go by. And just because you think something does not mean it's true or real or anything. So get curious about this.

[00:38:24] **Hilary:** Yeah. Just to piggyback, like I I've read something that says really only about 20 percent of our thoughts are believable. A real true. So that's a lot of bullshit passing through. I do want to add also that we, I wouldn't think of your thoughts as a sign of failure. I would think of your thoughts as an attempt to cope, maybe in an old way, you know, or that you got triggered as Dana was talking about.

[00:38:52] **Hilary:** And one of the values we have in body trust work is that we strongly believe that all of your coping has been rooted in trust. And [00:39:00] wisdom, right? There was, it was wise when you were introduced to dieting or

when you were immersed in your eating disorder to have a way of coping with whatever was going on in your life at the time.

[00:39:12] **Hilary:** It may not be serving you in the same way now. You may be trying to get out from underneath that. But the thoughts aren't the problem unless you don't catch them and they send you down, you know, some kind of funnel back into diet culture and all that kind of stuff, but you can stop it at any point. Once you notice it.

[00:39:33] **Hilary:** It doesn't have to be just with the thought it might be. You know, we had one person that said had been working with us for a long time and then we didn't see them for a few months and they came to an event we had and I don't want to feel like I'm confessing, but I went back to Jenny Craig rest in peace.

[00:39:53] **Hilary:** Right. But I went back to Jenny Craig and I bought all the food and I filled my freezer and I felt like, okay, I'm back in line. I got a plan. And then she said the next time she went to her freezer, she opened it up and the first thought she had was this isn't me. This isn't me. I don't do this. But sometimes it takes to the point where you got a, you know, fridge full of something or you've spent money on something again before we pull back, but it's okay to pull back whenever this was done to you.

[00:40:24] **Hilary:** You didn't make this shit up. This happened to you. And so getting out from underneath from something that's been insidious and harmful to you over and over again takes some work. Yeah.

[00:40:37] **Dana:** That was a group that was, we, we used to hold a, a free gathering like the first week of the new year to just like, how do we start the new year without weight loss?

[00:40:49] **Dana:** Because so many people when that time of year, and I think this episode will be coming out right around the holidays, which is good because the siren song of the diet and weight loss industry and the cosmetic fitness industry gets really loud as we go into the holidays because they know that you're thinking about it.

[00:41:08] **Dana:** So many people are thinking about it. I think it's like 70 percent of new year's resolutions pertain to weight loss. And then the other 30 percent pertain to health, which is basically pertaining to weight loss. So they're all based on If we think about it that way. But yeah, like she forgot and she was like,

[00:41:28] **Dana:** why couldn't I have remembered this isn't who I am before I spent 300 on food that is disgusting. And sometimes we forget and we wander away from this work and then we remember, then we open up our freezer and we go. Oh yeah, this isn't me anymore, and we can't return to the work, and then something else sucks you out of this work, and then, and you forget, and then you remember you can't do it, and you return, and so the healing is in the return.[00:42:00]

[00:42:00] **Dana:** That's right.

[00:42:02] **Sirius:** I just want to remind folks that things like health, beauty, being normal, quote unquote normal, those things are not attainable by everybody. And when health is presented as the standard, and there are many people for whom health is not something that they have or could have, that's problematic. When beauty is presented as the standard, I mean, that's, I think, one of the chief concerns about the body positivity movement as it stands right now.

[00:42:45] **Sirius:** Often it's about being beautiful. Everyone is not beautiful, and not everyone wants to be beautiful. So, like, that's also problematic. And what, what is normal? Yeah. What is normal? And so I, I think that getting out of that frame is really, really helpful, especially when you're thinking about some of the internal voices, the old messaging, that these things that we, are striving towards or trying to attain.

[00:43:22] **Sirius:** Are they attainable? Is attainment a reasonable goal? Like what, at what cost? At what cost?

[00:43:32] **Speaker 5:** Yeah.

[00:43:32] **Hilary:** Yeah, we only get one go around. Lots of people who work with us later in life, grieve the time and money, time spent. Mostly money. Sure. But but the time spent in life, like our clients over the years have spanned from 20 year old to probably 85 years old. We've had clients that wear habits, you know, that are nuns.

[00:43:58] **Hilary:** We've had clients dieted for 60 years. And there's nothing but regret over the time spent.

[00:44:11] **Dana:** Yeah. I was actually, as we were talking about some of the surgeries and joints and hip pain and, and the weight loss requirements for many joint replacement surgeries, I was actually thinking about the nun I worked with

who was, who came to me when she was 80 years old, wanting something different.

[00:44:35] **Dana:** And one of the things that really tripped her up was her knees. And if I just lost some weight, my knees and, and if I you know, I could get knee replacement surgery or I could, and I thought, and I remember saying at one point I said, you know, your knees and you are 80 years old. [00:45:00] Maybe this is just what 80 year old knees are like.

[00:45:07] **Dana:** And she was blown away. Like, oh my God. Like I said, if you had a car that was 80 years old, like, would you be blaming the car for having different shock absorbers than it did when it was first like, and That was incredibly helpful to her to be like, you know, you're 80 years old, you're eight. And sometimes that is what we're reckoning with is aging and the ways our bodies change.

[00:45:39] **Dana:** We live in an ageist culture, we want all this anti aging stuff. The beauty piece, I'm so glad Sirius brought up the beauty piece because we, you know, to get out from under the desirability politics. Thanks. We, we benefit from having an analysis of where did this idea of beauty even come from and who decides, you know, that's a great thing to say when your, your inner critic is at you is who said so, and who decided this, and who benefits when I think this way.

[00:46:19] **Dana:** And most of the time, who decided. Some white man decided a group of white men decided who was ugly and needed to stay off the streets and in their house. Or they'd be fined for being in the streets, for being ugly. There used to be ugly laws.

[00:46:40] **Hilary:** Ugly laws. Yeah.

[00:46:41] **Dana:** Ugly laws. You know, this is not, and this, this was white men making up ugly laws.

[00:46:46] **Dana:** Right. And the only, go ahead.

[00:46:52] **Hilary:** I'm so sorry.

[00:46:54] **Sirius:** I just came across a Tik Tok yesterday that was talking about the amount of money that both the federal and state correction system spent from the fifties. Up until the eighties on plastic surgery, based on the idea that how you look is related to criminality.

[00:47:13] **Sirius:** What? What? Yeah. Which, which is really important because it actually, it, it, it's very much related to the ugly laws and how people conceived of disability up until probably the eighties. I mean, if not now, but certainly think there was a shift that happened, but things like. Criminality was, was part of disability, right?

[00:47:37] **Sirius:** That you, you could be disabled or that was part of an intellectual disability. Like all of those things were related. So ugly laws, criminality, disability, being shut away from the community or from your family, like those were all very normal things to happen. And yes, both the federal and many state governments spent an incredible amount of money on plastic surgery for inmates thinking [00:48:00] that they needed to change their appearance.

[00:48:04] **Sirius:** in order to be able to rehabilitate once they got out.

[00:48:08] **Hilary:** Oh, Tana. What

[00:48:11] **Dana:** the fucking fuck? Yeah. I need to see, I'm like, yeah. Sometimes this stuff just makes you, it leaves you speechless. with the mouth hanging down.

[00:48:26] **Sirius:** I will track down a source and we will include it as a bonus in the show notes.

[00:48:31] **Speaker 6:** Lucky you.

[00:48:35] **Dana:** I think, you know, I, so some of my greatest learning and unlearning for this work and for the book was around beauty and desirability politics. And I'm just going to lift up Vanessa Rochelle Lewis's work around ugly laws and reclaiming ugly if you want. I'm sure we can link to something in the show notes, some article that Vanessa has written about ugly laws just to help in your analysis of that.

[00:49:03] **Dana:** Cause the more we know, the harder it is, the more cognitive dissonance we have around upholding the status quo and trying to get higher up on that body hierarchy as that ladder that Sonya Renee Taylor talks about in her work. So I think. Unless you have something else you want to say around this, I'm thinking we can address this question about trauma.

[00:49:28] **Dana:** It feels really important.

[00:49:31] **Sirius:** I just want to name real quick, ugly laws, desirability criminality, all of that is also deeply tied to eugenics.

[00:49:41] **Hilary:** Yeah, right. Like it's

[00:49:43] **Sirius:** all, it's all about that too. So just.

[00:49:46] **Dana:** Don't forget that part. That's all I want to say. And the body mass index has connections to eugenics.

[00:49:54] **Dana:** Also, yes, yes, yes.

[00:49:57] **Hilary:** It's like math.

[00:50:03] **Dana:** It's a laugh or cry situation. It really is.

[00:50:11] **Sirius:** It's like math. But it is, I mean, everything.

[00:50:16] **Hilary:** All signs point to?

[00:50:18] **Sirius:** Eugenics, right? Oh, white supremacy. White supremacy, absolutely. Absolutely. I mean, I, you know, sure. Math, but SAT? The testing that goes on in schools. Yeah, that's all eugenics. Yeah, there's a direct line.

[00:50:41] **Dana:** The threads, all the threads, and the more, the deeper we get into our anti racism work, I think the more you can see those threads and the way they connect and, you know, if you're really new to this. This is probably blowing your minds in some ways. I mean, my mind was just blown [00:51:00] around the plastic surgery.

[00:51:02] **Dana:** And it's another one of the things Sirius brings with the deep dives on social media. I love it.

[00:51:12] **Hilary:** Well, and then we have to be like, who are the plastic surgeons? Who paid them? Who were they associated with? Yeah. Actually,

[00:51:20] **Sirius:** what now what I'm thinking about is the Joker. And in, in many, You know, there are many iterations right now.

[00:51:29] **Sirius:** The, the Joker's sequel, Philia, just, just debuted in theaters. And so there's, I've been noticing a lot of social media about the Joker. And, and

if you know anything about comic books, like there's a lot of origin stories for. The Joker in particular and one of them is like really really intense plastic surgery and some of that was to change his appearance, and it didn't go well, but I just wonder about like that.

[00:51:54] **Sirius:** I wonder if that was an influence on that also. I

[00:51:56] **Hilary:** wonder. Yeah.

[00:51:58] **Sirius:** Yeah.

[00:52:00] **Dana:** Mm. So this next question could be a whole episode and maybe we'll do it. And it feels like some folks are going to think about it as we're talking. We know there's, there's even, well, let me just read the question. So there's this idea many in this field have put out into the world that if you heal your trauma, the weight will fall away.

[00:52:29] **Speaker 4:** Mm hmm.

[00:52:30] **Dana:** And. You know, we see this in, in some, some trauma certifications that are justice oriented and steeped in anti racism work are upholding these harmful beliefs about trauma and fatness. So what do we want to say about this thought in, in popular culture around trauma and fatness?

[00:53:00] **Hilary:** I don't, it's not a stretch of the imagination, but it is, I guess, that people come in a lot of different sizes.

[00:53:08] **Hilary:** And we're not all supposed to be thin, and trauma isn't the thing that is creating fat bodies, but even if it is, there's still a variety of bodies. I don't know why we can't believe that. You know, we all think we're going to heal people to thinness. And I just want to be think I'm pissed now.

[00:53:37] **Hilary:** It's wearing me out a little bit today. I would say, yeah,

[00:53:41] **Sirius:** I, I find this piece around trauma and fatness. It, it is, it is one of my biggest triggers. It's one of the most frustrating things that I encounter. And it shows up in very overt and covert ways. Sometimes it kind of sneaks [00:54:00] in, sometimes slaps you in the face.

[00:54:01] **Sirius:** You never quite know how it's going to show up, but it is really challenging because there are people for whom that is definitely true that they're even, even by their own analysis or admission, right, that they know. that

their body size is directly related to their trauma. There are a lot of other people for whom that is absolutely not the case.

[00:54:25] **Sirius:** I, I consider myself in that category. I was fat before trauma happened in my life.

[00:54:34] **Hilary:** I just Or trauma happened in your life because you were fat. Potentially. Right.

[00:54:38] **Sirius:** Potentially. Yes. Yes. Or, or how about that? The fact that like, some of the biggest trauma of my life was losing my mother at 16, probably because She was fat and didn't get the medical care that she deserved.

[00:54:52] **Hilary:** Yes.

[00:54:54] **Sirius:** Right? Like, so the idea that Like trauma and, and weight are intrinsically linked is something that we must reexamine and that we have to start questioning because they're not always related. And so that really puts into question the idea that if we heal the trauma, then the weight will disappear.

[00:55:19] **Hilary:** That's right.

[00:55:20] **Sirius:** That's how that works.

[00:55:23] **Hilary:** And you know, your very favorite teachers may talk about this. You may learn about this in counseling school, you know, this could happen. Anywhere, and it's not that they know more, it's that they have anti fab bias. And that is contributing to how they perceive fat bodies and trauma.

[00:55:49] **Dana:** And we try, we try to get to them.

[00:55:53] **Hilary:** We do.

[00:55:53] **Dana:** Multiple people have conversed, have had conversations with some of the big wigs in the trauma field. And for their own reasons, their own personal histories, their own biases, their socialization, their indoctrination, their medical training, it's, it's hard. They really struggle to.

[00:56:15] **Dana:** Adopt this, right? They have so much resistance around it,

[00:56:21] **Sirius:** but I think that that comes back to how deeply entrenched the cultural story is over what's actually happening, right? Not to bring up the body keeps score, but the, the ideas presented in that text are complex. But how it's crystallized in the culture is trauma equals fat.

[00:56:43] **Sirius:** And so even, even not to say that like the body keeps score is the best, most wonderful thing there's challenges and problems, but the cultural story of it, the cultural legacy of it, the idea that many of us have adopted, [00:57:00] even those of you who are professionals who teach other professionals. The cultural story is so much stronger and easier to digest than anything that's more complex.

[00:57:13] **Sirius:** And what happens when you start basing all of your thinking and research on a problematic cultural story?

[00:57:19] **Hilary:** Completely. It also reminds me that how much the trauma field has left out discrimination, oppression, as, as something they're talking about in trauma training. You know, it's a very, very incomplete.

[00:57:42] **Dana:** Yeah, and some of that trauma data. Like around fatness came from the ACES study about adverse childhood events and You know that study left out a lot of people, you know, it's a predominantly white upper middle class I think it was like 70 percent white, 70 percent college educated, 70 percent it was like all these 70%.

[00:58:11] **Dana:** And yeah, when they asked about adverse childhood events, they weren't asking about racism, exposure to racism, and exposure to anti fat bias and exposure, right? Like it was just some specific.

[00:58:24] **Sirius:** But isn't that because the ACE's work got started around weight loss interventions and, and some, someone realized that, Oh, these fat people have trauma.

[00:58:35] **Sirius:** Let's study that.

[00:58:36] **Hilary:** That's right.

[00:58:37] **Sirius:** I mean, so it's, it's a, it's a circle. It is. Why would, why would you include conversations around anti fat bias when the whole point of it was to have a more effective weight loss strategy?

[00:58:50] **Hilary:** Yeah. Yep. Yeah. What are we going to do about this obesity problem was what they were looking to solve in air quotes, of course.

[00:59:02] **Speaker 5:** Yeah.

[00:59:05] **Dana:** Yes. And, and, you know, I said when I brought this question forward, there's so much more we could say, like this could really be a whole episode. Maybe it will be someday. Yeah. But I think that's, it's a good little tidbit for you, how we feel. And again, we'll put some things in the show notes for you to read that really criticize this trauma and weight thing.

[00:59:29] **Dana:** And you know, there have been literal, there are, people have literally said that, like, if you, if you do this healing, the weight will fall away. Like you may have been told that by some authors out there. And and so it makes sense. If you believe this, it makes sense that it's like, Oh, I'm not doing weight loss.

[00:59:49] **Dana:** Now I'm doing trauma healing because then, you know, my body will figure it out.

[00:59:58] **Sirius:** Yeah, my so [01:00:00] definitely the GLP one ads are the top of like the most ads I get, but like literally right underneath that is somatic healing for fat bodies.

[01:00:10] **Sirius:** Somatic healing for weight loss. Like that's literally the second most delivered ad to me right now. Mm.

[01:00:17] **Hilary:** Mm hmm. I've been getting those too.

[01:00:19] **Hilary:** Mm hmm. Mm hmm.

[01:00:25] **Dana:** Which makes me think of Reggans. None of them would think they were part of the weight loss industry or the diet industry. And if suddenly you shift your focus away from weight loss, would it render your work moot? Yes. You're part of the industry,

[01:00:40] **Speaker 5:** right? Yes.

[01:00:44] **Dana:** So let's take a big collective breath together.

[01:00:53] **Dana:** Makes me think of the meditation apps where you breathe in and then you say, fuck this shit.

[01:01:03] **Dana:** So maybe this episode leaves you with more questions than answers. We wouldn't be surprised. There will be more episodes. We have a questionnaire, a form that you can submit your questions to us. So if you have something we'd love to hear from you.

[01:01:19] **Hilary:** We would. Thanks so much for listening.