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[00:00:00] **Sirius:** Hello, everyone. And welcome back to the body trust podcast. I'm Sirius. And I'm here with Dana. Hi, everyone. And Hilary. Hello. welcome back, everyone. And our topic today is going to be about health and everyone who's concerned about health because so many people are concerned about health, especially when it comes to weight and size and fatness.

[00:00:30] **Sirius:** There's just so much deep, profound concern about health that I don't believe. And we're going to talk about that today.

[00:00:39] **Hilary:** Yes. You might need a sarcasm signal for

[00:00:45] **Sirius:** this podcast. Yes. Yes. I feel like the sarcasm meter is just really tipping today. Because a lot of the concern around health that we see or experience really comes off as concern trolling, which we'll get into in a little bit.

[00:01:03] **Sirius:** But as we sort of have this conversation about health, especially in the context of body trust, I think for me, a fundamental starting point is to really decouple our notions about health and size being so deeply related. We are fed constant messages from very early on in our lives to every time we open a magazine, go to the doctor spend time with our loved ones often over the holidays or something like that, that our health and our size are one in the same.

[00:01:40] **Sirius:** And that it is, that's part of the reason why it's so important to lose weight, become smaller and not be fat. It's because health and size are the same thing. I just. I can't tell you how important it is to really question, probe, dissect, That way of thinking and that thinking pattern.

[00:02:04] **Dana:** Yeah, I mean, I think I don't think I know that people often switch out weight for health. So they say things like, you know, I'm not trying to lose weight. I'm just trying to be healthy or I'm not dieting. I'm just living a healthy, I just want to live a healthy lifestyle and health. is something that keeps us stuck.

[00:02:30] **Dana:** The pursuit of health and the pedestalling of health is something that keeps us rooted in diet culture. It's really hard to divest from diet culture when we're thinking about health, because even the way we think about health has been greatly Influenced by white supremacy culture, you know, the

way we think about health, who gets to define health, how do we define [00:03:00] health?

[00:03:00] **Dana:** I mean, it's a pretty elusive concept when we start to really unpack it. And health is a social construct at the end of the day, the way we've been trained to think about health, socialized to think about health, it's a social construct and this belief. in this culture is that if we get sick, it's our fault.

[00:03:19] **Dana:** That if we lived a healthy lifestyle, nothing bad would happen to us with our health. And if we just hustle, we can attain some status. And the truth is that not everyone will be healthy and not all of us have health have access to health. for a whole host of reasons, which I imagine we'll get into in a little bit.

[00:03:43] **Hilary:** Yeah, that's interesting. I'm thinking about how, you know, we associate health and weight. And then I think when we hear the word health, we think we're talking about science automatically, this elusive science thing that shows up. But but you know, we're not, we're talking about ideals. We're talking about practices.

[00:04:04] **Hilary:** We're talking about culture. We're talking about dominance you know that health is not a fixed state. Necessarily, and that all of us would have very different definitions of health as would a room of a hundred doctors. So when we're talking about health, maybe we are kind of still talking about fatness without talking about fatness.

[00:04:29] **Sirius:** I, I think that is often the case. I really do. And you're right it is this sort of toxic mix of science or pseudoscience or sort of very strong cultural narratives that we don't often question that sort of continue to put this, put us in this space. There's also, you know, we've often talked about this problematic misunderstanding of correlation versus causation around the ways we think about weight and health and that there, we are often presented with weight and health in a causal relationship that fat equals unhealthy or fat leads unhealthy fat creates ill health, right? The obesity epidemic, quote unquote, the the mortality rate or the supposed mortality rate of fat folks. And all of those narratives are so incredibly strong and we think they're based in science. And that's not necessarily the case, especially a causal relationship.

[00:05:32] **Sirius:** And in fact, we know that a missing piece of that is weight cycling, and the impact of people who go through losing and gaining weight and the impacts that has on health is also a part of this mix that we never talk about.

[00:05:48] **Sirius:** Yes.

[00:05:50] **Dana:** Yeah, not only weight cycling's impact on health, but the impact of weight stigma.

[00:05:55] **Dana:** on health and how fat people as they move through this [00:06:00] world and experience oppression and stigma and othering that has a great impact on our health and well being. And a lot of the studies that say it's the higher weight that's causing the health problems do not mitigate or look at the weight stigma as a factor in what is impacting somebody's metabolic numbers like cholesterol, blood sugars, high your blood pressure, etc.

[00:06:27] **Dana:** And I think it's so important, just that's so powerful to say, you know, I think when we're talking about health, a lot of people think we're talking about science. And what we're really talking about a lot when people talk about health in this culture, they're upholding an ideology. Not a solid science, but an ideology, a way of thinking about health.

[00:06:48] **Dana:** This is the word healthism is, and the word ism implies an ideology that we have been socialized into, and that these ways of believing or thinking about health, that it's an ideology, it's not a solid science. And, you know, health at every size was an early theoretical foundation of our work And it was healthism within health at every size that started to make our work different from the health at every size community is there was so much of a focus on health without looking at the social determinants of health and understanding.

[00:07:34] **Dana:** Healthism is an ideology. And so that's one of the turning points, I would say, in what we were formerly Be Nourished and then we became Center for Body Trust is was one of the things where we really started to sway away from and really see our work as distinguishable from some of the early theoretical foundations.

[00:07:57] **Hilary:** We do know that, that folks at ASDA have re reworked the foundations and made a guide for providers which is really exciting to see.

[00:08:08] **Hilary:** But health is not behaviors, right? Everyone not, it's not that everyone can do the same behaviors and have the same experience in their body or outcome. That's a fallacy that, that we you know, that we perpetrate. Over and over again that we continue to say over and over again, because I think we want to believe that there's an answer.

[00:08:35] **Hilary:** I think we want to believe that there's a way to control this health conversation, both to avoid or control our health, both to avoid shame, but also to avoid our mortality, the fact that we're not all going to have These lives that end at 95 or a hundred, and we get to tell everyone our secrets to [00:09:00] longevity, you know, like it's not, doesn't go that way for most of us, and that's not our fault.

[00:09:06] **Hilary:** It's just what it is to be in a human body. I think what we're actually talking about when we talk about health is what we've been taught by an industry that makes money off of us.

[00:09:18] **Hilary:** And I think it's very hard to discern what is what, you know, like what is actual just standard basic health wisdom and what is what is something that's been packaged and sold.

[00:09:32] **Dana:** So part of, I think, the healing and something we're reclaiming in body trust work is like we're reclaiming our relationship with health. And how do we want to define it and what does it mean to us and what resonates for us and where do we, where can we now spot the problematics? That if health is something that's important to you, you know, healthism is an ideology that says your health is the be all and end all of your existence.

[00:10:02] **Dana:** And if you're not actively pursuing health, you are failing as a human being. And it's health is this thing that keeps people stuck in dieting. I don't want to, I'm not dieting. I'm just trying to be healthy. I'm just living a healthy lifestyle. And it's in that bargaining phase of grief that we switch out weight for health.

[00:10:22] **Dana:** And it's just they've the two is have become so interchangeable that it's hard to talk about one without having the other and that's why Sirius starts this podcast episode with this idea of how do we decouple? How do we decouple these two concepts? It's really hard given the culture that we live in.

[00:10:41] **Dana:** And when we start to think about health from a more embodied place, you get to define it, you get to think about it. We have to do a lot of work to divest, however, because so much of what we've been taught to believe and the ways we've been taught to think about it are not accurate. They're actually not rooted in solid science.

[00:11:02] **Sirius:** Not only are they not rooted in solid science, but I think to sort of also bring back a little bit of what Hilary's saying, Health is not

attainable for everyone. In the same way that beauty and desirability isn't attainable for everyone, wealth isn't attainable for everyone. These are concepts that are difficult to process, I think.

[00:11:28] **Sirius:** I think a lot of that has to do with the way that Particularly in American context, we're trained to think about how we can achieve things easily. We pull ourselves up by our bootstraps, right? Calories in, calories out, right? Eat less, move more. That's what we were saying for a long time. Or not we, they, the, they were saying.

[00:11:56] **Sirius:** But this idea that you can work hard [00:12:00] into health, wealth, and well being. desirability, it's whatever it is. And that is, I think those are all, by and large, false narratives. And from my perspective, it's because there are incredibly large systems at play that are about maintaining their own power that are not interested in everyone being empowered.

[00:12:22] **Sirius:** If everyone was truly able to work hard and get the things that they deserved, the system couldn't survive that. It just couldn't. And so, you know, I think It's one of those very difficult things for people to really overcome in their thinking, because even if you have an understanding of some of the, like, larger systemic implications of it I personally, I can work hard and attain the thing, right?

[00:12:52] **Sirius:** It's challenging.

[00:12:54] **Dana:** Yeah.

[00:12:55] **Hilary:** It's such a reckoning, I think, which is a part, you know, why we named that the struggle and apparent, and the reckoning with What it is to have a body in a culture that's commodified bodies so significantly, who has sold you and packaged health for you, that has taught you this bootstrapping method of taking care of yourselves.

[00:13:19] **Hilary:** You know, we reckon, I think, With our relationship with ourselves through this lens, because, you know, am I going to be my own personal task master is that what my relationship with myself is gonna be? Is that what I want? You know, I think we forget that what's at stake is a sense of well being internally, that we can't navigate these and try to participate in these ideas of health, Without, you know, severely impacting and developing and reinforcing a really strong inner critic, that negative voice, and that has a huge impact on well being.

[00:14:04] **Hilary:** We overwrite it so easily, and yet, it's primarily what people are bringing to therapists.

[00:14:11] **Sirius:** Hilary is now a good time to bring up orthorexia and it all fit. It's all. And I first maybe a definition so that we can all understand what orthorexia is. And is there a line between orthorexia and quote unquote wanting to be healthy?

[00:14:32] **Hilary:** Yeah, they're deeply intertwined. Orthorexia is a form of disordered eating that's about being obsessed with the purity and quality of your food and cleanliness of it. And so, in a lot of cases, it's less, folks are less motivated by weight, although it's certainly in there but are more motivated by this, like, perfect eating [00:15:00] thing.

[00:15:00] **Hilary:** You know, what's funny, I think, on the West Coast here is that's, we don't realize that's, you know, not how most people operate. And it's also not the pinnacle of health to eat in an orthorexic way. But that is what we, that's what health looks like out here. And a lot of ways are what we, you know, what we attribute to health looks like out here in the land of orthorexia.

[00:15:28] **Hilary:** Yeah, we're in Portland, Oregon, for those who don't know, and Arthorexia does, is really common here and in Seattle, California, Boulder.

[00:15:41] **Dana:** It's, you know, it's rooted in healthism, this. belief that our health is the be all and end all to our existence and the way that we pedestal people who are supposedly pulling off quote unquote clean eating or whatever.

[00:15:56] **Dana:** And the physician who coined the term orthorexia noticed that the number of foods he was willing to put into his body became smaller and smaller as his disorder. Got more severe and he was confused by this because it wasn't about his weight. It was supposedly about his health and he just was trying to eat healthy.

[00:16:20] **Dana:** And yet through the pursuit of changing his diet. eating, he started to be concerned about eating carrots that had been out of his garden for more than 15 minutes because, you know, they were dead at that point. And he was like, wait a second, like, this feels like an eating disorder, but it's not really about my weight.

[00:16:41] **Dana:** I'm just, it's about controlling food and fearing food. And many people with eating disorders like anorexia, bulimia, binge eating disorder, have some element of orthorexia given the culture we live in.

[00:16:57] **Speaker 3:** And

[00:16:58] **Dana:** in the process of healing and recovering from an eating disorder, orthorexia is often a phase that they go through.

[00:17:05] **Dana:** And because society pedestals people who you. are, you know, quote unquote, disciplined with their eating, it can be really hard to for somebody to even recognize that they have a problem, you know, can I don't believe in convincing people, but for lack of a better word, like to convince somebody that they what they're doing is rooted in an eating disorder is really hard when it's orthorexia, when it just looks like healthy eating in quotes, right?

[00:17:43] **Hilary:** And it's also really hard, even if people do see It's effect on them, or how it's, you know, how it's harming them it's really hard to recover into this world, you know, because when folks are recovering from eating disorders, they're not recovering into [00:18:00] this idealized form of so called healthy eating.

[00:18:03] **Hilary:** These are our people that are very healthy. You know, have to be very flexible with eating and learn to be very flexible with eating. And we always talk about all foods fit, right? Every kind of food is welcome and we don't restrain and we don't restrict foods based on what the culture thinks of them.

[00:18:21] **Hilary:** And that's really hard to do in this culture recover into that, but that's the only way that's, it's not, it's really hard to be recovered unless you develop that relationship with food, that more neutral relationship with food.

[00:18:37] **Dana:** Well, and I can't help but think we're recording this on Halloween.

[00:18:41] **Dana:** And one of my most viral posts on Facebook was about Halloween and encouraging parents to calm the fuck down about the Halloween candy.

[00:18:50] **Speaker 5:** And I just

[00:18:52] **Dana:** heard about that parenting mantra calm, calm the fuck down. And how often parents are managing their own anxiety. about Halloween candy. And here in Portland, you know, sometimes kids walk up to the porch and there's a bowl of carabiners for them.

[00:19:08] **Dana:** If you don't know what a carabiner is, it's like the things that they hook into when they're rappelling and doing like rock climbing. And so it's like, here kids, you don't get a candy bar, you get a carabiner. Right. So we have that shit going on in Portland. Can't make that shit up. You have never gone up with your daughter, seen carabiners?

[00:19:31] **Sirius:** No. That is wild. Yeah. I mean, we got, you know, dried fruit one time, but carabiners. Wow.

[00:19:39] **Hilary:** Wow. Wow. Wow. I know that's even worse than the toothbrushes. People pass out. I mean,

[00:19:45] **Sirius:** that truly like puts me in a little mini spiral around like, like their thought process around, well, this is better. It's more healthy, right?

[00:19:56] **Sirius:** Maybe it'll get them moving.

[00:19:59] **Hilary:** Yeah,

[00:19:59] **Sirius:** what a

[00:20:00] **Hilary:** motivator. I just,

[00:20:03] **Speaker 6:** wow. It's so stupid. It's so, so stupid.

[00:20:11] **Dana:** And then the switch, which is about the other thing,

[00:20:14] **Speaker 6:** which, which fuck that switch, which

[00:20:17] **Sirius:** I, I wonder in, in, in the spirit of Halloween. Perhaps this is a good time to bring up concern trolling and, you know, talk about this phenomenon.

[00:20:30] **Sirius:** I think some of this anxiety and the way it's expressed around Halloween and Halloween candy and candy consumption, I think is actually a really good example of concern trolling. I'm concerned about your health to the point that I will make lots of comments, shift my behavior, shift my household's behavior.

[00:20:52] **Sirius:** Question behavior that I maybe don't need to. In order to, again, live [00:21:00] up to the standard of health or to the way that we've sort of been introduced to having anxiety around something that is fun. Yeah, I

[00:21:12] **Dana:** mean, when I was a kid, they weren't, we were talking about this stuff. Like we were, you know, there were the concerns that somebody was putting.

[00:21:19] **Dana:** you know, poison in your candy. That was valid. I wouldn't want people eating, but you know, that's what they, parents are like, sugar is poison. We can't be giving, you know, and then they let their kids participate in hollowing up to the point of consumption. And then they do the switch, which thing where they have to turn in the candy for a toy.

[00:21:38] **Dana:** It's just so wild. And I'm also thinking of you, Siri. Like, what a great Halloween costume to go as a concern troll and have on, like, have some kind of troll but on the front say, but I care about your health. Ooh, I want to be the

[00:21:53] **Hilary:** switch witch if you're going to

[00:21:54] **Sirius:** be the concern troll. I'm just I'm having a memory of a few years back, I think it was my daughter's.

[00:22:03] **Sirius:** Second Halloween, she was walking. So like second or third Halloween. And she had a what are those jack o lantern things? The orange pumpkin y candy pails. She was very excited and this is after she had taken everything. She was still in a diaper. So she must have been that second Halloween and she walked upstairs with her pail.

[00:22:26] **Sirius:** She'd gotten her in her pajamas. It was like at the end of the night. She took her pail up with her upstairs and she had it in bed. And she was asleep holding it. And I remember taking a picture of her asleep in her crib, holding the pumpkin. It was the most cutest, charming picture. I showed it to my partner.

[00:22:47] **Sirius:** I, my aunt was living with us at the time. I showed it to her. I sent it around to the family and I was about to post it online. And I said, Oh, I better not.

[00:22:58] **Sirius:** I am sure that someone will have something to say about something that I think is so innocent and cute. But the idea of my child taking

her candy to go to sleep, well, surely that's concerning. Sure. Well, I mean, of course, a fat woman would do that to her child. Of course she probably doesn't even think that's wrong.

[00:23:22] **Sirius:** The thoughts that I had going through my head, the ways that I assumed people would respond, the, especially the minute it went outside of my own circle, I could see it going viral or mini viral, sort of, and, in very cruel and difficult ways. And I just didn't want to deal with it. And so rather than share a moment of joy from my own life with people that I care about I just never did.

[00:23:49] **Sirius:** Yeah.

[00:23:49] **Speaker 6:** Yeah.

[00:23:51] **Sirius:** But I don't, you know, I think, I don't think that people who

[00:23:55] **Sirius:** In their mind are innocently sharing information with you. [00:24:00] I don't think they know how problematic what they're doing is and how deeply they could potentially be hurting someone or triggering them or opening up old wounds. Yeah.

[00:24:15] **Hilary:** Yeah. And people don't get that. And I think people also don't get that there, there need to say something anti candy or about health every time they're around.

[00:24:30] **Hilary:** For instance, a sweet food is a compulsion based on living and diet culture. There is no need to do that. And we have to practice not doing that. And it's going to take practice. What people don't understand also is that eating disorders are so prevalent. They're more prevalent than we can imagine or get data on because so many people are not being diagnosed with them because instead they're being diagnosed as fat or bad dieters or something like that.

[00:25:03] **Hilary:** Yes. Or

[00:25:04] **Dana:** failed bulimic. I remember that one. Failed bulimics.

[00:25:06] **Hilary:** Huh. That was good.

[00:25:08] **Sirius:** I'm sorry. Timeout.

[00:25:10] **Hilary:** What is he a colleague shared with us? They didn't know they failed bulimic. Yeah. A colleague shared with us. It was in, it was a long time ago, seventies or eighties. She was diagnosed as a failed bulimic, huh?

[00:25:21] **Hilary:** Yeah. It's really hard to sit with that one, isn't it? Huh? Oh, I mean, I think what we're kind of circling is that. Is that fat folks can have eating disorders, the same ones then folks have, and it affects them similarly horribly and affects their so called their health in very real ways. And our casual diety comments.

[00:25:49] **Hilary:** Trigger the fuck out of people who have had eating disorders and often challenge their recovery. And you don't know looking around, if you know that all bodies. All body types, all people could have an eating disorder. You never know when you're next to someone who does when you say that shit or you put it on the internet or whatever, but I guarantee you're impacting someone and I guarantee it because Dana and I have spent the last 20 years talking to them.

[00:26:21] **Dana:** Yeah,

[00:26:23] **Dana:** concern trolling can sound often sounds like this for fat people is like a family member saying, I love you. And I think you're beautiful. It's not about your weight. I just care about your health. And I want you to be healthy. And, you know, if we care about people's health, we would know that saying that to somebody impacts their health.

[00:26:50] **Dana:** that weight stigma and being policed by people in your life is impacts your health and often leads to a [00:27:00] what we believe is a really healthy response of rebellion and fuck you eating and you're not telling me what to do if we cared about people's health. We would care about that. We would recognize that that people don't have as much control over their health.

[00:27:22] **Dana:** We would recognize that the things we say to people are harmful and the beliefs that they have about themselves are as harmful to their health, if not more harmful than what they are eating. We would also, if we cared about people's health, we would be advocating for living wages, clean water, affordable housing.

[00:27:43] **Dana:** I just came from Spain and they do not pay what we pay for food here. Their food, I got a loaf of bread for like 3 over there. That was like, we would pay 8 for a loaf of bread over here for that bread. Like food is affordable over there because it's seen as necessary. Part of being human is

eating, imagine that over here, we have grocery stores that just jack up the prices and make eating, not affordable for people getting enough to eat is not affordable for people right now.

[00:28:24] **Dana:** And if we cared about people's health and their well being, we would be fighting food apartheid, we would be advocating for affordable food, we would be working to end racism, we wouldn't be voting for the orange man.

[00:28:41] **Dana:** The election is next week. So,

[00:28:45] **Hilary:** yeah, less. I think it's also this diagnosis by sight phenomenon that if if you're fat, someone can comment on it because we're all supposed to be in agreement that means something's wrong with you. And also that your health is not good. And none of those things are true.

[00:29:05] **Hilary:** And so when people are that shitty to each other. By bringing up their concerns for health based on just looking at your body, they, they should. I mean, that's very so crappy. It's just by looking so then it's all discriminatory. It's all anti fat bias.

[00:29:27] **Sirius:** And we talked about On this podcast and various other contexts, the ways in which fat people are at risk for having those kinds of encounters on a regular basis and in all kinds of spaces.

[00:29:40] **Sirius:** And I certainly as a fat person have many stories about people saying inappropriate things to me about my weight, asking me about my weight, asking me about what I'm eating, right? Eating in public as a fat person is like a dangerous pursuit. It really can be. And I don't think people understand that, or what the implications of [00:30:00] that are.

[00:30:01] **Sirius:** And I think that concern trolling in that context is really interesting because people are, you know, they're all, Oh, I'm so concerned about your health, or what about your health? You know, if you were really concerned about my health, maybe you would ask me if I'm using heroin. Or do I wear my seatbelt regularly?

[00:30:21] **Sirius:** Am, am I smoking? Right? There, there are lots of things that we know impact people's health and well being and longevity and etc. People don't tend to talk about those things though.

[00:30:37] **Sirius:** It's been many years since I've seen an adult interrupt another adult to lecture them about smoking.

[00:30:46] **Sirius:** Not, and I'm not saying that people should be doing that either. Right? But I don't see that. Right. Nearly as often as I've personally experienced people saying inappropriate things about my body.

[00:30:57] **Hilary:** Right. So people are all pumped up with this righteousness that they know something or they have some, you know, something to share.

[00:31:05] **Hilary:** And again, that is a compulsion that has been installed in you by living in this obsessed culture. And you, I hope, want to get rid of it. Yes.

[00:31:19] **Sirius:** Yes. And those people feel very entitled to make the comments, to stop you, and address you. And that just like it's their duty, like they should be doing it. It's their right to do

[00:31:35] **Speaker 5:** it.

[00:31:36] **Dana:** And not that shame is ever a successful strategy.

[00:31:39] **Dana:** No.

[00:31:40] **Dana:** Yeah. In fact, we know that experiencing weight stigma leads to less self care and more self harming behaviors. So if we care about people's health, we would want to think about the impact of our words on what happens next. And so the next time you're at a grocery store and you're noti you know, if you have an urge to make a comment about someone's cart, because there is another example of concern trolling, is making a comment about what's in somebody's cart.

[00:32:15] **Dana:** Your job is to pause and wait and ask yourself, why am I talking? And do a U turn, because that's your work to do. It has nothing to do with the food in that person's cart. And are you getting enough to eat? Maybe you're feeling deprived. Maybe you're jealous because they have so much freedom to buy what they want to eat.

[00:32:38] **Dana:** And you want to say this because you want to feel better and less deprived.

[00:32:43] **Dana:** Down with the concern trolls.

[00:32:46] **Sirius:** With consensual, yes, absolutely.

[00:32:49] **Dana:** And the healthsplaining. We might as well shift and talk about healthsplaining, which is a version of mansplaining that Hilary coined the term many years ago [00:33:00] about healthsplainers, like people who like to healthsplain and say, well, you shouldn't do that because blah, blah, blah, blah, blah.

[00:33:08] **Hilary:** Tools. Tools. Tools. Tools of the diet industry, little minions out there of holding arm and also just, you know, this brand of folks who want to share their expertise with you all the time. You know, that's a whole nother problem. That kind of relational skill is a whole nother problem.

[00:33:32] **Dana:** Yes. Well, and as a dietitian.

[00:33:36] **Dana:** We've talked about healthism. It feels like we also need to talk about nutritionism, which again, the ism implies an ideology and much of what you see, especially on social media by influencers and people who do not have a four year degrees in nutrition science, is they're upholding an ideology that there's a perfect way of eating.

[00:34:01] **Dana:** And we all can find it and food will either heal or kill you. And that's what orthorexia looks like is if I eat that, I'm going to die. That is not, I mean, we're not talking about peanut allergies here. We're talking about people being scared that if they eat a carb, they're going to die. This is not rooted in reality, right?

[00:34:30] **Dana:** Nutritionism is an ideology. And the way we, many of us think about food and eating is not rooted in any sound I don't even know what to call it, sound principles? I don't even know.

[00:34:41] **Dana:** And medicine, you know, loves to rely on personal responsibility rhetoric. Because it gets the system out of pain for shit. Right. And then a lot of frontline providers are there being encouraged to promote healthy lifestyles and to focus on lifestyles when only 5 to 25 percent of the differences we see in health outcomes are based on lifestyle.

[00:35:07] **Dana:** Most of them are, most people's health is determined more by social determinants, you know.

[00:35:15] **Sirius:** Which I think also is sort of interesting when you talk about health equity, when you bring health equity into the conversation and this real

move in a lot of the sort of medical industrial complex to really focus on health equity.

[00:35:31] **Sirius:** And while for some folks, that's about the reduction or eliminating of systemic barriers to. To receiving health care, or to, able to, live and live fully, right? So, and there's a lot of ways in which those conversations around removing systemic barriers, I think, really lives up to what health equity is about.

[00:35:55] **Sirius:** But I think for some people, health equity starts to look more like [00:36:00] this problematic way of thinking about health. Rather than focusing on social determinants of health, it still comes back to sort of this individual responsibility. For example, in a lot of ways, the health equity conversations have not engaged with the O words in ways that are responsible or appropriate, right?

[00:36:20] **Sirius:** It's still one of the, a lot of times you'll see in sort of health equity campaigns is to like reduce obesity in certain communities. Quote unquote, rather than to really think about systemic barriers that are getting in the way of people being able to engage in systems of health in ways that have positive outcomes.

[00:36:45] **Sirius:** It's like the same dynamic being repeated on sort of different levels.

[00:36:48] **Hilary:** Yeah, so baked in it's so layered in our systems.

[00:36:53] **Sirius:** And both of you often talk about the ways in which the health industry has

[00:36:57] **Sirius:** sort of offloaded their work into the diet industry.

[00:37:01] **Hilary:** I think it's profitable and more profitable than having, you know, and I think doctors too are noticing that what they suggest to patients around, you know, moving more and, you know, eating less or whatever crap they're telling people isn't working, right? Because. It's so called working based on, you know, creating some kind of weight loss.

[00:37:26] **Hilary:** And so I think they're frustrated too. And you know, the systems they work in are designed to remind them to fatness all the time, every time they see them. And I can't help to wonder if, you know, having these

pharmaceutical companies and other diet related companies to outsource to. Is giving the medical industry a sense that there's something they can do now.

[00:37:57] **Hilary:** I don't know. I also imagine it's very lucrative

[00:38:01] **Hilary:** and the folks that run healthcare are not providers. You know, they're venture capitalists often, you know, that the top of the food chain and healthcare and that is always super vexing to me.

[00:38:17] **Sirius:** Our healthcare system is so, problematic in so many different ways.

[00:38:22] **Sirius:** Yeah, there, I think there are many. Many problems many ways in which this intersects with larger systemic oppressions, people's individual biases money over people sort of thinking on a regular basis, all of that is a, creates a perfect storm where something like body size gets to stand in very easily for health as something that.

[00:38:51] **Sirius:** Is known that it's hard to change, but there's money to be made in convincing people. Otherwise,

[00:38:59] **Dana:** I mean, [00:39:00] yeah, there's so many ways different places. I can go. You know, 1 thing I was thinking about is, like, these public health campaigns. Often they're more likely to get funded if they attach an obesity metric and air quotes. Sorry. I used the O words and O metric, right? They're more likely to get funding.

[00:39:18] **Dana:** If they say we're doing this to reduce The size of the population, right? If they attach that metric to it, they are more likely to get money. So even if they don't want to do it, it's like, well, if we want to boost our funding, we probably want to put a weight metric on here, which then just holds up the whole system.

[00:39:36] **Dana:** I'm also thinking about. The maintenance phase podcast episode about the president's physical fitness tests and just and particularly they were talking about a public health campaign about around movement and how there was a time when they saw recreational, they just wanted people to get outside and it wasn't so focused on fitness and it was just a much broader.

[00:39:58] **Dana:** holistic approach that just got kind of thrown by the wayside and we have this, you know, 10, 000 steps shit, which. It's not rooted in any science, like that was one of the public health campaigns. I was thinking when

Hilary said we think health, it's science 10, 000 steps. Every time I hear someone say something about their steps.

[00:40:24] **Dana:** I'm like, you know, There's no evidence like they just made that up and we ran with it and all these health care providers thinks that it's rooted in something that it's not rooted in and they're just out there spouting it off because of their own socialization around this.

[00:40:43] **Dana:** I feel like I had one other thing I was going to say, but now I lost it.

[00:40:48] **Sirius:** Well, maybe this is a good place to close the conversation. I, again, I just want to bring it back around to how important it is to decouple health and weight. They're just not the same thing. And also actually someone else's weight or health are actually none of your concern. Right. And I used to say, especially if you're not a doctor and even more, especially if you're not that person's doctor, but I'm going to retract those pieces.

[00:41:20] **Sirius:** It would really like, it's none of your business. Why do you care? Yeah. It has nothing to do with you. And if you want to sort of make some weird argument about, you know, taxpayer dollars or my insurance pays for a bubble. No that's the capitalist system doing what it does. Like, that's not really how that works.

[00:41:47] **Sirius:** That person is not raising your premiums or anything. The person in charge of raising premiums is doing that.

[00:41:54] **Hilary:** Yes. Yes. I want that t shirt. [00:42:00] Just kidding. That's a

[00:42:01] **Speaker 5:** lot of

[00:42:02] **Hilary:** words. That's a lot of words. Star Wars

[00:42:05] **Speaker 5:** scroll.

[00:42:06] **Sirius:** I got room. I got room. Actually that's a really interesting idea. If, like, whatever thing you wanted to just screed about, whether it's, you know, the election, or fatphobia, or white supremacy culture, if there was just a Star Wars style Scroll on your shirt that had that information in it.

[00:42:26] **Sirius:** I think that would be really cool. I'm going to start working on that right away. That's a good idea.

[00:42:30] **Sirius:** Any other final thoughts about healthism, healthcare, concern trolling, being concerned about health?

[00:42:39] **Dana:** No, I, I have just, I imagine this episode creates more questions than answers for folks. And I just wanted to name that, that this episode. There's a lot to unpack here and this is just maybe the tip of the iceberg. And and so be gentle with yourself. If this is new to you, lean into the questions.

[00:42:59] **Dana:** It's not always brave to have the answers. And this work and this podcast will likely leave you with more questions than answers.

[00:43:08] **Hilary:** Well, and that's how most people show up to body trust work is like, okay, I'm not doing that anymore, but I really don't know what to do. And that is typically where this begins.

[00:43:21] **Hilary:** Yeah.

[00:43:22] **Sirius:** And also you might want to send your questions our way. Yeah, please do. Yeah. Yeah. Answer them.

[00:43:28] **Dana:** We do have a questionnaire. We'd love to hear from you. And yeah, if you have something you want to ask us, we may bring it up on a future episode. And certainly we'll be circling back to this topic of health as we record more episodes.

[00:43:44] **Sirius:** Well, thanks so much for listening and we'll see you on the next episode. Bye. Bye. Bye.