

Think Paper: Body Respect -The Book (or What I've Learnt Since Writing the Book 'Body Respect')

Summary: *In 2014 I published a co-authored book called *Body Respect*. This discussed an approach to wellbeing called HAES® or health at every size®. Since writing the book I have changed my mind. I don't think the theory we discussed is HAES theory. In this Think Paper I explain why I reached this conclusion. A key point is that, unlike HAES, *Body Respect* insists on the socially-embedded nature of health. First, I look at official HAES theory. Then I highlight discrepancies between this official theory and what we write in the book which mark it as not-HAES. I explain why it is important to me that I rectify what I now see as an epistemological error (that is, an error concerning knowledge).*

Background and Outline of HAES Theory

HAES is a registered trademark of the Association of Size Diversity and Health (ASDAH). This means ASDAH get to define what constitutes a HAES approach. I'll look at their definition soon. The definition then gets translated into practise through books, DVDs, webinars and so on. Some of these materials are produced by ASDAH and form the official line on HAES teaching. Others are written by independent HAES experts. Independent works that gain status within the HAES community help to codify what an appropriate translation of the HAES message looks like. I'll refer to these as classic texts. The iconic text is '*Health at Every Size: the surprising truth about your weight*' (Bacon, 2009). Of course, in addition to this legitimised HAES scholarship, ideas also circulate in closed-group discussion networks and via locally produced resources.

Body Respect: What Conventional Health Books Leave Out, Get Wrong, or Just Plain Fail to Understand about Weight was published in 2014. I stand by the robustness of the evidence we used and the internal consistency of the arguments we presented throughout the book. However, I note a fundamental flaw. We claim to discuss HAES theory and in fact I think the theory we discuss is paradigmatically opposed to HAES theory. Please note, this critique reflects my changed view only. I am not speaking on behalf of my co-author.

There are several reasons why I think the theory in *Body Respect* is not HAES theory. I consider two points, namely framings of weight-related goals and health enhancement, to illustrate where HAES theory differs significantly from the theory presented in the book.

Weight in Context

The desire for weight-neutrality is enshrined in ASDAH's definition of HAES and uncritically repeated in all the classic HAES texts and ASDAH's teaching resources. Neutrality is an objectivist concept that cannot account for oppression and privilege. In other words, a weight-neutral goal amounts to being weight-blind which contradicts a vision for respectful, weight-aware treatment. It ends up reinforcing thin privilege.

In contrast, in **Body Respect** we theorise a weight-equitable approach. This is compatible with constructionist views that recognise the need for a differential approach to secure social justice: there is never a ‘neutral’ and believing there is supports the status quo.

Seeking either equity or neutrality are two distinct political and practise positions. Politically, the terms are not synonymous or inter-changeable. Or at least, a view that holds them as such is incompatible with the pedagogical position in **Body Respect**. On top of this, the different choices reflect differences in approaches to language and criticality. Using ‘find and replace’ to swap weight-neutral for weight-equitable is not the answer, that is, unless the question concerns PR rather than knowledge that matters. **Body Respect** cannot be said to reflect a HAES approach as it rejects weight-neutrality and so rejects one of ASDAH’s key defining goals for HAES.

If you’d like to read more, I’ve written a Think Paper (“Untangling weight . . .”) that offers a step-by-step guide to a weight-equitable approach for practise.

Health-enhancement

In its definition ASDAH sets out Principles for a HAES approach. The ‘health enhancement’ Principle reads:

“Health Enhancement: Support health policies that improve and equalize access to information and services, and personal practices that improve human well-being, including attention to individual physical, economic, social, spiritual, emotional, and other needs.

This Principle implicitly enshrines the belief that poorer/marginalised people are less healthy chiefly because of the challenges around eating well and being active and/or due to discrimination in healthcare access and practise. It assumes that if we could support everyone to take care of themselves, and access non-discriminatory health care, then health inequalities would largely disappear. This strong emphasis on lifestyle constructs health as a property of the individual and conceals the overwhelming influence on health of factors beyond direct individual control. Singling out ‘personal practices’ to address ‘individual physical, economic, social, spiritual, emotional, and other needs’ leaves out structural factors: the normative assumptions of the Principle reflect a neoliberal agenda. A neoliberal agenda disavows or hides social responsibilities. It adopts a view of life as a level playing field and holds each individual as equally responsible for their own health/finances and so on. Ignoring social and historical factors, and therefore concealing power dynamics, has hugely detrimental consequences on global population health. It leads to a market-driven economy with little regard for fairness or the environment.

In fact, health inequalities are with us for as long as discrimination, in and beyond health care, is with us. Health inequalities arise from the way power operates on and through our bodies in inequitable societies. These latter two beliefs reflect a social justice, not a neoliberal, agenda.

ASDAH’s neoliberal take on health enhancement erases the embodied impact of oppression and privilege, or the ‘body politic’ for shorthand. This erasure is

translated in classic HAES texts which consistently focus on lifestyle change as routes to health and fail to integrate other more relevant data. The need to tackle weight- and other forms of stigma and oppression may be mentioned and lamented but reliance on neoliberal assumptions means that the fact that living with oppression has a direct metabolic impact is simply never grasped. Discussions remain tied to health behaviour change normalising the neoliberal mind-set.

In contrast, *Body Respect* is grounded in social justice and its theory accounts for the body politic. Thus, it introduces concepts that help us respond to social determinants, such as allostasis, lifeworld, and Status Syndrome.

The deep beliefs underpinning the approach outlined in *Body Respect* are at odds with the deep beliefs behind ASDAH's definition of what makes a HAES approach. In other words, HAES theory and *Body Respect* theory represent two distinguishable paradigms. If the theory in "*HAES: the surprising truth about your weight*" is HAES, then it's impossible that the theory in *Body Respect* is also HAES and vice versa.

My co-author presents *Body Respect* as a sequel to "*HAES: the surprising truth about your weight*". Clearly, this is not an opinion we share. It is interesting to see just how differently we each view what we've written. Some of the epistemological tensions between our viewpoints surfaced towards the end of the writing process. For instance, I felt strongly that it was inappropriate to add a 'Live Well Pledge' present in the HAES book to the *Body Respect* book because the Pledge adopts an individualistic stance that contradicts the arguments we build for social awareness in *Body Respect*. I'm not sure I'd use a 'pledge' format again though it was certainly a useful idea for promoting the book. My initial thought-storm for an alternative included statements like 'pay fair taxes' and 'spend 30 minutes a day working for social justice'. What we settled on draws more appropriately on topics directly covered in the book.

A year or so after *Body Respect* was published I was asked to comment on any alignment between this and a book called *Embody* (Sobczak, 2014). For the record, in my view these books endorse two distinct and wholly incompatible theories: the neoliberal ideology and politics of gender found in *Embody* are at odds with the theory developed in *Body Respect*.

A Well Now View on Health-enhancement

The approach I use is called Well Now. I previously considered this as a HAES approach but I changed my mind. Hence this Think Paper – I contributed a lot of Well Now ideas to *Body Respect* before I drew the distinction. You can read more about this conflation and distinction in another Think Paper. In developing Well Now I'm continually working to translate data and ideas that make sense of health and illness through a perspective that includes the personal-political-planet rubric. Well Now understands our bodies, minds, spirit and relationships as mutable inter-linked arenas in and through which power acts. Well Now recognises and rejects neoliberalism because it is committed to social justice. I now realise that it's this theory, Well Now, that is discussed in *Body Respect* (there's some areas I've

thought about more since writing it so it's not entirely consistent with my current views).

What does this distinction look like? A Well Now health enhancement principle would reflect an embodied, relational, and intentionally political stance and read something like:

“Health Enhancement: Build fair societies: support policies that recognise and address the fact that health is primarily determined by access to power, wealth and respect. Promote health policy and practises that foster dignity and compassionate self-care and that respond to the (material, relational, historical, environmental) social determinants of health.”

To my mind this health enhancement principle aligns with Body Respect theory, which is why I say the book discusses Well Now.

On the Importance of Sound Scholarship

Conceptual clarity matters because knowledge matters. Knowledge and language are more than free-floating abstract ideas and sounds and truth is never ‘just academic’. Ideas impinge in tangible ways on our bodies and lives. To promote *Body Respect* and HAES as one and the same misrepresents HAES practise. Someone might read *Body Respect*, and wanting more, turn to HAES work. So, they have read an approach grounded in social justice but would then be misleadingly pointed to an approach grounded in neoliberalism. The consequences of keeping quiet about my confusion once I became aware of it could be just as detrimental as any deliberate attempt at obfuscation. Having this Think Paper on my website seemed a step in the right direction.

In reflecting on my contribution to *Body Respect* I see that tried to redeem HAES to be social justice savvy. I've done before in other collaborations where I again draw on my Well Now work as if it was HAES and so muddy the pitch. I'm sorry for any harmful impact this confusion has on readers' personal journeys. Yet the slippage is not all inherently bad - it has the potential to inspire more robust scholarship in the field. In fact, this critique has already started and is gaining momentum, notably among dietitians. Also notable is the resistance the dissent has met from HAES leaders. Starting points could be as simple as *What does it mean for HAES advocates to suddenly start using the term body respect? Given how eagerly the term has been claimed, why didn't this happen sooner? What's the HAES definition? How does it fit with body image? Where else might renewed attention to language advance HAES theory?*

It is now blindingly obvious to me that I should have referenced all the places where the text for *Body Respect* drew on my existing work, not least because this is standard practise in building scholarship. The ideas in the book didn't arrive on the HAES scene from nowhere: I've been using the 'novel' concepts, including the term body respect, in Well Now for years. This constructed absence began to dawn on me while writing publicity blogs for the book. I was all too complicit in conforming with the story of *Body Respect* as a shiny new arrival. I'm sad I didn't credit myself then, glad I can speak up now.

I am also troubled by my drive to rewrite the reality of HAES by super-imposing another worked-up theory (especially given Well Now barely makes the roll call). This disappears the actuality that gold standard HAES ie. ASDAH and *'The Surprising Truth'* are not clued-up on social justice, discuss health behaviour change and body image problems over body respect and compassionate self-care, and explicitly seek weight-neutrality. Parachuting in *Body Respect* as the definitive version of HAES severs it from a HAES timeline and glosses over a made-murky past. It feels akin to tidying up the family tree by erasing the relatives we are ashamed of. Both actions are riven with shame where shame is felt more through being imperfect than being untruthful. The past can certainly be another, difficult and painful, country. Nevertheless, I choose not to airbrush it out and not to deny how it shapes me: instead, I want to be able to learn from and live with it.

I'm uncomfortable with how hard I have worked to gloss over omissions and errors in HAES as I've recuperated HAES theory to fit my view of what it should be. A term that fits here is of course 'cognitive dissonance'. Coined in 1957, this refers to the mental stress or anxiety someone feels from holding simultaneous contradictory beliefs, ideas, or values. I've avoided using the term as explanation for two reasons. One is that in this case, it's true that I was discombobulated for a very long time by something I just couldn't put my finger on. However, I don't think this felt sense of disquiet has to be present for someone to accept conflicting views, though the nuance often gets lost and 'cognitive dissonance' used nevertheless. There is, however, another term - which is then more apt: doublethink. Doublethink (used by George Orwell in his dystopian novel 1984, published 1949) is the act of simultaneously believing in two or more mutually contradictory beliefs without experiencing distress from cognitive dissonance - the person is not aware of any conflict or contradiction. The relative popularity of the two terms says a lot about the politics of language and knowledge creation: I often get a sense that the explanation 'cognitive dissonance' is used to explain things away. It's as if being able to label our actions as a psychological phenomenon removes the moral dimension and exonerates us from taking reparative action. I might have not been able to articulate the contradictions until recently, that doesn't mean I'm not accountable for them. 'Doublethink' reminds us of our social responsibilities as intellectuals whereas 'cognitive dissonance' offers to cleanse us of any such obligation in a communal sign-up to academic annulment.

Aside from this, there was more than cognitive dissonance going on. I had to ignore the significance my own non-cognitive knowledge too. 'Cognitive dissonance' assumes a mind-body split in knowledge creation that valorises the intellect. I want to confound this split and disrupt the hierarchy, not normalise it. There's one example of this non-rational knowing that stands out very clearly for me. *Body Respect's* publishers produced a publicity bookmark. The bookmark was about two-thirds *Body Respect* and the final section publicised my co-author's solo book *'HAES: the surprising truth'*. I had such a strong sense of contradiction that they couldn't both be HAES that I didn't distribute the bookmark. Then I realised I could cut off the end section - congruence! I handed out the truncated product. The irony is not lost on me: I spend my professional life enjoining people to listen to their body knowledge and yet I ignored mine. I hope the learning isn't lost on me either.

Conclusion

How we relate to knowledge and language changes over time as a measure of own growth and circumstances. I want to try and amend my earlier thinking for personal reasons around professional integrity. I am not suggesting that anyone ratifying Body Respect as HAES discourse lacks professional integrity (though I think they'd be wrong): I am suggesting that it would be wrong for me to endorse, by silence or action, what I now believe to be untrue.

I've also written these reflections to share my new insights: I used to endorse HAES practise as beneficial; I now reject HAES because I believe it impedes social justice. Perhaps the intellectual arguments will advance praxis and social justice. Perhaps what I've learnt about process and voice and body-trust in knowledge creation will help you risk valuing your body's knowing sooner than I valued mine. Perhaps none of this will happen, and you know what? I have also learned that writing this will still have the right thing to do.

December 5th 2016

References

Bacon, L. (2009) *Health at Every Size: the surprising truth about your weight*. BenBella, USA.

Bacon, L. (2011) Live Well Pledge.
http://lindabacon.org/HAESbook/pdf_files/HAES_Live%20Well%20Pledge.pdf

Bacon, L. and Aphramor, L. (2014) *Body Respect: What Conventional Health Books Leave Out, Get Wrong, or Just Plain Fail to Understand about Weight*. Benbella, USA.

Sobczak, C. (2014) *Embody: Learning to Love Your Unique Body (and Quiet That Critical Voice!)*. Gürze Books, USA.

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