The weight-inclusive versus weight-normative approach to health: Evaluating the evidence for prioritizing well-being over weight loss

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Abstract

Using an ethical lens, this review evaluates two methods of working within patient care and public health: the weight-normative approach (emphasis on weight and weight loss when defining health and well-being) and the weight-inclusive approach (emphasis on viewing health and well-being as multifaceted while directing efforts toward improving health access and reducing weight stigma). Data reveal that the weight-normative approach is not effective for most people because of high rates of weight regain and cycling from weight loss interventions, which are linked to adverse health and well-being. Its predominant focus on weight may also foster stigma in health care and society, and data show that weight stigma is also linked to adverse health and well-being. In contrast, data support a weight-inclusive approach, which is included in models such as Health at Every Size for improving physical (e.g., blood pressure), behavioral (e.g., binge eating), and psychological (e.g., depression) indices, as well as acceptability of public health messages. Therefore, the weight-inclusive approach upholds nonmaleficence and beneficence, whereas the weight-normative approach does not. We offer a theoretical framework that organizes the research included in this review and discuss how it can guide research efforts and help health professionals intervene with their patients and community.
Sustained weight loss of greater than 5% of body weight is rare. Even when people adhere to strict, high-volume exercise, weight loss varies (3). Both in naturalistic, longitudinal samples and in randomized controlled trials, various weight-loss efforts and strategies lead to long-term weight gain and the onset of obesity (4,5). Furthermore, a person's perception (or in children, their parents' perception) that they are overweight also leads to long-term weight gain, not weight maintenance or loss, regardless of their BMI (2), suggesting that awareness-raising conversations about body weight...