Media coverage of the “obesity epidemic” as well as the views of many educators and health professionals focus entirely on avoiding (or reducing) excess body weight as a primary public health goal for people of all ages. In contrast, a health-focused approach emphasizes people developing healthy and enjoyable lifestyles rather than trying to achieve a specific body size, shape, or weight.

In a health-focused approach, individuals are important but so are their surroundings – for example, families, communities, and the society. These surroundings are sometimes termed people’s “environments,” and these environments greatly influence the lifestyle options available. So health-focused well-being requires that we pay attention to both the individual level and the environmental level.

Lifestyles based on healthy attitudes and behaviors related to physical activity, food and eating, and body image offer many benefits, including improved psychological well-being and reduced risk for problems such as heart disease, high blood pressure, and osteoporosis. These lifestyles also can help people achieve a healthy weight. This publication presents some of the concepts and principles involved in a health-focused (rather than a weight-focused) approach to well-being.
Actions and behaviors – What a health-focused approach to well-being seeks to change as opposed to a weight-focused approach, which emphasizes trying to achieve a specific body size, shape, or weight.

Body image – How we feel about our body can strongly influence our eating and physical activity habits – positively or negatively.

BMI or body mass index – A calculation, based on an individual’s weight and height. BMI is one indicator of health status, but, much too often, it is used as the only indicator and, inappropriately, to diagnose rather than to screen for possible problems.

Communities – Where we live, work, and play helps shape lifestyles by providing (or not providing) healthy options. These options include opportunities for safe and fun physical activities where people show respect for body-size diversity.

Consumerism – An approach to life in which buying goods and services and trying to achieve the image associated with those goods and services strongly influence a person’s identity (that is, how a person sees him/herself) and the way a person experiences the world. This way of living requires individuals to spend considerable time and effort on their purchasing choices – the brand, the look, etc. The time required to make these choices decreases the time and energy available for self-reflection, self-care, and other important areas of a person’s life such as citizenship, family commitments, and community involvement.

Dancing – An example of an often-overlooked physical activity many people would enjoy doing more often.

Dieting – A big problem, not a solution. For most people, dieting increases the risk of weight gain, and,
for many others, it increases the risk of developing an eating disorder.

**Eating disorders** – Psychiatric illnesses, such as anorexia nervosa and bulimia, that many females and a growing number of males develop in response to trying to achieve an unrealistic body size, shape, or weight.

**Enjoyment** – One goal of health-focused well-being. Developing healthy habits by learning to value and enjoy a healthy lifestyle can be a challenge, but for most people, the rewards are well worth it.

**Fullness** – We need to listen to our body’s signals that tell us, “It’s time to stop eating!” Learning to eat slowly increases awareness of being satisfied. For example, if we still feel hungry after finishing a first serving of food, waiting just 10 or 15 minutes before having a second serving can allow us to feel our fullness and not take a second helping. On the other hand, if we still feel hungry and decide to take a second helping, that’s fine, too. What’s important is we pay attention to our body and its internal signals, act in line with those signals, and feel comfortable with (not guilty about) our actions.

**Guilt** – An emotion that works against developing and maintaining healthy attitudes and behaviors related to food, physical activity, and body image.

**Health At Every Size (HAES)** – A non-dieting approach to well-being that is rooted in self-acceptance and celebrates the natural diversity in body sizes and shapes. HAES encourages people to take pleasure in eating healthfully, to get in touch with internal signals, and to enjoy some form of physical activity.

**Hunger** – The biological signal to eat that many of us have lost touch with. Too often, we eat just because food is available or for other reasons unrelated to physical hunger, for example, trying to meet an emotional need food cannot satisfy.

**Individual responsibility** – One important factor related to people’s behaviors that is often mistakenly viewed as the only factor. Although individuals are responsible for the choices they make, their environments shape the options available; therefore, communities, schools, workplaces, and society also have responsibilities. They must provide healthy options such as safe sidewalks and walking paths, physical activity and recess in schools, access to nutritious, high quality food, etc.
Internal signals – How the body communicates its physical and emotional needs. When we learn to listen to these signals, we can take better care of ourselves. There are many signals, such as hunger and fullness, being cold or tired, feeling the need to move our body, etc.

Joy in movement – A worthwhile goal and a powerful reward for being physically active. After all, we talk about jumping – not sitting – for joy!

Kitchen – Many individuals and families are using their kitchen less because they are eating out more often; however, food being prepared at home (and shared with others, when possible) is important for physical, mental, and social well-being.

More on hunger
“I think a lot of the eating is when you’re lonely. You just want to do something, but you don’t know what, and it’s so easy to pick up and nibble on something. You think it helps you, but first thing you know, you want more. Whatever it is you’re missing, food isn’t satisfying it.” – WIN the Rockies interviewee, female, mid-70s

More on internal signals
“I definitely view food differently than I used to. I pay more attention to when I am full. I don’t worry as much about not eating certain things. I don’t worry about craving something and not being able to eat it. I just know when to stop.” – Steps to A New You participant

More on losing weight
“This is going to be your body and you want it to be healthy. So the eating and physical activity should be to make you feel better. It shouldn’t be to make you fit into a size 8 or a size 6.” – WIN the Rockies interviewee, female, mid-30s

More on media
“This society, there’s no question that it distorts . . . especially women. You always have these billboards or . . . they show models on TV and it gives people the perception that . . . you’ve got to look like that, beautiful. And that is a sad thing in our society. . . . That’s something that our society has a real problem with.” – WIN the Rockies interviewee, male in his 30s

Lifestyles – How we live our life – not our appearance – greatly affects our health.

Losing weight – Some people may lose weight as a result of a health-focused approach to well-being; however, it is best not to set weight loss as a goal in and of itself. When weight loss is the goal and people don’t lose weight in spite of adopting healthier behaviors, they often get discouraged and give up those behaviors. And health can improve even without a change in body weight.

Media – A powerful force in society that presents unrealistic (and often unhealthy) images as desirable.

Nerve and courage – What it often takes to stand up to size-based discrimination or other forms of prejudice and to live a healthy and enjoyable lifestyle instead of being driven by unhealthy societal pressures.
Obese – Although it has a medical definition, this word is often used to express negative feelings and value judgments about individuals. This can make those individuals feel guilty and ashamed.

Personal responsibility – See Individual responsibility.

Policy changes – Places like worksites and schools can help create environments that foster healthy and enjoyable lifestyles. Examples of policy changes include offering an extra 20-minute break for employees who choose to be physically active for that period, scheduling recess before school lunch to encourage students to eat more slowly, and supporting intramural sports that encourage and support players of varying skill levels.

Portion control – A valuable strategy to eat in a way that is enjoyable and healthful.

Question – This is what we must do with our own size-prejudice beliefs.

Respect for body-size diversity – A cornerstone of health-focused well-being.

More on nerve and courage
“If people say racist or sexist things or things that reflect intolerance on the basis of age, weight, size, or shape, you need to let people know that’s not acceptable.” – Larry Kirkwood, artist and culture critic

More on obese
“Medical professionals can be so insensitive to a person with weight problems. It’s like they are saying, ‘Why don’t you just diet? Why don’t you have any self-control?’ . . . He wrote ‘obesity’ in my chart even though I’d lost 40 pounds.” – WIN the Rockies interviewee, female, early 40s

More on portion control
Did you know if the average portion sizes of popcorn and soda at movie theaters were to continue to increase at the same rate they did from 1950 to 2000, by the year 2050, people would be served 85 cups of popcorn and the equivalent of 16 cans of soda! – WIN the Rockies Portion Investigators”
Restraint – Rigid restraint is what most diets call for. This all-or-nothing approach, which results in dieters feeling deprived, leads them to crave the very foods they are trying to avoid. In contrast, flexible self-assessment involves self-checks such as “Am I really hungry for this second helping?” or “Am I eating this handful of cookies because of a situation or emotion unrelated to the food? and if so, let me first try to figure out what my real need is.”

Self-reflection – Considering what is most important in our lives can help us develop a health-focused approach rather than a weight-focused approach to well-being.

Size acceptance – A way of relating to oneself and others that involves valuing every body, regardless of size or shape; accepting there is no ideal body size, shape, or weight that every individual should strive to achieve; and identifying one’s strengths and abilities and building on one’s assets and encouraging other individuals to do the same.

Teasing – Often a powerful negative influence on individuals’ identity (how they see themselves), including their body image and their view of their physical abilities. These negative views can keep people from taking care of themselves and can lead to unhealthy lifestyles.

Thin-bashing – Negative words or actions directed toward slender individuals. Prejudice and discrimination based on any body size or shape has no place in an environment that respects body-size diversity.

Unhappy – How many people feel about their body size and shape. A health-focused approach encourages people to feel good about themselves by adopting healthier lifestyles instead of trying to achieve a specific body size, shape, or weight.

More on thin-bashing
“My daughter eats regular meals and she is called ‘anorexic’ to her face and to others. Very, very painful for her. . . . It’s the same for her being called skinny as it is for fat people who take it to heart being called fat.” – WIN the Rockies interviewee, female, 40-ish

More on unhappy
“Encouraging body hatred is a very lucrative business.” – Larry Kirkwood, artist and culture critic
**Values** – Principles, standards, or qualities considered worthwhile or desirable. To take control of our lives, we must become more aware of how our values and the values of the society around us influence our behaviors and emotions and how we see other people.

**Well-being** – Includes physical, mental, social, and spiritual health. It involves much more than body size, shape, or weight.

**X-rays and other types of medical care** – What many large individuals, especially large women, avoid because of the prejudice and discrimination they have experienced in doctors’ offices and other health-care settings.

**Youth** – Along with thinness, a physical characteristic society seems to value more than most other aspects of appearance. This pressure drives many people to adopt unhealthy practices to “look young” instead of adopting habits that foster well-being.

**Zestful play** – How many children experience physical activity. This attitude can put the enjoyment back into physical activity for many adults, too.

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1 The Wellness IN the Rockies (WIN the Rockies) project included a qualitative research component involving collection and analysis of narratives or life stories related to physical activity, food and eating, and body image. These narratives were gathered from 103 adults – 57 women and 46 men – in three of the project’s communities: Powell, Wyoming; Lewistown, Montana; and Preston, Idaho. These individuals ranged from 17 to 87 years of age. For a published compilation of the key quotations from all the life stories, see Let Their Voices Be Heard: Quotations from life stories related to physical activity, food and eating, and body image by Betty Holmes, Suzanne Pelican, and Fred Vanden Heede, Discovery Association Publishing House (2005). For more information about WIN the Rockies, go to www.uwyo.edu/wintherockies; funded by USDA/IFAFS award #0004499.

2 As defined by Joanne Ikeda, retired from the University of California–Berkeley and UC–Berkeley’s Center for Weight and Health, “a healthy weight is the weight you achieve when you have a healthy lifestyle.”
Accordingly, for some people, their healthy weight will be within a so-called “normal” range of body mass index (BMI) while for others, their healthy weight will be outside that range. From this perspective, body weight is one important indicator of health, but there are other important indicators, too. These include blood pressure, levels of fats in the blood (for example, triglycerides and high-density lipoprotein [HDL] and low-density lipoprotein [LDL] cholesterol), fruit and vegetable intakes, frequency and duration of physical activity, etc. Additional publications in the *Focus on Health, Not Weight* series provide information on other aspects of healthy lifestyles related to physical activity, food and eating, and body image.

3Steps to A New You was an applied research project partially funded by WIN the Rockies.

4WIN the Rockies involved development of educational intervention materials, including audiovisual resources such as *Portion Investigators*.

A downloadable version of this publication is available at [www.uwyo.edu/CES/PUBS/MP112-4.pdf](http://www.uwyo.edu/CES/PUBS/MP112-4.pdf).