



# NAAFA Newsletter

**Official Publication of the National Association to Advance Fat Acceptance**

**Late Fall  
2006**

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Happy holidays, NAAFAs and friends! Our gift to you is the latest newsletter. Enjoy!

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## Lisa Tealer Joins NAAFA Board of Directors



Plus size aerobics instructor, model, diversity consultant and advocate for Health At Every Size (HAES)

Lisa Tealer has joined NAAFA's Board of Directors. The picture shows (l-r) Lisa, Toni Martin, MD, and Pat Lyons, RN MA, all of the WomanCare Plus project, sponsored in part by NAAFA.

Welcome, Lisa!

## Calendar of Events

### • **The Body Liberation Station**

*by Kathy Barron, NAAFA Member*

I came home from the NAAFA convention in Boston wanting to tell the world about NAAFA. I had such a wonderful time and made such delightful connections with so many lovely people. I could clearly see how the philosophies of NAAFA and a body positive atmosphere could not only change people's personal lives, but could literally change the world. Fat community is a treasure! Everybody needs and deserves to be exposed to the ideas of fat acceptance and body liberation!



The first thing I did was write about that experience and invite everybody on my mailing list to join NAAFA -- because everybody is either fat or knows and loves someone who is fat. In that letter, I "came out" as a proud fat person and a fat activist.

I've been trying to think of what I can do to get the message out there that being fat is a perfectly wonderful and worthy thing to be -- that we naturally come in all sizes and are all deserving of all of the wonderful things in life. I always carry NAAFA brochures with me as well as LOVE YOUR BODY! wristbands. Yet, I hesitated to just walk up to people and say, "Excuse me, I see you're fat and hope that you're feeling great about yourself just as you are!" I needed a platform! A way to be accessible without the risk of personally offending people.

The idea I tried was to have a booth at my local Body, Mind, Spirit Festival, which I did on November 11th. The results were not as spectacular as I'd hoped -- my goal had been to sign up at least 50 new people to NAAFA and to sell 200 wristbands. I didn't sign up anybody and only sold 13 wristbands. Even so, about 60 people stopped by the booth, out of hundreds and hundreds that walked by. Many fat people completely ignored the booth, which was interesting -- my first awareness of fat people being "in the closet" in terms of acknowledging themselves as fat. One fat man walked by the booth

Holiday Dinner and Chapter Officer Elections, Chicago NAAFA, Saturday, December 9, 2006, [www.chicagonaafa.org](http://www.chicagonaafa.org)

Ho'Ho'Holiday Dance Party, Capital NAAFA, Saturday, December 9, 2006, [www.capitalnaafa.org](http://www.capitalnaafa.org)

Chapter Meeting, Los Angeles NAAFA, Sunday, December 10, 2006, [naafala@hotmail.com](mailto:naafala@hotmail.com), (323) 850-7529

New Year's Eve Dance Party, Capital NAAFA, Sunday, December 31, 2006, [www.capitalnaafa.org](http://www.capitalnaafa.org)

:: [newsletter@naafa.org](mailto:newsletter@naafa.org)

:: <http://naafa.org>

:: 916-558-6880

four times throughout the day with his wife, then finally walked up, took my business card and walked off.

I intend to do the booth again in April. I think that repeated exposure will help people to feel comfortable coming up and talking with me, taking size positive information and resources, and even joining NAAFA! Repeated positive exposure to the word "fat" WILL change the world!

I emphatically encourage all NAAFA members to come out as proud fat people and fat activists. Use the word "fat" in positive ways as often as possible in all sorts of public venues. From local NAAFA chapters to small fat positive groups, we need to be seen in public, proclaiming the message that all bodies of all sizes are beautiful!

My booth is called "The Body Liberation Station". There are pictures of it on my website <http://thebodyliberationstation.com>. Contact me there and let's brainstorm ideas to promote NAAFA in your neck of the woods. Together we can create a very visible NAAFA presence throughout our country and the world!

#### • **Physiology Follies**

*by Paul Campos, NAAFA Board of Advisors member and law professor at University of Colorado*



I did a talk this past March at the University of Colorado for Body Acceptance Month. The organizers were very friendly to the Health at Every Size (HAES) concept; they even had a couple of Marilyn Wann's Yay scales! But during the question period, three people from the Integrative Physiology program (thin 30ish women, if I may say so) and a middle aged male doctor challenged me, claiming that there was no scientific question that obesity caused serious health problems. So we got into a technical "debate" (consisting largely of me going into lawyer mode and cross-examining them), over the course of which they made some really outrageous statements in regard to their ability to produce significant long-term weight loss in their patients. I told them they should publish their data so they could become rich and famous for having made this astounding discovery.

Then a great thing happened: a fat 52-year-old woman testified to her own experience of constantly being told to lose weight by doctors, and never being able to do so, but eventually becoming an athlete who participates in triathlons and who is in great physiological shape and overall health. She even challenged the young physiologists to a test to see whether they were in

better shape than she was! This gave me the opportunity to point out that the physiologists' and the doctor's claims that they could make this woman significantly thinner were false, that their claims that she is "overweight" were false, and that their addiction to falsehoods of this sort was symptomatic of the moral panic that grips our culture in regard to this issue.

I finished by posing four questions to the medical personnel: What percentage of the health risks associated with obesity are caused by obesity; would making fat people thin improve their health; what were the odds of being able to produce this outcome in the foreseeable future; and what percentage of Americans would have a BMI of 25 or 30 if everybody had a "healthy" lifestyle? They hemmed and hawed of course, so I took the opportunity to inform them that the real answer is that they didn't know the answers to any of these questions, but that they were pretending to know because pretending to know the answers was crucial to their professional identities.

I was, in short, just extremely obnoxious. Even though it fell mostly on deaf ears (except for the wonderful fat triathlete), it felt good spreading the word about HAES and tweaking the noses of the obesity warmongers. And maybe some of those present were ready for the message.

- **Media and Research Roundup**

*(Editor's Note: I'm still trying to get caught up on all the good items that have come in over the past few months. Since some of the web links on these items have gone away, I suggest doing a web search on some of the keywords for more information.)*

January 24: A study of 1415 Italians published online in the International Journal of Obesity correlated unhealthy behaviors with fatness; study authors conclude that smoking, heavy drinking, inactivity, and low dietary fiber are bad because they thicken your waist. NAAFA Board of Advisors chair Paul Ernsberger, Ph.D., a nutrition researcher at Case Western Reserve University, comments, "The conclusion is exactly backward. More likely, a thick waist is statistically linked to poor health mainly because it is a marker for smoking et cetera."

March: A study led by Dr. James M. O'Brien Jr. of the Ohio State University Medical Center and reported in *Critical Care Medicine* found that people with high BMIs (body mass index, a measure of weight relative to height) had a better chance of surviving a critical illness than those with low BMIs. A May 9 New York Times article stated, "And while the thinnest patients were most likely to die, the study found, their low weight might have been a sign not of health but of disease, the researchers said." NAAFA Board of Directors member Marilyn Wann observes, "What an intriguing example of thin privilege, to have a disease that causes significant

weight change and *not* be blamed for it or told that it was *caused by* your weight."

March: An online survey by researchers at Yale University showed widespread anti-fat bias, such as associating fatness with laziness, even among fat people themselves. As an example, nearly half of those responding said they would give up a year of life rather than be fat. The research paper appeared in the March 2006 issue of *Obesity*.

May 16: When weight loss surgery is performed at high-volume academic medical centers, "We found that the 30-day mortality was less than 0.5 percent (1 in every 200 patients)," said Dr. Ninh T. Nguyen from the University of California-Irvine Medical Center in Orange. The survey was reported in the May issue of *Archives of Surgery*.) Setting aside the fact that many would consider 1 death in 200 unacceptable for elective surgery, keep in mind that (1) a 30-day mortality rate is misleading, since people keep dying 6 months, 1 year, 2 years, etc. after the surgery, and (2) Dr. Nguyen is a bariatric (weight loss) surgeon at one of the "good" hospitals that he is reporting on, and so is hardly unbiased.

May 17: Accenture unveils a device that looks like a bathroom mirror, yet manipulates the image to project a "future you" based on your current behaviors. Hey, fear and guilt haven't worked before, so let's try them again!  
<http://www.newstarget.com/019531.html>

May 18: The work of Paul Ernsberger, Ph.D., chairman of NAAFA's Board of Advisors and a nutrition researcher at Case Western Reserve University Medical School, is profiled in *Cleveland Jewish News*. Paul was able to point out "If you're born fat, it's not as bad as if you're born thin and eat the wrong things. Obesity per se doesn't cause high blood pressure; it's what you eat that does."  
<http://www.cjn.org/articles/2006/05/11/special/health2/special07.txt>

May 21: Gina Kolata writes a thoughtful article in the New York Times about how everything is a disease these days in the U.S., and compares this with the situation in the U.K.

May 30: Fat in the diet does not increase the risk of skin cancer and may even reduce the risk, according to the results of a case-control study published online in the May 29 issue of *BMC Cancer*. The investigators speculate that earlier studies showing benefits of low-fat diets were confounded by increased consumption of protective fruits and vegetables.  
<http://www.medscape.com/viewarticle/533408>

May 30: As reported in American Journal of Public Health, a study found the rate of gastric bypass surgeries increased from 7.0 per 100,000 U.S. adults in 1998 to 38.6 per 100,000 U.S. adults in 2002. The data

were collected as part of the National Hospital Discharge Survey.

May 30: Judith Moore, author of the memoir *Fat Girl*, published in 2005, died after a long struggle with colon cancer. She was 66. *Fat Girl* was a painful look at growing up fat.

May-June: One of many stories about how retailers are catering more to fat folk, an article in the Arizona Republic quotes NAAFA Los Angeles chapter president Linda Ramos. Another in the Chicago Tribune mentions AmpleStuff, run by NAAFA founder Bill Fabrey, in a sidebar.

<http://www.azcentral.com/arizonarepublic/mesa/articles/0601mr-plussize0601Z11.html>

June 4: NAAFA Board of Directors member Marilyn Wann appeared on a show called "Welcome to Fatland" on TLC. Although the show didn't really embrace fat acceptance, Marilyn says that at least she was able to expose TV viewers to the concept of Health at Every Size.

June 19: Nestlé, the Swiss food giant, agrees to pay about \$600 million for Jenny Craig, the weight loss company. The deal is a bet that consumers will continue to try, and fail, to lose weight. (If your bottom line depends on repeat business, it helps to sell a cure that doesn't work.)

June 28: A New Zealand doctor allegedly overlooked a woman's 32-pound ovarian cyst, telling her she was too fat, and prescribing weight-loss pills. The woman was eventually taken to Christchurch Hospital by ambulance, where the cyst was surgically removed. The doctor has been charged with professional misconduct.

June 30: Starting this day, drug companies are immune to lawsuits in the US on any drug that has been FDA-approved. Bad news, particularly when you consider how low the bar is when approving weight loss drugs.

#### • **Where's the Big, Fat Pile of Bodies?**

*by Marilyn Wann, NAAFA Board of Directors Member and Fat Rights Agitator*

Over at Hank's Gab Cafe, the discussion board on the FAT!SO? website, someone posted a link to an AP article about a survey that discovered -- shocking! -- that fat Americans don't all identify as "obese."



I commented there that perhaps fat people don't think we're "obese" because we are healthy and active, and we imagine being "obese" to be a sickness unto death. In the article, public health handwringers claimed that the survey proved the need



to do more to convince people about the undesirability of being fat! I'd say just the opposite, that "obesity" mongers have been thoroughly effective in convincing Americans there exists a dread disease of "obesity." Just, few of us feel dread, or diseased.

But for all of these years of "obesity" epidemic, I keep wanting to ask, "Where's the big, fat pile of dead fat people? I just don't see one." For comparison, I checked out a general AIDS stats website called <http://www.avert.org>. Since the AIDS virus came into the US population in the early 1980s, 529,113 people have died from AIDS. In 1995, the peak year for AIDS deaths in the US (before more effective drugs became available), there were 51,414 deaths.

AIDS is an epidemic. It's horrible and tragic. There are red ribbons. In San Francisco where I live, in Golden Gate Park, there's an AIDS Memorial Grove (which is very lovely, especially in spring). There is no commemorative "obesity" garden, no ribbon for the fatties. I don't imagine our world is so very saturated with fat hatred that we refuse to mourn our fat dead. I imagine that, in fact, there are no vast numbers of fat dead.

If 300,000 to 400,000 people in the US were dying every year, I think we'd notice. We notice when a half million people die from a virus over the course of 30 years.

- **Fun with BMI**



*by Bill Weitze, NAAFA Newsletter Editor*

For some reason, there are a lot of engineers in size acceptance. There doesn't seem to be an obvious connection between the two, but I recently decided to turn my engineering skills toward body mass index (BMI), which researchers and doctors use as a diagnostic tool. BMI is weight (really mass) in kilograms divided by the square of height in meters. A person five feet tall and weighing 128 pounds is 1.52 meters tall and masses 58 kilograms, yielding a BMI of 25. According to the BMI charts, this person just misses being "normal" and is at the bottom end of the "overweight" range.

If we scale that same person up to six feet tall and keep all proportions the same, then height increases by a

factor of 1.2 (20% higher), and so does waist, arm length, inseam, and every other linear measure. So volume and mass increase by 1.2 cubed, or 1.728. The six foot tall (1.83 m tall) person of the same proportions weighs 221 pounds (masses 100 kg), and so has a BMI of 30. So, this person just misses being "overweight" and is at the bottom end of the "obese" range. Something's not right; the taller person comes out "fatter" even though he/she has the same proportions as the shorter one.

NAAFA Advisor and nutrition researcher Paul Ernsberger tells me that BMI is weight statistically corrected for height, and that BMI is uncorrelated with height in adults. That means that, on average, weight varies as height squared. But if proportions are kept the same, weight should vary with the cube of height, not the square, so statistically speaking, people get more slender as they get taller. But why should that be so? BMI is in units of  $\text{kg}/\text{m}^2$ , suggesting to the engineer in me that it might indicate some sort of "stress". For the example above, a person who is 20% taller will have 20% higher stress on his/her body, if proportions are kept constant. If BMI is truly useful, then we must believe that tall people should always be skinnier than their short counterparts, so as to reduce the stress on their bodies.

But another strategy is for the taller person to have stronger bones and muscles to hold up the added weight. So with this strategy, in actuality, the 6 foot person must be even more massive, and will have an even higher BMI than predicted by proportional scaling.

For the very tall, BMI values can get pretty silly. If our 128 lb five footer scales up to seven feet, keeping proportions the same yields someone weighing 351 pounds with a BMI of 35, while keeping BMI the same yields a weight of 251 pounds, which sounds like a lot but would probably look rail thin spread out over seven feet.

Based on the above, BMI isn't very logical. Even those who think that all fat folk are unhealthy now admit that BMI is flawed (see the study published by Mayo Clinic researchers in the August 19 issue of Lancet, and reported here: <http://news.scotsman.com/latest.cfm?id=1210202006>). So what's it good for?

- **An Airline for Fat Folk?**

*by Jeudi Juetten, undergraduate student, DePaul School for New Learning, Chicago*

The idea came to me after a recent flight to and from Las Vegas. I am 5'5" tall, weigh around 260, and don't have any limitations in any other area of life. However, I'm not



comfortable traveling by air. My hips are just wide enough to lightly bump people's arms in aisle seats, and to slightly flow over onto my neighbor's seat. I'm at the size where some seat belts fit me, but others (just barely) don't. Putting down the tray table is useless, since it rests on my stomach and won't go down all the way. I can get into and out of the restrooms, but it's not particularly easy. And reaching down to my carry-on under the seat in front of me is difficult, as there's just a lot of Jeudi in the way and not enough space to maneuver.

On the way to Las Vegas, I had an aisle seat, and one of the flight attendants kept bumping into my arm. In a way, this was a good thing; she was a very pretty plus-sized lady, probably a little smaller than me, and she was bumping me due to the large size of her hips, and the fact that my arm extended a bit into the aisle (she bumped others as well). (I noticed that her uniform fit her very well, which surprised me because I know there are, or used to be, size restrictions for flight attendants, and I was sure they wouldn't make uniforms in her size! I recall lawsuits about that issue, and apparently the fat girls won.) I was happy to see a big girl in that role, but got tired of having my arms bumped. As I left the plane, I commented to her how happy I was that a "non-skinny" girl was doing that job, and she laughed and commented about how she didn't really fit in the aisles. Apparently my subconscious mind filed this all away until the return flight.

On the return, I sat by the window next to an equally large man. I am generally thoughtful about my seatmates, and let them have the armrest as much as I can since I figure I'm encroaching on their seat a bit. This man did not extend that courtesy; he commandeered the armrest, and I was forced to sit with my arms tightly crossed for the entire flight. It was extremely awkward to even read, let alone drink a beverage. I thought about those who had it even worse than me: the fat people who have been humiliated at the airport by being taken out of line and told they needed to buy another seat, whether or not they could afford it.

As I was exiting that plane, I thought to myself, "Someone should design an airplane for plus-sized people." That was the beginning of the idea for my Advanced Project at DePaul University. My mind went off on a fantasy of starting my own airline, with larger seats, wider aisles, more legroom, larger restrooms, better food, and non-skinny flight attendants. I pictured myself on the cover of Fortune Magazine as the newest American millionaire, founder of my new airline. This is an idea whose time has come, and I intend to conduct the research necessary to determine whether it is a financially feasible business venture.

That's where you can help! I've created an air travel survey for my student project and possibly for a future business plan. NAAFA members and others (18 years



and older only) who are interested may participate here:

<http://www.surveymonkey.com/s.asp?u=365552809314>

Although an e-mail address is needed for research verification purposes, you will not be contacted. Responses will remain anonymous unless you choose otherwise. All input, negative or positive, is valuable and appreciated. If you have any questions, comments or concerns regarding this survey or related information, please contact me at [jeudijuetten@yahoo.com](mailto:jeudijuetten@yahoo.com).

As an alternative to the website, you can fill out the survey below and mail it to me at:

Jeudi Juetten  
11529 S. Joalyce Dr.  
Alsip, IL 60803

### Survey

1. How many times per year do you travel by airplane?

- None
- 1-5
- 6-10
- 11-15
- 16-20
- More than 20

2. If you answered "None," why do you not travel by airplane?

- Cannot afford to travel
- Not interested/do not like to travel
- Do not have time to travel
- Airplane seats are too small
- Airline seats have too little leg room
- Poor service on airlines
- Physical disability
- Other (please specify)

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3. If you answered "None," how do you travel distances greater than 100 miles?

- Car
- Train
- Bus
- Other (please specify below)
- Do not travel more than 100 miles

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4. If you answered "None," is there someone else in your life (family member, spouse, friend) who would travel by airplane with you if you did?

- Yes
- No

If yes, please specify.

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5. Have you ever had any problems traveling by airplane due to your weight or size?

Yes

No

If yes, please describe in detail.

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6. If airplane seats were wide enough to be comfortable for you, how many times per year would you be likely to travel by air?

None

1-5

6-10

11-15

16-20

More than 20

7. If airplane seats had more leg room, how many times per year would you be likely to travel by air?

None

1-5

6-10

11-15

16-20

More than 20

8. If airplane restrooms were larger and easier to access, how many times per year would you be likely to travel by air?

None

1-5

6-10

11-15

16-20

More than 20

9. What other changes could the airlines make that would help you enjoy traveling more?  
Please describe in detail.

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10. If airlines made the changes you suggested in Question 9, how many times per year would you be likely to travel by air?

None

1-5

6-10

11-15

16-20

More than 20

11. Have you ever voluntarily paid for a second seat or first class seat on an airplane to allow more room for yourself?

Yes

No

12. Have you ever been asked/forced by an airline to pay for a second seat or first class seat on an airplane because of your size/weight?

Yes

No

13. If you answered "Yes" to Question 12, did you:
- Pay for a second seat?
  - Pay for a first-class seat?
  - Protest and cancel your flight?
  - Protest and persuade airline personnel to allow you to sit in your original seat?
  - Protest and persuade airline personnel to assign you to a different seat?
  - Other (please specify)
- 

14. Would you be willing to pay more money for a wider airline seat with more leg room?
- Definitely Yes
  - Definitely No
  - Maybe, depends on how much more money it would cost
  - Maybe, depends on how much more room there would be
  - Maybe, depends on OTHER (please specify)
- 

15. How much more money would you be willing to pay for a wider airline seat with more leg room?
- I would not be willing to pay any more
  - 10% (example: \$250 seat would be \$275)
  - 20% (example: \$250 seat would be \$300)
  - 30% (example: \$250 seat would be \$325)
  - 40% (example: \$250 seat would be \$350)
  - 50% (example: \$250 seat would be \$375)
  - Other amount (please specify)
- 

16. What is your age?
- 18-24
  - 25-34
  - 35-44
  - 45-54
  - 55-64
  - 65-74
  - 75+

17. What is your height? \_\_\_\_\_

18. What is your weight? \_\_\_\_\_

19. Do you consider yourself:
- Underweight
  - Average weight
  - Overweight
  - Very Overweight
  - Obese
  - Very Obese
  - Super-size
  - Other (please specify) \_\_\_\_\_

20. What is your approximate average yearly income before taxes? \$ \_\_\_\_\_

21. What is the closest major airport to your home (city and state)?

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22. If possible, please provide an e-mail address for research verification purposes only; you will not be contacted.

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23. Would you be willing to participate in further research on this topic?

Yes

No

If Yes, please provide your preferred contact information:

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