



NAAFA Newsletter

Official Publication of the National Association to Advance Fat Acceptance

Spring 2006

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International No Diet Day (INDD) is an annual celebration of body acceptance and diversity, observed on May 6 each year. One way to mark this day is to screen the new documentary *DiETING: At*

• **NAAFA 2006 Convention: Almost Final!**

I know many of you have been waiting patiently (and some not so patiently) for us to announce the dates and location of the 2006 Convention, and I'm here to say that they . . . aren't finalized yet. However, our wonderful convention coordinator, Heather Boyle, is in the process of securing a contract. The tentative location and dates are August 9-13, 2006 at the Sheraton in Needham, Massachusetts, about six miles southwest of Boston. As soon as the contracts are finalized we will post the news on the NAAFA News Yahoo Group, so go to <http://groups.yahoo.com/group/naafanews> to be sure you're on our list.

• **Biggest Study Ever on Low Fat Diets Fails to Show Benefits**

A \$415 million federal study involving nearly 49,000 women ages 50 to 79 who were followed for eight years showed that reducing total fat intake did not significantly reduce the risk of breast cancer, colorectal cancer, heart disease, or stroke. The study is part of the Women's Health Initiative, a project of the (United States) National Institutes of Health's National Heart, Lung, and Blood Institute (NHLBI). The results from the largest ever clinical trial of low-fat diet were reported in three papers in the February 8 edition of the *Journal of the American Medical Association*.

Women were aged 50-79 at trial enrollment in 1993- 98 and were followed for an average of 8 years. By the end of the first year, the low-fat diet group reduced average total fat intakes to 24 percent of calories from fat, but did not meet the study's goal of 20 percent. At year six, the low-fat diet group was consuming 29 percent of calories from fat. The comparison group averaged 35 percent of calories from fat at year one and 37 percent at year six. Women in both groups started at 35-38 percent of calories from fat.

The study diet focused on reducing total fat, and unlike diets used to reduce heart disease risk, did not differentiate between "good fats" found in fish, nuts, and vegetable oils, and "bad" fats like saturated fat and trans fat found in processed foods, meats, and some dairy products. The study design reflected a widely believed but untested theory that reduction of total fat would reduce risks of breast or colorectal cancers. For heart disease, it was anticipated that reduction in total fat would be accompanied by a reduction in saturated fats, which are known to contribute to heart disease risk.

Reaction to the news was mixed. NHLBI Director Elizabeth Nagel said that "The results of this study do not change established recommendations on disease prevention," urging women to reduce intake of saturated fats, trans fats, and cholesterol in spite of the findings. But Dr. Jules Hirsch, physician in chief emeritus at Rockefeller University in New York City, called the findings

War with our Bodies. To view a trailer of this film, go to <http://www.hugs.com>, and click on the film link.

NAAFA Board Co-Chair Resigns

Citing family reasons, Kara Brewer Allen, Co-Chair of NAAFA's Board of Directors, resigned in late February 2006. She will stay involved by continuing to head up the scholarship campaign and volunteering at the convention.

ASDAH Conference, June 23-25

The purpose of the ASDAH (Association for Size Diversity and Health) Conference is to promote the concept of, and exchange research and ideas on, Health At Every Size (HAES). The conference is being held at Case Western Reserve University in Cleveland, June 23 to 25. Health professionals and lay advocates are encouraged to attend. For more information, go to <http://www.love-your-body.org/asdah/main.html>.

Chapter Calendar

New York City NAAFA Chapter Meeting, April 21, <http://www.nynaafa.org>

Capital NAAFA Chapter: The Taxman's PJ Party, April 22, <http://capitalnaafa.org>

Chicago NAAFA Chapter Indoor Pool Party, April 30,

"revolutionary", saying that "they should put a stop to this era of thinking that we have all the information we need to change the whole national diet and make everybody healthy."

Low fat diet proponents have stated that, since the study participants failed to achieve the study goal of 20 percent of calories from fat, the results are inconclusive for these low levels. NAAFA Advisory Board member Paul Campos, a law professor at the University of Colorado, counters, "if you spend \$400 million and can't get people to reduce fat intake to 20%, what does that say about making this a realistic public health recommendation, even if we assume it would be beneficial?"

<http://www.nih.gov/news/pr/feb2006/nhlbi-07.htm>

• Pay It Forward

by *Jeanne Toombs*
NAAFA Speaker Bureau Chair

She could have been me. The chubby girl sitting quietly in the back of the room, in dark baggy clothes. I'm answering questions from the others, but my heart reaches out to her. Have I managed to touch her life today? What if a fat woman had stood proudly in front of my class and declared her self-acceptance when I was a teen, and had been watched with admiration by the boys who teased me? What would my life have been like?



Talking to young people about size acceptance has moved me deeply.

NAAFA needs you to help "pay it forward". Volunteer for the new NAAFA Speakers Bureau, and help us spread the Size Acceptance/Health at Every Size message! Many of us have already spoken at schools, colleges, health fairs, medical groups, and diversity days. You don't need to be a professional speaker, just informed on the subject and willing to share your story. You can also be involved in other ways:

- Design curriculum materials
- Write personal stories about resisting fat oppression for other speakers to read during talks
- Come up with fun interactive things to do with different age groups on the issues
- Find fat-positive children's books that speakers could read to different age groups
- Contact organizations like the Girl Scouts or the PTA in your area to see if they'd like a guest speaker on weight diversity
- Recruit your friends (of all sizes) to help give a talk with you
- Contribute more ideas
- Volunteer to co-chair with me

(Thanks to Marilyn Wann for many of these suggestions.)

To be a part of this exciting, rewarding work, please contact us at naafa@naafa.org.

• Book Review: **Living Large, A Big Man's Ideas on Weight, Success, and Acceptance**

Book by Michael S. Berman with Laurence Shames
Reviewed by Bill Weitze, NAAFA Newsletter Editor

<http://chicagonaafa.org>

Chicago NAAFA Chapter
INDD Celebration, May 6
(tentative),

<http://chicagonaafa.org>

New York City NAAFA
Chapter Meeting, May 19,

<http://www.nynaafa.org>

Capital NAAFA Chapter:
Latin Flavah Dance Party,
May 20,

<http://capitalnaafa.org>

Capital NAAFA Chapter:
Caribbean Calypso Dance
Party, June 10,

<http://capitalnaafa.org>

New York City NAAFA
Chapter Meeting, June 16
at 6:30 PM,

<http://www.nynaafa.org>

Chicago NAAFA Chapter
Renaissance Faire Outing,
June TBD,

<http://chicagonaafa.org>

:: newsletter@naafa.org

:: <http://naafa.org>

:: 916-558-6880

Mike Berman is a successful (and mostly happy) fat guy. A successful behind-the-scenes Democratic Party operative for years, he is now President of the Duberstein Group, a D.C. think tank. But his good life hasn't been easy, and in this book, he reveals his struggles as a fat person and as a compulsive binge eater. Now he's on the road to self acceptance (and to promote his book), and he's a NAAFA member to boot.



However, his journey to self acceptance and fat acceptance is not complete. He says over and over again in his book, "Obesity is a chronic disease." I can understand "chronic"; being fat is a persistent condition, and resists people's efforts to change this. But fatness is no disease; fat people can be fit, and study after study shows this (see past issues of this newsletter for examples).

Even Mr. Berman knows this (at least some of the time). But I'll get to that in a minute.

Mike Berman's story will sound familiar to many chronic dieters. Growing up in Duluth, Minnesota, at first he was, he now feels, overfed as a child. Then, when he was nine, his parents started to see his fatness as a problem, and started restricting his food. Mike responded by stealing food, hiding food, and eating when he could. As an adult, he tried dieting time after time, each time starting out with lots of hope and excitement, then gradually losing interest and regaining the weight and then some.

My favorite part of the book is when, for a brief moment, he seems to really understand the principle of Health At Every Size (HAES). Between 1992 and 1994 (he was in his 50s by then), Mike was going to the gym regularly, and feeling healthy as never before. Over that same period of time, his weight went from 268 to 314 pounds. In his book, he says, "For one happy moment, let's forget the scale! Whatever the scale said, I knew that I was healthier and stronger, that there was a spring in my step, that the increase in my physical activity had improved my quality of life." However, he soon resumes seeing his weight as something he has to struggle against, rather than something to accept.

The book is most successful when it's telling Mr. Berman's story, and least successful when giving advice. In the introduction he says he is not writing as an expert, saying "I claim no credentials other than the life that I have lived." So why does he ignore the lessons that his life is trying to tell him, such as diets don't work, and you can be fat and fit? Right after seeming to grasp HAES, he promotes exercise as a form of weight loss, in spite of his experiences. There is some good advice in the book, but it's hit or miss.

Even after talking about acceptance, he tends to see fatness as the problem when it's really other things. His obsessive relationship with food is a problem in his life, but it's a separate one from his fatness. And, of course, fatness isn't a problem in itself, but only in our reactions to it. He's smart enough to see that he wasn't at fault when the other kids picked on him at school, but he blames himself and his fatness for the inability of a sonogram to successfully image his kidneys, and not the limitations of the technique.

I can't recommend this book except as a look into a man struggling with self acceptance. I wish I could sit down with Mr. Berman and tell him to really love his fat self, and stop apologizing for being fat. But even if I could, he'd have to be ready to take that step.

- **Media and Research Roundup**

February: Based on lack of evidence, Consumer Reports on Health (CRH) recommended against taking products containing Hoodia gordonii, an herb that is widely promoted as an appetite suppressant. Anyone surprised that this stuff doesn't work?

http://www.consumerreports.org/main/crh/displayc.jsp?CONTENT%3C%3Ecnt_id=899485&FOLDER%3C%3Efolder_id=362577&bmUID=1144291566823

February 12: New York Times reporter Gina Kolata reported on how New York City schools were banning whole milk even though there is no scientific evidence that this will improve the children's health (see article above on low-fat diets). She carefully reviews the science done in recent years, and ends with a telling story of how, in the 1830s, Dr. Pierre-Charles- Alexandre Louis studied the effect of bloodletting, and after finding that the data showed that bleeding didn't work, recommended earlier and more severe bleeding. ("Diets don't work, so we need to diet harder.")

<http://www.nytimes.com/2006/02/12/weekinreview/12kolata.html?ex=1297400400&en=c3f1a9500109f6fb&ei=5090&partner=rssuserland&emc=rss>

February 14: Ms. Kolata (see above item) followed up with a news analysis headlined "Maybe You're Not What You Eat", showing that perhaps our drive to diet stems more from our Puritanical notions of self-denial as a form of virtue rather than a desire for improved health. She reviews diet fads going back to 1825, contrasting them with the February 2006 study showing no health benefit for low-fat diets (see related article in this issue).

<http://www.nytimes.com/2006/02/14/health/14fat.html?ex=1297573200&en=5aa3d31aa72ba78c&ei=5088&partner=rssnyt&emc=rss>

February 14: Based on data from the Nurses' Health Study, a high waist-to-hip ratio was correlated with an increased risk of gall bladder removal in women, reported researchers at Harvard Medical School in the medical journal Gut. However, NAAFA Advisory Board member Glenn Gaesser, Ph.D., professor of exercise physiology at the University of Virginia, cautions that, unless the researchers controlled for weight cycling, the results may be spurious, since the same data showed that to be a significant predictor of gall bladder disease (Annals of Internal Medicine, 1999; 130: 471-477, <http://www.annals.org/cgi/content/abstract/130/6/471>).

<http://www.foodconsumer.org/cgi-bin/777/exec/view.cgi/14/2653>

February 15: A questionnaire, to be used as a life expectancy prediction tool, penalizes one point for being underweight, but assigns no penalty to those who are heavier than currently recommended weights. The Journal of the American Medical Association (JAMA) published the supporting study by researchers at the San Francisco Veterans Affairs Medical Center and the University of California, San Francisco, examining data from the 1998 wave of the Health and Retirement Study (HRS), showing that, among community-dwelling US adults older than 50 years, those with a body mass index (BMI) less than 25 (considered "normal" or "underweight") had a higher risk of dying within four years than those with BMI of 25 or more (considered "overweight" or "obese"). They found no improvement in the model even when studying extremes in BMI values, indicating that even the heaviest group had no significant increase in death rate. <http://jama.ama-assn.org/cgi/content/abstract/295/7/801>

February 21: Medicare will start paying for three types of weight loss surgery (WLS) at certified WLS centers, despite numerous reports of the procedures' high death rates. The procedures (Roux-en-Y gastric bypass, gastric banding, and biliopancreatic diversion with a duodenal switch) are approved even for the elderly, for whom one-year death rates from WLS range from 6% to 50% (highest for men over age 75). NAAFA Advisory Board member

Paul Ernsberger, Ph.D., a nutrition researcher at Case Western Reserve School of Medicine, denounced the decision, saying, "There may be some benefits, but there are alternative safe and effective treatments for every obesity-related condition." <http://www.washingtonpost.com/wp-dyn/content/article/2006/02/21/AR2006022101664.html>

March: Some good news: the United States Department of Agriculture (USDA) posted an article on its website promoting the Health At Every Size (HAES) approach to improved fitness, referencing the University of Davis research reported in these pages last year.

<http://www.ars.usda.gov/is/AR/archive/mar06/health0306.htm>

March 2: Left-wing online news magazine AlterNet posted an article, One Big Fat Lie, stating that our obsession with weight is more damaging than any health effects of fatness. A laudable article, but the comments posted with the article show that most members of the AlterNet community have no concept of size acceptance. (A strongly anti-fat article at left-liberal website the Daily Kos evoked similar hate-filled comments.)

<http://www.alternet.org/story/32958>

March 9: The U.S. Census Bureau released a report debunking the myth that aging baby boomers will cause skyrocketing health care costs. While Americans are getting fatter, the report shows tomorrow's elderly will be healthier, wealthier, and better educated, all of which should yield improved quality of life. <http://www.nytimes.com/2006/03/10/national/10aging.html?ex=1299646800&en=0f38dfe9a730f9d0&ei=5088&partner=rssnyt&emc=rss>

March 10: Scientists at the World Health Organization reported that blood pressure levels are falling world-wide, again contradicting the viewpoint that we're all getting less healthy as we fatten. Researchers were unsure of the cause, but stated that it was not due to medicines.

<http://news.scotsman.com/health.cfm?id=361422006>

March 13: University of Pittsburgh researchers found that diabetics tended to report weight ranges deemed "overweight" as healthiest. Lead author Kathleen McTigue, M.D., M.P.H., found this outcome "troubling", even though researchers at the Centers for Disease Control found last year that, indeed, the so-called "overweight" category is the healthiest. Perhaps more troubling is when health researchers aren't even current in their own field.

<http://newsbureau.upmc.com/Magee/DiabetesBodyWeight.htm>

March 20: Looking for an issue by which to make a name, many politicians are jumping on the anti-fat bandwagon, including Arkansas Governor Mike Huckabee, reported Time Magazine.

<http://www.time.com/time/archive/preview/0,10987,1174679,00.html>

March 23: Fat icon Sarah Caldwell, hailed as the first lady of opera for her adventurous productions as longtime director of the Opera Company of Boston, died of heart failure. She was 82.

http://www.boston.com/news/local/articles/2006/03/25/sarah_caldwell_impresario_of_boston_opera_dead_at_82/?rss_id=Boston+Globe+--+Front+Page

March 31: CNN.com posted a thoughtful article about how Barnes-Jewish Hospital in St. Louis has made a concerted effort to be more accommodating to their fat patients. But some anonymous editor has saddled the article with the headline "Heavy patients put strain on hospitals", even though there is nothing in the article to suggest that the hospital is under any sort of strain.

<http://www.cnn.com/2006/HEALTH/03/31/hospital.obesity.ap/index.html>

April 7: Fabulous fat chick Mo'Nique's new film *Phat Girlz* takes on the fashion industry and its obsession with thin. The San Francisco Chronicle gave it a "little man clapping" (they liked it). You go, girl!

[http://www.sfgate.com/cgi-bin/article.cgi?](http://www.sfgate.com/cgi-bin/article.cgi?f=/c/a/2006/04/08/DDGEP14VJO1.DTL&hw=mo%27nique&sn=001&sc=1000)

[f=/c/a/2006/04/08/DDGEP14VJO1.DTL&hw=mo%27nique&sn=001&sc=1000](http://www.sfgate.com/cgi-bin/article.cgi?f=/c/a/2006/04/08/DDGEP14VJO1.DTL&hw=mo%27nique&sn=001&sc=1000)

• **Dividing Lines**

by Marilyn Wann

NAAFA Board Member and Fat Rights Agitator



My local PBS station showed a bunch of documentaries about the African-American experience this past February, for obvious reasons. One night, I channel-surfed past a show that seemed to be about a white minister in the south who has started a church for people of all skin colors. He talked about having been very racist in his life, then reading MLK Jr.'s Letter from Birmingham Jail and crying for three days in response to it. Then he stopped preaching at white-only churches. The comment that really struck me from him was, perhaps, a restatement of the obvious: "When we draw a line between people, we don't get to know each other. When we don't know each other, we come to fear each other. Our fear leads to anger and hatred."

In contrast to the fear/hatred response, I was also mulling the Dalai Lama's claim that kindness is a good response in any situation. Kindness based in compassion. Call that the compassion/kindness response.

When I give my little weight diversity talks, I ask people to do a Speed Anthro project with me. In 5 or 10 minutes, we brainstorm words our society teaches us to link with the words "fat" and "thin." In introducing this exercise, I do some shtick about how I've heard it all before and if anyone can come up with something I haven't heard, I'll do the Happy Dance, also if they can say the really negative words, I'll do the Happy Dance. I say that we're doing anthropology, so I don't imagine the words they suggest represent how they, individually, think about fat and thin, and that no one individual person invented (or is responsible) for the picture we'll draw.

At the end of the exercise, whether I'm talking to 8-year-old Girl Scouts or Chevron execs or college students or hospital workers, wherever I am in the US, I get pretty much the same lists of words. Societal messages on weight have saturated every corner of the US.

We all know that fat means stupid, smelly, lazy, ugly, poor, out-of-control, sexually excessive/asexual, jolly, depressed/unhappy, angry, eating junk food/donuts/pizza/ice cream, unhealthy, unpopular, unsuccessful, unstylish clothing/muumuus, etc. (Also: the 5 Official fat animals: cow, whale, hippo, pig, elephant).

We also all know that thin means healthy, sexy, popular, successful, stylish clothing/bikinis, athletic, busy, happy, eating celery/salad/water, etc., and also obsessed, anorexic. (Also: the 5 Official thin objects: toothpick, beanpole, stringbean, stick, worm.) There's also an eat-like-a-horse/eat-like-a-bird opposition; I always point out that some birds eat their body-weight in food daily, while horses, uh, don't. Recently, in Sondra Solovay's torts class, the students came up with several new ones, to me: Ethie (short for Ethiopian) as an epithet for someone who is thin, and plurality (as in a fat person in the south may be referred to in the plural, in terms of pronouns, due to girth). Hunh. Good to know.

My point with this exercise is really not about particular stereotypes so much as to demonstrate how, when we draw a line between people based on some

basic characteristic, there's a tendency to group positively valued human qualities on one side of that line and negatively valued human qualities on the other side. Then there's a tendency to rely on the stereotypes that we just know to be true (even when they run contrary to evidence), because that's preferable to getting to know people from the "other" side.

So when, in this society, there's a discussion about fat people in relation to health (or health in relation to fat people), I notice that the first response is often fear/hatred and not compassion/kindness.

Fear/hatred based on the fat/thin line means . . .

- A fat individual isn't allowed to buy health insurance.
- Employers think it's a neat idea to charge fat, tobacco-smoking, and older employees extra for the same health benefits.
- Medical equipment makers don't bother to make devices that fit fat people.
- Doctors and other caregivers aren't trained to provide the same quality of care to fat people. (My mom's doctor got a bp reading on her of 215/112. Luckily, I was there, and insisted on a larger cuff, which gave an accurate reading, so she wouldn't be dangerously overmedicated. Her doctor has been in practice for 25 years! She's not the first 250-pound person he's ever taken a blood pressure on.)

I imagine Health At Every Size (HAES) as a compassion/kindness approach to helping people of all sizes enjoy embodiment and negotiate health problems. Perhaps HAES can shift the mindset of health professional from the line between fat and thin to a broader perspective.

Think of wedges in a pie chart, each representing one of the various influences on a human being's health (fat or thin). Is the distribution of wedges different for each individual? How important are nutrition and exercise? How important are different types of dietary fat? Are there other, bigger wedges in the pie chart that don't get discussed at all right now, because they don't relate to the fat/thin line?

Some such factors: bias and discrimination in society and in the medical setting, the stress of alienation (for fat and thin people), social isolation, the health impact of feeling oneself to be an Untouchable/second-class/less-than person, a history of self-starving/binging/food-obsessing and yo-yo-ing weights, etc.

To a nutritionist, the nutrition wedge probably seems big. To me, a fat rights agitator, weight-based prejudice and the resulting discrimination seem really important, for society and for individual health. But health is too complex an issue to be reduced to the single dimension of weight.

• **In Memoriam: Marsha Menard**

On March 6, San Francisco Bay Area Chapter member Marsha Menard succumbed to complications that were caused by an undiagnosed, fast growing cancer. She would have turned 30 on April 6. Founder of the FatGirlWalking project, she had planned to start walking across the United States on Valentine's Day of this year, before declining health forced a postponement. Marsha memorial walks are currently in the planning stages; join the FatGirlWalking Yahoo Group at <http://groups.yahoo.com/group/FatGirlWalking> for more information.



- **NAAFA Launches Fat Legal Advocacy, Rights, and Education (FLARE) Project**

by Carole Cullum

Chair, NAAFA Board of Directors

A mom is desperate to find help for her child, who is being tormented about her weight by classmates each morning when she takes the bus to school, but the bus driver and the school refuse to help. A dad wants to formalize the adoption of the child he has been successfully fostering for more than a year, but the child welfare agency wants him to lose weight before they will approve him. A couple is in shock because officials have threatened to take their child away from them if the child does not lose weight. A woman wants to fulfill her dream of becoming a lifeguard, but can't pass her exam because the life ring she has to wear is too small to fit around her body properly and certifiers refuse to modify the test.

People with legal problems like these call NAAFA desperately seeking help. Most often, the person we send them to is California attorney Sondra Solovay. Sondra has never charged a fee to talk people we refer to her; she feels strongly that people deserve help securing their legal rights and donates as much time to providing information and advice to our referrals as her schedule can accommodate.

To help Sondra continue to protect the legal interests of fat people and expand this important civil rights work, NAAFA has issued a \$2,000 challenge grant. Using this grant as seed money, Sondra will start the FLARE Project. Sondra explains, "Flare is defined as a shape that spreads outward, a sudden burst of flame, and a sudden burst of light used to communicate or illuminate. This is the essence of the Fat Legal Advocacy, Rights, and Education Project!"

Recently, when local long-time fat activist Judy Freespirit encountered weight discrimination, she knew what to do. "In my quest for a nursing home I found a great deal of discrimination. When one of the most highly respected nursing homes turned me down because of my weight and disability, stringing me along for months before denying me admission, I had to show them I would fight back. I contacted Sondra to take the case in the hopes of affecting nursing home admissions for all fat people." NAAFA spearheaded a letter on Judy's behalf as well. The nursing home reversed their decision. Judy comments, "This is the best possible outcome and a big hunk of it is the result of Sondra's work, advice, and brilliant thinking." Sondra responds, "NAAFA's contribution was invaluable. This is what happens when we combine activism and legal work; we get social justice."

In her desire to fight weight discrimination, Sondra has tried to get existing civil rights law organizations to address weight issues, but with little success. "Fat just is not a popular enough issue. Even when legal agencies are sympathetic, they are not willing to put their resources into this fight."

Sondra has several projects in the pipeline. She wants to continue being able to answer inquiries from people experiencing discrimination, to train lawyers in weight-related issues, to create more laws against weight discrimination, and to maintain a national legal database of attorneys willing to take on weight cases.

Her long term desire is to change airline policy, which could involve court battles or an act of Congress. "The ability to travel between the states is a fundamental concept in American civil rights law. Fat people need that same right. We should not be forced to pay for two airplane seats that may not even be safe in a crash. We should be able to get one seat that fits. I have a case right now that might be able to accomplish that, but I need at least

\$20,000 to get it to court, so this is the kind of project we need to plan for in advance." NAAFA is delighted to help start the country's first project focused solely on weight-related legal advocacy, in the hope that one day FLARE will be able to take on this kind of high-impact litigation.

Please join this effort and support NAAFA's challenge grant. Send your tax deductible donations to NAAFA, PO Box 22510, Oakland, CA 94609. Make checks payable to NAAFA FLARE Project.