

Imparting Anti-Diet and Weight Inclusive Approaches in a University Dietetics Curriculum

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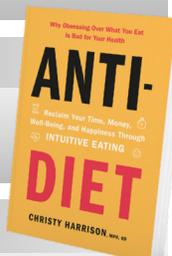
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Project Overview

- Preoccupation with diet culture is an emerging topic in dietetics education that is shifting how students view weight and body image.
- This course introduced Health at Every Size[®], Intuitive Eating, and associated weight-inclusive principles alongside traditional weight-normative approaches typically delivered in dietetics coursework.

Objective

- To evaluate student agreement with weight-inclusive principles in a university Medical Nutrition Therapy course.



Participants and Methods

- **Target Audience:** 100 undergraduate dietetics and pre-health students enrolled in a senior-level Medical Nutrition Therapy course.
- **Course/Curriculum Description:** The 4-credit-hour course includes instruction on the traditional weight-normative approaches to obesity prevention and treatment with an emphasis on body weight in defining health and disease management, including diet, exercise, and behavior change. Weight-inclusive practices, which prioritize well-being rather than weight and having access to non-stigmatizing healthcare, were introduced to this course in the Spring 2020 semester using an innovative approach. Students were instructed to read one chapter per week of the popular press book, "Anti-Diet," and submit their subjective reactions to each of the 11 chapters. Students uploaded written responses to an assignment folder using an online learning management system and were instructed to also include a scaled response demonstrating agreement with weight-inclusive principles. Curriculum was based on Social Cognitive Theory and the Position of the Academy of Nutrition and Dietetics: Interventions for the Treatment of Overweight and Obesity in Adults.
- **Evaluation Methods:** Student agreement with weight-inclusive principles was assessed using a scaled response (1, 2, 3, 4, or 5) ranging from "the appropriateness of dieting for weight loss" (rating 1) to "the use of weight-inclusive approaches" (rating 5) that benefit health. Each student's rating was de-identified prior to statistical analyses, which included multivariate linear regression, paired t-test, and Wilcoxon signed-rank test with continuity correction.

Results

Table 1. Rating of student agreement by chapter (N=100)

Chapter number and title	Raw Statistics		Model Estimates	
	Mean	SD	Mean	95% CI
Chapter 1: The Roots of Diet Culture	3.37	0.88	3.36	(3.20,3.53)
Chapter 2: A Diet by Another Name	3.36	1.01	3.41	(3.25,3.57)
Chapter 3: How Diet Culture Steals Your Time	3.70	0.85	3.74	(3.57,3.92)
Chapter 4: How Diet Culture Steals Your Money	3.42	1.03	3.51	(3.36,3.67)
Chapter 5: How Diet Culture Steals Your Well-Being	3.57	1.10	3.57	(3.41,3.72)
Chapter 6: How Diet Culture Steals Your Happiness	3.84	1.02	3.83	(3.66,4.00)
Chapter 7: Enough Is Enough	3.58	1.13	3.67	(3.50,3.83)
Chapter 8: Reclaim Your Right to Eat Intuitively	3.83	1.03	3.87	(3.69,4.05)
Chapter 9: Stop Labeling Food as Good or Bad	3.68	1.08	3.77	(3.59,3.95)
Chapter 10: Health at Every Size-and Body Liberation	3.82	1.01	3.82	(3.63,4.01)
Chapter 11: The Power of Community	3.95	1.00	3.87	(3.68,4.07)

Student agreement with weight inclusive principles was assessed using a scaled response (1, 2, 3, 4, or 5) ranging from "the appropriateness of dieting for weight loss" (rating 1) to "the use of weight inclusive approaches" (rating 5) that benefit health.

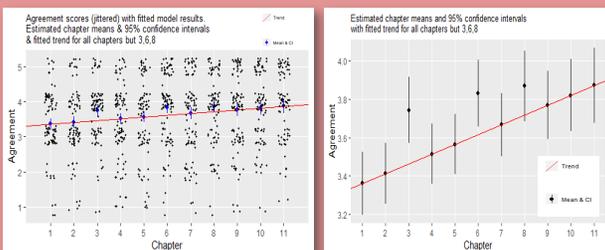


Figure 1. Student agreement scores per chapter. Scatter plot shows individual agreement scores per chapter. Red line depicts the class' overall agreement with weight-inclusive principles increased significantly by 0.051 units/chapter, with statistically significant upward spikes in agreement after Chapters 3, 6, and 8.

Table 2. Categorization of trends in student agreement over Chapters 1-11 (N=100)

Rating	N (%)	Mean (SD)
Low agreement throughout (avg. rating ≤2.5)	3	1.53 (0.80)
Decreased agreement from Chapters 1 to 11	9	2.60 (0.45)
Neutral agreement throughout (avg. rating 2.6-3.5)	21	3.05 (0.27)
High agreement throughout (avg. rating ≥ 3.6)	34	4.30 (0.50)
Increased agreement from Chapters 1 to 11	33	3.88 (0.66)

Categories for change in agreement were determined by calculating the difference in rating from Chapter 1 and 11 and each students' average rating of each chapter. Lower ratings from in Chapter 1-11 were categorized as 'decreased agreement' and higher ratings were categorized as 'increased agreement'. Ratings with no differences were categorized based each students' average rating.

Summary of Results

- A paired t-test showed a mean gain in agreement from the end of Chapter 1 to the end of Chapter 11 of 0.565 points (33%; Table 1) with a 95% confidence interval of (0.369,0.760). The Wilcoxon signed-rank test agreed with the paired t-test (p<.0001) indicating data were suitable to conduct multivariate linear regression modeling.
- Agreement with weight-inclusive principles increased significantly by 0.051 units/chapter (SE of slope=0.0085), with statistically significant upward spikes in agreement after Chapters 3, 6, and 8 (Table 1 and Figure 1).
- A majority (67%) of students reported high and increased agreement, while fewer (33%) indicated neutral, low, or decreased agreement (Table 2).

Conclusions

- Introducing anti-diet principles into a traditional weight-normative curriculum was effective in shifting student agreement with weight-inclusive practices.
- This project also demonstrated feasibility of incorporating a contemporary companion book project within a pre-existing MNT curriculum that is inclusive of the many ways in which nutrition professionals approach health.
- Future examination of the content of the chapters that elicited spikes in agreement and qualitative analyses of student reflections will be able to generate hypotheses about the extent to which students were in agreement with weight-inclusive care.
- These data can ultimately be used to update textbooks, professional white papers, and the credentialing exam for registered dietitians to include research that supports non-stigmatizing, weight-inclusive care in dietetics education.

Key References

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