

The Anti-Obesity Assemblage Artifact Analysis Tool

This worksheet uses the Anti-Obesity Assemblage to assist you in assessing and illustrating how an artifact (e.g. writing, video) related to weight or fatness perpetuates fat oppression. This worksheet will be helpful in determining if a news or media artifact will perpetuate fat oppression if shared or cited, or, more broadly, if a line of inquiry should be pursued. *See the end of this worksheet for copyright and suggested attribution.*

1. Artifact details

- a. Title:
- b. Author/Creator:
- c. Source/Medium:
- d. Date:
- e. Intended Audience (e.g., readers of *Stat News*):

2. What is the main argument of this artifact?

3. Does the artifact enable obesity elimination in any of the following ways?

3a. Creating or upholding the construct of “obesity”:

- Using Body Mass Index
- Categorizing people based on body size to delineate pathology
- Using the terms “obesity,” “people with obesity,” “obese,” to describe fatness and fat people
- Other: _____
- None of the above

Provide examples from the artifact that create or uphold “obesity”:



3b. Portraying fat people as an eliminable threat:

- Using “obesity epidemic” language, including statistics about obesity prevalence
- Has the goal of reducing the number of fat people in the world or eliminating fat people all together (e.g., “obesity prevention,” “reducing obesity rates”)
- Depicting fat people as burdensome or threatening
 - On themselves (e.g., comorbidities, morbidity, mortality)
 - On others interpersonally (e.g., “obesity is transmissible,” other people “worrying for your health,” obesity harms family members, obesity will harm offspring)
 - On the state or other large institutions (e.g., “obesity is a drain on the healthcare system,” obesity costs the economy X amount per year)
- Depicting fat people losing weight
 - Reality TV (e.g., Bigger Loser)
 - Weight loss journeys
- Omitting or excluding happy fat people
- Other: _____
- None of the above

Provide examples from the artifact that portray fat people as an eliminable threat:

3c. Producing and circulating anti-obesity knowledge:

- Discussing new or potential causes of obesity to identify solutions (e.g., food deserts, “neuroscience of obesity”)
- Discussing new or potential harms of obesity to justify interventions (e.g., bullying, cancer)
- Discussing or suggesting new or potential anti-obesity interventions (e.g., a new drug or surgery)
- Linking obesity up with other social problems



- Framing obesity as a contributor to major social issues (e.g., obesity causes climate change)
- Framing obesity as a consequence of major social issues (e.g., US health insurance system preventing access to “obesity care”)
- Other: _____
- None of the above

Provide examples that produce and/or circulate anti-obesity knowledge:

4. According to the artifact, why do fat people tend to have worse health outcomes than thin people?

Does this fit into a:

- Pathologizing frame (e.g., fat people have worse health outcomes because adipose tissue is inherently disease-causing)
- Harm reduction frame (e.g., fat people have worse health outcomes because “health behaviors” are only supported in a weight loss context)
- Fat positive frame (e.g., fat people have worse health outcomes because of oppression)

5. According to your artifact, how can health risks to fat people best be addressed/remediated?

Does this fit into a:

- Pathologizing frame (e.g., by losing weight)
- Harm reduction frame (e.g., by engaging in “health behaviors”)



- Fat positive frame (e.g., by changing the environment to include and support fat people)

6. Finish the following sentence: According to [this artifact], weight stigma is a problem because...

Does this fit into a:

- Pathologizing frame (e.g., weight stigma causes weight gain; weight stigma stops people from engaging in “obesity treatment”)
- Harm reduction frame (e.g., weight stigma promotes blame and responsabilization)
- Fat positive frame (e.g., fat people deserve to be full and equal members of society)

7. How could this artifact influence... (pick one or more)

- a. A workplace?
- b. A classroom?
- c. A clinical encounter?
- d. A public health department?
- e. A family or social experience?
- f. Future culture and media?
- g. Scholarship on “obesity,” “obese people,” or fatness?

8. Finish the following sentence: This artifact contributes to fat oppression by...



Example

1. Article details

- a. **Title:** Recognizing obesity as a disease, not a choice, is a step toward health equity
- b. **Author/Creator:** Fatima Cody Stanford and Kelly Copes-Anderson
- c. **Source/Medium:** STAT News at <https://www.statnews.com/2022/01/06/recognizing-obesity-as-a-disease-is-a-step-toward-health-equity/>
- d. **Date:** January 6, 2022
- e. **Intended Audience:** Readers of STAT News

2. What is the main argument of this artifact? Congress should pass the Treat and Reduce Obesity Act because it will make obesity treatment more equitable.

3. Does the artifact enable obesity elimination in any of the following ways?

3a. Creating or upholding the construct of “obesity”:

- Using Body Mass Index
- Categorizing people based on body size to delineate pathology
- Using the terms “obesity,” “people with obesity,” “obese,” to describe fatness and fat people
- Other: _____
- None of the above

Provide examples from the artifact that create or uphold “obesity”:

“Already, nearly 50% of Black adults and 45% of Hispanic adults have obesity — a body-mass index (BMI) of 30 or higher.”

3b. Portraying fat people as an eliminable threat:

- Using “obesity epidemic” language, including statistics about obesity prevalence



- Has the goal of reducing the number of fat people in the world or eliminating fat people all together (e.g., “obesity prevention,” “reducing obesity rates”)
- Depicting fat people as burdensome or threatening
 - On themselves (e.g., comorbidities, morbidity, mortality)
 - On others interpersonally (e.g., “obesity is transmissible,” other people “worrying for your health,” obesity harms family members, obesity will harm offspring)
 - On the state or other large institutions (e.g., “obesity is a drain on the healthcare system,” obesity costs the economy X amount per year)
- Depicting fat people losing weight
 - Reality TV (e.g., Bigger Loser)
 - Weight loss journeys
- Omitting or excluding happy fat people
- Other: _____
- None of the above

Provide examples from the artifact that portray fat people as an eliminable threat:

“But this condition is not just a matter of carrying extra pounds. It puts individuals at greater risk for many other chronic diseases, including cardiovascular diseases, metabolic diseases like diabetes, and many cancers”

“Treating obesity and related conditions costs the U.S. \$1.4 trillion every year.”

“The obesity epidemic has reached a critical level, with Black and Hispanic Americans disproportionately bearing its impact.”

3c. Producing and circulating anti-obesity knowledge:

- Discussing new or potential causes of obesity to identify solutions (e.g., food deserts, “neuroscience of obesity”)
- Discussing new or potential harms of obesity to justify interventions (e.g., bullying, cancer)
- Discussing or suggesting new or potential anti-obesity interventions (e.g., a new drug or surgery)
- Linking obesity up with other social problems (e.g., US health insurance system preventing access to “obesity care”)



- Framing obesity as a contributor to major social issues (e.g., obesity causes climate change)
- Framing obesity as a consequence of major social issues (e.g., higher rates of obesity among Black people)
- Other: _____
- None of the above

Provide examples from the text that produce and/or circulate anti-obesity knowledge:

“First, the act would ensure broader coverage for intensive behavioral therapy.”

“Second, the Treat and Reduce Obesity Act would modernize Medicare Part D by allowing it to cover FDA-approved weight loss medications.”

“A growing chorus of patient advocates back the bill, with more than 100 obesity and health advocacy organizations recently urging Congress to pass the act. This includes the National Urban League, National Black Nurses Association, League of Latin American Citizens, Black Women’s Health Imperative, National Hispanic Medical Association, and others, all of which see this legislation as the best opportunity for Congress to have an immediate impact on communities of color that are most affected by obesity.”

4. According to the artifact, why do fat people tend to have worse health outcomes than thin people?

Obesity puts people at greater risk for many other chronic diseases, including cardiovascular diseases, metabolic diseases like diabetes, and many cancers with disproportionate impacts on communities of color.

Does this fit into a:

- Pathologizing frame (e.g. fat people have worse health outcomes because adipose tissue is inherently disease-causing)
- Harm reduction frame (e.g. fat people have worse health outcomes because “health behaviors” are only supported in a weight loss context)
- Fat positive frame (e.g. fat people have worse health outcomes because of oppression)



5. According to your artifact, how can health risks to fat people best be addressed/remediated?

Obesity interventions, such as intensive behavioral therapies, medications, and uptake of services with a broad range of weight-control professionals, supported by increased insurance coverage mandated by federal law.

Does this fit into a:

- Pathologizing frame (e.g. by losing weight)
- Harm reduction frame (e.g. by engaging in "health behaviors")
- Fat positive frame (e.g. by changing the environment to include and support fat people)

6. Finish the following sentence: According to [this artifact], weight stigma is a problem because...

"They represent a decisive moment in shifting society away from viewing obesity as caused by individuals making poor choices and toward treating obesity as a manageable chronic disease like asthma or high blood pressure. This is a crucial step in eliminating bias against people with obesity, which has hobbled efforts to address this epidemic even as it fuels health inequity."

Does this fit into a:

- Pathologizing frame (e.g. weight stigma causes weight gain; weight stigma stops people from engaging in "obesity treatment")
- Harm reduction frame (e.g. weight stigma promotes blame and responsabilization)
- Fat positive frame (e.g. fat people deserve to be full and equal members of society)

7. How could this artifact influence... (pick one or more)

a. A workplace?	
b. A classroom?	
c. A clinical encounter?	HCP could counsel on "disease of obesity" and recommend intensive



	behavioral therapy or prescribe weight loss drugs under the guise of “equitable healthcare”
d. A public health department?	Increased “obesity awareness and education” messaging
e. A family or social experience?	
f. Future culture and media?	Increase lobbying for TROA
g. Scholarship on “obesity”, “obese people”, or fatness?	Increased research interest in anti-fat lines of inquiry
<p>8. Finish the following sentence: <i>This artifact contributes to fat oppression by...</i></p> <ul style="list-style-type: none"> • Co-opting the language of equity to justify expanding anti-obesity efforts • Portraying obesity elimination as the solution to fat oppression • Portraying obesity elimination as an absolute good • Portraying fat people as a population-level threat, injustice, economic burden, pathological 	

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Suggested Attribution: The Anti-Obesity Assemblage Analysis Worksheet was created by Rachel Fox, Monica Kriete, Marquisele Mercedes, and Blakeley H. Payne for the *Critiquing Fat Oppression in the Age of Wegovy* workshop at the 2023 International Weight Stigma Conference.

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